



COLLEGE OF
Optometrists
OF ONTARIO

COUNCIL MEETING

**MONDAY JUNE 24, 2019
AT 9:00 A.M.**

(PUBLIC INVITED TO ATTEND)

**UNIVERSITY OF WATERLOO
SCHOOL OF OPTOMETRY AND VISION SCIENCE
WATERLOO, ON**



Agenda Item	Page No.	Action Required	Item Lead	Approx. Time (mins.)
1. Call to Order/Attendance	5		Hemami, P.	1
2. Introduction of Incoming Registrar	5	Decision	Hemami, P.	2
3. Adopt the Agenda	5	Decision	Hemami, P.	1
a. Conflict of Interest Declaration				
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PART 1 - Minutes of Prior Council Meetings				
a. April 24, 2019	7	Decision	Hemami, P.	5
b. June 3, 2019	15	Decision	Hemami, P.	2
c. Motions and Actions Items Arising from the Minutes	18			
PART 2 - Reports				
a. Committee Reports		Receive for Information/ Decision	Hemami, P.	15
i. Executive Committee	21			
ii. Patient Relations	22			
iii. Quality Assurance:				
A. QA Panel	23			
B. CP Panel	24			
C. QA Subcommittee	25			
iv. ICRC	26			
v. Registration	29			
vi. Fitness to Practise	38			
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viii. Governance/HR Committee	45			
ix. Audit/Finance/Risk Committee	49			
x. Strategic Planning Committee	50			
b. Registrar's Report	51			
PART 3 – Correspondence				
a. Office of the Fairness Commissioner	64			
b. Toronto Public Health	66			
5. Motions Brought Forward from Committees	68			
a. Registration Committee	69	Decision	Quaid, P.	10
b. Patient Relations Committee	73	Decision	Nicol, C./Chesney, M.	10
c. Governance HR Committee	75	Decision	Van Bastelaar, J.	5
d. Audit/Finance/Risk Committee	153	Decision	Quaid, P.	5
e. Quality Assurance Committee				
i. Clinical Practice Panel	162	Decision	Chisholm, B.	5

6. Financial Matters	169	Receive for Information	Quaid, P.	10
a. Treasurer’s Report	170			
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7. FORAC Cultural Competency Working Group – Consultations	174	Presentation	Garshowitz, P.	20
8. Harry Cayton Report	174	Discussion	Garshowitz, P.	15
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10. Legislative Updates			Garshowitz, P.	10
i. Designated Drugs and Standards of Practice Regulation	180	Discussion		
11. Draft Annual Report 2018	183	Receive for Information	Garshowitz, P.	10
12. List of Acronyms	207			
13. Dates of Upcoming Council Meetings				
a. Friday September 27, 2019				
b. Friday January 17, 2020				
c. Monday April 20, 2020				
d. Thursday June 25, 2020				
14. Adjournment		Decision		

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

1 -3 / INTRODUCTION

1. Call to Order/Attendance
2. Introduction of Incoming Registrar
3. Adopt the Agenda
 - a. Conflict of Interest Declaration

4 / CONSENT AGENDA

4. Consent Agenda

PART 1 - Minutes of Prior Council Meetings

- a. April 24, 2019
- b. June 3, 2019
- c. Motions and Actions Items Arising from the Minutes

PART 2 - Reports

a. Committee Reports

- i. Executive Committee
- ii. Patient Relations
- iii. Quality Assurance:
 - A. QA Panel
 - B. CP Panel
 - C. QA Subcommittee
- iv. ICRC
- v. Registration
- vi. Fitness to Practise
- vii. Discipline
- viii. Governance/HR Committee
- ix. Audit/Finance/Risk Committee
- x. Strategic Planning Committee

b. Registrar's Report

PART 3 – Correspondence

- a. Office of the Fairness Commissioner
- b. Toronto Public Health
- c. Letter from Minister of Health



College of Optometrists of Ontario
Council Meeting
April 24, 2019
DRAFT #1

April 24, 2019

Attendance:

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

Dr. Annine Micucci
Dr. Kamy Morcos
Ms. Luisa Morrone
Dr. Christopher Nicol
Dr. Areef Nurani
Ms. Ellen Pekilis
Mr. Narendra Shah
Mr. John Van Bastelaar

Regrets:

Staff:

Dr. Paula Garshowitz, Registrar
Ms. Hanan Jibry
Ms. Mina Kavanagh
Ms. Amber Lepage-Monette

Mr. Nektarios Kikonyogo
Mr. Justin Rafton
Mr. Sean Knight

1 **1. Call to Order:** Dr. Hemami called the meeting to order at 9:02 a.m. Dr. Hemami welcomed everyone
2 in attendance, including guests, to the meeting and introduced new public members, Mr. Howard
3 Kennedy and Mr. Narendra Shah to the Council. All present were reminded that recording of the
4 meeting is not allowed.

5
6 **2. Adoption of the Agenda:** A draft agenda was circulated prior to the meeting.

7
8 Dr. Hemami added one item (committee additions) to the agenda.

9
10 Moved by Dr. Morcos and seconded by Dr. Quaid **to approve the agenda.**

11
12 **Motion carried**

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

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18 **3. Adoption of the Consent Agenda:** A draft consent agenda was circulated prior to the meeting. After
19 having confirmed that all councilors had read the consent agenda materials. The following items were
20 included in the consent agenda:

- 21
22 PART 1 - Minutes of Prior Council Meetings
23 a. January 18, 2019
24 b. Motions and Actions Items Arising from the Minutes

- 25 PART 2 - Reports
26 a. Committee Reports
27 i. Executive Committee
28 ii. Patient Relations
29 iii. Quality Assurance:
30 A. QA Panel
31 B. CP Panel
32 C. QA Subcommittee
33 iv. ICRC
34 v. Registration
35 vi. Fitness to Practise
36 vii. Discipline
37 viii. Governance/HR Committee
38 ix. Audit/Finance/Risk Committee
39 x. Strategic Planning Committee
40 b. Registrar's Report

41
42 A councilor requested that the ICRC report be removed from the consent agenda.

43
44 Moved by Dr. Kniaziew and seconded by Mr. Van Bastelaar **to adopt the consent agenda.**
45 **Motion carried**

46 **Item removed from the consent agenda**

47 **ICRC report** – Dr. Nurani noted the report format has changed: the report no longer includes
48 items with no further action and reflects cases that have resulted in action directed by the
49 Panel. The process has also been streamlined so that the Panel only reviews the complaint in its
50 entirety. That is, a summary of a complaint is no longer drafted by staff, which removes any
51 perception of bias and saves both staff and the Chair time.

52
53 Council discussed the 150-day timeline required by the HPPC to bring a complaint to a
54 resolution: whether other colleges meet this timeline; and the process required if the timeline is
55 not met. Dr. Nurani requested staff provide a breakdown of larger cases that take more
56 substantial time to better clarify the number of cases that require 150+ days.

57
58
59 Moved by Dr. Kniaziew and seconded by Dr. Quaid **to study timelines for processing and resolving**
60 **complaints within the College and other Ontario colleges of similar demographics.**

61
62 **Motion carried**

63
64 **New Item: Committee Additions**

65

66 Dr. Hemami requests that new public appointee Mr. Shah be appointed to the Discipline Committee.

67
68 Moved by Dr. Kniaziew and seconded by Dr. Quaid second **to appoint Mr. Shah to the Discipline**
69 **Committee.**

70 **Motion carried**

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74 **4. Financial Matters**

75 **a. Treasurer's Report:**

76 Dr. Quaid presented the report. The College recorded a year-to-date surplus of \$221K as of February
77 2019. This surplus represents a positive variance to budget of \$277K (per dashboard). Reserves can
78 cover 20 months of expenses.

79

80 **b. Financial Dashboard:**

81 Dashboard summary updated to include February 28, 2019 financial information.

82

83 **c. Balance Sheet and Income and Expenditure Report to February 28, 2019:**

84 Overall surplus in the Expense section is caused by under spending/no spending to date in some budget
85 areas.

86 Council reviewed the legal expense line items and discussed pros and cons of a proposal to have a
87 lawyer on staff. It is agreed legal cases differ and different lawyers are required for different needs. Dr.
88 Hemami confirms a policy is being developed to clarify issue of second legal opinion, to be circulated to
89 Council soon.

90 Council was asked to consider a motion to approve the auditors for 2019.

91

92 Moved by Dr. Quaid and seconded by Dr. Chisholm **to approve Tapp and Co. as auditors for 2019.**

93 **Motion carried**

94

95 Council was asked to consider a motion to move additional funds of \$250,000 from the unappropriated
96 surplus fund to the Building Acquisition Fund. The fund currently sits at \$2,000,000.

97

98 Moved by Dr. Quaid and seconded by Dr. Kniaziew **to approve moving additional \$250000 out of**
99 **reserve and into the Building Acquisition Fund.**

100 **Motion carried**

101

102 Council discussed the issue of leasing vs buying property and clarified the need to build reserve in case
103 decision is made to purchase a building at the conclusion of the current lease.

104

105

106

107 **5. Injunction Appeal Update - IN CAMERA SESSION:** In accordance with Section 7. (1.1) of the *Health*
108 *Professions Procedural Code* (HPPC), Council will go in camera under section 7. (2)(e) of the HPPC, which
109 is to give instructions to, or receive opinions from, the solicitors of the College.

110

111 Moved by Dr. Kniaziew and seconded by Dr. Chisholm **to have the meeting go in camera.**
112 **Motion carried**

113
114 *Guests left the meeting.*

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148 Moved by Dr. Kniaziew and seconded by Dr. Marcos **to have the meeting go out of camera.**
149 **Motion carried**

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151 *Guests returned to meeting.*

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153 **6. Recognition of Volunteers**

154 Dr. Hemami presented certificates to past public member Mr. Rivait and public member Ms. Morrone,
155 thanking them for their service. Mr. Rivait's appointment ended in February 2019 and Ms. Morrone's
156 will end in June 2019. Dr. Patricia Hrynchak, who resigned from Council in April, was recognized for her
157 service with a certificate.

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7. Celebrating 100 Years of Regulation

Dr. Garshowitz presented a 100-year timeline of highlights of regulatory history to recognize the passing of the first Optometry Act in Ontario on April 24, 1919. The timeline will be available on the College’s website.

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

7. 2018 Draft Audited Financial Statements - Presentation from the Auditors

Ms. Jurina Cleary and Mr. Lee presented an overview of the 2018 draft audited financial statements and highlighted how the statements have been revised for added clarity.

Auditors noted the prudent nature of adding to the building acquisition fund – which Council passed earlier in the morning.

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

Moved by Dr. Quaid and seconded by Dr. Kniaziew seconded **to approve audited statements.**

Motion carries.

8. Motions Brought Forward from Committees:

8.1 Executive Committee: The proposed motions were circulated prior to the meeting. Regulated health professionals in Ontario must report to their college certain information that is pertinent to the conditions of their registration. The Committee proposed that Council adopt a policy that “ticketable” offences not be included in the category of information related to charges that optometrists have to self-report to the College, under section 85.6.4 of the *Health Procedural Code*, which is Schedule 2 of the *Regulated Health Professions Act, 1991*.

Council sought clarity on whether members are currently reporting, what wording other colleges use, and the nature of offences that fall under Part I and Part II of the *Provincial Offences Act, 1990*.

Moved by Dr. Quaid and seconded by Dr. Morcos **to adopt a policy that “ticketable” offences not be included in the category of information relating to charges that optometrists have to self-report to the College.**

Motion carries.

Council discussed making its annual contribution to maintain its FORAC membership.

Moved by Mr. Van Bastellar and seconded by P. Quaid **to approve payment of the College’s 2019 FORAC membership contribution.**

205
206 **Motion carries.**

207
208

209 **8.2 Quality Assurance**

210 **8.2.1 Clinical Practice Panel:** The proposed motion was circulated prior to the meeting.

211

212 The Clinical Practice Panel has decided to review each section of the OPR every three years.

213

214 Council discussed revisions to OPR 6.6 Low Vision Assessment and Therapy. Amendments improve
215 readability and clarity. A faculty member of the University of Waterloo School of Optometry and Vision
216 Science assisted in this review.

217

218 Moved by Dr. Chisholm and seconded by Dr. Micucci **to approve amendments to OPR 6.6.**

219

220 **Motion carries.**

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222

223 **8.3 Registration Committee:** Motions were circulated prior to the meeting.

224

225 Moved by Dr. Quaid and seconded by Dr. Kniaziew **to approve the College jurisprudence exam for**
226 **2019.**

227

228 **Motion carries.**

229

230 Moved by Dr. Quaid and seconded by Dr. Kniaziew **to approve the 2019 Optometric Examining Board of**
231 **Canada written exam and OSCE as an alternate standards assessment examination set or approved by**
232 **the College for registration purposes.**

233 **Motion carries.**

234

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236 **9. FORAC Cultural Competency Working Group:**

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238 Background on the draft document on cultural safety and humility was provided, which was presented
239 to FORAC in January 2018. Idea is to get each province to review and support before FORAC meeting in
240 July.

241

242 Participants attending the 2018 Optometric Leaders Forum meeting saw a presentation on truth and
243 reconciliation and how cultural safety differs from cultural sensitivity, particularly in a health care
244 context.

245

246

247 The need for outreach with Ontario Indigenous stakeholders prior to signing to ensure the document
248 reflects what is important to them was raised.

249

250 Dr. Hemami asked for audience feedback from Paul Chris, Executive Director of FORAC.

251

252 Dr. Chris explained the current document in question is based on a document that was created in
253 partnership with Indigenous stakeholders in British Columbia which was signed by all health care
254 regulators in BC. The document is intended to serve as a commitment to work with First Nations
255 communities.

256
257 Council requested that consultation with First Nations communities take place and Council review this
258 request at June Council meeting.

259
260 **Action item:** Staff will consult with First Nations stakeholders prior to June Council meeting.
261

262 **10. Governance Reform – Proposed Legislative Changes:**

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264
265 Council reviewed submissions from College of Nurses of Ontario (CNO) to the Minister of Health and
266 Long-Term Care. Overall, Council supported the proposed legislative changes CNO was recommending,
267 but discussed issues of election vs appointment; public member compensation by the College; and the
268 flow chart discussing College roles.

269
270 Council specifically wanted to ensure that it is clear public roles are independent from the College and
271 discussed whether appointments of professional members would limit new members from joining
272 Council.

273
274
275 **Action item:** Staff to revise College response, specifically in relation to issues of election and
276 compensation of public members, as well as the flow chart and circulate to Council for approval.
277

278 **11. Registrar Search Process Update**

279
280 Governance Committee Chair, Mr. Van Bastelaar provided Council with an update on the hiring process
281 for the role of Registrar. Hiring Committee has been working closely with consultant and process moving
282 forward.

283 284 **12. Complaints/Reports Review**

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287 Council reviewed recommendations made by Signal Consulting with respect to a review of complaints
288 considered by the College over a 10-year period.

289
290 **Action item:** Council to develop a work plan to implement recommendations.
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292 293 **12. List of Acronyms**

294 **13. Dates of Upcoming Council Meetings**

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297 a. Monday, June 24 and Tuesday, June 25, 2019 to be held in Waterloo ON
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14. Proposed Dates for Council Meetings (2019-2020)

- Friday September 27, 2019
- Friday January 17, 2020
- Monday April 20, 2020
- Thursday June 25, 2020

Dates carried.

13. Adjournment: Moved by Dr. Kniaziew and seconded by Dr. Chisholm **to adjourn the meeting at 3:05 p.m.**

Motion carried



College of Optometrists of Ontario
Council Meeting
June 3, 2019 - Teleconference
DRAFT

June 3, 2019

Attendance:

Dr. Pooya Hemami, President
Dr. Richard Kniaziew, Vice President
Dr. Patrick Quaid, Treasurer
Dr. Linda Chan
Ms. Maureen Chesney
Dr. Bill Chisholm
Mr. Bashar Kassir

Mr. Hsien Ping (Albert) Liang
Dr. Annie Micucci
Dr. Christopher Nicol
Dr. Areef Nurani
Ms. Ellen Pekilis
Mr. Narendra Shah
Mr. John Van Bastelaar

Regrets:

Dr. Lisa Christian
Mr. Howard Kennedy

Dr. Kamy Morcos
Ms. Luisa Morrone

Staff:

Mr. Justin Rafton

1 **1. Call to Order:** Dr. Hemami called the meeting to order at 12:07 p.m. Dr. Hemami welcomed everyone
2 in attendance, including guests, to the meeting. Mr. Rafton performed a roll call; all Council members
3 were present except Dr. Lisa Christian, Mr. Howard Kennedy, Dr. Kamy Morcos and Ms. Luisa Morrone.
4

5 **2. Adoption of the Agenda:** A draft agenda was circulated prior to the meeting. One item was added to
6 the agenda: 4. Designated Drugs and Standards of Practice Regulation.
7

8 Moved by Dr. Micucci and seconded by Mr. Van Bastelaar **to adopt the agenda as amended.**

9 **Motion carried**

10

11 **a. Conflicts of Interest:** Dr. Hemami asked Council members if anyone had a conflict of interest with any
12 item on the meeting's agenda. No conflict of interest was declared.
13

14 **IN CAMERA SESSION:** In accordance with Section 7(1.1) of the *Health Professions Procedural Code*
15 (*HPPC*), Council will go in camera under Section 7(2)(b) and (d) of the *HPPC*, whereby financial, personal
16 or other matters may be disclosed of such a nature that the harm created by the disclosure would
17 outweigh the desirability of adhering to the principle that meetings be open to the public and personnel
18 matters or property acquisitions will be discussed.
19

20 Moved by Dr. Micucci and seconded by Mr. Van Bastelaar **to have the meeting go in camera.**

21 **Motion carried**

22 *Guests left the meeting*

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Moved by Dr. Kniaziew and seconded by Dr. Chan **to have the meeting go out of camera.**

Motion carried

Guests returned to the meeting.

5. Dates of Upcoming Council Meetings (2019 - 2020)

- a. Monday, June 24 and Tuesday, June 25, 2019
- b. Friday September 27, 2019
- c. Friday January 17, 2020
- d. Monday April 20, 2020
- e. Thursday June 25, 2020

6. Adjournment: Moved by Dr. Chan and seconded by Dr. Micucci **to adjourn the meeting at 12:41 p.m.**

Motion carried

Council Meeting – April 24, 2019

COUNCIL ACTION LIST STATUS

Updated June 5, 2019

Date	Minute Line	Action	Status	Comments
04/24/19	261	Staff will consult with First Nations stakeholders prior to June Council meeting.	In progress	Regarding FORAC cultural competency working group. Feedback has been sought and compiled for upcoming Council meeting.
04/24/19	276	Staff to revise College response, specifically in relation to issues of election and compensation of public members, as well as the flow chart and circulate to Council for approval.	Completed	A draft response was circulated to Council and finalized based on feedback.
04/24/19	291	Council to develop a work plan to implement recommendations.	In progress	Regarding complaints/reports review. Staff are developing a plan and will present the plan at an upcoming Council meeting.

Council Meeting – April 24, 2019

MOTION LIST

Minute Line	Motion	Committee	Decision
59	Moved by Dr. Kniaziew and seconded by Dr. Quaid to study timelines for processing and resolving complaints within the College and other Ontario colleges of similar demographics.	Vice President	Motion carried
68	Moved by Dr. Kniaziew and seconded by Dr. Quaid to appoint Mr. Shah to the Discipline Committee.	Discipline Committee	Motion carried
92	Moved by Dr. Quaid and seconded by Dr. Chisholm to approve Tapp and Co. as auditors for 2019.	Treasurer	Motion carried
98	Moved by Dr. Quaid and seconded by Dr. Kniaziew to approve moving additional \$250000 out of reserve and into the Building Acquisition Fund.	Treasurer	Motion carried
111	Moved by Dr. Kniaziew and seconded by Dr. Chisholm to have the meeting go in camera.	Vice President	Motion carried
148	Moved by Dr. Kniaziew and seconded by Dr. Marcos to have the meeting go out of camera.	Vice President	Motion carried
178	Moved by Dr. Quaid and seconded by Dr. Kniaziew to approve audited statements.	Treasurer	Motion carried
195	Moved by Dr. Quaid and seconded by Dr. Morcos to adopt a policy that “ticketable” offences not be included in the category of information relating to charges that optometrists have to self-report to the College.	Executive Committee	Motion carried
204	Moved by Mr. Van Bastellar and seconded by P. Quaid to approve payment of the College’s 2019 FORAC membership contribution.	Executive Committee	Motion carried
219	Moved by Dr. Chisholm and seconded by Dr. Micucci to approved amendments to OPR 6.6.	Clinical Practice Panel	Motion carried

226	Moved by Dr. Quaid and seconded by Dr. Kniaziew to approve the College jurisprudence exam for 2019.	Registration Committee	Motion carried
231	Moved by Dr. Quaid and seconded by Dr. Kniaziew to approve the 2019 Optometric Examining Board of Canada written exam and OSCE as an alternate standards assessment examination set or approved by the College for registration purposes.	Registration Committee	Motion carried

Executive Committee Report

Reporting date:	June 12, 2019
Number of meetings in 2019:	7 teleconferences
Number of meetings since last Council meeting:	3 teleconferences

The Executive Committee met via teleconference on May 2, May 22 & June 11, 2019.

Special Meeting – June 3: The Committee called a special in-camera meeting of Council on June 3.

Optometrist Requirements to Disclose Offences

The Committee consulted with both FHRCO and legal counsel regarding mandatory self-reporting obligations, specifically relating to the reporting of charges by members under Section 85.6.4 of the *HPPC*. The Committee discussed whether reported “ticketable” offences (any offence prosecuted under Parts I or II of the *Provincial Offences Act, 1990*) were relevant to suitability to practice, as well as the ramifications of either reporting or failing to report such a charge. Council passed a motion at the June meeting that the College take a position that optometrists are not required to report “ticketable” offences.

A communication to all members regarding their mandatory self-reporting obligation was sent out on May 21, 2019. An online form to facilitate self-reporting can be accessed via the Member Login on the College website. More information can be found in the [FAQ document](#) that accompanied the communication.

By-Election for District 6 (Academic)

Following the resignation of Dr. Patricia Hrynchak from Council and in accordance with Section 6.11 of the College by-laws, a by-election was held for District 6 (Academic). Dr. Lisa Christian was acclaimed to the role and joins Council as the new academic member effective immediately. Her term will run until January 2022.

Committee Appointment

Ms. Luisa Morrone’s term as a Publicly Appointed Member of Council finished on June 11, 2019. In order to ensure that the committee remained constituted and based on the recommendation of the Governance/HR Committee, the Committee appointed Mr. Narendra Shah to the Inquiries, Complaints and Reports Committee.

June 24 Council Meeting

The Committee reviewed the agenda and briefing materials for the upcoming Council meeting and were informed of motions being brought forward for the meeting.

Respectfully submitted:

Pooya Hemami, OD
President

Patient Relations Committee Report

Reporting date:	May 30, 2019
Number of meetings in 2019:	1
Number of meetings since last Council meeting:	1 in-person meeting May 8, 2019

Development of E-Learning Module

Mr. Rafton has been working alongside the College's e-Learning developer to create the module *Eye Consent – the Optometrist's Guide to Informed Consent*. The Committee thoroughly reviewed the Alpha version, alongside the module storyboard. A Beta version, which will include narration, will now be developed. The Committee will be provided with a final version of the module before it goes live on the College's online member platform. The module will also be shown to the Quality Assurance Panel prior to its release to members, as the Panel oversees the continuing education component of the QA Program.

The Committee discussed offering this e-Learning module at no costs to members as an incentive for greater member participation. A motion to this effect has been presented for Council's consideration.

Staff/Committee Training – Sexual Abuse Prevention

One of the ways in which the Patient Relations Program prevents and deals with sexual abuse of patients is to ensure staff are trained to support and facilitate communication with victims of sexual abuse. The Committee has agreed that an updated training session be organised for the fall, coinciding with the Committee's next meeting.

Funding for Therapy and Counselling Program

As outlined under legislation, the Committee continues to process applications for funding submitted for review by patients alleging sexual abuse and to monitor the College's funding program. The Committee discussed the overall funding program structure and were updated on the current status of ongoing applications.

Proposed Motion to Council (including rationale and impact on budget if appropriate):

The Patient Relations Committee recommends to Council that the College offer the e-Learning Module titled "Eye Consent" to all members of the College at no cost, as an incentive to participate.

Respectfully submitted:

Christopher Nicol, OD and Maureen Chesney
Committee Co-Chairs

Quality Assurance Committee – QA Panel Activity Report

Reporting date: June 10, 2019

Number of meetings in 2019: 2

Number of meetings since last Council meeting: 1

Nature of items discussed/number of cases considered:

The following items were discussed by the QA Panel since the last Council meeting:

1. Dr. Christopher Nicol made a presentation on the Patient Relation Committee’s new “Eye Consent” e-Learning module, following which the panel discussed how such modules could be offered in the future, as well as the CE credit process within the College’s continuing education requirements.
2. The panel recommended that the Registration Committee consider amending the Registration Regulation to add practice hours completed in the United States as part of direct patient care hours required by section 7(1)(a) of the Regulation.
3. The panel discussed adding newly registered members to the pool of members randomly selected to undergo a practice assessment through the College’s Quality Assurance Program. A proposal is expected to be brought to Council for consideration at the September meeting.
4. The Panel has also reviewed the following cases:

Outstanding Cases

- CRA and Case Manager Reports – 7 members
- CE Deficiency Practice Assessments – 1 member
- Randomly Selected Practice Assessments – 1 member
- Remediation/Coaching Follow-up – 2 members
- Requests from Members for Consideration – 1 member

New Cases Before the Panel

- Randomly Selected Practice Assessments – 20 members

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:

Dr. Linda Chan

Chair, Quality Assurance Panel

Quality Assurance Committee – Clinical Practice Panel Activity Report

Reporting date:	June 7, 2019
Number of meetings in 2019:	2 (+1 teleconference)
Number of meetings since last Council meeting:	1 in-person 1 teleconference

Nature of items discussed/number of cases considered:

Standards of Practice under the Optometric Practice Reference: Chapters 5.1, 6.4, 7.9, 7.11, 7.12

Policy: *Practice Locations - Reporting Requirements Policy (under development): Closing an Optometric Practice*

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

Motions to accept revisions to OPR 7.11 and Practice Locations - Reporting Requirements are included.

Respectfully submitted:

Bill Chisholm, OD

Committee Chair

Quality Assurance Subcommittee Activity Report

Reporting date: June 6, 2019

Number of meetings in 2020: 2

Number of meetings since last Council meeting: 1

Nature of items discussed/number of cases considered:

The Quality Assurance Subcommittee met on May 27, 2019 to review recommendations and findings to determine additional resources required and the best order for implementing changes to the Quality Assurance Program. Items reviewed included the Findings Report and Best Practices Research prepared by the consultants; recommendations made by the Quality Assurance Panel; and the Complaints Review Analysis conducted in 2018.

Meetings are scheduled in July and September to develop recommendations for carrying out the work plan, which will be introduced at the September Council meeting.

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:

Ellen Pekilis

Committee Chair

Inquires, Complaints and Reports Committee (ICRC) Activity Report

(ICRC sits as two independent Panels)

Reporting date:	June 5, 2019
Number of meetings in 2019:	5 in-person panel meetings (including June 10) 1 in-person ICRC meeting (both panels) 3 teleconference meetings
Number of meetings since last Council meeting:	2 in-person meetings (including June 10) 3 teleconference meetings

- This report is intended to provide the Council with as much information as possible on the matters received and reviewed by the ICRC since the last reporting day to Council (April 8, 2019), without compromising the confidentiality and the fairness owed to complainants and members of the College involved in the process.
- This respect for confidentiality 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 cannot share any details about the specific cases.

Number of Cases: cases reviewed by panels and newly filed since April 8, 2019. Some cases involve multiple allegations.

Type of Case			Number
Complaints	Newly filed	14	29
	Reviewed and decided by Panels	1	
	Reviewed and carried over	14	
Registrar’s Reports	Reviewed and decided by Panels	1	7
	Reviewed and carried over	6	
Incapacity Inquiries			1
TOTAL CASES			37

Decisions Issued:

Complaints	5*
Registrar's Reports	3
Incapacity Inquiries	1
TOTAL	9

Dispositions (some cases may have multiple dispositions or involve multiple members)	Number
Referral to Discipline Committee	5 ¹
No further action (NFA)	2
Advice or recommendation	1

Nature of Allegations – For Disposed of Cases (NFA excluded)²	Number
Breach of regulation/Standards of practice	3
Unprofessional behaviour and/or communication	2
Other	2
Failure to diagnose/misdiagnosis	1
Quality of care	1

***Timeframe for Resolution (re: 5 complaints above):**

61-120 Days	0
121 – 150 Days	0
151 Days +	5

HPARB Appeals	Number
New appeal	1
Outstanding appeals to be heard	1
Appeals heard and awaiting decision	2
TOTAL APPEALS IN PROGRESS	4

¹ Referrals made regarding two members only (Member A: three matters; Member B: two matters)

² NFA dispositions are not reflected in this chart

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

Both panels have continued using and, where necessary, suggested improvements to the risk assessment framework (a tool that assists the panels in consistently assessing risk of harm and reaching appropriate, consistent decisions based on that assessment). This will likely continue indefinitely, as more and varied cases are considered.

Respectfully submitted,

Dr. Areef Nurani, ICRC Chair

Registration Committee Activity Report

Reporting Date:	June 10, 2019
Number of meetings in 2019:	3
Number of meetings since last Council meeting:	2 in-person Committee meetings (May 24 and June 6)

Nature of items discussed/number of cases considered:

College staff continued discussions 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 FORAC and Touchstone Institute were focused on streamlining the pre-registration process for international candidates.

The Committee support staff and the Registrar met with staff from the Office of the Fairness Commissioner (OFC) on May 17 at the College for their annual review meeting.

The Committee met with IOBP and Touchstone Institute on May 24, 2019, at Touchstone Institute. The discussion revolved around what candidate data can be shared with the IOBP to benefit the candidates.

A panel of the Registration Committee has been meeting as needed to review the FORAC credential assessment recommendations/reviews. These approvals are processed no later than seven business days after receipt from FORAC to ensure that there is no delay. Since the last Council meeting, the Committee has confirmed two of these FORAC recommendations/reviews, permitting candidates to challenge the Internationally Graduated Optometrist Evaluating Exam (IGOEE). Registration opened at Touchstone Institute on January 21 with a registration fee of \$5000. The 2019 IGOEE will take place over three days from July 18-21, 2019.

The written Therapeutics Prescribing Assessment for Optometry (TPAO) test, a new component of the 2019 IGOEE, was piloted in early February 2019 with fourth-year University of Waterloo School of Optometry and Vision Science students and was piloted again on April 15 with practising optometrists who graduated within the last five years. The Evaluating Exam Oversight Committee, which has representation from the Committee, Touchstone Institute and FORAC, is making a recommendation to FORAC to accept the TPAO exam component as part of the IGOEE exam so that if a candidate scores high enough on the TPAO exam component as well as on the IGOEE exam, that they would be able to by-pass bridging. The recommendation will be submitted for the July 13, 2019 FORAC meeting.

The College launched its online Jurisprudence seminar the week of May 27, 2019. Candidates are now required to complete the online Jurisprudence seminar before their registration for an upcoming Jurisprudence exam can be confirmed. As of June 10, 10 candidates have successfully completed the online Jurisprudence seminar. College staff implemented a change to the online seminar so that candidates now receive an automated email to inform them that they have successfully completed the seminar and College staff are able to edit the information that candidates can view in the e-learning environment. The Committee is still weighing its options for the online Jurisprudence exam.

After Council's approval on January 18 of the National Board of Examiners in Optometry (NBEO) examination as an alternate standards assessment examination, the Committee approved a policy of having candidates for registration successfully challenge all three parts of the NBEO exam (Part I-ABS, Part II-PAM, and Part III-CSE) after January 18, 2019. Following confirmation by NBEO on June 5, 2019, that it is possible for a candidate to pass Part II and fail the TMOD portion embedded in Part II, the Committee approved further requiring that candidates must pass the TMOD portion in addition to Part II of the NBEO exam.

The Committee has continued to dialogue with OEBC. For greater transparency, enclosed are recent memoranda/correspondence associated with OEBC (Dec. 14, 2018, Memorandum; April 5, 2019, Letter to OEBC from the Committee; April 7, 2019, Letter to OEBC from the Alberta College of Optometrists; April 17, 2019, Letter from OEBC to the College; and June 14, 2019, Letter to OEBC from the Committee).

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.

MEMORANDUM

Date: Dec. 14, 2018

To: Dr. Pooya Hemami, President

CC: Ms. Hanan Jibry, Assistant Registrar & Support Staff, Registration Committee

From: Dr. Patrick Quaid, Chair, Registration Committee

Re: **Response to Stakeholder and Member Feedback associated with the Consideration of National Board of Examiners in Optometry (NBEO) Examination**

This memorandum provides a summary of the results of the first opportunity to observe the Optometry Examining Board of Canada (OEBC) examination by two members of the Registration Committee (Committee) on Nov. 3, 2018; the Committee met on Dec. 7th to discuss these observations. The Committee also feels that it is important to provide a response to some of the points raised in the input received from many stakeholders and members in order to provide clarification as well as correct some inaccuracies contained in the feedback.

1. OEBC Examination Observation

Having reviewed and considered the results of the OEBC examination, it is the opinion of the Committee that:

- The OEBC and National Board of Examiners in Optometry (NBEO) are different examinations, and they measure candidate competence in different ways.
- The Committee has confidence in candidates who have successfully challenged either examination with respect to entry-level competence and therefore, public safety.
- The 'new' OEBC examination may identify borderline candidates better than the past Canadian Assessment of Competency in Optometry (CACO) examination, as the exam administered by the same organization used to be called. Based on the Committee's unfettered exam observations at the July 2017 NBEO exam site visit, the Committee believes that the NBEO examination in its current state, also discriminates borderline candidates well.
- The Committee will be more confident having an oversight committee for the OEBC examination.

2. Response to Stakeholder and Member Input

The following is in response to some of the points raised in the stakeholder and member input:

- The Committee's request for unfettered access to the OEBC examination has been an ongoing issue despite the ability of two members of this Committee to observe the November 2018 OEBC examination as mentioned in the OEBC Nov. 5, 2018, letter to the College Council. Numerous previous requests for exam observation by the College, had not resulted in a satisfactory response from OEBC.
- OEBC changed the entry-to-practice exam without informing the College. This was pointed out in the May 26, 2017, letter from the College to OEBC. On Nov. 21, 2016, the College sent a letter to the predecessor of the OEBC, Canadian Examiners in Optometry, specifically seeking information about how the piloting of the new entry-to-practice exam was going to be implemented. The College did not receive a satisfactory response to this request. In contrast, NBEO is hiring a project manager to manage the review of Part 3 of the NBEO examination with full stakeholder oversight.

- NBEO has indicated to the Committee that it is the 'gatekeeper' since different optometry schools accredited by the Accreditation Council on Optometric Education (ACOE) are not consistent in the exit exams they administer. Accordingly, for consistency, public safety, and to ensure fairness in the manner an exam is applied, it is important to test for certain critical skills at every exam administration.
- OEBC uses a combination of standardized patients and models in its OSCEs. It is important for examiners to observe patients' reaction to the technical skills being performed by candidates in conjunction with videotaping. NBEO has informed the Committee that it has managed the risk with having live patients involved in its exam for many years without issue. A decision is therefore needed about whether the use of standardized patients is preferred versus models in the entry-to-practice exam approved by the College, going forward.
- In response to the point made about the nursing profession using a US-based licensing exam, the Registrar of the College of Nurses of Ontario assured College staff as recently as this week that the exam is 'absolutely' meeting the College's requirements for validity, reliability, and defensibility.

Conclusion

The Committee would like to affirm its support in principle for a Canadian bilingual entry-to-practice exam. It is aware that there does exist a significant cost difference between the OEBC and NBEO exams. However, the Committee's mandate regarding the exam is not cost; rather it is the defensibility of the exam. Based on existing legislative requirements (Section 22.4 (2) of the *Health Professions Procedural Code*), the College is duty-bound to ensure that proper oversight is maintained with respect to any approved entry-to-practice examination.

The following are the potential options to resolve the present situation:

- a) Approving the NBEO exam as an alternate entry-to-practice exam;
and/or
- b) Establishing a truly independent and competent oversight committee of the OEBC exam process to provide expert oversight in line with regulatory requirements (i.e. independent of OEBC and anyone who is or has been in the past, remunerated directly or indirectly by OEBC). This Committee should be appointed by OEBC members which would emulate the role of the ARBO/NBEO model or National Board of Examination Review Committee (NBERC), and it should be able to report back to all regulators in an unfettered manner. If this option is pursued, a strict timeline should be followed in the formation of the Committee.

April 5, 2019

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

Dear Tami:

RE: Proposed OEBC written exam and OSCE blueprint changes

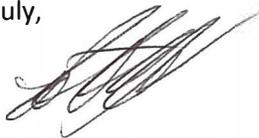
Thank you for allowing a time extension for our Committee to provide input with respect to the above.

The Registration Committee met yesterday and had an opportunity to review the proposed changes. The Committee would like to know OEBC's basis for requiring changes, such as a reduction in redundancies, to be made in the first place. The Committee needs assurances that these proposed changes are based on sound principles. For example, were these priorities provided by OEBC stakeholders, the provincial regulatory colleges? The Committee's concern is that these changes may result in significant changes being made to the exam, thereby necessitating the re-blueprinting and re-piloting of the exam.

Using established metrics, there is a need to verify that the proposed changes are in fact, warranted. The Committee also wondered if there was anything operational that can be improved upon without, for example, affecting the number of OSCE stations.

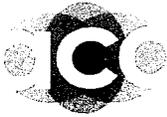
Thank you for the opportunity to provide input.

Yours truly,



Dr. Patrick Quaid, Optometrist, PhD
Chair, Registration Committee

Cc: Dr. Paula Garshowitz, OD, College Registrar



ALBERTA college
of OPTOMETRISTS

#102, 8407 ARGYLL ROAD NW, EDMONTON, ALBERTA T6C 4B2

ADMIN@COLLEGEOFOPTOMETRISTS.AB.CA
TOLL FREE 1-800-668-2694
T 1-780-466-5999
F 1-780-466-5969

WWW.COLLEGEOFOPTOMETRISTS.AB.CA

April 7, 2019

Ms. Tami Hynes
Optometry Examining Board of Canada

RE: OEBC Blueprint Review Project 2019

Thank you for circulating the OEBC Blueprint Review Working Group Report for comment.

Although, the Alberta College of Optometrists (ACO) is pleased that OEBC has acknowledged the goal of the OEBC Board of Directors to have one (and only one) entrance-to-practice competence assessment for Canada by offering a more cost effective exam, we are very disappointed with the final recommendations of the Working Group; and, more importantly, extremely concerned with the future viability of the organization. The following are comments from the ACO:

- In order to meet the Board's request to have a more cost-effective exam, OEBC had two choices: change "how things are done in the organization"; or, reduce the exam question quantity and quality. The choice to reduce the exam is not a one-time event as evidenced by exam question reductions in previous years (CSAO to the CACO to the OEBC). This trend is an unacceptable option as even a ten (10) question exam can still be psychometrically validated – but, the question remains: would it be considered appropriate to measure all entrance-to-practice competencies required by the regulators?
- The Report does not include any specific financial details on the total amount of cost savings or where these cost savings will come from. Understanding that facility rent, volunteer per diems and many other expenses will not change by reducing the length of the exam, our estimated cost savings produced by reducing the written and OSCE exams is approximately \$14 per candidate.
- The estimated original cost of \$200K+ to convene the review panel and produce this report is a demonstration of inappropriate budgeting and waste of OEBC resources.
- The report did not address the issue of taking 1.5 to 2.5 hours to have a candidate check in. To have candidates wait this long is unacceptable as it may impact their performance on the exam.
- One of the reasons given to shorten the OSCE portion of the exam was to shorten the day for examiners and standardized patients. To recommend a reduction in the quantity and quality of the exam based on making it more convenient to fit within the current administration process and model is unacceptable.
- To recommend a reduction in the OSCE to 12 stations (n=12) and understanding that the am and pm exams are "different", further reduces the validation of the exam from such low test numbers.
- Communication issues continue to be one of the top patient complaint areas experienced by new graduates. Understanding that "knowledge" of communication is different than demonstrating an ability to communicate, we are still very concerned with the message being promoted by OEBC that testing of communication knowledge can be removed as it is considered unimportant for entrance to practice.
- Another area of practice that is challenging for many new graduates to perform appropriately include so-called high-risk areas such as independent glaucoma, emergency care, etc. The ACO is concerned that neither of these areas were specifically identified in Appendix F (OSCE) or weighted higher in the written exam.

In conclusion, the ACO cannot accept the recommendations in the Working Group's Report: and, as such, we request that this issue be placed on the agenda for discussion at the next OEBC Board of Directors meeting.

Sincerely,
Gordon Hensel
Registrar, ACO



April 17 2019

Ms. Hanan Jibry, Assistant Registrar, College of Optometrists of Ontario
Dr. Patrick Quaid, Registration Committee Chair, College of Optometrists of Ontario
Dr. Pooya Hemami, President, College of Optometrists of Ontario
Dr. Paula Garshowitz, Registrar, College of Optometrists of Ontario
Suite 900, 65 St. Clair Ave. E.
Toronto, Ontario M4T 2Y3

Dear Hanan, Patrick, Pooya and Paula,

We are following up on earlier email correspondence and our teleconference on March 7.

Though the board of directors was not in favour of the College's demands and gave its reasons in January, it wished for OEBC to have continued dialogue with the College. On the March 7 call, we had suggested ways for the College and all OEBC members to have independent assurance that OEBC was delivering a valid defensible exam without assigning control over performance of the exam and OEBC to another party (e.g. a committee), the latter being the generally understood meaning of independent oversight. We asked if we could first focus on the College's goals or desired outcomes and then determine the "how" or means.

If the goal of the College and our members is assurance that OEBC is delivering a valid, defensible exam, beyond evidence that OEBC currently demonstrates, the most ideal means is an independent evaluation of OEBC regarding its observance of the independent testing standards that it and all licensure examination boards have to follow.

The table below shows OEBC's current means to ensure exam integrity against independent standards as well as possibility for an external review. External review typically would be carried out by a psychometrician in an examination consulting firm experienced in the complexities of standardized and licensure testing and based on the testing standards. We are aware that some firms including OEBC's consulting psychometric firm, Martek Assessments Ltd., have carried out reviews for other Canadian licensure examinations.

Evidence of OEBC Exam validity & Defensibility		
<i>OEBC currently does:</i>	Source	Available
Public technical exam report (more transparent and extensive than required, and in some cases other exam reports)	Internal, annual	Public
Ongoing monitoring of OEBC assessment within external standards (e.g. exam policies & procedures reflect external testing standards, evolving best practice, laws, e.g. HR, fairness; Canadian context)	Internal, ongoing	Internal
Regulator reports to Fairness Commissioners about OEBC exam fairness; produced by some colleges (e.g. ON, MA)	External, periodic	Public
<i>External review (not currently done):</i>		
Review OEBC assessment within external testing standards	External	CEO, Board, Members

Our hope was to consider ways to give the College assurances about the OEBC exam. We still are committed to this and respectfully ask you to consider meeting again to discuss these ideas further. Please let me know if there is a willingness to meet and continue discussions.

Thank you very much to all of you for your time,

Lorne & Tami



Dr. Lorne Ryall
Chair



Tami Hynes
CEO

June 14, 2019

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

Dear Tami:

RE: Letter dated April 17, 2019

Thank you for the letter signed by you and Dr. Ryall dated April 17, 2019.

The Registration Committee met on June 7th and had an opportunity to review the letter. The Committee still has concerns, in particular, pertaining to the lack of independent oversight of the OEBC written exam and OSCE as we have re-iterated in various ways. This is a critical point to us. Independent oversight is having an oversight panel with the majority composition of representatives having no direct or indirect contractual or employment connection to OEBC. This model is currently in place for other similar organizations and is an oversight model that the College considers essential for fair and transparent accountability to the regulatory colleges.

We at the College are always willing to continue the dialogue with any third party currently approved to conduct work on behalf of the College.

Yours truly,



Dr. Patrick Quaid, Optometrist, PhD
Chair, Registration Committee

Cc: Dr. Paula Garshowitz, OD, College Registrar

Fitness to Practise Committee Activity Report

Reporting date:	June 10, 2019
Number of meetings in 2019:	N/A
Number of meetings since 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,

Hsien Ping (Albert) Liang
Fitness to Practice Committee Chair

Discipline Committee Activity Report

Reporting date:	June 4, 2019
Number of meetings in 2019:	1
Number of meetings since last Council meeting:	0
Nature of items discussed/number of cases considered:	N/A

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

The Discipline Committee conducted three Discipline Hearings:

1. Dr. Gregory Miller #1 - Hearing held on May 28-30, 2019. Decision pending.

The allegations considered are as follows:

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.

2. Dr. Casey L. Tepperman - Hearing held on April 15, 2019.

THE DISCIPLINE COMMITTEE FOUND that Dr. Tepperman committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the Health Professions Procedural Code (the "Code") being Schedule 2 to the Regulated Health Professions Act, 1991, S.O. 1991 C.18, and defined in the following paragraphs:

1. Dr. Tepperman failed to make or maintain Patient X's health record in accordance with applicable standards and College policies, in that he did not record Patient X's complete

health and oculo-visual history between April 2008 and October 2016, including with respect to the finding of an iris nevus or any associated clinical findings, despite numerous ocular examinations of Patient X, contrary to paragraph 1.24 and part 4, sections 10(2)(4) and (6) of Ontario Regulation 119/94 to the Optometry Act.

2. Dr. Tepperman failed to refer Patient X to an ophthalmologist for investigation when he recognized or should have recognized a raised nevus on Patient X's left eye iris, contrary to paragraph 1.11 of Ontario Regulation 119/94.
3. Dr. Tepperman failed to maintain the standard of practice contrary to paragraph 1.14 of Ontario Regulation 119/94 in that he failed to diagnose, appropriately record, adequately monitor, and/or refer Patient X to an ophthalmologist for further investigation of an iris nevus.

THE DISCIPLINE COMMITTEE ORDERED:

1. Dr. Tepperman shall attend in person before the Panel of the Discipline Committee to receive a public, verbal reprimand, a copy of which shall be published on the College Register;
2. Dr. Tepperman shall participate in a College approved Practice Coaching Program at his expense, as follows:
 - a) Within 6 months of the date of the order Dr. Tepperman shall participate in an initial 2-day session during which the Practice Coach approved by the College shall conduct such observation of and/or discussions relating to Dr. Tepperman's practice as they deem necessary relating to the diagnosis of ocular pathology, including iris nevus, during eye examinations, and appropriate referral and record-keeping practices;
 - b) Dr. Tepperman shall participate in a further half day session approximately 6 months after the initial meeting to review Dr. Tepperman's practices with respect to eye examinations, appropriate referrals, and record-keeping practices;
 - c) the Practice Coach shall report to the Registrar confirming that the Practice Coaching has taken place to his or her satisfaction.
3. Dr. Tepperman shall pay \$7,500 CDN as a contribution towards the investigation and prosecution costs incurred by the College in this matter.

3. Marg L. Courchesne (Revoked Member) - Hearing on motion held on April 15, 2019.

A motion to adjourn the hearing of Marg L. Courchesne (Revoked Member) sine die (without a return date) on the terms set out in an Undertaking & Surrender Agreement came before a panel of the Discipline Committee of the College of Optometrists of Ontario this 15th day April 2019, in Toronto, Ontario, at 9:00 a.m. at 65 St. Clair Ave. E. The panel has granted the motion.

The Discipline Committee is preparing to conduct two discipline hearings:

1. Dr. Ajay Chandail - Hearing dates TBD.

Date of Referral: April 10, 2019

Matter A

1. Dr. Chandail 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 1.11 of Ontario Regulation 119/94, under the Optometry Act, 1991, S.O. 1991, c. 35, in that:
 - i) Dr. Chandail failed to refer Patient A to another professional when he recognized or should have recognized a condition of the eye or vision system that appears to require such referral;
 - b) paragraph 1.14 of Ontario Regulation 119/94, in that:
 - i) Dr. Chandail failed to maintain the standards of practice of the profession with respect to the oculo-visual assessments he provided to Patient A; and
 - ii) Dr. Chandail failed to maintain the standards of practice of the profession with respect to some or all of the other 23 pediatric patients;
 - c) paragraph 1.24 of Ontario Regulation 119/94, in that:
 - i) Dr. Chandail failed to make or maintain records in accordance with Part IV of the Regulation, for the Patient B, where Dr. Chandail made a referral to a pediatric ophthalmologist, but for whom there was no referral in the patient record.

Matter B

2. Dr. Chandail 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, under the Optometry Act, 1991, S.O. 1991, c. 35 (“Ontario Regulation 119/94”), in that:
 - i) Dr. Chandail failed to maintain the standards of practice of the profession with respect to some or all of the 101 patients; and
 - ii) Dr. Chandail failed to notify the 101 patients as to where their patient records were located and/or failed to provide the 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. Chandail failed to make or maintain records in accordance with Part IV, including, but not limited to, Dr. Chandail 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. Chandail, in many instances, failed to record the information required by s. 10 of Ontario Regulation 119/94 to be in patient records.

Matter C

3. Dr. Chandail 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, under the Optometry Act, 1991, S.O. 1991, c. 35 (“Ontario Regulation 119/94”), in that:
 - i) Dr. Chandail failed to maintain the standards of practice of the profession by not inputting accurate information and/or by entering false information on some or all of the 17 patient records;
 - b) paragraph 1.24 of Ontario Regulation 119/94, in that:
 - i) Dr. Chandail failed to make or maintain records in accordance with Part IV – Records, related to paragraph 12(c) of Part IV; which outlines that a member may use computer, electronic or other equipment for recording, storing and retrieval of records if the equipment or software being used is such that no amendment, correction, addition or deletion can be made to any record which obliterates the original record or does not show the date of the change; and
 - c) paragraph 1.39 of Ontario Regulation 119/94, in that:
 - i) by adding information in the patient record of Patient C after the fact and not indicating that this is what he had done, Dr. Chandail 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.

2. Dr. Kashif Zoberi - Hearing dates TBD.

Date of Referral: May 8, 2019

Matter A

1. Dr. Zoberi has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the Code, in that:
 - a) Dr. Zoberi contravened the Regulated Health Professions Act, 1991, and:

- i) paragraphs 1.1 and 1.16 of Ontario Regulation 119/94, under the Optometry Act, 1991, S.O. 1991, c. 35 (“Regulation 119/94”), in that he continued to practice optometry while his certificate of registration was suspended after January 17, 2018;
- ii) paragraph 1.14 of Regulation 119/94, in that he failed to maintain the standards of practice of the profession in that he performed incomplete eye examinations during the period of suspension, from January 17, 2018 to July 6, 2018;
- iii) paragraph 1.24 of the Regulation 119/94, in that he failed to make or maintain records, as required by Part IV of the Regulation for the patients he saw during the period of suspension of his certificate of registration, from January 17, 2018 to July 6, 2018;
- iv) paragraph 1.30 of Regulation 119/94, in that he failed to issue a statement of receipt that itemized an account for professional goods or services to the patient or a third party who is to pay, in whole or in part, for the goods or services provided to the patients treated during the period of suspension of his certificate of registration from January 17, 2018 to July 6, 2018;
- v) paragraph 1.39 of Regulation 119/94, in that he has 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 in that he continued to practice optometry while his certificate of registration was under suspension after January 17, 2018.

Matter B

2. Dr. Zoberi has committed an act or acts of professional misconduct as provided by subsection 51(1)(c) of the Code, in that:
 - a) Dr. Zoberi contravened the Regulated Health Professions Act, 1991, and:
 - i) paragraphs 1.1 and 1.16 of Ontario Regulation 119/94^[1], under the Optometry Act, 1991, S.O. 1991, c. 35 (“Regulation 119/94”), in that he provided an eye examination to Patient A on June 20, 2018, thus engaged in the practice of optometry, while his certificate of registration was suspended (after January 17, 2018);
 - ii) paragraph 1.14 of Regulation 119/94, in that he failed to maintain the standards of practice of the profession in that he provided an incomplete eye examination to Patient A on June 20, 2018;
 - iii) paragraph 1.24 of the Regulation 119/94, in that he failed to make or maintain records for Patient A, as required by Part IV of the Regulation;
 - iv) paragraph 1.28 of Regulation 119/94, in that he allowed an account for professional services to be submitted that he knew or ought to have known was false or misleading, for the services rendered to Patient A on June 20, 2018;
 - v) paragraph 1.30 of Regulation 119/94, in that he failed to issue a statement or receipt that itemized an account for professional goods or services to Patient A or a

- third party who is to pay, in whole or in part, for the goods or services provided to Patient A on June 20, 2018;
- vi) paragraph 1.33 of Regulation 119/94, in that he charged a fee, in whole or in part, before providing professional services to a patient, specifically for the services rendered to Patient A on June 20, 2018;
 - vii) paragraph 1.39 of Regulation 119/94, in that he has 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 in that he continued to practice optometry while his certificate of registration was under suspension after January 17, 2018.

Committee training:

One member of the committee attended FHRCO's basic discipline orientation workshop held on May 3, 2019.

Recommendations to Council (including rationale and impact on budget if appropriate): N/A

Respectfully submitted:

Jim Hoover, OD
Committee Chair

Governance/HR Committee Report

Reporting date:	June 14, 2019
Number of meetings in 2019:	4 (2 in-person, 2 teleconferences)
Number of meetings since last Council meeting:	2 (1 in-person, 1 teleconferences)

The Governance/HR Committee met via teleconference on May 1, 2019 and in-person on June 4, 2019.

Registrar Recruitment: Following on from its recommendation to Council, the Committee discussed the Registrar Recruitment process undertaken over the past three months. The recruitment procedure is being recorded to ensure defensibility of the process and decision, and to provide a reference for use by future iterations of the Committee. The Committee specifically commended the work of their consultant for assisting throughout this process.

Recommendations for Committee Vacancies: Appointed member L. Morrone's term expired on June 11, 2019. The Committee has made recommendations to Council/Executive to fill the vacant positions on the respective committees. Dr. Lisa Christian was also recently elected (via a by-election) for the vacant District 6 – Academic seat. As per Part 14.05(1), all elected Council members who are not members of the ICRC will be placed on the Discipline Committee.

In order to remain constituted, the Executive Committee made a motion at their June 11, 2019 meeting to appoint Mr. Narendra Shah to the Inquiries, Complaints and Reports Committee. The remaining appointment recommendations are outlined in the Committee's first motion.

Proposed By-Law Changes: Based on the governance reform recommendations passed by Council in 2018/2019, the Committee have worked alongside legal counsel to outline the applicable by-law amendments. As certain by-law amendments dealt with financial oversight, the Audit/Finance/Risk Committee also reviewed certain proposed amendments at a recent meeting. The proposed by-law amendments are outlined in the Committee's second motion for approval to circulate.

Council Member Self-Evaluation: The Committee reviewed the current version of the Council member self-assessment. The Committee will be piloting an alternate method of performing the assessment. Each Council member will be contacted by a Committee member to individually meet with and engage in an open dialogue on their participation. This would occur in an informal setting and would allow Council members to be more open on areas of strength and self-improvement. The results will then be anonymized and presented back to the Committee at its fall meeting.

Call for Nominations 2019: The Committee discussed the upcoming Council election, with seats open in four districts: District 1– GTA District, District 2 – Northern District, District 3 – Eastern District, and District 5 – Provincial District. As the call for nomination is sent out in August of each year, the Committee discussed changes to the form to ensure fairness and transparency.

Term Limits: The Committee is reviewing term limits for elected Council members and considering such proposals as reducing maximum term limits from nine to six years. Council members will be receiving a survey in the coming months to gauge feedback on this governance proposal.

Training:

June Council Meeting: Staff provided information on the Council training day activities that have been planned for June 25 in Waterloo. The day will be split into two with the morning session focusing on Board governance and the afternoon session providing basic financial literacy training.

Meeting Facilitation: The Committee recapped the meeting facilitation training that was provided to all committee chairs on June 3, 2019. The consensus from all participants was that the training was a success and should be continued. It was recommended that this be provided on an annual basis for all new and returning chairs.

Council Meeting Evaluation: The Committee will continue to distribute an evaluation survey following each Council meeting and asks that all members please complete in a timely fashion. The survey results following the April 24, 2019 meeting are provided as an addendum to the report.

Proposed Motions to Council (including rationale and impact on budget if appropriate):

- 1. To appoint, effective immediately, Mr. Howard Kennedy to the Quality Assurance Committee-Clinical Practice Panel, Ms. Ellen Pekilis to the Patient Relations Committee and Dr. Lisa Christian to the Discipline Committee.**
- 2. To approve circulation of amendments to the College By-laws aligning with governance reform recommendations approved by Council in 2018/2019.**

Respectfully submitted:

John Van Bastelaar
Committee Chair

Council Meeting Evaluation – Survey Results

Following the Council meeting on April 24, 2019, members were sent an online survey to complete, asking them to evaluate the meeting effectiveness and make any suggestions moving forward. Out of the 17 members in attendance, 16 responded to the survey.

1. Did you feel adequately prepared for the April 24, 2019 Council meeting?

90% - Adequately Prepared

a. The meeting was well organized.

15 – YES

1 – NO

b. The interaction between members was well managed.

15 – YES

1 – NO

c. All members were given a fair opportunity to participate.

14 – YES

1 – NO

1 – NOT ABLE TO COMMENT

2. What improvements/changes could be made to the agenda?

-The agenda was well done. I cannot think of any improvements (x5)

-Did not follow the order of the agenda (jumped around a bit); suggestion for President to make announcement of each item to all of Council to ensure whole agenda is completed before adjournment (x3)
-Share the draft agenda with the entire Council prior to creating briefing book to allow Council members to add additional items ahead of time

-Start each item with a short (5 minute) summary of the issue to enable more fulsome initial dialogue. Reading the documents in the briefing material is not always the same as getting a robust (albeit short) verbal summary of issue at hand.

-Follow time limits laid out in the agenda

-Council does not need printed copies of agenda (environmentally friendly)

3. What could be done to ensure all members have a fair opportunity to participate in the meeting?

-President managed meeting very well, asking input and participation from all members (x7).

-However, some discussions went on too long (x3)

-Louder voices have to learn to listen rather than always having a rebuttal to squash those that disagree; president should also address this

-Chair does always looks at the same Council members for input and interaction; needs to look more around the table and seek input from other members, especially at the start of a discussion.

-Continue to ask input from members (especially if they seem distracted, or not paying attention); will keep everyone on their toes and maintain attention on the subject matter

-Make special effort to get public member view on issues

-Responsibility is on each Council member to participate

4. List the top three priorities requiring attention in order for Council to function more effectively

-Time management re: discussions (x3)

- Executive to stay within new reduced scope, as set out by Council (x2)
- Strategic Planning
- Set an annual goal (separate to Strat Planning)
- Governance Training
- Be open to change and new ideas
- Council is a hub for all committees
- Limit discussion on low priority topics

- Continue to promote equal opportunity for all council members to speak
- Ensuring all members are prepared for meetings
- Ensure focus on subject matter during discussions
- Technology and its implications on optometry
- Treat visitors to the meeting with respect

5. Do you have any other comments, questions or concerns?

- Helpful at the January meeting when Registrar introduced the staff present; be beneficial for the practice to continue at each Council meeting (x3)
- When presenting financials or other items, may be beneficial to put the information on the screen so Council members can follow along – use the technology we have to assist Council (x2)
- Set time limits for external visitors to speak
- Given the cost of the meeting, we should plan a more fulsome meeting (i.e. 9-5) rather than the shortened model currently being used
- Beneficial to have a consent agenda; pulling out reports for full discussion can be beneficial and provide direction for committees
- Long round table discussions is not getting from many different members; too many people are on their phone texting or using the internet
 - Remind all Council members at the beginning of meetings not to text or use the internet during discussions
- Council members should be prepared and willing to speak the truth, and not just follow the group

Audit/Finance/Risk Committee Activity Report

Reporting Date: June 16, 2019

Number of meetings in 2019: 2

Number of meetings since last Council meeting: 1 in-person Committee meeting (June 14, 2019)

Nature of items discussed/number of cases considered:

The Committee reviewed and discussed potential enterprise risks to the College provided by both AFR Committee members and staff, who provided their feedback anonymously. Each risk item was evaluated on whether it was a risk to the College or a risk to the public before being evaluated as being a high/medium/low risk. A summary of these risks is being provided to the Strategic Planning Committee for its environmental scan.

The issue of auditor communications with the AFR Committee was also discussed. Given the committee is new, it was agreed that clarity is needed on how auditor communications should take place in the future.

The financial information is included in the Treasurer's report.

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, Audit, Finance and Risk Committee

Strategic Planning Committee Activity Report

Reporting Date:	May 24, 2019
Number of meetings in 2019:	3 by teleconference
Number of meetings since last Council meeting:	3 by teleconference

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

Based on a recommendation of the Governance Review, the Strategic Planning Committee was struck in September 2018 to develop and deliver a comprehensive College strategic planning process. Given the impending change in College registrar, the process would be divided into two phases: Phase 1 comprises the background work necessary to inform the development of the strategic plan itself. It was felt that it would be advantageous to complete this phase of the project prior to the departure of the current registrar. The background summary would consist of a jurisdictional/environmental scan and current state analysis of the College and would be a useful document for the incoming registrar. Phase 2, to be completed at a later date, would comprise the development of the strategic plan.

The Strategic Planning Committee held its inaugural meeting by teleconference on Thursday, May 2. The Committee heard presentations by the two shortlisted candidates who had responded to the Request for Proposal to provide services for Phase 1 of our strategic planning initiative. The Committee recommended the selection of Ms. Shenda Tanchak, Magnetic North Consulting and former Registrar of the College of the Physiotherapists. College staff proceeded to prepare an agreement and engage the consultant.

The Committee then met by teleconference on May 8 with Ms. Tanchak to create a list of key individuals and organizations to be consulted for Phase 1, which includes preparation of a current state assessment and environmental scan prior to the departure of the current Registrar. Since this project had very aggressive timelines, the Committee has also interacted by email consultation to provide guidance regarding scope and direction of public consultations with the Citizen Advisory Group. Ms. Tanchak also plans to survey members and staff members for her report.

The Committee met for a third time on May 23, 2019 to allow Ms. Tanchak to interview the Committee members on the current state of the College.

A draft of Ms. Tanchak's report is expected to be ready for the Committee's review within the next week. The draft will be shared with the new registrar, Ms. Maureen Boon, upon her arrival and is expected to be presented to Council in September. Ms. Boon will then determine when will be the best time to proceed with the strategic planning exercise, or Phase 2 of the project. The Committee expects a second RFP will be circulated for engagement of a consultant for this stage.

Respectfully submitted:

Ellen Pekilis
Committee Chair

Registrar's Report – April 9, 2019

The following is an update on administrative activities since the April 24, 2019 Council meeting.

Administrative Statistics from April 1-May 31, 2019:

Registration:	New applications opened: 50
	New members registered: 6
Quality Assurance:	Practice assessments processed and sent to assessors: 23
ICRC:	New complaint files opened: 12
	Registrar's requests to ICRC to approve the appointment of an investigator: 1
	Investigators appointed at the request of the ICRC: 4

Organizational Involvement: The College is a member of several regulatory organizations (both the optometric and the greater health regulatory worlds) and benefits from colleagues' expertise as well as sharing our "lessons learned". The College actively engages with the Association of Regulatory Boards of Optometry (ARBO) by attending its annual meeting and sitting on its committees. This year I will be attending, along with Dr. Kniaziew, ARBO's 100th Annual Meeting in St. Louis, MO. This year's theme is "Looking Back, Seeing Ahead-20/20 Vision for the Next Century". The College's report to ARBO is included here for Council's information.

In addition to ARBO, the College participates in the Federation of Health Regulatory Colleges of Ontario (FHRCO). I was honoured to have been elected to FHRCO's Executive Committee, having completed two years in April 2019. College staff attends pertinent FHRCO working group meetings to liaise with their counterparts and other Ontario health regulatory colleges. FHRCO's 2018 Annual Highlights report is included here for Council's information.

Council and Committee Training: As part of the Governance review, it was identified that Council and Committee members would benefit from additional training. On June 3, 2019, chairs of all statutory and standing committees of the College attended a meeting facilitation skills workshop presented by Facilitation First. Positive feedback was received from participants, with a goal to provide similar training on a regular basis to assist chairs in the running of productive and efficient meetings.

Council will be holding a training day on Tuesday, June 25 in Waterloo with the following sessions:

- Morning Session: Governance Training presented by [Mr. Dale Atkinson](#). Mr. Atkinson regularly provides engaging governance training sessions at ARBO meetings, with reference to current case law. Participants appreciate his candid, no-nonsense style.

- Afternoon Session: Financial Literacy Training, presented by [Mr. Trevor Jaundoo](#). Mr. Jaundoo will bring an interactive approach to financial literacy that promises to be engaging and informative.

Staff Team Building: College staff took some time out of their busy schedule on May 7 to participate in an organized team-building exercise. We attended the PC Cooking School at Maple Leaf Gardens and learned how to make kale Panzanella salad, and lemon olive oil cake with preserved berries, and enjoyed a wonderful lunch together.

Staff Departures: Two staff members tendered their resignations effective July 1, 2019:

- Mr. Nektarios Kikonyogo, Manager, Finance and Office Administration, has been with the College since February 2017 and since that time has significantly raised the financial literacy of the College with his expertise. He developed the College's financial dashboard, which has given Council an improved ability to oversee the College's financial health at a glance.
- Mr. Eyal Birenberg, Coordinator, Investigations and Hearings, began with the College in January 2015 and is the first person to hold this position. He has competently and efficiently handled the ever-growing ICRC and Discipline caseload and was integral in establishing the College's ADR process.

The College extends its best wishes to Nektarios and Eyal in the future and thanks them for their valuable contributions to the protection of the public of Ontario

On a personal note.... I would like to take this opportunity to extend heartfelt thanks to the College Council for the opportunity you've given me to serve the public of Ontario as Registrar of the College. It has been both an honour and a privilege to hold this position for the past eight years and I have been proud to represent the College at various registrant and stakeholder meetings and events. I have had the pleasure of serving with four different presidents: Dr. Richard Kniaziew, Dr. Dennis Ruskin, Dr. Thomas Noël and Dr. Pooya Hemami, each with their own unique style of leadership, all with the College's mandate front and centre. I have enjoyed working with the many dedicated volunteers, both elected and public members of Council, non-Council committee members, QA assessors and practice coaches who are willing to contribute their valuable time to the protection of the public. Most of all, it has been a great honour to work and collaborate with the most dedicated and valuable staff team that I could imagine. Each member of the College staff works diligently to ensure that everything that the College does is correct, fair and in the public interest. The Council has made an excellent choice in their new registrar, Ms. Maureen Boon. I am confident that the College is in very good hands to meet the challenges of the future. My very best wishes to Maureen and to all of you as you continue to ensure that the public receives safe quality care from Ontario's optometrists.

Respectfully submitted
Paula Garshowitz, OD
Registrar

FEDERATION OF HEALTH REGULATORY COLLEGES OF ONTARIO

ABOUT THE FEDERATION

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The Federation of Health Regulatory Colleges of Ontario is an incorporated, not-for-profit organization comprised of Colleges of the 26 regulated health professions in the province. The Federation focuses on regulatory matters as it promotes effective communication and cooperation among its members. Activities that support the fulfilling of the Federation’s purpose include the following:

- Collective work on government priorities
- The sharing of promising practices and the identification of new initiatives
- Communication about the role of the regulator to the public and stakeholders
- Ongoing support for existing Colleges
- Mentoring for new regulators
- Development of tools and materials to support the healthcare system in regulatory areas
- Stakeholder collaboration and project participation
- Delivery of education to support key College function areas

FOCUSING ON GOVERNANCE



Kevin McCarthy, the College of Nurses of Ontario’s Director, Strategy, presenting at FHRCO’s Governance Workshop on December 3, 2018. Read more about the session on page 3.

Executive Committee
Members:

Kevin Taylor, President
(effective October 10,
2018; previous Vice-
President)

Shenda Tanchak,
President (until
September 25, 2018)

Elinor Larney, Vice-
President (effective
October 10, 2018)

Judy Rigby, Treasurer

Jo-Ann Willson, Member

Linda Gough, Past
President

PRESIDENT & EXECUTIVE COMMITTEE REPORT

This report covers the Federation’s corporate year from the May 4, 2018, Annual Meeting to the April 25, 2019, Annual Meeting.

FOCUSING ON PRIORITIES AND PLANNING

In December 2018, the Federation’s Board of Directors participated in a facilitated discussion related to the organization’s purpose and priorities, recognizing the changing regulatory landscape and promising practices in organizational governance.

A confirmation of issues opened the day followed by an identification of FHRCO’s critical functions that would address those issues. Prioritization was the next step, along with an agreement to keep the conversation going. Outcomes from those discussions are anticipated to come to fruition in the 2019-2020 year.



(Back row, from left): Brian O’Riordan (CASLPO), Anne Coghlan (CNO), Lisa Taylor (CDHO), Fazal Khan (College of Opticians of Ontario), Andrew Parr (CONO), Basil Ziv (CHO), Rod Hamilton (College of Physiotherapists of Ontario), Glenn Pettifer (College of Denturists of Ontario), Corinne Flitton (CMTO), Kelly Dobbin (CMO), Melisse Willems (College of Dietitians of Ontario), Allan Mak (CTCMPAO)

(Front row, from left): Jo-Ann Willson (CCO), Brenda Kritzer (COKO), Linda Gough (CMRTO), Kevin Taylor (CRTO), Elinor Larney (COTO), Maureen Boon for Nancy Whitmore (CPSO), Paula Garshowitz (College of Optometrists of Ontario)

(Regrets): Irwin Fefergrad (RCDSO), Nancy Lum-Wilson (OCP), Rick Morris (College of Psychologists of Ontario), Judy Rigby (CDTO), Felicia Smith (COCOO), Kathy Wilkie (CMLTO)

PRESIDENT & EXECUTIVE COMMITTEE REPORT (CONT.)

OFFICE OF THE FAIRNESS COMMISSIONER OF ONTARIO (OFC)

Elinor Larney continues to serve as FHRCO's member on the OFC's Stakeholder Engagement Committee, serving as a conduit for information-sharing. The Federation met with the Fairness Commissioner to hear more about the Office and its work related to Colleges' French-language requirements in their registration processes.

COLLEGE GOVERNANCE

A priority for the Federation continues to be helping Colleges stay informed and be prepared for changes in the area of College governance. A FHRCO Governance Session was provided on December 3, 2018, featuring Anne Coghlan, Executive Director and CEO of CNO, with Kevin McCarthy, Director, Strategy, who presented information on CNO's "Governance Vision 2020". Richard Steinecke, Steinecke Maciura LeBlanc and FHRCO legal counsel, then provided some "Perspectives on Governance". There were 70 in attendance; 20 Colleges were represented.

FHRCO INTERVENES IN IMPORTANT CASES

The Federation continues to take 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. FHRCO had received intervenor status in the case *Abdul v Ontario College of Pharmacists*. The case was heard on May 8, 2018, with an outcome positive for health profession regulation in Ontario.

MEETINGS WITH KEY STAKEHOLDERS AND THE FEDERATION BOARD OF DIRECTORS/EXECUTIVE COMMITTEE DURING 2018-2019 YEAR:

- Deanna Williams following her work on recommendations for the Ministry of Health and Long-Term Care (MOHLTC) related to patient sexual abuse
- MOHLTC Health Workforce Planning and Regulatory Affairs Division, providing general updates:
 - Denise Cole, Assistant Deputy Minister (ADM), with Lorraine de Braganca, A/Executive Assistant to the ADM
 - Health Workforce Regulatory Oversight Branch:
 - Allison Henry, Director
 - Stephen Cheng, Manager, Strategic Regulatory Policy Unit
 - Thomas Custers, Manager, Regulatory Oversight and Performance Unit, focusing on the College Performance Measurement Framework Project
 - Marsha Pinto, Manager, Regulatory Design and Implementation Unit
 - Doug Ross, Sr. Policy Analyst, Regulatory Oversight and Performance Unit
- Ontario's Fairness Commissioner Grant Jameson with Kim Bergeron, Senior Program Advisor (see above)
- Office of the Patient Ombudsman: Craig Thompson, Executive Director, to learn more about the Office and how Colleges and the Patient Ombudsman relate in Ontario's healthcare system

FHRCO:
Fostering
Healthy
Regulatory
Collaboration
 in
Ontario

INVESTIGATIONS AND HEARINGS NETWORK

Co-Chairs (2018)

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

Co-Chairs (2019)

- Andrea Lowes (CDHO)
- Amy Stein (College of Opticians of Ontario)

The Investigations and Hearings Network, open to all Federation members staff involved in investigations and hearings, provides Federation member staff with opportunities for regular meetings and online resources to share information and practice questions.

A Symposium was held on June 22nd that focused on the Health Professions Appeal and Review Board (HPARB), with presentations by Christy Hackney, Registrar & Senior Manager of the Health Boards Secretariat, and Taivi Lobu, Vice Chair, HPARB, along with Alexandra Wilbee of WeirFoulds, and Nicole Zweirs (CPSO) and Wendy Waterhouse (RCDSO).

A second Symposium was held on November 27th, featuring Bonni Ellis who presented on expert witnesses. The event was hosted by OCP and had 30 attendees from 15 Colleges.

EDUCATIONAL OPPORTUNITIES

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

- Governance Workshop (*first held in 2018*)
- Education for Health Professional Regulators of Ontario (EHPRO) (*all aspects of the RHPA available online for members*)
- Training Videos about Patient Sexual Abuse (*available online for members*)
- Discipline Orientation Workshops (*see p.6 for more information*)
- Investigations and Hearings Symposia (*see above for more information*)
- Communications Conferences (*see p.5 for more information*)

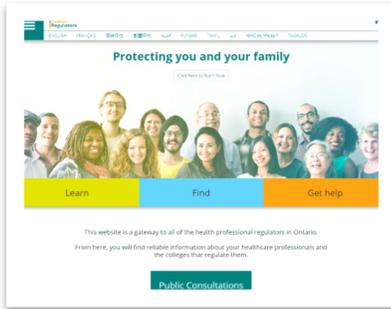
FHRCO MEMBER STAFF KEY AREA NETWORKS

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

- | | |
|-------------------------------|----------------------|
| • Communications | • Practice Advisors |
| • Corporate Services | • Quality Assurance |
| • Investigations and Hearings | • Records Management |
| • Policy | • Registration |

COMMUNICATIONS COMMITTEE

FHRCO's Communications Committee, led by Monique Poirier, continues to provide for opportunities to share expertise, focusing on support for the output of the Public Engagement Program -



www.ontariohealthregulators.on.ca (OHR), the public-facing website that provides links to Colleges, specifically their public registers, information about complaints, and public consultations. This initiative is consistent with Colleges' duty to promote and enhance relations between Colleges and the public.

Public outreach through "OHR" was a focus for the Committee with the power of Google ads and boosted Facebook postings harnessed to promote the site over the past year. Additionally, all members of provincial parliament received letters, letting them know about OHR so that they could share information with their constituents. Directly interacting with the public, many Communications Committee members and Practice Advisors from their College teams also staffed a booth at the Zoomer Show on October 27 & 28, 2019. The success of that event led to confirmation of show attendance in 2019 - October 24 & 25. (See CASLPO's Facebook post from the event, right.)



Another key event for the Communications Committee was the Communications Network-wide annual Communicators' Day, held on November 23rd and hosted by CPSO. The Day included presentations from the College of Social Workers and Social Service Workers, and The Change Foundation. This opportunity for College communications staff to interact and learn from others' experiences was well-received, with 35 attending from 23 Colleges. Thanks to Conference Planning Subcommittee chair Mark Sampson (CPSO) for leading this event.

Communications Committee Members:

- Monique Poirier (College of Dietitians of Ontario), Chair
- Angie Brennan (CMTO)
- Lisa Gibson (CASLPO)
- Margaret Goulding (CMLTO)
- Kristi Green (CNO)
- Sabina Hikel for Shauna Grey (CRPO)
- Victoria Marshall (CMO) through February 14, 2019 meeting
- Lisa Pretty (College of Physiotherapists of Ontario)
- Mark Sampson (CPSO)
- Nancy Stevenson (COTO)

Communicators' Day Planning Subcommittee Members:

- Mark Sampson (CPSO), Chair
- Angelo Avecillas (RCDSO)
- Maria Feldman (CMTO)
- Tova Wallace (College of Physiotherapists of Ontario)

DISCIPLINE ORIENTATION COMMITTEE

Discipline Orientation Committee Members:

- Tina Langlois (CMRTO), Chair
- Eyal Birenberg (College of Optometrists of Ontario)
- Aoife Coghlan (COTO)
- Genevieve Plummer (OCP)
- Ravi Prathivathi (CNO)

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.

2018 Workshops:

May 25 – Basic Program: 34 registrants (13 Colleges represented)

November 1 & 2 – Basic and Advanced Programs: 22 Basic (13 Colleges) and 40 Advanced (13 Colleges)

Future Discipline Orientation Program Dates for 2019:

Basic Sessions: May 3 & October 26

Advanced Session: October 27

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. The dedication of the many 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 and Deborah Cohen (College of Dietitians of Ontario) (Chair)
- Heather Binkle and Sandra Carter (COTO)
- Alexandra Carling, Samidha Joglekar, and Sarah Chapman Jay (CASLPO)
- Barry Gang (College of Psychologists of Ontario)
- Téjia Bain (College of Physiotherapists of Ontario)
- Andrea Lowes (CDHO)
- Lene Marttinen (CRPO)
- Justin Rafton and 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. A survey of College members was conducted to help determine next steps.

Work continues by subgroups who are developing information to be shared with College members regarding two identified issues: capacity to consent and barriers to obtaining consent.

TRANSITIONS

FEDERATION MEMBERS:

- **Dr. Nancy Whitmore** assumed the role of Registrar/CEO of CPSO on June 4, 2018. **Dan Faulkner** had served as Interim Registrar following the retirement of **Dr. Rocco Gerace** on February 28, 2018.
- **Rod Hamilton** was named Registrar of the College of Physiotherapists of Ontario, effective December 18, 2018. Rod had served as Interim Registrar as of September 25, 2018, replacing **Shenda Tanchak**, Registrar & CEO.
- **Stamatis Kefalianos** was appointed Acting Registrar of the CTCMPAO on April 9, 2019, replacing Registrar & CEO **Allan Mak**.
- **Dr. Paula Garshowitz** announced her retirement as the College of Optometrists of Ontario's Registrar, effective the end of April 2019; Paula will be supporting the transition for the new Registrar into the summer 2019.

EXTERNAL STAKEHOLDERS:

- **Hon. Christine Elliott** was appointed Minister of Health and Long-Term Care on June 29, 2018. **Dr. Helena Jaczek** had served as Minister until the provincial election on June 7, 2018.
- **Helen Angus** was appointed Deputy Minister of Health and Long-Term care on June 29, 2018,
- **Patrick Dicerni** was appointed Assistant Deputy Minister of Health and Long-Term Care, announced on October 18, 2018, replacing **Denise Cole** who was assigned to lead an "expedited review of legislation and regulation to identify impediments to more effective and efficient operations of the health system and the Ministry in its oversight role."
- **Grant Jameson**, Fairness Commissioner, completed his term in that role on April 4, 2019.



Fostering Healthy Regulatory Collaboration in Ontario

FHRCO ONLINE RESOURCES

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

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 Health
Regulatory Colleges of
Ontario (FHRCO)

Suite 301 - 396 Osborne St
PO Box 244
Beaverton ON L0K 1A0

Phone: 416-493-4076

Fax: 1-866-814-6456

Email: info@regulatedhealthprofessions.on.ca

www.regulatedhealthprofessions.on.ca

**College of Optometrists of Ontario Report
June 2019 ARBO Annual Meeting
St. Louis, MO**

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 2019 (* Executive Committee member):

Elected Councillors (Optometrists)

Dr. Linda Chan, Greater Toronto Area District
Dr. Bill Chisholm, Northern District
Dr. Pooya Hemami*, President, Provincial District
Dr. Lisa Christian, Academic District
Dr. Richard Kniaziew*, Vice-President, Western District
Dr. Annie Miccuci, Provincial District
Dr. Kamy Morcos, Eastern District
Dr. Christopher Nicol, Provincial District
Dr. Areef Nurani, Greater Toronto Area District
Dr. Patrick Quaid*, Treasurer, Provincial District

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

Ms. Maureen Chesney
Mr. Bashar Kassir
Mr. Howard Kennedy (Appointed January 2019)
Mr. Hsien Ping (Albert) Liang*
Ms. Luisa Morrone (Appointment ends June 2019)
Ms. Ellen Pekilis
Mr. Narendra Shah (Appointed April 2019)
Mr. John Van Bastelaar*

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. Two

teleconferences were held in 2018. Council held a governance training day on April 10, 2018 with further training scheduled for June 25, 2019.

Complaints and Discipline: The Inquiries, Complaints and Reports Committee received 71 new complaints and 10 Registrar's Report were initiated in 2018. The Committee issued 75 decisions in 2018; some of these cases had been filed in 2017. Five (5) decisions were appealed to the Health Professions Appeal and Review Board with decisions still outstanding. In 2018, 4 cases were referred to the Discipline Committee by the Inquiries Complaints and Reports Committee. Six discipline hearings were held in 2018 and so far in 2019, three hearings have been held. All decisions of the Discipline Committee can be found [here](#) on the College website.

Quality Assurance Program:

Continuing Education: The current three-year CE 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 2018, 107 registrants were randomly selected. As in the past, the majority of registrants were found to be meeting or exceeding the standard of practice. Four practitioners were required to undergo a complete record assessment and remediation, in the form of coaching or courses, where the need was identified. Two optometrists decided to resign or retire and did not complete the assessment.

New Legislation or Regulations Enacted: None since last reporting period.

Statistics

- Number of new registrants in 2018: 143
- Total number of registrants: 2514, including 2434 practising
- All optometrists are authorized to use diagnostic drugs
- Number who are not authorized to prescribe drugs: 87

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

- Annual membership fee (active): \$945
- Annual membership (inactive): \$472.50
- Application fees: \$420 plus the annual membership fee pro-rated to the number of months remaining in the year once the registration process is completed.
- Licence renewal period: Annually

Scope of Practice:

- Oral medication authority: Yes, but limited to oral drugs listed in Schedule 1 to the [Designated Drugs and Standards of Practice Regulation](#).

- Glaucoma treatment authority: Yes, but also limited. Optometrists can independently treat uncomplicated primary open-angle glaucoma. Other forms of glaucoma may be co-managed with a physician while others must be referred to a physician or hospital. Details are found in the regulation linked above.
- Oral Steroid authority: No
- Injection Authority: No
- Lasers: No

Transition: The Council looks forward to welcoming its new registrar and will engage in a strategic planning exercise in 2019 to set a new roadmap for the College.

Update on Injunction against Essilor/Clearly:

In an effort to protect Ontario patients, the College of Optometrists of Ontario and the College of Opticians of Ontario initiated a legal proceeding against Essilor Group of Canada Inc./Clearly. The Colleges sought an injunction that would prohibit Clearly from dispensing prescription eyeglasses and contact lenses online to the Ontario public, without following Ontario legislation. On January 11, 2018, the Superior Court of Justice for Ontario granted the injunction. Clearly sought an appeal of the decision, which was heard on September 21, 2018. On April 4, 2019, the Court of Appeal for Ontario released its [decision](#) granting Clearly’s appeal. Further information on this court action is archived on the [College website](#).

The Colleges firmly believe that the Internet can be an effective tool for providing vision care. We have already established protocols to support how Ontario optometrists and opticians use the Internet to care for their patients and regularly review our professional standards of practice to ensure they are keeping pace with changes in technologies and other innovations.

College Website: www.collegeoptom.on.ca

Three current issues of greatest concern to your Board

1. Increased scrutiny by the media and government regarding College processes, including proposed changes in the way Colleges are governed by optometrists and public appointees.
2. Tele-health, online dispensing and ensuring public protection in a disruptive and changing technological marketplace.
3. Ensuring the availability of a valid, fair and defensible entry-to-practice in both official languages (English and French).

Report Prepared By: Paula Garshowitz, OD, Registrar
pgarshowitz@collegeoptom.on.ca



FAIRNESS COMMISSIONER

COMMISSAIRE À L'ÉQUITÉ

OFFICE OF THE FAIRNESS COMMISSIONER
BUREAU DU COMMISSAIRE À L'ÉQUITÉ
595 rue Bay St., Suite/Bureau 1201, Toronto ON M7A 2B4

MEMORANDUM Regulated Professions, Health Regulatory Colleges, and
TO: Compulsory Trades (Ontario)

André Gariépy, Commissaire à l'admission aux
professions, Office des professions du Québec
Ximena Munoz, Manitoba Fairness Commissioner
Fair Registration Practices Act Review Officer, Fair
Registration Practices Act Review Office

Deputy Attorney General, Deputy Minister of
Agriculture, Food and Rural Affairs, Deputy Minister of
Children, Community and Social Services, Deputy
Minister of Education, Deputy Minister of Energy,
Northern Development and Mines, Deputy Minister of
Health and Long-Term Care, Deputy Minister of Natural
Resources and Forestry (Ontario)

FROM: George Zegarac
Interim Fairness Commissioner

DATE: May 14, 2019

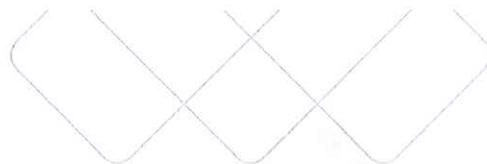
SUBJECT: Appointment of Interim Fairness Commissioner

This letter is to announce that I will serve as the interim Fairness Commissioner for a period of one year or until the new Fairness Commissioner is appointed. I am honoured to assume this important role to serve Ontarians.

In this capacity, I will continue to promote transparency, objectivity, impartiality and fairness in Ontario's regulated professions and compulsory trades. I am currently serving as Deputy Minister of the Ministry of Training, Colleges and Universities, and I will continue in this role during my time as the Fairness Commissioner.

The Office of the Fairness Commissioner's staff and I are looking forward to working with you.

An agency of the Government of Ontario
Un organisme du gouvernement de l'Ontario



I would like to express my sincere thanks to outgoing Fairness Commissioner Grant Jameson.

Sincerely,

A handwritten signature in blue ink that reads "George Zegarac". The signature is written in a cursive style.

George Zegarac
Interim Fairness Commissioner

Public Health
277 Victoria Street
5th Floor
Toronto, Ontario M5B 1W2**Tel:** 416-338-7820
Fax: 416-392-0713
Eileen.deVilla@toronto.ca
toronto.ca/health

May 17, 2019

Dear Colleague:

By now, you will have seen and heard media coverage of the 2019 provincial budget, and the government's intention to reduce its share of public health funding across Ontario. Given your role as a key partner of Toronto Public Health (TPH), I want to share with you what the government's proposed funding cuts mean for local public health and to clarify what we know so far.

On April 18, 2019, following the release of the provincial budget, TPH was officially informed of the Province's decision to reduce its share of the funding for public health. Toronto Public Health was also informed that Toronto will be receiving less provincial funding than any other health unit in Ontario. Effective April 1, 2019, funding for public health in Toronto will change over the next three years from the current funding arrangement of 75% provincial and 25% municipal to the following:

- 60% provincial/40% municipal in 2019-20;
- 60% provincial/ 40% municipal in 2020/21; and
- 50% provincial/ 50% municipal in 2021-22.

In addition, TPH programs that have been 100% funded by the Ministry of Health and Long-Term Care will now be cost-shared, as per the above schedule.

These changes will have significant impacts on the health of Toronto residents, and we were extremely disappointed to hear this news. While the Province has indicated they will consider one-time funding this year to help mitigate these financial impacts, the fact remains that the change to our funding in 2019 requires an additional \$25 million (or 58%) increase in the City of Toronto's contribution, to maintain the budget for TPH approved by City Council in March 2019. If the City is unable to provide the \$25 million (for the period of April to December 2019), it will result in an overall reduction of \$65 million in funding for TPH. This is because the Province only contributes its (60%) portion relative to the level of funding the City contributes. Most recently, the Province informed us that effective April 1, 2020, our total annual funding envelope would be reduced by a further \$20 million. This reduction is expected to be addressed *"through regionalization and governance changes to achieve economies of scale, streamlined back-office functions and better coordinated action by public health units."* We have also been advised that despite the funding changes, TPH must maintain current service levels and provincially-mandated accountabilities.

Since the budget announcement, I have been working actively with senior City staff, our Board of Health and our public health colleagues across the province, all of whom share our concerns. We are looking at ways to mitigate the risk to our programs, services, partnerships, and to the dedicated staff committed to keeping our city healthy, safe and strong every day. We will continue to advocate for a strong, evidence-based public health system, and to remind our provincial colleagues that public health is an investment in our people and in our communities. For example, for every \$1 invested in immunization, the health care system saves \$16. For every \$1 invested in tobacco prevention, there are \$20 worth of savings in health care costs.

In addition to changes in funding, the Province also intends to reduce the number of public health units from 35 to 10 by creating 10 “regional public health entities” and 10 regional boards of health, by April 2020. We have been informed that one of the 10 will be a Toronto regional public health entity with an autonomous board of health, but we have no further details on the structure or governance model. While the Province has indicated its intent to engage public health units to discuss the planned changes, our concerns are that this change may further impact our programs, services, and partnerships. Details on how and when the Province intends to engage have not yet been provided.

I would like to thank you for your ongoing support and commitment to public health. We greatly value our partnerships and collaborations with you toward a shared goal of improving the health and well-being of Torontonians across our city. I will update you further once we have more details on the specific impacts to TPH, and by association to our partnerships with you.

Sincerely,

A handwritten signature in cursive script, appearing to read "Eileen".

Dr. Eileen de Villa
Medical Officer of Health

5 / MOTIONS

5. Motions Brought Forward from Committees

a. Registration Committee

- That Council approve the development of a national competency profile to be jointly developed between the College and Touchstone Institute with input from optometrists from every Canadian province as part of the continued research and investigation into an alternate Canadian entry-to-practice exam at a projected cost of approximately \$45,000.

b. Patient Relations Committee

- To recommend to Council that the College offer the e-Learning Module titled “Eye Consent” to all members of the College at no cost, as an incentive to participate.

c. Governance HR Committee

- To appoint, effective immediately, Mr. Howard Kennedy to the Quality Assurance Committee-Clinical Practice Panel, Ms. Ellen Pekilis to the Patient Relations Committee and Dr. Lisa Christian to the Discipline Committee.
- To approve circulation of amendments to the College By-laws aligning with governance reform recommendations approved by Council in 2018/2019.

d. Audit/Finance/Risk Committee

- That Council approve the Reporting Information to Outside Agencies and Whistleblower policies. The Reporting Information to Outside Agencies and Whistleblower policy is to be circulated to College members following Council approval.

e. Quality Assurance Committee

i. Clinical Practice Panel

- That Council approve revisions to OPR 7.11 Patients with Dry Eye Disease.
- That Council approve revisions to the policy *Practice Locations – Reporting Requirements*.

Motions to Council

Name of Committee: Registration Committee

Date of Submission: June 10, 2019

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

Proposed Motion:

<p>Recommendation no. 1 to Council and Rationale</p>	<p>That Council approve the development of a national competency profile to be jointly developed between the College and Touchstone Institute with input from optometrists from every Canadian province as part of the continued research and investigation into an alternate Canadian entry-to-practice exam at a projected cost of approximately \$45,000.</p>
<p>The Issue</p>	<p>Applicants for registration as optometrists in Ontario are required to successfully complete a standards assessment examination set as approved by the College, as one of the requirements for registration. Standards assessment examinations are reviewed by the Registration Committee and approved by the College Council on an annual basis. One of these standards assessment examinations currently approved by the College is the examination administered by the Optometry Examining Board of Canada (OEBC).</p> <p>OEBC (previously known as CEO-ECO) developed a national competency profile in 2015. All optometric regulatory colleges participated in this project and the product was used to produce an updated blueprint of the CEO-ECO exam for the use of all the provinces. OEBC has a copyright on the competency profile and in any case, the profile is outdated and a new one needs to be developed.</p> <p>The Registration Committee seeks Council’s support for the development of a new competency profile with the assistance of Touchstone Institute and asks Council to support the project financially. In order for the competency profile to be a national profile, representatives from each region of the country would be engaged in the development of the profile.</p>
<p>Background</p>	<p>Paragraph 7 of s. 2(1) of the Registration Regulation (837/93) as amended under the <i>Optometry Act, 1991</i>, reads as follows:</p> <p>“The applicant must meet the criteria set out in one of the following subparagraphs:</p> <p style="padding-left: 40px;">i. successful completion, not more than three years before applying for registration, of the standards assessment examinations set or approved by the College...”</p>

	<p>“Assessment” was identified as the number one area of importance by respondents in the survey administered by OEBC that led to the competency profile developed in 2015 (source: CJO RCO, volume 80, Number 2, OEBC article). Most of the survey respondents were from Ontario. Ontario had the highest return rate of the survey questionnaire. In the survey, “assessment” was identified as the number one area of importance according to respondents. “Assessment” was jointly number one in the blueprint weightings.</p> <p>The development of a new national competency profile between the College and Touchstone Institute with input from members from every Canadian province, will also be accompanied by an examination of how the assessment of skills, knowledge, and attitude ought to be conducted perhaps at an additional cost. Whereas optometry schools accredited by the Accreditation Council on Optometric Education (ACOE) may have exit exams, the standards of practice vary from province to province, and from state to state. Optometry schools should not be burdened with the role of ‘gate keeper’.</p> <p>Touchstone Institute has a well-established reputation as an examining body among health regulatory colleges across Canada. It has been implementing the Internationally Graduated Optometrist Evaluating Examination for the College and the Federation of Optometric Regulatory Authorities of Canada since 2015. It has extensive experience in standard-setting and continuously consults with the College and seeks input about its processes. Please refer to the enclosed document on “Competencies for Optometry” provided by Touchstone Institute.</p>
Analysis, including impact on budget	It has been almost five years since the last national competency profile was developed and it is time to update it. The College currently has a reserve fund for research into an alternate Canadian entry-to-practice exam that could be used towards this project.
Options (are there alternatives)	As the current competency profile is outdated, a new profile needs to be developed for any proposed entry-to-practice examination.
Implications/expectations if approved	The College and other Canadian provinces would share the benefit of an updated national competency profile.
Implications/potential consequences if not approved	The College and other Canadian provinces would not be able to share the benefit of an updated national competency profile.

Competencies for Optometry

Competence is the fundamental value of professional systems of governance. It is the essential qualification required of a person intending to practise activities regulated by the College of Optometrists of Ontario. Documenting the required competencies is essential to determining standards required to ensure The College's mandate to protect the public.

The College would benefit from having a current and freely available document that reflects today's Optometric practice. Touchstone Institute has considerable experience working with professional competencies in many disciplines, such as medicine, optometry, nursing and dietetics to produce educational content and high-stakes examinations. We facilitated the development of the competency profile for the Canadian Fertility and Andrology Society. This document then served as our foundation for the development of their bilingual certification exam. Our work on the creation and application of competencies has always been profession led, with our expertise being in the design and facilitation of valid and reliable development methodologies.

Rationale for a 2019 Competency Document

The *National Competency Profile for Entry-Level Optometry* was used to develop the blue-print for the Internationally Graduated Optometrist Evaluating Examination (IGOEE). Permission was granted for our use of this framework by the examining body that commissioned this competency profile (CEO/ECO, now the OEBC). That document is proprietary and may not reflect the current range and scope of competencies demanded of today's optometrists.

A new competency framework can be developed by working collaboratively with Optometric Subject Matter Experts (SMEs) to map key domains and relevant competencies. A resulting *2019 Competencies for Optometry* document will require formal endorsement by The College, and if developed with pan-Canadian collaboration could establish a common standard across the country that is current and accessible.

Building the Competency Profile for Optometry

Developmental work would start with a review of existing competency documents for Optometry and other health professions that are used to support both educational programming and assessment. For most health professions competency domains would be expected to have similarities, as the examples show in Figure 1. The selection of domains creates the frame that can then be used to structure assessments and other resources for the profession.

This important process allows the profession the opportunity to clearly establish what is important, and to ensure that all domains of professional activity are represented.

DEFINING COMPETENCE

...competence is defined as a means of shedding light on the way in which health professionals conceptualize our role in society, our relationships to other professions, and our *professionalization project*.

From *The Question of Competence* (2012), by Brian D. Hodges and Lorelei Lingard

Dr. Hodges is a member of the Touchstone Institute Board of Directors

Touchstone Institute has expertise in methodologies that employ profession specific experts for both evaluative and formative competency design and application. These SMEs are selected for their knowledge of the roles, demands, expectations, knowledge and skills required for safe practice. In our experience, working with groups of SMEs that have a range of experience and backgrounds produces the best outcomes. We would suggest recruitment of optometrists with academic experience alongside those with active practices that vary in practice type, location, and jurisdiction.

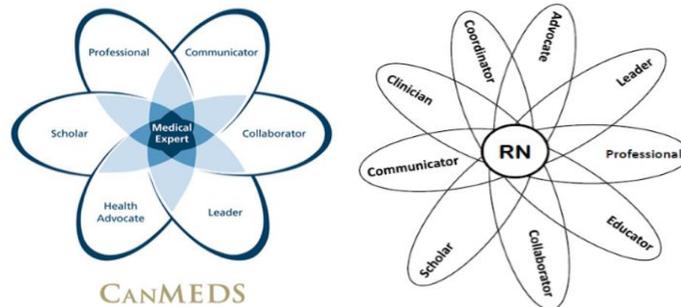


Figure 1: Competency domains for medicine and nursing.

Once the domains are defined, SMEs will identify a set of exemplars that demonstrate competence for that domain. This set must be comprehensive enough to cover the breadth of the domain without being exhaustive. The result will be a competency document that will serve as a foundation for the profession.

Application of the Competency Document

The competency framework adopted serves as an organizing principle that can be used to guide educational curriculum, exam development, remediation, and quality assurance. It is also a statement about the values of the profession, and its obligations to the public.

In the development of exams at Touchstone Institute, we review domains with SMEs and establish the relative importance of the domains to the purpose of the exam. Some domains will be considered more important, and will be accorded more weight in the creation of the exam “blueprint.” The blueprint is the translation of the competency document into a plan for an exam. SMEs working on the blueprint determine which competencies are best tested by questionnaire or through observation of performance (OSCE). They will also identify the most relevant competency statements to meet their purpose as not all competencies can be assessed in a time limited exam. Touchstone Institute guides the creation of content and scoring tools to ensure valid interpretation of assessment data. Our psychometric unit is experienced at working with clients to understand their needs and provide meaningful and accurate reporting.

A Proposal for New and Current Competencies for Optometry

Touchstone Institute is ready to work with The College and other optometric regulators to run workshops with representative optometry SMEs that will yield a competency framework and competency statements that is comprehensive, current, and relevant to your needs. A major contributor to costs involved is the remuneration and expenses for participating optometrists. We estimate that this work will involve at least 2 workshops that will each last 2 days, and will require considerable off-line engagement. The resulting document will be translated into French. Once work starts we expect about 3 months for development, and a further 3 months to finalize documentation and get approvals. Touchstone Institute estimates this work can be completed for about \$45,000.

Motion to Council

Name of committee: Patient Relations Committee

Date of submission: May 30, 2019

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

Proposed motion:

To recommend to Council that the College offer the e-Learning module *Eye Consent* to all members of the College at no cost, as an incentive to participate.

Recommendation to Council and Rationale	
The Issue	The Patient Relations Committee recommends to Council that the College offer the e-Learning module <i>Eye Consent</i> to all members of the College at no cost, as an incentive to participate.
Background	<p>At the October 2018 meeting, the Committee reviewed the presentation <i>Eye Consent – The Optometrist’s Guide to Consent</i>, given by the College Registrar at the April 2018 OAO Symposium. The presentation addressed the requirements of all health-care providers, including optometrists, to obtain informed consent from patients, including consent to treatment, collection of personal health information, fees related to services, etc. The presentation also provided practical information and examples about the definition of informed consent, why consent is important, and when and how to document consent. The Committee decided to develop an e-Learning module based on the presentation.</p> <p>Council approved funding for this development at their January Council meeting. Council intended to offer the module as a continuing education credit for members.</p> <p>The Committee reviewed an initial version of the module at their last meeting. The project is now nearing completion, and the final version should “go live” within the next couple months on the College’s online member platform.</p>
Analysis, including impact on budget	<p>The Committee strongly believes that making this information available to all College members, to complete on a voluntary basis, would benefit both the members and the public. The Committee recommends the addition of the one-hour course to the College’s online member platform and that members receive a continuing education credit for completion. Furthermore, offering the module at no cost would provide an additional incentive for members to participate.</p> <p>Completion of this module will <u>not</u> be mandatory for all members, as was the previous <i>Professional, Ethical Decision Making and the Prevention of Sexual Abuse of Patients</i> module. Instead, the goal for the <i>Eye Consent</i></p>

	<p>module is to be the first in a series of modules created by the College as the College begins to build a library of courses available to members for continuing education credits.</p> <p>In terms of budgetary impact, Council approved a new line item on “E-learning module development” in the 2019 budget. The cost of this module falls within that line amount. The firm-fixed price to develop the e-Learning module was quoted as \$19,900 (before HST).</p>
Options (are there alternatives)	<p>In the past, similar College-run continuing education sessions and courses were priced using a cost-recovery model. For example, a one-hour online COPE-approved course is usually priced at \$25 USD (\$34 CAD).</p> <p>For reference, the College has offered continuing education (home study) programs that were worth six continuing education credit hours at the cost of \$101.70 for each online course.</p>
Implications/expectations if approved	<p>The College has committed to providing information and tools to assist and educate the College members. This includes developing a library of e-Learning modules for the benefit of the College members.</p> <p>Offering this course on a voluntary basis, at no cost to members and worth continuing education credit hours may act as an incentive and emphasize the importance of the content and material.</p>
Implications/potential consequences if not approved	<p>The module will be eligible for a continuing education credit and priced at a cost-recovery model.</p> <p>A cost associated with taking this course may act as a deterrent for some members to participate. The College will miss the opportunity to inform and educate the College members about this important aspect of their practice.</p>

Motion to Council

Name of committee: Governance/HR Committee

Date of submission: June 14, 2019

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

Proposed motion:

To appoint, effective immediately, Mr. Howard Kennedy to the Quality Assurance Committee-Clinical Practice Panel, Ms. Ellen Pekilis to the Patient Relations Committee and Dr. Lisa Christian to the Discipline Committee.

Recommendation to Council and Rationale	
The Issue	The Governance/HR Committee recommends the appointment of Mr. Howard Kennedy to the Quality Assurance Committee-Clinical Practice Panel, Ms. Ellen Pekilis to the Patient Relations Committee and Dr. Lisa Christian to the Discipline Committee.
Background	<p>On June 11, 2019, the appointment of Ms. Luisa Morrone concluded. Vacancies have been created on Council and on committees to which she was appointed.</p> <p>Ms. Morrone sat on four committees: Discipline Committee, ICRC, Patient Relations Committee and Quality Assurance Committee – Clinical Practice Panel.</p> <p>As per their terms of reference, the Governance/HR Committee has made recommendations to fill these vacancies in order for the committees to remain constituted. At their June 11 meeting, the Executive Committee passed a motion to appoint Mr. Narendra Shah to fill the vacancy on the ICRC in order to ensure that committee was constituted in the interim period. The remaining recommendations are included in this motion.</p> <p>Dr. Lisa Christian was also recently elected (via a by-election) for the vacant District 6 – Academic seat. As per Part 14.05(1), all elected Council members who are not members of the ICRC will be placed on the Discipline Committee.</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)	<p>Council may direct the Committee to consider other recommendations.</p> <p>Council has the option of leaving these positions vacant until January when new committee appointments are made, however these committees would not be constituted pursuant to the College By-laws.</p>
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 will not be fully constituted and have the potential for not fulfilling quorum for upcoming meetings.
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Motion to Council

Name of committee: Governance/HR Committee

Date of submission: June 14, 2019

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

Proposed motion:

To approve circulation of amendments to the College by-laws aligning with governance reform recommendations approved by Council in 2018/2019.

Recommendation to Council and Rationale	
The Issue	The Governance/HR Committee recommends the circulation to College registrants and stakeholders for 60 days proposed amendments to the College by-laws aligning with governance reform recommendations approved by Council in 2018/2019.
Background	<p>The College undertook a review of its governance in late 2017. During 2018, Council approved a series of changes to its governance structure. Certain changes have been implemented while others require changes to the by-laws prior to full implementation.</p> <p>Based on the ongoing implementation of these Governance Review recommendations, the College by-laws will have to be updated to reflect the changes approved by Council.</p> <p>Governance changes:</p> <ul style="list-style-type: none"> • Removal of the Treasurer as an Officer of the Executive Committee; this role will be fulfilled by a staff member <i>Parts 3.02, 3.05, 3.08, 5.01, 7.01, 7.02, 7.05, 10.01, 10.04, 14.02</i> • Process for Appointing Committee Members/Chairs to be moved to Council (by way of the Governance/HR committee) and away from Executive <i>Part 8.03</i> • Update duties of the Executive Committee to reflect new terms of reference <i>Part 14.02</i> • Remove inconsistent reference that time spent filling a vacancy does not count towards the 9-year calculation <i>Part 6.06</i> • Change title to reflect Registrar as “chief executive officer” <i>Part 10.04</i> <p>Finance changes:</p> <ul style="list-style-type: none"> • Change authorization of expenses to require only Registrar’s approval for an expenditure already budgeted or for any unbudgeted expenditure under \$25 000 <i>Part 3.08.</i>

	<p>Council approved the following by-law amendment be circulated regarding the Fee section at the January meeting:</p> <ul style="list-style-type: none"> • Set the cost of a Practice Assessment (CRA) to \$2400.00 plus HST <i>Schedule of Fees and Penalties</i> <p>The following administrative changes have been proposed:</p> <ul style="list-style-type: none"> • Add a requirement limiting the date of renewing a corporation application to no more than 30 days before the anniversary or renewal date <i>Part 17.02</i> • Fee for Copying and Providing any Requested Documentation <i>Schedule of Fees and Penalties</i>
<p>Analysis, including impact on budget</p>	<p><i>Circulation of By-law Amendments:</i> It is considered best practice to circulate any proposed amendment to the by-laws to registrants and stakeholders for comment. However, circulation to the registrants is mandatory only for certain amendments, as set out at subsection 94(2) of the Health Professions Procedural Code. These amendments are those that directly affect registrants, such as changes in fees or new information that must be provided to the College. The proposed amendments in this case are not ones that must be circulated for comment and it is therefore at Council’s discretion whether to circulate or not.</p> <p><i>Impact on Budget/College Process:</i> There is no substantial impact on the budget. Only costs are related to circulation for comment, which is done by email.</p> <p>The effect of these changes is not substantial given that these governance changes were approved in principle by Council in 2018/2019 following the College’s governance review. Many of the other changes proposed are administrative in nature.</p>
<p>Options (are there alternatives)</p>	<p>It is an option to only accept certain by-law amendments for circulation/approval or leave the by-laws unchanged and continue with the current model.</p>
<p>Implications/expectations if approved</p>	<p>The new governance model will be in place for the new Council year in 2020. The first phase of the governance review will be completed. This will allow the Committee to begin a more in-depth and fulsome review of the complete by-laws.</p>
<p>Implications/potential consequences if not approved</p>	<p>Council will revisit the governance recommendations and consider next steps moving forward.</p>



COLLEGE OF
Optometrists
OF ONTARIO

College By-laws

Original Effective Date: August 3, 2012

Revised September 4, 2012

Revised January 16, 2015

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Revised September 30, 2015

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Revised Fee Schedule Effective April 20, 2016

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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^{rds} 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, or the 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, or 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, or if it is not an item in the College budget but is below \$25,000, the ÷
- ~~(2)~~ — any expense under \$25,000 requires only the Registrar's approval; and
- ~~(3)~~ (1) any expense of or exceeding \$25,000 requires, in addition to the Registrar, the approval of either the President, or Vice President or Treasurer.

(4)(2) If a College expenditure is not an item in the College budget and is above \$25 000, the appropriate Council delegated 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 1st to December 31st.

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, or 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:

District	Elected Council Members
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 45th 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 1st 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 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, and 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~~Council, ~~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)~~(2) If the ~~Executive Committee~~Council 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^{rds} 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^{rds} 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, and Vice-President ~~and Treasurer~~ are members of the Executive Committee.

- (2) In addition to the President, and 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~~10.04 Registrar and CEO

- (1) The Registrar holds the most senior position on the College's staff and is the chief administrative executive 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.

10.0610.05 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.

10.0710.06 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~~ no more than five ~~persons~~ Council members, including:
 - (i) the President; and
 - (ii) the Vice-President; ~~and~~
~~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 exercise the full powers of Council in all matters of administrative urgency (including cases of unauthorized practice), reporting every action at the next meeting of Council;~~
 - (b) ~~ensuring adherence to the regulatory and statutory obligations of the College, its By laws, policies and protocol~~ work with the President in the preparation and facilitation of effective College Council meetings; ~~and~~
 - (c) ~~preparing materials and the agenda for Council Meetings~~ review and approve the agenda for Council meetings, as prepared by the Registrar in consultation with the President, for clarity and priority, identify items for which Council meetings may be closed to observers in accordance with s. 7(2) of the Health Professions Procedural Code and recommend closure, with rationale, to Council;
 - (d) review selected briefing materials for Council for clarity, comprehensiveness, and planning the appropriate approach for presentations;

- (e) call special meetings of Council;
- (f) provide feedback and support to committees and Council as requested;
- (g) assist Council members, committees and the Registrar in resolving internal conflicts;
- (h) monitor legislation of the federal and provincial government through facilitating College input to relevant legislation proposals and the assessment of relevant new legislation;
- (i) coordinate an effective liaison with external government, private and non-profit sector bodies/agencies, including international, national and provincial optometric and health care organisations;
- (j) coordinate an appropriate public relations program through the development of targeted public communication efforts;
- (k) facilitate the development of protocol agreements with other agencies to maximize inter-agency cooperation to pursue College goals and strategic direction;
- (l) provide guidance and support to the Registrar; and
- ~~(e)~~(m) serve as an informal resource to the Registrar, at their request.

- (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;
 - (i) information about actions taken by other regulatory bodies against the Member;
 - (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 offence;
 - (l) information related to any current charges in respect of a federal, provincial or other offence;
 - (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 federal, provincial or other offences;
 - (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 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 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.
- ~~(1)~~(2) The date of renewing a certificate of authorization shall be no more than 30 days before the anniversary or renewal date.
- ~~(2)~~(3) 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)~~(4) 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)~~(5) 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 licenced or 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) 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) 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 findings of guilt, of which the College is aware, under the *Criminal Code (Canada)* or *Controlled Drugs and Substances Act (Canada)*, 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) the name and address of any optometric practise for which the Member is an employee, contractor or otherwise;
- (7) if applicable, a notation concerning the authorization by the College to prescribe drugs, and the date on which the Member received such authorization;
- (8) each Member's certificate of authorization, including:
 - (a) the name of the corporation; and
 - (b) the date it was issued;
- (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;
- (10) the effective date of resignation of the Member;

- (11) a summary of any current charges against a Member, other than those required by Part 18.02, 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;
- (12) a summary of any currently existing conditions, terms, orders, directions or agreements relating to the custody or release of the Member in provincial, federal or other offence processes, other than those required by Part 18.02, of which the College is aware and that the Registrar believes is relevant to the Member's suitability to practise;
- (13) a summary of any findings of guilt, other than those required by Part 18.02, 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;
- (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;
- (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;
- (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;
- (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;
- (18) where the Member's certificate of registration is reinstated, the effective date of the reinstatement;
- (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;

- (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;
- (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;
- (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.
- (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;
- (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;
- (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;
- (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;
- (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;
- (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.
- (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.
- (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
- (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.

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;
 - (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 3rd day of August 2012

Revised the 4th day of September 2012

Revised the 16th day of January 2015

Revised the 8th day of April 2015

Revised the 30th day of September 2015

Revised the 20th day of January 2016

Fee Schedule Effective the 20th day of April 2016

Fee Schedule Effective the 16th day of January 2017

Revised the 22nd day of June 2017

Revised the 19th of September 2017

Revised the 21st of June 2018

Schedule of Fees and Penalties – effective January 16, 2017
All of the following fees are in Canadian funds and subject to 13% HST.

	Fee
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:	
• when ordered at the same time as the initial certificate	\$11.00
• when ordered some time after ordering the initial certificate	\$26.00
Annual Membership Fee (non-refundable)	\$945.00
Annual Non-Practising Membership Fee (non-refundable)	\$472.50
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 <u>Practice</u> Assessment Fee <u>(CRA)</u>	<u>\$1,7332,400.00</u>
Quality Assurance Short record Assessment Fee (for CE deficient hours):	
• Deficient by 5 hours or less (5 records)	\$1,000.00
• Deficient by more than 5 hours (25 records)	\$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:	
For members and other professionals on profession-related business (e.g., referrals)	\$32.00
For continuing education providers (e.g., UWSO, Vision Institute, University of Toronto)	\$95.00
For any commercial organization	\$315.00
NSF Cheques	\$42.00

Fee for Copying and Providing any Requested Documentation

Actual costs to the College
of providing the copies

Motions to Council

Name of Committee: Audit/ Finance/ Risk Committee

Date of Submission: June 16, 2019

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

Proposed Motion:

Recommendation no. 1 to Council and Rationale	That Council approve the Reporting Information to Outside Agencies and Whistleblower policies. The Reporting Information to Outside Agencies policy is to be circulated to College members following Council approval.
The Issue	The College currently has no Reporting to Outside Agencies policy or a Whistleblower policy (please refer to the enclosed policies). Both policies were contemplated from a risk mitigation perspective.
Background	The Reporting Information to Outside Agencies policy relates to the College's obligation to report information to outside agencies, relating to serious allegations. It was originally developed by the ICRC and was forwarded to the AFR Committee for its review, ahead of a motion to Council. Please refer to the April 3, 2019 memo to the AFR Committee for the Reporting Information to Outside Agencies policy. The Whistleblower policy was developed following a review of other regulatory colleges' policies.
Analysis, including impact on budget	Having policies such as the above in place, will serve to protect the College in a variety of situations. The policies provide clarity to Council, staff, the respective committees, and the public, about the process that ought to be followed in these situations.
Options (are there alternatives)	There is potential risk to the College if the above policies are not approved.
Implications/expectations if approved	The College will be exposed to less risk.
Implications/potential consequences If not approved	The College will be exposed to more risk.

Policy

Type:	College of Optometrists of Ontario		
Name:	Reporting Information to Outside Agencies		
Status:	Draft	Version:	0.5
Date Approved:		Date Revised:	June 14, 2019

Purpose

The purpose of this policy is to outline the circumstances and process in which the College of Optometrists of Ontario (“College”) will report information regarding an optometrist, in the interest of public protection, to outside agencies., These may include, but are not limited to, law enforcement, other professional licensing/regulatory bodies, the Ontario Health Insurance Plan, and insurance companies.

Introduction

Allegations can be raised to the Inquiries, Complaints and Reports Committee (ICRC) of the College, either by way of complaint or other information that comes to the attention of the Registrar, which may provide reasonable and probable grounds that an optometrist has committed act(s) of professional misconduct, is incompetent or incapacitated. Following a review by the ICRC, the allegations may be referred on to the Discipline Committee or Fitness to Practice Committee. Allegations may also be serious enough to warrant further action by outside agencies.

Under section 36 of the [Regulated Health Professions Act, 1991 \(RHPA\)](#), the College is permitted to disclose otherwise confidential information when it is reasonable to believe that doing so may reduce or eliminate a risk of harm to person(s), or for the purpose of aiding the police in an investigation where charges have or likely will result.

In the case where:

- the Registrar is of the opinion that the conduct of the optometrist may be criminal in nature or poses a risk of harm to person(s);
- a referral has been made to the Discipline Committee; or
- a finding has been made by the Discipline Committee relating to such allegations,

this policy will assist in guiding the process of reporting and information disclosure to the relevant agency/institution.

NOTE: A report by the College is not required if the relevant agency/institution is already aware of the optometrist’s conduct in this matter.

Reporting to Police

Upon obtaining information¹ that an optometrist may have committed a criminal act² (including but not limited to crimes of a sexual nature), and where person(s) may be harmed, the ICRC staff will:

- a) suggest to the complainant/reporter³ who provided the information that they may wish to contact the police to file a report;
- b) offer to assist in the filing of such a report to the police; and
- c) advise that the College may file a report to the police. This report may be made:
 - during the investigation;
 - after allegations are referred to the Discipline Committee; or
 - after a finding is made by the Discipline Committee.

During the Investigation

If, during the course of the investigation, the Registrar determines that there are reasonable and probable grounds to believe that an optometrist has committed criminal act(s) and person(s) may be at risk of harm, the College may initiate a report to the police and provide information upon request⁴. The Registrar will notify the ICRC of the filing of such a report as soon as is reasonably possible. The ICRC may also recommend the Registrar file such a report.

After a Referral to the Discipline Committee

If not previously reported, once allegations have been referred to the Discipline Committee and there are reasonable and probable grounds to believe the optometrist has committed criminal act(s), the College will initiate a report to the police and provide information upon request.

After a Finding by the Discipline Committee

If not previously reported, once a finding has been made by the Discipline Committee that relates to a member's possible criminal act(s), the College will initiate a report to the police and provide information upon request.

Reporting to other Professional Licensing/Regulatory Bodies

Complaints and Reports Information Posted to the Public Register

If the ICRC decision includes an order which makes allegations public, pertaining to significant concerns about an optometrist's conduct or practice that can have a direct impact on patient care, patient safety or the public interest if not addressed, the College will initiate a report to any other professional licensing/regulatory bodies of which the optometrist has indicated they are a member, and provide information upon request.

After a Referral to the Discipline Committee

If not previously reported, once allegations have been referred to the Discipline Committee regarding a member that may have committed an act of professional misconduct, the College will initiate a report

¹This information may be received at the initial filing of the complaint, information that has come to the attention of the Registrar or during the course of the respective investigation.

²As per [Criminal Code, 1985](#).

³Referring to the individual that brings information to the attention of the Registrar regarding an optometrist's conduct, competence or capacity.

⁴In such cases, legal assistance should be requested.

to any other professional licensing/regulatory bodies of which the optometrist has indicated they are a member and provide information upon request.

After a Finding by the Discipline Committee

If not previously reported, once a finding has been made by the Discipline Committee regarding a member that has committed an act of professional misconduct, the College will initiate a report to any other professional licensing/regulatory bodies of which the optometrist has indicated they are a member and provide information upon request.

Reporting to Ontario Health Insurance Plan (OHIP)

After a Referral to the Discipline Committee

If allegations have been referred to the Discipline Committee regarding a member that may have committed an act of professional misconduct relating to insured services under OHIP⁵, the College may initiate a report to OHIP and provide information upon request.

After a Finding by the Discipline Committee

If not previously reported, once a finding has been made by the Discipline Committee regarding a member that has committed an act of professional misconduct relating to insured services under OHIP, the College will initiate a report to OHIP and provide information upon request.

Reporting to other Agencies/Institutions

If a finding has been made by the Discipline Committee regarding a member that has committed an act of professional misconduct relating to services provided/paid for by other agencies (i.e. insurance companies), the College may initiate a report to that agency and provide information upon request.

Procedure

At the prescribed or appropriate time, the Registrar will send the report with relevant information to the applicable agency/institution. The report will include a letter outlining the reporting obligations in accordance with the College's policy.

Any report made under this policy will also include:

- the optometrist's name;
- the optometrist's current practice address⁶;
- documents related to relevant allegations⁷;
- any notice of hearing⁸; and
- any written decision of the Discipline Committee⁹ (subject to any publication ban).

⁵O. Reg. 119/94: GENERAL under *Optometry Act, 1991*, Part 1, s31, 32.

⁶As provided to the College by the optometrist via the member database.

⁷Unless the complainant/reporter consents to the inclusion of their name, the documents included in the report must be redacted to not include such information, along with any other information with respect to a person(s) other than the optometrist. As section 36 (1.3) of the *RHPA* prohibits the College from disclosing information concerning anyone other than the relevant health practitioner (i.e. optometrist), the College cannot voluntarily provide complainant/reporter's name and personal information to the police without their consent.

⁸If allegations have been referred to the Discipline Committee.

⁹If a decision has been made by the Discipline Committee.

If applicable and where possible, the College will inform the complainant/reporter that it is submitting the aforementioned report to the respective agency/institution. If consent is not provided, the report will not contain the name/personal information or any other such information relating to a person(s) other than the optometrist. The College will also inform the optometrist when such a report has been submitted unless the Registrar believes it may jeopardize an ongoing investigation.

If the agency/institution contacts the College for further information, the Registrar will determine any further disclosure that the College will make regarding the matter.

Policy

Type:	College of Optometrists of Ontario		
Name:	Whistleblower		
Status:	Draft	Version:	0.2
Date Approved:		Date Revised:	June 14, 2019

Introduction

The College of Optometrists of Ontario (College) believes that effective and meaningful communication at all levels of the organization promotes best practice and excellence. The College is committed to ensuring high ethical standards, whereby all College employees, Council/committee members and/or stakeholders are expected to conduct themselves with honesty, integrity and accountability, while complying with all applicable laws, regulations, by-laws and polices. If, at any time, this commitment is not adhered to or appears in doubt, the College will seek to identify and remedy such situations.

Purpose

The purpose of this policy is to encourage College staff, Council/committee members and/or stakeholder to report information in good faith regarding reportable acts.

Overview

This policy cover incidents where College staff, Council/committee member and/or stakeholder has evidence of and reports a concern about the behaviour or conduct of another staff member, Council/committee member, stakeholder and/or College agent (including external auditors, project consultants). The following are examples of reportable acts:

- Accounting, auditing or other financial reporting misconduct or fraud;
- Receiving gifts from an outside vendor/agent which could create a bias or a conflict of interest;
- Unethical and/or inappropriate conduct, specifically in violation of the [Code of Conduct - Part 11.06 and Code of Ethics - Part 15.02 of the College's by-laws](#);
- Disclosure of confidential College information, in violation of Section 36(1)(a) through 36(1)(j) of the [Regulated Health Professions Act, 1991](#);
- Violation(s) of federal and/or provincial laws that could result in fines or civil damages payable by the College, or that could otherwise harm the College's reputation;
- Danger to the health and safety of staff, Council/committee members, stakeholders and/or the public.

Application

This policy applies to all current and former College staff, Council/committee members, and associated stakeholders of the College.

Guidelines

This policy outlines College staff, Council/committee member and/or stakeholders' responsibilities to observe high standards of personal and business ethics in the conduct of their duties and responsibilities at/with the College.

College staff, Council/committee members and/or stakeholders are encouraged to raise genuine concerns without fear of reprisals or consequences. When a concern is raised in good faith, they take on the role of a 'Whistleblower'. The College makes assurances that a Whistleblower will be protected from retaliation, such as harassment, discrimination or victimization to the greatest extent possible.

However, reporting by a Whistleblower must be made in good faith. A report that is not provided in good faith will be considered a serious offence by the College and the individual will be subject to disciplinary proceedings, including possible sanctions, disqualification or termination from their current role.

Anonymity

The College does not accept anonymous reporting as proper investigation may prove impossible without the opportunity to substantiate allegations by obtaining further facts and information and confirming good faith. It also allows the College to provide appropriate reporting and follow up to both parties involved.

All information received from a Whistleblower shall be treated in a confidential and sensitive manner. The College will notify the Whistleblower and acknowledge receipt of the information regarding a reportable act. In all cases, once the investigation proceeds, the person who is alleged to have committed a Reportable Act will be made aware of the incident and given the opportunity to respond. All reports will be promptly investigated, and appropriate corrective action will be taken if warranted by the investigation. The Whistleblower will be apprised of the outcome of the investigation (subject to compliance with privacy legislation) and any decision made.

Reporting Process

A Whistleblower must communicate the reportable act within a reasonable timeframe after they become aware of the incident. A Whistleblower must submit their report in person or in writing (by mail, fax or email).

A Whistleblower should provide as much detailed information in their report as possible. This should include the following:

- name of individual(s) involved;
- full details of the reportable act (where and when the incident occurred); and
- how/when the whistleblower became aware of such information.

Nature of Report

Upon receipt of information about a reportable act, one of the following processes shall occur:

- i. Reportable Act Involving Staff, College Agent/Consultant or External Vendor*

The Registrar or Assistant Registrar shall be responsible for promptly conducting an investigation and for resolving incidents relating to reportable acts provided under this Policy. When necessary, the Registrar or Assistant Registrar may solicit assistance from another staff member¹, legal counsel or other third party depending on the nature and extent of the Reportable Act.

ii. Reportable Matter Involving the Registrar

The Assistant Registrar shall be responsible for promptly escalating the reportable Act to the President or Vice-President. Where appropriate, the incident may be reported to the President directly. The matter will be firstly considered by the Governance/HR Committee before if necessary, being presented to Council.

iii. Reportable Matter Involving Council/committee member(s)

The Registrar or Assistant Registrar shall be responsible for promptly escalating the reportable act to the President or Vice-President. The matter will be firstly considered by the Governance/HR Committee before if necessary, being presented to Council who may take actions as described under [Part 9 – Disqualifying or Sanctioning Council Members and Committee Members of the College by-laws](#).

All individuals listed above shall be responsible for compliance with this policy.

Assessment

Once received, the information/report is assessed by the appropriate individual (provided above) and a recommendation on investigation protocol is decided on or sent on to the appropriate staff management, committee or Council.

Consensus is reached and then the appropriate action and investigation commences, involving appropriate levels of management, committee and Council dependent on the scope and severity of the act reported. At their own discretion, any act reported by a Whistleblower may be referred on for review by an independent third party.

Following the investigation and any action taken, the College (lead by the Audit/Finance/Risk Committee) will independently examine the incident within the risk management framework to ensure that such transgression can be prevented in the future.

Documentation

All documents pertaining to the report and any subsequent investigation and decision shall be held in confidence by all parties under this policy. This information shall remain in the control and custody of the College in a confidential manner, unless otherwise authorized pursuant to a decision issued in accordance with this policy.

Reports/information and questions pertaining to this College policy should be directed to the appropriate person below:

Registrar
College of Optometrists of Ontario
65 St. Clair Ave E, Suite 900

¹ Under no circumstance will an incident be investigated by a College staff member who is involved in the Reportable Act.

Toronto, ON M4T 2Y3
Tel : 416-962-4071, ext. 34

Assistant Registrar
College of Optometrists of Ontario
65 St. Clair Ave E, Suite 900
Toronto, ON M4T 2Y3
Tel : 416-962-4071, ext. 25

Motion to Council

Name of committee: QA - Clinical Practice Panel

Date of submission: June 7, 2019

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

Proposed motion: That Council approve revisions to OPR 7.11 Patients with Dry Eye Disease

Recommendation to Council and Rationale	
The Issue	Council is asked to approve revisions to OPR 7.11.
Background	<p>OPR 7.11 was last reviewed in 2015.</p> <p>The Description (definitions) and Professional Standard are updated to reflect TFOS DEWS II (Tear Film and Ocular Surface Society Dry Eye Workshop II).</p> <p>A track change version of the edits would be difficult to read as there are several, so a clean version is presented here.</p> <p>The currently published standard OPR 7.11 may be referenced here.</p>
Analysis, including impact on budget	Update to OPR and notice to membership.
Options (are there alternatives)	Maintain existing standard.
Implications/expectations if approved	The OPR will reflect the contemporary definition and standard for the management of patients with dry eye disease. Optometrists and the public will be able to reference this information in the OPR.

7.11 Patients With Dry Eye Disease

Description

Dry eye disease (DED) is a complex disorder, as noted in the contemporary definition articulated by the Tear Film and Ocular Surface Society Dry Eye Workshop II (TFOS DEWS II)ⁱ in 2017:

“Dry eye is a multifactorial disease of the ocular surface characterized by a loss of homeostasis of the tear film, and accompanied by ocular symptoms, in which tear film instability and hyperosmolarity, ocular surface inflammation and damage, and neurosensory abnormalities play etiological roles.”

Although DED can be broadly categorized as aqueous deficient dry eye (ADDE, secondary to inadequate tear production primarily due to lacrimal gland insufficiency) or evaporative dry eye (EDE, secondary to excessive tear evaporation primarily due to meibomian gland dysfunction (MGD)), these conditions exist on a continuum and are not mutually exclusive. In fact, patients typically present with mixed-mechanism disease. Regardless of etiology, the common endpoints of DED include tear film instability, hyperosmolarity, and inflammation leading to variable signs and symptoms that are frequently discordant (that is, one may exist in the absence of the other), and may be episodic or chronic.

A number of tests to diagnose and establish the severity of DED are available. Like signs and symptoms, the results of these tests are often dissonant, but inform patient-specific management strategies aimed at re-establishing tear film and ocular surface homeostasis.

A detailed discussion of diagnosis and management of DED is beyond the scope of this document: a brief synopsis is provided under Professional Standard (below), and the reader is referred to the TFOS DEWS II Report for its comprehensive review

(https://www.tearfilm.org/dettreports-tfos_dews_ii_report/32_30/eng/).

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 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.
- 13.** Recommending or providing unnecessary diagnostic or treatment services.
- 14.** Failing to maintain the standards of practice of the profession.

Professional Standard

The DED assessment begins with the case history, with special attention to risk factors including but not limited to older age, female sex, general health conditions (including but not limited to connective tissue and autoimmune disease), topical and systemic medications (including but not limited to antihistamines, antidepressants, diuretics, and preservatives accompanying topical medications), environment, and occupational/avocational demands (including but not limited to computer use and contact lens wear).

Patients are questioned regarding symptoms suggestive of DED: the use of a validated questionnaire may be helpful.

Optometrists must perform a clinical examination of the anterior segment of the eye (**OPR 6.1**), with special attention to eyelid anatomy and health, the blink mechanism, meibomian gland integrity and function, and the integrity of the precorneal tear film and cornea itself. The presence of reduced tear break-up time, elevated or interocular asymmetry in tear osmolarity, or ocular surface staining are signs of the loss of homeostasis that characterizes DED. Optometrists recognize that signs and symptoms of DED are often discordant and that no single diagnostic test can be relied upon to the exclusion of others.

Treatment of DED aims to restore homeostasis of the tear film and ocular surface. It involves a staged, step-wise approach that includes but is not limited to:

- education about DED, and its management and prognosis;
- recommending modification of the patient’s environment (including but not limited to increasing humidity, reducing air movement, and encouraging frequent breaks from prolonged use of digital devices), and considering alternative topical and/or systemic medications when feasible;
- use of non-prescription lubricating agents (artificial tears) of varying viscosities (solutions, emulsions, gels, and ointments) and/or osmolarities, including consideration of preserved versus non-preserved products (including autologous serum tears) and the component of the natural tear layer deemed most deficient;
- encouraging and providing instruction for proper eyelid hygiene (both in-office and home-based treatment of meibomian gland dysfunction may be considered);
- recommending the use of oral OTC products (including but not limited to polyunsaturated (omega-3) fatty acid supplements);
- employing mechanisms to promote retention of natural and artificial tears (including but not limited to the use of punctal occlusion (only when concurrent inflammation is under control), or moisture goggles);
- judicious use of topical and/or systemic prescription medications (including but not limited to topical anti-inflammatory and antibiotic agents, and oral antibiotics with anti-inflammatory properties (tetracyclines and macrolides)) within the parameters established by *Ontario Regulation 112/11 – Designated Drugs and Standards of Practice (OPR 4.4)*;
- the use of therapeutic contact lenses (including but not limited to the use of bandage soft or scleral contact lenses) or amniotic membranes.

Depending upon the severity of DED and its response to treatment, referral (OPR 4.5) to another regulated health professional for further assessment and medical and/or surgical intervention may be necessary.

ⁱ Craig JP, et al. TFOS DEWS II Report Executive Summary. *The Ocular Surface* 2017;15:802-12.

Motion to Council

Name of committee: QA - Clinical Practice Panel

Date of submission: June 7, 2019

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

Proposed motion: That Council approve revisions to the policy *Practice Locations - Reporting Requirements*

Recommendation to Council and Rationale	
The Issue	Council is asked to approve revisions to the College policy: <i>Practice Locations - Reporting Requirements</i>
Background	The current policy (2014) can be referenced here . When considering a previous revision last September, Council recommended that optometrists should be required to report any and all practice locations to the College, regardless of the number of days practised at the location. This proposal reflects that recommendation.
Analysis, including impact on budget	Update to policy on website and in jurisprudence materials, and communication of change in policy to membership.
Options (are there alternatives)	Maintain existing policy.
Implications/expectations if approved	FAQs are developed to support the policy. The first FAQ guides members how to report locations to the College. Further FAQs would be developed by staff, if/as common questions arise. With the compliance of membership, the College would have an administrative record of every location that optometrists provide care. The information available to the public will be limited to “active locations”, published in the public register. Moving forward, if it is appreciated that the public are having difficulty identifying an optometrist who provided care (e.g., the optometrist who visits a location once or twice only), then Council may consider if changes to the information presented in the public register may be appropriate.

Practice Locations – Reporting Requirements

Purpose

The purpose of this policy is to outline the requirements for optometrists to report their practice locations to the College.

Introduction

[College By-Laws Section 16.01\(2\)](#) requires optometrists to provide written notice of any change to information previously provided to the College within 14 days of the change. This includes notifying the College of any change of practice location or any additional locations where optometrists may practise.

Reporting Requirements

Optometrists must report any and all practice locations, bricks-and-mortar or virtual, to the College, regardless of the number of days practised at any location.

Reporting Practice Locations – FAQs:

Q. How do I report a practice location to the College?

- I. Go to the [Member Login](#) on the College website.
- II. Select 'Membership Record' from the main menu.
- III. Select the 'Practice Location' tab.
- IV. Select 'Add New Location' at the bottom of the page.
- V. Input the practice location details; click the save button once completed.
- VI. Complete for each practice location being reported.

Q. I just started practising at a new location. When must I report it to the College?

You must report any practice location to the College within 14 days of the change.

Q. I practised at a location for one day only. Do I need to report this location to the College?

Yes. **All** practice locations must be reported to the College, no matter how many days you practiced there. This includes filling in for one day.

When inputting the location details, specify the start and end date for that practice.

Q. Which of my reported practice locations will be published on the public register?

The name and address of any **active** practice in which you are an owner, associate, employee, or independent contractor will be published on the public register.

An **active** practice is one for which no “End Date” has been provided.

Q. I occasionally visit area retirement homes and schools to provide eye examinations. Must I report these practice locations to the College?

Yes. The practice locations must be reported to the College; however, these locations will not be posted on the public register if an end date was specified. These will simply be noted on the College’s internal database for reference.

Please choose the appropriate field under “What is your primary practice setting at this practice site?” depending on where you practiced.

Q. I provide home visits to patients. How do I report this to the College?

You must notify the College that you provide home visits. However, specific home addresses are not to be reported to the College.

Q. I provide telehealth services as part of a virtual clinic. Must I report my virtual clinic to the College?

Yes. **All** practice locations, bricks-and-mortar and virtual, must be reported to the College. You must include the appropriate website and email address associated with your virtual clinic.

6 / FINANCIAL MATTERS

- 6. Financial Matters
 - a. Treasurer's Report
 - b. Financial Dashboard
 - c. Balance Sheet and Income Expenditure Report to April 30, 2019

Treasurer's Report

Reporting Date: June 24, 2019

All of Council shares the responsibility to provide oversight of the College's finances. In addition to the 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.

SUMMARY

The College recorded a year-to-date surplus of \$276K as of April 2019. This surplus represents a positive variance to budget of \$389K (per dashboard).

The \$60K revenue budget surplus is caused by favourability in almost all income types mainly professional corporations, application fees, as well as recognition of deferred membership revenue from last year.

The overall surplus is in the expense section caused by under spending/no spending to date in some budget areas.

Dashboard: The dashboard summary has been updated to include the April 30, 2019 financial information, including the College's investment funds and indicates that the College's financial position continues to be strong with high liquidity for future purposes.

Audit Finance and Risk Committee meeting

The AFR committee held its meeting on June 14, 2019. The College's investment advisors presented to the Committee about the portfolio and responded to the Committee's inquiries.

The College is having its first financial literacy training at the Council meeting in Waterloo on June 25.

Respectfully submitted,
Dr. Patrick Quaid, Treasurer

**COLLEGE OF OPTOMETRISTS OF ONTARIO
FINANCIAL STATEMENT SUMMARY AS OF APRIL 2019**

1. Incomes and Expenditures

Month 4

	ANNUALIZED BUDGET	YTD BUDGET	YTD OUTPUT	VARIANCE	%VARIANCE	
REVENUES	2729136.00	909712.00	970624.00	60912.00		 Good(Above5%)
EXPENSES	3068000.00	1022666.67	694188.00	(328478.67)		 Requires some attention (between -5 and 5%)
SURPLUS(DEFICIT)	(338864.00)	(112954.67)	276436.00	389390.67	76%	 Poor(Under-5%)

Overall positive variance due to under spending in expenses and 60K over budgeted revenue

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

Net Assets- Assets invested in Capital
Budgeted average Operating expenses

(5179236-144837)/(3068000/12)  19.69 College can cover its expenses for 19 months using its Net Assets.

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

3. Investment Portfolio Performance

Weighted Average Return
As of April 30, 2019

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

	Asset mix	Last 3 months	Last 12 months	Last 3 years
Canadian equity (S&P/TSX Capped Composite)	25%	7.55%	9.60%	9.10%
US Equities (S&P500)	10%	9.32%	11.90%	13.91%
Fixed Income (FTSE Canada Universe Bond Index)	55%	2.43%	6.07%	2.69%
International Equities (MSCI EAFE)	10%	8.82%	2.90%	10.29%
Benchmark	100%	5.04%	7.22%	6.17%
Returns				
Weighted Average returns		5.03%	4.67%	5.58%
Over/under		-0.003%	-2.55%	-0.11%

College of Optometrists of Ontario

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

Toronto, Ontario

MAT 2Y3

Income and Expenditure Report

As at Apr 30/2019

	2018 Actuals	2019 Budget Estimate	Budget to Date 4/12	Income/Expend. To Date	% of Budget To Date
Income					
Annual registration fees	\$2,309,907	\$2,378,021	\$792,674	\$810,259	102.2%
Professional Corporation fees	\$367,622	\$290,115	\$96,705	\$123,779	128.0%
Application Fees	\$63,210	\$56,000	\$18,667	\$35,296	189.1%
Credential assessment fees			\$0		#DIV/0!
Optometry review Committee			\$0		#DIV/0!
Continuing Education	\$810	\$2,000	\$667	\$90	13.5%
QA - Assessments		\$0	\$0		#DIV/0!
Other Income	\$15,961	\$3,000	\$1,000	\$1,200	120.0%
Total Revenues	\$2,757,510	\$2,729,136	\$909,712	\$970,624	106.7%
Committee Expenses					
Quality Assurance Committee	\$115,368	\$90,000	\$30,000	\$18,674	62.2%
Recovery of QA Assessment	(\$64,576)		\$0	(\$10,398)	#DIV/0!
Communication Committee			\$0		#DIV/0!
Clinical Practice Panel of QAC	\$26,624	\$30,000	\$10,000	\$5,895	59.0%
College Representation	\$16,947	\$30,000	\$10,000	\$1,734	17.3%
ICRC	\$89,628	\$80,000	\$26,667	\$24,769	92.9%
Council Meeting	\$76,375	\$100,000	\$33,333	\$20,863	62.6%
Council Training	\$19,765	\$20,000	\$6,667	\$476	7.1%
Discipline Committee	\$37,227	\$60,000	\$20,000	\$28,414	142.1%
Credential Assessment Committee			\$0		#DIV/0!
FORAC Contribution	\$23,910	\$25,000	\$8,333		0.0%
Transparency Committee		\$0	\$0		#DIV/0!
Eye Health Council (EHCO)		\$0	\$0		#DIV/0!
Fitness to Practise		\$0	\$0		#DIV/0!
Road Show	\$624	\$10,000	\$3,333		0.0%
Executive Committee	\$58,402	\$45,000	\$15,000	\$8,879	59.2%
Memberships (FHRCO, etc)	\$19,885	\$25,000	\$8,333	\$4,220	50.6%
Medals and Presentations	\$1,502	\$4,000	\$1,333		0.0%
Patient Relations Committee	\$6,410	\$25,000	\$8,333		0.0%
Registration Committee	\$39,796	\$45,000	\$15,000	\$12,053	80.4%
Illegal/Internet dispensing	\$110,896	\$100,000	\$33,333		0.0%
Unauthorized Practice	\$5,143	\$30,000	\$10,000		0.0%
Regulation Proposals		\$5,000	\$1,667		0.0%
Strategic Planning		\$36,000	\$12,000		0.0%
Finance/Audit and Risk Committee		\$40,000	\$13,333	\$3,473	26.0%
OEBC Contribution		\$0	\$0		#DIV/0!
Governance committee/HR	\$32,437	\$45,000	\$15,000	\$4,663	31.1%
Total Committee Expenses	\$616,364	\$845,000	\$281,667	\$123,716	43.9%
Admin. Expenses					
Bank & Credit Card Fees	\$65,317	\$60,000	\$20,000	\$775	3.9%
Investment management Fees	\$38,383	\$45,000	\$15,000	\$16,165	107.8%
Occupancy Costs	\$149,705	\$155,000	\$51,667	\$51,031	98.8%
Insurance	\$5,860	\$10,000	\$3,333	\$2,038	61.1%
Legal General	\$33,797	\$30,000	\$10,000	\$7,737	77.4%
Legal - Special	\$396	\$5,000	\$1,667		0.0%
Legal - Registration	\$7,443	\$10,000	\$3,333		0.0%
Legal - Quality Assurance		\$0	\$0		#DIV/0!
Legal - ICRC	\$26,626	\$45,000	\$15,000	\$15,579	103.9%
Legal Discipline	\$221,999	\$170,000	\$56,667	\$37,130	65.5%
Accounting & Audit	\$40,463	\$45,000	\$15,000	\$16,050	107.0%
Recovery of discipline cost	(\$54,500)	\$0	\$0	(\$28,500)	#DIV/0!
Library Expense	\$892	\$1,000	\$333	\$516	154.7%
Web Site & Software	\$47,443	\$70,000	\$23,333	\$22,785	97.7%
Database / IS Servicing/Special Project		\$0	\$0	\$19,881	#DIV/0!
Office Equipment		\$5,000	\$1,667		0.0%
Computer Hardware	\$1,506	\$20,000	\$6,667	\$224	3.4%
Leasing of Equipment	\$15,525	\$15,000	\$5,000	\$4,022	80.4%
Office Supplies and Maint.	\$21,037	\$25,000	\$8,333	\$9,153	109.8%
Postage & Courier	\$14,066	\$15,000	\$5,000	\$4,614	92.3%
Communications and Design	\$3,164	\$10,000	\$3,333		0.0%
Printing		\$5,000	\$1,667		0.0%
Staff Training	\$5,924	\$20,000	\$6,667	\$1,152	17.3%
Telephone and Internet	\$8,527	\$10,000	\$3,333	\$2,801	84.0%
Human Resources(Consultants)	\$18,288	\$15,000	\$5,000	\$5,800	116.0%
OE Tracker costs	\$45,602	\$52,000	\$17,333	\$50,766	292.9%
Jurisprudence examination	\$21,026	\$20,000	\$6,667	\$3,020	45.3%
E- Learning module development		\$25,000	\$8,333		0.0%
Other Expense	\$1,413	\$5,000	\$1,667	\$1,494	89.7%
Payroll			\$0		#DIV/0!
Consulting	\$50,692	\$70,000	\$23,333		0.0%
Salaries	\$1,043,706	\$1,150,000	\$383,333	\$292,624	76.3%
Staff Benefits		\$115,000	\$38,333	\$33,614	87.7%

Sub-Total	\$1,834,301	\$2,223,000	\$741,000	\$570,472	77.0%
Sub-Total	\$0	\$0	\$0	\$0	
Total Admin. Expenses	\$1,834,301	\$2,223,000	\$741,000	\$570,472	77.0%
Total Operating Expenses	\$2,450,665	\$3,068,000	\$1,022,667	\$694,188	67.9%
EBITDA	\$306,844	(\$338,864)	(\$112,955)	\$276,436	\$0
Depreciation	\$39,011	\$50,000	\$16,667	\$0	0.0%
Operating Income	\$267,833	(\$388,864)	(\$129,621)	\$276,436	\$0
Exceptional Investments					
Research for Entry-to-Practice Exam	\$1,470		\$0		#DIV/0!
Online Jurisprudence seminar & exam	\$0		\$0		#DIV/0!
Quality Assurance Program Review	\$49,600		\$0		#DIV/0!
Operating income after exceptionals	\$216,763	(\$388,864)	(\$129,621)	\$276,436	#DIV/0!
Investment Income	(\$34,574)	\$79,591	\$26,530	\$85,657	322.9%
NET RESULTS	\$182,190	(\$309,273)	(\$103,091)	\$362,093	#DIV/0!

College of Optometrists of Ontario 65 St. Clair Ave. E., 9th Floor Toronto, Ontario MAT 2Y3		
Balance Sheet		
Apr 2019		
	30-Apr-19	30-Apr-18
ASSETS		
Current		
Cash	249,220	552,105
Short Term Investment		
Amounts Held By Broker	110,235	89,011
Accounts Receivable	4,571	1,298
Interest Receivable		
Prepaid Expenses	18,449	15,232
	382,475	657,646
Portfolio Investments		
Investments, Securities & Bonds	6,268,793	5,545,564
Capital Assets less Accumulated Amortization		
Land & Building	0	0
Computer Hardware & Software	107,459	110,308
Other	0	
Furniture & Equipment	98,133	98,133
Construction & Leaseholds	259,516	259,516
Evaluating Examination Database / IS Implementation	465,108	467,957
Accumulated Amortization	-320,271	-286,724
	144,837	181,233
	6,796,105	6,384,443
LIABILITIES		
Current		
Accounts Payable & Accrued Liabilities	61,960	35,028
Accrued Building Upgrade Expenses	0	0
Fees Received in Advance	1,554,909	1,504,824
	1,616,869	1,539,852
NET ASSETS		
Invested in Capital Assets	144,837	181,232
Appropriated Special Policy Funds (1)	3,370,000	2,800,000
Unappropriated Surplus	1,664,399	1,863,358
	5,179,236	4,844,590
	6,796,105	6,384,442

7 / OTHER MATTERS

7. FORAC Cultural Competency Working Group – Consultations
8. [Harry Cayton Report \(linked\)](#)
9. Injunction Appeal Decision – Update
10. Legislative Updates
11. List of Acronyms
12. Draft Annual Report 2018
13. Dates of Upcoming Council Meetings
 - a. Friday September 27, 2019
 - b. Friday January 17, 2020
 - c. Monday April 20, 2020
 - d. Thursday June 25, 2020
14. Adjournment



FORAC Cultural Competency Working Group – Consultations

At the April 24, 2019 meeting, Council requested that staff consult with First Nations Stakeholders prior to endorsing the draft document entitled “Declaration of Commitment – Cultural Safety and Humility in the Regulation of Optometrists Serving First Nations and Indigenous Peoples in Canada”.

Feedback from First Nations stakeholders is included here.

FORAC DECLARATION OF COMMITMENT

CULTURAL SAFETY AND HUMILITY IN THE REGULATION OF OPTOMETRISTS SERVING FIRST NATIONS AND INDIGENOUS PEOPLES IN CANADA

Our Declaration of Commitment is an important step towards advancing cultural safety and humility among optometrists who are involved in the delivery of vision care services to First Nations and Indigenous peoples in Canada. This commitment reflects the high priority we, as the designated Canadian optometric regulatory authorities, place on cultural safety and humility as quality and safety dimensions that are integral components of our public protection mandate.

This Declaration of Commitment is based on the following guiding principles of cultural safety and humility:

- Cultural humility is a life-long process of reflection to understand individual and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust.
- Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the health care system. Cultural safety is the outcome of people feeling safe when receiving health care services.
- Cultural safety and humility should be understood, upheld and practiced at all levels of the health care system including governance within health profession regulatory bodies and within individual professional practice.
- First Nations and Indigenous individuals, Elders, families, communities and Nations should be involved in co-development of action strategies and in the decision-making process with a commitment to reciprocal accountability.

Strong leadership on concrete actions is essential to achieving our vision of a culturally safe health care system for First Nations and Indigenous peoples in Canada. We, the undersigned representatives of Canadian optometry regulators commit to:

CREATE A CLIMATE OF CHANGE BY:

- Articulating the pressing need to establish cultural safety and humility as a framework to improve the delivery of vision care services to First Nations and Indigenous peoples.
- Opening an honest, informed and convincing dialogue within our circles of influence to show that change is necessary.
- Forming a coalition of influential leaders and champions who are committed to the priority of embedding cultural safety and humility into the regulation of Canadian optometrists.
- Contributing to the national vision of a culturally safe and humble health care system as a leading strategy to enhance professional regulation.
- Encouraging, supporting and enhancing cultural safety and humility amongst optometrists and all health care professionals.

ENGAGE AND ENABLE STAKEHOLDERS BY:

- Communicating the vision of culturally safe health profession regulation for First Nations and Indigenous peoples in Canada and the critical need for commitment and understanding on behalf of all stakeholders, health care professionals and clients.
- Openly and honestly addressing concerns and leading by example. Identifying and removing barriers to progress.
- Monitoring and visibly celebrating accomplishments.

IMPLEMENT AND SUSTAIN CHANGE BY:

- Encouraging and empowering our organizations' staffs, governors, and volunteers to develop cultural humility and foster a culture of cultural safety.
- Establishing processes where organizations and individuals can raise and address problems without fear of reprisal.
- Leading and enabling successive waves of actions until cultural humility and safety are embedded within all levels of health profession regulation.
- Developing and implementing cultural safety and humility strategies and action plans, including the identification and removal of barriers. Tracking and evaluating progress for reporting purposes as well as continuous learning.
- Sharing lessons learned and opportunities this work presents for possible adaptation and/or application in other regions of the country

OUR COMMITMENT:

Our signatures demonstrate our long term commitment to the regulation of optometrists to promote and advance cultural safety and humility for First Nations and Indigenous peoples in Canada and to champion the process required to achieve this vision.

This Declaration focuses primarily on learning from the journey to date in British Columbia. True realization of this vision will require each optometric regulatory authority to build meaningful partnerships with First Nations and Indigenous partners to co-create plans and strategies meaningful to their contexts and communities.

This Declaration was developed in collaboration with, and supported by, the British Columbia First Nations Health Authority and with the national support of the Assembly of First Nations and signed by the members of the Federation of Optometric Regulatory Authorities of Canada.

Signed on this date: July 13, 2019

Joe Gallagher, k^wunəməŋ, Chief Executive Officer
First Nations Health Authority



Date: May 14, 2019

To: Bernadette deGonzague, MSc. Sr. Health Policy Analyst, Chiefs of Ontario

From: Paula Garshowitz, Registrar, College of Optometrists of Ontario

Re: Request for Letter of Support

The **Federation of Optometric Regulatory Authorities of Canada (FORAC)** is the national voice of the optometric regulatory bodies in the 10 provinces and 3 territories. Our members administer applicable provincial, territorial and federal legislation based on serving the public interest and regulating the profession of optometry.

FORAC is working towards signing a document – a *Declaration of Commitment to Cultural Safety and Humility* – based on the concept and text in the Declaration of Commitment signed by the 23 British Columbia health regulators in March 2017. It was developed by the British Columbia First Nations Health Authority (BC FNHA.) The BC-signed document has been modified and adapted, in collaboration with the BC FNHA, so that it relates to vision and eye care services delivered by optometrists across Canada.

“Increasing the level of cultural safety in the health care system through approaches such as cultural safety, cultural humility, health literacy and relationship-based care will assist in improving the quality of health services for First Nations and Aboriginal people.” BC FNHA Press Release Mar 1-2017

The need for the delivery of culturally safe care in all health care settings was identified in the final report of the Truth and Reconciliation Commission of Canada. The 2015 report calls upon *“all levels of government to provide cultural competency training for all healthcare professionals.”* The 2018 AFN-NIHB Joint Review of the Vision Care Benefits Implementation Plan also calls for actions aimed at increasing cultural competence and *“cultural safety and humility training”* among vision care providers serving First Nations clients.

FORAC’s initiative to sign a Declaration of Commitment is the first step in establishing a *“climate of change”* to enable the development of a national standard of practice for cultural competence, and cultural safety and humility training by the provincial optometry regulators.

The Declaration of Commitment will include a progress reporting section to encourage each regulatory College to engage one of their provincial First Nations health and/or administrative organizations (such as the Chiefs of Ontario Organization) to partner with them to support their commitment to the delivery of culturally safe care.

The College of Optometrists of Ontario, as a member of FORAC, would be a signatory to the Declaration of Commitment. The Ontario College wants to reach out to the Chiefs of Ontario to be their partner in this initiative before signing the declaration to demonstrate support prior to signing the Declaration of Commitment in Victoria, BC on July 13, 2019. The Declaration of Commitment will be signed by all 10 provincial optometry regulators.

The College of Optometrists of Ontario would like to ask the Chiefs of Ontario to partner with them and to provide a letter of support for this partnership that would be presented to the Council of the College of Optometrists of Ontario at their next meeting in June. The College thanks you for considering its request.



ANISHINABEK NATION

May 28, 2019

Dr. Paula Garshowitz
College of Optometrists of Ontario
65 St. Clair Avenue East Suite 900
Toronto, ON M4T 2Y3

Dear Dr. Garshowitz,

Please accept this letter as the official Anishinabek Nation endorsement of the B.C. declaration. We applaud our First Nations colleagues and their B.C. partner, the B.C. College of Optometrists, for undertaking such a historical initiative.

The Anishinabek Nation is the political advocate for forty (40) First Nations across Ontario. The Anishinabek Nation territory stretches from Lake Nipigon in the North, to Sarnia in the south, and east to the Peterborough and Ottawa Valley areas in the east. It is the oldest political organization in Ontario, and can trace its' roots back to the Confederacy of Three Fires, which existed long before European contact. The 60,000 citizens represented by the Anishinabek Nation make up one third of Ontario's Indigenous population.

We understand the Assembly of First Nations will be adding their support to ensure that such a declaration becomes a national strategy.

As the Grand Chief of the Grand Council of the Anishinabek Nation, I look forward to being able to add my name as one of the signatories to a similar declaration in Ontario, in the near future.

Chi miigwetch for your ongoing efforts to improve the vision care and health of our people.

Miigwech

Glen Hare (Gwiingos)
Grand Council Chief, Anishinabek Nation

HEAD OFFICE: NIPISSING FIRST NATION

1 Migizii Miikan, P.O. Box 711 | North Bay, ON P1B 8J8 | Ph: 705-497-9127 | Fax: 705-497-9135 | 1-877-702-5200
info@anishinabek.ca | www.anishinabek.ca | Anishinabek Nation | @AnishNation



Legislative Updates – Designated Drugs and Standards of Practice Regulation

A letter dated May 30, 2019 from Minister of Health and Long-Term Care, The Honourable Christine Elliott is included here. The College will be working closely with the Ministry to ensure that a proposed regulation amendment, in compliance with the Minister’s request, will be circulated and submitted by December 31, 2019. The College has been informed that, at this time, the Ministry will only consider the amending of the drug regulation to reflect categories of drugs from which registrants may prescribe. Other proposals before the government, with respect to prescribing drugs, removal of corneal foreign bodies, etc., which were submitted to the Ministry in May 2017, may be considered at a later date.

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

Office of the Deputy Premier
and Minister of Health and
Long-Term Care

777 Bay Street, 5th Floor
Toronto ON M7A 1N3
Telephone: 416 327-4300
Facsimile: 416 326-1571
www.ontario.ca/health

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

Bureau du vice-premier ministre
et du ministre de la Santé et des
Soins de longue durée

777, rue Bay, 5^e étage
Toronto ON M7A 1N3
Téléphone : 416 327-4300
Télécopieur : 416 326-1571
www.ontario.ca/sante



May 30, 2019

HLTC2968IT-2019-57

Dr. Pooya Hemami
President
College of Optometrists of Ontario
65 St. Clair Avenue East
Suite 900
Toronto ON M4T 2Y3

Dear Dr. Hemami:

Our government is committed to streamlining care pathways to make connections easier in the system, improving access to minor and routine care in the community and increasing patient choice in where to obtain health care services.

As was articulated in the 2019 Ontario Budget, we are committed to enabling health professions to use their education and training more effectively by expanding the scope of practice for certain regulated health professionals.

One way that we can achieve our vision is to ensure that optometrists have access to the most up to date and relevant drug treatments and therapies for their clients. The current regulatory framework does not enable this to occur.

Therefore, I am asking the Council of the College of Optometrists of Ontario (College) to amend its drug regulation to reflect categories of drugs from which your members may prescribe. To support this new approach, I am expecting that the College will develop the appropriate infrastructure to support the regulation and that you actively engage with system partners to ensure that they have an opportunity to contribute to this important work.

I would like the College to undertake this work immediately, with a view to submitting a regulation to the ministry for my review no later than December 31, 2019. Ministry staff will reach out to you shortly to work with you and to answer any questions you may have.

Dr. Pooya Hemami

I would like to thank you for your continued contributions to the healthcare system in Ontario, and I look forward to your continued partnership in ensuring that patients who choose optometric services can be assured that they are competent and safe and that they have access to the most up to date treatments and drug therapies.

Sincerely,



Christine Elliott
Deputy Premier and Minister of Health and Long-Term Care

- c: Helen Angus, Deputy Minister, Ministry of Health and Long-Term Care
- Patrick Dicerni, Assistant Deputy Minister, Strategic Policy and Planning Division
- Allison Henry, Director, Health Workforce Regulatory Oversight Branch
- Paula Garshowitz, Registrar, College of Optometrists of Ontario
- Dr. Joshua Smith, President, Ontario Association of Optometrists



DRAFT



COLLEGE OF
Optometrists
OF ONTARIO

ANNUAL REPORT 2018

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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.

Our role in ensuring optometrists provide quality patient care includes:

- 👁️ setting the qualifications required to enter practice;
- 👁️ setting the conditions to maintain registration;
- 👁️ developing quality assurance programs to promote clinical excellence;
- 👁️ promoting safe and ethical practice by our members;
- 👁️ developing professional and ethical standards and guidelines; and
- 👁️ responding openly, fairly and with authority when complaints arise.



DRAFT

PRESIDENT'S MESSAGE



Dr. Pooya Hemami

As the regulatory body overseeing optometry in Ontario, the College's role is to ensure the public is receiving safe, ethical, and quality eye and vision health care that meets the highest standards. The public interest is at the heart of everything we do and who we are.

Ensuring public safety can look like a lot of things – from ensuring optometrists are keeping current with the latest clinical knowledge through our continuing education (CE) policies; to engaging in rigorous and fair registration, complaints and discipline processes; and even making sure that we, as the College, are an effective, well-managed, and efficient regulatory body.

In addition to our work with optometrists and the public, we took some time in 2018 for self-reflection and self-improvement: Council underwent a complete governance review that included evaluating committee composition, assessing our Council and committee evaluation and Council election processes; and initiating a new strategic plan. Through this review, we created the Audit, Finance and Risk Committee, the Governance/Human Resources Committee, as well as the ad hoc Strategic Planning Committee, which will oversee upcoming work on a new strategic plan. We are also modernizing the way we recruit and select College volunteers.

Council also struck a Quality Assurance (QA) subcommittee to independently review our QA program and determine if it is in keeping with our mandate, goals and objectives.

In addition to this important governance work, 2018 highlights include:

CE Audit

The previous CE cycle ended December 2017. This was the first audit cycle that made use of the OE Tracker and it was well received by members. The OE Tracker process provides a much more efficient way to document members' education history and ensure full compliance, which enhances public assurance in the CE process while greatly reducing staff overhead burden in the audit process and overall audit times. Our new cycle runs from January 2018 to December 2020.

Internet Dispensing

Another important milestone in 2018 was the January court decision in favour of our joint application with the College of Opticians of Ontario seeking an injunction against B.C.-based Essilor Group of Canada Inc./Clearly from unlawfully dispensing prescription eyewear in Ontario over the internet without following provincial legislation. The decision emphasized our key position that, while the internet can be an important tool in vision care, dispensing corrective lenses in Ontario without the involvement of a licensed, Ontario-based optometrist, physician or optician is against the legislation.

PRESIDENT'S MESSAGE

This decision reflected several years of work on behalf of both colleges to protect patient safety and ensure the public receives the best eye care.

Essilor/Clearly filed an appeal in March 2018 and, in April 2019, the Court of Appeal granted the appeal. Both colleges continue to review this decision.

Designated Drugs Act

One of our main goals is to ensure patients have greater access to existing and emerging treatments as they become available. In 2017, we submitted amendments to the Optometry Act and its Designated Drugs and Standards of Practice Regulation to the Ministry of Health and Long-Term Care that, among other things, would allow Ontario optometrists to prescribe all oral and topical drugs approved by Health Canada that fall within their scope of practice. We continue working toward this goal and are committed to collaborating with government and stakeholders to move forward on these amendments.

National Board of Examiners in Optometry (NBE0) Examination Considered as Alternate Standards Assessment

The College started a process to consider the NBE0 series of examinations as an approved alternate standards assessment for registration purposes. We actively sought a broad level of stakeholder feedback, which led to Council's decision to approve the exam in early 2019. Irrespective of this decision, the College is committed to ensuring that candidates can access a standards assessment examination that is offered in both official languages and may be taken, in its entirety, in Canada.

And finally, I would like to say a special word of thanks to our outgoing Registrar, Dr. Paula Garshowitz, whose tenure will end in mid-2019. Since taking over as Registrar in 2011, Dr. Garshowitz has provided principled and effective leadership of the College's operations while enhancing stakeholder relations.

I look forward to continuing the College's important work into 2019 and to working with Council, committee members, QA assessors, coaches and College staff who all help ensure optometric excellence in Ontario.

Dr. Pooya Hemami,
President
College of Optometrists of Ontario

COLLEGE COUNCIL AND COMMITTEES

WHO WE ARE

The College is overseen by a Council of 17 to 18 members: 10 elected optometrists, one of which is elected faculty member from the University of Waterloo School of Optometry and Vision Science, and up to eight government-appointed public members.

Functioning as a Board of Directors, the Council creates policy, determines the strategic plan, and provides leadership and guidance to ensure public safety.



2018 COUNCIL:

Dr. Pooya Hemami, President
Dr. Richard Kniaziew, Vice-President
Dr. Patrick Quaid, Treasurer
Dr. Linda Chan
Dr. Bill Chisholm
Dr. Lisa Christian
Dr. Annie Micucci
Dr. Kamy Morcos
Dr. Christopher Nicol
Dr. Afeef Nurani

PUBLIC MEMBERS APPOINTED BY THE LIEUTENANT GOVERNOR IN COUNCIL

Ms. Maureen Chesney
Mr. Bashar Kassir
Mr. Hsien Ping (Albert) Liang
Ms. Irene Moore
Ms. Luisa Morrone
Ms. Ellen Pekilis
Mr. Brian Rivait
Mr. John Van Bastelaar

EXECUTIVE COMMITTEE

WHO WE ARE

Dr. Pooya Hemami (Chair)

Dr. Richard Kniaziew

Mr. Hsien Ping (Albert) Liang
(August 2018-January 2019)

Ms. Irene Moore (to August 2018)

Dr. Areef Nurani

Dr. Patrick Quaid

Mr. Brian Rivait

Mr. John Van Bastelaar

Staff support:

Dr. Paula Garshowitz, Registrar

Mr. Justin Rafton, Policy Analyst

WHAT WE DO

The Executive Committee works with the Registrar to ensure that College resources are allocated properly, and that staff and committees are advancing College work and supporting Council priorities.



2018 HIGHLIGHTS

OUTREACH

The Committee plays an active role in the optometric regulatory community throughout North America. Outreach is an excellent way to exchange information and keep up with the latest issues affecting health-care regulation.

In 2018, Executive members and staff met with:

- the Federation of Optometric Regulatory Authorities of Canada (FORAC) to discuss entry-to-practice matters and specialization concepts, among other topics;
- the Association of Regulatory Boards of Optometry (ARBO) to explore its annual general meeting theme: demands and opportunities presented by the evolution of regulation; and
- the Ontario Association of Optometrists (OAO), where we discussed issues affecting the regulation of the profession, including proposed amendments to drug-prescribing authority and scope expansion.

We also met with many other important stakeholders, including the Optometry Examining Board of Canada (OEBC-BEOC), the National Board of Examiners in Optometry (NBEO), Touchstone Institute, and the University of Waterloo School of Optometry and Vision Science.

COMMUNICATION AND TRAINING

Connecting with optometrists is a vital part of what we do. It is important that they have a chance to meet Council and staff, to learn about College policies, and to share their concerns.

- College Registrar Dr. Paula Garshowitz presented at the OAO Symposium on optometrists' duty to obtain informed consent from patients, providing practical information about informed consent including what it is, why it is important, and when and how to document it.
- Council members provided updates to members in Eastern, Northeastern, and Northwestern Region society meetings as well as at the OAO Annual Symposium and Vision Institute Annual Fall Conference.

PUBLIC PROTECTION

Executive meets regularly with our partners in public protection to work on areas of mutual interest. Some projects this year included:

- A successful application for an injunction to prevent unauthorized practice of optometry, enforcing a decision by a panel of the Discipline Committee to revoke a member's certificate of registration.
- Review of the College's risk management framework, including cyber protection of data and records.
- Bylaw amendments, flowing from the changes enacted by the Protecting Patients Act, 2017 that came into force on May 1, 2018.
- The Citizen's Advisory Group, a partnership with nine other Ontario health regulators to enhance public engagement with and consultation on regulatory activities.
- Continued commitment to increased transparency of Council materials and information about members available on the College public register.

GOVERNANCE COMMITTEE

WHO WE ARE

Dr. Pooya Hemami (Chair)
Dr. Richard Kniaziew
Ms. Irene Moore
Dr. Christopher Nicol
Ms. Ellen Pekilis
Mr. John Van Bastelaar
Dr. Marta Witer

Staff support:

Dr. Paula Garshowitz, Registrar
Mr. Justin Rafton, Policy Analyst

WHAT WE DO

This is a newly struck ad hoc committee comprised of current and past leadership, and members who may potentially be leaders, formed to assess governance best practices.

2018 HIGHLIGHTS

Consultant David Brown presented Council with the Governance Review report at its January meeting. After surveying Council, committee chairs, and senior staff, and interviewing other regulators, Mr. Brown gained insight into the College's culture, functioning, policies, and electoral process, and how well it is meeting its mandate. The report recommended developing governance best practices, which would ensure the College is proactive in this current evolving regulatory climate. After reviewing Council's response to the recommendations, Mr. Brown provided a timed implementation working plan for the Committee's review.

The Committee proposed several changes to be implemented in the coming year, including:

- striking a standing Audit/Finance/Risk Committee and introducing the role of Human Resources to a restructured standing Governance/HR Committee;
- transitioning the function of treasurer to a qualified staff member and maintaining financial oversight via the Audit/Finance/Risk Committee; and
- striking an ad hoc Strategic Planning committee to oversee a strategic review and present a report upon completion.

The Committee drafted new terms of reference for the restructured Executive Committee, Governance/HR Committee and the new Audit/Finance/Risk Committee. Beginning in 2019, the new Governance/HR Committee will recommend committee appointments to Council. The current Committee began this process by reviewing Council member preference and volunteer applications, making recommendations to the Executive Committee.

REGISTRATION COMMITTEE

WHO WE ARE

Dr. Patrick Quaid (Chair)
Dr. Vanesh Kathiravelu
Dr. Dino Mastronardi
Ms. Ellen Pekilis
Mr. John Van Bastelaar
Dr. Abraham Yuen

Staff support:
Hanan Jibry, Assistant Registrar

WHAT WE DO

The Registration Committee is responsible for the College's entry-to-practice process, ensuring that anyone who wishes to practise in Ontario possesses certain skills, knowledge, credentials and is of good character.

2018 HIGHLIGHTS

The Committee continued discussions with each of the following stakeholders: the Federation of Optometric Regulatory Authorities of Canada (FORAC), Touchstone Institute, the Optometry Examining Board of Canada (OEBC) and the International Optometric Bridging Program (IOBP). Discussions with FORAC and Touchstone were focused on streamlining the pre-registration process for internationally trained candidates.

Directed by the Committee, Touchstone Institute continued to develop a separate assessment of competencies related to prescribing drugs as part of the evaluating exam, which should be ready for use by July 2019.

Proposed amendments to the Registration Regulation (O.Reg. 837/93) were submitted to the Ministry of Health and Long-Term Care for approval.

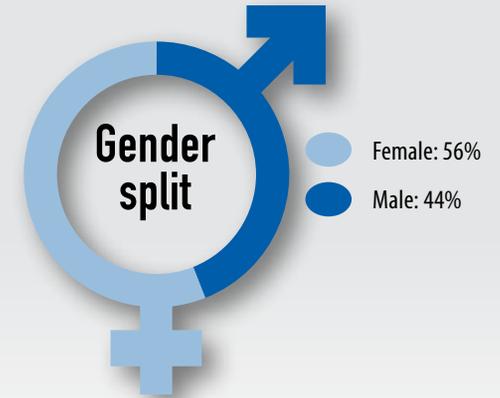
The Committee signed an agreement with FORAC to formalize the use of the Internationally Graduated Optometrist Evaluation Exam to evaluate incoming

international candidates, and to clarify that FORAC will communicate exam results to the candidates.

The College did not proceed with any proposals for an alternate Canadian entry-to-practice exam and continued to work with the other regulators to find solutions related to OEBC. Following several requests to observe the OEBC clinical exam (OSCE), Committee members were permitted to observe the OSCE in November 2018, after which Council approved the OEBC written exam and OSCE for registration purposes.

The Committee reviewed proposals for an online Jurisprudence seminar and exam and signed a contract for the development and administration of the online seminar.

MEMBERSHIP BY THE NUMBERS



Where members received their initial education

MEMBERSHIP FOR 2018*



TOTAL
MEMBERSHIP

2514

New Registrations: 143
Reinstatements: 5

FEMALE

Practicing: 1368
Not Practicing: 50



MALE

Practicing: 1066
Not Practicing: 30



RETIREMENTS/RESIGNATIONS: 20

DEATHS: 1

RESIGNATIONS (REG #)

Brooke Dina Bonner (18089)
Ashely Firby (0984)
Martin Osler (64624)
Koroush Riahie Chalie (0838)
Garry Rosien (8129)

RETIREMENTS (REG #)

Errol Abella (0612)
David Adams (7638)
Michel Bastien (72712)
Jennifer Clayfield (8945)
Susan Cooper (7704)
Erika During (8713)
Fred Fydell (7831)
Robert Hammond (7536)
Anne Karidas (8916)
Allan Kaufman (8014)
Mary Nolan (8434)
William Rowe (7519)
Darrel Stewart (7720)
Carol Westall (9258)
Patricia Wheeler (8426)

DEATHS (REG #)

Betty Fretz (7606)

REVOCATIONS (REG #)

Victor Lee (13058)
Jasleen Jhajj (11121)
Erick Vesterback (0830)

SUSPENSIONS (REG #)

Zuhal Butuner (9007)
Sheetal Patel (0714)
Leila Siblani (15090)

* Based on Registrar's report, Dec. 31, 2018.



QUALITY ASSURANCE COMMITTEE

WHO WE ARE

Mr. John Van Bastelaar (Chair)
Dr. David White (Clinical Chair)
Dr. Linda Chan
Mr. Hsien Ping (Albert) Liang
Dr. Sharon Markowitz
Dr. Kamy Morcos
Dr. Areef Nurani
Dr. William Ulakovic

Staff Support:

Ms. Bonny Wong, Coordinator,
Quality Programs
Mr. Sean Knight, Coordinator,
Quality Programs (Acting)

WHAT WE DO

The Quality Assurance Committee helps optometrists maintain and enhance their knowledge, skill, and judgment to ensure the public continues to access safe, high-quality eye care. The Committee consists of two panels, the Quality Assurance Panel (QAP) and the Clinical Practice Panel (CPP).

QUALITY ASSURANCE PANEL

WHO WE ARE

Dr. Dennis Ruskin (Chair)
Dr. Catherine Chiarelli
Dr. Patricia Hrynchak
Dr. Sarah MacIver
Ms. Luisa Morrone
Dr. Karin Simon
Dr. Tim Tsang

Staff Support

Dr. David Wilkinson, Practice Advisor

QAP works with optometrists, offering tools and feedback to continually maintain and improve their competence. The QA program includes CE, practice assessment, practice evaluation, and remediation, among other components.

2018 HIGHLIGHTS

QAP approved three new policies in 2018:

- **QA Assessor Eligibility and Appointment** establishes eligibility criteria, application processes, training and appointment procedures, and conditions for disqualification for Quality Assurance Program Assessors.
- **QA Committee Panel Members: Appearance of Bias/Conflicts of Interest** outlines the appearance of bias/conflict of interest as it relates to the Quality Assurance program, when an assessor may be in a conflict of interest, and how to declare conflicts of interest.
- **QA Assessors – Appearance of Bias/Conflicts of Interest** outlines and addresses the appearance of bias/conflict of interest for members of the QAP, and how to declare conflicts of interest.

The previous CE cycle closed December 31, 2017.

Thanks to the OE Tracker system, the College audited all members to confirm they reported the required

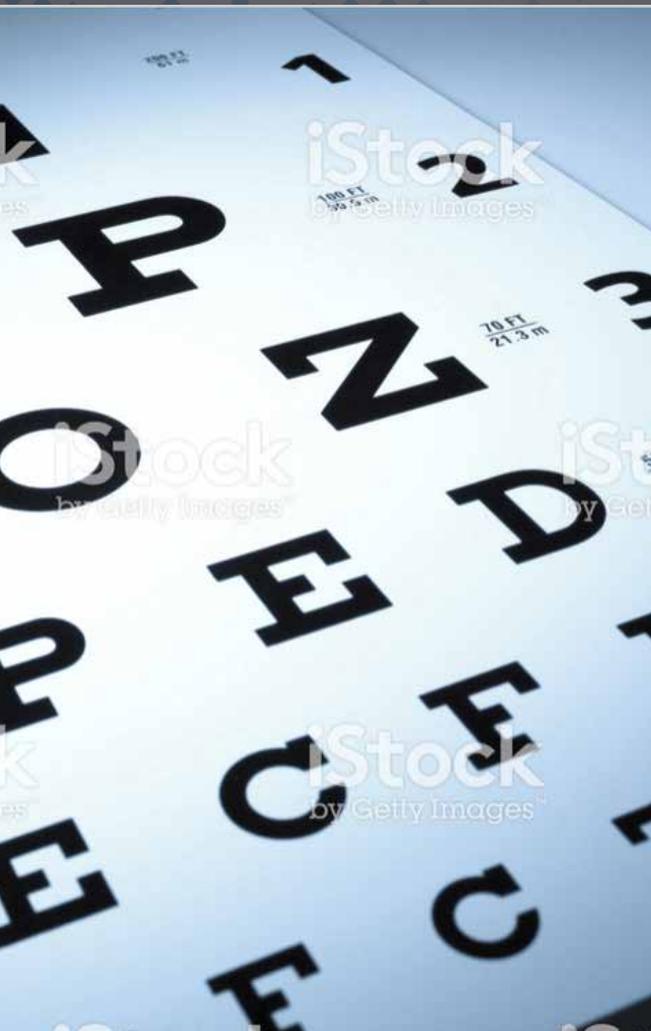
number of CE hours, resulting in 25 referrals for a deficiency in CE hours for the cycle. Eight of these members were deficiency by five hours or less.

The College conducted a further audit of randomly selected members to determine the accuracy of reporting and whether members complied with all requirements of the CE program (e.g., minimum 50 category A hours, with 20 hours related to ocular health treatment and assessment). Of the 114 members randomly audit, one was found to be deficient and was required to undergo a practice assessment.

Results

- 6 members discharged**
- 7 members discharged with advice**
- 1 member discharged with conditions**
- 2 members still undergoing assessment**
- 1 member switched to non-practising**
- 7 non-practising members**
- 1 resignation**

QUALITY ASSURANCE PANEL



2018 RANDOM QA PRACTICE ASSESSMENTS

- 👁 45 Random QA practice assessments outstanding from 2016 and 2017
- 👁 107 members randomly selected in 2018 to undergo practice assessments

Results

- 80 discharged
- 38 discharged with advice
- 32 still undergoing assessments
- 1 switched to non-practising
- 2 resignation/retirement

OTHER ASSESSMENTS

- 👁 1 member discharged following 2012-14 CE deficiency assessment

RESULTS OF ADVICE

Subject of Advice	Number of Members
Records Management – Clinical (e.g., record a measurement of all anterior segment structures, consider recording axis for all non-spherical keratometry readings etc.)	36
Records Management – General (e.g., revise patient record format, improve legibility, provide further details in record, record patient counselling, record relevant family history etc.)	23
Continuing Education (e.g., Review OPR 6.1)	6
Clinical Care (e.g., Provide patient counselling on problems identified)	3
Action (e.g., Report to the Ministry of Transportation when required)	1

2018 DIRECT PATIENT CARE HOUR DEFICIENCY ASSESSMENTS

- 👁 5 carried over from 2017
- 👁 7 members referred for patient care hour deficiency in 2018

Results

- 1 discharged
- 3 discharged with advice
- 2 discharged following practice evaluation
- 3 open files
- 2 member switched to non-practising
- 1 member suspended

CLINICAL PRACTICE PANEL

WHO WE ARE

Dr. Dennis Ruskin (Chair)
Dr. Catherine Chiarelli
Dr. Patricia Hrynchak
Dr. Sarah MacIver
Ms. Luisa Morrone
Dr. Karin Simon
Dr. Tim Tsang

Staff support:

Dr. David Wilkinson, Practice Advisor

CPP establishes and clarifies new and existing standards of practice, regulatory requirements, and clinical practice guidelines in the Optometric Practice Reference (OPR).

2018 HIGHLIGHTS

Health Quality Ontario

The panel reviewed and provided feedback on the Health Quality Ontario document Quality Standards-Glaucoma Care for Adults.

Revising our standards: OPR

The panel is always reviewing the College's standards of practice to ensure that they are in line with technological, legal, and social developments. The OPR details the regulatory and professional standards of practice for optometry in Ontario.

Following a joint meeting with the QA Panel, the CPP removed the guideline section from the OPR, leaving

the development of clinical practice guidelines to organizations that can articulate the profession's view of best practices.

On the recommendation of the Panel, Council approved updates to several OPR documents in 2018:

Standards of Practice

- 4.1 – Clinical Equipment
- 4.2 – Required Clinical Information
- 4.3 – Delegation and Assignment
- 6.5 – Contact Lens Therapy
- 7.2 - Patients with Glaucoma

QUALITY ASSURANCE SUBCOMMITTEE

WHO WE ARE

Ms. Ellen Pekillis (Chair)
Dr. Patricia Hrynchak
Dr. Areef Nurani
Mr. John Van Bastelaar
Dr. David White

Staff Support:

Mr. Justin Rafton, Policy Analyst

The Quality Assurance Subcommittee was struck to conduct an independent evaluation of the Quality Assurance Program; develop various member resources and tools, such as a self-assessment and continuing professional development component; and increase member engagement in the program.

2018 HIGHLIGHTS

Following consultations with other regulators involved with their own Quality Assurance Program reviews, the subcommittee decided to hire an external consultant to undertake the review. The subcommittee received the initial draft report and its findings.

PATIENT RELATIONS COMMITTEE

WHO WE ARE

Mr. Brian Rivait (Chair)
Dr. Linda Bathe
Ms. Maureen Chesney
Dr. Ken Hadley
Mr. Hsien Ping (Albert) Liang
Ms. Irene Moore
Ms. Luisa Morrone
Dr. Christopher Nicol
Dr. Yuan (Mike) Yang

Staff support:

Ms. Mina Kavanagh, Director,
Investigations and Resolutions

WHAT WE DO

The College has a “zero tolerance” policy on sexual abuse of patients. Our programs not only deal with abuse, but also prioritize preventing sexual abuse of patients. In addition to promoting awareness and education around issues of sexual abuse and boundary violations, the Patient Relations Committee offers information and guidelines to both the public and to optometrists regarding the patient–practitioner relationship.

2018 HIGHLIGHTS

After reviewing the Protecting Patients Act, 2017 and the resulting amendments to the Regulated Health Professions Act, the Patient Relations Committee revised the College’s therapy and counselling program to significantly increasing funding for those alleging sexual abuse by an optometrist.

The Committee also moved forward on a new e-learning module Eye Consent – the Optometrist’s Guide to Consent, which, once released, will address consent in health care; implied vs express consent; and what is required of an optometrist regarding informed consent with patients, among other topics.



FITNESS TO PRACTICE COMMITTEE

WHO WE ARE

Dr. Linda Chan (Chair) Ms. Ellen Pekilis
Dr. Dennis Ruskin

Staff Support:

Mr. Eyal Birenberg, Coordinator,
Investigations and Hearings

WHAT WE DO

The Fitness to Practise Committee receives referrals from the Inquiries, Complaints and Reports Committee and conducts a hearing when there is evidence that an optometrist might be incapacitated due to a mental or physical condition.

2018 HIGHLIGHTS

The Committee did not receive any referrals or conduct any hearings during 2018.



INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

WHO WE ARE

Dr. Derek MacDonald (Panel 1 Chair)

Dr. Annie Micucci (Panel 2 Chair)

Dr. Bill Chisholm

Ms. Maureen Chesney

Dr. Camy Grewal

Mr. Bashar Kassir

Dr. Richard Kniaziew

Ms. Irene Moore (January – August)

Ms. Luisa Morrone (September – December)

Mr. Brian Rivait

Dr. Karin Schellenberg

Staff Support:

Ms. Mina Kavanagh, Director,
Investigations and Resolutions

WHAT WE DO

The Inquiries, Complaints and Reports Committee (ICRC), which sits as two independent panels, investigates and makes decisions on allegations of professional misconduct, incompetence, or incapacity brought against members of the College. These allegations proceed from formal complaints, information brought to the attention of the Registrar, mandatory reports, or referrals from the Quality Assurance Committee.

2018 HIGHLIGHTS

👁 71 complaints

👁 10 Registrar's Reports

31 new cases were filed in 2018

The two panels considered a total of 86 cases that were filed in 2016, 2017 and 2018.

75 decisions were issued:

👁 2 in a case filed in 2016

👁 34 in cases filed in 2017

39 in the cases filed in 2018

As of December 31, 2018, 43 cases were carried over for a decision in 2019; eight of those cases were filed in November and December 2017.

NUMBER OF CASES FILED IN 2016, 2017 AND 2018 AND CONSIDERED BY PANELS OR NEWLY FILED IN 2018

TYPE OF CASE	NUMBER
Complaints	89
Registrar's Reports	13
Incapacity Inquiries	0
TOTAL CASES	102

DECISIONS ISSUED	
Complaints	69
Registrar's Reports	6
Incapacity Inquiries	0
TOTAL	75

HPARB APPEALS <i>status as of December 31, 2018</i>	
Total # of appeals pending	2
New appeals filed in 2018	5
Panel decisions confirmed	7
Review held – decision pending	0
Matters returned to the ICRC	0
Appeals withdrawn	3

NATURE OF ALLEGATIONS	NUMBER
Unprofessional behaviour and/or communication	78
Improper billing/fees	21
Breach of RHPA/Code/Regulation/Standards of Practice	29
Related to eyeglass and/or contact lens prescription	15
Quality of care	13
Staff supervision	13
Failure to diagnose/misdiagnosis	12
Related to eyeglass and/or contact lens dispensing	10
Other	10
Release of prescription	7
Failure to refer	7
Improper delegation	7
Conflict of interest	6
Release of record	6
Unnecessary/unsuccessful treatment	6
Unsafe practices	3
Breach of patient confidentiality	3
Advertising	3
Lack of consent	2
Allegations of sexual nature	1
Record keeping	1
Related to drug prescription	1

DISPOSITIONS	
<i>Some cases may have multiple dispositions or involve multiple members</i>	
No further action	36
Advice or recommendation	17
Remedial agreement (educational activities)	4
Abuse of process (case closed)	6
Verbal caution	3
Specified Continuing Education or Remedial Plan (SCERP)	5
Referral to Discipline Committee	4
TOTAL	75
Withdrawn	3

ALTERNATIVE DISPUTE RESOLUTION (ADR)	
Complaints referred to ADR	5
Complaints withdrawn through ADR	2
Complaints carried over to 2019	1

OTHER ACTIVITIES:
 The ICRC launched the Alternative Dispute Resolution (ADR) pilot project, which includes mediation between the parties. When a complaint is deemed suitable and the parties agree, the ADR process is available as an effective alternative to a formal investigation. After a successful ADR, the complaint is disposed of through the ratification of a Memorandum of Agreement.

DISCIPLINE COMMITTEE

WHO WE ARE

Dr. Karin Simon (Chair)
Dr. Linda Bathe
Dr. Linda Chan
Ms. Maureen Chesney
Dr. Mark Eltis
Dr. Vivian Habib
Dr. Pooya Hemami
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
Ms. Ellen Pekilis
Dr. Patrick Quiad
Mr. Brian Rivait
Dr. Dennis Ruskin
Mr. John Van Bastelaar

Staff Support:

Mr. Eyal Birenberg, Coordinator,
Investigations and Hearings

WHAT WE DO

The Discipline Committee hears allegations of professional misconduct and/or incompetence made against a College member. The Committee considers evidence in each case and decides whether to order a range of penalties, including reprimands, suspensions, fines or revocation of an optometrist's Certificate of Registration.

2018 HIGHLIGHTS

Discipline hearings

In 2018, the Discipline Committee held six discipline hearings into allegations of professional misconduct/incompetence. To read the full decision of the Discipline Committee, please click on the member's name.

Dr. Jon Barnes
Dr. Andrew Mah
Dr. Gregory Miller
Dr. Gordon Ng
Dr. Farrukh Sheikh
Dr. Gyanesh Verma

In addition, the Committee is preparing to conduct one penalty hearing in 2019 following a 2018 finding of guilt against Dr. Gregory Miller.

Discipline referrals

The Discipline Committee received four referrals of specified allegations of professional misconduct from the Inquiries, Complaints and Reports Committee (ICRC). The Committee is preparing discipline hearings in these matters. They are expected to take place in 2019. To read a full Notice of Hearing, please click on the member's name.

Marg L. Courchesne (Revoked Member)
Dr. Farrukh Sheikh
Dr. Ampreet Singh
Dr. Casey L. Tepperman

Other activities

Two Committee members attended the Advanced Discipline Orientation session, provided by the Federation of Health Regulatory Colleges of Ontario.

FINANCIALS

SUMMARY STATEMENT OF FINANCIAL POSITION

as of December 31, 2018

	2018	2017
ASSETS		
Current assets		
Cash	\$ 2,657,433	\$ 2,588,514
Short-term investments	1,239,752	953,549
Prepaid expenses	21,383	15,885
	3,918,568	3,557,948
Long-term investments	3,439,032	3,388,184
Capital assets	144,837	181,233
	7,502,437	7,127,365
LIABILITIES AND NET ASSETS		
Current liabilities		
Accounts payable and accrued liabilities	325,362	309,044
Fees received in advance	2,316,403	2,183,370
Liability funds in trust	43,530	
	2,685,295	2,492,414
Net assets		
Invested in capital assets	144,837	181,233
Appropriated special policy funds	3,370,000	2,800,000
Unappropriated surplus	1,302,305	1,653,718
	4,817,142	4,634,951
	\$ 7,502,437	\$ 7,127,365

The criteria applied by management in the preparation of the summary statements of financial position and revenue and expenditures are as follows:

- the information in the summary statements of financial position and revenue and expenditures is in agreement with the related information in the complete audited financial statements; and
- the summary statements of financial position and revenue and expenditures contain all the information necessary to avoid distorting or obscuring matters disclosed in the complete audited financial statements, including the notes therein.

Management has determined that the summary of statements of changes in net assets and cash flows do not provide additional useful information, and as such, a summary of these statements have not been included.

SUMMARY STATEMENT OF REVENUE AND EXPENDITURES

as of December 31, 2018

	2018	2017
REVENUE		
Annual registration fees	\$ 2,373,117	\$ 2,278,951
Professional corporation fees	367,622	287,115
Services and other fees	81,347	21,960
	2,822,086	2,588,026
EXPENDITURES		
Committee expenses	607,459	630,151
Council meeting and training	96,140	83,180
Membership contributions	23,910	23,350
College representation	38,335	33,777
Jurisprudence examination	21,026	13,055
Continuing education	624	1,664
	787,494	785,177
COLLEGE ADMINISTRATION ACTIVITIES		
Salaries and benefits	1,033,319	942,382
Office and general	303,336	285,785
Occupancy	149,705	149,243
Professional fees	125,347	132,259
Amortization	39,011	41,397
	1,650,718	1,551,066
	2,438,212	2,336,243
TOTAL EXPENDITURES		
EXCESS OF REVENUE OVER EXPENDITURES AND INCOME		
	383,874	251,783
OTHER EXPENDITURES		
Unauthorized practice	116,040	129,703
Research for entry-to-practice exam	1,470	17,500
Quality Assurance program review	49,600	
	167,110	147,203
OTHER INCOME		
Investment income	138,956	182,957
Unrealized (loss) gain on investments	(173,529)	72,260
	(34,573)	255,217
EXCESS OF NET REVENUE OVER EXPENDITURES		
	\$ 182,191	\$ 359,797

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COLLEGE OF
Optometrists
OF ONTARIO

65 St. Clair Avenue East, Suite 900
Toronto, Ontario M4T 2Y3

Telephone 416.962.4071
Toll-free 888.825.2554
Fax 416.962.4073

www.collegeoptom.on.ca

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

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 Note: 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

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

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

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

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