

Council Meeting Agenda

Friday, February 25, 2022
180 Dundas Street W., Toronto
Suite 1901
9:00 am – 5:00 pm

<https://us06web.zoom.us/j/81313478757?pwd=b25nY3FuMDdDV244MFkwUzdxZGJWdz09>

Meeting ID: 813 1347 8757

Passcode: 429397

if the link does not work, copy, and paste:

*For those attending virtually - you will be placed into the waiting room upon arrival

9:00 a.m.	1.0	Call to Order – Peter Stavropoulos, President
	1.1	Call to Order, Appointment of Secretary Welcome Acknowledgement of Guests in Attendance
	1.2	Approval of Agenda
	1.3	Declaration of Conflict of Interest
	1.4	Approval of Minutes of October 29, 2021 Council Meeting**

9:20 a.m.	2.0	Consent Agenda Items
		Consent Agenda Items A consent agenda is a bundle of items that is voted on, without discussion, as a package. It differentiates between routine matters not needing explanation and more complex issues needing examination. The Chair will ask if any one wishes to remove an item from the consent agenda. Any Council member may request an item be removed so it can be discussed. To test whether an item should be included in the consent agenda, ask: 1. Is this item self-explanatory and uncontroversial? Or does it contain an issue that warrants board discussion? 2. Is this item for information only? Or is it needed for another meeting agenda issue?
	2.1	Council Meeting Survey Results from October 29, 2021 Council Meeting**

	2.2	Committee Reports
	2.2.1	Discipline Committee Report**
	2.2.2	ICRC Report**
	2.2.3	QAC Report**
	2.2.4	Exam Committee Report**
	2.2.5	Standards and Guidelines Committee Report**
	2.2.6	Registration Committee Report**
	2.2.7	Patient Relations Committee Report**
	2.2.8	Registrar's Report**
	2.2.9	Audit Committee Report**
	2.2.10	Fitness to Practise Committee Report**
	2.2.11	Technical Committee Report**
	2.2.12	Standing Drug Committee Report**
	2.2.13	Sedation Committee Report**
	2.2.14	Practice Advisor Report**

9:30 am – 10:30 am	3.0	Council Educational - Part One
	3.1	Julie Maciura – Presentation on Principles of Good Governance - Q&A to follow presentation
10:30-10:45 am		Break

10:45- Noon	4.0	Decision Items (with briefing notes)
	4.1	Cooling off period bylaw amendment**
	4.2	Registrar Title bylaw amendment**
	4.3	Deputy Registrar bylaw amendment**
	4.4	Exam Fees Increase bylaw amendment**
	4.5	Suspension Guideline**
	4.6	Elections Committee Report and Council Competencies**

Noon-1:00 pm	Lunch Break
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1:00 – 2:00 pm	5.0	Educational - Part Two
	5.1	Darrel Pink – Presentation on Right Touch Regulation - Q&A to follow presentation

2:00 pm - 3:30 pm	4.0	Decision Items Continued
	4.7	Strategic Plan 2022-2027 Presentation** – Peter Ferguson and Patrick Rainville
	4.8	2022 Budget** – Nicole Zwiers
	4.9	Draft CPMF 2021 Overview – Nicole Zwiers (to be presented at Council Meeting)

3:30 pm – 3:45 pm	Break	
3:45 pm – 4:45 pm	5.0	In-Camera
	5.1	Approval of In-Camera Minutes of October 29, 2021 Council Meeting
	5.2	Updates re: MOH
	5.3	Registrar’s Performance Review

4:45 – 5:00 p.m.	6.0	Next Meeting
	6.1	Council Meeting Dates for 2022 and 2023: <ul style="list-style-type: none"> • February 25, 2022 • June 24, 2022 • October 28, 2022 • February 24, 2023 • June 23, 2023 • October 27, 2023
	6.2	Council Survey Reminder
	6.3	Proposed Agenda Items for Next Council Meeting

5:00 p.m.	7.0	Adjournment
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*The agenda items may not necessarily be dealt with in the order in which they appear.

** Denotes an agenda item with supporting document



College of Chiropodists of Ontario

**Minutes of the Council Meeting
Friday, October 29, 2021, 9:00 a.m.
Online via Zoom**

Council Members in Attendance:

1. Matthew Doyle
2. Peter Ferguson
3. Melanie Atkinson
4. Ed Chung
5. Sasha Kozera
6. Winnie Linker
7. Irv Luftig
8. Jim Daley
9. Allan Katz
10. Ramesh Bhandari
11. Patrick Rainville
12. Donna Shewfelt
13. Andrew Simmons
14. Peter Stavropoulos

Regrets:

1. Eliot To

Staff in Attendance:

1. Nicole Zwiers, Registrar
2. Meghan Clarke, Manager, Professional Conduct and Hearings

General Legal Counsel:

1. Alan Bromstein

Guests:

1. Bruce Ramsden, President, OPMA
2. Jana Charyk, OSC
3. Geoffrey Alchin, Ministry of Health

1. Call to Order

1.1 Call to Order, Appointment of Secretary

N. Zwiers called the meeting to order at 9:16 a.m., noting that notice of the meeting was given, and the meeting was properly constituted with a quorum present. Meghan Clarke was appointed as Secretary.

N. Zwiers welcomed Council members, staff and guests. N. Zwiers acknowledged the new Council members – Patrick Rainville, Donna Shewfelt and Andrew Simmons.

1.2 Approval of Agenda

N. Zwiers asked that a motion be added to the agenda for Council to approve the re-appointment of Ed Chung to Council. The motion was added as item 3.0.1.

It was moved by W. Linker and seconded by M. Doyle to approve the agenda with the addition of item 3.0.1. Motion CARRIED.

N. Zwiers asked that a motion be added to the agenda as item 3.1.1. for Council to approve the year-end audited financial statements.

It was moved by P. Stavropoulos and seconded by J. Daley to approve the agenda with the addition of item 3.1.1. Motion CARRIED.

1.3 Declaration of Conflict of Interest

No conflict of interest was declared.

1.4 Approval of Minutes of June 25, 2021 Council Meeting

It was moved by P. Ferguson and seconded by M. Doyle to approve the minutes of the June 25, 2021 Council meeting. Motion CARRIED.

2. Consent Agenda Items

It was moved by P. Ferguson and seconded by A. Katz to approve consent agenda items 2.1 and 2.2. Motion CARRIED

3. Decision Items

3.0.1 Re-Appointment of Ed Chung to Council

N. Zwiers advised that a call was put out to all podiatrist members for the podiatry position on Council. No members put their names forward. E. Chung was eligible and agreed to serve another term.

It was moved by M. Doyle and seconded by W. Linker to approve Ed Chung as the podiatrist member on Council. Motion CARRIED.

3.1 Auditor's Report

It was moved by P. Ferguson and seconded by R. Bhandari to approve the Auditor's Report. Motion CARRIED.

3.1.1. Audited Financial Statements

It was moved by J. Daley and seconded by W. Linker to approve the audited year-end financial statements. Motion CARRIED.

3.2 Appointment of Auditor for 2021 Financials

It was moved by W. Linker and seconded by J. Daley to approve Hilborn LLP as the auditor for the 2021 financial statements. Motion CARRIED.

A. Katz asked when the College last solicited bids for an auditor, and J. Daley noted that it has been several years. J. Daley explained that the challenge is whether the College will get any added value from doing an RFP. J. Daley noted that there is good service from Hilborn and he does not feel there is value in going through the RFP process given that the cost charged by Hilborn is typically \$5000.

3.3 Proposed Orthopaedic Footwear Standard

It was moved by J. Daley and seconded by P. Rainville to approve the revised Orthopaedic Footwear Standard to replace the draft previously in effect. Motion CARRIED

J. Daley noted the impressive efforts of the professional members involved in updated the Orthopaedic Footwear Standard. E. Chung added that the updated standard was reviewed by legal counsel, Debra McKenna, and he thanked her for her efforts as well.

3.4 Proposed Bylaw Amendment to Bylaw 2 – Annual Fee Increase

That By-law No. 2: Fees be amended, as follows:

1. Revoke Articles 3.03 and 4.03 and substitute that shown in Appendix 2 (the changes to the existing Articles are shown by redline); and

It was moved by P. Ferguson and seconded by P. Rainville that Council approve the amendments to Bylaw 2, as noted, to increase the annual fees by \$100 to \$1800 for 2022. The Registrar made a roll call of all council members asking for each member to verbally indicate whether they voted in favour or against. Motion CARRIED.

In favour: P. Stavropoulos, D. Shewfelt, W. Linker, M. Doyle, M. Atkinson, P. Rainville, P. Ferguson, A. Katz, J. Daley, R. Bhandari, I. Luftig, E. Chung, A. Simmons

Against: S. Kozera

S. Kozera noted that she previously voiced her opposition to the bylaw amendment, and at the time, she suggested that it be put off for a year. She reiterated that that the optics do not look good for the College to increase fees and, at the same time, increase the honorarium for Council members.

W. Linker noted that bringing forward small increases for the cost of living over time is not best practice. Putting it forward in the way it has been done as an automatic cost of living increase is more efficient.

P. Stavropoulos said there are a number of undertakings the College has in store, including the CPMF, that require additional funding. The College is small, but it must still meet the same requirements as larger colleges. It has been seven years since there was a fee increase. The cost of living has gone up, and the College is not immune from that. It is more of a catch up, and the COLA will alleviate the need to go back to the membership regularly to request an update.

P. Ferguson said, one of the reasons the honorarium is on the table, is because being on ICRC and Discipline takes a lot of time out of practice. The current honorarium is quite low, and to recruit high-quality and engaged members, we need to compensate them accordingly.

M. Doyle noted that the honorarium was last updated in 2002 and the cost of living has gone up since then. The College honoraria is substantially lower than the current rates paid by other colleges. Although it is coming at the same time as the fee increase, it is needed to get us on par.

S. Kozera said she appreciates the feedback from other Council members, but she reiterated that the perception from the membership will not be good. The College is making a fee increase during a pandemic and the feedback from the membership was that they were hit quite hard. In terms of the honorarium, S. Kozera noted that the College is behind in compensating Council members, but the perception from the membership will be that Council is looking for more money to pay itself. S. Kozera recommended postponing the fee increase by one year and then applying the COLA increase the year after that. She questioned whether the new honorarium policy could be applied without the fee increase.

N. Zwiers clarified that the motion on the table is an increase in 2022 and no other motion regarding fees will be tabled until a vote on the current motion is complete. If the current motion were to fail, an amended or different motion could be tabled. In respect of the June 25, 2021 meeting, the issue was reviewed and then sent out to the membership, as per the bylaws. Council is being asked to approve the motion on the table.

J. Daley said the OSC asked for a deferral of implementing this increase by a year, which he said is possible financially. He said Council could consider a delay in implementing the increase, though he noted that he continues to support the motion as proposed. The OPMA asked how the College will determine the cost of living and J. Daley suggested Council clearly define the cost of living.

M. Atkinson said the increase is a modest increase.

M. Doyle emphasized that the College's mandate is to protect the public and a lot of the opposition to the fee increase was membership driven.

N. Zwiers said some members, in their comments, noted that the 2015 increase was intended to be temporary. She revisited the minutes from the October 2014 Council meeting when the 2015 increase was approved, and there is no reference to the increase being temporary as a result of HPRAC. The minutes indicate that the fee increase was driven by the financial needs of the College to protect the public.

3.5 Proposed Bylaw Amendment to Bylaw 2 – COLA

That By-law No. 2: Fees be amended, as follows:

1. Revoke the existing Article 4.03.1 and substitute a new Article 4.03.1, as shown in Appendix 2;

It was moved by D. Shewfelt and seconded by I. Luftig that Council approve the amendments to Bylaw 2, as noted, to add an automatic adjustment to the annual fee by the increase in the Consumer Price Index starting with the annual fee for 2023. The Registrar conducted a tally of the votes by roll call to determine the vote of each council member. Motion CARRIED.

In favour: P. Stavropoulos, D. Shewfelt, W. Linker, M. Doyle, M. Atkinson, P. Rainville, P. Ferguson, A. Katz, J. Daley, R. Bhandari, I. Luftig, E. Chung, A. Simmons

Against: S. Kozera

J. Daley reiterated that Council should define COLA. N. Zwiers noted that it is defined as being in line with what Statistics Canada deems the cost-of-living increase to be annually. J. Daley was content with that explanation and said that definition was workable.

S. Kozera reiterated that she does not believe the timing of the increase is ideal and she requested that it be deferred to 2024. N. Zwiers noted that Council will vote on the increase, as moved, and if it is denied, S. Kozera can put forward a new motion.

W. Linker noted that the COLA increase will be very nominal, and she asked S. Kozera to expand on her opposition. S. Kozera reiterated that the fee increase does not look good optically when Council is also asking for an increased honorarium. And, based on J. Daley's comments, there is no financial need to approve an increase at this time.

P. Stavropoulos said the cost of living increase is an attempt to avoid the need for future increases. It acknowledges the College's increasing costs, and it will hopefully avoid the need to come back to Council with increases in the near future. In terms of the honorarium, it will be voted on by public members of Council only, not professional members.

N. Zwiers said the idea behind the COLA is to protect against large increases in the future but, at the same time, to ensure that the College's financial position keeps pace with inflation.

3.6 Honoraria Policy

It was moved by J. Daley and seconded by A. Katz that Council adopt the Per Diems and Council and Committee Compensation & Expense Policy to replace the College's existing policy, and that Council commit to reviewing the policy annually. Motion CARRIED.

N. Zwiers noted that this policy stands to benefit the professional members on Council, and although professional members cannot be prevented from voting, it would be best for professional members to abstain. N. Zwiers also noted that Meghan Clarke conducted research of other health regulators to determine what range of honoraria exist. The amounts proposed in the Honoraria policy are at the low end of this range as many health regulators pay professional members significantly more to engage in College business.

J. Daley noted that the proposed honorariums are reasonable and warranted, and there has been no change to this policy in almost 20 years. The previous compensation is inadequate, and the change recognizes this is more than just volunteering and giving up professional time.

W. Linker said the increase being requested is modest and an increase is needed after 20 years.

In favour: J. Daley, W. Linker, R. Bhandari, A. Simmons, A. Katz

Abstention: P. Ferguson, P. Stavropoulos, I. Luftig, S. Kozera, E. Chung, M. Doyle, P. Rainville, D. Shewfelt, M. Atkinson

3.7 Reserve Fund Policy

It was moved by P. Stavropoulos and seconded by P. Rainville that Council adopt a Reserve Fund policy, as drafted, that contemplates a reserve fund of \$700,000. Motion CARRIED.

N. Zwiers explained that the CPMF contemplates that Colleges have a reserve fund. It does not outline the amount. The reserve fund is to cover unforeseen expenses, like legal fees, in the event of an appeal to Divisional Court or a judicial review. The College would not want to be caught financially unprepared in the event of something unforeseen and it's prudent to have a healthy reserve fund available in addition to it being a requirement of the CPMF. N. Zwiers and J. Daley discussed the amount, and they agreed on \$700,000.

3.8 Proposed Bylaw Amendment for Cooling Off Period

It was moved by D. Shewfelt and seconded by A. Katz that Council decide the appropriate length of time for a cooling off period and recommend a bylaw amendment to reflect the cooling off period. Motion CARRIED.

N. Zwiers said the idea is that there should be a cooling off period between a member serving on a professional association and then on Council. Council is being asked to decide on the appropriate cooling off period – two years has been proposed, but because the College is smaller, it may need to consider a shorter period.

S. Kozera noted that the professional is very small, and the pool of members who are interested in being involved in associations and Council, so there is a challenge getting members involved with the College. In her view, the two-year period is quite long. She noted that six months to a year would be reasonable.

P. Stavropoulos said he supports the cooling off period. He agrees with S. Kozera that, given the size of the College, two years is a long time. He said he would support a one year cooling off period.

P. Ferguson clarified that the policy only applies to involvement on associations at the board level.

J. Daley said, in his time on Council (7 years), there has only been one instance of a Council member coming on Council right after serving on an association. He said he would support a one year cooling off period, but he thinks two years is more appropriate. The College needs to make sure Council members do not come on with an association mindset.

M. Doyle agrees that six months is too short. He would support a one year cooling off period.

P. Ferguson said two years is standard for colleges. We should not ask for a shorter period, just because we're a smaller College. He supports the two-year period.

D. Shewfelt supported a two-year cooling off period.

A. Katz said he would support one year as a bare minimum, but six months is too short.

E. Chung said he thinks two years is too long and he would support one year.

6 – 12 months – S. Kozera

12 months – E. Chung, P. Ferguson, W. Linker, M. Atkinson, I. Luftig, A. Simmons, R. Bhandari

Two years – P. Stavropoulos, D. Shewfelt, M. Doyle, P. Rainville, J. Daley, A. Katz

BREAK – 10:35 a.m. to 10:50 a.m.

3.9 Elections of Executive Committee Members

It was moved by D. Shewfelt and seconded by P. Ferguson to approve M. Clarke as scrutineer, in the event an election is required, and to conduct the secret ballot by having votes emailed to M. Clarke. Motion CARRIED.

N. Zwiers reported that there were five positions for election to the Executive Committee that would be cast by secret ballot, if necessary. The five positions were President, Vice-President, professional member, first public member and second public member. She added that there would be five separate elections, one for each position.

(a) Election of President

N. Zwiers requested nominations for President. P. Ferguson nominated P. Stavropoulos and P. Stavropoulos accepted the nomination. There were no further nominations. P. Stavropoulos was acclaimed as President.

(b) Election of Vice-President

N. Zwiers requested nominations for Vice-President. P. Stavropoulos nominated P. Ferguson as Vice-President, and he accepted. There were no further nominations. P. Ferguson was acclaimed as Vice-President.

(c) Election of Professional Member

N. Zwiers requested nominations for the professional member. J. Daley nominated M. Doyle as the professional member on the Executive Committee and he accepted. There were no further nominations. M. Doyle was acclaimed.

(d) Election of Public Member – First Position

N. Zwiers requested nominations for the first public member on the Executive Committee. P. Ferguson nominated W. Linker and she accepted. There were no further nominations. W. Linker was acclaimed.

(e) Election of Public Member – Second Position

N. Zwiers requested nominations for the second public member on the Executive Committee. P. Stavropoulos nominated J. Daley and he accepted. There were no further nominations. J. Daley was acclaimed.

3.9.1 Executive Committee's Recommendations of Committee Composition and Committee Chairs

It was moved by D. Shewfelt and seconded by W. Linker to consider and approve the committee composition recommended by the Executive Committee. Motion CARRIED.

(a) Inquiries Complaints and Reports Committee

Peter Stavropoulos, Chair
Melanie Atkinson
Ed Chung
Matt Doyle
Peter Ferguson
Sasha Kozera
Irv Luftig
Donna Shewfelt
Patrick Rainville
Ramesh Bhandari
Jim Daley
Allan Katz
Winnie Linker
Andrew Simmons
Eliot To
Riaz Bagha
Peter Guy
Allan Frankel
Stephen Haber
Martin Hayles
Sylvia Kovari
Neil Naftolin
Nat Rave
Stephanie Shlemkevich
Ruth Thompson
Millicent Vorkapich-Hill
Brooke Mitchell
Adrian Dobrowsky
Nosheen Chaudhry

(b) Discipline Committee

Cesar Mendez, Chair
Melanie Atkinson

Ed Chung
Matt Doyle
Peter Ferguson
Sasha Kozera
Irv Luftig
Donna Shewfelt
Patrick Rainville
Ramesh Bhandari
Jim Daley
Allan Katz
Winnie Linker
Andrew Simmons
Eliot To
Riaz Bagha
Peter Guy
Stephen Haber
Martin Hayles
Sylvia Kovari
Jamie Maczko
Anne-Marie McLaren
Millicent Vorkapich-Hill
Brooke Mitchell
Adrian Dobrowski
Nosheen Chaudhry

(c) Fitness to Practise Committee

Peter Guy, Chair
Matt Doyle
Winnie Linker
Pauline Looi
Kim Resmer
Cesar Mendez

(d) Patient Relations Committee

Peter Stavropoulos, Chair
Matt Doyle
Allan Katz
Jim Daley
Pauline Looi
Brooke Mitchell

(e) Quality Assurance Committee

Anna Georgiou, Chair
Melanie Atkinson
Matt Doyle
Irv Luftig
Patrick Rainville
Ramesh Bhandari
Cindy Lewis
Brooke Mitchell
Millicent Vorkapich-Hill

Tina Rainville
Jaffer Shaikh
Cesar Mendez

(f) Sedation Committee

Anna Georgiou, Chair
Matt Doyle
Peter Ferguson
Irv Luftig
Melanie Atkinson
Patrick Rainville
Ramesh Bhandari
Anna Georgiou
Cindy Lewis
Ann-Marie McLaren
Brooke Mitchell
Millicent Vorkapich-Hill
Cesar Mendez

(g) Registration Committee

Matt Doyle, Chair
Sasha Kozera
Peter Stavropoulos
Melanie Atkinson
Ramesh Bhandari
Winnie Linker
Deepka Duggal

(h) Audit Committee

Jim Daley, Chair
Ed Chung
Melanie Atkinson

(i) Standards and Guidelines Committee

Nosheen Chaudry, Chair
Ed Chung
Peter Ferguson
Sasha Kozera
Irv Luftig
Eliot To
Peter Guy
Cindy Lewis
Brooke Mitchell

(j) Registration Examination

Stephanie Shlemkevich, Chair
Matt Doyle
Peter Ferguson
Marcella Cowan

Kathryn Ferguson
Jacky Fu
Megan Grantham
Kay Hayles
Martin Hayles
Andrew Klayman
Brooke Mitchell
Sonia Robello
Nosheen Chaudry
Mary Ann Mitchell
Riaz Bagha
Lisa Balkarran
Jaffer Shaikh
Olgar Mauch

(k) Ad-Hoc Drug Committee

Peter Stavropoulos, Chair
Jim Daley
Jennel Somerville
Martin Hayles
Cesar Mendez

(l) Technical Committee

Peter Ferguson, Chair
Ed Chung
Matt Doyle
Peter Ferguson
Sasha Kozera
John Lanthier
Tracy Oliver

(m) Elections Committee

Peter Ferguson, Chair
Matt Doyle
Peter Ferguson
Peter Stavropoulos
Ramesh Bhandari
Jim Daley
Allan Katz

(n) Strategic Planning Committee

Peter Ferguson, Chair
Sasha Kozera
Peter Stavropoulos
Jim Daley
Allan Katz
Nosheen Chaudhry

(o) Registrar's Performance and Compensation Committee

Winnie Linker, Chair
Peter Ferguson
Peter Stavropoulos
Allan Katz

4. Discussion Items

4.1 Elections Update – New Council Members

N. Zwiers welcomed P. Rainville and D. Shewfelt, the new professional members on Council, and A. Simmons, the new public member.

4.2 Strategic Planning Committee

P. Ferguson explained that the College is required to complete the Ministry's CPMF, part of which is to have a strategic plan. The goal is to have a strategic plan in place before the 2021 CPMF submission is made in March 2022. The SP Committee met yesterday with Deanna Williams, the consultant who has been retained to guide the process. She has a long history in healthcare regulation. Yesterday, the Committee discussed why a strategic plan is important and how it will be developed. P. Ferguson circulated the Committee's report to Council, and he reviewed the report. He noted that the College's two main priorities in the strategic plan are sustainability and moving towards the podiatry model.

P. Ferguson noted that the Committee's goal is to bring the plan to Council in February 2022.

4.3 Registrar's Report

N. Zwiers noted that the 2021 CPMF is upon us. The Ministry has done a soft launch of the report, which contains tweaks to the 2020 report. N. Zwiers is on the working group at HPRO to identify any issues or concerns with the soft launch. On November 4, 2021, the College is meeting with the Ministry. In the soft launch, the MOH is focusing on strategic partnerships among other regulators and stakeholders. Another theme in the CPMF is continuous improvement, with a recognition that colleges are making changes. N. Zwiers pointed out that Council voted on a few issues directly related to the CPMF today, like the reserve fund.

N. Zwiers also met with the Michener about surgical competency, to make sure graduates are best suited to enter practice.

The College has also spoken to the Ministry about the drug regulation. There is an hoc committee that will meet with the Ministry about the proposed changes.

N. Zwiers said she is hopeful Council will receive a draft strategic plan in February 2022.

She also stated there is a need for IT modernization, which the 2022 budget will have to address.

There is an opportunity for shared resources among other regulators. N. Zwiers has met with a number of regulators about sharing space. The College has a lease until February 2024, but it could offer another regulator the use of its space. Most regulators are adopted a hybrid model going forward. N. Zwiers said the plan will be to move towards a hybrid model in January 2022, with one day a week where all staff is in the office.

N. Zwiers reported that she has regular meetings scheduled with Catherine Gray at the Michener.

The College will be looking at the exam costs for 2021, and based on that review, there will be a proposed bylaw amendment to get to a neutral position in the exam.

Staff is continuing to look for ways to improve Council materials. We are implementing a survey that we ask you to complete to help us make effective improvements. It will be circulated at the end of the meeting.

5. In Camera

It was moved by P. Stavropoulos and seconded by W. Linker to move in camera pursuant to section 7(2) of the Health Professions Procedural Code. Motion CARRIED.

Council moved in camera at 1:35 p.m.

P. Ferguson left the meeting 1:35 p.m.

6. Next Meeting

6.1 Council Meeting Dates for 2021, 2022 and 2023

- February 25, 2022
- June 24, 2022
- October 28, 2022
- 2023 dates to be provided

6.2 Proposed Agenda Items for Next Meeting

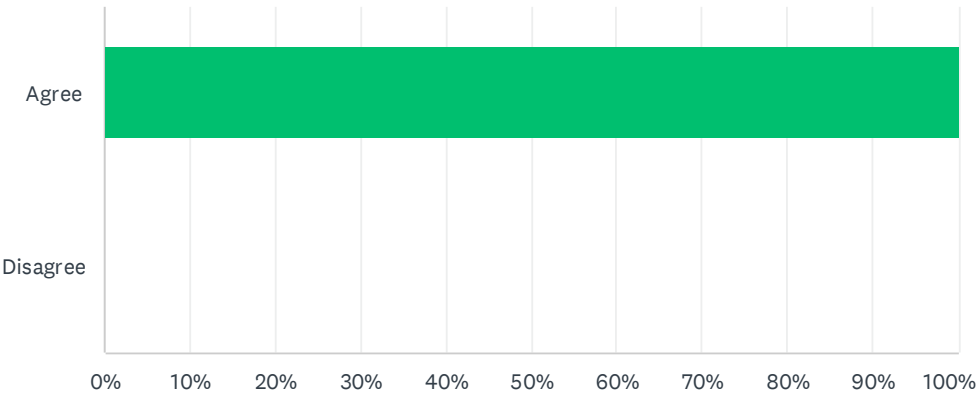
7. Adjournment

It was moved by P. Ferguson and seconded by M. Doyle that the meeting be adjourned. Motion CARRIED.

The meeting was adjourned at 12:00 p.m.

Q1 I received appropriate, supportive information for this Council meeting.

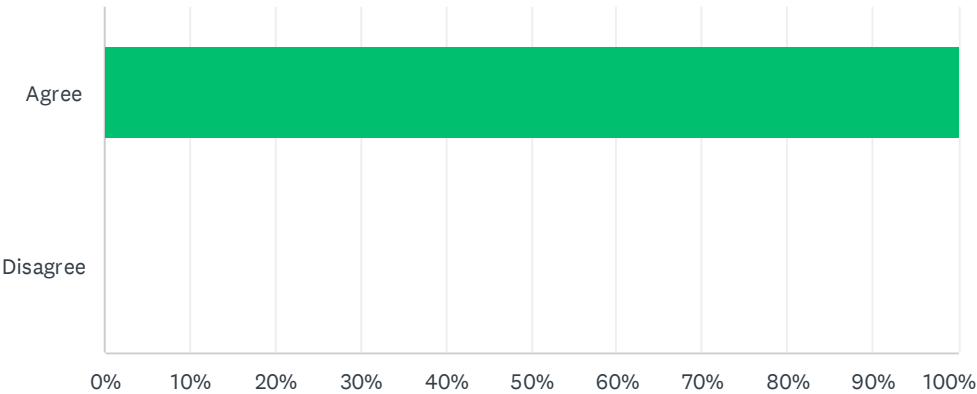
Answered: 13 Skipped: 0



ANSWER CHOICES	RESPONSES	
Agree	100.00%	13
Disagree	0.00%	0
Total Respondents: 13		

Q2 I received this supportive information in a timely manner.

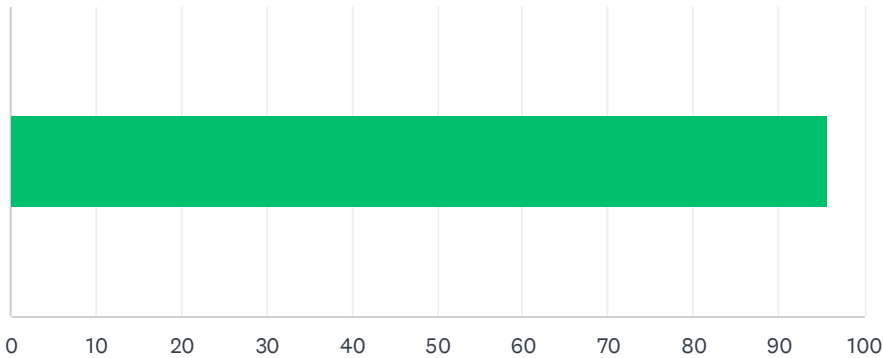
Answered: 13 Skipped: 0



ANSWER CHOICES	RESPONSES	
Agree	100.00%	13
Disagree	0.00%	0
Total Respondents: 13		

Q3 I was prepared for this meeting.

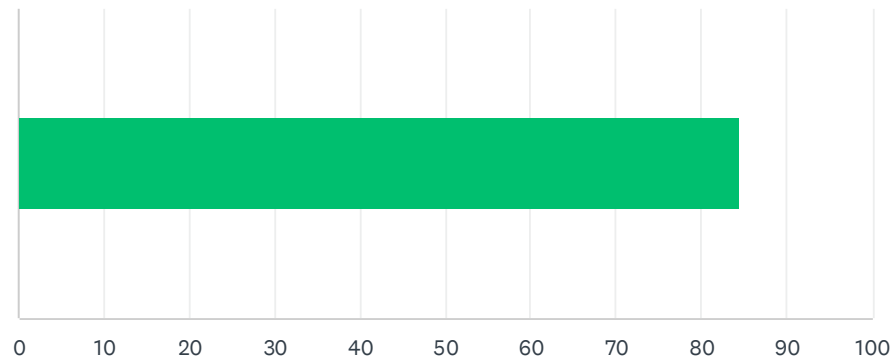
Answered: 13 Skipped: 0



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
	96	1,245	13
Total Respondents: 13			

Q4 All Council members appeared prepared for this meeting.

Answered: 13 Skipped: 0



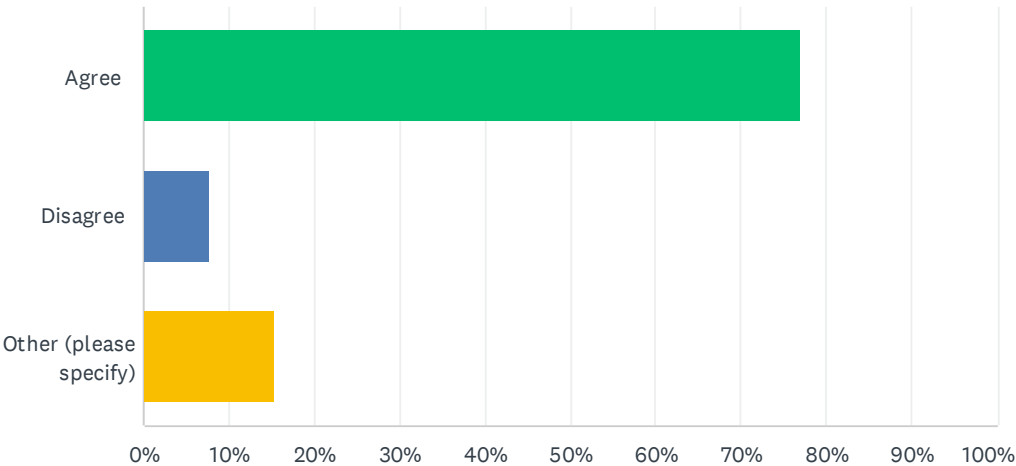
ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
	84	1,097	13
Total Respondents: 13			

Q5 List any additional supports or resources that would have helped you better prepare for this meeting.

Answered: 10 Skipped: 3

Q6 This meeting was effective and efficient.

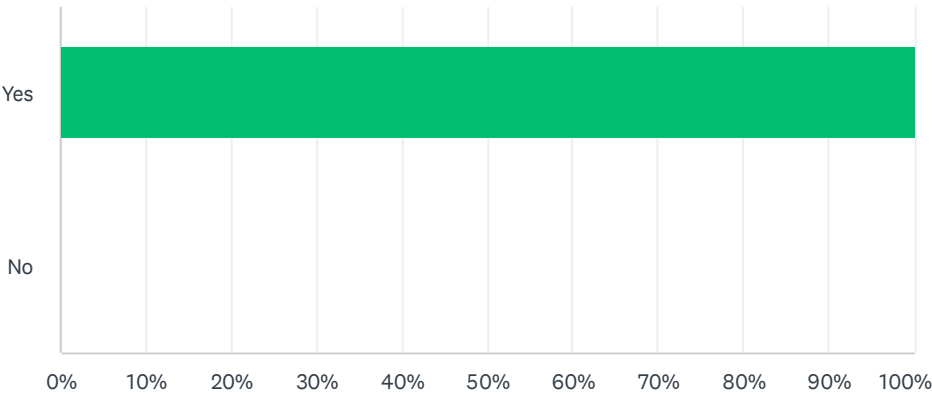
Answered: 13 Skipped: 0



ANSWER CHOICES	RESPONSES	
Agree	76.92%	10
Disagree	7.69%	1
Other (please specify)	15.38%	2
Total Respondents: 13		

Q7 The objectives of this meeting were achieved.

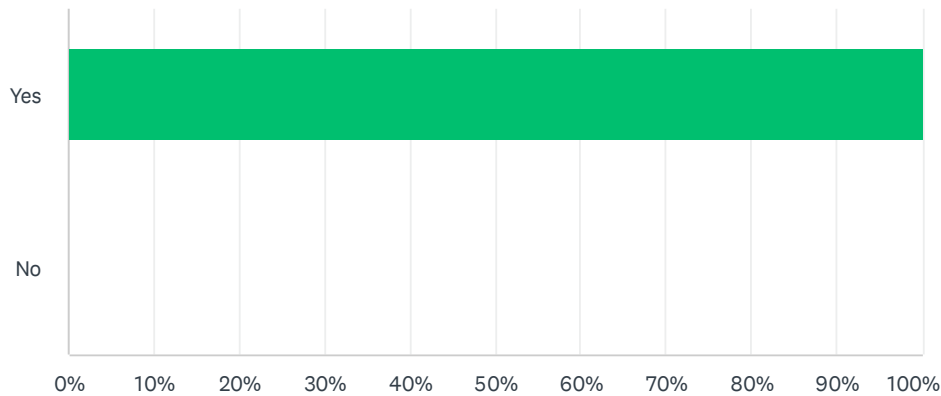
Answered: 13 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	13
No	0.00%	0
Total Respondents: 13		

Q8 The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

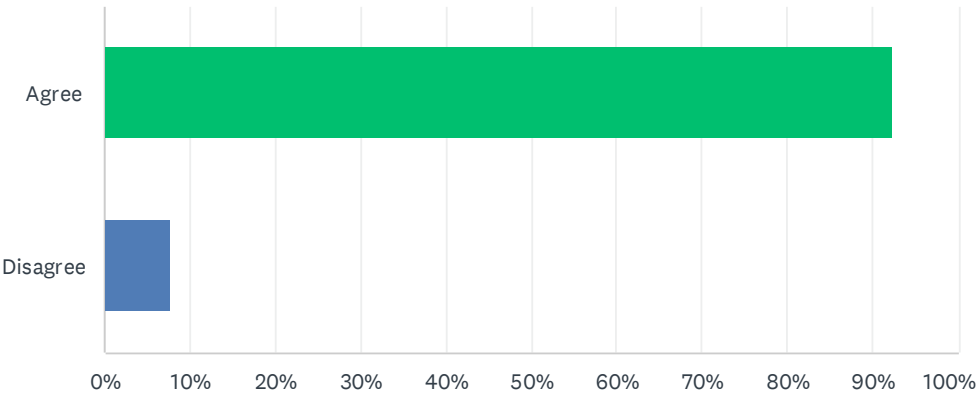
Answered: 12 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	100.00%	12
No	0.00%	0
Total Respondents: 12		

Q9 I felt comfortable participating in the Council discussions.

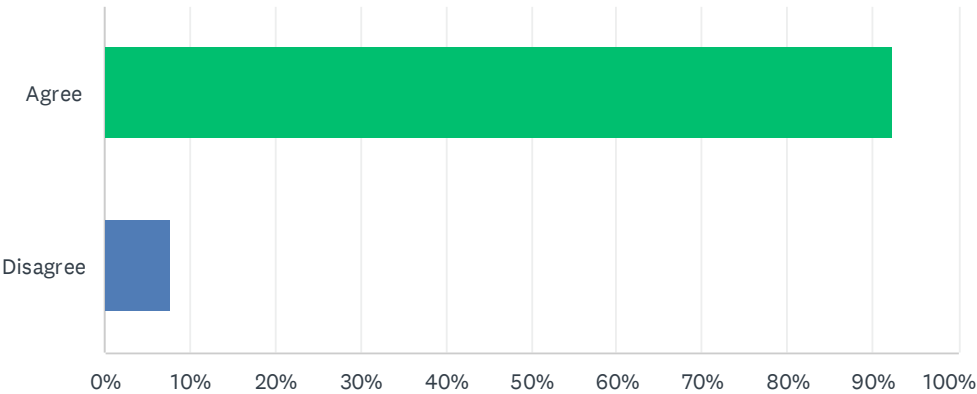
Answered: 13 Skipped: 0



ANSWER CHOICES	RESPONSES	
Agree	92.31%	12
Disagree	7.69%	1
Total Respondents: 13		

Q10 The public interest was considered in all discussions.

Answered: 13 Skipped: 0



ANSWER CHOICES	RESPONSES	
Agree	92.31%	12
Disagree	7.69%	1
Total Respondents: 13		

Q11 List two strengths of this meeting.

Answered: 12 Skipped: 1

ANSWER CHOICES		RESPONSES	
1.		100.00%	12
2.		100.00%	12

Q12 List two ways in which the technical aspects of this meeting could have been improved.

Answered: 12 Skipped: 1

ANSWER CHOICES	RESPONSES	
1.	100.00%	12
2.	75.00%	9

Q13 List two ways in which Council meetings could be improved

Answered: 12 Skipped: 1

ANSWER CHOICES		RESPONSES	
1.		100.00%	12
2.		58.33%	7

Q14 Additional Comments

Answered: 8 Skipped: 5

Q15 Other Questions that Council should be asking in a feedback survey?

Answered: 7 Skipped: 6

#1

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, October 29, 2021 2:09:37 PM
Last Modified: Friday, October 29, 2021 2:13:53 PM
Time Spent: 00:04:15
IP Address: 99.228.197.111

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **94**

I was prepared for this meeting.

Q4 **50**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.

Meeting was well run and I have no issues with a lack of resources to prepare. I answered number 4 as 50% simply because I was not able to be sure how prepared others were

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Post-Council Meeting Survey

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

1.

Well run despite technical system challenges

2.

Ability to stay on schedule

Q12

List two ways in which the technical aspects of this meeting could have been improved.

1.

Update Tech systems

2.

no other issues

Q13

List two ways in which Council meetings could be improved

1.

no issues

Q14

Respondent skipped this question

Additional Comments

Q15

Respondent skipped this question

Other Questions that Council should be asking in a feedback survey?

#2

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, October 29, 2021 2:47:47 PM
Last Modified: Friday, October 29, 2021 2:55:57 PM
Time Spent: 00:08:09
IP Address: 142.120.75.187

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **90**

I was prepared for this meeting.

Q4 **75**

All Council members appeared prepared for this meeting.

Q5

List any additional supports or resources that would have helped you better prepare for this meeting.

None

Q6 **Other (please specify):**

This meeting was effective and efficient.

Most of the meeting was efficient, however there has to be a better way to populate the Committees than the way it has done. In my opinion, stopping the momentum of the meeting was rather disruptive.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8

Yes

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

1.

All participants were given the opportunity to be involved in the discussion.

2.

The public lens was addressed on all relevant matters

Q12

List two ways in which the technical aspects of this meeting could have been improved.

1.

The issues that lead to the postponement of the videoconference component should have been addressed in advance.

Q13

List two ways in which Council meetings could be improved

1.

Please consider alternatives to Zoom to incorporate audio and visual aspects of the meeting

2.

In future meetings, please find a more efficient way to address populating the College's committees

Q14

Respondent skipped this question

Additional Comments

Q15

Respondent skipped this question

Other Questions that Council should be asking in a feedback survey?

#3

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, October 29, 2021 2:49:57 PM
Last Modified: Friday, October 29, 2021 2:57:31 PM
Time Spent: 00:07:33
IP Address: 161.216.164.148

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **66**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.
IT is problematic and sufficient investments are required to allow for improved council interaction and debate

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

- | | |
|----|---|
| 1. | Efficient and professionally presented |
| 2. | Good interaction with physically attending members |
-

Q12

List two ways in which the technical aspects of this meeting could have been improved.

- | | |
|----|---------------------------|
| 1. | Better IT |
| 2. | Visual interaction |
-

Q13

List two ways in which Council meetings could be improved

- | | |
|----|---|
| 1. | Continued improvement with council member engagement |
|----|---|
-

Q14

Respondent skipped this question

Additional Comments

Q15

Respondent skipped this question

Other Questions that Council should be asking in a feedback survey?

#4

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, October 29, 2021 3:00:35 PM
Last Modified: Friday, October 29, 2021 3:20:53 PM
Time Spent: 00:20:17
IP Address: 72.136.116.70

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **88**

I was prepared for this meeting.

Q4 **88**

All Council members appeared prepared for this meeting.

Q5

List any additional supports or resources that would have helped you better prepare for this meeting.

Registrar written reports in addition to verbal. I like to read ahead of time and feel better prepared to comment and or ask q's.

Q6 **Other (please specify):**

This meeting was effective and efficient.

With a small group onsite, a shorter lunch would have been fine.

Q7 **Yes,**

The objectives of this meeting were achieved.

Other (please specify):

Re the q below on public interest, I think it was generally focused on that, however, as we saw re annual fees, its important to insert reminders ie decision-making rubric

Post-Council Meeting Survey

Q8

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Yes,

Other (please specify):

It moved along effectively, all members given opportunity for input. Any qs about format clarified quickly with legal.

Q9

I felt comfortable participating in the Council discussions.

Agree

Q10

The public interest was considered in all discussions.

Agree

Q11

List two strengths of this meeting.

1.

Excellent organization

2.

Committed council members

Q12

List two ways in which the technical aspects of this meeting could have been improved.

1.

Ability to use tv screen and have everyone join in the meeting with video. As it was, seemed 2 separate meetings.

2.

If video is not working, might be better to use teleconferencing so everyone can just call in. Was hard to hear comments over a small phone

Q13

List two ways in which Council meetings could be improved

1.

Combine the committee selection and lunch

2.

Keep a social aspect

Q14

Additional Comments

Re the q below on public interest, I think it was generally focused on that, however, as we saw re annual fees, its important to insert reminders ie decision-making rubric

Q15

Other Questions that Council should be asking in a feedback survey?

What would you do differently to improve your personal effectiveness at Council meetings? Or, what effectiveness tips would you share with fellow council members?

#5

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, October 29, 2021 4:47:42 PM
Last Modified: Friday, October 29, 2021 4:52:52 PM
Time Spent: 00:05:09
IP Address: 209.171.88.140

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **100**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.

Hyperlink within the document with page numbers

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

- | | |
|----|-------------------|
| 1. | Structured |
| 2. | Respectful |
-

Q12

List two ways in which the technical aspects of this meeting could have been improved.

- | | |
|----|---------------------------------|
| 1. | Table conference speaker |
| 2. | Have IT support for zoom |
-

Q13

List two ways in which Council meetings could be improved

- | | |
|----|--|
| 1. | Make every meeting in person |
| 2. | Keep the social fellowship the night before the meeting |
-

Q14

Additional Comments

Happy to work with such high caliber people who get things done.

Q15

Other Questions that Council should be asking in a feedback survey?

None I can think of

#6

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Friday, October 29, 2021 6:08:47 PM
Last Modified: Friday, October 29, 2021 6:23:48 PM
Time Spent: 00:15:01
IP Address: 99.250.174.79

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **90**

All Council members appeared prepared for this meeting.

Q5 **Respondent skipped this question**

List any additional supports or resources that would have helped you better prepare for this meeting.

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

1.

The Chair and Registrar were both very well prepared and kept the meeting moving.

2.

Dissent was dealt with in a respective manner.

Q12

List two ways in which the technical aspects of this meeting could have been improved.

1.

The issue preventing remote participants joining by video will need to be resolved.

2.

In person participants could not be heard at all times.

Q13

List two ways in which Council meetings could be improved

1.

I am satisfied with the materials provided and how the meeting was conducted.

Q14

Additional Comments

None

Q15

Other Questions that Council should be asking in a feedback survey?

Nothing to add at this time.

#7

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Sunday, October 31, 2021 5:00:43 PM
Last Modified: Sunday, October 31, 2021 5:11:03 PM
Time Spent: 00:10:19
IP Address: 99.241.213.27

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **88**

I was prepared for this meeting.

Q4 **89**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.

Nil

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes,**
The President chaired the meeting in a manner that enhanced Council's performance and decision-making. Other (please specify):
The Registrar chaired effectively for most of the meeting.

Post-Council Meeting Survey

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

1.

Participation

2.

Timely and On-schedule

Q12

List two ways in which the technical aspects of this meeting could have been improved.

1.

Zoom video that actually works

Q13

List two ways in which Council meetings could be improved

1.

Nil

Q14

Additional Comments

Looking forward to another efficiently run meeting in February

Q15

Respondent skipped this question

Other Questions that Council should be asking in a feedback survey?

#8

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Monday, November 01, 2021 8:14:46 AM
Last Modified: Monday, November 01, 2021 8:17:11 AM
Time Spent: 00:02:25
IP Address: 24.150.67.17

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **100**

All Council members appeared prepared for this meeting.

Q5 **Respondent skipped this question**

List any additional supports or resources that would have helped you better prepare for this meeting.

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Post-Council Meeting Survey

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

- | | |
|----|-----------------------|
| 1. | Collaboration |
| 2. | Mutual Respect |
-

Q12

List two ways in which the technical aspects of this meeting could have been improved.

- | | |
|----|--|
| 1. | Zoom instead of phone |
| 2. | File with all docs instead of separate emails |
-

Q13

List two ways in which Council meetings could be improved

- | | |
|----|---|
| 1. | Mandatory argument for and against each proposal |
| 2. | Breakdown of financials |
-

Q14

Respondent skipped this question

Additional Comments

Q15

Respondent skipped this question

Other Questions that Council should be asking in a feedback survey?

#9

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Monday, November 01, 2021 8:32:00 AM
Last Modified: Monday, November 01, 2021 8:36:27 AM
Time Spent: 00:04:27
IP Address: 99.251.6.196

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **100**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.

None.

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Other (please specify):**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Abstain - COI

Post-Council Meeting Survey

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

- | | |
|----|-------------------------------|
| 1. | Well organized. |
| 2. | Conducted efficiently. |
-

Q12

List two ways in which the technical aspects of this meeting could have been improved.

- | | |
|----|--|
| 1. | Resolve Internet Connection concerns. |
|----|--|
-

Q13

List two ways in which Council meetings could be improved

- | | |
|----|-----------------|
| 1. | See #12. |
|----|-----------------|
-

Q14

Additional Comments

Thank you to the Registrar and all staff for a well run Meeting.

Q15

Other Questions that Council should be asking in a feedback survey?

None.

#10

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Monday, November 01, 2021 9:11:23 AM
Last Modified: Monday, November 01, 2021 9:14:18 AM
Time Spent: 00:02:54
IP Address: 99.237.11.242

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **94**

I was prepared for this meeting.

Q4 **96**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.

Every thing good

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

1.

Effective

2.

Efficient

Q12

List two ways in which the technical aspects of this meeting could have been improved.

1.

Video conference

2.

In person

Q13

List two ways in which Council meetings could be improved

1.

Good

2.

Good

Q14

Additional Comments

Thank you

Q15

Other Questions that Council should be asking in a feedback survey?

It was amazing

#11

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Monday, November 01, 2021 10:33:23 AM
Last Modified: Monday, November 01, 2021 10:38:56 AM
Time Spent: 00:05:33
IP Address: 174.88.175.190

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **100**

All Council members appeared prepared for this meeting.

Q5
List any additional supports or resources that would have helped you better prepare for this meeting.

None

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

- | | |
|----|--|
| 1. | Fantastic facilitation and set up by Nicole and Meghan. |
| 2. | Participation of all council members |
-

Q12

List two ways in which the technical aspects of this meeting could have been improved.

- | | |
|----|---|
| 1. | Will be nice to be all in person at the College for the meeting. |
| 2. | Zoom or other to 'see' everyone in attendance. Understand there were difficulties. |
-

Q13

List two ways in which Council meetings could be improved

- | | |
|----|------------------------------|
| 1. | In Person - everyone |
| 2. | Zoom if not in person |
-

Q14

Additional Comments

Absolutely Fantastic running by Nicole and Meghan.
Peter S. was fantastic as were all the other Executive members and Council members.
Great first meeting for me!

Q15

Other Questions that Council should be asking in a feedback survey?

?

#12

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Monday, November 01, 2021 3:59:34 PM
Last Modified: Monday, November 01, 2021 4:00:30 PM
Time Spent: 00:00:56
IP Address: 24.146.32.75

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **100**

I was prepared for this meeting.

Q4 **100**

All Council members appeared prepared for this meeting.

Q5 **Respondent skipped this question**

List any additional supports or resources that would have helped you better prepare for this meeting.

Q6 **Agree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Post-Council Meeting Survey

Q9

Agree

I felt comfortable participating in the Council discussions.

Q10

Agree

The public interest was considered in all discussions.

Q11

Respondent skipped this question

List two strengths of this meeting.

Q12

Respondent skipped this question

List two ways in which the technical aspects of this meeting could have been improved.

Q13

Respondent skipped this question

List two ways in which Council meetings could be improved

Q14

Respondent skipped this question

Additional Comments

Q15

Respondent skipped this question

Other Questions that Council should be asking in a feedback survey?

#13

COMPLETE

Collector: Web Link 1 (Web Link)
Started: Wednesday, November 03, 2021 12:43:56 PM
Last Modified: Wednesday, November 03, 2021 1:00:29 PM
Time Spent: 00:16:33
IP Address: 209.52.88.105

Page 1

Q1 **Agree**

I received appropriate, supportive information for this Council meeting.

Q2 **Agree**

I received this supportive information in a timely manner.

Q3 **91**

I was prepared for this meeting.

Q4 **43**

All Council members appeared prepared for this meeting.

Q5

List any additional supports or resources that would have helped you better prepare for this meeting.

Nothing to prepare but would have preferred video for those not attending - more likely would have attended in person had it been known would only be call

Q6 **Disagree**

This meeting was effective and efficient.

Q7 **Yes**

The objectives of this meeting were achieved.

Q8 **Yes**

The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Q9

Disagree

I felt comfortable participating in the Council discussions.

Q10

Disagree

The public interest was considered in all discussions.

Q11

List two strengths of this meeting.

- | | |
|----|---------------------------------------|
| 1. | Multiple decision making items |
| 2. | Attendance |
-

Q12

List two ways in which the technical aspects of this meeting could have been improved.

- | | |
|----|------------------------|
| 1. | Video at least |
| 2. | More discussion |
-

Q13

List two ways in which Council meetings could be improved

- | | |
|----|---|
| 1. | Executive be more flexible in approach |
| 2. | More input from Alan |
-

Q14

Additional Comments

None

Q15

Other Questions that Council should be asking in a feedback survey?

None

ITEM 2.2.1

DISCIPLINE COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Cesar Mendez, Chiropracist

Professional Members (Council):

Melanie Atkinson, Chiropracist
Ed Chung, Podiatrist
Matthew Doyle, Chiropracist
Peter Ferguson, Chiropracist
Sasha Kozera, Chiropracist
Irv Luftig, Podiatrist
Patrick Rainville, Chiropracist
Donna Shewfelt, Chiropracist
Peter Stavropoulos, Podiatrist

Public Appointees:

Ramesh Bhandari, Public Appointee
Jim Daley, Public Appointee
Allan Katz, Public Appointee
Reshad Nazeer, Public Appointee
Andrew Simmons, Public Appointee
Winnie Linker, Public Appointee

Selected Member:

Eliot To, Chiropracist

Professional Members (Non-Council):

Riaz Bagha, Chiropracist
Nosheen Chaudhry, Chiropracist
Adrian Dobrowsky, Chiropracist
Peter Guy, Chiropracist
Stephen Haber, Podiatrist
Martin Hayles, Chiropracist
Sylvia Kovari, Chiropracist
Jamie Maczko, Chiropracist
Ann-Marie McLaren, Chiropracist
Brooke Mitchell, Chiropracist
Millicent Vorkapich-Hill, Podiatrist

ROLE OF THE COMMITTEE

The Discipline Committee supports the College's public protection mandate by conducting hearings to adjudicate allegations of professional misconduct and incompetence against members of the College.

MEETINGS

The Discipline Committee attended orientation in November 2021.

Completed Matters – October 2021 to January 2022

Disciplinary matters are resolved by way of uncontested or contested hearings. Matters are resolved or disposed of when:

- All allegations are withdrawn or dismissed;
- No findings of professional misconduct and/or incompetence are made by a panel;
- Findings of professional misconduct and/or incompetence are made and a penalty is ordered;
- Reinstatement requests are granted, not granted or abandoned; and
- Removal of information requests are granted, not granted or abandoned.

Between October 2021 and January 2022, the Discipline Committee disposed of five matters (in a sixth case, the hearing is ongoing due to an adjournment). In one case, the Committee accepted the College's motion to stay the allegations of professional misconduct against the member because he signed an undertaking to permanently resign from the College. The member was ordered to pay costs to the College in the amounts of \$8,000.

In the second case, the member signed an agreed statement of facts, admitting that he engaged in professional misconduct, including that he:

- failed to meet or contravened the College's standards,
- practised the profession in a conflict of interest,
- failed to keep records,
- signed or issues a document that contained a false or misleading statement,
- contravened the *Chiropody Act* and its regulations, and
- engaged in conduct that was disgraceful, dishonourable and unprofessional.

The Committee ordered that the member receive an oral reprimand, that his certificate of registration be suspended for seven months (two months to be remitted if the ProBe Ethics course and U of T records course are completed), and that he be restricted from imaging, casting, prescribing, constructing, fitting, dispensing or ordering the fabrication of orthotics for six months from the date his suspension ends, among other terms, conditions and limitations on her certificate of registration. The Member was also ordered to pay costs in the amount of \$25,500 to the College.

In the third and fourth case, the members signed an agreed statement of facts, admitting that they engaged in professional misconduct, including that they:

- failed to meet or contravened the College's standards,
- doing something for a therapeutic, preventative, diagnostic, cosmetic or other health-related purpose without consent,
- practised the profession in a conflict of interest,
- providing treatment that the member knew, or ought to have known, was ineffective, unnecessary or deleterious,
- failed to keep records,
- falsifying a record,
- signed or issues a document that contained a false or misleading statement,
- contravened the *Chiropody Act* and its regulations, and

- engaged in conduct that was disgraceful, dishonourable and unprofessional.

The Committee ordered that the members receive an oral reprimand, that their certificates of registration be suspended for 10 months (two months of which would be remitted if they complete the ProBe Ethics course), and that they be restricted from imaging, casting, prescribing, constructing, fitting, dispensing or ordering the fabrication of orthotics for 12 months from the date their suspension ends, among other terms, conditions and limitations on his certificate of registration. The Members were also ordered to pay costs in the amount of \$15,000 to the College.

In the final case, the member signed an agreed statement of facts, admitting that he engaged in professional misconduct, including that he:

- failed to meet or contravened the College's standards,
- practised the profession in a conflict of interest,
- failed to keep records,
- signed or issues a document that contained a false or misleading statement,
- submitted an account or charge for service that the member knew is false or misleading,
- charged a fee that is excessive in relation to the services or devices charged for,
- contravened the *Chiropody Act* and its regulations, and
- engaged in conduct that was disgraceful, dishonourable and unprofessional.

The Committee ordered that the member receive an oral reprimand, that his certificate of registration be suspended for eight months (two months to be remitted if the ProBe Ethics course and U of T records course are completed), and that he be restricted from imaging, casting, prescribing, constructing, fitting, dispensing or ordering the fabrication of orthotics for 12 months from the date his suspension ends, among other terms, conditions and limitations on her certificate of registration. The Member was also ordered to pay costs in the amount of \$9,000 to the College.

Outstanding Referrals to the Discipline Committee

There are currently eight cases that have been referred to the Discipline Committee and are waiting to be completed. One hearing began in January 2022 but was adjourned.

Between October 2021 and January 2022 there was one new referral from the ICRC to the Discipline Committee.

Referrals are posted on the College's website: <http://cocoo.on.ca/scheduled-discipline-hearings-referrals/>

A. HEARINGS

- **Completed hearings:** five hearings were completed between October 2021 and January 2022
- **Scheduled hearings:** three of the eight referrals have scheduled hearing dates

B. PRE-HEARING CONFERENCES

- **Completed pre-hearings:** one pre-hearing took place between October 2021 and January 2022

- **Scheduled pre-hearings:** no pre-hearing conferences are scheduled to take place

ITEM 2.2.2

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Stavropoulos

Professional Members (Council):

Melanie Atkinson, Chiropodist
Ed Chung, Podiatrist
Matthew Doyle, Chiropodist
Peter Ferguson, Chiropodist
Sasha Kozera, Chiropodist
Irv Luftig, Podiatrist
Patrick Rainville, Chiropodist
Donna Shewfelt, Chiropodist

Public Appointees:

Ramesh Bhandari, Public Appointee
Jim Daley, Public Appointee
Allan Katz, Public Member
Winnie Linker, Public Appointee
Reshad Nazeer, Public Appointee
Andrew Simmons, Public Appointee

Selected Member:

Eliot To, Chiropodist

Professional Members (Non-Council):

Riaz Bagha, Chiropodist
Nosheen Chaudhry, Chiropodist
Adrian Dobrowsky, Chiropodist
Allen Frankel, Podiatrist
Peter Guy, Chiropodist
Stephen Haber, Podiatrist
Martin Hayles, Chiropodist
Sylvia Kovari, Chiropodist
Cesar Mendez, Chiropodist
Brooke Erin Lee Mitchell, Chiropodist
Neil Naftolin, Podiatrist
Sreenath (Nat) Rave, Chiropodist
Stephanie Shlemkevich, Chiropodist
Ruth Thompson, Chiropodist
Millicent Vorkapich-Hill, Podiatrist

ROLE OF THE COMMITTEE

The Inquiries, Complaints and Reports Committee (ICRC) investigates complaints and reports to address concerns about the conduct and practice of Ontario chiropodists and podiatrists.

MEETINGS

The Committee met in November 2021 for orientation.

Complaints

In general, complaints come from patients and other members of the public, but other possible sources of complaints include insurance companies, members or other health care professionals. The ICRC investigates most complaints with the consent of the patient/complainant to obtain relevant health information. Where the investigative powers obtained through an appointment, such as the authority to issue a summons, are required to investigate a complaint, the ICRC can make a request to the Registrar for an investigator appointment.

Between October 2021 and January 2022, the College received eight complaints, which is relatively consistent with the number of complaints received in the last two years for the same time period, though slightly lower. See chart 2 below. Four of the new complaints were from patients or their families, with the remainder being from other members of the College, other healthcare providers and insurance companies.

A. *Dispositions*

Between October 2021 and January 2022, ICRC panels disposed of six complaints matters as follows:

- 4 cases – no further action was taken
- 1 case – SCERP
- 1 case – referral to the Discipline Committee

Two cases were withdrawn.

The six complaints matters that were considered by ICRC panels were disposed of in an average of 91 days. The average length of time to complete ICRC files has reduced from 133.6 days in October 2021 to well below the 150 day mark outlined in the *Regulated Health Professions Act, 1991*.

B. *HPARB Appeals*

The Health Professions Appeal and Review Board (HPARB) reviews the adequacy of an investigation and the reasonableness of an ICRC decision. Both complainants and members can request HPARB reviews.

Between October 2021 and January 2022 there were no appeals to HPARB.

C. *Interim Orders*

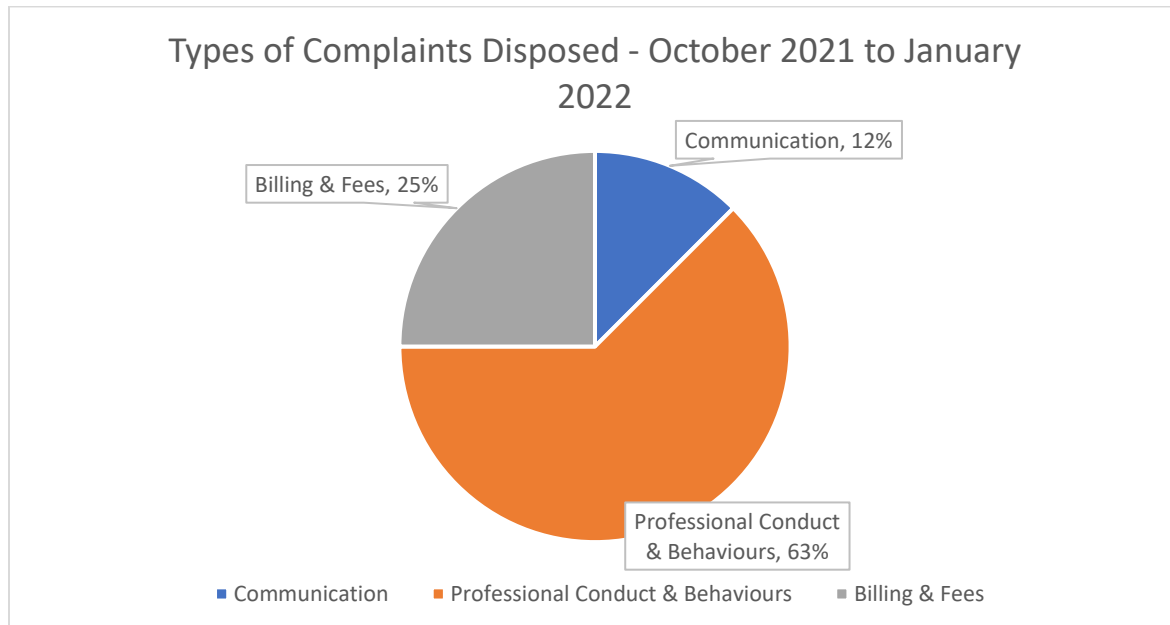
The ICRC may direct the Registrar to suspend a member or impose terms, conditions or limitations on a member's certificate of registration if:

- The ICRC has formed the opinion that the member's conduct exposes or is likely to expose patients to harm or injury;
- The member has been provided with notice;
- The member has at least 14 days to make submissions on the proposed order.

The ICRC cannot impose any gender-based terms, conditions or limitations. If an interim order is made, the matter must be investigated and prosecuted expeditiously. An interim order will remain in force until it is varied by the ICRC, or the matter is withdrawn or resolved by way of an alternative dispute resolution process or otherwise finally disposed of by a committee of the College.

The ICRC did not impose any interim orders between October 2021 and January 2022 as a result of a complaint.

Chart 1



Reports - Registrar Investigations

Reports come from employers, facility operators, members, and others. The Registrar reviews a report of a preliminary investigation and decides on the appropriate response from options including remediation, or the appointment of investigators to conduct a full investigation. The ICRC approves Registrar investigator appointments and is informed of Registrar emergency investigator appointments, which are made if there is a risk of harm or injury to patients.

A. *Investigator Appointments*

Between October 2021 and January 2022, an investigator was appointed to conduct one Registrar Investigation

This is consistent with the data from 2020 and 2021, though slightly lower.

Chart 2

	October 2019 – January 2020	February – May 2020	June – September 2020	October 2020 – January 2021	February – May 2021	June – September 2021	October 2021 – January 2022
Complaints	12	11	11	14	11	8	8
Registrar's Investigations	2	1	0	4	3	1	1

B. *Dispositions*

Between October 2021 and January 2022, panels of the ICRC did not dispose of any Registrar Investigations.

C. *Interim Orders*

The ICRC did not impose any interim orders because of a Registrar investigation between October 2021 and January 2022.

Reports from the Quality Assurance Committee

The ICRC can also request a Registrar's investigator appointment if it receives a report about a member's conduct or practice from the Quality Assurance Committee (QAC).

Between June and September 2021, the ICRC did not receive any referrals from the QAC.

Health Inquiries

The ICRC conducts inquiries into whether a member has a mental or physical condition or disorder that impacts the member's capacity to practice safely. The ICRC makes inquiries and may require the member to undergo medical examinations and suspend the member's certificate of registration if he or she does not attend or comply. The ICRC, after reviewing the results of its inquiries, may refer the matter to the Fitness to Practise Committee.

The ICRC conducted one health inquiry between October 2021 and January 2022.

ICRC Active Complaints Files

The Complaints process has been classified into stages, which are described below. The number of days elapsed is calculated from the date the complaint was received by the College.

The *Regulated Health Professions Act, 1991* requires that the College dispose of a complaint within 150 days, but the jurisdiction to continue an investigation is not lost if the investigation exceeds 150 days. At 150 days, a letter is sent to both parties explaining that the ICRC will not meet the deadline. At 210 days, the College is required to notify the parties and HPARB of the delay, as well as the reasons for the delay. After 210 days, either party can apply to HPARB seeking relief for the delay. Delay letters must be issued to both parties every 30 days after the 210-day delay.

Reviewing cases expeditiously, but fairly, meets the mission of the College to regulate the practice of Chiropody in the interest of the overall health and safety of the public of Ontario. Some matters take longer to complete due to complexity and/or to ensure the parties had a fair amount of time to respond to College requests.

A. *Stage 1: Notice of Complaint/Report*

Within 14 days of receipt of a complaint or a report, the College notifies the member. The member may make written submissions to the ICRC within 30 days of the date of the notice.

B. *Stage 2: Additional comments from complainant*

The member's response is provided to the complainant who may provide comments.

C. *Stage 2a: Additional comments from member*

The complainant's response is provided to the member who may provide comments.

D. *Stage 3: Review by ICRC*

Once the supporting documentation and relevant information has been collected from the parties and possible witnesses, the matter is reviewed by a panel of the ICRC. The Panel conducts a thorough review of the information and considers whether there are any additional documents that should be obtained or any other witnesses who should be approached.

E. *Stage 3a: Formal Investigation*

In some circumstances, the Panel may appoint an Investigator, who has the power to:

- Enter the Member's place of practice and examine records or equipment and, where necessary, copy them or remove them;
- Summons witnesses or documents;
- Obtain a search warrant.

F. *Stage 4: Decision and Reasons*

Once the investigation is complete, the ICRC deliberates on the appropriate disposition of the complaint. This stage includes decision where a panel has formed the intention to refer a matter to the Discipline Committee, but allegations are being drafted.

The Panel's written decision and the reasons are provided to both the complainant and the member, except where the matter has been referred to another panel of the ICRC to conduct a health inquiry.

Active ICRC Complaint Cases to end of January 2022

Date Received	Days Elapsed	Stage1	Stage 2	Stage 2a	Stage 3	Stage 3a	Stage 4
June 17, 2021	228	✓	✓	✓	✓	✓	
August 30, 2021	154	✓	✓	✓	✓		

January 5, 2022	26	✓					
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Average: 136 days

ICRC Active Registrar Investigations Files

The process for Registrar Investigations differs from the complaints process. Usually, the Member is not informed about the investigation until an investigator has been appointed and the Investigations Report is complete.

Active ICRC Registrar Investigation Cases to end of January 2022

Date Received	Days Elapsed	Stage1	Stage 2	Stage 2a	Stage 3	Stage 3a	Stage 4
May 4, 2021	272	✓	✓	✓	✓	✓	
September 7, 2021	146	✓	✓	✓	✓	✓	
October 12, 2021	111	✓	✓	✓	✓	✓	

Average: 176 days

ITEM 2.2.3

Quality Assurance Committee Report October 2021 – January 2022

Committee Members

Chair:

Anna Georgiou, Chiropodist

Professional Members (Council)

Melanie Atkinson, Chiropodist

Matthew Doyle, Chiropodist

Irv Luftig, Podiatrist

Cesar Mendez, Chiropodist

Patrick Rainville, Chiropodist

Professional Members (Non-Council)

Cindy Lewis, Chiropodist

Brooke Mitchell, Chiropodist

Millicent Vorkapich-Hill, Chiropodist

Tina Rainville, Chiropodist

Jaffer Mohammed, Chiropodist

Public Members

Ramesh Bhandari

Role of the Committee

The Quality Assurance Committee (QAC) provides regulatory oversight through annual practice assessments and continuing education opportunities to ensure that Chiropodists and Podiatrists in Ontario are practicing in accordance with the College's standards.

Practice Assessments

Practice Assessments afford the College with an opportunity to provide collegial feedback and direction to members of the profession. In addition, the practice assessments allow broader concerns to be addressed before a complaint is filed or public safety is compromised.

The College has scheduled nineteen practice assessments since June 2021; two remain to be completed. While many of the assessments have returned positive results; three raised concerns warranting SCERPs, TCLs and/or directions. In one instance, a referral to the ICRC was warranted.

Continuing Education

Members are required to accrue a minimum of fifty (50) credit hours over a period of two years. The current cycle began on January 1, 2020 and ended on December 31, 2021. In March 2022, the Committee will commence a review of the continuing education requirements of approximately eighty (80) randomly selected members.

Referrals to the Inquiries, Complaints & Reports Committee (ICRC)

On January 10, 2022, the Committee reviewed the practice assessment report of a member and formed the opinion that the member may have committed an act of professional misconduct. The member was given an opportunity to review the Committee's decision and provide a response. A response was not received from the member. On February 8, 2022, the Committee met again and finalized its decision to refer this matter to the ICRC.

ITEM 2.2.4

EXAMINATIONS COMMITTEE REPORT

October 2021 – January 2022

COMMITTEE MEMBERS

Chair: Stephanie Shlemkevich, Chiropodist

Professional Members (Council):

Matthew Doyle, Chiropodist

Peter Ferguson, Chiropodist

Professional Members (Non-Council):

Lisa Balkarran, Chiropodist

Nosheen Chaudhry, Chiropodist

Marcella Cowan, Chiropodist

Kathryn Ferguson, Chiropodist

Megan Grantham, Chiropodist

Kay Hayles, Chiropodist

Martin Hayles, Chiropodist

Dominic Hough, Chiropodist

Mary Ellen Kennedy-Mitchell, Chiropodist

Andrey Klayman, Chiropodist

Brooke Mitchell, Chiropodist

Sonia Rebello, Chiropodist

Jaffer Mohammed, Chiropodist

Donna Shewfelt, Chiropodist

ROLE OF THE COMMITTEE

The Examinations Committee is an ad hoc committee that oversees the administration of the College's registration examinations.

Individuals wishing to practice as a chiropodist in Ontario must be registered with the College of Chiropodists in accordance with the *Chiropody Act*, 1991 and its Regulations. New members

wishing to register are required to sit a two-part examination. A pass standing of the exam is required by the College to fulfill a portion of the registration requirements and become a member of the College. The exam is composed of a written and an objective (OSCE) component.

ACTIVITIES

In November 2021, the Committee ran a second sitting of the OSCE component of the registration exams. In December 2021, the Committee welcomed new members and undertook training with examination service provider, Martek. Additionally, the Committee began working on new content for the 2022 exams.

The 2022 exams are scheduled for June 20, 2022 (online written exam) and June 25, 2022 (in person OSCE exam).

Following a review of the current exam fees compared with the cost of creating and administering the exams, the Committee noted that the College's examinations are resulting in a financial loss. Other health profession colleges of similar size, charge considerably higher fees for their qualifying examinations. Therefore, the Committee recommends an increase in the 2022 examination fees, which requires amendments to By-Law No. 2, sections 5.01 through 5.05. [Please see **ITEM 4.4** for proposed By-Law amendments].

The Committee recommends the following fee increases:

Application Fee: \$150.00

Jurisprudence Exam only: \$500.00

Complete Exam (Written and OSCE): \$2600.00

Supplemental attempt:

- Written (Jurisprudence & Core or Jurisprudent or Core): \$1000.00
- OSCE: \$1600.00

ITEM 2.2.5

STANDARDS & GUIDELINES COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Nosheen Chaudhry

Professional Members (Council):

- Sasha Kozera
- Peter Ferguson
- Ed Chung
- Irv Luftig
- Eliot To

Professional Members (Non-Council):

- Peter Guy
- Cindy Lewis
- Brooke Mitchell

Public Appointees:

- Jim Daley

ROLE OF THE COMMITTEE

The Standards and Guidelines committee serves as a standing committee charged in developing, reviewing and managing standards, guidelines, advisories and other documents set forth by the College of Chiropodists of Ontario. The committee is responsible in assisting the Executive Committee and Council in the above tasks when requested or directed to do so.

The committee will at times revisit college documents and update as required. This committee develops practice standards, guidelines, advisories and other documents for the profession in accordance with government legislations, regulation and by-laws. Any standards and guidelines drafted are based upon legal expertise and advisement from other committees such as Discipline, ICRC and fitness to practice. Reviews, updates and amendments of standards of practice will occur periodically, particularly with changes in legislation.

MEETINGS

No current meetings since the last council meeting as there have been no assignments to date.

DECISION/OUTCOMES

Recent submission and approval of the updated footwear standard at last council meeting.

NEXT MEETING

There are no future meetings scheduled at this time.

ITEM 2.2.6

REGISTRATION COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Matthew Doyle, Chiroprapist

Professional Members (Council):

Melanie Atkinson, Chiroprapist
Sasha Kozera-Faye, Chiroprapist
Peter Stavropoulos, Podiatrist

Professional Members (Non-Council):

Deepka Duggal, Chiroprapist

Public Members:

Ramesh Bhandari
Winnie Linker

ROLE OF THE COMMITTEE

The Registration Committee supports the College's public protection mandate by developing, establishing and maintaining standards of qualification for persons to be issued certificates of registration with the College.

MEETINGS

The Registration Committee did not meet between the period of October 2021 to January 2022.

DECISION/OUTCOMES

NEXT MEETING

No Scheduled Meetings at this time

ITEM 2.2.7

PATIENT RELATIONS COMMITTEE REPORT

February 25, 2022 Council meeting

COMMITTEE MEMBERS

Chair: Peter Stavropoulos

Professional Members (Council):

Matt Doyle
Peter Stavropoulos

Professional Members (Non-Council):

Pauline Looi
Brooke Mitchell

Public Members:

Jim Daley
Alan Katz

ROLE OF THE COMMITTEE

This Committee reviews and oversees the Patient Relations Program, a program to provide funding for therapy of victims of sexual abuse. This supports the College's commitment to address concerns about Member conduct.

MEETINGS

The Patient Relations Committee met one time since the last reporting cycle.

DECISION/OUTCOMES

It met to consider the matter of a request for funding by a patient under the mandate of this committee. The funding request was approved. There was no other activity with this committee.

NEXT MEETING

No Scheduled Meetings at this time

ITEM 2.2.8

Registrar's Report to Council

February 25, 2022

Overview:

Over the past almost 9 months as the Registrar at the College, I have engaged in a review of the College's operations to align the College with other RHPA regulators, ensure the College complies with the College Performance Measurement Framework (CPMF) and elevate the College's profile such that stakeholders are aware of the College and its role.

I've focused on the following:

- Financial sustainability and Operational Improvements
- Staffing Needs and Sustainability
- Connecting With, and Fostering, Stakeholder Relations
- Assisting the Strategic Planning Committee
- Assisting the Standing Drug Committee
- Quality Assurance Committee's Assessments and Staff Support
- Exam Fees
- ICRC/Discipline Committee
- Business meetings, Orientation and Professional Development
- Modernization Measures
- CPMF
- COVID-19

1) Financial Sustainability:

It became apparent in my review of the College's operations that the 2021 Operating Budget was not sustainable. There were a number of line items in the 2021 Operating Budget that could not continue if the College is to meet all of its obligations. Such unsustainable items included: insufficient allocation to upgrade the College's hardware and member platform as well as its website; insufficient resources to address increased hacking threats; insufficient allocation for staff and College memberships and underfunding of staffing needs; insufficient allocation for professional development; no allocation for hiring a consultant for strategic planning; and no allocation for Registrar's travel.

The 2022 Operating Budget presented to Council is intended to ensure sufficient funds to: upgrade the College's server and hardware; continue to customize iMIS; further engage with stakeholders and elevate the College's profile as a health profession regulator; allow for the hiring of administrative support; and improve the accessibility of our website. We have been advised by the MOH that there may be increased risk of hacking threats and security risks.

2) Staffing Needs and Sustainability:

In my review of the College's human resources, I've determined that the College is short-staffed and has lacked appropriated skills and expertise to support some of the College's committees.

With the creation of a new position, namely, the Manager, Examinations, Registration and Quality Programs and the hiring of Christine Hickey in this position, the College can provide appropriate staffing to the Examination, Registration and Quality Assurance Committees to align the College with the other RHPA colleges.

The College currently does not have staff to properly fulfill an administrative position. Administrative support for the Registrar and staff is needed to assist with the day-to-day operations of the college, answer calls and emails of general inquiry, maintain iMIS and web updates. I plan to post for this position in March 2022.

The College does not have the position of Deputy or Associate Registrar. In my assessment, this is easily remedied and should be addressed. This is a critically important position, particularly for a smaller college for succession planning and to ensure a smooth transition of authority in the absence of the Registrar. Council is being asked to vote on a bylaw change that would create the position of Deputy Registrar. I do not foresee a new hire to fill this role nor is there a significant cost implication for doing so.

Finally, I support regular staff engagement and, for that reason, we have our inaugural Staff Retreat at the office on February 24th. We will spend the day together with an agenda that gives us an opportunity to focus on various aspects of College business that we cannot properly or fully address in our weekly staff meetings. Our morning will be spent on review and further work on the CPMF as we move closer to the submission deadline of March 31, 2022.

3) Connecting With, and Fostering, Stakeholder Relations

I have met or engaged with the following stakeholders:

- The Health Profession Regulators of Ontario (HPRO)
- The Associations
- The Ministry of Health
- The Ontario Medical Association
- The Northern Ontario School of Medicine
- Other Health Profession Regulators
- The First Nations Health Managers Association
- The Ontario Hospital Association
- The Michener
- Accreditation Canada
- Professor Saks, Prof. Emeritus at Suffolk University

I have continued to focus on connecting with stakeholders to meaningfully foster working relationships that assist the College in protecting the public and that meet the expectations of the CPMF. I have met every Friday morning with a group of HPRO to review and discuss the CPMF. I also recommended that a small group review the proposed CPMF that the MOH originally distributed to HPRO for feedback in a soft launch of the CPMF. I participated in the small group, reviewing the draft CPMF and made recommendations to the MOH for suggested revisions.

I have also been in receipt of compelling LHIN data that supports the improved treatment health of those who receive footcare from our members. This is particularly the case for diabetic patients who are at higher risk of limb amputations. I have engaged in outreach to stakeholders on this point and will attend a meeting with the First Nations Health Managers Association and the Associations (OSC and OPMA).

I have been invited to address the graduating class of Chiropody at the Michener and I will be presenting at the upcoming OSC conference in May 2022.

4) Assisting the Strategic Planning Committee

Prior to my arrival at the College, Council had agreed to the development of a strategic plan. A Strategic Planning Committee (SPC) was created and met for the first time on October 2021. I interviewed recommended candidates to retain as a consultant to lead the SPC through the process of developing a strategic plan. Working with the chair, Peter Ferguson, we retained Deanna Williams as our consultant and Deanna led the SPC through a day-long meeting on October 28, 2021. The chair divided the SPC into two separate working groups to address the two prevailing themes of sustainability and the adoption of the podiatry model. I attended at a meeting of both working groups and attended on January 21, 2022 when the SPC met for a further day-long meeting to finalize the draft strategic plan to present to Council at the February 25, 2022 Council Meeting.

5) Assisting the Standing Drug Committee

The College has been engaged with the MOH for a number of years in efforts to amend the existing Drug Regulation. The existing regulation has been largely regarded as unworkable and outdated as it contains lists of drugs that our members may prescribe. The standing Drug Committee consisting of Chair, Peter Stavropoulos, Cesar Mendez, Martin Hayles, Jannel Sommerville and Jim Daley has been active since the last Council Meeting and has most recently had its proposed amendments accepted by the MOH. The amended regulation will be in force and effect January 1, 2023. I was pleased to assist the committee in its dealings with the MOH.

6) Quality Assurance Committee's Assessments and Staff Support

I've learned in my review of the College operations and in hiring a new Manager that the College has engaged in assessments every other year and has not had business meetings, in-house orientation/training or the scheduling of panels to consider QAC matters. To align with other RHPA colleges, and in keeping with the motion made by Council earlier to commit to completing a number of assessments equal to 5% of the membership, Christine Hickey and I have met with the Chair of the QAC, Anna Georgiou, to provide support in ensuring that minimally 5% of members will be assessed every year commencing in 2022. Christine has scheduled in-house training for the QAC in April 2022 and I will be participating in the presentation with Christine.

7) Exam Fees

When I joined the College I was advised that the exams fees were very low comparative to other health profession registration exams and, because the College had undertaken to improve the rigor of the Registration Exams and had engaged new psychometrists to assist with this process,

the exam fees did not cover the true cost of the exams. The impact is that the membership has subsidized the cost of exams and, without an increase in exam fees, this trend will continue. Christine Hickey has worked with the psychometrists and the Exam Committee Chair to determine appropriate increases to exam fees. We have brought forward a proposed bylaw amendment that would increase the fees. The proposed increase is an important step towards insuring financial sustainability.

8) ICRC/Discipline Committee

Meghan Clarke and I provided in-house orientation to Council and ICRC/Discipline Committee in November 2021 and February 2022. Both were well attended. A business meeting for ICRC/Discipline Committee is also planned for 2022 with further plans to implement business meetings semi-annually.

Megan Clarke has continued to draft ICRC decisions that I review before the decisions are released as we continue to realize efficiencies in legal expenditures. We were able to recover a significant amount in legal fees by way of the settlements of Discipline Committee matters the College entered. We were also able to improve timelines for ICRC and Discipline Committee matters as well as create a Guideline for Witnesses.

9) Business Meetings, Orientation and Professional Development

In my experience, the RHPA colleges organize business meetings semi-annually for the statutory committees. Business meetings are an opportunity to review data relating to the committee's work in the previous quarters and is also when committee members will receive training and education on matters relevant to the committee's work. I have implemented this model at the College with plans to conduct a business meeting for each of ICRC/Discipline Committee and the QAC in 2022. I plan to work closely with staff to schedule two business meetings annually commencing in 2023.

10) Modernization Measures

Modernization of health profession regulation has been in discussion for many years with significant changes in B.C., in particular. Most recently the MOH has proposed a number of governance reforms and modernization improvements to the RHPA regulators. I have engaged in a number of meetings with other Registrars, MOH, the Associations and HPRO in advising the executive committee and council on the College's response. Upon receiving Council's feedback at a special Council Meeting on February 16th, I submitted a letter to the MOH on behalf of the College, signed by Peter Stavropoulos.

11) CPMF

We have a number of key improvements to capture in the CPMF for 2021 that must be submitted to the MOH by March 31, 2022. Among those improvements are: competencies for Council and Committee members (upon approval by Council), a survey of Council following Council Meetings to improve materials and meetings; increased cooperation and collaboration with the other RHPA regulators; a cooling off period requirement of 1 year; improvements in, along with

qualitative/quantitative measures implemented based on survey feedback (including a written Registrar's Report); participation in the College office's responsiveness to all enquiries from members of the public and other stakeholders; improvements in ICRC timelines (approaching established goal of 150 days).

12) COVID-19

We have continued to ensure a nimble response to any amendments to Directive #2. We have sought legal counsel in carefully drafting materials on our website for the benefit of both members and the public. I have worked with our acting PA to manage messaging in response to enquiries about COVID-19 and Directive #2 as our members have continued to treat patients in person.

Respectfully submitted,
Nicole Zwiers

ITEM 2.2.9

AUDIT COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Jim Daley

Professional Members (Council):

Ed Chung
Melanie Atkinson

Professional Members (Non-Council):

Public Appointees:

Jim Daley

ROLE OF THE COMMITTEE

Review the Colleges Audited Financial Statements and recommend to Council. Recommend appointment of the Colleges Auditors. Assist Executive with budget input or other financial matters as directed.

MEETINGS

The Committee did not meet since the last Council meeting.

NEXT MEETING

Not Scheduled. The Committee will meet once the College audit has been completed. This will likely occur in the early part of May 2022.

ITEM 2.2.10

FITNESS TO PRACTISE COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMMITTEE MEMBERS

Chair: Peter Guy

Professional Members (Council):

Matthew William Doyle
Cesar Manuel Mendez

Professional Members (Non-Council)

Peter Gordon Guy
Pauline Suk Ming Looi
Kimberley Ann Resmer

Public Appointees:

Winnie Linker

ROLE OF THE COMMITTEE

The Fitness to Practise Committee supports the College's public protection mandate by conducting hearings to assess whether a member is incapacitated, after the matter has been referred by the Inquires, Complaints and Reports Committee.

MEETINGS

None

DECISION/OUTCOMES

None

NEXT MEETING

There are no future meetings scheduled at this time.

ITEM 2.2.11

TECHNICAL COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Ferguson

Professional Members (Council):

Ed Chung
Matthew Doyle
Peter Ferguson
Sasha Kozera-Faye

Professional Members (Non-Council):

John Lanthier
Tracy Oliver

Public Appointees:

None

ROLE OF THE COMMITTEE

The Technical Committee was established by Council as an ad hoc committee. Its mandate is to support Council by responding to questions relating to the acceptability of practice modalities and emerging technologies.

MEETINGS

The Committee not met since the last Council meeting.

DECISION/OUTCOMES

None

NEXT MEETING

There are no future meetings scheduled at this time

ITEM 2.2.12

STANDING DRUG COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Stavropoulos

Professional Members (Council):

Martin Hayles
Peter Stavropoulos

Professional Members (Non-Council):

Jannel Somerville
Cesar Mendez

Public Appointees:

Jim Daley

ROLE OF THE COMMITTEE

This Committee is responsible for ensuring that the Drug Regulation, which the Committee was initially instrumental in formulating, is kept up to date. The Committee consults with the Ministry of Health to suggest amendments based on current and changing legislation.

MEETINGS

This committee has been very active over the past few months having met on multiple occasions.

DECISION/OUTCOMES

At a meeting with the MOH on Wednesday February 16, 2022, it formally accepted the College's Drug Schedule. Over the past two months or so, this Committee has met numerous times as a group to refine the drug schedule to a form acceptable to the MOH. The Committee reinforced to the MOH the importance of a drug schedule of categories that was flexible to permit the seamless inclusion of new, more effective, and in many instances, more cost-effective drugs in the best interest of attending to the needs of patients. The new Regulation is intended to be in force as of January 1, 2023, and will include a category approach to the drugs our members may prescribe, with one exception, that being the category of opioids and narcotics which will specify the drugs that may be prescribed as well as the dosages and duration.

I would like to take this opportunity to express my appreciation, on behalf of this Committee, to the Ministry representatives who were attentive and to our requests. Lastly, I wish to acknowledge and thank the College team members on this Herculean effort. They include Professional Members – Martin Hayles, Cesar Mendez, Jannel Somerville; Public Member - Jim Daley and our Registrar Nicole Zwiers.

NEXT MEETING

There may be a need for a final meeting to complete any outstanding wording related to the new regulation prior to the passing of the regulation.

ITEM 2.2.13

SEDATION COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Anna Georgiou

Professional Members (Council):

Melanie Atkinson
Matthew Doyle
Irving Luftig
Patrick Rainville

Professional Members (Non-Council):

Cesar Mendez
Cindy Lewis
Brooke Mitchell
Tina Rainville
Jaffer Mohammed
Millicent Vorkapich-Hill

Public Appointees:

Ramesh Bandari

ROLE OF THE COMMITTEE

The Sedation Committee's role is to function under the by-laws and the Standard of Practice for the Administration of Inhaled Substances and the Use of Sedation in a Member's Practice, including reviewing appeals of decisions of the Registrar to refuse a member's application for an Inhalation Certificate; and studying and making recommendations to Council or the Executive Committee on any matter within its responsibility or any other matter referred to it by Council or the Executive Committee.

MEETINGS

The Committee not met since the last Council meeting.

DECISION/OUTCOMES

None

NEXT MEETING

There are no future meetings scheduled at this time.

ITEM 2.2.14

PRACTICE ADVISOR REPORT

February 25, 2022 Council Meeting

Temporary Practice Advisor - Peter Ferguson, Registered Chiroprapist

Purpose:

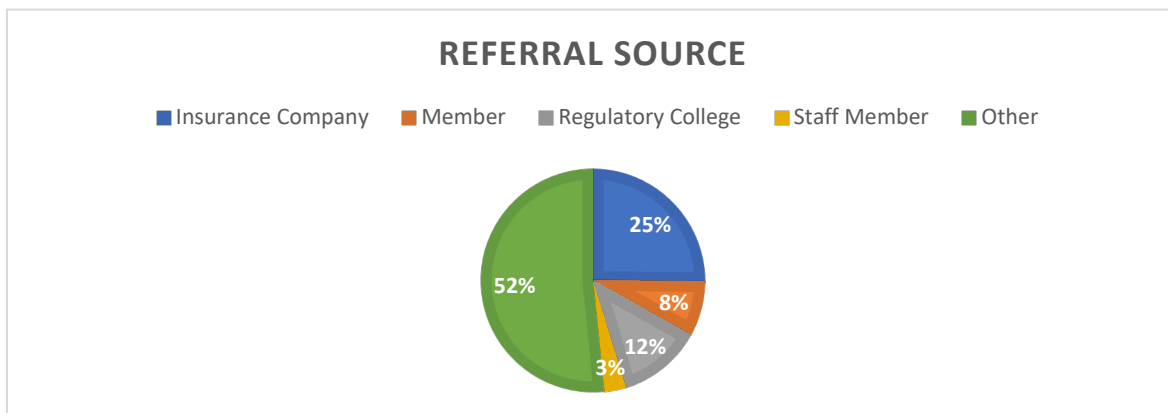
To provide Council with an overview of the Practice Advice activities since last meeting of Council. The PA provides professional practice advice on behalf of the College, supporting Members by making sound and ethical clinical decisions that comply with legislative requirements, the Standards of Practice, and College policies and guidelines. The PA is also available to support the public with questions about the practice of chiroprapists and podiatrists.

The Public Interest:

The practice Advisory service responds to inquiries from multiple stakeholders including the public. The PA is also available to support the public with questions about the practice of chiroprapists and podiatrists in Ontario.

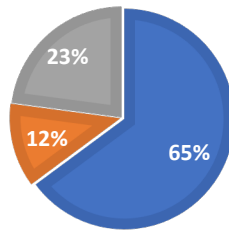
Data breakdown since October Council meeting:

- Received 131 phone calls and emails.
- 23% of Member and public referrals coming from COCOO staff.
- 20% of enquiries COVID-19 related focused on vaccination mandates and policies.



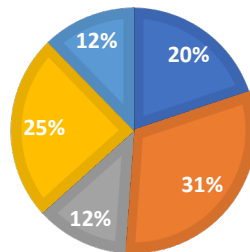
CONTACT METHOD

■ E-mail ■ Phone ■ COCOO staff



REFERRAL TOPIC

■ COVID-19 ■ Legislation/Regulations ■ Scope of Practice ■ Standards/Guidelines ■ Other



Ongoing work:

Seeking to improve the practice advisory service to Members and stakeholders by:

- Increasing awareness of practice advisory service to Members.
- Concern regarding the number of PA related questions that are being screened initially by other COCOO staff, including the Registrar. This is an inappropriate use of our limited resources. Continue to improve awareness with Members and public, where best to direct enquires.
- Developing both on-line and in-person educational sessions and learning resources to promote awareness of best practices.
- Meeting with graduate Michener students to discuss jurisprudence and practical considerations when entering clinical practice.

ITEM 4.1

COUNCIL BRIEFING NOTE: RECOMMENDED AMENDMENTS TO BYLAW 1: General Cooling Off Period

Background:

The College Performance Measurement Framework (CPMF) requires that professional health regulators have restrictions in place, either in their bylaws or policies, to ensure that a cooling off period applies to prevent any professional member from serving on Council while also serving on the board of a professional association or within a period of time from serving on the board of a professional association. The cooling off period avoids the risk of a professional member acting in the association's best interest instead of acting in the public's interest, while on Council. By allowing a period of time to elapse between serving on a professional association and serving on College Council, this potential conflict of interest is addressed.

At its October 2021 meeting, Council was asked to decide on the appropriate length of the cooling off period. After discussion, Council voted and approved a one year cooling off period. To operationalize the cooling off period, Bylaw 1 needs to be amended – that amendment is now before Council.

Public Interest Rationale for Decision:

It is in the public interest that College Council be comprised of professional members who understand their role to serve the public interest and who demonstrate their commitment to that role by not engaging in any real or potential conflicts of interest, including serving, or having recently served, on the board or council of a professional association in the previous year.

Recommended Motion:

That By-law No. 1: General be amended as follows:

1. Amend Article 50.6, 50.7, 53.7, 53.8, and the associated schedules (the changes to the existing Articles are shown by redline).

The motion before Council is approve changes to Bylaw 1 to put the one year cooling off period Council voted to adopt into effect.

50. ELIGIBILITY FOR ELECTION

...

50.6 ~~A~~Subject to Article 50.07, a **member** is not eligible for election as a **councillor** if the **member** holds a position which would cause the individual, if elected as a **councillor**, to have a conflict of interest by virtue of having competing fiduciary obligations to both the **College** and another organization ~~unless the member files with the Registrar, prior to the deadline referred to in Article 51.06, a written agreement to resign from the other position if elected as a councillor.~~

50.7 A **member** is not eligible for election as a councillor and shall be deemed to have a position which would result in a competing fiduciary obligation under Article 50.06 if the **member** ~~is~~holds or has held, in the preceding one year prior to the deadline for receipt of nominations, any of the following positions in an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers and whose mandate in any way relates to the provision of foot care by its members:

- i) ~~a~~director, officer or ~~other~~ member of the governing body of the organization;
- ii) ~~an officer of~~Executive Director, Chief Administrative Officer or another position with similar duties in the organization; or
- iii) ~~the executive director or chief administrative officer of an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers~~a position which the Elections Committee of the College determines is one which would create a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization.

...

Eligibility

...

- 53.7 ~~A~~Subject to Article 53.08, a **member** is not eligible to be appointed as a **non-council committee member** if the **member** holds a position which would cause the individual, if appointed as a non-council committee member, to have a conflict of interest by virtue of having competing fiduciary obligations to both the **College** and another organization ~~unless the member files with the Registrar a written agreement to resign from the other position if appointed as a non-council committee member.~~
- 53.8 A person is not eligible to be appointed as a non-council committee member and shall be deemed to have a position which would result in a competing fiduciary obligation under Article 53.07 if the person ~~is~~holds or has held, in the preceding one year prior to the deadline for receipt of applications, as set by the Registrar under Schedule 3 to By-Law No. 1, any of the following positions in an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers and whose mandate in any way relates to the provision of foot care by its members:
- i) ~~a~~director, officer or other member of the governing body of the organization;
 - ii) ~~an officer of~~Executive Director, Chief Administrative Officer or another person with similar duties in the organization; or
 - iii) ~~the executive director or chief administrative officer of an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers.~~a position which the Elections Committee of the College determines is one which would create a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization.

Schedule 2 to By-Law No. 1

Process for the Appointment of Selected Councillors

...

2. ~~Prior to making a recommendation to Council, the~~ The Executive Committee shall take reasonable steps to ensure that each prospective appointee is eligible for selection and does not hold a position which would cause the individual if appointed as a **selected councillor** to have a conflict of interest by virtue of having competing fiduciary obligations to both the **College** and another organization ~~or if a prospective appointee does have such a conflict, to ensure that the member has agreed in writing to immediately resign from the other position if selected as a councillor.~~
3. A person shall be deemed to have a position which would result in a competing fiduciary obligation under paragraph 2 if the person ~~is~~ holds or has held, in the preceding one year prior to the person's date of appointment by Council, any of the following positions in an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers and whose mandate in any way relates to the provision of foot care by its members:
 - i) ~~a director, officer or other~~ member of the governing body of the organization;
 - ii) ~~an officer of~~ Executive Director, Chief Administrative Officer or another person with similar duties in the organization; or
 - iii) ~~the executive director or chief administrative officer of an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers.~~ a position which the Elections Committee of the College determines is one which would create a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization.

...

Schedule 3 to By-Law No. 1

Process for the Appointment of Non-Council Committee Members

...

6. ~~Prior to making recommendation to Council, the~~The Executive Committee shall take reasonable steps to ensure that each prospective appointee is eligible for appointment and does not hold a position which would cause the individual, if appointed as a non-council committee member, to have a conflict of interest by virtue of having competing fiduciary obligations to both the **College** and another organization ~~or if a prospective appointee does have such a conflict, to ensure that the member has agreed in writing to immediately resign from the other position if appointed as a non-council committee member.~~
7. A person shall be deemed to have a position which would result in a competing fiduciary obligation under paragraph 6 if the person ~~is~~holds or has held, in the preceding one year prior to the deadline for receipt of applications, any of the following positions in an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers and whose mandate in any way relates to the provision of foot care by its members:
 - i) ~~a~~director, officer or ~~other~~ member of the governing body of the organization;
 - ii) ~~an officer of~~Executive Director, Chief Administrative Officer or another person with similar duties in the organization; or
 - iii) ~~the executive director or chief administrative officer of an international, national or provincial association or organization whose members are predominately chiropodists, podiatrists or other foot care providers.~~a position which the Elections Committee of the College determines is one which would create a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization.

...

Document comparison by Workshare 10.0 on January 27, 2022 4:35:09 PM

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17247303.1

**COUNCIL BRIEFING NOTE: RECOMMENDED AMENDMENTS TO BYLAW 1: General
CEO/Deputy Registrar**

Background:

Article 12

Article 12.1 states that “[t]he Registrar shall be appointed by Council and shall be the chief administrative officer of the College.”

Council is being asked to consider amending Article 12 to remove reference to chief administrative officer and replace it with CEO. The rationale for this change is to align the College with other regulators, given that the use of the title Registrar/CAO is an anomaly among regulators governed by the *Regulated Health Professions Act*. As well, the Ministry of Health recently released its plan to modernize regulation, which includes a move away from the Registrar title towards the exclusive use of CEO – by replacing CAO with CEO, the College will be moving in that direction. Finally, the use of CAO implies that the College’s Registrar has lesser authority than other RHPA registrars, which is not the case.

Article 13

Article 13 sets out that the Executive Committee or Council shall appoint an Acting Registrar if the office of the Registrar becomes vacant, and it outlines the power of an Acting Registrar. The College does not currently have a Deputy Registrar.

Council is being asked to amend Article 13 to create the position of Deputy Registrar. The Deputy Registrar will act in the Registrar’s absence, on a temporary basis. Again, the rationale for this change is to align the College with other RHPA colleges, most of whom have a deputy or associate registrar who can step in when the Registrar is away. More importantly, having a Deputy Registrar will build staff capacity and provide for succession planning in the event that the Registrar position becomes vacant, or the Registrar is absent for an extended period.

Public Interest Rationale for Decision:

Article 12

It is in the public interest that the College remains aligned with other regulatory health colleges, in terms of the title it uses, and that the public understands the Registrar's function at the College as being the chief executive officer. The title CEO is more transparent and reflects, to the public, the seniority of the Registrar's role.

Article 13

It is in the public interest that the College prioritize succession planning to ensure that the College can continue to fulfil its mandate of protecting the public in the absence of the Registrar.

Recommended Motions:

That By-law No. 1: General be amended as follows:

1. Amend Article 12.1 to replace chief administrative officer with CEO (the changes to the existing Articles are shown by redline); and
2. Amend Article 12.6 (iv) to replace chief administrative officer with CEO (the changes to the existing Articles are shown by redline); and

The motion before Council will change the Registrar's title from Registrar/CAO to Registrar/CEO of the College.

That By-law No. 1: General be amended as follows:

1. Amend Articles 13.2 and 13.4 to create a Deputy Registrar for the College (the changes to the existing Articles are shown by redline); and

The motion before Council is to create a Deputy Registrar position, which will have the statutory authority, duties and responsibilities of the Registrar.

12. REGISTRAR

- 12.1** The Registrar shall be appointed by Council and shall be the ~~chief administrative officer~~CEO of the **College**.
- 12.2** The terms of employment of a Registrar hired after this Article comes into force shall be set out in a written employment contract approved by the Executive Committee and shall be consistent with the **College** personnel policy in effect at the time such contract is approved.
- 12.3** No candidate for the position of Registrar shall be offered a contract of employment until that candidate has been approved by Council.
- 12.4** Despite subsection 12(1) of the **Code**, the Executive Committee shall not exercise the authority of Council under Article 12.01.
- 12.5** The Registrar shall perform those duties and responsibilities set out in the **RHPA**, the **Act**, the **Regulations** and the by-laws of the **College** as well as such duties and responsibilities as shall be assigned to the position by Council.
- 12.6** In addition to the duties referred to in Article 12.05, the Registrar may, from time to time,
- i) sign summonses, notices and orders on behalf of the **College** or any **committee** of the **College**;
 - ii) hire persons to act in the capacity of inspectors, investigators and/or assessors of the **College** to perform such duties as may be determined by the Registrar;
 - iii) manage and maintain the **College** property including disposing of **College** furniture and equipment which becomes obsolete, worn out or is no longer required by the **College**; and
 - iv) perform such other functions consistent with the Registrar's role as ~~chief administrative officer~~CEO.

13. ACTING REGISTRAR

- 13.1** If a vacancy occurs in the office of the Registrar, the Executive Committee or Council shall appoint an Acting Registrar.
- 13.2** ~~During extended absences~~If the Registrar is temporarily absent or otherwise temporarily unable to act, the Deputy Registrar shall ~~appoint in writing a person approved by~~act as the Acting Registrar until such time as the Registrar is able to resume the duties of the Registrar, or the Executive Committee ~~as the~~or Council appoints another Acting Registrar.
- 13.3** Where the Executive Committee appoints or approves an Acting Registrar, that appointment shall be valid only until the next meeting of Council unless ratified by Council.
- 13.4** ~~A~~The Deputy Registrar and a person appointed as Acting Registrar ~~under Article 13.01 or Article 13.02~~ shall have all the statutory authority, duties and responsibilities of the Registrar including those contained in the **RHPA**, the **Act**, the **Regulations** and by-laws of the **College**.

Document comparison by Workshare 10.0 on January 27, 2022 4:11:03 PM

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Format changes	0
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ITEM 4.4

**COUNCIL BRIEFING NOTE
RE RECOMMENDED AMENDMENTS TO BYLAW 2: FEES
Examination Fee Increase**

Background:

Attached as Appendix 1 is the College's current By-law No. 2: Fees. The College bylaws have not been amended to increase the annual examination fees since 2015. At present, the cost to take the written and practical (OSCE) exams is \$1,600.00. This amount is considerably lower than comparable Colleges and generally lower than the standard cost of qualifying exams. For example, the College of Denturists charges in excess of \$4000 for their qualifying exams.

In early 2021, the College retained the services of Martek Assessments Ltd. ("Martek") to assist with the development, administration, scoring, analysis and reporting of the College's qualifying examinations. Martek is a leading services provider in professional regulation qualifying exams. Martek has brought considerable knowledge to the College's examination process and has been invaluable in ensuring that the College is adequately testing the competency of Applicants seeking to practice Chiropractic in Ontario. Attached as Appendix 2 is a report from Martek outlining the work they have done and what is expected for 2022.

In 2021, the development, administration and maintenance of the qualifying exams cost the College over two hundred thousand dollars (\$200,000.00). This amount includes the service fees charged by Martek. With the current exam fee structure, only a fraction of these costs is recovered. The recommended increase to the examination fees will certainly reduce the overall cost to the College.

Council is being asked to consider an increase in the qualifying examination fees. Such an increase will ensure that the College continues to meet its public protection mandate through rigorous testing of Applicants to the field of Chiropractic.

Public Interest Rationale for Decision:

It is in the public interest that the College remains financially stable and has the proper funding and resources to fulfill its mandate of protection of the public. As part of its mandate, the College is required to meet all expectations of the Ministry of Health and its obligations under

the *Regulated Health Professions Act, Procedural Code, Chiropractic Act* and related Regulations.

Recommended Motion:

That By-law No. 2: Fees be amended, in principle, as follows:

1. Revoke Articles 5.01, 5.02, 5.03(a) & (b), 5.04 and 5.05 and substitute that shown in Appendix 3 (the changes to the existing Articles are shown by redline).
2. Increase the Examination fees as follows:
 - a. Jurisprudence Exam - \$500 (from \$250)
 - b. Written & Clinical (OSCE) Exam - \$2600 (from \$1600)
 - i. Written only – Jurisprudence & Core Competencies (if first attempt fails) - \$1000
 - ii. Written only – Jurisprudence OR Core Competencies (if first attempt fails) - \$500
 - iii. OSCE only (if first attempt fails) - \$1600

And further, that Council direct that the proposed amendments be circulated to members and other stakeholders for comment for 60 days before the matter is returned to Council.

The motion which Council is being asked to pass would increase the qualifying examination fees for 2022, reflecting the costs incurred by the College to ensure rigorous applicant testing.

COCOO By-law No. 2: FEES

FEES RELATED TO EXAMINATIONS

- 5.01** A person that applies to attempt the College's jurisprudence exam without applying to attempt the other examinations required for a certificate of registration shall pay a fee of \$250.00.
- 5.02** A person who applies to attempt an examination which is a requirement for a certificate of registration but is not the jurisprudence examination referred to in Article 5.01 or the supplemental examination referred to in Article 5.03, shall pay a fee of \$1,300.00 effective April 1, 2014 and \$1,600.00 effective April 2, 2015.
- 5.03** Where a person fails the examination referred to in Article 5.02 and the person applies for and is eligible to take a supplemental examination, the person shall pay a fee of
- (a) \$500.00 for the written portion; and
 - (b) \$1,300.00 effective April 1, 2014 and \$1,600.00 effective April 2, 2015 for the OSCE portion.
- 5.04** A person who applies to have the results of an examination referred to in Article 5.02 or 5.03 rescored shall pay a fee of \$75.00.
- 5.05** A separate fee is applicable for each application referred to in Articles 5.01, 5.02, 5.03 and 5.04 and shall be paid at the time the application is submitted.

Status of Services Provided to COCCO by Martek Assessments Ltd.

Current Status

The current Service Agreement between Martek Assessments Ltd., and the College of Chiropractors of Ontario began on April 1st, 2021 and terminates on March 31st 2022. The agreement identified eleven services in total. At this point in time, 10 of the 11 Services have been completed (Please see attached Service list). Service One, involving the migration of the COCCO item bank to the new computer delivered exam platform at a cost of \$4500.00 was a one-time cost. Service Two, a 2 two-day workshop involving the development of new MCQ items for the theory exam will hopefully be completed by the end of March 2022.

Going Forward

It is anticipated that the new Service year beginning April 1 2022 could potentially involve three components. These components could include maintenance of basic exam services, preparing to implement the new Profile of Competencies document (**one-time costs**) and undertaking a review of the current JP exam.

Maintaining Current Exam Services

For the first component, Martek will propose a maintenance agreement which will offer all the current exam maintenance services except for Service One which involved the one-time cost of Item Bank Migration. Therefore, for the purposes of budgeting, the proposed new 12-month agreement for maintaining exam services for the period April 1, 2022 to March 31, 2023 will cost 54750.00 plus (HST).

Implementing the new Profile of Competencies Document.

For the second component of the 2022-23 exam cycle, Martek proposes the following services related to the implementing the new competency profile for June 2022. The estimated costs of these services would be 6 service days at 1500 per day (\$9000.00, one-time costs) and would include the following:

- Mapping all current MCQ items and OSCE stations to the new competency profile
- Restructuring the MCQ item bank to facilitate the selection of new exams and to report candidate performance reflecting the new profile
- Weighting of the competencies and documenting the process
- Preparing a new exam blueprint for both the Theory and OSCE examinations.

Restructuring the JP examination

The final potential exam development project could involve restructuring the JP examination. Methods for separating out this exam from the core exam and making it a reliable, valid, and defensible stand-alone assessment could be explored. Costs related to this project would be provided after the scope of the restructuring is determined.

Services Agreement between the College of Chiropractors of Ontario and MARTEK Assessments Ltd.

April 1, 2021, to March 31, 2022

Consultation Services for College of Chiropractors of Ontario

Service One: (DONE) Migration of the entire COCOO item bank to FastTest platform • (One Time Cost: 3 days@ 1500 per day)	\$4,500.00
Service Two: (In Progress) Development of new MCQ Items for the Written Exam • Facilitate one 2-day MCQ Item writing sessions. (2 days@ 1500 per day) • Facilitate one 1-day item review sessions. (1 day@ 1500 per day)	\$4,500.00
Service Three: (DONE) Selection of two Written exams • Inventory and prepare Item Bank for test selection • Prepare work files for committee members participating in test selection • Facilitate test selection • Finalize test form (2x 2 days@ 1500 per day)	\$6,000.00
Service Four: (DONE) Two 2-day Online Standard Setting Sessions for Written • Create user accounts for participants • Create reference guide for participants • Facilitate training session for participants in both the Modified Angoff Standard Setting Method and use of FastTest Software • Monitor and follow-up with participants as necessary as take-home work is completed • Conduct interim analysis of participant ratings flagging items requiring follow-up discussion • Facilitate item follow-up meeting • Conduct final analysis and generate Angoff values for each item • Document process (2x 2 days@ 1500 per day)	\$6,000.00
Service Five: (DONE) Apply Borderline Regression method for Standard Setting Session of the OSCE Component • In-person delivery • Create individual google worksheets for participants to facilitate process • Facilitate training session for participants regarding the Modified Angoff Method • Organize and manage case data and demonstrations • Facilitate group discussion as required • Conduct interim analysis of participant ratings flagging items requiring follow-up discussion • Conduct final analysis • Document process (2 days@ 1500 per day)	\$3,000.00

<p>Service Six: (DONE) Computer delivery via Remote Proctoring of two Written Exams</p> <ul style="list-style-type: none"> • Create Test sessions and configure candidate accounts. • Import candidate data and generate test codes. • Assign candidates to registration blocks. • Coordinate efforts with Assessment Systems and MonitorEDU • Assist with preparation of candidate communication documents • Oversee examination process throughout the day. • Export data to analysis platform(2x 3 days at 1500 per day) <p>*Note that a fee of\$40 USD per 3hr candidate session is charged directly to COCOO Assessment Systems Corporation</p>	\$9,000.00
<p>Service Seven: (DONE) Scoring, Analysis and Reporting of both Written Exams</p> <ul style="list-style-type: none"> • Scoring and Analysis <ul style="list-style-type: none"> 0 Clean data and tag candidate demographic information 0 Perform full item analysis identifying items for panel review. 0 Facilitate panel review of candidate performance with the Examination Committee. 0 Reanalyze candidate performance data based on decisions made by the item analysis review. 0 Complete psychometric analysis including reliability estimates. • Reporting Results <ul style="list-style-type: none"> 0 Report group performance by demographic variables 0 Prepare individual feedback reports for failing candidates. 0 Prepare and participate in candidate appeal requests. <p>(6 days@ 1500 per day)</p>	\$9,000.00
<p>Service Eight: (DONE) Assessor Training and Station Calibration</p> <ul style="list-style-type: none"> • Facilitate one day assessor and station calibration for primary administration <p>(1 day@ 1500 per day)</p> <ul style="list-style-type: none"> • Facilitate one half-day assessor and station calibration for secondary administration <p>(.5 day@ 1500 per day)</p>	\$2,250.00
<p>Service Nine: (DONE) Scoring, Analysis and Reporting of both OSCE Administrations</p> <ul style="list-style-type: none"> • Scoring and Analysis <ul style="list-style-type: none"> 0 Prepare custom scan sheets for use during exam 0 Configure scanning system for data capture 0 Import, clean data, and Tag candidate demographic information 0 Perform full item and analysis identifying items for panel review. 0 Facilitate panel review of candidate performance with the Examination Committee. 0 Reanalyze candidate performance data based on decisions made by the item analysis review. 0 Complete psychometric analysis including reliability estimates. • Reporting Results <ul style="list-style-type: none"> 0 Report group performance by demographic variables 0 Prepare individual feedback reports for failing candidates. 0 Prepare and participate in candidate appeal requests. 	\$10,500.00
<p>Service Ten: (DONE) Ongoing maintenance of the Item Bank for written items</p> <ul style="list-style-type: none"> • Import, categorize and format new test items into the bank. • Manage item performance statistics. • Produce item bank reports. • Manage ongoing item triage process and continue to update items in the bank 	\$4,500.00

Service Eleven: On-going Consultation <ul style="list-style-type: none"> • Provide additional assistance regarding examination policy and protocols • Provide assistance with the creation of candidate communication documents • Provide assistance in addressing candidate accommodation requests • Assist the Colleges in preparing summary reports for relevant stakeholders. • Disseminate information to relevant Councils. • Provide recommendations for refining the exam process. • Other consultation as needed for the fulfillment of the above service items 	No Charge
Total Fee for Services:	\$59,250.00
HST:	\$7,7092.50
Fees in All**:	\$66,952.50
** The Parties agree that the "Fees in All" (including HST) will be divided into and paid in twelve (12) monthly installments with the first eleven (11) payments being in the amount of \$5,579.37 and the final payment in the amount of \$5,579.43	

COCOO By-law No. 2: FEES

FEES RELATED TO EXAMINATIONS

- 5.01** A person ~~that~~ who applies to attempt the College's jurisprudence exam without applying to attempt the other examinations required for a certificate of registration shall pay a fee of ~~\$250.00~~ \$500.00.
- 5.02** A person who applies to attempt an examination which is a requirement for a certificate of registration but is not the jurisprudence examination referred to in Article 5.01 or the supplemental examination referred to in Article 5.03, shall pay a fee of ~~\$1,300.00 effective April 1, 2014 and \$1,600.00 effective April 2, 2015~~ \$2,600.00.
- 5.03** Where a person fails the examination referred to in Article 5.02 and the person applies for and is eligible to take a supplemental examination, the person shall pay a fee of
- (a) \$500.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the jurisprudence portion of the written examination;
 - (b) \$500.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the core competencies portion of the written examination;
 - (c) \$1000.00 for the written examination, if the requirement to take a supplemental examination was due to the applicant being unsuccessful on both the jurisprudence and core competencies portions of the written examination; and
 - (b) ~~\$1,300.00 effective April 1, 2014 and \$1,600.00 effective April 2, 2015~~ \$1,600.00 if the requirement to take a supplemental examination was due to the applicant being unsuccessful on the clinical (OSCE) examination.
- 5.04** A person who applies to have the results of an examination referred to in Article 5.02 or 5.03 rescored shall pay a fee of \$75.00.
- 5.05** A separate fee is applicable for each application referred to in Articles 5.01, 5.02, 5.03 and 5.04 and shall be paid at the time the application is submitted.

ITEM 4.5

COUNCIL BRIEFING NOTE: SUSPENSION GUIDELINE

Background:

The College created the Suspension Guideline to outline the responsibilities of suspended members of the College whose certificate of registration has been suspended. The Guideline applies to administrative suspensions (including suspensions for non-payment of fees) and suspensions ordered by a Committee of the College.

Public Interest Rationale for Decision:

It is in the public interest that suspended members of the College understand what they are permitted/not permitted to do while suspended. In particular, the Guideline provides important guidance to suspended members about what they must communicate to patients/the public when they cease practising due to a suspension, including limitations on advertising chiropody or podiatry services during the period of suspension.

Recommended Motion:

The motion before Council is to approve the Guideline for Suspension, as drafted.

GUIDELINE FOR SUSPENSION

Guideline for Members of the
College of Chiropodists of Ontario

Approved by Council: DATE



College of Chiropodists of Ontario

180 Dundas St. West, Suite 1901
Toronto, ON M5G 1Z8
T: 416.542.1333 F: 416.542.1666
Toll-Free: 1.877.232.7653 www.cocoo.on.ca

Purpose

The College of Chiropractors of Ontario (the “College”) has created this guideline to outline the responsibilities of suspended members of the College whose certificate of registration has been suspended. This Guideline applies to administrative suspensions (including suspensions for non-payment of fees) and suspensions ordered by a Committee of the College.

Who must the member inform?

When suspended, the suspended member must immediately inform the following people about the suspension:

- Staff in the offices or practices in which the member works. This includes other regulated health professionals working in the offices/practices and administrative staff.
- Chiropractors/podiatrists with whom the member works, whether that member is a principal in the practice or otherwise associated with the practice.
- Chiropractors/podiatrists or other individuals who routinely refer patients to the member.
- Owners of a practice or office in which the member works.
- Administrators at the facility where the member works (i.e. hospitals, long-term care facilities, etc.)
- Patients who ask to book an appointment during the suspension, or whose previously booked appointment must be rescheduled due to the suspension. Members may assign administrative staff to inform patients about the suspension. All communications with patients must be truthful and honest.

What can a suspended member not do while suspended?

While suspended, suspended members are not members of the College and must not engage in the practice of chiropractic/podiatry, including, but not limited to:

- use a restricted title (chiropractor or podiatrist).
- hold themselves out as a member of the College.
- hold themselves out as being able to practice or act in any manner that suggests the member is entitled to practise chiropractic/podiatry. This includes communicating diagnoses or offering clinical advice in social settings. Members must ensure that administrative or office staff do not suggest to patients in any way that the member is entitled to engage in the practice of chiropractic/podiatry.
- advertise chiropractic or podiatry services to the public (including on a clinic website or social media).

- giving orders to administrative staff, students or other practitioners.
- supervising work performed by others.
- acting as a clinical instructor, externship supervisor or mentor.

A suspended member must not be present in offices or practices where they work when patients are present, except for emergencies that do not involve patients. The suspended member must immediately advise the Registrar in writing about any such emergencies.

Can a suspended member financially benefit while suspended?

A suspended member must not benefit or profit, directly or indirectly, from the practice of chiropractic/podiatry.

- Prior to a suspension taking effect, a member may arrange for another chiropract/podiatrist (a locum) to take over their practice during the suspension period:
 - If another chiropract/podiatrist assumes the practice and all of the billings of the practice during the suspension period belong to the locum.
 - A suspended member may be reimbursed for actual out of pocket expenses incurred in respect of the practice during that period.
- If a member arranges for a locum to assume their practice during the suspension period, a member must advise the Registrar in writing.
- Suspended members are permitted to sign and/or submit insurance claims for work that was completed prior to the suspension.
- Suspended members must not sign insurance claims for work that has been completed by others during the suspension period.

What if I have a professional corporation?

As noted above, a suspended member is not permitted to financially benefit from practice while their certificate of registration is suspended. Therefore, a suspended member cannot invoice or earn any income from the practice of chiropractic or podiatry – either directly or through a health profession corporation

Section 85.14 (1) of the *Health Professions Procedural Code* provides that a health profession corporation shall not do, or fail to do, something that would constitute professional misconduct if a member of the health profession did, or failed to do, it.

Similarly, section 85.14(3) of the *Health Professions Procedural Code* provides that a health profession corporation shall not practise a health profession when it does not satisfy the requirements for a professional corporation under the *Business Corporations Act*.

Cooperation with the College

A suspended member must co-operate with any monitoring the Registrar feels is needed to ensure that the suspended member has complied with this Guideline. The suspended member must provide the College with access to any records associated with the practice that the College may require to verify that the suspended member has not engaged in the practice of chiropody/podiatry or profited during the suspension.

Suspended members must continue to pay their annual renewal fee and certificate of authorization fee on time, or any other fees owing to the College.

ITEM 4.6

ELECTIONS COMMITTEE REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Ferguson

Professional Members (Council):

Matthew Doyle
Peter Ferguson
Peter Stavropoulos

Professional Members (Non-Council):

none

Public Appointees:

Jim Daley
Alan Katz

ROLE OF THE COMMITTEE

The Elections Committee is a standing committee of the College. This Committee is mandated by the College's General By-law. The Elections Committee deals with disputes relating to the election of councillors and other matters provided in the by-laws, other disputes or issues referred to it by Council or the Executive Committee and it studies and makes recommendations to Council for improving the election process.

MEETINGS

The Committee met on January 31st, 2022, with Nicole Zwiers, Registrar, invited to provide clarity on the electoral requirements under the College Performance Measurement Framework (CPMF).

The CPMF contemplates screening Council members for competency. To date the College has not had a pre-screening process. The CPMF does not tell us at this juncture what those competencies are, rather the College needs to determine what is required. Working with the By-Law No.1: General, sections 45-53, that governs the elections process, the Elections Committee drafted a list of competencies for Council's consideration.

DECISION/OUTCOMES

Following discussions, there was consensus that the committee would initiate the process by utilising and modifying, a Skills and Knowledge matrix in tandem with a competencies matrix for Council members. In addition, the committee was to glean information from other RPHO's as to how they address competency issues for prospective and current councillors.

Draft documents of the matrices are available in this package for Council consideration.

NEXT MEETING

Date to be finalised but anticipated to be in March 2022.

Council Competency Matrix

Council Attributes

Committed	Devotes the required time and energy to the role and ambitious to achieve best possible outcomes for the public. Prepared to give time, skills and knowledge to developing themselves and others in order to create highly effective governance.
Confident	Of an independent mind, able to lead and contribute to courageous conversations, to express their opinion and to play an active role on Council.
Curious	Possesses an enquiring mind and an analytical approach and understanding the value of meaningful questioning.
Challenging	Provides appropriate challenge to the status quo, not taking information or data at face value and always driving for improvement.
Collaborative	Prepared to listen to and work in partnership with others and understanding the importance of building strong working relationships within Council and with executive leaders, staff, and stakeholders.
Critical	Understands the value of critical friendship which enables both challenge and support, and self-reflective, pursuing learning and development opportunities to improve their own and whole Council effectiveness.

Council Competencies

Area of Competency	Core Understanding	Entry	Excelling	How the competency is gained Examples provided for reference
Governance <i>Governance competence supports the provision of strategic direction and oversight for Colleges. It allows members to able to carry out the stewardship responsibilities, creates robust accountability for</i>	Knows where the governance principles, the sources of law and regulation relating to the organization come from, what they require and what impact they have Where authority & accountability lies in the organization	Knows where to obtain further guidance Can explain governance concepts to colleagues Can identify potential issues & escalate where appropriate Can contribute to group discussions	Source of further guidance for peers Identifies and explains governance concepts to Council Can challenge colleagues where appropriate Contributes to technical discussions on governance issues	Substantive prior experience with a governance board in the private, public, and/or voluntary/non-profit sector, acquired through board or committee service or reporting to/or working with a board as an employee. Completion of governance specific training or professional development.

Area of Competency	Core Understanding	Entry	Excelling	How the competency is gained Examples provided for reference
<i>regulatory and financial performance, and enables Council to set and achieve strategic goals.</i>	<p>The processes and practices that are crucial to the smooth operation of the organization</p> <p>The purpose and requirements of reporting obligations of the organization</p>	Understands the distinction between the role of the board versus the role of management	<p>Identifies relevant legislation and how it relates to Council decision-making</p> <p>Thinks strategically, ensures risks are assessed and monitored</p> <p>Identifies viable options and puts aside vested interests to make decisions that are most likely to achieve the organization's mandate</p> <p>Thinks about future direction of organization and how to achieve strategic goals</p>	
Finance <i>Financial competence supports Council in ensuring the prudent use of all assets for the College's effectiveness and sustainability.</i>	<p>Basic financial literacy, including financial concepts and how they relate to the organization and how they should inform Council's decision-making</p> <p>Financial controls and how to read and interpret financial statements</p> <p>Basic understanding of financial management</p>	<p>Knows where to obtain further guidance</p> <p>Can explain basic finance concepts to colleagues</p> <p>Can identify potential issues & escalate where appropriate</p> <p>Can contribute to group discussions</p>	<p>Has a basic understanding of financial management in order to ensure the integrity of financial information received by Council</p> <p>Ability to read and understand financial statements</p> <p>Distinguishes between the role of Council as an oversight body and the role of staff in day-to-day operations</p>	<p>Completion of finance specific training or professional development</p> <p>Prior employment experience in business or finance</p>
Risk Management <i>Risk management competence supports Council in identifying, evaluating and prioritising organisational and</i>	<p>Understands issues surrounding the identification, management and reporting of risks</p> <p>Understands the principles of risk management</p>	<p>Knows where to obtain further guidance</p> <p>Can explain basic risk management concepts to colleagues</p>	<p>Identifies and prioritizes risk</p> <p>Can articulate how risk should be managed and how to achieve the right balance of risk</p>	<p>Completion of risk management specific training or professional development.</p> <p>Prior employment experience in business, finance, communications or public administration</p>

Area of Competency	Core Understanding	Entry	Excelling	How the competency is gained Examples provided for reference
<i>regulatory risks and ensuring appropriate action is taken to mitigate them.</i>	Can identify organizational risks and its impact on the public	Can identify potential issues & escalate where appropriate Can contribute to group discussions		
Strategic Planning <i>Strategy competence allows the Council to set vision and direction for the College through planning and prioritising, monitoring progress and managing change.</i>	Understands the process of strategic change and the obstacles and enablers to implement it	Knows where to obtain further guidance Can explain basic strategic planning concepts to colleagues Can identify potential issues & escalate where appropriate Can contribute to group discussions	Can distinguish between strategic and operational decisions Demonstrated ability to think critically about systemic issues and the role of the organization in the healthcare system in Ontario	Substantive prior experience serving on a governing board and participating in a strategic planning process Prior employment experience in business, finance, communications or public administration
Leadership / Change Management <i>Leadership competence enables Council to effectively mobilize to further the mandate of the organization, adapt to changing circumstances, respond to crisis, identify opportunities for change and growth, and create future leaders.</i>	Ability to manage and adapt to change and innovation Ability to address and respond to stakeholder scrutiny Understands organizational and boardroom dynamics	Knows where to obtain further guidance Embraces change and innovation Demonstrates a commitment to learning and seeks out opportunities to improve Can identify potential issues & escalate where appropriate Can contribute to group discussions	Provides leadership and support through organizational change Identifies reasons for and benefits of change to stakeholders Ensures change contributes to strategic priorities Supports strategic change and ensures change is in public interest Is inclusive and respectful	Substantive prior experience serving in a leadership role
Human Resources <i>Human Resources skills supports</i>	Understanding the principles of goal setting, performance management and compensation.	Have an understanding of human resources principles and concepts as it relates to your role as an	Have experience in leading teams of managers and directors, administering departmental performance and compensation as	Progression through supervisory/management positions within a clinical or hospital setting.

Area of Competency	Core Understanding	Entry	Excelling	How the competency is gained Examples provided for reference
<i>the ability to supervise / provide direction to the CEO/Registrar of the College.</i>		employee or independent contractor.	well as experience with executive compensation.	
Stakeholder Relations / Communications <i>Stakeholder relations and communications competence supports the Council in being well-informed about the views and needs of key stakeholders, enabling productive relationships.</i>	<p>Well-informed on views and needs of key stakeholders</p> <p>Works in partnership with stakeholders in ways that contribute to achieving the goals of the organization</p> <p>Identifies links that the organization needs to make with larger community</p> <p>Clearly and effectively communicates with stakeholders</p>	Identifies key stakeholders and their relationship with the organization	<p>Identifies the needs of key stakeholders and their relationship with the organization</p> <p>Articulates techniques to better engage with stakeholders</p> <p>Considers the impact of Council's decisions and the effect they will have on the key stakeholder groups</p> <p>Demonstrated ability to communicate a position to the intended audience</p>	

Area of Competency	Core Understanding	Entry	Excelling	How the competency is gained Examples provided for reference
Critical Thinking <i>Critical thinking skills enable the Council to know that the information that they are receiving about the College's performance is accurate, to challenge appropriately where necessary and to hold the College accountable for regulatory outcomes.</i>	Skills in locating, critically assessing and evaluating information	Demonstrated ability to analyse and interpret data	<p>Appropriately questions whether the College is collecting the right data to inform regulatory work</p> <p>Challenges appropriately when data collection is not adding value</p> <p>Reviews and analyses a broad range of information and data in order to spot trends and patterns</p>	<p>Prior experience conducting research in public or private sector</p> <p>Prior experience working with data in health-related field, public or private sector</p>
Technology Skills <i>Technology skills allow Council members to participate effectively in committee and panel work through efficient use of information and communication technology.</i>	<p>Possesses basic computer skills, including daily word processing tasks – editing, printing, formatting</p> <p>Possesses basic internet skills – navigate using links; compose, send, open, read, reply to, and forward messages; attach a file and open an attachment; complete an online form</p>	<p>Knows where to obtain further guidance</p> <p>Understands how to keep information secure and confidential in an electronic or online environment</p> <p>Basic internet skills, including email, downloading and uploading, using secured Wi-Fi connection</p> <p>Experience downloading, installing and using videoconference software</p>	<p>Experience using presentation slides, including graphics and multimedia components</p> <p>Can identify how technology impacts risk and strategy</p> <p>Ability to troubleshoot and resolve issues</p>	<p>Prior experience working in administrative field</p> <p>Prior experience in digital technology</p>
Regulatory Knowledge <i>Regulatory knowledge allows Council clarity</i>	Awareness or knowledge of regulatory climate and evolving regulatory issues, regulated	Is aware of legislation, regulations, standards and by-laws the govern health care professionals	Knowledge of College functions and issues facing Council	Prior experience working within a regulatory framework

Area of Competency	Core Understanding	Entry	Excelling	How the competency is gained Examples provided for reference
<i>about the function and purpose of the RHPA and the College's mandate, and how the Act and Regulations should be interpreted and applied.</i>	industries and their oversight systems	Aware of the College's role in the health care system	<p>Awareness and knowledge of regulatory trends</p> <p>Identifies when to seek legal advice on statutory and legal responsibilities and ethical aspects of Council's decision-making</p>	Prior employment experience in legal field
Health System Knowledge <i>Health system knowledge allows Council to understand the opportunities, challenges and external forces affecting the provision of mental health services.</i>	Understanding of how health care is delivered in Ontario	<p>Knows where to obtain further guidance</p> <p>Can contribute to group discussions</p>	Understanding of the workings of government and ability to access government officials	<p>Prior employment experience in health care administration</p> <p>Experience working in the health care system in Ontario</p> <p>Experience collaborating as part of an interprofessional group</p>

ITEM 4.6

Name:

Board Member Knowledge, Skills and Experience Matrix <i>Please indicate your knowledge, skills and experience for each category</i> Advanced = 3 Good = 2 Fair = 1 None = 0 <i>Please refer to attached guide for assistance</i>													
Board Member Name	Finance	Human Resources	Regulatory Knowledge	Clinical Experience	Continuous Quality Improvement	Health System Knowledge	Critical Thinking	Strategic Planning	Risk Management	Technology Skills	Governance	Leadership/Change management	Stakeholder Relations & Communications
	X	X added	X	X added	X added	X	X	X	X	X	X	X	X

Name

Signature

Date

Guide to Knowledge Skills & Experience Self-assessment Suggested Scoring Pattern				
Characteristic	Score 0 if...	Score 1 if...	Score 2 if...	Score 3 if...
Finance	You have no experience	Can explain basic finance concepts. Can contribute to group discussions	Ability to read financial statement. Has basic understanding of financial management	Completion of finance specific training or professional development.
Human Resources	You have no experience	You are familiar with Human Resources as it pertains to your role as an employee.	You have managed/directed employees and have experience preparing and administering formal written performance appraisals.	You have lead a team of managers/directors and have experience administering executive compensation.
Regulatory Knowledge	You have no experience	Aware of legislation, regulations, Standards, bylaws that govern healthcare professionals	Knowledge of College functions and issues facing Council	Prior experience working within a regulatory framework
Clinical Experience	You have no experience	You are/were a registered health care professional with less than 3 years' experience	You are/were a registered health care professional with 5 – 10 years' experience	You are/were a registered health care professional with more than 10 years' experience
Leadership/Change Management	You have no experience	Embraces change and innovation Demonstrates a commitment to learning and seek out opportunities to improve Can contribute to group discussions	Provided leadership and support through organization change Identifies and reasons for and benefits of, change to stakeholders Are inclusive and respectful.	Substantive prior experience serving in leadership roles

Guide to Knowledge Skills & Experience Self-assessment				
Suggested Scoring Pattern				
Characteristic	Score 0 if...	Score 1 if...	Score 2 if...	Score 3 if...
Health System Knowledge	You have no experience	Know where to obtain further guidance Can contribute to group discussions	Understanding of the workings of government and ability to access government officials	Prior employment experience in health care administration Experience working in healthcare system in Ontario Experience collaborating as part of an interprofessional group
Strategic Planning	You have no experience.	You are familiar with strategic planning concepts Can contribute to group discussion	You have contributed as a stakeholder to strategic planning efforts Can distinguish between strategic and operational issues	Substantive prior experience on a government board and you have lead or been responsible for creating or approving a strategic plan
Risk Management	You have no experience	You can explain basic risk management concepts. Knows where to obtain further guidance	Can identify and prioritize risk. Can articulate how risk should be managed and how to achieve right balance	Completion of risk management specific training. Prior employment in business, finance, communications or public administration

Guide to Knowledge Skills & Experience Self-assessment				
Suggested Scoring Pattern				
Characteristic	Score 0 if...	Score 1 if...	Score 2 if...	Score 3 if...
Technology Skills	You have no experience	Understand how to keep information secure and confidential in an electronic or online environment Basic internet skills, use of videoconference software	Experience using presentation slides including graphics and multimedia components Can identify how technology impacts risk and strategy Able to troubleshoot and resolve technology issues	Prior experience working in the technology field
Governance	You have no experience	Can explain governance concepts to colleagues Can contribute to group discussions	Can identify and explain governance concepts to Council. Can challenge colleagues where appropriate. Ability to contribute to technical discussions on governance issues	Substantive prior experience with a governance board acquired through board or committee service. Have completed of a governance specific training or professional development.
Continuous Quality Improvement (CQI)	You have no experience	Can explain the fundamental concepts of CQI. Can contribute to group discussions No recent experience in any CQI initiatives (e.g., more than three years)	Can explain the fundamental and mid-level CQI concepts Can contribute to group discussions Has participated in a CQI initiative (e.g., within the last three years)	Can lead advanced level discussions on CQI initiatives Has lead a CQI initiative within the last two years

Guide to Knowledge Skills & Experience Self-assessment				
Suggested Scoring Pattern				
Characteristic	Score 0 if...	Score 1 if...	Score 2 if...	Score 3 if...
Critical Thinking		Ability to analyse and interpret data	Appropriately question whether the College is collecting the right data for regulatory purposes	Prior experience conducting research in the public and/or private sectors
Stakeholder Relations/ Communications	You have no experience	Identify key stakeholders and their relationship with the College	Can identify the needs of key stakeholders and their relationship with the College Articulate techniques to better engage with stakeholders Ability to communicate a position to the intended audience	Previously held a management position requiring public and government input and oversight

ITEM 4.7

STRATEGIC PLANNING COMMITTEE (SPC) REPORT

February 25, 2022 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Ferguson

Professional Members (Council):

Matthew Doyle
Sasha Kozera-Faye
Peter Ferguson
Peter Stavropoulos

Professional Members (Non-Council):

Nosheen Chaudry

Public Appointees:

Jim Daley
Alan Katz

ROLE OF THE COMMITTEE

The Strategic Planning Committee's role is to identify key strategic goals over a three-to-five-year period making recommendations to Council on those goals and actions. In addition, the committee shall make recommendations to Council on any matter within its responsibility referred to it by Council or the Executive Committee.

MEETINGS

Since reporting at the October 29th meeting of Council the SPC has met on the following dates:

November 11th 2021 – virtual meeting

January 21st 2022 – hybrid meeting

As part of the presentation to Council on 29th October, the SPC report recommended having two sub- committees working towards a common goal of developing a strategic plan for the next 3-5 years. The Plan shall be available to Council for consideration on 25th February.

The Sustainability Stream of the Strategic Planning Committee (Nosheen Chaudry, Matt Doyle, Sasha Kozera and Allan Katz) met on December 2, 2021 and January 6, 2022 to propose its version of the organization's mission, vision, and values, as well as to draft the College's sustainability priorities for the next three to five years.

The strategic focus on governance and financial oversight, communications and community engagement, modernization and innovation and continuous improvement is intended to serve the College well for the foreseeable future.

The Working Competencies Group (comprised on Ed Chung, Jim Daley, Peter Ferguson, Millicent Hill, Tracy Oliver, Patrick Rainville, Peter Stavropoulos) met virtually on November 22nd 2021, December 2nd 2021 and January 13th 2022.

The CWG purpose is to assist with the development of additional competencies which may serve to complement the new Profile of Competencies document that will come into effect in June 2022. This is in response to the more expansive issues related to a changing landscape within the professions of chiropody and podiatry and the prospect of a Podiatry Model in the future which forms the second part of the draft strategic plan.

DECISION/OUTCOMES

Both the Sustainability Stream and the Competencies Working Group focus was to develop a strategic plan based on the following parameters:

Vision

Mission Statement

Values

Strategic Objectives

While the two work groups worked independently, it was remarkable to see the similarities in the separate preliminary drafts of the vision, mission statement, values and strategic objectives.

On January 21st 2022, the SPC met as a whole and worked through the documents and revisions produced by each group, reaching agreement on a final draft document. This draft document was reviewed and supported by the consultant retained by the College, Ms. Deanna Williams

who has, and continues to assist, the SPC through this process. The SPC shall be presenting these documents to Council at the 25th February Council meeting for consideration.

NEXT MEETING

The CWG continues to meet and is working through specific areas of competencies including surgical, diagnostic and wound care best practices. This will be made available to Council as soon as possible.



College of Chiropractors of Ontario

STRATEGIC PLAN & OBJECTIVES

Strategic Plan

2020-2025

Vision

The College demonstrates effective regulation of a podiatry profession dedicated to the delivery of regulatory excellence to contribute to the foot health of all Ontarians.

Mission Statement

The College ensures Ontarians have access to comprehensive foot care of the highest professional podiatry standards to best meet the foot health needs of Ontarians and demonstrates its commitment to continuous improvement in regulatory oversight.

Values

Service: The College commits to serve the public interest in all its regulatory activities.

Fairness and Impartiality: The College ensures its regulatory processes and procedures adhere to the law including principles of procedural fairness and impartiality. Everyone is treated equitably with dignity, courtesy and respect.

Integrity: The College's commitment to uphold the values of honesty, trust, fairness, respect, responsibility, and courage is foundational in supporting all the other values to which the college is committed.

Transparency and Accountability: The College's regulatory processes and policies are clear; are informed by appropriate stakeholder consultations and are based upon verifiable information and data. The College's mandate is accessible and clearly stated. The status of members and accredited facilities are current and accessible to all stakeholders.

Innovation: The College is committed to continuously seek opportunities for innovation and creativity in fulfilling its mandate as a professional health regulator, to protect the public.

Collaboration: The College will engage with all stakeholders to ensure regulation of a podiatry model that adheres to best practices and optimizes accessibility for Ontarians.

Strategic Objectives

2020-2025

Objectives: The Objectives will allow the College to focus on its work for the next 3-5 years.

Right Touch Regulation: The College regulates according to risk of harm to the public, applying its greatest resources to the greatest risk. The College assesses and continues to improve on regulatory and governance processes to enhance public trust and promote the use of best available data and evidence in decision-making.

Governance Oversight: The College will ensure that best, leading and emerging governance practices are adopted by its Council and Committees. This will include a skills-based competency framework for professional member recruitment, current and modern new member onboarding and continuing education as well as the regular evaluation of council and the College's governance structure.

Financial Oversight: The College will maintain financial sustainability by engaging a rigorous annual budgeting process with regular follow-up including exploring cost-saving opportunities in collaboration with other professional health regulators.

Communications and Community Engagement: The College will create a communications and community engagement strategy to support the delivery of its strategic plan. The strategy will emphasize transparency in communications in all interactions with the public and professional membership.

Modernization and Innovation: The College will effectively regulate members of the College with the goal that members will practice to their full scope of demonstrated competencies as determined by the College. The College's regulatory approach will support a model of footcare delivery that is reflective of best Canadian practices in podiatry. In supporting this model of podiatry, the College will ensure there is enhanced choice for patient access to a comprehensive range of proven and effective footcare services, reducing pressure on the healthcare system while avoiding negative health and lower limb outcomes. The College, in its role as a healthcare stakeholder, acknowledges and will actively support access to care in extending podiatry services to equity seeking groups such as indigenous and rural populations for improved health.

Continuous Improvement: The College will continuously improve its monitoring and measuring of compliance with the standards of practice in podiatry. Where required, the College will work with stakeholders to improve footcare delivery in Ontario with nimbleness to pivot, adapt and react to changes as necessary in a responsible manner.

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Vision

The College demonstrates effective regulation of a podiatry profession dedicated to the delivery of regulatory excellence to contribute to the foot health of all Ontarians.

Mission Statement

The College ensures Ontarians have access to comprehensive foot care of the highest professional podiatry standards to best meet the foot health needs of Ontarians and demonstrates its commitment to continuous improvement in regulatory oversight.

Values**Service:**

The College commits to serve the public interest in all its regulatory activities.

Fairness and Impartiality:

The College ensures its regulatory processes and procedures adhere to the law including principles of procedural fairness and impartiality. Everyone is treated equitably with dignity, courtesy and respect.

Integrity:

The College's commitment to uphold the values of honesty, trust, fairness, respect, responsibility, and courage is foundational in supporting all the other values to which the college is committed.

Transparency and Accountability:

The College's regulatory processes and policies are clear; are informed by appropriate stakeholder consultations and are based upon verifiable information and data. The College's mandate is accessible and clearly stated. The status of members and accredited facilities are current and accessible to all stakeholders.

Innovation:

The College is committed to continuously seek opportunities for innovation and creativity in fulfilling its mandate as a professional health regulator, to protect the public.

Collaboration:

The College will engage with all stakeholders to ensure regulation of a podiatry model that adheres to best practices and optimizes accessibility for Ontarians.

ITEM 4.8

COUNCIL BRIEFING NOTE RE COLLEGE 2022 OPERATIONAL BUDGET

Background:

We are now in receipt of final financial statements for the 2021 Operating Budget and in a position to present the 2022 Operating Budget for Council's consideration and approval. We will retain the College's auditors, Hilborn LLC, to conduct an audit of the 2021 financial statements and the audit will be presented at the June 2022 Council meeting for Council's consideration and approval.

Although we are in a surplus position in the 2021 Operating Budget, that budgeting is, unfortunately, not sustainable for a number of reasons explained in greater detail below. There are several critical expenditures that must be implemented in 2022 and the 2022 Operating Budget reflects these necessary expenses.

The 2022 Budget will address funding for the following:

(1) Staffing:

Additional staffing is needed for an administrative position to comply with the CPMF and to provide assistance to the Registrar as well as to provide general administrative support to the College. We must remain committed to providing competitive salaries and benefits to recruit and attract qualified candidates with prior experience in professional health regulation and education. Some travel for the Registrar and staff to attend conferences, professional development opportunities and speaking engagements is anticipated in keeping with usual practice among the RHPA regulators.

(2) IT hardware and software:

Our server is past its best before date and requires replacement in 2022. We intend to move forward with replacing hardware as well as considering new providers. In addition, we must continue to customize iMIS, our member platform, as such customization is required for this type of off-the-shelf platform. The CPMF has also given rise to the need for more customization to pull data as required. New concerns within healthcare related fields about hacking threats have also been brought to the College's attention and will require additional expenditures to protect against this threat. Further, we have significant improvements planned for the College website to ensure it is more accessible and user friendly. To this end, we will hire a new webmaster and web service.

(3) Pharmacology Expert:

As a result of the MOH's recent approval of the amendments to the Drug Regulation that will come into effect in January 2023, the College must retain an expert to conduct a review of the new regulation and establish competencies. This will be necessary for the

College to determine what education and competencies of members is required for prescribing under the new regulation.

(4) Return to some in-person meetings:

While we will continue to hold committee meetings virtually for the most part as an effective savings, there is some opportunity for in-person or hybrid meetings to facilitate relationship-building among committee and Council members. We also plan to introduce “business meetings” in 2022 for ICRC and Discipline Committee as well as for Quality Assurance. These are planned to be in-person as well, including associated travel, attendance and catering costs.

(5) Committee Costs and Professional Development of Council, Committee Members and Staff:

Ongoing education/professional development for Council, Committee Members and staff in matters relating to professional regulation is foundational and necessary to ensure the College fulfills its mandate to protect the public by maintaining currency of modern Professional Regulation. Going forward, Council meetings will include guest speakers who will cover relevant topics to better Council’s ability to govern. In addition, new Council and Committee members will attend external training through the Health Profession Regulators of Ontario (HPRO).

(6) Membership in Relevant Organizations:

RHPA colleges are expected to belong to a number of organizations to foster important connections with key stakeholders and to keep abreast of relevant and emerging issues in modern professional regulation. The CPMF requires cooperation and collaboration with stakeholders by regulators. The College has not pursued such memberships in the past with the exception of its membership in HPRO. This needs to be addressed not only to align with the expectations of the MOH as set out in the CPMF but also for the practical reasons set out above. The College has applied to become a member of the Ontario Hospital Association (OHA), which application will be considered at the OHA’s March board meeting. A number of other RHPA colleges are members of the OHA because some of their membership works in a hospital setting, just as some of our members do. In addition, as a health profession regulator, our members work as an important part of healthcare teams that include health care providers in a hospital setting. Further, the OHA has significant resources available to members at little or no additional cost including ongoing professional development in a variety of relevant topics and it provides critical support with government relations that will be welcome to our College.

The College will also become a member in the Council on Licensure, Enforcement and Regulation (CLEAR) and Canadian Network of Agencies for Regulation (CNAR), both regulatory bodies that most RHPA colleges belong to and participate in/attend the annual conferences. The annual fees in belonging to these bodies is modest but such memberships allow us to attend conferences at reduced rates.

(7) Exam Fees 2022:

The College has undertaken considerable additional costs in recent years to retain new psychometrists. In addition, the Exam Committee has worked diligently to improve the quality of the College's exams. This Council meeting, a bylaw amendment is proposed to increase exam fees for the first time since 2015. If approved in principle at the February 25th Council meeting the proposed bylaw amendment will be circulated to the membership for comment for 60 days. Following that, a Special Council meeting will be called in the spring, prior to the June exam, for Council to consider the feedback on the proposed amendment and vote whether to approve a bylaw amendment that will increase the exam fees to ensure the cost of the exams is recovered.

Public Interest Rationale for Decision:

The College must remain financially stable in order to fulfil its legislative mandate to protect the public. In addition to the operating budget, the College has funds that can be accessed to cover operating expenses should the annual revenue be insufficient to cover necessary expenses or unexpected costs. There is no requirement that the College's Operating Budget be restricted to its revenues for any given year, particularly where there are needed expenditures identified. While it will likely be feasible in future operating budgets for the College to meet its obligations within the limits of its annual revenue, it is critically important that the College have the financial resourcing to address past years of underfunding. With the introduction of the CPMF and the additional costs and obligations stemming from it, the College must align with the MOH's expectations. These expectations, and their costs consequences, have been included in the 2022 Operating Budget.

Recommended Motion:

That the proposed 2022 Budget be approved by Council.

Mover: _____

Seconder: _____

COLLEGE OF CHIROPODISTS OF ONTARIO

Year: January 1, 2021 to December 31, 2021

	Budget
	2022
REVENUE	
Membership Fees	\$ 1,434,600
Application Fees	3,000
Examination Fees	80,000
Incorporation Fees	102,000
First time Registrant - Fee	12,000
Late fee penalty	400
	1,632,000
Other Revenue	
Interest	7,000
Miscellaneous (Incl. Inhalation and Sedation Courses)	26,000
Legal Recovery	150,000
Total Revenue	1,815,000
EXPENSES	
Committee expenses	204,200
Special projects	220,000
Salaries and benefits	600,000
Legal Fees	510,000
General Administration	280,704
Total Expenses	1,814,904
Net income (deficit) for the year	\$ 96

Schedule of Expenses
Committee Expenses

	Budget
	2022
Council	27,000
ICRC	15,000
ICRC inspector / investigator costs	56,000
Discipline/Fitness to Practice	22,000
Executive	25,000
Registration	1,200
Patient Relations	1,800
Quality Assurance	25,000
Standing Drug Committee	12,500
Technical Committee	200

Strategic Planning Committee	5,000
Registrars Compensation Committee	1,000
Audit	1,000
Competency Working Group	5,000
Standards and Guidelines	6,500
Total Committee Expenses	204,200

Special Projects

MESPO	-
Inhalation/Sedation Course	8,730
Registration Examination	115,000
Consulting -General	10,000
Database development	86,270
Total Special Projects	220,000

Salaries and Benefits

Salaries and Benefits	600,000
Total Salaries and Benefits	600,000

Legal Fees

General administration	70,000
ICRC	70,000
Discipline	345,000
Council and other committees	25,000
Total Legal Fees	510,000

General Administration

Accounting and Audit	35,000
Credit Card Charges	36,000
Bank Charges	2,000
Capital Assets Depreciation	8,600
Computer software	7,500
Insurance	17,500
Registrar Travel	6,000
Federation Expenses	8,475
Resource Materials	-
Membership Fees	10,000
Rent	87,729
Photocopying, Printing	3,000
Postage and Courier	500
Telephone	7,600
Zoom licenses	2,300
General Expenses	5,000
Office Supplies	2,500
Computer, database & website mtce	25,000

Equipment Rentals/Service Contracts	8,000
Professional Development	8,000
Total Other Expenses	280,704
Total Expenses	1,814,904
Surplus (Deficit)	\$ 96

Budget	Actual
2021	2021
\$ 1,247,800	\$ 1,316,900
9,300	3,275
79,550	77,250
78,450	101,400
35,700	12,100
3,000	400
1,453,800	1,511,325
11,880	6,463
15,300	26,550
108,000	202,050
1,588,980	1,746,388
174,900	159,907
148,792	199,007
485,416	515,194
400,350	534,225
218,627	255,895
1,428,085	1,664,228
\$ 160,895	\$ 82,160

797 members x \$1800.00

estimate based on 2021 actuals

estimate based on 2021 actuals

estimate based on 2021 actuals

estimate based on 2021 actuals

estimate based on 2021 actuals

We hope to achieve similar recovery but have conservatively estimated

Hybrid and in-person

iMIS customization, website upgrades, CPMF

New administrative position; competitive salary and benefits

Estimate with marginal increase to legal fees

Estimate with expected increases post-covid

Budget	Actual
2021	2021
12,000	11,351
24,250	11,057
58,000	55,184
19,700	21,749
14,200	32,686
1,025	-
2,950	-
26,300	14,654
500	-
875	200

Hybrid council meetings in 2022

Virtual panel meetings in 2022

Virtual hearings in 2022

Anticipated reduced need for special executive meetings in 2022

1 new application and meeting of committee

QAC assessments yearly with 5% target

Drug Regulation Amendment related work

2,775	5,169	Executive Committee approved additional expenditures to hire cons
2,425	438	
1,500	875	
-	-	Sub-committee of SPC with ongoing work
8,400	6,544	
174,900	159,907	
-	-	
8,792	8,730	
85,000	114,913	
-	9,258	
55,000	66,107	iMIS customizations required - ongoing
148,792	199,008	
485,416	515,194	
485,416	515,194	
45,000	89,601	
115,000	72,763	
230,350	344,778	
10,000	27,083	
400,350	534,225	Estimate based on 2021 actuals
19,000	40,313	Anticipated reduced auditing expenses from 2021
28,000	35,306	
1,700	1,918	Estimate based on 2021 actuals
8,000	8,538	
4,500	6,906	
15,000	17,264	
-	-	CLEAR and CNAR Conferences, miscellaneous
8,475	8,475	
200	-	
2,600	2,117	LSO fees for 3 staff, COCOO fees for PA, OHA, CLEAR and CNAR
89,952	87,729	Actual Costs
500	3,103	
700	510	
9,000	7,535	
900	-	Reliance on Zoom for regular College business and access to live t
2,000	6,998	
2,800	2,239	
15,000	18,731	

	9,500		7,156
	800		1,058
	218,627		255,896
	1,428,085		1,664,230
\$	160,895	\$	82,158

Estimate based on 2021 actuals
4 staff x \$2000 PD estimate. Ongoing need to ensure currency in pi

sultant. Ongoing work of SPC to achieve objectives in 2022