



## 105<sup>th</sup> Council Meeting

Friday, September 10, 2021 – 10:00 a.m. to 12:00 p.m.

### Teleconference via Zoom

Please contact the College at [info@denturists-cdo.com](mailto:info@denturists-cdo.com)  
to receive the public meeting access information.

## AGENDA

Item	Action	Page #
<b>Public Meeting – 10:00 a.m. to 11:00 a.m.</b>		
<b>1. Call to Order</b>		
<b>2. Approval of Agenda</b>	Decision	<b>1</b>
<b>3. Declaration of Conflict(s)</b> Comments on Conflict of Interest Rebecca Durcan, College Counsel, Partner, Steinecke Maciura LeBlanc	Declaration	
<b>4. College Mandate</b>	Information	<b>3</b>
<b>5. Consent Agenda</b>	Decision	
5.1 Minutes of the 104 <sup>th</sup> Council meeting held on June 18, 2021		<b>5</b>
5.2 Feedback Survey Results from the 104 <sup>th</sup> Council meeting held on June 18, 2021		<b>10</b>
5.3 Executive Committee Report		<b>17</b>
5.4 Inquiries, Complaints and Reports Committee Report		<b>18</b>
5.5 Discipline Committee Report		<b>20</b>
5.6 Fitness to Practise Committee Report		<b>21</b>
5.7 Patient Relations Committee Report		<b>22</b>
5.8 Quality Assurance Committee – Panel A Report		<b>24</b>
5.9 Quality Assurance Committee – Panel B Report		<b>25</b>
5.10 Registration Committee Report		<b>26</b>
5.11 Qualifying Examination Committee Report		<b>27</b>
5.12 Qualifying Examination Appeals Committee Report		<b>29</b>
5.13 Correspondence: Office of the Fairness Commissioner:		
5.13.1 Full Compliance (Provisional) Status Applied to the CDO Registration Practices		<b>30</b>
5.13.2 Risk Informed Compliance Status FAQs		<b>33</b>
5.14 President's Report		<b>39</b>
5.15 Registrar's Report		<b>42</b>

5.16 Financial Report Memo and YTD Income - Expenses – April 1, 2021 to July 31, 2021		<b>44</b>
<b>6. Strategic Vision for the Coming Year</b> Kris Bailey, President 6.1 Briefing Note 6.2 CDO Strategy Map 2017-2020 6.3 Strategic Plan 2017-2020 – Key Performance Indicators Report 6.4 <a href="#">College Performance Measurement Framework (CPMF) Report</a> 6.5 CPMF Action Items – March 2021	Discussion/ Decision	<b>46</b> <b>48</b> <b>49</b> <b>(Link)</b> <b>90</b>
<b>7. Vaccination Status, Re-Introduction of In-Person Meetings; Re-Opening of the CDO Office</b> 7.1 Briefing Note 7.2 Letter from Rebecca Durcan, Steinecke Maciura LeBlanc	Decision	<b>93</b> <b>96</b>
<b>8. College Representation on the Tri-College Amalgamation Transition Oversight Committee</b> 8.1 Briefing Note	Decision	<b>99</b>
<b>9. CDO Policy on Observance of September 30, 2021 – National Day for Truth and Reconciliation</b> 9.1 Briefing Note 9.2 Federal Statutory Holiday: National Day for Truth and Reconciliation	Discussion/ Decision	<b>101</b> <b>102</b>
<b>10. The New Council Member Mentoring Program</b> 10.1 Briefing Note 10.2 Draft Program	Decision	<b>103</b> <b>105</b>
<b>11. Proposed Revision to the Patient Relations Committee Terms of Reference</b> 11.1 Briefing Note 11.2 Proposed Revision to the Terms of Reference (Draft)	Decision	<b>106</b> <b>107</b>
<b>12. Other Business</b>		
<b>13. Upcoming Meeting Dates</b> 106 <sup>th</sup> Council Meeting – December 10, 2021 107 <sup>th</sup> Council Meeting – March 11, 2022 108 <sup>th</sup> Council Meeting – June 17, 2022		
<b>14. Adjournment</b>		
<b>Governance Training Workshop – 11:00 a.m. to 12:00 p.m.</b>		
<b>Inclusive Leadership</b> Lenworth Wallace, Manager, Learning, Canadian Centre for Diversity and Inclusion (CCDI)		<b>109</b>



## **MISSION STATEMENT**

The mission of the College of Denturists of Ontario is to regulate and govern the profession of Denturism in the public interest.



## MANDATE AND OBJECTIVES

Under the *Regulated Health Professions Act 1991*, the duty of each College is to serve and protect the public interest by following the objects of the legislation. The objects of the College of Denturists are:

1. To regulate the practice of the profession and to govern the members in accordance with the health profession Act, this Code and the *Regulated Health Professions Act, 1991* and the regulations and by-laws.
2. To develop, establish and maintain standards of qualification for persons to be issued certificates of registration.
3. To develop, establish and maintain programs and standards of practice to assure the quality of the practice of the profession.
4. To develop, establish and maintain standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among the members.
  - 4.1 To develop, in collaboration and consultation with other Colleges, standards of knowledge, skill and judgment relating to the performance of controlled acts common among health professions to enhance inter-professional collaboration, while respecting the unique character of individual health professions and their members.
5. To develop, establish and maintain standards of professional ethics for the members.
6. To develop, establish and maintain programs to assist individuals to exercise their rights under this Code and the *Regulated Health Professions Act, 1991*.
7. To administer the health profession Act, this Code and the *Regulated Health Professions Act, 1991* as it relates to the profession and to perform the other duties and exercise the other powers that are imposed or conferred on the College.
8. To promote and enhance relations between the College and its members, other health profession colleges, key stakeholders, and the public.
9. To promote inter-professional collaboration with other health profession colleges.
10. To develop, establish, and maintain standards and programs to promote the ability of members to respond to changes in practice environments, advances in technology and other emerging issues.
11. Any other objects relating to human health care that the Council considers desirable. 1991, c. 18, Sched. 2, s. 3 (1); 2007, c. 10, Sched. M, s. 18; 2009, c. 26, s. 24 (11).



## 104<sup>th</sup> Council Meeting Teleconference

Held via Zoom

June 18, 2021 – 10:00 a.m. to 12:00 p.m.

### MINUTES

Members Present:

Kris Bailey  
Alexia Baker-Lanoue  
Abdelatif Azzouz  
Michael Bakshy  
Lileath Claire  
Norbert Gieger  
Elizabeth Gorham-Matthews  
Paul Karolidis  
Garnett A. D. Pryce  
Gaganjot Singh  
Arie van Wijngaarden  
Joseph Whang

- President
- Vice President

Regrets:

Christopher Reis

Invited Guests:

Keith Collins  
Anita Kiriakou  
Barbara Smith  
Michael Vout, Jr.  
Hanno Weinberger  
Deanna Williams

Legal Counsel:

Rebecca Durcan, Steinecke, Maciura and LeBlanc

Staff:

Glenn Pettifer, Registrar and CEO  
Megan Callaway, Manager, Council and Corporate Services  
Catherine Mackowski, Manager, Professional Conduct  
Roderick Tom-Ying, Manager, Registration and Qualifying Examinations

**1. Call to Order**

The President, called the meeting to order at 10:05 a.m.

**2. Introduction of Guests and Remarks**

Invited guests, Dianna Williams, Anita Kiriakou, and Hanno Weinberger, were introduced and remarks were made regarding retiring Council and Committee members, Keith Collins, Barbara Smith, and Michael Vout, Jr.

**3. Introduction of Council Members**

Returning Council member, Abdelatif (Latif) Azzouz, newly elected Council members, Elizabeth (Beth) Gorham-Matthews, and Joseph (Joey) Whang, and new public appointees, Michael Bakshy, and Arie van Wijngaarden, and were introduced.

**4. Approval of Agenda**

**MOTION:** To approve the Agenda as presented.

**MOVED:** N. Gieger

**SECONDED:** A. Baker-Lanoue

**CARRIED**

**5. Declaration of Conflict(s)**

Comments on conflict of interest were made by Ms. Rebecca Durcan, College Counsel. No conflicts of interest were declared.

**6. College Mandate**

The President drew Council members' attention to the College Mission and the College Mandate and Objectives, which were provided. Council members were reminded of the mission to regulate and govern "in the public interest", and also of the expectation around meeting preparation and engagement.

**7. Results of Elections – Districts 6, 7 & 8**

**MOTION:** To accept the memo.

**MOVED:** N. Gieger

**SECONDED:** E. Gorham-Matthews

**CARRIED**

**8. Election Officers for 2021-2022**

**MOTION:** That the Executive Committee be composed of 5 members in total.

**MOVED:** A. Baker-Lanoué

**SECONDED:** A. Azzouz

**CARRIED**

The results of the election of the Executive Committee and Officers for 2021-2021 were:

- Kris Bailey – President – Acclaimed
- Alexia Baker-Lanoué – Vice-President – Acclaimed
- Lileath Claire – Public Member at Large – Acclaimed
- Norbert Gieger – Professional Member at Large – Acclaimed
- Abdelatif Azzouz – Professional Member at Large – Acclaimed

## 9. Committee Appointments for 2021-2022

**MOTION:** To approve the proposed Slate as presented.

**MOVED:** A. Baker-Lanoué

**SECONDED:** L. Claire

**CARRIED**

## 10. Consent Agenda

Item 10.2: Feedback Survey Results from the 103rd Council meeting was removed from the Consent Agenda.

**MOTION:** To accept the Consent Agenda except for item 10.2.

**MOVED:** A. Azzouz

**SECONDED:** E. Gorham-Matthews

**CARRIED**

Members of Council were invited to provide additional feedback and suggestions regarding improvements for meetings held via Zoom, including the meeting start time, team building, etc.

**MOTION:** To accept item 10.2.

**MOVED:** A. van Wijngaarden

**SECONDED:** G. Pryce

**CARRIED**

## 11. Presentation: Health Professional Regulation in Ontario and Beyond: Current Models and Modernization Initiatives: Where Do the Council Members Fit in?

Ms. Rebecca Durcan, College Counsel, gave a presentation regarding current models and

modernization initiatives in health profession regulation, and where Council members fit in.

## **12. Recap and Update on the Amalgamation Discussion, Governance Modernization, and the Immediate Future**

Ms. Kris Bailey, President, provided a recap and update on the amalgamation discussion, governance modernization, and plans for the immediate future. It was noted that, if all three College's agree, a Transition Oversight Committee will be formed.

It was reported that a letter was received from the Royal College of Dental Surgeons of Ontario inviting one-on-one discussions with each of the three Colleges. A letter was also received from the Ministry of Health inviting ideas and plans for governance modernization.

Prior to the next meeting, Council members were invited to consider the creation of a Governance Committee which could address nominating and amalgamation, or simply the selection of members to participate in the Transition Oversight Committee.

## **13. New Council Member Mentors**

It was reported that new members of Council will be matched with experienced mentors to provide support to them for the next few meetings. Council members are also welcome to contact the President or Registrar with questions at any time.

## **14. Topics for Further Council Training**

Council members were invited to share ideas of topics for further training. It was noted that a survey will be distributed to gather feedback. It was suggested that workshops delivered by the Society of Ontario Adjudicators and Regulators (SOAR) may be a valuable training resource.

## **15. Other Business**

No other business was discussed.

## **16. Next Meeting Date**

The following upcoming meeting dates were provided:

- 105<sup>th</sup> Council Meeting – September 10, 2021
- 106<sup>th</sup> Council Meeting – December 10, 2021
- 107<sup>th</sup> Council Meeting – March 11, 2022
- 108<sup>th</sup> Council Meeting – June 17, 2022

## **17. Adjournment**

**MOTION:** That the meeting be adjourned.

**MOVED:** N. Gieger

**SECONDED:** A. Azzouz

**CARRIED**

The meeting was adjourned at 12:00 p.m.

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Ms. Kristine Bailey  
President

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Date

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Dr. Glenn Pettifer  
Registrar and CEO

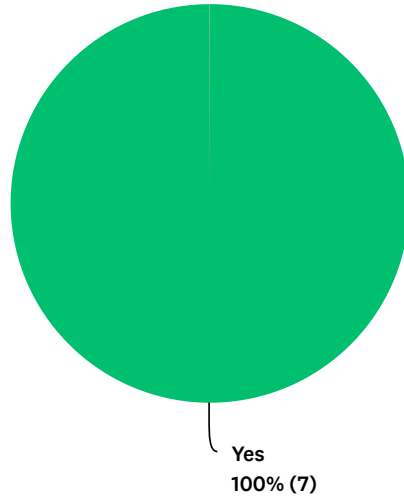
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Date

DRAFT

Q1 I received appropriate, supportive information for this Council meeting.

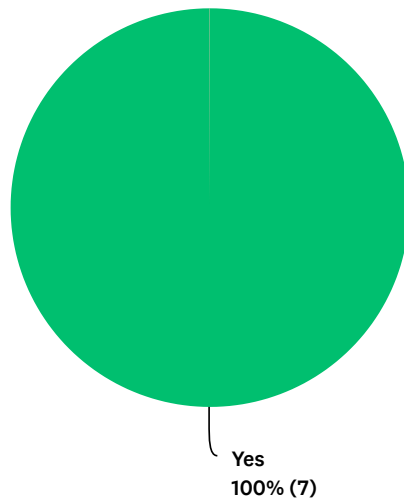
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q2 I received this supportive information in a timely manner.

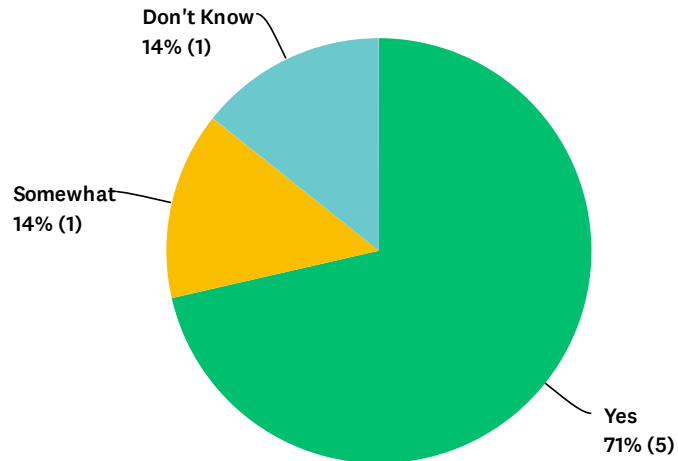
Answered: 7 Skipped: 0



#	COMMENTS	DATE
1	Material was received with adequate time for review and preparation for participation.	6/19/2021 9:43 PM

### Q3 I was prepared for this meeting.

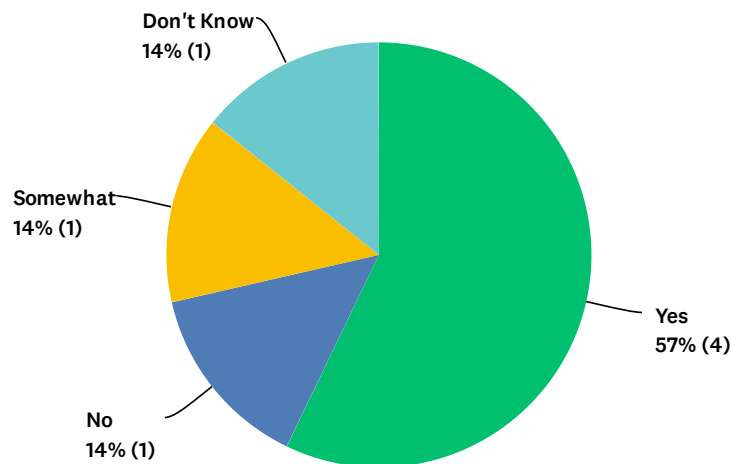
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

### Q4 All Council members appeared prepared for this meeting.

Answered: 7 Skipped: 0



#	COMMENTS	DATE
1	Difficult to tell particularly for new members, etc.	6/19/2021 9:43 PM

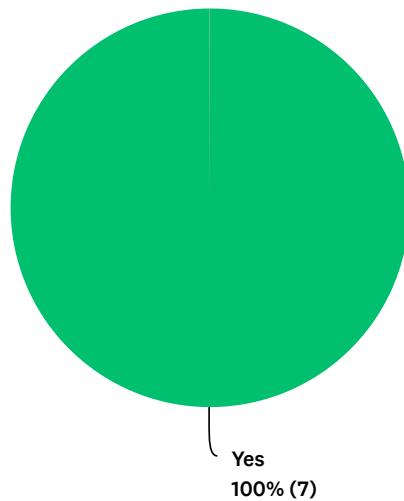
## Q5 List any additional supports or resources that would have helped you better prepare for this meeting.

Answered: 1 Skipped: 6

#	RESPONSES	DATE
1	Background on the departing appointees	6/18/2021 2:31 PM

## Q6 This meeting was effective and efficient.

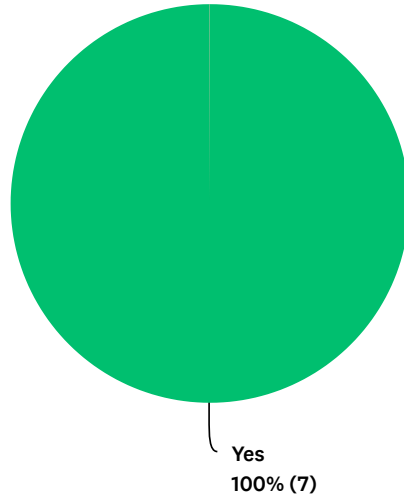
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

## Q7 The objectives of this meeting were achieved.

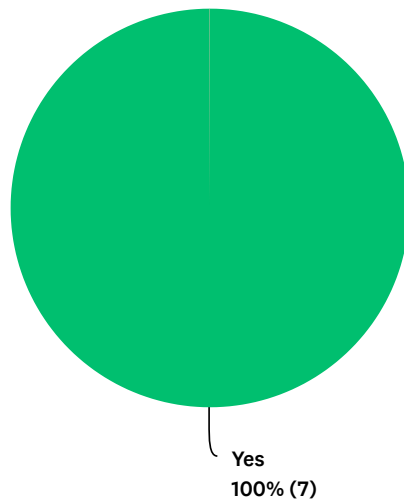
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q8 The President chaired the meeting in a manner that enhanced Council's performance and decision-making.

Answered: 7 Skipped: 0



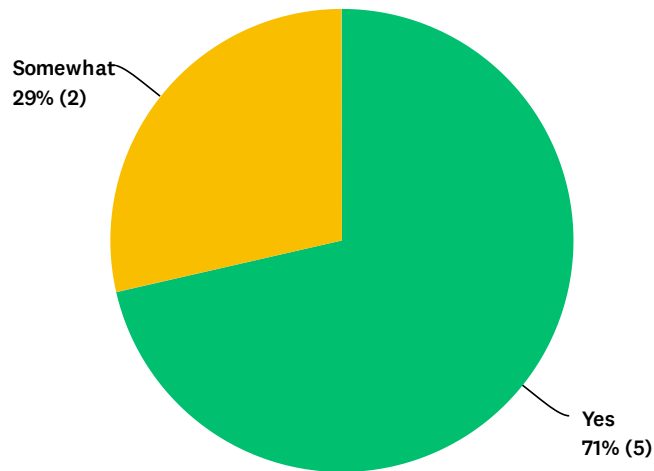
#	COMMENTS	DATE
	There are no responses.	

Q9 I felt comfortable participating in the Council discussions.

Answered: 7 Skipped: 0

Council Meeting Feedback Survey College of Denturists of Ontario  
104th Council Meeting - June 18, 2021

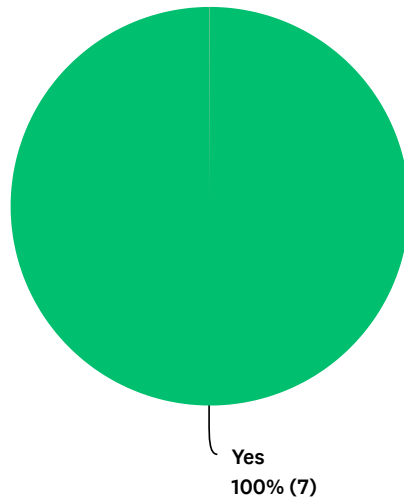
Agenda Item 5.2



#	COMMENTS	DATE
	There are no responses.	

### Q10 The public interest was considered in all discussions.

Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

### Q11 List two strengths of this meeting.

Answered: 5 Skipped: 2

**Council Meeting Feedback Survey College of Denturists of Ontario**  
104th Council Meeting - June 18, 2021

#	RESPONSES	Agenda Item 5.2 DATE
1	1. Clarity of information shared by President and Registrar 2. Introduction of zoom polls for voting.	6/19/2021 9:43 PM
2	Timely	6/18/2021 5:12 PM
3	Materials were provided well in advance of the meeting so there was plenty of time to read them. The zoom link was with the materials so we didn't have to search around to find the link when it was time to join.	6/18/2021 3:51 PM
4	The meeting was very collegial and professional	6/18/2021 2:31 PM
5	Hearing from and seeing experienced guests. A knowledgeable president and CEO	6/18/2021 2:04 PM

## Q12 List two ways in which the technical aspects of this meeting could have been improved.

Answered: 3   Skipped: 4

#	RESPONSES	DATE
1	Although not technical, but considering the online (not in person) meeting, maybe a brief introduction by all. ...particularly for new Council members.	6/19/2021 9:43 PM
2	Fine.	6/18/2021 5:12 PM
3	Meeting over Zoom is not always as good as meeting in person. I find this particularly true as a new member.	6/18/2021 2:31 PM

## Q13 List two ways in which Council meetings could be improved.

Answered: 3   Skipped: 4

#	RESPONSES	DATE
1	Prefer In Person	6/18/2021 5:12 PM
2	Being a new member, I do not really have a baseline with which to compare.	6/18/2021 2:31 PM
3	Taking a short pause when transitioning from a presentation. Encouraging professional members to give insight from the field.	6/18/2021 2:04 PM

## Q14 Additional Comments

Answered: 0   Skipped: 7

#	RESPONSES	DATE
	There are no responses.	

## Q15 Other Questions that Council should be asking in a feedback survey?

Answered: 1   Skipped: 6

Council Meeting Feedback Survey College of Denturists of Ontario  
104th Council Meeting - June 18, 2021

#	RESPONSES	Agenda Item 5.2 DATE
1	What is one thing you, as a member, could do better next meeting?	6/18/2021 2:04 PM



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Executive Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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The Executive Committee did not meet since its last report to Council on June 18, 2021.

One Clinic Name Registration Application was considered and approved since the last Council meeting.

Respectfully submitted by Ms. Kris Bailey  
President and Chair of the Executive Committee



## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Inquiries, Complaints and Reports Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **5 (3 regular ICRC meetings, 2 Health Inquiry Panels)**

### Role of the Committee

The Inquiries, Complaints and Reports Committee supports the College's commitment to the public interest in the receipt of safe, competent, and ethical care and service. It receives and considers complaints and reports concerning the practice and conduct of Registered Denturists.

### Executive Summary

	Complaints	Registrar's Reports	Health Inquiry	HPARB Appeals
Files from previous period	4	3	0	1
New files for period	2	0	1	0
Total Files	6	3	1	1
Cases Considered	2	3	1	0
Decisions Finalized	0	*3	*1	0
Pending	6	*3	*1	1

*\*these matters have been considered but their decisions are currently being drafted so are not finalized at the time of this reporting to Council*

### Decision Finalized:

At the time of reporting, 3 Registrar's reports considered by the ICRC within the reporting time period were finalized, they are being drafted and are currently pending in addition to 1 Health Inquiry matter.

**Pending:**

6 Complaints – All public complaint cases are progressing within the 150-day time period as dictated by the *Regulated Health Professions Act*.

1 HPARB Appeal is pending, the HPARB hearing is scheduled for November 4, 2021.

Respectfully submitted by Ms. Lileath Claire  
Chair of the Inquiries, Complaints and Reports Committee



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Discipline Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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### Introduction: Role of the Committee

The Discipline Committee supports the College's commitment to the public to address concerns about practice and conduct.

### Executive Summary

Since the June 18, 2021 Council meeting the Discipline Committee has not met.

Respectfully submitted by Ms. Elizabeth Gorham-Mathews  
Chair of the Discipline Committee



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Fitness to Practise Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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Activities during the quarter:

There was no activity to report for this quarter.

Respectfully submitted by Mr. Norbert Gieger  
Chair of the Fitness to Practise Committee



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Patient Relations Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **1**

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The Patient Relations Committee (the "Committee") held its first regular meeting since September 2019 on August 10, 2021.<sup>1</sup>

The Committee received an orientation on the legislative mandate and responsibilities of the Committee. The Committee also reviewed the previous work and accomplishments of the Committee including that by the end of 2019 the PRC had developed, and where required, received approval from Council for, among other things:

- An updated [Sexual Abuse Prevention Plan](#)
- [Sexual Abuse Guidelines](#)
- [FAQs for Patients](#) and [for Members](#)
- [Patients' Rights Document](#)
- Expanded Criteria for [Funding for Therapy](#)

The Committee also reviewed outstanding action items and the future work that the Committee reported to Council in September 2019. By way of reminder, in its last substantive report to Council, the Committee reported to Council that its future work would focus on the following:

- Methods to enhance and support sexual abuse prevention education in denturism program curricula;
- Developing baseline competencies for sexual abuse prevention that could potentially be woven into the baseline competencies for denturists;
- Public education possibilities; and
- Methods for evaluating and reporting on the effectiveness of the Patient Relations Program.

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<sup>1</sup> A meeting was held in September 2020 for the sole purpose of reviewing a funding for therapy request.

Although not due to be reviewed until 2023, the Committee reviewed the Terms of Reference to ensure compliance with the RHPA, the capacity of the committee and the College's needs. Proposed revisions to the Terms of Reference have been provided to Council at this meeting for its consideration.

Respectfully submitted by Ms. Alexia Baker-Lanoue  
Chair of the Patient Relations Committee



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Quality Assurance Committee – Panel A**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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### Role of the Committee

Panel A of the Quality Assurance Committee (QAC-A) considers Peer & Practice Assessment reports as an indicator of whether a member's knowledge, skill and judgement meet the Standards of Practice for a Registered Denturist. The Committee also monitors member compliance with the (Continuing Professional Development (CPD) program and develops tools, programs, and policies for the College's Quality Assurance Program.

The QAC-A has not met since its last meeting in the spring. This hiatus in activity for the QAC-A arose because of the resignation of Jennifer Slabodkin, the staff member responsible for supporting the work of the Committee. Over the summer, efforts were concentrated on identifying an individual to continue this work. We were fortunate to engage Christine Hickey to assist us in some of these areas. Initially Chris' focus will be on administering the Peer and Practice Assessment program. Once Chris is fully acquainted with this program, she will be available to assist us with other elements of the QA program as time allows.

In the immediate term, we will be holding an orientation / business meeting for the QAC in September after the Council meeting. There are a number of files that are now ready for the Committee to review.

Respectfully submitted by Mr. Latif Azzouz  
Chair of the Quality Assurance Committee – Panel A



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Quality Assurance Committee – Panel B**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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The Quality Assurance Committee – Panel B did not meet since its last report to Council on June 18, 2021.

Respectfully submitted by Mr. Christopher Reis  
Chair of the Quality Assurance Committee – Panel B



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Registration Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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Activities during the Quarter:

The Registration Committee has not met since its last report to Council on June 18, 2021.

Respectfully submitted by Ms. Elizabeth Gorham-Matthews  
Chair of the Registration Committee



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Qualifying Examination Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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### Activities during the Quarter:

The Qualifying Examination Committee has not met since its last report to Council on June 18, 2021.

### **Summer 2021 Multi-Jurisdictional MCQ Qualifying Examination**

The College of Denturists of Ontario along with the College of Alberta Denturists, and the College of Denturists of British Columbia collaborated to create a common Multi-Jurisdictional MCQ examination for the June 2021 administration.

The MCQ examination was administered remotely in an online format with mandatory (online) remote proctoring. The online format allows the MCQ examination to proceed regardless of changes in the dynamics of the COVID-19 pandemic.

The MCQ was administered on June 22, 2021, with a total of 91 candidates attempting the examination. Of the 91 candidates, 67 candidates were from Ontario, 20 candidates from Alberta, and 4 candidates from British Columbia.

The College's assessment consultant, Dr. Anthony Marini, conducts a complete item analysis after each administration. Items identified as problematic due to low question performance along with incident reports that may have affected a candidate's performance were presented and reviewed by the Committee prior to the release of final candidate scores. Candidate performance reports, detailing the Candidate's score and their individualized feedback will be provided in the first week of September.

<b>June 2021 MCQ – Overall Results</b>	Total	New	Repeat
Number of candidates	91	68	23
Number of successful candidates	62	54	8
Pass rate (expressed as a percentage of new candidates)	<b>79%</b>		

### **Next Administration of the OSCE Qualifying Examination**

The College will be hosting three OSCE administrations this fall on September 18/19, October 23/24, and November 27/28 of this year. The three administrations will assist with clearing a backlog of approximately 120 candidates whose OSCE administration was postponed due to the COVID-19 pandemic.

On September 9, 2021, McMaster University (the administration site for the OSCE examinations) released its policy on COVID-19 Vaccination for visitors to the McMaster campus. The policy requires that **ALL VISITORS** to the McMaster campus be fully vaccinated at the time of visit and that proof of vaccination must be uploaded to the McMaster Health app prior to coming on campus.

Respectfully submitted by Ms. Karla Mendez Guzman  
Chair of the Qualifying Examination Committee



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## COMMITTEE REPORT TO COUNCIL

Name of Committee: **Qualifying Examination Appeals Committee**

Reporting Date: **September 10, 2021**

Number of Meetings since  
last Council Meeting: **0**

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### Activities during the Quarter:

The Qualifying Examination Appeals Committee has not met since its last report to Council on June 18, 2021.

Respectfully submitted by Ms. Lileath Claire  
Chair of the Qualifying Examination Appeals Committee



**FAIRNESS COMMISSIONER**  
COMMISSAIRE À L'ÉQUITÉ

**OFFICE OF THE FAIRNESS COMMISSIONER**  
595 Bay Street, Suite 1201, Toronto ON M7A 2B4

August 24, 2021

Dear Mr. Pettifer,

On April 1, 2021, the Office of the Fairness Commissioner (OFC) launched its new Risk-informed Compliance Framework (RICF). As we have communicated to regulators previously, the first year of the framework will serve as a transitional period during which the OFC will review the historical performance of each regulator and place them in a provisional compliance category. The next phase will involve the assignment of risk categories based on a more detailed analysis.

For your information, the five historical performance indicators that we will consider for the transitional period are:

- 1- The nature and extent of material compliance recommendations that the OFC has issued to the regulator in the last compliance cycle.
- 2- The extent to which the regulator has completed these recommendations and avoided new issues.
- 3- The regulator's observed motivation to work with the OFC on defined compliance objectives.
- 4- The content of decisions issued by the courts or tribunals that discuss the regulator's registration practices.
- 5- The degree to which the regulator's registration processes exhibit the attributes of transparency, objectivity, impartiality and fairness, as demonstrated, for example, by the number of OFC

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recognized “commendable practices” and/or best practices and innovations that the regulator has instituted over time.

Based on our review of how your organization has performed against these indicators, the OFC has determined that the College of Denturists should be assigned a “full compliance” provisional rating.

This means that the regulator has successfully implemented each of the compliance recommendations that the OFC has issued, additional recommendations were not identified, and other criteria have been met.

For your information, and for comparative purposes, the provisional compliance categories that the OFC has allocated to the 39 regulators over which it has jurisdiction are as follows:

**Distribution of Compliance Categories among Regulators**

Compliance Category	Number of Regulators in Category
Full Compliance	32
Substantial Compliance	4
Falls Short of Compliance	3
Totals	39

In the Fall of this year, we will contact you again to gather information about forward-looking risk factors pertaining to the conduct of your registration processes. This information will allow us to allocate a risk

category to your organization once our Risk Informed Compliance Framework is fully in place.

If you have any questions about the contents of this communication, please contact me at [james.mendel@ontario.ca](mailto:james.mendel@ontario.ca).

Sincerely,

James Mendel  
Compliance Analyst



**FAIRNESS COMMISSIONER**  
COMMISSAIRE À L'ÉQUITÉ

**OFFICE OF THE FAIRNESS COMMISSIONER**  
595 Bay Street, Suite 1201, Toronto ON M7A 2B4

## RISK-INFORMED COMPLIANCE FRAMEWORK

### FREQUENTLY ASKED QUESTIONS AND ANSWERS

1. What is the effective date of the new Risk-informed Compliance Framework (RICF) and will there be a transition period to help regulators adjust?

The Office of the Fairness Commissioner (OFC) will launch its new RICE on April 1, 2021, for an initial 12-month transition period. The new scheme will fully come into effect on April 1, 2022.

During the transition period, the OFC's assessment of a regulator's risk profile will be based predominantly on its historical performance. Individual regulators will then be placed in provisional risk categories.

The transition period will also provide an opportunity for those regulators with outstanding OFC recommendations to complete the changes necessary to meet these requirements. Finally, during this time frame, OFC staff will obtain information from regulators on how the forward-looking risk factors, identified in the RICE, apply to their situations.

2. Why is the OFC implementing a new regulatory compliance framework?

For the last few years, the OFC has signaled its intent to develop a RICE. A key objective underlying this scheme is to ensure that the Office's finite compliance resources are focused on those regulators that have not advanced as far as others in developing fair registration practices. To achieve this objective, the OFC has incorporated a number of modern regulator principles into its new compliance framework.

The RICE has been specifically designed to achieve the following three outcomes:

- To enable regulators to more effectively comply with their legal obligations, and to adopt associated best practices, in order to achieve better registration outcomes for all applicants.

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- To promote the identification of targeted risk factors to enable necessary mitigation and remediation efforts.
  - To reduce unnecessary burdens on regulators and OFC staff, recognizing that all public sector organizations operate with constrained resources.
3. How did the OFC select the historical performance indicators and forward-looking risk factors that will apply to regulators?

The OFC selected these factors based on the experience that it has garnered since Ontario's fair access legislation was introduced in 2006, advice from subject-matter experts in the spheres of immigration, regulatory compliance and risk management, and the collective input received from regulators.

The OFC has identified five specific measures to serve as historical performance indicators. These are:

1. The nature and extent of material compliance recommendations that the OFC has issued to the regulator in the last compliance cycle.
2. The extent to which the regulator has complied with these recommendations and avoided new issues.
3. The regulator's observed motivation to work with the OFC on defined compliance objectives.
4. The content of decisions issued by the courts or tribunals that discuss the regulator's registration practices.
5. The degree to which the regulator's registration processes exhibit the attributes of transparency objectivity, impartiality and fairness, as demonstrated, for example, by the number of OFC recognized "commendable practices" and/or other best practices and innovations that the regulator has instituted over time.

The five forward-looking risk factors focus on a regulator's operating environment, stability, overall reliance on third party-service providers and policy considerations.

These factors pertain to:

1. Organizational Capacity.
2. The overall control that a regulator exerts over its assessment and registration processes.
3. The response to emergency situations, such as the Covid-19 pandemic.
4. Over-reliance on Canadian experience requirements.
5. Public policy considerations, specifically:
  - a. critical labour shortages of professionals or tradespersons that involve the regulator, and
  - b. the need to apply inclusion and anti-racism approaches to the regulator's assessment and registration processes.

4. What are the risk categories under the new compliance framework?

There are three risk categories into which a regulator may be placed according to its performance and risk profile.

- *Low* – those regulators whose performance constitutes full compliance with the objectives of fair access legislation and that exhibit a low risk profile.
  - *Moderately Low* – those regulators whose performance constitutes substantial compliance with the objectives of fair access legislation and that exhibit a moderately low risk profile.
  - *Moderate to High* – those regulators whose performance falls short of compliance with the objectives of fair access legislation and that exhibit a medium to high risk profile.
5. What methodology will the OFC employ to place regulators into discrete risk categories?

In determining a regulator's risk category, the OFC will employ a three-step process. It will:

Step 1: Assess the historical performance of a regulator using the five indicators described above.

Step 2: Assess the forward-looking risk factors by determining the likelihood that each risk would occur and the impact of that risk.

Step 3: Determine the cumulative risk category by aggregating the results of the historical performance and forward-looking risk assessments.

6. How will the OFC ensure consistency in the application of risk categories, given the diverse mandates and circumstances of regulators?

While the OFC will refine its risk assessment methodology over time, notably during the first year of operation, the Office will strive to implement a consistent approach. This objective will be achieved by relying on evidence, focusing on relative performance across regulators and by instituting an internal review process.

7. What are the implications to a regulator if it is placed in the moderate to high compliance category?

The risk category attributed to a regulator will determine the relative degree of attention that the OFC applies to the regulator and the appropriate compliance activity or tools used to either monitor the regulator's compliance or bring it to compliance.

The nature and extent of these activities will be based on a compliance continuum. Those regulators that are in the low risk category will receive a "light touch". The OFC will reserve its more focused compliance processes (e.g., more frequent meetings, completion of an action plan, reports and/or audits) for those regulators that are placed in the moderate to high risk category.

8. How does a regulator move out of the moderate to high risk category into a lower one?

The OFC's ultimate goal is for regulators to establish registration practices and processes that are transparent, objective, impartial and fair. The historical performance and forward-looking risk components of the framework provide insight on how regulators are meeting this general duty. Therefore, where a regulator makes progress in addressing its forward-looking risks, the OFC would consider whether the steps taken were sufficient to move the regulator down one or two risk categories. During the transition year, the OFC will further refine this process and provide further information to regulators.

9. Will the regulator have the opportunity to dispute the risk category in which it is placed? How would that work?

The OFC's approach to regulatory compliance will be based on transparency, professionalism and collaboration. The OFC welcomes collaborative dialogue with regulators on issues or concerns about their specific risk category. The OFC will consult with the regulators on a defining such a process. More information will be shared with the regulators at a future date.

10. What are the implications for a regulator that is unable to implement its outstanding OFC recommendations during the transition period?

During the transition period, the OFC's Compliance Analysts will work with their regulators towards implementing any outstanding compliance recommendations. This period will provide the affected regulators with an opportunity to move to a different risk category.

Towards the end of the transition period, the Compliance Analyst will re-assess the risk categorization, in discussion with the regulator. This re-assessment would turn, to a large degree, on the extent to which the regulator has made progress in implementing any outstanding compliance recommendations. On this basis, if a regulator is unable to make any meaningful changes, then the provisional performance compliance category ascribed to a regulator would be confirmed.

11. Will the OFC publicly disclose the risk categories of individual regulators in its annual report or otherwise?

One of the OFC's modern regulator principles is that the office strives to be an accountable regulator that it is prepared to justify its decisions and is open to public scrutiny. The OFC may, therefore, decide to publicly disclose the risk categories of individual regulators, subject to any obligations contained in the *Freedom of Information and Protection of Privacy Act*. If such a decision is subsequently made, the OFC will notify the regulators in question in advance of disclosure. It would not be the OFC's intention to provide such disclosures in the transitional phase of the scheme.

12. Will the OFC exercise its audit powers under this new framework?

The province's fair access legislation affords the OFC with the authority to require a regulator to undergo an audit. The audit process is analogous to an independent investigation conducted by a qualified third-party service provider that the OFC approves.

Typically, such a process would constitute a defined and targeted review of material and persistent deficiencies in a regulator's registration processes. The audit would yield a report with findings and recommendations. Under the legislation, the cost of the audit is borne by the regulator and the final report must be filed with the minister.

Given the significant nature of the audit authority, and consistent with past practice, the OFC will employ this tool only when necessary.

13. Will the OFC modify its risk factors in the future?

The OFC will review the relevance and appropriateness of its forward-looking risk factors on an annual basis. Any decision to modify the risk factors will go through a thoughtful analysis with appropriate consultation.

14. How will the OFC collect the information that it needs to populate its RICF? In particular, will it need to modify the information that it now requests in its Fair Registration Practices Report (RPF)?

Under its current compliance framework, the OFC collects relevant information/data about a regulator's registration practices, challenges and accomplishments through various mechanisms, including the Fair Registration Practices (FRP) report, periodic meetings, the regulator's annual report, council minutes and a review of the organization's website.

During the transition period, the OFC will review these processes to ensure that they align with the RICF. The OFC will then make appropriate modifications to the type and breadth of the data collected and the frequency of the process. These adjustments will be made to:

- ensure that the assessment of regulator risk categories is accurate,
- inform the Office's strategic planning process and priorities, and
- facilitate the evaluation of program efficiency and effectiveness.

15. How will the OFC and Ministry of Health (MOH) ensure that their respective reporting requirements are complementary and do not overlap?

The MOH has recently launched its College Performance Measurement Framework (CPMF), which is a new reporting requirement for health colleges. The MOH and OFC are currently reviewing the parameters of their respective reporting requirements to identify any overlaps and to develop strategies to mitigate any unnecessary administrative burdens.



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To: **Council**

From: **Ms. Kris Bailey**

Date: **September 10, 2021**

Subject: **President's Report**

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***What has been going on?***

***Governance***

1. The vote passed for work to begin on developing a vision and framework for amalgamation at the June Council meetings of The Colleges of Dental Hygienists and Technologists. The next steps are the creation of a Memorandum of Understanding (MOU) between the Colleges; selection of the working group (Transition Oversight Committee) to proceed with the creation of a framework. I will be reporting on this during our September Council Meeting.
2. Correspondence has been received from the President of the College of Dental Surgeons of Ontario requesting a meeting. They are currently working on a progressive strategic plan aimed at serving the public interest aimed at:
  - a. Enhancing precautions, rigorous infection prevention and control;
  - b. Implementing competency-based district elections; and
  - c. Using multi-stakeholder approaches to increase access to oral healthcare in Ontario.

Status... No meeting has been arranged

3. Our new Council Members have been paired up with a Mentor. I hope all goes well!

***Qualifying Examinations and OSCE***

4. Qualifying Exam was held in June 2021 (a unified exam administered by Alberta, British Columbia, and Ontario regulators together). I look forward to a report from the Registrar. The OSCE (practical exam) is planned to be administered in September, October and November to a large back-log of participants (>100).

## **Strategic Plan and Future Focus**

5. As you know, the Strategic Plan timeline ended in 2020. Due to COVID and some incomplete items, the Council decided to have staff work on the completion of the identified items and to bide some time to assess the impacts of the following:
  - a. COVID and impact of IPAC standardization across all oral health colleges – *We are coming out of lock-down but there are still issues with the Delta strain with high transmission rates. Rebecca Durcan will be speaking to Council regarding the legalities of masking and vaccinations.*
  - b. Use of meeting format and tools (Zoom, in person, and hybrid meeting formats; use of meeting tools such as SharePoint and polling on motions) – *Over the past 18 months, we have become adept at using SharePoint, Zoom and the use of polling on motions. Based on the discussion we have related to legal consequences, we will discuss moving forward to “in person” meetings. SharePoint will remain the repository for information and Zoom-like for meetings held virtually.*
  - c. Unified exam format and impact on Qualifying Exams – *see #4 above*
  - d. The outcome of the amalgamation vote – *see #1 above*
  - e. Implementation of College Performance Measurement Framework tools – *in March we reviewed the Performance Measurement Framework and the CDO performance; this is a very useful guide to determining what priorities we need to focus on.*
  - f. Assessment by each Committee to determine format and function in order to add value to the patient experience and to enhance public safety; and
  - g. Any outstanding items from the previous strategic plan.

Given a-g, we will have a discussion on Priorities for this year and what, if any utility, there would be in creating a 5-yr strategic plan at this time.

## **Ontario Public Appointments**

As a reminder, this training session is mandatory for all public appointees who sit on boards of provincial agencies and other provincial entities. The role of the public appointee is to provide strategic direction, provide advice to ministers and resolve disputes. There are circa 3,000 Ontario public appointees, of which 90% are part-time.

The training session has three modules. The first module is governance. This was the most useful as it covered the accountability structure and the direction of authority in Ontario. The highest level of “decision-making” is the legislative assembly (AKA parliament, the legislature or the House), as it makes, passes and repeals laws, debates major issues, examines government policy etc.

The training also covered fiduciary responsibilities and compared not-for-profit, private, and public entities. Within this section, information related to Memorandum of Understanding or Administrative Agreements, oversight of agencies, mandate reviews and risk reporting was covered.

The third module was ethical requirements included transparency, responsibility, efficient use of resources and avoidance of conflict of interest.

I found this training was extremely interesting and poignant. It provided some insight as to what, how and who makes decisions within the government framework. If you have not registered for this course, please contact Megan to do so.



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To: **Council**  
From: **Dr. Glenn Pettifer**  
Date: **September 10, 2021**  
Subject: **Registrar's Report**

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I am pleased to provide this Report to Council for the period June 19 – September 10, 2021. The President has also commented on many of the College activities during this period in her report.

### **Finance**

The Financial Report for the period of April 1 – July 31, 2021 is included in the consent agenda. Expenses are below those anticipated for this point in the fiscal year. Council approved a deficit budget for the current fiscal year. We anticipate a wave of income over the next month as the second instalment for the Certificate of Registration renewal is due by September 30, 2021 and we are currently collecting fees from candidates who will sit the OSCE portion of the Qualifying Examination this fall.

### **Qualifying Examination**

The Multiple Choice (MCQ) portion of the College's Qualifying Examination was administered on June 22, 2021. As with the January 2021 administration of the MCQ examination, this examination was administered in an online format with remote proctoring. This format continues to work well for administration of the MCQ.

This administration of the examination was the first administration of a unified, multi-jurisdictional examination, administered simultaneously by the CDO, the Alberta College of Denturists and the College of Denturists of British Columbia. Rod Tom-Ying has worked tirelessly in bringing this examination to fruition. Members of the profession from Ontario and across the nation contributed greatly to the construction of this examination. This is a great step forward in nationalizing the credentialing process for Denturists.

Administration of the OSCE portion of the examination is scheduled for September 18-19, October 23-24 and November 27-28. This portion of the examination is being offered three times this fall to provide opportunities for individuals who have been waiting since March 2020 to take this portion of the examination. In an examination administration that normally has 30-35 candidates, the total number of candidates for the three fall administrations of the OSCE exam is approximately 120.

This year, this portion of the Qualifying Examination will be offered at David Braley Health Sciences Centre, McMaster University, Hamilton, ON. Enhanced COVID-19 protection protocols and procedures will be employed during these examinations. McMaster University has just released a COVID-19 Vaccination policy that requires **anyone** using McMaster University facilities to be fully vaccinated. This policy will apply to CDO staff, exam assessors, standardized patients, and exam candidates.

On September 9, 2021, McMaster University released further details of its policy on COVID-19 Vaccination for visitors to the McMaster campus. The policy requires that **ALL VISITORS** to the McMaster campus be fully vaccinated at the time of visit and that proof of vaccination must be uploaded to the McMaster Health app prior to coming on campus.

Work on the design of a multi-jurisdictional examination has begun with a committee comprised of members of the profession from across the country. This group is currently tasked with considering the best means of assessing competence in the competencies in the newly revised National Competency Profile.

#### **Document Management Strategy and Development**

We are in the final stages of the document digitization process. Digital files have been uploaded to the College servers and the next task will be to catalogue them in our new File Management software: FileHold. Other than the absence of the banks of file cabinets in the office, members of Council will likely be unaware of this work that is very operational. This project has been capably championed and completed by Megan. This initiative will result in a significant cost saving related to offsite document storage and greater, easier access to the College files.

#### **Registration Renewal**

Approximately 275 of 721 active members elected to pay their Certificate of Registration renewal in two installments. The second instalment is due by September 30, 2021.

#### **Oral Health Colleges Combined COVID-19 IPAC Guidelines**

The College engaged with the other 3 Oral Health Profession Regulatory Colleges (College of Denturists of Ontario, College of Dental Technologists of Ontario, Royal College of Dental Surgeons of Ontario) in a review and revision of the COVID-19 IPAC Guidelines for each College. From this work, a common consistent set of expectations and guidance related to the provision of safe, effective care and service during the COVID-19 Pandemic were developed.

#### **Quality Assurance Program Activities**

Some of the Quality Assurance program elements were put on hold following the departure of Jennifer Slabodkin who was responsible for administering these programs. In the interim, attention was focused on identifying a suitable replacement. We were fortunate to engage Christine Hickey to assist us in some of these areas. Initially Chris' focus will be on administering the Peer and Practice Assessment program. Once Chris is fully acquainted with this program, she will be available to assist us with other elements of the QA program as time allows.

For the fall, we are planning to get the virtual Peer Circle program online. While an in-person experience is ideal, the online format can be used to reach members of the profession who are unable to travel to locations where in-person sessions are offered. This will greatly expand our reach and contact with members of the profession.

The Colleges webinar program serves members of the profession well in gaining Continuing Professional Development credit during the pandemic where in-person meetings or lectures were prohibited. We intend to expand the offerings of the webinar program to include a presentation by Cathi Mietkiewicz on preventing boundary violations in denturist-patient interactions.

#### **COVID-19 Vaccination Access and Other COVID-related initiatives for Registered Denturists**

The College continues to assist Public Health Units in contacting and messaging Registered Denturists in their respective catchments regarding matters related COVID-19 Vaccinations. The College also assisted the Ministry of Health (in conjunction with the DAO) in messaging out to all Registered Denturists regarding the availability of a Provincial Antigen Screening Program that provides free rapid antigen test kits to all oral health professionals free of charge.



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## MEMO

To: **Council**

From: **Dr. Glenn Pettifer, Registrar & CEO**

Date: **September 10, 2021**

Subject: **Financial Report: April 1 – July 31, 2021**

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Income Statement for the period April 1 – July 31, 2021 follows.

I direct your attention to the column “YTD as Percentage of Budget” which indicates the percentage of the budgeted amount that has been spent (or, in the case of income, received). This report covers the first four months of the fiscal year, consequently, one anticipates that approximately 33.3% of a budgeted amount would have been spent. This is not true for all items as some expenses (insurance for example) are lump sum payments during the fiscal year.

On the revenue side, in previous years most of the College’s Registration renewal revenue is captured by the end of the renewal period, April 15. However, this year, the renewal period extends to September 30, 2021, when the second installment of the Registration renewal fee is due. Approximately 62.5% of the entire membership completed their registration renewal in full in spring. Consequently, approximately 37.5% of the membership (approximately 270 members) are left to pay their second instalment by the end of September. This amounts to roughly 128,250.00. Income from the Qualifying Examination to date includes only the Registration Fees for the June 22, 2021, administration of the online MCQ portion of the examination. At the time of writing, we are processing payments for the September 18-19, 2021, administration of the OSCE portion of the Qualifying Examination which will bring in about 152,000.00. An additional 230,000.00 in exam revenue is anticipated from the October and November administrations of the OSCE portion of the Qualifying Examination. This income is balanced against the expenses associated with examination administration and development. Expenses are budgeted in and around 100,000.00 for each administration of the exam. Consequently, we will be close to the cost-recovery target related to examination administration.

There are no items of note or concern in this variance report. Most items are at or below the projected expenditure level. The average total expenditure level is 28% of the budget which is well below the target in the first 4 months of the fiscal year.

# College of Denturists of Ontario

Income Statement (April 1, 2021-July 31, 2021)

YTD Budget to Actual	2021-2022 BUDGET	July 31/21 YTD Totals	YTD as Percentage of Budget	Remainder or In Excess of Budgeted Amount*
<b>REVENUE</b>				
Professional Corporation Fees	\$ 65,000.00	\$ 62,200.00	96%	\$ 2,800.00
Registration Fees	\$ 707,750.00	\$ 589,163.00	83%	\$ 118,587.00
Other Fees	\$ 4,500.00	\$ 7,502.00	167%	\$ 3,002.00*
Qualifying Examination Fees	\$ 480,000.00	\$ 56,375.00	12%	\$ 423,625.00
Other Income	\$ 10,000.00	\$ 5,108.85	51%	\$ 4,891.15
<b>TOTAL REVENUE</b>	<b>\$ 1,267,250.00</b>	<b>\$ 720,348.85</b>	<b>57%</b>	<b>\$ 562,975.09</b>
<b>EXPENDITURES</b>				
Wages & Benefits	\$ 626,519.27	\$ 228,119.08	36%	\$ 398,400.19
Professional Development	\$ 40,000.00	\$ 5,343.72	13%	\$ 34,656.28
Professional Fees	\$ 140,000.00	\$ 19,104.83	14%	\$ 120,895.17
Office & General	\$ 150,000.00	\$ 64,151.83	43%	\$ 85,848.17
Rent	\$ 130,000.00	\$ 38,068.80	29%	\$ 91,931.20
Qualifying Examination	\$ 238,830.80	\$ 32,840.97	14%	\$ 205,989.83
Council and Committees	\$ 15,000.00	\$ 625.50	4%	\$ 14,374.50
Quality Assurance				
QA Panel A	\$ 6,000.00	\$ 117.00	2%	\$ 5,883.00
QA Panel B	\$ 4,000.00	\$ -	0%	\$ 4,000.00
QA Assessments	\$ 35,000.00	\$ 10,800.00	31%	\$ 24,200.00
Complaints & Discipline				
Complaints	\$ 30,000.00	\$ 5,276.50	18%	\$ 24,723.50
Discipline	\$ 25,000.00	\$ 5,476.50	22%	\$ 19,523.50
Capital Expenditures	\$ 15,000.00	\$ -	0%	\$ 15,000.00
<b>TOTAL EXPENDITURES</b>	<b>\$ 1,455,350.07</b>	<b>\$ 409,924.73</b>	<b>28%</b>	<b>\$ 1,045,425.34</b>
<b>NET INCOME</b>	<b>-\$ 188,100.07</b>	<b>\$ 310,424.12</b>		



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## BRIEFING NOTE

To: **Council**

From: **Kris Bailey, President**

Date: **September 10, 2021**

Subject: **Establishing the College's Strategic Direction for the Coming Year**

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As we enter into fall 2021, with uncertainty around the COVID-19 Pandemic Dynamic for the next 6 months perhaps, I am mindful of the fact that in 2020, the Strategy Map 2017-2020 matured. In the midst of the Pandemic, Council agreed to suspend any activity around developing another Strategic Plan until the dynamics around the Pandemic became clearer. However, it did agree to continue its conversation with Councils of the College of Dental Hygienists of Ontario and the College of Dental Technologists of Ontario regarding the possible amalgamation of the three Colleges. This conversation is gaining momentum with the establishment of a Tri-College Transition Committee and the drafting of a Memorandum of Agreement that will address the initial phase of the continuing conversation around organizational amalgamation. A year later, while organizations are still challenged by the dynamics of the Pandemic, it makes sense from the point of view of creating organizational direction that Council consider the CDO's direction over a shorter period of time (1 year) than normally contemplated for a strategic plan (3-5 years).

To set the College's short-term course, it is useful to include elements of the Tri-College amalgamation initiative and to look at those areas of opportunity that are associated with any unaccomplished strategic initiatives articulated in the **2017-2020 Strategy Map**. In addition, there are actionable items identified in the College's first **College Performance Measurement Framework Report** to the Ministry of Health.

### **Unaccomplished Strategic Initiatives – Strategy Map 2017-2020**

The College has been very successful in accomplishing most of its objectives and initiatives outlined in the Strategy Map 2017-2020. The table of Strategic Priorities, Goals and Key Performance Indicators is appended for the information of members of Council. Examination of the this accounting reveals an unrealized initiative:

1. Review and Clarify Council and Committee roles by Articulating Council and Committee Competencies

## **The College Performance Measurement Framework Actionable Items**

In December 2020, the Ministry of Health released a College Performance Measurement Framework (CPMF) reporting tool. The structure of the Performance Reporting Tool was discussed at Council's December 11, 2020 meeting and the College's first report in this framework was considered and adopted for submission to the MOH at the March 26, 2021 meeting of Council. While the College and Council should be quite proud of all of the accomplishments that provide for very favourable report, there are actionable items that describe opportunities for developing elements that line up with and satisfy some of the Standards outlined in the Reporting Tool. The entire CPMF Report can be found here: [https://denturists-cdo.com/About-Us/College-Performance-Measurement-Framework-\(CPMF\)/CPMF-Report-2020-College-of-Denturists-of-Ontari.aspx](https://denturists-cdo.com/About-Us/College-Performance-Measurement-Framework-(CPMF)/CPMF-Report-2020-College-of-Denturists-of-Ontari.aspx). The document: "CPMF Action Items" summarizes action items identified in the CPMF Report.

## **Public Interest Rationale**

It is in the interest of the public in general and individual members of the public who intersect with Registered Denturists and the College that members of the profession are regulated by an organization that has a clear sense of direction in its activities, particularly during the uncertainty that accompanies the current pandemic conditions. Organizations without an articulated strategic direction can fall victim to being more reactive than proactive in its activities, thereby losing a broadening vision of the organization's direction.

## **Options**

Members of Council are asked to consider the identified unaccomplished strategic initiative as well as the list of action items arising from the CPMF and to determine a prioritized list of actionable items for the coming year.

## **Attachments**

1. CDO Strategy Map 2017-2020
2. Strategic Plan 2017-2020 - Key Performance Indicators Report
3. Link: CPMF Report: [https://denturists-cdo.com/About-Us/College-Performance-Measurement-Framework-\(CPMF\)/CPMF-Report-2020-College-of-Denturists-of-Ontari.aspx](https://denturists-cdo.com/About-Us/College-Performance-Measurement-Framework-(CPMF)/CPMF-Report-2020-College-of-Denturists-of-Ontari.aspx)
4. CPMF March 2021 Report: ACTION ITEMS Arising

## MISSION

To regulate and govern the profession of Denturism in the public interest.

## VISION

Leading our members to provide exemplary denturism care to Ontarians.

## PROMOTING REGULATORY EXCELLENCE - ACTION PLAN FOR 2017–2020

### Priority 1

#### Enhanced Communication and Stakeholder Engagement:

- a. Promote public awareness of CDO role in safe delivery of denturism
  - i. Public awareness campaign
- b. Modernize member communications strategy
  - i. Undertake communications needs survey
  - ii. Attend Association conferences
  - iii. Introduce peer circles
  - iv. Enhance CDO webinars
- c. Promote transparency of CDO operations
  - i. Improve accessibility of website
  - ii. Ensure public register reflects highest goals of transparency
  - iii. Bring public interest and transparency lenses to Council and Committee work
- d. Foster interprofessional collaboration
  - i. Attend regular meetings of Ontario dental health regulators
  - ii. Provide collaboration guidance to members through communications strategy

### Priority 2

#### Excellence in Governance:

- a. Promote culture of public interest and transparency
  - i. Embed public interest in all College, Council and Committee decisions
- b. Review and clarify Council and Committee roles
  - i. Review through public interest & transparency lenses
  - ii. Articulate Council and Committee competencies
- c. Improve Council and Committee member training
  - i. Leverage technology to enhance training and work of Council and Committees
  - ii. Implement mentoring process for new Council members
  - iii. Ensure agility of training that allows for response to changes in legislation and the broader regulatory landscape
  - iv. Provide regular orientation for all Council members
- d. Improve internal policy coordination and priority-setting
  - i. Establish policy coordination and oversight process

### Priority 3

#### Enhanced Relations with Educational Institutions:

- a. Strengthen relationship between CDO and educational program administrators
  - i. Coordinate regular meetings between CDO and Ontario educational program leadership
- b. Explore whether denturism competency profile is synchronized to new registrant needs
  - i. Supplement identified deficiencies through CDO continuing education/QA program requirements
- c. Encourage quality and consistency in program content among educational programs
  - i. Explore accreditation model options
  - ii. Engage provincial counterparts in conversation exploring role of national denturism competency profile

## GUIDING PRINCIPLES

Integrity, Honesty, Transparency, Accountability, Fairness, Inclusivity



# Strategic Plan 2017-2020: Key Performance Indicators

## Priority #1 Enhanced Communication and Stakeholder Engagement

Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
<b>Promote public awareness of CDO role in safe delivery of denturism</b>	Public awareness campaign	<ul style="list-style-type: none"><li>There is a high public awareness of the denturism profession.</li><li>There is a high public awareness of the College's role.</li></ul>	<ul style="list-style-type: none"><li>The public understands the role of a denturist.</li><li>The public understands the scope of practice for denturism.</li><li>The public can identify the key responsibilities of the College.</li><li>The public understands how to file a complaint.</li></ul>	<p>Consultation with Citizen Advisory Group completed (Appendix 1)</p> <p>Recommendations (particularly regarding the Website design) from the CAG were instituted where possible.</p> <p>See Appendix 4 for click rates on:</p> <ul style="list-style-type: none"><li>About the College</li><li>Authority of the College</li><li>Filing a Complaint</li></ul>
<b>Modernize member communications strategy</b>	Communication needs survey	<ul style="list-style-type: none"><li>The survey will inform the member communication strategy.</li></ul>	<ul style="list-style-type: none"><li>Click rates on electronic communications</li><li># of phone calls and emails received after an electronic communication is sent</li><li>Response rate to requests for participation</li></ul>	<p>Member Communication Survey was completed (Appendix 2). The Results of the survey were used to guide the College's communication strategy.</p> <p>College staff usually receive 0-5 calls/emails after an electronic</p>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
			<ul style="list-style-type: none"><li>• Response rate to stakeholder consultations</li><li>• Follow up survey responses</li></ul>	<p>communication is sent, with the exception of administrative notices and the Registrar’s Messages regarding COVID-19 updates.</p> <p>Since March 27, 2020, 25 emails and 53 phone calls were received after COVID-19 communications were sent.</p> <p><b>Industry KPIs</b></p> <p>Administrative Notice, Industry, n=4:</p> <ul style="list-style-type: none"><li>• Average Open Rate 71.2%</li><li>• Average Click Rate 20.4%</li></ul> <p>Administrative Notice, CDO, n=8:</p> <ul style="list-style-type: none"><li>• Average Open Rate 75.3%</li><li>• Average Click Rate 18.0%</li></ul> <p>College Update and Newsletters, Industry, n=8:</p> <ul style="list-style-type: none"><li>• Average Open Rate 54.7%</li><li>• Average Click Rate 21.0%</li></ul> <p>College Update and Newsletters, CDO, n=5:</p> <ul style="list-style-type: none"><li>• Average Open Rate 84.5%</li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
				<ul style="list-style-type: none"><li>Average Click Rate 32.0%</li></ul> <p>See Appendix 5 for detailed statistics</p>
	Attend association conferences	<ul style="list-style-type: none"><li>Facilitates the College's communication with members and the general public regarding member matters.</li></ul>	<ul style="list-style-type: none"><li># of conferences attended by the College</li><li># of members attending each conference</li></ul>	CLEAR 2017, 2018, 2019 CNAR, 2017, 2018, 2019, 2020, 2021 DAO PYP 2017, 2018, 2019 DGO Continuing Education Events 2017, 2018, 2019 1-2 staff members/conference
	Introduce Peer Circles	<ul style="list-style-type: none"><li>Provide opportunities to enhance member communication skills and increase familiarity with College Standards of Practice</li></ul>	<ul style="list-style-type: none"><li># of members volunteering to write cases</li><li># of members volunteering to facilitate Peer Circles</li><li># of members attending Peer Circle events</li><li># of respondents to post-event surveys</li></ul>	<ul style="list-style-type: none"><li>Attendance:<ul style="list-style-type: none"><li>PYP 2018 – 52</li><li>PYP 2019 – 35</li><li>Sudbury 2019 – 7</li><li>Ottawa 2019 – 16</li><li>Windsor 2019 – 7</li></ul></li><li>Item Writers – 11</li><li>Facilitators – 14</li><li>100% response rate to post-event surveys</li><li>100% recommend to a colleague</li><li>2020-2021 expand format to develop an online format that was necessitated because of the COVID-19 Pandemic restrictions on in-person gatherings.</li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
	Enhance CDO webinars	<ul style="list-style-type: none"><li>• Improve member familiarity with and understanding of Standards of Practice</li><li>• Improve member access to educational resources</li></ul>	<ul style="list-style-type: none"><li>• # of webinars developed</li><li>• # of webinars administered</li><li>• # of members attending live webinars</li><li>• # of members watching on-demand webinars</li><li>• # of CPD credits entered for participating in College webinars</li></ul>	<p>Live and On-Demand webinars:</p> <ul style="list-style-type: none"><li>• Record Keeping</li><li>• Informed Consent</li><li>• Confidentiality &amp; Privacy</li><li>• Advertising</li><li>• Restricted Title &amp; Professional Designations</li><li>• Professional Collaboration</li><li>• Conflict of Interest</li></ul> <ul style="list-style-type: none"><li>• # of CPD credits related to CDO webinars<ul style="list-style-type: none"><li>○ 2018: 2389 credits</li><li>○ 2019: 1651 credits</li><li>○ 2020: 2022 credits</li></ul></li><li>• # of Members who have attended at least one webinar 2017 – 2020 = 406</li></ul> <p>See Appendix 3 for Webinar statistics</p>
<b>Promote transparency of CDO operations</b>	Improve accessibility of website	<ul style="list-style-type: none"><li>• French translation services applied to website content</li><li>• Consultation with the Citizen Advisory Group regarding the newly designed Website.</li></ul>	<ul style="list-style-type: none"><li>• Citizen Advisory Group consultation report</li><li>• requests from the public for help navigating the website</li><li>• requests from members for help navigating the website</li><li>• # of requests to provide information in French</li></ul>	<p>Very few requests are received for assistance in navigating the website.</p> <p>Public: The areas that require the most assistance are: searching on the public register and filing a complaint. Members of the public report that these are the two</p>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
				<p>pieces that they come to the College website for.</p> <p>Members: The areas that require the most assistance are requesting forms and locating the Standards of Practice, Guidelines and Policies.</p> <p>French translations have been posted for:</p> <ul style="list-style-type: none"><li>• Registration</li><li>• Renewal</li><li>• Complaints</li></ul> <p>There have been approximately 15 requests for information in French, most regarding registration for labour mobility applicants from Quebec.</p>
	Ensure public register reflects transparency	<ul style="list-style-type: none"><li>• Add “i” tags to public register terms (i.e. undertaking, SCERP etc.)</li></ul>	<ul style="list-style-type: none"><li>• # of requests to explain information on the website</li><li>• Click rate on “i” tags</li></ul>	Most requests are related to assistance with navigation of the website (i.e. how to use the public register) and not to explain information on the website.
	Bring public interest and transparency lenses to Council and Committee work	<ul style="list-style-type: none"><li>• Public interest is readily apparent in Council and Committee discussions and work.</li></ul>	<ul style="list-style-type: none"><li>• Decisions of Council and Committees reflect impact on public interest</li><li>• Click rate on Council packages and meeting minutes</li></ul>	Council and Committee meeting materials include briefing notes that highlight the public interest aspect in all decisions. These points are discussed during the meeting and considered throughout the deliberation and decision-making process.



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
		<ul style="list-style-type: none"><li>Posting of Council packages and meeting minutes on website.</li></ul>		Detailed statistics regarding the page views for the Council Minutes, Highlights, Materials page can be found in Appendix 4.
<b>Foster inter-professional collaboration</b>	Attend regular meetings of other Oral Health Regulators, provincially and nationally	<ul style="list-style-type: none"><li>Improved inter-professional collaboration between oral health professionals</li></ul>	<ul style="list-style-type: none"><li># of meetings attended</li><li># of Colleges and stakeholders represented at the meetings.</li></ul>	<ul style="list-style-type: none"><li>2017:<ul style="list-style-type: none"><li>CDO hosted meeting with smaller regulatory Colleges including CDTO regarding areas of potential collaboration</li><li>Collaboration with CDHO on Clinic Infection Control</li><li>Meetings with CDTO and CDHO regarding potential collaboration</li></ul></li><li>2018:<ul style="list-style-type: none"><li>Several meetings throughout the year with CDHO regarding collaboration</li><li>Chair – Special Meeting of Council CDHO</li></ul></li><li>2019:<ul style="list-style-type: none"><li>January: Meeting with Mr. Harry Cayton, CDTO and CDHO regarding regulatory amalgamation</li><li>Several additional meetings throughout the year with CDHO</li></ul></li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	Results Achieved
				<p>and CDTO regarding amalgamation</p> <ul style="list-style-type: none"><li>o Meeting with Ministry staff regarding amalgamation initiative</li><li>o November: RCDSO sponsored symposium "Access to (Dental) Care"</li><li>o November: Discussion with CDHO Registration team regarding integration of application processing</li></ul>
	Provide collaboration guidance to members through communication strategy	<ul style="list-style-type: none"><li>• Improved inter-professional collaboration between oral health professionals</li></ul>	<ul style="list-style-type: none"><li>• Develop Standard of Practice: Inter-professional Collaboration</li><li>• Members understand the importance of inter-professional collaboration</li><li>• # of members that collaborate with other health practitioners</li><li>• # of members that work in multi-disciplinary settings</li></ul>	<p>SOP Implementation – January 1, 2020</p> <p>191 members have attended the live webinar sessions and 109 have watched the on-demand webinar for Professional Collaboration.</p> <p>Most individuals who complete the associated self-directed learning assignment report working collaboratively with other health care providers on the oral health team.</p>



## Appendix 1: Citizen Advisory Group Meeting Report (January 20, 2018)

### Welcome and Review of October 2017 Session

The meeting was opened by Misha Glouberman, who welcomed both new and returning attendees and introduced Lisa Pretty, Citizen Advisory Group (CAG) Partnership Chair and Communications Director at the College of Physiotherapists of Ontario (CPO).

Lisa provided a brief overview of the group's history and growth, and acknowledged the valuable and positive feedback from this group at its previous meeting. Several other health regulatory colleges have expressed interest in joining the CAG, which enhances the ability of all colleges in serving the public interest.

For this meeting, the topics and sponsoring partnership members were noted as follows:

- Promoting Public Awareness of the College's Role in Safe Healthcare Delivery: College of Denturists of Ontario (CDO)
- Patient Relations Questionnaire: College of Opticians of Ontario (COO)
- Website Re-design: CDO and COO
- Additional Information on the Public Register: College of Physiotherapists of Ontario

### *Review of October 2017 Session*

Highlights of the feedback from the last session were noted, including what went well and the need for continuity with the group's activities. After convening into small groups, the following feedback about participation in the CAG was noted:

#### **Rewarding:**

- Lisa's report was beneficial
- The colleges are listening and this initiative is worthwhile
- Positive group interaction with opportunities to speak and benefit from the camaraderie
- The model has expanded from the physiotherapists to other professions
- There is no sense of tokenism and this has a positive impact
- Diverse group members come from different backgrounds and engage in good information-sharing
- Able to hear varied and different perspectives and experiences
- Genuinely doing something useful

#### **Challenging:**

- Seeing things from different angles (e.g., at the CAG previous meeting, several participants who were nurses could speak to issues in addition to the patient view and this was beneficial for the group)
- Diversity issues for the colleges such as hearing all the voices and promoting diversity in the group (i.e., different professions, different parts of the province, etc.)

#### **Additional discussion:**

- While some individuals have left the CAG, it is expected that this group will continue. There is always content for the regulatory colleges to bring forward to groups such as the CAG.
- In response to a query about whether the public knows enough and whether there is movement at some level, it was noted the Federation recently launched a patient-centred website. Further, additional marketing programs will also be launched (i.e., advertising and going into community health centres to provide awareness about the complaints process).



- There is work to do in having a grassroots movement communicated to the public about the role of the regulatory colleges.

## Goals

The goals previously developed by this group were reviewed, including positive outcomes.

Following small group discussions, each group provided feedback:

- An important goal is to be heard by the colleges
- A tick box approach (possible “tokenism”) is a concern and should be diligently avoided. It is important to hear feedback from the colleges, as “heard and valued” is an important principle
- Evidence of the impact of this group’s comments/discussions is important
- If the group sees its feedback being implemented, it will give the group more confidence (to frame the comment, Lisa provided an example of the longer-term process in implementing a by-law change). To a show of hands, the majority of participants find that the group’s voice is being heard and it would be “awesome if it could be better”
- Consider a future tracking mechanism among the colleges on a particular topic on which this group has consensus (e.g., a feedback mechanism).

Following a breakout group discussion, the following feedback on what the colleges could be doing in the future to be more responsive in showing evidence of impact was noted:

- Mechanism for tracking what happens at the colleges on particular topics of advice, i.e., design a system for feedback from Colleges to show how far along things are in the process and what policies and processes are being changed and how; communicate the proposed outlines and timelines and post a report to the CAG website; it would be in writing publicly, which forces some accountability (e.g., “what we heard” and with “possible next steps”)
- Video vignettes by decision-makers, showing what is the impact of CAG to them and how it enriches the work they do. The outreach work could also be included on the colleges’ websites as a testimony to the CAG’s impact
- The work of the Federation was acknowledged. Perhaps CAG would fit into the Federation’s future work: where does it fit in the healthcare framework? It is important to clarify the role, including the aspirational role (where it fits into the bigger picture). Questions were posed: “Why aren’t the 15 other colleges members of CAG?” and “Some colleges should be embarrassed by not having access to the CAG. Why not?”
- Feedback on picking the most important of the above-noted ideas (votes cast by CAG members):
  - Tracking on CAG website: 8
  - Some sort of report on next steps: 4
  - Video: 0
  - Role of the group: 0

Lisa briefly outlined the growth and development of processes to support the implementation of ideas generated from this group, including a tracking mechanism on the CAG website and reiterating that the CAG is not a decision-making body and colleges might not take a suggestion. Having a report on how the CAG’s recommendations were heard is important.

## Patient Relations Questionnaire

### College of Opticians of Ontario

The College of Opticians of Ontario (COO) is seeking feedback on what the public knows about what opticians do and what gaps in information need to be filled for the public.

#### **Why does it matter that public knows/understands what an optician does?**

- Opticians, optometrists, and ophthalmologists each have their own area of expertise. The product someone is wearing has to be the right thing and that’s the appropriate person to ask



- The professional should know their limitations (e.g., be able to treat an eye infection)
- Important for the member of the public to know the professional's limitations (e.g., if it's about glasses, the optometrist can do testing; if it's about the eyes, the patient may have to go to the ophthalmologist)
- Need to have a better sense of the objective for each professional (e.g., selling glasses is the goal)
- When a patient walks in, the place should be labelled so there is no confusion for the public (e.g., know where the practitioner went to college and whether they are a regulated professional). Most people don't know what the professional has done in school and what their expertise is. For example, in a store selling glasses, the public needs to understand who the various people are such as: Who is the trained professional? Who works at the cash register?
- Sometimes the patient has to figure out what the next steps might be for them in determining which person to go (i.e., optician, optometrist or ophthalmologist); in some cases, they go to their general practitioner (GP) for a referral to the right person
- It is important that the care the patient needs is delivered
- Several individuals in the group noted they were "still confused" by the distinct roles of the three types of practitioners (i.e., optician, optometrist, ophthalmologist)
- Defining the scope of practice for each category of professional with respect to diagnosis, prescription and intervention is beneficial. The public needs to know who to ask, who they can trust, and the expertise/experience of each of opticians, optometrists or ophthalmologists, and then to get the care they need

***What the College can do to help the public understand what opticians do:***

- A poster on the wall or a pamphlet in the office to provide definitions and inform patients
- In the literature, educate the public about reference checks (e.g., registered technicians)
- Provide an outline of possible expenditures to avoid "upselling"
- Most people don't know that opticians are regulated professionals. Consider ads such as at bus stops to advise the public of "who is who"
- Nametags worn by the individuals who work in the clinic (role and name so the patient can check them on the Internet) are beneficial
- It is beneficial for the three colleges to work together to differentiate the three colleges' professions (e.g., what are their roles, limitations, etc.)
- Do the colleges regulate the fee schedules? Should the schedules be accessible to the public?
- Can the College do advertising?
  - Bus boards are expensive
  - Posters in clinics about the three different professions can be cost-effective and informative: "here's what we do"
  - Importance of having a registered health care professional is beneficial to garner the confidence of the public ("tell people why we matter")
- Online optician services: is that a good way for the public to get glasses? Quality matters and people might get better care if the public is educated about what can happen if glasses or contacts aren't fitted properly. Consequences and recourse would be important for the public to know
- It is positive for patients to improve their eye care
- Education about the role of the colleges (in this context, the word "college" is confusing to the public)

**Priorities** (votes cast by CAG members):

Reach people in offices (posters/pamphlets): 8

3 Colleges to work together: 8

Bus stop ads about the College: 2

Identify the professions in the store: 2

Why this matters: 1

Educate people about reference checks: 0

Outlining average costs to avoid upselling: 0

Fee schedules are public: 0



All glasses/lenses are not equal (online): 0  
Improve self-care: 0

Based on the above-noted discussion, it was suggested that the following three items could be incorporated into a delivery mechanism:

- why this matters
- all glasses/lenses are not equal
- the benefits of improvement of self-care

Website Re-Design

College of Denturists of Ontario

The College of Denturists of Ontario (CDO) recently launched a new website and is interested in feedback about it.

**Which of the College’s activities are most important to promote to the public?**

- It is a regulated profession and the College exists as a separate college (some people thought they were “part of the dentists”)
- Understand the basic care to expect from a denturist – “they are not a dentist”
- What questions are there about process?
- There is a complaints process
- It is valuable for patients and caregivers to have an opportunity to provide feedback, including positive feedback (note: colleges and practitioners are prohibited from publishing ratings and testimonials about individual practitioners)
- Know what denturists do
- A member of the public can go directly to a denturist (rather than having to go through a dentist)
- Would it be important for those needing dentures to know that denturists are up-to-date on the latest technologies, etc.? (It was noted there is a requirement for members to do CE and report it to the College. The College doesn’t direct content.)
- Do denturists have professional development requirements?
- Denturists fabricate dentures that fit over implants.

**Priorities** (votes cast by CAG members):

What denturists do: 9  
Patients can go directly to them: 5  
There is a complaints process: 4  
Basic care to expect: 3  
Feedback (good/bad): 3  
Existence of the College: 0  
Denturists aren’t dentists: 0  
Regulatory criteria: 0  
Are there PD requirements: 0

**How should the College communicate this information to the public?**

- In collaboration with dentists
- The website should be cleaned up; develop a series of small and cost-effective ads that highlight denturists’ services and the College’s website address; consider being on social media such as Facebook, Twitter, etc.
- Consider targeted print materials for physicians’ offices and retirement facilities
- Would it be ethical for the College to work with members in getting consent from the denturists’ customers with the provision of email address (builds on social media lists)?
- If there isn’t one already, create something like an “Ontario Denturists’ Week” and run a media blitz for a week (e.g., send it to radio/TV stations, newspapers); this would create awareness
- Create a Facebook page for the College, although it doesn’t reach people necessarily unless they find it



- Consider being on Twitter
- When asked about partnering with the denturists' professional associations, the CAG partners shared that there needs to be a careful separation between colleges and associations

**Priorities** (votes cast by CAG members):

Print materials: 6

Partner with dentists: 5

Run online ads: 1

Email list of happy customers: 0

Denturists Week: 0

Online ads:

Facebook: 11

Twitter: 0

Instagram: 0

Reddit: 1

Also: possible information hub for students

**Website Review**

***What is most important for the website to provide?***

- "Find a denturist in my area quickly"
- "Track record of the denturists in my area" (regulatory)
- Is the office accessible?
- Contact information for the College should be prominent (including phone numbers)
- What do denturists do? What can the public expect from the process?
- Coverage (for services)
- How to file a complaint
- Provide basic information on a fact sheet: what does a denturist do, do I need a referral, why visit a denturist, etc.
- Pointer to a rating site
- Accessibility/readability to the denturist's website is important factors to consider (e.g., ability for people who are colour blind to navigate the website)

**Ratings** (votes cast by CAG members):

Find a local denturist: 8

Track record of denturist: 5

FAQ: 4

What do denturists do: 3

File a complaint: 1

Office accessibility: 0

College – easy to contact: 0

Coverage: 0

**General impressions and specific feedback on the website:**

Liked:

- "About us" bullets: explains what the College does and is easy to read
- "Find a Denturist" is prominent
- For "About the College" and "How to File a Complaint", the side menu information is clear and "front and centre"
- Device-responsive and looks modern/progressive
- Font and typeface look good (use of dark colour or black preferable to lighter colour)

Suggested changes:

- Move applicants and members below the four items; make public part more prominent (i.e., public information should be more front and centre)
- Website should target the general public (registered denturists will know where to go on the site for the information they need – the public doesn't need that information)
- Filing a complaint: clear but easy to scroll past it (give it more prominence)



- Menu on a mobile: too much is showing
- Rolling banner is distracting and not that easy for the viewer to find what they are looking for; a carousel of banners with a selection tool for each slide would be easier for the user to get to the desired spot
- Reports: want to see on the first page where all the annual reports are filed (search results)
- Broad field of accessibility: French services are provided upon request; factors include translation into French (associated costs), and having it in French will assist French-speaking people. Are there multilingual opportunities?
- Documents are in an easily accessible format
- Top banner: blue is too light for an effective contrast and it should be easier to read
- Include a dentist in at least one of the photos

**Priorities** (votes cast by CAG members):

Public information more featured/targeted within framework: 9

Too many menus on mobile: 5

Too many banners changing: 4

French content: 4

Other languages: 2

More prominence re: complaints: 1

Scroll between banners: 0

Photo of dentist: 0

Blue hard to read: 0

*College of Opticians of Ontario*

The COO is planning to re-design its site and welcomed feedback about its new design.

Ideas as to what the site should provide:

- Clarify the difference between an optician, optometrist and ophthalmologist
- Why is it important to be treated by a registered practitioner? This type of information needs to be on the website

**Priorities** (votes cast by CAG members):

Fact page (include differences between the 3 groups and why this matters, what they do, etc.): 9

Find an optician quickly: 7

Their track record: 7

File a complaint: 2

Accessible: 0

Contact College easily: 0

Coverage: 0

Ratings: 0

**General impressions and specific feedback:**

- Home page: targeted to the public
- Graphics and artwork: modern, colours are progressive, image is striking, artistic
- Easy to navigate with animation (three main headings with graphical icons makes it feel easy to navigate)
- Optician search is in enlarged font: easy to find

**Improvements:**

- "COO" is not common lingo for the public and its use should be avoided in these types of communications
- Text colour should be consistent: use black and not lighter grey, which causes navigational confusion; it is hard to read grey/white text
- Break down paragraphs into bulleted format (text makes it feel long)
- Be consistent with the colour of the links
- Some green graphics not linkable (hard to tell what is a hyperlink)



- “Protecting the Public” could be a link – appears to be that way visually
- Some opinions were expressed that “Protecting the Public” wording is “harsh” in conjunction with the beautiful imagery; other opinions varied in that it is important to have that wording and possibly move it elsewhere
- Top menu is too tight (“Optician Search” page)
- Fonts are a bit too small, given target audience
- “Optician Search” should take the viewer right to the search area
- FAQ: make this more “front and centre”: include what a public register is

**Priorities in managing website changes** (votes cast by CAG members):

Grey/white text: 11

Pop-up too small: 9

COO acronym: 3

Home page: link protecting the public: 3

Text on banner: 3

Fonts too small: 3

Text in sentence should be bulleted: 2

Hard to tell what’s a link (colours): 2

Search for optician: 2

More upfront about what is a register: 1

## Additional Information on the Public Register

### *College of Physiotherapists of Ontario*

The College of Physiotherapists of Ontario (CPO) is seeking feedback on its public register to ensure the public can make informed decisions about who to see or not to see [e.g., the type of funding accepted by the physiotherapist such as the Ontario Health Insurance Plan (OHIP) and the Workplace Safety and Insurance Board (WSIB)], level of accessibility to the physiotherapist’s physical location (e.g., elevator, stairs, etc.) and guidance on what kind of information that is not presently on the site would be useful to the public.

***Why would it be helpful to see information about what kind of funding each physiotherapist accepts?***

- OHIP physiotherapists: there is often a substantial wait-time for this type of physiotherapy services and the patient needs to know that in advance (e.g., before surgery)
- Communicate on the website which clinics are publicly funded; lots of people cannot afford physiotherapy because they don’t have appropriate insurance
- Costs can be prohibitive for older adults, which circles back to the cost of physiotherapists. The information about funding helps people manage their costs and to know in advance of treatment if it is funded. If the patient knows in advance, it can contribute to better care
- With private clinics, there isn’t a “clogging up” (i.e., ethical triage system) and access to those clinics would help reduce wait times for public clinics
- Does the clinic take credit cards? Providing credit card information will advise people what they can use; some people don’t have cash with them
- Age for qualification of OHIP and for services for children and seniors
- Easy access to general information about physiotherapy
- Consider mandating a deadline for physiotherapists to post the information
- All health practitioners need to be aware of their responsibilities in updating their public registry to reflect any changes

**How useful is all of this information (scale of “1-5”) (votes cast by CAG members):**

5: 10 (very useful)

4: 1

3: 2



## Wrap Up

### ***What went well?***

- Agenda was covered effectively and efficiently, and it gave the colleges what they were looking for
- Liked having representatives from the colleges present (they can clarify questions, situations and accountability)
- Nice sized group; the breakout group work is an opportunity to trade ideas and generate conversation
- As a new member, felt comfortable in the group. It is easier to put ideas together in a smaller group and to engage with different personalities to get different ideas and meet new people
- Respectful environment; the facilitator clarifies comments and runs it well (“keeps it smooth”)
- One-on-one work is rewarding
- Getting reading material early is beneficial
- Participants all want to see a tracking mechanism (“exciting outcomes”)
- Everyone is engaged
- Facilitator kept things moving on time
- Helpful to have a recap from the previous meeting, particularly about the process and it helps the new people
- Accessible and good central location for the meeting; easy to find
- Food was good
- As a new member, participants can be heard; the explanations about the procedures were easy to follow
- People feel it’s a good use of time and important work is being done; no “dead time”
- Observers and college representatives strike a good balance in providing background information to the CAG; they are accessible but not dominating

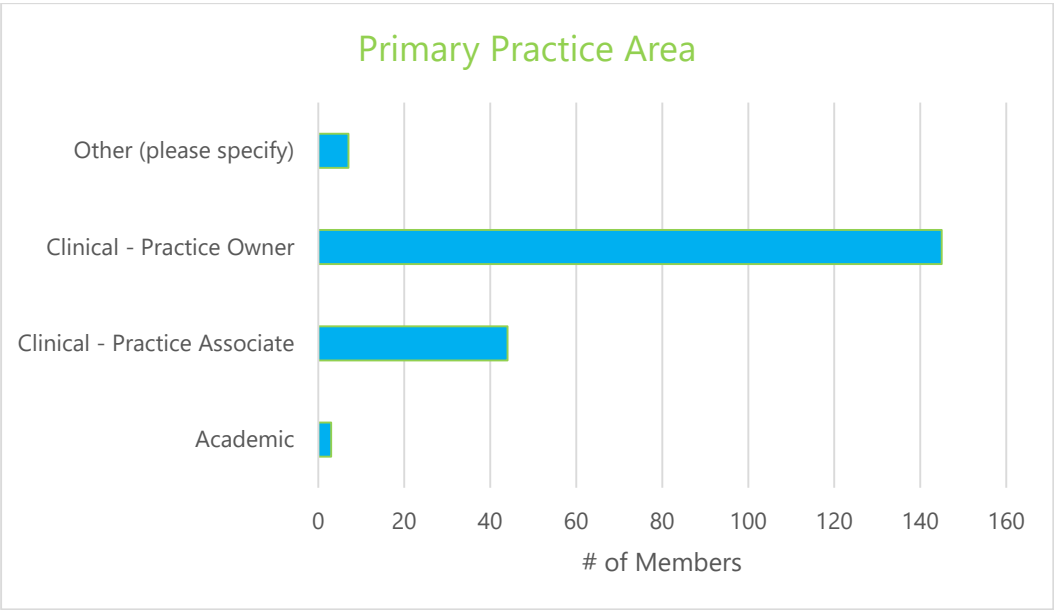
### ***What can be done differently?***

- Refresher/reminder about the parameters, roles, limits in which this group can effect change (in the advance materials and in the readings) and the role of associations versus the role of the regulatory colleges
- Ensure no overload of participants
- There should be a vote on a 5-minute reminder at the next meeting
- Survey Monkey: “choose” and “comment” – it was agreed that Survey Monkey respondents should always have the ability to provide a comment for a specific question. It was agreed that future surveys will allow for feedback with comments
- Tracking progress – how can/should this be done? (There was commitment to present ideas from the CAG Partners at the next meeting.)
- Shared lessons from the past three years – divided on this but keep it in mind; no action is required now
- Is there any need for professional development for citizen advisors (e.g., a reminder of what colleges can/cannot do)? Is there anything else?
- Tracking: evaluation of the evolution of the CAG and sharing of lessons learned during the past three years



Appendix 2: Member Communication Survey (May 2018)

Question 1: My primary practice area is:



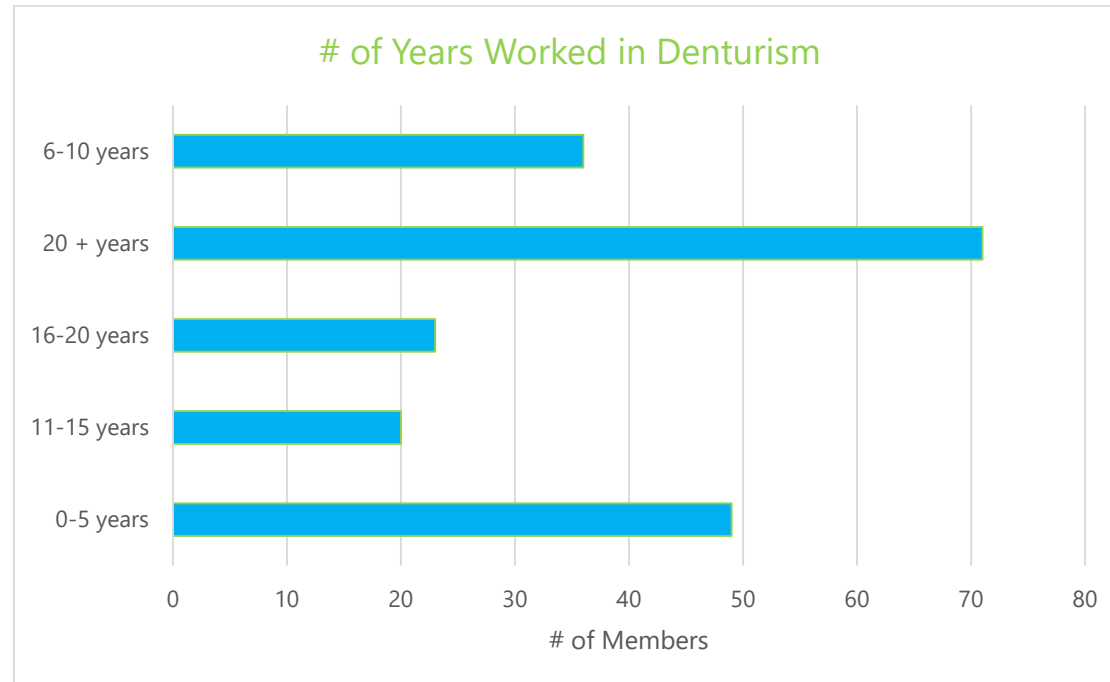
Practice Area	# of Members
Academic	3
Clinical - Practice Associate	44
Clinical - Practice Owner	145
Other (please specify)	7
Grand Total	199

Other:

Working with the dentist
Administration
Educational Institution
Dental offices
No comment



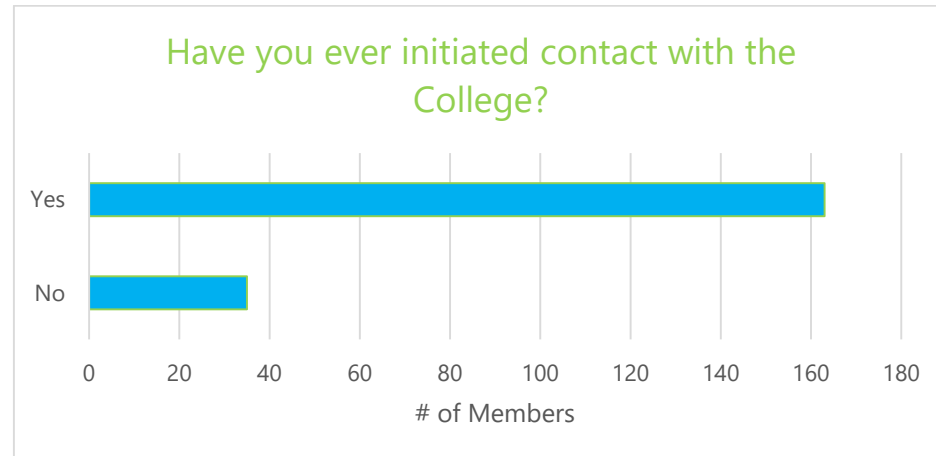
**Question 2: How many years have you worked in the denturism profession?**



# of Year of Service	# of Members
0-5 years	49
11-15 years	20
16-20 years	23
20 + years	71
6-10 years	36
Grand Total	199

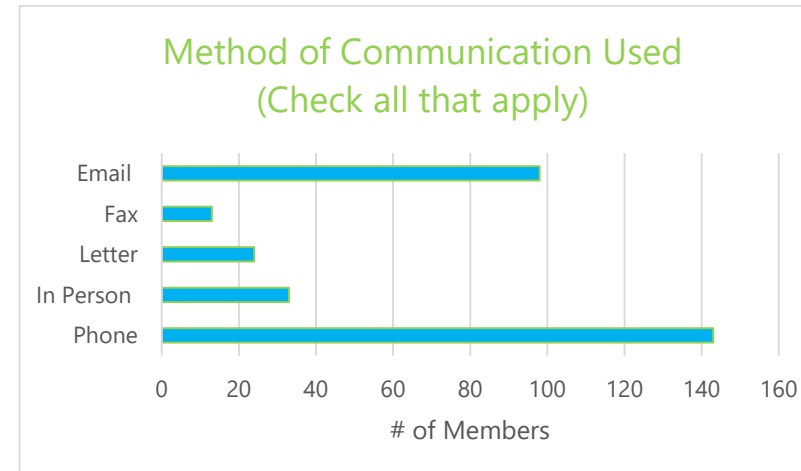


**Question 3: Have you ever initiated contact with the College?**



Response	# of Members
No	35
Yes	163
Grand Total	198

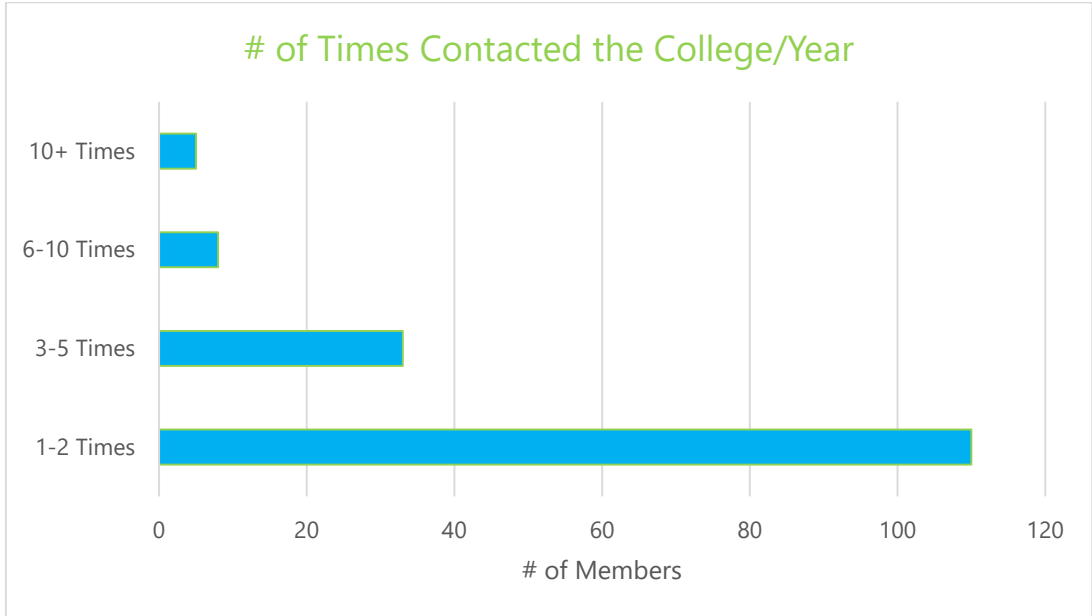
**Question 4: If yes, how did you contact the College?**



Response	# of Members
Phone	143
In Person	33
Letter	24
Fax	13
Email	98



**Question 5: If you do contact the College, on average, how many times a year do you contact us?**



# of Times	# of Members
1-2 Times	110
3-5 Times	33
6-10 Times	8
10+ Times	5
Grand Total	156



**Question 6: When you initiate contact with the College, is it regarding (please check all that apply):**



Response	# of Members
Registration/Licensing	103
Certificate of Authorization for Health Profession Corporation	32
Practice Guidance/Advice	63
Quality Assurance	52
Complaints/Discipline	12
Advertising	17
Qualifying Examination	15
Other	18

Other:

Educational collaboration and invitations for Program Advisory Committee Meetings
web site issues - registration
name of my clinical approval
continuing education how to enter credits
Peer circle, question make up for exam and peer circle facilitator training
Contact With Vicci Sakkas regarding examination/OSCE/MCQ events and times, location etc.
continuing education
committee work
continuing education
Continuing education questions
Continuing Education
Working on committees
Volunteer with college qualification exam, peer circle and multiple-choice exam questions...
CE
When the college decides to charge its members fees that are not applicable. For example, a notification fee. This is racketeering.
Registration, survey and respond to CDO messages
Survey respond,
IPAC/PIDAC issues and why the delay from CDO on action.



**Question 7: When you initiate contact with the College, are you satisfied with the experience?**



Satisfied with Experience?	# of Members
No	6
Yes	150
Grand Total	156

**Question 8: If not, why?**

The document (resignation doc) had errors in it and was poorly worded. It is easier for me to have the register indicate that I am suspended for nonpayment of fees

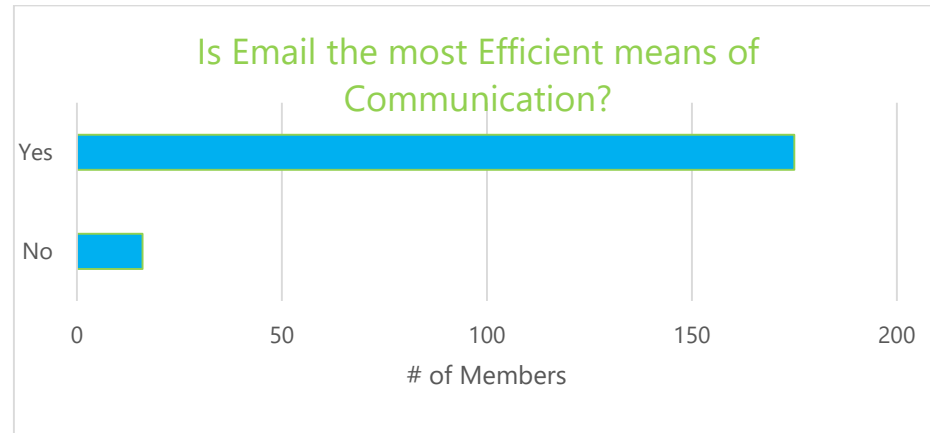
I understand that the staff at the CDO Can be busy sometimes, However, as a registered member, that pays over \$2000 a year for membership, I personally feel that more can be done to accommodate the professional needs of the interest of the denturists. Not only that, it is also imperative that the college must be fair and professional when dealing with disputes.

The college does not respond back to its members. And They are not willing to address any of the members concerns.

I always get voice message box. I leave the message and takes a long time to get return call

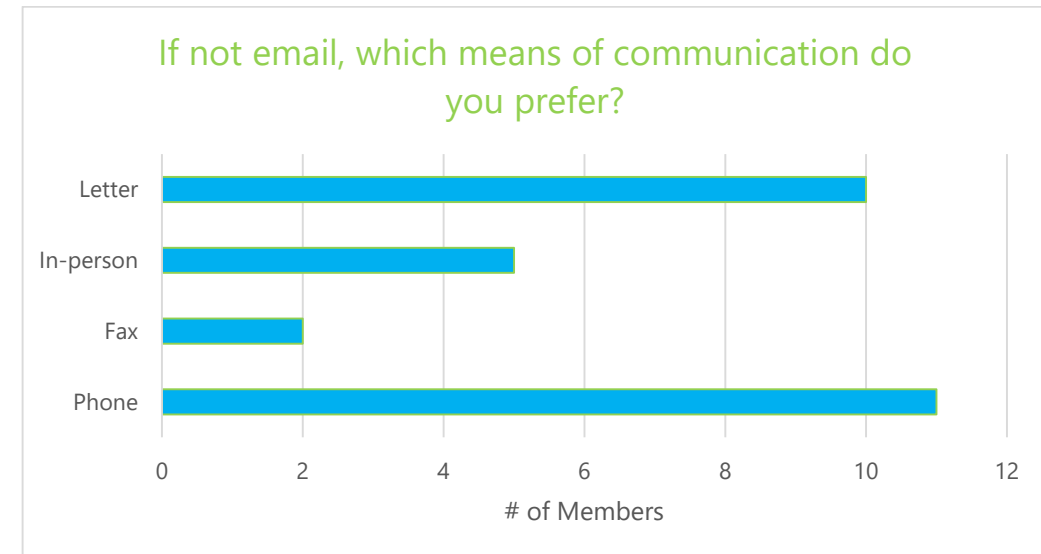


**Question 9: We believe that the most efficient means for the College to communicate with its members is by email. Do you agree?**



Emailing is the most efficient means of Communication	# of Members
No	16
Yes	175
Grand Total	191

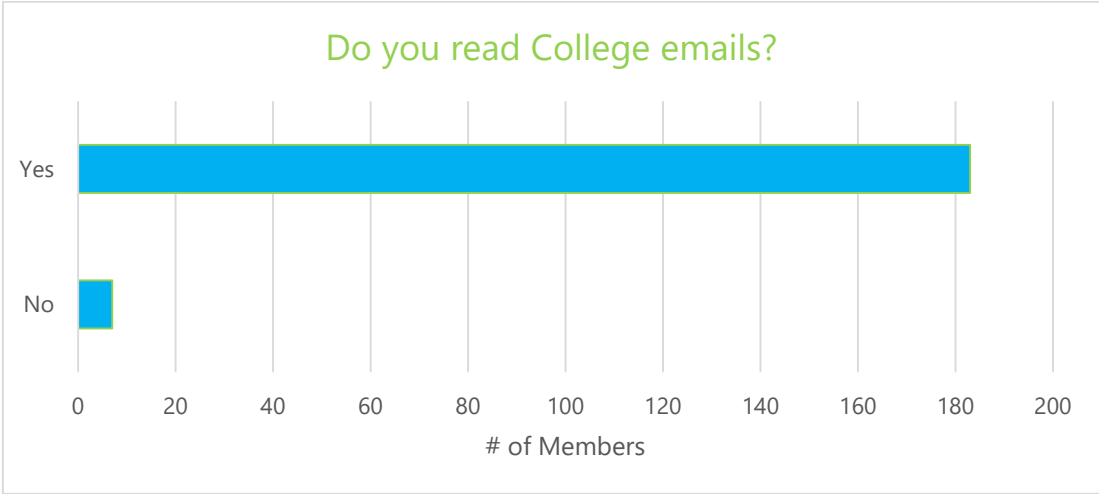
**Question 10: If not, which means of communication do you prefer?**



	Phone	Fax	In-person	Letter
# of Members	11	2	5	10
Grand Total	11	2	5	10



Question 11: Do you read emails that you received from the College?



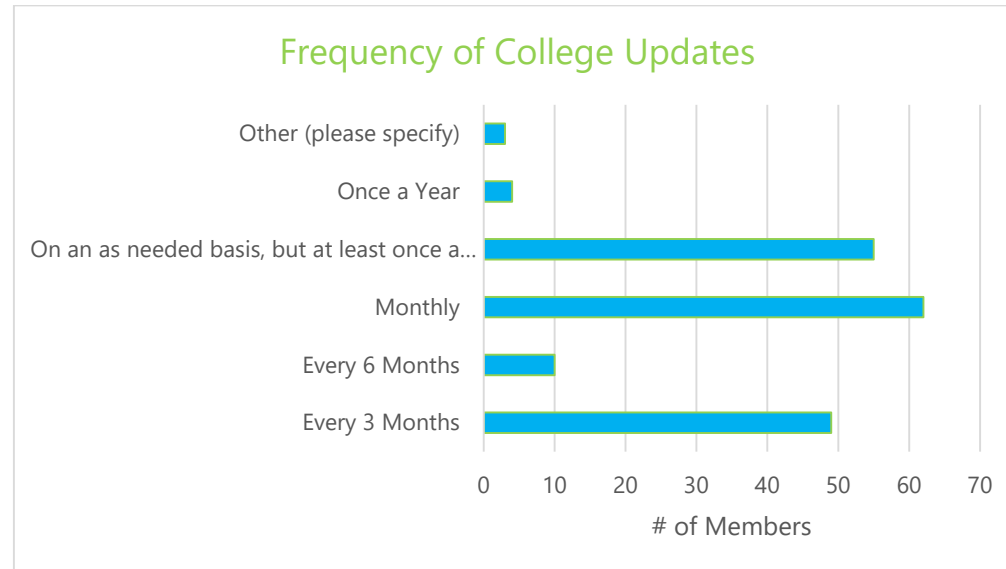
Do you read College emails?	# of Members
No	7
Yes	183
Grand Total	190

Question 12: If not, why not? Is there anything that the College can change to increase the likelihood that you will read College emails?

So many e-mails. We can't read all of them. If not vital gets discarded. Mail is more serious, and I tend to read them more.
If you send the emails in letter form I will read it. If it is important I prefer someone call me.
Unless it is directly related to my yearly registration, or to complete the surveys you send, I don't read them.
Some mail is not relevant to my practice.
The college sends a lot of spam, junk and mail that do not apply to me.



**Question 13: How frequently would you like to receive updates on College initiatives, Council happenings, and legislative news?**



Frequency of College Updates	# of Members
Every 3 Months	49
Every 6 Months	10
Monthly	62
On an as needed basis, but at least once a year	55
Once a Year	4
Other (please specify)	3
Grand Total	183

Other:

Every 3 months or following council meetings, with additional time sensitive updates on a as needed basis
3-month frequency is generally best. Obviously important information that falls in category "c" however warrants increased frequency of contact.
at least every 3 months or sooner if needed

**Question 14: Any other thoughts about communicating with the College?**

Telephonic conversations are sometimes absolutely necessary as e-mail may result-in /cause miscommunication/misinterpretation of the original /intended message as there is very little opportunity to clarify details except through writing of more e-mails on the same topic back & forth which may not always be possible. A telephonic conversation / message may thus sometimes be a better alternative. The updates on CDO website also offer a great method of communication. Personal meetings if and when possible/necessary at least once a year-- through various fora-- such as visits to the educational institutions (lectures, meetings) / provincial professional association etc. would always help reinforce contact and communication between the College and members.

I would like to see the College publish information like the RCDSO does in its Dispatch. Namely information that is learned from de-identified complaints and practice assessments. In other words, what trends is the CDO observing in their activities accompanied by suggestions that we could use to improve our practices.

no

Seems fine ,don't recall having a problem

General Meeting once a year

the less the better. Less stress.

No

It is important for the members to feel comfortable, even warm, with their relationship with the College. The College is a regulatory and governing body. It is natural for a member to take the college as a 'feared' entity. Same thing for the Quality Assurance Department or their Assessors. They should be more thought of as an Ambassador or Teacher(Advisor) to the members. Not as Prosecutors.

Email communication is the best method for me.

Always want to know about important courses infection control etc. Thank -You.

I have communication with Jennifer Slabodkin, she was very efficient in helping me.

Staff are great

Thank you very much to the staff in not only their frequency of contact but quality and professionalism.

No

Technology does not always work. I prefer regular mail or phone calls.

I normally call if I have a question and the response has always been quick and effective. I don't mind email either

It was helpful.

no

When I call, I EXPECT SOMEONE TO PICK UP THE PHONE!

Communicating is a two-way flow. Showing members, the % of response will let them know when a higher % is required for helpful outcome.



we are often inundated with emails in our busy day I am concerned that it will be too easy to miss an important CDO message. Letters never get missed.
Perhaps an open forum and a moderator would help
College Contact was valuable communication tool.
If there are any outstanding balances or any concerns that the college has with its members, the college take more than just one Method of Contacting its members. Not communicating and then penalizing its members is absolutely unacceptable.
no
no
Emails are indeed the best way to communicate. Also, one communication per quarter is necessary.



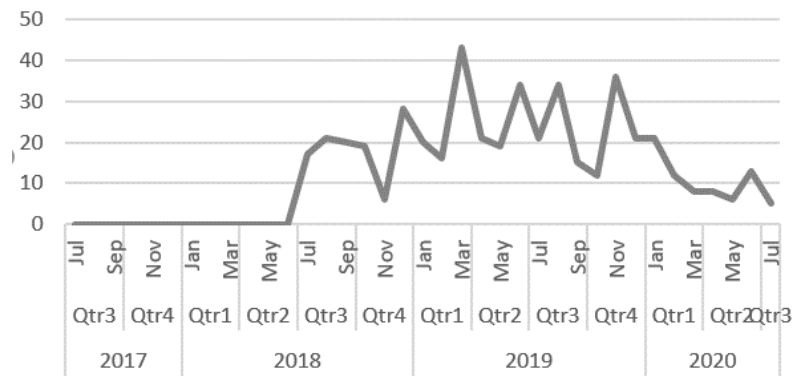
### Appendix 3: Webinar Statistics (June 2017 to June 2020)

Topic	# of Sessions	Attendance	On-Demand Views
Advertising	18	454	111
Conflict of Interest	24	285	194
Record Keeping	29	675	171
Informed Consent	24	430	131
Confidentiality/Privacy	22	430	277
Restricted Title	6	242	59
Professional Collaboration	4	191	109

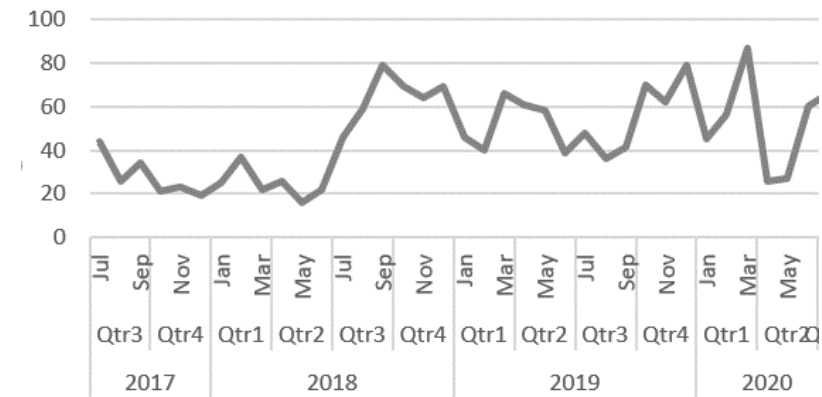


## Appendix 4: Page Views

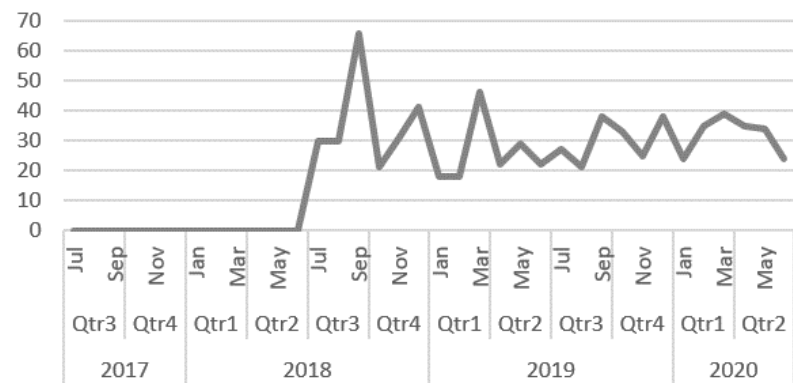
# Page Views Council Meeting Minutes, Packages and Materials:



# Page Views Filing a Complaint:



# Page Views Authority of the College



# of Page Views About the College





Appendix 5: Communications Appendix (June 2017 to June 2020)

Overall: n=297 campaigns

	Open Rate	Click Rate
Overall Average:	75.70%	25.50%

College Updates:

Category	n=39
College Update	20
College Update: Annual Report	3
College Update: Registrar’s Message	16

	Open Rate	Click Rate
Overall Average:	75.00%	19.60%
College Update:	72.20%	16.00%
Annual Report:	69.90%	16.30%
Registrar's Message:	74.80%	24.70%

Administrative Notices:

Category	n=227
Administrative Notice	2
Administrative Notice: Call for Participation	15
Administrative Notice: Continuing Professional Development	7
Administrative Notice: Election	18
Administrative Notice: Professional Liability Insurance	20
Administrative Notice: Renewal	69
Administrative Notice: Survey	3
Administrative Notice: Webinar	73
Administrative Notice: Call for Participation, Peer Circles	20
Administrative Notice	2

Category	Open Rate	Click Rate
Overall Average	74.30%	26.70%
Administrative Notice	74.10%	14.00%
Call for Participation	69.90%	16.14%
Call for Participation, Peer Circles	65.40%	10.00%
CPD Reminders	90.50%	23.40%
Elections	62.60%	2.50%
PLI Reminders	84.30%	45.89%
Renewal	74.70%	31.50%
Survey	67.40%	16.40%
Webinars	81.30%	32.40%

Policy Notices:

Category	n=31
Policy Notice: Code of Ethics	2
Policy Notice: Consultation	25
Policy Notice: Return to Practice	4

Category	Open Rate	Click Rate
Code of Ethics	64.60%	12.60%
Consultation	72.90%	17.10%
Return to Practice	76.50%	40.70%



## Appendix 6: Consultation Responses (June 2017 to June 2020)

Topic	# of consultations (n=14)	Average # of Responses
By-laws	3	29
Code	1	19
Guide	1	28
Regulation	3	36
SOP	6	26



## Priority #2 Excellence in Governance

Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
<b>Promote culture of public interest and transparency</b>	Embed public interest in all College, Council and Committee decisions	<ul style="list-style-type: none"><li>• That the public interest is addressed in all Council and Committee actions and decisions</li><li>• Incorporating cues for discussion of public interest in all Council and Committee work</li></ul>	<ul style="list-style-type: none"><li>• Minutes incorporate summaries of public interest discussions around each agenda item</li></ul>	<ul style="list-style-type: none"><li>• Review Council materials for evidence of public interest discussion</li></ul>	Council and Committee meeting materials include briefing notes that highlight the public interest aspect in all decisions. These points are discussed during the meeting and considered throughout the deliberation and decision-making process.
<b>Review and clarify Council and Committee roles</b>	Review through public interest & transparency lenses	<ul style="list-style-type: none"><li>• Description of the public interest aspects of Council and Committee structure and function articulated in Council and Committee manuals</li></ul>	<ul style="list-style-type: none"><li>• Review and modification of all Council and Committee manuals to provide for the incorporation of these elements</li></ul>	<ul style="list-style-type: none"><li>• Examination and periodic review of training initiatives including, presentations and manuals to ensure that these elements are included and are current</li></ul>	The College maintains a comprehensive ICRC training manual that is updated annually. This resource is provided to all ICRC members in combination with a face to face or virtual presentation by College Counsel on the mandate and function of the ICRC. The College maintains a New Council Member Orientation Manual (originally published in 2012). Since



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
					2015, Council training strategy has included a new member Orientation session with the Registrar and current President. New members are provided with links to the HPRO Educational materials that included discussion of pertinent issues related to professional self-regulation by Mr. Richard Steineke of SML-Law. Council mandate, composition and roles are discussed in a presentation by College Counsel annually. Training on other topics is offered periodically (e.g. unconscious bias, discipline).
	Articulate Council and Committee competencies	<ul style="list-style-type: none"><li>Council and Committee competencies are identified and articulated in the appropriate training/orientation manual</li></ul>	<ul style="list-style-type: none"><li>Development and inclusion of relevant competencies in the appropriate training manuals</li></ul>	<ul style="list-style-type: none"><li>Examination and periodic review of training manuals to ensure that these elements are included and are current</li></ul>	Minimal. Other than eligibility requirements articulated in the College by-laws, there has not been a clear articulation of Council and Committee member competencies.
<b>Improve Council and Committee member training</b>	Leverage technology to enhance training and work of Council and Committees	<ul style="list-style-type: none"><li>Engage a consultant to provide the College with a review of how</li></ul>	<ul style="list-style-type: none"><li>Comprehensive information on leveraging technology</li></ul>	<ul style="list-style-type: none"><li>Rate of attendance at training/orientation sessions and meetings</li></ul>	The Council Meeting Feedback survey includes a question about the technical aspects of the meetings.



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
		<p>technology can be leveraged</p> <ul style="list-style-type: none"><li>Survey of Council and Committee members for insight into perceived options</li></ul>	<p>is available to the College</p> <ul style="list-style-type: none"><li>Technology is appropriately leveraged</li></ul>	<ul style="list-style-type: none"><li>Providing opportunities for feedback on technology in post-meeting satisfaction surveys</li></ul>	<p>Attendance for training of new council members is 100%.</p> <p>The appearance of the COVID-19 Pandemic and subsequent physical distancing and suspension of face-to-face meetings has accelerated the leveraging of technology for Council and Committees.</p> <p>The College has initiated use of on-line technology (SharePoint) as a platform for managing all of the College Council and Committee meeting resources and materials. This work will continue so that all Committee resources are handled in this digital fashion.</p>
	Implement mentoring process for new Council members	<ul style="list-style-type: none"><li>Engage in an environmental scan with other regulators to identify strategies for developing a mentorship framework</li><li>New Council members are matched with</li></ul>	<ul style="list-style-type: none"><li>A program is developed</li><li>New Council members feel prepared to participate in their role in Council and within Committees</li></ul>	<ul style="list-style-type: none"><li>Program is in place and satisfaction and success is appropriately monitored</li></ul>	<p>No formal mentoring program has been developed. An informal process was undertaken by past Presidents who communicated with new members on an individual, ongoing basis in the early part of their tenure as Council members.</p>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
		experienced Council members for mentorship			
	Ensure agility of training that allows for response to changes in legislation and the broader regulatory landscape	<ul style="list-style-type: none"><li>• Council and Committee members receive timely updates regarding changes in legislation and the regulatory landscape</li><li>• Council and Committee members receive training in competency areas that promote response agility</li></ul>	<ul style="list-style-type: none"><li>• A mechanism for communicating legislative changes to Council and Committee members is established and utilized</li></ul>	<ul style="list-style-type: none"><li>• Evidence of training and utilization of communication process</li></ul>	<ul style="list-style-type: none"><li>• Council packages include the Legislative Update prepared by Richard Steinecke for Health Profession Regulators of Ontario (HPRO)</li><li>• Legal counsel discusses and explains regulatory and legislative updates at each council meeting as a standing agenda item</li></ul>
	Provide regular orientation for all Council members	<ul style="list-style-type: none"><li>• Council members are routinely informed and updated on their responsibilities</li></ul>	<ul style="list-style-type: none"><li>• Council members understand their responsibilities</li></ul>	<ul style="list-style-type: none"><li>• Orientation sessions for Council members are routinely scheduled</li></ul>	<ul style="list-style-type: none"><li>• See Detailed Schedule of Training Initiatives in Appendix 1.</li></ul>
<b>Improve internal policy coordination and priority-setting</b>	Establish policy coordination and oversight process	<ul style="list-style-type: none"><li>• Policy revision schedule is in place</li><li>• Policies are reviewed and updated on a routine basis</li></ul>	<ul style="list-style-type: none"><li>• Policies are current and reflect changes to regulatory landscape</li></ul>	<ul style="list-style-type: none"><li>• Policy review is current and follows the defined schedule</li><li>• Council and Committee are aware of revision timelines for individual policies</li></ul>	<ul style="list-style-type: none"><li>• Policy Coordination introduced to and approved by the Registration, Quality Assurance and Qualifying Examination Committees, including revision schedules</li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
				<ul style="list-style-type: none"><li>Revision dates noted in policies are current</li></ul>	<ul style="list-style-type: none"><li>Registration and Quality Assurance policies have been reviewed and revised.</li><li>A revision schedule for the Standards of Practice will be developed once all the Standards are developed and implemented.</li><li>The needs assessment was completed in April 2018 for the document management strategy.</li><li>December 2018: Council approved the classification structure and retention schedule.</li><li>A software program for document management was identified, purchased and installed on the College servers.</li><li>Documentation is being sorted and migrated to the new document management program.</li><li>The SharePoint configuration to provide for online access to</li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
					meeting materials is near completion.



## Appendix 1: Council Orientation and Training Sessions

Topic	Date	Attendees
<b>New Council Member Orientation</b>	June 2017	3
<b>Presentation: Governance Training – An Overview of Health Profession Governance and Regulation</b>	October 13, 2017	14
<b>Presentation: Governance Training – What We Can Learn from Regulatory Decisions</b>	March 9, 2018	12
<b>Presentation: Governance Training – Meeting Matters</b>	March 9, 2018	12
<b>New Council Member Orientation</b>	June 2018	1
<b>Presentation: Governance Training – Unconscious Bias in Decision Making – Recognition and Strategies for Mitigation</b>	June 22, 2018	11
<b>Presentation: Governance Training – Financial Literacy for Council Members</b>	September 14, 2018	12
<b>New Council Member Orientation</b>	March 4, 2019	1
<b>Presentation: Governance Training – The College’s Inquiries, Complaints and Reports Committee and the Discipline and Fitness to Practice Committees – What Do They Do and How Do They Do It?</b>	June 14, 2019	11
<b>Presentation: Governance Training – Considerations in Being an Effective Council Member, Committee Member and Chair</b>	September 6, 2019	8
<b>eLearning Module: Unconscious Bias</b>	November 2019	0
<b>New Council Member Orientation</b>	November 25, 2019	2
<b>New Council Member Orientation</b>	December 20, 2019	1
<b>Presentation: The Citizen Advisory Group – Exploring the Public Opinion in Regulation</b>	December 6, 2019	10
<b>Presentation: Health Profession Regulatory Bodies – Governance Updates – BC Government Considers Bold Modifications to Health Profession Regulation</b>	December 6, 2019	10
<b>eLearning Module: Unconscious Bias</b>	January 2020	1
<b>New Council Member Orientation</b>	February 20, 2020	1



<b>Presentation to Council by College Counsel: The RHPA and the College Council</b>	March 31, 2020	9
<b>Presentation to Council by College Counsel: Trends in Health Profession Regulation</b>	April 3, 2020	9
<b>HPRO Discipline Orientation Workshop (offered to Council Members)</b>	June 12, 2020	2
<b>New Council Member Orientation</b>	June 17, 2020	4



## Priority #3 Enhanced Relations with Educational Institutions

Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
<b>Strengthen relationship between CDO and educational program administrators</b>	Coordinate regular meetings between CDO and Ontario educational program leadership	<ul style="list-style-type: none"><li>• Improved communication between CDO and educational programs</li><li>• Improved curriculum</li></ul>	<ul style="list-style-type: none"><li>- Attendance at regular meetings</li></ul>	<ul style="list-style-type: none"><li>- Track the number of meetings, attendance at each meeting and any outcomes</li></ul>	<ul style="list-style-type: none"><li>- Spring 2017, Spring 2018, Fall 2018, Spring 2019, Fall 2019: attendance at Program Advisory Committee - George Brown College</li><li>- Fall 2017: Meeting with Associate Dean Denturism Program at Georgian College re: accreditation &amp; meeting with Chair School of Dental Health at George Brown College</li><li>- February 2019: EQual Canada academic program accreditation presentation to George Brown College, Georgian College and Oxford College</li><li>- Ongoing active communication with denturism program</li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
					administrators from all 3 Ontario Colleges.
<b>Explore whether denturism competency profile is synchronized to new registrant needs</b>	Supplement identified deficiencies through CDO continuing education/QA program requirements	<ul style="list-style-type: none"><li>- Complete gap analysis</li><li>- Develop QA materials to address gaps</li></ul>	<ul style="list-style-type: none"><li>- Gaps are identified</li><li>- QA tools are developed to address gaps</li></ul>	<ul style="list-style-type: none"><li>- Completion of competency profile revisions</li><li>- Development of CSR QA tool based on new competency profile</li></ul>	<ul style="list-style-type: none"><li>- Competency profile revisions completed and will be considered by Council Fall 2020</li><li>- CSR development beginning Fall 2020</li></ul>
<b>Encourage quality and consistency in program content among educational programs</b>	Explore accreditation model options	<ul style="list-style-type: none"><li>- Determine if an accreditation model is appropriate<ul style="list-style-type: none"><li>o If so, develop an accreditation framework</li></ul></li><li>- Consistency in denturism education across educational programs</li></ul>	<ul style="list-style-type: none"><li>- Various accreditation models and options are considered</li></ul>	<ul style="list-style-type: none"><li>- Council decision regarding accreditation</li></ul>	<ul style="list-style-type: none"><li>- March 2019: Council approved Equal Canada to develop a national accreditation framework that would include educational institutions in Ontario, British Columbia and Alberta.</li></ul>
	Engage provincial counterparts in conversation exploring role of national denturism	<ul style="list-style-type: none"><li>- Consistency in denturism education across jurisdictions</li></ul>	<ul style="list-style-type: none"><li>- Attendance at regular meetings with provincial counterparts</li><li>- Revised National Competency Profile</li><li>- National Accreditation Framework</li></ul>	<ul style="list-style-type: none"><li>- Track the number of meetings, attendance at each meeting and any outcomes</li></ul>	<ul style="list-style-type: none"><li>- June 2018: Special Meeting with Denturism Regulators regarding the Commission on Accreditation of Denturism</li><li>- January &amp; February 2019: meetings with British Columbia and Alberta</li></ul>



Goals	Actions	Expected Outcomes, Results, and/or Milestones	Key Performance Indicators	How do we measure these performance indicators?	Results Achieved
	competency profile				regarding National Competency Profile, National Qualifying Examination, and National Accreditation - Council will review the revised national competency profile at its September 2020 meeting.



## College Performance Measurement Framework (CPMF)

### Action Items

Domain: Standard: Measure: Evidence	Evidence Narrative	Action
1.1.1.a.i; 1.1.b.i	Professional members are eligible to stand for election to Council only after meeting pre-defined competency / suitability criteria  Statutory Committee candidates have: met pre-defined competency / suitability criteria,	<b>Council will discuss the development and implementation of competency criteria for Committee members over the next year.</b>
1.2.a.i,ii; 1.2.b	Council has developed and implemented a framework to regularly evaluate the effectiveness of Council meetings and Council.  The framework includes a third-party assessment of Council effectiveness at a minimum every three years.	<b>Council will discuss ways of augmenting its framework for regularly evaluating the effectiveness of Council and its meetings.</b>  <b>Council will discuss engaging a third-party assessor over the next year.</b>
1.2.1.c	The College has a conflict of interest questionnaire that all Council members must complete annually.	<b>Council will investigate opportunities to develop and introduce a conflict of interest questionnaire that can be utilized for Council and Committee meetings.</b>



Domain: Standard: Measure: Evidence	Evidence Narrative	Action
1.2.1.d	Meeting materials for Council enable the public to clearly identify the public interest rationale (See Appendix A) and the evidence supporting a decision related to the College's strategic direction or regulatory processes and actions (e.g. the minutes include a link to a publicly available briefing note).	<b>Briefing Notes will be modified to include a section that identifies the Public Interest in the matter at hand. This section will also include a more explicit explanation of the relationship of the agenda item to the College's strategic direction or regulatory processes and actions so that these important details are more readily accessible to the public.</b>
1.3.1.b	The following information about Executive Committee meetings is clearly posted on the College's website (alternatively the College can post the approved minutes if it includes the following information). the meeting date; the rationale for the meeting; a report on discussions and decisions when Executive Committee acts as Council or discusses/deliberates on matters or materials that will be brought forward to or affect Council; and if decisions will be ratified by Council.	<b>In the 2021 reporting period, the College will provide information regarding Executive Meetings, including the meeting date, rationale for the meeting, a report on discussions and decisions when the Committee acts as Council or discusses/deliberates on matter or materials that will be brought forward to Council, and if decisions will be ratified by Council.</b>
4.8.1.a	The College has and uses policies and processes to govern the collection, use, disclosure, and protection of information that is of a personal (both health and non-health) or sensitive nature that it holds	<b>College staff have drafted policies for the privacy of personal information and privacy breaches. They will be reviewed by Council during the 2021 reporting period.</b>



Domain: Standard: Measure: Evidence	Evidence Narrative	Action
7.15.1.a	Outline the College's KPI's, including a clear rationale for why each is important.	<p><b>In the next reporting cycle, the College will investigate KPIs that reflect specific performance targets and risks. For example, establishing benchmark timelines for processing registration, quality assurance and complaint files.</b></p> <p><b>Council considers feedback surveys (Council meetings, webinars, peer &amp; practice assessments, peer circles etc.) and consultation reports to inform performance targets and identify risks. This information will be utilized to inform formal KPI development during the upcoming reporting period.</b></p>
7.15.1.b	Council uses performance and risk information to regularly assess the College's progress against stated strategic objectives and regulatory outcomes.	<p><b>The College will be developing a risk register during this reporting period to identify internal and external risks that may impact strategic objectives and regulatory outcomes.</b></p>



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## BRIEFING NOTE

To: **Council**

From: **Glenn Pettifer, Registrar & CEO**

Date: **September 10, 2021**

Subject: **COVID Vaccination and Return to In-Office Work or Meetings**

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As organizations contemplate a return to the physical workplace, the question of what an organization can require of its employees, volunteers, or members of Committees or Council with regard to COVID-19 Vaccination status arises. Recent reporting demonstrates that large organizations (such as the major banks and some Universities) have made decisions regarding COVID-19 vaccination status requirements. Many of these organizations have made COVID-19 vaccination mandatory for its employees and members of their broader communities.

The CDO needs to consider this question and decide on a policy related to the requirements of employees, contracted service providers, and members of Committees and Council regarding COVID-19. To that end, I asked our legal counsel to provide answers to the following questions that arise when an organization is contemplating the elements of this policy:

1. Can the College ask staff, committee members, council members etc. about their vaccination status?
2. Can the College require that individuals involved in the work of the College be vaccinated?
3. Can the College require proof of vaccination?
4. Can the College mandate COVID-19 vaccination as a condition of employment?
5. What risks might the College face with the introduction of mandatory vaccination policy?

The responses to these questions are in the attached letter from Rebecca Durcan, College counsel.

Given this legal advice, I am recommending the following policy elements:

1. The College require that individuals who provide services to it (employees, Committee members, Council members, contracted service providers) be to fully vaccinated against COVID-19. "Fully vaccinated" means that 14 days have elapsed since the individual has received their second dose of a two-dose COVID-19 vaccine series (e.g. Moderna, Pfizer-BioNTech, AstraZeneca) or their first dose of a one-dose COVID-19 vaccine series (i.e. Johnson and Johnson). This definition of "fully vaccinated" comes from the Ontario Ministry of Health's Patient Screening Guidance Document published August 26, 2021. The entire document may be found here:

[https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019\\_patient\\_screening\\_guidance.pdf](https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_patient_screening_guidance.pdf).

2. Acceptable proof of full vaccination includes:

A vaccination attestation provided by the College that is completed and signed by the individual. The attestation will include relevant details regarding the individual's vaccination schedule such as the date of administration of the second dose of COVID-19 vaccination or, in the case of a one-dose vaccine (i.e. Johnson and Johnson), the date of the administration of that dose.

or

A copy of the second dose (or single dose in the case of a one-dose vaccine) administration receipt provided by the Ontario Ministry of Health

or

A copy of an official vaccine passport (if/when such an instrument is provided by the Government)

3. If an individual refuses to provide proof of vaccination as outlined in 1 and 2 above, the College will engage in a case-by-case analysis, considering the rights of the individual under the *Human Rights Code*, the College's public protection mandate, and the College's responsibilities to its workers under the *Occupational Health and Safety Act*.

### Public Interest Rationale

In the context of the COVID-19 global pandemic, the College has the responsibility to uphold its public protection mandate by ensuring that every person who engages in the work of the College, either paid or unpaid, adheres to the direction and advice of the relevant governmental authorities such as the Ministry of Health, Public Health Ontario and the Public Health Agency of Canada in a manner that limits, to the extent possible, the risk of exposure to the COVID-19 virus.

### **Options**

After discussion and consideration of these elements, Council may:

1. adopt a motion approving these policy elements for use in drafting a policy that will be enacted once the policy is published;
2. request additions or amendments to the policy elements (1-3 above) for use in drafting a policy that will be enacted once the policy is published;
3. request additions or amendments to the policy elements (1-3 above) for use in drafting a policy that will be returned to Council for consideration at its December meeting; or
4. take other action, as it deems appropriate.

### **Attachment**

1. Letter from Rebecca Durcan, SML Law regarding COVID Vaccination Questions

**Rebecca Durcan**

Direct Line: (416) 644-4783

E-mail: [rdurcan@sml-law.com](mailto:rdurcan@sml-law.com)

August 27, 2021

**DELIVERED VIA EMAIL ([GPettifer@denturists-cdo.com](mailto:GPettifer@denturists-cdo.com))**

Dr. Glenn Pettifer  
Registrar & CEO  
College of Denturists of Ontario  
365 Bloor Street East, Suite 1606  
Toronto, ON M4W 3L4

Dear Dr. Glenn Pettifer:

**Re: Briefing Note - What the College can require in terms of COVID-19 vaccination**

Vaccination policies are complicated, and the lack of clear guidance on these issues from the Court in the context of the COVID-19 pandemic make it more complicated. Creating a vaccination policy, whether voluntary or mandatory, touches on many challenging issues that sit at the intersection of human rights law, worker privacy, and workplace health and safety.

**This briefing note addresses common COVID-19 vaccination questions:**

**1. Can the College ask staff, committee members, council member etc., about their vaccination status?**

Yes. In the context of resuming in-person operations, the College may ask employees and other non-employee workers about their vaccine status. Given the College's public interest mandate and special duty to promote public health, this can be part of a reasonable risk planning process.

**2. Can the College's COVID-19 vaccination policy require that individuals involved in the work of the College be vaccinated;**

Yes. Although the choice to receive vaccination is voluntary, there is nothing at law that prevents the College from implementing policies which mandate COVID-19 vaccination to ensure workplace safety. Under the *Occupational Health and Safety Act*, employers have a duty to maintain a healthy and safe workplace,

which could include a vaccination policy requiring workers to get vaccinated in an effort to protect staff, and the public.

However, if someone refuses to get vaccinated, the College must engage in a case-by-case analysis to determine why. If the refusal to be vaccinated is related to human rights protected ground of discrimination, they would potentially be entitled to accommodation under the human rights legislation, which could take the form of continuing to work from home, or a requirement to wear PPE, social distancing, and otherwise follow public health guidance. If the refusal to be vaccinated is related to personal preference, the College will be in a better position to push back and require vaccination.

### **3. Can the College require that they provide proof of vaccination to the College**

Yes. The College can request proof of vaccination from workers and others in workplace to provide a healthy and safe workplace. In this context, safety trumps privacy. However, if someone refuses to provide proof of vaccination, the College must engage in a case-by-case analysis to avoid potential human rights challenge. If the reason for not providing proof of vaccination relate to human rights protected ground, the worker would potentially be entitled to accommodation. If the reason for not providing proof of vaccination relate to personal preference, the College could consider alternative measures or termination options (though it likely wouldn't be for cause)

The College must be mindful of the potential impact collecting proof of vaccination could have on the individual's privacy rights. An appropriate balance between workplace safety and the individual's privacy must be maintained. The College's vaccination policy should outline how the information will be collected, used, and/or disclosed.

### **4. Can the College mandate COVID-19 vaccination as a condition of employment?**

Yes. Employers have more flexibility in imposing mandatory vaccination as a condition of hire for new employees. We recommend that you inform potential employees about this requirement during the recruitment process, and explain why the requirement is important to the College from a health and safety perspective and in light of the College's public protection mandate. This may give the College a better sense of the person's status before presenting the agreement and lessens the chance of surprises.

The College has obligations under the *Human Rights Code* even with respect to prospective employees, and that means that rescinding an offer if the condition is not met may not be straightforward. You have to be prepared if the prospective

employee refuses to answer the question, or shares that they are not vaccinated due to a reason related to human rights protected grounds.

**5. What risks might the College face with the introduction of a mandatory vaccination policy?**

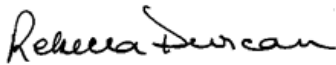
There is a potential risk of litigation. The legalities of a mandatory vaccination requirement are not clear. To date, the Courts have not adjudicated a case involving a mandatory vaccination policy in the context of the COVID-19 pandemic, and it is not clear whether an employer's decision to mandate employee vaccinations would be upheld by a judicial or arbitral decision-maker outside an environment where vulnerable individuals are present.

In recent weeks, we have seen federal, provincial and municipal governments, private businesses as well as Canada's biggest banks announce plans to implement mandatory vaccination policies for many of their returning staff. The legality of these mandatory policies have yet to be tested before the Courts.

Whether the College chooses to roll out a mandatory or voluntary vaccine policy to provide a safe work environment, you should carefully consider, the nature of your workplace, the population you serve, and what you hope to achieve with the policy. We suggest that you remain flexible and listen to employee concerns when developing and implementing policies, communication will be key in increasing buy-in among workers.

Yours very truly,

**STEINECKE MACIURA LEBLANC**



Rebecca Durcan  
RD/rm



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## BRIEFING NOTE

To: **Council**

From: **Kris Bailey**

Date: **September 10, 2021**

Subject: **CDO Representatives on Tri-College Transition Oversight Committee**

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### Background

The Councils of each of three Oral Health Profession Regulatory Colleges: College of Dental Hygienists of Ontario, College of Dental Technologists of Ontario, College of Denturists of Ontario that were engaged in the discussion around the possibility of a Tri-College organizational amalgamation, have adopted a motion that would see:

*"the formation of a Transition Oversight Committee. The composition of the Transition Committee will be, from each College: one public appointee, one professional member, and the Registrar. The total number of members of the Committee will be nine. The initial mandate of this Committee will be to begin the process of oversight and direction of the amalgamation vision, starting with the preparation of Terms of Reference for the Committee."* The initial work of this Committee will also include the selection of a governance advisor to assist the Committee in ultimately building a vision framework.

Members of the CDO Council were canvassed for their interest in serving on this Committee. Following these conversations, I have identified the following as potential CDO representatives on this Committee:

1. Ms. Lileath Claire, Public Appointee, Member of the Executive Committee, Chair, Inquiries, Complaints and Reports Committee, Patient Relations Committee; and
2. Mr. Michael Vout Jr. Member of the Profession, Immediate Past Member of Council, Executive Committee, Chair, Qualifying Examination Committee, Member of Inquiries, Complaints and Reports Committee, Chair of Fitness to Practice.

Mr. Vout is recommended as he has been on the CDO Council since the beginning of the organizational amalgamation conversation. Not only does he have a wealth of experience in all facets of the work of

the College, but he also holds much of the organizational memory regarding these amalgamation discussions, and the associated concerns, threats, and advantages.

It is my recommendation that Council approve the appointment of these two individuals who, along with the Registrar, will represent the interests of the CDO on the Transition Oversight Committee. I will act as a back-up or alternate, should the need arise.



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## BRIEFING NOTE

To: **Council**

From: **Kris Bailey, President**

Date: **September 10, 2021**

Subject: **National Day for Truth and Reconciliation – September 30**

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### Background

The Government of Canada recently passed legislation to make September 30 a federal statutory holiday called the National Day for Truth and Reconciliation. The Government states that “this day is an important step in the reconciliation process. It provides an opportunity to recognize and commemorate the tragic history and ongoing legacy of residential schools, and to honour their survivors, their families, and communities”. There are currently no provincial initiatives related to this National Day.

This National Day for Truth and Reconciliation could provide an opportunity for individuals and organizations to undertake individual approaches that signal recognition, commemoration, and commitment to the Truth and Reconciliation process.

Council is asked to consider whether the College should, in some way, officially acknowledge the National Day for Truth and Reconciliation.

Some activities that can be helpful in messaging this organizational acknowledgement:

1. Recognizing the National Day on the College website, encouraging members of the College and the broader community to engage in their own reflection and action related to Truth and Reconciliation; and
2. Using that day for CDO staff to review the recommendations from the Truth and Reconciliation Commission with a view to providing Council with a summary of items that could be undertaken by the College in support of the Truth and Reconciliation process.



## PRACTICE DIRECTION

### Federal Statutory Holiday: National Day for Truth and Reconciliation

The Government of Canada recently passed legislation to make September 30 a federal statutory holiday called the National Day for Truth and Reconciliation. This day is an important step in the reconciliation process. It provides an opportunity to recognize and commemorate the tragic history and ongoing legacy of residential schools, and to honour their survivors, their families and communities.

Starting this September 30, 2021, the National Day for Truth and Reconciliation will become a designated paid holiday for federally regulated workers in the public and private sector and will no longer be considered a working day for the purpose of Tribunal proceedings. Therefore, the Tribunal will not be open for business on September 30, and no hearings will be held on that day. Moreover, the Tribunal will look at the schedule of active cases, modify any deadlines as necessary and convey any changes to the affected parties.

For more information on holidays with regard to Tribunal activities and proceedings, please consult the Tribunal's ["Holidays" for the Purpose of Tribunal Proceedings](#) practice notice.

August 18, 2021



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## BRIEFING NOTE

To: **Council**

From: **Kris Bailey, President**

Date: **September 10, 2021**

Subject: **New Council Member Mentoring Program**

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### Background

Under Priority 2 “Excellent in Governance” of the College’s 2017-2020 Strategy Map, under initiative “c” that attends to **improving Council and Committee member training**, is item (ii) “**Implement mentoring process for new Council members**”.

Such a program would provide new Council members with structured access to experienced members of Council who are interested in mentoring new Council members. Information regarding issue context and historical perspective can be provided to new Council members by experienced members. Conversations between any two members of Council also support exposure to differing viewpoints. A structured, rather than informal, mentoring process provides a specific avenue for these discussions to occur. Such a structured program also helps facilitate more regular contact between Council members in between scheduled Council meetings.

A draft Program description for Council’s consideration is attached.

### Public Interest Rationale

Well informed members of Council, be they public appointees or members of the profession, support an informed, insightful governance process.

### Options

Council is asked to consider the elements outlined in the draft Program (attached). Following consideration and discussion, Council may:

1. Adopt a motion to approve the elements of the program that are outlined in the accompanying draft;
2. Request amendments to the draft and adopt a motion to approve the elements of the program as amended;
3. Request amendments to the draft and adopt a motion to request that the revised draft be returned to Council for consideration at its next meeting;
4. Take other action, as it deems appropriate.



## New Council Member Mentoring Program

The CDO Council has identified the opportunity for the College to establish a mentoring program for new members of Council.

The goal of such a program is to ease the introduction of new members of Council to Council and the work of the College by:

1. providing new Council members with structured access to experienced members of Council who are interested in mentoring new Councillors;
2. establishing a framework for regular interactions between the member and the new Council member at the beginning the new Councillor's term on Council;
3. the conversation between the experienced Councillor and the new member of Council is not constrained by a prescribed framework but is designed to provide the new Council member with information related to:
  - (i) historical aspects or considerations of the work of the College;
  - (ii) the organizational structure of the College of Denturists of Ontario and how its legislated responsibilities are accomplished;
  - (iii) informal background on items that may be on an upcoming agenda or have arisen during general discussion;
  - (iv) post-Council meeting considerations;

### How the Program Works:

1. Mentor – New Council member pairs are established;
2. The Mentor will contact the new Council member to set up a time for the pair to meet and discuss their vision(s) for the mentoring relationship;
3. At the very minimum, mentoring pairs will meet prior to a Council meeting when the meeting materials have been released and at a time soon after a Council meeting to discuss the meeting and any questions or matters arising. There is no limit on the number of interactions between a mentor and new Council members;
4. It is the intent of this program that these pre- and post- Council meeting interactions between the mentoring pairs take place for the first three Council meetings that a new Council member attends.



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## BRIEFING NOTE

To: **Council**

From: **Alexia Baker-Lanoue, Chair, Patient Relations Committee**

Date: **September 10, 2021**

Subject: **Proposed Revision to the Patient Relations Committee Terms of Reference**

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### Background

The Patient Relations Committee met on August 10, 2021. The Committee discussed the responsibilities of the Committee; both legislated and otherwise.

Since it had been some time since the Committee met, the Committee reviewed its Terms of Reference. The Committee found that the Terms of Reference were still relevant and appropriate for the Committee, with one exception. The Terms of Reference were last approved by Council in 2018 and since then there has been a pertinent amendment to the RHPA. Specifically, the Council is no longer required to give a written report to the Health Professions Regulatory Advisory Council when changes are made to the Patient Relations Program. The Committee is proposing the simple amendment of deleting the reference to providing such reports.

The Committee-approved amended Terms of Reference are attached for Council's consideration and approval.

### Options

After discussion and consideration of this matter, Council may elect to:

1. Approve the amended Terms of Reference for the Patient Relations Committee.
2. Modify the amended Terms of Reference for the Patient Relations Committee and approve the modified draft.
3. Other.

### Attachments

1. Draft Amended Terms of Reference – Patient Relations Committee



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## Terms of Reference Patient Relations Committee

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### Purpose

The purpose of the Patient Relations Committee is to advise the Council with respect to the patient relations program.

### Responsibilities

1. To develop, monitor and oversee the administration of a "patient relations program" that will enhance relations between members and patients.
2. The patient relations program shall include measures for preventing and dealing with sexual abuse of patients. These measures must include:
  - (a) educational requirements for members;
  - (b) guidelines for the conduct of members with their patients;
  - (c) training for the College's staff; and
  - (d) the provision of information to the public.
3. Administer, on behalf of the Council, the Funding for Therapy and Counselling Program of the College, including:
  - (a) Developing policies and procedures governing the administration of requests for funding;
  - (b) Developing appropriate forms for patients to seek funding for counselling or therapy under this program;
  - (c) Processing any requests for funding in a timely manner;
  - (d) Overseeing the payment of funds by the Registrar to the therapist or counselor chosen by the person and as approved by the Committee; and
  - (e) Overseeing any proceedings initiated by the College against a member in a court of competent jurisdiction to recover any funds paid by the College where there was a finding by a panel of the Discipline Committee that the member sexually abused a patient.

4. Develop information programs for the public which would assist individuals to exercise their rights under the Health Professions Procedural Code concerning what constitutes sexual abuse and the complaints and discipline process for complaints about sexual abuse.
5. Develop education programs for members which include sexual abuse prevention and fostering respectful relationship with clients, such as maintaining appropriate boundaries.
6. Review college policies, training and procedures to ensure appropriate handling of sexual abuse matters at the College.
7. Any other responsibilities as assigned by Council.

### Accountability and Reporting Relationships

The Patient Relations Committee advises the Council with respect to the patient relations program. ~~The Council in turn must give a written report to the Health Professions Regulatory Advisory Council when changes are made to the Patient Relations program, describing the changes.~~

### Members

Pursuant to section 24.07 of the College by-laws the Committee shall be composed of:

- at least two members of the profession who are members of Council;
- at least two Public Members who are members of Council; and
- one or more current membership of the profession "or persons" who are not members of Council, where Council so wishes.

### Review

The Council will review these terms of reference at least every five years.

### Revision Control

Date	Revision	Effective
<b>December 14, 2018</b>	Approved by Council	<b>December 14, 2018</b>



## **CCDI Consulting Inc. Consultation CCDI, Inc.**

### **Inclusive Leadership Overview (1 hour)**

The aim of this course is to explore the concept of inclusive leadership, a model which integrates the fundamental principles of diversity and inclusion into leadership practice.

Participants are guided through questions to help them reflect on their own practices of leadership, how this connects to their own identities, and begin to interrogate if their own actions can be seen as inclusive. This session will examine several traits that inclusive leaders can hold, and provide space for participants to engage in conversation about actions they would like to make to shift towards being a more inclusive leader.

#### **The Facilitator**



**Lenworth (Lenny) Wallace, MA, PGDip, BA**

Lenworth (Lenny) Wallace is a Learning Manager with the CCDI in Toronto. He has extensive experience in managing, customizing and facilitating instructor-led and eLearning training content to meet clients' needs in English and French. With a background in Geography and the Humanities, he is highly passionate about supporting cultural understanding and development.

Lenny is also a trained teacher who spent 20 years working in education at the local and national levels in his native Jamaica. He holds a master's degree in Communication for Social and Behaviour Change from the University of the West Indies, and spends much time researching educational solutions diversity and inclusion content.

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