



COLLEGE OF **OPTOMETRISTS** OF ONTARIO

COUNCIL MEETING

FRIDAY, MARCH 22, 2024
AT 9:00 A.M.

(PUBLIC INVITED TO ATTEND ONLINE)

HYBRID MEETING

Vision and Mission

Vision: To ensure that the public understands, trusts and has confidence in optometrists.

Mission: To regulate Ontario's Doctors of Optometry in the public interest.

1 - 4 / INTRODUCTION

1. Call to Order/Attendance
 - a. Land Acknowledgement
 - b. Public Interest Statement
2. Adopt the Agenda
 - a. Conflict of Interest Declaration
3. Committee Updates
4. Consent Agenda
 - PART 1 - Minutes of Prior Council Meetings
 - i. December 9, 2023
 - ii. January 19, 2024
 - iii. Motions and Actions Arising from the Minutes
 - PART 2 - Reports
 - b. Committee Reports
 - i. Executive
 - ii. Patient Relations
 - iii. Quality Assurance
 - iv. ICRC
 - v. Registration
 - vi. Discipline
 - vii. Governance/HR
 - viii. Audit/Finance/Risk

Council Agenda

Date: Friday, March 22, 2024 | 9:00 a.m. – 1:30 p.m.

Hybrid Meeting

| Agenda Item | Item Lead | Time (mins) | Action Required | Page No. |
|---|------------------|-------------|-----------------|--|
| 1. Call to Order/Attendance b. Land Acknowledgement c. Public Interest Statement | M. Eltis | 5 | Decision | 3 |
| 2. Adopt the Agenda a. Conflict of Interest Declaration | M. Eltis | 2 | Decision | 4 |
| 3. Committee Updates | Committee Chairs | 15 | Presentation | 3 |
| 4. Consent Agenda PART 1 - Minutes of Prior Council Meetings i. December 9, 2023 ii. January 19, 2024 iii. Motions and Actions Items Arising from the Minutes PART 2 - Reports b. Committee Reports i. Executive ii. Patient Relations iii. Quality Assurance iv. ICRC v. Registration vi. Discipline vii. Governance/HR viii. Audit/Finance/Risk | M. Eltis | 15 | Decision | 4 6 10 13 15 16 17 20 22 30 31 33 |
| 5. Registrar's Report | J. Jamieson | 60 | Presentation | 35 |
| 10:40–10:55 a.m. - Morning Break | | 15 | | |
| 6. Motions Brought Forward from Committees a. Quality Assurance i. Self-Assessment Policy | K. Morcos | 15 | Decision | 36 |

| | | | | |
|---|-------------|----|-----------------|----|
| b. Executive | | | | |
| i. 2023 CPMF Report | M. Eltis | 15 | Decision | 40 |
| ii. Appointment of Suzanne Allen to the Quality Assurance Committee | M. Eltis | 5 | Decision | |
| 7. Presentation from Dr. Zubin Austin | Z. Austin | 45 | Presentation | 35 |
| 12:15 p.m. – 1:00 p.m. - Lunch | | 45 | | |
| 8. Motions Brought Forward from Committees cont'd | | | | |
| a. Audit/Finance/Risk | | | | |
| i. Disclosure of Council members' compensation in the College's Annual Report | N. Shah | 15 | Decision | 45 |
| 9. Upcoming Council Meetings | J. Jamieson | 5 | For information | 48 |
| a. Thursday, June 20, 2024 (AGM) | | | | |
| b. Friday, June 21, 2024 | | | | |
| c. Friday, September 13, 2024 | | | | |
| d. Friday, December 13, 2024 | | | | |
| 10. List of Acronyms | | | | 49 |
| 11. Governance Guide: Robert's Rules | | | | 55 |
| 12. Council Feedback Survey | M. Eltis | 5 | Discussion | |
| 13. Adjournment – approximately 1:30 p.m. | M. Eltis | 2 | Decision | 48 |
| Generative Discussion (optional) | M. Eltis | 30 | Discussion | 48 |
| a. Generative Discussion Feedback Survey | | | | |



**College of Optometrists of Ontario
Council Meeting
DRAFT – December 8, 2023**

Attendance:

Dr. Mark Eltis, President
Dr. Pooya Hemami, Vice President
Ms. Suzanne Allen
Dr. Lisa Christian
Dr. Camy Grewal
Ms. Lisa Holland
Ms. Esther Jooda
Mr. Howard Kennedy

Dr. Richard Kniaziew
Dr. Dino Mastronardi
Dr. Kamy Morcos
Mr. Narendra Shah
Mr. Andre Tilban-Rios
Dr. William Ulakovic
Dr. Abraham Yuen

Staff:

Mr. Joe Jamieson, Registrar & CEO
Ms. Hanan Jibry, Deputy Registrar
Mr. Chad Andrews
Mr. Edward Cho

Ms. Jaslin Facey
Ms. Debbie Lim
Ms. Adrita Shah Noor
Ms. Bonny Wong

Regrets

Dr. Areef Nurani
Mr. Olutoye Soile

Guest:

Ms. Julia Martin, legal counsel

1. Call to Order/Attendance: Dr. Eltis called the meeting to order at 9:00 a.m.

Dr. Eltis read the land acknowledgement and public interest statement.

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

*Moved by Dr. Yuen and seconded by Ms. Allen to **adopt the agenda.***

Motion carried

2a. Conflict of Interest Declaration: Dr. Eltis asked Council members if anyone has a conflict of interest with any item on the day's agenda.

No conflicts of interest were declared.

3. Business Arising: Presentation by Dr. Areef Nurani

Dr. Nurani was absent and did not present.

Dr. Eltis thanked Dr. Nurani for his contribution to Council during his term as a Council member.

4. Committee Updates: The Committee Chairs presented updates on their respective committees.

5. Registrar's Report

Mr. Jamieson presented the Registrar's Report which included an overview of the College's financials, an update on the Tripartite Working Group, and milestone achievements from various departments.

6. Consent Agenda: A draft consent agenda was circulated prior to the meeting. The following items were included in the consent agenda:

PART 1 - Minutes of Prior Council Meetings

a. September 15, 2023

b. Motions and Action Items Arising from the Minutes

PART 2 - Reports

b. Committee Reports

i. Executive

ii. Patient Relations

iii. Quality Assurance:

iv. ICRC

v. Registration

vi. Discipline

vii. Governance/HR Committee

viii. Audit/Finance/Risk Committee

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

Council discussed the Registration report and suggested that there be further clarification regarding ACOE schools that are "Accredited with Conditions" on the applicant webpage. Dr. Yuen confirmed they will discuss the suggestion at the next Registration committee meeting.

Council also discussed the arising issue of national licensure and the concerns regarding investigating and receiving complaints for residents within each province or territory. Dr. Jamieson provided context for the idea of national licensure and clarified that while the College cannot delegate out its authority power, it is an issue that has not yet fully developed and must be set aside for the time being.

Ms. Jibry added that there is recognition that every province/territory has its own legislation that cannot be changed swiftly.

Council discussed the issue of having only one English-speaking optometry school in Canada, and the importance of having a Canadian present at the ACOE table.

Moved by Dr. Grewal and seconded by Ms. Jooda to approve the agenda.

Motion carried

7. Presentation from RBC Dominion Securities

Dr. Eltis welcomed Mr. Jonathan Santos from RBC Dominion Securities, and then asked to move in-camera to discuss financial matters.

*Moved by Dr. Hemami and seconded by Dr. Yuen to **go in camera**.*

Motion carried

IN CAMERA Session: Discussing Financial Matters

In accordance with Section 7(2)(b) of the Health Professions Procedural Code, which is Schedule 2 to the *Regulated Health Professions Act, 1991*.

Council went in camera at 10:38 a.m.

Council came out of camera at 11:13 a.m.

Dr. Eltis announced Council went into camera to discuss financial matters, and that Council was now out of camera.

8. Motions Brought Forward from Committees

a) Audit/Finance/Risk

i. To approve the balanced operating budget for 2024

Mr. Shah presented the motion to approve the balanced operating budget for 2024.

Council discussed the motion and inquired about member fee increases. Mr. Jamieson added that there are no proposed increases in fees for 2024 but that the AFR committee will be assessing various scenarios including returning the Certificate of Authorization fees to pre-COVID levels in 2025.

Dr. Yuen inquired about how much revenue is generated from leasing our space to other regulatory health Colleges. Mr. Jamieson said the College of Kinesiologists of Ontario leased boardroom space for their Council meetings in 2023 and he clarified it is more emphasis on collaboration with other Colleges for CPMF purposes, rather than benefitting from financial cost.

*Moved by Mr. Shah and seconded by Dr. Kniaziew to **approve the balanced operating budget for 2024.***

All in favour

Motion carried

ii. To maintain contingency funds of \$2.5M in 2024

Mr. Shah presented the motion to maintain contingency funds of \$2.5M in 2024.

*Moved by Mr. Shah and seconded by Mr. Tilban-Rios to **maintain contingency funds of \$2.5M in 2024.***

All in favour

Motion carried

9. Dates of Upcoming Council Meetings

- a. Friday, January 19, 2024
- b. Friday, February 9, 2024 (Orientation)
- c. Friday, March 22, 2024
- d. Thursday, June 20, 2024 (AGM)
- e. Friday, June 21, 2024
- f. Friday, September 13, 2024
- g. Friday, December 13, 2024

10. List of Acronyms

11. Governance Guide: Robert's Rules

12. Council Feedback Survey

13. Adjournment: *Moved by Mr. Tilban-Rios and seconded by Dr. Ulakovic to **adjourn the meeting at 11:28 a.m.***

Motion carried



**College of Optometrists of Ontario
Council Meeting
DRAFT - January 19, 2024**

Attendance:

Ms. Suzanne Allen
Dr. Lisa Christian
Dr. Mark Eltis
Dr. Camy Grewal
Mr. Pooya Hemami
Ms. Lisa Holland
Ms. Esther Jooda
Mr. Howard Kennedy
Dr. Richard Kniaziew

Mr. Dino Mastronardi
Dr. Kamy Morcos
Dr. Patrick Quaid
Mr. Narendra Shah
Mr. Toye Soile
Mr. Andre Tilban-Rios
Dr. William Ulakovic
Dr. Abraham Yuen

Staff:

Mr. Joe Jamieson, Registrar & CEO
Mr. Chad Andrews
Mr. Edward Cho
Ms. Jaslin Facey

Ms. Hanan Jibry, Deputy Registrar
Ms. Debbie Lim
Ms. Adrita Shah Noor
Ms. Bonny Wong

Guests:

Ms. Julia Martin, Legal Counsel

1 **1. Call to Order/Attendance:** Dr. Eltis called the meeting to order at 9:03 a.m.

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

4
5 **2a. Conflict of Interest Declaration:** Dr. Eltis asked Council members if anyone has a conflict of interest
6 with any items on the day's agenda.

7
8 No conflicts of interest were declared.

9
10 *Moved by Dr. Yuen and seconded by Mr. Kennedy to **adopt the agenda.***

Motion carried

11
12
13 Mr. Jamieson introduced the election and congratulated Dr. Eltis on his acclamation for President. Mr.
14 Jamieson delegated the responsibility of overseeing and moderating the process to Mr. Andrews.

15
16 **3. Election of the Officers for 2024 Council year**

17
18 In line with the Executive Committee terms of reference, which were shared with Council, Mr. Andrews
19 reminded Council that according to the by-laws, there are no self-nominations from the floor.

Vice-President:

Dr. Hemami, Dr. Ulakovic, and Dr. Grewal each presented their candidacy to Council.

Following anonymous electronic voting, Mr. Andrews announced that **Dr. Camy Grewal was elected to the position of Vice-President.**

Chair of the Governance-HR Committee:

Dr. Christian and Ms. Jooda each presented their candidacy to Council.

Following anonymous electronic voting, Mr. Andrews announced that **Dr. Christian is elected to the position of Chair of the Governance-HR Committee.**

Chair of the Audit/Finance/Risk Committee:

Mr. Kennedy and Mr. Shah each presented their candidacy to Council.

Following anonymous electronic voting, Mr. Andrews announced **Mr. Shah was elected to the position of Chair of the Audit/Risk/Finance Committee.**

Member-at-Large:

Ms. Jooda and Mr. Kennedy each presented their candidacy to Council.

Following anonymous electronic voting, Mr. Andrews announced that **Mr. Kennedy was elected to the position of Member-at-Large.**

Mr. Andrews thanked all candidates for submitting their names and participating in the election, and congratulated those who were elected to positions on the Executive Committee for 2024.

4. Motions Brought Forward by Committees

a. Governance/HR

i. Appointment of the Committee Chairs and Committee Members

The Governance-HR Committee moved into a break-out room to finalize the committee slates based on the Executive election results.

Council took a break at 9:40 a.m.

Council reconvened at 10:10 a.m.

64 Dr. Christian presented a PowerPoint presentation that reflected the proposed slate of members for the
65 College's committees in 2024.

66

67 *Moved by Dr. Morcos and seconded by Dr. Mastronardi to **approve the proposed committee***
68 ***membership for 2024 as set out by the Governance-HR Committee.***

69

Motion carried

70 **5. Upcoming Council Meetings**

71

72 **6. Adjournment**

73

74 *Moved by Dr. Quaid and seconded by Ms. Allen to **adjourn the meeting at 10:16 a.m.***

75

Motion carried

Council Meeting – March 22, 2024

COUNCIL ACTION LIST STATUS

Updated March 11, 2024

| Date mm/dd/yr | Minute Line | Action | Status | Comments |
|------------------|----------------|---|---------|----------|
| 06/18/21 | 155 | Staff, including practice advisors, will develop a practice advisory regarding advertising. | Ongoing | |

Council Meeting – March 22, 2024

MOTION LIST

Updated March 11, 2024

| Date mm/dd/yr | Minute Line | Motion | Committee | Decision |
|--------------------------|------------------------|---|--------------------|-----------------|
| 12/08/23 | 117 | Moved by Mr. Shah and seconded by Dr. Kniaziew to approve the balanced operating budget for 2024. | Audit/Finance/Risk | Motion carried |
| 12/08/24 | 125 | Moved by Mr. Shah and seconded by Mr. Tilban-Rios to maintain contingency funds of \$2.5M in 2024. | Audit/Finance/Risk | Motion carried |
| | | | | |

Executive Committee Activity Report

Reporting date: March 22, 2024

Chair: Dr. Mark Eltis

Meetings in 2024: 1 over Zoom | most recent on March 5, 2024

Key Priorities

The Executive Committee meets before each Council session to review the Council meeting's agenda and committee motions. This is to ensure that Council sessions are efficient, transparent, and capable of meeting high standards in governance. The Committee also meets to address emerging and time-sensitive issues when necessary and appropriate.

Discussion Items

Committee Agenda for March 22, 2024 Council Meeting

The Executive Committee reviewed a draft agenda and motions for the March 22, 2024 meeting of Council.

Decision Items

Council Member Appointment: Quality Assurance Committee

The Quality Assurance Committee currently has two public members even though its terms of reference specify three. To accommodate scheduling and the work of QAC this year, public members were canvassed regarding their interest in taking on this additional role. Two members responded, and the Executive Committee discussed the best fit based on current workload (see "motions" below).

College Performance Measurement Framework

The Group reviewed a draft of the College's CPMF report for 2023 (see "motions" below).

Motions

1. The Executive Committee recommends to Council that Suzanne Allen be appointed to the Quality Assurance Committee.
2. The Executive Committee recommends to Council the approval of the CPMF report for 2023.

Attachments

College Performance Measurement Framework Report for 2023

Patient Relations Committee Activity Report

Reporting date: March 22, 2024

Committee Chair: Esther Jooda

Meetings in 2023: 1 (Zoom) | most recent on March 1, 2024

Key Priorities

The Patient Relations Committee manages the Program of Funding for Therapy and Counselling, which currently supports two patients.

Information Items

Program of Funding for Therapy and Counselling

The patient therapy program continues to provide support for two patients.

Discussion Items

Orientation

The Patient Relations Committee received their Orientation during the meeting on March 1, 2024. The Committee learned about the role of the committee and its importance in protecting the public.

Decision Items

The Patient Relations Committee does not have any motions for Council to review at this meeting.

Attachments

N/A

Quality Assurance Committee Activity Report

Reporting date: March 22, 2024

Chair: Dr. Kamy Morcos

Meetings in 2024: 2 (via virtual meeting)

Tasks Completed Since Last Council Meeting:

- Reviewed and approved practice assessments, Case Manager Reports, and clarifications from registrants.
- Reviewed and approved remedial programs and practice re-assessments.
- Reviewed and made decisions on written submissions from registrants regarding their remediation requirements.
- Reviewed and made decisions on requests for consideration from registrants who failed to meet their direct optometric care hours and from registrants who failed to meet their CE hours.
- Clarified questions from registrants regarding the CE Policy.
- Reviewed and approved the *QA Policy – 750 Direct Optometric Care Hours Deficiency – Waiver Request*.
- Completed inter-rater reliability study for phase one of the pre-testing of the new practice assessment tool, Chart Review Protocol (CRP).
- Selected participants to move onto phase two of the pre-testing (i.e., Chart Stimulated Recall Protocol (CSRPP)).
- Reviewed and approved the *Self-Assessment Policy*.
- Kickoff meeting with consultants to start the OPR modernization project.

Key Priorities

- Completing the pre-testing phase of the practice assessment revamp project.
- Launching the new self-assessment component of the QA program.
- Reviewing all practice assessments, remedial programs, and re-assessments from previous years.
- Initiating the OPR modernization project.

Information Items

Practice Assessment Stats

| | Since Last Council Meeting | Throughout 2024 |
|----------------------|----------------------------|-----------------|
| SRA Report Reviewed | 2 | 2 |
| CRP Report Reviewed* | 58 | 58 |

| | | |
|---|----|----|
| CRA and Case Manager Reports Reviewed | 1 | 1 |
| Ongoing Remediation Cases and Re-assessments Reviewed | 14 | 14 |
| New Referrals for Remediation | 1 | 1 |

*Registrants randomly selected in 2023 to participate in the pre-testing of the CRP tool.

Discussion Items

Practice Assessment Revamp Project

- Pre-testing Phase One – Chart Review Protocol (CRP):
 - Twenty-nine (29) randomly selected registrants participated in the pre-testing of the CRP tool. Two different assessors were assigned to each CRP assessment. Inter-rater reliability analysis was completed in January 2024.
 - Surveys were also sent out to the registrants and assessors. Overall feedback was positive with an average rating of 4.4/5 and 4.0/5.0 from assessors and registrants, respectively. No changes to the assessment process were required.
 - Overall inter-rater agreement was very strong (91.6%). Specific findings that require follow-up include:
 - Four out of the 20 indicators of quality care on the CRP tool had disagreements among assessors and require further training. One indicator relates to reporting requirements for driver's licence restriction to the Ministry of Transportation. On February 22, 2024, the QA Special Projects Panel (QASP) provided clarifications on how to rate this indicator.
 - A few pairs of assessors disagreed on their ratings for the same sets of records. These assessors will be contacted individually to understand their decision-making processes.
 - A one-hour virtual training session for CRP assessors will be held on April 29, 2024. The goal of this training is to reduce inter-rater variability among assessors prior to the wider implementation of the new CRP tool. The consultants and College Practice Advisor will lead this training. QAC Chair will attend as an observer and provide guidance/feedback as needed.
- Pre-testing Phase Two – Chart-Stimulated Recall Protocol (CSRP):
 - After reviewing all CRP reports from Phase One, the QA Panel (QAP):
 - selected 12 out of the 29 randomly selected registrants to move onto Phase Two (i.e., CSRP). This new conversation-based CSRP assessment will take place in spring of 2024, followed by a review of the assessment results and feedback from the registrants and assessors; and
 - provided feedback to help reduce inter-rater variability among assessors. This feedback will be incorporated into the April 29, 2024 assessor training.

Launch of Self-Assessment Component of the QA Program

- The QASP reviewed and approved the *Self-Assessment Policy* with no revisions required. The policy outlines the requirements that must be met by registrants in the current three-year cycle: January 1, 2024 to December 31, 2026.
- The policy is presented for Council approval at their March 22, 2024 meeting. Once approved, the College will officially launch the self-assessment to all registrants.

Modernization of the OPR

- The QASP selected a consultant to guide the modernization project. The goal of the project is to ensure the OPR is clear, concise, and uses consistent language understood by the profession and public.
- On February 22, 2024, QASP had a kickoff meeting with the consultants to establish a project timeline and milestones and finalize details of the service agreement. Preliminary steps were taken in the re-formatting of the document.

QA Policy - 750 Direct Optometric Care Hours Deficiency – Waiver Request

- It is a condition of a registrant's certificate of registration to provide at least 750 hours of direct optometric care to patients in Canada in every 3-year period following the year in which they are first registered as required under Section 7.(1)(a) of O. Reg. 837/093 (the Regulations). If a registrant is found to be deficient in direct optometric care hours to patients in Canada for any rolling three-year period, a referral will be made by the Registrar to the Quality Assurance Committee for a practice assessment as required under Section 7.(3)(a).
- In late 2023, the QAP reviewed several cases of extenuating circumstances that led to registrants failing to meet their optometric care hours requirements. The QAP agreed that a policy is needed to handle these cases.
- On February 23, 2024, the QAP reviewed and approved a policy that establishes a fair and transparent process for registrants to request a waiver of practice assessment due optometric care hours deficiency. The policy will also ensure consistency in decision-making between different panels.

Attachments

N/A

Inquiries, Complaints and Reports Committee (ICRC) Activity Report

Reporting date: March 22, 2024

Committee Chair: Dr. Dino Mastronardi

Meetings in 2024: 2

Information Items

This report is intended to provide Council with information on complaints and registrar's investigations while maintaining fairness throughout the process. In keeping with Section 36 of the *Regulated Health Professions Act, 1991* regarding confidentiality, details about specific cases are not shared as part of the Committee report.

The 2024 ICRC met as a group on March 7, 2024 for the Committee's orientation. A separate introductory training session took place on February 14, 2024, and was tailored for the two new members of the ICRC this year. The educational session on February 14th focused on the foundational ICRC concepts (such as the complaints process and the jurisdiction of the ICRC) and was optional for returning members.

At the time of drafting this report, Dr. Mastronardi's Panel is also scheduled to meet on March 27, 2024.

Discussion Items

The ICRC has no additional updates for Council at this time.

Decision Items

There are no ICRC decisions or motions that require Council feedback or approval at this meeting.

Cases Processed Since Last Reporting (November 25, 2023 – March 8, 2024)

- Complaints newly filed: 13
- Cases reviewed by the panels: 0
- Complaint Cases to Alternative Dispute Resolution (ADR): 2
- Cases carried over: 0

| Decision Breakdown | Total |
|---------------------------------------|-----------|
| Decisions Issued | 14 |
| Case Type | |
| • Complaints | 14 |
| • Registrar's Investigations | 0 |
| • Incapacity Inquiry | 0 |
| Dispositions (for cases above) | |
| • No action/No further action (NFA) | 14 |

| | |
|--|---------------------------------|
| <ul style="list-style-type: none"> • Advice/Recommendation • Remedial agreement • Specified Continuing Education or Remediation Program (SCERP) • Oral caution • Acknowledgement and Undertaking • Referral of specified allegations to the Discipline Committee | 0 0 0 0 0 0 |
| Nature of Allegations (for dispositions above, no action/NFA excluded)** <ul style="list-style-type: none"> • Failure to diagnose/misdiagnose • Failure refer to an ophthalmologist • Improper eye examination and/or treatment • Unprofessional behaviour & communication • Related to eyeglasses or contact lens prescriptions • Exceeding the scope of practice of the profession • Sexual abuse of a patient | 0 0 0 0 0 0 0 |
| Timeline for Resolution (for cases above) <ul style="list-style-type: none"> • <120 Days • 121-150 Days • 151-180 Days • 180+ Days | 0 0 0 14 |

*** Certain matters may contain more than one allegation.*

HPARB Appeals

- New appeals: 0
- Outstanding appeals to be heard: 7
- Appeals heard and awaiting decisions: 0
- ICRC Decision Confirmed: 2
- ICRC Decision Returned: 0

Registration Committee Activity Report

Reporting date: March 22, 2024

Chair: Dr. Abraham Yuen

Meetings in 2024: 1 (via videoconference)

Tasks Completed Since Last Council Meeting:

- Discussed the Ministry of Health (MOH), the Federation of Optometric Regulatory Authorities of Canada (FORAC), the Office of the Fairness Commissioner (OFC), Touchstone Institute and the Internationally Graduated Optometrist Evaluating Examination (IGOEE), the Optometry Examining Board of Canada (OEBC) and the National Board of Examiners in Optometry (NBEO) examinations, and the registration process.

Key Priorities

Ministry of Health

- On Jan. 9, 2024, MOH staff reached out to the College and requested a new redline version of the additional proposed amendments to the Registration Regulation. The redline additional proposed amendments to the Registration Regulation (based on 2018 submission with the addition of flexibility in referrals for a QA evaluation) and rationale chart, were provided to MOH staff on January 22 and 30, respectively.

Federation of Optometric Regulatory Authorities of Canada

- The College President, Vice President, Registrar, Dr. Hemami, and the Committee support staff, attended the Jan. 27, 2024, FORAC meeting in Ottawa. The following motion was passed by a special resolution:

to approve the bylaw amendment as presented to the members such that a special resolution of the members or the board is passed by the votes of at least 70% of the members or directors where the total number of optometrists registered to practice with the FORAC-FAROC members whose members or directors have voted in favour of the resolution, represents a majority of the total number of optometrists registered to practice in all FORAC-FAROC member jurisdictions. The quorum at any meeting of members or the board shall be seventy percent (70%) of members or directors.

- There is a virtual FORAC meeting on May 4, 2024, and an in-person FORAC meeting in Calgary on Sept. 6-7, 2024, which includes a full-day strategic planning meeting.

Office of the Fairness Commissioner

- The Committee discussed OFC providing the College's provisional risk rating for 2023-2024 (please refer to the enclosed Feb. 20, 2024, letter).

Touchstone Institute

- The Committee met with Touchstone Institute staff to discuss candidate registrations for the 2024 IGOEE, preparations for the 2024 IGOEE, and IGOEE sustainability.
- Touchstone Institute staff reported that there were 24 candidate registrations for the spring 2024 IGOEE.
- The 2024 IGOEE administration schedule is below:
 - MCQ – March 13, 2024
 - TPAO – March 14, 2024
 - Short Cases OSCE – March 22, 2024
 - Long Cases OSCE – March 23 & 24, 2024

Optometry Examining Board of Canada

- OEBC exam fees effective July 2023 are: Written examination: \$1,500; OSCE: \$3,000.
- At the OEBC-Member's Meeting on Jan. 27, 2024, the promotion of the OEBC exam for members' regulatory processes was discussed such as using the exam as part of the regulators' reinstatement process or using the exam as a possible voluntary undertaking at the complaint stage.
- Committee members are planning to observe either the 2024 OEBC OSCE on Saturday, April 13 in Montreal or on Sunday, May 5 in Hamilton.

National Board of Examiners in Optometry

- Registration for the new Part III PEPS exam will open on March 26, 2024. It is scheduled to launch in August 2024 and is designed to evaluate essential technical skills and measure a candidate's ability to apply evidence-based knowledge to patient care.
- NBEO announced a further increase in exam fees beginning August 2024 (in USD Part I ABS: \$1,445; Part II PAM: \$1,445; Part III PEPS: \$1,445) compared to exam fees through July 2024 (in USD Part I ABS: \$1,380; Part II PAM: \$1,380; Part III CSE: \$1,380).

Registration Process

- College staff continue to accept applications for registration electronically and validate documents with applicants.
- There were 19 candidates registered for the February 2024 online Jurisprudence exam.
- There was a total of 154 online applications in 2023 (123 started and paid for in 2023 with the remaining 31 applications started between 2021-2022 but paid for in 2023) and 27 online applications in 2024 (2 were started in 2023 and paid for in 2024) as of March 7. There have been 9 applications by internationally trained applicants and 6 applications using labour mobility since the online application portal was launched on September 1, 2023, for internationally trained, labour mobility, and Academic Certificate of Registration applicants.

Discussion Items

- The Committee discussed the following:
 - The Health Professions Procedural Code and the By-laws where the imposition of terms, conditions, and limitations on a certificate of registration are concerned.

- Registration requirements for applicants using labour mobility provisions.
- The need to set criteria for additional optometry fellowships.



February 20, 2024

Sent via e-mail

Dear Regulator,

RE: Risk Rating for the College of Optometrists of Ontario

The purpose of this letter is to communicate the 2023 / 24 provisional risk rating for the College of Optometrists of Ontario (the college). This letter includes background information on the risk assessment process, describes both positive practices and risks that the Office of the Fairness Commissioner (OFC) identified for your college, and articulates next steps.

Background:

In November 2023, the OFC implemented the second iteration of its [Risk-informed Compliance Framework](#) (RICF). Under this framework, the OFC assesses each regulator's operations against five risk factors that may impede the regulator's ability to apply fair registration practices for the licensure of domestic and internationally trained applicants.

The risk assessment process may produce one of three risk ratings: low, moderately low, and moderate to high. The OFC tailors its compliance strategy according to the risk rating obtained so that we can work with regulators to address the most significant risks and barriers to fair registration practices.

For the 2023 / 24 risk assessment cycle, the five risk factors are set out below:

1. Organizational capacity.
2. The overall control that a regulator exerts over its assessment and registration processes.
3. The impact of major changes to registration practices and relations with third-party service providers.
4. The ability of the regulator to comply with newly introduced legislative and / or regulatory obligations.

5. Public policy considerations:

- i. Addressing labour market shortages.
- ii. The ability to promote inclusion and address anti-racism concerns in registration processes.

Further detail on indicators associated with these risk factors can be found in the OFC's [Risk-informed Compliance Framework and Policy](#).

Positive Initiatives Adopted by College of Optometrists of Ontario:

Before providing an analysis of these risk factors as they apply to the college, the OFC would like to highlight several positive initiatives that it has undertaken to improve registration outcomes for applicants to your profession. More particularly, the college has:

- Proactively collaborated with the Federation of Optometric Regulatory Authorities of Canada (FORAC) to make modifications to its language proficiency testing requirements, to align with recent amendments to the *Regulated Health Professions Act, 1991* (RHPA).
- Enhanced the level of technical support that it provides to candidates who write their jurisprudence examinations via remote proctoring.
- Established an emergency registration class, allowing applicants who have satisfied specific requirements to work under supervision in the event of an emergency that interrupts normal registration processes.
- Through its newly formed Diversity, Equity and Inclusion (DEI) Working Group, created a comprehensive 2022-2025 DEI plan, and compiled related resources for members, which are available on the college's internet site.

The OFC wishes to commend the college for undertaking these important initiatives.

Risk Assessment of the College's Registration Practices:

In undertaking a risk analysis for the college, your OFC Compliance Analyst, Anna Eisner, has carefully examined the college's 2022 Fair Registration Practices Report and supplementary 2023 RICF questionnaire responses. Anna also discussed her key findings with the Fairness Commissioner and OFC management.

The OFC's analysis has identified the following risk factors associated with your organization:

- The overall control that a regulator exerts over its assessment and registration processes, and its relations with third-party service providers.

- Addressing labour market shortages.

For each of the risks identified above, the OFC has assessed both the probability that the risk will occur and the significance of the consequences.

The overall control that a regulator exerts over its assessment and registration processes, and its relations with third-party service providers:

Under the RICF policy, a regulator may be subject to this risk if it lacks effective processes to monitor and evaluate the work of third-party service providers (TPSPs) and / or cannot demonstrate that it holds them accountable to ensure that the delegated responsibility is undertaken in a way that is transparent, objective, impartial and fair.

Two factors to consider in determining the likelihood that the risk will occur involve the materiality of the outsourced activity and how effectively the regulator is overseeing the work of its third-party service providers.

The college has delegated its candidate assessment process to the Federation of Optometric Regulatory Authorities of Canada (FORAC). This is a national body which provides assessment-related services for regulators of optometry across Canada.

Under the policies that FORAC has adopted, international optometry graduates (IOGs) who have not completed an education program endorsed by the Accreditation Council on Optometric Education (ACOE) or by another accrediting body approved by a provincial authority must write the Internationally Graduated Optometrist Evaluating Examination (IGOEE).

Based on discussions with the college and FORAC, the OFC understands that only about 10% of applicants who complete this test are granted exceptional standing such that they can immediately sit for the Optometry Examining Board of Canada's (OEBC's) entry-to-practice exam.

The remaining 90% of candidates must then complete the Advanced Standing Optometry Preparatory (bridging) Program (ASOPP) and the final two years of the Doctor of Optometry program at the University of Waterloo (the university). The ASOPP runs from April to August (five months) in each year. The entire process would take an IOG at least two and a half years to complete, which would serve as a material barrier to licensure into the profession.

To add to this concern, the university only makes available six spots per year to IOG candidates who have not been granted exceptional standing. This means that the great majority of these applicants could wait several more years before they can write the national licensure examination.

Significantly, the college promotes the option of seeking advanced standing in the United States. In any case, candidates in the non-exceptional category will be subject to high tuition and a lengthy trajectory to obtain their career goals.

The OFC is concerned that this restrictive assessment process is creating arbitrary and unnecessary barriers for competent IOGs who wish to practice their profession in Ontario. To address this situation, we recommend that the college pursue further discussions with both FORAC and the university to find ways to either relax these assessment practices, increase the number of university spaces available and / or explore other ways that candidates can obtain licensure in the profession.

Other health regulatory colleges have taken significant steps to remove these sorts of impediments and the OFC would be pleased to discuss these with the college.

Addressing labour market shortages:

Under the RICF policy, a regulator may be subject to this risk if its registration processes are not helping to address critical labour shortages in its occupational sphere. A factor to consider in determining the likelihood that the risk will occur includes evidence of material labour shortages within the profession coupled with inefficient, slow and / or unduly restrictive registration processes.

Based on the Canadian Occupational Projection System (COPS), the projected supply and demand situation for the profession of optometry between 2022 to 2031 is described as "shortage."¹ To amplify this point, the [Distribution of ODs in Ontario by the College's Electoral Districts \(as of May 30, 2022\)](#), which the college has incorporated into its website by virtue of the data provided by the Canadian Association of Optometrists, shows that this shortage is most pronounced in rural and remote parts of the province.

To address this situation, the OFC encourages the college to actively engage with Canada's two schools of optometry at the University of Waterloo and the University of Montréal, the Ontario and Canadian Associations of Optometrists and other stakeholders to discuss ways to increase the supply of domestic and internationally-trained optometrists in the province.

Risk Assessment and Next Steps

Following a review of these two risk factors, the OFC has determined that the college should be placed in the moderately-low risk category for the period April 1, 2024, to March 31, 2026.

¹ The [Canadian Occupational Projection System \(COPS\)](#) is a suite of models developed by Employment and Social Development Canada (ESDC) to project labour demand and labour supply, and identify labour market imbalances (shortage/surplus) for 293 occupational groupings at the national level, covering the entire workforce for the 2022-2031 period.

As a moderately-low risk regulator, the RICF policy specifies that the regulated health college must complete a compliance action plan and meet with the OFC on a quarterly basis to review the progress made. The plan should address the following priorities identified through the risk assessment process:

- *Engaging FORAC and the university sector to discuss potential alternatives to the requirement for most IOGs to complete both the ASOPP five-month bridging program and the final two years of the University of Waterloo's Doctor of Optometry Program.* This could involve, for example, revisiting the threshold score for applicants to proceed to the licensing exam and / or exploring the need for an education equivalency stage in the assessment process and / or offering more streamlined course options for individuals with discrete knowledge gaps.
- *Engage relevant stakeholders, including post-secondary partners and associations, to discuss strategies to address a potential shortage of optometrists and their distribution within the province.* Areas of exploration could include options for increasing the capacity in existing optometry programs and developing more streamlined assessment and bridging pathways for IOGs.

Under the RICF Policy and Framework, where the OFC determines that a regulator should be placed in either of the higher-risk categories, and to support procedural fairness, the OFC is offering the college an opportunity to provide comments and / or additional information in response to your provisional risk rating. This may include recent actions that would mitigate the identified risks or otherwise address the identified priorities.

Should you wish to provide further information in writing, or arrange a meeting, please contact your Compliance Analyst, Anna Eisner, at anna.eisner@ontario.ca.

We look forward to continuing to work with you to advance fair registration practices for optometrists in Ontario.

Sincerely,

Ming-Young Tam
Director, Office of Fairness Commissioner

cc. Irwin Glasberg, Fairness Commissioner for Ontario
Tanya Chute-Molina, Manager of Business and Operational Planning
Anna Eisner, Compliance Analyst

Discipline Committee Activity Report

Reporting date: March 22, 2024

Committee Chair: Dr. William Ulakovic

Meetings in 2024: 1

Information Items

The Discipline Committee is the only committee of the College that has the authority to discipline optometrists. This authority is granted to the Committee under the *Regulated Health Professions Act, 1991* and the *Optometry Act, 1991*. When there are reasonable and probable grounds to suggest that professional misconduct has occurred, or that an optometrist may be incompetent, the Inquiries, Complaints and Reports Committee (ICRC) may refer such allegations to the Discipline Committee for a hearing.

An orientation for the Discipline Committee was held on February 15, 2024. The Committee received training from Ms. Rebecca Durcan, lawyer with Steinecke Maciura LeBlanc.

The Discipline Committee has not received any referrals from the ICRC nor held any hearings since its last report to Council, and no reinstatement applications are currently pending.

There is 1 active matter before the Discipline Committee and a Pre-hearing Conference for it took place on February 5, 2024, and the hearing is scheduled for April 2, 2024.

Discussion Items

The Discipline Committee has no additional updates for Council at this time.

Decision Items

There are no Discipline Committee decisions or motions that require Council feedback or approval at this meeting.

Governance-HR Committee Activity Report

Reporting date: March 22, 2024

Chair: Dr. Lisa Christian

Meetings in 2023: 1 (Zoom) | February 22, 2024

Tasks Completed Since Last Council Meeting:

- The group participated in an orientation led by J. Jamieson. This took the form of an overview of current regulatory issues and their relation to the College, including:
 - Modernization plans, which were introduced as a concept by the ON Ministry of Health but never implemented. The plans continue to be considered “imminent” but there is no concrete timeline.
 - Modernization that has occurred in BC, including a reduction or amalgamation of the number of colleges down to 6.
 - The Health and Supportive Care Providers Oversight Authority, the ON government authority that now oversees professions that apply to be regulated in the province. Most recently, this has included PSWs.
 - Current work on scope of practice, including actions taken alongside the University of Waterloo and the Ontario Association of Optometrists. The aim of this work is to improve patient access to optometric care.

Key Priorities

The mandate of the Governance-HR Committee is to facilitate Council’s ability to fulfill its functional and ethical responsibilities. Working within that mandate, a key focus for the committee in 2023 is to review the College’s governance policies and processes, and to make changes and additions where appropriate to enhance the College’s governance portfolio.

Discussion Items

Registrar Evaluation: Policy and Framework

The committee discussed how Registrar evaluations have occurred over the last few years, and agreed that the goal for the Committee this year is to develop a policy or framework that will govern this process and create consistency going forward.

The group agreed to meet this year (on May 17 in person) to develop a policy and process. Once finalized, the framework can be reported to Council.

Policy Review Cycle

C. Andrews discussed the College's code of conduct and COI policies. According to CPMF, both should be reviewed by Council on a three-year cycle. To meet this benchmark for the CPMF report in 2024, the Committee will have to review the documents and bring potential changes to Council this year.

Audit/Finance/Risk Committee Activity Report

Reporting date: March 22, 2024

Chair: Mr. Narendra Shah

Meetings in 2024: One (1) via teleconference

Tasks Completed Since Last Council Meeting:

- The AFR Committee's terms of reference were reviewed and there are no changes noted.
- The Committee examined the preliminary financial results for 2023 that included strategic initiatives and the balance of restricted funds as of Dec 31, 2023.
- Reviewed the status of investments with Royal Bank of Canada Dominion Securities (RBCDS) as of end of 2023 and up to Feb 15, 2024. The balance shows an improvement of over 6% in total amount since the transition in early fall 2023.
- There was a preliminary discussion about corporation fees that are at reduced levels since 2020, following Council approval in September 2019. The Committee directed staff to draft the financial plan for 2025, and present scenarios for discussion for the next Committee meeting.
- Discussed and proposed the disclosure of Council members' meeting expenses in the College annual report. Please refer to the enclosed briefing note for Council discussion.
- Assessed the potential risks in financial and non-financial matters, and the strategies taken to address those risks. There is no significant risk to report to Council.
- Agreed to amend the mileage reimbursement rate from \$0.68/km to \$0.70/km following the CRA guidelines. This is applicable to all Council elected members and staff for using personal vehicles on approved College business activities.

Key Priorities

The annual audit of the College's financial accounts ending December 31, 2023, is scheduled to begin on March 11, 2024. The Committee suggested conducting the audit on site rather than having a fully virtual audit. The auditors will be invited to present the draft financial report to the Committee on May 22, 2024, and to Council on June 21, 2024.

There is an ongoing review of potential risks related to operations, financial, information technology, organizational, and strategic.

Information Items

The preliminary and **unaudited** financial results for 2023 indicate net operating surplus of \$217,648.

Corporation fees and new application revenue targets were exceeded in 2023. Out of \$3.226M expenses, \$0.336M were taken from restricted funds to support strategic projects. The balance of restricted funds is \$2.083M at year-end.

Summary of Revenue and Expenditure (unaudited)

| | Full Year Actual 2023 | Full Year Budget 2023 |
|--------------------------------|----------------------------------|----------------------------------|
| Revenue | 3,062 | 3,047 |
| Expenses | 3,226 | 3,510 |
| Operating surplus (shortfall) | (164) | (463) |
| Other income (loss) | 381 | - |
| Net surplus (shortfall) | 217 | (463) |

Summary of Financial Position (unaudited)

| | FY 2023 | FY 2022 |
|---|----------------|----------------|
| Total assets | 8,597 | 8,332 |
| Total liabilities | 3,082 | 3,035 |
| Net assets (assets less liabilities) | 5,515 | 5,297 |

The \$5.5M net assets can support average expenses for 18 months based on the 2024 operating budget.

Discussion Items

The proposed disclosure of Council members' honoraria in the College annual report as per the briefing note included in the package.

Decision Items

The Audit/Finance/Risk Committee is recommending the approval of Council members' compensation as part of the College annual report.

Attachments

N/A

5-8 / PRESENTATIONS & MOTIONS

5. Registrar's Report: Registrar and CEO Mr. Joe Jamieson to provide College updates via PPT presentation.
6. Motions Brought Forward from Committees
 - a. Quality Assurance
 - i. Self-Assessment Policy
 - b. Executive
 - i. 2023 CPMF Report
 - ii. Appointment of Suzanne Allen to the Quality Assurance Committee
7. Presentation from Dr. Zubin Austin
8. Motions Brought Forward from Committees continued
 - a. Audit/Finance/Risk
 - i. Disclosure of Council members' compensation in the College's Annual Report

BRIEFING NOTE

Council Meeting – September 2023

Subject

Self-Assessment Policy

Background

On September 15, 2023, Council approved the new self-assessment component of the Quality Assurance (QA) Program with no further revisions required. Following Council's approval, a policy was needed to outline:

- the requirements that must be met by registrants in the current three-year cycle: January 1, 2024 to December 31, 2026;
- the mechanism used to monitor registrants' participation and compliance with the self-assessment; and
- what happens if registrants fail to complete the self-assessment.

As this component of the QA program is entirely new, legal opinion was sought to ensure the policy meets all regulatory and legal requirements. The final draft was approved by the Quality Assurance Special Projects Panel (QASP) on February 22, 2024.

Decision(s) for Council

To approve the *Self-Assessment Policy*.

Considerations

- The self-assessment component would fulfill the requirements of the College's QA program as set out in the RHPA.

Public Interest Mandate

- Self-assessment is an intentional process of developing concrete and structured goals, participate in meaningful CE activities, and self-reflect on impact/effect of the activities on optometrists' practice. These are powerful skills that help optometrists grow and engage in lifelong learning that is critical to providing quality care to patients in Ontario.

Diversity, Equity and Inclusion Considerations

The self-assessment includes review of DEI principles, including:

- Providing inclusive, respectful, and equitable eyecare
- Providing information in a manner that is considerate of language and cultural needs
- Collaboration with healthcare and other professionals in the community to provide patient-centred care.

Supporting Materials

- *Self-Assessment Policy* (draft)

Next Steps

- Following Council approval, the self-assessment will be officially rolled out to all registrants via several methods of communications, including e-blast, social media, and newsletter.

Contact

- Bonny Wong, Manager, Quality Programs

Policy

| | | | |
|-----------------------|--|----------------------|------------------|
| Type: | Quality Assurance Program | | |
| Name: | Self-Assessment: January 1, 2024 – December 31, 2026 | | |
| Status: | Draft | Version: | 1 |
| Date Approved: | | Date Revised: | February 8, 2024 |

Purpose

As set out in the [Regulated Health Professions Act \(RHPA\), 1991, Section 80.1](#), the Quality Assurance (QA) Program for all colleges shall include self, peer, and practice assessments. The QA Program shall also include a mechanism for the College to monitor registrants' participation in, and compliance with, the QA Program.

The purpose of this policy is to outline the requirements of self-assessment that must be met by registrants in the three-year cycle: January 1, 2024 to December 31, 2026.

The objective of self-assessment is to assist registrants to identify areas for improvement, develop concrete and structured goals, participate in meaningful CE activities, and self-reflect on the impact of the activities on their practice. These are important skills that help registrants grow and engage in lifelong learning that is critical to providing quality care to patients.

Scope

This policy applies to all registrants, both practicing and non-practising, of the College of Optometrists of Ontario.

Frequency of Self-Assessment

Registrants must complete the self-assessment once per three-year CE cycle. The current CE cycle runs from January 1, 2024 to December 31, 2026.

Components of Self-Assessment

The self-assessment is a **two-part** online exercise:

- **Part One – Scenarios and Multiple-choice questions** must be completed in one sitting. Part One consists of seven scenarios and related multiple-choice questions. There are five multiple-choice questions per scenario. This part is **not** scored (i.e., **there is no pass or fail**).
- **Part Two – Learning Plan.** After completing Part One of the self-assessment, registrants will use

the feedback and resources from Part One to create a Learning Plan. The Learning Plan encourages registrants to set specific goals, select appropriate CE activities, and reflect on the impact of their learning.

New Registrants

Registrants registered in the last year of the current cycle (i.e., in 2026) will not be required to complete the self-assessment.

Submission and Confidentiality

Registrants are **not** required to submit their self-assessment to the College.

The self-assessment results are confidential. The College would not have access to Part One scores or the content of Learning Plans. The College would only have completion information (who and when the self-assessment was completed).

CE Activities

CE activities that registrants complete as part of their Learning Plan could be used to meet CE requirements as long as those activities meet the requirements of the 2024-2026 CE Policy. If registrants are using these CE activities to meet the requirements of the CE Policy, then they must upload them to OE TRACKER by the end of the current CE cycle.

Compliance

In accordance with subsection 82(1) of the Health Professions Procedural Code (the Code), which is Schedule 2 to the Regulated Health Professions Act, 1991 (the *RHPA*), every registrant shall co-operate with the Quality Assurance Committee (the QAC). And, failing to co-operate with the QAC is professional misconduct under section 51 (1) (b.0.1) of the Code.

The College will perform an audit at the conclusion of the current three-year cycle. The audit identifies those who fail to complete the self-assessment (both Part One and Part Two). Registrants who fail to complete the self-assessment may be referred to the QAC and given an opportunity to complete a practice assessment at their own cost according to the College's Schedule of Fees and Penalties. Registrants who fail to complete the self-assessment and decline to complete the practice assessment may be referred to the Inquiries, Complaints and Reports Committee (ICRC) under Section 80.2 (1) of the *RHPA* for professional misconduct.

BRIEFING NOTE

Council Meeting – March 22, 2024

Subject

Approval of the 2023 College Performance Measurement Framework (CPMF) Report

Background

Overview

The CPMF is a standardized reporting tool that was launched by the Ministry of Health in 2020. Through the CPMF, regulatory colleges are required to measure and report on Ministry-specified standards and indicators in a standardized way. This information is not *assessed* by the Ministry but rather shared with the public to help strengthen accountability and oversight of Ontario's health regulators.

There were no changes to the 2023 CPMF reporting template (reporting period: Jan 1 – Dec 31, 2023) from the 2022 template. The reporting tool continued to highlight eight pieces of 'Benchmarked Evidence'. These pieces of evidence were identified as attributes of an excellent regulator that Colleges should meet or work towards meeting. If a college does not meet or partially meets expectations on a benchmark, it is required to provide an improvement plan that includes the steps it will follow, timelines, and any barriers to implementing that benchmark.

Analysis of Results

The College is asked to indicate whether it meets the measures listed in the CPMF, selecting either "Yes" (Met), "No", or "Partially". Another option is "Met in 2022, continues to meet in 2023", which is marked as 'Met' for the purpose of this analysis. See Table 1 for a breakdown of the College's responses per requirement.

In the 2023 report, the College reported meeting or partially meeting all 50 measures (this number excludes the System Partner domain). The College met all 8 measures with the 'Benchmarked Evidence' designation. See Figure 1 for the distribution of responses in the 2023 CPMF report and Figure 2 for a comparison of the response distributions between the 2022 report and the 2023 report.

For the 3 requirements that fall under "Partially", the College either meets these requirements in alternative ways or is in the process of fulfilling them. In either case, the College delineates an improvement plan dedicated to fulfilling each of the 3 requirements in the report. They are the same three "Partially" requirements that were reported in the 2022 report.

Figure 1. Count of 2023 CPMF Responses

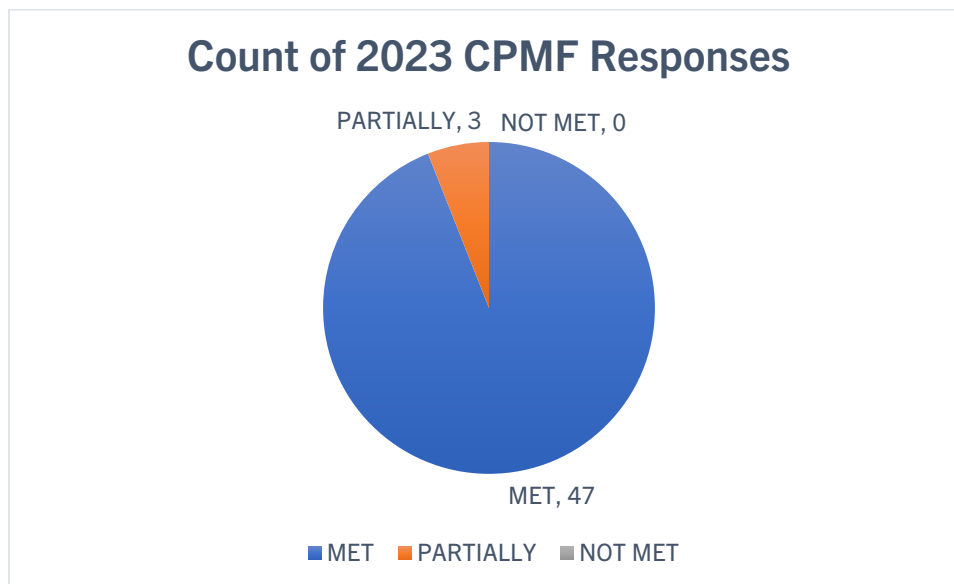


Figure 2. Comparison of CPMF Response Distributions – 2022 vs. 2023 (#, %)

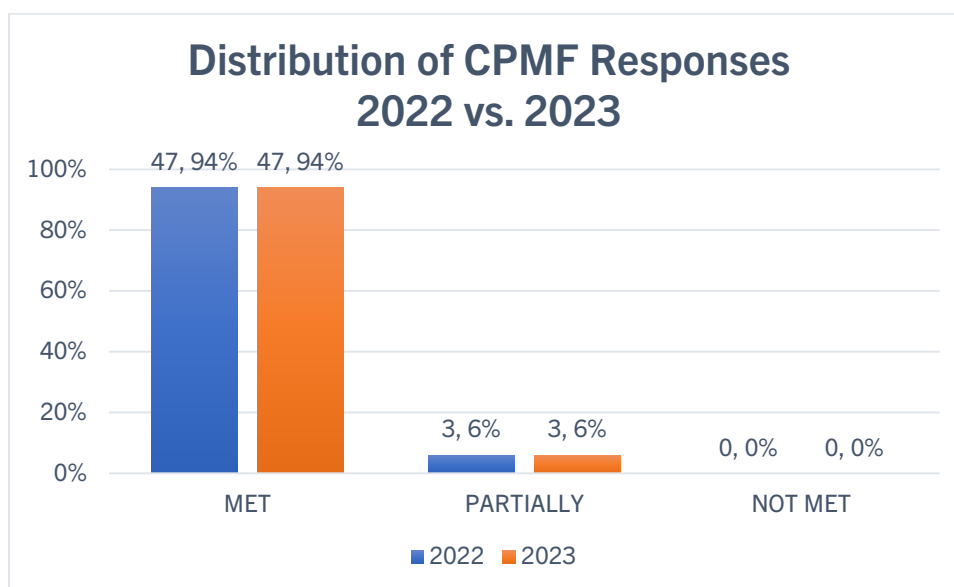


Table 1. Breakdown of 2023 CPMF Responses (= benchmarked evidence)*

| Domain | Measure | Response by Requirement |
|-------------------------------|---|---|
| Governance | 1.1 Where possible, Council and Statutory Committee members demonstrate that they have the knowledge, skills, and commitment prior to becoming a member of Council or a Statutory Committee. | 1.1.a.i MET* 1.1.a.ii MET 1.1.b.i MET* 1.1.b.ii MET 1.1.c MET |
| | 1.2 Council regularly assesses its effectiveness and addresses identified opportunities for improvement through ongoing education. | 1.2.a MET 1.2.b MET 1.2.c.i-ii MET 1.2.c.iii MET |
| | 2.1 All decisions related to a Council's strategic objectives, regulatory processes, and activities are impartial, evidence-informed, and advance the public interest. | 2.1.a.i MET 2.1.a.ii MET 2.1.b MET 2.1.c MET 2.1.d MET 2.1.e MET |
| | 3.1 Council decisions are transparent. | 3.1.a MET 3.1.b MET |
| | 3.2 Information provided by the College is accessible and timely. | 3.2.a MET 3.2.b MET |
| | 3.3 The College has a Diversity, Equity and Inclusion (DEI) Plan. | 3.3.a MET 3.3.b PARTIALLY |
| | | |
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| | | |
| Resources | 4.1 The College demonstrates responsible stewardship of its financial and human resources in achieving its statutory objectives and regulatory mandate. | 4.1.a MET 4.1.b MET 4.1.c.i MET* 4.1.c.ii MET |
| System Partner | 5. The College actively engages with other health regulatory Colleges and system partners to align oversight of the practice of the profession and support execution of its mandate. | N/A |
| | 6. The College maintains cooperative and collaborative relationships and responds in a timely and effective manner to changing public/societal expectations | N/A |
| Information Management | 7.1 The College demonstrates how it protects against and addresses unauthorized disclosure of information. | 7.1.a.i MET 7.1.a.ii-iii MET* |
| Regulatory Policies | 8.1 All policies, standards of practice, and practice guidelines are up to date and relevant to the current practice environment (e.g. where appropriate, reflective of changing population health needs, | 8.1.a MET* 8.1.b MET* 8.1.c MET |

| | | | |
|--|--|-------------|-----------|
| | public/societal expectations, models of care, clinical evidence, advances in technology). | | |
| Suitability to Practice | 9.1 Applicants meet all College requirements before they are able to practice. | 9.1.a | MET |
| | | 9.1.b | MET |
| | 9.2 Registrants continuously demonstrate they are competent and practice safely and ethically. | 9.2.c | MET |
| | 9.3 Registration practices are transparent, objective, impartial, and fair. | 9.3.a | MET |
| | 10.1 The College supports registrants in applying the (new/revised) standards of practice and practice guidelines applicable to their practice. | 10.1.a | PARTIALLY |
| | 10.2 The College effectively administers the assessment component(s) of its QA Program in a manner that is aligned with right touch regulation. | 10.2.a.i | MET |
| | | 10.2.a.ii | MET |
| | | 10.2.a.iii | MET |
| | 10.3 The College effectively remediates and monitors registrants who demonstrate unsatisfactory knowledge, skills, and judgment. | 10.3.a | MET |
| | 11.1 The College enables and supports anyone who raises a concern about a registrant. | 11.1.a.i-ii | MET |
| Measurement, Reporting, and Improvement | | 11.1.a.iii | MET* |
| | | 11.1.b | MET |
| | | 11.1.c | MET |
| | 11.2 All parties to a complaint and discipline process are kept up to date on the progress of their case, and complainants are supported to participate effectively in the process. | 11.2.a | MET |
| | 12.1 The College addresses complaints in a right touch manner. | 12.1.a | MET |
| | 13.1 The College demonstrates that it shares concerns about a registrant with other relevant regulators and external system partners (e.g. law enforcement, government, etc.). | 13.1.a | MET |
| | 14.1 Council uses Key Performance Indicators (KPIs) in tracking and reviewing the College's performance and regularly reviews internal and external risks that could impact the College's performance. | 14.1.a | MET |
| | | 14.1.b | MET |
| | 14.2 Council directs action in response to College performance on its KPIs and risk reviews. | 14.2.a | MET* |
| | 14.3 The College regularly reports publicly on its performance. | 14.3.a | PARTIALLY |

[Decision\(s\) for Council](#)

[Approval by Council](#)

[Supporting Materials](#)

- 2023 CPMF Report (File Name: COO_2023-CPMF_MasterReport_FINAL.pdf)

Next Steps

- The final report needs to be submitted to the Ministry of Health and published on the College website by March 31, 2024.

Contact

- Eddy Cho, Manager, Informatics & IT

BRIEFING NOTE

Council Meeting – March 2024

Subject

Proposed disclosure of Council Member honoraria in the College annual report

Background

The Audit/Finance/Risk Committee considered a suggestion to disclose the Council Members' honoraria in the College annual report.

The merits and challenges with this proposal were discussed and there was broad agreement with the following:

- Transparency to the public and registrants to disclose these annual expenses was appropriate.
- Expense reporting would be completed in conjunction with the annual audit.
- Disclosure of expenses would be published in the College annual report in June annually.
- Applicable to professional and public members of the Council.
- The appointed Council members' compensation from the Ministry of Health will be the source information for reporting purposes.

Decision(s) for Council

To approve the disclosure of Council Members' compensation in the College annual report

Considerations

- In completing an environmental scan, it was noted that disclosure of annual Council member expenses and honoraria was not a normal practice among colleges. That said, it is a legislative requirement for most governmental agencies, boards, and commissions to provide this disclosure (e.g. school board trustees).
- Disclosure items would include:
 - Honoraria for Council meeting attendance
 - Orientation, onboarding, and honoraria for committee and working groups attendance
 - Stipends particular to a role (President)

Public Interest Mandate

The College is committed to accountable and transparent reporting.

Diversity, Equity, and Inclusion Considerations

N/A

Supporting Materials

College of Chiropractors of Ontario – Schedule of meeting fees and expenses of its Council members

Next Steps

Once approved, a summary of Council members' meeting expenses will be part of the College annual report that is published on the College website in June annually.

Contact

- Deborrah Anne Lim, Manager – Finance and Office Administration

Schedule of Meeting Fees and Expenses

for the Year Ended December 31, 2022

(with 2021 comparisons)

| | FEES | EXPENSES | TOTAL 2022 | TOTAL 2021 |
|-----------------------------------|------------|-----------|------------|------------|
| Dr. Gerard Arbour | \$ — | \$ — | \$ — | \$ 1,800 |
| Dr. Michael Gauthier ² | 11,100 | 1,986 | 13,086 | — |
| Dr. Jarrod Goldin ^{1,8} | 8,500 | 2,943 | 11,443 | 7,700 |
| Dr. Colin Goudreau ⁷ | 10,900 | 3,382 | 14,282 | 14,400 |
| Dr. Sarah Green ^{1,2} | 17,725 | 4,994 | 22,719 | 17,725 |
| Dr. Kyle Grice ^{5,6} | 17,700 | 1,260 | 18,960 | 6,800 |
| Dr. Paul Groulx ^{1,6} | 12,850 | 5,475 | 18,325 | 8,800 |
| Dr. Steven Lester | 2,400 | — | 2,400 | 9,700 |
| Dr. Dennis Mizel ^{1,3,4} | 57,631 | 6,907 | 64,538 | 39,771 |
| Dr. Janit Porter | — | — | — | 1,500 |
| Dr. Angelo Santin ^{4,8} | 6,500 | 601 | 7,101 | 4,700 |
| Dr. Michael Staffen | — | — | — | 2,400 |
| Dr. Julia Viscomi ^{3,7} | 11,300 | 2,207 | 13,507 | 7,400 |
| Ms Jo-Ann Willson | — | — | — | — |
| | \$ 156,606 | \$ 29,755 | \$ 186,361 | \$ 122,696 |

Note: Committee membership changed in April

Numbers refer to committee/project membership (April – December 2022)

| | |
|---------------------------------|---|
| Executive | 1 |
| Inquiries, Complaints & Reports | 2 |
| Discipline | 3 |
| Fitness to Practise | 4 |
| Patient Relations | 5 |
| Quality Assurance | 6 |
| Registration | 7 |
| Advertising | 8 |

SCHEDULE 1

9-13 / UPCOMING MEETINGS

9. Upcoming Council Meetings
 - a. Thursday, June 20, 2024 (AGM)
 - b. Friday, June 21, 2024
 - c. Friday, September 13, 2024
 - d. Friday, December 13, 2024
 10. List of Acronyms
 11. Governance Guide: Robert's Rules
 12. Council Feedback Survey
 13. Adjournment – approximately 1:30 p.m.
- Generative Discussion (optional)
- a. Generative Discussion Feedback Survey

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 |
| ASOPP | Advanced Standing Preparatory Program | An education pathway for individuals who have completed optometry training outside of North America and who wish to obtain a license to practice in Canada |
| 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) |

List of Acronyms Used by the College of Optometrists of Ontario

| Acronym | Name | Description |
|---------|---|---|
| CJO | Canadian Journal of Optometry | Journal published by CAO whose mandate is to help optometrists build and manage a successful practice |
| 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 |
| CPMF | College Performance Measurement Framework | The CPMF is a reporting tool developed by the Ontario Ministry of Health (the Ministry) in close collaboration with Ontario's health regulatory Colleges (Colleges), to assess how well Colleges are executing their mandate to act in the public interest. |
| 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> |

List of Acronyms Used by the College of Optometrists of Ontario

| Acronym | Name | Description |
|-------------|---|---|
| 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 |
| 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 | Comprised of the 26 health regulatory colleges in Ontario. Now known as <i>Health Profession Regulators of Ontario</i> . |
| 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 |
| HPRO | Health Profession Regulators of Ontario | Comprised of the 26 health regulatory colleges 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 |

List of Acronyms Used by the College of Optometrists of Ontario

| Acronym | Name | Description |
|-----------------|---|--|
| 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 |
| 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 |

List of Acronyms Used by the College of Optometrists of Ontario

| Acronym | Name | Description |
|----------|---|---|
| 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 |
| 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 |

List of Acronyms Used by the College of Optometrists of Ontario

| Acronym | Name | Description |
|---------|---|---|
| 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 |
| 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 May 2023

ROBERTS RULES CHEAT SHEET

| To: | You say: | Interrupt Speaker | Second Needed | Debatable | Amendable | Vote Needed |
|--|--|-------------------|---------------|-----------|-----------|---------------|
| Adjourn | "I move that we adjourn" | No | Yes | No | No | Majority |
| Recess | "I move that we recess until..." | No | Yes | No | Yes | Majority |
| Complain about noise, room temp., etc. | "Point of privilege" | Yes | No | No | No | Chair Decides |
| Suspend further consideration of something | "I move that we table it" | No | Yes | No | No | Majority |
| End debate | "I move the previous question" | No | Yes | No | No | 2/3 |
| Postpone consideration of something | "I move we postpone this matter until..." | No | Yes | Yes | Yes | Majority |
| Amend a motion | "I move that this motion be amended by..." | No | Yes | Yes | Yes | Majority |
| Introduce business (a primary motion) | "I move that..." | No | Yes | Yes | Yes | Majority |

The above listed motions and points are listed in established order of precedence. When any one of them is pending, you may not introduce another that is listed below, but you may introduce another that is listed above it.

| To: | You say: | Interrupt Speaker | Second Needed | Debatable | Amendable | Vote Needed |
|--|---|--------------------------------|---------------|---------------------------------------|-----------|-----------------------------|
| Object to procedure or personal affront | "Point of order" | Yes | No | No | No | Chair decides |
| Request information | "Point of information" | Yes | No | No | No | None |
| Ask for vote by actual count to verify voice vote | "I call for a division of the house" | Must be done before new motion | No | No | No | None unless someone objects |
| Object to considering some undiplomatic or improper matter | "I object to consideration of this question" | Yes | No | No | No | 2/3 |
| Take up matter previously tabled | "I move we take from the table..." | Yes | Yes | No | No | Majority |
| Reconsider something already disposed of | "I move we now (or later) reconsider our action relative to..." | Yes | Yes | Only if original motion was debatable | No | Majority |
| Consider something out of its scheduled order | "I move we suspend the rules and consider..." | No | Yes | No | No | 2/3 |
| Vote on a ruling by the Chair | "I appeal the Chair's decision" | Yes | Yes | Yes | No | Majority |

The motions, points and proposals listed above have no established order of preference; any of them may be introduced at any time except when meeting is considering one of the top three matters listed from the first chart (Motion to Adjourn, Recess or Point of Privilege).

PROCEDURE FOR HANDLING A MAIN MOTION

NOTE: Nothing goes to discussion without a motion being on the floor.

Obtaining and assigning the floor

A member raises hand when no one else has the floor

- The chair recognizes the member by name

How the Motion is Brought Before the Assembly

- The member makes the motion: *I move that (or "to") ...* and resumes his seat.
- Another member seconds the motion: *I second the motion* or *I second it* or *second*.
- The chair states the motion: *It is moved and seconded that ... Are you ready for the question?*

Consideration of the Motion

1. Members can debate the motion.
2. Before speaking in debate, members obtain the floor.
3. The maker of the motion has first right to the floor if he claims it properly
4. Debate must be confined to the merits of the motion.
5. Debate can be closed only by order of the assembly (2/3 vote) or by the chair if no one seeks the floor for further debate.

The chair puts the motion to a vote

1. The chair asks: *Are you ready for the question?* If no one rises to claim the floor, the chair proceeds to take the vote.
2. The chair says: *The question is on the adoption of the motion that ... As many as are in favor, say 'Aye'.* (Pause for response.) *Those opposed, say 'Nay'.* (Pause for response.) *Those abstained please say 'Aye'.*

The chair announces the result of the vote.

1. *The ayes have it, the motion carries, and ...* (indicating the effect of the vote) or
2. *The nays have it and the motion fails*

WHEN DEBATING YOUR MOTIONS

1. Listen to the other side
2. Focus on issues, not personalities
3. Avoid questioning motives
4. Be polite

HOW TO ACCOMPLISH WHAT YOU WANT TO DO IN MEETINGS

MAIN MOTION

You want to propose a new idea or action for the group.

- After recognition, make a main motion.
- Member: "Madame Chairman, I move that _____."

AMENDING A MOTION

You want to change some of the wording that is being discussed.

- After recognition, "Madame Chairman, I move that the motion be amended by adding the following words _____."
- After recognition, "Madame Chairman, I move that the motion be amended by striking out the following words _____."
- After recognition, "Madame Chairman, I move that the motion be amended by striking out the following words, _____, and adding in their place the following words _____."

REFER TO A COMMITTEE

You feel that an idea or proposal being discussed needs more study and investigation.

- After recognition, "Madame Chairman, I move that the question be referred to a committee made up of members Smith, Jones and Brown."

POSTPONE DEFINITELY

You want the membership to have more time to consider the question under discussion and you want to postpone it to a definite time or day, and have it come up for further consideration.

- After recognition, "Madame Chairman, I move to postpone the question until _____."

PREVIOUS QUESTION

You think discussion has gone on for too long and you want to stop discussion and vote.

- After recognition, "Madam President, I move the previous question."

LIMIT DEBATE

You think discussion is getting long, but you want to give a reasonable length of time for consideration of the question.

- After recognition, "Madam President, I move to limit discussion to two minutes per speaker."

POSTPONE INDEFINITELY

You want to kill a motion that is being discussed.

- After recognition, "Madam Moderator, I move to postpone the question indefinitely."

POSTPONE INDEFINITELY

You are against a motion just proposed and want to learn who is for and who is against the motion.

- After recognition, "Madame President, I move to postpone the motion indefinitely."

RECESS

You want to take a break for a while.

- After recognition, "Madame Moderator, I move to recess for ten minutes."

ADJOURNMENT

You want the meeting to end.

- After recognition, "Madame Chairman, I move to adjourn."

PERMISSION TO WITHDRAW A MOTION

You have made a motion and after discussion, are sorry you made it.

- After recognition, "Madam President, I ask permission to withdraw my motion."

CALL FOR ORDERS OF THE DAY

At the beginning of the meeting, the agenda was adopted. The chairman is not following the order of the approved agenda.

- Without recognition, "Call for orders of the day."

SUSPENDING THE RULES

The agenda has been approved and as the meeting progressed, it became obvious that an item you are interested in will not come up before adjournment.

- After recognition, "Madam Chairman, I move to suspend the rules and move item 5 to position 2."

POINT OF PERSONAL PRIVILEGE

The noise outside the meeting has become so great that you are having trouble hearing.

- Without recognition, "Point of personal privilege."
- Chairman: "State your point."
- Member: "There is too much noise, I can't hear."

COMMITTEE OF THE WHOLE

You are going to propose a question that is likely to be controversial and you feel that some of the members will try to kill it by various maneuvers. Also you want to keep out visitors and the press.

- After recognition, "Madame Chairman, I move that we go into a committee of the whole."

POINT OF ORDER

It is obvious that the meeting is not following proper rules.

- Without recognition, "I rise to a point of order," or "Point of order."

POINT OF INFORMATION

You are wondering about some of the facts under discussion, such as the balance in the treasury when expenditures are being discussed.

- Without recognition, "Point of information."

POINT OF PARLIAMENTARY INQUIRY

You are confused about some of the parliamentary rules.

- Without recognition, "Point of parliamentary inquiry."

APPEAL FROM THE DECISION OF THE CHAIR

Without recognition, "I appeal from the decision of the chair."

Rule Classification and Requirements

| Class of Rule | Requirements to Adopt | Requirements to Suspend |
|---------------------------------|---|--|
| Charter | Adopted by majority vote or as proved by law or governing authority | Cannot be suspended |
| Bylaws | Adopted by membership | Cannot be suspended |
| Special Rules of Order | Previous notice & 2/3 vote, or a majority of entire membership | 2/3 Vote |
| Standing Rules | Majority vote | Can be suspended for session by majority vote during a meeting |
| Modified Roberts Rules of Order | Adopted in bylaws | 2/3 vote |