



110th Council Meeting

Friday, December 9, 2022 – 10:00 a.m. to 2:00 p.m.

Teleconference via Zoom & YouTube Live Stream

Please contact the College at info@denturists-cdo.com
to receive the meeting access information.

AGENDA

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1. Call to Order		
2. Approval of Agenda	Decision	1
3. Declaration of Conflict(s) Comments on Conflict of Interest by Rebecca Durcan, <i>College Counsel, Co-Managing Partner, Steinecke Maciura LeBlanc</i>	Declaration	
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5. In Camera Meeting of Council Pursuant to section 7(2)(d) of the <i>Health Professions Procedural Code</i> , being Schedule 2 to the <i>Regulated Health Professions Act, 1991</i> .		
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14. Other Business		

<p>15. Next Meeting Dates (Proposed)</p> <ul style="list-style-type: none"> ➤ 111th Council Meeting – March 10, 2023 ➤ 112th Council Meeting – June 9, 2023 ➤ 113th Council Meeting – September 22, 2023 ➤ 114th Council Meeting – December 8, 2023 	<p>Decision</p>	
<p>Break – 12:00 to 12:30 p.m.</p>		
<p>16. In-Camera Meeting of Council</p> <p>Pursuant to section 7(2)(d) of the <i>Health Professions Procedural Code</i>, being Schedule 2 to the <i>Regulated Health Professions Act, 1991</i>.</p>		
<p>17. Adjournment</p>		



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).



109th Council Meeting Teleconference

Held via Zoom

Friday, September 9, 2022 – 10:00 a.m. to 12:00 p.m.

MINUTES

Members Present:

Lileath Claire
Kristine Bailey
Abdelatif Azzouz
Michael Bakshy
Avneet Bhatia
Norbert Gieger
Elizabeth Gorham-Matthews
Aisha Hasan
Paul Karolidis
Adam-Christian Mazzuca
Garnett A. D. Pryce
Christopher Reis
Gaganjot Singh
Joseph Whang

- President
- Vice President

Guests:

Anthony Marini, Martek Assessments Ltd.

Legal Counsel:

Rebecca Durcan, Steinecke Maciura LeBlanc

Staff:

Roderick Tom-Ying, Acting Registrar and CEO
Megan Callaway, Manager, Council and Corporate Services
Tera Goldblatt, Manager, Regulatory Programs
Elaine Lew, Manager, Registration and Qualifying Examinations
Catherine Mackowski, Manager, Professional Conduct

1. Call to Order

The President called the meeting to order at 10:02 a.m.

The President acknowledged that the land we are meeting on is the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples and is now home to many diverse First Nations, Inuit

and Métis peoples. It was also acknowledged that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

2. Approval of Agenda

MOTION: To approve the agenda as presented.

MOVED: A. Azzouz

SECONDED: N. Gieger

CARRIED

3. Declaration of Conflict(s)

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

4. College Mission and Mandate

The President drew Council members' attention to the College Mission and the College Mandate, which were provided.

5. Consent Agenda

MOTION: To accept the Consent Agenda except for Item 5.14.

MOVED: E. Gorham-Matthews

SECONDED: G. Singh

CARRIED

The Acting Registrar reported that, as per the decision made by Council at the June 17, 2022 meeting, the Strategic Initiatives budget has been removed from the 2022-2023 Operating Budget as it will be funded solely by unrestricted net reserves in the amount of \$150,000.00. This is reflected in the updated Statement of Operations (Item 5.16) which now shows a projected deficit of \$7,382.08.

MOTION: To accept Item 5.14.

MOVED: A. Azzouz

SECONDED: N. Gieger

CARRIED

6. Update on Multi-Jurisdictional Examination and Approval of Additional Provincial Requirements

A verbal update on the Multi-Jurisdictional Qualifying Examination was provided by Mr. Anthony Marini, President, Martek Assessments Ltd and the College's Psychometrician. The Acting

Registrar introduced the draft Additional Provincial Requirements for Accreditation document and provided background information on the accreditation process for denturism schools across Canada by EQual, Accreditation Canada.

MOTION: To approve the draft Additional Provincial Requirements for Accreditation as presented.

MOVED: E. Gorham-Matthews

SECONDED: N. Gieger

CARRIED

7. Draft Personal Information Privacy Policy

The Acting Registrar introduced the draft Personal Information Privacy Policy and provided background on the Policy's development. A discussion took place regarding the designation of the Information Officer and whether the Policy should name a specific person, i.e. the Registrar.

MOTION: That the draft Policy be sent back for further work and returned to Council for consideration.

MOVED: A. Azzouz

SECONDED: G. Singh

CARRIED

8. Records and Information Management Program Presentation

The Manager, Council & Corporate Services gave a presentation regarding the Records and Information Management Program including program development and implementation, the records digitization project, staff training, and next steps.

9. Honourary Retirement Status Program

The Acting Registrar provided background information on the Honorary Retired Status Program, its performance, and similar programs offered by other regulators. A discussion took place and Council members shared feedback on potential changes to the program. There was general consensus that the program is valuable and should not be discontinued. Staff was directed to undertake further work and return this item with proposed changes to Council for consideration.

10. Other Business

No other business was raised.

11. In Camera Meeting of Council

MOTION: To move the meeting in camera.

MOVED: K. Bailey

SECONDED: N. Gieger

CARRIED

Pursuant to Section 7(2)(d) of the Health Professions Procedural Code under the *Regulated Health Professions Act (1991)*, the meeting moved in camera at 11:30 a.m. and ex camera at 12:06 p.m.

12. Next Meeting Date

The following training and meeting dates were provided for information:

- CCDI Instructor-led Training Sessions – Friday, November 11, 2022
 - Introduction to Unconscious Bias
 - Respect in the Workplace
- 110th Council Meeting – Friday, December 9, 2022

13. Adjournment

The meeting was adjourned at 12:11 p.m.

Lileath Claire
President

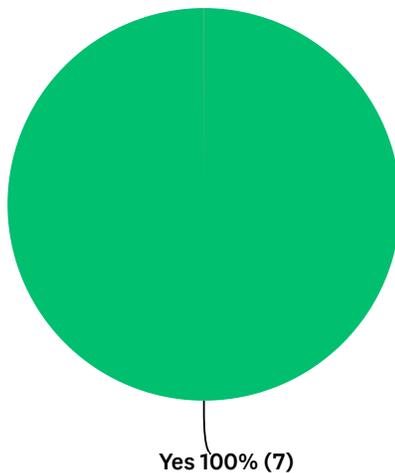
Date

Roderick Tom-Ying
Acting Registrar and CEO

Date

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

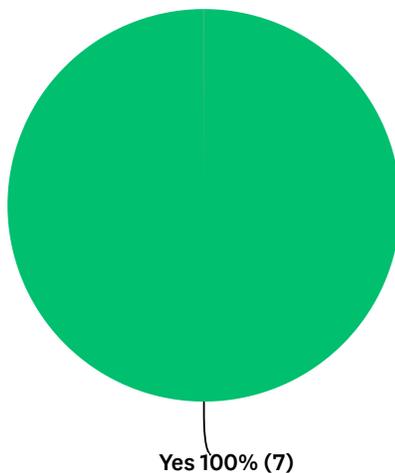
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q2 I received this supportive information in a timely manner.

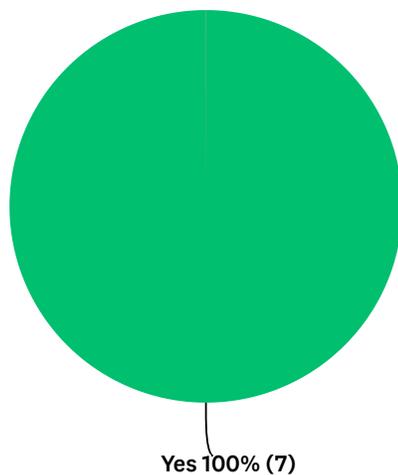
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q3 I was prepared for this meeting.

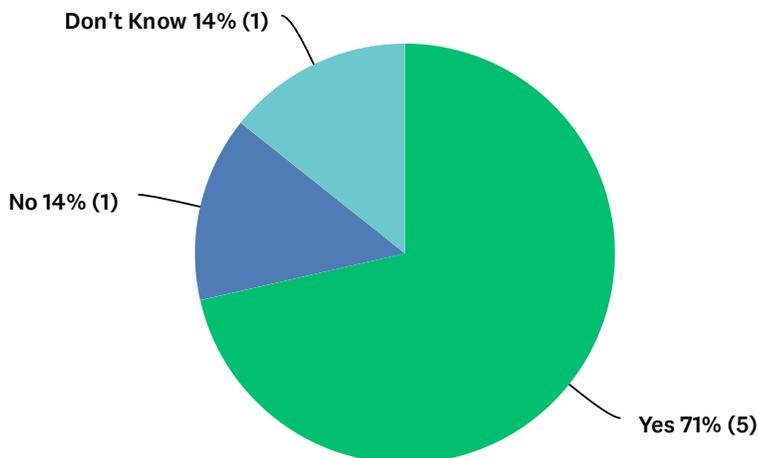
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q4 All Council members appeared prepared for this meeting.

Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

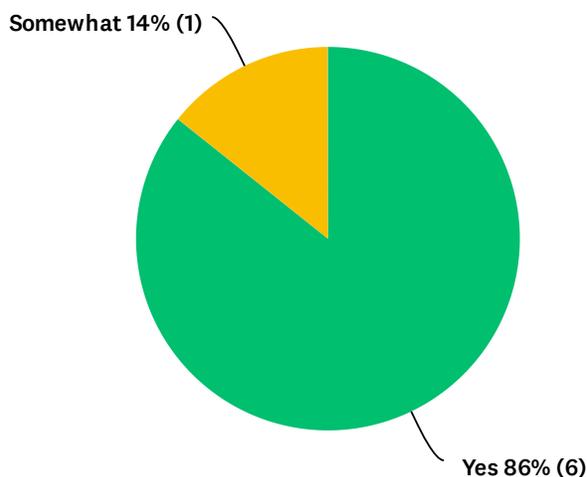
Q5 List any additional supports or resources that would have helped you better prepare for this meeting.

Answered: 1 Skipped: 6

#	RESPONSES	DATE
1	Maybe separating the sessions (not having council and training same day)	9/9/2022 2:42 PM

Q6 This meeting was effective and efficient.

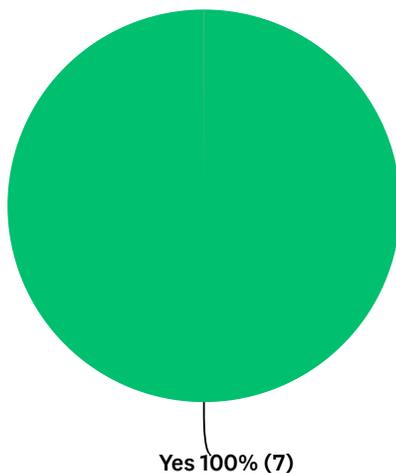
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q7 The objectives of this meeting were achieved.

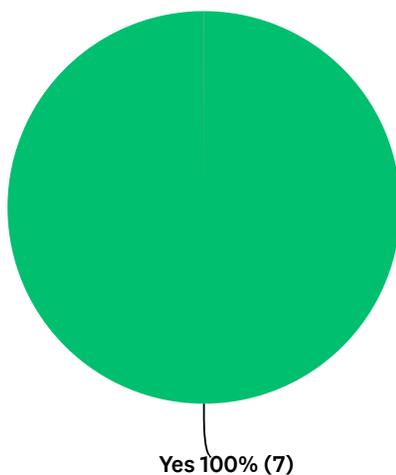
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

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

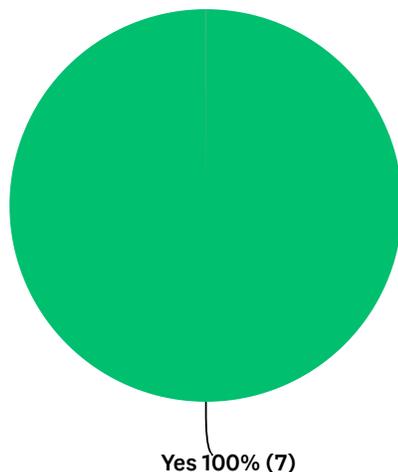
Answered: 7 Skipped: 0



#	COMMENTS	DATE
	There are no responses.	

Q9 I felt comfortable participating in the Council discussions.

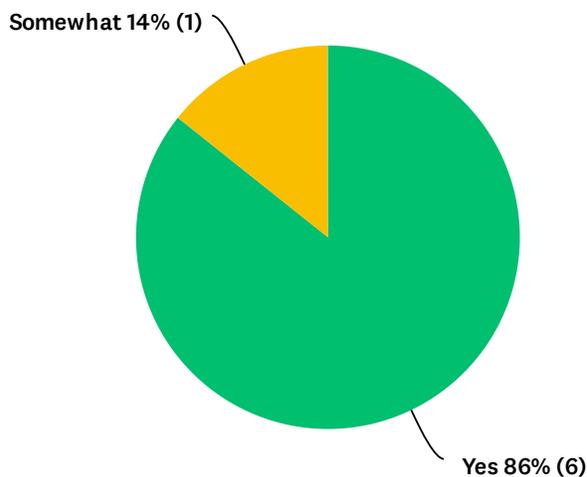
Answered: 7 Skipped: 0



#	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: 4 Skipped: 3

#	RESPONSES	Agenda Item 6.2 DATE
1	Lots of material, with an in-camera meeting was completed on time. Perhaps financials and CEO's Report should come out of the consent agenda since is normally pulled anyway.	9/11/2022 4:42 PM
2	Productive and informative	9/9/2022 5:25 PM
3	meeting was well moderated All items were covered in a timely manner	9/9/2022 2:57 PM
4	Very clear and the opportunity to give feedback	9/9/2022 2:42 PM

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

Answered: 1 Skipped: 6

#	RESPONSES	DATE
1	N/a	9/9/2022 5:25 PM

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

Answered: 3 Skipped: 4

#	RESPONSES	DATE
1	If there is an in-camera meeting, then the general meeting cannot be longer than 1 hr 15-30 minutes otherwise the time of the meeting should be extended by 30 minutes. If we are done earlier, it would be easier for the attendees vs going longer.	9/11/2022 4:42 PM
2	Try to end by Noon	9/9/2022 5:25 PM
3	members should be encouraged to play a more active role in discussions	9/9/2022 2:57 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: 0 Skipped: 7

#	RESPONSES	DATE
	There are no responses.	



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Executive Committee**

Reporting Date: **December 9, 2022**

Number of Meetings since
last Council Meeting: **2**

The Executive Committee met on September 21 and November 1, 2022 to discuss the performance appraisal of the Acting Registrar and the appointment of a permanent Registrar. Two Clinic Name Registration Applications were also considered, and the format of the December Council meeting (in-person or online) was discussed.

The Committee directed that the Acting Registrar's performance appraisal, including feedback and objectives, be presented to Council at a special in-camera meeting, along with consideration of the appointment of a permanent Registrar.

The special in-camera meeting of Council was held on November 8, 2022, pursuant to CDO By-laws 22.16(i) and 22.17, and section 7(2)(d) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*.

One additional Clinic Name Registration Application was considered electronically by the Committee since its last Report to Council.

Respectfully submitted by Ms. Lileath Claire
President and Chair of the Executive Committee



COMMITTEE REPORT TO COUNCIL

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

Reporting Date: **December 9, 2022**

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

Role of the Committee

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

Executive Summary

Since the September 9, 2022 Council meeting, the ICRC has considered 4 complete investigations and made final dispositions in 3 matters (3 complaints investigations).

Decisions Finalized:

Complaints	3
Registrar's Reports	0
Total	3

Dispositions (some cases may have multiple dispositions or multiple members)

Advice/Recommendation/Reminder	2
Cautions	1
Deferred	0



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Discipline Committee**

Reporting Date: **December 9, 2022**

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

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 September 9, 2022 Council meeting, a Panel of the Discipline Committee has held one half day hearing; there is one outstanding referral to the Discipline Committee which is yet to be scheduled.

A. Panel Activities

1. The Panel held a hearing September 26, 2022.

B. Discipline Committee Meetings

1. The Discipline Committee did not have a meeting in this quarter.

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



COMMITTEE REPORT TO COUNCIL

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

Reporting Date: **December 9, 2022**

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

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



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Patient Relations Committee**

Reporting Date: **December 9, 2022**

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

The Patient Relations Committee did not meet since its last report to Council on September 9, 2022.

Respectfully submitted by Ms. Kristine Bailey
Chair of the Patient Relations Committee



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Quality Assurance Committee**

Reporting Date: **December 9, 2022**

Number of Meetings since
last Council Meeting: **2**

Role of the Committee

The Quality Assurance Committee 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.

Meeting: September 12, 2022

Requirement Considered	Result
2019-2020 Peer & Practice Assessments	<ul style="list-style-type: none">• 1 – Remedial action required• 1 – CPD Audit ordered
2020-2021 Peer & Practice Assessments	<ul style="list-style-type: none">• 15 – Satisfactory• 4 – Remedial action required• 1 – Closed due to retirement

Meeting: October 13, 2022

Requirement Considered	Result
2019-2020 Peer & Practice Assessments	<ul style="list-style-type: none">• 2 – Remedial action required
2020-2021 Peer & Practice Assessments	<ul style="list-style-type: none">• 6 – Satisfactory• 11 – Remedial action required

Program Development:

2022-2023 Peer and Practice Assessments

The Committee carried a motion to forego the 2022-2023 random selection of members for Peer & Practice Assessments in favour of finalizing the outstanding PPA's from as far back as 2019.

Peer and Practice Assessor Re-Appointments

The Committee re-appointed ten Peer and Practice Assessors for a 3-year term ending in 2025.

Peer Circles

Peer Circles was held at the annual Perfecting Your Practice Conference put on by the Denturists Association of Ontario, on September 15, 2022. The event was very well-received and 100% of participants who submitted the survey indicated they would recommend the activity to a colleague.

Respectfully submitted by Mr. Abdelatif (Latif) Azzouz
Chair of the Quality Assurance Committee



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Registration Committee**

Reporting Date: **December 9, 2022**

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

Activities during the Quarter:

The Registration Committee has met once on November 10th, 2022, since its last report to Council on September 9th, 2022.

At its November 10th, 2022, meeting, the Committee met to consider the proposed Language Proficiency Policy update, two academic assessments, and one application for a Certificate of Registration referred to the Committee.

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



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Qualifying Examination Committee**

Reporting Date: **December 9, 2022**

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

Activities during the Quarter:

The Qualifying Examination Committee has not met since its last report to Council on September 9th, 2022.

Respectfully submitted by Mr. Abdelatif (Latif) Azzouz
Chair of the Qualifying Examination Committee



COMMITTEE REPORT TO COUNCIL

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

Reporting Date: **December 9, 2022**

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

Activities during the Quarter:

The Qualifying Examination Appeals Committee has met once on September 29th, 2022, since its last report to Council on September 9th, 2022.

At its September 29th, 2022, meeting, the Qualifying Examination Appeals Committee heard from two appellants, one from the June 2022 Multi-Jurisdictional MCQ exam administration and another from the June 2022 OSCE exam administration. The Committee rendered two decisions at its meeting with no outstanding items.

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



To: **Council**

From: **Lileath Claire, President**

Date: **December 9, 2022**

Subject: **President's Report**

I am pleased to provide this report to Council, representing selected activities, events, and accomplishments of the College during the period from the last Council meeting Sep-09-2022.

Ministry of Health's new requirements in force January 1, 2023

The CDO received on October 28, 2022, official word that the Ministry will be enforcing three new requirements across all health regulatory colleges:

By **January 1, 2023**, the following will be in force:

1. The prohibition on the requirement for Canadian work experience unless otherwise exempted.
2. The requirement related to language proficiency testing.
3. Timely registration decisions and responses.

The CDO (Council and College Staff) will work to ensure compliance with all Ministry requirements and will provide timely information to Council at large.

The Canadian Network of Agencies for Regulation (CNAR) 2022

The Acting Registrar and President attended CNAR 2022 Conference, held in Charlottetown, Prince Edward Island, participating in a range of Workshops and specialized content seminars. The conference offered Canadian specific subject matter relevant across regulatory professions, peer networking, and opportunity to learn about the most up-to-date services offerings from sponsors.

Acting Registrar

As required by College By-law Article 8.04, Council has defined, executed, and successfully completed the process of Annual Performance Appraisal of the College's Acting Registrar.

Re-Appointment of Ms. Kris Bailey and Mr. Gaganjot Singh

The College has recommended to the Ministry the reappointment of Ms. Kris Bailey (Vice President) and Mr. Gaganjot Singh for another term as public representatives on the College Council.

IDEA (Inclusion, Diversity, Equity, Accessibility) Training & Certification

Council members were issued IDEA Essentials Certificate from CCDI Consulting Inc. following successful completion of the CCDI Instructor led courses –

- IDEA Fundamentals – September 9, 2022
- Introduction to Unconscious Bias – November 11, 2022
- Respect in the Workplace – November 11, 2022



To: **Council**

From: **Roderick Tom-Ying, Acting Registrar and CEO**

Date: **December 9, 2022**

Subject: **Registrar's Report**

I am pleased to provide this report to Council for the period of September 9, 2022 – December 9, 2022, that covers the operational activities of the College over the Fall months.

Peer Circles

The College has wrapped up its 2022 Peer Circles season with the return of in-person events at both the Denturists Association of Ontario (DAO)'s Perfecting Your Practice event on September 15 & 16, and the Denturists Group of Ontario (DGO)'s Continuing Education event on November 4th.

The DAO celebrated their 50th anniversary in 2022 and invited the College Registrar to provide remarks at their celebratory luncheon. It was an honour for the CDO to join in on the celebration and we wish them continued success and longevity.

This year marked CDO's first appearance at the DGO's continuing education event and from the initial feedback provided, members of the DGO found Peer Circles to be exceptionally useful. We want to thank the executives of the DGO for reworking their event's schedule to accommodate the Peer Circles event. If scheduling permits, we hope to return to the DGO event on a continual basis and build new relationships with Denturists.

Peer Circles seeks to bring Denturists from across the province to share their ideas and thoughts on specific and unique denturism practice cases.

Major thanks to Ms. Tera Goldblatt, Manager of Quality Assurance, for being the staff lead on Peer Circles and of course this would not be possible without the support of all the Denturists who graciously volunteered their time.

Peer Circle facilitators and College Staff at the DAO PYP event on September 15, 2022



Peer Circle facilitators, DGO Executives, and College Staff at the DGO Con Ed event on November 4, 2022



Professional Development

The College has a strong culture of professional development for its staff and members of Council. I am pleased to continue this important endeavour and report the following activities that occurred during the reporting period:

- Sept 9, 2022 - Council and College Staff attended part 1 of 3 training workshops entitled IDEA (Inclusion, Diversity, Equity, and Accessibility) Fundamentals hosted by the Canadian Centre for Diversity and Inclusion.
- Sept 30, 2022 - Joint CDO & CDHO Truth and Reconciliation Blanket Exercise to learn about residential schools, the Sixties Scoop, missing and murdered Indigenous women and girls, and other instances of colonial violence and policies that negatively impacted Indigenous peoples.
- Oct 20, 2022 – McMaster University – Quality Improvement and Patient Safety Symposium 2022 – College Staff
- Oct 24-26, 2022 – 2022 Annual CNAR Conference – Registrar and President
- Nov 3, 2022 – Society of Adjudicators and Regulators – Changing Tides: The Ebb and Flow of Administrative Justice – 3 members of the ICRC
- November 11, 2022 – Parts 2 and 3 workshops on IDEA Fundamentals by CCDI – Council and College Staff
- December 1, 2022 – HPRO Communicator’s Day Conference – College Staff

Odds and Ends

- Ms. Tera Goldblatt’s title was revised in September from Manager of Regulatory Programs to Manager of Quality Assurance and Sexual Abuse Liaison. The title change reflects a better characterization of her role and the role of sexual abuse liaison for the College.
- Georgian College Presentation conducted by Ms. Catherine Mackowski on September 21, 2022, on Regulation, Practice Standards, and Ethical Considerations.
- College Staff attended the Ministry of Health’s Systems Partner Meeting to discuss CDO’s 2021 CPMF report and provide update on 2022 initiatives.
- Georgian College 3rd year student presentation conducted by Ms. Elaine Lew and Mr. Roderick Tom-Ying providing an overview of the CDO and Qualifying Examinations on November 28, 2022.



BRIEFING NOTE

To: **Council**
From: **Roderick Tom-Ying, Acting Registrar and CEO**
Date: **December 9, 2022**
Subject: **Financial Report: April 1, 2022 – October 31, 2022**

Public Interest Rationale

The College of Denturists of Ontario's mandate is to protect the public by ensuring Registered Denturists provide safe, ethical, and competent denturism care and service in Ontario. As part of that mandate, the College Council has the overall responsibility of ensuring prudent financial stewardship of the College's financial resources as part of its core principle of good governance. Implementation of regulatory best practices, strategic planning, performance monitoring, fiscal management, external compliance, and reporting forms some of these core principles. Council must ensure that the College has a fiscally responsible and strategic operating budget each year.

Statement of Operations for period April 1, 2022 – October 31, 2022

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 half of the fiscal year, consequently, the expenses incurred should be well underway. However, not every line item adheres to this because some expenses are not expensed over time but are lump sum payments.

Items to Highlight

Revenue

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 extended to September 30, 2022, when the second installment of the Registration renewal fee is due. As such, the registration fees are aligned with that expected from the budget – with 106% YTD as a percentage of the budget. The increase over budgeted amounts are due to new registrations throughout the year that were not previously budgeted for.

"Other income" and "other fees" have seen a 285% and 161% rise year to date percentage in relation to the budget. As both these budget line items are relatively small (\$4500 and \$6500 total revenue budgeted), any small fluctuation would disproportionately report a larger total budget percent increase.

For "other fees", there were a larger than anticipated increase in late fees received for the annual renewal. For "other income", the CDO recorded a small income (\$5000) for resource sharing with another regulator as well as significantly increased investment income (in its general savings account) due to rising interest rates.

Expenses

Qualifying Examinations – the year-to-date percentage of budget is at 80% and this excludes the upcoming February 2023 examination. I wanted to inform Council that the CDO expects a significantly decreased number of applicants for the 2023 examination year (Feb 2023 and June 2023 exams). This decrease is due to the COVID-19 pandemic causing all three educational institutions to pause or decrease admissions enrollment in 2020. In 2023, this 2020 cohort was expected to graduate and challenge the denturism examination. Due to this decreased or paused enrollment, the effects have now trickled to the CDO.

The CDO is expected to continue hosting 2 administrations of the examination regardless of the potential applicant numbers in order to fulfill its statutory obligations. The CDO expects that the hosting of both examinations may cause a moderate to significant deficit in the examinations departmental budget. Each examination costs approximately \$89,000 to host including all costs (fixed and variable), and each year the costs are balanced with the revenue collected from examination fees. The examination operates on a cost-recovery basis.

Due to the significant drop in applicants expected in 2023, the CDO projects a deficit of at least \$50,000 for the February 2023 administration but the final costs depend on the true number of candidates who challenge the examination (a mix of new international candidates if any, repeat candidates, new candidates). College Staff will attempt to minimize examination costs by reducing the number of examiners required to administer the exam for fewer candidates but much of the costs of hosting the examination are fixed (e.g., exam venue rental space, SPP program).

The CDO will continue to update Council on the examination costs and projections for the coming year.

Complaints and Discipline – the College has two case files that are incurring additional costs, higher than anticipated in the budget, due to the complexity and ongoing nature of the cases.

Strategic Initiatives Budget

No expenses have been recorded under this budget at this time, the previously allocated \$150,000 for this budget remains intact. The College anticipates the upgrading of the database will be used under this budget.

College of Denturists of Ontario

Income Statement (April 1, 2022-October 31, 2022)

YTD Budget to Actual	2022-2023 BUDGET	October 31/22 YTD Totals	YTD as Percentage of Budget	Remainder or In Excess of Budgeted Amount*
REVENUE				
Professional Corporation Fees	\$ 65,000.00	\$ 78,150.00	120%	\$ 13,150.00*
Registration Fees	\$ 931,190.00	\$ 982,540.56	106%	\$ 51,350.56*
Other Fees	\$ 4,500.00	\$ 7,238.75	161%	\$ 2,738.75*
Qualifying Examination Fees	\$ 277,100.00	\$ 160,750.00	58%	\$ 116,350.00
Other Income	\$ 6,500.00	\$ 18,535.70	285%	\$ 12,035.70*
TOTAL REVENUE	\$ 1,284,290.00	\$ 1,247,215.01	97%	\$ 37,074.99
EXPENDITURES				
Wages & Benefits	\$ 533,528.08	\$ 316,385.28	59%	\$ 217,142.80
Professional Development	\$ 30,000.00	\$ 15,837.46	53%	\$ 14,162.54
Professional Fees	\$ 140,000.00	\$ 102,959.33	74%	\$ 37,040.67
Office & General	\$ 150,000.00	\$ 114,505.82	76%	\$ 35,494.18
Rent	\$ 130,000.00	\$ 65,087.32	50%	\$ 64,912.68
Qualifying Examination	\$ 178,144.00	\$ 143,302.30	80%	\$ 34,841.70
Council and Committees	\$ 15,000.00	\$ 10,178.30	68%	\$ 4,821.70
Quality Assurance				
QA Panel A	\$ 6,000.00	\$ 1,216.00	20%	\$ 4,784.00
QA Panel B	\$ 4,000.00	\$ -	0%	\$ 4,000.00
QA Assessments	\$ 35,000.00	\$ 10,597.35	30%	\$ 24,402.65
Complaints & Discipline				
Complaints	\$ 30,000.00	\$ 30,814.20	103%	\$ 814.20*
Discipline	\$ 25,000.00	\$ 7,290.50	29%	\$ 17,709.50
Capital Expenditures	\$ 15,000.00	\$ 1,847.18	12%	\$ 13,152.82
TOTAL EXPENDITURES	\$ 1,291,672.08	\$ 820,021.04	63%	\$ 471,651.04
NET INCOME	-\$ 7,382.08	\$ 427,193.97		
Strategic Initiatives*	\$ 150,000.00	\$ -	0%	\$ 150,000.00

*Strategic initiatives budgeted for 2022/23 fiscal year at \$50,000. Additional \$100,000 approved by Council at June 2022 meeting.

College of Denturists of Ontario

Strategic Initiatives (April 1, 2022-October 31, 2022)

YTD Budget to Actual	2022-2023 BUDGET	October 31/22 YTD Totals	YTD as Percentage of Budget	Remainder or In Excess of Budgeted Amount*
STRATEGIC INITIATIVES				
Initiatives	\$ 150,000.00	\$ -	0%	\$ 150,000.00
		\$ -		\$ -
		\$ -		\$ -
		\$ -		\$ -
		\$ -		\$ -
TOTAL STRATEGIC INITIATIVES	\$ 150,000.00	\$ -	0%	\$ 150,000.00

Legislative Update – What Happened in September 2022?

Prepared by Richard Steinecke

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Ontario Bills

(www.ola.org)

Bill 20, Access to Sexual Assault Evidence Kits and Provision of Sexual Assault Education Act, 2022 – (Private Members’ Bill – First Reading) Bill 20 would require nursing education programs to provide education on the administration of sexual assault kits to all students at no additional cost and for public hospitals to carry ten such kits at all times.

Proclamations

(www.ontario.ca/search/ontario-gazette)

Fixing Long-Term Care Act – The provisions amending this Act relating to transferring patients requiring alternative level of care from public hospitals were proclaimed into force on September 21, 2022.

Regulations

(<https://www.ontario.ca/laws> Source Law – Regulations as Filed)

Public Hospitals Act and Fixing Long-Term Care Act – These regulations explicitly allow hospitals to charge \$400 for patients who do not leave after having been discharged and to be transferred to long-term care facilities not of their choice. (O. Reg. 484/22, O. Reg. 485/22, O. Reg. 486/22)

Proposed Regulations Registry

(www.ontariocanada.com/registry/)

Personal Health Information Protection Act – Two consultations have been initiated related to patient access to personal health information in an electronic or digital format. The first proposal would expand the electronic formats (beyond pdf) in which patients can access their electronic records from Ontario Health. The second proposal delays the implementation date of the anticipated access by patients to their electronic records from Ontario Health by six months to March 31, 2023. Comments are due by November 22, 2022.

Bonus Features

These include early drafts of some of the items that will appear in our blog:
(www.sml-law.com/blog-regulation-pro/)

Sanction for Sexual Behaviour towards a Colleague

While courts give leeway to the sanction imposed by discipline panels, they will intervene in exceptional circumstances, particularly where the order appears to be disproportionate. An interesting example of this is found in the case of *Dansereau c. Médecins (Ordre professionnel des)*, 2022 QCTP 33 (CanLII), <<https://canlii.ca/t/js03s>>.

In that case, the registrant was a physician who was almost forty years older than a young secretary. Over a period of more than two months, there were instances in which the registrant displayed undue attention to the secretary, including touching her hand. The attention culminated when the registrant called the secretary into his office, closed the door, said that he was attracted to her, held her arms and kissed her neck. The secretary immediately reported the incident and the registrant resigned from the practice. The Court upheld the finding that this conduct amounted to failing to act beyond reproach.

However, the Court reduced the suspension from 15 months to seven months. In doing so, the Court was concerned that the analogous cases relied upon by the discipline panel had much more serious facts than the current case. The Court also observed that cases that were more analogous to the current case resulted in much lower suspensions. The Court was also concerned that the hearing panel characterized the matter as sexual harassment without explaining why it met that standard, and even though that terminology had not been alleged. The Court also said that it was inappropriate to compare sanctions in cases involving the sexual abuse of patients with unprofessional conduct towards a staff person. The Court still imposed a suspension near the high end of the range for similar cases because of the circumstances, including the power differential, and recognizing that sanctions were trending higher because of the increased recognition of the seriousness of such conduct.

Circumstances matter.

Suing for Damages Rather than Quashing the Regulatory Decision

It is a general principle that where a legislative scheme provides a route to challenge a regulatory decision, that route must be followed. For example, judicial review to a court is generally not permitted where there is an appeal available, even when the deadline for the appeal has passed: *Savic v. College of Physicians and Surgeons of Ontario*, 2021 ONSC 4756 (CanLII), <https://canlii.ca/t/jgr2k>. Similarly, courts have often found it to be an abuse of process to sue a

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regulator for damages for a decision made by a regulator that was (or could have been) upheld on appeal: *Kamalanathan v. CAMH*, 2019 ONSC 56 (CanLII), <https://canlii.ca/t/hwtt6>. This is viewed as a collateral attack on the regulatory decision.

A recent decision by Saskatchewan’s highest court appears to permit individuals to sue regulators for damages more easily in situations where the adverse regulatory decision still stands: *Solgi v College of Physicians and Surgeons of Saskatchewan*, 2022 SKCA 96 (CanLII), <https://canlii.ca/t/jrri9>. In that case, an internationally trained physician was issued a provisional licence while qualifying for registration. Through several events including the regulator’s change in the rules for qualification and the registrant’s move to another province, the provisional licence was suspended. Rather than challenge the suspension, the physician sued for damages alleging that the regulator had acted in bad faith, deliberately using its regulatory powers to harm the physician. The regulator brought a motion to dismiss the claim on several bases, the one of most interest to regulators being that the action was a collateral attack on the validity of the regulatory decision.

The Court discussed that the collateral attack argument was an assertion of an abuse of process. To establish an abuse of process one must look at all the surrounding circumstances. The Court made a distinction between a claim that was, in essence, an attempt to set aside the regulatory decision and a claim that seeks a remedy (e.g., damages) that does not set aside the regulatory decision (even if the remedy assumes that the regulatory decision was wrong). The Court characterized the claim as not “an attempt to relitigate the licensing decision, but rather an attempt to obtain a judgment for the damages alleged to have been caused by that decision.”

This distinction is a difficult one to comprehend. Indeed, in this case the physician did seek, as additional relief, the reinstatement of their licence. That claim for relief was struck from the pleadings. The Court ruled that the action could proceed. The Court was careful to state that the registrant still had to establish that the regulator deliberately and unlawfully misused its authority when making the licence suspension decision.

Procedural Fairness in Negotiations

Complaints screening committees, unlike true adjudicative committees, sometimes directly engage in negotiations with registrants. For example, they might propose a remedial disposition, the acceptance of which by the registrant would indicate that a more formal disposition, such as a referral to discipline, is not warranted. Do such negotiations entail a duty of procedural fairness? That issue arose in *Hamilton v. Health Professions Appeal and Review Board*, 2022 ONSC 3221 (CanLII), <https://canlii.ca/t/irpgr>.

In that case the registrant, a physician, was involved in an obstetrical case in which the baby died. The screening committee identified deficiencies in the registrant’s management of the delivery. A representative of the regulator proposed a voluntary undertaking, indicating that if the proposal was not accepted, all of the possible dispositions remained available to the committee.

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The registrant made a counterproposal that had a lesser impact, especially in terms of publication. The regulator did not respond to the counterproposal. The screening committee rendered a decision imposing a caution and mandatory remediation (arguably, a more significant outcome than the initially proposed voluntary undertaking).

The Court upheld the decision of the review Board that there was no procedural obligation, in those circumstances, for the screening committee to notify the registrant that it did not accept the counterproposal and to give the applicant an opportunity to accept the original proposal. In fact, the Court indicated that the role of the Board was to assess the reasonableness of the final decision and not to review the negotiations.

The Court also disagreed with the registrant that the regulator did not follow its own Decision Tree. The Court noted that the Decision Tree was not binding on the screening committee and, in any event, the screening committee appeared to act in general accordance with it, especially when it offered a voluntary undertaking.

The Court also disagreed with the argument that the screening committee and review Board failed to consider an expert report submitted by the registrant indicating that the registrant had met accepted standards of practice. The Court indicated that the screening committee was entitled to conduct a limited weighing of the facts. This role included not accepting the expert opinion provided by the registrant and using its specialized expertise to determine that there were some deficiencies in the registrant's care:

Using its expertise, the Committee provided reasons for concluding that there were deficiencies in the standard of care provided by the Applicant to his patient and hence, the justification for its decision of a caution.

Such “findings” are more likely to be accepted where it relates to the interpretation of facts rather than the making of a significant credibility determination. Also, such “findings” are more likely to be accepted where the conclusion about the nature of the conduct is expressed in language (e.g., deficiencies) dissimilar to disciplinary language of professional misconduct or incompetence.

The Safer for All Report

In September, the UK regulatory oversight body released a [major report](#) on recommended reforms to the regulation of health and social work professions. There is a lot of content in the 55-page report. Our subjective list of highlights for Canadian regulators are as follows:

- To address inequities in the provision of health care and their regulation, regulators should collect demographic data not only on applicants and registrants, but also on complainants.

Legislative Update – What Happened in September 2022?

- Regulators should improve the diversity of their leadership and decision makers (including committees).
- Regulators should review their complaints and discipline processes and their guidance to the professions to address more effectively allegations of racist and discriminatory behaviour.
- It is increasingly important for regulators to not only regulate individual practitioners, but also their business environment, which is often quickly evolving. Business practices of concern include hard sell tactics, overcharging, failing to maintain safe staffing levels, and otherwise putting undue pressure on registrants to meet commercial targets.
- Regulators should take a more aggressive approach in banning financial conflicts of interest where recommendations by registrants create a financial benefit (e.g., referrals in which there is a resulting benefit to the registrant making the referral).
- The report contains an interesting discussion, with persuasive examples, of the regulatory issues associated with telepractice and use of technologically assisted services, including biased algorithms.
- In terms of workforce planning issues, the report states: “In the past, we have held the firm view that professional regulation should not be drawn into adapting standards to respond to workforce issues. We now view this stance as unsustainable; the shortages are so great that the lack of workers may pose a greater risk to patient and service user safety than any changes in standards.” Proposed solutions include quicker training periods, expanded roles for related professions, registering practitioners with a limited scope of practice, recognizing alternative pathways to registration, team-based practice, greater delegation, and supporting better use of technology without unnecessary regulatory barriers.
- The report contains a nuanced discussion about balancing the “blame culture” (with the fear that it generates in registrants leading to undesirable conduct such as overcautiousness and cover ups) and the “just culture” (with its emphasis on making systemic improvements). The report argues that their individual accountability must be maintained even where systemic change is also appropriate. For example, serious individual incompetence or deep-seated attitudinal issues by a registrant often place clients at ongoing risk regardless of the systemic changes made. A predominantly no-fault approach of continuous quality improvement can lead to a lack of accountability and a diminution of expected standards of practice.

There is a lot of detail in the report that warrants reading it in full.

Reform of the Regulation of Legal Services Begins in Earnest in BC

Mark September 14, 2022, as the beginning of serious reform of the regulation of legal services. On that date, the Ministry of the Attorney General of British Columbia released its [Intentions Paper](#). This paper follows a [Governance Review](#) of the Law Society of BC by the internationally recognized leader in professional regulation, Harry Cayton, released late last year.

The Intentions Paper proposes some significant reforms in the regulation of legal services in the province. For example, all providers of legal services would be regulated by one regulator. This includes lawyers, notaries public, and paralegals. This could expand to include others, including legal technology service providers, as the outcomes of the current “sandbox” pilot projects become clear. This is similar to the approach that the British Columbia government took in respect of its regulation of [financial services](#), the regulation of [non-health professions](#), and is proposing to take with the [health professions](#).

Related to this proposal is curbing over-regulation, leaving more activities in the public domain, expanding such current examples as “Native Court workers, non-lawyer mediators, and community advocates”.

One of the more significant reforms relates to the selection of “directors” (i.e., Benchers). The size of the Board would be reduced from 32 to, perhaps, 15. The directors would focus on policy and oversight and would not also sit on adjudicative committees. About one-third of the directors would be appointed by the government (up from under 20% currently), one-third would be elected by the professions, and one-third would be appointed by the Board. All appointments would be through a rigorous competency-based process whereby necessary skills and experience are identified and suitable candidates would be recruited and screened. Even the elected candidates would go through a nominations process to facilitate competency and diversity goals. This proposal does not necessarily result in a 50/50 split (or even a majority of) non-professional directors seen elsewhere, such as for the regulator of [Ontario’s teachers](#).

Similarly, the regulator’s structure (and the language of the enabling statute) would emphasize its public interest mandate. For example, regulated individuals would be called licensees, not members. Licensees would not be able to introduce resolutions purporting to direct the Board or its Directors (no longer the “Benchers”). In addition, licensees would not be able to approve or reject rules related to their regulation.

Consistent with the [In Plain Sight](#) report that addressed health regulators and the [Professional Governance Act](#), which applies to many non-health regulators in the province, reconciliation with Indigenous Peoples is emphasized. Proposals include making this part of the statutory mandate for the regulator, mandatory continuing education of practitioners on Indigenous cultural competence, and requiring Indigenous participation on the regulator’s governing Board.

Legislative Update – What Happened in September 2022?

The Intentions Paper also discusses an effective and transparent complaints and discipline system including separation of the investigation/screening functions from the adjudicative functions. Few will find this part of the discussion ground-breaking.

The Intentions Paper also calls for a mandatory “future independent review of legal service provider regulation and its impact on access to legal services.”

However, even these reforms are not revolutionary. The Intentions Paper still chooses to use the “self-regulation” model, but with increased oversight. The reformed model still has the Legislature assign to a professional regulator “the primary responsibility for the development of structures, processes, and policies for regulation.” This reluctance to go further is based on the principle of the need to preserve the independence of the bar.

While the Intentions Paper will significantly modernize the regulation of legal services in British Columbia, it re-affirms more than it advances the modernization trend of professional regulation in Canada.

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Prepared by Richard Steinecke

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Ontario Bills

(www.ola.org)

Bill 24, Health Care is Not for Sale Act (Addressing Unfair Fees Charged to Patients), 2022. (*Private Members' Bill, first reading*) – Bill 24 would amend the *Regulated Health Professions Act* to require Colleges to define and regulate the charging of unfair fees, including the authority to require registrants to repay patients for any unfair fee charged.

Bill 26, Strengthening Post-secondary Institutions and Students Act, 2022 – (*Government Bill, first reading*) – Bill 26 allows post secondary educational institutions to discipline and remove any employee who sexually abuses as student. The schools are permitted to define in what circumstances sexual abuse arises beyond criminal behaviour or breaches of the *Human Rights Code*. Provisions also restrict the ability to rehire employees who have engaged in sexual abuse including restricting the use of non-disclosure agreements.

Proclamations

(www.ontario.ca/search/ontario-gazette)

Health Information Protection Act, 2016. The proclamation of provisions relating to electronic health records has been delayed from September 30, 2022, until March 31, 2023.

Regulations

(<https://www.ontario.ca/laws> Source Law - Regulations as Filed)

Regulated Health Professions Act – The Ministerial regulation requires the Registrar to promptly provide notice of receipt of an application for registration and to decide to either accept the application or refer it to the Registration Committee within a specified period (15 to 30 days depending on the circumstances). Where verification of information is required, no specific period is set, but the Registrar must act within a reasonable time. This provision takes effect on January 1, 2023. Additional provisions, that will come into force at a future, not yet certain, date relate to language proficiency testing, exemption of Canadian experience requirements, and a requirement that Colleges develop an emergency class of registration regulation.

Nursing Act and Medicine Act – Registration regulations under these Acts provide for expedited registration of international applicants, including under temporary classes of registration.

Legislative Update – What Happened in October 2022?**Proposed Regulations Registry**

(www.ontariocanada.com/registry/)

Personal Health Information Protection Act – Two consultations have been initiated related to patient access to personal health information in an electronic or digital format. The first proposal would expand the electronic formats (beyond pdf) in which patients can access their electronic records from Ontario Health. The second proposal delays the implementation date of the anticipated access by patients to their electronic records from Ontario Health by six months to March 31, 2023. Comments are due by November 22, 2022.

Fair Access to Regulated Professions and Compulsory Trades Act – The public was given four days to comment on a proposed regulation for the non-health professions to seek exemptions from the timelines for processing domestic and international applications for registration. The process contemplates a written application to the Fairness Commissioner which, if approved, still requires the approval of the Minister. The notification was posted on October 17, 2022, with comments due by October 21, 2022.

Bill 26, Strengthening Post-secondary Institutions and Students Act, 2022 – There is consultation on this Bill to enhance the ability of post-secondary educational institutions to address sexual abuse (see description above). Comments are due by November 30, 2022.

Bonus Features

These include early drafts of some of the items that will appear in our blog:

(www.sml-law.com/blog-regulation-pro/)

Following the Legislative Scheme

In legislation, the word “may” sometimes means “must”.

In [*Vey v Newfoundland and Labrador Pharmacy Board*](#), 2022 NLCA 55 (CanLII), the registrant was disciplined for failing to cooperate with a quality assurance practice site assessment. The registrant appealed on the ground that the practice assessor was not properly appointed. The Court of Appeal agreed with the registrant and set aside the finding.

Under the legislation, the regulator was required to operate a quality assurance program. The statute also said that the regulator’s Board “may” appoint a quality assurance committee. That committee was authorized to appoint assessors to conduct assessments of registrants’ practices. The regulator decided to have the Board directly operate the program rather than doing so through the committee.

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The Court concluded that the legislative scheme required the regulator to operate the quality assurance program through the quality assurance committee. In reviewing the entire scheme and its context, the Board’s authority to appoint the quality assurance committee was intended to be mandatory. Further, there was no authority for the Board, itself, to appoint assessors or to direct practice assessments. The provision authorizing access to confidential patient records, protected by separate privacy legislation, applied only to committee-appointed assessors. The provisions requiring cooperation were, on their face, applicable to the committee and its assessors. The registrant had no obligation to cooperate, and any discipline based on non-cooperation “was grounded in conduct by the Board for which it lacked authority. In the result, there is no basis on which to find that [the registrant] engaged in conduct deserving of sanction.”

This decision may be an example where Courts, previously deferring to a regulator’s interpretation of their own enabling statute, now requires the regulator to correctly interpret even its home legislation in accordance with [Canada \(Minister of Citizenship and Immigration\) v. Vavilov](#), 2019 SCC 65 (CanLII), [2019] 4 SCR 653.

Perspectives on Incompetence

The concept of “incompetence” on the part of a practitioner (“registrant”) for the purposes of disciplinary action has not been frequently discussed by the courts. Arguably, the last significant judicial discussion could go as far back as [Mason v. Registered Nurses’ Association of British Columbia](#), 1979 CanLII 419 (BC SC). In that case, the concern was the attitude of the registrant that seemed to prevent them from learning from their mistakes.

As such, Manitoba’s highest court’s recent discussion in [Jhanji v The Law Society of Manitoba](#), 2022 MBCA 78 (CanLII), provides a welcomed analysis of the issue. While it is in the context of the legal profession, the analysis is broad enough to apply to many professions. In fact, the Court cited several cases of incompetence from non-legal regulators. Unlike *Mason*, the type of incompetence in issue was an alleged absence of capabilities.

The Court made the following observations:

- Incompetence harms not only the clients of the registrant, but also the registrant’s colleagues and the systems in which they practice.
- Whether a registrant is incompetent depends very much on the facts; no two cases are alike.
- Different language was used to describe incompetence, including “want of ability suitable to the task”, “lack of knowledge, skill and judgment” and “a basic lack of understanding of the applicable law”. The Court contrasted these descriptions to a situation where a registrant had “a bad day”.
- In a nod to the *Mason* kind of case, the Court indicated that the causes of incompetence are diverse. It “can arise from the member’s natural qualities or

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- experience” or it can be the result of “deficiencies in their disposition to use their ability and experience properly”.
- Even though it recognized that incompetence findings are quite different from findings of professional misconduct, the court noted that “It matters little to the public interest in the competent practice of law that the appellant provided incompetent service with integrity or that he tried his best in providing incompetent service.” The Court agreed with the regulator that no amount of diligence, if exercised incompetently, is an adequate answer to the allegation. In fact, in this case the Court accepted that the registrant was a sincere person of good character with good intentions.
 - Incompetence findings are often established through expert opinion evidence given by practitioners with broad knowledge and experience in the practice of the profession. In this case the Court was reassured by the fact that the two expert witnesses had insight into the context in which the registrant worked (i.e., a sole practitioner practising mainly in litigation and commercial matters).
 - The evidence of incompetence was not confined to the registrant’s work product, such as documents he prepared. The evidence also included testimony about the registrant not having an office management system, his files being in disarray, practising without mentoring or practice supports, taking positions on files that were “nonsensical”, and not following the rules applicable to trust funds. Of particular interest, the expert witnesses also relied on their interviews with the registrant.
 - The Court acknowledged that this was not a case of “instances of reasonable differences of opinion that are common in discussions about the exercise of professional judgment”, which the Court implied might not constitute incompetence. Rather, the Court concluded that the registrant “lacks the minimum qualities needed to give effective professional [legal] services”.
 - Courts tend to be cautious about using the conduct of a registrant’s defence at their discipline hearing as evidence to support a finding. Such observations can amount to undermining a registrant’s right to make full answer and defence without fear that doing so can be used against them. It can also amount to finding fault for conduct not contained in the allegations. However, in this case, the Court supported the discipline panel’s consideration of the registrant’s manner of conducting his defence as reinforcing the concern about his competence. In fact, the Court also mentioned the registrant’s conduct of his appeal to court in the same way (i.e., it described his submissions as “prolix and unfocused”).
 - The Court noted that the discipline panel’s reasons cited seven examples of incompetence. These examples assisted the Court in rejecting the registrant’s defence that he was a fearless advocate working on complex matters.
 - A panel of peers are best able to determine incompetence and, as such, deference will be accorded by the courts to the findings of a discipline panel. Even where there is a right of appeal, a Court would disturb the finding only where there is palpable and overriding error.

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The Court supported the discipline panel’s conclusion that the registrant should never have been admitted to the profession.

The utility of this decision for other regulators might be hampered somewhat because it was such an obvious case. According to the Court, the registrant lacked the capacity to be a member of the profession, finding that “The appellant’s professional incompetence is not an isolated, or even a pattern of, gross mistake or the breakdown of previous competent practice; it is more egregious.” As such, the case may provide less guidance in cases that are not as clear-cut. However, the decision is still helpful in its extended analysis of the concept of incompetence.

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Unique Allegations

The Divisional Court decision of [Nathalie Xian Yi Yan v. College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario](#), 2022 ONSC 5464 (CanLII), is of interest because of its unique allegations. The registrant was found by the discipline panel to have charged a misleading fee (stating that it was a government mandated fee), failed to disclose the ingredients of her family-developed herbal remedy, waived a fee based on the patient’s racial descent, improperly used the title “doctor”, treated a patient in a public area of her clinic, failed to keep proper records, and failed to cooperate with the regulator’s investigator.

The appeal was dismissed, primarily on the basis that the evidence did not support the arguments made by the registrant (e.g., of procedural unfairness). However, some comments of the Court that may be of general interest to regulators include the following:

- The use of an undercover investigator was upheld as reasonable in the circumstances.
- A letter requesting a response to the investigation report received by the registrant after the deadline date for a response contained in it was not unfair because multiple extensions were later provided.
- The Court said in response to a conflict of interest argument related to prosecuting counsel: “In fact, it is not improper or unusual for counsel to act as both prosecutor for and general counsel to regulators....”
- The discipline panel chair’s interventions attempting to maintain control of the hearing, ensuring that the registrant understood the proceedings, ensuring that witnesses understood the questions asked of them, and discouraging the asking of repetitive questions, was appropriate.
- In assessing the appropriateness of the costs ordered, the Court looked at decisions of discipline panels in other hearings comparing the total number of hearing days with the total amount of costs ordered. An order for payment of \$65,000 of costs,

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representing just over half of the total costs incurred by the regulator (including for the investigation), for a seven-day hearing was upheld as reasonable.

For the most part, this decision reflects the principle that many legal issues depend on the specific circumstances of the case.

The Impact of Non-Cooperation on Interim Orders

Interim orders restricting or suspending a registrant's ability to practise pending an investigation is an exceptional power for regulators of professions. Given the impact of such orders and the limited ability of registrants to challenge such orders internally, other than asking for reconsideration, courts will often entertain a judicial review application of such an order midway through the investigation process.

In [*Luchkiw v. College of Physicians and Surgeons of Ontario*](#), 2022 ONSC 5738 (CanLII), the Ontario Divisional Court considered the impact of a registrant's non-cooperation with the investigation. Dr. Luchkiw (the registrant) was the subject of two investigations related to allegedly issuing an inappropriate vaccine exemption to a high-risk immunocompromised patient, inadequate infection prevention and control practices, and disseminating misinformation about COVID-19, among other concerns. The registrant declined to cooperate with several attempts to obtain information about the concerns, arguing that the regulator had no jurisdiction to investigate the matters.

The regulator was unable to obtain a copy of the vaccine exemption document. However, it had a report from the hospital where the registrant worked that a patient told their care team that they had the exemption from their physician, whom they would not name, and that the registrant was the patient's family physician. When the hospital asked to meet with the registrant to discuss the patient, the registrant resigned her hospital privileges. The registrant's legal counsel implicitly confirmed that the registrant had issued the exemption by submitting to the regulator that it did not have the authority to police exemptions. The registrant did not deny that she provided the exemption.

In terms of the infection prevention and control practices, the regulator had received several concerns expressed by various individuals on the topic and the observations of the regulator's investigators of deficiencies in the waiting room of the registrant's office when they were refused admission during a site visit for investigatory purposes.

The regulator had access to a recording of the alleged misinformation.

The regulator can impose an interim order only where the registrant's conduct exposes, or is likely to expose, patients to harm or injury. While the regulator could not impose an interim order for non-cooperation, alone, the Court held that the non-cooperation could support the concern

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of patient harm. The Court said: “I am of the view that [the registrant’s] failure to co-operate, or to recognize the authority of the College, is a reasonable basis to conclude that she is ungovernable. This raises additional concerns with respect to patient safety.” The ungovernability of the registrant supported that her patients were likely exposed to harm or injury.

Some other comments by the Court on making interim orders are as following:

- Courts will generally not review the validity of the appointment of the investigators unless there are exceptional circumstances. Challenging an interim order does not provide a “back door” route to challenge the validity of the appointment.
- The regulator can refer to external guidelines from such organizations as the National Advisory Committee on Immunization and the Ministry of Health in determining the issue of exposure of patients to harm.
- The Court found that the existence of another option for the regulator (specifically applying for a restraining order to enforce its earlier direction that she cease issuing vaccine exemptions) did not prevent the regulator from issuing an interim order suspending her ability to practice. There was no legitimate expectation that only one enforcement option would be used.
- The regulator did not have to balance the benefits of the interim order against the speculative negative impacts of the order to other patients of the registrant. The regulator could focus exclusively on the safety of the patients exposed to harm by the continued practice of the registrant.
- The regulator is not required to address every argument made by the registrant in its reasons. The freedom of expression issue raised by the registrant was not a central issue at this time, where patient safety was the primary concern.
- There was no procedural unfairness in the regulator failing to disclose a lengthy document listing threatening and inflammatory complaints made by members of the public about the regulator’s approach to investigating registrants for their COVID-19 activities. The Court held that this information did not relate to the core safety issue. Rather, it was placed before the committee for the purpose of deciding whether their names should be withheld from the decision imposing the interim order. Their names were not included with the decision and the registrant did not take issue with that.

Non-cooperation with an investigation can support a decision to impose an interim order during an investigation, not for the purpose of compelling cooperation, but rather to support the inference that the registrant will not practice safely.

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Billing Practices, Costs, and Diverging Courts

For the most part, regulators give registrants some leeway in managing their billing practices, viewing them as a civil matter. However, where the billing is without prior explanation, misleading, dishonest, or abusive, regulators will treat the matter as potential misconduct. [*Jinnah v Alberta Dental Association and College*](#), 2022 ABCA 336 (CanLII), is such a case.

Dr. Jinnah (the registrant) was disciplined for various non-clinical aspects of her practice, including billing issues and communications with patients, primarily about billing-related issues. The regulator reprimanded the registrant, ordered her to complete a philosophy course on ethics, and to pay the hearing costs totalling \$37,500 (along with one-quarter of the internal appeal panel costs).

The Court accepted that the regulator had the authority to regulate the business practices of registrants “to ensure that patients are informed in plain English of the dental services that their dentists have performed and the cost of these services, have their questions about their bills answered politely, promptly and accurately, and are, in general, treated fairly and with respect.”

The Court also accepted that registrants were responsible for the business conduct of their staff:

The fact that dentists invariably delegate business tasks – scheduling and billing, for example – to others in their offices does not insulate the dentist from the responsibility for the manner in which these workers discharge these assignments. It simply means that dentists must provide their staff with the training and supervision needed to reduce to a sufficiently low degree the risk that their behavior will adversely affect the dentist’s reputation.

However, the Court found that the evidence did not support the findings that the registrant in this case misled the patient about her fees or failed to provide detailed invoices. The Court also found that the tone of the registrant’s demand letters, while aggressive, did not amount to unprofessional conduct. The Court also set aside the finding that it was unprofessional for the registrant to increase the account by 50% if it were to be sent to a collection agency. The Court said that this was an acceptable practice for creditors at common law and thus was not oppressive. These determinations by the Court suggest a less deferential stance by an appellate court than what regulators usually see, at least in Ontario.

The Court did uphold the misconduct finding where the registrant threatened to sue the patient for defamation for making a complaint to the regulator. The Court said:

Obstructing the complaint process is conduct that harms the integrity of the profession and therefore constitutes unprofessional conduct. ... The primary goal of the College is to protect the public. The existence of an effective complaint process is a crucial part of maintaining the integrity of the profession, and therefore protecting the public.

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Protecting the complaint process is an important part of the College’s obligation to ensure that professional standards of conduct are complied with. [citations omitted]

However, because the registrant appeared not to have known that such a threat was unprofessional, the Court supported the sanction of only a reprimand. The Court did set aside the order to complete a philosophy course on the basis that the registrant learned all she needed to know (e.g., about threatening legal action against a complainant) through the hearing process.

The Court reduced the costs order. The Court stated that costs were not intended to be punitive and should not be awarded in every case. This approach is not consistent with the approach taken by courts in Ontario. See, for example: [Walia v. College of Veterinarians of Ontario](#), 2021 ONSC 4023 (CanLII). More will come on this issue.

Where courts in different provinces take different approaches on similar issues, regulators are in a difficult position. Over time the approaches do tend to reconcile either by courts reflecting on the different approaches to the issue or through guidance from the Supreme Court of Canada. However, in the interim regulators face uncertainty.

Rudeness towards Coworkers

In recent years, regulators have more frequently addressed offensive behaviour towards colleagues and coworkers as serious professional misconduct. For example, in [Ontario College of Veterinarians of Ontario v. Dr. Ackerman](#), 2022 ONSC 4334 (CanLII), a veterinarian (the registrant) was suspended for eight months and required to complete several educational, therapeutic, and monitoring measures for repeated instances of yelling, belittling and even physically slapping the hands or shoving away staff members. One client testified about leaving the practice after observing such behaviour. The power imbalance likely had an impact on the sanction ordered. So did the accompanying allegation that the registrant directed staff to amend records to conceal how long some surgeries took.

The Court upheld the findings and sanction. The findings of credibility were supported by the evidence and explained in the hearing panel’s reasons. The sanction was not unfit. The Court agreed that there was a lack of precision and explicit enforcement mechanisms for the educational, therapeutic, and monitoring measures but did not find that it made the order unfit.

Interestingly, the Court rejected the registrant’s request that the regulator should pay for the transcript of the evidence for the days the registrant did not attend the hearing. The Court said:

Such an obligation would amount to a significant expenditure by the [regulator] solely to assist those who had chosen not to participate in the process and is not unfair in these circumstances.

Rude behaviour to colleagues and coworkers can amount to serious misconduct.

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Factors Permitting Infringement of Freedom of Expression

Regulators need to consider the freedom of expression rights of their registrants. However, regulators can infringe on those rights in a proportionate manner to achieve the significant statutory objectives of their enabling legislation. The case of *Pitter v. College of Nurses of Ontario and Alviano v. College of Nurses of Ontario*, 2022 ONSC 5513 (CanLII), <https://canlii.ca/t/jshcj> illustrates how that balancing can occur.

The case dealt with two nurses who had made statements without supporting evidence related to the COVID-19 virus, public health measures, and vaccinations. For example, one suggested that some vaccines would alter DNA and permit the tracking and manipulation of thoughts. The other said that cancer followed vaccinations and that they would reduce reproductive capabilities of recipients. In both cases the regulator did not refer them to discipline but issued cautions and directed completion of remediation programs.

On judicial review, the Court upheld that the outcomes were a proportionate infringement of the registrants' freedom of expression rights, taking into account the following considerations:

- The determinations were remedial and educational, not disciplinary or punitive.
- The statements were extreme and plainly misleading.
- The statements “were not within the range of rational public debate. Rather, the committee raised serious concerns about the statements being dangerous and contrary to public health guidelines.”
- While “Standards of practice are not necessarily found in writing nor expected to address precisely every factual scenario”, there was information published by the regulator that was relevant to the conduct in this case.
- The registrants had identified their professional status.

The Court also found that a detailed analysis of the *Charter of Rights and Freedoms* was not required where the registrants had only briefly raised the constitutional issue as part of a much larger response to the investigation mostly addressing other issues.

The Court also found that the regulator's statement that one of the registrants had failed to maintain the profession's standards did not amount to a finding of professional misconduct.

In addition, the Court said that posting of the outcomes on the public register “is not an insignificant impact given that anyone can search the registry, including potential employers. Nonetheless, it does not undermine the fundamental point that, as found by this Court, these are remedial and not disciplinary responses”

This case gives some further guidance on how regulators can balance a registrant's freedom of expression rights against the regulator's public interest mandate.

COLLEGE OF DENTURISTS OF ONTARIO

FINANCIAL STATEMENTS

MARCH 31, 2022

Draft Statement Subject to Revision

HILBORN_{LLP}

Independent Auditor's Report

To the Council of the College of Denturists of Ontario

Opinion

We have audited the financial statements of the College of Denturists of Ontario (the "College"), which comprise the statement of financial position as at March 31, 2022, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at March 31, 2022, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

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

Other Information

Management is responsible for the other information. The other information comprises the information, other than the financial statements and our auditor's report thereon, in the annual report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

We obtained the annual report prior to the date of our auditor's report. If, based on the work we have performed on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact in our auditor's report. We have nothing to report in this regard.

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

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

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

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

Independent Auditor's Report (continued)**Auditor's Responsibilities for the Audit of the Financial Statements**

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

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

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

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

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

Toronto, Ontario
Date to be determined

Chartered Professional Accountants
Licensed Public Accountants

Statement of Financial Position

March 31	2022 \$	2021 \$
ASSETS		
Current assets		
Cash	2,186,904	2,477,677
Amount receivable	-	10,122
Prepaid expenses	31,483	27,489
	2,218,387	2,515,288
Capital assets (note 4)	39,224	49,265
Intangible assets (note 5)	3,186	4,551
	42,410	53,816
	2,260,797	2,569,104
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities (note 6)	166,981	197,882
Deferred registration fees	233,808	256,299
	400,789	454,181
Deferred lease incentives (note 7)	25,196	33,595
	425,985	487,776
NET ASSETS		
Invested in capital and intangible assets	26,570	32,696
Internally restricted for therapy and counselling (note 8)	152,630	155,870
Internally restricted for complaints and discipline (note 9)	360,000	360,000
Unrestricted	1,295,612	1,532,762
	1,834,812	2,081,328
	2,260,797	2,569,104

The accompanying notes are an integral part of these financial statements

Approved on behalf of the Council:

President

Vice-President

Statement of Operations

Year ended March 31	2022 \$	2021 \$
Revenues		
Registration fees (note 3)	780,278	799,926
Examination fees	488,200	52,950
Administration fees	14,124	6,788
Investment income	6,109	10,327
	<u>1,288,711</u>	<u>869,991</u>
Expenses		
Salaries and benefits	576,208	683,683
Examinations	438,098	52,999
Council and committees	3,625	6,253
Professional fees (note 8)	143,347	133,519
Quality assurance	14,532	17,936
Rent (note 7)	103,707	107,344
Complaints and discipline (note 10)	58,366	28,164
Office and general	182,843	161,374
Amortization of capital assets	13,136	14,119
Amortization of intangible assets	1,365	1,950
	<u>1,535,227</u>	<u>1,207,341</u>
Excess of expenses over revenues for year	<u>(246,516)</u>	<u>(337,350)</u>

The accompanying notes are an integral part of these financial statements

Statement of Changes in Net Assets

Year ended March 31

	Invested in capital and intangible assets \$	Internally restricted for therapy and counselling \$	Internally restricted for complaints and discipline \$	Unrestricted \$	2022 Total \$
Balance, beginning of year	32,696	155,870	360,000	1,532,762	2,081,328
Excess of expenses over revenues for year	-	-	-	(246,516)	(246,516)
Amortization of capital and intangible assets	(14,501)	-	-	14,501	-
Amortization of deferred tenant inducements	5,280	-	-	(5,280)	-
Purchase of capital and intangible assets	3,095	-	-	(3,095)	-
Expenses incurred in current year (note 8)	-	(3,240)	-	3,240	-
Balance, end of year	26,570	152,630	360,000	1,295,612	1,834,812

The accompanying notes are an integral part of these financial statements

Statement of Changes in Net Assets

Year ended March 31

	Invested in capital and intangible assets \$	Internally restricted for therapy and counselling \$	Internally restricted for complaints and discipline \$	Unrestricted \$	2021 Total \$
Balance, beginning of year	39,349	158,400	360,000	1,860,929	2,418,678
Excess of expenses over revenues for year	-	-	-	(337,350)	(337,350)
Amortization of capital and intangible assets	(16,069)	-	-	16,069	-
Amortization of deferred tenant inducements	5,280	-	-	(5,280)	-
Purchase of capital and intangible assets	4,136	-	-	(4,136)	-
Expenses incurred in current year (note 8)	-	(2,530)	-	2,530	-
Balance, end of year	32,696	155,870	360,000	1,532,762	2,081,328

The accompanying notes are an integral part of these financial statements

Statement of Cash Flows

Year ended March 31	2022 \$	2021 \$
Cash flows from operating activities		
Excess of expenses over revenues for year	(246,516)	(337,350)
Adjustments to determine net cash provided by (used in) operating activities		
Amortization of capital assets	13,136	14,119
Amortization of intangible assets	1,365	1,950
Amortization of deferred lease incentives	(8,399)	(8,399)
	(240,414)	(329,680)
Change in non-cash working capital items		
Decrease (increase) in amount receivable	10,122	(10,122)
Decrease (increase) in prepaid expenses	(3,994)	462
Decrease in accounts payable and accrued liabilities	(30,901)	(16,168)
Increase (decrease) in deferred registration fees	(22,491)	99,835
	(287,678)	(255,673)
Cash flows from investing activities		
Purchase of capital assets	(3,095)	(4,136)
Net change in cash	(290,773)	(259,809)
Cash, beginning of year	2,477,677	2,737,486
Cash, end of year	2,186,904	2,477,677

The accompanying notes are an integral part of these financial statements

Notes to Financial Statements

March 31, 2022

Nature and description of the organization

The College of Denturists of Ontario (the "College") was incorporated as a non-share capital corporation under the Regulated Health Professions Act, 1991 ("RHPA"). As the regulator and governing body of the denturist profession in Ontario, the major function of the College is to administer the Denturism Act, 1991 in the public interest.

The College is a not-for-profit organization, as described in Section 149(1)(l) of the Income Tax Act, and therefore is not subject to income taxes.

1. Significant accounting policies

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and include the following significant accounting policies:

(a) Revenue recognition

Registration fees

Registration fees are recognized as revenue in the fiscal year to which they relate. The registration year of the College is April 15 to April 14. Registration fees received in advance of the fiscal year to which they relate are recorded as deferred registration fees.

Examination fees

Examination fees are recognized as revenue when the examinations are held.

Administration fees

Administration fees are recognized as revenue when the service is rendered.

Investment income

Investment income comprises interest from cash and is recognized on an accrual basis.

(b) Capital assets

The costs of capital assets are capitalized upon meeting the criteria for recognition as a capital asset, otherwise, costs are expensed as incurred. The cost of a capital asset comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Capital assets are measured at cost less accumulated amortization and accumulated impairment losses.

Amortization is provided for, upon commencement of the utilization of the assets, using methods and rates designed to amortize the cost of the capital assets over their estimated useful lives. The methods and annual amortization rates are as follows:

Furniture and fixtures	20% declining balance
Computer equipment	45-55% declining balance

Notes to Financial Statements (continued)

March 31, 2022

1. Significant accounting policies (continued)

(b) Capital assets (continued)

Amortization of leasehold improvements is provided for on a straight-line basis over the term of the lease.

A capital asset is tested for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. If any potential impairment is identified, the amount of the impairment is quantified by comparing the carrying value of the capital asset to its fair value. Any impairment of the capital asset is recognized in income in the year in which the impairment occurs.

An impairment loss is not reversed if the fair value of the capital asset subsequently increases.

(c) Intangible assets

The costs of intangible assets are capitalized upon meeting the criteria for recognition as an intangible asset, with the exception of expenditures on internally generated intangible assets during the development phase, which are expensed as incurred. The cost of a separately acquired intangible asset comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Intangible assets are measured at cost less accumulated amortization and accumulated impairment losses.

Amortization is provided for upon commencement of the utilization of the assets, using methods and rates designed to amortize the cost of the intangible assets over their estimated useful lives. The methods and annual amortization rates are as follows:

Computer software	30% declining balance
Database application software	3 years straight-line

An intangible asset is tested for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. If any potential impairment is identified, the amount of the impairment is quantified by comparing the carrying value of the intangible asset to its fair value. Any impairment of the intangible asset is recognized in income in the year in which the impairment occurs.

An impairment loss is not reversed if the fair value of the intangible asset subsequently increases.

(d) Deferred lease incentives

Lease incentives comprise free rent benefits and tenant inducements received in cash.

Lease incentives received in connection with original leases are amortized to income on a straight-line basis over the terms of the original leases. Lease incentives received in connection with re-negotiated leases are amortized to income on a straight-line basis over the period from the expiration date of the original lease to the expiration date of the re-negotiated lease.

Notes to Financial Statements (continued)

March 31, 2022

1. Significant accounting policies (continued)**(e) Net assets invested in capital and intangible assets**

Net assets invested in capital and intangible assets comprises the net book value of capital and intangible assets less the unamortized balance of tenant inducements used to purchase capital and intangible assets.

(f) Financial instruments**Measurement of financial assets and liabilities**

The College initially measures its financial assets and financial liabilities at fair value adjusted by the amount of transaction costs directly attributable to the instrument.

The College subsequently measures all of its financial assets and financial liabilities at amortized cost.

Amortized cost is the amount at which a financial asset or financial liability is measured at initial recognition minus principal repayments, plus or minus the cumulative amortization of any difference between that initial amount and the maturity amount, and minus any reduction for impairment.

Financial assets measured at amortized cost include cash.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities.

Impairment

At the end of each year, the College assesses whether there are any indications that a financial asset measured at amortized cost may be impaired. Objective evidence of impairment includes observable data that comes to the attention of the College, including but not limited to the following events: significant financial difficulty of the issuer; a breach of contract, such as a default or delinquency in interest or principal payments; and bankruptcy or other financial reorganization proceedings.

When there is an indication of impairment, the College determines whether a significant adverse change has occurred during the year in the expected timing or amount of future cash flows from the financial asset.

When the College identifies a significant adverse change in the expected timing or amount of future cash flows from a financial asset, it reduces the carrying amount of the financial asset to the greater of the following:

- the present value of the cash flows expected to be generated by holding the financial asset discounted using a current market rate of interest appropriate to the financial asset; and
- the amount that could be realized by selling the financial asset at the statement of financial position date.

Notes to Financial Statements (continued)

March 31, 2022

1. Significant accounting policies (continued)

(f) Financial instruments (continued)

Impairment (continued)

Any impairment of the financial asset is recognized in income in the year in which the impairment occurs.

When the extent of impairment of a previously written-down financial asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss is reversed to the extent of the improvement, but not in excess of the impairment loss. The amount of the reversal is recognized in income in the year the reversal occurs.

(g) Management estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make judgments, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the current year. Actual results may differ from the estimates, the impact of which would be recorded in future years.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the year in which the estimates are revised and in any future years affected.

2. Financial instrument risk management

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure and concentrations.

The financial instruments of the College and the nature of the risks to which those instruments may be subject, are as follows:

Financial instrument	Risks				
	Credit	Liquidity	Market risk		
Currency			Interest rate	Other price	
Cash	X			X	
Accounts payable and accrued liabilities		X			

Notes to Financial Statements (continued)

March 31, 2022

2. Financial instrument risk management (continued)**Credit risk**

The College is exposed to credit risk resulting from the possibility that parties may default on their financial obligations, or if there is a concentration of transactions carried out with the same party, or if there is a concentration of financial obligations which have similar economic characteristics that could be similarly affected by changes in economic conditions, such that the College could incur a financial loss.

The maximum exposure of the College to credit risk is as follows:

	2022	2021
	\$	\$
Cash	2,186,904	2,477,677
Amount receivable	-	10,122
	<u>2,186,904</u>	<u>2,487,799</u>

The College reduces its exposure to the credit risk of cash by maintaining balances with Canadian financial institutions.

Liquidity risk

Liquidity risk is the risk that the College will not be able to meet a demand for cash or fund its obligations as they come due.

The liquidity of the College is monitored by management to ensure sufficient cash is available to meet liabilities as they become due.

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk is comprised of currency risk, interest rate risk and other price risk.

Currency risk

Currency risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in foreign exchange rates.

The College is not exposed to currency risk.

Interest rate risk

Interest rate risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in market interest rates.

Notes to Financial Statements (continued)

March 31, 2022

2. Financial instrument risk management (continued)**Other price risk**

Other price risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate because of changes in market prices (other than those arising from currency risk or interest rate risk), whether those changes are caused by factors specific to the individual instrument or its issuer or factors affecting all similar instruments traded in the market.

The College is not exposed to other price risk.

Changes in risk

There have been no significant changes in the risk profile of the financial instruments of the College from that of the prior year.

3. Impact of COVID-19Fiscal 2021 and 2022

Effective May 1, 2020, the College approved a fifty percent reduction in the registration fee for renewing and new denturists for the fiscal 2021 registration year resulting in a decrease, from normal operating levels, in registration fee revenue for fiscal 2021.

In recognition of the ongoing challenges posed by the pandemic, in advance of the opening of the College's registration renewal period on March 1, 2021 for the fiscal 2022 registration year, the College approved a fifty percent reduction in the fiscal 2022 registration fee for renewing and new denturists.

As a result of this reduction in registration fee there was a decrease, from normal operating levels, in registration fee revenue for fiscal 2022.

Fiscal 2023

For the fiscal 2023 registration year, the College has approved a fee reduction of thirty-five percent in the fiscal 2023 registration fee for renewing and new denturists.

Notes to Financial Statements (continued)

March 31, 2022

4. Capital assets

	Cost \$	Accumulated Amortization \$	2022 Net \$
Furniture and fixtures	95,505	81,938	13,567
Computer equipment	66,732	62,135	4,597
Leasehold improvements	60,173	39,113	21,060
	<u>222,410</u>	<u>183,186</u>	<u>39,224</u>
	Cost \$	Accumulated Amortization \$	2021 Net \$
Furniture and fixtures	95,505	78,546	16,959
Computer equipment	63,637	58,409	5,228
Leasehold improvements	60,173	33,095	27,078
	<u>219,315</u>	<u>170,050</u>	<u>49,265</u>

5. Intangible assets

	Cost \$	Accumulated Amortization \$	2022 Net \$
Computer software	52,751	49,565	3,186
Database application software	31,900	31,900	-
	<u>84,651</u>	<u>81,465</u>	<u>3,186</u>
	Cost \$	Accumulated Amortization \$	2021 Net \$
Computer software	52,751	48,200	4,551
Database application software	31,900	31,900	-
	<u>84,651</u>	<u>80,100</u>	<u>4,551</u>

Notes to Financial Statements (continued)

March 31, 2022

6. Accounts payable and accrued liabilities

	2022 \$	2021 \$
Trade payables and accrued liabilities	75,178	159,881
Accrued liabilities - complaints and discipline	46,412	25,000
HST payable	22,695	13,001
	<u>166,981</u>	<u>197,882</u>

7. Deferred lease incentives

	Cost \$	Accumulated Amortization \$	2022 Net \$
Tenant inducements	52,800	36,960	15,840
Free rent benefits	31,187	21,831	9,356
	<u>83,987</u>	<u>58,791</u>	<u>25,196</u>
	52,800	31,680	21,120
	31,187	18,712	12,475
	<u>83,987</u>	<u>50,392</u>	<u>33,595</u>

Amortization of lease incentives in the amount of \$8,399 (2021 - \$8,399) was credited to rent expense in the current year.

Notes to Financial Statements (continued)

March 31, 2022

8. Net assets internally restricted for therapy and counselling

The Council of the College has internally restricted net assets for the purposes of funding therapy and counselling as directed under the RHPA.

In the current year, expenses in the amount of \$3,240 (2021 - \$2,530) were incurred in connection with therapy and counselling and are recorded in professional fees expense in the statement of operations.

The internal restriction is subject to the direction of Council upon the recommendation of the Executive Committee.

9. Net assets internally restricted for complaints and discipline

The College makes best efforts to anticipate the costs associated with complaints and discipline matters based on past experience and current caseload. However, in the event that the College incurs costs beyond the normal scope of such matters, the Council of the College has internally restricted net assets to fund expenditures related to these matters.

The internal restriction is subject to the direction of the Council upon the recommendation of the Executive Committee.

10. Complaints and discipline

	2022 \$	2021 \$
Complaints and discipline	61,866	31,664
Cost recoveries	(3,500)	(3,500)
	<u>58,366</u>	<u>28,164</u>

11. Commitment

The College is committed to lease its office premises until March 31, 2025. The future annual lease payments, including an estimate of premises common area expenses, are as follows:

	\$
2023	115,568
2024	115,568
2025	<u>115,568</u>
	<u>346,704</u>



***College of Denturists of Ontario
Audit Findings Communication for the year ended March 31, 2022***



A message from Blair MacKenzie to the Council

I am pleased to provide you with the findings of our audit of the financial statements of the College of Denturists of Ontario (“the College”) for the year ended March 31, 2022.

Our audit findings communication is designed to highlight and explain key issues, which we believe to be relevant to the audit and to continue effective two-way communication with you regarding our audit. This will assist the Council in fulfilling your responsibility of overseeing the financial reporting process of the College.

This communication has been prepared to comply with the requirements outlined in Canadian Auditing Standard 260, *Communication with those Charged with Governance*. The information in this document is intended solely for the use of the Council and management and should not be distributed to others without our consent.

We look forward to discussing our audit findings with you in detail as well as any other matters that you may wish to address at our meeting scheduled for December 9, 2022 with the Council.



Blair MacKenzie
Managing Partner
Hilborn LLP
November 28, 2022

“Our commitment to quality is reflected in every aspect of our work. If you have any questions or comments, please contact me.”



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Your client service team

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“At Hilborn, we are committed to audit quality and strong client service. Audit quality is integral to our business and is an overarching consideration in our training, our processes, and our systems and controls.”

Executive Summary



Audit status

We have completed our audit of the financial statements of the College for the year ended March 31, 2022, with the exception of the following procedures:

- Completion of subsequent events procedures
- Receipt of the signed management representation letter
- Council's approval of the financial statements

These procedures require completion before we may issue our auditor's report. If we become aware of significant matters after completing these procedures, we will bring them to your attention.



Auditor's report and representations from management

We expect to issue an unmodified opinion. The expected form and content of our report is included in the draft financial statements issued.

The management representation letter is expected to be consistent with that issued in our pre-audit communication. We ask management to sign and return the letter to us before we issue our auditor's report.



Independence

We are independent and have been so throughout the audit process. We have complied with all relevant ethical requirements regarding independence.

We have not performed any non-audit related services.



Significant difficulties encountered

There were no significant difficulties encountered while performing the audit.



Changes from the audit plan

Our audit approach was consistent with the approach communicated to you in our audit plan dated June 10, 2022.

Final materiality is consistent with preliminary materiality set at \$50,000.

Significant Qualitative Aspects of the College’s Accounting Practices

Canadian Auditing Standards require that we communicate with you about significant qualitative aspects of the entity’s accounting practices, including accounting policies, accounting estimates and financial statement disclosures.

Accounting policies, accounting estimates and financial statement disclosures	Hilborn’s response and views
<p>Management is responsible for the appropriate selection and application of accounting policies under the financial reporting framework of Accounting Standards for Not-for-Profit Organizations.</p> <p>Our role is to review the appropriateness and application of these policies as part of our audit. The accounting policies used by the College are described in Note 1, Significant Accounting Policies, in the financial statements.</p>	<ul style="list-style-type: none"> - There were no significant changes in the previously adopted accounting policies or their application. - Based on the audit work performed, the accounting policies are appropriate for the College and applied consistently.
<p>Management is responsible for the accounting estimates included in the financial statements. Estimates and the related judgments and assumptions are based on management’s knowledge of the business and past experience about current and future events.</p>	<ul style="list-style-type: none"> - Based on the audit work performed, we are satisfied that the estimates made by management are reasonable in the context of the financial statements taken as a whole.

Accounting policies, accounting estimates and financial statement disclosures	Hilborn’s response and views
<p>Management has considered the impact of the COVID-19 pandemic on the College’s financial statements and concluded that note disclosure is appropriate to describe the impact to the current operations and to describe that the impact to the future operations of the Council, if any, cannot be estimated.</p>	<ul style="list-style-type: none"> - We worked with management to understand the implications of COVID-19 on the College. - The financial statement disclosures related to COVID-19 (note 3) are clear and transparent and meet the requirements of the financial reporting framework under which the College reports.
<p>Annual report</p>	<ul style="list-style-type: none"> - We acknowledge that a copy of the College’s summary financial statements for the year ended March 31, 2022 and a copy of our audit report related to the summary financial statements will be included in the College’s annual report. As agreed in our engagement letter, we will review the annual report prior to it being finalized to ensure that there are no inconsistencies with the audited financial statements. - If, based on the work we will perform on the annual report, we conclude that there is a material inconsistency in the annual report, we will communicate that fact to you.

Other Significant Matters

In accordance with Canadian Auditing Standards, there are a number of required communications between the auditor and those charged with governance related to the oversight of the financial reporting process. Those communications will primarily be written in the form of our audit plan and audit findings communication. We may also communicate orally through discussions. The table below summarizes the communications required at the conclusion of the audit.

Significant Matter	Discussion
Summary of uncorrected misstatements	We did not identify any misstatements that remain uncorrected in the financial statements.
Corrected misstatements	During the course of the audit, management and Hilborn LLP worked collaboratively to identify adjustments required to the financial statements. All adjustments recorded were reviewed and approved by management.
Significant deficiencies in internal control	An increased risk profile is inherent in an organization of this size relative to the lack of segregation of incompatible duties. Segregation of incompatible duties is a key internal control intended to minimize the occurrence of errors or fraud. The principle of segregating incompatible duties encompasses the division of responsibilities of a key process such that no one individual performs two or more of the functions related to custody, initiation, authorization, execution, recording and reporting.

Significant Matter	Discussion
Fraud and non-compliance with laws and regulations	<p>No fraud or non-compliance with laws and regulations came to our attention during the course of the audit.</p> <p>We would like to reconfirm with the Council that you are not aware of any fraud or non-compliance with laws and regulations not previously communicated with us.</p>
Significant difficulties encountered	<p>No difficulties were encountered while performing the audit and there are no unresolved disagreements. We received full cooperation from management during our audit.</p>
Related party transactions	<p>We did not identify any related parties.</p>
Subsequent events	<p>No subsequent events, which would impact the financial statements have come to our attention.</p>
Cybersecurity risk	<p>The cyber risk profile of many entities has increased recently. The College should continue to consult and collaborate with your IT service provider or other cyber security experts to continue to update policies and practices and obtain a better understanding of the continuously evolving cyber risk exposure of the College and what actions may be undertaken to reduce and mitigate the risk.</p>





BRIEFING NOTE

To: **Council**

From: **Roderick Tom-Ying, Acting Registrar & CEO**

Date: **December 9, 2022**

Subject: **Overview of the Discipline Hearings Process Guidelines (Draft)**

Public Interest Rationale

The College of Denturists of Ontario's mandate is to protect the public by ensuring Registered Denturists provide safe, ethical, and competent denturism care and service in Ontario. As part of that mandate, the College has the responsibility of ensuring its registrants, Denturists, have the necessary resources and information to discharge their duties as healthcare professionals. As well, the College continually seeks to provide transparent and fulsome information regarding its complaints and discipline hearings processes. This draft guideline will provide another resource tool to Denturists.

Background

Based on the data stemming from the Complaints and Discipline departments, it was recognized that most members who come before the various panels are not represented by legal counsel in their matters. While the College strongly encourages members to obtain legal representation, it is not a firm requirement. The College believes that a development of a resource tool could provide members with further clarity on the hearings process, the various stages of a discipline hearing, and can be used as a resource by all Denturists.

The draft guidelines also provides the College with an opportunity to provide transparent information regarding its discipline hearings process that is written in plain language compared with the formal Discipline Hearings Rules of Procedure document that governs the process.

In the development of this guideline, the College requested assistance from Steinecke Maciura LeBlanc, who authored the initial draft of the guidelines. College Staff made amendments to the guide to tailor it specifically for CDO registrants.

The draft guidelines entitled: "Overview of the Discipline Hearings Process Guidelines" will cover the following topics:

- Notice of hearing
- Legal representation
- Disclosure of evidence
- Pre-hearing conferences
- Motions
- Hearings
- Rules of procedures
- Decision and reasons
- Appeals

Finally, the document includes a list of additional resources including the *Regulated Health Professions Act, Health Professions Procedural Code, Denturism Act, Statutory Powers Procedures Act* and Rules of Procedure of the Discipline Committee.

While guidelines, as a regulatory instrument, are not required to be approved by Councils prior to publishing, College Staff wanted Council to be apprised of its content and review the guidelines as a resource tool. This stems from the fact that all members of Council are appointed to the Discipline Committee, with exceptions, and can potentially serve on a Discipline panel.

Options

After review and discussion of this item, Council may elect to:

1. Approve the content found in the draft guidelines for publishing
2. Direct staff to make amendments to the content and approve draft guidelines for publishing
3. Other

Attachments

1. Draft Overview of the Discipline Hearings Process Guidelines



COLLEGE OF
DENTURISTS
OF ONTARIO

Overview of the Discipline Hearings Process Guidelines



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1. Purpose

The following is intended to provide an overview of the discipline process of the College of Denturists of Ontario (the "College"). Please review this document carefully as it contains important information. This document is not legal advice. If there is any conflict between this document and the applicable legislation or rules, the legislation or rules take precedence. It is strongly recommended that you seek legal advice and retain legal counsel to represent you at a Discipline hearing.

As part of the College's mandate to regulate Denturism in the public interest, the Inquiries, Complaints and Reports Committee may refer allegations of professional misconduct or incompetence to the College's Discipline Committee for a hearing.

A hearing is a formal proceeding, similar to a trial in a court, conducted by a Panel of members of the Discipline Committee. The Discipline Committee will consider evidence and determine if, based on the evidence, the Member committed an act or acts of professional misconduct or is incompetent. If the Discipline Committee finds that the Member committed acts of professional misconduct, it will then determine what penalty should be imposed. In hearings before the Discipline Committee, the parties are the College and the Member against whom the allegations have been made.

The purpose of disciplinary hearings is to help the College ensure that its mandate of public protection is carried out. Discipline hearings ensure that Members govern themselves in accordance with the *Regulated Health Professions Act*, the *Denturism Act, 1991*, in addition to other statutes and regulations governing the profession. This includes maintaining standards of practice of the profession.

Disciplinary hearings also help the College preserve public confidence in the profession by:

- Providing public access to the discipline process through a public complaints process
- Allowing the public access to discipline proceedings by way of open hearings
- Publishing the Discipline Committee's decisions in the College's publications and on its website.

It is strongly recommended that you retain legal counsel to represent you at a discipline hearing.

2. Notice of Hearing

After a referral to the Discipline Committee in relation to specified allegations of professional misconduct or incompetence has been made, the matter will be assigned to the College's lawyer



(the "Prosecutor"). The Prosecutor will prepare a Notice of Hearing to be sent to you that will set out a date for a hearing as well as provide you with a copy of all relevant information within the College's possession, which is called "Disclosure".

The Notice of Hearing contains the allegations of professional misconduct or incompetence that have been made against you. The College has the burden of proving the allegations set out in the Notice of Hearing. The standard of proof that the College must meet is the civil standard of proof - a **"balance of probabilities"**. Simply put, this standard means that the Discipline Committee must decide whether it is more likely than not that you engaged in the conduct that you are alleged to have engaged in. Please note, this is different than the standard of proof required of criminal matters, which is "beyond a reasonable doubt".

Once you receive the Notice of Hearing, you or your legal counsel should contact the Prosecutor assigned to the case to discuss how you intend to proceed.

3. Legal Representation

A discipline hearing is a serious matter. If you face allegations of professional misconduct before the Discipline Committee, you should strongly consider whether you want to retain a lawyer, paralegal or an agent at your own expense (in compliance with the requirements of the *Law Society Act*). There is no requirement for you to retain legal counsel (you can represent yourself) but the College is represented by a lawyer at hearings.

4. Disclosure

The parties to a hearing are required to make such disclosure as is required by law and may make such additional disclosure as will assist to make the hearing effective and fair. The College is required to provide all relevant information obtained during the investigation of the Inquiries, Complaints and Reports Committee which led to the referral of the matter to the Discipline Committee.

Where a party wants to rely on an expert witness, the party must disclose the identity of the expert and a copy of a written report signed by the expert containing the substance of the expert's anticipated oral evidence. An "expert witness" is someone qualified to give opinion evidence about matters outside the general scope of knowledge of the Panel members. For example, the Discipline Committee often hears expert evidence about what the standards of practice of the profession are, and whether those standards were breached in a particular case.



5. Pre-Hearing Conference

There are a number of preliminary matters that should be determined before a hearing takes place, such as how many witnesses will be called, what facts the parties agree on (if any), and what are the contentious issues. To assist with narrowing the issues and to help expedite the time required for a hearing, a pre-hearing conference may be arranged in advance of the hearing. Pre-hearing conferences are not mandatory but can be requested by the parties.

Pre-hearing conferences are closed to the public and all discussions at a pre-hearing conference occur on a “without prejudice” basis. This means that nothing discussed at the pre-hearing conference can be disclosed at the hearing. The purpose of the pre-hearing conference is to plan for the hearing and to determine if any of the issues can be settled. The person who chairs the pre-hearing conference will not be a member of the Discipline Committee Panel at the hearing (unless both parties consent). If none of the issues can be settled, a pre-hearing conference is a helpful opportunity for the parties to discuss any issues that may arise at a hearing, as well as scheduling issues, including how long a hearing may take.

If you would like to request that a pre-hearing conference be held, you may contact the College’s Prosecutor to discuss this further.

6. Motions

A motion is a request to the Discipline Committee to obtain a ruling or decision on a specific matter relevant to a case. Parties must notify the Discipline Committee of any intention to file a motion so that a motion date can be scheduled. The party bringing the motion must serve and file a copy of the written notice of motion on each party and file it with the Discipline Committee at least 15 days before the motion hearing. A party who wishes to respond to the motion must serve and file their response to each party and file a copy with the Discipline Committee at least 9 days before the motion hearing.

Certain motions may be brought in advance of the hearing – these are called “pre-hearing motions”. An example of a pre-hearing motion is a motion to request an adjournment. Other motions, such as motions to require a third party to produce documents, must be brought at the hearing.

A pre-hearing conference can be helpful in assisting you to determine what motions, if any, should be brought in advance of the hearing.



7. Hearings

A hearing is a formal proceeding before an independent Panel of the Discipline Committee made up of members of the profession and the public. The hearing is a full legal and adversarial process – each party presents its own case and represents its own interests. There are specific roles and duties for each individual involved in a hearing. It is important that you appreciate that Discipline Hearings are similar to court proceedings, and therefore there are rules that are required to be following during the hearing.

There is a specific order to the Discipline Hearings, which is set out below, as well as a high degree of formality. All witnesses will be sworn or affirmed as to the truth of their evidence before they are permitted to commence their evidence. Any documentary evidence to the hearing will be entered as exhibits during the hearing.

With respect to decorum, the Panel is given the same respect as a judge at trial. For hearings that are proceeding in person, the Panel will enter the hearing room last and all persons present are required to stand (unless they are physically unable to do so) when the Panel enters the room and remain standing until advised by the Chair of the Panel to be seated. The same protocol applies when the Panel exits the hearing room. Additionally, the Panel will not speak with the Member or the Prosecutor during breaks.

If a Member has been given notice of the hearing, including the date, time, place and purpose of the hearing, and fails to attend the hearing, the hearing may proceed in their absence.

In certain circumstances, it is possible for a hearing to be adjourned to a later date than previously scheduled. If you require an adjournment, you should contact the Prosecutor and Independent Legal Counsel as soon as possible (additional information regarding Independent Legal Counsel's role is included below). You should consult the Discipline Committee's Rules of Procedure which provide more information on how to seek adjournments (see Rule 5.02).

8. Rules of Procedures

The Discipline Committee has its own set of rules which contain information regarding its process. These rules, called the Rules of Procedure of the Discipline Committee, are available on the College's website. They contain important information, including information about pre-hearing conferences, the deadline and process to file materials with the Discipline Committee, the parties' disclosure obligations and the process parties must follow when bringing motions.

You should review these rules very carefully.



8.1. Electronic Hearings

The default mode of hearing is currently electronic. In the case of electronic hearings, the College will provide dial-in information to the parties in advance of the hearing and will also be available to troubleshoot any issues in advance of the hearing. It is recommended that you contact the College in advance of the hearing to ensure that any issues are addressed before the hearing.

Electronic hearings are subject to the same rules and decorum as in-person hearings. You must ensure that you are in a quiet space and can focus on the hearing. Nobody else should be in the room with you with the exception of lawyers, paralegals or representatives. If a member wishes to have a support person present, they must seek permission in advance from the Prosecutor. Even if the Prosecutor consents, the Panel has the final decision. Finally, members will want to ensure that they do not have access to documents (electronic or paper) when they testify. If documents are needed, the member will want to alert the Prosecutor in advance. The rationale is that when a person is testifying, they should only rely upon their memory and not be aided by documents. There are exceptions. However, this will need to be discussed with the Prosecutor and the Panel.

8.2. The Individuals Involved at a Discipline Hearing

The parties to a discipline hearing are the College and the Member against whom allegations have been made. Any other witnesses who may be permitted to give evidence at the hearing, including the complainant if the hearing involves a complaint against the Member, are not parties. Note that if a party calls a witness to testify, that witness will usually not be permitted to attend the hearing until their testimony is completed.

The other participants involved in the hearing will include the Panel, Prosecutor, Court Reporter, Independent Legal Counsel, as well as College staff and any witnesses called by either party.

8.3. The Panel

The Chair of the Discipline Committee will assign a Panel to preside at a hearing and consider the allegations contained in the Notice of Hearing. The Panel will be composed of three to five people, including a Chair of the Panel (who will not necessarily be the Chair of the Discipline Committee). The Chair has the responsibility of ensuring that the hearing is conducted fairly and efficiently.

The role of the Panel is similar to that of a judge (and jury) – it will render a decision and give its reasons. The decision becomes public information upon completion of the hearing.

The mandate of the Panel is to:



- Consider the allegations set out in the Notice of Hearing and determine the facts of the case
- Determine whether, upon the evidence and the facts, the allegations have been proven
- Determine whether, in respect of the allegations so proved, the Member has committed an act of professional misconduct or is incompetent
- If a finding of professional misconduct or incompetence is made, determine the penalty to be imposed in cases where such findings have been made.

The Panel has the right to ask questions of clarification from witnesses.

The Discipline Committee Panel will also have continual access to its own legal counsel commonly referred to as Independent Legal Counsel (“ILC”). This lawyer does not represent the College and is not a member of the Panel. More information regarding ILC is provided below.

8.4. The Prosecutor

The Prosecutor will present the available evidence to prove the allegations as set out in the Notice of Hearing. The Prosecutor must provide sufficient evidence in order for the Panel to make a finding or findings on the allegations. If the Prosecutor does not tender enough evidence to meet the burden of proof (described above) the Panel will not make a finding of professional misconduct or incompetence.

The role of the Prosecutor is to present the case for the College. The Prosecutor cannot provide legal advice to you or to witnesses. It is strongly suggested that you seek legal advice and if necessary, retain your own legal counsel to represent you.

8.5. Independent Legal Counsel

The Discipline Panel also retains its own legal counsel to provide impartial legal advice to the Panel. Note that even though the College pays for the services of ILC, the ILC is completely independent of the College. The Panel is permitted to seek legal advice from ILC with respect to legal and/or procedural issues that arise during the course of a hearing. The right to legal advice is important for the Panel, as most Panel members are not lawyers. ILC may provide advice on any given questions of law, procedure, or evidence. ILC does not vote or influence the Panel’s decision. Advice given to the Panel by ILC will be shared with the parties so that they can make submissions about it if they wish. ILC is independent of the College and the Member and will be present during the hearings in order to support the Panel if required. ILC cannot give legal advice to any of the parties – the College and the member included.



8.6. Court Reporter

A court reporter transcribes verbatim the entire proceedings. The College is required to have and maintain the record in all disciplinary proceedings. You can request a copy of the transcripts, however there is a fee for obtaining them.

8.7. College Staff

College Staff may be present during the hearing. They are responsible for making all pre-hearing arrangements, such as ensuring the hearing room is booked, that all technology is functioning appropriately and arranging for the reporter and ILC. College Staff will also ensure that discipline decisions are distributed and published as required and will monitor the Member's compliance with any penalty order made by the Panel. College Staff will be available to provide the Member with any logistical information and contact information for the College's Prosecutor.

8.8. Contested vs. Uncontested Hearings

Hearings occur in two stages.

The first stage of the hearing is focused on whether you committed an act or acts of professional misconduct or incompetence. The Prosecutor will start by reviewing the allegations in the Notice of Hearing. Once the Panel has reviewed the Notice of Hearing, you will be asked how you respond to the allegations. You can either deny some or all of the allegations, in which case the hearing will proceed on the basis that the denied allegations are contested. You can also admit some or all of the allegations, which is the equivalent of a guilty plea.

The question of a possible penalty is not addressed in this part of the hearing – the only decision for the Panel to make is whether the allegations in the Notice of Hearing have been established on a balance of probabilities (described above). If the Panel finds that you committed an act or acts of professional misconduct or incompetence, the second stage of the hearing is focused on what penalty is appropriate.

Either or both stages of the hearing can proceed on a contested basis or uncontested basis.

8.9. Contested Hearings

Where a hearing occurs on a fully **contested** basis, the Member disputes the allegations. Following opening statements of each party's general position regarding the allegations, the Panel will hear evidence.



The Prosecutor will make their opening statement first, and you will then have the right to make an opening statement. The opening statement is not evidence – the purpose is to assist the Panel in understanding what the case is about, what the parties' respective positions are, and the anticipated evidence supporting those positions, including which witnesses the parties will be calling and what they expect the witnesses will say. There is no requirement for you to make an opening statement.

The College will present its evidence first. Evidence may be in the form of documents or in the form of oral testimony given by witnesses. When the College has finished asking questions of their witnesses, you will have the opportunity to cross-examine the witness. It is important to remember that questions must be relevant to the allegations in the Notice of Hearing. Each party is responsible for ensuring that its witnesses attend the hearing, and if necessary, witnesses can be served with a summons to require their attendance at the hearing. A summons to witness must ordinarily be served personally on the witness at least two days before the date on which the witness is to appear.

The parties have the right to object to any questions asked by the opposing party if they believe it is improper. Some examples include if the question seeks irrelevant or hearsay information. You are required to explain your objection and you must address the Chair of the Panel when doing so. The Panel may ask the witness to be excused and may turn to ILC to seek their views, and the parties will have an opportunity to comment on any advice from ILC to the Panel. The Panel will then make a decision regarding whether the question is improper.

Once the College has advised the Panel that they have no other evidence to tender, the Panel will advise you that you have the opportunity to present your case. If you have not yet provided an opening statement, you can do so now. You can then call the witnesses (one by one) to testify before the Panel. You also have the right to testify in your own defence, but you are not obliged to do so. If you do testify, then the Prosecutor will be able to cross-examine you on your evidence.

Note that you are not obligated to present any evidence during the hearing. Remember the burden to prove the allegations rests with the College. However, if you do not present any evidence the Panel will only be relying upon the evidence tendered by the College.

After each party has presented their evidence, they will have an opportunity to provide closing submissions, summarizing the evidence that was presented during the hearing, including the evidence of the witnesses who testified or documents that were referred to, as well as the parties' arguments. It is important to remember that submissions are not evidence – you should keep this in mind when deciding whether or not to testify.

The Panel will retire. They will then consider the evidence and decide whether or not you have committed an act or acts of professional misconduct or incompetence as alleged in the Notice



of Hearing.

If the Panel decides that you have committed an act or acts of professional misconduct, the Panel will then consider what penalty is appropriate. Each party will have an opportunity to make submissions and present evidence during the penalty phase of the hearing.

As you can appreciate, the discipline hearing process is formal and regimented, much like the process of the Courts. The College strongly recommends that you retain the services of a lawyer, paralegal, or an agent at your own expense to assist you with the discipline process.

8.10. Uncontested Hearings

Where a hearing proceeds on an **uncontested** basis, you are agreeing that you have committed an act or acts of professional misconduct, and you enter into an Agreed Statement of Facts. The Agreed Statement of Facts is a written document that will be tendered to the Panel instead of calling witnesses. The Agreed Statement of Facts sets out the facts that are agreed to between the parties. Where hearings proceed on an uncontested basis, there is no need to present oral evidence; all the evidence is contained in the Agreed Statement of Facts. The Agreed Statement of Facts will also usually include an admission or admissions of professional misconduct. The admission(s) must be voluntary and informed to be accepted by the Discipline Committee.

Note that the Panel may also conduct an oral plea inquiry to ensure that you are admitting to the allegations in a voluntary fashion. Some of the questions that can be posed to you during the plea inquiry include the following:

- Do you understand the nature of the allegation(s) made against you?
- Do you understand that by not contesting the allegation, you are waiving the right to require the College to prove the case against you and the right to have a full hearing?
- Did you voluntarily decide to enter a plea to the allegations against you?

In uncontested hearings, agreement is reached on finding (as described above) and penalty. When both parties agree to the penalty that should be ordered, the Panel will be provided with a document called a Joint Submission on Penalty.

Joint Submissions on Penalty are generally accepted by the Discipline Committee unless to do so would be contrary to the public interest and would bring the administration of the Discipline Process into disrepute. This is a very high threshold to meet, i.e., the penalty agreed to be the parties would have to be much higher or much lower than had been ordered by the Discipline Committee (or the discipline committee of other similar regulators) in the past for similar conduct. This means that even if the Panel would have made the terms different, that is not enough to allow it to reject or “tinker” with what has been jointly agreed to by the parties.



8.11. Penalties

If the Discipline Committee determines that you have committed an act or acts of professional misconduct, it will impose a penalty. The Discipline Committee has the power to order the following penalties:

- Requiring you to appear before the panel to be reprimanded (in some cases of sexual abuse, a reprimand is mandatory);
- Direct the Registrar to revoke your certificate of registration (in some cases of sexual abuse, revocation is mandatory);
- Direct the Registrar to suspend your certificate of registration;
- Direct the Registrar to impose terms, conditions and limitations on your certificate of registration;
- If the findings of professional misconduct include sexual abuse, require you to reimburse the College for funding provided to the complainant for therapy and counselling and to post security to guarantee the payment of any amounts you are required to reimburse the College;
- Requiring you to pay a fine of not more than \$35,000 to the Minister of Finance.

8.12. Costs

The Discipline Committee also has the power to order costs if there is a finding of professional misconduct. These are separate and apart from the penalty and are meant to have the Member bear some of the costs incurred in the investigation and prosecution of the matter. Typically, the College will seek costs provided for by Tariff A in the *Discipline Committee Rules*. The College may seek an amount greater than the Tariff, and the Discipline Committee has the power to order such costs. If the Member and the College agree to the costs that should be ordered, it will be included in the Joint Submission on Penalty.

If the Discipline Committee finds that you are incompetent (meaning that your professional care of a patient displayed a lack of knowledge, skill, or judgment of a nature or to an extent that demonstrates that the member is unfit to continue to practise or that the member's practice should be restricted), then the Discipline Committee Panel may make an order for revocation, suspension or the imposition of terms, conditions or limitations on your certificate of registration.



8.13. Open to the Public

Discipline hearings are open to the public except in rare cases where the Discipline Committee determines the hearing should be closed. The decisions of the Discipline Committee are also made public.

In certain circumstances the Panel has the power to order a publication ban. For example, in sexual abuse matters, a publication ban may be ordered on the request of a witness who is testifying about allegations of a member's misconduct of a sexual nature involving that witness. The order would require that no person shall publish the identity of the witness or any information that could disclose their identity.

9. Decisions and Reasons

After the hearing, the Discipline Committee Panel will give its decision and reasons in writing to the parties. College Staff will assist with providing the decision and reasons document to all parties.

10. Appeals

After the decision of the Discipline Committee is released, either party can appeal the decision to the Divisional Court by serving and filing a Notice of Appeal within 30 days. The Divisional Court may overturn, affirm, or modify the Order of the Discipline Committee. Please note that you will want to familiarize yourself with the necessary documents, procedures and deadlines of the Divisional Court should an appeal be filed.



11. Resources

You are encouraged to consult the following resources for more information:

[Regulated Health Professions Act, 1991, S.O. 1991, c. 18](#)

[Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991](#)

[Denturism Act, 1991, S.O. 1991, c. 25](#)

[Statutory Powers Procedure Act, R.S.O. 1990, c. S.22](#)

[Rules of Procedure of the Discipline Committee](#)

12. List of Revisions

Date	Revision



BRIEFING NOTE

To: **Council**
From: **Roderick Tom-Ying, Acting Registrar & CEO**
Date: **December 9, 2022**
Subject: **2023-2024 Registration Renewal Fees**

Public Interest Rationale

The College of Denturists of Ontario's mandate is to protect the public by ensuring Registered Denturists provide safe, ethical, and competent denturism care and service in Ontario. As part of that mandate, the College Council has the overall responsibility of ensuring prudent financial stewardship of the College's financial resources as part of its core principle of good governance. Implementation of regulatory best practices, strategic planning, performance monitoring, fiscal management, external compliance, and reporting forms some of these core principles. Council must ensure that the renewal fees set is fiscally responsible and provides an appropriate amount of funding level for the College to resource its programs and operational costs in order to achieve its mandate.

2023 – 2024 Registration Renewal Fees

In advance of the registration renewal period that begins in March 2023, Council is asked to deliberate and set an appropriate registration renewal fee for the upcoming renewal year. The options may include returning to the set fees found in the College By-Laws or to contemplate a reduction in the Registration renewal fee where appropriate.

Over the course of the pandemic, the CDO was the first of 26 regulators to provide substantial and warranted fee relief for Denturists with an unprecedented 50% fee relief over two years and a 35% fee relief this past year. This resulted in the CDO running deficit budgets over the three years.

The deficit budgets were funded from the College's unrestricted unassigned Reserve Funds.

The table below summarizes the renewal fees set by Council and the College's net income amount:

	Fee Relief	Renewal Fee (excluding HST)	Total (inclusive of HST)	College Budget (Deficit)/Surplus
2018-2019	N/A	\$1900.00	\$2147.00	\$273,889
2019-2020	N/A	\$1900.00	\$2147.00	\$333,329
2020-2021	50% - \$950	\$950.00	\$1073.50	(\$337,350)
2021-2022	50% - \$950	\$950.00	\$1073.50	(\$215,104)
2022-2023	35% - \$665	\$1235.00	\$1395.55	(\$7,382) projected
2023-2024				

The registration renewal fees set in the College By-Laws specifies a renewal fee of \$1900 exclusive of HST. This fee has remained unchanged since the 2013-2014 renewal year. Due to efficiencies and cost-savings implemented by the College since 2013, the College has been able to keep the renewal fees static for 9 years. The cost-savings implemented so far was able to offset increases in CPI each budget year. This is a testament to the fiscal processes and budgeting of the CDO Council and its staff.

The College continues to experience uncertainty in its forecasting of expenditures for the 2023-2024 budget year due to the pandemic. Should in-person Council and Committee meetings return, the College anticipates moderate-to-significant increases to its expenditures over the budget year. Hotelling accommodations and travel expenses have risen significantly in the downtown Toronto area with many hotel accommodations rising to around \$300 CAD per night from \$185-\$200 prior to the pandemic.

Due to the uncertainty of forecasting expenditures for the 2023-2024 budget year, it may be prudent for Council to investigate a return to the fees set in the College By-Laws. This will allow the College (with certainty) to return to balanced budgets and provide a cushion to absorb unexpected increase in costs.

It is important to note that the return of fees as set in the By-Laws (\$1900 + HST), represents an amount that Registered Denturists have been remitting since 2013. This amount does not represent an increase in fees prior to the pandemic, and already accounts for 9 years of CPI increases. The College does not envision an increase of the renewal fees from CPI inflationary pressures in the short term due to current and potential operational efficiencies that may be gained.

The College Council may also consider setting a reduced fee in amounts of \$100 or \$200. As noted in the 2023-2024 Budget Scenarios, a \$100 or \$200 fee relief will also result in a budget surplus. The amount of surplus will be relative to the fees set. In the event the College exceeds the forecasted surplus due to unexpected increases in expenses, any deficit can be absorbed by the College's reserves. The College's reserve level is within an appropriate level as specified in the Surplus Retention Policy.

In the event the College experiences a budgetary surplus, the excess will be transferred to the College’s unrestricted unallocated reserves. Council may be called upon in future meetings to transfer some of the reserves to fund its Strategic Initiatives budget for upcoming initiatives such as governance work and the continuation of its member portal upgrades.

College Staff continues to recommend providing the installment options to Denturists for the 2023-2024 year:

- First installment due April 14
- Second installment due September 30

2023 – 2024 Budget Forecasting

Budget Assumptions

Prior to developing the operating budget, the College Management team reviews general budgetary assumptions that will form the basis of any revenue and expense assumptions.

- General goods and services used by the College may increase by the percentage change increase in the Consumer Price Index for goods and services (all items) in Canada as published by Statistics Canada. E.g., subscription services (Zoom), benefits plan.
- HST is not included on the fees used to form the basis of the operating budget.
- Expenses include application sales tax (PST/HST).
- Resources are allocated to ensure that current staffing levels can adequately support College operations.
- Membership fluctuations generally follow a trend of 10 resignations per year.

Budget Notes

Revenue	Budget Notes
Professional Corporation Fees	Based on the College’s projections the same year over year budget should remain.
Registration Fees	To be determined by Council.
Other Fees	No changes in year over year assumptions. Other fees include Clinic Name Applications, Reinstatement, Duplicate Certificate, Late Fees, and Misc Income.
Qualifying Examination Fees	The 2023-2024 examination year will be an unprecedented year for the Qualifying Examinations. During the 2020 pandemic year, the three educational institutions had to cease their Denturism programs and curriculum due to governmental lockdowns. George Brown College has indicated that they did not have an intake of new students in 2020, resulting in no

	<p>new graduating students for 2023. The other two educational institutions have indicated they will graduate a significantly reduced cohort.</p> <p>The College projects only around 30 potential candidates for the 2023-2024 examination year or 15 candidates per administration. Normally it is around 30-40 candidates per administration. This will significantly reduce the projected examination income and cause a deficit for the examinations budget.</p>
Other Income	<p>For this budget year, the College anticipates an increase in investment income of around 2.5% due to the increase in Bank of Canada's overnight lending rate resulting in favourable savings interests.</p>

EXPENDITURES	Budget Notes
Wages & Benefits	<p>Due to transition in College leadership and increase in benefits administration, there will be an increase year over year. This budget line item for 2023-2024 represents a return to routine levels.</p>
Professional Development	<p>Recommend an increase of \$15,000 year over year based on new professional development plans for College Staff and Members of Council. With the return of in-person events and conferences, College Staff and Council participation will be anticipated.</p> <p>2019-2020 - \$40,000 2020-2021 - \$45,000 2021-2022 - \$40,000 2022-2023 - \$30,000 2023-2024 - \$45,000 (proposed)</p>
Professional Fees <i>Audit, Bookkeeping Services, Consultants, Program and Policy Development, Peer Circles, Legal, General</i>	<p>An increase of \$10,000 is anticipated for this line item due to an increase of CPI in the Toronto area of around 6-7% for professional services, as well as the return of in-person Peer Circles.</p> <p>The budget for Peer Circles is currently located inside this line item and we anticipate more offerings of Peer Circles including the exploration of hosting Peer Circles in northern cities in Ontario increasing costs.</p>
Office & General	<p>No changes contemplated year over year. The College will continue to implement lean operational processes in order to maintain its current budget levels.</p>

Rent	No changes to the budget for commercial rent for 2023-2024.
Qualifying Examination	<p>While the College anticipates a significantly decreased number of potential candidates for 2023-2024, the College can only reduce the costs of hosting its Qualifying Examination by a limited amount. This is due to the fixed-cost nature of the examination service providers.</p> <p>The College will continue to host two Qualifying Examination administrations to the fairness of all candidates and to fulfil its statutory responsibility.</p> <p>The College will move from a 2-track examination to a 1-track examination eliminating the number of assessors by half. This will reduce some costs of hosting the examination. The fixed-costs of venue rentals and SPP program represent the majority of the examination expenses.</p> <p>The College anticipates the hosting of 2 administrations of the examination will result in a moderate to significant budgetary deficit based on its best guess estimates.</p> <p>The CDO projects a deficit of at least \$50,000 for the June 2023 administration but the final costs depend on the true number of candidates who challenge the examination.</p>
Strategic Initiatives	Removed from the Operating Budget and created as a standalone budget.
Council and Committees	<p>As Council returns to in-person meetings, expenses incurred related to travel, accommodations, and meals will increase.</p> <p>The College forecasts an increase of at least \$10,000 related to increased expenses due to in-person meetings.</p> <p>The College will be able to accurately adjust this budget line item once in-person meetings and processes stabilize and a return to a new normal is established.</p>
Quality Assurance	No changes contemplated year over year. In 2022, Council merged QA Panel A with QA Panel B to form one QA Committee.
Complaints & Discipline	No changes contemplated year over year.
Capital Expenditures	No changes contemplated year over year.

Unallocated Potential Expenses

- Joining of regulatory hub (\$20,000)
- Additional strategic initiatives e.g., governance consultant (\$20,000 - \$60,000)
- Strategic Planning (\$10,000)

Options

After consideration of these matters, Council may:

1. Adopt a motion that returns the renewal fee as set in the College By-Laws - \$1900 + HST for the 2023-2024 renewal year
2. Adopt a motion that approves a fee reduction (temporary) for an amount as specified for the 2023-2024 renewal year
3. Adopt a motion that approves a fee reduction (permanent) for an amount as specified for the 2023-2024 renewal year
4. Other

Attachments

1. 2023-2024 Draft Budget Scenarios
2. Fee Comparison Data (2021)
3. Letter from the DAO re: Fee Reduction

College of Denturists of Ontario
2023-2024 Renewal Fees Budget Scenerio

YTD Budget to Actual	2022-2023			2023-2024			2023-2024		
	BUDGET	DRAFT BUDGET	% Change	\$100 Fee Relief	% Change	\$200 Fee Relief	% Change		
REVENUE									
Professional Corporation Fees	\$ 65,000.00	\$ 65,000.00	0%	\$ 65,000.00	0%	\$ 65,000.00	0%		
Registration Fees	\$ 931,190.00	\$ 1,432,600.00	54%	\$ 1,357,200.00	46%	\$ 1,281,800.00	38%		
Other Fees	\$ 4,500.00	\$ 4,612.50	2%	\$ 4,612.50	2%	\$ 4,612.50	2%		
Qualifying Examination Fees	\$ 277,100.00	\$ 122,250.00	-56%	\$ 122,250.00	-56%	\$ 122,250.00	-56%		
Other Income	\$ 6,500.00	\$ 6,500.00	0%	\$ 6,500.00	0%	\$ 6,500.00	0%		
TOTAL REVENUE	\$ 1,284,290.00	\$ 1,630,962.50	27%	\$ 1,555,562.50	21%	\$ 1,480,162.50	15%		
EXPENDITURES									
Wages & Benefits	\$ 533,528.08	\$ 620,000.00	16%	\$ 620,000.00	16%	\$ 620,000.00	16%		
Professional Development	\$ 30,000.00	\$ 45,000.00	50%	\$ 45,000.00	50%	\$ 45,000.00	50%		
Professional Fees	\$ 140,000.00	\$ 150,000.00	7%	\$ 150,000.00	7%	\$ 150,000.00	7%		
Office & General	\$ 150,000.00	\$ 150,000.00	0%	\$ 150,000.00	0%	\$ 150,000.00	0%		
Rent	\$ 130,000.00	\$ 130,000.00	0%	\$ 130,000.00	0%	\$ 130,000.00	0%		
Qualifying Examination	\$ 178,144.00	\$ 178,144.00	0%	\$ 178,144.00	0%	\$ 178,144.00	0%		
Strategic Initiatives		\$ -		\$ -		\$ -			
Council and Committees	\$ 15,000.00	\$ 25,000.00	67%	\$ 25,000.00	67%	\$ 25,000.00	67%		
Quality Assurance									
QA Panel A	\$ 6,000.00	\$ 10,000.00	67%	\$ 10,000.00	67%	\$ 10,000.00	67%		
QA Panel B	\$ 4,000.00		-100%		-100%		-100%		
QA Assessments	\$ 35,000.00	\$ 35,000.00	0%	\$ 35,000.00	0%	\$ 35,000.00	0%		
Complaints & Discipline									
Complaints	\$ 30,000.00	\$ 30,000.00	0%	\$ 30,000.00	0%	\$ 30,000.00	0%		
Discipline	\$ 25,000.00	\$ 25,000.00	0%	\$ 25,000.00	0%	\$ 25,000.00	0%		
Capital Expenditures	\$ 15,000.00	\$ 15,000.00	0%	\$ 15,000.00	0%	\$ 15,000.00	0%		
TOTAL EXPENDITURES	\$ 1,291,672.08	\$ 1,413,144.00	9%	\$ 1,413,144.00	9%	\$ 1,413,144.00	9%		
NET INCOME	\$ (7,382.08)	\$ 217,818.50		\$ 142,418.50		\$ 67,018.50			



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ONTARIO REGULATORY BODY FEES

ONTARIO REGULATORY BODIES MEMBERSHIP FEE COMPARISON: 2021 MEMBERSHIP YEAR

Regulator	Regulated Profession Type	Fee	Members	Staff	Operating Budget	Staff to member ratio
College of Midwives of Ontario	Health	\$2,651.00	1,074	14	\$2,771,007.00	1:76
Royal College of Dental Surgeons of Ontario	Health	\$2,510.00	10,814	143	\$31,200,000.00	1:76

Law Society of Upper Canada (lawyers and paralegals)	Non-health	Lawyers: ¹ C1: \$1,873.00 C2: \$936.50 C3: \$468.25 C4: \$187.30 Paralegals: C1: \$964.00 C2: \$482.00 C3: \$241.00 C4: \$96.40	Lawyers: 57,783 Paralegals: 10,038 Total: 67,821	553	Lawyers: \$99,574,000.00 Paralegals: \$11,740,000.00	1:123
College of Dental Technologists of Ontario	Health	\$1,768.00	525	6	\$988,000.00	1:87
College of Physicians & Surgeons of Ontario	Health	\$1,725.00	35,800	400	\$76,000,000.00	1:90
College of Chiropodists of Ontario	Health	\$1,700.00	744	4	\$1,500,000.00	1:186
College of Naturopaths of Ontario	Health	\$1,609.00	1,735	20	\$3,400,000.00	1:87
College of Veterinarians of Ontario	Health	\$1,113.00	5,124	21	\$5,571,620.00	1:244

Chartered Professional Accountants of Ontario	Non-Health	\$1,107.40	97,121	327	\$113,000,000.00	1:297
College of Chiropractors of Ontario	Health	\$1,050.00	5,099	10	\$5,044,000.00	1:510
College of Denturists of Ontario	Health	\$950.00	721	4	\$1,455,350.00	1:180
College of Optometrists of Ontario	Health	\$945.00	2,678	15	\$2,769,781.00	1:179
Ontario Association of Architects	Non-Health	\$903.00	4,592	35	\$6,406,096.00	1:131
College of Psychologists of Ontario	Health	\$795.00	4,654	22	\$3,600,000.00	1:212
College of Massage Therapists of Ontario	Health	\$785.00	14,835	48	\$12,000,000.00	1:309
College of Audiologists and Speech-Language Pathologists of Ontario	Health	\$780.00	4,640	14	\$3,700,000.00	1:331

Ontario College of Pharmacists (pharmacists and pharmacy technicians)	Health	\$756.00 and \$378.00	22,100	145	\$22,710,652.00	1:152
College of Occupational Therapists of Ontario	Health	\$743.00	6,094	27	\$3,741,674.00	1:226
College of Opticians of Ontario	Health	\$742.00	3,082	15	\$3,078,447.00	1:205
College of Kinesiologists of Ontario	Health	\$650.00	2,900	10	\$1,700,000.00	1:290
College of Respiratory Therapists of Ontario	Health	\$650.00	3,868	9	\$1,932,847.00	1:430
College of Dietitians of Ontario	Health	\$641.00	4,448	15	\$2,900,000.00	1:296
Professional Foresters Association	Non-Health	\$620.00	970	3	\$404,447.00	1:323
College of Physiotherapists of Ontario	Health	\$575.00	10,300	32	\$6,534,000.00	1:322
Human Resources Professional Association	Non-Health	\$490.00	21,916	60	\$15,103,286.00	1:365

Ontario Professional Planners Institute	Non-Health	\$480.70	4,696	11	\$2,800,304.00	1:427
College of Medical Radiation Technologists of Ontario	Health	\$470.00	11,208	23	\$4,900,000.00	1:487
Ontario Institute of Agrologists	Non-Health	\$450.00	400	2	\$120,000.00	1:200
Professional Geoscientists of Ontario	Non-Health	\$420.00	3,694	7	\$1,187,593.00	1:528
College of Dental Hygienists of Ontario	Health	\$415.00	14,228	21	\$6,590,145.00	1:677
Real Estate Council of Ontario	Non-Health	\$390.00	93,948	120	\$24,590,000.00	1:783
Ontario College of Social Workers and Social Service Workers	Non-Health	\$360.00	25,270	40	\$7,245,540.00	1:632
College of Nurses of Ontario	Health	\$305.00	188,939	320	\$58,410,000.00	1:590
Professional Engineers Ontario	Non-Health	\$299.00	85,918	113	\$30,200,000.00	1:760

Bereavement Authority of Ontario	Non-Health	\$250.00 - \$500.00	9,564	25	\$3,028,598.00	1:383
Ontario Association of Certified Engineering Technicians and Technologists	Non-Health	\$250.00	25,000	28	\$6,500,000.00	1:893
Ontario College of Teachers	Non-Health	\$170.00	233,576	181	\$44,991,727.00	1:1290
College of Early Childhood Educators	Non-Health	\$160.00	58,867	66	\$9,000,000.00	1:891

NOTE:

- Operating budgets have either been provided directly by the regulator, or were available in respective annual reports.
- Member-to-staff ratios were calculated using complete staffing totals, which included full-time, part-time, contract and seconded employees.
- All statistics are current – on a rolling basis – to Sep 21, 2021

1: Lawyers and paralegals are invoiced for fees once a year. The fee amount depends on the lawyer's or paralegal's status and associated category at the time of billing. Status generally refers to the circumstances of the professional's work (sole practitioner, employed in education/government/business sector, retired). Should a professional's status change during the year, the fee category will be adjusted and a refund granted, if applicable. Find out more information about **status, and the percentage fee breakdown**.

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November 30, 2022

Roderick Tom-Ying
Acting Registrar and CEO
College of Denturists of Ontario
Via Email RTom-Ying@denturists-cdo.com

RE: DAO Request for Permanent Fee Reduction

Dear Roderick,

The Denturist Association of Ontario (DAO) have made several attempts to request that a Permanent Fee Reduction be addressed by CDO Council, and we wish to revisit this request.

The DAO continues to hold its stance on a permanent reduction of Annual Registration Fees, which as stated above, we have presented on various occasions since 2019. We ask that the CDO once again reference the original letter dated December 2, 2019 submitted by the DAO. (A copy of this letter will be attached.) The CDO is overdue in addressing the continuance of the temporary fee increases initiated in 2012 (\$200) and 2013 (\$500) for an intended 3-to-5-year period. The goals that were set out at that time have been fulfilled, yet the increase in fees which were ported as temporary remains in place year over year. Additionally, through 2020, 2021 and 2022, with a 50%, 50% and 35% fee reduction respectively, the CDO was able to operate in a fiscally efficient way. For these reasons, the DAO and its members feel strongly that the CDO can easily manage honouring the intention of the temporary nature of the fee increases introduced in 2012 and 2013.

We would like to be assured that this matter will be included in the budget review for 2023 fiscal year and dealt with directly. We ask that this letter be presented to CDO Council and that this request be added as an Agenda item for the forthcoming CDO Council Meeting. Kindly confirm these actions and provide a response back in writing.

The DAO truly appreciates the long-standing relationship that we share with the CDO and the opportunity to bring forth our concerns.

On behalf of the DAO Board of Directors.

Respectfully,

Jaro Wojcicki DD
DAO President



College of Denturists of Ontario

ANNUAL REPORT 2021-2022

GOVERNANCE

agile

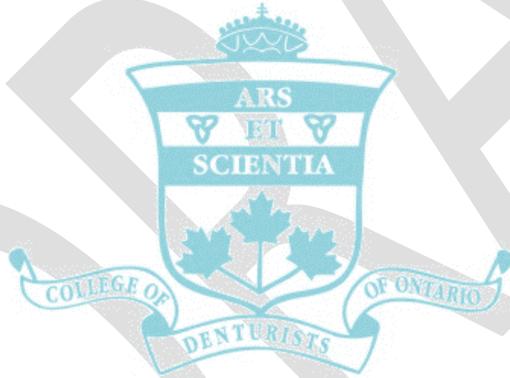
professionalism

COMPETENCE

transparent

PUBLIC INTEREST

consistent



accountable

PROPORTIONATE

targeted

ENGAGED

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About the College

Regulating the profession of Denturism since 1973

As a health profession regulatory body, the College of Denturists of Ontario (CDO) supports the public's interest in access to safe, competent, and ethical Denturism care.

Under Ontario law, 26 health regulatory Colleges acting in the public interest are entrusted with regulating a wide variety of health professionals.

The CDO does this by:

- Setting the requirements that must be met for an individual to practise Denturism in Ontario.
- Issuing Certificates of Registration to Denturists who meet these professional requirements. Once an individual has obtained a Certificate of Registration, they may practise Denturism.
- Establishing comprehensive Standards of Practice and policies that every Registered Denturist must follow.
- Developing and administering a Quality Assurance Program that helps Registered Denturists stay current and develop their knowledge and skills throughout their respective careers.
- Giving the public a way to raise issues and hold Registered Denturists accountable for their conduct and practice.

With the CDO's governing Council, Committees, and staff all working to serve the public interest first, the people of Ontario can have confidence in the care they receive from Registered Denturists.

Message from the President



Ms. Kris Bailey
President, 2020-2022

In June 2021, we acknowledged and celebrated the tenure of three long-term members of Council: Barbara Smith, Keith Collins, and Michael Vout, Jr. Guests who joined the Council meeting included Deanna Williams, Anita Kiriakou, and Hanno Weinberger, and members of Council who provided remarks and memories. Many thanks to these three dedicated individuals who gave their time, talents, and skills to the College.

In June 2021, I was re-elected as President. Three professional members were elected to Council, two new and one returning, and one new public appointee joined Council.

In November, Dr. Glenn Pettifer, Registrar and CEO, submitted his resignation effective January 4, 2022. In December 2021, as per Article 8.03 of the CDO By-laws, regarding an Acting Registrar, Mr. Roderick Tom-Ying was appointed as Acting Registrar, starting January 4, 2022, for a period not to exceed one year.

Acknowledgement of patience and diligence in leading the organization must be given to our Registrar and CEO, Dr. Glenn Pettifer, and to the staff who support our members and Council.

The year was busy with the following accomplishments:

Meetings

All meetings were conducted virtually. The CDO Council meetings adopted a Consent Agenda format and Council meetings throughout the year included relevant Committee reports to Council, briefing notes for various items, policies and/or consultations. In recognition of the Indigenous lands that the CDO Council meets on, a Land Acknowledgement was added to all formal Council agendas.

Strategic Plan and CPMF

The Strategic Plan timeline ended in 2020. Due to COVID-19 and College Performance Measurement Framework (CPMF) action items, the CDO Council and College Staff agreed to work on the completion of CPMF identified actions items and the following items prior to hosting a future strategic planning workshop: IPAC standardization amongst the oral health regulatory Colleges, implementation of performance measurements, unified exam format, and participation in amalgamation talks and subsequent vote of the three Colleges.

The public holds an interest in regulatory oversight organizations that have a clear focus on performance accountability and progressive accomplishment of organizational initiatives that align the organization's mandate. The CPMF provides an accounting and status of such items. A list of priorities associated with the CPMF List of Action Items were formulated. A report was submitted March 31, 2022, to the Ministry of Health.

A revised timeline was proposed for several action items due to some material developments with Health Profession Regulators of Ontario (HPRO) and the potential merger of three of the Oral Health Colleges.

Amalgamation

Prior to this year, there were active advances in the discussions of amalgamation between the College of Denturists of Ontario (CDO), the College of Dental Hygienists of Ontario (CDHO), and the College of Dental Technologists of Ontario (CDTO) to form an Oral Health College.

A report entitled: "Recap and Update on the Amalgamation Discussion, Governance Modernization, and the Immediate Future" written by the CDO, CDHO, and CDTO, was delivered by the President to Council in June 2021. By the end of June, all three Colleges passed a motion to begin work on amalgamation. With legal counsel, a Memorandum of Understanding (MOU) was created and signed. A Transition Oversight Committee (TOC) was formed to develop a framework with the Chair of the TOC being from the CDO. A request for Proposal (RFP), by invitation, was issued to several consulting groups with a unanimous selection. The TOC developed Terms of Reference for the work they were asked to accomplish by the Colleges.

Unfortunately, due to differing visions of Councils, the amalgamation talks were dissolved with the formal withdrawal from a partner regulator.

The CDO and the CDHO will continue to hold the principles of regulatory modernization high and to seek opportunities for interprofessional collaboration that best serve the interests of the College(s) and the people of Ontario and to continue to discuss opportunities that will improve quality and reduce costs.

Finance

An Operating Budget for the 2022-23 fiscal year with a modest deficit was approved in March 2022. Council approved a one-time 35% reduction in the Certificate of Registration renewal fee, with the return of a routine examination schedule with June 2022 and February 2023 administrations. Total reserve funds remain healthy.

A new budget account was created to assist the College with navigating and funding strategic initiative projects such as amalgamation, potential governance reforms as prescribed by the Ministry of Health, etc.

Technology

Beginning in June 2021, public access to Council meetings was provided by live streaming on the College's YouTube channel while members of Council and invited guests continued to attend the meetings via Zoom. Council meeting packages are available on the College website.

If there are polls that are needed to occur or for consideration of motions, these are displayed electronically for members of Council for ease of access. Results are shared publicly.

Records and Information Management (Strategic Priority)

Scanning and digitization of the College's paper records was completed as the first part of the document management strategy. This will be followed by cataloguing of electronic records according to the Classification Structure and Retention Schedule (approved by Council in 2018). College staff attended four training modules on how to use the new file management software (FileHold). Once all the training is completed, implementation of the new classification scheme and software will occur.

Governance and Operations

- New Council members were assigned a mentor to ensure a smooth transition to the College for knowledge and participation (June 2021).
- An educational workshop for College staff was held on the National Day for Truth and Reconciliation on September 30, 2021.
- The Ministry of Health embarked on governance reform consultations that would improve decision making, bolster transparency and accountability of Ontario's regulatory colleges and further support high-quality healthcare (October 2021).
- As part of any Briefing Note to Council, a section on "Public Interest Rationale" was included (December 2021).

Quality Management and Risk

- A virtual format for the Peer and Practice Assessment was created and the Assessors were fully trained on the use of the Chart Stimulated Recall (CSR).

Examination Process

- The OSCE venue was changed from Toronto to Hamilton Health Sciences due to the pandemic.
- The Qualifying Examination was nationalized, through a Memorandum of Agreement (MOA) with the participating jurisdictions. The first multi-jurisdictional examination, as an online remote proctored format, had its first administration in June 2021 followed by September, October, and November (unprecedented three back-to-back OSCE administrations to assist with the backlog of candidates that had accumulated since the Pandemic began in March 2020).
- MCQ and OSCE Qualifying Exam was administered in February 2022 (fourth OSCE in five months).

Training

- CDO New Council Member Orientation (June 2021), CDO President and Registrar
- "Health Professional Regulation in Ontario and Beyond: Current Models and Modernization Initiatives: Where do the Council Members Fit in?" (June 2021), Rebecca Durcan, College Counsel
- "Inclusive Leadership" (September 2021), CCDI Consulting Inc.
- "Governance Reform and Regulatory Modernization" (March 2022), Rebecca Durcan, College Counsel
- "Indigenous Inclusion" Workshop (March 2022), CCDI Consulting Inc.

College Council

Who We Are

Officers

Kris Bailey, *Public Member* – President & Chair
Alexia Baker-Lanoue, *Professional Member* – Vice President

Public Members

Michael Bakshy
Avneet Bhatia (from December 2021)
Jack Biernaski (until April 2021)
Lileath Claire
Aisha Hasan (from March 2022)
Gaganjot Singh
Gord White (until September 2021)
Arie van Wijngaarden (from June 2021)

Professional Members

Abdelatif Azzouz
Keith Collins (until June 2021)
Norbert Gieger
Elizabeth Gorham-Matthews (from June 2021)
Paul Karolidis
Garnett A.D. Pryce
Christopher Reis
Michael Vout, Jr. (until June 2021)
Joseph Whang (from June 2021)

What we Do

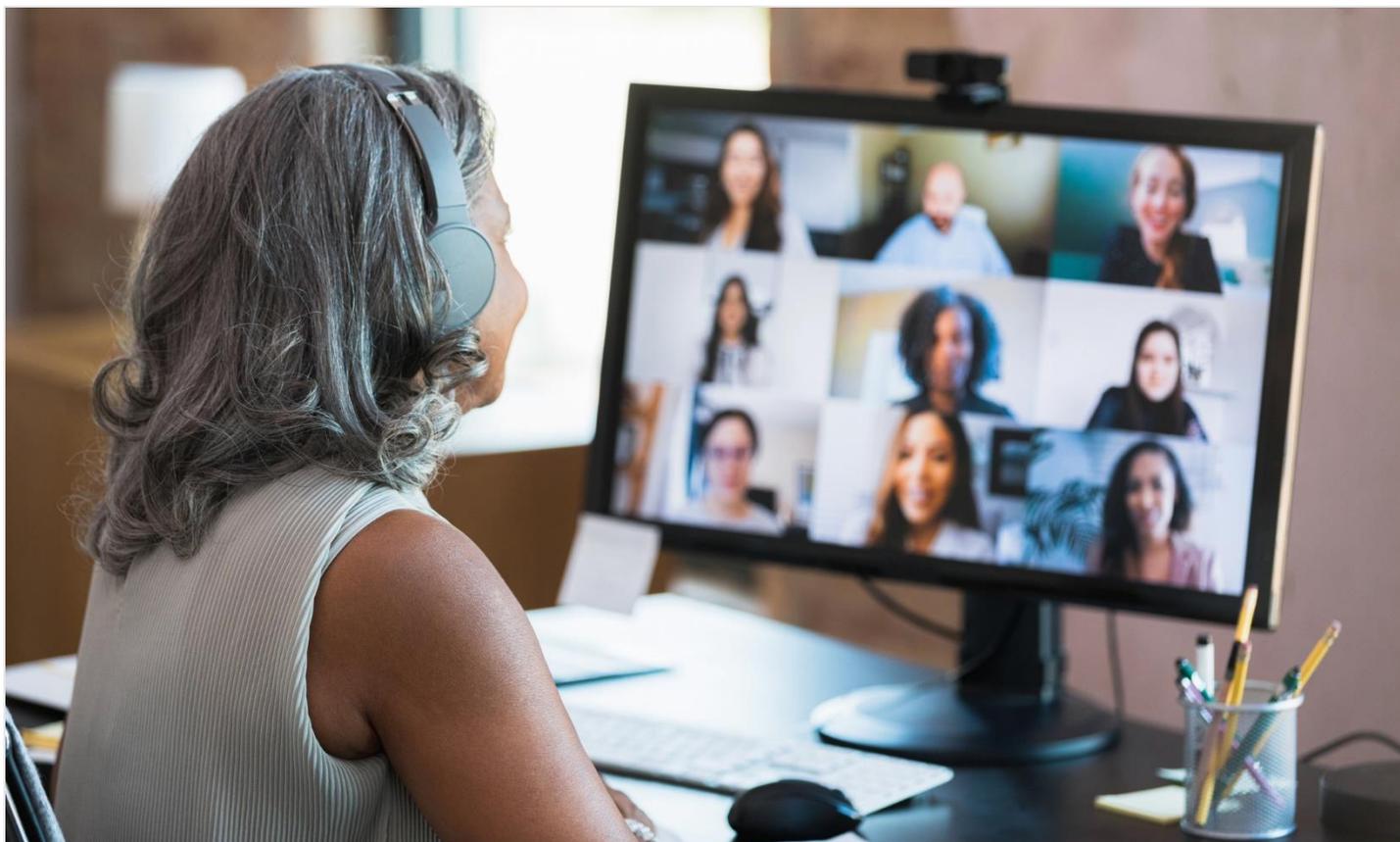
In Ontario, the self-regulation of health care professions is a partnership with the public. The operation of each regulatory college is overseen by a Council, which is like a board of directors. The Council of the College of Denturists of Ontario is made up of:

- Denturists elected by their peers (the Registrants of the College); and
- Public members appointed by the provincial government

This governing Council is chaired by the President, elected by the Council from among the public members. The Council sets out the strategic and policy direction for the College, while a staff team led by a Registrar (like a CEO) carries out the College's day-to-day work. The College has seven statutory committees that have their own regulatory responsibilities.

Council meets four times per year to discuss regulatory policy and make decisions in the public's best interest, as mandated in the [Regulated Health Professions Act, 1991 \(RHPA\)](#).

Committee Reports



Statutory Committees

- Executive Committee
- Inquiries, Complaints and Reports Committee
- Discipline Committee
- Fitness to Practise Committee
- Patient Relations Committee
- Quality Assurance Committee – Panel A and Panel B
- Registration Committee

Non-Statutory Committees

- Qualifying Examination Committee
- Qualifying Examination Appeals Committee

Executive Committee

Who We Are

Officers

Kris Bailey, *Public Member* – President & Chair
Alexia Baker-Lanoue, *Professional Member* – Vice President

Public Members

Lileath Claire

Professional Members

Abdelatif Azzouz (from June 2021)
Keith Collins (until June 2021)
Norbert Gieger (from June 2021)
Michael Vout, Jr. (until June 2021)

What We Do

The Executive Committee facilitates the efficient and effective functioning of Council and other committees. It also makes decisions between Council meetings for matters that require immediate attention (but cannot make, amend, or revoke a regulation or by-law). The Executive Committee serves as the committee that prepares and presents suggested changes to the College By-laws to Council. The Executive Committee also functions as the Finance Committee, receiving interim financial reports, considering any financial matters that arise during the fiscal year, preparing the budget for Council review and approval, and facilitating the audit process.

Achievements

The work of the Executive Committee provides for consistent, timely College governance on matters that arise in between Council meetings. As part of its mandate, the Executive Committee provides routine, continuous oversight to the financial management of the College.

- Met 3 times by teleconference and considered additional matters electronically.
- Considered 10 Clinic Name Registration requests.
- Approved the proposed slate of Committee memberships for 2021-2022 for submission to Council. Normally this slate is developed by the Nominating Committee; however, this year the Nominating Committee was not properly constituted because Dr. Ivan MacFarlane, who passed away on February 16, 2020, held the position of Past President.
- Discussed the resignation of the Registrar and CEO and selection of an Acting Registrar and CEO.

Inquiries, Complaints and Reports Committee

Who We Are

Chair

Barbara Smith, *Member of the Public* – Chair (until June 2021)
Lileath Claire, *Public Member* – Vice Chair (to June 2021) and
Chair (from June 2021)

Public Members

Kris Bailey
Jack Biernaski (until April 2021)
Gaganjot Singh (from June 2021)

Professional Members

Alexia Baker-Lanoué
Garnett A.D. Pryce (from June 2021)
Christopher Reis
Michael Vout, Jr.

Non-Council Members of the Profession

Carmelo Cino
Akram Ghassemiyan (from June 2021)
Emilio Leuzzi
Marija Popovic (until June 2021)

What We Do

Concerns about a Registered Denturist coming to the College are brought to the attention of the Inquiries, Complaints and Reports Committee (ICRC) to be investigated. This includes a wide range of issues related to a Registered Denturist's conduct or practice, such as:

- ignoring the basic rules of the profession
- failing to maintain the standards of practice
- providing inappropriate care
- sexually abusing a patient; or
- having a physical or mental condition or disorder that interferes with the ability to practise

Anyone can raise an issue to the College – that includes patients, their family members, Registered Denturists themselves, their colleagues or employers, and other health care professionals. By law, it is the College's duty to review all complaints about Registered Denturists who are registered to practise in Ontario, and to give serious consideration to each matter. Members of the Inquiries, Complaints and Reports Committee are trained and strive to review all complaints objectively.

Once their investigation is complete, the Inquiries, Complaints and Reports Committee has the authority to make one or more of the following decisions:

- **Take no further action.**
- **Offer guidance to the Registered Denturist in writing or in person.** This is done by the Committee when it feels that guidance will help the Registered Denturist to understand how to conduct himself or herself in the future.
- **Direct the Registered Denturist to complete education or remediation** to improve his or her practice.
- **Refer the matter** to either the Discipline Committee or to the Fitness to Practise Committee for a hearing.
- Take any other action not inconsistent with the [Regulated Health Professions Act, 1991 \(RHPA\)](#).



Achievements

- In keeping with Priority 2 “Excellence in Governance” of the College’s 2017-2020 Strategy Map, which identifies a commitment to improving Council and Committee member training, in August 2021, ICRC members participated in a training and orientation session presented by Ms. Rebecca Durcan, the College’s Legal Counsel. The training session included a presentation outlining the statutory framework for the ICRC focusing on complaints processes and current practices.
- In addition to the training and orientation session held in August 2021, the Committee reviews literature relevant to its mandate on an ongoing basis and develops administrative guidelines and policies.
- The Committee met 12 times to review 19 cases that included 15 complaints, 1 health inquiry and 3 Registrar’s reports. Below are the outcomes of the ICRC deliberations where a decision was rendered within the reporting timeframe. The numbers reflect only those cases in which a final decision was made prior to April 1, 2022.

Took no further action	4
Issued reminders or guidance to member	12
Referred to Discipline Committee	1

- The Committee collects risk assessment data by coding cases to address themes in the complaints process, the top 3 themes coded for this fiscal year are as follows:

Practice Issue	Primary Issue
Communication	9
Clinical skill/execution	8
Relationship with patient	6

Discipline Committee

Who We Are

Chair

Gord White, *Public Member* (until June 2021)
Elizabeth Gorham-Mathews, *Professional Member* (from June 2021)

Public Members

Kris Bailey
Michael Bakshy
Avneet Bhatia (from December 2021)
Jack Biernaski (until April 2021)
Lileath Claire
Aisha Hasan (from March 2022)
Gaganjot Singh
Gord White (from June 2021 until September 2021)
Arie van Wijngaarden (from June 2021)

Professional Members

Abdelatif Azzouz
Alexia Baker-Lanoué
Keith Collins (until June 2021)
Norbert Gieger
Paul Karolidis
Garnett A.D. Pryce
Christopher Reis
Michael Vout, Jr. (until June 2021)
Joseph Whang (from June 2021)

Non-Council Members of the Profession

Eugene Cohen
Emilio Leuzzi
Braden Neron
Quoc Nguyen (from June 2021)
Marija Popovic (until June 2021)
Bruce Selinger

What We Do

The Discipline Committee considers the most serious cases where a Registered Denturist may be incompetent or may have committed an act of professional misconduct.

Professional misconduct is a breach of the regulations that reflect the accepted ethical and professional standards for the profession. A Registered Denturist may be incompetent if the care provided displayed a lack of knowledge, skill or judgment, demonstrating that either they are unfit to practise or their practice should be restricted.

Discipline of professionals is a critical aspect of maintaining the trust of the public in health profession self-regulation. The Discipline Committee holds hearings that are like court proceedings. Hearing panels include members of both the profession and the public.

If a panel of the Discipline Committee makes a finding against a Registered Denturist, it can:

- **Revoke** a Certificate of Registration;
- **Suspend** a Certificate of Registration;
- **Place terms, conditions and/or limitations** on a Certificate of Registration;
- **Require a Registered Denturist to appear** before the panel to be reprimanded; or
- **Require a Registered Denturist to pay** a fine and/or pay the College's legal, investigation and hearing costs, and other expenses.

At the end of the process, the panel issues written decision and reasons. The College publishes these on its website, and on the online listing of registrants, the Public Register. A Summary of the decision and a full-text version of the Discipline Panel's decision and reasons are available in the member's profile that can be accessed through the College's online **Public Register** (www.denturists-cdo.com).

Achievements

There were no Discipline hearings this fiscal year.

Fitness to Practise Committee

Who We Are

Chair

Michael Vout, Jr., *Professional Member* (until June 2021)
Norbert Gieger, *Professional Member* (from June 2021)

Public Members

Kris Bailey
Michael Bakshy
Avneet Bhatia (from December 2021)
Jack Biernaski (until April 2021)
Lileath Claire
Aisha Hasan (from March 2022)
Gaganjot Singh
Gord White (until September 2021)
Arie van Wijngaarden (from June 2021)

Professional Members

Abdelatif Azzouz
Alexia Baker-Lanoue
Keith Collins (until June 2021)
Norbert Gieger (until June 2021)
Elizabeth Gorham-Mathews (from June 2021)
Paul Karolidis
Garnett A.D. Pryce
Christopher Reis
Joseph Whang (from June 2021)

Non-Council Members of the Profession

Eugene Cohen (from June 2021)
Emilio Leuzzi (from June 2021)
Braden Neron
Quoc Nguyen (from June 2021)
Bruce Selinger (from June 2021)

What We Do

As with some members of the general population, sometimes a Registered Denturist might be suffering from a physical or mental condition, illness, or ailment. If this renders them unable to practise safely or effectively it is known as incapacity.

The College is mandated to address these situations in a manner that ensures that the care to the public is not compromised. These types of matters are addressed by the Fitness to Practise Committee. The Committee is responsible for holding hearings to determine incapacity. In these matters the burden of proof rests with the College.

If a Registered Denturist is found to be incapacitated, the Fitness to Practise panel may:

- **revoke** the Certificate of Registration;
- **suspend** the Certificate of Registration (generally until the Registered Denturist has demonstrated to the College that he or she has recovered); or
- **impose terms, conditions or limitations** on the Certificate of Registration for a set or indefinite period.

The panel may also specify criteria that must be satisfied before lifting a suspension, or removing terms, conditions or limitations. The public is entitled to know the results of all proceedings when a Registered Denturist is found to be incapacitated. This information is available on the College's online **Public Register** (www.denturists-cdo.com).

Achievements

There were no Fitness to Practise hearings this fiscal year.

Patient Relations Committee

Who We Are

Chair

Alexia Baker-Lanoue, *Professional Member*

Public Members

Kris Bailey (from June 2021)

Michael Bakshy (from June 2021)

Lileath Claire

Gord White (until June 2021)

Professional Members

Keith Collins (until June 2021)

Norbert Gieger

Elizabeth Gorham-Matthews (from June 2021)

Paul Karolidis

Non-Council Members of the Profession

Danielle Arsenault (until June 2021)

Rahul Bapna (until June 2021)

Akram Gassemiyan (from June 2021)

Elizabeth Gorham-Matthews (until June 2021)

Karla Mendez-Guzman (until June 2021)

Deepak Naik (from June 2021)

What We Do

The Committee oversees the patient relations program, including implementing measures for preventing or dealing with sexual abuse of patients. The program includes education of the profession, Council, and staff, and the provision of information to the public. The committee also administers the funding program for therapy and counselling for patients who have been sexually abused.

Achievements

- Met once to consider the legislative framework surrounding the Patient Relations Committee and its mandated responsibilities related to program items, including a review of previous work and accomplishments of the Committee.
- Reviewed outstanding action items and future work that the Committee reported to Council in September 2019 including:
 - 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.
- Reviewed the Patient Relations Committee Terms of Reference to ensure compliance with the *RHPA*, the capacity of the Committee, and the College's needs. A revision to the Terms of Reference was approved by Council on September 10, 2021, to reflect an amendment to the *RHPA* which removed the requirement for Council to give a written report to the Health Professions Regulatory Advisory Council when changes are made to the Patient Relations Program.

DRAFT

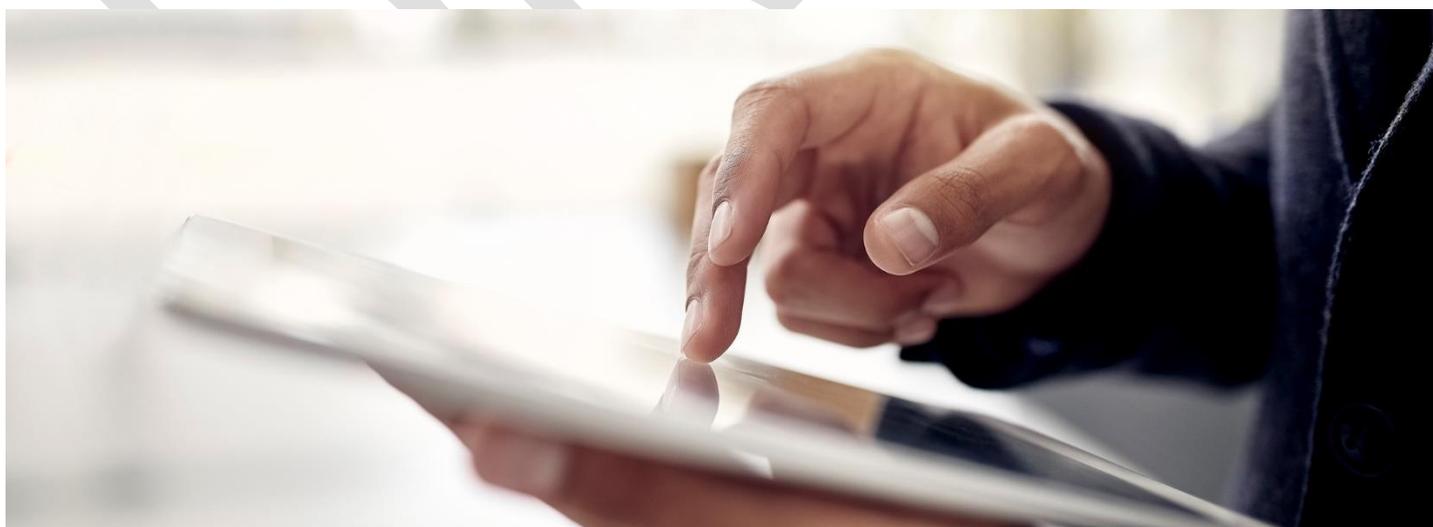
Quality Assurance Committee

What We Do

Registered Denturists must maintain and enhance their knowledge, skills, and judgment throughout their careers as part of the Quality Assurance (QA) Program - with the end goal of providing appropriate high-quality care that the public expects. The QA program is one way that the College gives Registered Denturists the tools and feedback to continually improve their competence.

Through the Quality Assurance Committee, the College promotes continuing competence among registrants. The robust QA program requires:

- All Registered Denturists complete a self-assessment once each CPD cycle – this is a tool that assists practitioners in identifying areas in their practice that may require improvement; identifying specific learning needs; and developing a document that records those needs in a learning plan (goals and timelines);
- All Registered Denturists to pursue continuing professional development (at least 10 credits annually) and maintain a professional portfolio (an organizational tool that contains all information related to participation in QA); and
- Randomly selected Registered Denturists to participate in a Peer & Practice Assessment, to ensure that the treatment environment demonstrates, ethically and physically, the highest regard for the patient's well-being.



Panel A

Who We Are

Chair

Keith Collins, *Professional Member* (until June 2021)
Abdelatif Azzouz, *Professional Member* (from June 2021)

Public Members

Lileath Claire (until June 2021)
Gaganjot Singh
Gord White (until June 2021)
Arie Van Wijngaarden (from June 2021)

Professional Members

Abdelatif Azzouz (until June 2021)
Paul Karolidis
Joseph Whang (from June 2021)

Non-Council Members of the Profession

Rahul Bapna (until June 2021)
Karla Mendez-Guzman
Marija Popovic (until June 2021)

Achievements

- The Committee met 3 times during the year to develop Quality Assurance Program components, monitor compliance with the Continuing Professional Development requirements, and review Peer & Practice Assessment reports.
- The Committee reviewed 120 assessments. Of the assessments, 65 were satisfactory, 33 required some remedial action, 8 participated in modified non-clinical assessments, and 14 were carried over to 2022-2023.

27.8 hours

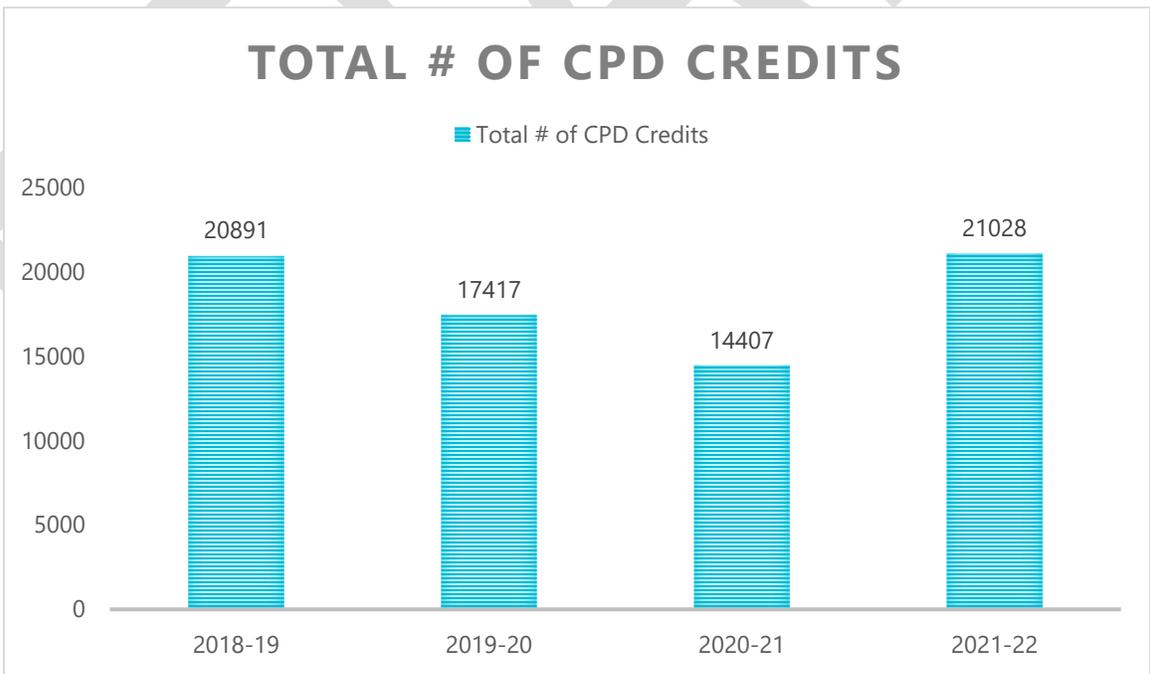
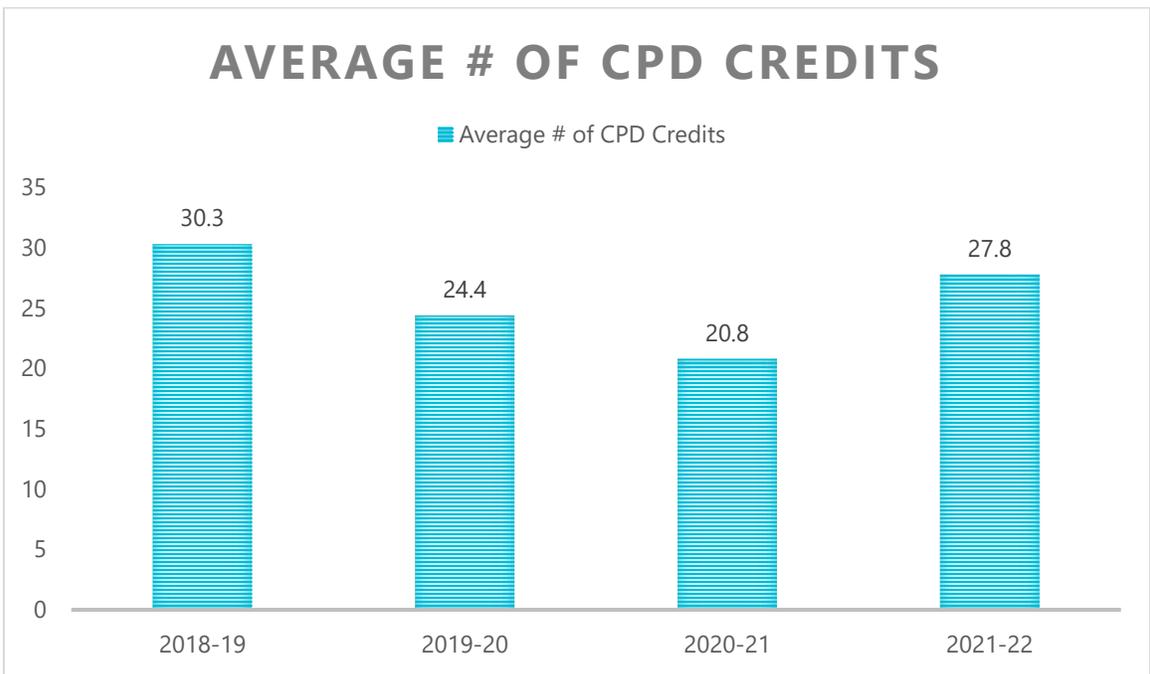
The **average number of CPD hours** reported by Registered Denturists in 2021-2022

The **total number of CPD hours** reported by all Registered Denturists in 2021-2022

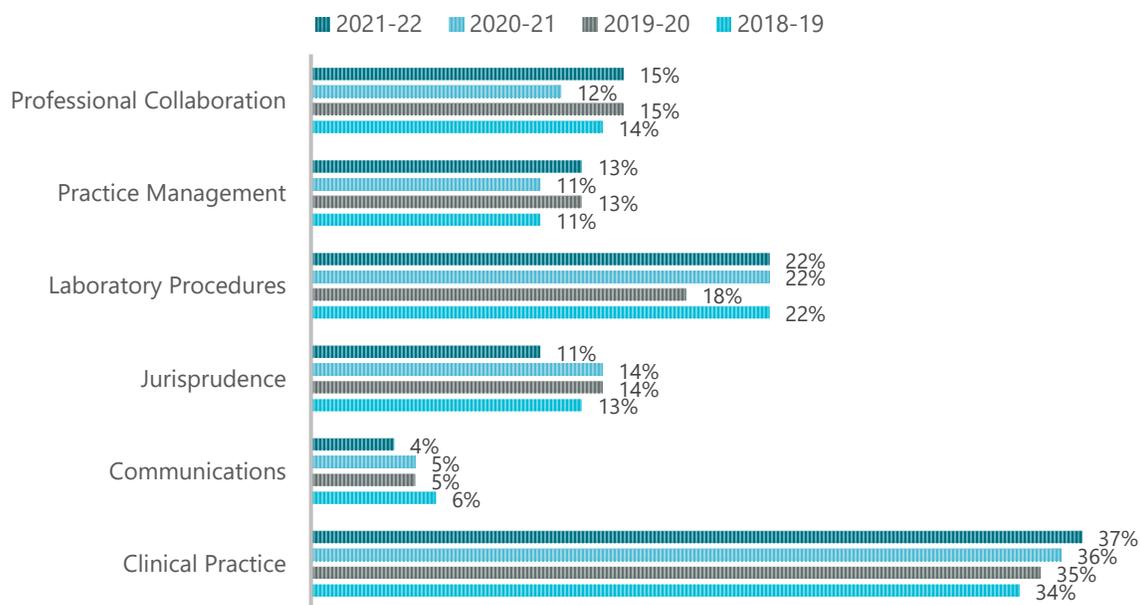
21,028 hours

9,447 activities

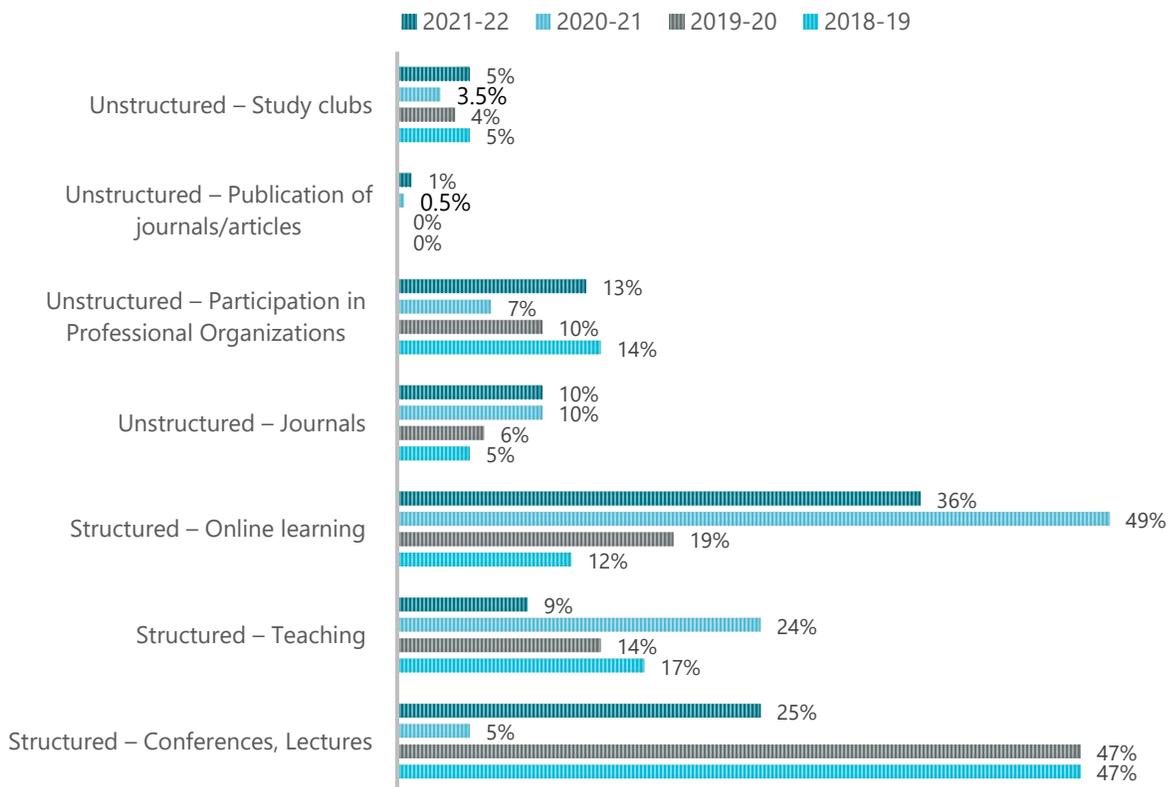
The **total number of CPD activities** reported by Registered Denturists in 2021-2022



CPD CREDITS REPORTED BY TOPIC



CPD CREDITS REPORTED BY TYPE



Panel B

Who We Are

Chair

Joseph Whang, *Non-Council Member of the Profession* (until June 2021)
 Christopher Reis, *Professional Member* (from June 2021)

Public Members

Michael Bakshy (from June 2021)
 Gord White (until June 2021)

Professional Members

Garnett A.D. Pryce
 Christopher Reis (until June 2021)

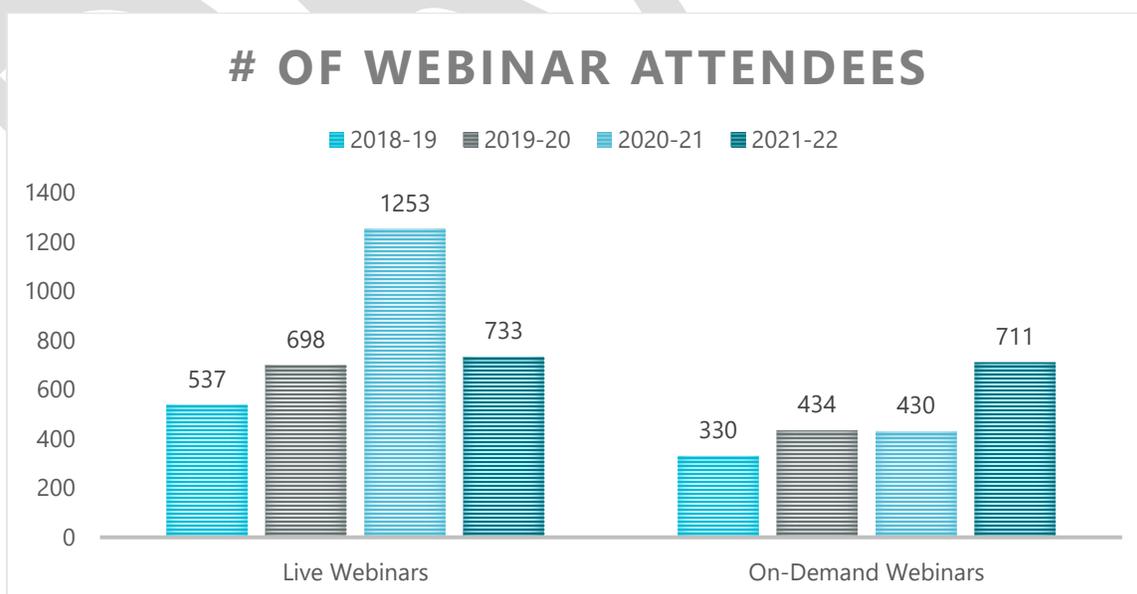
Non-Council Members of the Profession

Deepak Naik (from June 2021)
 Braden Neron

Achievements

The Quality Assurance Committee - Panel B was originally conceived as a separate panel to review policies and standards of practice. The work of Panel B was conducted by Panel A during the reporting year, and Council at its June 2022 Council meeting agreed to merge both panels to form one single Quality Assurance Committee.

The College continues to offer webinars related to the Standards of Practice and other topics of interest to the registrants. These webinars assist members of the profession with understanding the expectations articulated in the Standards. Webinars are available as live presentations or on-demand recorded presentations that Registered Denturists can access at their convenience.

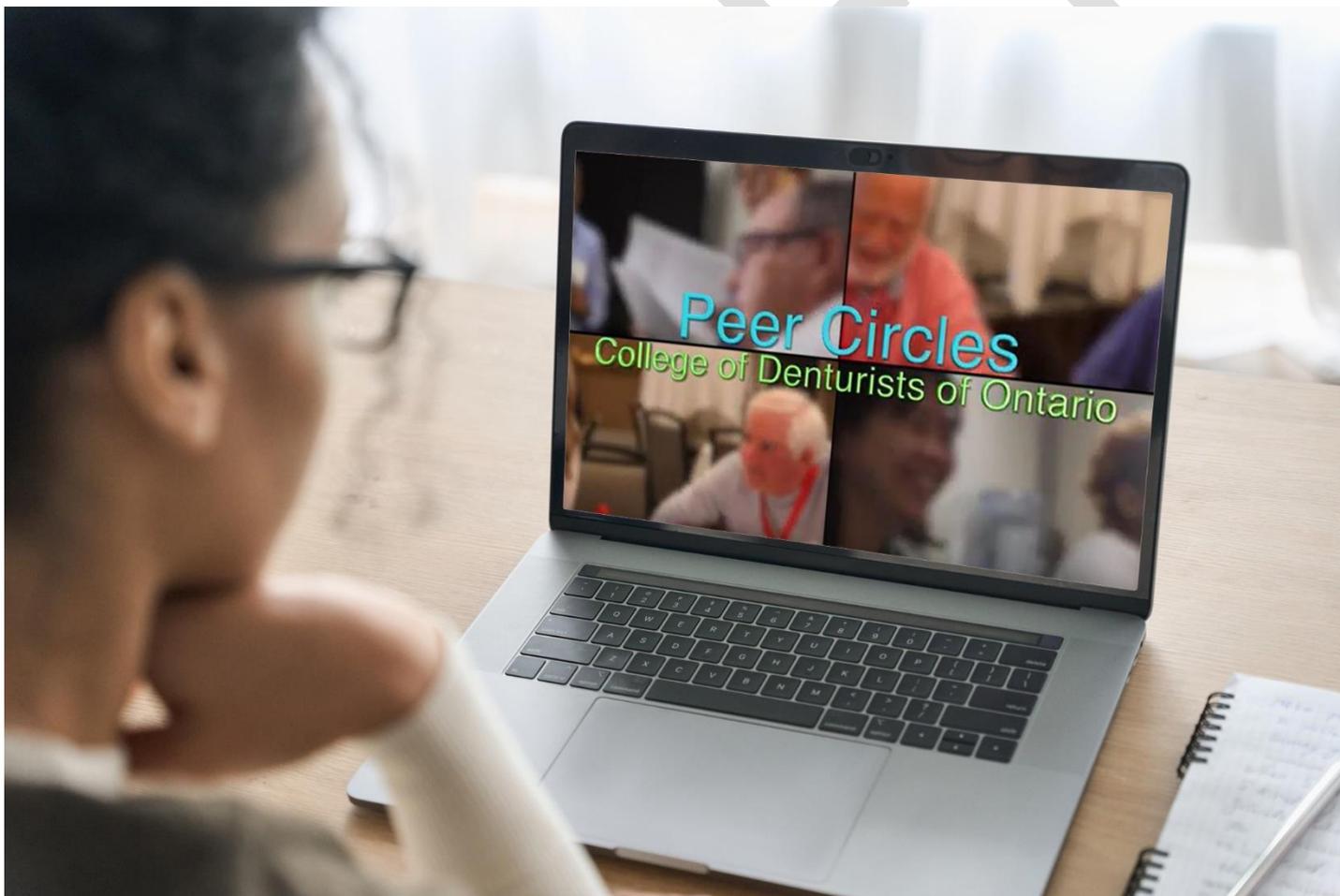


Peer Circles Working Group

The Peer Circle, an innovative continuing professional development tool, was developed in collaboration between the College of Denturists of Ontario and several members of the profession. Peer Circles was launched in November 2018 and has received widespread support and positive feedback from all participants.

Following the public health restrictions as a result of the COVID-19 Pandemic in the reporting year, the hosting of in-person Peer Circles were restricted.

The Peer Circles event looks forward to the return of in-person events at both of the Denturist associations' continuing education events in 2022.



Registration Committee

Who We Are

Chair

Elizabeth Gorham-Matthews, *Non-Council Member of the Profession* (until June 2021) and *Professional Member* (from June 2021)

Public Members

Kris Bailey (until June 2021)
Lileath Claire (until June 2021)
Gaganjot Singh

Professional Members

Norbert Gieger (until June 2021)
Garnett A.D. Pryce (until June 2021)
Christopher Reis (from June 2021)

Non-Council Members of the Profession

Majid Ahangaran
Danielle Arsenault (from June 2021)
Rahul Bapna (until June 2021)
Akram Ghassemiyan
Quoc Nguyen (from June 2021 until November 2021)
Joseph Whang (until June 2021)

What We Do

The College ensures that people using or applying to use the title of Denturist in Ontario are qualified. A big part of that is the registration process.

To be registered for the first time, applicants must demonstrate that they have met the strict criteria that are required to practise safely and competently. To continue to practise, all Registered Denturists must renew their registration annually.

The Registrar reviews all initial registration applications. If an applicant does not meet one or more of the registration requirements, or if the Registrar proposes to refuse the application, the matter is referred to the Registration Committee for consideration. Decisions of the Registration Committee can be appealed through the Health Professions Appeal and Review Board (HPARB).

To ensure that only academically qualified individuals attempt the Qualifying Examination, the Committee conducts academic assessments for out-of-province and internationally educated candidates to determine if their education is equivalent to a Diploma in Denturism from George Brown College in Ontario.

The Committee also monitors the number of practice hours a Registered Denturist completes, ensuring that the number of hours required to maintain competence are obtained.

The public can be confident that everyone registered to practise Denturism in Ontario is responsible for meeting the strict entry-to-practice requirements, Standards of Practice, quality assurance requirements and other criteria of the College.

Achievements

During the 2021-2022 reporting period, the College processed 48 new registrants, 22 resignations, 1 deceased, and 14 suspensions due to non-payment of registration fees. As of March 31, 2022, the College had 755 registrants.

The Registration Committee in 2021-2022:

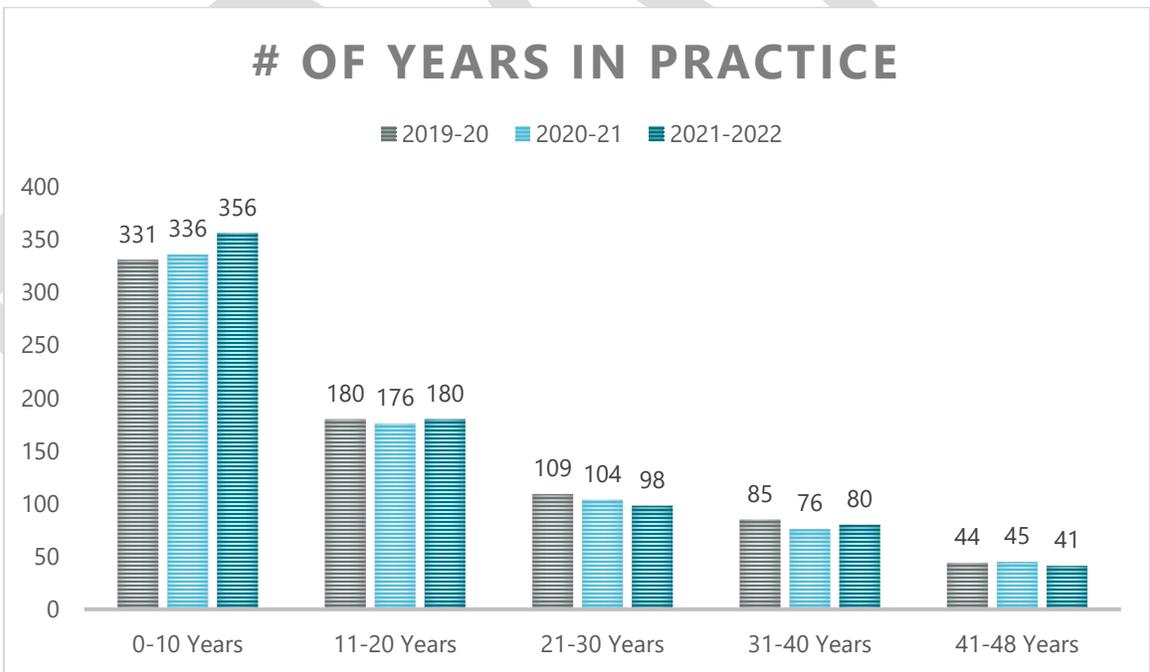
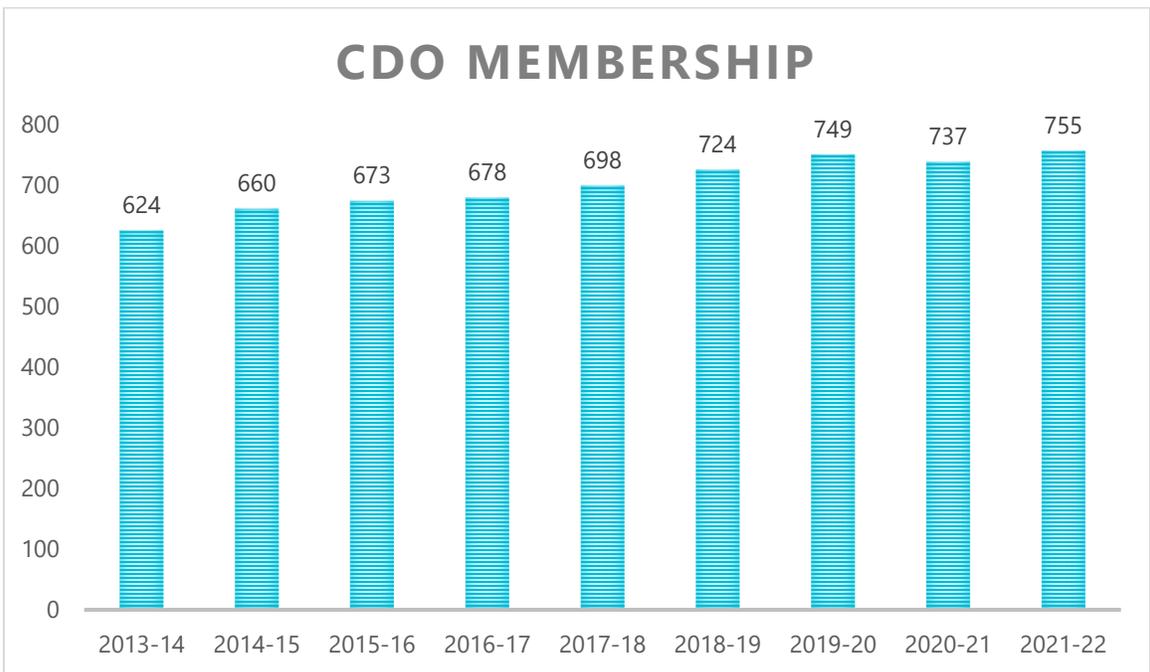
- Met 5 times
- Conducted 8 academic assessments
- Considered 2 approval of terms, conditions, and limitations for registration
- Considered 6 retired status applications
- Updated the Language Proficiency Requirements Policy

58%

The percentage of Registered Denturists who are **practice owners**

The percentage of Registered Denturists who practice in a **solo practice setting**

37%



Qualifying Examination Committee

Who We Are

Chair

Michael Vout, Jr., *Professional Member* (until June 2021)
Karla Mendez-Guzman, *Non-Council Member of the Profession* (from June 2021)

Public Members

Michael Bakshy (from June 2021)
Gord White (until June 2021)

Professional Members

Abdelatif Azzouz (until June 2021)
Garnett A.D. Pryce (from June 2021)

Non-Council Members of the Profession

Majid Ahangaran
Danielle Arsenault (until June 2021)
Annie Chu (from June 2021)
Panfilo (Joey) Della Marina (June 2021)
Akram Ghassemiyan (until June 2021)
Karla Mendez-Guzman (until June 2021)
Marija Popovic (until June 2021)
Milania Shahata (until June 2021)

What We Do

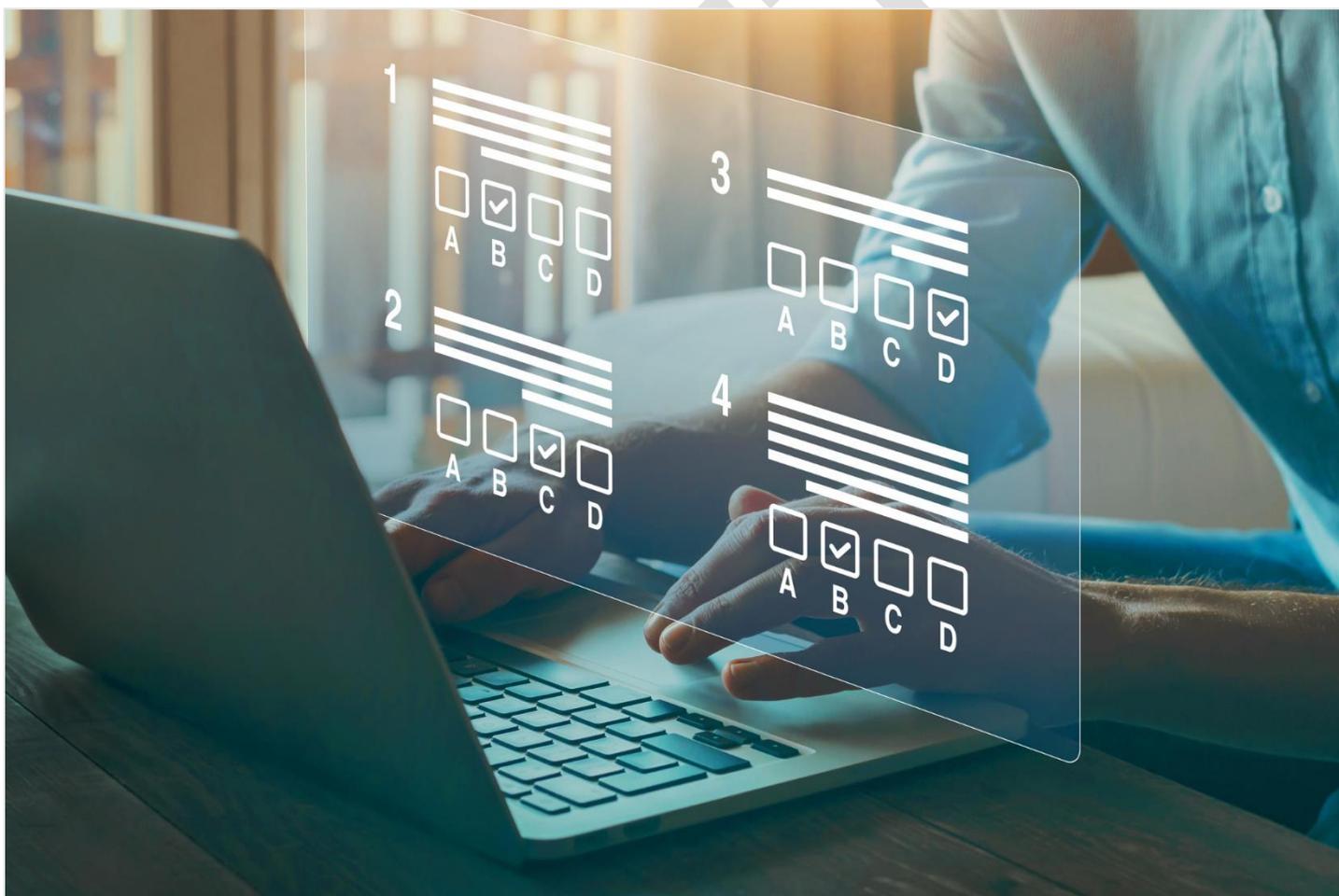
The Qualifying Examination Committee (QEC) is responsible for making recommendations regarding the content and administration process of the Qualifying Examination.

The Qualifying Examination is grounded in the examination of professional judgment and provides for a comprehensive assessment of entry to practice skills.

Achievements

- Following each administration of the OSCE component of the Qualifying Examination, the Committee met to review the item analysis. Items identified by low performance were presented and reviewed by the Committee prior to the release of final candidate scores
- The first Multi-Jurisdictional MCQ examination was held successfully in June of 2021 through an online delivered remote proctored format. This Multi-jurisdictional MCQ replaces the previous provincial MCQ exams administered by the College of Alberta Denturists, the College of Denturists of British Columbia, and the College of Denturists of Ontario respectively.

- The College conducted an unprecedented three back-to-back OSCE administrations on September 18/19, 2021, the second on October 23/24, and the third on November 28/29, in order to assist with the backlog of candidates that accumulated since the pandemic began in March 2020 causing the postponement of the Qualifying Examination.
- The College returned to the bi-annual schedule of conducting the Qualifying Examinations components in February of 2022 with the Multi-jurisdictional MCQ examination held on February 8th, 2022, and the OSCE examination held on February 26th and February 27th, 2022.



Qualifying Examination Appeals Committee

Who We Are

Chair

Lileath Claire, *Public Member*

Public Member

Arie Van Wijngaarden (from June 2021)

Professional Members

Alexia Baker-Lanoué (until June 2021)

Norbert Gieger (from June 2021)

Non-Council Members of the Profession

Emilio Leuzzi (from June 2021)

Danielle Arsenault (until June 2021)

What We Do

The Committee is responsible for reviewing candidate appeals of the results of the Qualifying Examination.

Achievements

- Received and adjudicated 4 appeals from the January 2021 administration of the Multi-Jurisdictional Multiple Choice Qualifying Examination.
- Received and adjudicated 4 appeals from the June 2021 administration of the Multi-Jurisdictional Multiple Choice Qualifying Examination.
- Received and adjudicated 5 appeals from the Fall 2021, September, October & November, back-to-back series administration of the OSCE Qualifying Examinations.

Qualifying Examination Working Group and OSCE Assessors

The development and successful administration of the Qualifying Examination requires the commitment and expertise of many professional members. Their dedication to the continuous improvement of the Qualifying Examination reflects a strong sense of professionalism and responsibility to the process of professional self-regulation.

Working Groups continue to meet on a regular basis to develop and refine examination materials and content for both the Multiple-Choice Question (MCQ) and Objective Structured Clinic Examination (OSCE) components of the Qualifying Examination.

Professional Members

Hisham (Sean) Akkawi
Albert Ang
Harry Bang
James Durston
Marianne Dyczka
Anna (Annie) Gallipoli
Akram Ghassemiyan
Sultana Hashimi
Esther Kang
Jae Won (Eric) Kim
Brandon Lilliman
Adam Lima
Karla Mendez-Guzman
David Mulzac
Braden Neron
John Rafailov
Peter Saberton
Christopher Todd
Chi-Sam Tran
Luc Tran
Robert Velensky
Benjamin Vorano

Chief Examiner

Robert Velensky

Consultant

Dr. Anthony Marini, Martek Assessment

[Placeholder for Summary Financial Statements]

DRAFT



BRIEFING NOTE

To: **Council**

From: **Roderick Tom-Ying, Acting Registrar & CEO**

Date: **December 9, 2022**

Subject: **Timely Registration Decisions – New Registration Regulations**

Public Interest Rationale

The College of Denturists of Ontario's mandate is to protect the public by ensuring Registered Denturists provide safe, ethical, and competent denturism care and service in Ontario. As part of that mandate, the College Council has the overall responsibility of ensuring that registration applications are processed, and decisions are provided in a timely manner. Council must ensure that the registration policies of the College are reviewed regularly, and new policies are created in order to harmonize with governing legislation and regulations.

Background

The Government of Ontario introduced Bill 106 – Pandemic and Emergency Preparedness Act, 2022 in the legislature on March 29, 2022. It received Royal Assent on April 14, 2022, with implementation on the same date. The health regulatory Colleges were provided with a window of opportunity in early summer to provide feedback on proposed regulations that would underpin the new changes.

Bill 106 is an omnibus Bill that contained provisions relevant to the health regulatory Colleges. It would amend the *Regulated Health Professions Act* to add three new requirements:

1. The prohibition on the requirement for Canadian work experience unless otherwise exempted.
2. The requirement related to language proficiency testing.
3. Timely registration decisions and responses.

The College received notice on October 28, 2022, that the following three new requirements will be in force by January 1, 2023.

In addition, all health regulatory Colleges will be required to have an emergency class certificate of registration by August 31, 2023. This new certificate will include:

- The circumstances that will cause the class to be open for issuance and renewal.
- A timeline of no more than one year after the certificate is issued and is renewable for the same period of time with no limit on the number of renewals.
- The circumstances in which a member in the emergency class may apply for another class of registration and must exempt the applicant from at least some of the registration requirements that would ordinarily apply to the application.

New Timely Registration Requirements

The new registration requirements that come into force on January 1, 2023, now prescribes specific timelines for the College's Registrar when reviewing completed Certificate of Registration (licensure) applications.

The following is the new registration requirements:

1. *Written Acknowledgement*

The Registrar shall, within 15 days after receiving an application for registration, provide the applicant with a written acknowledgment of receipt of the application along with either,

- (a) confirmation that the applicant has submitted all of the required materials and information;
- or
- (b) details regarding what other materials or information are required from the applicant in order to complete the application.

If an applicant provides other materials or information in response to the notice above, the Registrar shall, within 15 days after receiving the materials or information, provide the applicant with a written acknowledgement of receipt along with either,

- (a) confirmation that the applicant has submitted all of the required materials and information;
- or
- (b) details regarding what other materials or information are required from the applicant in order to complete the application.

2. Processing Timelines

The Registrar shall make their decision to register an applicant or refer the application to the Registration Committee within 30 days after receiving a complete application that includes all of the required materials and information.

This does not apply if the Registrar needs to verify the authenticity or accuracy of the materials and information or assess an applicant's educational program or prior learning experience for equivalency with programs or experiences that have already been approved, but,

(a) the Registrar must complete their verification or assessment within a reasonable period of time; and

(b) the Registrar must make the decision described above within 15 days after completing the verification or assessment.

Next Steps

As the new registration requirements for timely registration decisions are prescribed in regulation, there is no immediate need for the CDO to draft a policy tool to meet these requirements. Regulations are overarching and will apply to CDO's registration processes.

Since 2017, the CDO has published information sheets on its website that provide applicants with approximate registration processing timelines. The timelines, while prior were not directly prescribed by policies or regulations, represented CDO's processing goals.

The information sheets specified that the Registrar would review and approve an application or refer the application to the Registration Committee within 2 weeks (14 days) from acknowledging receipt of a completed application. This CDO processing goal meets the newly prescribed registration requirements.

CDO Staff have conducted an analysis of its current registration processing timelines to ensure that it can meet the new regulatory requirements.

Analysis of CDO's Current Registration Processing Timelines

CDO Staff reviewed the registration processing timelines for all new applications received in calendar year 2022. The data set includes new applications from January 1, 2022, to November 22, 2022.

- In calendar year 2022 (from January 1, 2022, to November 22, 2022), the CDO received and processed 80 new applications for registration and received 1 application for registration that is currently before the Registration Committee.

- Calendar year 2022 represents an extraordinary year for applications as the three back-to-back administration of the OSCE exam allowed the CDO to clear its COVID backlog of examination candidates. As such, the CDO anticipated it would receive a disproportionate number of applications in 2022.
 - This represented an opportunity to review CDO's processing performance in light of a significant strain on the Registration department that has not been experienced before.
- All 80 applications that were received were approved for a Certificate of Registration (license) and processed. No applications that were received have been rejected. One application is currently before the Registration Committee.
- Of the 80 applications, 6 were from internationally educated applicants, and 9 were from out of province applicants. All out of province applicants graduated from a Denturism program in British Columbia.
- Of the 80 applications, 2 Certificates of Registrations were approved with terms, conditions, and limitations.
- College Staff process applications on a first come first serve basis. Once complete applications are received, they are triaged and reviewed by Registration Staff. Registration Staff will then forward applications and accompanying documents to the Registrar for their review.
- Applications are not sorted or prioritized by applicant type.
- For the purposes of calculations, the average processing time is calculated by subtracting the date a complete application is received in full – then reviewed by the Registrar or Registration Committee and a decision is rendered – from the date the application is processed.
 - The Registrar will review applications once it is complete – all required documents have been submitted, verified, and authenticated.
 - The Registrar may refer an application to the Registration Committee who will meet and render their decision. This timeline is accounted for in the processing times listed below.
 - Processed application – approved application is then processed, payment is processed, and a Certificate of Registration is issued.
- **Ontario applicant** = applicant's education was from an Ontario Denturism program
- **Out of Province applicant** = applicant's Denturism education was from outside of Ontario but within Canada
- **Internationally educated applicant** = applicant's Denturism or Denturism equivalent education was from outside of Canada.

	Number of Applicants	TCLs Issued	Approved/Declined
Ontario applicants	65	0	All Approved
Out of province applicants	9	0	All Approved
Internationally educated	6	2	All Approved
Total	80	2	

	CDO Average Processing Time (Days)	Registration Requirements (Days)	Adherence (Meets, Not Meets)
Ontario applicants only	7.0	30	Meets
Out of province applicants only	4.8	30	Meets
Internationally educated applicants	21.2	30	Meets
All applicant types	7.8	30	Meets

Summary

The CDO's current registration processing timelines meet or exceeds the upcoming registration requirements enacted by regulation change. College Staff will continue to report on its processing timelines to Council to ensure adherence to the prescribed regulations.

Options

N/A – For information only.

Attachments

1. New Registration Requirements – Regulation 508/22
2. Registration Timelines Information Sheets – Ontario, Out of Province, International



[Français](#)

Regulated Health Professions Act, 1991

ONTARIO REGULATION 508/22

REGISTRATION REQUIREMENTS

Consolidation Period: From October 31, 2022 to the [e-Laws currency date](#).

Last amendment: [508/22](#).

Legislative History: [+]

This is the English version of a bilingual regulation.

Note: Section 1 comes into force on January 1, 2023, the day subsection 3 (2) of Schedule 6 to the *Pandemic and Emergency Preparedness Act, 2022* comes into force.

Definition

1. In the Act,

“Canadian experience” means any work experience or experiential training obtained in Canada.

Note: Section 2 comes into force on January 1, 2023.

Timely decisions and responses

2. (1) The Registrar shall, within 15 days after receiving an application for registration, provide the applicant with a written acknowledgment of receipt of the application along with either,

- (a) confirmation that the applicant has submitted all of the required materials and information; or
- (b) details regarding what other materials or information are required from the applicant in order to complete the application.

(2) If an applicant provides materials or information in response to a notice under clause (1) (b), the Registrar shall, within 15 days after receiving the materials or information, provide the applicant with a written acknowledgement of receipt along with either,

- (a) confirmation that the applicant has submitted all of the required materials and information; or
- (b) details regarding what other materials or information are required from the applicant in order to complete the application.

(3) The Registrar shall make their decision under subsection 15 (1) of the Code to register an applicant or refer the application to the Registration Committee within 30 days after receiving a complete application that includes all of the required materials and information.

(4) Subsection (3) does not apply if the Registrar needs to verify the authenticity or accuracy of the materials and information or assess an applicant’s educational program or prior learning experience for equivalency with programs or experiences that have already been approved, but,

- (a) the Registrar must complete their verification or assessment within a reasonable period of time; and
- (b) the Registrar must make the decision described in subsection (2) within 15 days after completing the verification or assessment.

Note: Section 3 comes into force on January 1, 2023, the day subsection 3 (1) of Schedule 6 to the *Pandemic and Emergency Preparedness Act, 2022* comes into force.

Language proficiency testing requirements

3. (1) An applicant for registration satisfies a College's English or French language proficiency testing requirement if the applicant demonstrates, within two years before the date of making the application, English or French language proficiency at a level satisfactory to the College on a test that is approved under the *Immigration and Refugee Protection Act* (Canada) for use in assessing language proficiency.

(2) Subsection (1) does not limit a College's ability to accept other examinations, tests or assessments as evidence of English or French language proficiency.

Note: Section 4 comes into force on January 1, 2023, the day subsection 3 (2) of Schedule 6 to the *Pandemic and Emergency Preparedness Act, 2022* comes into force.

Exemption from Canadian experience requirements

4. (1) Section 16.2 of the Code does not apply to a requirement for Canadian experience if the College permits applicants that have equivalent experience in another country to meet the requirement.

(2) Section 16.2 of the Code does not apply to a requirement for Canadian experience if that requirement must be met while the applicant is registered in a different class of registration established by the College.

(3) Section 16.2 of the Code does not apply to the requirement to complete a structured practical training program as a condition of registration as a pharmacy technician.

Note: On December 31, 2024, subsection 4 (3) of the Regulation is revoked. (See: O. Reg. 508/22, s. 6)

Note: Section 5 comes into force on August 31, 2023, the day subsection 3 (3) of Schedule 6 to the *Pandemic and Emergency Preparedness Act, 2022* comes into force.

Emergency classes of registration

5. (1) The regulations establishing an emergency class of registration required by section 16.3 of the Code must include at least the following requirements:

1. They must specify emergency circumstances that will cause the class to be open for issuance and renewal.
2. They must specify that the emergency class of certificates of registration expire no more than one year after they are issued but are renewable for the same period of time, with no limit on the number of times they may be renewed as long as the emergency circumstances persist.
3. They must specify circumstances in which a member of the emergency class may apply for another class of registration and must exempt the applicant from at least some registration requirements that would ordinarily apply to the application.

(2) Paragraph 3 of subsection (1) does not prevent the Council from establishing alternative requirements that must be met by the applicant.

6. OMITTED (PROVIDES FOR AMENDMENTS TO THIS REGULATION).

7. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION).

Français



Registration Timelines Information Sheet (Graduates of Approved Ontario Programs)

The following processing timelines are approximate, meaning that they may be shorter than the minimum time allotted depending on the time of year the applicant is applying; but will never exceed the maximum time allotted.

The College will notify applicants, in writing, if the timelines will exceed the timelines posted below. The timelines will begin once an application is considered complete.

In an attempt to expedite the process, the College may send instructions via email or fax, or direct the applicant to download forms from the College website.

Submission of Application for a Certificate of Registration	<ul style="list-style-type: none">• Application Fee - \$100 + HST = \$113.00• Application deadline = 12 months from passing the Qualifying Examination
Application Acknowledgement & Review of Completion	<ul style="list-style-type: none">• Acknowledgement email confirming receipt + outstanding items, as applicable = within 2 days from receipt of package
Registrar Review	<ul style="list-style-type: none">• Approval of application or referral to Registration Committee* = within 2 weeks from acknowledging receipt of a completed application
Approval of Application	<ul style="list-style-type: none">• Applicant submits registration fee**• Applicant is provided with COR # and date for obtaining PLI
Issuance of Certificate of Registration	<ul style="list-style-type: none">• Applicant obtains PLI and provides it to the College, within 30 days of approval• Upon receipt of PLI, applicant is made active in system on on public register and COR is issued, within 1 business day

* Please refer to the [Referral of a Registration Application to the Registration Committee Policy](#)

**Registration fees are pro-rated based on the registration date

PLI = Professional Liability Insurance

COR = Certificate of Registration



Registration Timelines Information Sheet (Graduates of Canadian Colleges Outside of Ontario)

The following processing timelines are approximate, meaning that they may be shorter than the minimum time allotted depending on the time of year the applicant is applying; but will never exceed the maximum time allotted.

The College will notify applicants, in writing, if the timelines will exceed the timelines posted below. The timelines will begin once an application is considered complete.

In an attempt to expedite the process, the College may send instructions via email or fax, or direct the applicant to download forms from the College website.

Academic Assessment Submission: Acknowledgement and Review of Completion	<ul style="list-style-type: none">• Acknowledgement email confirming receipt + outstanding items, as applicable = within 2 days from receipt of package
Registration Committee Assessment	<ul style="list-style-type: none">• Within 6 weeks from date of confirmation that assessment package is complete
Notification of Registration Committee Decision & Reasons	<ul style="list-style-type: none">• Decisions and Reasons will be mailed within 2 days of the meeting
Submission of Application for a Certificate of Registration	<ul style="list-style-type: none">• Application Fee - \$100 + HST = \$113.00• Application deadline = 12 months from passing the Qualifying Examination
Application Acknowledgement & Review of Completion	<ul style="list-style-type: none">• Acknowledgement email confirming receipt + outstanding items, as applicable = within 2 days from receipt of package
Registrar Review	<ul style="list-style-type: none">• Approval of application or referral to Registration Committee* = within 2 weeks from acknowledging receipt of a completed application
Approval of Application	<ul style="list-style-type: none">• Applicant is notified of approval, submits registration fee** and is provided with COR # and date for obtaining PLI, within 2 days of approval
Issuance of Certificate of Registration	<ul style="list-style-type: none">• Applicant obtains PLI and provides it to the College, within 30 days of approval• Upon receipt of PLI, applicant is made active in system on on public register and COR is issued, within 1 day

* Please refer to the [Referral of a Registration Application to the Registration Committee Policy](#)

**Registration fees are pro-rated based on the registration date

PLI = Professional Liability Insurance COR = Certificate of Registration



Registration Timelines Information Sheet (Internationally Educated Graduates)

The following processing timelines are approximate, meaning that they may be shorter than the minimum time allotted depending on the time of year the applicant is applying; but will never exceed the maximum time allotted.

The College will notify applicants, in writing, if the timelines will exceed the timelines posted below. The timelines will begin once an application is considered complete.

In an attempt to expedite the process, the College may send instructions via email or fax, or direct the applicant to download forms from the College website.

Academic Assessment Submission: Acknowledgement and Review of Completion	<ul style="list-style-type: none">• Acknowledgement email confirming receipt + outstanding items, as applicable = within 2 days from receipt of package
Registration Committee Assessment	<ul style="list-style-type: none">• Within 6 weeks from date of confirmation that assessment package is complete
Notification of Registration Committee Decision & Reasons	<ul style="list-style-type: none">• Decisions and Reasons will be mailed within 2 days of the meeting
Submission of Application for a Certificate of Registration	<ul style="list-style-type: none">• Application Fee - \$100 + HST = \$113.00• Application deadline = 12 months from passing the Qualifying Examination
Application Acknowledgement & Review of Completion	<ul style="list-style-type: none">• Acknowledgement email confirming receipt + outstanding items, as applicable = within 2 days from receipt of package
Registrar Review	<ul style="list-style-type: none">• Approval of application or referral to Registration Committee* = within 2 weeks from acknowledging receipt of a completed application
Approval of Application	<ul style="list-style-type: none">• Applicant is notified of approval, submits registration fee** and is provided with COR # and date for obtaining PLI, within 2 days of approval
Issuance of Certificate of Registration	<ul style="list-style-type: none">• Applicant obtains PLI and provides it to the College, within 30 days of approval• Upon receipt of PLI, applicant is made active in system on on public register and COR is issued, within 1 day

* Please refer to the [Referral of a Registration Application to the Registration Committee Policy](#)

**Registration fees are pro-rated based on the registration date

PLI = Professional Liability Insurance COR = Certificate of Registration



BRIEFING NOTE

To: **Council**

From: **Roderick Tom-Ying, Acting Registrar & CEO**

Date: **December 9, 2022**

Subject: **Draft Updated Policy – Language Proficiency Requirements**

Public Interest Rationale

The College of Denturists of Ontario's mandate is to protect the public by ensuring Registered Denturists provide safe, ethical, and competent denturism care and service in Ontario. As part of that mandate, the College Council has the overall responsibility of ensuring that the policies and processes implemented by the College are in harmony and aligned with the governing legislation and regulations. As part of the updated requirements in Bill 106, the College is updating its Language Proficiency Requirements to include language tests approved by Immigration, Refugees and Citizenship Canada.

Background

The Government of Ontario introduced Bill 106 – Pandemic and Emergency Preparedness Act, 2022 in the legislature on March 29, 2022. It received Royal Assent on April 14, 2022, with implementation on the same date. The health regulatory Colleges were provided with a window of opportunity in early summer to provide feedback on proposed regulations that would underpin the new changes.

Bill 106 is an omnibus Bill that contained provisions relevant to the health regulatory Colleges. It would amend the *Regulated Health Professions Act* to add three new requirements:

1. The prohibition on the requirement for Canadian work experience unless otherwise exempted.
2. The requirement related to language proficiency testing.
3. Timely registration decisions and responses.

The College received notice on October 28, 2022, that the following three new requirements will be in force by January 1, 2023.

Updated Language Proficiency Requirements

In response to the impending enactment of the three new requirements, the College will be required to update its current Language Proficiency Requirements to include two new language proficiency tests that are approved and used by Immigration, Refugees and Citizenship Canada (IRCC).

The College first approved a former Language Proficiency Policy on December 12, 2014. Since that time, the policy was amended three times as various language proficiency tests were updated or added/removed.

The new regulation stipulates that all health regulatory Colleges must accept language proficiency tests that are approved by and/or used by IRCC. As the CDO already had a former policy wide in its scope of acceptable tests, many of the language proficiency tests used by the IRCC were already accepted by the CDO.

The only two outstanding tests currently not recognized by the CDO include:

- TEF Canada – French language testing
- TCF Canada – French language testing

English Language Proficiency Tests approved by IRCC that are currently recognized by the CDO:

- CELPIP
- IELTS

For Immigration, Refugee and Citizenship Canada purposes, all applicants wanting to immigrate to Canada must submit results for French Language Testing (if choosing to conduct language testing in French instead of English) following TEF Canada or TCF Canada results. Applicants must submit results for reading, listening, writing, and speaking testing modules.

The CDO does not currently recognize TEF Canada and TCF Canada. The revised Language Proficiency Requirements Policy will add both organizations to the recognized lists of acceptable language proficiency results.

Creating Cut Scores for TEF and TCF Canada

The use of language proficiency tests will require all organizations, including the CDO, to create cut scores to determine the minimally acceptable score. Due to the short notice period between notification of the new language proficiency requirements from the Ministry of Health and enactment of the

requirements (January 1, 2023), the CDO will not be engaging in outside assistance for standard setting and cut score creations.

Immigration, Refugees, and Citizenship Canada has established benchmarking equivalencies between the Canadian Language Benchmarks (CLB) test with CELPIP, IELTS, TEF Canada and TCF Canada.

Due to this benchmarking work undertaken by IRCC, the CDO can easily establish the cut scores for TEF Canada and TCF Canada by using IRCC's equivalency chart for tests and cut scores already established by the CDO for CELPIP and IELTS.

Based on IRCC's equivalency charts, the CDO is proposing the following minimum cut scores:

CLB Level	CDO Cut Score	TEF Canada IRCC Equivalency	TCF Canada IRCC Equivalency
Reading	7	207-232	453-498
Listening	7	249-279	458-502
Speaking	7	310-348	10-11
Writing	7	310-348	10-11

Please note, the cut scores for TEF Canada and TCF Canada represent a range as compared with CLB, IELTS, and CELPIP cut scores. The CDO will adopt the equivalent range of scores as representative of the minimally acceptable range.

College Staff do not foresee any challenges with implementing the revised policy.

Registration Committee

The Registration Committee met on November 10, 2022, to hear from College Staff about the background of this new requirement, the CDO's position on this matter, and the proposed solution to meet the MOH's goal of a January 1, 2023, enactment date for this new requirement.

The Registration Committee has approved the proposed updated policy for Council's review and approval.

Options

After review and discussion of this item, Council may elect to:

1. Adopt the proposed amendments to the Language Proficiency Requirements Policy as brought forward by the Registration Committee.

2. Modify the proposed amendments
3. Other

Attachments

1. Current Language Proficiency Requirements Policy
2. Proposed Language Proficiency Requirements Policy
3. IRCC Language Tests Equivalency Charts
4. Letter from Chief of Nursing and Professional Practice



COLLEGE OF
DENTURISTS
OF ONTARIO

TYPE	Registration
NAME	Language Proficiency Requirements Policy
DATE APPROVED BY COUNCIL	December 12, 2014
DATE REVISED BY COUNCIL	March 22, 2019; December 6, 2019; September 7, 2021.

INTENT

This policy outlines the minimum language proficiency requirements that must be demonstrated in order to satisfy Section 2.5. of the Registration Regulation (833/93), which states:

The applicant must have reasonable fluency in either English or French. O. Reg. 833/93, s. 2.

BACKGROUND

English and French are the official languages used in the health care system in Ontario. All health care professionals need to be able to communicate (speak, read and write) in either English or French with reasonable fluency.

Language proficiency assessment contributes to public protection by ensuring that registrants can communicate effectively with patients, other members of the health care team, and the College. Candidates, applicants and registrants must be able to communicate effectively with the College, Registered Denturists must be able to understand and respond to College materials that are related to registration, quality assurance, and complaints, and discipline This is an essential part of a Denturist's accountability to the College as a regulated health professional.

THE POLICY

An applicant whose first language is English or French, and/or their relevant health care education and instruction was in English or French is considered to have demonstrated fluency in either language.

An applicant whose first language is not English or French or did not complete their relevant health care education and instruction in English or French is required to demonstrate proficiency either through a test of language proficiency or by providing non-objective evidence of language proficiency at the time of application for a Certificate of Registration

While examination candidates are not required to provide proof of language proficiency prior to attempting the Qualifying Examination, language proficiency is an essential component for success in both the written and Objective Structured Clinical Examination (OSCE) portions of the Qualifying Examination.

1. Demonstrating Language Fluency:

An applicant whose first language is not English or French or did not complete their relevant health care education and instruction in English or French are required to either:

- Complete a standardized language proficiency test administered by a recognized 3rd party testing agency and meet or exceed the minimum cut-off score for that test (Appendix A). The cut-off scores required in

the approved language tests reflect the minimum level of English or French language proficiency the College believes is necessary for a prospective applicant to function successfully as a Registered Dentist. Agenda Item 12.2

Applicants are responsible for the cost of language proficiency tests.

Test results will be considered valid for 2 years from the date the test was administered and must be sent directly from the language testing agency to the College.

OR

- b) Provide non-objective evidence of language proficiency. The College accepts alternatives to a standardized language proficiency test. An applicant who wishes to meet the language proficiency registration requirement through non-objective evidence (NOE) of their language proficiency must submit at least TWO of the following four:
1. Successful completion of relevant professional health care education in a majority English or French country;
 2. Relevant health care employment in a country in which English or French is the majority language in a role with a scope of practice similar to that associated with the Certificate of Registration for which the application is being made;
 3. Successful completion of the four final years of school in Canada that establishes eligibility to apply for university or college; or
 4. Successful completion of a Canadian college or university degree.

An applicant who cannot provide sufficient evidence of language proficiency will have their application for a Certificate of Registration referred to the Registration Committee.

2. Extending the Period of Validity of Language Proficiency Test Scores

The College may extend the validity of an applicant's language proficiency test scores when the applicant meets the following Decision Criteria:

1. The applicant is actively engaged in or has recently successfully completed the education required to become registered as a dentist;
2. The original test scores meet the language proficiency requirements outlined in Appendix A;
3. The original test scores have expired within the past two years; and
4. In the opinion of the Registrar, there is no other evidence to suggest the applicant is not sufficiently proficient in English or French to be a member of the College.

An extension is valid for a period of up to one year. A second extension of up to one year following the end of the first extension period may be requested. When an applicant's request for extension of the period of validity of language proficiency test scores is denied, the application will be referred to the Registration for review.

RELATED LEGISLATION

Ontario Regulation 833/93 (Registration)

Appendix A: Recognized Language Proficiency Test & Cut-Scores

Language Proficiency Test	Minimum Score
TOEFL (Internet-based & Paper-based) http://www.ets.org/toefl/	Overall minimum of 89 Including a minimum of Reading 20/30 Listening 21/30 Speaking 24/30 Writing 21/30
IELTS http://www.ieltscanada.ca/(Academic of General Training)	Overall minimum of 7.0 (academic and/or general training) Including a minimum of Reading 6.5 Listening 7.0 Speaking 7.0 Writing 6.5
Canadian Language Benchmark Assessment (CLBA) Canadian Language Benchmark Placement Test (CLBPT) www.language.ca	Reading 7.0 Listening 7.0 Speaking 7.0 Writing 7.0
Canadian Academic English Language Test, Computer Edition (CAEL CE) https://www.cael.ca/	Reading 60 Listening 60 Speaking 60 Writing 60
Canadian English Language Proficiency Index Program (CELPIP) https://www.celpip.ca/	Reading 7.0 Listening 7.0 Speaking 7.0 Writing 7.0

DEFINITIONS

Applicant – an individual that has made an application to the College for registration

IELTS – The International English Language Testing System

TOEFL®iBT -Test of English as a Foreign Language – Internet Based

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CLB – Canadian Language Benchmark

CLBPT – Canadian Language Benchmark Placement Test

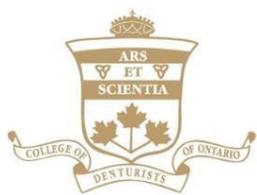
CLBA – Canadian Language Benchmark Assessment

CAEL CE – Canadian Academic English Language Test, Computer Edition

CELPPIP – Canadian English Language Proficiency Index Program

REVISION CONTROL

Date	Revision	Effective
March 22, 2019	<ul style="list-style-type: none">Remove requirement for demonstration of language proficiency prior to attempt the Qualifying ExaminationAdd CLBA and CLBPT to list of accepted standardized test for English Language ProficiencyUpdate of minimum cut-off scoresAdd "extending the period of validity of language proficiency test scores" provisionAdd "acceptance of non-objective evidence (NOE) of language proficiency" provision	March 22, 2019
December 6, 2019	<ul style="list-style-type: none">Add CAEL CE and CELPIP to list of accepted standardized tests for English Language Proficiency	December 6, 2019
September 7, 2021	<ul style="list-style-type: none">Removed references to CanTEST (the Canadian test of English or French for Scholars and Trainees) due to their discontinuation of testing services	September 7, 2021



COLLEGE OF
DENTURISTS
OF ONTARIO

TYPE	Registration
NAME	Language Proficiency Requirements Policy
DATE APPROVED BY COUNCIL	December 12, 2014
DATE REVISED BY COUNCIL	March 22, 2019, December 6, 2019, September 7, 2021, December 9, 2022.

INTENT

This policy outlines the minimum language proficiency requirements that must be demonstrated in order to satisfy Section 2.5. of the Registration Regulation (833/93), which states:

The applicant must have reasonable fluency in either English or French. O. Reg. 833/93, s. 2.

BACKGROUND

English and French are the official languages used in the health care system in Ontario. All health care professionals need to be able to communicate (speak, read and write) in either English or French with reasonable fluency.

Language proficiency assessment contributes to public protection by ensuring that registrants can communicate effectively with patients, other members of the health care team, and the College. Candidates, applicants and registrants must be able to communicate effectively with the College, Registered Denturists must be able to understand and respond to College materials that are related to registration, quality assurance, and complaints, and discipline This is an essential part of a Denturist's accountability to the College as a regulated health professional.

THE POLICY

An applicant whose first language is English or French, and/or their relevant health care education and instruction was in English or French is considered to have demonstrated fluency in either language.

An applicant whose first language is not English or French or did not complete their relevant health care education and instruction in English or French is required to demonstrate proficiency either through a test of language proficiency or by providing non-objective evidence of language proficiency at the time of application for a Certificate of Registration

While examination candidates are not required to provide proof of language proficiency prior to attempting the Qualifying Examination, language proficiency is an essential component for success in both the written and Objective Structured Clinical Examination (OSCE) portions of the Qualifying Examination.

1. Demonstrating Language Fluency:

An applicant whose first language is not English or French or did not complete their relevant health care education and instruction in English or French are required to either:

- Complete a standardized language proficiency test administered by a recognized 3rd party testing agency

and meet or exceed the minimum cut-off score for that test (Appendix A). The cut-off scores required in

the approved language tests reflect the minimum level of English or French language proficiency the College believes is necessary for a prospective applicant to function successfully as a Registered Denturist.

Applicants are responsible for the cost of language proficiency tests.

Test results will be considered valid for 2 years from the date the test was administered and must be sent directly from the language testing agency to the College.

OR

- b) Provide non-objective evidence of language proficiency. The College accepts alternatives to a standardized language proficiency test. An applicant who wishes to meet the language proficiency registration requirement through non-objective evidence (NOE) of their language proficiency must submit at least TWO of the following four:
1. Successful completion of relevant professional health care education in a majority English or French country;
 2. Relevant health care employment in a country in which English or French is the majority language in a role with a scope of practice similar to that associated with the Certificate of Registration for which the application is being made;
 3. Successful completion of the four final years of school in Canada that establishes eligibility to apply for university or college; or
 4. Successful completion of a Canadian college or university degree.

An applicant who cannot provide sufficient evidence of language proficiency will have their application for a Certificate of Registration referred to the Registration Committee.

2. Extending the Period of Validity of Language Proficiency Test Scores

The College may extend the validity of an applicant's language proficiency test scores when the applicant meets the following Decision Criteria:

1. The applicant is actively engaged in or has recently successfully completed the education required to become registered as a denturist;
2. The original test scores meet the language proficiency requirements outlined in Appendix A;
3. The original test scores have expired within the past two years; and
4. In the opinion of the Registrar, there is no other evidence to suggest the applicant is not sufficiently proficient in English or French to be a member of the College.

An extension is valid for a period of up to one year. A second extension of up to one year following the end of the first extension period may be requested. When an applicant's request for extension of the period of validity of language proficiency test scores is denied, the application will be referred to the Registration for review.

RELATED LEGISLATION

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IELTS http://www.ieltscanada.ca/ (Academic or General Training)	Overall minimum of 7.0 (academic and/or general training) Including a minimum of Reading: 6.5 Listening: 7.0 Speaking: 7.0 Writing: 6.5
Canadian Language Benchmark Assessment (CLBA) Canadian Language Benchmark Placement Test (CLBPT) www.language.ca	Reading: 7.0 Listening: 7.0 Speaking: 7.0 Writing: 7.0
Canadian Academic English Language Test, Computer Edition (CAEL CE) https://www.cael.ca/	Reading: 60 Listening: 60 Speaking: 60 Writing: 60
Canadian English Language Proficiency Index Program (CELPIP) https://www.celpip.ca/	Reading: 7.0 Listening: 7.0 Speaking: 7.0 Writing: 7.0
Test de connaissance du français pour le Canada (TCF Canada) www.france-education-international.fr	Reading: 453-498 Listening: 458-502 Speaking: 10-11 Writing: 10-11
Test d'évaluation de français pour le Canada (TEF Canada) https://www.lefrancaisdesaffaires.fr/en/tests-diplomas/	Reading: 207-232 Listening: 249-279 Speaking: 310-348 Writing: 310-348

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REVISION CONTROL

Date	Revision	Effective
March 22, 2019	<ul style="list-style-type: none"> • Remove requirement for demonstration of language proficiency prior to attempt the Qualifying Examination • Add CLBA and CLBPT to list of accepted standardized test for English Language Proficiency • Update of minimum cut-off scores • Add "extending the period of validity of language proficiency test scores" provision • Add "acceptance of non-objective evidence (NOE) of language proficiency" provision 	March 22, 2019
December 6, 2019	<ul style="list-style-type: none"> • Addition of CAEL CE and CELPIP to list of accepted standardized tests for English Language Proficiency 	December 6, 2019
September 7, 2021	<ul style="list-style-type: none"> • Removed references to CanTEST (the Canadian test of English or French for Scholars and Trainees) due to their discontinuation of testing services 	September 7, 2021
December 9, 2022	<ul style="list-style-type: none"> • Addition of TCF Canada and TEF Canada to list of accepted standardized tests for French Language Proficiency 	December 9, 2022



- [Canada.ca](#) > [Immigration, Refugees and Citizenship Canada](#) > [Corporate information](#)
- > [Publications and Manuals](#) > [Operational instructions and guidelines](#)
- > [Standard requirements for applicants](#) > [Language requirements](#)

Language test equivalency charts

i This section contains policy, procedures and guidance used by IRCC staff. It is posted on the department’s website as a courtesy to stakeholders.

Equivalencies between the Canadian Language Benchmarks (CLBs) (for English), the Niveaux de compétence linguistique canadiens (for French), and the results of language tests from designated testing organizations have been established and are summarized in the following tables.

Canadian English Language Proficiency Index Program (CELPIP) – General Test score equivalency chart

CLB Level	Reading	Writing	Listening	Speaking
10	10	10	10	10
9	9	9	9	9
8	8	8	8	8
7	7	7	7	7
6	6	6	6	6
5	5	5	5	5

CLB Level	Reading	Writing	Listening	Speaking
4	4	4	4	4

International English Language Testing System (IELTS) – General Training – Test score equivalency chart

CLB Level	Reading	Writing	Listening	Speaking
10	8.0	7.5	8.5	7.5
9	7.0	7.0	8.0	7.0
8	6.5	6.5	7.5	6.5
7	6.0	6.0	6.0	6.0
6	5.0	5.5	5.5	5.5
5	4.0	5.0	5.0	5.0
4	3.5	4.0	4.5	4.0

**Test d'évaluation de français pour le Canada (TEF Canada)
Test score equivalency chart**

CLB Level	Reading	Writing	Listening	Speaking
10	263-300	393-450	316-360	393-450
9	248-262	371-392	298-315	371-392
8	233-247	349-370	280-297	349-370
7	207-232	310-348	249-279	310-348
6	181-206	271-309	217-248	271-309

CLB Level	Reading	Writing	Listening	Speaking
5	151-180	226-270	181-216	226-270
4	121-150	181-225	145-180	181-225

**Test de connaissance du français pour le Canada (TCF Canada)
Test score equivalency chart**

CLB Level	Reading	Writing	Listening	Speaking
10 and above	549-699	16-20	549-699	16-20
9	524-548	14-15	523-548	14-15
8	499-523	12-13	503-522	12-13
7	453-498	10-11	458-502	10-11
6	406-452	7-9	398-457	7-9
5	375-405	6	369-397	6
4	342-374	4-5	331-368	4-5

Date modified:

2020-07-07

Ministry of Health

Office of the Chief of Nursing
and Professional Practice and
Assistant Deputy Minister
777 Bay Street, 19th Floor
Toronto ON M7A 2J3

Telephone: **416 212-5494**

Ministère de la Santé

Bureau du chef des soins
infirmiers
et de la pratique professionnelle et
sous-ministre adjoint
777, rue Bay, 19^e étage
Toronto ON M7A 2J3

Téléphone : **416 212-5494**



October 28, 2022

Dear Executive Directors/CEOs of Ontario's Health Regulatory Colleges:

As you are aware, the government is continuing its efforts to increase health human resources capacity to respond and recover from the pandemic, ensuring Ontarians have access to safe, high-quality health care now and in the future.

This week, regulations made under the *Regulated Health Professions Act, 1991* were approved that will help reduce registration barriers faced by applicants to the regulated health professions.

By January 1, 2023, the following will be in force:

1. The prohibition on the requirement for Canadian work experience unless otherwise exempted.
2. The requirement related to language proficiency testing.
3. Timely registration decisions and responses.

In addition, all health regulatory Colleges will be required to have an emergency class certificate of registration by August 31, 2023. This new certificate will include:

- The circumstances that will cause the class to be open for issuance and renewal.
- A timeline of no more than one year after the certificate is issued and is renewable for the same period of time with no limit on the number of renewals.
- The circumstances in which a member in the emergency class may apply for another class of registration and must exempt the applicant from at least some of the registration requirements that would ordinarily apply to the application.

The ministry recognizes that implementing these changes will require Colleges to update their processes and regulations under health profession Acts to be consistent with the new requirements. Ministry staff will be reaching out to the Colleges soon to identify workplans and next steps.

It is important that we collectively understand the impact of these changes on the timely registration of applicants. In the coming months, the ministry will work with the Colleges on key metrics for reporting, including:

- The average time between applicants' submission of materials and Registrar's response;
- The average time for a Registrar's decision on an application;
- The number of applicants using Immigration, Refugees and Citizenship Canada (IRCC) approved tests for demonstration of language proficiency; and,
- The number of applicants seeking assessment of equivalence of international experience and the outcome of those assessments (i.e., how many were found to have equivalent experience, how many were found to require additional education and training).

The collection of these measurements is essential to providing data to the ministry to set benchmarks, identify gaps, and to develop improvement plans with Colleges for more timely registration processes.

We will continue to liaise with you as you develop your regulatory amendment packages. If you have any questions or concerns, please contact Jason Maurier, Manager, Regulatory Oversight and Performance Unit at Jason.Maurier@ontario.ca or Stephen Cheng, Manager, Strategic Regulatory Policy Unit at Stephen.Cheng@ontario.ca.

We look forward to our continued collaboration with the College on solutions to bolster our health human resources supply in Ontario and to ensure the delivery of the best care to Ontarians now and in the future.

Sincerely,



Dr. Karima Velji
Chief of Nursing & Professional Practice; Assistant Deputy Minister
Ministry of Health, Ontario

- c: Dr. Catherine Zahn, Deputy Minister, Ministry of Health
Allison Henry, Director, Health Workforce Regulatory Oversight Branch
Stephen Cheng, Manager, Strategic Regulatory Policy Unit
Jason Maurier, Manager, Regulatory Oversight and Performance Unit
Beth Ann Kenny, Executive Director, Health Profession Regulators of Ontario



BRIEFING NOTE

To: **Council**

From: **Roderick Tom-Ying, Acting Registrar & CEO**

Date: **December 9, 2022**

Subject: **Personal Information Privacy Policy**

Public Interest Rationale

The collection, use and disclosure of personal information in the course of carrying out regulatory activities is done for the purpose of regulating the profession of denturism in the public interest. The College of Denturists of Ontario (the College) can collect, and third parties can provide, personal information to the College without the consent of the individual(s) involved, including that of patients. The College also uses and sometimes discloses such information in order to meet its statutory mandate under the *Regulated Health Professions Act, 1991* (RHPA), and the *Denturism Act, 1991*.

This policy transparently informs how the College handles such information.

Background

In the course of fulfilling its mandate, the College may collect, use and disclose the personal information of potential candidates, candidates, applicants, registrants, patients and persons employed, retained, elected, or appointed for the purpose of the administration of any legislation related to the governance of the College.

Individuals who are employed, retained, or appointed by the College as well as every member of the College Council or a College committee are required by section 36 of the RHPA to preserve confidentiality with respect to all information that they receive.

This draft Personal Information Privacy Policy will govern and provide College Staff with the overarching principles required when acting on behalf of the College to collect, use and disclose personal information to administer regulatory programs.

Similar to the privacy obligations of all regulated health professionals, including Registered Denturists, as captured in the College's Standard of Practice for Confidentiality and Privacy, this operational policy will govern the use of personal information for College Staff and persons retained by the College including College Council and Committee members.

Although the *Personal Information Protection and Electronic Documents Act, 2000*, does not apply to the College, its principles are reflected in the draft policy. The CDO will designate this draft policy as an Operational Policy as it governs College Staff and persons retained by the College.

For public clarity, this draft Personal Information Privacy Policy is equivalent to a Privacy Code for the College and will be published publicly.

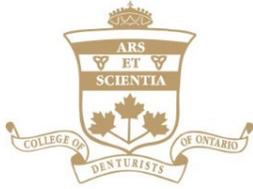
Options

After review and discussion of this item, Council may elect to:

1. Approve the policy
2. Approve the policy following amendments
3. Request further drafting with a return to Council for consideration
4. Other

Attachments

1. Draft Personal Information Privacy Policy



TYPE	Operational
NAME	Personal Information Privacy Policy
DATE APPROVED BY COUNCIL	
DATE REVISED BY COUNCIL	

OBJECTIVE

The collection, use, and disclosure of personal information in the course of carrying out regulatory activities is done for the purpose of regulating the profession of Denturism in the public interest.

The College of Denturists of Ontario (the College) can collect, and third parties can provide, personal information to the College without the consent of the individual(s) involved, including that of patients. The College also uses and sometimes discloses such information in order to meet its statutory mandate under the *Regulated Health Professions Act, 1991* (RHPA), and the *Denturism Act, 1991*.

This policy transparently informs how the College handles such information.

THE POLICY

In the course of fulfilling its mandate, the College may collect, use and disclose the personal information of potential candidates, candidates, applicants, registrants, patients and persons employed, retained, elected, or appointed for the purpose of the administration of any legislation related to the governance of the College.

The privacy principles outlined by the *Personal Information Protection and Electronic Documents Act, 2000* provide the framework for the College's privacy policy:

Principle 1 – Accountability: The College has identified an Information Officer who will receive questions, complaints and/or comments about personal information. The College's policies regarding privacy and personal information management will be made public and available.

Principle 2 – Identifying Purposes: The College collects personal information in order to fulfill its regulatory mandate, and in particular, for the following purposes:

- a) Assessing conformance to entry-to-practice competencies

- b) Assessing eligibility for registration, membership renewal, or reinstatement
- c) Responding to requests for examination accommodation
- d) Assessing Members' continued competence through its Quality Assurance Program
- e) Enforcing standards of practice and conduct
- f) Assessing the risk to the public when alerted that there is a concern about a Member's practice or conduct
- g) Responding to requests or inquiries from or providing information to prospects, applicants, Members, employers, and the public
- h) Verifying identity in order to process requests for access to personal information; i) Carrying out the College's operations, including selecting Members for appointment to the College's committees and contacting potential volunteers and focus group participants
- i) Supporting all activities of Council and Committee Members regarding Council and Committee related matters
- j) Conducting research and compiling aggregate statistics for reporting purposes; and
- k) As required by law or regulation.

Upon request, College Staff will explain the purposes for which the personal information is collected or refer the individual to a designated representative of the College who can explain the purposes.

The College does not use or disclose personal information that has been collected for any new purpose that has not been identified in Principle 2, without first identifying and documenting the new purpose and obtaining consent.

Members should also visit eHealth Ontario's website to review their Notice of Collection and privacy practices.

Principle 3 – Consent: Personal information is collected, used, and disclosed with the knowledge and consent of the individual unless it would be contrary to the mandate of the College.

Principle 4 – Limiting Collection: The College limits the collection of personal information that is required for the purposes identified in Principle 2.

Principle 5 – Limiting Use, Disclosure or Retention: The College does not use or disclose personal information for purposes other than the purposes identified in Principle 2 or as required by law.

The College has a Records and Information Governance policy in place and conducts regular audits to ensure that personal information that is no longer required to be kept is destroyed, eliminated, or made anonymous. The Records and Information Governance policy can be found publicly on the College's website.

Principle 6 – Accuracy: The College exercises its best efforts to ensure that the information it collects, uses and discloses is accurate. The College makes corrections to information without removing original entries for accountability.

Principle 7 – Safeguards: The College protects personal information with appropriate security safeguards proportionate to the sensitivity of the personal information. Security measures, include restricting access to personal information to authorized personnel, ensuring that physical files are under lock and key and ensuring that electronic files are password protected. The College reviews its security measures periodically with 3rd party IT providers to ensure that personal information is secure.

Principle 8 – Openness: The College’s confidentiality and privacy policies are available on the College’s website or may be requested by phone or mail. Inquiries concerning the College’s policies and practices for collecting, using, and disclosing personal information may be directed to the Information Officer.

Principle 9 – Individual Access: Individuals may submit written requests to the Information Officer to access their information. Access may be denied or refused if the information is impractical or impossible to retrieve, or if releasing it could interfere with the administration or enforcement of the legislation.

Principle 10 – Challenging Compliance: Complaints or questions regarding the College's compliance with this policy should be directed to the Information Officer.

Information Officer’s Contact Information

Attention: Information Officer

Telephone: (416) 925-6331

Email: info@denturists-cdo.com

Mail: 365 Bloor Street East, Suite 1606, Toronto, Ontario, M4W 3L4

RELATED LEGISLATION AND DOCUMENTS

Regulated Health Professions Act, 1991

Denturism Act, 1991

Personal Health Information Protection Act, 2004

Personal Information Protection and Electronic Documents Act, 2000

REVISION CONTROL

Date	Revision	Effective