



# COLLEGE OF **OPTOMETRISTS** OF ONTARIO

## COUNCIL MEETING

FRIDAY, JUNE 24, 2022  
AT 9:00 A.M.

(PUBLIC INVITED TO ATTEND)

HYBRID MEETING

## Council Agenda

Date: Friday, June 24, 2022 | 9 a.m. – 4 p.m.

Agenda Item	Item Lead	Time (mins)	Action Required	Page No.
1. Call to Order/Attendance b. Land Acknowledgement c. Public Interest Statement	A. Nurani	2	Decision	5
2. Adopt the Agenda a. Conflict of Interest Declaration	A. Nurani	2	Decision	5
3. Diversity, Equity, and Inclusion Training	N. Jalal	90	Presentation	5
<b>10:35– 10:55 a.m. - Morning Break and Group Photo</b>		<b>20</b>		
4. Committee Updates	Committee Chairs	15	Presentation	5
5. Consent Agenda PART 1 - Minutes of Prior Council Meetings i. December 10, 2021 ii. March 23, 2022 iii. Motions and Actions Items Arising from the Minutes PART 2 - Reports b. Committee Reports i. Executive Committee ii. Patient Relations iii. Quality Assurance: a) QA Panel b) CP Panel iv. ICRC v. Registration vi. Discipline vii. Governance/HR Committee viii. Audit/Finance/Risk Committee	A. Nurani	15	Decision	5 6 11 16  18 20 21 23 24 26 28 30 32
6. Registrar's Report	J. Jamieson	45	Presentation	36

<b>12:15-1:00 p.m. - LUNCH BREAK</b>		45		
<b>1:00 p.m. - Presentation from the Auditors</b>				
7. Financial Matters	Auditors	30	Presentation	36
a. Presentation from the Auditors				
8. Motions Brought Forward from Committees				37
a. Audit/Finance/Risk				
i. Audited financials for year-end December 31, 2021	H. Kennedy	15	Decision	38
ii. Approval of the reappointment of BDO Canada as financial auditors for year 2022	H. Kennedy	15	Decision	38
iii. Finance Policy – Reserve Funds	H. Kennedy	15	Decision	53
b. Registration Committee				
i. 2022 Optometry Examining Board of Canada Written Exam and OSCE	W. Ulakovic	20	Decision	57
ii. 2022 National Board of Examiners in Optometry Exam	W. Ulakovic	20	Decision	58
iii. 2022 Jurisprudence Exam	W. Ulakovic	10	Decision	63
<b>2:50-3:00 p.m. - Afternoon Break</b>		10		
c. Executive Committee				
i. College Strategic Plan	A. Nurani	20	Decision	69
ii. Appointment of Lisa Holland to the Gov-HR, QA, and FTP	A. Nurani	10	Decision	
d. Clinical Practice Panel Committee				
i. Update to OPR section 4.7 Infection Control in the Optometric Office	L. Christian	15	Decision	75
9. Upcoming Committee Meetings	J. Jamieson		For information	77
a. September 16, 2022				
b. December 9, 2022				
10. List of Acronyms			For information	78
11. Adjournment – <b>approximately 4:00 p.m.</b>	A. Nurani		Decision	

## **Vision and Mission**

**Vision: A leading regulator focused on safe eye care and progressive practice.**

**Mission: To regulate Ontario's optometry profession in the public interest.**

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# 1 - 5 / INTRODUCTION

1. Call to Order/Attendance
2. Adopt the Agenda
  - a. Conflict of Interest Declaration
3. Diversity, Equity, and Inclusion Training
4. Committee Updates
5. Consent Agenda
  - PART 1 - Minutes of Prior Council Meetings
    - i. December 9, 2021
    - ii. March 23, 2022
    - iii. Motions and Actions Arising from the Minutes
  - PART 2 - Reports
    - b. Committee Reports
      - i. Executive Committee
      - ii. Patient Relations
      - iii. Quality Assurance:
        - a) QA Panel
        - b) CP Panel
      - iv. ICRC
      - v. Registration
      - vi. Discipline
      - vii. Governance/HR Committee
      - viii. Audit/Finance/Risk Committee

College of Optometrists of Ontario  
Council Meeting  
DRAFT – December 10, 2021

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**Attendance:**

Dr. Patrick Quaid (President)  
Mr. Bashar Kassir (Vice-President)  
Ms. Suzanne Allen  
Ms. Kathryn Biondi  
Dr. Lisa Chan  
Dr. Lisa Christian  
Mr. Ravnit Dhaliwal  
Dr. Mark Eltis  
Dr. Camy Grewal

Mr. Howard Kennedy  
Dr. Richard Kniaziew  
Dr. Lindy Mackey  
Dr. Annie Micucci  
Dr. Areef Nurani  
Mr. Narendra Shah  
Dr. William Ulakovic  
Mr. Andre Tilban-Rios

**Staff:**

Mr. Joe Jamieson  
Mr. Chad Andrews  
Mr. Edward Cho  
Ms. Hanan Jibry

Ms. Adrita Shah  
Ms. Shelby Sargo  
Ms. Deborah Lim

**Guests:**

Ms. Julia Martin

1 **1. Call to Order/Attendance:** P. Quaid called the meeting to order at 8:59 a.m.

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

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5 *Moved by M. Eltis and seconded by S. Allen to **adopt the agenda.***

6 **Motion carried**

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8 **2a. Conflict of Interest Declaration:** P. Quaid asked Council members if anyone has a conflict of interest  
9 with any item on the day's agenda.

10  
11 No conflicts of interest were declared.

12  
13 **3. Consent Agenda:** A draft consent agenda was circulated prior to the meeting. The following items  
14 were included in the consent agenda:

15  
16 PART 1 - Minutes of Prior Council Meetings

17 a. September 17, 2021

PART 2 - Reports

a. Committee Reports

- i. Executive Committee
- ii. Revised Executive Committee Report and Briefing Note from September 2021 Council Meeting
- iii. Patient Relations
- iv. Quality Assurance
  - A. QA Panel
  - B. CP Panel
  - C. QA Subcommittee
- v. ICRC
- vi. Registration
- vii. Governance/HR
- viii. Audit/Finance/Risk

R. Kniaziew requested to discuss chair costs at some point during the meeting, as well as conflict of interest professional misconduct regulations, especially as they relate to independent contractors.

B. Kassir asked to discuss the September minutes and the Executive Committee update re. a meeting with Allison Henry. In relation to the Executive report, he asked that the document specify that he asked about term limits of professional members, and about the structure of regulatory Colleges' Councils. P. Quaid and J. Jamieson noted that the change would be made.

*Moved by H. Kennedy and C. Grewal to **adopt the consent agenda.***

**Motion carried**

**4. Registrar's Report**

J. Jamieson presented the Registrar's report, including the Building Acquisition Fund Reallocation, the College Performance Measurement Framework given, and the upcoming Government Reform of the regulatory colleges of Ontario.

Staff provided updates on registration, and investigations.

P. Quaid gave the President's update.

*Moved by A. Nurani and seconded by M. Eltis to **move into camera.***

**Motion carried**

**5. In Camera Session: Personnel Matters**

In accordance with 7 (1.1) of the Health Professions Procedural Code (HPPC), Council will go in camera under Section 7(2)(e) of the HPPC, which is Schedule 2 to the Regulated Health Professions Act to receive a legal opinion.

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*Moved by A. Nurani and seconded by M. Eltis to **move the meeting out of camera.***

**Motion carried**

B. Kassir raised a question about an article in the Toronto Star regarding the job action and the involvement of the College. J. Jamieson described how the College is staying within its mandate and explained that due to the current suspension of the job action, there is no value in responding to the article.



R. Kniaziew discussed the independent study done on behalf of the OAO which revealed the cost of providing an eye exam to a patient is approximately \$70.00. R. Kniaziew suggested modernizing the statement to the members who have independent contractor agreements working beside optical stores or in optical stores, so the rent reflects the chair cost that was developed by the Association.

Council discussed the issue and decided that further investigation was needed after proper research and preparation could be done. J. Jamieson offered to discuss the subject his counterpart at CPSO to see how they tackle the issue.

## **6. Motions Brought Forward from Committees**

### **a) Audit/Finance/Risk: 2022 College Budget**

L. Chan presented the motion, noting the major changes included the reduction in the member fees, and the increase in expense budget because of the CPMF.

*Moved by M. Eltis and seconded by L. Mackey to **approve the College's Budget for the fiscal year January 1, 2022 to December 31, 2022.***

Council inquired about the rationale for the fee decrease. J. Jamieson responded by noting that Council had approved the collapse of the Building Acquisition Fund and used part of the funds to cover a one-time fee decrease to professionals in consideration of COVID-19.

B. Kassir raised a potential issue about the budget. J. Jamieson explained re-categorization was spearheaded by the Audit/Finance/Risk Committee which resulted in a slight overage in one particular category, but the overall budget was in order.

P. Quaid asked for a show of hands. All in favour. No abstentions.

**Motion carried**

### **b) Audit/Finance/Risk: Addendum to Policy: Role of President**

L. Chan presented the motion to accept the addendum to the policy of the Role of President.

*Moved by R. Kniaziew and seconded by W. Ulakovic to **accept the addendum to the policy.***

P. Quaid asked for a show of hands. All in favour. No abstentions.

**Motion carried**

### **c) Governance/HR: Harassment Policy**

K. Biondi presented the motion for the violence and harassment policy and summarized the policy.

*Moved by R. Kniaziew and seconded by C. Grewal to **accept the policy.***

P. Quaid asked for a show of hands. All in favour. No abstentions.

151 **Motion carried**

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153 **d) Governance/HR: Conflict of Interest Policy**

154 K. Biondi presented the motion for the conflict-of-interest policy and summarized the policy.

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156 *Moved by C. Grewal and seconded by M. Eltis to accept the policy.*

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158 P. Quaid asked for a show of hands. All in favour. No abstentions.

159 **Motion carried**

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161 **e) Clinical Practice Panel: OPR 7.10 Orthokeratology**

162 C. Grewal presented the motion for approval of revisions to OPR 7.10 Orthokeratology

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164 *Moved by M. Eltis and seconded by R. Kniaziew to accept the revisions.*

165

166 P. Quaid asked for a show of hands. All in favour. No abstentions.

167 **Motion carried**

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169 **f) Clinical Practice Panel: Return-to-Work**

170 C. Grewal presented the motion to implement a return-to-work policy and asked for an amendment in

171 section 6 F, on page three of eleven, to the third bullet point. This point was stated elsewhere in the

172 document and its removal had been approved, therefore this point needs to be removed as well.

173

174 *Moved by M. Eltis and seconded by N. Shah to accept the changes.*

175

176 P. Quaid asked for a show of hands. All in favour. No abstentions.

177 **Motion carried**

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179 **7. List of Acronyms**

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181 **8. Dates of Upcoming Council Meetings**

182 C. Andrews discussed upcoming election and self-nominations.

183

184 P. Quaid reminded Council that the next Council meeting is on January 21, 2022.

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186 **9. Adjournment:** Moved by S. Allen and seconded by N. Shah to adjourn the meeting at 1:15pm.

187 **Motion carried**

College of Optometrists of Ontario  
Council Meeting  
DRAFT – March 23, 2022

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**Attendance:**

Dr. Areef Nurani, President  
Dr. William Ulakovic, Vice President  
Ms. Suzanne Allen  
Ms. Kathryn Biondi  
Dr. Lisa Christian  
Dr. Mark Eltis  
Dr. Camy Grewal  
Dr. Pooya Hemami  
Ms. Lisa Holland

Mr. Bashar Kassir  
Mr. Howard Kennedy  
Dr. Richard Kniaziew  
Dr. Lindy Mackey  
Dr. Dino Mastronardi  
Mr. Narendra Shah  
Mr. Olutoye Soile  
Mr. Andre Tilban-Rios  
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. Shelby Sargo

**Guests:**

Ms. Julia Martin, Legal Counsel

1 **1. Call to Order/Attendance:** Dr. Nurani called the meeting to order at 9:02 a.m.

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3 Dr. Nurani welcomed Lisa Holland to Council as the newest public appointee.

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

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7 It was noted there will be an additional motion from the Quality Assurance Sub Committee.

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9 *Moved by Dr. Eltis and seconded by Dr. Grewal to **adopt the agenda.***

10 **Motion carried**

11  
12 **2a. Conflict of Interest Declaration:** Dr. Nurani asked Council members if anyone has a conflict of  
13 interest with any item on the day's agenda. None were declared.

**3. 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. November 26, 2021
- b. December 9, 2021
- c. January 21, 2022
- d. Motions and Actions Items Arising from the Minutes

**PART 2 - Reports**

**b. 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

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

**1 Abstention  
(1 public member)  
Motion carried**

Several Council members wished to discuss items from the consent agenda, including the December minutes, the Executive Committee report and the Audit/Finance/Risk committee report.

Mr. Kassir pulled out the December minutes and requested his title at the time, 'Vice-President', be included in the attendance beside his name. Beginning on line 36 in reference to the meeting with Ms. Henry, Mr. Kassir requested that his questions be stated in the same manner as the Registrar's questions, and for Ms. Henry's responses to be stated as well.

Council discussed the Executive Committee Report and inquired about the proposal of modernization. Dr. Nurani explained the proposal that came from the Ministry of Health. He then summarized the College's response.

Dr. Kniaziew inquired about the requested legal opinion regarding the discussion of rent payment in conjunction with optical companies to cover chair cost. Mr. Jamieson stated there was no request for a legal opinion, but a request to follow up so Ms. Martin was not consulted. Mr. Jamieson explained the discussions that have been happening with OAO and touched on the conflict of interest that is present when navigating this topic.

Dr. Hemami asked about the investment policy regarding the AFR committee and protecting the power

of purchasing. Mr. Kennedy clarified by saying there was discussion about the topic but there was a concern about the stability of the market at that time. Mr. Jamieson reminded Council that the College was considered a not for profit and therefore had the responsibility to not take financial risks and focuses on protecting against losses. The current policy is owned by the Audit/Finance/Risk Committee and was approved by Council. It is up to the Audit/Finance/Risk committee to debate if they want to review it or keep it as is.

#### **4. Registrar's Report**

Mr. Jamieson presented the Registrar's report.

Staff provided updates on investigations, quality assurance and registration, and CPMF.

Council took a 10-minute break and resumed at 10:31 a.m.

Council discussed the Governance Reform and Modernization that is proposed by the Ministry of Health and inquired about suitability to practice, barriers to students taking the jurisprudence exam, and the CPMF report.

#### **5. Motions Brought Forward from Committees**

##### **a) Clinical Practice Panel**

Dr. Christian presented the motion to approve Evaluating Access to Eyecare in Ontario.

*Moved by Dr. Kniaziew and seconded by Mr. Kassir to **approve Evaluating Access to Eyecare in Ontario.***

**Motion carried**

##### **b) Governance/HR:**

###### **i. Role of Committees Policy**

Dr. Grewal presented the motion to establish and implement the Role of Committees policy.

*Moved by Dr. Kniaziew seconded by Dr. Eltis to **accept the motion to establish and implement the Role of Committees policy.***

**Motion carried**

###### **ii. Governance/HR: Role of Committee Chairs Policy**

Dr. Grewal presented the motion to establish and implement the Role of Committee Chairs policy.

*Moved by Dr. Kniaziew and seconded by Dr. Eltis to **establish and implement the Role of Committee Chairs policy.***

**Motion carried**

###### **iii. Governance/HR: Conflict of Interest Policy**

Dr. Grewal presented the motion to approve the recommended changes to sections 9.03(1a) and 9.03(3) of the College By-laws.

*Moved by Dr. Eltis and seconded by Dr. Hemami to approve the recommended changes to sections 9.03(1a) and 9.03(3) of the College By-laws.*

Motion carried

#### **c) QA Panel**

##### **i. Revise the Random Selection Criteria Policy**

Dr. Eltis presented the motion for approval of revisions to the Random Selection Criteria Policy and practice assessment protocol for 2022.

*Moved by Dr. Hemami and seconded by Dr. Ulakovic to accept the revisions to the Random Selection Criteria Policy and practice assessment protocol for 2022.*

Motion carried

Council discussed the possibility of furthering the reduction in files from 12 to 10.

*Moved by Dr. Grewal and seconded by Dr. Ulakovic to amend the original number of files from 12 to 10.*

Motion carried

##### **ii. Dissolution of the Quality Assurance Sub Committee**

Dr. Eltis presented the motion for the Quality Assurance Committee to take over the work of the Quality Assurance Sub Committee and dissolve the Sub Committee.

*Moved by Dr. Grewal and seconded by Dr. Mastronardi to dissolve the Quality Assurance Sub Committee.*

Motion carried

#### **d) Executive Committee: Approval of the 2021 CPMF Report**

Dr. Nurani presented the motion for approval of the 2021 CPMF Report.

*Moved by Dr. Kniaziew and seconded by Mr. Kennedy to approve the 2021 CPMF Report.*

Motion carried

#### **6. List of Acronyms**

#### **7. Dates of Upcoming Council Meetings**

156 Dr. Nurani discussed the next Council meetings.

157

158 **9. Adjournment:** Moved by Dr. Eltis and seconded by Dr. Grewal to adjourn the meeting at 11:42 a.m.

159 **Motion carried**

**Council Meeting – March 23, 2022**

**COUNCIL ACTION LIST STATUS**

Updated Mar. 9, 2022

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 Meetings – March 2022

### MOTION LIST

Updated June 13, 2022

Date mm/dd/yr	Minute Line	Motion	Committee	Decision
03/23/22	85	Moved by Dr. Kniaziew and seconded by Mr. Kassir to <b>approve Evaluating Access to Eyecare in Ontario.</b>	CPP	Motion carried
03/23/22	94	Moved by Dr. Kniaziew seconded by Dr. Eltis to <b>accept the motion to establish and implement the Role of Committees policy.</b>	Governance – HR	Motion carried
03/23/22	103	Moved by Dr. Kniaziew and seconded by Dr. Eltis to <b>establish and implement the Role of Committee Chairs policy.</b>	Governance – HR	Motion carried
03/23/22	113	Moved by Dr. Eltis and seconded by Dr. Hemami to <b>approve the recommended changes to sections 9.03(1a) and 9.03(3) of the College By-laws.</b>	Governance – HR	Motion carried
03/23/22	123	Moved by Dr. Hemami and seconded by Dr. Ulakovic to <b>accept the revisions to the Random Selection Criteria Policy and practice assessment protocol for 2022.</b>	QAP	Motion carried
03/23/22	130	Moved by Dr. Grewal and seconded by Dr. Ulakovic to <b>amend the original number of files from 12 to 10</b>	QAP	Motion carried
03/23/22	140	Moved by Dr. Grewal and seconded by Dr. Mastronardi to <b>dissolve the Quality Assurance Sub Committee.</b>	QAP	Motion carried
03/23/22	149	Moved by Dr. Kniaziew and seconded by Mr. Kennedy to <b>approve the 2021 CPMF Report.</b>	Executive	Motion carried

## Executive Committee Activity Report

**Reporting date:** June 24, 2022

**Chair:** Dr. Areef Nurani

**Meetings in 2022:** 3 (teleconference)

### 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 Motions for the June 24, 2022 Council Meeting*

J. Jamieson introduced the draft agenda for the June 24, 2022 Council session. The group discussed the various motions that will be presented.

#### *Research Steering Group*

C. Andrews provided an update on the Research Steering Group, which held its first meeting on May 6, 2022.

Two important decisions were made during that meeting: first, the Group agreed that a call for proposals (CFP) will be developed for 2022 that focuses on projects dealing with the regulation of optometry and other health professions. Clinical projects will not be considered this year, though the Group may develop a clinically-oriented CFP at a later time. The focus on policy research this year will help to ensure that research funds are supporting projects associated with the College's mandate areas.

The Group also discussed a memo sent from L. Christian and the Clinical Practice Panel. The memo requests funds to hire a contract-based researcher to explore the nature of level 4 consultations (as specified by Health Quality Ontario) and possible health benefits related to scope expansion for optometrists.

The Group agreed that the project is worth pursuing, but decided that it should be vetted through the established application process first. The final application materials are now being developed by C. Andrews and Dr. Kenneth Olsen, the Group's Researcher at Large. Once completed, they will be provided to CPP so that they can develop a "formal" application. The Group agreed that, whether internal or external, all requests for funds should go through the same structured process.

#### *Meeting Length*

The group discussed the current trend of committee and Council meetings running for shorter lengths than has been typical over the last couple years. The Committee agreed that this is a sign of efficiency and effective preparation.

That said, the group did agree that a new section will be added to the Council agenda. The section, which will be developed at the staff level, will allow for small presentations from committee chairs on their portfolios.

### **Decision Items**

The Executive Committee discussed potential committee appointments for Lisa Holland, the College's new public member. In accordance with College By-law 8.04, the Executive Committee is responsible for filling committee vacancies, and then bringing its recommendations to Council.

The Committee also discussed a draft of the Strategic Plan for 2022 to 2025, which has now been shared with Council for review.

In line with these activities, the Executive Committee presents two motions to Council:

- 1. The Executive Committee recommends to Council the appointment of Lisa Holland to the Governance-HR, Quality Assurance, and Fitness to Practice Committees in accordance with College By-law 8.04.**
- 2. The Executive Committee recommends to Council the approval of the College Strategic Plan, 2022-2025.**

### **Attachments**

The draft Strategic Plan for 2022-2025 can be found on page 69.

## Patient Relations Committee Activity Report

**Reporting date:** June 24, 2022

**Chair:** Suzanne Allen

**Meetings in 2022:** 2 (teleconference)

### Tasks Completed Since Last Council Meeting:

- The Committee participated in a guided tour of the website led by J. Facey, the College's Communication's Coordinator. An emphasis was placed on sections of the new website that contain patient communications and resources.
- The Committee reviewed the status of the Program of Funding for Therapy and Counselling, including how much funding has been accessed by each patient.
- The Committee continues to develop an e-learning module focused on complex patient issues and how to manage them. Most recently, the Committee reviewed a proof-of-concept slide deck and approved that the project be developed within this framework.

### Key Priorities

The Patient Relations Committee manages the Program of Funding for Therapy and Counselling, which now supports four patients. The committee is also working to develop a new training session on sexual abuse and victim support that will be offered to Council members and staff, as well as an e-learning module that focuses on complaints received by the College.

### Discussion Items

#### *E-Learning Module*

The Committee reviewed a new timeline for the completion of the e-learning module, which is designed to produce a final product by the end of this year. The project is being implemented at the operational level but was originally conceptualized and approved at a high level by the Committee.

#### *Training on Sexual Abuse and Victim Support*

After reviewing a history of discussion on this topic, the Committee agreed to a general proposal articulated by C. Andrews, the College's Director of Research and Policy, to provide this training during a Council session early in 2023.

The training will be offered by A. Shah, the College's Senior Manager of Investigations and Resolutions, who will focus on the topic of interacting with and supporting victims of sexual abuse, as well as C. Andrews, who will present on the history and nuances of the Program of Funding for Therapy and Counselling. The training will be cross-departmental and interdisciplinary, and will target both Council members, staff, and non-Council committee members who sit on ICRC and the Discipline Committees.

**Attachments:** N/A

## Quality Assurance Panel Activity Report

**Reporting date:** June 24, 2022

**Chair:** Dr. Mark Eltis

**Meetings in 2022:** 3 (via teleconference)

### Tasks Completed Since Last Council Meeting:

- Ongoing and new practice assessment cases were reviewed and outcomes decided.
- Further discussions were had regarding the new Practice Evaluation process.
- Progress thus far on the two Quality Assurance Program Revision Projects was reviewed and general direction approved.

### Key Priorities

The QA Panel's current focus is to continue to review practice assessment reports from previous years. An increase in the number of cases being escalated to CRA has also increased the workload of the Panel. By the September council meeting, the Panel should have provided decision on the majority of cases from 2020/2021. They will focus the latter part of the year on reviewing 2022 assessment reports.

The Panel also has the QA Program revision as a key priority this year. The practice assessment and practice evaluation component of the program are in the process of being updated, and a new QA Program component, the self-assessment, is in development.

### Information Items

Practice Assessment Stats Since Last Council Meeting	
SRA Reports Reviewed	77
CRA Reports Reviewed	12
Members Referred for Remediation	4

### 2022 Random Practice Assessment Process

A total of 79 members have been selected as part of the 2022 random practice assessment process. Criteria from the updated Random Selection Criteria Policy approved at the March 2022 council meeting was used for the selection. All members have now been notified of their random selection. The deadline for patient file submission for members selected in 2022 should align with when the majority of assessments from previous years have been completed.

### Discussion Items

#### QA Projects

Following the dissolution of the QA Subcommittee at the last council meeting, the QA Panel was brought up to speed on the status of the Practice Assessment Redevelopment Project and the Self-assessment

Development Project. The projects are both in early development and will not be launching until 2024, but the general direction has been established by the vendors and approved by the QA Panel.

The content development phase of both projects is underway with the professional members of the Quality Assurance Panel and Clinical Practice Panel serving as subject matter experts to provide feedback on the vendors' content as practitioners. Following content development, there will be substantial testing done and stakeholder feedback sought prior to implementation with the member base in 2024.

#### *Practice Evaluation*

The Panel is currently seeking information from multiple institutions on their ability to administer the College's Practice Evaluation process. The Panel will review this information at their next meeting and hopefully have a new process in place in the coming months for those requiring an evaluation.

#### **Decision Items**

N/A

## Clinical Practice Panel Activity Report

**Reporting date:** June 24, 2022

**Chair:** Dr. Lisa Christian

**Meetings in 2022:** 2 (via teleconference)

### Tasks Completed Since Last Council Meeting:

- Sent memo to Research Steering Group regarding Access to Eyecare proposal endorsed at last council meeting. Research Steering Group to provide grant application to hire a contract-based researcher to complete a literature review.
- Discussed Infection Prevention and Control (IPAC) guidance.
- Conducted early review and discussions on OPR Standards in need of review in 2022.

### Key Priorities

The Clinical Practice Panel remains primarily concerned with updating members about pandemic-related guidance from the Ministry of Health and maintaining the standards of practice under the Optometric Practice Reference (OPR). The Panel is also focused on exploring opportunities for increased access to care for Ontarians and will continue discussions in this area following more information from the Research Steering Group.

### Discussion Items

#### *IPAC Guidance*

The Panel will encourage members to follow public health guidelines going forward; however, the Return-to-Work document will no longer be updated. The Panel voted to update the current IPAC standard (OPR 4.7) and create an IPAC resource webpage.

#### *OPR Review*

At the first meeting of the year, the professional members of the Panel, in teams, were assigned key standards for review for 2022, including the role of OCT in glaucoma and AMD (OPR 7.2, 7.1) and the addition of a standard on myopia. Review is still in early stages and will go through several drafts and discussions at Panel before coming to council.

### Decision Items

- Motion to update OPR 4.7 Infection Control in the Optometric Office

### Attachments

- Updated OPR 4.7 Infection Control in the Optometric Office

## Inquiries, Complaints and Reports Committee (ICRC) Activity Report

**Reporting date:** June 24, 2022

**Committee Co-Chairs:** Dr. Richard Kniaziew & Dr. Dino Mastronardi

### 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.

Pursuant to *Ontario Regulation 73/20 – Limitation Periods*, the timelines in proceedings in Ontario were suspended for 6 months in 2020 (between March 2020 until September 2020). This temporary suspension of timeliness, as well as adjustments to the investigation process due to the pandemic, caused delays and affected timelines in the processing and disposition of cases, particularly for those complaints initiated in 2020 and in the beginning of 2021. The Committee intends to hold frequent case review meetings to ensure the efficient processing of complaints and reports.

Since the Committee last reported to Council, Dr. Kniaziew's panel met on March 16, 2022, and Dr. Mastronardi's panel met on April 25, 2022. Panel meetings have also been scheduled for June 29, July 19, and August 24, 2022.

### 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 (March 8, 2022 to May 31, 2022)

- Complaints newly filed: 5
- Cases reviewed by the panels: 21
- Complaint Cases to Alternative Dispute Resolution: 2
- Cases carried over: 0

Decision Breakdown	Total
Decisions Issued	16
Case Type	
• Complaints	15
• Registrar's Report	1
• Incapacity Inquiry	0



<b>Dispositions (for cases above)</b> <ul style="list-style-type: none"> <li>• No further action (NFA)</li> <li>• Advice/Recommendation</li> <li>• Remedial agreement</li> <li>• Specified Continuing Education or Remediation Program (SCERP)*</li> <li>• Oral caution*</li> <li>• Signed undertaking</li> <li>• Referral of specified allegations to the Discipline Committee</li> </ul>	9 4 0 3 1 0 0
<b>Nature of Allegations (for dispositions above, NFA excluded)**</b> <ul style="list-style-type: none"> <li>• Care (quality, failure to diagnose or refer, unsafe care)</li> <li>• Unprofessional behaviour</li> <li>• Breach of confidentiality and privacy</li> <li>• Improper communication</li> <li>• Related to eyeglasses or contact lens prescriptions</li> <li>• Related to COVID-19 infection, prevention, and control protocols</li> <li>• Sexual abuse of a patient</li> </ul>	1 1 1 3 0 1 0
<b>Timeline for Resolution (for cases above)</b> <ul style="list-style-type: none"> <li>• &lt;120 Days</li> <li>• 121-150 Days</li> <li>• 151-180 Days</li> <li>• 180+ Days</li> </ul>	0 0 0 16

\* In one matter, both a SCERP and an oral caution were issued.

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

### HPARB Appeals

- New appeals: 0
- Outstanding appeals to be heard: 1
- Appeals heard and awaiting decisions: 1
- ICRC Decision Returned: 0

## Registration Committee Activity Report

**Reporting date:** June 24, 2022

**Chair:** Dr. William Ulakovic

**Meetings in 2022:** 2 (via teleconference)

### Tasks Completed Since Last Council Meeting:

- Discussed Ontario Regulation 261/22 made under the *Fair Access to Regulated Professions and Compulsory Trades Act, 2006*, and the cumulative risk category assessment of the College by the Office of the Fairness Commissioner (OFC).
- Discussed Dr. Dino Mastronardi's nomination and approval to join FORAC's Canadian Optometric Evaluation Committee (COEC) as COEC's new member from Ontario.
- Discussed how the May 2022 Internationally Graduated Optometrist Evaluating Examination (IGOEE) was administered with Touchstone Institute.
- Discussed how the Spring 2022 Optometry Examining Board of Canada (OEBC) exam was administered.
- Discussed the registration process during COVID-19.

### Key Priorities

#### *Office of the Fairness Commissioner*

- A letter was provided by OFC on April 1, 2022, that confirmed the College's cumulative risk category for 2022/2023 was low risk.
- Registration staff provided feedback on the 2021 proposed Fair Registration Practices report that was paused until Fall 2022.

#### *Touchstone Institute*

- There were 25 registrants for the 2022 IGOEE that was administered as indicated below:
  - Therapeutics Prescribing Assessment for Optometry (TPAO) examination – virtual – May 9, 2022.
  - Multiple Choice Question (MCQ) exam – virtual – May 10, 2022.
  - Nine short-case OSCE stations – in-person – May 14, 2022.
  - Three long-case OSCE stations – in-person – May 15/16/17, 2022.
- IGOEE results are expected to be made available to FORAC regulators the week of June 14, 2022.
- There have been two successful FORAC credential assessment recommendation received since the last Council meeting in March 2022.

### *Optometry Examining Board of Canada*

- The Spring 2022 OEBC exam was administered as indicated below:
  - Written exam via remote proctoring on April 7, 2022
  - OSCE at the University of Waterloo School of Optometry and Vision Science (WOVS) on April 24, 2022, and at the University of Montreal on May 7, 2022.
- Three members of the Registration Committee volunteered to observe the Spring 2022 OEBC OSCEs; one Committee member observed the OSCE exam administered at WOVS, while two members observed the OSCE exam at the University of Montreal.
- The Committee members shared their observations with the rest of the Committee and discussed their observations and recommendations with the OEBC CEO.
- The estimated reporting date for the Spring 2022 OEBC exam is June 8 -17, 2022.

### *Registration Process during COVID-19*

- College staff continue to accept applications for registration electronically and validating documents with applicants.
- There were 26 candidates registered for the April 2022 online Jurisprudence exam and 19 candidates for the June 2022 online Jurisprudence exam.
- Registration staff are preparing for a registration information session on June 15 for over 50 candidates.
- The new registrant welcome package is being finalized.
- Staff are getting ready to conduct end-to-end testing on the online registration application.

### *Further Amendments to the Registration Regulation draft amendments*

- In April 2018, the College made a comprehensive regulation amendment submission to the Ministry of Health, and further amendments in 2020. While these draft amendments are under review, the College has asked that the Ministry consider introducing more flexibility in the Registration Regulation, which would be consistent with the College of Homeopaths of Ontario that has similar flexibility. There is currently no update on this request.

### **Decision Items**

Below are three motions being presented for Council approval at this meeting (please refer to the briefing notes associated with each motion):

1. To approve the 2022 OEBC written exam and OSCE as one of two standards assessment examinations for registration purposes.
2. To approve the 2022 National Board of Examiners in Optometry (NBEO) exam as a standards assessment examination for registration purposes.
3. To approve the 2022 Jurisprudence exam for registration purposes.

## Discipline Committee Activity Report

**Reporting date:** June 24, 2022

**Chair:** Dr. Marta Witer

### 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.

Since the Discipline Committee last reported to Council, no referrals were received from the ICRC.

The Discipline Committee held 1 hearing, which proceeded by videoconference on March 28, 29 and 31, 2022. The purpose of the hearing was to consider allegations of professional misconduct referred by the ICRC against Dr. Gregory Miller. The Discipline Committee found that:

1. Dr. Miller committed an act or acts of professional misconduct as provided by paragraph 51(1)(b.1) of the *Health Professions Procedural Code* which is Schedule 2 to the *Regulated Health Professions Act, 1991, S.O. 1991, c.18*, as amended, in that, he sexually abused his patient.
2. Dr. Miller committed an act or acts of professional misconduct as provided by paragraph 51(1)(c) of the *Health Professions Procedural Code* which is Schedule 2 to the *Regulated Health Professions Act, 1991, S.O. 1991, C.18*, and defined in the following paragraphs of Ontario Regulation 119/94:
  - a. paragraph 1.1 contravening a term, condition or limitation to which his certificate of registration is subject;
  - b. paragraph 1.14 in that he failed to maintain the standards of practice of the profession; and,
  - c. paragraph 1.39 in that he engaged in conduct or performed an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical.

The Discipline Committee ordered:

1. That Dr. Miller appear before the Panel to be reprimanded on a date to be set by the Registrar of the College;
2. That the Registrar of the College be directed to revoke Dr. Miller's certificate of registration with the College immediately;
3. That Dr. Miller reimburse the College for funding provided for Patient A under the program required under section 85.7 of the *Health Professions Procedural Code* (the "Code");

4. That Dr. Miller provide to the College a certified cheque in the amount of \$17,370 by April 11, 2022, representing security to guarantee the payment of any amounts he may be required to reimburse the College for funding under the programs required under section 85.7 of the *Code* in relation to Patient A. Any funds that have not been used for the purposes of the program required by section 85.7 of the *Code* shall be returned to him by the College, without interest, at the expiration of the 5-year time frame within which funding may be provided; and,

5. That Dr. Miller shall partially reimburse the College for its costs in relation to this proceeding in the amount of \$34,520 to be paid in full by April 11, 2022.

#### **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:** June 24, 2022

**Chair:** Dr. Camy Grewal

**Meetings in 2022:** 2 (teleconference)

### Tasks Completed Since Last Council Meeting:

- The Committee discussed several issues during its last meeting, including plans for a Council meeting facilitator, a possible mechanism for feedback on Council sessions, and conflicts related to independent contractors.

### 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 2022 is to review the College's governance policies and, where appropriate, make changes and additions that enhance the College's governance portfolio. A number of policies were developed by the Committee last year—outlines of the President and Vice-President roles, terms of references documents for various committees, the harassment policy, and more—and two new policies were approved by Council earlier this year: a Role of Committees policy and a Role of Committee Chairs policy.

### Discussion Items

#### *Council Meeting Facilitator*

The group discussed plans from last year to hire a council meeting facilitator. The original idea was that this individual would attend Council sessions and offer input on matters of governance and meeting management, with the intention to ensure that Council sessions are efficient, professional, etc. (by adhering to Robert's Rules and related guidelines). Seeing that sessions in 2022 are running smoothly and efficiently, it was agreed that such a facilitator is unnecessary at this time.

#### *Council Meeting Feedback*

It has been a College process for several years now to circulate a survey to Council members after each session. The survey asks for feedback on how successful the meeting was in terms of efficiency, fairness, meeting materials, etc. Due to low participation and an emphasis on feedback for the strategic planning session, the survey was not circulated after Council's last meeting. Instead, the group agreed that staff will discuss with Council options for feedback, and that if a survey is selected as the best mechanism, it will be revisited for content and, once finalized and circulated, accompanied by reminder emails to ensure higher participation.

#### *Independent Contractors*

The subject of conflict of interest issues as they relate to independent contractors and unreasonable compensation has been raised at several Council sessions. The group discussed the matter in detail and

agreed that it is in the purview of ICRC to investigate and appropriately adjudicate cases involving such COIs when they occur. Effective decision-making in this area will help normalize a practice environment in Ontario that excludes unreasonable compensation and conflicts of interest as they related to independent contractors.

**Decision Items**

N/A

## **Audit/Finance/Risk Committee Activity Report**

**Reporting date:** June 24, 2022

**Chair:** Mr. Howard Kennedy

**Meetings in 2022:** 3 (teleconference)

### **Tasks Completed Since Last Council Meeting:**

- The financial audit for the year ended December 31, 2021 is substantially complete. The auditors from BDO Canada presented the draft financial statements to the Committee for review on May 4, 2022. The Committee had an in-camera session with auditors following the presentation without staff present, as part of the Committee's mandate to discuss the results of the financial review and any issues or concerns regarding the College staff, accounting records, or internal control; no issues or concerns were reported. The auditors are scheduled to present the draft financial statements recommended by the Committee for approval by Council at the June 24, 2022 meeting.
- The Committee reviewed the financial accounts for the first quarter of 2022, including an update on restricted funds and investment performance. The Committee also decided to maintain the Investment Policy at status quo.
- On May 25, 2022, the Portfolio Manager from Cumberland Private Health Management Inc. presented the investment report to the Committee for the first quarter (ended March 31, 2022). The Portfolio Manager discussed the College's money market fund and reserved portfolio, including an overview of asset mix, investment returns net of fees, and factors affecting the change in portfolio value. Following the presentation, the Committee agreed to request the Portfolio Manager's Investment Policy Statement and connect it with the strategic plans when developing the course of action for the management of the College's investments.
- Draft Finance policy on Reserve Funds was reviewed and recommended for Council approval at the June 24, 2022 meeting.

### **Key Priorities**

- Monitoring the performance of investments and compliance with the Investment Policy.
- Ongoing review /awareness of risks – IT, operational, organizational, financial, and strategic.

### **Information Items**

- First quarter management reports - Statement of Revenue & Expenses and Statement of Financial Position are included in this report as information for Council.

### **Discussion Items**

1. Review of the draft audited financial statements for the year ended December 31, 2021, to be presented by the auditors.



2. Review of the draft Finance Policy – Reserve Funds and the recommendation of the Committee to approve and adopt.

**Decision Items**

1. Approval of the draft audited financial statements for the fiscal year ended December 31, 2021
2. Approval of the reappointment of BDO Canada as financial auditors for the year 2022
3. Approval of the draft Finance Policy – Reserve Funds

**Attachments**

- Statement of Revenue and Expenses for the first quarter 2022
- Statement of Financial Position for the first quarter 2022

**College of Optometrists of Ontario**
**Statement of Revenue and Expenditures (Actual vs Budget)**
**For the quarter ended 31 March 2022**

FY 2021	Particulars	FY 2022 Budget	YTD ACTUAL	YTD BUDGET	Over (Under) Budget	% of Budget
	<b>Revenue</b>					
\$ 2,606,734.99	96% Annual registration fees	\$ 2,164,225.00	\$ 2,037,495.64	\$ 1,940,725.00	\$ 96,770.64	105.0%
\$ 308,475.47	4% Professional corporation fees	\$ 283,580.00	\$ 79,252.47	\$ 70,895.01	\$ 8,357.46	111.8%
\$ 56,428.57	0% Services and other fees and recoverables	\$ 12,500.00	\$ 5,005.88	\$ 3,000.00	\$ 2,005.88	166.9%
<b>\$ 2,971,639.03</b>	<b>Total Revenue</b>	<b>\$ 2,460,305.00</b>	<b>\$ 2,121,753.99</b>	<b>\$ 2,014,620.01</b>	<b>\$ 107,133.98</b>	<b>105.3%</b>
	<b>Expenditures</b>					
\$ 55,629.97	3% Council meeting and training expense	\$ 66,800.00	\$ 24,541.63	\$ 16,699.98	\$ 7,841.65	147.0%
\$ 29,925.00	1% Inquiries, Complaints, and Reports Committee	\$ 80,900.00	\$ 10,087.50	\$ 20,225.01	\$ (10,137.51)	49.9%
\$ 137,715.65	6% Quality Assurance Committee	\$ 173,050.00	\$ 48,945.00	\$ 43,262.49	\$ 5,682.51	113.1%
\$ 25,184.96	1% Executive Committee	\$ 33,300.00	\$ 6,675.00	\$ 8,325.00	\$ (1,650.00)	80.2%
\$ -	8% Strategic planning	\$ -	\$ 64,849.25	\$ -	\$ 64,849.25	
\$ 58,528.39	6% Stakeholder engagement	\$ 78,130.00	\$ 47,902.81	\$ 19,532.49	\$ 28,370.32	245.2%
\$ 11,841.26	3% Discipline Committee	\$ 35,250.00	\$ 24,389.90	\$ 8,812.50	\$ 15,577.40	276.8%
\$ 18,412.50	0% Registration Committee	\$ 29,800.00	\$ 4,050.00	\$ 7,449.99	\$ (3,399.99)	54.4%
\$ 18,037.50	0% Governance Committee	\$ 18,500.00	\$ 2,400.00	\$ 4,625.01	\$ (2,225.01)	51.9%
\$ 15,450.00	0% Clinical Practice Committee	\$ 17,500.00	\$ 2,325.00	\$ 4,374.99	\$ (2,049.99)	53.1%
\$ 13,987.50	0% Audit, Finance, Risk Committee	\$ 15,800.00	\$ 1,125.00	\$ 3,950.01	\$ (2,825.01)	28.5%
\$ 7,650.00	0% Patient Relations Committee	\$ 21,750.00	\$ 1,125.00	\$ 5,437.50	\$ (4,312.50)	20.7%
<b>\$ 392,362.73</b>	<b>28%</b>	<b>\$ 570,780.00</b>	<b>\$ 238,416.09</b>	<b>\$ 142,694.97</b>	<b>\$ 95,721.12</b>	<b>167.1%</b>
	<b>College administration activities</b>					
\$ 1,526,328.23	42% Salaries and benefits	\$ 1,515,477.44	\$ 364,528.61	\$ 375,231.84	\$ (10,703.23)	97.1%
\$ 108,394.82	6% Legal fees	\$ 184,000.00	\$ 51,954.97	\$ 45,999.99	\$ 5,954.98	112.9%
\$ 205,364.11	4% Administration and services	\$ 232,331.90	\$ 35,759.77	\$ 58,082.93	\$ (22,323.16)	61.6%
\$ 153,945.61	5% Occupancy costs	\$ 156,840.00	\$ 39,972.21	\$ 39,210.00	\$ 762.21	101.9%
\$ 91,057.25	3% IT services and maintenance	\$ 80,561.73	\$ 24,192.69	\$ 20,140.41	\$ 4,052.28	120.1%
\$ 120,071.45	2% IT projects	\$ 56,727.50	\$ 15,170.00	\$ 14,181.87	\$ 988.13	107.0%
\$ 98,726.86	1% Professional fees - consulting	\$ 54,000.00	\$ 4,500.00	\$ 13,500.00	\$ (9,000.00)	33.3%
\$ 52,897.00	0% Amortization of capital assets	\$ 52,500.00	\$ -	\$ -	\$ -	
\$ 50,866.84	6% OE tracker expense	\$ 56,315.25	\$ 52,293.36	\$ 56,315.25	\$ (4,021.89)	92.9%
\$ 12,950.99	3% Education and program delivery	\$ 135,511.00	\$ 28,248.63	\$ 33,877.74	\$ (5,629.11)	83.4%
\$ 67,385.00	1% Accounting and audit fees	\$ 20,400.00	\$ 6,000.00	\$ -	\$ 6,000.00	
\$ -	0% Research	\$ 129,000.00	\$ 1,750.00	\$ 32,250.00	\$ (30,500.00)	5.4%
<b>\$ 2,487,988.16</b>	<b>72%</b>	<b>\$ 2,673,664.82</b>	<b>\$ 624,370.24</b>	<b>\$ 688,790.03</b>	<b>\$ (64,419.79)</b>	<b>90.6%</b>
<b>\$ 2,880,350.89</b>	<b>Total Expenditures</b>	<b>\$ 3,244,444.82</b>	<b>\$ 862,786.33</b>	<b>\$ 831,485.00</b>	<b>\$ 31,301.33</b>	<b>103.8%</b>
<b>\$ 91,288.14</b>	<b>Excess/(Deficiency) of revenue over expenses for the year before other income</b>	<b>\$ (784,139.82)</b>	<b>\$ 1,258,967.66</b>	<b>\$ 1,183,135.01</b>	<b>\$ 75,832.65</b>	<b>106.4%</b>
	<b>Other income</b>					
\$ 361,612.91	-60% Investment Income	\$ -	\$ 84,823.95	\$ -	\$ 84,823.95	
\$ 114,048.46	160% Unrealized gain on investments	\$ -	\$ (226,495.28)	\$ -	\$ (226,495.28)	
\$ -	0% TWS subsidy	\$ -	\$ -	\$ -	\$ -	
<b>\$ 475,661.37</b>	<b>Total Other Income</b>	<b>\$ -</b>	<b>\$ (141,671.33)</b>	<b>\$ -</b>	<b>\$ (141,671.33)</b>	
<b>\$ 566,949.51</b>	<b>Net excess of revenue over expenditures</b>	<b>\$ (784,139.82)</b>	<b>\$ 1,117,296.33</b>	<b>\$ 1,183,135.01</b>	<b>\$ (65,838.68)</b>	<b>94.4%</b>

# College of Optometrists of Ontario

## Statement of Financial Position (Year on Year comparison)

For the quarter ended 31 March 2022

FY 2021	Particulars	YTD Mar 2022	YTD Mar 2021
	<b>Assets</b>		
	<b>Current</b>		
\$ 1,294,154.66	Cash	\$ 857,160.70	\$ 1,727,320.03
\$ 4,268,459.10	Short-term investments	\$ 3,784,574.37	\$ 1,457,576.28
\$ 33,083.57	Accounts receivable	\$ 7,509.05	\$ 4,682.63
\$ 49,213.18	Prepaid expenses	\$ 27,136.87	\$ 13,757.50
<b>\$ 5,644,910.51</b>		<b>\$ 4,676,380.99</b>	<b>\$ 3,203,336.44</b>
<b>\$ 2,846,111.39</b>	<b>Long-term investments</b>	<b>\$ 2,676,977.95</b>	<b>\$ 4,199,603.07</b>
<b>\$ 82,988.75</b>	<b>Capital assets</b>	<b>\$ 82,988.75</b>	<b>\$ 134,255.75</b>
<b>\$ 8,574,010.65</b>		<b>\$ 7,436,347.69</b>	<b>\$ 7,537,195.26</b>
	<b>Liabilities and Members' Equity</b>		
	<b>Current liabilities</b>		
\$ 168,985.27	Accounts payable and accrued liabilities	\$ 83,546.35	\$ 64,439.74
\$ 237,315.31	Government remittances payable	\$ (10,665.06)	\$ (12,480.47)
\$ 1,920,820.00	Deferred revenue	\$ -	\$ 1,728,159.94
<b>\$ 2,327,120.58</b>		<b>\$ 72,881.29</b>	<b>\$ 1,780,119.21</b>
<b>\$ 24,288.60</b>	<b>Funds in trust</b>	<b>\$ 23,568.60</b>	<b>\$ 29,723.60</b>
<b>\$ 2,351,409.18</b>		<b>\$ 96,449.89</b>	<b>\$ 1,809,842.81</b>
<b>\$ 6,222,601.47</b>	<b>Total Equity</b>	<b>\$ 7,339,897.80</b>	<b>\$ 5,727,352.45</b>
<b>\$ 8,574,010.65</b>		<b>\$ 7,436,347.69</b>	<b>\$ 7,537,195.26</b>

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# 6-7 / PRESENTATIONS

6. Registrar's Report: Registrar and CEO Joe Jamieson to provide College updates via PPT presentation.
7. Presentation from Financial Auditors

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# 8 / MOTIONS

- 8. Motions Brought Forward from Committees
  - a. Audit/Finance/Risk
    - i. Audited financials for year-end December 31, 2021
    - ii. Approval of the reappointment of BDO Canada as financial auditors for the year 2022
    - iii. Finance Policy – Reserve Funds
  - b. Registration
    - i. 2022 Optometry Examining Board of Canada Written Exam and OSCE
    - ii. 2022 National Board of Examiners in Optometry Exam
    - iii. 2022 Jurisprudence Exam
  - c. Executive Committee
    - i. College Strategic Plan
    - ii. Appointment of Lisa Holland to the Gov-HR, QA, and FTP with recommendations
  - d. Clinical Practice Panel
    - i. Update to POR section 4.7 Infection Control in the Optometric Office

## BRIEFING NOTE

Audit/Finance/Risk Committee – June 2022

### Subject

Auditor's presentation of the draft 2021 financial statements

### Background

BDO Canada, the College's auditors, have conducted the annual review of the College's financial records for the period January 1, 2021 to December 31, 2021, and will present the draft financial statements to Council.

### Decision(s) for Council

1. To approve the draft audited 2021 financial statements
2. To reappoint BDO Canada as auditors for the fiscal year 2022

### Supporting Materials

- Auditor's report - Draft audited 2021 financial statements

### Contact

- Deborrah Anne Lim, Manager – Finance and Office Administration

**College of Optometrists of Ontario**  
**Financial Statements**  
For the year ended December 31, 2021

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## Independent Auditor's Report

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To the Members of College of Optometrists of Ontario

### Opinion

We have audited the accompanying financial statements of College of Optometrists of Ontario (the "College"), which comprise the balance sheet as at December 31, 2021, and the statements of changes in net assets, revenue and expenditures and cash flows for the year then ended, including a summary of significant accounting policies and other explanatory information.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at December 31, 2021, and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

### Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.



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## Independent Auditor's Report (continued)

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### Auditor's Responsibilities for the Audit of the Financial Statements (continued)

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants, Licensed Public Accountants  
Oakville, Ontario  
REPORT DATE, 2022

## College of Optometrists of Ontario

### Balance Sheet

**December 31** **2021** 2020

#### Assets

##### Current

Cash	\$ 1,294,155	\$ 2,525,248
Short-term investments (Note 3)	4,268,459	1,096,023
Accounts receivable	33,084	27,132
Prepaid expenses	49,213	13,758
	5,644,911	3,662,161

**Long-term investments** (Note 4)

2,846,112      4,558,610

**Capital assets** (Note 5)

82,988      132,312

\$ 8,574,011      \$ 8,353,083

#### Liabilities and Members' Equity

##### Current liabilities

Accounts payable and accrued liabilities	\$ 168,985	\$ 116,549
Government remittances payable	237,315	245,745
Deferred revenue	1,920,820	2,304,213
	2,327,120	2,666,507

**Funds in trust** (Note 6)

24,289      30,924

2,351,409      2,697,431

##### Net Assets

Invested in capital assets	82,988	132,312
Internally restricted funds (Note 7)	3,235,920	3,266,000
Unrestricted fund	2,903,694	2,257,340
	6,222,602	5,655,652

\$ 8,574,011      \$ 8,353,083

Approved on Behalf of the Council:

\_\_\_\_\_ President

\_\_\_\_\_

The accompanying notes are an integral part of these financial statements.

**College of Optometrists of Ontario**  
**Statement of Changes in Net Assets**

**For the year ended December 31**

	Invested in Capital Assets	Other Internally Restricted Funds	Unrestricted Funds	2021 Total
<b>2021</b>				
<b>Balance, beginning of year</b>	\$ 132,312	\$ 3,266,000	\$ 2,257,340	\$ 5,655,652
(Deficiency) excess of revenue over expenditures (Note 7)	-	(30,080)	597,030	566,950
Interfund transfers	(49,324)	-	49,324	-
<b>Balance, end of year</b>	<b>\$ 82,988</b>	<b>\$ 3,235,920</b>	<b>\$ 2,903,694</b>	<b>\$ 6,222,602</b>
<b>2020</b>				
<b>Balance, beginning of year</b>	\$ 122,565	\$ 3,266,000	\$ 1,907,384	\$ 5,295,949
Excess of revenue over expenditures	-	-	359,703	359,703
Interfund transfers	9,747	-	(9,747)	-
<b>Balance, end of year</b>	<b>\$ 132,312</b>	<b>\$ 3,266,000</b>	<b>\$ 2,257,340</b>	<b>\$ 5,655,652</b>

The accompanying notes are an integral part of these financial statements.

## College of Optometrists of Ontario

### Statement of Revenue and Expenditures

**For the year ended December 31**

	2021	2020
<b>Revenue</b>		
Annual registration fees	\$ 2,606,735	\$ 2,513,595
Professional corporation fees	308,475	226,689
Services and other fees and recoverables	56,429	27,707
	<b>2,971,639</b>	<b>2,767,991</b>
<b>Expenditures</b>		
Council meeting and training expense	55,630	82,524
Inquiries, Complaints, and Reports Committee	29,925	52,698
Quality Assurance Committee	137,716	41,844
Executive Committee	25,185	41,720
Strategic planning	-	39,225
Stakeholder engagement	58,528	56,522
Discipline Committee	11,841	20,408
Registration Committee	18,413	17,009
Governance Committee	18,038	16,369
Clinical Practice Committee	15,450	11,789
Audit, Finance, Risk Committee	13,988	9,188
Patient Relations Committee	7,650	2,327
	<b>392,364</b>	<b>391,623</b>
<b>College administration activities</b>		
Salaries and benefits (Note 9)	1,526,328	1,522,069
Legal fees	108,395	170,215
Administration and services	205,363	167,306
Occupancy costs	153,946	155,704
IT services and maintenance	91,057	71,507
IT projects	120,071	65,888
Professional fees - consulting	98,727	57,192
Amortization of capital assets	52,897	55,739
OE tracker expense	50,867	52,565
Education and program delivery	12,951	23,473
Accounting and audit fees	67,385	21,500
Research	-	15,000
	<b>2,487,987</b>	<b>2,378,158</b>
<b>Total expenditures</b>	<b>2,880,351</b>	<b>2,769,781</b>
<b>Excess (deficiency) of revenue over expenses for the year before other income</b>	<b>91,288</b>	<b>(1,790)</b>
<b>Other income</b>		
Investment income	361,614	158,532
Unrealized gain on investments	114,048	182,136
TWS subsidy (Note 12)	-	20,825
	<b>475,662</b>	<b>361,493</b>
<b>Net excess of revenue over expenditures</b>	<b>\$ 566,950</b>	<b>\$ 359,703</b>

The accompanying notes are an integral part of these financial statements.

**College of Optometrists of Ontario**  
**Statement of Cash Flows**

**For the year ended December 31**

**2021**

**2020**

**Cash flows provided by (used in)**

**Operating activities**

Excess of revenue over expenditures for the year	\$	\$	359,703
Adjustments for items not involving cash:			
Amortization of capital assets		52,897	55,739
Net unrealized gain on investments		(114,048)	(182,136)
Changes in non-cash working capital balances			
Accounts receivable		(5,952)	1,694
Prepaid expenses		(35,455)	9,715
Accounts payable and accrued liabilities		52,436	(8,051)
Government remittances payable		(8,430)	(43,990)
Deferred revenue		(383,393)	(90,769)
Funds in trust		(6,635)	(6,025)
		<b>118,370</b>	<b>95,880</b>

**Investing activities**

Purchase of capital assets		(3,573)	(65,486)
Net (increase) decrease in investments		(1,345,890)	1,889,844
		<b>(1,349,463)</b>	<b>1,824,358</b>

**(Decrease) increase in cash during the year**

**(1,231,093) 1,920,238**

**Cash, beginning of year**

**2,525,248 605,010**

**Cash, end of year**

**\$ 1,294,155 \$ 2,525,248**

The accompanying notes are an integral part of these financial statements.

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## College of Optometrists of Ontario

### Notes to Financial Statements

December 31, 2021

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#### 1. Nature of Operations

The College of Optometrists of Ontario (the "College") was incorporated without share capital in 1963 as a not-for-profit organization exempt from taxes under the Income Tax Act. The College is a self-regulatory authority responsible for the registering (licensing) and governing of optometrists in the Province of Ontario. The College's mission is to serve the public by regulating Ontario's optometrists and uses its authority to guide the profession in the delivery of safe, ethical, progressive and quality eye care at the highest standards.

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Investments consist of guaranteed investment certificates, bonds, stocks, income trusts and mutual funds. Long-term investments reflect investments that mature after the end of the following fiscal year-end or are held for long term fund purposes. Investment income is recognized as revenue in the year in which it is earned. Gains and losses on the sale of investments are recorded as investment income when realized. For investments which have not been sold or have not matured, the unrealized gains and losses are recognized at the end of each fiscal year and are reported in the statement of revenue and expenditures.

#### Prepaid Expenses

Prepaid expenses are comprised of advance payments made to vendors for facility rental and membership dues, and for contracts for services to be received in the following fiscal year.

#### Capital Assets

Capital assets are stated at acquisition cost less accumulated amortization. Amortization is provided using the following rates and methods:

Computer hardware	- 55% diminishing balance
Furniture and equipment	- 20% diminishing balance
Leasehold improvements	- 20% straight line

#### Revenue Recognition

##### *Annual registration fees*

Annual registration fees represent membership fees and member application fees. Fees are set annually by the Council and are recognized as revenue in the year to which they relate and when collectibility is reasonably assured. Annual registration fees received in advance of the membership year to which they relate are recorded as deferred revenue.

##### *Professional corporation fees*

Professional corporation fees represent the application fee and the related annual renewal fees to operate a profession corporation as regulated by the College. Professional corporation fees are recognized upon the successful completion of the application or renewal process.

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## College of Optometrists of Ontario

### Notes to Financial Statements

December 31, 2021

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#### *Services and other fees and recoverables*

Services and other fees and recoverables represent quality assurance, continuing education and other service fees. Revenue is recognized at the time the service has been rendered and collectibility is reasonably assured.

#### Internally Restricted Funds

The College maintains a number of internally restricted funds. The funds are established and managed by way of Council resolutions which designate that funds be set aside and used for specific strategic purposes. The following is a description of each of the College's internally restricted funds:

Invested in capital assets fund: to report the flow of funds related to the acquisition, disposal and amortization of capital assets of the College.

Contingency fund: To set aside funding for costs incurred in the resolution of unanticipated issues as identified by the College.

Entry-to-Practice Exam Development fund: To set aside funding for the development of a new entry practice examination.

Fee Stabilization fund: To set aside funding to defray an unanticipated fee increase as a result of a temporary shortfall in revenue. Included in this fund is a reserve which, in response to the COVID-19 pandemic, provides a one-time reduction to members of \$200 each from their submitted 2022 annual membership fee.

Investigations and Hearings fund: To set aside funding to the College's Inquiries, Complaints and Reports Committee ("ICRC") and Discipline Committee for the unanticipated costs of complex investigations and hearings.

New Government Initiatives fund: To set aside funding for initiatives undertaken by the College to address the enactment of new or amended legislation and regulations.

Patient Relations fund: To set aside funding for the Patient Relations program which includes measures for preventing and dealing with sexual abuse of patients.

Public Awareness fund: To set aside funding for the enhancement of public participation and consultation in the College's regulatory activities, and to provide priority funding to facilitate a sustainable program of public awareness and connection to the mandate of the College as described in the College Performance Measurement Framework ("CPMF") and Strategic plan.

Office Acquisition fund: To set aside funding for the future purchase of office premises. During the prior year, Council approved a transfer of \$2,250,000 from this fund to various other internally restricted funds, as detailed in Note 7.

Research fund: To set aside funding for the process development and related research into clinical regulatory matters.

Staff Development and Succession Planning fund: To set aside contemporary, post pandemic professional development and technology to staff; to provide leadership development for succession planning within the College.

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## College of Optometrists of Ontario

### Notes to Financial Statements

December 31, 2021

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#### 2. Summary of Significant Accounting Policies (continued)

##### Internally Restricted Fund (continued)

Strategic Plan and CPMF fund: To set aside funds to rapidly address the areas identified in the CPMF as "not" or "partially" met to meet Ministry of Health ("MOH") requirements (October 2021).

Unauthorized Practice fund: To set aside funding for unanticipated costs in pursuing legal action against unauthorized practice and dispensing.

The unrestricted fund consists of the cumulative excess of revenue over expenditures of the College less the amounts that have been internally restricted.

##### Financial Instruments

The College records financial instruments at fair value on initial recognition. The College subsequently measures all its financial instruments at amortized cost except for investments, which are subsequently measured at fair value. Financial instruments are tested for impairment when changes in circumstances indicate the asset could be impaired.

##### Measurement Uncertainty

The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amount of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenditures during the year. Actual results may differ from these estimates.

##### Contributed Services

The College uses volunteers to assist in the organization's activities. While these services benefit the College considerably, a reasonable estimate of the time spent and its fair market value cannot be made and accordingly, these contributed services are not recognized in the financial statements.

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#### 3. Short-Term Investments

	2021	2020
Cash and money market	\$ 1,963,948	\$ 519,685
Fixed income	2,304,511	576,338
Total	<u>\$ 4,268,459</u>	<u>\$ 1,096,023</u>

Short-term investments mature or are redeemable at various dates not exceeding 12 months. Fixed income investments include guaranteed investment certificates with interest rates ranging from 0.36% to 0.80% (2020 - 1.35% to 3.55%).



## College of Optometrists of Ontario

### Notes to Financial Statements

**December 31, 2021**

#### 4. Long-Term Investments

	2021	2020
Fixed income	\$ 1,267,490	\$ 2,785,132
Canadian equities	1,398,979	903,423
Foreign equities	179,643	870,055
Total	<b>\$ 2,846,112</b>	<b>\$ 4,558,610</b>

Long-term investments mature or are redeemable at various dates exceeding 12 months. Fixed income investments include investments in funds with effective interest rates ranging from 1.13% to 6.69% (2020 - 0.80 to 6.69%).

#### 5. Capital Assets

	2021			2020
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Computer hardware	\$ 68,565	\$ 61,130	\$ 7,435	\$ 13,392
Furniture and equipment	111,651	89,137	22,514	26,309
Leasehold improvements	304,452	251,413	53,039	92,611
	\$ 484,668	\$ 401,680	\$ 82,988	\$ 132,312

#### 6. Funds in Trust

The amount represents payments received from a member of the College subsequent to the resolution of a professional conduct ruling arising from complaints of sexual harassment and inappropriate professional behaviour. These funds are held in trust by the College as required by section 85.7 of the Health Professions Procedural Code, and paid to the complainant as reimbursement as the costs are incurred. Any excess of funds not used by the program will be returned to the member of the College.

	2021	2020
Balance, opening	\$ 30,924	\$ 36,949
Disbursements	<b>(6,635)</b>	<b>(6,025)</b>
Balance, ending	<b>\$ 24,289</b>	<b>\$ 30,924</b>

December 31, 2021

7. Restricted Funds

December 31, 2021													
Fund													
Contingency	Entry-to-Practise Exam Development	Fee Stabilization	Investigations and Hearings	New Government Initiatives	Patient Relations	Public Awareness	Office Acquisition	Research	Staff Development	Strategic Plan and CPMF Fund	Unauthorized Practice	Total	
Balance, beginning of year	\$ 150,000	\$ 270,000	\$ 700,000	\$ 200,000	\$ 200,000	\$ 50,000	\$ 300,000	\$ -	\$ 350,000	\$ 300,000	\$ 600,000	\$ 146,000	\$ 3,266,000
Deficiency of revenue over expenditures	-	-	-	-	-	-	-	-	-	(10,000)	(20,080)	-	(30,080)
Balance, end of year	\$ 150,000	\$ 270,000	\$ 700,000	\$ 200,000	\$ 200,000	\$ 50,000	\$ 300,000	\$ -	\$ 350,000	\$ 290,000	\$ 579,920	\$ 146,000	\$ 3,235,920

December 31, 2020													
Fund													
Contingency	Entry-to-Practise Exam Development	Fee Stabilization	Investigations and Hearings	New Government Initiatives	Patient Relations	Public Awareness	Office Acquisition	Research	Staff Development	Strategic Plan and CPMF Fund	Unauthorized Practice	Total	
Balance, beginning of year	\$ -	\$ 270,000	\$ 100,000	\$ 200,000	\$ 200,000	\$ 50,000	\$ -	\$ 2,250,000	\$ 50,000	\$ -	\$ -	\$ 146,000	\$ 3,266,000
Interfund transfers	150,000	-	600,000	-	-	-	300,000	(2,250,000)	300,000	300,000	600,000	-	-
Balance, end of year	\$ 150,000	\$ 270,000	\$ 700,000	\$ 200,000	\$ 200,000	\$ 50,000	\$ 300,000	\$ -	\$ 350,000	\$ 300,000	\$ 600,000	\$ 146,000	\$ 3,266,000

During the prior year, Council approved the reallocation of \$2,250,000 from the Office Acquisition Fund given that project was deemed unlikely to be pursued. These funds were allocated to various other internally restricted funds, including certain funds that were established during the year, to better reflect the anticipated future strategic projects of the College and the funds required to carry out those activities.

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## College of Optometrists of Ontario

### Notes to Financial Statements

December 31, 2021

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#### 8. Retirement Plan

The College sponsors a retirement plan covering all eligible employees. Contributions are based on a percentage of the employee's compensation. During the year, this plan became a registered retirement savings plan ("RRSP").

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#### 9. Commitments

##### (a) Equipment Operating Leases

The College leases office equipment under long-term lease arrangements which require payments for the next four years as follows:

2022	\$	10,126
2023		7,838
2024		3,263
2025		3,263
		<hr/>
	\$	24,490
		<hr/>

##### (b) Premise Operating Leases

The College entered into a ten year lease agreement for their premises effective March 1, 2014. The monthly occupancy cost includes the base lease amount plus the College's share of property taxes and operating costs.

The minimum annual base lease payments for the next three years are as follows:

2022	\$	63,650
2023		63,650
2024		10,608
		<hr/>
	\$	137,908
		<hr/>

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#### 10. Financial Instruments

The College is exposed to various risks through its financial instruments. The College has a risk management framework to monitor, evaluate and manage the principle risks assumed. The College is primarily exposed to market, interest rate, currency and liquidity risk.

##### Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices, whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The investments in publicly traded securities exposes the College to market price risk as these equity investments are subject to price fluctuations. There has been no change in this risk assessment from the prior year.

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## College of Optometrists of Ontario

### Notes to Financial Statements

December 31, 2021

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#### 10. Financial Instruments (continued)

##### Interest risk

Interest risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The College is exposed to interest rate risk through its fixed income investments. There has been no change in this risk assessment from the prior year.

##### Currency risk

Currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. The College is exposed to currency risk from gains and losses due to fluctuations in foreign currency exchange rates on US and international equity investments. There has been no change in this risk assessment from the prior year.

##### Liquidity risk

Liquidity risk is the risk that the College will not be able to meet its obligations as they come due. The College is primarily exposed to liquidity risk through accounts payable, accrued liabilities and government remittances payable. The College meets its liquidity requirements by preparing and monitoring forecasts of cash flows from operations, anticipating investing activities and holding assets that can be readily converted into cash. There has been no change in this risk assessment from the prior year.

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#### 11. TWS Subsidy

The College received the Temporary Wage Subsidy ("TWS") from the Government of Canada during the year. The total amount of government assistance received was \$nil (2020 - \$20,825). Management of the College has determined that the College does not have an obligation to repay the Government of Canada for this subsidy as they have determined that the College has met all applicable eligibility criteria.

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#### 12. COVID-19

On March 11, 2020, the World Health Organization declared the outbreak of the novel strain of COVID-19 pandemic resulting in governments worldwide enacting emergency measures to combat the spread of the virus.

In response to pandemic, the College allowed for deferrals on its annual registration fees, suspended the collection of its professional corporation fees, and implemented other measures in an attempt to decrease expenses.

The pandemic could result in future economic uncertainties, which would impact the operations and cash flows of the College in future years.

## BRIEFING NOTE

Audit/Finance/Risk Committee – June 2022

### Subject

Draft Finance Policy – Reserve Funds

### Background

The Financial Reserve Funds policy was developed to clearly set out the level of reserves the College needs to maintain in order to meet its legislative requirements in case there are unexpected expenses or financial shortfall. This document will complement the Finance Investment Policy which defines the management and investment of both operating and reserve funds held by the College.

The Finance Policy – Reserve Funds also addresses one of the measurement domains identified in the Ministry of Health's College Performance Management Framework (CPMF).

### Considerations

- The Canada Revenue Agency publication IT 496-R section 9 states that accumulating surplus funds more than its current needs may affect the association's status as a tax-exempt nonprofit organization.
- Generally, it is recommended that an organization carry 6-12 months of their current operating expenditures as reserve.

### Decision(s) for Council

- To approve the Finance Policy for Reserve Funds

### Supporting Materials

- Draft Finance Policy – Reserve Funds

### Contact

- Deborrah Anne Lim, Manager – Finance and Office Administration

## POLICY

Type:	FINANCE		
Name:	RESERVE FUNDS		
Status:	Draft	Version:	1.0
Date Approved:		Date Revised:	

### A. PURPOSE

The purpose of this policy is to establish guidelines for maintaining reserve funds to provide for planned and unplanned future needs. This policy will be implemented in conjunction with Finance – Investment Policy and is intended to support the goals in strategic and operational plans.

There are two types of reserve funds :

1. Restricted funds
2. General reserve (surplus funds)

### B. DEFINITION

#### RESTRICTED FUNDS

These are internally restricted funds that are associated with the College's specific needs or strategic activities. The funds are approved by the Council based on estimates proposed by the College. (see Appendix 1)

Funds can be adjusted as College's operational needs require, subject to Audit/Finance/Risk Committee recommendation and Council approval.

#### GENERAL RESERVE (SURPLUS FUNDS)

These funds are set aside to have adequate unrestricted cash in addition to the operating bank balances used for the immediate 12-month period.

The general reserve is intended to provide an internal source of funds for circumstances such as:

- Unanticipated loss of income or temporary cash shortfalls
- One-time unbudgeted expense (>\$25,000)
- Cost due to unexpected events
- Immediate capital acquisition
- Future liabilities if College must cease its operations

The target general reserve is between 50% and 75% of the annual budgeted operating expenses. The Audit/Finance/Risk Committee will make a recommendation to Council each year for the target amount, in line with annual financial planning.

## **C. FUND ACCESS**

1. The College staff can access restricted funds as per the allocation approved by the Council. Any additional funding needs for specific project must be presented to the Audit/Finance/Risk Committee and request approval from the Council.
2. Use of general reserve (surplus funds) require the following steps:
  - 2.1 The College staff will report to the Audit/Finance/Risk Committee the need for access to general reserve funds and confirm that the use is consistent with the purpose of the reserves as described in this policy.
  - 2.2 Establish the availability of any other sources of funds before using reserves
  - 2.3 Determine the period that the funds will be required and replenished to restore to the target minimum amount.
  - 2.4 Request for Council approval upon recommendation by the Audit/Finance/Risk Committee

## **D. REPORTING AND MONITORING**

The Registrar is responsible for ensuring that the Reserve Funds are maintained and used only as described in the policy. The Registrar and support staff will maintain records of the use of funds and plan for replenishment, if required. Staff will provide regular reports to the Audit/Finance/Risk Committee and Council.

## **E. REVIEW OF POLICY**

This policy will be reviewed every other year by the Audit/Finance/Risk Committee, or sooner if warranted by internal or external events. Changes to this policy are subject to the direction of Council upon endorsement of the Audit/Finance/Risk Committee.

## **F. RELATED DOCUMENTS**

Finance – Investment Policy  
College's Strategic Plans

## RESTRICTED FUNDS

	PROPOSED ACTIVITIES	ALLOCATION
1	Strategic Plan and CPMF Fund	\$ 600,000.00
2	Research	\$ 350,000.00
3	Public Awareness	\$ 300,000.00
4	Staff Development	\$ 300,000.00
5	Fee Stabilization	\$ 700,000.00
6	Contingency Reserve	\$ 150,000.00
7	Entry-to-Practice Exam Development	\$ 270,000.00
8	Investigations and Hearings	\$ 200,000.00
9	New Government Initiatives	\$ 200,000.00
10	Patient Relations	\$ 50,000.00
11	Unauthorized Practice	\$ 146,000.00
	<b>TOTAL</b>	<b>\$ 3,266,000.00</b>



## BRIEFING NOTE

Council meeting – June 2022

### Subject

The 2022 Optometry Examining Board of Canada (OEBC) written exam and OSCE as one of two standards assessment examinations set or approved by the College for registration purposes.

### Background

The Registration Committee continues to have confidence in candidates who have successfully challenged the OEBC written exam and OSCE with respect to entry-level competence and therefore, public safety.

Paragraph 7 of s. 2(1) of the Registration Regulation (837/93) as amended under the *Optometry Act, 1991*, reads as follows:

“The applicant must meet the criteria set out in one of the following subparagraphs:

- i. successful completion, not more than three years before applying for registration, of the standards assessment examinations set or approved by the College...”

The Registration Committee considers which standards assessment examination for the College Council to approve on an annual basis.

There have been many positive steps undertaken by OEBC since 2020 beginning with the installation of its new CEO in May 2020. For example, the OEBC Board approved policies to direct OEBC’s CEO to create and maintain criteria for the best means (live patient, standardized patients, and models) to measure the specific entry-to-practice competencies. Also seen as a positive step forward is OEBC inviting the Registration Committee to review and provide comments on its RFP, observe its September 2020 and Spring 2022 OEBC exam OSCEs, OEBC Board’s unanimous support to integrate technical skills into the OSCE starting in the Spring of 2022, and OEBC’s effort to update the OEBC exam blueprint using the most recent National Competency Profile.

### Decision for Council

To approve the 2022 OEBC written exam and OSCE as one of two standards assessment examinations for registration purposes.

### Contact

Hanan Jibry, Deputy Registrar

## BRIEFING NOTE

Council meeting – June 2022

### Subject

The 2022 National Board of Examiners in Optometry (NBEO) exam as a standards assessment examination set or approved by the College for registration purposes.

### Background

The Registration Committee continues to have confidence in candidates who have successfully challenged the NBEO examination with respect to entry-level competence and therefore, public safety.

Paragraph 7 of s. 2(1) of the Registration Regulation (837/93) as amended under the *Optometry Act, 1991*, reads as follows:

“The applicant must meet the criteria set out in one of the following subparagraphs:

- I. successful completion, not more than three years before applying for registration, of the standards assessment examinations set or approved by the College...”

The Registration Committee considers which standards assessment examination for the College Council to approve on an annual basis.

In January 2019, the College Council approved the NBEO exam. A review of Part III of the NBEO exam which comprises the clinical portion by NBEO, concluded in 2020 with a preliminary exam blueprint (please see enclosed) and the plan to have each candidate in the remaining two stations perform the following technical skills on a standardized patient:

- Gonioscopy
- Tonometry
- Biomicroscopy
- Dilated Biomicroscopy
- Binocular Indirect Ophthalmoscopy (BIO).

The National Board Examination Review Committee (NBERC) continues to be the independent oversight body responsible for ensuring that the NBEO exam meets all requirements for testing entry-level competencies of optometrists.

In 2020, the College was able to register approximately 30 candidates most of whom were able to challenge the NBEO exam successfully while the remaining approximately 80 candidates were waiting to challenge the re-scheduled OEBC exam at the end of September or early November 2020. There were 59 candidates who challenged the NBEO exam and a total of 134 registrants in 2020, and 62 applicants who challenged the NBEO exam and a total of 131 registrants in 2021.

### Decision for Council

To approve the 2022 National Board of Examiners in Optometry (NBEO) exam as a standards assessment examination for registration purposes.

### Supporting Materials

2020 Preliminary NBEO exam blueprint (Source: *NBEO*)

### Contact

Hanan Jibry, Deputy Registrar

## Blueprint

The blueprint specifies the major competency domains assessed by the exam. The competency domains represent the related sets of knowledge, skills, and abilities required for the safe and effective practice of optometry. The clinical presentation categories specify the topics of the case scenarios to be included in every version of the exam. The weight of the competency domains and clinical presentations specifies the emphasis of each of these elements on the exam.

Competency Domains	Weight
Clinical Assessment and Interpretation	29
Management and Documentation	25
Skills	22
Patient Education	13
Communication and Professionalism	11
Total	100

Clinical Presentations	Weight
Anterior Segment Disease	17
Posterior Segment Disease	16
Glaucoma	14
Systemic Disease	11
Refraction	11
Neuro-Ophthalmic Disease	9
Contact Lenses	8
Binocular Vision	8
Pediatrics	6
Total	100



### PART III EXAM

Patient Encounters  
and  
Performance Skills  
(PEPS)

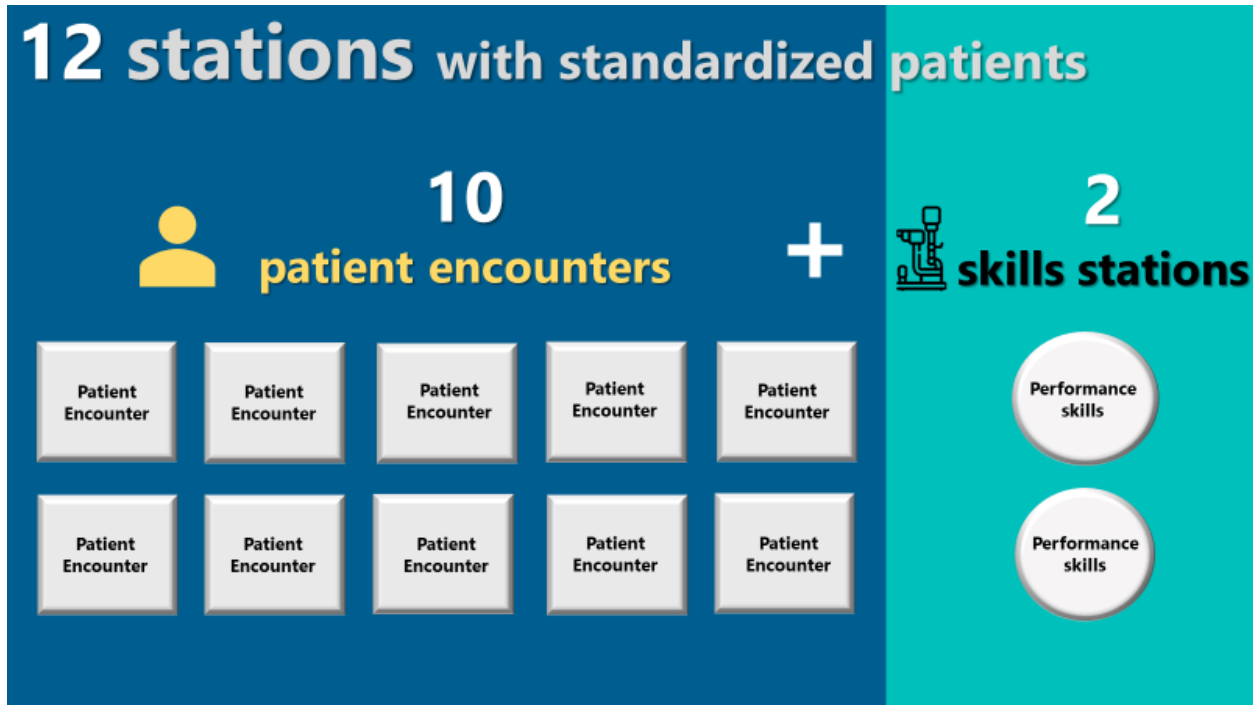
## BLUEPRINT

The blueprint includes five competency domains and nine clinical presentations which will be assessed on the Part III exam. The domain that carries the most emphasis is Clinical Interpretation and Assessment (29%) followed by Management and Documentation (25%). Functionally, this means the ability to interpret and synthesize clinical data will be prioritized over the collection of data or the physical performance of skills. These two domains will be evaluated through the creation of an electronic SOAP note, which will capture clinical decision-making and the generation of a treatment plan. The Skills domain (22%) will be evaluated through the physical performance of five skills on a standardized patient; no patient scenario will be included in these skills-only stations. Patient Education will comprise 13% of the exam and the candidate will be evaluated on the ability to provide information to the patient in a clear and understandable manner. Communication and Professionalism (11%) includes treating the patient with respect, sharing and receiving information in an effective manner, and collaborating with the patient and other professionals to provide optimal care for the patient.

The clinical presentation categories represent the major groups of diagnoses that an optometrist should be proficient in treating in order to protect the public. Both frequency and criticality were considered in the designation and weighting of the clinical presentations. Additionally, priority was given to those conditions that are life- or vision-threatening if not properly detected and managed.

## Exam Model

The exam model is the functional depiction of the exam and represents how the blueprint will be operationalized. Although multiple versions of the exam will be used, each version will fulfill the requirements set forth in the blueprint. Each competency domain will be addressed by multiple stations, and the clinical presentations will serve as topics for the patient encounters.



The exam will consist of twelve stations. At each of the twelve stations, candidates will interact with a standardized patient. In ten of the stations, candidates will be presented with a clinical scenario in which they will be expected to perform a focused case history, interpret and synthesize clinical data, and generate a management plan. Each candidate will assess patients with conditions which fall into the nine clinical presentation categories included in the blueprint: anterior segment disease, posterior segment disease, glaucoma, refraction, systemic disease, neuro-ophthalmic disease, contact lenses, binocular vision, and pediatrics.

In the remaining two stations, each candidate will perform the following skills on a standardized patient:

- Gonioscopy
- Tonometry
- Biomicroscopy
- Dilated Biomicroscopy
- Binocular Indirect Ophthalmoscopy (BIO)

Additional information regarding details of the stations will be published in the candidate guide, which is currently under development.

## Frequently Asked Questions

### Why is the Part III exam changing?

The Part III exam has historically focused on the physical performance of the skills that comprise an eye exam; however, it is natural that the exam evolves as the profession changes. Based on feedback from stakeholders, and to remain current with contemporary optometry, the Part III exam will shift away from the focus on motor skills to a more comprehensive measurement of optometric practice.

### What are the biggest changes to the Part III exam?

The purpose of the exam is the same—to discern if candidates are competent to enter the safe and effective, independent practice of optometry—but the emphasis of the exam is changing substantially. The exam will focus on the analysis and synthesis of clinical data, and the incorporation of that data into patient management decisions. The majority of the exam (ten of the twelve stations) will focus on clinical scenarios. In the remaining two stations, the candidates will physically perform five essential skills on standardized patients: gonioscopy, tonometry, biomicroscopy, dilated biomicroscopy and binocular indirect ophthalmoscopy (BIO).

### How do we know this new exam will be valid?

Evidence from other testing organizations and best practices within the psychometric community have guided the process of exam development. At every step, the best available evidence was used to make decisions, and extensive attention was given to including diverse perspectives in every decision. The process of pilot testing is central to ensuring the exam is both reliable and valid, and an extensive period of pilot testing is planned.

### How was it determined which skills should be physically performed on the exam?

The process of determining which skills should be performed included many different perspectives from various optometric communities. The stakeholder survey was distributed to members of ARBO and ASCO and identified which skills were valued most highly by stakeholders. The focused job task analysis also provided information about how frequently a select number of skills were performed. The task force, comprised of 12 members who provided broad representation from optometry, discussed the results of the stakeholder survey and the focused job task analysis, and produced a final list of skills to be performed on the exam, which was approved by the Board of Directors.

### When will the new exam be implemented?

The new exam will be initiated at the beginning of an administration cycle (August). The **earliest** the new exam would be implemented is August 2022, but the number and duration of pilot tests required will impact determination of the precise date when the exam will begin. The NBEO will communicate the implementation date as soon as it is finalized.

### Will the current exam be offered concurrently with new exam?

Once the new exam begins administration, the current Part III exam will no longer be offered.

## BRIEFING NOTE

Council meeting – June 2022

### Subject

The 2022 Jurisprudence exam for registration purposes.

### Background

Applicants for registration as optometrists in Ontario are required to successfully complete a Jurisprudence exam set or approved by the College as one of the requirements for registration. The College's Jurisprudence exam is reviewed periodically by College staff and is approved by the College Council on an annual basis.

Paragraph 7.1 of s. 2(1) of the Registration Regulation (837/93) as amended under the *Optometry Act, 1991*, reads as follows:

"The applicant has successfully completed an examination in jurisprudence set or approved by the College ..."

Previously held in-person, the College's Jurisprudence exam transitioned to a remotely proctored online exam in June 2020 due to COVID-19. The online Jurisprudence exam pass rate is comparable to the in-person pass rate with candidates having the added benefit of being able to challenge the exam over the course of a few days at their own time without having to travel to an exam location. Having an online exam also facilitates exam performance reporting. Enclosed are the results of a Jurisprudence Exam Feedback Survey provided to exam candidates in 2021.

### Decision for Council

To approve the 2022 Jurisprudence exam for registration purposes.

### Supporting Materials

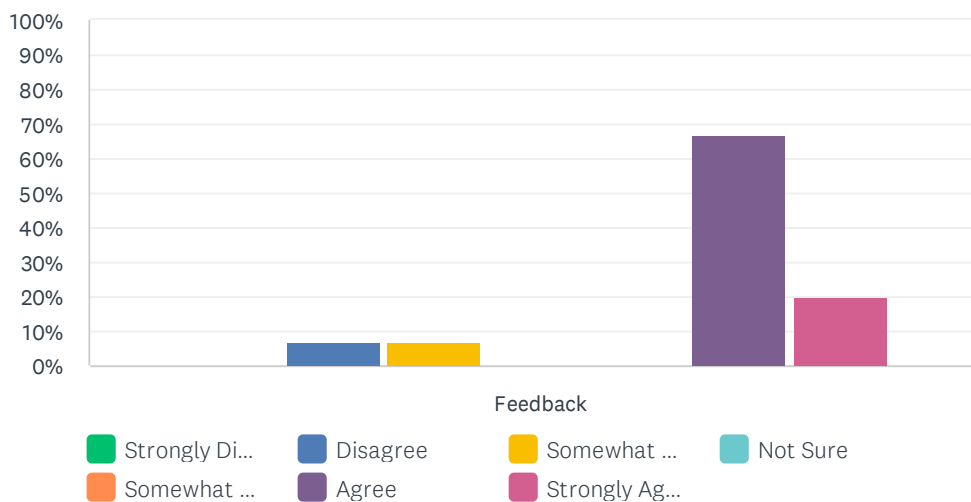
Jurisprudence Exam Feedback Survey results in 2021

### Contact

Hanan Jibry, Deputy Registrar

## Q1 It was easy to access the jurisprudence exam through ProctorFree.

Answered: 15   Skipped: 0

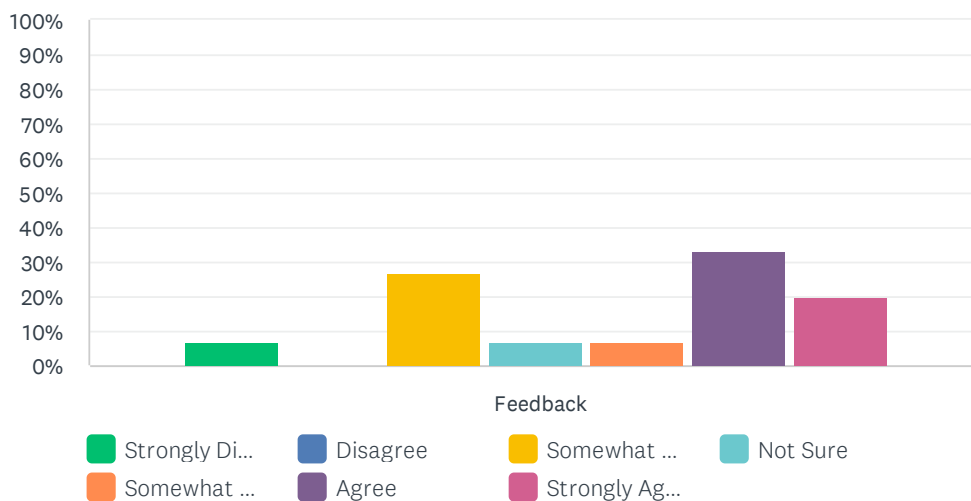


	STRONGLY DISAGREE	DISAGREE	SOMEWHAT DISAGREE	NOT SURE	SOMEWHAT AGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
Feedback	0.00% 0	6.67% 1	6.67% 1	0.00% 0	0.00% 0	66.67% 10	20.00% 3	15	5.73



## Q2 I was satisfied with the technical experience of the online proctored jurisprudence exam.

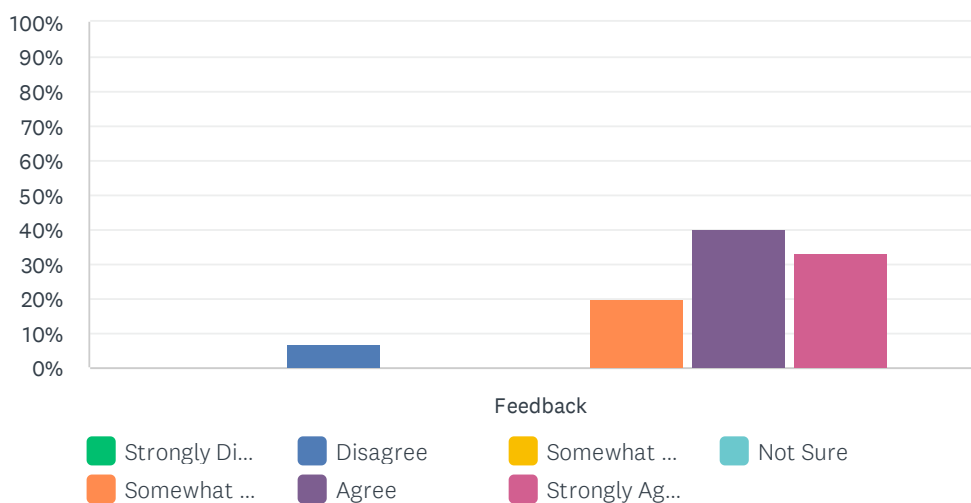
Answered: 15 Skipped: 0



	STRONGLY DISAGREE	DISAGREE	SOMEWHAT DISAGREE	NOT SURE	SOMEWHAT AGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
Feedback	6.67% 1	0.00% 0	26.67% 4	6.67% 1	6.67% 1	33.33% 5	20.00% 3	15	4.87

### Q3 I was satisfied with the guidance from the College regarding the exam (e.g., communication).

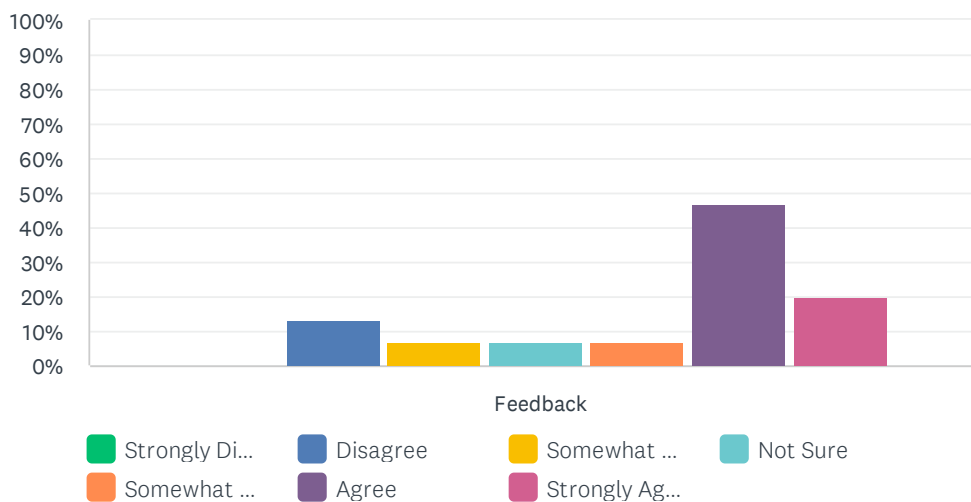
Answered: 15 Skipped: 0



	STRONGLY DISAGREE	DISAGREE	SOMEWHAT DISAGREE	NOT SURE	SOMEWHAT AGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
Feedback	0.00% 0	6.67% 1	0.00% 0	0.00% 0	20.00% 3	40.00% 6	33.33% 5	15	5.87

## Q4 Overall, I had a good experience with the online jurisprudence exam.

Answered: 15 Skipped: 0



	STRONGLY DISAGREE	DISAGREE	SOMEWHAT DISAGREE	NOT SURE	SOMEWHAT AGREE	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
Feedback	0.00% 0	13.33% 2	6.67% 1	6.67% 1	6.67% 1	46.67% 7	20.00% 3	15	5.27

## Q5 Please leave any comments/feedback on any aspect of your experience with the jurisprudence exam.

Answered: 5   Skipped: 10

#	RESPONSES	DATE
1	Online multiple choice exam takes multiple weeks to release results doesn't make sense	9/9/2021 11:20 AM
2	See #2 for details.	9/3/2021 10:22 AM
3	Thank you to the College staff for being accommodating and responding quickly following the issues I had with my initial attempt of the exam.	6/9/2021 4:08 PM
4	I prefer in-person examinations to online ones, purely due to the possibility of experiencing technical difficulties.	3/20/2021 12:06 PM
5	Amazing. Thank you	3/17/2021 12:49 PM

## STRATEGIC PLAN 2022 - 2025

THIS SECTION REPORTS THE COLLEGE'S NEXT STRATEGIC PLAN AS EMERGED FROM THE COLLEGE'S RETREAT

### OUR MISSION

*Who are we? Why are we here?*

*To regulate Ontario's Doctors of Optometry in the public interest*

### OUR VISION

*Where are we headed? What is Mission Accomplished?*

*To ensure that the public understands, trusts and has confidence in optometrists.<sup>1</sup>*

<sup>1</sup> "Doctors of Optometry" is placed in the Mission on the basis that the public (in the Vision) is more likely to use the term "optometrists"

## OUR VALUES

*What is important to us? How do we act to fulfil Mission and realize Vision?*

### Approachability

We create and nurture a welcoming and respectful environment and a safe space for people to be themselves and say what is on their minds without fear.

### Integrity

We make decisions that affect others as though the roles were reversed. We keep our word.

### Transparency

We say what we mean. We mean what we say. We harbour no ulterior motives or hidden agendas.

### Accountability

We work diligently to achieve stated objectives. We take ownership of the quality of our work and of our discussions. We follow through on the commitments we make within a reasonable time.

### Collaboration

We work together to create Synergy where the results of our combined efforts exceed the sum of our individual contributions.

### Diversity, Equity and Inclusion

We endeavour to prevent and correct unconscious bias, overt discrimination and obstacles to equitable participation and influence. We ask, "In everything we do, does everyone feel welcome, appreciated, safe, heard and fairly treated?" ...

- in regulation – in the design of rules and in the resolution of complaints
- within the College – Council and staff, and
- in Optometry practices.

## OUR STRATEGIC FRAMEWORK



## OUR STRATEGIES 2022-2025

*How will we fulfill Mission and realize Vision?*

### 1. BROADEN STAKEHOLDER ENGAGEMENT

*Why?*

The College's environmental scanning reveals opportunities to improve stakeholder engagement.

For example:

- many members of **the public** seem to be confused or ill-informed about optometry, including what to expect of a visit to the clinic (standards) and why, when and how to submit their concerns or complaints to the College
- the term "College" may lead many members of **the public** to think that we are an education institution
- **The public** should be aware of and provide feedback on the services that the College provides that include connecting patients to optometrists, the therapy fund through the Patient Relations Committee and, of course, addressing complaints against optometrists
- many **optometrists** seem to interact with the College with a sense of apprehension; there appear to be opportunities for many registrants to develop a more positive view of the value of regulation as relevant, and indeed beneficial, to them and to their practices.

*What?*

The College will enhance:

- **the public's** understanding of the role and value of optometrists, and
- **optometrists'** recognition of the relevance and value of the regulation of their profession.

*How?*

College staff are in the process of improving and enhancing communications and stakeholder engagement to these ends.

## 2. DEVELOP AND CARRY OUT A RESEARCH AGENDA

- Why?* Data-based policy-making and decision-making, which are fed by research, serves the public interest by enabling better targeting of efforts to improve patient outcomes and the regulation of the profession.
- What?* The College will advance and fund research that is relevant to the regulatory world and to the profession that it governs.
- How?* The College is developing a research initiative suitable for a medium-sized regulator. It is advancing its own internal research projects and has established a Research Steering Group that is creating metrics and a process to receive, assess, approve and provide research grants in the public interest with an emphasis on relevant subjects that are unlikely to already have a source of funding. The Steering Group will consider potential research topics that arose during the strategic planning process.

## 3. ENSURE THE PUBLIC'S ACCESS TO CARE

- Why?* There are factors that affect the public's access to care such as economic and demographic considerations and how and where optometric services are provided. Good care not only provides the patient with better quality of life. There is evidence that it also enables the person to be a healthier and more productive contributor to society.
- What?* Support efforts to provide the public with greater access to optometric services.
- How?* Facilitate and share research to better understand factors that impair access to care. Establish a multidisciplinary, multistakeholder think tank to explore solutions. Provide other forms of  
  
in the public interest.



#### 4. ENHANCE DIVERSITY, EQUITY AND INCLUSION (DEI)

*Why?* Equitable organizations are especially effective by respecting the unique needs, perspectives and potential of their team members and members of the public. Diverse and inclusive workplaces earn deeper trust and greater commitment.

In the case of **the College**, DEI contributes to the commitment and collaboration among Council members and staff members, between Council and staff and with the general public. It also deepens the public's and optometrists' confidence in regulation.

DEI makes the **practice of optometry** more successful as it taps into a broader market for high quality employees, deepens employee loyalty and contributes to the public's confidence in the optometrists' services.

DEI serves **the public interest** because it:

- makes regulation and Optometry representative of Ontario's population
- enhances the public's confidence and feeling of inclusion in the College and optometrists
- enhances the public's confidence in regulation

DEI is an objective that the College has reported in its CPMF as being incomplete.

*What?* Examples of DEI risks to eradicate in the contexts of regulation and professional practice include unconscious bias, overt discrimination and obstacles to equitable participation and influence. A key question to ask is, *"In everything we do, does everyone feel welcome, safe, heard and fairly treated?"*

The College will add Diversity, Equity and Inclusion to its list of stated Values and promote adherence at Council, in the College's operations and in optometrists' professional practices.

*How?* In 2022, the College will apply Appreciative Inquiry to creatively design and build ways to pragmatically promote and reflect the principles of diversity, equity and inclusion. The College is considering an independent DEI audit to objectively identify necessary and/or possible ways to improve. The CPMF asks that colleges assess their structures and practices from a DEI perspective, and these measures will be designed to do just that.

The College will consider input from the Strategic Planning process of examples of what DEI looks like in College and Optometry settings.

To achieve DEI, the College will consider:

- policies to support DEI to formalize and achieve DEI
- adequate resourcing
- adoption of clear, inclusive language in all that it does
- encouraging broad representation among those who seek election to Council
- expanding the College's multi-lingual capacity amid its staff
- continual formative/preventative education opportunities to Council, staff and optometrists.

## 5. CONSTRUCTIVELY IMPLEMENT GOVERNANCE REFORM

- Why?* The government of Ontario is considering significant governance reform for health sector regulators. It is important to implement reforms in a way that enhances protection of the public interest and the public's confidence in regulation and in the regulated professions. The College is uniquely positioned to contribute to this success.
- What?* The College will respond and contribute to the successful implementation of governance reforms readily, willingly, constructively and with agility and resilience.
- How?* The College will proactively collaborate with the government and with other health sector regulators on implementation including in public communication and in the application of
- also in the process of advancing its own research project that assesses the structures and practices of Ontario's 26 health regulatory colleges. Data from this project will be used to orient future governance reforms in an evidence-based manner.

## BRIEFING NOTE

Council Meeting – May 2022

### Subject

Infection Prevention and Control in Optometry

### Background

In 2020, the Clinical Practice Panel (CPP) created a Return-to-Work document to provide guidance to members during the COVID-19 pandemic. The document has been updated over the last two years to reflect changing public health guidelines. As we transition from the pandemic to life after COVID-19, CPP voted to eliminate the Return-to-Work document at its last meeting. In its place, CPP has updated OPR 4.7 Infection Control in the Optometric Office and will create an Infection Prevention and Control (IPAC) resource webpage. This webpage will provide IPAC guidance to members regarding diagnostic equipment and in public spaces.

### Decision(s) for Council

To approve the addition to OPR 4.7 Infection Control in the Optometric Office.

### Considerations

- A more prescriptive document on IPAC practices in optometry may be preferred by some members; however, the Clinical Practice Panel did not feel this was required since many existing resources, including local public health units, are readily available to members to use at their own discretion.

### Supporting Materials

- Updated OPR 4.7 Infection Control in the Optometric Office

### Next Steps

- Staff to draft IPAC resource page for College website with guidance from the Clinical Practice Panel.

### Contact

- Dr. Violet Zawada Kuzio, Practice Advisor

## 4.7 Infection Control in the Optometric Office

### Description

Within all health care facilities there is a risk of transmission of infectious agents. Standards demand that all health care workers must mitigate that risk by being educated and proactive in the area of infection control. Documents and guidelines on the topic of infection control are published and periodically updated by government agencies, health care groups and academic institutions. All optometrists must be cognizant of current information on infection control and take appropriate measures within their practices.

### Regulatory Standard

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

- 11.** Failing to refer a patient to another professional whose profession is regulated under the *Regulated Health Professions Act, 1991* when the member recognizes or should recognize a condition of the eye or vision system that appears to require such referral.
- 14.** Failing to maintain the standards of practice of the profession.
- 39.** Engaging in conduct or performing an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, unprofessional or unethical.

### Professional Standard

Optometrists must take reasonable and appropriate measures to minimize the risk of contamination and subsequent transmission of infectious agents within their professional practices.

**Optometrists should follow the recommendations of their local public health units.**

Last Reviewed: ~~December 2016~~ May 2022

First published: April 2011

Revised: February 2013

April 2014

May 2022

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# 9-11 / UPCOMING MEETINGS

9. List of Acronyms

10. Upcoming Council Meetings

a. September 16, 2022

b. December 9, 2022

11. Adjournment

## 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)

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 <b>Note:</b> the College of Optometrists of Ontario does not have an acronym
COPE	Council on Optometric Practitioner Education	Accredits continuing education on behalf of optometric regulatory boards
COS	Canadian Ophthalmological Society	Society whose mission is to assure the provision of optimal eye care to Canadians
CPD	Continuing Professional Development	A quality assurance program
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>

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	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



Acronym	Name	Description
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
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

Acronym	Name	Description
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
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

Acronym	Name	Description
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

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