



COLLEGE OF  
**Optometrists**  
OF ONTARIO

**COUNCIL MEETING**

**THURSDAY, JUNE 21, 2018  
AT 9:00 A.M.  
(PUBLIC INVITED TO ATTEND)**

**AT THE COLLEGE OFFICE  
65 ST. CLAIR AVE. E., SUITE 900  
TORONTO ON**



Agenda Item	Page No.	Action Required	Item Lead	Approx. Time (mins.)
1. Call to Order/Attendance			Hemami, P.	1
2. Adopt the Agenda	2	Decision	Hemami, P.	1
2.1 Conflict of Interest Declaration				
3. Consent Agenda	5			
3.1. Minutes of Prior Council Meetings		Decision	Hemami, P.	5
3.1.1. April 9, 2018	6			
3.1.2. Motions and Actions Items Arising from the Minutes	12			
3.2. Reports		Receive for Information /Decision	Hemami, P.	10
3.2.1. Committee Reports				
3.2.1.1. Executive Committee	15			
3.2.1.2. Patient Relations	22			
3.2.1.3. Quality Assurance				
3.2.1.3.1. QA Panel	23			
3.2.1.3.2. CP Panel	26			
3.2.1.3.3. QA Subcommittee	27			
3.2.1.4. ICRC	28			
3.2.1.5. Registration	31			
3.2.1.6. Fitness to Practise	37			
3.2.1.7. Discipline	38			
3.2.1.8. Governance Committee	48			
3.2.2. Registrar's Report	50			
4. Financial Matters	52	Receive for Information /Decision	Quaid, P.	20
4.1. Treasurer's Report	53			
4.2. Financial Dashboard	54			
4.3. Balance Sheet and Income and Expenditure Report – to April 30, 2018	55			
5. Election of Executive Committee Member		Decision	Hemami, P.	10
6. Motions Brought Forward from Committees	57			
6.1. Quality Assurance Committee				

6.1.1. Clinical Practice Panel	58	Decision	Hrynychak, P.	20
6.1.2. Quality Assurance Subcommittee	62	Decision	Pekilis, E.	20
6.2. Governance Committee	64	Decision	Hemami, P.	30
6.3. Executive Committee				
6.3.1. Statutory Committee Appointments	66	Decision	Hemami, P.	5
6.3.2. By-law Amendments under <i>Protecting Patients Act</i>	67	Decision	Hemami, P.	5
6.3.3. Patient Relations Fund	141	Decision	Rivait, B.	20
7. Injunction Appeal – Update	143	Receive for Information	Garshowitz, P.	10
8. Legislative Updates		Receive for Information	Hemami, P.	5
8.1. Spousal Exemption				
8.2. QA Regulation				
8.3. Designated Drugs Regulation				
9. Governance Recommendation - Strategic Planning		Discussion	Hemami, P.	20
10. Correspondence		Receive for Information		
10.1. Memo to Colleges – Proclamation of certain sections of the <i>Protecting Patients Act</i> and new regulations under the <i>RHPA</i> , dated April 20, 2018	144			
10.2. Letter from OEBC, dated May 3, 2018	157			
10.3. FHRCO 2017-2018 Highlights	159			
11. List of Acronyms	167			
12. Dates of Upcoming Council Meetings				
12.1. Tuesday, September 25, 2018				
12.2. Friday, January 18, 2019				
12.3. Wednesday, April 24, 2019				
12.4. Monday, June 24, 2019				
13. Adjournment			Hemami, P.	

## **Vision and Mission**

**Vision: The best eye health and vision for everyone in Ontario, through excellence in optometric care.**

**Mission: To serve the public by regulating Ontario's optometrists. The College uses its authority to guide the profession in the delivery of safe, ethical, progressive and quality eye care at the highest standards**

## **Strategic Plan Update 2015**

**The following overall strategic objectives will drive the College's operating strategies:**

**MAINTAIN HIGHEST STANDARDS BY PRACTITIONERS TO ENSURE PUBLIC PROTECTION AND QUALITY CARE, INCLUDING EVOLVING SCOPE OF PRACTICE RE: EYE HEALTH CARE**

**THE COLLEGE REQUIRES GREAT PARTNERSHIPS TO GET THINGS DONE: ENHANCE INTERPROFESSIONAL AND STAKEHOLDER COLLABORATION**

**GOVERNMENT MUST SEE COLLEGE AS AN ASSET AND RESOURCE: INFLUENCE AND COLLABORATE WITH GOVERNMENT TO IMPACT LEGISLATION AND REGULATION**



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# 3 / CONSENT AGENDA

- 3. Consent Agenda
  - 3.1. Minutes of Prior Council Meetings
    - 3.1.1. April 9, 2018
    - 3.1.2. Motions and Actions Items Arising from the Minutes
  - 3.2. Reports
    - 3.2.1. Committee Reports
      - 3.2.1.1. Executive Committee
      - 3.2.1.2. Patient Relations
      - 3.2.1.3. Quality Assurance
        - 3.2.1.3.1. QA Panel
        - 3.2.1.3.2. CP Panel
        - 3.2.1.3.3. QA Subcommittee
      - 3.2.1.4. ICRC
      - 3.2.1.5. Registration
      - 3.2.1.6. Fitness to Practise
      - 3.2.1.7. Discipline
      - 3.2.1.8. Governance Committee
    - 3.2.2. Registrar's Report



**College of Optometrists of Ontario  
Council Meeting  
April 9, 2018  
DRAFT #1**

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**April 9, 2018**

**Attendance:**

Dr. Pooya Hemami, President  
Dr. Richard Kniaziew, Vice President  
Dr. Patrick Quaid, Treasurer  
Dr. Linda Chan  
Ms. Maureen Chesney  
Dr. Bill Chisholm  
Dr. Patricia Hrynchak  
Mr. Bashar Kassir  
Mr. Hsien Ping (Albert) Liang

Dr. Dino Mastronardi  
Ms. Irene Moore  
Dr. Kamy Morcos  
Ms. Luisa Morrone  
Dr. Christopher Nicol  
Dr. Areef Nurani  
Mr. Brian Rivait  
Mr. John Van Bastelaar

**Regrets:**

Ms. Ellen Pekilis

**Staff:**

Dr. Paula Garshowitz, Registrar  
Ms. Hanan Jibry  
Ms. Mina Kavanagh

Mr. Justin Rafton  
Mr. David Whitton  
Ms. Bonny Wong

1 **1. Call to Order:** Dr. Hemami called the meeting to order at 9:03 a.m. Dr. Hemami welcomed everyone  
2 in attendance, including guests, to the meeting. All present were reminded that recording of the  
3 meeting is not allowed.  
4

5 **2. Adoption of the Agenda:** A draft agenda was circulated prior to the meeting. One item was added to  
6 the agenda: item number 5.3, consisting of two Registration Committee motions.  
7

8 Moved by Dr. Quaid and seconded by Ms. Moore **to adopt the agenda as amended.**

**Motion carried**

9  
10  
11 **a. Conflicts of Interest:** Dr. Hemami asked Council members if anyone had a conflict of interest with any  
12 item on the day's agenda; no conflicts of interest were declared.  
13

14 **3. Adoption of the Consent Agenda:** A draft consent agenda was circulated prior to the meeting. After  
15 having confirmed that all councillors had read the consent agenda materials, one item was removed for  
16 further discussion. The following items were included in the consent agenda:  
17

18 3.1. Minutes of Prior Council Meetings  
19 3.1.1. January 15, 2018

- 20 3.1.2. January 31, 2018 Teleconference
- 21 3.1.3. Motions and Actions Items Arising from the Minutes
- 22 3.2. Reports
- 23 3.2.1. Committee Reports
- 24 3.2.1.1. Executive Committee
- 25 3.2.1.2. Patient Relations
- 26 3.2.1.3. Quality Assurance
- 27 3.2.1.3.1. QA Panel
- 28 3.2.1.3.2. CP Panel
- 29 3.2.1.3.3. QA Subcommittee
- 30 3.2.1.4. ICRC
- 31 3.2.1.5. Registration
- 32 3.2.1.6. Fitness to Practise
- 33 3.2.1.7. Discipline
- 34 3.2.1.8. Governance Committee
- 35 3.2.2. Registrar's Report
- 36

37 Moved by Dr. Kniaziew and seconded by Dr. Chan **to adopt the consent agenda.**

**Motion carried**

38  
39  
40 **Items removed from the consent agenda**

- 41
- 42 a) ICRC: A report was circulated prior to the meeting. The chair of the Inquiries, Complaints and
- 43 Reports Committee, Dr. Annie Micucci, spoke to Council about some recommendations the
- 44 Committee has regarding the College's conflict-of-interest provisions, which came into force
- 45 with the 2014 Professional Misconduct Regulation. The ICRC has consistently fielded complaints
- 46 that relate, in particular, to the independent contractor provisions. It seems clear that members
- 47 for whom these provisions apply are not well informed of their requirements. To avoid future
- 48 complaints of this nature, the Committee believes the College should communicate more
- 49 explicitly with members about conflict of interest, in particular about when an independent
- 50 contractor agreement is needed and how it applies. Council considered how best to educate any
- 51 concerned members; possibilities include presentations, webinars, email blasts, and print
- 52 communications.
- 53

54 **Action Item:** Staff will work with ICRC to produce a plain language communication for members with  
55 respect to independent contractor and conflict of interest.

56  
57 The draft minutes of the January 15, 2018 in camera session were circulated during the meeting. A typo  
58 was identified in the attendance portion of the minutes.

59  
60 Moved by Dr. Kniaziew and seconded by Dr. Quaid **to approve the in camera minutes of the January 15,**  
61 **2018 Council meeting.**

62 **Motion carried**

63

64 Dr. Hemami advised councillors that, following the meeting, they would receive a survey asking for a  
65 self-assessment. The College wants to know where meetings could be strengthened, and what types of  
66 training might be offered.

67

68 **4. Financial Matters:**

69 **4.1 Treasurer’s Report:** Dr. Patrick Quaid presented his first report as College Treasurer. Dr. Quaid  
70 thanked Ms. Moore, Dr. Hemami, and College staff for their supervision of the College’s finances. Dr.  
71 Quaid outlined the plans for his tenure, which include enhancing dashboard metrics, reducing merchant  
72 fees, and securing government rates for activities related to Council and committee work. Dr. Quaid  
73 expressed his commitment to ensuring that the public and members of the College have a transparent  
74 view of how the College’s funding is being used.

75

76 **4.2 Financial Dashboard:** The financial dashboard was circulated prior to the meeting. It has been  
77 updated to include the January 2018 financial information, including the College’s investment funds, and  
78 indicates that the College’s financial position continues to be strong.

79

80 **4.3 Balance Sheet and Income and Expenditure Report – to January 31, 2018:** Both Discipline legal and  
81 ICRC legal line items remain high, reflecting an increase in complex cases before ICRC that require legal  
82 advice, and a higher number of referrals to the Discipline Committee by ICRC.

83

84 *Ms. Ildiko Jurina Cleary and Mr. Terry Lee, of Tapp & Company LLP, College auditors, joined the*  
85 *meeting.*

86

87 **4.4 Financial Statements:** Ms. Jurina Cleary presented an overview of the 2017 draft audited financial  
88 statements. The 2017 audited financial report shows that the College ended the year with an operating  
89 surplus of \$359,797.

90

91 *Ms. Jurina Cleary and Mr. Lee left the meeting.*

92

93 Moved by Dr. Kniaziew and seconded by Dr. Chisholm **to approve the 2017 financial statements.**

94 **Motion carried**

95

96 Council is required annually to authorize a second individual on College staff to sign banking documents  
97 and instruments.

98

99 Moved by Dr. Quaid and seconded by Dr. Kniaziew **to authorize, by resolution, Ms. Hanan Jibry,**  
100 **Assistant Registrar, as signing officer for the College with respect to banking documents and**  
101 **documents and instruments requiring the signature of the College.**

102 **Motion carried**

103

104 Council is required annually to authorize the Registrar to provide direction to the College’s investment  
105 advisor.

106

107 Moved by Dr. Quaid and seconded by Dr. Kniaziew **to authorize, by resolution, the Registrar to provide**  
108 **direction to the College’s investment advisor.**

109 **Motion carried**

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**5. Motions Brought Forward From Committees:**

**5.1 Quality Assurance**

**5.1.1 Clinical Practice Panel:** The proposed motion was circulated prior to the meeting. The Panel proposed minor edits to two standards of practice. Once approved by Council, the OPR will be updated and members notified of the changes. For OPR 4.2 Required Clinical Information, a minor wording change was proposed to confirm that government-issued photo identification is required for patient verification when filling out third-party forms. OPR 6.5 Contact Lens Therapy was amended to require assessment of corneal topography when indicated.

Moved by Dr. Kniaziew and seconded by Dr. Quaid **to approve the publication of amendments to the following sections of the Optometric Practice Reference (OPR):**

- **4.2 Required Clinical Information**
- **6.5 Contact Lens Therapy**

Council discussed the proposed amended wording of 6.5 Contact Lens Therapy, specifically whether “when indicated” was appropriate as it relates to corneal topography in the continuing care of contact lens patients.

Amendment to the motion: Moved by Dr. Nurani and seconded by Dr. Mastronardi **to remove 6.5 Contact Lens Therapy from the main motion and send back to the Panel for further discussion.**

**Motion carried**

**Vote on amended main motion**

**Motion carried**

**5.2 Governance:** The proposed motion was circulated prior to the meeting. The College recently submitted to a third-party governance review, after which several recommendations were presented to the committee, including suggestions for the evolution of its financial governance. Currently, the College relies on a treasurer position on Council for the custody of its funds and securities and for the accounting of all receipts and disbursements, as well as its books and financial records, among other duties. The Governance Committee has recommended that the function of treasurer be transferred to a qualified staff member, with Council maintaining financial oversight via an appropriately constituted committee. This would bring Council in line with best practices for how oversight boards should function. Council discussed the benefits of such a restructuring.

Moved by Dr. Hemami and seconded by Dr. Kniaziew **that Council consider transitioning the function of treasurer, in principle, to a qualified staff member and maintain financial oversight via an appropriately constituted committee.**

**Motion carried**

**5.3 Registration:** The proposed motions were added to the agenda at the opening of the meeting. Applicants for registration to the College are required to complete a jurisprudence exam set or approved by the College. This exam is reviewed periodically by College staff and is approved by Council annually.

156  
157 Moved by Dr. Quaid and seconded by Dr. Kniaziew **that Council approve the College jurisprudence**  
158 **exam for 2018 while proposals are still under review for an online jurisprudence seminar and exam.**  
159 **Motion carried**  
160

161 Applicants for registration to the College are required to complete a standards assessment examination  
162 set or approved by the College. The standards assessment exam is reviewed by the Registration  
163 Committee and is approved by Council annually. Council considered issues surrounding the exam, such  
164 as oversight and transparency, and debated the value of a potential alternative national exam.  
165

166 Moved by Dr. Quaid and seconded by Dr. Mastronardi **that Council approve the May 2018 Optometric**  
167 **Examining Board of Canada (OEBC) written exam and OSCE as the standards assessment examination**  
168 **set or approved by the College for registration purposes.**  
169

170 **Amendment to the Motion:** Moved by Dr. Kniaziew and seconded by Dr. Nurani **to accept the National**  
171 **Board of Examiners in Optometry (NBEO) exam as a standards assessment set or approved by the**  
172 **College for registration purposes.**  
173

174 Council discussed this amendment and decided that it did not possess any information on which to base  
175 a decision on this motion. Accordingly, Dr. Kniaziew and Dr. Nurani agreed to withdraw the amendment.  
176 **Motion to amend the motion withdrawn**  
177

178 **Vote on the original motion**  
179 **Motion carried**  
180

181 The Registration Committee will continue to review available options for standards assessment for the  
182 purposes of registration and will bring its recommendations to Council.  
183

184 **6. Presenting the “Virtual Boardroom”:** Two members of College staff, Ms. Bonny Wong, Coordinator,  
185 Quality Programs, and Mr. Justin Rafton, Policy Analyst, introduced a new communications tool for  
186 Council and committee members to use when engaging in College work. They explained its many  
187 features and demonstrated to Council how the tool should be accessed and navigated.  
188

189 **7. Injunction Application – Update:** Dr. Garshowitz updated Council on the application by the College of  
190 Optometrists of Ontario and the College of Opticians of Ontario to seek an injunction preventing  
191 Essilor/Clearly from unlawfully dispensing prescription eyewear over the internet. In January 2018, the  
192 Ontario Superior Court issued a decision in favour of the colleges. Essilor appealed the decision, and a  
193 stay of the injunction was granted by the courts until the appeal is heard. The date of the appeal has yet  
194 to be determined.  
195

#### 196 **8. Legislative Updates:**

197 **8.1 Spousal Exemption:** These provisions have been submitted to the Ministry of Health and Long-Term  
198 Care; College staff has had recent discussions with the Ministry, but there are no developments yet to  
199 report.  
200

201 **8.2 QA Regulation:** This regulation amendment has been submitted to the Ministry of Health and Long-  
202 Term Care; the College has yet to hear any feedback. The QA Subcommittee is discussing the practice  
203 assessment process, which might result in further changes.

204

205 **8.3 Designated Drugs Regulation:** This regulation amendment has been submitted to the Ministry of  
206 Health and Long-Term Care; the College has yet to hear any feedback.

207

208 **8.4 Proposal for New Regulations under the RHPA:** In March of this year, the College submitted its  
209 feedback to the Ministry on the new regulations under the RHPA. The College addressed the following  
210 issues: patient criteria under subsection 1(6) of the *Health Professions Procedural Code*; specifying  
211 additional information required for posting on the register; and setting out the criminal offences that  
212 result in mandatory revocation of a member's certificate of registration.

213

214 **8.5. Health Sector Payment Transparency Act:** The Ministry's proposal for a new regulation under the  
215 HSPTA was circulated prior to the meeting. The College did not submit a response to this proposal,  
216 however it supports all transparency initiatives.

217

## 218 **9. List of Acronyms**

219

## 220 **10. Dates of Upcoming Council Meetings**

- 221 • Thursday, June 21, 2018

222

## 223 **11. Proposed Dates for Council Meetings (2018–2019)**

224 11.1. Tuesday, September 25, 2018

225 11.2. Friday, January 18, 2018

226 11.3. Wednesday, April 24, 2019

227 11.4. Monday, June 24, 2019

228

229 **12. Adjournment:** Moved by Dr. Kniaziew and seconded by Dr. Quaid **to adjourn the meeting at 2:05**  
230 **p.m.**

231

**Motion carried**



**Council Meeting – April 9, 2018**

**COUNCIL ACTION LIST STATUS**

Updated June 4, 2018

Date	Minute Line	Action	Status	Comments
04/09/18	54	Staff will work with ICRC to produce a plain language communication for members with respect to independent contractor and conflict of interest.	Pending	



## Council Meeting – April 9, 2018

### MOTION LIST

Minute Line	Motion	Committee	Decision
60	Moved by Dr. Kniaziew and seconded by Dr. Quaid <b>to approve the in camera minutes of the January 15, 2018 Council meeting.</b>		Motion carried
93	Moved by Dr. Kniaziew and seconded by Dr. Chisholm <b>to approve the 2017 financial statements.</b>	Treasurer	Motion carried
99	Moved by Dr. Quaid and seconded by Dr. Kniaziew <b>to authorize, by resolution, Ms. Hanan Jibry, Assistant Registrar, as signing officer for the College with respect to banking documents and documents and instruments requiring the signature of the College.</b>	Treasurer	Motion carried
107	Moved by Dr. Quaid and seconded by Dr. Kniaziew <b>to authorize, by resolution, the Registrar to provide direction to the College’s investment advisor.</b>	Treasurer	Motion carried
121	Moved by Dr. Kniaziew and seconded by Dr. Quaid <b>to approve the publication of amendments to the following sections of the Optometric Practice Reference (OPR):</b> <ul style="list-style-type: none"> <li>• <b>4.2 Required Clinical Information</b></li> <li>• <b>6.5 Contact Lens Therapy</b></li> </ul>	Clinical Practice	Motion amended
131	Amendment to the motion: Moved by Dr. Nurani and seconded by Dr. Mastronardi <b>to remove 6.5 Contact Lens Therapy from the main motion and send back to the Panel for further discussion.</b>	Clinical Practice	Motion carried
135	<b>Vote on amended main motion</b>	Clinical Practice	Motion carried
148	Moved by Dr. Hemami and seconded by Dr. Kniaziew <b>that Council consider transitioning the function of treasurer, in principle, to a qualified staff member and maintain financial oversight via an appropriately constituted committee.</b>	Governance	Motion carried
157	Moved by Dr. Quaid and seconded by Dr. Kniaziew <b>that Council approve the College jurisprudence exam for 2018 while proposals are still under review for an online jurisprudence seminar and exam.</b>	Registration	Motion carried
166	Moved by Dr. Quaid and seconded by Dr. Mastronardi <b>that Council approve the May 2018 Optometric Examining Board of Canada (OEBC) written exam and OSCE as the standards assessment examination set or approved by the College for registration purposes.</b>	Registration	Motion amended

170	Amendment to the Motion: Moved by Dr. Kniaziew and seconded by Dr. Nurani <b>to accept the National Board of Examiners in Optometry (NBEO) exam as a standards assessment set or approved by the College for registration purposes.</b>	Registration	Amendment withdrawn
178	<b>Vote on the original motion</b>	Registration	Motion carried

## Executive Committee Report

**Name of committee:** Executive Committee

**Reporting date:** June 12, 2018

**Number of meetings in 2018:** 2 in person, 4 teleconference

**Number of meetings since last Council meeting:** 1 in person, 3 teleconference

The Executive Committee met once in person since the last Council meeting, on May 25, 2018. Teleconferences were held on April 25, May 1 (in camera), and June 14, 2018. The minutes of prior meetings were posted on May 28, 2018.

**Thank you to Ms. Irene Moore:** On August 11, 2018, Irene Moore's appointment to the College Council concludes. The College has benefitted for the past ten years from Irene's insight and thoughtful leadership style as she participated on Council and committees. At various times during her appointment, Irene held the positions of Treasurer, chair of PRC, and chair of ICRC, as well as ICRC panel chair. She has given tirelessly of her time and energy to the College and she will be missed by volunteers and staff alike. The College wishes Ms. Moore the best in her future endeavours. In October 2018, Ms. Moore will be part of a panel of three public appointees who have been selected to present at a plenary session titled "Interview with the Public Members: Serving the Public Interest in Self-Regulation" at the Canadian Network of Agencies for Regulation (CNAR) conference being held in Banff Alberta. The College is proud to be represented by Ms. Moore at this important regulatory conference.

**Statutory Committee Appointments:** The Executive Committee was informed that the Patient Relations Committee had not been constituted in accordance with the by-laws when appointments were made in January. Accordingly, the Executive Committee appointed Dr. Ken Hadley to PRC so that the Committee might proceed with its work. In addition, Council will be asked to appoint Ms. Maureen Chesney to PRC and Ms. Luisa Morrone to ICRC, effective August 12, to fill vacancies created by the conclusion of Ms. Irene Moore's appointment to Council. This proposed motion is found under the "Motions from Committees" section.

**By-Law Amendments:** The Executive Committee considered amendments to the by-laws that are required to ensure they are consistent with recent amendments to the RHPA. These proposed amendments are found under the "Motions from Committees" section.

**College Participation in Training Opportunities:** The College benefits when its volunteers participate in high-quality training, and takes advantage of opportunities for this type of education. In early May, three members of the Discipline Committee participated in the Federation of Health Regulatory College's (FHRCO) basic training program. In addition, five members of Council attended a two-day advanced governance training program, presented by the Council on Licensure Enforcement and Regulation (CLEAR), which was held in Toronto.

**Patient Relations Fund:** The Executive Committee was asked to consider a request from PRC to increase the amount set in a special reserve fund for the Patient Relations Program, which currently holds \$30,000. The fund is specifically for the funding of therapy for patients when allegations have been made that they have been sexually abused by an optometrist while a

patient of the optometrist. The request is being made to address recent changes to the RHPA with respect to when a patient may apply to access these funds. Because the Patient Relations Committee will not be meeting again until after the June 21 Council meeting, and the Executive Committee believes that time is of the essence in this matter, it is taking the rare step of making this recommendation to Council on behalf of the Patient Relations Committee. The motion and associated information can be found in the “Motions from Committees” section of the book.

**The College Attends the School:** On June 15, Dr. Hemami will meet with WOVS Director Dr. Stanley Woo to discuss issues common to the School and the College. On June 13, Dr. Patrick Quaid will attend the graduation awards ceremony at the University of Waterloo School of Optometry and Vision Science on behalf of the Executive Committee. The College provides three awards for deserving graduates of the optometry degree program at the School.

**ARBO Meeting:** This year’s ARBO Annual Meeting will be held in Denver CO from June 17–19. Vice President Dr. Richard Kniaziew will attend on behalf of the College. The theme for this year’s meeting is “Evolution of Regulation: New Demands/New Opportunities.” The College’s report to ARBO is attached to this report for information.

Respectfully submitted,

Dr. Pooya Hemami,  
President

**College of Optometrists of Ontario Report  
June 2018 ARBO Annual Meeting  
Denver, CO**

**Members of Council:** The College of Optometrists of Ontario is governed by an eighteen member Council, which functions as its board of directors. Ten optometrists are elected in six provincial districts, including one optometrist who represents academic optometry and is elected from among the faculty at the University of Waterloo School of Optometry and Vision Science. There are currently eight members of Council who are appointed by the Lieutenant Governor in Council to represent the public.

**Members of Council for 2018:**

**Elected Council Members (Optometrists)**

Dr. Linda Chan, Greater Toronto Area District

Dr. Bill Chisholm, Northern District

Dr. Pooya Hemami\*, President, Provincial District

Dr. Patricia Hrynychak, Academic District

Dr. Richard Kniaziew\*, Vice-President, Provincial District

Dr. Dino Mastronardi, Western District

Dr. Kamy Morcos, Eastern District

Dr. Christopher Nicol, Provincial District (newly elected to Council in 2018)

Dr. Areef Nurani\*, Greater Toronto Area District

Dr. Patrick Quaid\*, Treasurer, Provincial District

**Council Members Appointed by the Lieutenant Governor in Council (Public Members)**

Ms. Maureen Chesney

Mr. Bashar Kassir (appointed in May 2017)

Mr. Hsien Ping (Albert) Liang (appointed in July 2017)

Ms. Irene Moore\*, (appointment ends August 2018)

Ms. Luisa Morrone

Ms. Ellen Pekilis

Mr. Brian Rivait\*

Mr. John Van Bastelaar\*

\*Members of the Executive Committee.

**Council Meetings:** Council meets in person four times a year (typically January, April, June and September), with teleconferences held in between these meetings as required. One teleconference was held in 2017. Council recently held a training day on April 10, 2018.

**Complaints and Discipline:** The Inquiries, Complaints and Reports Committee received 57 new complaints and 12 Registrar's Report were initiated in 2017. The Committee issued 54 decisions in 2017; some of these cases had been filed in 2016. Ten decisions were appealed to the Health Professions Appeal and Review Board with decisions still outstanding.

In 2017, 6 cases were referred to the Discipline Committee for a hearing. Four discipline hearings were held in 2017 (two were regarding the same member) and so far in 2018, 3 have been held. All decisions of the Discipline Committee can be found [here](#) on the College website.

This year, all Ontario health regulatory colleges have experienced an increase in the number of complaints being brought to the College by the public. This is felt to be a direct result of recent investigative stories in the media regarding health regulatory colleges. The public is now more aware of where they should complain if they are unhappy with the care provided by a regulated health care professional. In addition, new legislation was enacted which requires Colleges to publish, on its website, certain decisions of the Inquiries Complaints and Reports Committee. Accordingly, in addition to discipline information, several complaints outcomes have now been posted on the College website.

**Continuing Education Audits Conducted:** The Quality Assurance Committee conducts a random audit at the end of each three-year continuing education cycle. The previous cycle ended on December 31, 2017, and the first 100% audit was conducted using information uploaded by members into their OE Tracker accounts. On December 31<sup>st</sup>, 103 members (or 4.3%) did not have the minimum number of CE hours logged into their OE Tracker accounts. Many of these members still had to upload their CE credits, and, since this was our first cycle using OE Tracker, they were given extra time to do so. A random audit of 114 members ensures that the courses attended meet the requirements of the CE policy. This audit was conducted using information from members' OE Tracker profiles. ARBO has now completed this review for the College, which has saved the College valuable resources by not needing to use staff and committee members' time to review the detailed CE information provided by members. Ontario optometrists seem to be accepting OE Tracker well and it has been a great benefit to the members and the College. The current cycle concludes on December 31, 2020. The College's CE policy can be found [here](#).

**Practice Assessments:** In addition to a mandatory CE requirement, the College conducts random practice assessments. In 2017, 102 members were randomly selected. As in the past, the majority of members were found to be meeting or exceeding the standard of practice. A small number of practitioners were required to undergo a complete record assessment and remediation, in the form of coaching or courses, where the need was identified. Two members decided to resign or retire and did not complete the assessment.

## New Legislation or Regulations Enacted:

**Ontario’s Protecting Patients Act- New Regulations in Effect May 1, 2018:** On May 1, 2018, new amendments came into force and the Minister introduced new regulations that were added to the *Regulated Health Professions Act, 1991* (RHPA). The RHPA is the umbrella legislation that applies to all health care practitioners (HCP), who are members of the 26 health regulated colleges in Ontario, including optometrists. A new definition of the term “patient” for the purposes of the sexual abuse provisions, including a one year “cooling off” period during which a former patient continues to be a patient.

Funding for therapy for patients who have been sexually abused by their HCP has been extended. A patient is now eligible for funding from the time a complaint/report of allegations of sexual abuse by an optometrist is filed with the College. At this time, funding is limited to cover the costs of therapy and counselling. The Minister has also set out a list of criminal offences that would result in mandatory revocation of a health care practitioner’s certificate of registration.

In addition, there are two new self-reporting requirements. HCPs must report whether they belong to other regulatory/licensing bodies – inside and outside of Ontario – and whether they have any findings of professional misconduct against them by another professional body. HCPs will also be required to report any charges, as soon as reasonably practicable, after they have occurred, and any resulting bail conditions.

The College’s news item on these amendments can be found [here](#).

## Statistics

- Number of new members in 2017: 111
- Total number of members: 2397, including 2333 practising members
- All members are authorized to use diagnostic drugs
- Number of members who are not authorized to prescribe drugs: 97

**Fees** (all fees are in Canadian funds and subject to 13% HST):

- Annual membership fee: \$945
- Application fees: \$420 plus the annual membership fee pro-rated to the number of months remaining in the year once they have completed the registration process.
- Licence renewal period: Annually

**College Website:** [www.collegeoptom.on.ca](http://www.collegeoptom.on.ca)

**Injunction against Essilor/Clearly:** An application to seek an injunction preventing Essilor/Clearly from unlawfully dispensing prescription eyewear over the internet was successful. The College of Optometrists and the College of Opticians jointly filed the application in December 2016 and the matter was heard October 11, 2017. Justice Lederer delivered his decision on January 11, 2018 in favour of the two regulatory colleges.

The two colleges are both motivated and required by legislation to maintain, patient safety and the public interest. The colleges believe that the internet can be an effective tool for the provision of vision care, however the dispensing of corrective lenses is a controlled act, subject to Ontario legislation, that definitively requires a regulated health professional's involvement. Mail order over the internet to Ontarians without the involvement of an Ontario licensed optometrist, optician or physician is inconsistent with legislation.

The role of the colleges is to regulate the practice of optometry and opticianry to maintain and enhance public safety. The colleges do not have any bias in the dispensing of corrective lenses, or where those lenses are dispensed, as long as legislation and regulations are respected and standards are met.

The decision of Justice Lederer can be found [here](#).

Essilor/Clearly has appealed the January 11, 2018 decision of Justice Lederer. The appeal is scheduled to be heard in September 2018. On March 10, 2018, the Court of Appeal granted Essilor's request to stay Justice Lederer's order until the appeal is determined. This means that Essilor can continue their "business as usual" until its appeal is heard and decided. If the appeal is dismissed, Justice Lederer's order will go into effect.

### **Three current issues of greatest concern to your Board**

1. Delays in bringing into force new regulations in the public interest. The College experienced a three year delay in adding 11 new drugs, including Restasis, to the list that Ontario's optometrists are authorized to prescribe. In April 2018, the College submitted proposed amendments to the Registration Regulation that would see a requirement for an applicant to be of good character, as well as revised requirements for an academic certificate of registration and the addition of non-practising status. In addition to this proposal, the College currently has the following which are awaiting government approval (most for several years):
  - Proposal to amend the Quality Assurance Regulation to bring it more in line with the current practice of optometry
  - Spousal exemption which would allow optometrists to treat their spouses (currently treating one's spouse is prohibited and is considered sexual abuse of a patient, which results in mandatory revocation of the optometrist's certificate of registration)



- Proposal to amend the Designated Drugs Regulation to abandon the list and authorize optometrists in Ontario to prescribe drugs, within the scope of practice of the profession, that have been approved by Health Canada
2. In 2014, the Government of Ontario passed amendments to the Professional Misconduct Regulation including Conflict of Interest provisions which allow optometrists to practice with opticians or corporations as long as they practise as independent contractors. In order to practise in this model, an agreement must be in place that has a number of specified elements which ensure the independence of the optometrist. The College has now begun to receive complaints and reports of members who are not in compliance with this regulation and is searching for the best way to communicate these provisions to optometrists on an ongoing basis. The College wishes to ensure that registrants are knowledgeable of, compliant and current with these regulatory provisions as well as in other jurisprudence areas.
  3. The use of telemedicine as a means of delivering health care by regulated health care professionals continues to grow in Ontario as in other jurisdictions. These technologies raise jurisdictional challenges when patients in Ontario receive care from health care practitioners licensed outside the province. In addition the College continues to respond to emerging technologies which involve health care services (which are regulated in Ontario) being delivered from outside the province without the direct involvement of an Ontario licensed health professional. The College's response to these violations of Ontario laws is the same as it is for health care services delivered within the province by an unregulated person. (Refer to Injunction Against Essilor/Clearly, above).

**Report Prepared By:** Paula Garshowitz, OD, Registrar  
[pgarshowitz@collegeoptom.on.ca](mailto:pgarshowitz@collegeoptom.on.ca)

## Committee Activity Report

<b>Name of committee:</b>	<b>Patient Relations Committee</b>
<b>Reporting date:</b>	<b>June 5, 2018</b>
<b>Number of meetings in 2018:</b>	<b>one (1)</b>
<b>Number of meetings since last Council meeting:</b>	<b>one (1)</b>

### **Nature of items discussed/number of cases considered:**

The Committee dedicated its first 2018 meeting to Committee orientation, legislative updates (specifically, the *Protecting Patients Act, 2017* and the resulting RHPA amendments), and the discussion about the mandated changes to the College's funding for therapy and counselling program.

As of May 1, 2018, the RHPA specifies that a person is eligible for funding if it is alleged in a complaint or a report that the person was sexually abused by a member while the person was a patient of the member. This is a significant change from the previous RHPA provision, which tied the eligibility for funding with a finding of guilt of the member by the Discipline Committee.

As a result, the Committee expects that the College's fund for therapy and counselling will have to be increased significantly. The PRC cannot know how many applications for funding it might receive; at this point, the Committee believes that a "buffer" fund of an additional \$30,000 for this purpose would be a reasonable starting point. This would bring the total amount the College will make available for funding and therapy to \$60,000. Due to the urgency of the need to increase the available funding, the Committee has brought this request to the attention of the Executive Committee.

At the May 11, 2018 meeting, the Committee reviewed and approved two (2) applications for funding for therapy and counselling.

### **Activities undertaken including performance relative to strategic plan and actions directed by Council:**

N/A

### **Recommendations to Council (including rationale and impact on budget if appropriate):**

N/A

Respectfully submitted:

Brian Rivait  
Committee Chair

## Committee Activity Report

**Name of committee:** Quality Assurance Committee – QA Panel

**Reporting date:** June 1, 2018

**Number of meetings in 2018:** 1 in-person meeting

**Number of meetings since last Council meeting:** 0

**Nature of items to be discussed at upcoming QAP meeting on June 20, 2016:**

1. Vision of the QA program
2. QA policies
3. CE audits of the 2015–2017 CE cycle
4. OE TRACKER CE data
5. Meeting with Clinical Practice Panel
6. SRA and CRA reviews and decisions
7. QA remedial programs

**Planned discussions including performance relative to strategic plan and actions directed by Council:**

1. The Panel had previously developed their vision for the College's QA program and identified the key values and objectives for the QA program. The document has been enclosed for Council information. The Panel will periodically update the vision of the QA program in response to changes in public need, programs, practices, and government policy/legislation on optometric practice.
2. The Panel will review draft QA policies, including QA Assessor Eligibility and Appointment, Appearance of Bias/Conflicts of Interest for QA Panel Members, and Appearance of Bias/Conflicts of Interest for QA Assessors.
3. The Panel will review the results of the one hundred percent (100%) audit of all members' CE credit hours and the results of the random detailed audit conducted by ARBO for the past CE cycle (January 1, 2015–December 31, 2017).
4. The Panel will review OE TRACKER CE data for all members, including the percentage of COPE-accredited vs. non-COPE CE hours, format of CE, and CE topic categories. This review will help the Panel in their discussion of future CE policy/continuing professional development (CPD) program.
5. The Panel looks forward to meeting with the Clinical Practice Panel to review and discuss Optometric Practice Reference (OPR) standards together; specifically, OPR Section 4.2. This would allow the two Panels to interpret the standards and address concerns from both Panels' perspectives. The Panel will prepare a list of discussion topics for the meeting.
6. The Panel will review outstanding cases from previous meetings:
  - Interim coaching report submitted – 1 member

- CRA and Case Manager Report – 1 member
- Clarifications from member/QA assessors – 2 members
- Direct patient contact hours deficiency – 4 members

7. The Panel will review and render decisions for the following random QA practice assessments:

- 13 SRA reports
- 1 request for extension

Respectfully submitted:

Mr. John Van Bastelaar

Chair, Quality Assurance Panel

## **The Vision of College of Optometrists of Ontario Quality Assurance Program**

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### **Introduction:**

In 2017, the Quality Assurance (QA) Panel held several meetings to embark on a number of initiatives aimed at enhancing the College's QA program, including an independent evaluation of the QA program. In 2018, Council has struck a QA subcommittee to conduct an independent review of the College's QA program to determine whether it is in line with the mandate, goals, and objectives of the College and to assist the College in the development of new tools/update existing tools to align with best practices.

### **Vision of College of Optometrists of Ontario Quality Assurance Program:**

During their planning for the future, the QA Panel developed and identified the following key values and objectives for the QA program:

- Fulfill the College's mandate of protecting and serving the public interest
- Assistive and engaging to all members of the profession. The QA program would be focused on supporting and offering members opportunities to be engaged in and to continually improve on their knowledge and skills, patient outcomes, and practice
- Effective communications and relationships between QA Panel and members. This may be achieved through increased outreach programs or College presence at continuing education events to inform members of QA updates and to receive feedback from members
- Proactive risk management. Perform evidence-based risk analysis to identify member profiles that have a greater likelihood of not meeting the standards of practice and develop a QA component/educational program to assist members who fall under these profiles
- Encourage a culture of lifelong learning, continuing professional development, and commitment to having a positive impact on patient outcomes

The vision of the QA program will be periodically updated in response to changes in public need, programs, practices, and government policy/legislation on optometric practice.

## Clinical Practice Panel Report

<b>Name of committee:</b>	<b>QA – Clinical Practice Panel</b>
<b>Reporting date:</b>	<b>June 4, 2018</b>
<b>Number of meetings in 2018:</b>	<b>2</b>
<b>Number of meetings since the last Council meeting:</b>	<b>1</b>

The Clinical Practice Panel met in person on May 18, 2018.

### **Nature of items discussed:**

The following OPR documents were reviewed:

- 4.1 Clinical Equipment
- 4.3 Delegation and Assignment
- 5.1 The Patient Record
- 6.5 Contact Lens Therapy
- 6.6 Low Vision Assessment and Therapy

The Panel continued work on a draft practice advisory document, “The Management of Patients after Concussion.” The Panel also reviewed and have begun revising the College policy “Practice Locations: Reporting Requirements” to be consistent with the regulation requiring optometrists to have an independent contractor agreement (ICA) at all times in practice settings where one is required.

### **Recommendations to Council** (including rationale and impact on budget if appropriate):

Motions regarding the standards of practice for OPR 6.5 are provided separately.

Respectfully submitted:

Dennis Ruskin, OD  
Committee Chair

## Quality Assurance Subcommittee Report

<b>Name of Committee:</b>	<b>Quality Assurance Subcommittee</b>
<b>Reporting Date:</b>	<b>June 7, 2018</b>
<b>Number of meetings in 2018:</b>	<b>2 (1 in-person, 1 teleconference)</b>
<b>Number of meetings since the last Council meeting:</b>	<b>1 teleconference</b>

The Quality Assurance Subcommittee met via teleconference on May 30, 2018.

**Request for Proposal:** Prior to the teleconference, consultants were invited to respond to [an RFP](#) to conduct a complete review of the College’s Quality Assurance program to determine whether it is in line with the mandate, goals and objectives of the College and to assist the College in the development of new tools/update existing tools to align with best practice in QA programs. The Committee received four high quality proposals from consultants specializing in professional accreditation, quality assurance and continuing education program reviews. The Committee has shortlisted two consultants that will attend their upcoming meeting and present proposals to undertake this project.

**Motion to Council:** The Committee has brought forth a motion that Council approve the addition of \$70 000 for a new “Exceptional Investments” line to undertake a Quality Assurance Program Review.

Respectfully submitted:

Ellen Pekilis  
Committee Chair

## Committee Report to Council

### Inquires, Complaints and Reports Committee (ICRC)

*(ICRC sits as two independent Panels)*

- Reporting date:** June 8, 2018
- Number of meetings in 2018:** 5 in-person Panel meetings (including June 22 upcoming meeting)
- 1 in-person ICR Committee meeting (both Panels)
- Number of meetings since last Council meeting:** 3 in-person meetings (including June 22 upcoming meeting)
- The ICRC’s intention with this report is to provide Council with as much information as possible on the matters received and reviewed by the ICRC since the last Council report (March 28, 2018) without compromising the confidentiality of the process and the fairness owed to complainants and members of the College involved in the process;
  - This respect for confidentiality and fairness stems from Section 36 of the RHPA, which requires that *“every member of a Council or committee of a College shall keep confidential all information that comes to his or her knowledge in the course of his or her duties and shall not communicate any information to any other person”* except in very limited, specific circumstances;
  - For this reason, in this and other Committee reports, the ICRC simply cannot share details about the specific cases.
- Number of cases:** cases reviewed by Panels and newly filed since March 28, 2018, the date of the last report to Council (some cases involve multiple allegations)

Type of Case			Number
Complaints	Newly filed	21	54
	Previously filed	33	
Registrar’s reports			6
Incapacity inquiries			0
<b>TOTAL CASES</b>			<b>60</b>
Nature of Allegations			Number
Unprofessional behaviour and/or communication			50
Improper billing/fees			17
Related to eyeglass and/or contact lens prescription			9



Related to drug prescription	1
Related to eyeglass and/or contact lens dispensing	9
Failure to diagnose/misdiagnosis	9
Staff supervision	8
Quality of care	7
Failure to refer	6
Other (e.g., suspended member practising, insurance fraud, discrimination)	6
Release of prescription/records	5
Breach of legislation	4
Unnecessary/unsuccessful treatment	2
Breach of patient confidentiality	1
Conflict of interest	–
Advertising	–
Record keeping	–
Allegations of sexual nature	–
Lack of consent	–

**Decisions issued:**

<b>Complaints</b>	15
<b>Registrar's reports</b>	0
<b>Incapacity inquiries</b>	0
<b>TOTAL</b>	<b>15</b>

**Dispositions:** some cases may have multiple dispositions or involve multiple members

No further action	7
Advice or recommendation	1
Remedial agreement (educational activities)	1
Verbal caution	–*
SCERP	1
Referral to Discipline Committee	1
Withdrawn	1
Resolved through ADR	1 (Withdrawn)
Complaint "moot" – case closed	1
Other: "suspended" remedial agreement	1
<b>TOTAL</b>	<b>13</b>

\* ICRC delivered two verbal cautions in person – dispositions previously reported

\*\* Member retired during the investigation

**HPARB Appeals:**

New appeals	1
Outstanding appeals to be heard	4
<b>TOTAL APPEALS IN PROGRESS</b>	<b>5</b>
ICRC decision confirmed – case closed	1

**Activities undertaken including performance relative to strategic plan and actions directed by Council:**

Following the 2018 ICRC group meeting (both Panels) and the approval of a pilot Alternative Dispute Resolution (ADR) project, three (3) cases were identified as suitable for ADR, in accordance with the policy:

- One case was successfully resolved through the ADR process, resulting in the withdrawal of the complaint;
- One case is currently being mediated by the College mediator; and
- One case is awaiting parties' consent before it could be referred for ADR.

Both Panels have continued testing and suggesting revisions to improve the risk assessment framework (a tool that assists the Panels in consistently assessing risk and reaching appropriate, consistent decisions based on that assessment); this will likely continue indefinitely, as more and varied cases are considered.

**Recommendations to Council including rationale and impact on budget if appropriate:**

N/A

Respectfully submitted,

Dr. Annie Micucci, ICRC Chair

## Committee Activity Report

**Name of committee:** Registration Committee

**Reporting date:** June 11, 2018

**Number of meetings in 2018:** 4

**Number of meetings since last Council meeting:** two in-person Committee meetings (April 26 and June 8, 2018)

**Nature of items discussed/number of cases considered:**

The updated draft amendments to the Registration Regulation (O.Reg. 837/93) as amended under the *Optometry Act, 1991*, were submitted to the Ministry of Health and Long-Term Care for approval on April 5, 2018.

College staff continued its dialogue with each of the following stakeholders: The Federation of Optometric Regulatory Authorities of Canada (FORAC), Touchstone Institute, and the International Optometric Bridging Program (IOBP). Discussions with each of FORAC and Touchstone Institute were focused on streamlining the pre-registration process for international candidates.

Following a clarification request from the Registration Committee, the enclosed clarification dated June 6, 2018 was received from FORAC. The clarification request was associated with how to proceed with candidates who challenged the May 2018 Internationally Graduated Optometrists Evaluating Exam (IGOEE), and whether they could meet a standard that would allow them to bypass bridging education.

A meeting was held on May 23 between the Committee and Touchstone Institute staff to discuss transitioning the evaluating exam (IGOEE) result reporting processes to FORAC. It confirmed what had already been discussed with the FORAC Executive Director and administrative staff on March 12.

The Internationally Educated Optometrists Evaluating Exam Oversight Committee (EEOC) meeting is scheduled for 1–2:30 p.m. on Thursday, July 12 with the participation of the Committee, FORAC, and Touchstone Institute staff. The purpose of the meeting is to review the raw aggregate May 2018 IGOEE exam results and any anonymized/aggregate incidents/issues associated with the exam.

Regarding the Optometry Examining Board of Canada (OEBC), the Committee reiterated its request to OEBC to observe the OEBC OSCEs, this time the November 3 and 4 exams. Please refer to the enclosed memorandum dated May 15, 2018. The enclosed response dated May 29, 2018 was received from OEBC.

A meeting has been scheduled between the Committee Chair, the Committee support staff, and the IOBP Director on June 15 to discuss streamlining the bridging process for international candidates now that only the year-long version of bridging education is being offered.

The Committee continued its review of the proposals received for an online Jurisprudence seminar and exam. The Committee has approved contracting out the development and administration of both the

online seminar and exam once further clarification is received from the organizations who submitted the top proposals.

**Activities undertaken including performance relative to strategic plan and actions directed by Council:**

Please refer to the above.

Respectfully submitted,

Dr. Patrick Quaid, Optometrist  
Chair, Registration Committee

Encls.

June 6, 2018

To the Registration Committee,

**RE: Clarification Request**

In a memorandum dated June 5, 2018, written clarification was requested from the Federation of Optometric Regulatory Authorities of Canada (FORAC) on how to proceed with candidates who challenged the May 2018 Internationally Graduated Optometrists Evaluating Exam (IGOEE), and whether they could meet a standard that would allow them to bypass bridging.

At the January 2018 FORAC meeting, the directors discussed that until such a time as the drug prescribing (TPAO) component is added to the IGOEE, all applicants who have successfully challenged the IGOEE must complete the bridging program. This would ensure that all applicants have adequate training in prescribing drugs. Therefore, no candidates who successfully challenged the May 2018 IGOEE would be able to bypass the bridging program.

As Touchstone Institute has indicated that the May 2019 IGOEE will contain a TPA assessment, this matter will again be discussed at the next FORAC meeting.

Sincerely,



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Dr. Paul Chris, OD  
Executive Director  
FORAC-FAROC

CC : Dr. Lee Kolbenson, President, FORAC  
Dr. Pooya Hemami, President, College of Optometrists of Ontario  
Dr. Paula Garshowitz, Registrar, College of Optometrists of Ontario  
Dr. Patrick Quaid, Chair, Registration Committee  
Ms. Hanan Jibry, Support Staff, Registration Committee

May 15, 2018

Ms. Tami Hynes  
Chief Executive Officer  
Optometry Examining Board of Canada  
37 Sandiford Drive, Suite 403  
Stouffville, ON L4A 3Z2

Dear Tami:

**RE: Registration Committee Request**

I am writing to you on behalf of the Registration Committee. As you know, the Committee comprises of both professional members and public members appointed by the Ministry of Health and Long-Term Care to ensure public protection is held paramount. As you are also aware, the College, and more specifically, its Registration Committee, has made several requests to send observers to view the OEBC OSCE exam, first in Spring 2017 and again in November 2017. OEBC has refused the Committee's request to observe the exam, despite assurances that the Committee members would be prepared to sign confidentiality agreements. Ms. Nuzhat Jafri, a member of OEBC's own expert panel assembled at the Nov. 24, 2017, OEBC meeting, openly supported the observation of the OSCE examination by the regulators.

The College has a responsibility to oversee its third-party providers. Accordingly, this is a request to permit a member of the Registration Committee, to observe the November 2018 OEBC OSCE exam (November 3<sup>rd</sup> and/or 4<sup>th</sup>). In addition, if OEBC has collected post OEBC exam feedback from candidates after each exam administration, and if there are any aggregate exam results, that information should be provided to the OEBC Board of Directors for review.

Please let me know if you have any questions.

Yours truly,



Hanan Katerina Jibry, P.Eng., Lic. Paralegal  
Assistant Registrar

Cc: Dr. Patrick Quaid, Optometrist, PhD, Registration Committee Chair  
Dr. Paula Garshowitz, OD, College Registrar



OPTOMETRY EXAMINING  
BOARD OF CANADA

BUREAU DES EXAMINATEURS  
EN OPTOMÉTRIE DU CANADA

May 29, 2018

by email

Ms. Hanan Jibry  
Assistant Registrar  
College of Optometrists of Ontario  
65 St. Clair Avenue E, Suite 900  
Toronto ON M4T2Y3

Dear Hanan:

Thank you for your letter.

As I mentioned in my email, we would welcome an observer from the College for the fall 2018 OSCE in Hamilton.

The OSCE will be held November 3 2018 with a second day of administration on November 4 if required. We will be able to confirm this in September after the scheduling is set.

Our intent is to invite all members of OEBC to send an observer to future exam administrations. I will be gathering input from the members in June and at that time will send out more information including the observation format. I hope you will appreciate the need to keep the observer group to a reasonable size (2-3) to ensure the integrity of the exam is maintained.

You asked if there is exam feedback from candidates after each administration and aggregate exam results and if so this should be given to the board. Thank you for this suggestion. The board received updates in June 2017 after the first administration, and in December 2017 and May 2018. After the first administration of the OEBC exam, our consulting psychometrics firm gathered information about how candidates experienced the examination process, including information clarity and ease of the process, through a survey completed in August 2017. The survey had an operational function for the purpose of guiding future administration processes. OEBC has a long-standing process for candidates to be able to deal with any irregularities that might happen, i.e. candidates are given opportunity at the written exam and OSCE to record anything they feel could have affected their exam. If there are specific things that the board wants addressed in the future, they would need to be identified and we can examine how to incorporate them into the upcoming administration in November.

Aggregate exam results and overall examination performance statistics including test instrument reliability are reported in the annual exam report. We also prepare supplementary reports for the two Canadian optometry schools at their request and to best suit their accreditation information needs.

Annual reports are provided to the board and published on our website each December. An email is sent to our members and the schools to advise the reports are available.

I hope you will find this information helpful. If there is anything more you or the Committee needs, please let me know.

Best regards,



Tami Hynes  
CEO

CC Dr. Paula Garshowitz, Registrar, College of Optometrists of Ontario  
Dr. Patrick Quaid, Optometrist, PhD, Registration Committee Chair, College of Optometrists of Ontario  
Dr. Carolyn Acorn, Chair, Optometry Examining Board of Canada  
OEBC members



## Committee Report to Council

**Name of committee:** Fitness to Practice Committee

**Reporting date:** June 21, 2018

**Number of meetings in 2018:** n/a

**Number of meetings since the last Council meeting:** n/a

The Fitness to Practice Committee has not met and has had no activity since the last Council meeting.

Respectfully submitted,

Dr. Linda Chan  
Fitness to Practice Committee Chair

## Committee Activity Report

<b>Name of committee:</b>	<b>Discipline Committee</b>
<b>Reporting date:</b>	<b>June 5, 2018</b>
<b>Number of meetings in 2018:</b>	<b>N/A</b>
<b>Number of meetings since the last Council meeting:</b>	<b>N/A</b>

**The Discipline Committee conducted one (1) discipline hearing:**

**1. Dr. Jon Barnes – Hearing held on March 22 and April 19, 2018**

On March 22, 2018, THE DISCIPLINE PANEL MADE THE FOLLOWING FINDINGS of professional misconduct in relation to the allegations set out in the Notice of Hearing, dated August 24, 2017:

1. that Dr. Barnes committed an act or acts of professional misconduct as set out in Allegation #1 of the Notice of Hearing, in that, between approximately 2002 and 2016, he sexually abused Patient A, Patient B, and Patient C when he engaged in behaviour and made remarks of a sexual nature towards Patient A, Patient B, and Patient C, who were also staff, including, but not limited to when he:
  - a. wrote comments of a sexual nature in various places in the workplace where they would see them;
  - b. made verbal, sexual comments to them, about them, and/or about others in their presence; and
  - c. engaged in behaviours of a sexual nature towards them in the workplace.
2. that Dr. Barnes committed an act or acts of professional misconduct as set out in Allegation #2 of the Notice of Hearing, in that, between approximately 2002 and 2016, he failed to maintain the standards of practice of the profession when he:
  - d. noted, in patient records, inappropriate commentary about patients and/or their relatives, including comments of a sexual nature, not relevant to care; and
  - e. engaged in unprofessional behaviours in the office, including engaging in the sexual harassment of staff.
3. that Dr. Barnes committed an act or acts of professional misconduct as set out in Allegation #3 of the Notice of Hearing, in that, between approximately November 2016 and March 2017, he contravened, by act or omission, subsection

- 76(3) of the *Health Professions Procedural Code* when he applied white-out to or otherwise redacted notations he had made in patient charts and, in so doing, concealed and/or destroyed information relevant to the College's investigation;
4. that Dr. Barnes committed an act or acts of professional misconduct as set out in Allegation #4 of the Notice of Hearing, in that, between approximately 2002 and 2016, he engaged in conduct or performed an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional and unethical and, in particular, he:
    - f. noted, in patient records, inappropriate commentary about patients and/or their relatives, including comments of a sexual nature, not relevant to care;
    - g. wrote sexual comments in various places in the workplaces where staff could see them including on post-it notes and the white board;
    - h. made verbal, sexual comments to staff;
    - i. engaged in sexual behaviours towards staff, including when he showed them sexual images and/or videos;
    - j. acted in a physically aggressive manner in the office;
    - k. shared a staff member's private health information with other staff; and/or
    - l. acted in a verbally and/or emotionally abusive manner towards staff.

**B. On April 19, 2018, THE DISCIPLINE PANEL MADE AN ORDER:**

2. Requiring the Member to appear before the Panel to be reprimanded at the conclusion of the hearing on April 19, 2018.
3. Directing the Registrar to suspend the Member's certificate of registration for four (4) months, uninterrupted, commencing on May 24, 2018.
4. Directing the Registrar to impose the following terms, conditions and limitations on the Member's certificate of registration:
  - a. that the Member successfully complete, at his own expense, with an unconditional pass, and within two (2) years of the date that this Order becomes final, both the ProBe Program on professional/problem-based ethics and the ProBe Plus follow-up module; and
  - b. that the Member shall provide the College with a certified cheque in the amount of \$48,180, by April 19, 2018, representing security to guarantee the payment of any amounts the Member may be required to reimburse the College for funding under the program required by s. 85.7 of the *Health Professions Procedural Code*, in relation to Person A, Person B and/or Person C (\$16,060 each), as referred to in the Agreed Statement of Facts. Any funds that have not been used for the purposes of the program required by s. 85.7 of the *Health Professions Procedural Code*, shall be returned to the Member by the College, without interest, at the

expiration of the 5-year time frame within which funding may be provided.

5. Directing the Member to partially reimburse the College for its costs in relation to this proceeding in the amount of \$30,000 to be paid by post-dated cheques provided to the College by April 19, 2018, according to the following schedule:
  - a. one cheque dated April 19, 2018 in the amount of \$10,000;
  - b. one cheque dated December 22, 2018; in the amount of \$10,000; and
  - c. one cheque dated September 22, 2019 in the amount of \$10,000.

Additionally, Dr. Barnes signed an Undertaking/Agreement.

At the conclusion of the hearing, Dr. Barnes waived his right to appeal and the Discipline Committee delivered the reprimand.

### **The Discipline Committee is preparing to conduct five (5) discipline hearings:**

#### **2. Dr. Gregory Miller #1 – Hearing dates TBD**

*Date of Referral: September 25, 2017*

1. Dr. Miller failed to maintain the standards of practice of the profession, as set out at paragraph 1.14 of Ontario Regulation 119/94, by failing to identify, document, and further test the optic disc swelling in Patient X's eye, and failing to recommend that Patient X be referred to another professional for the optic disc swelling.
2. Dr. Miller failed to refer Patient X to another professional whose profession is regulated under the *Regulated Health Professions Act, 1991* because he ought to have recognized that the condition of Patient X's eye required such referral, as set out at paragraph 1.11 of Ontario Regulation 119/94.
3. Dr. Miller engaged in conduct or performed an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical, as set out in paragraph 1.39 of Ontario Regulation 119/94, for his remark(s) regarding vision therapy.

#### **3. Dr. Gregory Miller #2 – Hearing set for July 10–11, 2018**

*Date of Referral: September 25, 2017*

1. Dr. Miller has committed an act or acts of professional misconduct, as provided by paragraph 51(1)(b.1) of the *Health Professions Procedural Code*, which is Schedule 2 to the *Regulated Health Professions Act, 1991*, S.O. 1991 c. 18, as amended; in that, on or about November 30, 2006, during an eye examination, he sexually abused his patient, Patient A, by twice taking Patient A's hand and placing it on his clothed genital area.

#### 4. Dr. Andrew Mah – Hearing dates TBD

*Date of Referral: November 7, 2017*

1. Dr. Mah has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c.35, as amended, and defined in paragraph 1.16 of Ontario Regulation 859/93 (now revoked) and/or paragraph 1.13 of Ontario Regulation 119/94, in that, between approximately January 2014 and July 2015, he recommended and/or provided unnecessary diagnostic or treatment services in relation to Patients 1–25, including, but not limited to:
  - a. ongoing monitoring and/or office visits;
  - b. visual field testing (AVF);
  - c. fundus photography;
  - d. Heidelberg retinal tomography (HRT);
  - e. pachymetry;
  - f. digital retinal imaging (DRI);
  - g. optical coherence tomography (OCT);
  - h. Ultrasound Corneal Pachymetry (UCP);
  - i. Anterior Ocular Imaging (AOI); and/or
  - j. prescriptions for eyeglasses.
2. Dr. Mah has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c.35, as amended, and defined in paragraph 1.17 of Ontario Regulation 859/93 (now revoked) and/or paragraph 1.14 of Ontario Regulation 119/94, in that, between approximately January 2014 and July 2015, he failed to maintain the standards of practice of the profession in relation to the care and management of Patients 1–25 and, in particular,
  - a. portions of his healthcare records for these patients were illegible;
  - b. he diagnosed patients with glaucoma or as “glaucoma suspect”, in circumstances where that diagnosis was not supported by the clinical findings;
  - c. he recommended that patients return for office visits in circumstances and at frequencies that were not clinically indicated;
  - d. he prescribed eyeglasses for patients in circumstances where such prescriptions were not supported by the clinical findings, and/or unnecessary, and/or inappropriate;
  - e. he referred patients for consultations with an ophthalmologist in circumstances where such a referral was not clinically indicated;
  - f. he failed to conduct the appropriate tests and/or use the appropriate equipment to investigate patients with suspected glaucoma; and/or

g. he failed to conduct the appropriate tests and/or use the appropriate equipment to investigate patients with suspected diplopia.

3. Dr. Mah has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.27 of Ontario Regulation 859/93 (now revoked) and/or paragraph 1.24 of Ontario Regulation 119/94, in that, between approximately January 2014 and July 2015 he failed to maintain records in accordance with Part IV in relation to Patients 1–25, including, but not limited to deficiencies with respect to the documentation of:
  - a. the patient’s health and oculo-visual history;
  - b. the clinical procedures used;
  - c. the clinical findings obtained; and/or
  - d. the diagnosis.
4. Dr. Mah has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.32 of Ontario Regulation 859/93 (now revoked) and/or paragraph 1.28 of Ontario Regulation 119/94, in that, between approximately January 2014 and July 2015 he submitted or allowed to be submitted an account(s) for professional services in relation to Patients 1–25 that he knew or ought to have known was false or misleading and, in particular, he:
  - a. submitted accounts to OHIP under billing codes V402, V406, V408, V409, V410 in circumstances where he knew or ought to have known that the criteria for submitting accounts under those billing codes were not met; and/or
  - b. submitted accounts to patients for visits, tests and/or procedures that he knew or ought to have known were not clinically indicated.
5. Dr. Mah has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.53 of Ontario Regulation 859/93 (now revoked) and/or paragraph 1.39 of Ontario Regulation 119/94 in that, between approximately January 2014 and July 2015, he engaged in conduct or performed an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical regarding his care and management of Patients 1–25 he:
  - a. recommended that patients attend at his office for visits, tests, procedures and/or ongoing monitoring in circumstances where such visits, tests, procedures and/or ongoing monitoring was not clinically indicated;
  - b. billed OHIP and/or patients for office visits, tests, and procedures that were not clinically indicated;
  - c. made diagnoses, referrals, and prescriptions that were not clinically indicated;

- d.failed to maintain legible patient records; and/or
- e.failed to maintain adequate patient records.

**5. Dr. Farrukh A. Sheikh – Hearing dates TBD**

*Date of Referral: January 15, 2018*

1. Dr. Sheikh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.14 of Ontario Regulation 119/94 in that, on or about August 23, 2016, while practising as an optometrist at the Sanger Eye Clinic in Hamilton, Ontario, Dr. Sheikh failed to maintain the standards of practice of the profession with respect to:
  - a. his delegation of a controlled act(s) to Person X in relation to Patient A, including, but not restricted to, his failure to:
    - i. obtain informed consent or to ensure that informed consent was obtained from Patient A for the delegation;
    - ii. establish a formal relationship with Patient A prior to the delegation;
    - iii. adequately supervise Person X; and/or
    - iv. ensure that the delegation was appropriately and/or adequately documented in the patient record.
  - b. his assignment of various aspects of Patient A’s eye examination to Person X including, but not restricted to, his failure to:
    - i. obtain informed consent or ensure that informed consent was obtained, from Patient A for the assignment;
    - ii. establish a formal relationship with Patient A prior to the assignment;
    - iii. adequately supervise Person X; and/or
    - iv. ensure that the assignment was appropriately and/or adequately documented in the patient record.
2. Dr. Sheikh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.18 of Ontario Regulation 119/94 in that, on or about August 23, 2016, while practising as an optometrist at the Sanger Eye Clinic in Hamilton, Ontario, Dr. Sheikh permitted, counselled, or assisted Person X, a person who is not a member of the College of Optometrists of Ontario (“the College”), to perform one or more of the following controlled acts, which should be performed by a member of the College, in relation to Patient A:

- a. communicating a diagnosis identifying, as the cause of a person's symptoms, a disorder of refraction, a sensory or oculomotor disorder of the eye or vision system or a prescribed disease; and/or
  - b. prescribing or dispensing, for vision or eye problems, subnormal vision devices, contact lenses or eye glasses.
3. Dr. Sheikh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.24 of Ontario Regulation 119/94 in that, from approximately August 23, 2016 to approximately September 26, 2016, while practising as an optometrist at the Sanger Eye Clinic in Hamilton, Ontario, Dr. Sheikh failed to make and/or maintain records in accordance with Part IV and, in particular, Dr. Sheikh failed to ensure that the patient health record for Patient A included:
  - a. information about Dr. Sheikh's delegation of a controlled act(s) to Person X;
  - b. a copy of the appropriate written consent to treatment; and
  - c. information that would allow the person who made every entry in the health record for Patient A to be readily identifiable.
4. Dr. Sheikh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.28 of Ontario Regulation 119/94 in that, on or about August 23, 2016, while practising as an optometrist at the Sanger Eye Clinic in Hamilton, Ontario, Dr. Sheikh allowed to be submitted an account for professional services that he knew or ought to have known was false or misleading and, in particular, Dr. Sheikh allowed a claim to be submitted to Patient A's insurance company in relation to an eye examination in circumstances where the information submitted to the insurance company suggested that:
  - a. Dr. Sheikh had completed Patient A's eye examination on that date, when that was not the case; and
  - b. Patient A had received a complete eye examination on that date, when that was not the case.
5. Dr. Sheikh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code* of the *Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.30 of Ontario Regulation 119/94 in that, from approximately August 23, 2016 to approximately September 26, 2016, while practising as an optometrist at the Sanger Eye Clinic in Hamilton, Ontario, Dr. Sheikh, or the administrative staff who support his practice, failed to issue a statement or receipt that itemizes an account for professional goods or services provided to Patient A, when he requested such a statement or receipt.



6. Dr. Sheikh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code of the Optometry Act, 1991*, S.O. 1991, c. 35, as amended, and defined in paragraph 1.39 of Ontario Regulation 119/94 in that, from approximately August 23, 2016 to approximately September 26, 2016, while practising as an optometrist at the Sanger Eye Clinic in Hamilton, Ontario, Dr. Sheikh engaged in conduct or performed an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical and, in particular:
- a. Dr. Sheikh delegated a controlled act(s) to Person X in relation to Patient A without:
    - i. obtaining informed consent and/or ensuring that informed consent was obtained from Patient A for the delegation;
    - ii. establishing a formal relationship with Patient A prior to the delegation;
    - iii. adequately supervising Person X; and/or
    - iv. ensuring that the delegation was appropriately and/or adequately documented in the patient record;
  - b. Dr. Sheikh assigned various aspects of patient's Patient A's eye examination to Person X without:
    - i. obtaining informed consent and/or ensuring that informed consent was obtained, from Patient A for the assignment;
    - ii. establishing a formal relationship with Patient A prior to the assignment;
    - iii. adequately supervising Person X; and/or
    - iv. ensuring that the assignment was appropriately and/or adequately documented in the patient record;
  - c. Dr. Sheikh permitted, counselled, or assisted Person X, a person who is not a member of the College of Optometrists of Ontario ("the College"), to perform one or more of the following controlled acts, which should be performed by a member of the College, in relation to Patient A:
    - i. communicating a diagnosis identifying, as the cause of a person's symptoms, a disorder of refraction, a sensory or oculomotor disorder of the eye or vision system or a prescribed disease; and/or
    - ii. prescribing or dispensing, for vision or eye problems, subnormal vision devices, contact lenses or eye glasses;
  - d. Dr. Sheikh failed to make and/or maintain records in accordance with Part IV and, in particular, Dr. Sheikh failed to ensure that the patient health record for Patient A included:
    - i. information about Dr. Sheikh's delegation of a controlled act(s) to Person X;

- ii. a copy of the appropriate written consent to treatment.
- iii. information that would allow the person who made every entry in the health record for Patient A to be readily identifiable.
- e. Dr. Sheikh submitted an account for professional services that he knew or ought to have known was false or misleading and, in particular, Dr. Sheikh allowed a claim to be submitted to Patient A's insurance company in relation to an eye examination in circumstances where the information submitted to the insurance company suggested that:
  - i. Dr. Sheikh had completed Patient A's eye examination on that date, when that was not the case; and
  - ii. Patient A had received a complete eye examination on that date, when that was not the case; and/or
- f. Dr. Sheikh failed to have the appropriate administrative processes in place to ensure that Patient A received an itemized statement or receipt when he requested one.

**6. Dr. Ampreet Singh – Hearing dates TBD**

*Date of Referral: April 12, 2018*

- 1. Dr. Singh has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*, S.O. 1991, c. 18, as defined in:
  - a. paragraph 1.14 of Ontario Regulation 119/94, in that:
    - i. Dr. Singh failed to maintain the standards of practice of the profession with respect to the oculo-visual assessments he provided to 28 patients (25 patients – students Dr. Singh saw at the University of Ottawa and 3 patients he saw at a nursing Home); and
    - ii. Dr. Singh failed to provide at least 10 patients with his contact information (telephone number or other means of contacting him) in the event that they had questions or problems with their vision or eyeglasses.
  - b. paragraph 1.24 of Ontario Regulation 119/94, in that:
    - i. Dr. Singh failed to make or maintain records in accordance with Part IV, including, but not limited to, Dr. Singh not having an appointment book and/or financial records for each patient; which are required by sections 8 and 9 respectively of Ontario Regulation 119/94; and
    - ii. Dr. Singh, in many instances, failed to record the information required by s. 10 of Ontario Regulation 119/94 to be in patient records.

c. paragraph 1.12 of Ontario Regulation 119/94, in that Dr. Singh failed, without reasonable cause, to provide at least 12 patients (all of whom required eyeglasses) with a written, signed and dated prescription for subnormal vision devices, contact lenses or eye glasses after the patients' eyes have been assessed by Dr. Singh and where such a prescription was clinically indicated.

**Committee training:**

Three Committee members have attended the Federation of Health Regulatory Colleges' training session "Conducting a Discipline Hearing – Basic program," which took place in May 2017.

Respectfully submitted:

Karin Simon, O.D.  
Committee Chair

## Governance Committee Report

<b>Name of committee:</b>	<b>Governance Committee</b>
<b>Reporting date:</b>	<b>June 8, 2018</b>
<b>Number of meetings in 2018:</b>	<b>3</b>
<b>Number of meetings since the last Council meeting:</b>	<b>1</b>

The Governance Committee met in person on June 6, 2018.

**Implementation Work Plan:** Mr. David Brown joined the Committee to discuss and provide guidance regarding the implementation of the timed implementation working plan for the Committee's review.

**Governance Recommendations:** The Committee has examined the proposed recommendations and are now considering steps toward implementation.

**Executive Line:** Under the RHPA, the only legislated function for Executive Committee is to act on behalf of Council between meetings. The College's Executive Committee currently performs an additional function: administering financial oversight and carrying out human resource tasks (including committee member recruitment). Best practice is for the Executive Committee to take on a coordination role, and for the financial/audit and human resource functions to be administered by separate standing committees. Such proposals may allow for improved transparency and should provide more inclusive Council member participation on corporate governance-related activities. The Governance Committee has submitted a motion to this effect.

**Council Composition/Election Process:** The governance review has concluded that an election process remains the preferred approach for selecting Council members within the profession. The Committee's recommendation is to implement a hybrid model for the election process that incorporates both the use of existing districts but also may introduce certain representation and/or skills-based criteria for certain seats. The Committee suggests that the five district specific seat types remain (four regional, and one selected among faculty members of the University of Waterloo School of Optometry and Vision Science) and that representation and/or skills-based criteria be introduced for the four provincial electoral district seats. The criteria for these four seats would reflect the needs of the Council at the time of election and be determined on an annual basis by the proposed Governance/HR Committee.

**Strategic Plan:** It was noted in both the governance review and feedback from Council to be a prime opportunity to re-evaluate and update the College's Strategic Plan in the coming year. The College's last review was conducted in 2015. The Committee suggests that Council consider striking a Strategic Planning Committee to begin undertaking this project in January 2019.

**Council Meeting Evaluation/Council Member Self-Assessment:** The Committee reviewed the feedback received about the April Council meeting via the online survey. This practice was beneficial, and the plan is to continue to implement it for all future Council meetings. The Committee also reviewed the self-assessment that Council members submitted anonymously. The Committee will be distributing further materials based on those results.

**Motion to Council:** The Committee has brought forth a motion recommending that Council strike an Audit/Finance/Risk Committee and introduce the role of Human Resources to a restructured Governance Committee, to commence in January 2019.

Respectfully submitted:

Pooya Hemami, OD  
Committee Chair

## Registrar's Report – June 8, 2018

I am pleased to provide you with the following update on staff/office activities since the April 9, 2018 Council meeting.

**Continuing Education (CE) Random Audit Completed:** In January 2015, the College began to use [OE TRACKER](#) to track members' participation in CE activities; December 31, 2017 marked the completion of the first three-year cycle that was tracked entirely using this tool. The College was able to determine, using data from OE TRACKER reports, the details of each member's participation in continuing education activities for the just-completed cycle, including if they had completed the minimum requisite number of total CE hours (70 hours) to fulfill the mandatory continuing education component of the Quality Assurance program. Accordingly, the College was able to conduct a 100% audit to ensure each member had completed the requisite number of hours, whereas in the past only 5% of members had been audited at the end of each cycle.

In addition to determining if members had completed a minimum number of hours of CE, the College used OE TRACKER to complete the random CE audit. Five percent of members were audited to ensure that their CE participation complied with the [CE Policy](#) (i.e., minimum 50 Category A hours, 20 of which must be must be lecture-based in topics reasonably related to ocular disease and management or related systemic disease). This year, 114 members' names were selected at random to determine if their CE participation met these requirements. Traditionally, this task required the selected members to send in all evidence of CE participation, staff resources necessary to upload these certificates, and time for a member of the QA Committee to review each certificate to see if the member under audit had met the requisite number of hours and that the activities met the policy; a process that used to take up to two years from the end of the cycle to complete. The College, in collaboration with ARBO (the organization that administers OE TRACKER), developed a system for this process using data in members' OE TRACKER profiles. The random CE audit was completed by ARBO staff in just over a month. Members who were audited were notified after the fact that they had been audited and given their results. Special thanks go to Ms. Bonny Wong, Coordinator Quality Programs, and ARBO Executive Director, Ms. Lisa Fennell, for putting the process in place and ensuring that it ran smoothly. At its upcoming meeting, the Quality Assurance Panel will review the results of both audits.

**Staff Participation in Conferences and Training:** The College benefits when staff is engaged in ongoing learning and exposure, through conferences, to new ideas. On May 9, Ms. Hanan Jibry attended the CLEAR Toronto Regional Symposium on Measuring and Reporting Regulatory Performance. The College was pleased to host the Corporate Services group meeting on May

17; both Ms. Jibry and Mr. Kikonyogo are members of this working group of the Federation of Health Regulatory Colleges of Ontario (FHRCO). On May 29, College staff attended a course, given by Drs. Chiarelli, Calder, and Liao of the Vision Institute of Canada, where they learned the basics of optometric practice as it relates to their work at the College. On May 31–June 1, Ms. Mina Kavanagh and I attended the College of Teachers Annual Conference, “Inspiring Public Confidence.”

**Administration Statistics from April 1, 2018–May 31, 2018:**

Registration:	Applications opened – 47
	New members registered – 6
	Number of applicants who attended the May Jurisprudence seminar – 66
Quality Assurance:	Practice assessments processed and sent to assessors – 8
ICRC:	New complaints files opened – 20
	Requests to ICRC to approve the appointment of an investigator in a Registrar’s report matter – 0
	Investigators appointed at the request of the ICRC – 2

Respectfully submitted,

Paula Garshowitz, OD  
Registrar

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# 4 / FINANCIAL MATTERS

- 4. Financial Matters
  - 4.1. Treasurer's Report
  - 4.2. Financial Dashboard
  - 4.3. Balance Sheet and Income and Expenditure Report – to April 30, 2018



## **Treasurer's Report**

**Reporting Date: June 7, 2018**

All of Council shares the responsibility to provide oversight of the College's finances. In addition to the production of annual audited financial statements, Council is kept informed of the College's ongoing financial health through quarterly reports of the College's balance sheet and details of the income and expenditures report, as well as the dashboard report.

**Balance Sheet and Income and Expense Report:** The financial information includes the balance sheet, and income/expense report to April 30, 2018. Both Discipline legal and ICRC legal line items remain high, reflecting an increase in complex cases before ICRC that require legal advice, and a higher number of referrals to the Discipline Committee by ICRC.

**Dashboard:** The dashboard summary has been updated to include the April 2018 financial information, including the College's investment funds, and indicates that the College's financial position continues to be strong.

**Investment Portfolio:** At its May meeting, the Executive Committee heard updates from both investment managers on the status of the College's investment accounts, as well as current trends in markets and investments with reasonably comparable returns within our set performance tolerances between both investment firms.

**Annual Appointment of Auditors:** The Council must annually appoint the College auditor. Currently the auditor is Ms. Ildiko Jurina Cleary of Tapp & Co. It is recommended that Council approve their reappointment for the fiscal year 2018, with a view to reviewing the auditor for the 2019 fiscal year in accordance with best practices.

**Motion:** To approve Tapp & Co. as auditors for the College for the year 2018.




Respectfully submitted,

Dr. Patrick Quaid, Treasurer

**COLLEGE OF OPTOMETRISTS OF ONTARIO  
FINANCIAL STATEMENT SUMMARY AS OF APRIL 30 2018**

Month 4



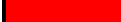
**1. Incomes and Expenditures**

	ANNUALIZED BUDGET	YTD BUDGET	YTD OUTPUT	VARIANCE	%VARIANCE	
REVENUES	2558860.00	852953.33	949990.00	97036.67		 Good(Above5%)  Requires some attention (between -5 and 5%)  Poor(Under-5%)
EXPENSES	3234320.00	1078106.67	800823.00	(277283.67)		
<b>SURPLUS(DEFICIT)</b>	<b>(675460.00)</b>	<b>(225153.33)</b>	149167.00	374320.33	<b>69%</b>	

Overall positive variance due to under spending in expenses and 97K over budgeted revenue  
Annualized expense budget includes 260K exceptional investment amounts

**2. Liquid Funds Indicator(Are our net assets enough to cover our expenses?)**




Net Assets- Assets invested in Capital  
Budgeted average Operating expenses

 Good(above 12 months)  
 Requires some attention(between 2-12 months)  
 Poor(Less than 2 months)

(4844590-181232)/(3234320/12) 17.30 College can cover its expenses for 17 months using its Net Assets.

**3. Investment Portfolio Performance**

Weighted Average Return

 Good(above 3% of performance)  
 Requires some attention(between -3% and 3% of performance)  
 Poor(Less than 3% of performance)

	Asset Category	Assumed Mix	Index		Portfolio	Over/under performance
			performance	Contribution		
Last 3 Months	Canadian Equity	30%	1.82%	0.55%	0.22%	<span style="background-color: #FFFF00; padding: 2px;">0.13%</span>
	US Equity(C\$)	15%	-0.22%	-0.03%		
	Fixed income	55%	-0.78%	-2.43%		
				0.08%		
Last 12 Months	Canadian Equity	30%	3.11%	0.93%	1.96%	<span style="background-color: #FFFF00; padding: 2px;">0.14%</span>
	US Equity(C\$)	15%	6.40%	0.96%		
	Fixed income	55%	-0.14%	-0.08%		
				1.82%		
Since Inception(Nov 2014)	Canadian Equity	30%	5.13%	1.54%	3.81%	<span style="background-color: #FFFF00; padding: 2px;">-1.66%</span>
	US Equity(C\$)	15%	14.35%	2.15%		
	Fixed income	55%	3.23%	1.78%		
				5.47%		

**College of Optometrists of Ontario**

65 St. Clair Ave. E., 9th Floor

Toronto, Ontario

MAT 2Y3

**Income and Expenditure Report**

As at Apr 30/2018

	2017 Actuals	2018 Budget	Budget to Date	Income/Expend.	% of Budget
		Estimate	4/12	To Date	To Date
<b>Income</b>					
Annual registration fees	\$2,235,227	\$2,259,951	\$753,317	\$754,527	100.2%
Professional Corporation fees	\$287,115	\$195,000	\$65,000	\$139,391	214.4%
Application Fees	\$43,723	\$56,909	\$18,970	\$35,809	188.8%
Credential assessment fees			\$0		#DIV/0!
Optometry review Committee			\$0		#DIV/0!
Continuing Education	\$5,307	\$2,000	\$667	\$9,531	1429.6%
QA - Assessments	\$13,574	\$35,000	\$11,667	\$8,375	71.8%
Other Income	\$3,079	\$10,000	\$3,333	\$2,356	70.7%
<b>Total Revenues</b>	<b>\$2,588,026</b>	<b>\$2,558,860</b>	<b>\$852,953</b>	<b>\$949,990</b>	<b>111.4%</b>
<b>Committee Expenses</b>					
Quality Assurance Committee	\$104,931	\$100,000	\$33,333	\$26,293	78.9%
Communication Committee			\$0		#DIV/0!
Clinical Practice Panel of QAC	\$35,504	\$40,000	\$13,333	\$5,041	37.8%
College Representation	\$20,517	\$40,800	\$13,600	\$2,736	20.1%
ICRC	\$82,245	\$90,000	\$30,000	\$30,071	100.2%
Council Meeting	\$84,120	\$102,000	\$34,000	\$37,660	110.8%
Council Training	\$373	\$15,000	\$5,000	\$11,570	231.4%
Discipline Committee	\$69,866	\$100,000	\$33,333	\$7,667	23.0%
Credential Assessment Committee			\$0		#DIV/0!
FORAC Contribution	\$23,350	\$30,000	\$10,000	\$23,910	239.1%
Transparency Committee		\$2,000	\$667		0.0%
Eye Health Council (EHCO)		\$5,000	\$1,667		0.0%
Fitness to Practise		\$5,000	\$1,667		0.0%
Road Show	\$1,664	\$10,000	\$3,333		0.0%
Executive Committee	\$75,451	\$65,000	\$21,667	\$12,163	56.1%
Memberships (FHRCO, etc)	\$11,344	\$25,000	\$8,333	\$8,657	103.9%
Medals and Presentations	\$1,915	\$5,000	\$1,667		0.0%
Patient Relations Committee	\$24,948	\$30,000	\$10,000		0.0%
Registration Committee	\$37,820	\$65,000	\$21,667	\$6,117	28.2%
Illegal/Internet dispensing	\$102,138	\$100,000	\$33,333	\$54,676	164.0%
Unauthorized Practice	\$27,565	\$50,000	\$16,667	\$4,164	25.0%
Regulation Proposals	\$24	\$15,000	\$5,000		0.0%
Strategic Planning		\$10,000	\$3,333		0.0%
OEBC Contribution		\$0	\$0		#DIV/0!
Governance committee	\$20,630	\$20,000	\$6,667	\$12,624	189.4%
<b>Total Committee Expenses</b>	<b>\$724,405</b>	<b>\$924,800</b>	<b>\$308,267</b>	<b>\$243,352</b>	<b>78.9%</b>
<b>Admin. Expenses</b>					
Bank & Credit Card Fees	\$92,085	\$55,000	\$18,333	\$1,899	10.4%
Investment management Fees	\$0	\$30,000	\$10,000	\$16,125	161.2%
Occupancy Costs	\$149,243	\$155,000	\$51,667	\$49,902	96.6%
Insurance	\$7,764	\$10,200	\$3,400	\$653	19.2%
Legal General	\$25,560	\$35,000	\$11,667	\$3,080	26.4%
Legal - Special	\$2,373	\$5,000	\$1,667		0.0%
Legal - Registration	\$8,158	\$15,000	\$5,000	\$2,333	46.7%
Legal - Quality Assurance	\$1,040	\$10,000	\$3,333		0.0%
Legal - ICRC	\$44,658	\$40,000	\$13,333	\$10,093	75.7%
Legal Discipline	\$182,181	\$125,000	\$41,667	\$73,458	176.3%
Accounting & Audit	\$48,022	\$41,000	\$13,667	(\$4,725)	-34.6%
Recovery of discipline cost	(\$61,160)	\$0	\$0	(\$39,500)	#DIV/0!
Library Expense	\$795	\$1,000	\$333	\$447	134.0%
Web Site & Software	\$44,202	\$50,000	\$16,667	\$15,055	90.3%
Database / IS Servicing/Special Project	\$62,850	\$75,000	\$25,000	\$16,827	67.3%
Office Equipment	\$270	\$10,000	\$3,333		0.0%
Computer Hardware		\$30,000	\$10,000	\$32	0.3%
Leasing of Equipment	\$11,771	\$15,500	\$5,167	\$4,542	87.9%
Office Supplies and Maint.	\$20,438	\$25,000	\$8,333	\$6,185	74.2%
Postage & Courier	\$13,378	\$15,000	\$5,000	\$5,294	105.9%
Communications and Design		\$20,000	\$6,667		0.0%
Printing	\$4,383		\$0		#DIV/0!
Staff Training	\$6,835	\$15,000	\$5,000	\$2,991	59.8%
Telephone and Internet	\$7,034	\$15,000	\$5,000	\$2,416	48.3%
Human Resources(Consultants)	\$21,243	\$15,000	\$5,000	\$6,213	124.3%
OE Tracker costs	\$45,988	\$50,000	\$16,667	\$45,602	273.6%
Jurisprudence examination	\$13,055	\$20,000	\$6,667	\$7,790	116.9%
Other Expense	\$5,508	\$7,140	\$2,380	\$544	22.9%
<b>Payroll</b>			\$0		
Consulting	(\$6,545)	\$9,180	\$3,060		0.0%
Salaries	\$878,564	\$985,000	\$328,333	\$303,989	92.6%
Staff Benefits	\$71,366	\$80,500	\$26,833	\$26,225	97.7%

Sub-Total	\$1,701,055	\$1,959,520	\$653,173	\$557,472	85.3%
Sub-Total	\$0	\$0	\$0	\$0	
<b>Total Admin. Expenses</b>	<b>\$1,701,055</b>	<b>\$1,959,520</b>	<b>\$653,173</b>	<b>\$557,472</b>	<b>85.3%</b>
<b>Total Operating Expenses</b>	<b>\$2,425,461</b>	<b>\$2,884,320</b>	<b>\$961,440</b>	<b>\$800,823</b>	<b>83.3%</b>
<b>EBITDA</b>	<b>\$162,565</b>	<b>(\$325,460)</b>	<b>(\$108,487)</b>	<b>\$149,167</b>	<b>\$0</b>
Depreciation	\$41,397	\$85,000	\$28,333	\$0	0.0%
<b>Operating Income</b>	<b>\$121,168</b>	<b>(\$410,460)</b>	<b>(\$136,820)</b>	<b>\$149,167</b>	<b>\$0</b>
<b>Exceptional Investments</b>					
Research for Entry-to-Practice Exam	\$17,500	\$250,000	\$83,333		0.0%
Online Jurisprudence seminar & exam	\$0	\$100,000	\$33,333		0.0%
<b>Operating income after exceptionals</b>	<b>\$103,668</b>	<b>(\$760,460)</b>	<b>(\$253,487)</b>	<b>\$149,167</b>	<b>\$0</b>
Investment Income	\$182,957	\$79,591	\$26,530	\$60,471	227.9%
<b>NET RESULTS</b>	<b>\$286,625</b>	<b>(\$680,869)</b>	<b>(\$226,956)</b>	<b>\$209,637</b>	<b>\$3</b>

College of Optometrists of Ontario 65 St. Clair Ave. E., 9th Floor Toronto, Ontario MAT 2Y3 <b>Balance Sheet</b> Apr 2018		
	30-Apr-18	30-Apr-17
<b>ASSETS</b>		
<b>Current</b>		
Cash	552,105	311,336
Short Term Investment		
Amounts Held By Broker	89,011	108,584
Accounts Receivable	1,298	4,496
Interest Receivable		
Prepaid Expenses	15,232	17,827
	<b>657,646</b>	<b>442,243</b>
<b>Portfolio Investments</b>		
Investments, Securities & Bonds	5,545,564	5,360,169
<b>Capital Assets less Accumulated Amortization</b>		
Land & Building	0	0
Computer Hardware & Software	110,308	105,861
Other	0	
Furniture & Equipment	98,133	98,133
Construction & Leaseholds	259,516	259,516
Evaluating Examination		
Database / IS Implementation		
	<b>467,957</b>	<b>463,510</b>
Accumulated Amortization	-286,724	-245,327
	<b>181,233</b>	<b>218,183</b>
	<b>6,384,442</b>	<b>6,020,595</b>
<b>LIABILITIES</b>		
<b>Current</b>		
Accounts Payable & Accrued Liabilities	35,028	136,806
Accrued Building Upgrade Expenses	0	0
Fees Received in Advance	1,504,824	1,465,106
	<b>1,539,852</b>	<b>1,601,912</b>
<b>NET ASSETS</b>		
Invested in Capital Assets	181,232	218,183
Appropriated Special Policy Funds (1)	2,800,000	2,350,000
Unappropriated Surplus	1,863,358	1,850,501
	<b>4,844,590</b>	<b>4,418,684</b>
	<b>6,384,442</b>	<b>6,020,596</b>

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# 5 / MOTIONS

- 5. Motions Brought Forward from Committees
  - 5.1. Quality Assurance Committee
    - 5.1.1. Clinical Practice Panel
    - 5.1.2. Quality Assurance Subcommittee
  - 5.2. Governance Committee
  - 5.3. Executive Committee
    - 5.3.1. Statutory Committee Appointments
    - 5.3.2. By-law Amendments under *Protecting Patients Act*
    - 5.3.3. Patient Relations Fund

## Motion to Council

**Name of committee: Clinical Practice Panel – Quality Assurance Committee**

**Date of submission: June 4, 2018**

**Recommendations to Council** (including rationale and impact on budget if appropriate):

**Proposed motion: To approve the publication of amendments to the following section of the Optometric Practice Reference (OPR):**

- 6.5 Contact Lens Therapy

Recommendation to Council and Rationale	
The Issue	Minor edits to a standard of practice being proposed by the Clinical Practice Panel. Council approves the publication of amendments and additions to the OPR (Standards of Practice). Once approved by Council, the OPR is updated and members are notified of the related changes to standards of practice.
Background	OPR 6.5 – Amendment to the standard to remove express assessment of corneal topography when indicated. This is already covered under previous bullet point: “corneal clarity and integrity.”
Analysis, including impact on budget	Costs are related to updating the OPR.
Options (are there alternatives)	Under the HPPC, colleges are required to articulate the standards of practice to which members are held accountable.
Implications/expectations if approved	
Implications/potential consequences If not approved	

## 6.5 Contact Lens Therapy

### Description

Optometrists are authorized to prescribe and dispense contact lenses for the treatment of:

- disorders of refraction, and/or sensory and oculomotor dysfunctions of the eye and vision system, and/or
- diseases/disorders affecting ocular health, and/or
- anatomical, structural and/or cosmetic concerns

The provision of this service to patients involves an initial assessment to determine suitability of patients for contact lens therapy, a determination of the parameters of a contact lens appropriate for patients, and ongoing monitoring of the efficacy of treatment. Contact lenses are classified by Health Canada as a medical device, not a consumer commodity, and should be treated accordingly.

### Regulatory Standard

The Professional Misconduct Regulation ([O.Reg. 119/94 Part I under the \*Optometry Act\*](#)) includes the following acts of professional misconduct:

3. Doing anything to a patient for a therapeutic, preventative, palliative, diagnostic, cosmetic or other health-related purpose in a situation in which a consent is required by law, without such a consent.
10. Treating or attempting to treat an eye or vision system condition which the member recognizes or should recognize as being beyond his or her experience or competence.
11. Failing to refer a patient to another professional whose profession is regulated under the *Regulated Health Professions Act, 1991* when the member recognizes or should recognize a condition of the eye or vision system that appears to require such referral.
12. Failing, without reasonable cause, to provide a patient with a written, signed and dated prescription for subnormal vision devices, contact lenses or eye glasses after the patient's eyes have been assessed by the member and where such a prescription is clinically indicated.
14. Failing to maintain the standards of practice of the profession.

### Professional Standard

#### Initial Contact Lens Fitting

Before contact lens fittings, optometrists obtain required clinical information ([OPR 4.2](#)) to determine the suitability of patients for contact lens wear. Special emphasis is given to the analysis of:

- the health of the cornea, conjunctiva, lids, tarsal and bulbar conjunctiva, and the integrity of the tear layer;
- corneal curvature;
- refractive status and visual acuity;
- the effects that contact lens wear may have on the function of the accommodative, oculo-motor and sensory systems; and
- relevant environmental, occupational, avocational, emotional and systemic health

factors affecting contact lens wear.

To allow patients to make informed decisions about proceeding with treatment, optometrists provide information about the advantages, risks, limitations, and costs of contact lens wear and on the prognosis for successful treatment. Patients may choose to proceed with the contact lens fitting by their optometrist, or may obtain a copy of the spectacle prescription to be used for contact lens fitting by other qualified practitioners.

In fitting contact lenses, optometrists will determine, by diagnostic fitting or calculation, lenses that are appropriate for their patients. The initial lenses are evaluated on a patient's eyes and subsequent modifications of the lens parameters are made as required.

Instructions are provided to patients with respect to:

- hygiene;
- lens insertion and removal;
- use of specific lens care products;
- recommended wearing times and replacement schedules;
- normal and abnormal adaptive symptoms;
- contraindications to lens use;
- progress evaluations; and
- appropriate instructions on how and when to access emergency care ([OPR 4.6](#)).

Patients are examined during the adaptation period to assess lens performance, adaptation and compliance.

Once optometrists are satisfied that the adaptation process is complete, and that the parameters of the contact lenses are correct, a contact lens prescription can be finalized. Optometrists are entitled to remuneration for all professional services involved in the determination of these prescriptions. At this point, patients have the option of obtaining contact lenses from their optometrist, or requesting a copy of the contact lens prescription in order to obtain contact lenses elsewhere.

### **Continuing Care**

Optometrists provide continuing care to established contact lens patients. In providing continuing care, optometrists:

- maintain a history concerning:
  - the specifications, age and wearing schedule of current contact lenses;
  - the current lens care regime;
  - any adverse reactions associated with contact lens wear; and
  - any health or medication changes.
- assess patients to determine if they are achieving acceptable:
  - lens appearance and fit;
  - wearing time;
  - comfort with lenses in place;
  - corneal clarity and integrity;
  - ~~stable corneal curvature~~;



- conjunctival and lid appearance;
- tear characteristics;
- over-refraction for best visual acuity;
- spectacle acuity; and
- compliance with recommendations on lens handling, lens care, lens replacement and wearing times.
- identify any problems and counsel patients as necessary.
- provide and implement management plans for any problems identified, making recommendations for further care.

### **Replacement Contact Lens Services**

When providing replacement contact lens services, optometrists are responsible for:

- determining the currency of clinical information and providing diagnostic services as required;
- determining the need for alteration of previous lens specifications and makes adjustments accordingly;
- advising patients as to the need for and extent of continuing care;
- confirming the parameters of contact lenses as ordered; and
- providing follow-up services as needed.

The College standards on Delegation and Assignment ([OPR 4.3](#)) and Collaboration ([OPR 4.8](#)) must be followed when any procedures are assigned, including to another regulated health professional (RHP).

### **Internet Sites**

Where the internet is used in the provision of contact lens therapy, websites must:

- comply with College advertising guidelines and relevant paragraphs in the Professional Misconduct regulation (O. Reg. 119/94, Part I under the Optometry Act);
- identify the website as belonging to or referring to a member registered with the College of Optometrists of Ontario;
- collect and record patient information in a private and secure manner respecting patient confidentiality;
- identify the physical location of the clinic/dispensary, including address and city/town, and the hours of operation of the clinic; and
- include the telephone number to contact the clinic/dispensary.

The College standards on Delegation and Assignment ([OPR 4.3](#)) and Collaboration ([OPR 4.8](#)) must be followed when any procedures are assigned, including to another regulated health professional (RHP).

## Motion to Council

**Name of committee:** Quality Assurance Subcommittee

**Date of submission:** June 7, 2018

**Recommendations to Council** (including rationale and impact on budget if appropriate):

**Proposed motion:** That Council approve the addition of \$70 000 for a new “Exceptional Investments” line to undertake a Quality Assurance Program Review.

Recommendation to Council and Rationale	
The Issue	That Council approve the addition of \$70 000 for a new “Exceptional Investments” line to undertake a Quality Assurance Program Review.
Background	In January 2018, Council approved the striking of a Quality Assurance Sub-committee whose mandate would include a proposed independent evaluation of the College’s Quality Assurance Program. Council agreed to allocate resources to this project, including hiring an independent consultant to conduct the review. However, at that time, there was no cost estimate available in order to propose a reasonable budget amount for the project. Consultants were recently invited to respond to an RFP to conduct a fulsome review of the College’s QA program. The Committee will be meeting with shortlisted candidates at their upcoming meeting. Following a jurisdictional review of regulatory colleges that have performed similar reviews as well as the cost projections provided by the consultants, the Committee is now able to propose a budget amount for Council’s approval.
Analysis, including impact on budget	To engage a consultant, experienced in such reviews and to cover meeting costs, the Committee expects it will need approximately \$70,000.
Options (are there alternatives)	
Implications/expectations if approved	The QA Subcommittee could proceed in selecting a consultant and commence the evaluation process. This evaluation will assist the QAP in: <ul style="list-style-type: none"> <li>i. Determining if the current QA program (peer-conducted practice assessment, self-assessment, and continuing education) meets the requirements of the RHPA;</li> <li>ii. Determining if the current QA program aligns with the goals and objectives of the College in ensuring competency, promoting accountability, and assisting members enhance their patient care and management;</li> <li>iii. Identifying individual components of the QA program that are successful and effective;</li> </ul>

	<ul style="list-style-type: none"> <li>iv. Identifying and providing recommendations to address areas needing improvements; and</li> <li>v. Budgeting for the cost of administering the QA program.</li> </ul>
<p>Implications/potential consequences if not approved</p>	<p>The QA Subcommittee would not be able to proceed with an evaluation conducted by an external consultant. The QA program may fall behind in supporting and offering members opportunities to be engaged in and continually improve on their knowledge and skills, patient outcomes, and practice, and the program may fall behind in meeting the College's mandate to protect the public interest.</p>

## Motion to Council

**Name of committee: Governance Committee**

**Date of submission: June 8, 2018**

**Recommendations to Council** (including rationale and impact on budget if appropriate):

**Proposed motion: That Council strike an Audit/Finance/Risk Committee and introduce the role of Human Resources to the restructured Governance Committee, to commence in January 2019**

Recommendation to Council and Rationale	
The Issue	Council is asked to strike an Audit/Finance/Risk Committee and introduce the role of Human Resources to the restructured Governance Committee, to commence in January 2019.
Background	<p>The College of Optometrists of Ontario recently underwent a Governance Review, conducted by Mr. David Brown of Governance Solutions. In the report presented to Council, Mr. Brown outlined his findings on several governance areas and made recommendation for improvement. The Governance Committee continues to consider the implementation work plan.</p> <p>Research in governance benchmarking and best practice of councils/boards is clearly showing a significant drop in the use of Executive Committees. The most prevalent committees being formed are Finance/Audit and Governance committees. Though the RHPA does require all regulatory colleges to have an Executive Committee, the only legislated function is that they act on behalf of Council between meetings. Currently, Executive performs additional functions including administering financial oversight and carrying out human resource tasks.</p> <p>The Governance Committee determined, based on the recommendations and best practice models, that the finance/audit and human resource roles currently administered by the Executive Committee should be delineated to two new standing committees moving forward.</p>
Analysis, including impact on budget	<p>To be determined.</p> <p>If approved, the Governance Committee will present draft terms of reference for each of these three committees to Council at the next meeting.</p>
Options (are there alternatives)	To continue to have Executive Committee fulfill the roles and functions of an Audit/Finance/Risk & Governance/HR Committee.
Implications/expectations if approved	If approved, the roles of the three corporate governance committees (Executive, Governance/HR, Audit/Finance/Risk) would separate the

	<p>respective responsibilities and new terms of references would be drafted. Executive would still act on Council’s behalf between meetings, but would focus on a coordination role with stakeholders. This change would also alleviate the workload currently on Executive and the new committees could better focus and expand the work in their given areas, especially concerning risk and control oversight, and College Council and committee member recruitment.</p> <p>The two new standing committees would be filled by Council members, thus allowing more members to become involved in the corporate governance aspect of the College.</p>
<p>Implications/potential consequences if not approved</p>	<p>Oversight boards are usually structured in this way to deal with financial governance, risk management, and human resources. This is the growing trend in terms of new governance practices. If no change is made, this could be considered divergent to the best practices of board governance.</p> <p>The issue of public perception also arises. The current system has consolidated considerable power to a subset of Council (the Executive Committee).</p>

## Motion to Council

**Name of Committee: Executive Committee**

**Date of Submission: June 12, 2018**

**Recommendations to Council** (including rationale and impact on budget if appropriate):

**Proposed Motion: To appoint, effective August 12, 2018, Ms. Luisa Morrone to the Inquiries Complaints and Reports Committee and Ms. Maureen Chesney to the Patient Relations Committee.**

Recommendation to Council and Rationale	
The Issue	On August 11, 2018, the appointment of Ms. Irene Moore is concluded. Vacancies will be created on Council and on committees to which she has been appointed.
Background	<p>Irene currently sits on five committees; Patient Relations, ICRC, Discipline, Governance and Executive Committees. It is proposed that the vacancy should be filled on ICRC and PRC by publicly appointed members. As well, an election will be held to fill the vacancy created on Executive Committee.</p> <p>It is proposed to appoint Ms. Luisa Morrone to ICRC and Ms. Maureen Chesney to PRC. Both of these councillors have agreed to put their names forward for these appointments.</p>
Analysis, including impact on budget	There is no impact on budget. Having a full complement of committee members assists these statutory committees in fulfilling their mandate.
Options (are there alternatives)	Council has the option of leaving these positions vacant until January when new committee appointments are made.
Implications/expectations if approved	If approved, these committees will be fully constituted under the by-laws.
Implications/potential consequences If not approved	If not approved, these committees have the potential for not fulling quorum for upcoming meetings.

## Motion to Council

**Name of Committee: Executive Committee**

**Date of Submission: June 11, 2018**

**Recommendations to Council** (including rationale and impact on budget if appropriate):

**Proposed Motion: To approve amendments to the College By-laws to ensure consistency with the May 1, 2018 amendments to the *RHPA* and its regulations.**

Recommendation to Council and Rationale	
The Issue	<p>The <i>Protecting Patients Act, 2017</i>, which received Royal Assent on May 31, 2017, amends the <i>Health Professions Procedural Code (HPPC)</i>, which is Schedule 2 to the <i>Regulated Health Professions Act, 1991</i>, in a number of ways.</p> <p>On May 1, 2018, certain amendments came into force and the Minister introduced new regulations that were added to the <i>HPPC</i>. In order to be compliant with these legislative changes, amendments to the current College by-laws are proposed.</p>
Background	<p>Information regarding these legislative changes was sent out to the membership following its proclamation. This update was sent out via e-mail blast and can be found <a href="#">here</a>.</p> <p>The following sections of the by-laws must be changed in order for the by-laws to be consistent with these amendments:</p> <p>Part 16-Information Provided by Members Section 16.02 Member Reports: Members must now report licences or registration in another profession inside or outside Ontario and information related to offences, charges or bail conditions.</p> <p>Part 18-Register Section 18.02 Information that the HPPC Requires be Kept in the Register: While much of this information was already required to be in the register under by-law changes made in 2015, information that is now required under the HPPC has been moved from Section 18.03 to 18.02. Section 18.03 Additional Information that the College Requires Be Kept in the Register: Information that is now required under the HPPC has been moved from this section to Section 18.02.</p> <p>Part 20 – Funding For Therapy and Counseling Section 20.02 Role of Patient Relations Committee: The proposed amendment in Paragraph (2)(a) reflects the change in HPPC whereby a person may apply for funding once an allegation of sexual abuse has been made.</p>

	<p>Housekeeping Amendment not Related to Changes in the HPPC:  Section 17.01 Application of a Health Profession Corporation:  The Ministry now requires a member to submit a corporate profile report to the College (rather than a certificate of status) when opening or renewing an optometry professional corporation's certificate of authorization. The proposed wording reflects this change.</p> <p>All of the required by-law amendments are shown in the attached documents in "track changes".</p>
Analysis, including impact on budget	<p>There is no substantial impact on the budget.</p> <p>The effect of these changes is not substantial given the previous by-law changes made by Council in 2015 to put into effect many of these transparency initiatives.</p>
Options (are there alternatives)	<p>While there are some by-law changes that must be circulated prior to final consideration by Council, these changes in the by-laws are required in order to be consistent with the <i>Protecting Patients Act</i> and the subsequent amendments to the <i>HPPC</i>. Accordingly, there is no value in circulating these amendments for member comment as the amendments are mandatory.</p>
Implications/expectations if approved	<p>The new by-laws will come into force once passed by Council.</p>
Implications/potential consequences if not approved	<p>N/A</p>





COLLEGE OF  
**Optometrists**  
OF ONTARIO

## **College By-laws**

**Original Effective Date: August 3, 2012**  
**Revised September 4, 2012**  
**Revised January 16, 2015**  
**Revised April 8, 2015**  
**Revised September 30, 2015**  
**Revised January 20, 2016**  
**Revised Fee Schedule Effective April 20, 2016**  
**Revised June 22, 2017**  
**Revised September 19, 2017**

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# BY-LAWS OF THE COLLEGE OF OPTOMETRISTS OF ONTARIO

## PART 1 - DEFINITIONS

### 1.01 Definitions

(1) In these By-laws, unless otherwise defined or required by the context,

"**Act**" means the *Optometry Act, 1991* including its associated regulations;

"**Appointed Council Member**" means a person appointed to Council by the Lieutenant Governor in Council;

"**Code**" means the *Health Professions Procedural Code*, which is Schedule 2 of the *Regulated Health Professions Act, 1991*;

"**College**" means the College of Optometrists of Ontario;

"**Committee**" means a committee established under s. 10 of the Code or a committee established under these By-laws;

"**Committee Member**" means a member of a Committee;

"**Committee Meeting**" means a meeting of any Committee but does not include a hearing or a meeting of a panel of a Committee;

"**Council**" means the Council established under Section 6 of the Act;

"**Council Committee Member**" means a Member of the College who is elected to Council and appointed by Council to a Committee, and includes a Member appointed to a Committee to fill a vacancy;

"**Council Meeting**" means a meeting of Council;

"**Council Member**" means an Elected Council Member, an Appointed Council Member and/or a member of Council selected from the Faculty of the University of Waterloo School of Optometry and Vision Science;

"**Elected Council Member**" means a Member of the College elected to Council in accordance with these By-laws (including district 6);

"**Faculty**" means a person who belongs to the faculty of the University of Waterloo School of Optometry and Vision Science. However, Faculty does not include a person who has only been granted an appointment for research or a special appointment, a visiting or adjunct instructor, or a person who holds a similarly restricted position;

**"Life Member"** means a Member or former Member of the College who has been designated as a Life Member by the College because, among other things, he or she has practised optometry in Ontario for at least 25 years and has retired from practising optometry;

**"Member"** means a person or health profession corporation registered with the College, as the case may be;

**"Resolution"** means a vote of at least a majority of those Council Members in attendance at the meeting and voting on the resolution;

**"RHPA"** means the *Regulated Health Professions Act, 1991*, including its associated regulations and the Code;

**"Special Resolution"** means a vote of at least a 2/3<sup>rds</sup> majority of Council Members in attendance at the meeting and voting on the resolution; and

**"Written Resolution"** means a Resolution or Special Resolution passed by Council Members in the absence of a meeting in person, and the position or vote of any Council Member may be communicated in writing, including fax, e-mail and any other manner as Council may determine.

- (2) Any term not defined in these By-laws shall have the meaning provided to it in the RHPA or the Act.

## 1.02 Seal

The seal depicted below is the seal of the College.



## PART 2 - AMENDMENT OR REVOCATION OF BY-LAWS

### 2.01 Special Resolution is Required

- (1) A Special Resolution is required to amend or revoke these By-laws, or make new By-laws.
- (2) Written notice of all motions applying to the making, amending or revoking of a By-law shall be circulated:
  - (a) to Council Members at least 14 days prior to the tabling of such motion; and

- (b) when required under Section 94(2) of the Code, to all Members at least 60 days prior to the tabling of such motion.
- (3) Every By-law, including every amendment and revocation of a By-law, shall be dated and numbered according to the date on which it was passed, certified by the President or Vice-President, in addition to the Registrar, sealed and maintained in a book in its chronological order.

### **PART 3 - BANKING AND FINANCE**

#### **3.01 Banking**

- (1) The College shall open an account at a Schedule 1 Canadian chartered bank.
- (2) The College shall:
  - (a) open all accounts required for the operation of the College, and
  - (b) unless otherwise earmarked, deposit all monies belonging to the College, with the bank.
- (3) Except for payments out of the petty cash fund, all College payments shall be made by electronic transfer, credit card, cheque, draft or money order drawn on the College's bank account.

#### **3.02 Bank Signing Authority**

Subject to these By-laws, Council may authorize by Resolution any individual to sign contracts, documents, cheques or other instruments pertaining to the College's bank account. In the absence of such Resolution, any of the President, Vice-President or the Treasurer, in addition to the Registrar, is authorized to sign banking documents on behalf of the College.

#### **3.03 Authorization by Electronic Signature**

Electronic signatures may not be used on any securities or negotiable instruments, unless authorized by Council by Resolution.

#### **3.04 Investments**

- (1) College funds not immediately required for use by the College may be invested.
- (2) The Executive Committee shall recommend, for approval by Council, an investment policy for investing the College's funds in a reasonably safe and secure manner.

- (3) Council may authorize, by Resolution, any employee of the College to give directions to an investment advisor.
- (4) All securities and other negotiable instruments in which the College's monies have been invested shall be registered in the name of the College.
- (5) Council shall oversee and ensure that a process is in place to fairly evaluate the College's investments and investment advisor annually.

### **3.05 Custody of Securities**

- (1) The Registrar, Treasurer or other individual appointed by Council shall maintain a record of all securities and other negotiable instruments owned by the College.
- (2) Any deposit, cashing or transferring of securities shall require the signature of either the President, Vice-President or Treasurer, in addition to the Registrar.

### **3.06 Borrowing**

- (1) Council may, by Special Resolution:
  - (a) borrow money on the credit of the College;
  - (b) limit or increase the amount of money the College may borrow; or
  - (c) pledge assets of the College.

The Executive Committee shall review, from time to time, the terms and conditions of any monies borrowed by the College.

### **3.07 Petty Cash**

- (1) The College shall maintain a petty cash fund of up to \$1,000. The Registrar must authorize expenditures from the petty cash fund.

### **3.08 Authorization of Expenses**

- (1) If a College expenditure has previously been approved as an item in the College's budget:
  - (a) any expense under \$25,000 requires only the Registrar's approval; and
  - (b) any expense of or exceeding \$25,000 requires, in addition to the Registrar, the approval of either the President, Vice-President or Treasurer.
- (2) If a College expenditure is not an item in the College budget, the Executive Committee shall review the expenditure and make



recommendations to Council as to whether or not to approve the expenditure.

### **3.09 Fiscal Year**

The fiscal year of the College is January 1<sup>st</sup> to December 31<sup>st</sup>.

### **3.10 Auditors**

- (1) At the first meeting following the election of the Executive Committee, the Executive Committee must appoint an auditor to audit the accounts of the College and hold office for the ensuing year.
- (2) Council shall oversee and ensure that a process is in place to fairly evaluate the auditor annually.
- (3) The auditor shall present the results of its annual audit to Council when requested to do so by Council. The results of each annual audit shall be published in the annual report of the College.

## **PART 4 - INSURANCE AND INDEMNIFICATION**

### **4.01 Insurance Coverage for College**

The College shall, after consulting with an insurance broker regarding the College's requirements, obtain comprehensive insurance coverage for, among other things, directors and officers liability, fidelity, property damage and personal injury.

### **4.02 Indemnification of College Representatives**

The College shall indemnify and save harmless every Council Member, Committee Member, employee, appointee or other duly designated representative of the College and their heirs, executors and administrators, and estates, out of the funds of the College from and against,

- (1) all costs, charges and expenses whatsoever that he or she sustains or incurs in or about any action, suit or proceeding that is brought, commenced or prosecuted against him or her, for or in respect of any act, deed, matter or thing whatsoever, made done or permitted by him or her, in or about the execution of the duties of his or her position or employment, and
- (2) all other costs, charges and expenses that he or she sustains or incurs in relation to the College's affairs,

except such costs, charges or expenses incurred as a result of his or her own wilful misconduct or gross negligence.

## PART 5 - EXECUTION OF DOCUMENTS

### 5.01 Signing Authority

- (1) Unless otherwise indicated in these By-laws, either the President, Vice-President or Treasurer, in addition to the Registrar, or any individual appointed by Resolution or Special Resolution of Council, may sign documents or instruments requiring the signature of the College.
- (2) The Registrar may sign summonses, notices and orders on behalf of the College.

## PART 6 - ELECTION OF COUNCIL MEMBERS

### 6.01 Electoral Districts

- (1) Council shall consist of:
  - (a) Nine Elected Council Members elected from the following electoral districts:
    - (i) **"District 1"** which comprises the municipality of Toronto and the regional municipalities of Halton, City of Hamilton, Niagara, Peel and York;
    - (ii) **"District 2"** which comprises the Northern Electoral District, composed of the territorial districts of Algoma, Cochrane, Kenora, Manitoulin, Nipissing, Parry Sound, Rainy River, City of Greater Sudbury, Thunder Bay and Timiskaming, the counties of Bruce, Dufferin, Grey, Haliburton, Huron; Renfrew and Simcoe and the district municipality of Muskoka;
    - (iii) **"District 3"** which comprises the Eastern Electoral District, composed of the counties of Frontenac, Hastings, Lanark, Northumberland, Peterborough, Prince Edward, Kawartha Lakes, Leeds & Grenville, Lennox and Addington, Prescott and Russell United Counties, Stormont, Dundas and Glengarry and the Durham Region and the City of Ottawa;
    - (iv) **"District 4"** which comprises the Western Electoral District, composed of Brant, Elgin, Essex, Chatham-Kent, Lambton, Middlesex, Oxford, Perth and Wellington and the regional municipalities of Haldimand County, Norfolk County and Waterloo; and
    - (v) **"District 5"** which comprises the Provincial Electoral District, composed of the whole of the Province of Ontario;

- (b) 8 Appointed Council Members; and
  - (c) 1 Member, who has been selected from the Faculty of the University of Waterloo School of Optometry and Vision Science, provided that that person has first been elected, in the manner set out in these By-laws, by those Members who belong to the Faculty of the University of Waterloo School of Optometry and Vision Science. The electoral district for this Council position will be referred to as "**District 6**".
- (2) The following electoral districts shall elect the following number of Elected Council Members:

<b>District</b>	<b>Elected Council Members</b>
District 1	2
District 2	1
District 3	1
District 4	1
District 5	4
District 6	1

- (3) With the exception of district 6:
- (a) Council may, by Special Resolution, redefine:
    - (i) the geographic area of each electoral district; and
    - (ii) the number of Elected Council Members for each electoral district, to create balanced representation amongst the electoral districts based on general population; and
  - (b) if an electoral district has no candidate at the time of an election, that Council seat shall be transferred to District 5 to allow for any eligible Member to stand for election for that Council seat.

## **6.02 Voting Eligibility**

A Member is eligible to vote in an election for Council if, on the 45<sup>th</sup> day before the election, the Member:

- (a) is the holder of:
  - (i) a general certificate of registration; or

- (ii) an academic certificate of registration; and
- (b) after having been provided with an opportunity to rectify any failure of his or her obligations to the College:
  - (i) has paid any fee, penalty or order for costs owing to the College;
  - (ii) has submitted to the College all required forms and documents; and
  - (iii) is otherwise in good standing with the College;

### **6.03 Timing of Council Member Elections/Selection**

- (1) Elections or selection for Council shall take place as follows:
  - (a) For district 1:
    - (i) one Council Member in 2012 and every third year thereafter; and
    - (ii) one Council Member in 2013 and every third year thereafter;
  - (b) For districts 2 and 3 one Council Member each in 2013, and every third year thereafter;
  - (c) For district 4 one Council Member in 2012, and every third year thereafter;
  - (d) For district 5:
    - (i) one Council Member in 2012 and every third year thereafter;
    - (ii) one Council Member in 2013 and every third year thereafter; and
    - (iii) two Council Members in 2014 and every third year thereafter;
  - (e) For district 6, one Council Member in 2012 and every third year thereafter.
- (2) Council elections and selection shall take place before November 1<sup>st</sup> in any given year.

### **6.04 Eligibility for Election of Council Members for Districts 1 Through 5**

- (1) A Member shall be eligible for election to Council if:
  - (a) by the deadline for the receipt of the nomination:

- (i) the Member principally resides in or practises optometry in the district for which the Member is seeking election;
  - (ii) the Member is the holder of:
    - (A) a general certificate of registration; or
    - (B) an academic certificate of registration,and the certificate is not subject to a term, condition or limitation that does not already apply to every Member who possesses that class of certificate;
  - (iii) the Member is not a member of the Faculty of the University of Waterloo School of Optometry and Vision Science;
  - (iv) the Member files with the Registrar a written agreement to resign from all of the applicable following positions if elected as a Council Member:
    - (A) an elected representative, director or officer or employee of, or a party to a contractual relationship (if it is reasonable to expect that a real or apparent conflict of interest may arise) to provide services to, the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council, or
    - (B) an appointed Committee chairperson or member of a committee of the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council;
- (b) after having been provided with an opportunity to rectify any failure in his or her obligations to the College, the Member:
- (i) has paid any fee, charge or order for costs owing to the College,
  - (ii) has submitted to the College all required forms and documents, and
  - (iii) is otherwise in good standing with the College;
- (c) the Member is not the subject of any disciplinary or incapacity proceedings; and
- (d) the Member has not been disqualified by Council as a Council Member or Committee Member in the preceding six years; and

- (2) No Member shall be a candidate for Council Member in more than one district during an election.

#### **6.05 Eligibility for Selection of District 6 Council Member**

- (1) A Member who is a member of the Faculty of the University of Waterloo School of Optometry and Vision Science shall be eligible for selection to Council if, on the date of selection:
  - (a) the Member files with the Registrar a written agreement to resign from all of the applicable following positions if selected as a Council Member:
    - (i) an elected representative, director or officer or employee of, or a party to a contractual relationship (if it is reasonable to expect that a real or apparent conflict of interest may arise) to provide services to, the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council, or
    - (ii) an appointed Committee chairperson or member of a committee of the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council;
  - (b) the Member is the holder of:
    - (i) a general certificate of registration; or
    - (ii) an academic certificate of registration;and the certificate is not subject to a term, condition or limitation that does not already apply to every Member who possesses that class of certificate;
  - (c) after having been provided with an opportunity to rectify any failure in his or her obligations to the College, the Member:
    - (i) has paid any fee, charge or order for costs owing to the College,
    - (ii) has submitted to the College all required forms and documents, and
    - (iii) is otherwise in good standing with the College;
  - (d) the Member is not the subject of any disciplinary or incapacity proceedings;
  - (e) the Member has not been disqualified by Council from being a Council Member or Committee Member in the preceding six years.

- (2) No Member shall be a candidate for Council Member in more than one district during an election.

#### **6.06 Term of Office for Council Members**

- (1) The term of office of a Council Member is three years, beginning from the first regular Council meeting after the Member was elected, appointed or selected, as the case may be, until his or her successor takes office in accordance with these By-laws.
- (2) A Council Member may serve more than one term. However, no person may be an Elected Council Member for more than nine consecutive years. Time served as an Elected Council Member as a result of the filling of a vacancy in between Council elections shall not be included in the calculation.

#### **6.07 Nominating Procedure**

- (1) At least 60 days before the date of election each year, the Registrar shall, in the districts where elections are to be held in that year, invite in writing any Member wishing to stand for election to Council.
- (2) A Member's written intent must be returned to the Registrar no later than 30 days before the election.

#### **6.08 Election Procedure**

- (1) Each eligible Member may vote once for a candidate:
  - (a) in one of the following:
    - (i) in the district in which the Member's primary place of practise is located; or, if a Member does not practise optometry in Ontario, in the district where he or she primarily resides; or
    - (ii) if the Member also belongs to the Faculty of the University of Waterloo School of Optometry and Vision Science, in district 6; and
  - (b) in district 5.
- (2) If a Member practises optometry in multiple electoral districts and has not declared a primary place of practise, the College shall select the electoral district in which the Member is eligible to vote on the Member's behalf.
- (3) When there is more than one candidate for a position, the Registrar shall, at least 15 days before an election, send each Member entitled to vote in an election:

- (a) a clearly marked ballot;
  - (b) a blank envelope, if necessary;
  - (c) a return mail envelope, if necessary;
  - (d) the campaign material provided by each candidate; and
  - (e) voting instructions.
- (4) Upon receipt of a Member's ballot, the Registrar shall:
- (a) open the return mail envelope; and
  - (b) place the blank envelope containing the ballot in the ballot box.
- (5) At the completion of the election, the Registrar shall tally the votes on each ballot received.
- (6) The candidate (or his or her designate) is entitled to be present while the Registrar tallies the votes.
- (7) The candidate who receives the most votes cast on a ballot for each contested electoral district shall be declared elected.
- (8) If the votes on a ballot result in a tie, the Registrar shall resolve the deadlock by lot.
- (9) If a position in an electoral district is not contested, the Registrar shall declare the candidate elected by acclamation.
- (10) Where an issue arises with respect to a ballot that is not governed by these By-laws, the Registrar shall resolve the dispute in a fair and democratic manner.
- (11) The Registrar shall report the results of the election to Council and the Members.
- (12) If Council determines, by Special Resolution, that an alternative method of voting (such as electronic voting) would be preferable, Council shall create a procedure for voting in accordance with generally accepted principles of democracy and fairness.

#### **6.09 Vote Recount**

- (1) If a candidate has lost the election, the candidate (or his or her designate) may request a recount in the electoral district in which he or she was a candidate, provided that:



- (a) he or she has lost the election by no more than 20 votes; and
- (b) the request is made in writing to the Registrar within 7 days of the results of the election being reported.
- (2) The recount shall occur within 14 days of a valid recount request.
- (3) The candidate requesting the recount and the candidate previously declared the winner (or a designate of each) shall be entitled to be present at the recount.
- (4) If the outcome of the recount changes the election results:
  - (a) the candidate requesting the recount shall be refunded any fees paid; and
  - (b) the candidate who has now received the most votes on the ballot shall be declared elected.
- (5) If the recount of the votes on the ballot results in a tie, the Registrar shall resolve the deadlock by lot.
- (6) Where an issue arises with respect to the recount that is not governed by these By-laws, the Registrar shall resolve the dispute in a fair and democratic manner.
- (7) The Registrar shall report the results of the recount to Council and the Members.
- (8) The Registrar may destroy the ballots 8 days after the election or, if a recount has been requested, 8 days after the recount.

#### **6.10 Election Challenge**

- (1) A candidate or his or her designate may only challenge an election if:
  - (a) he or she submits the challenge in writing to the Registrar within:
    - (i) 7 days after the election results are reported; or
    - (ii) if a vote recount has occurred, 7 days after the vote recount results are reported; and
  - (b) provide a detailed description of the reason for challenging the vote.
- (2) Within 7 days of a the Registrar receiving a valid election challenge, Council shall appoint:

- (a) a panel consisting of 3 Council Members, at least one of whom is an Appointed Council Member, to hold an inquiry into the election (the "Election Challenge Committee"); and
- (b) provide a deadline (which may, depending on the circumstances, be extended) by which the Election Challenge Committee must report its findings to Council in writing.
- (3) No member of the Election Challenge Committee shall be a Council Member who was elected during the election being disputed.
- (4) The Election Challenge Committee shall:
  - (a) provide all candidates with:
    - (i) notice of the challenge in writing; and
    - (ii) a reasonable opportunity to make submissions regarding the challenge in the time and manner determined by the Election Challenge Committee.
  - (b) conduct an investigation, if necessary; and
  - (c) based on a majority vote, make findings of the facts; and
  - (d) report its findings and reasoning to the candidates and to Council in writing.
- (5) Depending on the findings of the Election Challenge Committee, Council may, by Resolution, direct the Registrar to:
  - (a) hold a new election for some or all of the districts;
  - (b) recount the votes;
  - (c) hold a by-election or run-off between two candidates;
  - (d) carry out any other means that Council determines would resolve the challenge in a fair and democratic manner.
- (6) If any allegation of the challenge is determined by the Election Challenge Committee to be valid, the candidate challenging the election shall be refunded any fees paid to the College for making the challenge.

#### **6.11 Council Vacancies**

- (1) If an Elected Council Member's seat becomes vacant during the first 2 years of a Council Member's term:

- (a) Council shall appoint the candidate who received the most votes during the previous election to fill the vacant position in that district provided that:
  - (i) the Member agrees to fill the vacant position; and
  - (ii) the Member is eligible to be a Council Member; or
- (b) if the above requirements cannot be satisfied, the Registrar shall hold a by-election to fill the vacancy.
- (2) If the seat of an Elected Council Member becomes vacant in the third year of a Council Member's term, Council is not required to fill the vacancy.
- (3) If a vacancy on Council is filled by holding a by-election and the votes cast result in a tie, the Registrar shall resolve the deadlock by lot.
- (4) Where an issue arises that is not governed by these By-laws during an election, the Registrar shall resolve the dispute in a fair and democratic manner.
- (5) The term of the replacement Council Member shall continue until the term of the previous Elected Council Member's term would have expired.

## **6.12 Unexpected Circumstances**

If, for whatever reason, the election cannot be held in the time or manner intended, the Registrar with consent of the Executive Committee, may delay or extend the election so as to hold the election in a fair and democratic manner.

## **PART 7 - ELECTION OF OFFICERS**

### **7.01 Officers**

The officers of the College consist of a President, Vice-President and Treasurer as well as such other officer position as Council may determine by Special Resolution.

### **7.02 Nomination Procedure**

- (1) Before the first regular Council Meeting each year the Registrar shall invite in writing all Council Members wishing to stand for election to the office of the President, Vice-President, Treasurer and any other officer position as Council may determine.
- (2) A Council Member's written intent must be returned to the Registrar before the Council Meeting when the election of officers is to take place.

### **7.03 Process for Election of Officers**

- (1) The election of officers shall take place on an annual basis at the first Council Meeting of each year.
- (2) At a Council Meeting during which an election of officers occurs:
  - (a) a special quorum of at least 2/3rds of all Council Members must be present;
  - (b) the Registrar shall present the names of candidates who have indicated their interest for each officer's position;
  - (c) when an officer's position is not contested, the Registrar shall declare the candidate elected by acclamation; and
  - (d) when there is more than one candidate for an officer's position:
    - (i) voting shall be conducted by secret ballot;
    - (ii) the Registrar shall count the ballots, and report the results to Council;
    - (iii) the candidate who receives the most votes cast on a ballot shall be declared elected; and
    - (iv) if there is a tie in votes cast, the Registrar shall resolve the deadlock by lot.
- (3) Where an issue arises that is not governed by these By-laws during an election, the Registrar shall resolve the dispute in a fair and democratic manner.

### **7.04 Officer Term Limits**

The term of an officer is one year, beginning from the first regular Council meeting after the officer was elected by Council until the officer's successor takes office.

### **7.05 Officer Vacancies**

- (1) If the position of the President becomes vacant, the Vice-President shall become President.
- (2) If the position of the Vice-President or Treasurer becomes vacant, Council shall elect by Resolution a Council Member to fill the position(s) for the remainder of the term.
- (3) If the position of any other officer becomes vacant, that position:

- (a) may remain vacant until the term of the previous holder of that position would have expired; or
- (b) Council may, by Resolution, elect a Council Member to fill the position for the remainder of the term.
- (4) If there is a tie in votes cast for an election for a vacant officer's position, the Registrar shall resolve the deadlock by lot.
- (5) Where an issue arises that is not governed by these By-laws during an election, the Registrar shall resolve the dispute in a fair and democratic manner.

## **PART 8 - APPOINTMENT TO COMMITTEES**

### **8.01 Eligibility of Members for Appointment to Committees**

A Member shall be eligible to be appointed for a term of one year as a Committee Member if, on the date of appointment:

- (1) the Member's certificate of registration is not subject to a term, condition or limitation that does not already apply to every Member who possesses that class of certificate;
- (2) the Member is not the subject of any disciplinary or incapacity proceeding;
- (3) the Member is not:
  - (a) an elected representative, director or officer or employee of, or a party to a contractual relationship (if it is reasonable to expect that a real or apparent conflict of interest may arise) to provide services to, the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council, or
  - (b) an appointed Committee chairperson or member of a committee of the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council if it is reasonable to expect that a real or apparent conflict of interest may arise;
- (4) the Member has not been disqualified as Council Member or Committee Member in the preceding three years; and
- (5) after having been provided with an opportunity to rectify any failure in his or her obligations to the College, the Member:
  - (a) has paid any fee, charge or order for costs owing to the College,
  - (b) has submitted to the College all required forms and documents, and

- (c) is otherwise in good standing with the College.

## **8.02 Obtaining Volunteers for Committees**

- (1) In the case of Council Members:
  - (a) before the first regular meeting of Council in each year the Registrar shall invite in writing all Council Members to indicate in writing their preferences for committee appointment(s); and
  - (b) a Council Member's written intent must be returned to the Registrar before the first regular meeting of the Council for the year.
- (2) In the case of non-Council Members:
  - (a) the Registrar, at the same time that nomination ballots for Council are distributed, shall invite in writing all Members to indicate in writing any Committee on which they volunteer to sit; and
  - (b) a Member's written intent must be returned to the Registrar before the first regular meeting of Council for the year.
- (3) A Member who volunteers to serve on a Committee and is either:
  - (a) an elected representative, director or officer or employee of, or a party to a contractual relationship (if it is reasonable to expect that a real or apparent conflict of interest may arise) to provide services to, the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council, or
  - (b) an appointed Committee chairperson or member of a committee of the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council if it is reasonable to expect that a real or apparent conflict of interest may arise;

must, at the time of submitting their written intent, file with the Registrar a written agreement to resign from the conflicting position if appointed to serve on a Committee.

## **8.03 Process for Appointing Committee Members and Committee Chairs**

- (1) As soon as possible after the Executive Committee's election, the Executive Committee, with the assistance of the Registrar, shall meet to appoint Council Members and non-Council Members volunteering to sit on a Committee and shall:
  - (a) review the Committee preferences provided to the Registrar by each Council Member and non-Council Member;

- (b) consider other relevant factors including past experience, conflicts of interest, workload and the fair representation of each district on Committees;
  - (c) rank Council Members and non-Council Members in order of preference, and include documentation of each person's qualifications relating to the work of the Committee; and
  - (d) shall appoint a chair for each Committee.
- (2) At the next Council meeting, the Executive Committee shall present the appointments to Council to be ratified by Resolution.
  - (3) If the Executive Committee is unable to meet the composition requirements set out in these By-laws of any Committee, Council may temporarily adjust the composition until those requirements can be met.

#### **8.04 Committee Vacancies**

- (1) If a vacancy of a Committee Member occurs, the Executive Committee may appoint a replacement Committee Member.
- (2) If a vacancy of a Committee Chair occurs, the Executive Committee must appoint a replacement Committee Chair.
- (3) At the next Council meeting, the Executive Committee shall present the replacement Committee Member(s) or replacement Committee Chair(s) to Council to be ratified by Resolution.

### **PART 9 - DISQUALIFYING OR SANCTIONING COUNCIL MEMBERS AND COMMITTEE MEMBERS**

#### **9.01 Grounds for Disqualifying or Sanctioning an Elected Council Member or Committee Member**

- (1) Council shall disqualify an Elected Council Member or Committee Member from sitting on Council or a Committee, as the case may be, if he or she:
  - (a) is found by a panel of the Discipline Committee to be incompetent or to have committed an act of professional misconduct;
  - (b) is found by a panel of the Fitness to Practise Committee to be an incapacitated member;
  - (c) was elected in electoral districts 1 through 4, and ceases to principally reside in or practise optometry in the electoral district for which the Member was elected;

- (d) was elected in district 6 and ceases to be a member of the Faculty of the University of Waterloo School of Optometry and Vision Science;
- (e) ceases to be the holder of:
  - (i) a general certificate of registration; or
  - (ii) academic certificate of registration;
- (f) after having been provided with an opportunity to rectify any failure in his or her obligations to the College:
  - (i) remains in default of any fee, charge or order for costs owing to the College,
  - (ii) fails to submit to the College all required forms and documents, or
  - (iii) ceases to otherwise be in good standing with the College;
- (g) has a term, condition or limitation on his or her certificate of registration that does not already apply to every Member who possesses that class of certificate;
- (h) fails to sign, on an annual basis, a confidentiality agreement with the College, in the form approved by Council;
- (i) breaches Section 36 of the RHPA or the By-laws of the College that require Council Members or Committee Members to preserve the confidentiality of information disclosed during the course of his or her duties as a Council Member or Committee Member;
- (j) depending on the eligibility requirements for a Council Member or Committee Member set out in Parts 6 and 8, becomes an elected representative, board member, director, officer or employee of, or enters into a contractual relationship to provide services (if it is reasonable to expect that a real or apparent conflict of interest may arise) to:
  - (i) the Ontario Association of Optometrists,
  - (ii) the Canadian Association of Optometrists, or
  - (iii) any other organization determined by Council;
- (k) depending on the eligibility requirements for a Council Member or Committee Member set out Parts 6 and 8, becomes an appointed committee chairperson or member of a committee of:
  - (i) the Ontario Association of Optometrists,



- (ii) the Canadian Association of Optometrists, or
  - (iii) any other organization determined by Council;
- (1) subject to the discretion of Council to excuse the absence:
- (i) fails to attend any two of three consecutive regular meetings of the Council;
  - (ii) fails to attend any two of three consecutive regular meetings of a Committee of which he or she is a member; and
  - (iii) fails to attend a hearing or proceeding, or part thereof, of a panel on which he or she sits.
- (2) An Elected Council Member or a Committee Member may also be removed from their position or sanctioned if they contravene their duties (including abiding by the College's Code of Conduct and conflict of interest provisions).

**9.02 Grounds for Requesting the Disqualification or Sanctioning of an Appointed Council Member**

- (1) The College shall request the Public Appointments Secretariat to disqualify and remove an Appointed Council Member from Council if the Appointed Council Member:
- (a) becomes a Member;
  - (b) fails to sign, on an annual basis, a confidentiality agreement with the College, in the form approved by Council;
  - (c) breaches Section 36 of the RHPA or the By-laws of the College that require Committee Members to preserve the confidentiality of information obtained in the course of his or her duties as a Committee Member;
  - (d) depending on whether the person is a Council Member or Committee Member, becomes an elected representative, Board member, director, officer or employee of, or enters into a contractual relationship (if it is reasonable to expect that a real or apparent conflict of interest may arise) to provide services to the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council;
  - (e) depending on whether the person is a Council Member or Committee Member, becomes an appointed Committee chairperson or member of a Committee of the Ontario Association of Optometrists, the Canadian

Association of Optometrists or any other organization determined by Council; or

- (f) subject to the discretion of Council to excuse the absence:
  - (i) fails to attend any two of three consecutive regular meetings of the Council;
  - (ii) fails to attend any two of three consecutive regular meetings of a Committee of which he or she is a Member; or
  - (iii) fails to attend a hearing or proceeding, or part thereof, of a panel on which he or she sits.
- (2) The College may also request the removal of an Appointed Council Member or sanction an Appointed Council Member if they contravene their duties (including abiding by the College's Code of Conduct and conflict of interest provisions).

### **9.03 Process for Disqualifying or Sanctioning a Council Member and Committee Member**

- (1) The following process shall be used to disqualify or sanction an Elected Council Member, Committee Member or Appointed Council Member (the "Subject Member"):
  - (a) Where a Council Member or the Registrar believes that the College should consider the disqualification or sanction of the Subject Member, the Council Member or Registrar shall advise the Executive Committee in writing;
  - (b) The Executive Committee shall:
    - (i) provide the Subject Member with:
      - (A) notice of the concerns in writing, and
      - (B) reasonable time to make submission in the time and manner determined by the Executive Committee;
  - (c) The Executive Committee shall based on at least a 2/3<sup>rd</sup>s majority vote make a preliminary finding of the facts and, in writing, report those findings and its reasoning to the Subject Member and Council, and, depending on the circumstances, the individual who brought the matter to the Executive Committee's attention;
  - (d) The Executive Committee may then, based on at least a 2/3<sup>rd</sup>s majority vote, either:

- (i) sanction the Subject Member, provided the sanction does not include the disqualification, request to disqualify or dismissal of the Subject Member. Sanctions by the Executive Committee may include:
  - (ii) dismiss the allegations against the Subject Member; or
  - (iii) refer the matter to Council.
- (e) If either the individual who brought the matter to the Executive Committee's attention or the Subject Member is of the view that Council's involvement is required, they shall provide, in writing, their concern to the attention of the President within 15 days after being notified and the issue will be placed on the agenda for the next Council meeting.
- (f) Council shall:
  - (i) advise the Subject Member and the individual who brought the matter to the Executive Committee's attention:
    - (A) that the matter has been referred to Council; and
    - (B) of their opportunity to make submissions in the manner determined by Council;
  - (ii) conduct an investigation, if necessary; and
  - (iii) by Special Resolution make a finding of fact and, in writing, report those findings and its reasoning to the Subject Member, and, depending on the circumstances, the individual who brought the matter to the Executive Committee's attention;
- (g) Council may then, based on a Special Resolution, either:
  - (i) sanction the Subject Member (which may include the disqualification, or the request to disqualify the Subject Member); or
  - (ii) dismiss the allegations against the Subject Member.
- (2) In determining the appropriate sanction the Executive Committee and Council should be guided by the principle that the primary purpose of sanctions is to protect the College and to modify behaviour that could be potentially harmful to College.
- (3) The Subject Member, throughout the process, shall be temporarily suspended as a Council Member or Committee Member until a final decision by the College has been rendered or the Public Appointments

Secretariat has removed the Appointed Council Member, as the case may be.

- (4) Before any debate is had or vote is taken by Council, throughout the process, Council shall consider whether the public should be excluded from all or part of the meeting in accordance with the Code.
- (5) Where Council votes to request the Public Appointments Secretariat to disqualify and remove an Appointed Council Member, the College shall make such a request to the Public Appointments Secretariat.
- (6) If the Subject Member is disqualified or removed as a Council Member or Committee Member, the College shall act as if a vacancy had been created as a result of a resignation.
- (7) A Subject Member who has been disqualified ceases to be a Council Member and a member of all Committees.

#### **9.04 Temporary Suspension of a Council Member or Committee Member**

- (1) A Council Member or Committee Member who becomes the subject of a disciplinary or incapacity proceeding (including, in the case of an Elected Council Member, one which originates at any time after the deadline for receipt of nominations), shall not serve on Council or on any Committee until a final decision (including any appeal) has been rendered.
- (2) An Elected Council Member and/or a Committee Member who, after having been provided with an opportunity to rectify a failure in their obligations to the College:
  - (a) remains in default of any fee, charge or order for costs owing to the College,
  - (b) fails to submit to the College all required forms and documents, or
  - (c) ceases to otherwise be in good standing with the College;

(including, in the case of an Elected Council Member, a default which originates at any time after the deadline for receipt of nominations), shall not serve on Council or any Committee until the failure is remedied or the Elected Council Member and/or a Committee Member is disqualified.

### **PART 10 - DESCRIPTION OF DUTIES**

#### **10.01 Officers on Executive Committee**

- (1) The President, Vice-President and Treasurer are members of the Executive Committee.

- (2) In addition to the President, Vice-President and Treasurer, Council may, by Special Resolution, determine the composition of the Executive Committee provided that all members of the Executive Committee are Council Members.
- (3) Each additional member of the Executive Committee shall be elected in the same manner as the officers.

## **10.02 President**

- (1) The President, with Council, is responsible for fulfilling mandate, objectives and strategic plans of the College. The President is directly accountable to Council and indirectly accountable to the government, the public and the profession for the effective governance of the College.
- (2) The President's duties include:
  - (a) providing effective leadership for Council;
  - (b) presiding as chair of all Council Meetings and Executive Committee meetings, unless another chair has been appointed;
  - (c) overseeing the operations of Council, including approving the agenda for Council Meetings and presenting an Executive Committee report at each Council Meeting;
  - (d) working with the Registrar to ensure the efficient conduct of all Council Meetings and Executive Council meetings and that decisions of Council and the Executive Committee are implemented;
  - (e) participating in the orientation of new Council Members, officers, Committee Members, chairs and volunteers and encouraging Members to participate in Council;
  - (f) overseeing and ensuring that a process is in place to fairly evaluate the Registrar;
  - (g) along with the Registrar, representing the College as the authorized spokesperson on College policies and positions;
  - (h) signing contracts, documents or instruments on behalf of the College;
  - (i) liaising with the Registrar on any issue relating to the interaction between Council Members and College staff; and
  - (j) any other duty determined by Council.

### **10.03 Vice-President**

- (1) In the absence, inability or refusal of the President to act, the Vice-President shall have all the powers and perform all the duties of the President.
- (2) The Vice-President is directly accountable to Council and indirectly accountable to the government, the public and the profession for the effective governance of the College.
- (3) The Vice-President's duties include:
  - (a) serving on the Executive Committee;
  - (b) any duty delegated by the President;
  - (c) signing contracts, documents or instruments on behalf of the College; and
  - (d) any other duty determined by Council.

### **10.04 Treasurer**

- (1) The Treasurer is directly accountable to Council and indirectly accountable to the government, the public and the profession for the effective governance of the College.
- (2) The Treasurer's duties include:
  - (a) serving on the Executive Committee;
  - (b) overseeing the management of the College's finances;
  - (c) delegating tasks related to the management of the College's finances;
  - (d) signing contracts, documents or instruments on behalf of the College; and
  - (e) any other duty determined by Council.

### **10.05 Registrar**

- (1) The Registrar holds the most senior position on the College's staff and is the chief administrative officer of the College.
- (2) The Registrar is directly accountable to Council and, between Council meetings, to the Executive Committee.
- (3) The Registrar's duties include:
  - (a) overseeing the day to day affairs of the College;

- (b) ensuring compliance with statutory obligations;
- (c) implementing and monitoring College policies;
- (d) facilitating the orderly transfer of presidential responsibility, when required;
- (e) preparing and maintaining minutes of all Council and Executive Committee meetings and maintaining the College's records, documents and register;
- (f) preparing agendas for meetings of Council and the Executive Committee, and submitting those agendas to the President for approval;
- (g) providing notice of all Council and Executive Committee meetings;
- (h) establishing and maintaining administrative, human resource, and financial operations of the College's office, in collaboration with Council and the Executive Committee, to ensure effective management of the College;
- (i) hiring, promoting, terminating and establishing the terms, duration and severances of employment of College staff;
- (j) signing contracts, documents and other instruments as may be assigned by Council or as are incidental to the office of the Registrar;
- (k) recruiting personnel, ensuring an annual performance assessment and, when applicable, encouraging continuing professional development for College staff';
- (l) acting as official spokesperson for the College; and
- (m) any other duty determined by Council.

#### **10.06 Council Members**

- (1) The primary functions of a Council Member:
  - (a) is to debate and establish College policy; and
  - (b) to serve as a liaison between the College and those who elect or appoint them.
- (2) Council Member duties include:
  - (a) working with Council to abide by, develop, enforce and propose amendments to:

- (i) the RHPA;
- (ii) the Act; and
- (iii) these By-laws;
- (b) establishing policy, strategic direction and goals of the College, including approving statements of principles and positions related to College policy;
- (c) supporting and implementing Council decisions;
- (d) preparing for each Council meeting;
- (e) monitoring the performance of the Registrar through feedback reports prepared by the President;
- (f) ensuring appropriate succession planning for the Registrar; and
- (g) any other duty determined by Council.

#### **10.07 Committee Chairs**

- (1) The Committee chair reports to Council.
- (2) Committee chair duties include:
  - (a) chairing Committee meetings;
  - (b) approving meeting agendas prepared by College staff;
  - (c) assessing whether Committee Members have the resources and training to effectively perform the Committee's work;
  - (d) ensuring that the activities of the Committee are conducted within budget;
  - (e) working with the Committee and College staff to establish, monitor and execute Committee goals;
  - (f) providing effective leadership for the Committee and facilitating Committee Meetings;
  - (g) liaising with Council and reporting to the Executive Committee the affairs of the Committee;
  - (h) being spokesperson for the Committee and ensuring all Committee Members publicly support Committee decisions; and
  - (i) any other duty determined by Council.



## **PART 11 - OBLIGATIONS OF COUNCIL AND COMMITTEE MEMBERS**

### **11.01 Conflict of Interest**

- (1) Council Members and Committee Members must not engage in any activities or decision-making where a conflict of interest may arise.
- (2) A conflict of interest means a Council Member or Committee Member's personal or financial interest or participation in an arrangement or agreement which influences, is likely to influence, or could be perceived as influencing that person's judgment or decision-making with respect to College matters.
- (3) The personal or financial interests of any family member or a close relation (such as a friend or business associate) of a Council Member or Committee Member shall be interpreted to be the interests of a Council Member or Committee Member.
- (4) Council Members and Committee Members must recognize that even the appearance of a conflict of interest can bring discredit to the College, and should be dealt with in the same manner as an actual conflict of interest.
- (5) A conflict of interest may amount to a breach of Council Members' fiduciary obligations and can create liability for everyone involved.
- (6) A Council Member or Committee Member shall not use College property or information of any kind to advance his or her own interests.

### **11.02 Process for Declaring a Conflict of Interest for Council Members**

- (1) If a Council Member believes or suspects that he, she or any other Council Member may have a conflict of interest, including an appearance of a conflict of interest, in any matter which is the subject of deliberation or action by Council, he or she shall, prior to any consideration of the matter at the meeting, declare it to Council.
- (2) If there is any doubt about whether a conflict of interest exists, any Council Member may introduce a motion to have the conflict of interest issue determined by Council. On such a motion:
  - (a) the chair presiding over Council shall provide the Council Member introducing the motion a brief opportunity to explain why he or she believes the Council Member may have a conflict of interest;
  - (b) the chair presiding over Council shall provide the Council Member who is the subject of the potential conflict of interest a brief opportunity to explain why he or she believes that he or she does not have a conflict of interest;

- (c) Council shall determine by Special Resolution using a secret ballot whether the Council Member has a conflict of interest; and
- (d) The Council Member who is the subject of the potential conflict of interest and the Council member who initiates the conflict of interest motion shall not participate in the vote.
- (3) If a Council Member has or is determined to have a conflict of interest with respect to a matter that is the subject of deliberation or action by Council:
  - (a) the conflict of interest shall be recorded in the minutes of the Council meeting; and
  - (b) the Council Member shall:
    - (i) not participate in the debate in respect of the matter;
    - (ii) refrain from voting on the matter;
    - (iii) absent himself or herself from the room; and
    - (iv) not attempt in any way to influence the voting or do anything that might be perceived as attempting to influence the decision of Council on the matter.

### **11.03 Process for Declaring a Conflict of Interest for Committee Members**

- (1) If a Committee Member believes or suspects that he, she or any other Committee Member may have a conflict of interest, including an appearance of a conflict of interest, in any matter which is the subject of deliberation or action by a Committee, he or she shall:
  - (a) prior to any consideration of the matter at the meeting, disclose to the Committee chair, Committee staff support, Committee, Registrar and/or the College's legal counsel the fact that he, she or any other Committee Member may have a conflict of interest;
  - (b) if the Committee Member has a conflict of interest or if there is any doubt about whether a conflict of interest exists, the Committee Member shall, unless the Committee chair has agreed otherwise:
    - (i) not participate in the debate in respect of the matter;
    - (ii) refrain from voting on the matter;
    - (iii) absent himself or herself from the room; and

- (iv) not attempt in any way to influence the voting or do anything that might be perceived as attempting to influence the decision of the Committee on the matter; and
- (c) the conflict of interest shall be recorded in the minutes of the Committee meeting.

#### **11.04 One-Year Waiting Period**

- (1) Subject to subsection 11.04(2), there shall be a one-year waiting period with respect to:
  - (a) a Council Member or Committee Member who wants to work as an employee or on a contract with the College (if it is reasonable to expect that a real or apparent conflict of interest may arise) or hold any appointment by the College;
  - (b) an employee, contractor or any other appointee of the College who wants to be a Council Member or Committee Member; and
  - (c) an employee, contractor, appointee, director or officer of the Ontario Association of Optometrists, the Canadian Association of Optometrists or any other organization determined by Council who wants to:
    - (i) be an employee or work on a contract with the College (if it is reasonable to expect that a real or apparent conflict of interest may arise); or
    - (ii) hold any appointment by the College.

The one-year waiting period shall commence on the first day following the last day that the conflicting position was held by the individual.

- (2) Council may, under exceptional circumstances, adjust the one-year waiting period by Special Resolution.

#### **11.05 Confidentiality**

- (1) Section 36(1) of the RHPA states, in part:

Every person employed, retained or appointed for the purposes of the administration of this Act, a health profession Act or the *Drug and Pharmacies Regulation Act* and every Member of a Council or committee of a College shall keep confidential all information that comes to his or her knowledge in the course of his or her duties and shall not communicate any information to any other person ....

- (2) Council Members and Committee Members, College staff and persons retained or appointed by the College shall:
  - (a) maintain confidentiality of information disclosed to them in the course of discharging their duties, unless otherwise authorized by Council or permitted under Section 36(1) of the RHPA;
  - (b) refrain from communicating to Members, including Council Members or Committee Members, information regarding registration, complaints, reports, investigations, disciplinary or fitness to practise proceedings which could be perceived as an attempt to influence a statutory decision or a breach of confidentiality, unless:
    - (i) he or she is a Member of the same panel considering the matter, or
    - (ii) when there is no panel, of the same Committee considering the matter.

However, Council Members and Committee Members may discuss any other matter not prohibited by Section 36(1) of the RHPA and not arising from an *in camera* meeting;

- (c) be aware of and understand those exceptions to confidentiality obligations in Section 36(1) of the RHPA; and
- (d) seek advice if any doubt whether an exception applies.

#### **11.06 Code of Conduct**

- (1) Council Members and Committee Members must, at all times, when discharging their College duties, act in the College's best interest, maintain high standards of integrity, honesty, and loyalty.
- (2) The College's Code of Conduct for Council Members and Committee Members includes:
  - (a) being familiar and comply with the provisions of the RHPA, the Act, and the By-laws and policies of the College;
  - (b) actively participating in Council and Committees;
  - (c) regularly attending and being prepared for meetings on time, and participating constructively in debates;
  - (d) participating in all deliberations in a respectful and courteous manner, recognizing the diverse background, skills and experience of Council Members and Committee Members;

- (e) abiding by and endorsing Council and Committee decisions, regardless of the level of prior personal disagreement; and
- (f) avoiding and, where that is not possible, declaring any appearance of or actual conflicts of interest.
- (g) preserving confidentiality of all information before Council and/or its Committees unless disclosure has been authorized by Council or otherwise exempted under s. 36(1) of the RHPA;
- (h) refraining from communicating to Members, including Council Members or Committee Members, information regarding registration, complaints, reports, investigations, disciplinary or fitness to practise proceedings which could be perceived as an attempt to influence a statutory decision or a breach of confidentiality, unless:
  - (i) he or she is a Member of the same panel considering the matter, or
  - (ii) when there is no panel, of the same Committee considering the matter;

However, Council Members and Committee Members may discuss any other matter not prohibited by Section 36(1) of the RHPA and not arising from an in camera meeting;

- (i) respecting the boundaries of College staff whose role is not to report to or work for individual Council Members or Committee Members;
- (j) being respectful of others and not engaging in behaviour that might reasonably be perceived as verbal, physical or sexual abuse or harassment; and
- (k) any other form of misconduct Council may determine.

### **11.07 Media and Official Communications**

- (1) Official communications on behalf of the College shall be coordinated through the Registrar.
- (2) The President and the Registrar are the authorized spokespersons of the College. On any given issue, they shall consult with one another to determine who will speak on behalf of the College.
- (3) The College shall develop an official communications policy.
- (4) All communications by the College to the media and to the public shall be consistent with the policies and positions of the College.

### **11.08 Speaking and Writing Engagements**

- (1) All requests inviting a Council Member, Committee Member or an employee, contractor or other appointee of the College to represent the College must be provided in writing to the Registrar giving details of the date, time and place, the topic and anticipated length of the presentation.
- (2) The Registrar in consultation with the President will accept or decline a request, and determine the appropriate representative to address the topic.
- (3) The contents of every engagement must be consistent with the approved policies and positions of the College, and shall be reviewed in advance by the Registrar.
- (4) No person in his or her capacity as a representative of the College shall receive any payment or benefit related to the engagement. If the payment or gift cannot in the circumstances be gracefully declined, it shall immediately be turned over to the Registrar for the benefit of the College.
- (5) Any Council Member, Committee Member or an employee, contractor or other appointee of the College speaking or writing on a topic involving the practise of optometry in a personal capacity must include a disclaimer that they are not speaking/writing as a representative of the College.

## **PART 12 - REMUNERATION OF ELECTED COUNCIL MEMBERS**

### **12.01 Remuneration Policy of the College**

Elected Council Members shall be paid a stipend and be reimbursed by the College for travelling and other expenses reasonably incurred in relation to the performance of their duties as Council Members or Committee Members in accordance with the College's remuneration policy.

## **PART 13 - COUNCIL**

### **13.01 Council Meetings**

- (1) Council Meetings shall be held at the College or any other location determined by the Registrar.
- (2) The Registrar shall serve as Council's secretary.
- (3) At least four Council meetings shall be held in a calendar year. Additional Council meetings may be called by:
  - (a) Resolution;
  - (b) the President; or

- (c) the written request of a majority of Council Members.
- (4) A Council meeting may be held in any manner that allows all Members, along with any members of the public, to participate simultaneously and instantaneously.
- (5) Council meetings are open to the public. However, the public may be excluded from any meeting or part of a meeting in accordance with Section 7 of the Code.
- (6) Notice of a Council Meeting shall:
  - (a) be communicated to Council Members as soon as practicable;
  - (b) be posted at least 14 days before the Council Meeting on the College's website;
  - (c) be published in English and French; and
  - (d) contain:
    - (i) the meeting agenda;
    - (ii) the date, time and location of the meeting;
    - (iii) an address and telephone number at which further information about the meeting may be obtained; and
    - (iv) if the Registrar anticipates that the Council will exclude the public from any meeting or part of a meeting under subsection 7(2) of the Code, the grounds for doing so.
- (7) Briefing books containing the information and documentation that will be provided to members of Council shall be posted on the College's website at least three days before any Council meeting. Information and documentation related to meetings or parts of meetings where the Registrar anticipates Council will exclude the public shall not be posted. The failure to give notice or a briefing book, or the non-receipt of any notice or briefing book, shall not invalidate any actions taken by Council at a Council Meeting.
- (8) If Council decides to exclude the public from a meeting or a part of a meeting under subsection 7(2) of the Code, it may make orders it considers necessary to prevent the public disclosure of matters disclosed in the meeting, including banning publication or broadcasting of those matters.
- (9) Minutes shall be kept for every Council Meeting and shall:

- (a) include details of all motions, recommendations, decisions and the grounds for excluding the public from any meeting or part of a meeting;
- (b) be circulated to Council Members following the Council Meeting; be approved or amended at the next Council Meeting;
- (c) be approved or amended at the next Council Meeting; and
- (d) and once approved:
  - (i) signed by the chair; and
  - (ii) provided to the Registrar by the chair to be kept with the College's records.

### **13.02 Meeting Agenda**

- (1) During a Council Meeting, Council may only consider:
  - (a) matters on the agenda; and
  - (b) any other matter that the majority of Council Members in attendance determine to be of an urgent nature.
- (2) A Council Meeting agenda may include:
  - (a) a discussion of any potential conflict of interest involving a Council Member;
  - (b) the review for approval or amendment of the minutes of a previous Council Meeting;
  - (c) review Committee reports and recommendations;
  - (d) any matter requiring Council's decision or direction;
  - (e) motions to be tabled at the meeting;
  - (f) any other matters determined by the President.

### **13.03 Chair**

- (1) The President shall chair Council Meetings. However, Council may by Resolution appoint anyone else to preside as chair of a Council Meeting in lieu of the President, provided that, at all times, it does so in good faith and is not in an effort to usurp the function of the President as the presumptive chair of Council Meetings.



- (2) In the case of an appointed chair who is not a Council Member, the chair:
  - (a) shall not participate in deliberations;
  - (b) may not vote; and
  - (c) shall undertake to maintain confidentiality.

#### **13.04 Quorum**

- (1) A majority of Council Members constitutes a quorum to hold a Council meeting.
- (2) In determining whether or not a quorum has been met, the number of Council Members shall be deemed not to be reduced as a result of any vacancy on Council.

#### **13.05 Voting**

- (1) Every motion shall, depending on the circumstances, be decided by Resolution or Special Resolution.
- (2) If the votes cast result in a tie, the chair shall not have a second vote and the motion will be defeated.
- (3) Every vote at a Council meeting shall be by a show of hands, roll call, secret ballot or as the chair of the meeting shall otherwise determine. A vote held during a meeting conducted through telecommunications shall be by way of roll call.
- (4) In the event of a roll call vote, the Registrar shall record the votes of each Council Member in the minutes of the meeting.

#### **13.06 Written Resolutions**

A Written Resolution is as valid and effective as if passed at a Council Meeting.

#### **13.07 Rules of Order of Council Meetings**

- (1) *Conduct*
  - (a) Council Meetings shall be conducted in English.
  - (b) All attendees shall turn off communications devices during Council Meetings.
  - (c) Laptops shall only be used during Council Meetings to review materials related to the meeting and to take notes.

- (d) No one shall speak out of turn.
- (2) ***General Procedure***
  - (a) Council may informally discuss a matter without the requirement of a motion.
  - (b) Council may decide matters by consensus or any other informal method. However, a motion should be made if it is Council's intention to vote on a matter.
  - (c) College staff and consultants with expertise in a matter before Council may be permitted by the chair to answer specific questions.
  - (d) Non-Council Members are not permitted to speak at a Council Meeting without the prior permission from the President or chair.
  - (e) However, the President or chair may at any time request a non-Council Member to speak.
- (3) ***Motions***
  - (a) Before a matter may be voted on:
    - (i) it must be introduced by a Council Member;
    - (ii) Council Members must have an opportunity to debate it; and
    - (iii) a motion regarding the matter must be tabled and seconded.
  - (b) When a motion is being debated, no other motion can be tabled except to:
    - (i) amend it;
    - (ii) postpone it;
    - (iii) vote on it;
    - (iv) adjourn the debate or the Council meeting; or
    - (v) refer the motion to a Committee.
  - (c) The chair shall put the motion to a vote when:
    - (i) the debate on a matter has concluded;
    - (ii) Council has passed a motion to vote on the motion; or
    - (iii) when the time allocated to the debate of the matter has concluded.

- (d) During a Council vote:
  - (i) no Council Member shall enter or leave the room; and
  - (ii) no further debate is permitted.
- (e) When a motion contains multiple matters that are distinct, any Council Member may revise the motion so that each matter is tabled separately.
- (f) After a motion has been decided upon, no Council Member may introduce the same or similar motion during the same session of Council unless the majority of Council agrees.
- (g) Whenever the chair is of the opinion that a motion tabled by a Council Member is contrary to these By-laws:
  - (i) the chair shall rule the motion out of order;
  - (ii) the chair shall give reasons for doing so; and
  - (iii) the secretary shall record such reasons in the meeting minutes.

(4) ***Amendment of Motions***

- (a) A Council Member may only table a motion to amend a motion that has already been tabled (but not yet voted upon) if it:
  - (i) is relevant to the motion that has already been tabled; and
  - (ii) does not negate the purpose of the initial motion.
- (b) A motion to amend the initial motion shall be debated and voted upon before the initial motion is voted upon.
- (c) When there is more than one motion to amend the initial motion, the motions shall be debated and voted upon in the reverse order in which they were tabled.

(5) ***Maintaining Order***

- (a) The chair shall maintain order and decide questions of order. If a Council Member disagrees with the chair's ruling, the ruling may be appealed to Council.
- (b) The chair may limit:
  - (i) the number of times a Council Member may speak;
  - (ii) the length of time a Council Member may speak; and

- (iii) impose any other reasonable restrictions to maintain order and efficiency.
- (6) ***Other***
  - (a) The Rules of Order of Meeting may be relaxed by the chair if greater informality is required.
  - (b) In situations not provided for in these By-laws, the most recent edition of *Robert's Rules of Order* shall be followed.

## **PART 14 - COMMITTEES**

### **14.01 Committee Meetings**

- (1) Committee meetings shall be conducted in English.
- (2) Each Committee shall meet at the direction of the Committee chair or the majority of Committee Members.
- (3) The conduct of Committee Meetings shall be held in accordance with the most recent edition of *Robert's Rules of Order*.
- (4) A Committee Meeting may be held in any manner that allows all persons to participate simultaneously and instantaneously.
- (5) No formal notice is required for a Committee meeting. However, College staff designated to assist a Committee shall make reasonable efforts to provide notice of each meeting to Committee Members.
- (6) Every motion considered by a Committee shall be decided by a majority of the votes cast at the meeting. If the votes cast result in a tie, the chair shall not have a second vote and the motion will be defeated.
- (7) Minutes shall be kept for every Committee Meeting and shall:
  - (a) include details of all motions, recommendations and decisions;
  - (b) be circulated to Committee Members following the Committee Meeting;
  - (c) be approved or amended at the next Committee Meeting; and
  - (d) once approved:
    - (i) signed by the chair; and
    - (ii) provided to the Registrar by the chair to be kept with the College's records.

- (8) Committees shall provide Council with reports:
  - (a) annually; and
  - (b) when requested to do so by either the Executive Committee or Council.

#### **14.02 Executive Committee**

- (1) The Executive Committee shall be composed of:
  - (a) an odd number of persons;
  - (b) one more Elected Council Member than Appointed Council Members;
  - (c) at least five persons, including:
    - (i) the President;
    - (ii) the Vice-President; and
    - (iii) the Treasurer.
- (2) The Executive Committee is directly accountable to Council and indirectly accountable to the government, the public and the profession for the effective governance of the College.
- (3) The Executive Committee's duties include:
  - (a) working in collaboration with the Registrar to address issues, and to deliberate and decide on matters before the Executive Committee;
  - (b) ensuring adherence to the regulatory and statutory obligations of the College, its By-laws, policies and protocol; and
  - (c) preparing materials and the agenda for Council Meetings.
- (4) Between Council Meetings, the Executive Committee has all the powers of Council with respect to any matter that, in the opinion of the Executive Committee, requires immediate attention. However, the Executive Committee does not have the power to make, amend or revoke a regulation or by-law.
- (5) The President is the chair of the Executive Committee.
- (6) The Registrar is the secretary of the Executive Committee.
- (7) Executive Committee meetings are closed to the public. However, the Executive Committee may permit anyone to attend or participate in meetings.

#### **14.03 Registration Committee**

- (1) The Registration Committee shall be composed of a minimum of five persons, including at least:
  - (a) one Elected Council Member;
  - (b) two Appointed Council Members; and
  - (c) two Members who may or may not be Council Members.
- (2) A panel of the Registration Committee shall be composed of at least three Committee Members, at least one of whom is an Appointed Council Member. The Committee chair will select the panels and appoint the chair for each panel.

#### **14.04 Inquiries, Complaints and Reports Committee**

- (1) The Inquiries, Complaints and Reports Committee ("ICRC") shall be composed of at least 10 persons, including at least:
  - (a) four Appointed Council Members;
  - (b) one Elected Council Member; and
  - (c) five Members who may or may not be Council Members.
- (2) A panel of the ICRC shall be composed of at least three Committee Members, at least one of whom is an Appointed Council Member. The Committee chair will select the panels and appoint the chair for each panel.

#### **14.05 Discipline Committee**

- (1) The Discipline Committee shall be composed of:
  - (a) all elected Council Members who are not members of the ICRC;
  - (b) all appointed Council Members; and
  - (c) at least five Members who are not Council Members.
- (2) A panel of the Discipline Committee shall be composed of at least three and no more than five Committee Members, at least two of whom are Appointed Council Members. The Committee chair will select the panels and appoint the chair for each panel.

#### **14.06 Fitness to Practise Committee**

- (1) The Fitness to Practise Committee shall be composed of at least three persons, including:
  - (a) one Elected Council Member;
  - (b) one Appointed Council Member; and
  - (c) one Member who may or may not be a Council Member.
- (2) No person may be selected for a panel of the Fitness to Practise Committee who has taken part in an investigation or decision made by the ICRC that is to be the subject-matter of the Fitness to Practise panel's hearing.
- (3) A panel of the Fitness to Practise Committee shall be composed of at least three Committee Members, at least one of whom is an Appointed Council Member. The Committee chair will select the panels and appoint the chair for each panel.

#### **14.07 Quality Assurance Committee**

- (1) The Quality Assurance Committee shall be composed of at least thirteen persons, including:
  - (a) two Elected Council Members;
  - (b) three Appointed Council Members; and
  - (c) eight Members who may or may not be Council Members.
- (2) A panel of the Quality Assurance Committee shall be composed of at least three Committee Members, at least one of whom is an Appointed Council Member. The Committee chair will select the panels and appoint the chair for each panel.

#### **14.08 Patient Relations Committee**

The Patient Relations Committee shall be composed of at least seven persons, including:

- (a) one Elected Council Member;
- (b) three Appointed Council Members; and
- (c) three Members who may or may not be Council Members.

#### **14.09 Ad Hoc and Standing Committees**

Council may, by Resolution, appoint and fill such Ad Hoc and/or Standing Committees as it deems necessary.

#### **14.10 Committee Chairs and Panel Chairs**

- (1) The term of a Committee chair is 1 year.
- (2) With the exception of the President as chair of the Executive Committee, no person may serve as a Committee chair for more than 3 consecutive years.
- (3) When a panel chair is not able to attend a meeting, hearing or proceeding of a panel, the remaining panel members shall designate a chair for the duration of the absence.

#### **14.11 Quorum for Committees and Panels**

- (1) The quorum for any:
  - (a) Committee Meeting is a majority of that Committee's Members; and
  - (b) panel of a Committee is at least three panel members, at least one of whom shall be an Appointed Council Member.
- (2) In determining whether or not a quorum has been met, the number of Committee Members or panel members shall be deemed not to be reduced as a result of any vacancy.

### **PART 15 - RULES, POLICIES AND CODE OF ETHICS**

#### **15.01 Creating Rules and Policies**

The College may create rules, policies and similar guiding documents to govern the College and the conduct of its Members, Council Members, Committees and panels.

#### **15.02 Code of Ethics**

- (1) All Members shall act in accordance with the College's Code of Ethics.
- (2) The College's Code of Ethics for all Members includes:
  - (a) **General Responsibilities**
    - (i) The first priority for a Member should be their patient's visual well-being and the provision of appropriate care for all of their patients.



(ii) Members shall:

- (A) treat all patients with respect;
- (B) practise optometry with competence;
- (C) recognize their limitations;
- (D) when indicated, recommend that additional opinions and services be sought;
- (E) be prepared to collaborate with colleagues in the care of patients; and
- (F) engage in lifelong learning to maintain and improve their professional knowledge, skills and judgment.

(iii) Members shall not:

- (A) exploit their patients for personal advantage; or
- (B) discriminate against any patient.

(b) **Communication, Decision-Making and Consent**

(i) Members shall:

- (A) make reasonable efforts to inform their patients of the diagnosis, prognosis, choices of care and diagnostic and therapeutic procedures in a manner which allows them to make fully informed decisions concerning their care.
- (B) respect the informed decisions of their patients.

(c) **Confidentiality**

(i) Members shall:

- (A) whenever possible maintain all of their patients' personal information in confidence. In the rare circumstances, when a Member is required to breach this confidence, the Member shall promptly inform the patient.
- (B) when acting on behalf of a third party, take reasonable steps to ensure that the patient understands the nature of the Members role.

(d) **Clinical Research**

- (i) Members shall:
  - (A) ensure that any research a Member conducts has been evaluated scientifically and ethically, is approved by a responsible committee and is sufficiently planned and supervised such that research subjects are unlikely to suffer disproportionate harm.
  - (B) fully inform the potential research subject about the purpose of the study, its source of funding, the risk and benefits, and the nature of the Member's participation.
  - (C) before proceeding with the study, obtain the informed consent of the subject and advise prospective subjects that they have the right to decline or withdraw from the study at any time, without prejudice to their ongoing care.

(e) **Responsibility to Society**

- (i) Members shall:
  - (A) make efforts to provide persons in need with optometric care.
  - (B) share in the profession's responsibility to society in matters relating to public health, health education, environmental protection, and legislation affecting the health or well-being of the community.
  - (C) use health care resources prudently.

(f) **Responsibility to the Profession**

- (i) Member's shall:
  - (A) avoid impugning the reputation of colleagues.
  - (B) attempt to resolve disputes with colleagues in a respectful way.

(g) **Responsibility of Oneself**

Members shall seek help for problems that may adversely affect service to patients.

## PART 16 - INFORMATION PROVIDED BY MEMBERS

### 16.01 Member Obligations to Provide Information

- (1) Upon written request for information by the College, a Member shall respond in writing within the time provided.
- (2) A Member shall provide written notice of any change to information previously provided to the College within 14 days of the change.

### 16.02 Member Reports

- (1) A Member's certificate of registration must be renewed annually.
- (2) The College shall send a member report to each Member by mail or e-mail requesting any information required by the Registrar, and provide the Members with at least 30 days to respond.
- (3) The College may request:
  - (a) the Member's birth date;
  - (b) the Member's certificate of registration number;
  - (c) the Member's e-mail address;
  - (d) the address and telephone number of each Member's principal residence;
  - (e) the name of each business where the Member practises optometry, including the address, telephone number, fax number and e-mail address;
  - (f) the preferred address for receiving College communications;
  - (g) information respecting the Member's participation in continuing professional development and other professional training;
  - ~~(h)~~ whether the member is licenced or registered to practice another profession either inside or outside Ontario~~information about other regulatory bodies of which they are registered;~~
  - ~~(h)~~(i) information about actions taken by other regulatory bodies against the Member;
  - ~~(i)~~(j) information relating to a finding of professional negligence or malpractice made against the Member;
  - ~~(k)~~ information related to findings of guilt for a federal, provincial or other~~n~~ offence;

(l) information related to any current charges in respect of a federal, provincial or other offence;

(j)(m) information related to any current existing conditions, terms, orders, directions or agreements relating to the custody or release of the Member with respect to ~~in provincial,~~ federal, provincial or other offences ~~processes~~;

(k)(n) the nature of the Member's practise and services a Member may offer in their practise such as:

- (i) ADP Authorizer;
- (ii) Automated Visual Fields;
- (iii) Binocular Vision Training;
- (iv) Contact Lens Therapy;
- (v) Corneal Topography;
- (vi) Digital Retinal Imaging;
- (vii) Home Visits;
- (viii) Infant Examinations (0 to 24 months);
- (ix) Institution Visits;
- (x) Low Vision Therapy;
- (xi) Occupational Safety Eyewear;
- (xii) Optical Coherence Tomography/Retinal Tomography;
- (xiii) Orthokeratology;
- (xiv) Pre-School Children (2 to 5 years);
- (xv) Punctal Occlusion;
- (xvi) Refractive Surgery Co-management;
- (xvii) Spectacle Therapy;
- (xviii) Sports Vision; and
- (xix) Visual Perception Testing and Therapy;

~~(+)(o)~~ whether the Member prefers to communicate with the College in English or French;

~~(+)(p)~~ the Member's electoral district;

~~(+)(q)~~ the number of hours of direct patient care;

~~(+)(r)~~ information that the College is required to maintain in the register;

~~(+)(s)~~ a copy of the declarations page from the Member's professional liability insurance policy setting out:

- (i) the coverage amount;
- (ii) the name of the insurer;
- (iii) the policy term; and
- (iv) the policy number;

~~(+)(t)~~ information which allows the College to maintain statistics related to the College and the Member; and

~~(+)(u)~~ any other information the College requires.

(4) If a Member fails to return a completed member report to the College within the time provided (which shall be not less than 30 days), the Registrar shall:

- (a) notify the Member in writing of such failure; and
- (b) provide the Member with a reasonable period to return a completed member's report to the College.

(5) If the Member fails to rectify the failure within the time provided, the College may, without notice, suspend the Member's certificate of registration until a completed member report is returned.

(6) A Member must advise the Registrar in writing of a change to any information required for issuance of a certificate of registration within 14 days of such change. The College may, depending on the change of information:

- (a) issue a revised certificate of registration;
- (b) decline to revise the existing certificate of registration; or
- (c) revoke a certificate of registration.

## PART 17 - INFORMATION PROVIDED BY HEALTH PROFESSION CORPORATIONS

### 17.01 Application of a Health Profession Corporation

- (1) A health profession corporation is eligible to hold a certificate of authorization if:
  - (a) the articles of the corporation provide that the corporation cannot carry on a business other than the practise of optometry and activities related to or ancillary to the practise of optometry;
  - (b) all of the issued and outstanding shares of the corporation are legally and beneficially owned, directly or indirectly, by one or more Members; and
  - (c) all the requirements set out in the *Ontario Business Corporations Act*, the RHPA, the Act and in and any other applicable statute or regulation, and these By-laws have been satisfied.
- (2) In order to obtain a certificate of authorization, a health profession corporation shall apply to the College. The application must include:
  - (a) the name of the health profession corporation;
  - (b) all business names of the corporation, if any;
  - (c) all phone numbers, fax numbers and addresses of all business locations along with the address of its head office;
  - (d) the capital structure of the corporation and shareholdings of each shareholder;
  - (e) the name, phone number, address, e-mail address and, when applicable, the College registration number of each shareholder;
  - (f) the name, phone number, address, e-mail address and, when applicable, the College registration number of each director and officer;
  - (g) a certified copy of the corporation's:
    - (i) articles of incorporation, continuance and/or amalgamation, as applicable; and
    - (ii) by-laws;
  - (h) a ~~certificate of status~~corporation profile report that has been issued no more than 30 days before submitting the application indicating that the corporation has not been dissolved;

- (i) a statutory declaration of a director of the corporation, executed not more than 15 days before submitting the application, certifying that:
  - (i) the corporation complies with Section 3.2 of the *Ontario Business Corporations Act*, and its regulations;
  - (ii) the corporation does not carry on, and does not plan to carry on, any business that is not the practise of optometry or practises related to or ancillary to the practise of optometry;
  - (iii) there has been no change in the status of the corporation since the date of the certificate of status; and
  - (iv) the information contained in the application is complete and accurate as of the date the statutory declaration is executed;
- (j) any other information the College deems necessary; and
- (k) the signature of all shareholders of the health profession corporation.

#### **17.02 Corporate Reports**

- (1) A certificate of authorization must be renewed annually.
- (2) The College shall send a corporate report to each health profession corporation by mail or e-mail requesting any information required by the Registrar, and provide the health profession corporation with at least 30 days to respond.
- (3) If a health profession corporation fails to return a completed corporate report to the College within the time provided, the Registrar may:
  - (a) notify the health profession corporation in writing of such failure;
  - (b) provide the health profession corporation with at least 60 days to return a completed corporate report to the College; and
  - (c) advise the health profession corporation that failure to return a completed corporate report to the College will result in revocation of the health professional corporation's certificate of authorization.
- (4) A health profession corporation must advise the Registrar in writing of a change to any information required for issuance of a certificate of authorization within 14 days of such change. The College may, depending on the change of information:
  - (a) issue a revised certificate of authorization;
  - (b) decline to revise the existing certificate of authorization; or

- (c) revoke a certificate of authorization.

### **17.03 Health Profession Corporation Obligations to Provide Information**

- (1) Upon written request for information from the College, a health profession corporation shall respond in writing within the time provided.
- (2) A health profession corporation shall provide written notice of any change to information previously provided to the College within 14 days of the change.

## **PART 18 - REGISTER**

### **18.01 Maintaining the Register**

The Registrar shall maintain a register on behalf of the College in an up to date manner.

### **18.02 Information that the Code Requires be Kept in the Register**

Under subsection 23(2) of the Code and subject to certain exceptions contained in the Code, certain information must be contained in the register and must be available to the public.

- (1) each Member's name, business address and business telephone number, and, if applicable, the name of every health profession corporation of which the member is a shareholder;
- (2) where a member is deceased, the name of the deceased member and the date upon which the member died, if known to the Registrar;
- (3) the name, business address and business telephone number of every health profession corporation;
- (4) the names of the shareholders of each health profession corporation who are Members;
- (5) the Member's class of registration and specialist status (specialist status not applicable to the College at this time);
- (6) the terms, conditions and limitations that are in effect on each Member's certificate of registration;
- (7) a notation of every caution that a member has received from a panel of the Inquiries, Complaints and Reports Committee under paragraph 3 of subsection 26 (1);
- (8) a notation of any specified continuing education or remedial programs required by a panel of the Inquiries, Complaints and Reports Committee using its powers under paragraph 4 of subsection 26 (1);



- (9) a notation of every matter that has been referred by the ICRC to the Discipline Committee under Section 26 of the Code and that has not been finally resolved, including the date of the referral and the status of the hearing before a panel of the Discipline Committee, until the matter has been resolved;
- (10) a copy of the specified allegations against a member for every matter that has been referred by the Inquiries, Complaints and Reports Committee to the Discipline Committee under section 26 and that has not been finally resolved;
- (11) the result of every disciplinary and incapacity proceeding;
- (12) a notation and synopsis of any acknowledgements and undertakings in relation to matters involving allegations of professional misconduct or incompetence before the Inquiries, Complaints and Reports Committee or the Discipline Committee that a member has entered into with the College and that are in effect;
- (13) a notation of every finding of professional negligence or malpractice, which may or may not relate to the Member's suitability to practise, made against the Member, unless the finding is reversed on appeal;
- (14) a notation of every revocation or suspension of a certificate of registration;
- (15) a notation of every revocation of a certificate of authorization;
- (16) information that a panel of the Registration Committee, Discipline Committee or Fitness to Practise Committee specifies shall be included in the register;
- (17) where findings of a panel of the Discipline Committee are appealed, a notation that they are under appeal, until the appeal is finally disposed of;
- (18) where, during or as a result of a proceeding under Section 25 of the Code, the Member has resigned and agreed never to practise again in Ontario, a notation of the resignation and agreement;
- (19) where the College is aware that the Member is currently ~~registered/licenced~~ or ~~licensed/registered~~ to practise another profession inside or outside of Ontario, a notation of that fact;
- (20) where the College is aware that a finding of professional misconduct or incompetence or a similar finding has been made against a Member registered or licensed to practise a profession inside or outside of Ontario, and that finding has not been reversed on appeal, :
  - (a) a notation of that fact;

- (b) the name of the governing body that made the finding;
  - (c) the date the finding was made if available;
  - (d) a brief summary of the facts on which the finding was based if available;
  - (e) the order made if available; and
  - (f) information regarding any appeals of the finding or order if available;
- (21) where the College is aware that a finding of incapacity or similar finding has been made against a Member registered or licensed to practise a profession inside or outside of Ontario, and that finding has not been reversed on appeal, :
- (a) a notation of the finding;
  - (b) the name of the governing body that made the finding;
  - (c) the date the finding was made if available;
  - (d) a summary of any order made if available; and
  - (e) information regarding any appeals of the finding or order if available;
- (22) a summary of any current charge and currently any existing conditions of release, of which the College is aware, following a charge for an offence under the *Criminal Code*(Canada) or *Controlled Drugs and Substances Act* (Canada) or subsequent to a finding of guilt and pending appeal or any variations to those conditions.;
- (23) ~~including the following information~~any outstanding charge for an offence, of which the College is aware, under the *Criminal Code* (Canada) or the *Controlled Drug and Substances Act* (Canada) including the following information:
- (a) the fact and content of the charge; and
  - (b) the date and place of the charge;
- (24.1) ~~any summary of any findings of guilt, of which the College is aware,~~ aware, under the *Criminal Code* (Canada)~~e~~ or *Controlled Drugs and Substances Ac* (Canada)~~t~~, including the following information unless the conditions in subsection 24.2 apply:
- (a) a summary of the finding;
  - (b) a summary of the sentence; and

(c) if the finding is under appeal, a notation that it is under appeal until the appeal is disposed of;

(24.2) the conditions where a finding of guilt referred to in subsection (24.1) shall not be entered on the register are as follows:

-(a) The Parole Board has ordered a record suspension in respect of the conviction;

(b) A pardon in respect to the conviction has been obtained; or

(c) The conviction has been overturned on appeal.

(25) information that is required to be kept in the register in accordance with regulations made pursuant to clause 43 (1) (t) of the *Regulated Health Professions Act, 1991*; and

(26) any other information that is required to be kept in the register in accordance with these By-laws.

### **18.03 Additional Information that the College Requires Be Kept in the Register**

For the purposes of paragraph 20 of subsection 23(2) of the Code, and subject to sections 18.05 and 18.06, the register shall contain the following information, which is designated by the College as public pursuant to subsection 23(5) of the Code:

- (1) the Member's gender;
- (2) the date that the Member first became a Member or, if the Member was licensed under the *Health Disciplines Act*, the date when the Member was first issued a licence by the College;
- (3) each Member's certificate of registration number and the date it was issued;
- (4) a description of the Member's degree in optometry (or equivalent academic achievement) held by the Member and the year the Member obtained the degree (or equivalent academic achievement);
- (5) any language in which the Member is able to communicate and provide services to patients;
- ~~(6) where the College is aware that the Member is currently registered or licensed to practise a profession inside or outside of Ontario, a notation of that fact;~~

~~(7)~~(6) the name and address of any optometric practise for which the Member is an employee, contractor or otherwise;

~~(8)~~(7) if applicable, a notation concerning the authorization by the College to prescribe drugs, and the date on which the Member received such authorization;

~~(9)~~(8) each Member's certificate of authorization, including:

(a) the name of the corporation; and

(b) the date it was issued;

~~(10)~~(9) upon revision of a certificate of registration or certificate of authorization:

(a) details of the revision; and

(b) the effective date of the revision;

~~(11)~~(10) \_\_\_\_\_ the effective date of resignation of the Member;

~~(12)~~(11) \_\_\_\_\_ a summary of any other current charges against a Member, of which the College is aware in respect of a federal, provincial or other offence that the Registrar believes is relevant to the Member's suitability to practise;

~~(13)~~(12) \_\_\_\_\_ a summary of any other currently existing conditions, terms, orders, directions or agreements relating to the custody or release of the Member in provincial, federal or other offence processes of which the College is aware and that the Registrar believes is relevant to the Member's suitability to practise;

~~(14)~~(13) \_\_\_\_\_ a summary of any other findings of guilt of which the College is aware if made by a court after January 17, 2015, against a Member in respect of a federal, provincial or other offence that the Registrar believes is relevant to the Member's suitability to practice;

~~(15)~~(14) \_\_\_\_\_ where the Member's certificate of registration is subject to any terms, conditions and limitations, the reason for them, the Committee that imposed them and the date they took effect;

~~(16)~~(15) \_\_\_\_\_ where terms, conditions or limitations on the Member's certificate of registration have been varied or removed, the effective date of the variance or removal of those terms, conditions and limitations;

~~(17)~~(16) \_\_\_\_\_ where the Member's certificate of registration is subject to a suspension for failure to pay a fee, the reason for the suspension and the date of the suspension in addition to the fact of the suspension;

~~(18)~~(17) \_\_\_\_\_ where a suspension of the Member's certificate of registration is lifted or otherwise removed, the effective date of the lifting or removal of that suspension;

~~(19)~~(18) \_\_\_\_\_ where the Member's certificate of registration is reinstated, the effective date of the reinstatement;

~~(20)~~(19) \_\_\_\_\_ where a finding of professional negligence or malpractice is contained in the College's register, the following information;

- (a) the date of the finding;
- (b) the court and the court file number;
- (c) a summary of the finding; and
- (d) the status of any appeal respecting the finding made against the Member;

~~(21)~~(20) \_\_\_\_\_ where applicable, a summary of any restriction on the Member's right to practise:

- (a) resulting from an undertaking given by the Member to the College or an agreement entered into between the Member and the College; or
- (b) of which the College is aware and which has been imposed by a court or other lawful authority, in which event the summary of the restriction shall also include the source of the restriction;

~~(22)~~(21) \_\_\_\_\_ the following information regarding every caution that a member has received on or after October 1, 2015, from a panel of the Inquiries, Complaints and Reports Committee under paragraph 3 of subsection 26 (1) of the Code;

- (a) a notation of that fact,
- (b) a summary of the panel's decision, including a summary of the caution,
- (c) the date of the panel's decision, and
- (d) if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review is finally disposed of;

~~(23)~~(22) \_\_\_\_\_ the following information regarding any specified continuing education or remediation program that has been required by the Inquiries, Complaints and Reports Committee on or after October 1, 2015 under paragraph (4) of subsection 26(1) of the Code,

- (a) a notation of that fact,

- (b) a summary of the panel's decision, including a summary of the specified continuing education or remediation program,
- (c) the date of the panel's decision, and
- (d) if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review is finally disposed of.

~~(24)~~(23) \_\_\_\_\_ the following information regarding any undertaking that the member has been directed to comply with by the Inquiries, Complaints and Reports Committee on or after October 1, 2015 under paragraph (4) of subsection 26(1) of the Code:

- (a) a notation of that fact;
- (b) a summary of the panel's decision, including a summary of the undertaking; and
- (c) the date of the undertaking and of the panel's decision;

~~(25)~~(24) \_\_\_\_\_ where the Member's certificate of registration is subject to an interim order of the ICRC, a notation of that fact, the nature of that order and its effective date;

~~(26)~~(25) \_\_\_\_\_ where an allegation of a Member's professional misconduct or incompetence has been referred to the Discipline Committee or where the Registrar has referred an application for reinstatement to the Discipline Committee under section 73 of the Code and the matter is outstanding,

- (a) the date of the referral;
- (b) a brief summary of each specified allegation, if applicable;
- (c) the notice of hearing;
- (d) the anticipated date of the hearing, if the hearing date has been set or the next scheduled date for the continuation of the hearing if the hearing has commenced;
- (e) if the hearing is awaiting scheduling, a statement of that fact; and
- (f) if the hearing of evidence and arguments is completed and the parties are awaiting a decision of the Discipline Committee, a statement of that fact;

~~(27)~~(26) \_\_\_\_\_ where a decision of the Discipline Committee has been published by the College with the Member's name:

- (a) a notation of that fact; and

- (b) identification of the specific publication of the College which contains the information;

~~(28)~~(27) \_\_\_\_\_ the reasons for decision of every disciplinary proceeding:

- (a) in which a panel of the Discipline Committee makes a finding of professional misconduct or incompetence; and
- (b) in which a panel of the Discipline Committee makes no finding with regard to the proceeding but the Member requests that the reasons be posted in the register;

~~(29)~~(28) \_\_\_\_\_ where the question of a Member's capacity has been referred to the Fitness to Practise Committee or where the Registrar has referred an application for reinstatement to the Fitness to Practise Committee under section 73 of the Code and the matter is outstanding:

- (a) the date of the referral; and
- (b) a notation of the referral.

~~(30)~~(29) \_\_\_\_\_ where the College is aware that a pending allegation of professional misconduct or incompetence or a similar allegation has been referred to a discipline type of hearing against a Member registered or licensed to practise a profession inside or outside of Ontario and the Registrar believes that it is relevant to the Member's suitability to practise,

- (a) a notation of that fact;
- (b) the name of the governing body that made the referral;
- (c) the date of the referral if available;
- (d) a brief summary of each allegation if available; and
- (e) the notice of hearing if available.

~~(31) \_\_\_\_\_ where the College is aware that a finding of professional misconduct or incompetence or a similar finding has been made against a Member registered or licensed to practise a profession inside or outside of Ontario, that finding has not been reversed on appeal, and the Registrar believes that it is relevant to the Member's suitability to practise,~~

- ~~(a) \_\_\_\_\_ a notation of that fact;~~
- ~~(b) \_\_\_\_\_ the name of the governing body that made the finding;~~
- ~~(c) \_\_\_\_\_ the date the finding was made if available;~~

- ~~(d) — a brief summary of the facts on which the finding was based if available;~~
- ~~(e) — the order made if available; and~~
- ~~(f) — information regarding any appeals of the finding or order if available;~~
- ~~(32) — where the College is aware that a finding of incapacity or similar finding has been made against a Member registered or licensed to practise a profession inside or outside of Ontario, that finding has not been reversed on appeal, and the Registrar believes that it is relevant to the Member's suitability to practise,~~
  - ~~(a) — a notation of the finding;~~
  - ~~(b) — the name of the governing body that made the finding;~~
  - ~~(c) — the date the finding was made if available;~~
  - ~~(d) — a summary of any order made if available; and~~
  - ~~(e) — information regarding any appeals of the finding or order if available;~~
- ~~(33)~~(30) \_\_\_\_\_ in respect of a former Member, any information that was in the register at the time the former Member's registration terminated, for a period of at least two years after the termination of registration, except for any information related to discipline proceedings in Ontario, which shall be entered in the register for a period of 50 years after the termination of registration; and
- ~~(34)~~(31) \_\_\_\_\_ any other information not otherwise referred to in this section, which the College and the Member have agreed shall be available to the public.

#### **18.04 Designated Information for Safety Exception**

- (1) All of the information required to be kept in the register under subsection 23(2) of the Code and all of the information kept in the register under 18.03 of these By-laws is designated as information that may be withheld from the public pursuant to subsection 23(6) of the Code if the Registrar has reasonable grounds to believe that disclosure of that information may jeopardize the safety of an individual.

#### **18.05 Deletion of Information**

- (1) Notwithstanding section 18.03, where after a review the ICRC has been required to remove or vary the requirement to appear for a caution or to complete a specified continuing education or remediation program:



- (a) the Registrar may delete from the register any information which would otherwise have been required to be maintained under section 18.03(23) or section 18.03(24); and
- (b) the Registrar may enter a summary of the process leading up to and the results of any variation of a caution or a specified continuing education or remediation program.

#### **18.06 Publication Ban and Disclosure**

- (1) Pursuant to Section 23(3) of the Code, no action shall be taken by the College with respect to information that would violate a publication ban.
- (2) The Registrar may refuse to disclose or post on the College's website information that is otherwise required to be public if:
  - (a) the Registrar has reasonable grounds to believe that such disclosure may jeopardize the safety of an individual; or
  - (b) the Registrar has reasonable grounds to believe that the information is obsolete and no longer relevant to a Member's suitability to practise.
- (3) The Registrar shall not disclose or post on the College's website information that is otherwise required to be public if it is personal health information, unless it is the personal health information of a Member and it is in the public interest that such information be disclosed. Any disclosure of a Member's personal health information shall be limited to not more than what is reasonably necessary. For the purposes these By-laws, "personal health information" means information that identifies an individual and that is referred to in clauses (a) through (g) of the definition of "personal health information" in subsection 4(1) of the *Personal Health Information Protection Act, 2004*.
- (4) The Registrar shall refuse to disclose information regarding a Member relating to disciplinary or incapacity proceeding if:
  - (a) a finding of professional misconduct was made against a Member and the order made was only a reprimand or only a fine, or a finding of incapacity was made against a Member;
  - (b) more than 6 years have passed since the information was prepared or last updated;
  - (c) the Member has made an application to the relevant Committee for the removal of the information from public access because the information is no longer relevant to the Member's suitability to practise, and if:

- (i) the relevant Committee believes that a refusal to disclose the information outweighs the desirability of public access to the information in the interest of any person affected or the public interest; and
- (ii) the relevant Committee has directed the Registrar to remove the information from public access; and
- (d) the information does not relate to disciplinary proceedings concerning sexual abuse as defined in clause (a) or (b) of the definition of “sexual abuse” in Subsection 1(3) of the Code.
- (5) The Registrar shall refuse to disclose to an individual or to post on the College’s website information required by paragraph 11 of section 18.02 if
  - (a) the result of a discipline proceeding was that no finding of professional misconduct or incompetence was made against the member; and
  - ~~(b)~~ more than 90 days have passed since the information was prepared or last updated, unless before the expiry of the 90 days the member to whom the information relates specifically requests in writing that the Registrar continue to maintain public access to the information.
  - ~~(e)~~
  - ~~(d)(b)~~

## **PART 19 - LIFE MEMBERS**

- (1) A Member or a former Member may apply to the College to be designated as a Life Member by the College’s Registrar;
- (2) A Member or a former Member is eligible to be a Life Member if he or she:
  - (a) holds or has ever held a general certificate of registration or academic certificate of registration with the College for at least 25 years;
  - (b) has retired from practising optometry;
  - (c) was in good standing with the College when he or she resigned his or her membership with the College;
  - (d) is not a Council Member;
  - (e) after having been provided with an opportunity to rectify any failure of his or her obligations to the College:
    - (i) has paid any fee, penalty or order for costs owing to the College;

- (ii) has submitted to the College all required forms and documents;  
and
  - (iii) is otherwise in good standing with the College;
- (f) has not had his or her certificate of registration suspended or revoked in the previous 6 years;
- (g) has not had a term, condition or limitation on their certificate of registration in the previous 6 years other than one that does not already apply to every Member who possesses that class of certificate;
- (h) is not the subject of any disciplinary or incapacity proceedings; and
- (i) has not otherwise acted in a manner that is inconsistent with an ongoing association with the College.
- (3) A Life Member shall not:
- (a) practise optometry;
  - (b) hold himself or herself out as qualified to practise optometry in Ontario; or
  - (c) be eligible for election to Council or vote in Council elections.
- (4) A Life Member's designation may be revoked by the Registrar if the Life Member:
- (a) is found by a panel of the Discipline Committee to be incompetent or to have committed an act of professional misconduct;
  - (b) acts in a manner that is inconsistent with an ongoing association with the College provided that, before making a determination, the Registrar first provides the Life Member with a reasonable opportunity to make written submissions; or
  - (c) after having been provided with an opportunity to rectify any failure in his or her obligations to the College:
    - (i) remains in default of any fee, charge or order for costs owing to the College,
    - (ii) fails to submit to the College all required forms and documents, or
    - (iii) ceases to otherwise be in good standing with the College.
- (5) A Life Member who wishes to re-obtain a general or academic certificate of registration must apply for one, and meet the registration requirements in effect at the time of application.

## PART 20 - FUNDING FOR THERAPY AND COUNSELLING

### 20.01 Sexual Abuse Funding Program

- (1) The College shall establish funding for therapy and counselling for persons who, while patients of a Member, were sexually abused by the Member (the "Sexual Abuse Funding Program").
- (2) The definition of "sexual abuse" is set out in Section 1(3) of the *Code*.

### 20.02 Role of Patient Relations Committee

The Patient Relations Committee shall:

- (1) administer the Sexual Abuse Funding Program;
- (2) determine the eligibility of an individual for funding based on whether:
  - (a) ~~it is alleged, in a complaint or report, that the person was sexually abused by a Member while the person was a patient of the Member; there is a finding of a panel of the Discipline Committee that the individual, while a patient of a Member, was sexually abused by the Member;~~
  - (b) the individual confirms that the therapy will be at least partially related to the sexual abuse committed by the Member. However, the individual is not required to undergo a psychological or other assessment before receiving funding;
  - (c) the funding will only be used by the individual for therapy or counselling. The College may request signed receipts from the therapist or counsellor, and all payments for therapy or counselling shall be made by the College directly to the therapist or counsellor; and
  - (d) the individual's therapist or counsellor;
    - (i) does not have a family relationship with the individual; and
    - (ii) is not a person who has, at any time or in any jurisdiction, been found guilty of professional misconduct of a sexual nature, or been found civilly or criminally liable for an act of a similar nature; and
  - (e) the application for funding is made within the time prescribed under Ontario Regulation 59/94 ("Funding for Therapy or Counselling for Patients Sexually Abused by Members").

### **20.03 Application Process**

- (1) To obtain funding, the individual must apply in writing to the College. As part of the application, the College may require that the individual provide the College with:
  - (i) details of the therapist or counsellor's training, experience and contact information;
  - (ii) written confirmation that the individual has no family relation to the therapist or counsellor;
  - (iii) if requested by the College to do so, a document acknowledging that the therapist or counsellor is not a member of a regulated professional and therefore not subject to professional discipline; and
  - (iv) any other information the College deems necessary.
- (2) The maximum amount the College shall fund an individual's therapy or counselling shall be governed by Ontario Regulation 59/94 and Section 85.7(11) of the Code.
- (3) Any decision, including reasons, of the Patient Relations Committee to approve or deny funding shall be provided in writing to the individual.

## **PART 21 - PROFESSIONAL LIABILITY INSURANCE**

### **21.01 Mandatory Insurance for Members**

- (1) No Member shall engage in the practise of optometry unless he or she is personally insured against professional liability under a professional liability insurance policy that provides coverage based on when an "occurrence" allegedly took place.
- (2) The professional liability insurance policy must provide:
  - (a) at a minimum, coverage in the amount of:
    - (i) \$2,000,000 per occurrence; and
    - (ii) \$5,000,000 in the aggregate per year; and
  - (b) a deductible of not more than \$5,000.
- (3) A Member must, at all times, keep a copy of the Member's professional liability insurance policy at all of his or her places of business.

## **PART 22 - FEES AND PENALTIES**

### **21.01 Setting and Imposing Fees and Penalties**

- (1) The College shall maintain, as a schedule to these By-laws, a list of all fees and penalties which may be charged or imposed by the College. Council may, without amending these By-laws, adjust the amount of any fees or penalties set out in the schedule to reflect annual changes to the Consumer Price Index (Canada) plus up to 2%.
- (2) Where no fee or penalty has been set out in the schedule, a Member or person shall pay to the College the fee or penalty set by the College.

### **22.02 Obligation to Pay Fees and Penalties**

- (1) A Member's obligation to pay a fee or penalty continues regardless of whether:
  - (a) the College fails to send notice; or
  - (b) the Member fails to receive notice;of a fee or penalty.
- (2) The College may waive all or a portion of any fee or penalty.

### **22.03 Consequences for Failure to Pay Fees and Penalties**

- (1) Any fee or penalty charged or imposed by the College not paid by a Member shall be included as part of a Member's next annual membership fee.
- (2) If a Member fails to pay a fee or penalty or part thereof:
  - (a) the Registrar must give the Member notice if the College intends to suspend the Member; and
  - (b) may suspend the Member's certificate of registration for failure to pay the fee or penalty within 30 days after notice is given.

ENACTED the 3<sup>rd</sup> day of August 2012

Revised the 4<sup>th</sup> day of September 2012

Revised the 16<sup>th</sup> day of January 2015

Revised the 8<sup>th</sup> day of April 2015

Revised the 30<sup>th</sup> day of September 2015

Revised the 20<sup>th</sup> day of January 2016

Fee Schedule Effective the 20<sup>th</sup> day of April 2016

**Schedule of Fees and Penalties – effective September 17, 2014**

All of the following fees are in Canadian funds and subject to 13% HST.

	<b>Fee</b>
Application Fee including Jurisprudence Seminar and Exam Fee	\$420.00
Jurisprudence Reassessment Fee	\$184.00
Certificate Fee upon completion of all College registration requirements	\$26.00
Duplicate Certificate fee: <ul style="list-style-type: none"> <li>• when ordered at the same time as the initial certificate</li> <li>• when ordered some time after ordering the initial certificate</li> </ul>	\$11.00 \$26.00
Annual Membership Fee (non-refundable)	\$945.00
Late Penalty Fee (application, membership renewal, Certificate of Authorization renewal)	\$105.00
Reinstatement Fee (membership)	\$210.00
Certificate of Authorization (Incorporation) Application Fee	\$630.00
Certificate of Authorization (Incorporation) Certificate Fee	\$26.00
Certificate of Authorization (Incorporation) Revision	\$504.00
Certificate of Authorization (Incorporation) Annual Renewal Fee	\$315.00
Quality Assurance Assessment Fee	\$1,733.00
Quality Assurance Short record Assessment Fee (for CE deficient hours): <ul style="list-style-type: none"> <li>• Deficient by 5 hours or less (5 records)</li> <li>• Deficient by more than 5 hours (25 records)</li> </ul>	\$1,000.00 \$5,000.00
Incorrectly Underreported CE Hours Audit Fee	\$350.00
Quality Assurance Evaluation Fee	\$3,176.00
Certificate of Standing	\$105.00
Address Labels: <ul style="list-style-type: none"> <li>For members and other professionals on profession-related business (e.g., referrals)</li> <li>For continuing education providers (e.g., UWSO, Vision Institute, University of Toronto)</li> <li>For any commercial organization</li> </ul>	\$32.00 \$95.00 \$315.00
NSF Cheques	\$42.00



## Motion to Council

**Name of Committee: Executive Committee**

**Date of Submission: June 11, 2018**

**Recommendations to Council** (including rationale and impact on budget if appropriate):

**Proposed Motion: To approve an increase in the Special Reserve Fund for Patient Relations to \$100,000.**

Recommendation to Council and Rationale	
The Issue	<p>Recent amendments to the <i>Health Professions Procedural Code (HPPC)</i>, which is Schedule 2 to the <i>Regulated Health Professions Act, 1991</i>, changed the criteria required for a patient to apply for funding for therapy and counselling.</p> <p>Effective May 1, 2018, a person is eligible for funding if there is an allegation that the person was sexually abused by a health care professional (in the case of this College- an optometrist) while the person was a patient of the optometrist. Section 85.7 (4) of the <i>HPPC</i> with respect to eligibility for funding reads as follows:</p> <p><b>Eligibility</b></p> <p>(4) A person is eligible for funding if,</p> <ul style="list-style-type: none"> <li>(a) it is alleged, in a complaint or report, that the person was sexually abused by a member while the person was a patient of the member; or</li> <li>(b) the alternative requirements prescribed in the regulations made by the Council are satisfied. 2017, c. 11, Sched. 5, s. 28 (2).</li> </ul> <p>This is a significant change from the previous provision, which tied the eligibility for funding with a finding of guilt by the Discipline Committee. As a result, it is anticipated that the College fund for therapy and counselling may need to be increased significantly.</p>
Background	<p>On May 14, 2018, the Executive Committee received a memo from the Patient Relations Committee (PRC) regarding these recent changes to the RHPA. The PRC cannot know how many applications for funding it may receive. However, the Committee suggested the amount set aside in the Patient Relations Fund be increased from the current \$30,000 to \$60,000.</p> <p>The Executive Committee, in its consideration of the memo from PRC, recognized that under the prior legislation, when a member was found guilty of sexual abuse at Discipline, as part of the Order of the Discipline Committee, the optometrist was required to set aside the maximum funds for therapy for a period of five years. Under the <i>RHPA</i>, the maximum payment for therapy per patient is currently set at \$16,060.</p>

	<p>However, under the new provisions, there may be funding required where there is no opportunity to recoup the funds from a member; in those instances, the College must use its own funds for the therapy.</p> <p>With this in mind, the Executive Committee felt it was appropriate to recommend to Council that the reserve fund amount be expanded to a total of \$100,000.</p> <p>Since the Patient Relations Committee would not be meeting again until after the June 21, 2018 Council meeting, and the Executive Committee believes that time is of the essence in this matter, it has taken the rare step of making this recommendation to Council on behalf of the Patient Relations Committee.</p>
<p>Analysis, including impact on budget</p>	<p>The amount is set aside in the reserve fund and accordingly does not directly affect the operating budget for the year. However, there would be an impact on the reserve funds as it is recommended that \$70,000 be moved from the unappropriated surplus fund over to the appropriated fund.</p>
<p>Options (are there alternatives)</p>	<p>Council has the option of maintaining the current level of the Fund or adding any other amount if it believes would be more appropriate in order to ensure that funds are available when needed for this purpose.</p>
<p>Implications/expectations if approved</p>	<p>The College would be, and be perceived to be, prepared for funding of therapy for these patients, should the need ever arise. While a rare occurrence, it is prudent for the College to have funds set aside should a patient require such funding.</p>
<p>Implications/potential consequences if not approved</p>	<p>If not approved, the College would still have the current \$30,000 in a reserve fund. Any funds needed, which are in excess of that amount, would have to come out of funds currently set aside for operations; that is, money which had been set aside for another area of the College, would be directed for this purpose.</p>

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# 6 / OTHER MATTERS

6. Injunction Appeal – Update
7. Legislative Updates
  - 7.1. Spousal Exemption
  - 7.2. QA Regulation
  - 7.3. Designated Drugs Regulation
8. Governance Recommendation - Strategic Planning
9. Correspondence
  - 9.1. Memo to Colleges – Proclamation of certain sections of the *Protecting Patients Act* and new regulations made under the *RHPA*, dated April 20, 2018
  - 9.2. Letter from OEBC, dated May 3, 2018
  - 9.3. FHRCO 2017-2018 Highlights
10. List of Acronyms
11. Dates of Upcoming Council Meetings
  - 11.1. Tuesday, September 25, 2018
  - 11.2. Friday, January 18, 2019
  - 11.3. Wednesday, April 24, 2018
  - 11.4. Monday, June 24, 2019
12. Adjournment

**Ministry of Health  
and Long-Term Care**

Health Workforce Planning and  
Regulatory Affairs Division

Health Workforce Regulatory  
Oversight Branch

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**Ministère de la Santé  
et des Soins de longue durée**

Division de la planification et de la réglementation  
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domaine de la santé

Direction de la surveillance réglementaire relative  
aux ressources humaines dans le domaine de la  
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Télééc.: 416 327-0167



**APR 20 2018**

HLTC2968IT-2018-61

**MEMORANDUM TO:** Presidents and Registrars  
Health Regulatory Colleges

**FROM:** Allison Henry  
Director  
Health Workforce Regulatory Oversight Branch

**RE:** Proclamation of certain sections of the *Protecting Patients Act, 2017* and new regulations under the *Regulated Health Professions Act, 1991*

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I am pleased to advise you that the Lieutenant Governor in Council has proclaimed May 1, 2018 as the date on which certain sections of Schedules 1 and 5 of the *Protecting Patients Act, 2017* will come into force. Three new regulations made under the *Regulated Health Professions Act, 1991* (RHPA) will also come into force on that date.

Specifically, the sections are Schedule 1, s. 3, 4 (3), 5 and Schedule 5, s. 5 (1), (7), 6, 7, 18, 26, 27, 28, 31 of the *Protecting Patients Act, 2017*. E-laws has been updated to reflect the proclamation.

The regulations are those made under subsection 1 (6), 23 (2) and for the purposes of clause 51 (5.2) (a) of the Health Professions Procedural Code (HPPC). An electronic copy of the regulations is attached and they may also be viewed on e-laws.

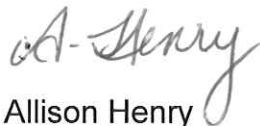
Together, the proclamation and the regulations will further strengthen Ontario's zero tolerance for sexual abuse of patients by regulated health professions and will bring greater consistency between the *Drug and Pharmacies Regulation Act*, and the RHPA with respect to interim suspensions.

... 2

In advance of May 1, 2018, Colleges should ensure their respective readiness for the coming into force of these legislative amendments and new regulations. This includes Colleges' processes and practices that reflect the new statutory and regulatory obligations, as well as, updated guidance documents for members of your respective colleges, including those associated with the regulation made under subsection 1 (6) of the HPPC.

If you have any questions about the proclamation or the regulations, please do not hesitate to contact Stephen Cheng, Manager, Strategic Regulatory Policy Unit at 416-327-8540.

Sincerely,

A handwritten signature in cursive script that reads "A. Henry".

Allison Henry  
Director

Attachments

**CONFIDENTIAL**  
Until filed with the  
Registrar of Regulations

**REG2017.0585.e**  
**6-SB**

**ONTARIO REGULATION**

made under the

**REGULATED HEALTH PROFESSIONS ACT, 1991**

**PATIENT CRITERIA UNDER SUBSECTION 1 (6) OF THE HEALTH PROFESSIONS  
PROCEDURAL CODE**

1. The following criteria are prescribed criteria for the purposes of determining whether an individual is a patient of a member for the purposes of subsection 1 (6) of the Health Professions Procedural Code in Schedule 2 to the Act:

1. An individual is a patient of a member if there is direct interaction between the member and the individual and any of the following conditions are satisfied:
  - i. The member has, in respect of a health care service provided by the member to the individual, charged or received payment from the individual or a third party on behalf of the individual.
  - ii. The member has contributed to a health record or file for the individual.
  - iii. The individual has consented to the health care service recommended by the member.
  - iv. The member prescribed a drug for which a prescription is needed to the individual.
2. Despite paragraph 1, an individual is not a patient of a member if all of the following conditions are satisfied:
  - i. There is, at the time the member provides the health care services, a sexual relationship between the individual and the member.

- ii. The member provided the health care service to the individual in emergency circumstances or in circumstances where the service is minor in nature.
- iii. The member has taken reasonable steps to transfer the care of the individual to another member or there is no reasonable opportunity to transfer care to another member.

**Commencement**

**2. This Regulation comes into force on the latest of,**

- (a) the day section 6 of Schedule 5 to the *Protecting Patients Act, 2017* comes into force;**
- (b) May 1, 2018; and**
- (c) the day this Regulation is filed.**

## **RÈGLEMENT DE L'ONTARIO**

pris en vertu de la

### **LOI DE 1991 SUR LES PROFESSIONS DE LA SANTÉ RÉGLEMENTÉES** **CRITÈRES APPLICABLES AUX PATIENTS EN APPLICATION DU PARAGRAPHE 1** **(6) DU CODE DES PROFESSIONS DE LA SANTÉ**

1. Les critères suivants sont des critères prescrits pour ce qui est d'établir si un particulier est un patient d'un membre pour l'application du paragraphe 1 (6) du Code des professions de la santé figurant à l'annexe 2 de la Loi :

1. Un particulier est le patient d'un membre si, d'une part, il existe une interaction directe entre le membre et le particulier et que, d'autre part, l'une ou l'autre des conditions suivantes est remplie :
  - i. En ce qui concerne un service de soins de santé qu'il a fourni au particulier, le membre a facturé le service au particulier ou à un tiers, au nom du particulier, ou il a reçu un paiement du particulier ou du tiers.
  - ii. Le membre a contribué à un dossier, notamment un dossier de santé, tenu à l'égard du particulier.
  - iii. Le particulier a consenti au service de soins de santé recommandé par le membre.
  - iv. Le membre a prescrit au particulier un médicament sur ordonnance.
2. Malgré la disposition 1, un particulier n'est pas le patient d'un membre si toutes les conditions suivantes sont remplies :



- i. Au moment de la prestation, par le membre, des services de soins de santé, le particulier et le membre entretiennent des rapports sexuels.
- ii. Le membre a fourni le service de soins de santé au particulier dans une situation d'urgence ou dans des circonstances où le service présente un caractère mineur.
- iii. Le membre a pris des mesures raisonnables pour transférer les soins destinés au particulier à un autre membre ou il n'existe aucune occasion raisonnable de transférer les soins à un autre membre.

**Entrée en vigueur**

**2. Le présent règlement entre en vigueur le dernier en date des jours suivants :**

- a) **le jour de l'entrée en vigueur de l'article 6 de l'annexe 5 de la *Loi de 2017 sur la protection des patients*;**
- b) **le 1<sup>er</sup> mai 2018;**
- c) **le jour de son dépôt.**

Made by:  
Pris par :

*Le ministre de la Santé et des Soins de longue durée,*

.....  
*Signature (in blue ink / à l'encre bleue)*  
*Minister of Health and Long-Term Care*

Date made:  
Pris le : .....

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**REG2017.0552.e**  
**4-SB**

**ONTARIO REGULATION**

made under the

**REGULATED HEALTH PROFESSIONS ACT, 1991**

**PRESCRIBED OFFENCES – HEALTH PROFESSIONS PROCEDURAL CODE**

**Prescribed offences**

1. The offences mentioned in sections 151, 152, 153, 153.1, subsection 160 (3) and sections 162, 162.1, 163.1, 170, 171.1, 172.1, 172.2, 271, 272 and 273 of the *Criminal Code* (Canada) are prescribed offences for the purposes of clause 51 (5.2) (a) of the Health Professions Procedural Code in Schedule 2 to the Act.

**Commencement**

2. This Regulation comes into force on the later of May 1, 2018 and the day it is filed.

**CONFIDENTIEL**  
jusqu'au dépôt auprès du  
registrateur des règlements

Reg2017.0552.f04.EDI  
4-SB

## **RÈGLEMENT DE L'ONTARIO**

pris en vertu de la

### **LOI DE 1991 SUR LES PROFESSIONS DE LA SANTÉ RÉGLEMENTÉES INFRACTIONS PRESCRITES - CODE DES PROFESSIONS DE LA SANTÉ**

#### **Infractions prescrites**

1. Les infractions visées aux articles 151, 152, 153 et 153.1, au paragraphe 160 (3) et aux articles 162, 162.1, 163.1, 170, 171.1, 172.1, 172.2, 271, 272 et 273 du *Code criminel* (Canada) sont des infractions prescrites pour l'application de l'alinéa 51 (5.2) a) du Code des professions de la santé figurant à l'annexe 2 de la Loi.

#### **Entrée en vigueur**

2. Le présent règlement entre en vigueur le dernier en date du 1<sup>er</sup> mai 2018 et du jour de son dépôt.

Made by:  
Pris par :

*Le ministre de la Santé et des Soins de longue durée,*

.....  
*Signature (in blue ink / à l'encre bleue)  
Minister of Health and Long-Term Care*

Date made:  
Pris le : .....

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REG2017.0553.e  
9edi-SB

**ONTARIO REGULATION**

made under the

**REGULATED HEALTH PROFESSIONS ACT, 1991**

**INFORMATION PRESCRIBED UNDER SUBSECTION 23 (2) OF THE HEALTH  
PROFESSIONS PROCEDURAL CODE**

**Prescribed information**

1. (1) The following information, if known to the College, is prescribed information to be contained in a College's register for the purposes of paragraph 19 of subsection 23 (2) of the Code and is designated as information subject to subsection 23 (13.1) of the Health Professions Procedural Code in Schedule 2 to the Act:

1. If there has been a finding of guilt against a member under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) and if none of the conditions in subsection (2) have been satisfied,
  - i. a brief summary of the finding,
  - ii. a brief summary of the sentence, and
  - iii. if the finding is under appeal, a notation that it is under appeal until the appeal is finally disposed of.
2. With respect to a member, any currently existing conditions of release following a charge for an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) or subsequent to a finding of guilt and pending appeal or any variations to those conditions.
3. If a member has been charged with an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) and the charge is outstanding,

- i. the fact and content of the charge, and
  - ii. the date and place of the charge.
4. If a member has been the subject of a disciplinary finding or a finding of professional misconduct or incompetence by another regulatory or licensing authority in any jurisdiction,
- i. the fact of the finding,
  - ii. the date of the finding,
  - iii. the jurisdiction in which the finding was made, and
  - iv. the existence and status of any appeal.
5. If a member is currently licenced or registered to practice another profession in Ontario or a profession in another jurisdiction, the fact of that licensure or registration.

(2) The conditions referred to in paragraph 1 of subsection (1) are the following:

- 1. The Parole Board of Canada has ordered a record suspension in respect of the conviction.
- 2. A pardon in respect of the conviction has been obtained.
- 3. The conviction has been overturned on appeal.

(3) Nothing in this Regulation shall be interpreted as authorizing the disclosure of identifying information about an individual other than a member.

(4) In this section,

“identifying information” means information that identifies an individual or for which it is reasonably foreseeable in the circumstances that it could be utilized, either alone or with other information, to identify an individual.

### **Commencement**

**2. This Regulation comes into force on the later of May 1, 2018 and the day it is filed.**

**CONFIDENTIEL**  
jusqu'au dépôt auprès du  
registrateur des règlements

Reg2017.0553.f09(edi).EDI  
9edi-SB

## **RÈGLEMENT DE L'ONTARIO**

pris en vertu de la

### **LOI DE 1991 SUR LES PROFESSIONS DE LA SANTÉ RÉGLEMENTÉES**

#### **RENSEIGNEMENTS PRESCRITS EN VERTU DU PARAGRAPHE 23 (2) DU CODE DES PROFESSIONS DE LA SANTÉ**

##### **Renseignements prescrits**

1. (1) Si l'ordre en a connaissance, les renseignements suivants sont des renseignements prescrits qui doivent figurer au tableau de l'ordre pour l'application de la disposition 19 du paragraphe 23 (2) du Code et qui sont désignés comme des renseignements assujettis à l'application du paragraphe 23 (13.1) du Code des professions de la santé figurant à l'annexe 2 de la Loi :

1. Si un membre a été déclaré coupable d'une infraction au *Code criminel* (Canada) ou à la *Loi réglementant certaines drogues et autres substances* (Canada) et qu'aucune des conditions énoncées au paragraphe (2) n'a été satisfaite :
  - i. un bref résumé de la déclaration de culpabilité,
  - ii. un bref résumé de la peine,
  - iii. si la déclaration de culpabilité fait l'objet d'un appel, une indication à ce sujet, jusqu'à ce qu'il soit statué de façon définitive sur l'appel.
2. En ce qui concerne un membre, les conditions actuelles de mise en liberté imposées après une accusation pour une infraction au *Code criminel* (Canada) ou à la *Loi réglementant certaines drogues et autres substances* (Canada), ou après une déclaration de culpabilité portée en appel, ou les modifications éventuelles de ces conditions.

3. Si un membre a été accusé d'une infraction au *Code criminel* (Canada) ou à la *Loi réglementant certaines drogues et autres substances* (Canada) et que l'accusation est en instance :
  - i. le fait que l'accusation a été portée et la teneur de celle-ci,
  - ii. la date et le lieu de l'accusation.
4. Si un membre a fait l'objet d'une décision disciplinaire ou d'une conclusion de faute professionnelle ou d'incompétence rendue par un autre organisme de réglementation ou de délivrance de permis dans un territoire quelconque :
  - i. le fait que la décision a été rendue,
  - ii. la date de la décision,
  - iii. le territoire dans lequel la décision a été rendue,
  - iv. l'existence et l'état de l'appel, s'il y en a un.
5. Si le membre est actuellement titulaire d'un permis l'autorisant à exercer une autre profession en Ontario ou une profession dans un autre territoire ou s'il est inscrit à cette fin, ce fait.

(2) Les conditions mentionnées à la disposition 1 du paragraphe (1) sont les suivantes :

1. La Commission des libérations conditionnelles du Canada a ordonné la suspension du casier à l'égard de la déclaration de culpabilité.
2. Une réhabilitation a été obtenue à l'égard de la déclaration de culpabilité.
3. La déclaration de culpabilité a été infirmée en appel.

(3) Aucune disposition du présent règlement ne doit être interprétée de manière à autoriser la divulgation de renseignements identificatoires concernant un particulier autre qu'un membre.

(4) La définition qui suit s'applique au présent article.

«renseignements identificatoires» Renseignements qui permettent d'identifier un particulier ou à l'égard desquels il est raisonnable de prévoir, dans les circonstances, qu'ils pourraient servir, seuls ou avec d'autres, à en identifier un.

**Entrée en vigueur**

**2. Le présent règlement entre en vigueur le dernier en date du 1<sup>er</sup> mai 2018 et du jour de son dépôt.**

Made by:  
Pris par :

*La ministre de la Santé et des Soins de longue durée,*

.....  
*Signature (in blue ink / à l'encre bleue)*  
*Minister of Health and Long-Term Care*

Date made:  
Pris le : .....





May 3, 2018

by email

Dr. Pooya Hemami, President  
College of Optometrists of Ontario  
65 St. Clair Avenue E, Suite 900  
Toronto ON M4T2Y3

Dear Dr. Hemami;

There is some information being circulated by the College of Optometrists of Ontario (COO) about OEBC, to COO members and on its website, that I am concerned about ensuring that the information is a true reflection of what has occurred. The January 31, 2018, COO teleconference minutes state:

“OEBC: The OEBC meeting was held on January 25th. A by-law amendment, requiring the OEBC board to be comprised of no fewer than 67% plus one to be a Registrar, Council member or designated regulatory representative, was passed. In the elections for OEBC Board members, ON, QC, AB (2) and MB obtained regulatory seats on the board. Existing directors from NL, PE and SK will also serve as regulatory representatives for those provinces. The newly revised board is expect to look at governance, finances and transparency as its first orders of business.”

Also stated on the second page of the minutes from January 31, 2018:

“Council was informed that once the revised OEBC board is in place, that there would be a request for an independent review of the OEBC exam. It was confirmed that other provinces, including Ontario have similar concerns about the exam. OEBC must improve its transparency to its members. Council agreed that it was premature to discuss the membership contribution to OEBC until it sees the progress of the newly composed Board. The College will express that it will be looking to observe the spring OSCE administration. OEBC members are working towards a national solution with OEBC rather than ON developing its own exam.”

The newly elected OEBC board did not meet as a whole until April 12, 2018, and as such did not make any statements about governance, finances, or transparency. Drs. Acorn, Gardiner, and Weninger were re-elected and in February the OEBC membership accepted them as “member-designated representatives” (undefined in our Bylaw), not provincial regulatory representatives.

OEBC has not received a formal request from any member or stakeholder to hold an independent review of the OEBC exam. This item was briefly discussed at the April 12<sup>th</sup> board meeting. Members have not expressed “concerns” about the exam in any formal way. The facilitated discussions held in Toronto, in November 2017 did not point out any significant concerns about the exam. The facilitator

did not indicate that the exam, either written or OSCE, was a significant problem. If the College of Optometrists of Ontario has concerns that OEBC should be aware of, please contact us with details.

The first order of business for OEBC is to provide a fair, valid, defensible exam to assess entry to practice for optometry that our members can rely on for registration. Part of the board's job in governing a corporation that delivers a high-stakes exam is to ensure that widely-shared and public information is truthful and accurate and cause no harm to the corporate reputation of OEBC. The inaccurate information being shared by COO suggests that OEBC and its board were not acting appropriately and required oversight.

OEBC requests that COO council be given the correct information and that the correct information be noted in the next council meeting minutes to ensure that the OEBC and the COO are considered to be accurate in their dissemination of information. Without the clarification, the OEBC may have to correct, on its own, the information that has been incorrectly reported.

As we are in the process of creating a 5-year strategic plan, we will be contacting you and our other members and stakeholders, to get a clear understanding of your needs and concerns for the ETP exam.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Carolyn Acorn', with a long horizontal flourish extending to the right.

Dr. Carolyn Acorn  
Chair

# 2017-2018 Highlights

Federation of Health Regulatory Colleges of Ontario

## ABOUT THE FEDERATION

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The Federation of Health Regulatory Colleges of Ontario provides strategic leadership for health professional regulators, Colleges under the *Regulated Health Professions Act (RHPA)*, within the changing health care system. The Federation’s activities include:

- Working collaboratively on legislative priorities and regulatory change
- Providing regulatory expertise on relevant issues
- Interacting with stakeholders
- Identifying priority initiatives for project development
- Sharing promising practices
- Serving as repository for sector-specific issues and information
- Communicating the role of the regulator to the public and stakeholders
- Supporting and mentoring of new College Registrars
- Developing tools and materials to support FHRCO members
- Education sessions for College Council members, Committees, and Staff
- Offering venues for College staff members to interact in key College areas

[WWW.ONTARIOHEALTHREGULATORS.CA](http://WWW.ONTARIOHEALTHREGULATORS.CA)



*FHRCO’s website, designed for, and dedicated to, the public, was enhanced by the addition of a new animated video in 2017.*

*For more information about the FHRCO Public Engagement Project and our Communications Committee, see page two.*

## Executive Committee Members:

Shenda Tanchak,  
President

Kevin Taylor, Vice-  
President

Brenda Kritzer,  
Treasurer

Paula Garshowitz,  
Member

Elinor Larney, Member

Jo-Ann Willson, Member

Linda Gough, Past  
President

## PRESIDENT & EXECUTIVE COMMITTEE REPORT

*This report covers the Federation's corporate year from the May 4, 2017 Annual Meeting to the May 4, 2018 Annual Meeting.*

### **BILL 87, PROTECTING PATIENTS ACT, 2017**

A key area of focus for the Federation was response to legislative amendments to the *RHPA* resulting from the May 30<sup>th</sup> Royal Assent of the *Protecting Patients Act, 2017*, (a.k.a, Bill 87). A Working Group, led by CPSO's Louise Verity, met during the year to share information and carefully consider consistency in approaches to implementation. Additional issues and unintended consequences of changes to policies and processes are being identified as implementation continues and additional regulations are proclaimed.

### **PUBLIC ENGAGEMENT PROJECT—WWW.ONTARIOHEALTHREGULATORS.CA**

To support the Public Engagement Project—and the new website, [www.ontariohealthregulators.ca](http://www.ontariohealthregulators.ca), that was launched last year—the Communications Committee produced a 90-second informational video. The video, posted to the website in the 10 languages in which the site is translated, shares the purpose of the site and what the public can find by going to Colleges' websites. This initiative is consistent with the duty Colleges have to promote and enhance relations between Colleges and the public.

## COMMUNICATIONS COMMITTEE

### **Key Highlights in Addition to [ontariohealthregulators.ca](http://www.ontariohealthregulators.ca):**

- Led by Committee Chair Monique Poirier of the College of Dietitians of Ontario, Committee members shared their expertise over the year, with Monique presenting to the Board of Directors at three of its five meetings to provide updates on the Public Engagement Project and the "Ontario Health Regulators" website and video.
- On November 19<sup>th</sup>, a Communicators' Day, organized by a Working Group with Chair Ryan Pestana of COKO, and hosted by Jill Hefley at CPSO, provided opportunities for College communications staff to interact and learn from others' experiences. A keynote presentation from the Ontario College of Teachers, "Communicating a complex piece of legislation to stakeholders", kicked off the day that also featured presentations on how to engage Colleges audiences as well as excellent roundtable sessions on challenges and promising practices.

### **Communications Committee Members:**

- Monique Poirier (College of Dietitians of Ontario), Chair
- Jill Hefley (CPSO), Past Chair
- Angie Brennand (CMTO)
- Lisa Gibson (CASLPO)
- Margaret Goulding (CMLTO)
- Shauna Grey (CRPO)
- Todd Leach (OCP)
- Ryan Pestana (COKO) (to March 29, 2018)
- Lisa Pretty (College of Physiotherapists of Ontario)
- Nancy Stevenson (COTO)

## PRESIDENT & EXECUTIVE COMMITTEE REPORT (CONT.)

### COLLEGE GOVERNANCE

Another priority for the Federation is the area of College governance, recognizing some anticipated changes will require legislative changes. The Board welcomed presentations from the College of Nurses of Ontario and the Advisory Group for Regulatory Excellence (see below) related to those organizations' work on governance. The past year was also a year that saw media attention on the issue and a report "Modernizing the Oversight of the Health Workforce in Ontario" by the McMaster Health Forum.

The Federation is planning a day for FHRCO members dedicated to discussions about Governance in October 2018.

### FHRCO INTERVENES IN IMPORTANT CASES

The Federation takes action when cases arise that relate to significant matters relevant to its members and to the Federation's purpose, and it would be in the public interest to intervene. Last year, FHRCO sought and received intervenor status in the case *Abdul v Ontario College of Pharmacists*. The case continues.

### OFFICE OF THE FAIRNESS COMMISSIONER OF ONTARIO (OFC)

Elinor Larney was appointed as FHRCO's member on the OFC's Stakeholder Engagement Committee. The Federation appreciates being part of the process.

**FHRCO:  
Fostering  
Healthy  
Regulatory  
Collaboration  
in  
Ontario**

### PRESENTERS TO FEDERATION BOARD OF DIRECTORS DURING 2017-2018 YEAR:

- Assistant Deputy Minister Denise Cole, Director Allison Henry, Manager Stephen Cheng, Acting Manager Thomas Custers, and Consultant Deanna Williams from the Ministry of Health and Long-Term Care
- Michelle Cyr and Thomas Hackard from Council of Ontario Universities re. "Creating Conversation for a Better Future: Ontario's Universities Strategic Engagement Campaign"
- Nye Thomas, Executive Director of the Law Commission of Ontario, re. report on "Legal Capacity, Decision-Making and Guardianship"
- Acting Manager Barb Guiao, Senior Information Management Policy Advisor Andrew Drummond, Senior Policy Advisor Murray Wilson, and IPolicy Analyst Mini George, re. potential amendments to *PHIPA*'s general regulation and policy directions for the electronic health record.
- Kevin McCarthy, College of Nurses of Ontario, with Anne Coghlan re. CNO's Vision 2020 and its "governance journey"
- Maureen Boon, Advisory Group for Regulatory Excellence (AGRE) Policy Working Group Chair, re. AGRE's work on College Governance
- Shenda Tanchak, for Citizen Advisory Group (CAG) Chair Lisa Pretty, re. CAG consultations

## DISCIPLINE ORIENTATION COMMITTEE

### Discipline Orientation Committee Members:

- Tina Langlois (CMRTO), Chair
- Aoife Coghlan (COTO)
- Genevieve Plummer (OCP)
- Ravi Prathivathi (CNO)
- Iris Samson (CASLPO)

The Discipline Orientation Committee continues to deliver quality education and training programs, providing comprehensive orientation for regulatory adjudicators. Basic training programs are available twice each year. Advanced sessions are held annually and are built on the knowledge and skills regulatory adjudicators acquired by attending the Basic session or participating in hearings. Again in 2017, both sessions were held at the Osgoode Professional Development Centre in Toronto.

**May 18, 2017 – Basic Program:** 34 registrants (13 Colleges represented)

**October 26 & 27, 2017 – Basic and Advanced Programs:** 33 Basic (12 Colleges) and 44 Advanced (10 Colleges)

Future Discipline Orientation Program Dates for 2018:

**Basic Sessions:** May 25 & November 1

**Advanced Session:** November 2

## EDUCATIONAL OPPORTUNITIES

Federation members’ Councils, Committees, and staff are provided with resources for their individual orientation, ongoing education, and training needs:

- Education for Health Professional Regulators of Ontario (EHPRO) - five modules with 22 video segments about all aspects of the RHPA
- Discipline Orientation Workshops (*see above for more information*)
- Investigations and Hearings Symposia (*see page five for more information*)
- Communications Conferences (*see page two for more information*)
- In development: Training for the Prevention of Sexual Abuse of Patients (*see next page for more information*)

## FHRCO MEMBER STAFF KEY AREA NETWORKS

Staff have access to Networks for key College areas of activity, including the following:

- Communications
- Corporate Services
- Executive Assistants
- Investigations and Hearings
- Policy
- Practice Advisors
- Quality Assurance
- Records Management
- Registration



## TRAINING FOR THE PREVENTION OF SEXUAL ABUSE OF PATIENTS WORKING GROUP

### Working Group Members:

- Mark Pioro, CRPO, Chair
- Barry Gang (College of Psychologists of Ontario), Chair through Summer 2017
- Carolyn Gora, CPSO
- Tina Langlois, CMLTO and CMRTO
- Melisse Willems, College of Dietitians of Ontario

This Working Group was charged with the task of identifying what material is available to Colleges for training related to patient sexual abuse. It was recognized that, while some resources exist, more could be done to help with education and training for College Councils, Committees, and Staff related to the prevention of and response to patient sexual abuse.

Production of educational videos, featuring subject matter experts with patient support and legal backgrounds, continues in following areas:

- The Dynamics of Abuse
- Legislation (as it relates to sexual abuse)
- Beliefs, Attitudes and Personal Responses to Sexual Abuse
- Setting Up Appropriate Intake and Investigation Processes (staff focus)
- Making Findings and Fashioning Appropriate Dispositions and Remedial Programs

Thanks is extended to Working Group members and subject matter experts who are supporting this important project.

## INVESTIGATIONS AND HEARINGS NETWORK

### Co-Chairs (2017)

- Genevieve Plummer (OCP)
- Meghan Clarke (OCP)

### Co-Chairs (2018)

- Shaf Rahman (CRTO)
- Bonita Thornton (College of Physiotherapists of Ontario)

The Investigations and Hearings Network provides Federation member staff with opportunities for regular meetings and online resources to share information and practice questions.

A Symposium was held on June 19<sup>th</sup> that offered presentations on College intake, investigations, prosecutions, hearings, and monitoring processes.

A second Symposium was held on December 15<sup>th</sup>, featuring Bonni Ellis and Gillian Hnatiw from Lerner LLP re. Patient Sexual Abuse

*Membership open to all Federation member staff involved in investigations and hearings*



## LEGISLATIVE AND POLICY ISSUES COMMITTEE

### List of Committee Members:

- Kevin Taylor (CRTO), Chair
- Brian O’Riordan (CASLPO), Past Chair
- Carol Bock (CASLPO)
- Barbara Cadotte (OCP)
- Joel Friedman (CCO)
- Rod Hamilton (College of Physiotherapists of Ontario)
- Brenda Kritzer (COKO)
- Tina Langlois (CMRTO)
- Timothy Mbugua (COTO)
- Kevin McCarthy (CNO)
- Marina Solakhyan (CMO)
- John Tzountzouris (CMLTO)
- Louise Verity (CPSO)

Recognizing the increasing rate of change in legislative and policy issues and that the duties of the Legislative and Policy Issues Committee had morphed into the work of the Executive Committee of the Board, the decision was made to disband this Committee. Instead, expertise will be called upon as needed.

A network for College staff members who work in the policy area has been established to allow for information-sharing amongst Colleges.

The Board of Directors are continued to be kept informed through monthly “Legislative Updates” by Federation legal counsel Richard Steinecke.

Sincere thanks are extended to those who have served on this Committee—past and present.

## NOMINATIONS COMMITTEE

The Nominations Committee facilitated the annual call for nominations for the Executive Committee and Officers positions as well as members of FHRCO Committees and Chairs. Elections and appointments take place during the Board Meeting that immediately follows the Annual Meeting each year. It bears repeating that the dedication of our volunteers and support from member Colleges is one of the greatest of FHRCO’s resources.

### List of Committee Members:

- Linda Gough (CMRTO), Chair
- Kathy Wilkie (CMLTO)
- Jo-Ann Willson (CCO)

## CONSENT AND CAPACITY WORKING GROUP

### List of Working Group Members:

- Melisse Willems (College of Dietitians of Ontario) (Chair)
- Alexandria Carling (CASLPO)
- Deborah Cohen (College of Dietitians of Ontario)
- Barry Gang (College of Psychologists of Ontario)
- Rod Hamilton (College of Physiotherapists of Ontario)
- Farah Ismail (CNO)
- Marnie Lofsky (CMTO)
- Andrea Lowes (CDHO)
- Kara Ronald (COTO)
- Lene Marttinen (CRPO)
- Mina Kavanagh (College of Optometrists of Ontario)

The Consent and Capacity Working Group was created to develop collaborative educational materials to ensure healthcare professionals fully understand their legal and professional obligations for obtaining consent in their practice settings. To support this work, a survey was created, designed to determine the feasibility of creating those materials. The Working Group will be analyzing survey results in the Spring of 2018 to determine next steps.

Additionally, in April 2018, Alex Carling, Deb Cohen, and Lene Marttinen presented general information on consent and capacity to St. Michael’s Hospital’s Interprofessional Practice Forum.



## TRANSITIONS

### FEDERATION MEMBERS:

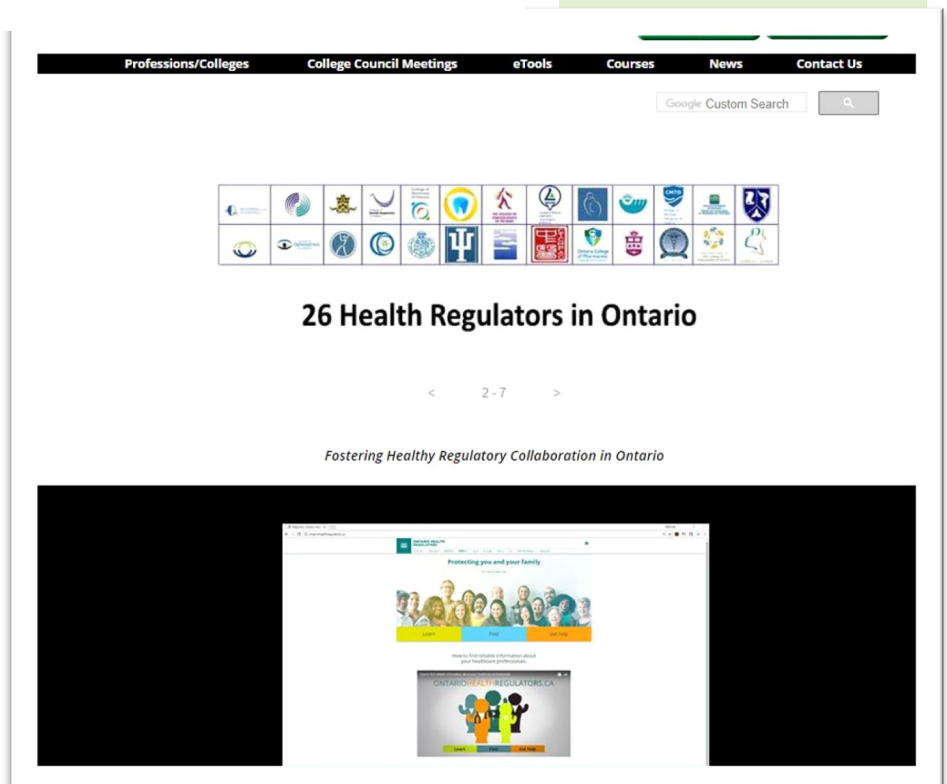
- **Dr. Rocco Gerace** retired as Registrar of the College of Physicians and Surgeons of Ontario on February 28, 2018. **Dan Faulkner** is serving as Interim Registrar until **Dr. Nancy Whitmore** assumes the role of Registrar/CEO on June 4, 2018.

### EXTERNAL STAKEHOLDERS:

- **Dr. Eric Hoskins** resigned as Minister of Health and Long-Term Care and **Dr. Helena Jaczek** was appointed as Minister on February 26, 2018.
- **Ministry of Health and Long-Term Care’s Health Workforce Planning and Regulatory Affairs Division (HWPRAD)** restructured in January 2018 to change the Health System Labour Relations and Regulatory Policy Branch to the Health Workforce Regulatory Oversight Branch, including these units:
  - Regulatory Oversight and Performance
  - Regulatory Design and Implementation
  - Strategic Regulatory Policy

## FHRCO ONLINE RESOURCES

- An Interprofessional Guide on the Use of Orders, Directives and Delegation for Regulated Health Professionals in Ontario
- Interprofessional Collaboration (IPC) eTool
- Listing of Positions Available at FHRCO Member Colleges
- Information on College Council Meeting Dates
- Link to Ontario Health Regulators website



## Federation of Health Regulatory Colleges of Ontario



### Members:

- College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO)
- College of Chiropractors of Ontario (COCOO)
- College of Chiropractors of Ontario (CCO)
- College of Dental Hygienists of Ontario (CDHO)
- College of Dental Technologists of Ontario (CDTO)
- College of Denturists of Ontario
- College of Dietitians of Ontario (CDO)
- College of Homeopaths of Ontario (CHO)
- College of Kinesiologists of Ontario (COKO)
- College of Massage Therapists of Ontario (CMTO)
- College of Medical Laboratory Technologists of Ontario (CMLTO)
- College of Medical Radiation Technologists of Ontario (CMRTO)
- College of Midwives of Ontario (CMO)
- College of Naturopaths of Ontario (CONO)
- College of Nurses of Ontario (CNO)
- College of Occupational Therapists of Ontario (COTO)
- College of Opticians of Ontario
- College of Optometrists of Ontario
- College of Physicians and Surgeons of Ontario (CPSO)
- College of Physiotherapists of Ontario
- College of Psychologists of Ontario
- College of Registered Psychotherapists Therapists of Ontario (CRPO)
- College of Respiratory Therapists of Ontario (CRTO)
- College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO)
- Ontario College of Pharmacists (OCP)
- Royal College of Dental Surgeons of Ontario (RCDSO)



Federation of  
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Regulatory  
Colleges of  
Ontario

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## List of Acronyms Used by the College of Optometrists of Ontario

Acronym	Name	Description
AAO	American Academy of Optometry	Organization whose goal is to maintain and enhance excellence in optometric practice
ACO	Alberta College of Optometrists	Regulates optometrists in Alberta
ACOE	Accreditation Council on Optometric Education	A division of AOA Accredits optometry schools in US and Canada Graduates of these schools may register in Ontario without additional education
ADR	Alternative Dispute Resolution	An alternate process that may be used, where appropriate, to resolve some complaints
AGRE	Advisory Group for Regulatory Excellence	A group of six colleges (medicine, dentistry, nursing, physiotherapy, pharmacy and optometry) that provides leadership in regulatory matters
AIT	Agreement on Internal Trade	Federal/Provincial/Territorial agreement intended to foster mobility of workers
AOA	American Optometric Association	Main professional association for optometrists in the US
ARBO	Association of Regulatory Boards of Optometry	Association of optometric regulators including, US, Canada, Australia and New Zealand
BV	Binocular Vision	The assessment of the relationship and coordination of the two eyes
CACO	Canadian Assessment of Competency in Optometry	Canadian entry-to-practice examination for optometry-administered by CEO-ECO to 2017
CAG	Citizen's Advisory Group	A forum for patients and health-care practitioners to discuss issues of mutual concern
CAO	Canadian Association of Optometrists	Represents the profession of optometry in Canada; its mission is to advance the quality, availability, and accessibility of eye and vision health care
CAOS	Canadian Association of Optometry Students	The Canadian optometry student association with chapters in both Waterloo and Montreal
CE	Continuing Education	Courses, programs, or organized learning experiences usually taken after a degree is obtained to enhance personal or professional goals
CEO-ECO	Canadian Examiners in Optometry	Former name of OEBC; administered the CACO exam on behalf of the provincial and territorial optometric regulators (see OEBC)
CJO	Canadian Journal of Optometry	Journal published by CAO whose mandate is to help optometrists build and manage a successful practice

## List of Acronyms Used by the College of Optometrists of Ontario

Acronym	Name	Description
CLEAR	Council on Licensure Evaluation and Regulation	International body of regulatory boards – mainly US and Canadian members
CMPA	Canadian Medical Protective Association	Professional liability insurer for physicians
CNAR	Canadian Network of Agencies for Regulation	
CNCA	<i>Canada Not-for-profit Corporation Corporations Act</i>	
CNIB	Canadian National Institute for the Blind	A voluntary, non-profit rehabilitation agency that provides services for people who are blind, visually impaired and deaf-blind
CNO	College of Nurses of Ontario	Regulates nurses in Ontario
COBC	College of Optometrists of British Columbia	Regulates optometrists in British Columbia
COEC	Canadian Optometric Evaluation Committee	Committee of FORAC that assesses the credentials of internationally educated optometrists who wish to practice in Canada
COI	Conflict of Interest	Situation in which someone in a position of trust has competing professional and personal interests
COO	College of Opticians of Ontario	A self-governing college that registers and regulates opticians in Ontario <b>Note:</b> the College of Optometrists of Ontario does not have an acronym
COPE	Council on Optometric Practitioner Education	Accredits continuing education on behalf of optometric regulatory boards
COS	Canadian Ophthalmological Society	Society whose mission is to assure the provision of optimal eye care to Canadians
CPD	Continuing Professional Development	A quality assurance program
CPP	Clinical Practice Panel	A panel of the Quality Assurance Committee that considers issues of clinical practice and updates the OPR
CPSO	College of Physicians and Surgeons of Ontario	A self-governing college as defined by the <i>Regulated Health Professions Act</i>
CRA	Complete Record Assessment	A component of the College's practice assessment process of the Quality Assurance program
DAC	Diabetes Action Canada	
DFE	Dilated Fundus Examination	Eye health exam conducted after dilating pupils with drops

## List of Acronyms Used by the College of Optometrists of Ontario

Acronym	Name	Description
DPA	Diagnostic Pharmaceutical Agents	Drugs used by optometrists in practice to evaluate systems of the eye and vision
EEOC	Evaluating Exam Oversight Committee	Committee that oversees the Internationally Graduated Optometrists Evaluating Exam (IGOEE) administered by Touchstone Institute
EHCO	Eye Health Council of Ontario	A group made up of optometrists and ophthalmologists who collaborate on issues of mutual interest
ÉOUM	École d'optométrie-Université de Montréal	School of optometry at the University of Montreal-teaches optometry in French Accredited by ACOE
EPSO	Eye Physicians and Surgeons of Ontario	OMA Section of Ophthalmology
ETP	Entry-to-Practice	Describes the level of competency necessary for registration to practise the profession
FAAO	Fellow of the American Academy of Optometry	Designation issued by AAO following evaluation against standards of professional competence
FHRCO	Federation of Health Regulatory Colleges of Ontario	Comprises of the 26 health regulatory colleges in Ontario
FORAC-FAROC	Federation of Optometric Regulatory Authorities of Canada	Comprised of 10 national optometric regulators Formerly knowns as CORA
HPARB	Health Professions Appeal and Review Board	Tribunal whose main responsibility is to review decisions made by College ICRC or registration committees when an appeal is made by either the complainant or member, or applicant in the case of a registration appeal
HPPC	Health Professions Procedural Code	Schedule 2 to the <i>Regulated Health Professions Act, 1991</i>
HPRAC	Health Professions Regulatory Advisory Council	Provides independent policy advice to the Minister of Health and Long-Term Care on matters related to the regulation of health professions in Ontario
HSARB	Health Services Appeal and Review Board	Created by the <i>Ministry of Health Appeal and Review Boards Act, 1998</i> , decisions of the ORC are heard here
HSPTA	<i>The Health Sector Payment Transparency Act, 2017</i>	An Act that requires industry to disclose transfers of value to health care professionals
ICRC	Inquiries Complaints and Reports Committee	The ICRC is the statutory committee responsible for the investigation and disposition of reports and complaints filed with the College about the conduct of an optometrist

## List of Acronyms Used by the College of Optometrists of Ontario

Acronym	Name	Description
IOBP	International Optometric Bridging Program	A program to assist international graduates in meeting the academic equivalency requirement for registration and housed at the University of Waterloo
IGOEE	Internationally Graduated Optometrist Evaluating Exam	Developed and administered by Touchstone Institute on behalf of FORAC
IOG	International Optometry Graduates	Optometry graduates who have received their education outside North America
MOHLTC (or MOH)	Ministry of Health and Long-Term Care	Responsible for administering the health care system and providing services to the Ontario public
MOU	Memorandum of Understanding	
NBAO	New Brunswick Association and College of Optometrists	New Brunswick Association and College of Optometrists
NBEO	National Board of Examiners in Optometry	Entry to practice examination for all US states Also accepted in BC and QC
NCP	National Competency Profile	Articulates the requirements established by the profession upon which the blueprint for the OEBC exam is based
NLCO	Newfoundland and Labrador College of Optometrists	Regulates optometrists in Newfoundland and Labrador
NSCO	Nova Scotia College of Optometrists	Regulates optometrists in Nova Scotia
OAO	Ontario Association of Optometrists	The association that looks after the interests of optometrists in Ontario
OCP	Ontario College of Pharmacists	Regulates pharmacists, pharmacies and pharmacy technicians in Ontario
OD	Doctor of Optometry Degree	Optometrists' professional degree in North America
ODSP	Ontario Disability Support Program	Offers financial assistance to Ontarians with disabilities who qualify
OEBC-BEOC	Optometry Examining Board of Canada	Administers the national standards assessment exam on behalf of the provincial and territorial optometric regulators
OFC	Office of the Fairness Commissioner of Ontario	The OFC ensures that certain regulated professions in Ontario have registration practices that are transparent, objective, impartial and fair
OLF	Optometric Leaders' Forum	Annual meeting of CAO, provincial associations and regulators
OMA	Ontario Medical Association	The association that looks after the interests of medical practitioners

## List of Acronyms Used by the College of Optometrists of Ontario

Acronym	Name	Description
OOQ	Ordre des optométristes du Québec	Regulates optometrists in Quebec
OPR	Optometric Practice Reference	A College document provided to members and available to the public providing principles of Standards of Practice and Clinical Guidelines in two separate documents
OSCE	Objective Structured Clinical Examination	An objective clinical exam; part of the OEBC exam
PEICO	PEI College of Optometrists	The optometric regulatory college in Prince Edward Island
PHIPA	<i>Personal Health Information Protection Act</i>	Provincial act that keeps personal health information of patients private, confidential and secure by imposing rules relating to its collection, use and disclosure
PLA	Prior learning assessment	Formerly part of the IOBP to ascertain the candidate's current knowledge in optometry; replaced by IOGEE in 2015
PRC	Patient Relations Committee	Promotes awareness among members and the public of expectations placed upon optometrists regarding sexual abuse of patients; also deals with issues of a broader nature relating to members' interactions with patients
QA (QAC)	Quality Assurance Committee	A statutory committee charged with the role of proactively improving the quality of care by regulated health professionals
RCDSO	Royal College of Dental Surgeons	Regulates dentists in Ontario
RHPA	<i>Regulated Health Professions Act</i>	An act administered by the Minister of Health, ensuring that professions are regulated and coordinated in the public interest by developing and maintaining appropriate standards of practice
SAO	Saskatchewan Association of Optometrists	Also functions as the regulatory College in Saskatchewan
SCERP	Specified Continuing Educational or Remediation Program	A direction to an optometrist by the ICRC to complete remediation following a complaint or report
SRA	Short Record Assessment	A component of the College's practice assessment process of the Quality Assurance program
SOP	Standards of Practice	Defined by the profession based on peer review, evidence, scientific knowledge, social expectations, expert opinion and court decision
TPA	Therapeutic Pharmaceutical Agent	Drug Generally this term is used when describing drugs that may be prescribed by optometrists for the treatment of conditions of the eye and vision system

## List of Acronyms Used by the College of Optometrists of Ontario

Acronym	Name	Description
VIC	Vision Institute of Canada	A non-profit institute functioning as a secondary referral center for optometric services located in Toronto
VCC	Vision Council of Canada	A non-profit association representing the retail optical industry in Canada, with members operating in all Canadian provinces and US states
WCO	World Council of Optometry	International advocacy organization for world optometry – assists optometrists in becoming regulated where they are not
WOVS	University of Waterloo School of Optometry and Vision Science	The only school of optometry in Canada that provides education in English Accredited by ACOE; graduates are granted an OD degree; also has Masters and PhD programs

Updated June 2018