



COLLEGE OF
Optometrists
OF ONTARIO

COUNCIL MEETING

**FRIDAY SEPTEMBER 27, 2019
AT 9:00 A.M.**

(PUBLIC INVITED TO ATTEND)

**65 ST. CLAIR AVE. E., SUITE 900
TORONTO ON**

COUNCIL AGENDA

Friday, September 27, 2019 | 9:00 a.m.
65 St. Clair Ave. E, Suite 900, Toronto

| Item | Item Lead | Time (mins) | Action Required | Page No. |
|---|------------------|-------------|----------------------------------|----------|
| 1. Call to Order/Attendance | P. Hemami | 1 | | 4 |
| 2. Introduction: New Council members and staff | P. Hemami | 5 | Receive for Information | 4 |
| 3. Adopt the Agenda | P. Hemami | 1 | Decision | 4 |
| a. Conflict of Interest Declaration | | | | |
| 4. Consent Agenda | | | | 5 |
| PART 1 - Minutes of Prior Council Meetings | P. Hemami | 5 | Decision | |
| a. June 24, 2019 | | | | 6 |
| b. August 14, 2019 (teleconference) | | | | 14 |
| c. Motions and Actions Items Arising from the Minutes | | | | 17 |
| PART 2 - Reports | P. Hemami | 15 | Receive for Information/Decision | |
| a. Committee Reports | | | | |
| i. Executive Committee | | | | 19 |
| ii. Patient Relations | | | | 22 |
| iii. Quality Assurance: | | | | |
| A. QA Panel | | | | 23 |
| B. CP Panel | | | | 24 |
| C. QA Subcommittee | | | | 25 |
| iv. ICRC | | | | 26 |
| v. Registration | | | | 28 |
| vi. Discipline | | | | 30 |
| vii. Governance/HR Committee | | | | 34 |
| viii. Audit/Finance/Risk Committee | | | | 38 |
| ix. Strategic Planning Committee | | | | 39 |
| 5. Financial Matters | | | | 40 |
| a. Treasurer's Report | P. Quaid | 10 | Receive for Information | 41 |
| b. Financial Dashboard | | | | 42 |
| c. Balance Sheet and Income and Expenditure Report to June 30, 2019 | | | | 43 |
| 6. Registrar's Report | M. Boon | 20 | Presentation | 47 |
| 7. Motions Brought Forward from Committees | | | | 48 |
| a. Strategic Planning Committee | E. Pekilis | 20 | Decision | 49 |
| b. Governance/HR Committee | J. Van Bastelaar | 10 | Decision | 51 |

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|-----------------------|--|------------------|----|-------------------------|-----|
| Morning Break | | | 10 | | |
| c. | Audit/Finance/Risk | P. Quaid | 25 | Decision | 53 |
| d. | Quality Assurance | | | | |
| i. | QA Subcommittee | E. Pekilis | 20 | Decision | 68 |
| ii. | QA Panel | L. Chan | 45 | Decision | 72 |
| iii. | CPP | B. Chisholm | 30 | Decision | 75 |
| Lunch Break | | | 45 | | |
| Council Photos | | | 30 | | |
| 8. | By-Law Amendments – Governance Reform | P. Hemami | 10 | Discussion/Decision | 100 |
| 9. | Vice-President Election | P. Hemami | 10 | Decision | 177 |
| 10. | Governance: Term Limits | J. Van Bastelaar | 45 | Presentation | 178 |
| 11. | List of Acronyms | | 1 | Receive for Information | 182 |
| 12. | Dates of Upcoming Council Meetings | | 1 | Receive for Information | 188 |
| a. | Friday January 17, 2020 | | | | |
| b. | Monday April 20, 2020 | | | | |
| c. | Thursday June 25, 2020 | | | | |
| 13. | Proposed Dates for Council Meetings (2020) | M. Boon | 10 | | 188 |
| d. | Friday September 25, 2020 | | | | |
| e. | Friday December 4, 2020 | | | | |
| 14. | Adjournment (approx. 3 pm) | P. Hemami | 1 | Decision | 188 |
| | | | | | |

1-3 / INTRODUCTION

1. Call to Order/Attendance
2. Introduction: New Council members and staff
3. Adopt the Agenda
 - a. Conflict of Interest Declaration

4 / CONSENT AGENDA

4. Consent Agenda

PART 1 - Minutes of Prior Council Meetings

- a. June 24, 2019
- b. August 14, 2019 (teleconference)
- 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. Discipline
 - vii. Governance/HR Committee
 - viii. Audit/Finance/Risk Committee
 - ix. Strategic Planning Committee



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

June 24, 2019

Attendance:

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

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

Regrets:

Dr. Areef Nurani

Staff:

Dr. Paula Garshowitz, Registrar
Ms. Maureen Boon, Incoming Registrar
Ms. Hanan Jibry
Ms. Mina Kavanagh

Mr. Nektarios Kikonyogo
Ms. Amber Lepage-Monette
Mr. Justin Rafton
Mr. Sean Knight

- 1 **1. Call to Order:** P. Hemami called the meeting to order at 9:00 a.m. and welcomed everyone in
- 2 attendance, including guests, to the meeting. All present were reminded that recording of the meeting is
- 3 not allowed.
- 4
- 5 R. Kniaziew requests to add ARBO update to agenda.
- 6
- 7 **2. Introduction of Incoming Registrar**
- 8 P. Hemami introduces M. Boon as the new Registrar of the College and L. Christian as Council's new
- 9 academic member.
- 10
- 11 **3. Adoption of the Agenda:** A draft agenda was circulated prior to the meeting.
- 12
- 13
- 14 Moved by A. Liang and seconded by A. Micucci **to adopt the agenda.**
- 15
- 16
- 17 **Motion carried**

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19 **a. Conflicts of Interest:** Dr. Hemami asked Council members if anyone had a conflict of interest with any
20 item on the day's agenda. No conflicts were declared.

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

26

27 PART 1 - Minutes of Prior Council Meetings

28 a. April 24, 2019

29 b. June 3, 2019

30 c. Motions and Actions Items Arising from the Minutes

31 PART 2 - Reports

32 a. Committee Reports

33 i. Executive Committee

34 ii. Patient Relations

35 iii. Quality Assurance:

36 A. QA Panel

37 B. CP Panel

38 C. QA Subcommittee

39 iv. ICRC

40 v. Registration

41 vi. Fitness to Practise

42 vii. Discipline

43 viii. Governance/HR Committee

44 ix. Audit/Finance/Risk Committee

45 x. Strategic Planning Committee

46 b. Registrar's Report

47 PART 3 – Correspondence

48 a. Office of the Fairness Commissioner

49 b. Toronto Public Health

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51 Minor typos and grammatical corrections were made to the minutes of April 24, 2018 Council meeting.

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53 Moved by B. Chisholm and seconded by K. Morcos **to adopt the consent agenda.**

54

Motion carried

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56 The draft minutes of the April 24 and June 3 in-camera sessions were circulated during the meeting.

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58 Moved by R. Kniaziew and seconded by P. Quaid **to approve the in-camera minutes of the April 24 and**
59 **June 3 Council meetings.**

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Motion carried

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62 **5. Motions Brought Forward from Committees:**

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a. Patient Relations Committee: The proposed motion was circulated prior to the meeting. The motion recommends that the College offer the eLearning module *Eye Consent* to all members of the College at no cost, as an incentive to participate.

Council discusses the motion and agrees that providing the module to members is a good investment in members and continuing education.

Motion carried

b. Governance/HR Committee:

i. The proposed motion was circulated prior to the meeting. The motion recommends the appointment of H. Kennedy to the Quality Assurance Committee Clinical Practice Panel; E. Pekilis to the Patient Relations Committee; and L. Christian to the Discipline Committee.

Council notes that, having recently lost a public member, these assignments are needed to ensure our committees remain constituted. Council will complete a competency assessment in the future to ensure people are in appropriate committees.

E. Pekilis notes she is happy to fill in as needed but will be relieved of this new role once a new public member is announced.

Council discussed whether it can lobby the Public Appointments Secretariat to ensure timely appointment of public members when there is a vacancy. P. Hemami notes there is a current action item to proactively contact the Public Appointments Secretariat going forward.

Moved by J. Van Bastelaar and seconded by R. Kniaziew **to approve the appointments.**

Motion carried

ii. Governance/HR Committee: The proposed motion was circulated prior to the meeting. The motion 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.

P. Hemami clarifies that Council is being asked to circulate the revised by-laws to allow for 60 days of review. Enacting the new by-law would take place at the September Council meeting.

Changes include adding “CEO” to the “Registrar” title and removing the role of Treasurer from the by-law. Wording updates (such as removing reference to paper ballots) also proposed at this time.

Moved by J. Van Bastelaar and seconded by R. Kniaziew **to circulate the revised by-laws.**

Motion carried

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c. Audit/Finance/Risk Committee: The proposed motion was circulated prior to the meeting. The motion recommends Council approve two policies – the Reporting Information to Outside Agencies policy and the Whistleblower policy. The Reporting to Outside Agencies policy relates to the College’s obligation to report information relating to serious allegations to outside agencies. The Whistleblower policy was developed following a review of other regulator colleges’ policies and covers incidents where a College staff member, a Council/committee member and/or a 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.

P. Quaid discusses some background, including cases of OHIP fraud and reporting requirements.

Council discusses and clarifies the nature of the wording. It is agreed a flow-chart would clarify the reporting process and should accompany the policy. P. Hemami notes the two policies should each be submitted as two separate motions.

Legal counsel clarifies that the College currently has the ability to report to outside agencies and that the policy is simply clarifying and articulating that ability.

Legal counsel requests to review the proposal before it becomes a policy.

Council requests clarity regarding staff and the whistleblower policy. P. Garshowitz confirms there is an HR policy that covers workplace violence and harassment.

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| <p>Action item: To have legal counsel review the proposed policies and to have staff create an accompanying flow chart and present to Council at the September meeting.</p> |
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Motion tabled

d. Quality Assurance Committee – Clinical Practice Panel

i. The proposed motion was circulated prior to the meeting. The panel proposed updates to OPR 7.11 Patients with Dry Eye Disease.

Council discusses whether the OPR is understood by members of the public or if it is too clinical in nature. Council discusses purpose and intended audience of OPRs and whether separate documents, such as accompanying FAQ or information on the College website would be of use.

Council agrees to review the motion as it stands and continue the discussion on additional resources separately.

B. Chisholm moves and K. Morcos seconds **to approve revisions to OPR 7.11 Patients with Dry Eye Disease.**

Motion carries

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Action item: The Public Relations Committee will review and discuss the need for patient-facing materials on optometric conditions.

ii. Quality Assurance Committee – Clinical Practice Panel: The proposed motion was circulated prior to the meeting. The motion recommends Council approve revisions to the *Practice Locations – Reporting Requirements* policy.

Council discusses the motion and clarifies the timeline for reporting, as well as how to report in various working situations such as mobile clinics.

Moved by B. Chisholm and seconded by R. Kniaziew **to approve the revisions.**

Motion carries

6. Financial Matters

a. Treasurer’s Report:

P. Quaid presented the report, which shows a surplus of \$276,000 as of April 30, 2019. The surplus represents a positive variance to budget of \$389,000 (per dashboard).

Council eager for financial literacy training taking place tomorrow.

Council members ask about annual renewal fees. P. Hemami and P. Garshowitz confirm that fees are in line with other colleges and have not changed in many years.

Action item: To have the Audit/Finance/Risk Committee review renewal fees and report back to Council at the September Council meeting.

b. Financial Dashboard: The financial dashboard was circulated prior to the meeting. It was updated to April 30, 2019, including the College’s investment funds and indicates that the College’s financial position continues to be strong with high liquidity for future purposes.

c. Balance Sheet and Income and Expenditure Report to April 30, 2019: The budget surplus is caused by favorability in almost all income types mainly professional corporations, application fees, and recognition of deferred membership revenue from last year. The overall surplus in the expense section caused by under spending/no spending to date in some budget areas.

7. Registration Committee: The proposed motion was circulated prior to the meeting. The motion recommends that Council approve the development of a national competency profile to be jointly

199 developed between the College and Touchstone Institute with input from optometrists from every
200 Canadian province as part of the continued research and investigation into an alternate Canadian
201 entry-to-practice exam at a projected cost of approximately \$45,000.
202

203 Council discussed the need for an updated competency profile (the previous profile was completed in
204 2015) as an important first step in the process toward developing an entry-to-practice exam process.
205

206 Council also clarifies that the University of Waterloo will be involved as a stakeholder. Guest Dr. Stan
207 Woo clarifies the university's position that it would like to be included as a stakeholder at the outset.
208

209 Moved by P. Quaid and seconded by R. Kniaziew **to approve the development of a competency profile**
210 **co-developed with Touchstone Institute.**
211

212 **Motion carried**
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214 **8. FORAC Cultural Competency Working Group** 215

216 Council revisited the issue of signing the declaration put forward by the FORAC Cultural Competency
217 Working Group first discussed at the April 24, 2019 Council meeting.
218

219 As per the April 24 action item, P. Garshowitz confirmed that she and Dr. Paul Chris, Executive Director
220 of FORAC, contacted two First Nations organizations (Anishinabeg Nation and the Chiefs of Ontario) for
221 feedback. Anishinabeg Nation has provided a letter in favour of the declaration. The Chiefs of Ontario
222 have expressed support but have not yet sent its support in writing. P. Chris confirms a third Nation has
223 also expressed support but, due to its governance model, would require additional time to provide
224 written support.
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226 Council agrees the current feedback shows support for the declaration, and clarifies it wants to ensure
227 tangible action takes place going forward.
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229 Moved by J. Van Bastelaar and seconded by Annie Micucci **to adopt the FORAC Declaration of**
230 **Commitment.**
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232 **Motion carried**
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234 **9. Injunction Appeal Decision Update:** 235

236 P. Garshowitz provided brief update on the appeal process. The College is seeking leave to appeal, which
237 means the College has asked the Supreme court to hear the case. Council should expect to hear in the
238 fall.
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241 **10. Harry Cayton Report** 242

243 P. Garshowitz presented findings from the Harry Cayton report to Council. The Cayton report was
244 written in December 2018 and made public in April 2019. The report served as an inquiry into the
245 College of Dental Surgeons of British Columbia.

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247 The report makes two sets of recommendations: one regarding the College of Dental Surgeons of British
248 Columbia to be implemented immediately; and one set regarding overall regulation in the province of
249 B.C.

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251 The short-term recommendations to the B.C. college touch on issues of best practice, governance, and
252 overall regulatory performance.

253
254 Long-term recommendations regarding regulation in the province include rules and conduct
255 expectations for all professions, establishing a single body for discipline hearings, and maintaining a
256 single public registrar.

257
258 Council discussed how these recommendations echo changes at the Professional Standards Authority, as
259 well as other regulatory jurisdictions, such as Quebec. Council agreed it is good to be aware of these
260 issues in the overall regulatory world across jurisdictions and professions.

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262 M. Boon suggested Council may want to evaluate its processes against the recommendations, which
263 may reinforce the direction Council is taking on governance issues and allow Council to be proactive in
264 anticipating changes in Ontario.

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266 **11. Legislative Updates - Designated Drugs and Standards of Practice Regulation**

267
268 B. Chisholm explained process to Council – the Clinical Practice Panel is looking to provide the Ministry
269 of Health with a response to questions within three to four weeks.

270
271 CPP is looking to have support from tripartite stakeholders for category submissions being put forward.
272 Timelines for having submission reviewed, agreed upon and submitted by end of the year is tight. A
273 teleconference meeting may be needed to finalize.

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276 **12. Draft Annual Report**

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278 A draft copy of the 2018 Annual Report was circulated to Council prior to the meeting. P. Garshowitz
279 confirmed that small changes and typos can be submitted.

280
281 M. Boon recommended adding information on the strategic planning process. Other small changes to
282 come.

283
284 **13. Update on ARBO meeting**

285
286 R. Kniaziew provided Council with an update on the Association of Regulatory Boards of Optometry Inc.
287 (ARBO) meeting, which happened in St. Louis, MO, June 16-18. R. Kniaziew and P. Garshowitz attended.

288
289 The brief update provided an overview of key issues presented at ARBO, including OE Tracker, telehealth
290 and telemedicine.

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292 **14. Council Member Recognition**

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294 P. Hemami took time to thank outgoing public member M. Chesney for her service to Council and in the
295 public interest. M. Chesney thanked Council and noted how much she enjoyed her tenure.

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297 P. Hemami also recognized the work of outgoing Registrar P. Garshowitz. Several Council members also
298 thanked P. Garshowitz for her contributions.

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300 P. Garshowitz thanked Council and staff and welcomed new Registrar M. Boon.

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302 **15. List of Acronyms**

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304 **16. Dates of Upcoming Council Meetings**

- 305 • Friday September 27, 2019
306 • Friday January 17, 2020
307 • Monday April 20, 2020
308 • Thursday June 25, 2020

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311 **17. Adjournment:** Moved by Richard and seconded Bill Chisholm **to adjourn the meeting at 12:21 p.m.**

312 **Motion carried**

DRAFT



College of Optometrists of Ontario
Council Meeting
August 14, 2019 - Teleconference
DRAFT

DATE, 2019

Attendance:

Dr. P. Hemami, President
Dr. Linda Chan
Ms. Maureen Chesney
Dr. Lisa Christian
Dr. Bill Chisholm
Ms. Winona Hutchinson
Mr. Bashar Kassir

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

Regrets:

Dr. Richard Kniaziew, Vice President
Dr. Patrick Quaid, Treasurer
Mr. Howard Kennedy

Staff:

Ms. Maureen Boon, Registrar
Ms. Amber Lepage-Monette

Ms. Hanan Jibry

- 1 **1. Call to Order:** P. Hemami called the meeting to order at 12:00 p.m. and welcomed everyone, including
2 guests, to the meeting. A. Lepage-Monette performed a roll call; all Council members were present
3 except R. Kniaziew, P. Quaid and H. Kennedy.
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6 **2. Adoption of the Agenda:** A draft agenda was circulated prior to the meeting.
7
8 **a. Conflicts of Interest:** P. Hemami asked Council members if anyone had a conflict of interest with any
9 item on the day's agenda. No conflicts were declared.
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11 A. Liang asked that an item be added to the agenda regarding a staffing update.
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13 Moved by A. Liang and seconded by K. Morcos **to adopt the agenda.**
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Motion carried

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19 **3. OEBC Modernization Proposal**

20 P. Hemami provided a brief update to Council: following the motion passed at the June Council meeting
21 to have Touchstone Institute develop a competency profile, P. Hemami sent OEBC a proposal
22 recommending that OEBC work with Touchstone to use the competency profile to create a new entry-
23 to-practice exam.

24

25 Council discussed the proposal sent to OEBC, the need for a new, bilingual exam, as well as the
26 importance of having regulators across Canada support a new national exam. Council also discussed
27 next steps and when a response to the proposal was expected.

28

29 The proposal had requested feedback ahead of the September Council meeting, with the intention that
30 Council could discuss OEBC's decision at that time.

31

32 **4. New Item – Personnel/Staffing**

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34 A. Liang asked for Council to be updated regarding recent changes to College staff.

35

36 M. Boon confirmed that the College has hired a new Manager, Finance and Office Administration; that
37 the role of Investigator, Complaints and Investigations has been filled internally; and a temporary staff
38 person is currently filling in at the front desk.

39

40 M. Boon confirmed she would send an email to Council regarding new staff.

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

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49 Moved by A. Liang and seconded by J. Van Bastelaar **to have the meeting to in camera.**

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Motion carried

52 *Guests left the meeting*

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Moved by B. Chisholm and seconded by K. Morcos **to go out of camera.**

Motion carried

M. Boon clarified a technical item: the reason the meeting went into camera was originally misstated. The section written in the agenda (section 7(2)(b)) is correct, however, it was noted verbally earlier in the meeting as the section related to personnel.

5. Dates of Upcoming Council Meetings

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

6. Adjournment: Moved by B. Chisholm and seconded by A. Micucci **to adjourn the meeting at 1:11 p.m.**

Motion carried

Council Meeting – September 27, 2019

COUNCIL ACTION LIST STATUS

Updated September 3, 2019

| Date | Minute Line | Action | Status | Comments |
|----------|-------------|--|-------------|---|
| 06/24/19 | 132 | To have legal counsel review the proposed policies and to have staff create accompanying flow chart and present to Council at the September meeting. | In progress | The policies in question are the Whistleblower policy and Reporting to Outside Agencies |
| 06/24/19 | 155 | The Public Relations Committee will review and discuss the need for patient-facing materials on optometric conditions | In progress | |
| 06/24/19 | 181 | To have Audit/Finance/Risk Committee review renewal fees and report back to Council at the Sept. Council Meeting | In progress | |

Council Meeting – June 24, 2019

MOTION LIST

| Minute Line | Motion | Committee | Decision |
|--------------------|---|-------------------|-----------------|
| 90 | Moved by J. Van Bastelaar and seconded by R. Kniaziew to approve the appointments. | Governance/ HR | Motion carried |
| 105 | Moved by J. Van Bastelaar and seconded by R. Kniaziew to circulate the revised by-laws. | Governance/ HR | Motion carried |
| 149 | B. Chisholm moves and K. Morcos seconds to approve revisions to OPR 7.11 Patients with Dry Eye Disease. | CPP | Motion carried |
| 167 | Moved by B. Chisholm and seconded by R. Kniaziew to approve the revisions to <i>Practice Locations – Reporting Requirements</i> policy. | CPP | Motion carried |
| 210 | Moved by P. Quaid and seconded by R. Kniaziew to approve the development of a competency profile co-developed with Touchstone Institute. | Registration | Motion carried |
| 230 | Moved by J. Van Bastelaar and seconded by Annie Micucci to adopt the FORAC Declaration of Commitment. | | Motion carried |

Executive Committee Report

Reporting date: September 11, 2019

Number of meetings in 2019: 10 teleconference meetings

Number of meetings since last Council meeting: 3 teleconference meetings

The Executive Committee met via teleconference on July 2, July 25, and August 22, 2019.

OEBC Modernization Proposal: A proposal was made in July to the Optometry Examining Board of Canada (OEBC) regarding the development of a new Entry-to-Practice exam that would replace the existing OEBC exam. At its June 24, 2019 meeting, Council decided to have Touchstone Institute proceed with the development of a competency framework, a first step in the exam development process. Under the College's proposal to OEBC, a new exam would be developed, administered and maintained by Touchstone Institute, but ultimately owned and funded by OEBC. It is the Executive Committee's view that this proposal would result in both a strengthened exam as well as improved oversight by optometric regulatory authorities across the country. The proposal is currently being reviewed by OEBC; no response has yet been received.

FORAC Meetings: Dr. Patrick Quaid, Ms. Maureen Boon, Ms. Hanan Jibry, and I attended the FORAC meetings on July 12-13, 2019 in Victoria, British Columbia. FORAC passed key motions to approve the funding of a comparator study between the National Board of Examiners in Optometry and OEBC examinations, as well as accept the Touchstone TPAO exam as a means of bypassing the Bridging Program for international optometric graduates whose International Graduated Optometrist Evaluating Examination exam scores meet the required minimum thresholds for such. In addition, the Alberta College of Optometrists provided FORAC with a detailed overview of a new organization (Royal Canadian College of Optometry) that seeks to establish a specialization credentialing process for Canadian optometrists.

Eyeglasses & Contact Lenses – Public Communication Documents: The Committee discussed the College's public communications on eyeglass and contact lens dispensing. The recommendation was for the Patient Relations Committee to review the public advisory documents in order to 1) align them with proposed changes to the dispensing standards, 2) ensure the tone is appropriate and 3) ensure they are clear and helpful. The memo to the Patient Relations Committee is provided following the report.

Committee Appointment: Ms. Maureen Chesney's term as a Publicly Appointed Member of Council concluded on September 13, 2019. In order to ensure that the committee remained constituted and based on the recommendation of the Governance/HR Committee, the Executive Committee appointed Ms. Winona Hutchinson to the Inquiries, Complaints and Reports Committee.

New Public Appointees: The Council welcomes two new public appointees: Ms. Winona Hutchinson was appointed on June 20, 2019 and Ms. Suzanne Allen was appointed on September 14, 2019, both for three-year terms.

College President: Due to a provision within the *Regulated Health Professions Act, 1991* ("no person who is elected may be a Council member for more than nine consecutive years."), my term on Council and as College President will conclude on December 10, 2019. It has been a tremendous honour and privilege to serve on Council since the December 2010 by-election, and I am very grateful for the confidence and trust that Council members have placed in me during my tenure as President. Given the

forward-thinking and insightful leadership of my Council colleagues, and the very capable and dedicated College staff, I am very enthusiastic about the future of optometric care in Ontario and in the College's ability to fulfill its role in enabling Ontarians to have access to high-quality, competent and ethical eye and vision care.

In accordance with Part 6.11(1) of the College by-laws, Dr. Marta Witer has agreed and will be appointed to fill the vacant Council seat for the remainder of the three-year term until January 2021. As per Part 7.05(1) of the College by-laws, the Vice-President Dr. Richard Kniaziew will assume the President position on December 11, 2019, until the end of the one-year officer term in January 2020. An election will be held at the September 2019 meeting to fill the upcoming vacancy for Vice-President.

Respectfully submitted:

Pooya Hemami, OD
President

MEMO TO FILE

Date: September 13, 2019

To: Dr. Christopher Nicol, Chair, Patient Relations Committee

From: Dr. Pooya Hemami, President

Re: Eyeglasses & Contact Lenses – Public Communication Documents

The Executive Committee would like the Patient Relations Committee to review the eyeglass and contact lens public advisory documents in order to 1) align them with proposed changes to the dispensing standards, 2) ensure the tone is appropriate and 3) ensure they are clear and helpful.

As you are aware, in 2012/2013, the Patient Relations Committee developed the eyeglass and contact lens public advisory documents now found on the College website. The documents were created in response to increasing patient/public enquiries regarding optometric examination, prescription and dispensing requirements. The documents addressed, at the time, the most prevalent questions being posed to College staff from patients either before or after seeing their optometrist. Though the documents have received minor updates to content over the past few years to align with any changes in legislation, standards and practices, a fulsome review has not taken place.

The College has begun the process of reviewing its prescribing and dispensing standard. At its September meeting, Council will review changes proposed by the Clinical Practice Panel to the College standard, OPR 6.4 Spectacle Therapy and the related document “Spectacle Therapy Using the Internet”. In addition to consolidating the two documents, the standards are proposed to be better aligned with recent technological trends and balance the public’s desire for convenience with public protection and safety.

At its recent meeting, the Executive Committee discussed the College’s public communications on eyeglass and contact lens dispensing. The language in the existing public advisory documents particularly with respect to internet dispensing of eyeglasses and contact lenses, could be modified to be more informative for patients looking for answers and direction from their health care provider and the College.

It was agreed that the College should review its current communications, with the goal of developing clear messaging, tone and language to inform patients of their choice and the risks associated with certain practises, such as online dispensing. **The Executive Committee asks that the Committee review the College’s online public communication regarding both eyeglass and contact lens prescription and dispensing, specifically the “[Eyeglasses – Questions and Answers](#)” and “[Contact Lenses - Questions and Answers](#)” documents.** Revisions should be aimed at shifting the tone and language of these documents to be more helpful and informative to patients/public when reaching out to the College for guidance on these matters.

Patient Relations Committee Report

Reporting date: August 1, 2019

Number of meetings in 2019: 1

Number of meetings since last Council meeting: 0

The Patient Relations Committee will meet in person on November 20, 2019.

Development of E-Learning Module

Staff has been working alongside the College's e-Learning developer to create the *Eye Consent – the Optometrist's Guide to Informed Consent* module, which provides practical information and examples about the definition of informed consent, why it is important, and when and how to document it. The Committee previously reviewed the module at its spring meeting. The final version was completed in late June, and went live on July 23, 2019 through the member online platform

At its June meeting, Council passed a motion to offer the e-Learning module at no costs to Ontario optometrists as an incentive for greater participation. Optometrists can complete the module once per continuing education (CE) cycle and receive one Category A CE credit hour. As of the date of this report, 105 optometrists have completed the CE module.

Staff/Committee Training – Sexual Abuse Prevention

As part of its mandate, the Patient Relations Program ensures that staff receive training on support and communications to facilitate working with victims of sexual abuse. A training session for both staff and committee members has been organised for the fall meeting. The session will be led by Mandy Bonisteel, who has worked as an anti-violence advocate, consultant and therapist for more than 20 years. Ms. Bonisteel is currently a Professor at George Brown College, where she is the Coordinator of the Assaulted Women's and Children's Counsellor/Advocate Program and Registered Nurse.

Funding for Therapy and Counselling Program

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

Respectfully submitted:

Christopher Nicol, OD
Committee Chair

Quality Assurance (QA Panel) Committee Activity Report

Reporting date: September 9, 2019

Number of meetings in 2019: 3

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. The panel reviewed recommendations proposed by the Quality Assurance Subcommittee, approved of the recommendations and revised its proposed changes to the Random Selection Criteria being introduced as a motion to Council at the September 27 meeting.
2. The panel reviewed several questions related to continuing education from members and stakeholders.
3. The panel addressed inclusion of data and diagnostic interpretation to be included in a member's submissions when undergoing a practice assessment.
4. The panel requested the Quality Assurance Subcommittee review two questions in the current Short Record Assessment (SRA) protocol for potential revision. This change would be separate from work to revise the full protocol
5. The Panel has also reviewed the following:

Outstanding Cases

- Practice Reassessment Following Remediation – 1 member
- Remediation/Coaching Follow-up – 2 members

New Cases Before the Panel

- Randomly Selected Practice Assessments – 51 members
- Referred Practice Assessments – 3 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

QA - Clinical Practice Panel Activity Report

Reporting date: September 10, 2019

Number of meetings in 2019: 5 (2 in-person, 3 teleconference)

Number of meetings since last Council meeting: 3 (teleconference)

Nature of items discussed/number of cases considered:

Designated Drugs Regulation

Standards of Practice for Spectacle Therapy (OPR 6.4)

Recommendations to Council (including rationale and impact on budget if

appropriate): Motions to amend the,

- i. Designated Drugs Regulation (O. Reg. 112/11); and
- ii. OPR 6.4 Spectacle Therapy

are included in the motion section.

Respectfully submitted:

Bill Chisholm, OD

Committee Chair

Quality Assurance Subcommittee – Activity Report

Reporting date: September 9, 2019

Number of meetings in 2019: 4

Number of meetings since last Council meeting: 2

Nature of items discussed/number of cases considered:

The Quality Assurance Subcommittee (QASC) met on July 4 and September 5, 2019 to develop recommendations regarding the redevelopment of the College's Quality Assurance Program. The recommendations were sent to the Quality Assurance Panel for consultation and are ready for Council's review and endorsement.

The QASC's mandate was to conduct an evaluation of the Quality Assurance Program and consider revisions. The recommendations being presented request that Council expand the QASC's mandate to implement changes to the Quality Assurance Program that have been identified as a result of the review.

Recommendations to Council:

Motion to accept Quality Assurance Subcommittee recommendations is included.

Respectfully submitted:

Ellen Pekilis

Committee Chair

Committee Report to Council

Inquires, Complaints and Reports Committee (ICRC)

(ICRC sits as two independent Panels)

Reporting Date: September 9, 2019

Number of meetings in 2019: 11 (6 in-person panel meetings; 1 in-person ICR Committee meeting (both panels); 4 teleconference)

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

- This report is 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 (June 5, 2019), without compromising the confidentiality of the process and the fairness owed to complainants and members of the College involved in the process.
- This respect for confidentiality 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 June 5, 2019 (last reporting date to Council) - some cases involve multiple allegations

| Type of Case | | | Number |
|----------------------|--------------------------------|----|-----------|
| Complaints | Newly filed | 12 | 22 |
| | Reviewed and decided by panels | 9 | |
| | Reviewed and carried over | 1 | |
| Registrar’s Reports | Reviewed and decided by panels | 2 | 5 |
| | Reviewed and carried over | 3 | |
| Incapacity Inquiries | | | 0 |
| TOTAL CASES | | | 27 |

Decisions Issued:

| | |
|-----------------------------|-----------|
| Complaints | 15* |
| Registrar’s Reports | 2 |
| Incapacity Inquiries | 0 |
| TOTAL | 17 |

| Dispositions <i>(some cases may have multiple dispositions or involve multiple members)</i> | Number |
|---|---------------|
| No further action (NFA) | 6 |
| Advice or recommendation | 4 |
| Remedial agreement (educational activities) | 4 |
| SCERP | 1 |
| Resolved through ADR | 2 |
| Referral to Discipline Committee | 0 |

| Nature of Allegations – For Disposed of Cases (NFA excluded)¹ <i>(includes primary and secondary allegations)</i> | Number |
|--|---------------|
| Unprofessional behaviour and/or communication | 6 |
| Improper billing/fees | 4 |
| Quality of care | 3 |
| Related to eyeglass and/or contact lens prescription | 2 |
| Release of prescription/records | 1 |
| Staff supervision | 1 |

***Timeframe for Resolution (re 15 complaints above):**

| | |
|-----------------------|----|
| 61-120 Days | 0 |
| 121 – 150 Days | 1 |
| 151 Days + | 14 |

| HPARB Appeals | Number |
|---------------------------------------|---------------|
| New appeal | 1 |
| Outstanding appeals to be heard | 2 |
| TOTAL APPEALS IN PROGRESS | 3 |
| ICRC Decision Confirmed – case closed | 1 |

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

Both Panels have continued using and, where necessary, suggesting 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

¹ No further action (NFA) dispositions are not reflected in this chart

Registration Committee Activity Report

Reporting Date: September 9, 2019

Number of meetings in 2019: 6

Number of meetings since last Council meeting: 3 (1 in-person; 2 teleconference)

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, the International Optometric Bridging Program (IOBP), the Optometry Examining Board of Canada (OEBC) and the National Board of Examiners in Optometry (NBEO). Discussions with FORAC and Touchstone Institute focused on streamlining the pre-registration process for international candidates.

The College Registrar, President, Committee Chair, and the Committee support staff attended the FORAC meeting in Victoria, B.C. on July 13, 2019. The Evaluating Exam Oversight Committee (EEOC) – which includes representatives from the Committee, Touchstone Institute, and FORAC – recommended that FORAC accept the Therapeutic Prescribing Assessment for Optometry (TPAO) exam component as part of the Internationally Graduated Optometrist Evaluating Exam (IGOEE) exam. Accepting the TPAO exam would allow candidates that score over a certain percentage on the TPAO exam component as well as on the IGOEE exam to bypass bridging. This recommendation was approved at the FORAC meeting.

The Committee met with Touchstone Institute on Aug. 15. FORAC staff were invited but could not attend. A total of 33 examinees participated in the TPAO exam pilot session: 15 recent optometry degree graduates, 14 senior optometry degree students, and four internationally educated optometrists. The reference group used for the purposes of the IGOEE and TPAO exam was recent optometry degree graduates. At the meeting, Touchstone Institute provided an update on the TPAO pilot exam session and the July 2019 IGOEE. The exam was challenged by 44 candidates who completed the short and long OSCE stations, the multiple-choice question portion, and the new TPAO exam portion. The results of the pilot sessions for the TPAO exam portion and the raw IGOEE exam results were discussed. Because the July 2019 IGOEE administration achieved a reliability coefficient of 0.88, the EEOC agreed to update the IGOEE cut-score algorithm during a teleconference meeting on Aug. 22.

Following the approval at the June 24 Council meeting, the College signed a contract to have Touchstone Institute commence development of a national competency profile, which has since begun.

The Committee support staff and staff from the IOBP and FORAC are scheduled to meet with Touchstone Institute on Sept. 16 to discuss data collection associated with international candidates. The purpose is to analyze trends throughout an international optometry candidate's journey to practice, which would inform performance trends.

All candidates for both the June 27 and the Sept. 9 Jurisprudence exam successfully completed the online Jurisprudence seminar. Candidates are now required to complete the online Jurisprudence seminar before their registration for an upcoming Jurisprudence exam can be confirmed.

Registration Committee member Dr. Abraham Yuen has been invited to participate in the NBEO Task Force, which will be discussing potential changes to the NBEO exam and coming up with recommendations. The Task Force is going to be making recommendations for changes to the NBEO Board of Directors. Once the Board of Directors accepts the Task Force's recommendations, the job analysis process will begin and NBEO will communicate the approved changes to stakeholders. This is expected to take place in early 2020.

The College President discussed his July 23, 2019, proposal to OEBC with the Committee. OEBC has been invited to continue discussing the proposal with the Committee at upcoming scheduled meetings (e.g., Oct. 17).

Respectfully submitted,

Dr. Patrick Quaid, Optometrist
Chair, Registration Committee

Discipline Committee Activity Report

Reporting date: September 5, 2019

Number of meetings in 2019: 1

Number of meetings since last Council meeting: 0

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

The Discipline Committee is preparing to conduct three discipline hearings:

1. Dr. Gregory Miller – Penalty Hearing to be scheduled

This matter came before a panel of the Discipline Committee of the College of Optometrists of Ontario on May 28-30, 2019 in Toronto, ON. The panel issued an order on finding on June 10, 2019. The Discipline Committee found that Dr. Miller committed professional misconduct pursuant to the following:

- Clause 51(1)(c) of the Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991, as set out in the following paragraphs of section 1 of Ontario Regulation 119/94 made under the Optometry Act, 1991:
 - paragraph 14: Failing to maintain the standards of practice of the profession by failing to identify or document Ms. X’s optic disc swelling; and
 - paragraph 39: Engaging in conduct or performing an act that, having regard to all the circumstances, would reasonably be regarded by members as unprofessional for making unprofessional remarks about vision therapy.

The Discipline Panel made no finding with respect to paragraph 11 of Ontario Regulation 11/9/94.

2. Dr. Ajay Chandail - Hearing dates TBD. Pre-hearing conference scheduled.

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.

3. Dr. Kashif Zoberi - Hearing dates TBD. Pre-hearing conference scheduled.

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

Six members newly appointed to the Discipline Committee have been registered to attend the Federation of Health Regulatory Colleges' training session *Conducting a Discipline Hearing – Basic program*, to take place in October 2019; three Discipline Committee members have also been registered to attend the parallel advanced program.

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

Respectfully submitted:

Jim Hoover, O.D.

Committee Chair

Governance/HR Committee Report

Reporting date: September 6, 2019

Number of meetings in 2019: 6 (3 in-person, 3 teleconference)

Number of meetings since last Council meeting: 2 (1 in-person, 1 teleconference)

The Governance/HR Committee met via teleconference on July 3, 2019 and in-person on August 26, 2019.

Proposed By-Law Changes

At the June 24, 2019 Council meeting, Council approved the Committee motion to circulate proposed by-law changes relating to governance reform for feedback from optometrists, stakeholders and the public. The College circulated the proposed by-law amendments on July 3, 2019 and set a deadline for comments of September 1. The collated and anonymized feedback is provided in the Council's briefing materials. The draft by-laws are now being presented to Council for approval.

Call for Nominations 2019

Elections will be held for the following four districts: District 1– GTA District; District 2 – Northern District; District 3 – Eastern District; and District 5 – Provincial District. The call for nominations was sent on August 23, 2019 and closes September 23. The Council election will be held on October 24, 2019.

Call for Volunteers 2019

The call for volunteer applications for positions as non-Council Committee members on statutory committees for the upcoming year was sent on August 27, 2019. The deadline for applications is November 8, 2019. Further information and how to apply can be found on the [College website](#).

Council Member Self-Evaluation

The Committee is currently 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 will occur in an informal setting and will 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. Further information on this process and feedback received will be brought forward at Council's next meeting.

Chair Evaluation/Self-Assessment

The Committee is also currently developing a guide for committee chairs, alongside an evaluation process. This will assist the College by setting expectations/developing a competency framework for its chairs while also assisting with the committee selection process in upcoming years.

Term Limits

The Committee is considering a proposal that maximum term limits for elected Council members be reduced from nine to six years. This alternative option does not allow optometrists, who were elected in a by-election to fill a vacancy, to run for election if they would not be able to fill the complete term before reaching the maximum nine consecutive years on Council (in accordance with Section 5.(2) of the *Health Professions Procedural Code*). Council will be involved in an organised facilitation session as part of the September meeting to further discuss the proposals.

Recommendations for Committee Vacancies

Appointed member Maureen Chesney's term expired on September 13 and Ellen Pekilis' term expires on

November 1, 2019. The Committee has made recommendations to Council/Executive to fill the vacant positions on the respective committees. In order to remain constituted, the Executive Committee made a motion to appoint Winona Hutchinson to the Inquiries, Complaints and Reports Committee. The remaining appointment recommendations are outlined in the Committee's motion.

Training:

June Council Meeting: Council members were involved in a training day on June 25, 2019. The day was split into two with the morning session on board governance lead by Dale Atkinson and the afternoon session on financial literacy lead by Trevor Jaundoo.

Meeting Facilitation: The Committee recapped the meeting facilitation training that was provided to all committee chairs on June 3, 2019. Participants agreed that the training was a success and recommended that this be provided on an annual basis for all new and returning chairs. A formal update/discussion on this training will be provided at the Council meeting.

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 June 24 & 25, 2019 meeting/training are provided as an addendum to the report.

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

1. To appoint, effective immediately, Winona Hutchinson to the Registration Committee and Discipline Committee; John Van Bastelaar to the Patient Relation Committee; and Suzanne Allen to the Discipline Committee. To appoint, effective November 1, 2019, Suzanne Allen to the Patient Relations Committee; Narendra Shah to the Governance/HR Committee and Quality Assurance Subcommittee; Winona Hutchinson to the Strategic Planning Committee; Dr. Marta Witer as Chair of the Strategic Planning Committee; and Kamy Morcos as Chair of the Quality Assurance Subcommittee.

Respectfully submitted:

John Van Bastelaar
Committee Chair

Council Meeting Evaluation – Survey Results

Following the Council meeting and training session on June 24 & 25, 2019, members were sent an online survey to complete, asking them to evaluate the meeting effectiveness and make any suggestions moving forward.

All members in attendance (16) responded to the survey.

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

96% - Adequately Prepared

a. The meeting was well organized.

15 – YES

1 – NO

b. The interaction between members was well managed.

16 – YES

0 – NO

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

16 – YES

0 – NO

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

-No improvements/changes at this time (x5)

-Consider use of a timer to ensure discussion topics run based on allotted time (x2)

-Better time contingency

-Share draft agenda with Council ahead of time to allow members to add further items for discussion

-State full name of organisations before the use of acronyms

-Offsite session was good idea but meeting finished on morning of first day; use time more carefully

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

-All members given fair opportunity to share input (x7)

-Chair did well to invite comments from all parties (x3)

-Ask if anyone has any further observations/questions/points of clarification before moving on

- For items anticipated to be contentious, ask for written submissions before the meeting.

-No longer need to ask this question; repetitive

4. Have the Council meetings improved based off previous feedback?

-Meetings have improved (x8)

-Unsure if improvement suggestions are being implemented (i.e. recommendation to introduce staff at each Council meeting is still not being done) (x3)

-Still reliance on round table discussions; use some of the alternative facilitation techniques learned at the chair training

-Not able to comment (x2)

5. Feedback opportunity – Morning governance session with Dale Atkinson?

-Informative and a few useful takeaways (x7)

-Beneficial for new members to have such a session (x3)

-More questions raised than answers (x2)

- Appreciated the clarification on the importance of members versus "persons" in the enforcement regulations
- American perspective; not all applicable to Ontario
- Provide more jurisdictional examples
- Seating was not ideal; no room to move around
- Should have been a full day session

6. Feedback opportunity – Afternoon financial literacy session with Trevor Jaundoo?

- Excellent, very appreciated and entertaining (x10)
- Great choice in presenter
- Useful – consider doing such training on a regular basis or create a written version (x3)
 - Bring presenter back to go into further detail regarding specific lines
- Built confidence in reading such statements moving forward
- Could have been shorter and more detailed
- Not able to comment (x2)

7. In terms of future training opportunities, what are three areas/topics you would like further detailed in similar sessions?

- | | |
|---|--|
| -Delineation between board oversight and staff delegation (x2) | -How to develop meaningful KPIs |
| -Further financial training (x2) | -Legislature Approval (process) |
| -Strategic plan (x2) | -Presentation techniques |
| -Roles and responsibilities of board committees (Governance/AFR/Executive) (x2) | -Role/Relationship w/ other eye health Colleges (CPSO, COO, other provinces) |
| -Advocacy v. Public Protection | -Role/Relationship w/ other stakeholders (Ministry, OFC, FHRCO) |
| -Bioethics | -Specific topics (i.e. 1994 Agreement on Internal Trade) |
| -By-law Amendments (process) | -Staff – maintaining work/life balance |
| -Conflict of Interest/Bias | -Team building exercise |
| -Governance trends | -Update on Legislative changes |
| -Health Professions Procedural Code | -Update on other Colleges |
| -Human Resource training (concepts that relate to Board work) | |

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

- | | |
|--|--|
| -Better facilitation techniques to encourage discussion (x2) | -Continue to set meeting dates/teleconferences early |
| -Equitable distribution of individual Council members on committees (x2) | -Identify risks/opportunities |
| -More time to prepare; materials prepared earlier (x2) | -Learn from other Colleges experience (invite other Registrars to speak, discuss issues in the media, etc) |
| -Time management (x2) | -Public member renewal process |
| -Action items | -Regular teleconferences/communication with Council |
| -Council interaction | -Strategic Plan |
| -Council member evaluations | -Succession Planning |

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

- Council should discuss the survey questions, suggestions and outcomes; pull out of consent agenda
- Helpful at the January meeting when Registrar introduced the staff present; be beneficial for the practice to continue at each Council meeting (x3)
- Need to understand how Council can assist the Registrar as they begin new role
- Past suggestion that a short summary of each discussion topic be presented during meetings; beyond reading of the motion or briefing note – additional background would contribute to more fruitful discussion
- Survey was too long
- Tailor future committee chair training towards actual College committee work
- Who is going to be the next President and how will they be chosen?

Audit/Finance/Risk Committee Activity Report

Reporting Date: Sept. 13, 2019

Number of meetings in 2019: 3

Number of meetings since last Council meeting: 1 (in-person)

Nature of items discussed/number of cases considered:

The Audit/Finance/Risk (AFR) Committee discussed the draft risk lists compiled at the June 2019 Committee meeting. The College Registrar and staff will be streamlining and reframing the risks list and it will be referred to the Committee for review at its next meeting later this fall. Following this review, it is expected to feed into the strategic planning session planned in early 2020.

After a request was made at the June 2019 Council meeting to review the College's renewal professional corporation fees, the Committee support staff compiled information and conducted an environmental scan of professional corporation application and renewal fees charged by Ontario regulatory colleges. Following a review of the compiled information and discussion, the Committee made a recommendation to reduce the College's fees for new professional corporations and renewals (refer to the September 27 AFR Motion to Council). The recommended effective date will be determined pending a review of College operations.

The Committee reviewed and recommended the new Finance Policy – Honoraria & Expense Guidelines for use by Council and committee members and staff. The policy includes an updated Claim Form (see enclosed). The AFR Committee will review the policy on an annual basis.

The College's legal counsel completed a review of the Whistleblower Policy that was provided at the June 24, 2019 Council meeting. The Committee is recommending that Council approve the updated policy (refer to the September 27 AFR Motion to Council).

The Committee also discussed moving the accounting processes, which are currently outsourced, in-house. The transition is expected to take place over the next few months.

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/Risk Committee
Encl.

Strategic Planning Committee Report

Reporting date: September 17, 2019

Number of meetings in 2019: 4 (1 in-person, 3 teleconference)

Number of meetings since last Council meeting: 1 (in-person)

The Strategic Planning Committee met in person on September 10, 2019.

Environmental Scan and SWOT Analysis: 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. The process was divided into two phases: Phase 1 comprised the background work necessary to inform the development of the strategic plan itself. The background summary would consist of a jurisdictional/environmental scan and current state analysis of the College. The Committee engaged Magnetic North Consulting to undertake the review.

The Environmental Scan and SWOT Analysis was completed in June and presented to the Committee at its September meeting. The Chair will provide a preliminary presentation on the report. The Committee intends to meet with the consultant to further discuss the report. The full report will be provided to Council ahead of the strategic planning facilitated sessions.

Strategic Plan Development: Phase 2 of the process comprises the development of the strategic plan. The Committee has developed a tentative timeline to undertake this project, beginning with a facilitated session with Council in January 2020 and completing the project by June 2020. In order to proceed, the Committee has agreed that an external consultant needs to be engaged. A motion to this effect has been presented.

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

1. To proceed with an RFP to engage a facilitator/consultant for the College's strategic planning process.

Respectfully submitted:

Ellen Pekilis
Committee Chair

5 / FINANCIAL MATTERS

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

Treasurer's Report

Reporting Date: September 13, 2019

All of Council shares the responsibility to provide oversight of the College's finances. In addition to the production of annual Audited Financial Statements, Council is kept informed of the College's ongoing financial health through quarterly reports of the College's Balance Sheet and details of the Income and Expenditures report, as well as the dashboard report.

SUMMARY

The College recorded a year-to-date surplus of \$213,793 as of June 30, 2019. This surplus represents a positive variance to budget of \$383,225 (per Finance Dashboard).

The \$70,774 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 June 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/Risk (AFR) Committee meeting

The AFR Committee held its meeting on September 13, 2019. Two new policies, Whistleblower and Honoraria & Expense Guidelines (see AFR Committee motions), were reviewed and recommended to move forward to Council. The Committee is continuing to work on the Risks List for input into the strategic plan.

Respectfully submitted,

Dr. Patrick Quaid, Optometrist
Treasurer

Enclosures:

1. Finance Dashboard as at June 30, 2019
2. Financial Statements as at June 30, 2019

**COLLEGE OF OPTOMETRISTS OF ONTARIO
FINANCIAL STATEMENT SUMMARY AS OF JUNE 30, 2019**

1. Incomes and Expenditures

Month 6

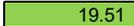
| | ANNUALIZED BUDGET | YTD BUDGET | YTD ACTUALS | VARIANCE | %VARIANCE | |
|------------------|----------------------|---------------|----------------|-----------|-----------|---|
| REVENUES | 2,729,136 | 1,364,568 | 1,435,342 | 70,774 | |  Good(Above5%) |
| EXPENSES | 3,068,000 | 1,534,000 | 1,221,549 | (312,451) | |  Requires some attention (between -5 and 5%) |
| SURPLUS(DEFICIT) | (338,864) | (169,432) | 213,793 | 383,225 | 75% |  Poor(Under-5%) |

Overall variance due to under spending in expenses and 71K 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

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

(5,133,255-144,837)/(3,068,000/12)  19.51 College can cover its expenses for 19 months using its Net Assets.

3. Investment Portfolio Performance

Weighted Average Return
as of June 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 6 months | Last 12 months | Last 3 years |
|--|-----------|--|---|--|---|
| Canadian equity (S&P/TSX Capped Composite) | 25% | 2.58% | 16.22% | 3.87% | 8.39% |
| US Equities (S&P500) | 10% | 3.88% | 17.48% | 8.62% | 13.07% |
| Fixed Income (FTSE Canada Universe Bond Index) | 55% | 2.51% | 6.52% | 7.37% | 2.66% |
| International Equities (MSCI EAFE) | 10% | 3.16% | 14.34% | 3.34% | 10.89% |
| Benchmark | 100% | 2.73% | 10.82% | 6.22% | 5.96% |
| Returns | | | | | |
| Weighted Average returns * | | 1.38% | 5.32% | 3.52% | |
| Over/under | |  -1.35% |  -5.50% |  -2.70% |  |

*Please note the 6-month and 12-month returns are subject to minor variance.

College of Optometrists of Ontario

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

Toronto, Ontario

M4T 2Y3

Balance Sheet

June 2019

| | 30-Jun-19 | 30-Jun-18 |
|---|------------------|------------------|
| ASSETS | | |
| Current | | |
| Cash | 365,228 | 248,098 |
| Short Term Investment | | |
| Amounts Held By Broker | 62,469 | 109,109 |
| Accounts Receivable | 25,700 | |
| Interest Receivable | | |
| Prepaid Expenses | 16,451 | 14,905 |
| | 469,847 | 372,112 |
| Portfolio Investments | | |
| Investments, Securities & Bonds | 5,730,921 | 5,555,432 |
| 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 |
| | 6,345,605 | 6,108,777 |
| LIABILITIES | | |
| Current | | |
| Accounts Payable & Accrued Liabilities | 46,169 | 29,978 |
| Accrued Building Upgrade Expenses | 0 | 0 |
| Fees Received in Advance | 1,166,182 | 1,128,618 |
| | 1,212,350 | 1,158,596 |
| NET ASSETS | | |
| Invested in Capital Assets | 144,837 | 181,232 |
| Appropriated Special Policy Funds (1) | 3,370,000 | 2,800,000 |
| Unappropriated Surplus | 1,618,418 | 1,968,949 |
| | 5,133,255 | 4,950,181 |
| | 6,345,605 | 6,108,777 |

College of Optometrists of Ontario

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

Toronto, Ontario

M4T 2Y3

Income and Expenditure Report

As at June 30/2019

| | 2018 Actuals | 2019 Budget Estimate | Budget to Date 6/12 | Income/Expend. To Date | % of Budget To Date |
|----------------------------------|--------------------|----------------------|---------------------|------------------------|---------------------|
| Income | | | | | |
| Annual registration fees | \$2,309,907 | \$2,378,021 | \$1,189,011 | \$1,202,940 | 101.2% |
| Professional Corporation fees | \$367,622 | \$290,115 | \$145,058 | \$182,614 | 125.9% |
| Application Fees | \$63,210 | \$56,000 | \$28,000 | \$47,954 | 171.3% |
| Credential assessment fees | | | \$0 | | #DIV/0! |
| Optometry review Committee | | | \$0 | | #DIV/0! |
| Continuing Education | \$810 | \$2,000 | \$1,000 | \$90 | 9.0% |
| QA - Assessments | | \$0 | \$0 | | #DIV/0! |
| Other Income | \$15,961 | \$3,000 | \$1,500 | \$1,744 | 116.3% |
| Total Revenues | \$2,757,510 | \$2,729,136 | \$1,364,568 | \$1,435,342 | 105.2% |
| Committee Expenses | | | | | |
| Quality Assurance Committee | \$115,368 | \$90,000 | \$45,000 | \$34,318 | 76.3% |
| Recovery of QA Assessment | (\$64,576) | | \$0 | (\$15,307) | #DIV/0! |
| Communication Committee | | | \$0 | | #DIV/0! |
| Clinical Practice Panel of QAC | \$26,624 | \$30,000 | \$15,000 | \$13,373 | 89.2% |
| College Representation | \$16,947 | \$30,000 | \$15,000 | \$5,318 | 35.5% |
| ICRC | \$89,628 | \$80,000 | \$40,000 | \$40,268 | 100.7% |
| Council Meeting | \$76,375 | \$100,000 | \$50,000 | \$53,352 | 106.7% |
| Council Training | \$19,765 | \$20,000 | \$10,000 | \$962 | 9.6% |
| Discipline Committee | \$37,227 | \$60,000 | \$30,000 | \$49,938 | 166.5% |
| Credential Assessment Committee | | | \$0 | | #DIV/0! |
| FORAC Contribution | \$23,910 | \$25,000 | \$12,500 | \$25,894 | 207.2% |
| 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 | \$5,000 | | 0.0% |
| Executive Committee | \$58,402 | \$45,000 | \$22,500 | \$15,121 | 67.2% |
| Memberships (FHRCO, etc) | \$19,885 | \$25,000 | \$12,500 | \$5,470 | 43.8% |
| Medals and Presentations | \$1,502 | \$4,000 | \$2,000 | \$1,496 | 74.8% |
| Patient Relations Committee | \$6,410 | \$25,000 | \$12,500 | \$5,074 | 40.6% |
| Registration Committee | \$39,796 | \$45,000 | \$22,500 | \$21,929 | 97.5% |
| Illegal/Internet dispensing | \$110,896 | \$100,000 | \$50,000 | \$36,307 | 72.6% |
| Unauthorized Practice | \$5,143 | \$30,000 | \$15,000 | | 0.0% |
| Regulation Proposals | | \$5,000 | \$2,500 | | 0.0% |
| Strategic Planning | | \$36,000 | \$18,000 | \$578 | 3.2% |
| Finance/Audit and Risk Committee | | \$40,000 | \$20,000 | \$3,713 | 18.6% |
| OEBC Contribution | | \$0 | \$0 | | #DIV/0! |
| Governance committee/HR | \$32,437 | \$45,000 | \$22,500 | \$33,673 | 149.7% |
| Total Committee Expenses | \$616,364 | \$845,000 | \$422,500 | \$331,478 | 78.5% |

College of Optometrists of Ontario

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

Toronto, Ontario

M4T 2Y3

Income and Expenditure Report

As at June 30/2019

| | 2018 Actuals | 2019 Budget Estimate | Budget to Date 6/12 | Income/Expend. To Date | % of Budget To Date |
|---|--------------------|----------------------|---------------------|------------------------|---------------------|
| Admin. Expenses | | | | | |
| Bank & Credit Card Fees | \$65,317 | \$60,000 | \$30,000 | \$934 | 3.1% |
| Investment management Fees | \$38,383 | \$45,000 | \$22,500 | \$18,666 | 83.0% |
| Occupancy Costs | \$149,705 | \$155,000 | \$77,500 | \$76,491 | 98.7% |
| Insurance | \$5,860 | \$10,000 | \$5,000 | \$4,075 | 81.5% |
| Legal General | \$33,797 | \$30,000 | \$15,000 | \$10,012 | 66.7% |
| Legal - Special | \$396 | \$5,000 | \$2,500 | | 0.0% |
| Legal - Registration | \$7,443 | \$10,000 | \$5,000 | \$398 | 8.0% |
| Legal - Quality Assurance | | \$0 | \$0 | | #DIV/0! |
| Legal - ICRC | \$26,626 | \$45,000 | \$22,500 | \$22,682 | 100.8% |
| Legal Discipline | \$221,999 | \$170,000 | \$85,000 | \$49,500 | 58.2% |
| Accounting & Audit | \$40,463 | \$45,000 | \$22,500 | \$6,550 | 29.1% |
| Recovery of discipline cost | (\$54,500) | \$0 | \$0 | (\$36,500) | #DIV/0! |
| Library Expense | \$892 | \$1,000 | \$500 | \$516 | 103.2% |
| Web Site & Software | \$47,443 | \$70,000 | \$35,000 | \$29,342 | 83.8% |
| Database / IS Servicing/Special Project | | \$0 | \$0 | \$39,814 | #DIV/0! |
| Office Equipment | | \$5,000 | \$2,500 | | 0.0% |
| Computer Hardware | \$1,506 | \$20,000 | \$10,000 | \$224 | 2.2% |
| Leasing of Equipment | \$15,525 | \$15,000 | \$7,500 | \$8,478 | 113.0% |
| Office Supplies and Maint. | \$21,037 | \$25,000 | \$12,500 | \$11,961 | 95.7% |
| Postage & Courier | \$14,066 | \$15,000 | \$7,500 | \$7,981 | 106.4% |
| Communications and Design | \$3,164 | \$10,000 | \$5,000 | \$1,000 | 20.0% |
| Printing | | \$5,000 | \$2,500 | | 0.0% |
| Staff Training | \$5,924 | \$20,000 | \$10,000 | \$2,282 | 22.8% |
| Telephone and Internet | \$8,527 | \$10,000 | \$5,000 | \$4,244 | 84.9% |
| Human Resources(Consultants) | \$18,288 | \$15,000 | \$7,500 | \$6,262 | 83.5% |
| OE Tracker costs | \$45,602 | \$52,000 | \$26,000 | \$50,766 | 195.3% |
| Jurisprudence examination | \$21,026 | \$20,000 | \$10,000 | \$16,484 | 164.8% |
| E- Learning module development | | \$25,000 | \$12,500 | \$19,900 | 159.2% |
| Other Expense | \$1,413 | \$5,000 | \$2,500 | \$2,163 | 86.5% |
| Payroll | | | \$0 | | #DIV/0! |
| Consulting | \$50,692 | \$70,000 | \$35,000 | | 0.0% |
| Salaries | \$1,043,706 | \$1,150,000 | \$575,000 | \$485,139 | 84.4% |
| Staff Benefits | | \$115,000 | \$57,500 | \$50,707 | 88.2% |
| Sub-Total | \$1,834,301 | \$2,223,000 | \$1,111,500 | \$890,071 | 80.1% |
| Sub-Total | \$0 | \$0 | \$0 | \$0 | |
| Total Admin. Expenses | \$1,834,301 | \$2,223,000 | \$1,111,500 | \$890,071 | 80.1% |
| Total Operating Expenses | \$2,450,665 | \$3,068,000 | \$1,534,000 | \$1,221,549 | 79.6% |
| EBITDA | \$306,844 | (\$338,864) | (\$169,432) | \$213,793 | \$0 |

Income and Expenditure Report

As at June 30/2019

| | 2018 Actuals | 2019 Budget Estimate | Budget to Date 6/12 | Income/Expend. To Date | % of Budget To Date |
|--|------------------|----------------------|---------------------|------------------------|---------------------|
| Depreciation | \$39,011 | \$50,000 | \$25,000 | \$0 | 0.0% |
| Operating Income | \$267,833 | (\$388,864) | (\$194,432) | \$213,793 | \$0 |
| Exceptional Investments | | | | | |
| Research for Entry-to-Practice Exam | \$1,470 | | \$0 | | #DIV/0! |
| Online Jurisprudence seminar & exam | \$0 | | \$0 | \$6,798 | #DIV/0! |
| Quality Assurance Program Review | \$49,600 | | \$0 | | #DIV/0! |
| Operating income after exceptionals | \$216,763 | (\$388,864) | (\$194,432) | \$206,995 | #DIV/0! |
| Investment Income | (\$34,574) | \$79,591 | \$39,796 | \$109,117 | 274.2% |
| NET RESULTS | \$182,190 | (\$309,273) | (\$154,637) | \$316,112 | #DIV/0! |

6 / REGISTRAR'S REPORT

6. Registrar Maureen Boon to provide College updates via PPT presentation that will touch on:
 - a. The first three months
(key activities, outreach)
 - b. The next three months
(areas of focus, budget)

7 / MOTIONS

7. Motions Brought Forward from Committees

a. Strategic Planning Committee

- To proceed with an RFP to engage a facilitator/consultant for the College's strategic planning process.

b. Governance/HR Committee

- To appoint, effective immediately, Ms. Winona Hutchinson to the Registration Committee and Discipline Committee, Mr. John Van Bastelaar to the Patient Relation Committee and Ms. Suzanne Allen to the Discipline Committee and to appoint, effective November 1, 2019, Ms. Suzanne Allen to the Patient Relations Committee, Mr. Narendra Shah to the Governance/HR Committee and Quality Assurance Subcommittee, Ms. Winona Hutchinson to the Strategic Planning Committee, Dr. Marta Witer as Chair of the Strategic Planning Committee and Dr. Kamy Morcos as Chair of the Quality Assurance Subcommittee.

c. Audit/Finance/Risk

- That Council approve the updated Whistleblower policy following a review by the College's legal counsel.
- That Council approve reducing the new professional corporation fees from \$630 to \$440 and reducing renewal professional corporation fees from \$315 to \$220. The effective date is pending an operational review.
- That Council approve the Finance Policy – Honoraria & Expense Guidelines.

d. Quality Assurance Committee

i. QA Subcommittee

- That Council endorse the recommendations proposed by the Quality Assurance Subcommittee to revise the Quality Assurance Program.

ii. QA Panel

- That Council approve amendments to the Random Selection Criteria proposed by the Quality Assurance Panel.

iii. Clinical Practice Panel

- That Council approve revisions to the standard OPR 6.4 Spectacle Therapy.
- That Council approve amendments to the Designated Drugs Regulation (O. Reg. 112/11), for circulation to members and stakeholders for consultation.

Motion to Council

Name of committee: Strategic Planning Committee

Date of submission: September 17, 2019

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

Proposed motion:

To proceed with an RFP to engage a facilitator/consultant for the College’s strategic planning process.

| Recommendation to Council and Rationale | |
|---|---|
| The Issue | The Strategic Planning Committee recommends that an RFP be circulated to engage a facilitator/consultant to assist with the development of a new strategic plan. |
| Background | <p>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 change in College registrar, the process was divided into two phases: Phase 1 comprised a current state assessment and environmental scan and Phase 2 being the development of a strategic plan.</p> <p>At its recent meeting, the Committee has received and reviewed the environmental scan and SWOT analysis. This completes Phase 1 of the project. The Committee is now aiming to commence with Phase 2 and develop the plan. As the Committee noted in its June Report to Council, an RFP will need to be circulated to engagement a consultant for this stage.</p> |
| Analysis, including impact on budget | <p>Ideally, the College would have a new strategic plan in place by June 2020. Based on the current Council schedule, facilitated planning and discussion sessions could occur as part of the January and April 2020 meetings. This would allow a final report to be compiled and ready for approval by the June 2020 meeting.</p> <p>To fulfill their mandate and meet with this timeline, a consultant would need to be engaged to assist with facilitation and drafting a proposed plan. It is estimated that engaging such a consultant would cost a minimum of \$50 000.</p> |
| Options (are there alternatives) | To continue with the current Strategic Plan, last updated in 2015. |
| Implications/expectations if approved | An RFP would be drafted and distributed to engage a strategic planning consultant. After receiving the proposals, potential consultants would be shortlisted and present at the Committee’s next meeting. The aim is to have a consultant engaged by mid-November, allowing sufficient time to prepare for a January facilitation session with Council. |

| | |
|---|---|
| Implications/potential consequences if not approved | If not approved, Council could attempt to develop a new strategic plan without the use of an external consultant. The Committee would have to further discuss and adjust the planning process and the timelines originally proposed if no external assistance was provided. |
|---|---|

Motion to Council

Name of committee: Governance/HR Committee

Date of submission: September 6, 2019

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

Proposed motion:

To appoint, effective immediately, Ms. Winona Hutchinson to the Registration Committee and Discipline Committee, Mr. John Van Bastelaar to the Patient Relation Committee and Ms. Suzanne Allen to the Discipline Committee and to appoint, effective November 1, 2019, Ms. Suzanne Allen to the Patient Relations Committee, Mr. Narendra Shah to the Governance/HR Committee and Quality Assurance Subcommittee, Ms. Winona Hutchinson to the Strategic Planning Committee, Dr. Marta Witer as Chair of the Strategic Planning Committee and Dr. Kamy Morcos as Chair of the Quality Assurance Subcommittee.

| Recommendation to Council and Rationale | |
|---|---|
| The Issue | <p>The Governance/HR Committee recommends the following appointments:</p> <p>Effective immediately,</p> <ul style="list-style-type: none"> • Ms. Winona Hutchinson to Registration Committee and Discipline Committee; • Mr. John Van Bastelaar to the Patient Relation Committee; and • Ms. Suzanne Allen to the Discipline Committee. <p>Effective as of November 1, 2019,</p> <ul style="list-style-type: none"> • Ms. Suzanne Allen to the Patient Relations Committee; • Mr. Narendra Shah to the Governance/HR Committee and Quality Assurance Subcommittee; • Ms. Winona Hutchinson to the Strategic Planning Committee; • Dr. Marta Witer as Chair of the Strategic Planning Committee; and • Dr. Kamy Morcos as Chair of the Quality Assurance Subcommittee. |
| Background | <p>Ms. Maureen Chesney’s appointment concluded on September 13, 2019. Ms. Chesney sat on four committees: Discipline Committee, ICRC, Patient Relations Committee and Registration Committee.</p> <p>Ms. Ellen Pekilis’ appointment will conclude on November 1, 2019. Ms. Pekilis currently sits on the Discipline Committee, Patient Relations Committee and Governance/HR Committee. She is also the chair of the Strategic Planning Committee and Quality Assurance Subcommittee.</p> <p>As per its terms of reference, the Governance/HR Committee has made recommendations to fill these vacancies in order for the committees to remain constituted. The Executive Committee passed a motion to appoint Ms. Winona Hutchinson to fill the vacancy on the ICRC in order to</p> |

| | |
|---|---|
| | <p>ensure that committee was constituted in the interim period. The remaining recommendations are included in this motion.</p> <p>Ms. Winona Hutchinson and Ms. Suzanne Allen were also recently appointed to the College. As per Part 14.05(1) of the College by-laws, all appointed Council members 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/standing/ad-hoc 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 or respective terms of reference.</p> |
| Implications/expectations if approved | If approved, these committees will be fully constituted under the by-laws and/or terms of reference. |
| 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. |

Motions to Council

Name of Committee: Audit/ Finance/ Risk Committee

Date of Submission: Sept. 13, 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 updated Whistleblower policy following a review by the College's legal counsel. |
| The Issue | The College currently has no Whistleblower policy (please refer to the enclosed policy). This policy was contemplated from a risk mitigation perspective to ensure that staff and Council members are encouraged to report serious issues and there is a clear process for managing those concerns once received. |
| Background | The Whistleblower policy was developed following a review of other regulatory colleges' policies. |
| Analysis, including impact on budget | Having the Whistleblower policy in place will serve to protect the College in a variety of situations. It will 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 policy is 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: | Whistleblower | | |
| Status: | Draft | Version: | 0.6 |
| Date Approved: | | Date Revised: | September 13, 2019 |

Introduction

The College of Optometrists of Ontario (College) believes that effective and meaningful communication at all levels of the organisation 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 stakeholders to report information in good faith regarding reportable acts and to outline the process for assessing, investigating and responding to such reports.

Overview

This policy covers incidents where a College staff member, 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).

Application

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

College staff, Council/committee members and/or stakeholders are encouraged to raise genuine concerns so that the College can address such acts. When a concern is raised in good faith, they take on the role of a 'Whistleblower'. The College will ensure that a Whistleblower will be protected from retaliation, such as harassment, discrimination or victimization.

However, reporting by a Whistleblower must be made in good faith. A report that is not made in good faith will be taken very seriously by the College and the individual may be subject to disciplinary action, including possible sanctions, disqualification or termination from their current role.

Anonymity

The College will not accept anonymous reporting as the proper investigation of the issue 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 all parties.

Reportable Acts

In respect of this policy, reportable acts include but are not limited to:

- 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; and
- Danger to the health and safety of staff, Council/committee members, stakeholders and/or the public.

Reporting Process

A Whistleblower must communicate the reportable act as soon as possible after they become aware of the incident. A Whistleblower must submit their report in person or in writing (by mail, fax or email) to the Registrar, Assistant Registrar, or President, as outlined below.

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.

All information received from a Whistleblower shall be kept confidential. 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 where appropriate. The Whistleblower will be apprised of the outcome of the investigation (subject to compliance with applicable privacy legislation) and any decision made.

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 Act 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 considered by the Governance/HR Committee before if necessary, being presented to Council.

iii. Reportable Act 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 considered by the Governance/HR Committee before if necessary, being presented to Council who may take action 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

Upon receipt the information will be assessed by the appropriate individual (as provided above) who will make a recommendation regarding the investigation or send it to the appropriate staff management, committee or Council.

The appropriate staff management, committee or Council will determine the extent of further investigation required and if any action is to be taken, dependent on the scope and severity of the act reported. At their discretion, the appropriate group may refer the report to an independent third party for review.

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 is 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 be kept in a confidential manner by the College, unless disclosure is otherwise authorized pursuant to a decision issued in accordance with this policy.

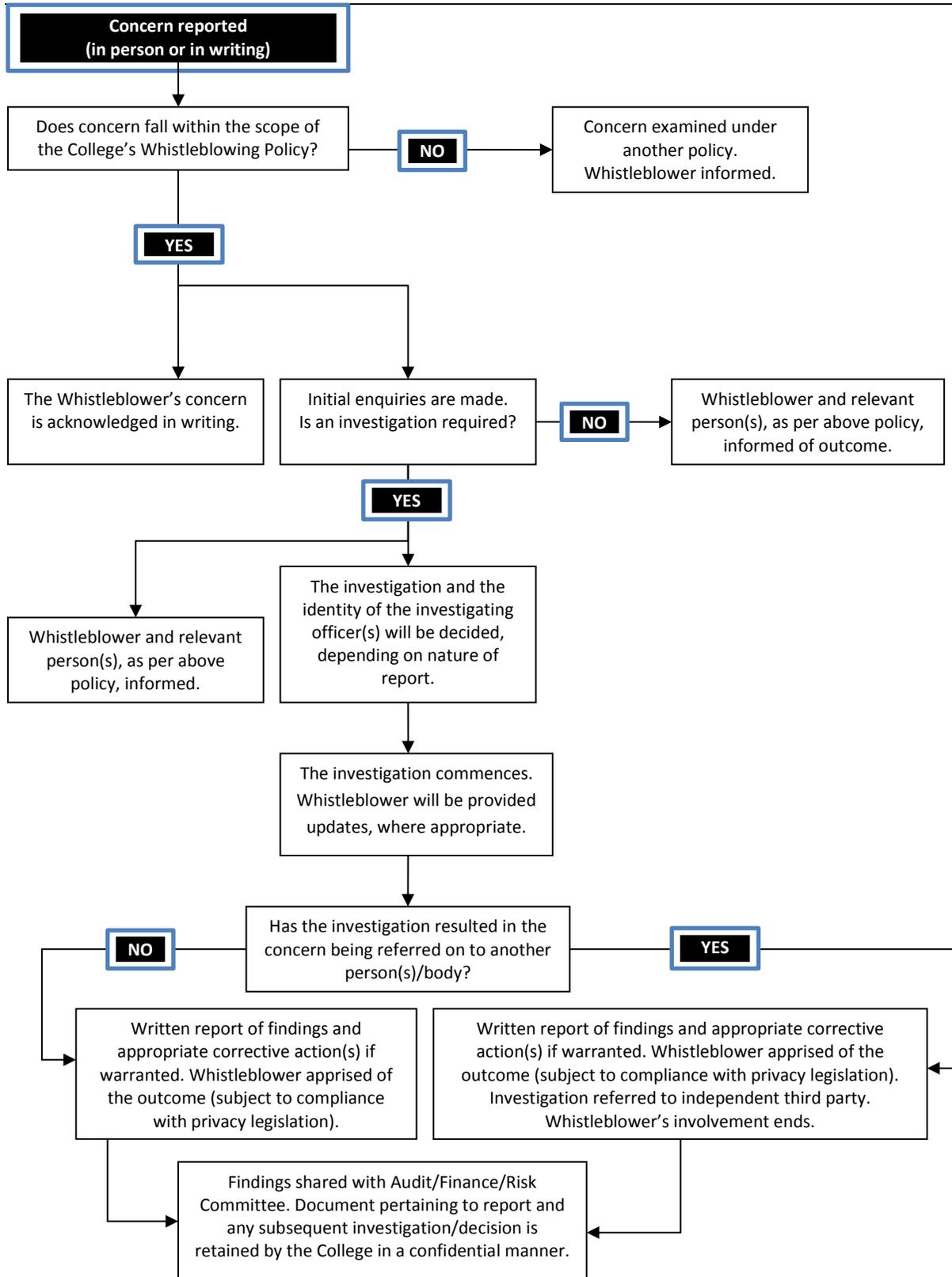
¹ Under no circumstance will an incident be investigated by a College staff member who is involved in the reportable act.

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
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

Appendix 1 – Whistleblower Process Flowchart



| | |
|---|---|
| Recommendation no. 2 to Council and Rationale | That Council approve reducing the new professional corporation fees from \$630 to \$440 and reducing renewal professional corporation fees from \$315 to \$220. The effective date is pending an operational review. |
| The Issue | The fees for incorporation have been in place for some time. A request was made by Council to consider a reduction to the renewal fee. |
| Background | <p>The College currently has approximately 990 professional corporations. The new professional corporation fee is \$630. The annual renewal fee is \$315. There are approximately 105 new professional corporations annually.</p> <p>A review of professional corporation fees charged by Ontario regulatory colleges was conducted (see enclosed). The College's current corporation fees are in line with those charged by other colleges.</p> <p>However, given that the fees have been in place for some time, and the program is well established, the Committee felt that the fees could be reduced without compromising the speed of processing.</p> |
| Analysis, including impact on budget | <p>The proposal reduces the new corporation fee by \$190 (from \$630 to \$440). Making this change will reduce revenue by \$19,950 per year.</p> <p>The proposal reduces the fee for corporation renewal by \$95 (from \$315 to \$220). Making this change will reduce revenue by \$94,050 per year.</p> <p>The professional corporation program enables optometrists to incorporate and realize some tax benefits. It does not serve a public protection function.</p> <p>Review of the professional corporation program indicates that the service can continue to be provided with the reduced fees.</p> |
| Options (are there alternatives) | The professional corporation fees could be left unchanged (at \$630 and \$315) or reduced to other levels. |
| Implications/expectations if approved | Revenue will be reduced by \$114,000. |
| Implications/potential consequences if not approved | The College's revenue from this source will not be reduced by \$114,000. |

2016 ORAC Fee Comparison

| Regulator | Fee for issuing Certificate of Authorization | Annual fee for General Members |
|--|--|--|
| College of Dietitians | \$185 Application Fee Annual renewal \$500 | \$600 |
| College of Occupational Therapists | Initial certificate \$500 +HST Annual renewal \$250 + HST | 657.55 + HST |
| College of Optometrists | \$630 plus HST for the application; \$26 plus HST for the certificate; \$315 plus HST for annual renewal | \$945 + HST |
| College of Social Workers and Social Service Workers | \$100 Application fee \$400 fee to issue certificate \$400 Annual renewal | \$280 |
| College of Registered Psychotherapists | \$500 + (\$100 initial application fee) + HST. | \$550 + HST |
| College of Respiratory Therapists | \$500 | \$500 |
| College of Psychologists | \$500 Application fee \$350 Annual renewal | \$795 |
| Professional Engineers | \$330 | \$220 |
| College of Veterinarians | \$400 +HST - initial application \$150 renewal - every 3 years | \$975 + HST |
| College of Dental Hygienists | \$700 to issue certificate \$100 for annual renewal | \$250 |
| College of Medical Radiation Technologists | \$500 + HST application fee \$425 + HST annual renewal | \$470 + HST |
| College of Denturists | \$1000 + HST to issue certificate \$350 + HST annual renewal | \$2,175 |
| College of Pharmacists | \$1000 + tax to issue certificate \$300 annual renewal | \$600 + tax for Pharmacists in Part A \$300 + tax for Pharmacists in Part B \$400 + tax for Pharmacy Technicians |
| College of Opticians | \$750.00 (+HST) Application \$380 annual renewal | \$877.00 (+HST) |
| College of Audiologists and Speech Language Pathologists | \$100 Application fee registration fee \$200 Annual fee \$500 | \$714 |
| College of Nurses | \$585 Initial application \$282.50 annual renewal | 175.15 |
| Chartered Professional Accountants | Firms - \$100 intial fee plus annual fee of \$260 per professional working in firm Professional Corporation - \$180 initial fee no annual fee | \$580 (plus \$380 collected for national body) |
| College of Physiotherapists | \$700 Initial fee \$250 annual renewal | 595 |
| College of Physicians and Surgeons | \$350 for issuance \$125 annual renewal | \$1,570 |
| Professional Foresters | Certificates of authorization not issued | |
| College of Early Childhood Educators | Certificates of authorization not issued | |

| | |
|---|--|
| Recommendation no. 3 to Council and Rationale | That Council approve the Finance Policy – Honoraria & Expense Guidelines |
| The Issue | Guidelines for per diems, expenses, and preparation time are currently found in separate policies or in unofficial information. |
| Background | <p>The College currently has an Expense Policy and a Preparation Time Policy, however, neither policy specifically outlines per diems and this information is not officially available.</p> <p>Staff provide information to professional members as requested, however, the process can be inefficient and inconsistent because a comprehensive source for guidelines is not available. Staff time is often spent in reviewing past claims in order to provide some consistency in information given to members.</p> |
| Analysis, including impact on budget | <p>A new Honoraria & Expense Guidelines Policy has been developed by the AFR Committee (see enclosed policy) for the purpose of consolidating and clarifying the guidelines for expenses and reimbursement and codifying the College’s per diem information (now referred to as “honoraria”).</p> <p>As well, the new policy clarifies how to calculate per diem rates for virtual meetings via teleconference or online. There may be a slight impact on budget in this area because the calculations for time spent can be more specific.</p> <p>The cancellation policy for meetings has also been clarified in these guidelines.</p> |
| Options (are there alternatives) | Combining the existing policies and incorporating information for honoraria creates a single source policy that members can reference. No other alternatives are suggested at this time. |
| Implications/expectations if approved | This policy would provide professional members with the information they have requested. It would also provide staff with confirmed guidelines in answering queries from members and for approving claim forms for payment. |
| Implications/potential consequences If not approved | Staff would continue to provide professional members with information on their expenses and per diems, however providing consistent application of the current guidelines would continue to be a risk. |

Policy

| | | | |
|-----------------------|----------------------|----------------------|--------------------|
| Type: | Finance | | |
| Name: | Honoraria & Expenses | | |
| Status: | Under Review | Version: | 0.6 |
| Date Approved: | | Date Revised: | September 13, 2019 |

Purpose

The purpose of this policy is to outline the honoraria and expense coverage provided to professional Council and Committee members¹ for College work.

Overview

Honoraria are paid to professional (optometrist) members of Council and committees (statutory, standing, ad-hoc) for participating in activities related to College business.

Such activities include:

- attending scheduled meetings/hearings (in-person, online or via teleconference);
- decision writing;
- attending College-related education and training sessions; and
- participating in any other approved College event/activity.

Honoraria are also paid for time spent preparing for meetings. The College recognizes that professional members of Council and committees, may spend time preparing for some Committee meetings that exceeds three hours. These Committee members will be compensated for that time according to this policy.

Eligible expenses are reimbursed to professional members of Council and committees, and where applicable staff members, when they are incurred while conducting College business.

Payments are made on the basis of the rules and the rates outlined under Schedule 1 in this policy.

Procedure

1. Claim(s) for honoraria and expenses are to be submitted to the College, on a completed honoraria and expense form (Appendix 1) within 30 calendar days of the claimed activity.

¹ Council members who are appointed by the Lieutenant Governor (i.e. public appointees) are paid by the government and as such the rules for their compensation and expenses are established and monitored by the Ministry of Health.

2. Claims should be submitted to the College's Manager, Finance and Office Administration.
3. Manager will confirm the claim with the related staff support that assists with oversight for the activity that resulted in the claim(s).
4. Once approved, the College will endeavor to pay claims within one (1) month of receiving them.
5. Any discrepancies between what this policy permits and claims will be addressed with the individual by the Manager, Finance and Office Administration and if not available, the Registrar.

NOTE: Claims for honoraria are considered to be taxable income by the Canada Revenue Agency and as such are processed through the College's payroll office. In keeping with Canada Revenue Agency Rules, the College will annually prepare and provide T4s/T4As to those who claim honoraria from the College.

Interpretation

1. *Honoraria/Honorarium*: An honorarium is a payment for time spent on College-related business. Honoraria are composed of per diems and preparation time.
2. *Per Diem*: A per diem is a payment to someone for time spent working or attending meetings, training and events for the College. Per diems are paid on an hourly or daily basis, consistent with Schedule 2 of this policy.
3. *Preparation Time*: Preparation time is a payment for time spent getting prepared for College-related business. Preparation time is paid on an hourly basis, consistent with Schedule 1 of this policy.

Honoraria

General Principles

- a. A daily claim for honoraria may include any or all of per diems and/or preparation time in keeping with the rules and rates outlined in this policy.
- b. Honoraria will be paid to people who are requested by the College to attend a function for representation or education purposes.
- c. Honoraria rates are to be reviewed annually at the beginning of each fiscal year; any update will be communicated via email once new rates are established.

Per Diem

- a. For in-person Council and committee meetings², the full day per diem rate may be claimed.
- b. For virtual meetings³ (i.e. online, teleconference), a quarter day per diem rate may be claimed for the first two hours, and an additional quarter day per diem rate for every subsequent hour and a half the meeting continues.
- c. Committee chairs⁴ are paid a higher per diem rate when they are acting in the capacity of the chair at a meeting/event/activity.
- d. Per diem is paid in accordance with the rate section laid out in Schedule 1 of this policy.

Preparation Time

- a. The amount payable for preparation time is based on an hourly rate.

² This includes meeting of Committee panels, College working groups or task forces and any meeting that a member attends as a College representative.

³ This also applies to members who attend a College in-person meeting virtually.

⁴ This also applies to the College President when acting in their capacity.

- b. In each month, the first 3 hours of preparation time for each of the first two meetings is non-compensable.
 - i. Example 1: An ICRC Panel has a 400-page briefing book to read in preparation for an upcoming meeting. The Chair has estimated the time to read the book at approximately 4 hours. As this is the first meeting in the month of the Panel, the Committee members would be compensated for one hour of preparation time, in addition to the daily per diem paid for attendance at the meeting. Should a member attend more than 2 meetings in a month, then the preparation time would be compensated in full for that meeting.
 - ii. Example 2: A QA Committee member is directed by the Committee to provide a Committee member review on a set of records. The Committee member spends 5 hours on the record review. The Chair approves the Committee Member be compensated for 2 hours of preparation time.
- c. Preparation time is approved by the Council/Committee Chair for each member of the Committee, based on the average time spent to review material.
- d. Preparation time is paid in accordance with the rate section laid out in Schedule 1 of this policy.

Expenses⁵

General Principles

- a. The College expects Council and Committee members to make their hotel and travel arrangements as soon as possible after a meeting date has been confirmed in order to obtain the best price.
- b. Expenses submitted in excess of these guidelines as a result of last-minute booking of travel and hotel arrangements may not be reimbursed.
- c. Detailed itemized invoices or receipts are required for all expense claims.⁶
- d. Barring exceptional circumstances, reimbursement for claimed amounts exceeding these guidelines may be denied.

Travel

- a. For trip durations (air, train) of under three hours, Economy-level fare selections are reimbursed. For trip durations over three hours, Premium Economy-level fare selections are reimbursed.
- b. In extenuating circumstances (i.e. poor weather) where travel plan adjustments may be necessary and incur additional costs, compensation will be considered for alternative travel arrangements.
- c. For travel within major urban centres, while it is preferred that public transportation be used, reasonable cab fare will be reimbursed for these trips. The College encourages the use of the Union Pearson Express train when travelling to and from the Toronto Pearson Airport.
- d. For travel by car, the College will reimburse \$0.485 per kilometer plus parking expenses for lots near the College, at the hotel or other such event/activity location.⁷
- e. Parking and traffic violations are the sole responsibility of the individual and will not be

⁵ Where applicable, the expense guidelines may also be applicable to College staff members.

⁶ Credit card receipts or statements do not provide sufficient detail to process expense claims.

⁷ A document (i.e. Google Maps, MapQuest, etc) outlining the route and kilometers travelled must be submitted in conjunction with this claim.

reimbursed by the College.

Lodging

- a. The College secures a preferred corporate rate at a downtown hotel; Council and Committee members will be provided with the contact information in order to make their reservations.
- b. If lodging at this [to be named] hotel is not available, then the College will pay for a standard room at a hotel to a maximum of \$275 (excluding HST) per night.
- c. Exceptions may be allowed for periods of time where lodging availability is limited, or where travel plan adjustments are necessary due to weather related or other unexpected circumstances.

Meals

Breakfast
 (Lunch)⁸
 Dinner

**Coverage guideline
 (excluding HST)**
 up to \$30.00/meal
 up to \$30.00/meal
 up to \$60.00/meal

Please note that expenses for alcoholic beverages or spirits will not be reimbursed.

Gratuities

- a. Gratuities for lodging and transportation (i.e. taxis) should be included in the cost claimed along with the accompanying receipt.
- b. Gratuities for meals at a maximum of 18% may be claimed over and above the allowable coverage under such guidelines.

Additional Expenses

- a. For expenses not explicitly covered in this policy, the Audit/Finance/Risk Committee shall determine whether such an expense is compensable.

Cancellation

If a planned/scheduled College activity is cancelled and insufficient notice is provided, the College may pay some or all of the honoraria and will pay all non-refundable expenses.

If the activity is cancelled within 5 business days, the College will pay 50% of the honoraria and cover any expenses incurred. If the activity is cancelled within 3 business days, the College will pay 100% of the honoraria and cover any expenses incurred.

The per diem amount will be paid based on the time scheduled for the activity. Preparation time may also be payable given the circumstances and at the discretion of the Registrar.

Review

In order to ensure and maintain currency, the Honoraria and Expense Guidelines for Professional Council and Committee Members policy will be reviewed annually by the College’s Audit/Finance/Risk Committee.

⁸ Generally lunch is included at College meetings and will only be reimbursed if not provided by the College.

Schedule 1

Honoraria (per diem & preparation time) for professional Council and Committee members:

| Per Diem– In Person Meetings/Activities | | |
|--|---------------------|--------------------|
| | <i>Member Rates</i> | <i>Chair Rates</i> |
| | \$750.00 | \$1050.00 |
| Per Diem – Virtual Meetings/Activities (Online or Via Phone/Teleconference) | | |
| <i>Time</i> | <i>Member Rates</i> | <i>Chair Rates</i> |
| <30 min. – 2 hrs. | \$187.50 | \$262.50 |
| >2 hrs. – 3.5 hrs | \$375.00 | \$525.00 |
| >3.5 hrs – 5.0 hrs. | \$562.50 | \$787.50 |
| >5.0 hrs | \$750.00 | \$1050.00 |
| Preparation Time | | |
| <i>Time</i> | <i>Member Rate</i> | <i>Chair Rate</i> |
| Hourly | \$93.75 | \$93.75 |

HONORARIA AND EXPENSE CLAIM FORM

| | |
|---------------------------|-------------------------|
| Date Submitted: | Member Name: |
| Committee Meeting: | Date of Meeting: |

HONORARIA:

| Per Diem– In Person Meetings/Activities | | | <i>Quantity</i> | <i>Amount</i> |
|--|---------------------|--------------------|-----------------|---------------|
| | <i>Member Rates</i> | <i>Chair Rates</i> | | |
| | \$750.00 | \$1050.00 | | |
| Per Diem – Virtual Meetings/Activities (Online or Via Phone/Teleconference) | | | | |
| <i>Time</i> | <i>Member Rates</i> | <i>Chair Rates</i> | | |
| <30 min. – 2 hrs. | \$187.50 | \$262.50 | | |
| >2 hrs. – 3.5 hrs | \$375.00 | \$525.00 | | |
| >3.5 hrs – 5.0 hrs. | \$562.50 | \$787.50 | | |
| >5.0 hrs | \$750.00 | \$1050.00 | | |
| Preparation Time | | | | |
| <i>Time</i> | <i>Member Rate</i> | <i>Chair Rate</i> | | |
| Hourly | \$93.75 | \$93.75 | | |
| Approved by: | | | TOTAL: | |

EXPENSES (please provide receipts:

| Type of Expense | Description | Amount |
|---|-------------|--------|
| Mileage (\$0.485 per km, please include map) | | |
| Airfare, train, etc. | | |
| Taxis | | |
| Accommodation | | |
| Meals | | |
| Other | | |

Total Honoraria & Expenses Claim: _____

Approved by:

Date:

Motion to Council

Name of committee: Quality Assurance Subcommittee

Date of submission: September 9, 2019

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

Proposed motion: That Council endorse the recommendations proposed by the Quality Assurance Subcommittee to revise the Quality Assurance Program.

| Recommendation to Council and Rationale | |
|---|--|
| The Issue | Council is asked to endorse the recommendations developed by the Quality Assurance Subcommittee (QASC). These recommendations will authorize the QASC to begin work revising the Quality Assurance Program as per its program review. |
| Background | <p>In January 2018, Council struck a Quality Assurance Subcommittee, whose mandate was to conduct an independent evaluation of the College's Quality Assurance Program. Council allocated resources to hire independent consultants to conduct the review and the final report was delivered in January 2019.</p> <p>Following receipt of the report, QASC developed recommendations for revising the program that identify those changes can be made in the short, medium, and long term. The recommendations are attached below. As a result of consultation with the Quality Assurance Panel, recommendations 1 and 2 are being introduced as a separate motion for implementation at the September 27 Council meeting.</p> <p>Given the panel's current workload, QASC has recommended that it oversee the implementation of the program changes in conjunction with other committees. This will allow for effective administration of the current program while the changes are made.</p> |
| Analysis, including impact on budget | Total impact on budget to be determined. Endorsing QASC as the body to carry out the recommendations will include associated meeting costs, in addition to resources for implementing a self-assessment component, seeking subject matter experts to address gaps identified in program redevelopment, and revising the practice assessment protocols. Costs associated with program administration would also increase based on revisions to the Random Selection Policy and associated panel meetings. |
| Options (are there alternatives) | <p>Council could choose to leave the Program unchanged and maintain it in its current form.</p> <p>Council could also choose to proceed with the recommendations, but direct the work be overseen by another committee.</p> |

| | |
|---|---|
| Implications/expectations if approved | Endorsing the recommendations will provide QASC with the mandate to proceed with carrying out program changes based on the findings identified in its review. It will also allow the panel to focus on administering the current program. |
| Implications/potential consequences If not approved | <p>The QASC would have completed its mandate, as the program review has been completed and recommendations have been presented to Council.</p> <p>If Council were to authorize another committee to oversee the changes, time and resources required to implement changes may increase based on the committee's current workload.</p> |

QASC Recommendations to Council re Quality Assurance Program

Recommendation 1

Amend the Random Selection Criteria Policy to change the strata for the annual selection of members, selecting 20 percent of members registered with one to five years of practice, five percent of members with six to 24 years of practice, and 10 percent of members with 25 years of practice or more, to be approved by Council.

Anticipated Timeline: Presentation to Council at the September 27, 2019 meeting

Recommendation 2

Amend the exemption period in the Random Selection Criteria Policy for members randomly selected to 10 years if a member is discharged having only completed a Short Record Assessment, and maintain the exemption period of five years for members who require a Complete Record Assessment to discharge, with the Quality Assurance Panel reviewing the exemption period in the future.

Anticipated Timeline: Presentation to Council at the September 27, 2019 meeting

Recommendation 3

Develop a Self-Assessment Module by September 2020, to be overseen by the Quality Assurance Subcommittee.

*Anticipated Timeline: **October 2019-May 2020** Determine platform for self-assessment, submission policies, prepare content for draft Module
June 2020-August 2020 Pilot test with Council/Committee members and volunteers
September 2020 Finalize edits to Module and prepare for release to members*

Recommendation 4

Using risk-based opportunities, include focused topic requirement as part of the 2021-2023 Continuing Education Cycle, to be overseen by the Quality Assurance Subcommittee. Examples could include low vision, ethics, binocular vision, contact lenses, etc.

*Anticipated Timeline: **April 2020-August 2020** Develop draft policy for 2021-2023 CE Cycle based on opportunities and objectives identified for Quality Assurance Program
September 2020 Present draft CE Policy to Council for approval for the upcoming CE Cycle*

Recommendation 5

Revise the practice assessment protocol using the risk-based opportunities and learning objectives identified, working with the Clinical Practice Panel and Patient Relations Committee to identify gaps in the Optometric Practice Reference, and to map assessment criteria to appropriate standards, to be overseen by the Quality Assurance Subcommittee.

Anticipated Timeline: TBD; Requires identified opportunities and learning objectives before work can begin addressing potential OPR gaps, mapping to a new assessment protocol, validity testing, pilot testing with members, and training assessors. May require 2-3 years before final implementation

Recommendation 6

Research the method for selecting records in alignment with key risks identified as focus of practice assessment process, to be overseen by the Quality Assurance Subcommittee.

Anticipated Timeline: TBD; Could be researched/tested with existing protocol or implemented following the revision of the protocol

Recommendation 7

Hire a health practitioner education expert and audit expert to assist with the Quality Assurance Program redevelopment.

Motion to Council

Name of committee: Quality Assurance Panel

Date of submission: September 9, 2019

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

Proposed motion: That Council approve amendments to the Random Selection Criteria proposed by the Quality Assurance Panel.

| Recommendation to Council and Rationale | |
|---|---|
| The Issue | Council is asked to approve amendments to the selection criteria used to randomly select members to undergo practice assessment as part of the College's Quality Assurance Program. |
| Background | <p>Based on recent College reports, the Quality Assurance Panel and Quality Assurance Subcommittee (QASC) have re-evaluated the random selection criteria. These reports identified issues with members who have recently entered the profession as well as members with a significant number of years in practice.</p> <p>Currently, members only enter the random selection pool if they have three or more years of practice. Both the panel and the QASC recommend revising the selection criteria to include new members in the pool and select 20 percent of members in this stratum.</p> <p>The panel and QASC have also considered the exemption granted to members who are discharged from the program. The current criterion removes a member from the selection pool for five years following a discharge, which may result in some members being selected multiple times over the course of their membership while other members are never selected. The proposed amendments would extend the exemption period to 10 years for members who are discharged following completion of only a Short Record Assessment, while keeping a five-year exemption for members who are discharged following a Completed Record Assessment.</p> |
| Analysis, including impact on budget | The proposed amendment would increase the cost of administering the Quality Assurance Program in terms of assessor remuneration, administrative costs, panel meetings and staffing. The total impact on the budget is yet to be determined. |
| Options (are there alternatives) | Council could choose to keep the current selection criteria in place or develop an alternative selection and exemption criteria from that being proposed. |
| Implications/expectations if approved | The annual selection would include a significant number of members in strata where concerns have been identified, while also increasing the number of members who have never been selected for a practice assessment. |

| | |
|---|--|
| Implications/potential consequences if not approved | Maintaining the current selection criteria would continue to exclude newly registered members and would allow for some members to undergo repeat selection while others are never selected for assessment. |
|---|--|

An overview of the current QA random selection and stratification process is as follows:

1. The following members are not included in the pool for random QA selection:
 - a. Members who are not in active practise (e.g. members who are non-practising, suspended, revoked, etc.);
 - b. members who are currently undergoing a practice assessment;
 - c. members who have undergone a random QA assessment in the previous 5 years. For example, for random selection in 2020, the following years are excluded: 2019, 2018, 2017, 2016, and 2015; and
 - d. members who have been registered within the last 3 years. Therefore, for random selection in 2020, the following years are excluded: 2019, 2018, and 2017.

2. The following stratification is used:

| Strata | Years in Practice | Percentage of Membership Assessed |
|---------------|--------------------------|--|
| 1 | 3-14 | 5% |
| 2 | 15-24 | 7% |
| 3 | 25 or more | 10% |

The proposed QA random selection and stratification process is as follows:

1. The following members are not included in the pool for random QA selection:
 - e. Members who are not in active practise (e.g. members who are non-practising, suspended, revoked, etc.);
 - f. members who are currently undergoing a practice assessment;
 - g. members who have undergone a random QA assessment in the previous 10 years having only completed a Short Record Assessment. For example, for random selection in 2020, the following years are excluded: 2019, 2018, 2017, 2016, 2015, 2014, 2013, 2012, 2010, and 2009; and
 - h. members who have undergone a random QA assessment in the previous 5 years and required a Complete Record Assessment for discharge. For example, for random selection in 2020, the following years are excluded: 2019, 2018, 2017, 2016, and 2015; and
 - i. members who have been registered within the calendar year of the selection. Therefore, for random selection in 2020, members registered in 2020 are excluded.

2. The following stratification is used:

| Strata | Years in Practice | Percentage of Membership Assessed |
|---------------|--------------------------|--|
| 1 | 1-5 | 20% |
| 2 | 6-24 | 5% |
| 3 | 25 or more | 10% |

Motion to Council

Name of committee: QA - Clinical Practice Panel

Date of submission: September 10, 2019

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

Proposed motion: That Council approve revisions to the standard OPR 6.4 Spectacle Therapy

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| Recommendation to Council and Rationale | |
| The Issue | Council is asked to approve revisions to OPR 6.4 Spectacle Therapy. |
| Background | <p>The revised standard</p> <ul style="list-style-type: none"> • amalgamates all standards related to spectacle therapy, whether or not technology is used; • allows that patients may require or request delivery of spectacles prior to in-person fitting (i.e., direct delivery); • defers to the professional judgment of the optometrist; and • adds a section related to conflict of interest. <p>(The revised standard involves extensive track changes; the document is presented here in 'clean' version only.)</p> |
| Analysis, including impact on budget | Update to OPR on website and in jurisprudence materials, and communication of change to membership. |
| Options (are there alternatives) | Maintain existing standard. |
| Implications/expectations if approved | <p>The document replaces the currently published OPR 6.4 here.</p> <p>Approval would involve the revocation of the standalone Spectacle Therapy Using the Internet document found here. Its contents are merged into the revised standard.</p> |

6.4 Spectacle Therapy

Description

Optometrists are authorized to dispense spectacles for the treatment of disorders of refraction and/or sensory and oculomotor disorders and dysfunctions of the eye and vision system. The patient must present a valid prescription written by an optometrist or physician.

Regulatory Standard

Ophthalmic dispensing is defined as “the preparation, adaptation and delivery” of vision correction, and is a controlled act in Ontario authorized to optometrists, physicians and opticians:

Prescribing or dispensing, for vision or eye problems, subnormal vision devices, contact lenses or eye glasses (**Optometry Act, 1991, c.35,s.4**).

The Professional Misconduct Regulation (**O.Reg. 119/94 Part I under the Optometry Act, 1991**) includes the following acts of professional misconduct:

3. Doing anything to a patient for a therapeutic, preventative, palliative, diagnostic, cosmetic or other health-related purpose in a situation in which consent is required by law, without such a consent.
9. Making a misrepresentation with respect to a remedy, treatment or device.
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.
12. Failing, without reasonable cause, to provide a patient with a written, signed and dated prescription for subnormal vision devices, contact lenses or eye glasses after the patient’s eyes have been assessed by the member and where such a prescription is clinically indicated.
13. Recommending or providing unnecessary diagnostic or treatment services.
14. Failing to maintain the standards of practice of the profession.
29. Charging or allowing a fee to be charged that is excessive or unreasonable in relation to the professional services performed.
30. Failing to issue a statement or receipt that itemizes 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 patient.
33. Charging or accepting a fee, in whole or in part, before providing professional services to a patient unless
 - i. the fee relates to the cost of professional goods to be used in the course of performing the services, or,
 - ii. the member informs the patient, before he or she pays the fee, of the patient’s right to choose not to pay the fee before the professional services are performed.

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Professional Standard

Optometrists providing spectacle therapy must satisfy all Regulatory and Professional Standards, regardless of whether or not technology (including the internet) is used as a tool to facilitate the provision of spectacle therapy to patients.

The provision of spectacle therapy involves:

- **Reviewing with the patient any relevant environmental, occupational, avocational, and/or physical factors affecting spectacle wear:** If this review is not performed in-person, optometrists should include a precaution for patients that in-person reviews are recommended for individuals with special needs or atypical facial and/or postural features. If optometrists choose specific patient factors by which to limit their internet dispensing services, including, but not limited to, a specific age range, this should be disclosed on the website where patients can easily find it.
- **Reviewing the details of the prescription:** Optometrists are responsible for confirming the validity and/or veracity of prescriptions. Prescriptions provided using the internet must be provided in a secure manner and collected in an unaltered form (pdf/image). All prescriptions must contain information that clearly identifies the prescriber (including name, address, telephone number and signature), and specifies the identity of the patient and the date prescribed (**OPR 5.2 The Prescription**). All prescriptions must include an expiry date.
- **Advising the patient regarding appropriate ophthalmic materials:** In the event that this is not performed in-person, patients must be given clear directions on how to contact the office/optometrist with any questions they may have.
- **Taking appropriate measurements (including but not limited to interpupillary distance and segment height) to ensure proper function of the spectacles:** If computer applications are used (in-office or remotely) to determine dispensing measurements, optometrists must be satisfied that the application determines these measurements with equal accuracy to traditional in-person measurements, including the production of supportable evidence should this matter come to the attention of the College.
- **Confirming the suitability of the order and arranging for the fabrication of the spectacles**
- **Verifying the accuracy of the completed spectacles to ensure that they meet required tolerances**
- **Fitting or adjusting the spectacles to the patient:** Optometrists providing spectacle therapy will possess the equipment required to fit and adjust spectacles. In-person fitting and adjusting of spectacles provides a final verification and mitigates risk of harm by confirming that patients leave the clinic with spectacles that have been properly verified, fit and adjusted. Further, it establishes a patient/practitioner relationship in circumstances where patients are new to the clinic and spectacle therapy was initiated through the optometrist's website. That being said, patients have the right to agree to, or decline the performance of any procedure, including in-person fitting and adjustment of spectacles. When patients require or request delivery of prescription eyeglasses prior to in-person fitting, optometrists must use their professional judgment in determining whether this is appropriate, with consideration to factors including, but not limited to, the age of the patient, the degree of ametropia and/or anisometropia, and prescribed multifocality or prism.
- **Counselling the patient on aspects of spectacle wear including, but not limited to: the use, expectations, limitations, customary adaptation period and maintenance**

84 **requirements of the spectacles:** This may be done in person or virtually.

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The principle of informed consent applies to spectacle therapy whether the service is provided in-person or virtually. Optometrists use professional judgement in determining when consent must be specifically documented in the patient record. While implied consent can be assumed to apply to the in-person provision of spectacle therapy, the same cannot be said for virtual encounters, when express written documentation of informed consent is preferable.

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92 **Additional Considerations**

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Patients experiencing unexpected difficulty adapting to new spectacles should be counselled to seek re-examination by the prescriber to assess the appropriateness of the prescription. Optometrists dispensing appliances based on a prescription from another practitioner are expected to ensure that this has been filled appropriately, however they are not responsible for the efficacy or accuracy of that practitioner's prescription.

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Delegation: Optometrists who delegate elements of spectacle dispensing (for example, the fitting and adjusting of spectacles) to staff who are not authorized to independently perform the controlled act, must be present in the same physical location and able to intervene, unless another optometrist is present to provide appropriate delegation (**OPR 4.3 Delegation and Assignment**).

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Most Responsible Dispenser: In collaborative or multi-optometrist practices, where multiple optometrists may participate in dispensing spectacles to an individual patient, the College considers that the last optometrist to provide care, or "touch the patient", typically the optometrist fitting or adjusting the spectacles, is the most responsible dispenser. This optometrist is responsible for all preceding steps in the dispensing process, as well as the performance of the spectacles and any potential risk of harm to the patient. Similarly, where optometrists practice in working arrangements with opticians, the most responsible dispenser is the last regulated professional to provide care to the patient.

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Jurisdiction: Ontario-based optometrists providing care to patients in other jurisdictions (provinces/states) may need to be registered in those jurisdictions and should consult with the appropriate regulatory authorities. Optometrists participating in any aspect of ophthalmic dispensing in Ontario must be registered with the College of Optometrists of Ontario.

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The Patient Record: Internet prescriptions and orders must be maintained in the patient record (**OPR 5.1 The Patient Record**).

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Internet Sites: Where the internet is used in the provision of spectacle therapy, websites utilized by member optometrists must:

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- comply with College advertising guidelines and relevant paragraphs in the Professional Misconduct regulation (**O. Reg. 119/94, Part I under the Optometry Act**);

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- identify the website as belonging to or referring to a member registered with the College of Optometrists of Ontario;

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- collect and record patient information in a private and secure manner respecting patient confidentiality;

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- identify the physical location of the clinic/dispensary, including address and city/town, and the hours of operation of the clinic; and

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- include the telephone number to contact the clinic/dispensary.

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Conflicts of Interest: Under the Optometry Act (O. Reg. 119/94, Part II Conflict of Interest p. 3.(2)(h)), optometrists are prohibited from sharing fees with other than another Ontario-registered optometrist

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129 or physician. Optometrists providing spectacle therapy in working arrangements with corporations
130 must not share fees, and must practice as an [independent contractor](#) as outlined under the Optometry
131 Act (O. Reg. 119/94, Part II Conflict of Interest p. 4.(5)).

132 **Expired Prescriptions:** Optometrists must use professional judgment in determining whether it is
133 appropriate to provide spectacle therapy to patients presenting expired prescriptions.
134 Optometrists must advise patients of any appreciated risks and obtain their informed consent
135 before dispensing their expired prescriptions.

6.4 Spectacle Therapy

Description

Optometrists are authorized to dispense spectacles for the treatment of disorders of refraction and/or sensory and oculomotor disorders and dysfunctions of the eye and vision system. The patient must present a valid prescription written by an optometrist or physician.

Regulatory Standard

The *Optometry Act* (1991) authorizes optometrists to perform the following controlled act:

Prescribing or dispensing, for vision or eye problems, subnormal vision devices, contact lenses or eye glasses (1991, c.35,s.4).

The Professional Misconduct Regulation (O.Reg. 119/94 Part I under the *Optometry Act, 1991*) includes the following acts of professional misconduct:

3. Doing anything to a patient for a therapeutic, preventative, palliative, diagnostic, cosmetic or other health-related purpose in a situation in which consent is required by law, without such a consent.
9. Making a misrepresentation with respect to a remedy, treatment or device.
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.
12. Failing, without reasonable cause, to provide a patient with a written, signed and dated prescription for subnormal vision devices, contact lenses or eye glasses after the patient's eyes have been assessed by the member and where such a prescription is clinically indicated.
13. Recommending or providing unnecessary diagnostic or treatment services.
14. Failing to maintain the standards of practice of the profession.
29. Charging or allowing a fee to be charged that is excessive or unreasonable in relation to the professional services performed.
30. Failing to issue a statement or receipt that itemizes 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 patient.
33. Charging or accepting a fee, in whole or in part, before providing professional services to a patient unless
 - i. the fee relates to the cost of professional goods to be used in the course of performing the services, or,
 - ii. the member informs the patient, before he or she pays the fee, of the patient's right to choose not to pay the fee before the professional services are performed.

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Professional Standard

The provision of spectacle therapy involves:

- Reviewing with the patient any relevant environmental, occupational, avocational, and/or physical factors affecting spectacle wear
- Reviewing the details of the prescription
- Advising the patient regarding appropriate ophthalmic materials
- Taking appropriate measurements (including but not limited to interpupillary distance and segment height) to ensure proper function of the spectacles
- Confirming the suitability of the order and arranging for the fabrication of the spectacles
- Verifying the accuracy of the completed spectacles to ensure that they meet required tolerances
- Fitting or adjusting the spectacles to the patient
- Counselling the patient on aspects of spectacle wear including, but not limited to: the use, expectations, limitations, customary adaptation period and maintenance requirements of the spectacles

The principle of informed consent applies to spectacle therapy with respect to ophthalmic materials, costs and fees.

Patients experiencing unexpected difficulty adapting to new spectacles should be counselled to seek re-examination by the prescriber to assess the appropriateness of the prescription. Optometrists dispensing appliances based on a prescription from another practitioner are expected to ensure that this has been filled appropriately, however they are not responsible for the efficacy or accuracy of that practitioner's prescription.

Internet Sites: Where the internet is used in the provision of spectacle therapy ([Appendix D](#)), websites must:

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

Expired Prescriptions:

Optometrists must use professional judgment when deciding to provide spectacle therapy to patients with expired prescriptions. Optometrists must advise patients of any appreciated risks and obtain their informed consent before dispensing their expired prescriptions.

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Introduction

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This document describes how optometrists may utilize their website and/or the internet in spectacle dispensing practices, while meeting the standards of practice of the profession. Ophthalmic dispensing is defined as “the preparation, adaptation and delivery” of vision correction, and is a controlled act in Ontario authorized to optometrists, physicians and opticians:

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3. Prescribing or dispensing, for vision or eye problems, subnormal vision devices, contact lenses or eye glasses.

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Standard of Practice for Spectacle Therapy

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Section 6.4 Spectacle Therapy in the Optometric Practice Reference (OPR) describes the professional standards for spectacle therapy. Optometrists providing spectacle therapy must satisfy the following standards, regardless of whether or not technology is used as a tool to facilitate the provision of spectacle therapy to patients

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- Reviewing with the patient any relevant environmental, occupational, avocational, and/or physical factors affecting spectacle wear;
- Reviewing the details of the prescription;
- Advising the patient regarding appropriate ophthalmic materials;
- Taking appropriate measurements (including but not limited to interpupillary distance and segment height) to ensure proper function of the spectacles;
- Arranging for the fabrication of the spectacles;
- Verifying the accuracy of the completed spectacles to ensure that they meet required tolerances;
- Fitting or adjusting the spectacles to the patient;
- Counselling the patient on aspects of spectacle wear including, but not limited to: the use, expectations, limitations, customary adaptation period and maintenance requirements of the spectacles.

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Application of the Standard when providing Spectacle Therapy using the Internet

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Reviewing factors affecting spectacle wear: Optometrists must review, with patients, factors affecting spectacle wear. This can be done either in-person, or by telephone, video conference, or online questionnaire. If this review is not performed in-person, optometrists should include a precaution for patients that in-person reviews are recommended for individuals with special needs or atypical facial and/or postural features. If optometrists choose specific patient factors by which to limit their internet dispensing services, including, but not limited to, a specific age range, this should be disclosed on the website where patients can easily find it.

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Reviewing the details of the prescription: Optometrists must review prescription details. This can be done in-person or using the internet. Optometrists are responsible for confirming the validity and/or veracity of prescriptions and must have a mechanism

121 in place to do so. Prescriptions provided using the internet must be provided in a secure
122 manner and collected in an unaltered form (pdf/image). All prescriptions must contain
123 information that clearly identifies the prescriber (including name, address, telephone
124 number and signature), and specifies the identity of the patient and the date prescribed
125 (OPR 5.2 The Prescription). All prescriptions must include an expiry date.

126 **Advising the patient regarding appropriate ophthalmic materials:** Optometrists must
127 advise patients regarding appropriate ophthalmic materials. This may be done in-person
128 or by an online algorithm. In the latter scenario, patients must be given clear directions
129 on how to contact the office/optometrist with any questions they may have.

130 **Taking appropriate measurements:** Optometrists must take appropriate measurements
131 when providing spectacle therapy. These can be done in-person or by computer
132 application. If computer applications are used (in-office or remotely) to determine
133 dispensing measurements, optometrists must be satisfied that the application determines
134 these measurements with equal accuracy to traditional in-person measurements, including
135 the production of supportable evidence should this matter come to the attention of the
136 College.

137 **Arranging for the fabrication of the spectacles:** Optometrists must review the
138 suitability of patient orders before arranging for the fabrication of spectacles.

139 **Verifying the accuracy of the completed spectacles:** Optometrists must verify the
140 accuracy of completed spectacles.

141 **Fitting or adjusting the spectacles to the patient:** Fitting or adjusting the spectacles to
142 patients must be performed in-office and cannot be performed virtually, by tutorial and/or
143 video conferencing. Optometrists providing spectacle therapy will possess the equipment
144 required to fit and adjust spectacles. In-person fitting and adjusting of spectacles
145 provides a final verification and mitigates risk of harm by confirming that patients leave
146 the clinic with spectacles that have been properly verified, fit and adjusted. In-person
147 delivery of spectacles establishes a patient/practitioner relationship in circumstances
148 where patients are new to the clinic and spectacle therapy was initiated through the
149 optometrist's website.

150 **Counseling the patient regarding spectacle wear:** Counseling regarding spectacle
151 wear is ongoing and involves in-office, telephone, and/or electronic communications.
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154 **Additional Considerations**

155 **Delegation:** Optometrists who delegate elements of spectacle dispensing (for example,
156 the fitting and adjusting of spectacles) to staff who are not authorized to independently
157 perform the controlled act, must be present in the same physical location as their patient
158 and able to intervene, unless another optometrist is present to provide appropriate
159 delegation (OPR 4.3 Delegation and Assignment).

160 **Most Responsible Dispenser:** In collaborative or multi-optometrist practices, where
161 multiple optometrists may participate in dispensing spectacles to an individual patient,
162 the College considers that the last optometrist to provide care, or "touch the patient",
163 typically the optometrist fitting or adjusting the spectacles, is the most responsible
164 dispenser. This optometrist is responsible for all preceding steps in the dispensing

165 process, as well as the performance of the spectacles and any potential risk of harm to the
166 patient. Similarly, where optometrists practice in working arrangements with opticians,
167 the most responsible dispenser is the last professional to provide care to the patient.

168 **Jurisdiction:** Ontario-based optometrists providing care to patients in other jurisdictions
169 (provinces/states) may need to be registered in those jurisdictions and should consult
170 with the appropriate regulatory authorities. Optometrists participating in any aspect of
171 ophthalmic dispensing in Ontario must be registered with the College of Optometrists of
172 Ontario.

173 **The Patient Record:** Internet prescriptions and orders must be maintained in the patient
174 record ([OPR 5.1 The Patient Record](#)).

175 **Internet Sites:** Where the internet is used in the provision of spectacle therapy, websites
176 must:

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

COUNCIL BRIEFING NOTE

September 2019

Subject

Designated Drugs Regulation

Background

On May 30, the Minister of Health asked the College to ‘amend its drug regulation to reflect categories of drugs from which your members may prescribe’. The Minister also asked the College to develop the appropriate infrastructure to support the regulation and to actively engage with system partners.

Decisions for Council

To approve the revised Designated Drugs Regulation for circulation.

Considerations

Categories

The move from drug lists to categories has several significant benefits.

- It ensures that optometrists have the flexibility to prescribe up-to-date medications for patients, improving access to best practice care.
- It avoids the need to make a regulation change every time a drug changes category or is added to a category. This process has resulted in delays in patients being able to access up to date medications from optometrists. For example, several years of consultation were required before difluprednate, cyclosporine, tafluprost, brinzolamide/timolol, and other drugs, were added to the drug list in 2017. Presently, brinzolamide/brimonidine, latanoprotene bunod, lifitigrast, and other new drugs, are not available to patients because of the rigidity of the drug list.
- There have been some questions from the Ministry suggesting that they believe categories should be more narrowly defined. It is the view of the Clinical Practice Panel (CPP) that the proposed regulation, which limits prescribing within the categories to ‘for the purpose of treating conditions of the eye and adnexa only’, or for particular conditions (e.g., to lower intraocular pressure only, or for Sjogren’s syndrome only), will ensure safe prescribing. It is also the view of the CPP that narrower definitions of categories undermine the flexibility that a movement from drug lists to categories is intended to provide.

Scope

- In addition to the limitations set out in the proposed reg detailed above, optometrists may only prescribe within their scope of practice, which is defined in the *Optometry Act*, 1991 as follows:
 - 3) The practice of optometry is the assessment of the eye and vision system and the diagnosis, treatment and prevention of,
 - a) disorders of refraction;

- b) sensory and oculomotor disorders and dysfunctions of the eye and vision system; and
- c) prescribed diseases.

Prescribed diseases are set out in Part VIII of the *Optometry Act*:

In relation to diagnosis and prevention, diseases of the eye and vision system that can be determined by the findings from an oculo-visual assessment.

In relation to treatment, diseases of the eye and vision system that can be treated by other than the application of surgery.

Supporting the regulation

Drug list: In order to support the regulation, there has been discussion about the drug list. That is, while the movement to categories will enable optometrists to prescribe up-to-date drugs, there is value to making the drug list available to optometrists, pharmacists and the public, so there is clarity about what drugs are available on the list.

The Ontario Association of Optometrists (OAO) has an app that sets out all the drugs that optometrists may prescribe, with additional information about formulation.

Discussions are ongoing to make the list of drugs available via the College website to ensure that it is accessible to optometrists, other health-care providers and the public. Making the list available this way will ensure that it can be easily updated when drugs change within categories.

Regulatory Mechanisms: The College already has mechanisms in place to ensure that optometrists prescribe appropriately. These include 1) a requirement for training prior to prescribing, which has been incorporated into both undergraduate and graduate training and entry to practice requirements, 2) comprehensive standards of practice set out in the Optometric Practice Reference, which includes a section on 'The Use and Prescribing of Drugs in Optometric Practice' that will be updated to reflect any revisions to the regulation and 3) regulatory processes such as investigations and assessments to ensure both early identification of prescribing problems as well as the ability to respond should any issues arise.

Consultation

In addition to ongoing discussions with Ministry representatives, CPP has been consulting with key stakeholders via the Tripartite Committee, which includes the OAO and representatives from the University of Waterloo School of Optometry and Vision Science.

The College has also been consulting informally with the College of Pharmacists as well as the three other colleges that are putting forward drug regulation amendments (midwives, chiropractors and nurses). Further consultation will occur during the formal circulation period.

Summary of Proposal: What Changes? What Stays the Same?

The College’s proposal is summarized as follows:

| What Changes | What Stays the Same |
|--|--|
| <ul style="list-style-type: none"> • The list of drugs is replaced with categories of drugs • The 14-day restriction on the prescribing of oral antibacterials is revoked <ul style="list-style-type: none"> • The management of Patients with Dry Eye featuring lid disease, is a common use case where antibacterials may be prescribed for longer duration for their anti-inflammatory properties, typically at concentrations sub-MIC (minimum inhibitory concentration). References: OPR 7.12, TFOS – DEWS II | <ul style="list-style-type: none"> • The types/categories of drugs that optometrists are authorized to prescribe • Regulatory standards of practice related to glaucoma management by optometrists • Regulatory standards related to prescribing oral pilocarpine (Secretagogues) and oral acetazolamide (Carbonic Anhydrase Inhibitors) • Regulatory standards related to co-management with physicians |

Next Steps

Circulation of the revised draft regulation for 60 days (Oct – Nov)

Consolidation of feedback and revisions if required (Nov)

Formal approval by Council at a special Council teleconference (Dec) – not yet scheduled

Submission of the regulation to Government (by Dec 31 deadline)

Contacts

Maureen Boon, Registrar

Dr. David Wilkinson, Practice Advisor

Motion to Council

Name of committee: QA – Clinical Practice Panel

Date of submission: September 10, 2019

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

Proposed motion: That Council approve amendments to the Designated Drugs Regulation (O. Reg. 112/11), for circulation to members and stakeholders for consultation.

| Recommendation to Council and Rationale | |
|---|---|
| The Issue | The amended Designated Drugs Regulation (DDR) replaces the current 'drug list' with a list of categories from which optometrists may prescribe. |
| Background | <p>In May, the Minister of Health asked the College to amend the DDR to reflect categories of drugs.</p> <p>It has been the College's experience that the current list of drugs has been difficult to update. The proposed amendments would provide optometrists with the authority to prescribe all topical drugs within the scope of practice of optometry, as well as the same oral drugs that are presently authorized.</p> <p>The College's prior submission to the Ministry of Health, an effort to amend the DDR and <i>Optometry Act</i>, proposed broader language and also requested the authority to i) dispense samples of drugs, ii) remove foreign bodies from the cornea, and iii) perform diagnostic ultrasound. This submission has not realized any traction since it was submitted to the MOH in 2017.</p> |
| Analysis, including impact on budget | Cost to circulate the regulation and update the website. |
| Options (are there alternatives) | <p>Alternatives include:</p> <ul style="list-style-type: none"> i) Leave the regulation as is (i.e., a list of drugs). ii) Reiterate the 2017 proposal. iii) Amend the regulation to specify narrower categories. |
| Implications/expectations if approved | <p>The regulation will be formally circulated to members and stakeholders for 60 days.</p> <p>CPP and Council will review stakeholder feedback and revisit the proposal in early December.</p> <p>The amended regulation would mitigate the need for subsequent proposals to add drugs or categories of topical drugs.</p> |

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| Implications/potential consequences if not approved | Regulation will remain as is, providing a barrier for access to newer drugs, which are often the indicated best-treatment for patients. |
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Optometry Act, 1991
Loi de 1991 sur les optométristes

ONTARIO REGULATION 112/11
DESIGNATED DRUGS AND STANDARDS OF PRACTICE

Consolidation Period: From February 6, 2017 to the [e-Laws currency date](#).

Last amendment: 17/17.

Legislative History: 17/17.

This Regulation is made in English only.

PART I
PRESCRIPTIONS

Drugs that may be prescribed

1. For the purposes of paragraph 2.1 of section 4 of the Act, and subject to sections 2, 3 and 4 and Part II of this Regulation, a member may prescribe a drug or a combination of drugs from the categories listed in Schedule 1. O. Reg. 112/11, s. 1.

Limitations

2. Where a limitation or a route of administration is indicated with respect to a category of drug listed in Schedule 1, a member shall only prescribe a drug or a combination of drugs in compliance with the limitation or limitations and in accordance with the route or routes of administration specified. O. Reg. 17/17, s. 1.

Training required

3. No member may prescribe any drug unless he or she has successfully completed the relevant training in pharmacology that has been approved by the Council. O. Reg. 112/11, s. 3.

Recording

4. Every time a member prescribes a drug the member shall record the following in the patient's health record as that record is required to be kept under section 10 of Ontario Regulation 119/94 (General) made under the Act:

1. Details of the prescription, including the drug prescribed, dosage and route of administration.
2. Details of the counselling provided by the member to or on behalf of the patient respecting the use of the drug prescribed. O. Reg. 112/11, s. 4.

Non-prescription drugs

5. In the course of engaging in the practice of optometry a member may prescribe any drug that may lawfully be purchased or acquired without a prescription. O. Reg. 112/11, s. 5.

PART II
STANDARDS OF PRACTICE — GLAUCOMA

Open-angle glaucoma

7. (1) Subject to subsection (2) and to section 8, it is a standard of practice of the profession that a member may only treat a patient with glaucoma where the patient has primary open-angle glaucoma the treatment of which is not complicated by either a concurrent medical condition or a potentially interacting pharmacological treatment. O. Reg. 112/11, s. 7 (1).

(2) It is a standard of practice of the profession that a member may only treat a patient having open-angle glaucoma, the treatment of which is complicated by either a concurrent medical condition or a potentially interacting pharmacological treatment, in collaboration with a physician with whom the member has established a co-management model of care for that patient and who is,

- (a) certified by the Royal College of Physicians and Surgeons of Canada as a specialist in ophthalmology; or
- (b) formally recognized in writing by the College of Physicians and Surgeons of Ontario as a specialist in ophthalmology. O. Reg. 112/11, s. 7 (2).

Referral to physician or hospital

8. (1) Subject to subsections (2) and (3), it is a standard of practice of the profession that a member shall immediately refer a patient having a form of glaucoma other than primary open-angle glaucoma to a physician or to a hospital. O. Reg. 112/11, s. 8 (1).

(2) It is a standard of practice of the profession that a member may initiate treatment for a patient having angle-closure glaucoma only in an emergency and where no physician is available to treat the patient. O. Reg. 112/11, s. 8 (2).

(3) It is a standard of practice of the profession that a member shall immediately refer any patient being treated in accordance with subsection (2) to a physician or hospital once the emergency no longer exists or once a physician becomes available, whichever comes first. O. Reg. 112/11, s. 8 (3).

(4) In this section,

“hospital” means a hospital within the meaning of the *Public Hospitals Act*. O. Reg. 112/11, s. 8 (4).

9. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION). O. Reg. 112/11, s. 9.

SCHEDULE 1

ANTIBACTERIALS (oral) – for the purpose of treating conditions of the eye and adnexa only

ANTIVIRALS (oral) – for the purpose of treating conditions of the eye and adnexa only

CARBONIC ANHYDRASE INHIBITORS (oral) – to lower intraocular pressure only, and

- i. a member shall immediately refer the patient to a physician or to a hospital in the event of acute angle closure; or
- ii. only in collaboration with a physician with whom the member has established a co-management model of care

SECRETAGOGUES (oral) – for Sjögren’s syndrome only and only in collaboration with a physician with whom the member has established a co-management model of care

OPHTHALMIC DRUGS AND PREPARATIONS (topical) – for the purpose of treating conditions of the eye and adnexa only

OPHTHALMIC DIAGNOSTIC AGENTS (topical)

SKIN AND MUCOUS MEMBRANE AGENTS (topical) – for the purpose of treating conditions of the eye and adnexa only

O. Reg. 112/11, Sched. 1; O. Reg. 17/17, s. 2.

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Optometry Act, 1991
Loi de 1991 sur les optométristes

ONTARIO REGULATION 112/11
DESIGNATED DRUGS AND STANDARDS OF PRACTICE

Consolidation Period: From February 6, 2017 to the [e-Laws currency date](#).

Last amendment: 17/17.

Legislative History: 17/17.

This Regulation is made in English only.

PART I
PRESCRIPTIONS

Drugs that may be prescribed

1. For the purposes of paragraph 2.1 of section 4 of the Act, and subject to sections 2, 3 and 4 and Part II of this Regulation, a member may prescribe a drug ~~or a combination of drugs from a the category categories and sub-category heading-listed~~ in Schedule 1. O. Reg. 112/11, s. 1.

Limitations

2. Where a limitation or a route of administration is indicated with respect to a category of drug listed in Schedule 1, ~~either in a sub-category heading or with respect to that particular drug,~~ a member shall only prescribe ~~the~~ drug or a combination of drugs in compliance with the limitation or limitations and in accordance with the route or routes of administration specified. O. Reg. 17/17, s. 1.

Training required

3. No member may prescribe any drug unless he or she has successfully completed the relevant training in pharmacology that has been approved by the Council. O. Reg. 112/11, s. 3.

Recording

4. Every time a member prescribes a drug the member shall record the following in the patient's health record as that record is required to be kept under section 10 of Ontario Regulation 119/94 (General) made under the Act:

1. Details of the prescription, including the drug prescribed, dosage and route of administration.
2. Details of the counselling provided by the member to or on behalf of the patient respecting the use of the drug prescribed. O. Reg. 112/11, s. 4.

Non-prescription drugs

5. In the course of engaging in the practice of optometry a member may prescribe any drug that may lawfully be purchased or acquired without a prescription. O. Reg. 112/11, s. 5.

PART II
STANDARDS OF PRACTICE — GLAUCOMA

~~Prescribing of antiglaucoma agents~~

~~—6. It is a standard of practice of the profession that in treating glaucoma a member may only prescribe a drug set out under the category of "Antiglaucoma Agents" in Schedule 1. O. Reg. 112/11, s. 6.~~

Open-angle glaucoma

7. (1) Subject to subsection (2) and to section 8, it is a standard of practice of the profession that a member may only treat a patient with glaucoma where the patient has primary open-angle glaucoma the treatment of which is not complicated by either a concurrent medical condition or a potentially interacting pharmacological treatment. O. Reg. 112/11, s. 7 (1).

(2) It is a standard of practice of the profession that a member may only treat a patient having open-angle glaucoma, the treatment of which is complicated by either a concurrent medical condition or a potentially interacting pharmacological treatment, in collaboration with a physician with whom the member has established a co-management model of care for that patient and who is,

- (a) certified by the Royal College of Physicians and Surgeons of Canada as a specialist in ophthalmology; or
- (b) formally recognized in writing by the College of Physicians and Surgeons of Ontario as a specialist in ophthalmology. O. Reg. 112/11, s. 7 (2).

Referral to physician or hospital

8. (1) Subject to subsections (2) and (3), it is a standard of practice of the profession that a member shall immediately refer a patient having a form of glaucoma other than primary open-angle glaucoma to a physician or to a hospital. O. Reg. 112/11, s. 8 (1).

(2) It is a standard of practice of the profession that a member may initiate treatment for a patient having angle-closure glaucoma only in an emergency and where no physician is available to treat the patient. O. Reg. 112/11, s. 8 (2).

(3) It is a standard of practice of the profession that a member shall immediately refer any patient being treated in accordance with subsection (2) to a physician or hospital once the emergency no longer exists or once a physician becomes available, whichever comes first. O. Reg. 112/11, s. 8 (3).

(4) In this section,

“hospital” means a hospital within the meaning of the *Public Hospitals Act*. O. Reg. 112/11, s. 8 (4).

9. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION). O. Reg. 112/11, s. 9.

SCHEDULE 1

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ANTIVIRALS (oral) – for the purpose of treating conditions of the eye and adnexa only

CARBONIC ANHYDRASE INHIBITORS (oral) – to lower intraocular pressure only, and

- i. a member shall immediately refer the patient to a physician or to a hospital in the event of acute angle closure; or
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SECRETAGOGUES (oral) – for Sjögren’s syndrome only and only in collaboration with a physician with whom the member has established a co-management model of care

OPHTHALMIC DRUGS AND PREPARATIONS (topical) – for the purpose of treating conditions of the eye and adnexa only

OPHTHALMIC DIAGNOSTIC AGENTS (topical)

SKIN AND MUCOUS MEMBRANE AGENTS (topical) – for the purpose of treating conditions of the eye and adnexa only

ANTI-INFECTIVE AGENTS

Antibacterials (topical)

- azithromycin
- besifloxacin
- ciprofloxacin

- ~~—erythromycin~~
- ~~—framycetin~~
- ~~—fusidic acid~~
- ~~—gatifloxacin~~
- ~~—gentamicin~~
- ~~—moxifloxacin~~
- ~~—ofloxacin~~
- ~~—polymyxin B/gramicidin/neomycin~~
- ~~—polymyxin B/neomycin/ bacitracin~~
- ~~—polymyxin B/trimethoprim~~
- ~~—sulfacetamide~~
- ~~—tetracycline~~
- ~~—tobramycin~~

~~Antifungals (topical)~~

- ~~—natamycin~~

~~Antivirals (topical)~~

- ~~—trifluridine~~
- ~~—Acyclovir~~

~~Antibacterials (oral) — for corneal or eyelid infections only and for a duration not exceeding 14 days~~

- ~~—amoxicillin~~
- ~~—amoxicillin/clavulanic acid~~
- ~~—azithromycin~~
- ~~—cephalexin~~
- ~~—ciprofloxacin~~
- ~~—clarithromycin~~
- ~~—clindamycin~~
- ~~—cloxacillin~~
- ~~—doxycycline~~
- ~~—erythromycin~~
- ~~—levofloxacin~~
- ~~—minocycline~~
- ~~—moxifloxacin~~
- ~~—tetracycline~~

~~Antivirals (oral) — for corneal or eyelid infections only~~

- ~~—acyclovir~~
- ~~—famciclovir~~
- ~~—valacyclovir~~

~~ANTI-INFLAMMATORY AGENTS~~

~~Corticosteroids (topical)~~

- ~~—dexamethasone~~
- ~~—difluprednate~~

—fluorometholone

—loteprednol

—prednisolone

—rimexolone

Corticosteroids (topical)—for the purpose of treating conditions of the eye and adnexa

—triamcinolone

Immunomodulators (topical)

—cyclosporine

Nonsteroidal anti-inflammatory agents (topical)

—bromfenac

—diclofenac

—ketorolac

—nepafenac

ANTI-INFECTIVE/ANTI-INFLAMMATORY AGENTS

Antibacterials/corticosteroids (topical)

—framycetin/gramicidin/dexamethasone

—gentamicin/betamethasone

—neomycin/fluorometholone

—neomycin/polymyxin B/dexamethasone

—neomycin/bacitracin/polymyxin B/hydrocortisone

—sulfacetamide/prednisolone

—tobramycin/dexamethasone

MYDRIATICS

Mydriatics (topical)

—atropine

—cyclopentolate

—homatropine

—tropicamide

ANTI-ALLERGIC AGENTS

Antiallergic agents (topical)

—bepotastine

—emedastine

—ketotifen

—levocabastine

—lodoxamide

—nedocromil

—olopatadine

—tacrolimus—for the purpose of treating conditions of the eye and adnexa and for a duration not exceeding 42 days

ANTI-GLAUCOMA AGENTS

β-Adrenergic blocking agents (topical)

—betaxolol

~~—levobunolol~~

~~—timolol~~

~~Carbonic anhydrase inhibitors (topical)~~

~~—brinzolamide~~

~~—dorzolamide~~

~~Miotics (topical)~~

~~—carbachol~~

~~—pilocarpine~~

~~Prostaglandin analogs (topical)~~

~~—bimatoprost~~

~~—latanoprost~~

~~—tafluprost~~

~~—travoprost~~

~~α -Adrenergic agonists (topical)~~

~~—apraclonidine~~

~~—brimonidine~~

~~α -Adrenergic agonists/ β -adrenergic blocking agents (topical)~~

~~—brimonidine/timolol~~

~~Carbonic anhydrase inhibitors/ β -adrenergic blocking agents (topical)~~

~~—brinzolamide/timolol~~

~~—dorzolamide/timolol~~

~~Prostaglandin analogs/ β -adrenergic blocking agents (topical)~~

~~—latanoprost/timolol~~

~~—travoprost/timolol~~

~~Carbonic anhydrase inhibitors (oral) —to lower intraocular pressure only and a member shall immediately refer the patient to a physician or to a hospital~~

~~—acetazolamide~~

~~SECRETAGOGUES~~

~~Secretagogues (oral) —for Sjögren's syndrome only and only in collaboration with a physician with whom the member has established a co-management model of care~~

~~—pilocarpine~~

O. Reg. 112/11, Sched. 1; O. Reg. 17/17, s. 2.

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

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and Minister of Health and
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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

8-11 / OTHER MATTERS

8. By-Law Amendments – Governance Reform

9. Vice-President Election

10. Governance: Term Limits

11. List of Acronyms

BRIEFING NOTE

Council meeting – Sept. 2019

Subject

By-Law Amendments – Governance Reform

Background

The College undertook a governance review in late 2017. In 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.

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.

Governance changes:

- Removal of the Treasurer as an Officer of the Executive Committee; this role will be fulfilled by a staff member
Parts 3.02, 3.05, 3.08, 5.01, 7.01, 7.02, 7.05, 10.01, 10.04, 14.02
- Process for Appointing Committee Members/Chairs to be moved to Council (by way of the Governance/HR committee) and away from Executive
Part 8.03
- Update duties of the Executive Committee to reflect new terms of reference
Part 14.02
- Remove inconsistent reference that time spent filling a vacancy does not count towards the nine-year calculation
Part 6.06
- Change title to reflect Registrar as “Chief Executive Officer”
Part 10.04

Finance changes:

- Change authorization of expenses to require only Registrar’s approval for an expenditure already budgeted or for any unbudgeted expenditure less than \$25, 000
Part 3.08.

Council approved that the following by-law amendment be circulated regarding the Fee section at the January meeting:

- Set the cost of a Practice Assessment (CRA) to \$2400.00 plus HST *Schedule of Fees and Penalties*

The following administrative changes have been proposed:

- Add a requirement limiting the date of renewing a corporation application to no more than 30 days before the anniversary or renewal date
Part 17.02
- Fee for Copying and Providing any Requested Documentation *Schedule of Fees and Penalties*

At the June 24, 2019 Council meeting, Council approved the Governance/HR Committee motion to circulate proposed by-law changes relating to governance reform for feedback from optometrists, stakeholders and the public. The College circulated the proposed by-law amendments on July 3, 2019 and set a deadline for comments of September 1, 2019. The collated and anonymized feedback is included alongside the proposed amendments. The draft by-laws are now being presented to Council for approval.

Decision for Council

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

Considerations

The effect of these changes is not substantial given that the 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.

If approved, the new by-laws will come into force once passed by Council. 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 Governance/HR Committee to begin a more in-depth and fulsome review of the complete by-laws.

If not approved, Council will revisit the governance recommendations and consider next steps moving forward. It may also be an option to only accept certain by-law amendments for approval or leave the by-laws unchanged and continue with the current model.

Supporting Materials

- College of Optometrists Approved Proposed Amended By-Laws
- Member Feedback

Contact

John Van Bastelaar, Chair – Governance/HR Committee
Maureen Boon, Registrar
Justin Rafton, Policy Analyst



COLLEGE OF
Optometrists
OF ONTARIO

College By-laws

Original Effective Date: August 3, 2012

Revised September 4, 2012

Revised January 16, 2015

Revised April 8, 2015

Revised September 30, 2015

Revised January 20, 2016

Revised Fee Schedule Effective April 20, 2016

Revised Fee Schedule Effective January 16, 2017

Revised June 22, 2017

Revised September 19, 2017

Revised June 21, 2018

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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.~~

~~(2)~~ (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 |

| | |
|--|--|
| <u>Fee for Copying and Providing any Requested Documentation</u> | <u>Actual costs to the College of providing the copies</u> |
|--|--|

From:
To: feedback@collegeoptom.on.ca
Subject: Proposed Bylaw Changes Feedback
Date: July 9, 2019 7:42:22 PM

Dear College Council;

Thank you for providing an opportunity to comment on the proposed changes to the College Bylaw's. I would like to comment specifically on the addition of By-law 17.02(2) "limiting the date of renewing a corporation application to no more than 30 days before the anniversary or renewal date."

Imposing an arbitrary limitation of the number of days in which a professional corporation can renew its certificate of authorization strikes me as unnecessary and arbitrary. Given the possibility of the Registrar revoking a certificate of authorization I do appreciate being able to renew well in advance of the renewal date.

Further, I find the reference in the summary regarding the appoint of committee members and chairs to be inconsistent with actual changes in the language of the Bylaws. The proposed Bylaw amendment 8.03 indicates that Council that appoint committee members and chairs, while the summary appears to indicate that Council will delegate this task to a "Governance/HR Committee" that is otherwise not mentioned in the Bylaws. I would suggest changes to the summary provided to members to ensure consistency with the amendments proposed.

Thank you for your consideration.

BRIEFING NOTE

Council Meeting – Sept. 2019

Subject

Vice-President Election

Background

The current President's term comes to an end December 10, 2019. As per College by-laws, the Vice-President will step into the role Dec. 10 until the first Council meeting of 2020, which is scheduled for January 17.

In this instance, College by-laws state that an election be called to fill the role of Vice-President for the period between December 10, 2019 and January 17, 2020.

Decisions for Council

To vote on a new Council Vice-President.

Considerations

College by-laws outline that the election of officers take place at the first council meeting of the year. The vote taking place in September would be to fill the role of Vice-President until the scheduled vote in January.

Contact

Dr. Pooya Hemami, President

BRIEFING NOTE

Council meeting – Sept. 2019

Subject

Elected Council Member Term Limits & Waiting Period

Background

In 2017, the College underwent a fulsome governance review by Governance Solutions, which provided the College with best practice recommendations and an implementation work plan. Several recommendations have been put in place over the last 18 months, including proposed by-law changes related to governance reform that are now being presented to Council for approval.

The Governance/HR Committee is now conducting a more fulsome review and analysis of the College by-laws. Before making any recommendations, the Committee will engage Council in a number of facilitated discussions on governance issues, the first of which is focused on term limits and the waiting period.

Under the current College by-laws, a term is set at three years and a member can be on Council for nine consecutive years. At such time, the Council member would not be eligible for re-election and would have to be off Council for at least one year (“waiting period”) before running for a new position. The Committee is considering alternative options to align with best practices, promote fairness and transparency and to encourage greater turnover.

Decisions for Council

To review and discuss the options concerning Council member term limits and waiting period.

Council will be broken into groups for the facilitated discussion focusing on benefits/disadvantages of the different options. Feedback will then be provided to the Governance/HR Committee to inform any recommendation to Council.

Considerations

1. The Committee is considering a by-law amendment to **alter the maximum consecutive term limits allowed under the College by-laws.**

Under s5(1) of the *Health Professions Procedural Code (HPPC)*, which is Schedule 2 of the *Regulated Health Professions Act, 1991 (RHPA)*, no term of a Council member who is elected shall exceed three years. Furthermore, under s5(2) of the *HPPC*, a person may be a Council member for more than one term but no person who is elected may be a Council member for more than nine consecutive years. This is echoed in the current College by-laws.

A change to maximum consecutive term limits is being considered to:

- ensure compliance with the legislative limit of nine consecutive years serving on Council; and
- avoid the continuation of eventual partial terms for the District seats that require a by-election.

CURRENT SCENARIO

“A Council Member may serve more than one term. However, no person may be an Elected Council Member for more than **nine consecutive years.**”

Election



By-election



OPTION A:

“A Council Member may serve more than one term. However, no person may be an Elected Council Member for more than **six consecutive years.** Time served as an Elected Council Member as a result of the filling of a vacancy in between Council elections (i.e., by-election) shall not be included in the calculation. “

Election



By-election



OPTION B:

“A Council Member may serve more than one term. However, no person may be an Elected Council Member for more than nine consecutive years. If the Elected Council Member served time as a result of filling a vacancy between Council elections (i.e., by-election), they would be **ineligible to serve a subsequent term if they are not able to complete the three-year term before reaching nine consecutive years on Council.**”

Election



By-election



Scenario: Dr. Smith is elected to fill a vacancy for a District 1 seat for the remaining two years of the term. Following the end of that term, Dr. Smith would be eligible to run for the District seat in two subsequent elections. If successfully re-elected, Dr. Smith will have served eight years on Council. At that time, Dr. Smith would have to take time off Council (“waiting period”).

This scenario is the same for both option A & B proposed above for those filling a vacancy. The difference between the two proposals is on the maximum number of consecutive years a Council member (not filling a vacancy) can be on Council before they must take part in the waiting period.

- Option A would shorten the maximum consecutive years on Council to six. This would apply to all Council members, support best practices for optimal turnover and not disadvantage members seeking to fill a vacancy through a by-election by limiting their overall term limit.
 - Option B would keep the nine-year maximum for all Council members, however, those who are elected to fill a vacancy would be limited in the number of subsequent consecutive terms. This would keep greater continuity over that complete timeframe but may be seen as contrary to promoting member turnover and act as a barrier for those interesting in filling a vacancy.
2. As per Part 11.04 of the College by-laws, a member must take part in a one-year waiting period after reaching the consecutive year maximum on Council prior to running for another Council seat. An alternative approach is that the waiting period be extended to three years, so that the member would have to wait at least one term length prior to being eligible to rejoin Council. Which approach is preferred?

While the one-year waiting period allows a member to return to Council nearly uninterrupted, it creates the scenario where a member is nearly on Council for 18 years without a break. In comparison, a three-year waiting period is a longer hiatus away from Council (a full- term length) but

promotes greater turnover and allows the member to return to a potentially different Council and strategic direction with a fresh perspective.

The Governance Review report noted that “if members are not turning over to an optimal extent, a policy change to force this could help. However, this would need to preclude Council members returning after a short hiatus.” The report recommends that if maximum term limits were to change for reasons of optimal performance then, in turn, the waiting period should also be evaluated for changed.

Note: The Committee has discussed that any such proposal/recommendation would be grandfathered and not affect current Council member terms.

Contact

John Van Bastelaar, Chair – Governance/HR Committee

Maureen Boon, Registrar

Justin Rafton, Policy Analyst

List of Acronyms Used by the College of Optometrists of Ontario

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

List of Acronyms Used by the College of Optometrists of Ontario

| Acronym | Name | Description |
|---------|---|--|
| CLEAR | Council on Licensure Evaluation and Regulation | International body of regulatory boards – mainly US and Canadian members |
| CMPA | Canadian Medical Protective Association | Professional liability insurer for physicians |
| CNAR | Canadian Network of Agencies for Regulation | |
| CNCA | <i>Canada Not-for-profit Corporation Corporations Act</i> | |
| CNIB | Canadian National Institute for the Blind | A voluntary, non-profit rehabilitation agency that provides services for people who are blind, visually impaired and deaf-blind |
| CNO | College of Nurses of Ontario | Regulates nurses in Ontario |
| COBC | College of Optometrists of British Columbia | Regulates optometrists in British Columbia |
| COEC | Canadian Optometric Evaluation Committee | Committee of FORAC that assesses the credentials of internationally educated optometrists who wish to practice in Canada |
| COI | Conflict of Interest | Situation in which someone in a position of trust has competing professional and personal interests |
| COO | College of Opticians of Ontario | A self-governing college that registers and regulates opticians in Ontario 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 |

List of Acronyms Used by the College of Optometrists of Ontario

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

List of Acronyms Used by the College of Optometrists of Ontario

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

List of Acronyms Used by the College of Optometrists of Ontario

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

List of Acronyms Used by the College of Optometrists of Ontario

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

Updated June 2018

12-14 / UPCOMING MEETINGS

12. Dates of Upcoming Council Meetings

- a. Friday January 17, 2020
- b. Monday April 20, 2020
- c. Thursday June 25, 2020

13. Proposed Dates for Council Meetings (2020)

- a. September 25, 2020
- b. December 4, 2020

14. Adjournment