COLLEGE OF DENTURISTS OF ONTARIO

124th Board Meeting

September 18, 2026 – 10:00 a.m. to 3:30 p.m.

Hybrid Meeting held at HUB 601
175 Bloor Street East, North Tower, Suite 601, Toronto, ON M4W 3R8

Teleconference via Zoom & YouTube Live Stream
Please contact the College at info@denturists-cdo.com
to receive the meeting access information.

AGENDA

13.	**Draft Chief Examiner and Deputy Chief Examiner Eligibility and Selection Policies & Opening Recruitment for Chief Examiner Role** 13.1 Briefing Note 13.2 Draft QE Chief Examiner Eligibility and Selection Policy 13.3 Draft QE Deputy Chief Examiner Eligibility and Selection Policy 13.4 Current Chief Examiner Roles and Responsibilities Document 13.5 Current Chief Examiner Selection Process Document 13.6 Current Deputy Chief Examiner Roles and Responsibilities Document 13.7 Current Deputy Chief Examiner Selection Process Document	Decision	 **170** **173** **179** **185** **189** **191** **196**
14.	***In-Camera* Meeting of the Board** 14.1 Pursuant to section 7(2)(b)(d) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act*, 1991.	Decision	
15.	**Other Business**	Information	
16.	**Next Meeting Date** ➢ Friday, December 4, 2026 (virtual)	Information	
17.	**Adjournment**		

Conflict of Interest Register

Council – 2026-2027 Term

Committee Member	Conflict(s) of Interest Declared
Kristine Bailey – Chair Public Director	None declared
Garnett A.D. Pryce Denturist – District 5 - Vice Chair	• Denturism Instructor, Oxford College, Toronto • Member, Denturist Association of Ontario
Majid Ahangaran Denturist – District 7	None declared
Abdelatif (Latif) Azzouz Denturist – District 6	None declared
Alexia Baker-Lanoue Denturist – District 1	• Member, Denturist Association of Ontario
Avneet Bhatia Public Director	None declared
Eric Cayford Public Director	None declared
Lileath Claire Public Director	• ICRC Panel Member, Ontario College of Teachers
Norbert Gieger Denturist – District 2	None declared
Elizabeth (Beth) Gorham-Matthews Denturist – District 8	• Member, Denturist Association of Ontario • Member, Denturist Association of Canada
Aisha Hasan Public Director	Annual Declaration pending
Franklin Parada Denturist – District 3	Annual Declaration pending
Gaganjot Singh Public Director	None declared

Last Updated: September 10, 2026

I. Conflict-of-Interest Declaration of Adherence

Board of Directors of the College, have acknowledged that:

- ✓ I have a duty to carry out my responsibilities in a manner that serves and protects the interest of the public. Therefore, I must not engage in any activities or decision-making about any matters where I have a conflict of interest.
- ✓ I have a duty to uphold and further the intent of the *Denturism Act, 1991* which is to regulate the practice and profession of denturism in Ontario. I must not represent the views of advocacy or special interest groups.
- ✓ I must avoid conflicts between my self-interest and my duty to the College. As part of this Conflict-of-Interest Declaration of Adherence, I have identified below any relationship(s) I currently have or recently have had with any organization that may create a conflict of interest by virtue of having competing fiduciary obligations to the College and the other organization (including, but not limited to, entities of which I am a director or officer).
- ✓ I confirm I have read, considered and understand the College's Conflict-of-Interest by-laws section (section 27), and agree to abide by its provisions.
- ✓ I understand that my completed questionnaire will be included in the appendix to each Board and/or committee meeting package and that I must declare any updates to my responses and conflicts of interest specific to the meeting agenda at the start of each meeting.
- ✓ I recognize that a conflict of interest could bring discredit to the College, amount to a breach of my fiduciary duty to the College and could create liability for the College and/or myself.
- ✓ I understand that any breach of the College's Conflict-of-Interest by-laws section may result in remedial action, censure or removal from office.

II. Outside Interests

The following outside interests disclosed by the Board of Directors in accordance with section 27 of the by-laws of the College are listed in the table beginning on **page 1** of this register:

I, or one of my family members (e.g., a parent, spouse[1], child or sibling), close friends, business partners, dating partner, or other person with whom I have a close personal or professional relationship, have or recently[2] have had the following direct or indirect affiliations, personal or financial interests or relationships, and/or have taken part in the relevant transactions.

[1] The *Family Law Act* definition of "spouse" is applied. A "spouse" includes either of two persons married to each other or who are not married and have cohabitated continuously for a period of at least three years or who are in a relationship of some permanence if they are parents of a child as set out in section 4 of the *Children's Law Reform Act*.

[2] If you are a newly elected Board of Directors, you must not have held a position with any denturism-related Professional Association for at least one year at any time between the election date and the 120th day immediately

I am aware that a conflict of interest arises where I have a personal or financial interest which conflicts, might conflict or may be perceived to conflict with the interests of the College. The purpose of this form is to assist me and the College with identifying possible conflicts. A conflict of interest could arise in relation to personal or financial matters including (but not limited to):

- Directorships or other employment;
- Interests in business enterprises or professional practices;
- Share ownership;
- Beneficial interests in trusts;
- Membership in existing professional or personal associations;
- Professional associations or relationships with other organizations; and
- Personal associations with other groups or organizations, or family relationships.

Any obligation, commitment, relationship or interest that could conflict or may be perceived to affect my judgment or the discharge of my duties to the College must be declared.[3]

1. A conflict with my duty to the College may arise because I hold the following offices related to denturism (appointed or elected).

2. A conflict with my duty to the College may arise because I, or any trustee or any person on my behalf, own or possess, directly or indirectly, the following interests related to denturism.

3. A conflict of interest with my duty to the College could arise because I receive financial remuneration (either for services performed by me, as an owner or part owner, trustee, or employee or otherwise) from the following sources related to denturism.

4. Other than what is disclosed above, I have considered whether I have any relationships or interests that could compromise, or be perceived to compromise, my ability to exercise judgment or decision-making independently and objectively with a view to the best interests of the College and listed them below.

before that date. If you are a newly elected and previously served as an elected Board Director for nine consecutive years, at least three years must have passed by any time between the election date and the 120th day immediately before that date. See subsections (ii))(f) and (iv) of section 13.01 ("Eligibility to Run for Election") in the College's by-laws.

[3] A conflict of interest exists where a reasonable person would conclude that a Board or Committee member's personal or financial interest may affect their judgment or how they discharge their duties to the College. A conflict of interest may be real, perceived, actual, potential, direct, or indirect.

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).

COLLEGE OF DENTURISTS OF ONTARIO

123rd Board Meeting
Teleconference

Held via Zoom
June 12, 2026 – 10:00 a.m. to 3:00 p.m.

MINUTES

Directors Present:	Kristine Bailey, Public Appointee	➢ Chair
	Garnett A. D. Pryce, Denturist	➢ Vice Chair
	Majid Ahangaran, Denturist	
	Alexia Baker-Lanoue, Denturist	
	Lileath Claire, Public Appointee	
	Norbert Gieger, Denturist	
	Elizabeth (Beth) Gorham-Matthews, Denturist	
	Aisha Hasan, Public Appointee	
	Gaganjot Singh, Public Appointee	
Regrets:	Abdelatif (Latif) Azzouz, Denturist	
	Avneet Bhatia, Public Appointee	
	Franklin Parada, Denturist	
Absent:	Annie Chu, Denturist	
Legal Counsel:	Rebecca Durcan, Steinecke, Maciura and LeBlanc	
Staff:	Roderick Tom-Ying, Registrar and CEO	
	Tera Goldblatt, Manager, Manager, Registration & Quality Assurance	
	Catherine Mackowski, Manager, Professional Conduct	
	Paige O'Brien, Manager, Board of Directors, Corporate Services and Practice Advisory	

1. **Call to Order**
   The Chair called the meeting to order at 10:02 a.m.

2. **Land Acknowledgement**
   We acknowledge 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. We also acknowledge that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

3. Approval of Agenda

MOTION: That the Agenda be approved as presented**.**
MOVED: G. Pryce
SECONDED: A. Baker-Lanoue

CARRIED

4. Declaration of Conflicts

Comments on conflict of interest were made by Rebecca Durcan, College Counsel, Steinecke, Maciura and LeBlanc. The Conflict-of-Interest Register was provided, and no conflicts specific to the agenda were declared.

5. College Mission and Mandate

The Chair drew Board Directors' attention to the College Mandate and the College Mission, which were provided.

6. Consent Agenda

A Board Director noted a required correction to the Conflict-of-Interest Register.

MOTION: To approve the consent agenda as amended.
MOVED: N. Gieger
SECONDED: L. Claire

CARRIED

7. Chair's Report

The Chair noted the approval of the scope of practice expansion, the appointment of a new public director, Eric Cayford, the election results for Districts 3, 4, and 5 and the upcoming CNAR conference in October.

8. Registrar's Report

The Registrar provided an update on the operational activities of the College which occurred since the last meeting of the Board, including: updates to the Academic Assessment Forms, the College's participation in a consultation workshop with Ministry of Labour, Immigration, Training and Skills development on the Ontario Immigrant Nominee Program, the Ontario government's Scope of Practice Announcement, Exam and Peer Circle Workshops, the HPRO Governance Conference, GBP Student Awards and the MCQ and OSCE Examinations. The Statement of Operations for April 1, 2026, to April 30, 2026, an updated 2026-2027 Budget and Reserve Funds were reviewed.

The Registrar noted that due to a series of unexpected updates since the last Board meeting when the 2026-2027 Operating Budget was first approved, College Staff are now proposing updates to the budget to help fund upcoming capital expenditures related to an office server replacement, costs related to the implementation of the Scope of Practice, and governance

modernization activities. The template for the 2026-2027 Operating Budget has been updated to open new budget line items for Strategic Initiatives, and to include an updated expense amount of $30,000 for capital expenditures from $15,000.

The Registrar also noted that since OHIP has increased their base amount for individual out-patient psychotherapy services, an amount that the College's Funding for Therapy or Counselling Eligibility Policy uses, the College's restricted reserve fund for therapy and counselling needs to be increased. The College uses a base funding formula estimate of 10 patients to form a dollar amount required to be restricted in the reserve funds. The Board was asked to top up the restricted reserve funds to $179,400 to ensure harmony with the policy.

MOTION: That the Board approves the updated 2026-2027 Operating Budget as presented.
MOVED: E. Gorham-Matthews
SECONDED: G. Singh

CARRIED

MOTION: That the Board restricts $42,010 from Unrestricted Net Assets to the Internally Restricted for Therapy and Counselling.
MOVED: N. Gieger
SECONDED: L. Claire

CARRIED

9. 2023-2025 Strategic Plan Extension

The Registrar presented an overview of the results achieved so far in its 2023-2025 Strategic Plan and proposes an extension to the strategic plan.

MOTION: That the Board extends its current strategic plan to 2027.
MOVED: N. Gieger
SECONDED: A. Baker-Lanoue

CARRIED

10. Code of Ethics, Code of Conduct, & Conflict of Interest Reviews

College legal counsel, Rebecca Durcan, Steinecke Maciura LeBlanc, reviewed the proposed updates to the College By-laws and the Conflict-of-Interest Declaration Form.

MOTION: That the Board approves the proposed amendments to the College By-Laws and Conflict of Interest Declaration Form as presented for immediate implementation.
MOVED: A. Baker-Lanoue
SECONDED: G. Pryce

CARRIED

11. Governance Modernization

Paige O'Brien, Manager, Board of Directors, Corporate Services & Practice Advisory provided an update and reviewed the next steps for the College's Governance Modernization Project.

12. Qualifying Examination – OSCE Blueprint & Number of Stations

The Registrar introduced the proposed updates to the OSCE to ensure that the College can operationally administer the OSCE exam in the face of increasing candidates over the next couple of years.

MOTION: That the Board adopts the recommended OSCE updates for implementation in June 2027 which include the reduction of OSCE stations, updating the OSCE blueprint to the 2020 national competency profile and percentage-based weighting.

MOVED: N. Gieger
SECONDED: L. Claire

CARRIED

13. Other Business

The Chair canvassed the Board for other business. No other business was identified for discussion.

14. In-Camera Meeting of the Board

Pursuant to section 7(2)(d) of the Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991.

MOTION: To move the meeting in-camera.
MOVED: G. Singh
SECONDED: A. Hasan

CARRIED

Pursuant to section 7(2)(d) of the Health Professions Procedural Code, Schedule 2 to the *Regulated Health Professions Act*, 1991, the meeting was moved in-camera at 12:24 p.m. and ex camera at 12:35 p.m.

15. Next Meeting Date(s)

The Registrar reminded the Board of the remaining meeting dates.

- Friday, September 18, 2026 (in-person)
- Friday, December 4, 2026 (virtual)

16. Adjournment

MOTION: For the meeting to be adjourned.
MOVED: A. Baker-Lanoue
SECONDED: N. Gieger

CARRIED

The meeting was adjourned at 12:36 p.m.

Kristine Bailey Chair	Date
Roderick Tom-Ying Registrar and CEO	Date

Board Meeting Feedback Survey Results
123rd Board Meeting - June 12, 2026

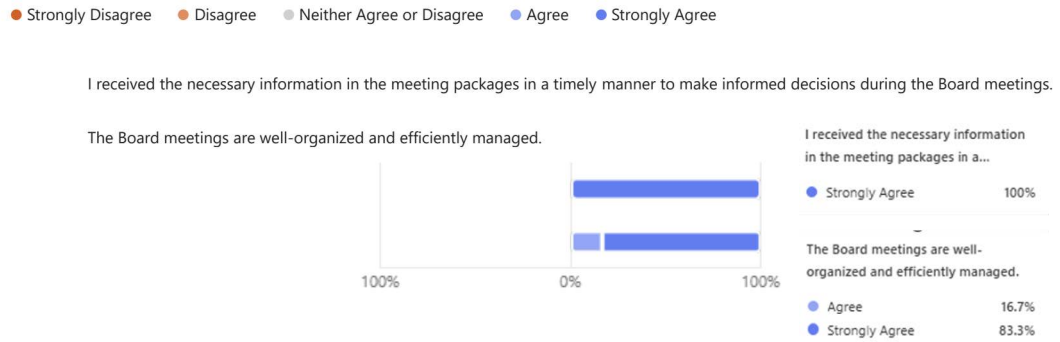
Agenda Item 6.2

Responses Overview

Active

Responses	Average Time	Duration
6	00:50	63 Days

1. Meeting Effectiveness & Board Meeting Materials

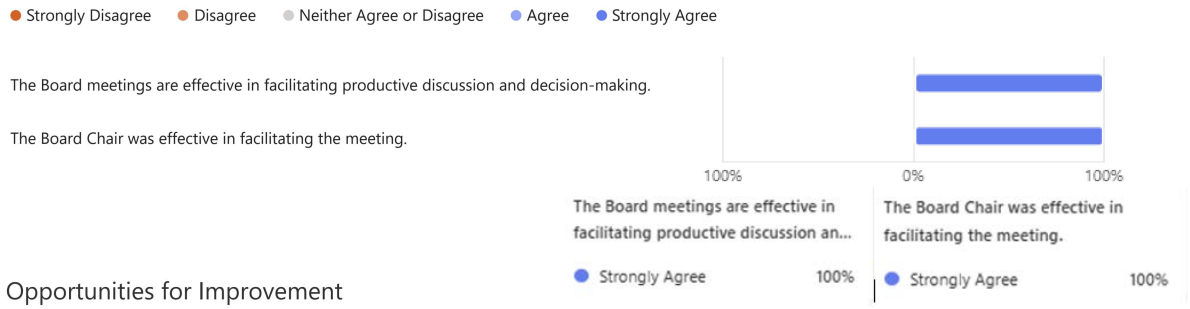


2. Any additional feedback or comments regarding Meeting Effectiveness & Board Meeting Materials?

3. Public Interest

4. Any additional feedback or comments regarding Public Interest?

5. Participation & Meeting Facilitation



6. Opportunities for Improvement

What improvements, if any, would you suggest to improve the Board of Directors Meetings?

0 responses submitted

0
Responses

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee: **Executive Committee**

Reporting Date: **September 18, 2026**

Number of meetings since last Board Meeting: **0**

There have been no meetings of the Executive Committee since the last Board Meeting.

Respectfully submitted by Kristine Bailey
Board Chair and Chair of the Executive Committee

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

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

Reporting Date: **September 18, 2026**

Number of Meetings since last Board Meeting: **4**

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 June 12, 2026 Board meeting, the ICRC has considered 16 complete investigations and made final dispositions in 16 matters.

Decisions Finalized:

Complaints	**16**
Registrar's Reports	**1**
Total	**17**

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

No Further Action	10
Advice/Recommendation/Reminder	5
SCERP (incl. Coaching and Training)	2
Undertaking	3
Deferred	1

Practice Issues (identified by ICRC at the time the decision is made)

**** Some cases may not have a Secondary Issue***

Practice Issue	Primary Issue	Secondary Issue
Patient harm/Patient Safety	1	
Clinical knowledge/understanding		2
Clinical Skill/Execution	1	2
Communication	5	2
Relationship with Patient	2	1
Professional Judgment	3	4
Legislation, standards & ethics	3	1
Practice Management	1	
Records and Reporting		2

Cases Considered by the Committee:

Complaints	**16**
Registrar's Reports	**1**

New Files Received during this period:

Complaints	**8**
Registrar's Reports	**1**

HPARB appeals

Total Appeals pending	3
New Appeals	0

Respectfully submitted by Kristine Bailey
Chair of the Inquiries, Complaints and Reports Committee

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee: **Discipline Committee**

Reporting Date: **September 18, 2026**

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

Introduction: Role of the Committee

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

Executive Summary

Since the June 12, 2026 Board meeting, the Discipline Committee has not met.

Respectfully submitted by Elizabeth Gorham-Matthews
Chair of the Discipline Committee

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee:	**Fitness to Practise Committee**
Reporting Date:	**September 18, 2026**
Number of Meetings since last Board Meeting:	**0**

There have been no meetings of the Fitness to Practise Committee since the last Board Meeting.

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

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee:	**Patient Relations Committee**
Reporting Date:	**September 18, 2026**
Number of meetings since last Board Meeting:	**0**

There have been no meetings of the Patient Relations Committee since the last Board Meeting.

Respectfully submitted by Avneet Bhatia
Chair of the Patient Relations Committee

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee: **Quality Assurance Committee**

Reporting Date: **September 18, 2026**

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

Role of the Committee

The Quality Assurance Committee considers Peer & Practice Assessment reports as an indicator of whether a registrant'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 program and develops tools, programs, and policies for the College's Quality Assurance Program.

The Quality Assurance Committee met two (2) times since its last report to the Board on June 12, 2026, on the following dates:

- July 6, 2026
- August 27, 2026

Meeting: July 6, 2026

Peer & Practice Assessment Report Summary:

Renewal Period	Satisfactory	Extension Granted	TCLs imposed	Additional information required	SCERP ordered/ required follow up	Reassessment Ordered	Modified Assessment	Referral to ICRC	Resigned
2025-2026	6				1			1	
2023-2024	1								

Meeting: August 27, 2026

Peer & Practice Assessment Report Summary:

Renewal Period	Satisfactory	Extension Granted	TCLs imposed	Additional information required	SCERP ordered/ required follow up	Reassessment Ordered	Modified Assessment	Referral to ICRC	Resigned
2025-2026	3	1							
2026-2027	5	1							

Program Development:

On July 6, 2026, the Quality Assurance Committee approved a decision tree document to create a new framework to support consistent, proportionate, and risk-based decision-making in matters arising from Peer and Practice Assessments.

Respectfully submitted by Abdelatif Azzouz
Chair of the Quality Assurance Committee

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee: **Registration Committee**

Reporting Date: **September 18, 2026**

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

Activities during the Quarter:

The Registration Committee met one (1) time since its last report to the Board on June 12, 2026, on the following dates:

- June 9, 2026

June 9, 2026

During this meeting, the Registration Committee considered eight (8) new academic assessments. Seven (7) were deemed substantially equivalent, while one (1) was deemed to be not substantially equivalent.

One (1) registrant who did not meet the 750-hour currency requirement was required to complete the online Jurisprudence Exam and the online Self-Assessment Tool.

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

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee: **Qualifying Examination Committee**

Reporting Date: **September 18, 2026**

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

The Qualifying Examination Committee (QEC) has met twice since its last report to Board on June 12, 2026.

On June 22, 2026 and July 9, 2026, a subgroup of professional members of the QEC and item writers met by teleconference to review the independent psychometrician's analysis for the MCQ and OSCE. Items identified as problematic were presented and reviewed by the subgroup for deletion or kept in scoring. In the psychometric analysis, there were:

- 13 items from the MCQ exam that were presented to the Committee for further review, of which nine (9) items were deleted to ensure the validity of the candidates' scores.
- 20 items from the OSCE that were presented to the Committee for further review, of which nine (9) items were deleted to ensure the validity of the candidates' scores

Qualifying Examination (QE) results were released on July 15, 2026. Candidates who were unsuccessful on the MCQ and/or OSCE components of the QE were provided with a detailed performance report. The candidate performance reports issued in June 2026 were revised and updated to include additional information to assist candidates in focusing their preparations for future reassessments.

June 2026 Qualifying Examination

- The MCQ component of the QE was held remotely on June 2, 2026.
    - A total of 56 candidates participated in the exam. A total of 56 candidates successfully registered and completed the exam virtually by means of remote proctoring.
- The OSCE component of the QE was hosted by the College on June 13 & 14, 2026 at the David Braley Health Centre in Hamilton, ON.
    - A total of 54 candidates attempted the exam.

June 2026 Results

MCQ Pass Rates	June 2026	Annualized Data		
		February 2026	June 2025[1]	February 2025[1]
All candidates	**52%**	65%	46%	48.2%
1st time candidates only	**60%**	65%	60%	59.4%
Repeat candidates only[2]	**18%**	N/A	N/A	N/A

MCQ Attempts	1st	2nd	3rd	Total
Number of candidates	45	11	N/A	56
Number of successful candidates	27	--[3]	N/A	--[3]

OSCE Pass Rates	June 2026	Annualized Data		
		February 2026	June 2025	February 2025
All candidates	**57%**	70%	63.5%	65%
1st time candidates only	**64%**	70%	62.2%	64%
Repeat candidates only[2]	**22%**	N/A	N/A	N/A

OSCE Attempts	1st	2nd	3rd	Total
Number of candidates	45	9	N/A	54
Number of successful candidates	29	--[3]	N/A	--[3]

Annualized Statistics Summary[4]

All Candidates

	2024				2025				2026			
	MCQ Candidates	MCQ Pass Rate	OSCE Candidates	OSCE Pass Rate	MCQ Candidates	MCQ Pass Rate	OSCE Candidates	OSCE Pass Rate	MCQ Candidates	MCQ Pass Rate	OSCE Candidates	OSCE Pass Rate
New*	58	66%	57	65%	63	60%	62	63%	108	63%	88	67%
Repeat	26	12%	18	33%	46	28%	27	67%	11	18%	9	22%
All	84	49%	75	57%	109	47%	89	65%	119	59%	97	63%

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

[1] Multi-jurisdictional MCQ results.
[2] June 2026 was the first repeat administration (QE attempts started counting in February 2026).
[3] Reportable data sets of 4 or less will not be published to protect the privacy of candidates.
[4] For both February and June QE administrations combined; 2024 and 2025 MCQ results are multi-jurisdictional.

COLLEGE OF DENTURISTS OF ONTARIO

COMMITTEE REPORT TO THE BOARD

Name of Committee:	**Qualifying Examination Appeals Committee**
Reporting Date:	**September 18, 2026**
Number of Meetings since last Board Meeting:	**1**

The Qualifying Examination Appeals Committee met once since its last report to the Board on June 12, 2026.

At their August 18, 2026, meeting, the Qualifying Examination Appeals Committee heard from four (4) appellants from the June 2026 MCQ and OSCE administrations. The Committee rendered four (4) decisions – three (3) appeals denied, and one (1) appeal granted. No outstanding appeals remain.

Respectfully submitted by Gaganjot Singh
Chair of the Qualifying Examination Appeals Committee

HILBORN LLP

PRIVATE AND CONFIDENTIAL

June 8, 2026

Roderick Tom-Ying
Registrar and CEO
College of Denturists of Ontario
175 Bloor Street East
Suite 601, North Tower
Toronto, Ontario
M4W 3R8

Kristine Bailey
Chair
College of Denturists of Ontario
175 Bloor Street East
Suite 601, North Tower
Toronto, Ontario
M4W 3R8

re: College of Denturists of Ontario (the "College")

The purpose of this letter (the “Agreement”) is to confirm the understanding between the College of Denturists of Ontario and Hilborn LLP (the "Firm") in respect of our engagement to audit the financial statements of the College of Denturists of Ontario for the year ended March 31, 2026, which comprise the statement of financial position as at March 31, 2026, 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. We also plan to issue a report on the summary financial statements derived from the financial statements referred to above.

We are pleased to confirm our acceptance and our understanding of this audit engagement by means of this letter.

Objective, Scope and Limitations

Our audit will be conducted with the objective of forming and expressing our opinion on the financial statements that have been prepared by management with the oversight of those charged with governance. The audit of the financial statements does not relieve management or those charged with governance of their responsibilities.

Our statutory function as auditor of the College is to report to the Board of Directors by expressing an opinion on the annual financial statements of the College. We will conduct our audit in accordance with Canadian generally accepted auditing standards.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

An auditor conducting an audit in accordance with Canadian generally accepted auditing standards obtains reasonable assurance that the financial statements taken as a whole are free of material misstatement, whether caused by fraud or error. It is important to recognize that an auditor cannot obtain absolute assurance that material misstatements in the financial statements will be detected because of:

Objective, Scope and Limitations (continued)

(a) factors such as use of judgment, and the use of testing of the data underlying the financial statements;

(b) inherent limitations of internal control; and

(c) the fact that much of the audit evidence available to the auditor is persuasive rather than conclusive in nature.

Because of the inherent limitations of an audit, together with the inherent limitations of internal control, there is an unavoidable risk that some material misstatements may not be detected even though the audit is properly planned and performed in accordance with Canadian generally accepted auditing standards.

Furthermore, because of the nature of fraud, including attempts at concealment through collusion and forgery, an audit designed and executed in accordance with Canadian generally accepted auditing standards may not detect a material fraud. While effective internal control reduces the likelihood that misstatements will occur and remain undetected, it does not eliminate that possibility. For these reasons, we cannot guarantee that fraud, error and illegal acts, if present, will be detected when conducting an audit in accordance with Canadian generally accepted auditing standards.

In making our risk assessments, we consider internal control relevant to the preparation and fair presentation of the financial statements by management 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. However, we will communicate to you in writing concerning any significant deficiencies in internal control relevant to the audit of the financial statements that we have identified during the audit.

Reporting

Unless unanticipated difficulties are encountered, our reports will be substantially in the following form. If we conclude that a modification to our opinion on the financial statements is necessary, we will discuss the reasons with you in advance.

Independent Auditor's Report

To the Board of Directors 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, 2026, 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, 2026, 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.

Reporting (continued)

Independent Auditor's Report (continued)

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.

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.

Reporting (continued)

Independent Auditor's Report (continued)

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

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the 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

Chartered Professional Accountants
Licensed Public Accountants

Summary Financial Statements

Report of the Independent Auditor on the Summary Financial Statements

To the Board of Directors of the College of Denturists of Ontario

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2026, and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Denturists of Ontario (the "College") for the year ended March 31, 2026.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Reporting (continued)

Summary Financial Statements (continued)

Report of the Independent Auditor on the Summary Financial Statements (continued)

Opinion (continued)

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria described in the note to the summary financial statements.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of the College and the auditor's report thereon.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated TBD.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria described in the note to the summary financial statements.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.

Toronto, Ontario
Date

Chartered Professional Accountants
Licensed Public Accountants

Our Responsibilities

We will perform our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements present fairly, in all material respects, the financial position, operations, changes in net assets and cash flows of the College in accordance with Canadian accounting standards for not-for-profit organizations. Accordingly, we will plan and perform our audit to provide reasonable, but not absolute, assurance of detecting fraud and errors, including illegal acts, which have a material effect on the financial statements taken as a whole.

One of the underlying principles of the profession is a duty of confidentiality with respect to client affairs. Accordingly, except for information that is in or enters the public domain, we will not provide any third party with confidential information concerning the affairs of the College without the prior consent of the College, unless required to do so by legal authority, or the Chartered Professional Accountants of Ontario Code of Professional Conduct.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Our Responsibilities (continued)

We have considered the relationships between us and the College (including related entities) that, in our professional judgment, may reasonably be thought to bear on our independence. We confirm our independence with respect to the College.

The objective of our audit is to obtain reasonable assurance that the financial statements are free of material misstatement. However, if we identify any of the following matters, they will be communicated to the appropriate level of management:

(a) misstatements, resulting from error, other than trivial errors;

(b) fraud or any information obtained that indicates that fraud may exist;

(c) any evidence obtained that indicates that an illegal or possibly illegal act has occurred;

(d) significant deficiencies in the design or implementation of internal control to prevent and detect fraud or error; and

(e) related party transactions identified by us that are not in the normal course of operations and that involve significant judgments made by management concerning measurement or disclosure.

The matters communicated will be those that we identify during the course of our audit. Audits do not usually identify all matters that may be of interest to management in discharging its responsibilities. The type and significance of the matter to be communicated will determine the level of management to which the communication is directed.

We will consider the internal control of the College to identify types of potential misstatements, consider factors that affect the risks of material misstatement, and design the nature, timing and extent of audit procedures to be executed. This consideration will not be sufficient to enable us to render an opinion on the effectiveness of the internal control of the College.

Management's Responsibilities

Our audit will be conducted on the basis that management acknowledges and understands that they are responsible for:

<u>Financial statements</u>

(a) the preparation and fair presentation of the financial statements of the College in accordance with Canadian accounting standards for not-for-profit organizations;

<u>Summary financial statements</u>

(b) the preparation of the summary financial statements prepared on a basis that is consistent, in all material respects, with the audited financial statements;

(c) making the audited financial statements available to the intended users of the summary financial statements and;

Management's Responsibilities (continued)

Summary financial statements (continued)

(d) including the auditor's report on the summary financial statements in any document that contains the summary financial statements and that indicates that the auditor has reported on them;

Completeness of information

(e) providing us with complete financial records and related data, and copies of all minutes of meetings of directors and committees of directors;

(f) providing us with information relating to any known or probable instances of non-compliance with legislative or regulatory requirements, including financial reporting requirements;

(g) providing us with information relating to any illegal or possibly illegal acts, and all facts related thereto;

(h) providing us with information regarding all related parties and related party transactions;

(i) providing us with any additional information that we may request from management for the purpose of this audit;

(j) providing us with unrestricted access to persons within the College from whom we determine it necessary to obtain audit evidence;

Fraud and error

(k) designing, implementing, and maintaining internal control that management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error;

(l) providing us with an assessment of the risk that the financial statements may be materially misstated as a result of fraud;

(m) providing us with information relating to fraud or suspected fraud affecting the College involving:

  (i) management;

  (ii) employees who have significant roles in internal control; or

  (iii) others, where the fraud could have a non-trivial effect on the financial statements;

(n) providing us with information relating to any allegations of fraud or suspected fraud affecting the financial statements of the College as communicated by employees, former employees, regulators or others;

(o) communicating its belief that the effects of any uncorrected financial statement misstatements, including misstatements related to financial statement presentation and disclosure, aggregated during the audit are immaterial, both individually and in the aggregate, to the financial statements taken as a whole;

Management's Responsibilities

Recognition, measurement and disclosure

(p) providing us with its assessment of the reasonableness of significant assumptions underlying fair value measurements and disclosures in the financial statements;

(q) providing us with details of any plans or intentions that may affect the carrying value or classification of assets or liabilities;

(r) providing us with information relating to the measurement and disclosure of transactions with related parties;

(s) providing us with an assessment of all areas of measurement uncertainty known to management that are required to be disclosed in accordance with Canadian accounting standards for not-for-profit organizations;

(t) providing us with information relating to claims and possible claims, whether or not they have been discussed with legal counsel of the College;

(u) providing us with information relating to other liabilities and contingent gains or losses, including those associated with guarantees, whether written or oral, under which the College is contingently liable;

(v) providing us with information on whether the College has satisfactory title to assets, whether liens or encumbrances on assets exist, or whether assets are pledged as collateral;

(w) providing us with information relating to compliance with aspects of contractual agreements that may affect the financial statements;

(x) providing us with information concerning subsequent events; and

Written confirmation of significant representations

(y) providing us with written confirmation of significant representations communicated to us during the engagement on matters that are:

i) directly related to items that are material, either individually or in aggregate, to the financial statements;

ii) not directly related to items that are material to the financial statements but are significant, either individually or in aggregate, to the audit engagement; and

iii) relevant to your judgments or estimates that are material, either individually or in aggregate, to the financial statements.

If such representations are not provided in writing, management acknowledges and understands that we would be required to disclaim an audit opinion.

We will communicate any misstatements identified during the audit engagement other than those that are clearly trivial. We request that management correct all the misstatements communicated.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions

Use of Personal Information

It is acknowledged that we will have access to all personal information in your custody that we require to complete our audit engagement. Our services are provided on the basis that:

1. You represent to us that management has obtained any required consents for the collection, use and disclosure to us of personal information required under applicable privacy legislation; and
2. We will hold all personal information in compliance with our Privacy Policy, which is viewable on our website at www.hilbornca.com.

Confidentiality

Hilborn LLP will maintain the strictest confidence with respect to client information. Accordingly, your confidential information will not, without your consent, be disclosed to anyone not employed or engaged by Hilborn LLP (in Canada or abroad) for the purposes of performing services hereunder, except as required by law or in accordance with the profession's Code of Professional Conduct.

Working Papers

The working papers, files, other materials, reports and work created, developed or performed by our Firm during the course of the engagement are the property of our Firm, constitute confidential information and will be retained by us in accordance with our Firm's policies and procedures.

During the course of our work, we may provide, for your own use, certain software, spreadsheets and other intellectual property to assist with the provision of our services. Such software, spreadsheets and other intellectual property must not be copied, distributed or used for any other purpose. We also do not provide any warranties in relation to these items and will not be liable for any damage or loss incurred by you in connection with your use of them.

We retain all intellectual property rights in any original materials provided to you.

File Inspections

In accordance with professional regulations and by Firm policy, our client files must periodically be reviewed by CPA Ontario practice inspectors and other file quality reviewers to ensure that we are adhering to professional and Firm standards. File reviewers are required to maintain confidentiality of client information.

Use and Distribution of Our Report

Our independent auditor's report on the financial statements and independent auditor's report on the summary financial statements (referred to as our reports) will be issued solely for the use of the College and those to whom our independent auditor's report is specifically addressed by us. We make no representations of any kind to any third party in respect of the financial statements and we accept no responsibility for their use by any third party.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions (continued)

Use and Distribution of Our Report (continued)

We ask that our name be used only with our consent and that any information to which we have attached a communication be issued with that communication, unless otherwise agreed to in writing by us.

Reproduction of Our Report

If reproduction or publication of our independent auditor's report (or reference to our independent auditor's report) is planned in an annual report or other document, including electronic filings or posting of the annual report on a website, a copy of the entire document should be submitted to us in sufficient time for our review before the publication or posting process begins.

Management is responsible for the accurate reproduction of the financial statements, the independent auditor's report and other related information contained in an annual report or other public document (electronic or paper-based). This includes any incorporation by reference to either the full or summarized financial statements that we have audited.

We are not required to read the information contained in your website or to consider the consistency of other information on the electronic site with the audited financial statements.

Accounting Advice

Except as outlined in this letter, this audit engagement does not contemplate the provision of specific accounting advice or opinions or the issuance of a written report on the application of accounting standards to specific transactions and to the facts and circumstances of the College. Such services, if requested, would be provided under a separate agreement.

Other Services

In addition to the audit services referred to above, we may, as allowed by our provincial Code of Professional Conduct, provide other services (for example, preparation of special reports or other reporting services) as required. Management will provide the information necessary to complete these other services. Management is responsible for filing all reports with the appropriate authorities on a timely basis. We will discuss such services with you prior to undertaking any work and will establish an appropriate fee arrangement with you before incurring any costs.

Governing Legislation

This Agreement is subject to and governed by the laws of the Province of Ontario. The Province of Ontario will have exclusive jurisdiction in relation to any claim, dispute or difference concerning this Agreement and any matter arising from it. Each party irrevocably waives any right it may have to object to any action being brought in those courts, to claim that the action has been brought in an inappropriate forum, or to claim that those courts do not have jurisdiction.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions (continued)

Fees at Regular Billing Rates

Our fees for the audit engagement described above will be based on our regular billing rates plus direct out-of-pocket expenses and applicable HST and are due when invoices are rendered.

Costs of Responding to Government Information Requests, etc.

If, with respect to this audit engagement or related services, we are required as a result of actions or demands placed upon or initiated by the College, government regulation, subpoena, or other legal process to produce our working papers, or to respond to information requests, such work will be outside the scope of this audit engagement. We will discuss such matters with you prior to undertaking any work and will establish an appropriate fee arrangement with you before incurring any costs.

Communications

You agree that in connection with this audit engagement, we may communicate with you or others via telephone, facsimile, post, courier, email, or other electronic media. Given the inherent risks associated with the electronic transmission of information on the internet or otherwise, Hilborn LLP does not guarantee the security or integrity of any electronic communications sent or received in relation to this engagement nor does Hilborn LLP guarantee that transmissions will be free from interception or infection including, but not limited to, “malware”, “spyware”, “ransomware”, and “worms”.

We specifically disclaim, and you release us from, any liability or responsibility related to interception of communications, unintentional disclosure of communications, viruses or ‘malware’, or any other similar form of data breach, indirect, punitive, exemplary, or special, without limitation and including:

(a) losses of data, revenues or anticipated profits;
(b) losses flowing from the impersonation of an identity; or
(c) losses relating to payment of a ‘ransom’ to release data.

It is our Firm policy to use certain file sharing services we have designated, including Microsoft OneDrive, for the purposes of file sharing. Where you authorize and / or request Hilborn LLP to use any file sharing service other than those designated by Hilborn LLP to download, upload, amend or otherwise access in any manner your information stored and/or located on such file sharing services, you acknowledge that this may lead to a loss or unintended exposure of your confidential information to unintended audiences. You expressly accept that any such exposure and/or release of confidential information as a result of using such services will not be the responsibility of Hilborn LLP and you will indemnify Hilborn LLP for any losses incurred as a result of loss or exposure of your information arising from the use of such file sharing services.

Termination

Management acknowledges and understands that failure to fulfill its obligations as set out in this Agreement will result, upon written notice, in the termination of this Agreement.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions (continued)

Termination (continued)

Either party may terminate this Agreement for any reason upon providing written notice to the other party not less than 30 calendar days before the effective date of termination. If early termination takes place, the College shall be responsible for all time and expenses incurred up to the termination date.

If we are unable to complete the audit engagement or are unable to come to a conclusion on the financial statements, we may withdraw from the engagement before issuing our audit report, or we may issue a denial of assurance on the financial statements. If this occurs, we will communicate the reasons and provide details.

Other Matters

Neither party to this Agreement will directly or indirectly agree to assign, transfer or sell to anyone any claim against the other party arising out of this Agreement, except that the College may assign its rights to any such claim to its insurer.

Hilborn LLP is a limited liability partnership. The individuals involved in the audit engagement and related services will be partners, employees and subcontractors of the partnership. The total aggregate liability of Hilborn LLP and any of its partners, employees and subcontractors for all claims, losses, liabilities and damages as a result of breach of contract, tort (including negligence), or otherwise, arising from any professional services performed or not performed by Hilborn LLP or by any of its partners, employees and subcontractors for you, shall be limited to the amount of professional liability insurance available for your claim. You further acknowledge and agree that this provision may be pleaded as a complete estoppel to any claim by you for damages in excess of the foregoing amount.

Our liability shall be several and not joint and several. We shall only be liable for our proportionate share of any loss or damage, based on our contribution relative to the others' contributions. In addition, we will not be liable in any event for consequential, incidental, indirect, punitive, exemplary, aggravated or special damages, including any amount for loss of profit, data or goodwill, whether or not the likelihood of such loss or damage was contemplated.

We will use all reasonable efforts to complete the audit engagement as described in this Agreement within the agreed upon time frames. However, we shall not be liable for failures or delays in performance that arise from causes beyond our control, including the untimely performance by the College of its obligations.

Conclusion

This Agreement reflects the entire agreement between the College and Hilborn LLP relating to the services described herein and supersedes any previous proposals, correspondence and understandings, whether written or oral. The agreements of the College and Hilborn LLP contained herein shall survive the completion or termination of this Agreement.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Acknowledgement

Please confirm your agreement with the above terms by signing a copy of this Agreement in the space provided and return it to us.

We are pleased to have this opportunity to serve you and assure you that this audit engagement will be given our close attention.

Yours very truly,

Hilborn LLP

I.B. MacKenzie/cbj

Chartered Professional Accountants

The services and terms set out above are as agreed.

College of Denturists of Ontario

Roderick Tom-Ying, Registrar and CEO

Kristine Bailey, Chair

HILBORN

College of Denturists of Ontario

AUDIT PLAN COMMUNICATION
FOR THE YEAR ENDED

March 31, 2026

A message from Blair MacKenzie to the Board of Directors

We are pleased to present our Audit Plan Communication for the financial statements of the College of Denturists of Ontario ("the College") for the year ended March 31, 2026. This document outlines our approach to the audit and related matters of interest and is designed to foster effective two-way communication with you. Communication with each other is important; it helps us understand the significant transactions and events impacting the College and helps you fulfill your responsibility to oversee the financial reporting process of the College of Denturists of Ontario.

Key Highlights of our Audit Plan Communication include:

- Identification of significant risks and other areas of focus
- Details of our audit strategy
- Explanation of how we leverage new technologies to enhance audit quality and efficiency
- Ways to elevate your oversight and impact

The information in this document is intended solely for the use of the Board of Directors and management of the College of Denturists of Ontario and should not be distributed to others without our consent.

We look forward to discussing our Audit Plan Communication with you in detail as well as any other matters that you may consider appropriate.

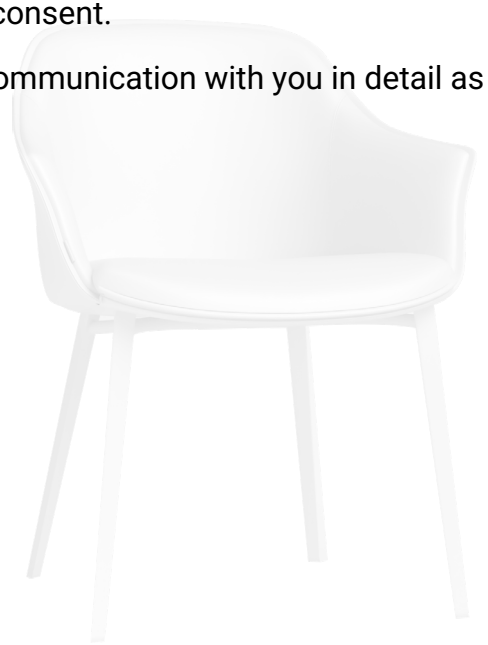
Hilborn LLP

Blair MacKenzie CPA, CA

Managing Partner

Hilborn LLP

June 8, 2026



"We are committed to providing an exceptional audit experience."

Contents

YOUR CLIENT SERVICE TEAM

Blair MacKenzie, CPA, CA
Engagement Partner
bmackenzie@hilbornca.com

Cassidy Johnson, CPA
Manager
cjohnson@hilbornca.com

Kevin Ballentyne, CPA
Supervisor
kballentyne@hilbornca.com

Amrit Bhandal
Senior Associate
abhandal@hilbornca.com

"We prioritize relationship building. We listen carefully to what matters to you most."

Executive Summary

OBJECTIVE

Our objective is to express an opinion on the financial statements that have been prepared by management with the oversight of those charged with governance. The performance of this audit does not relieve management or those charged with governance of their responsibilities. Our engagement letter, contained in Appendix A, contains discussion regarding our responsibilities and your responsibilities.

MATERIALITY

Materiality has been calculated based on qualitative and quantitative factors. Materiality is $80,000 for the year ended March 31, 2026.

Our materiality calculation is preliminary. In the event that actual results vary significantly from those used to calculate materiality, we will communicate these changes to you in our audit findings communication.

RECENTLY ISSUED ACCOUNTING AND AUDITING STANDARDS

There are no recently issued accounting and auditing standards that impact the College.

FRAUD DISCUSSION AND OTHER INQUIRIES

We are not aware of fraud affecting the College. If you are aware of actual, suspected or alleged fraud affecting the College of Denturists of Ontario, we request that you provide us with this information. See page 6 for further discussions related to fraud.

Please bring to our attention any significant matters of which you are aware, including but not limited to:

- Business risks;
- Non-compliance with laws and regulations;
- Significant communications with external parties such as regulatory authorities, suppliers and legal counsel.

INDEPENDENCE

We are independent. We have complied with the relevant ethical requirements regarding independence. We will communicate all relationships and matters that may reasonably be thought to bear on our independence, if any, and where applicable, related safeguards.

AUDIT APPROACH

Our audit is risk-based in design. See pages 8-9 for significant risks and other areas of focus.

Materiality

Materiality is used to scope the audit, identify risks of material misstatement and evaluate the level at which we think misstatements will reasonably influence the economic decisions of users of the financial statements. The calculation of materiality considers both quantitative and qualitative factors. We will communicate, in our Audit Findings Communication, any uncorrected or corrected misstatements identified that we think are relevant to the responsibility of the Board of Directors to oversee the financial reporting of the College.

MATERIALITY DETERMINATION	COMMENTS	AMOUNT
Overall materiality	Overall materiality is based on the users of the financial statements and is calculated with reference to quantitative and qualitative factors.	$80,000
Performance materiality	Performance materiality is used to reduce (to an acceptable level) the probability that the aggregate of uncorrected/undetected misstatements exceeds overall materiality and is calculated as 75% of overall materiality.	$60,000
Trivial misstatements	The threshold for misstatements that would be clearly trivial to the overall financial statements. It is calculated as 10% of performance materiality.	$6,000

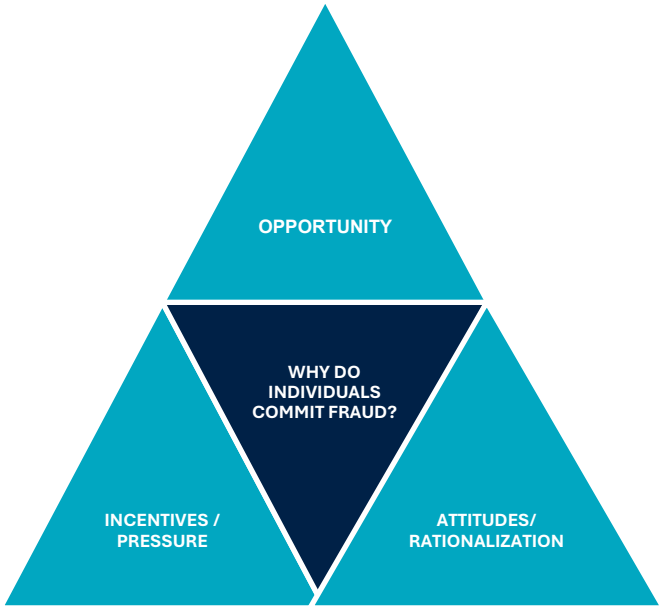
Risk of Fraud

Canadian Auditing Standards require us to discuss fraud risk with the Risk, Audit and Finance Committee on an annual basis. We inquire with you about your views on fraud; whether you have knowledge of fraud, either actual, suspected or alleged, including those involving management, including what fraud detection or protection measures are in place. We will have detailed fraud discussions with management during the course of the audit.

At the conclusion of the audit, we will request written representations from management that they have disclosed to us management's fraud risk assessment and their knowledge of actual, suspected or alleged fraud affecting the College.

"Technology is evolving the fraud landscape, with new approaches that make it easier to commit fraud and more difficult to detect.

Three conditions are generally present when fraud occurs. This is commonly known as the fraud triangle."



Stakeholder Responsibilities with Respect to Fraud

Management: Creating an environment that promotes ethical behaviour and establishing internal controls that can identify fraud timely.

Those Charged with Governance: Oversee a risk management process that incorporates fraud risks and links fraud risks to controls and processes that mitigate those risks.

Auditor: Perform procedures to address identified fraud risks, including leveraging technology, such as data analytics. Exercise professional skepticism by recognizing that an error or fraud could exist.

Independence

We last communicated our independence to you through our Audit Findings Communication dated November 18, 2025. We have remained independent since that date and through the date of this communication.

The following table explains the threats to independence identified by us and the safeguards put in place to eliminate or reduce the threats to an acceptably low level.

IDENTIFIED THREAT	SAFEGUARD	WHY EFFECTIVE
Self-review	• Independent reviews of the financial statements by Hilborn LLP as well as by management and the Board of Directors.	Provides an objective evaluation of the significant judgements made and the conclusions reached by the engagement team.
Objectivity and familiarity	• Emphasis on exercising professional skepticism throughout the audit by the Engagement Partner and audit team.	Results in an audit carried out with a respectful, but questioning mindset to dispel any perceived familiarity threats.
Provision of non-assurance services	• We obtain pre-approval of all services from management and the Board of Directors. • We obtain management's acknowledgement of its responsibility for the results of the work performed by us regarding non-assurance services, if any.	No services beyond the audit have been provided. We do not make any management decisions or assume any responsibility for such decisions.

Audit Approach

Our audit approach includes extensive partner and manager involvement in all aspects of the planning and execution of the audit. We will perform a risk-based audit, which allows us to focus our audit effort on significant risks and other areas of focus that may be of concern to management and those charged with governance. If there are any areas where you would like to request additional procedures to be performed, please let us know.

INTERNAL CONTROL

Our audit includes gaining an understanding of internal control. We use this understanding to determine the nature, timing and extent of our audit procedures. We will communicate any significant deficiencies in internal control that we identify. Our consideration of internal controls will not be sufficient to enable us to render an opinion on the effectiveness of internal control over financial reporting.

SIGNIFICANT RISKS	WHY	OUR AUDIT STRATEGY
Revenue recognition	This is a presumed fraud risk for all entities under Canadian Auditing Standards.	Our audit methodology incorporates the required procedures in the CASs to address this risk. We design and execute tests of details and analytical procedures to reduce the risk of a material misstatement to an acceptably low level.
Management override of controls	This is a presumed fraud risk for all entities under Canadian Auditing Standards. We have not identified any specific additional risks of management override relating to this audit.	We perform testing over journal entries and other adjustments, review estimates and evaluate the rationale of significant or unusual transactions. We incorporate an element of unpredictability in the nature, timing and extent of our audit procedures.

Audit Approach

OTHER AREAS OF FOCUS	AUDIT STRATEGY
Deferred revenue	Analytical and variance review, review of registration fees received in the current fiscal year on account of the registration year ending in the next fiscal year. Predictive tests of deferred revenue and registration fees including the review of the consistent application of accounting policies.
Complaints and discipline	Review case continuity reconciliation, average cost determination and amounts accrued for open cases, retrospective analysis and cost analytical procedures. Corroborate estimates and case facts with staff responsible for managing complaints and discipline.
Expenses / Accounts Payable	Perform a search for unrecorded liabilities (cut-off) and perform analytical procedures. Obtain an understanding of initiatives undertaken by the College which may require accrual of expenses. Understand management's expectations for current year operations. Analyze and vouch certain expense accounts and review allocation of expenses. Perform tests of a predictive nature. Confirm reported facts, circumstances and transaction terms.

How We Deliver High-Quality Audits

PEOPLE. PROCESSES. PROFESSIONAL JUDGEMENT.

- TRAINING & PERFORMANCE EVALUATION
- HIRE AND RETAIN COLLABORATIVE PEOPLE
- CUSTOMIZED APPROACH TO EACH AUDIT
- TWO-WAY COMMUNICATION
- TIMELY DELIVERABLES
- ENGAGEMENT QUALITY REVIEWS
- INTERNAL MONITORING
- EXTENSIVE INDUSTRY EXPERIENCE

Our Audit Technology

We are committed to enhancing the audit experience by using the latest secure audit technologies and processes.

IT SECURITY

Malware protection
Data encryption
Firm level governance
Authentication
Staff awareness training

ONE DRIVE

Secure client portal for real-time collaboration and information exchange. Your data is safe with us.

CASEWARE

A comprehensive audit software that enhances workflow, promotes collaboration, and streamlines the audit procedures.

Audit Timeline

The following schedule outlines the anticipated timing of the audit of the financial statements of the College.

Required Communications

In accordance with Canadian Auditing Standards, there are a number of communications that are required in connection with an audit relevant to those charged with governance's oversight of the financial reporting process. Those communications will primarily be written in the form of our Audit Plan Communication and Audit Findings Communication. We may also communicate orally through discussions. The table below indicates the nature of the communications and when you can expect to receive the communication.

PRE-AUDIT AND PLANNING STAGE	EXECUTION, CONCLUSION, AND REPORTING STAGES
Auditor's Responsibilities	Significant findings or issues arising from the audit*
Auditor independence	Significant difficulties, if any, encountered*
Planned scope and timing of the audit	Significant qualitative aspects of the College's accounting practices including accounting policies, accounting estimates and financial statements disclosures
Matters related to fraud*	Subsequent events and going concern matters
Non-compliance with laws and regulations*	Written representations requested from management
Expected form of the Auditor's Report and management representations letter*	Significant deficiencies in internal control*

*Indicates communications that may occur during the pre-audit/planning phase of the audit and/or at the conclusion of the audit, or at the time at which we identify such matters, based on our judgement. Management will provide us in writing with confirmation of significant representations provided during the engagement (See Appendix B for draft management representations letter).

Elevate Your Oversight and Impact

Those charged with governance have a fiduciary duty to oversee and monitor the financial reporting processes and internal control environment of the College. Discover how Committees and Boards are partnering with CPAs to elevate their oversight and impact.

Learn More

Governance Areas	Helping You Navigate the Governance Landscape
Oversight of financial reporting processes and the internal control environment (including IT governance)	An organization's system of internal control mitigates risk to acceptable levels and supports sound decision making and good governance. Internal controls are more than policies and procedures manuals; they are actions taken by employees, management and those charged with governance to safeguard assets, produce reliable and accurate financial reports, and ensure compliance with laws and regulations. As organizations evolve, with personnel changes, technology advancements, and operating environments become more complex, those charged with governance are periodically performing a comprehensive review of the financial reporting processes and internal control environment.
Fraud	Board members, particularly finance committee and audit committee members are focusing on the organization's most critical risk areas and what the organization's responses to the risks are. With fraud awareness education training, risks related to fraud can be better managed and mitigated.
Financial literacy	Understanding a board member's fiduciary duties and oversight responsibilities is important, from maintaining confidentiality, to being prepared for meetings, to asking the appropriate questions of management. Boards are taking a hard look at their onboarding and continuous financial literacy education to enhance and maintain the board's impact.
Compliance monitoring	Compliance monitoring involves evaluations as to whether the policies of the Organization are being complied with. This evaluation is often performed when new IT systems are adopted, after key personnel changes and when there are changes in operations. Boards have an important role to play in approving changes to policies and procedures, internal controls, and understanding control deviations. Further, monitoring compliance with policies and procedures as well as laws and regulations, is important in evaluating management's performance.

APPENDIX A

HILBORN LLP

PRIVATE AND CONFIDENTIAL

June 8, 2026

Roderick Tom-Ying
Registrar and CEO
College of Denturists of Ontario
175 Bloor Street East
Suite 601, North Tower
Toronto, Ontario
M4W 3R8

Kristine Bailey
Chair
College of Denturists of Ontario
175 Bloor Street East
Suite 601, North Tower
Toronto, Ontario
M4W 3R8

re: College of Denturists of Ontario (the "College")

The purpose of this letter (the “Agreement”) is to confirm the understanding between the College of Denturists of Ontario and Hilborn LLP (the "Firm") in respect of our engagement to audit the financial statements of the College of Denturists of Ontario for the year ended March 31, 2026, which comprise the statement of financial position as at March 31, 2026, 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. We also plan to issue a report on the summary financial statements derived from the financial statements referred to above.

We are pleased to confirm our acceptance and our understanding of this audit engagement by means of this letter.

Objective, Scope and Limitations

Our audit will be conducted with the objective of forming and expressing our opinion on the financial statements that have been prepared by management with the oversight of those charged with governance. The audit of the financial statements does not relieve management or those charged with governance of their responsibilities.

Our statutory function as auditor of the College is to report to the Board of Directors by expressing an opinion on the annual financial statements of the College. We will conduct our audit in accordance with Canadian generally accepted auditing standards.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

An auditor conducting an audit in accordance with Canadian generally accepted auditing standards obtains reasonable assurance that the financial statements taken as a whole are free of material misstatement, whether caused by fraud or error. It is important to recognize that an auditor cannot obtain absolute assurance that material misstatements in the financial statements will be detected because of:

Objective, Scope and Limitations (continued)

(a) factors such as use of judgment, and the use of testing of the data underlying the financial statements;

(b) inherent limitations of internal control; and

(c) the fact that much of the audit evidence available to the auditor is persuasive rather than conclusive in nature.

Because of the inherent limitations of an audit, together with the inherent limitations of internal control, there is an unavoidable risk that some material misstatements may not be detected even though the audit is properly planned and performed in accordance with Canadian generally accepted auditing standards.

Furthermore, because of the nature of fraud, including attempts at concealment through collusion and forgery, an audit designed and executed in accordance with Canadian generally accepted auditing standards may not detect a material fraud. While effective internal control reduces the likelihood that misstatements will occur and remain undetected, it does not eliminate that possibility. For these reasons, we cannot guarantee that fraud, error and illegal acts, if present, will be detected when conducting an audit in accordance with Canadian generally accepted auditing standards.

In making our risk assessments, we consider internal control relevant to the preparation and fair presentation of the financial statements by management 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. However, we will communicate to you in writing concerning any significant deficiencies in internal control relevant to the audit of the financial statements that we have identified during the audit.

Reporting

Unless unanticipated difficulties are encountered, our reports will be substantially in the following form. If we conclude that a modification to our opinion on the financial statements is necessary, we will discuss the reasons with you in advance.

Independent Auditor's Report

To the Board of Directors 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, 2026, 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, 2026, 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.

Reporting (continued)

Independent Auditor's Report (continued)

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.

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.

Reporting (continued)

Independent Auditor's Report (continued)

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

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the 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

Chartered Professional Accountants
Licensed Public Accountants

Summary Financial Statements

Report of the Independent Auditor on the Summary Financial Statements

To the Board of Directors of the College of Denturists of Ontario

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2026, and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Denturists of Ontario (the "College") for the year ended March 31, 2026.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Reporting (continued)

Summary Financial Statements (continued)

Report of the Independent Auditor on the Summary Financial Statements (continued)

Opinion (continued)

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria described in the note to the summary financial statements.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of the College and the auditor's report thereon.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated TBD.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria described in the note to the summary financial statements.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.

Toronto, Ontario
Date

Chartered Professional Accountants
Licensed Public Accountants

Our Responsibilities

We will perform our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements present fairly, in all material respects, the financial position, operations, changes in net assets and cash flows of the College in accordance with Canadian accounting standards for not-for-profit organizations. Accordingly, we will plan and perform our audit to provide reasonable, but not absolute, assurance of detecting fraud and errors, including illegal acts, which have a material effect on the financial statements taken as a whole.

One of the underlying principles of the profession is a duty of confidentiality with respect to client affairs. Accordingly, except for information that is in or enters the public domain, we will not provide any third party with confidential information concerning the affairs of the College without the prior consent of the College, unless required to do so by legal authority, or the Chartered Professional Accountants of Ontario Code of Professional Conduct.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Our Responsibilities (continued)

We have considered the relationships between us and the College (including related entities) that, in our professional judgment, may reasonably be thought to bear on our independence. We confirm our independence with respect to the College.

The objective of our audit is to obtain reasonable assurance that the financial statements are free of material misstatement. However, if we identify any of the following matters, they will be communicated to the appropriate level of management:

(a) misstatements, resulting from error, other than trivial errors;

(b) fraud or any information obtained that indicates that fraud may exist;

(c) any evidence obtained that indicates that an illegal or possibly illegal act has occurred;

(d) significant deficiencies in the design or implementation of internal control to prevent and detect fraud or error; and

(e) related party transactions identified by us that are not in the normal course of operations and that involve significant judgments made by management concerning measurement or disclosure.

The matters communicated will be those that we identify during the course of our audit. Audits do not usually identify all matters that may be of interest to management in discharging its responsibilities. The type and significance of the matter to be communicated will determine the level of management to which the communication is directed.

We will consider the internal control of the College to identify types of potential misstatements, consider factors that affect the risks of material misstatement, and design the nature, timing and extent of audit procedures to be executed. This consideration will not be sufficient to enable us to render an opinion on the effectiveness of the internal control of the College.

Management's Responsibilities

Our audit will be conducted on the basis that management acknowledges and understands that they are responsible for:

<u>Financial statements</u>

(a) the preparation and fair presentation of the financial statements of the College in accordance with Canadian accounting standards for not-for-profit organizations;

<u>Summary financial statements</u>

(b) the preparation of the summary financial statements prepared on a basis that is consistent, in all material respects, with the audited financial statements;

(c) making the audited financial statements available to the intended users of the summary financial statements and;

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Management's Responsibilities (continued)

Summary financial statements (continued)

(d) including the auditor's report on the summary financial statements in any document that contains the summary financial statements and that indicates that the auditor has reported on them;

Completeness of information

(e) providing us with complete financial records and related data, and copies of all minutes of meetings of directors and committees of directors;

(f) providing us with information relating to any known or probable instances of non-compliance with legislative or regulatory requirements, including financial reporting requirements;

(g) providing us with information relating to any illegal or possibly illegal acts, and all facts related thereto;

(h) providing us with information regarding all related parties and related party transactions;

(i) providing us with any additional information that we may request from management for the purpose of this audit;

(j) providing us with unrestricted access to persons within the College from whom we determine it necessary to obtain audit evidence;

Fraud and error

(k) designing, implementing, and maintaining internal control that management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error;

(l) providing us with an assessment of the risk that the financial statements may be materially misstated as a result of fraud;

(m) providing us with information relating to fraud or suspected fraud affecting the College involving:

  (i) management;

  (ii) employees who have significant roles in internal control; or

  (iii) others, where the fraud could have a non-trivial effect on the financial statements;

(n) providing us with information relating to any allegations of fraud or suspected fraud affecting the financial statements of the College as communicated by employees, former employees, regulators or others;

(o) communicating its belief that the effects of any uncorrected financial statement misstatements, including misstatements related to financial statement presentation and disclosure, aggregated during the audit are immaterial, both individually and in the aggregate, to the financial statements taken as a whole;

Management's Responsibilities

Recognition, measurement and disclosure

(p) providing us with its assessment of the reasonableness of significant assumptions underlying fair value measurements and disclosures in the financial statements;

(q) providing us with details of any plans or intentions that may affect the carrying value or classification of assets or liabilities;

(r) providing us with information relating to the measurement and disclosure of transactions with related parties;

(s) providing us with an assessment of all areas of measurement uncertainty known to management that are required to be disclosed in accordance with Canadian accounting standards for not-for-profit organizations;

(t) providing us with information relating to claims and possible claims, whether or not they have been discussed with legal counsel of the College;

(u) providing us with information relating to other liabilities and contingent gains or losses, including those associated with guarantees, whether written or oral, under which the College is contingently liable;

(v) providing us with information on whether the College has satisfactory title to assets, whether liens or encumbrances on assets exist, or whether assets are pledged as collateral;

(w) providing us with information relating to compliance with aspects of contractual agreements that may affect the financial statements;

(x) providing us with information concerning subsequent events; and

Written confirmation of significant representations

(y) providing us with written confirmation of significant representations communicated to us during the engagement on matters that are:

i) directly related to items that are material, either individually or in aggregate, to the financial statements;

ii) not directly related to items that are material to the financial statements but are significant, either individually or in aggregate, to the audit engagement; and

iii) relevant to your judgments or estimates that are material, either individually or in aggregate, to the financial statements.

If such representations are not provided in writing, management acknowledges and understands that we would be required to disclaim an audit opinion.

We will communicate any misstatements identified during the audit engagement other than those that are clearly trivial. We request that management correct all the misstatements communicated.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions

Use of Personal Information

It is acknowledged that we will have access to all personal information in your custody that we require to complete our audit engagement. Our services are provided on the basis that:

1. You represent to us that management has obtained any required consents for the collection, use and disclosure to us of personal information required under applicable privacy legislation; and
2. We will hold all personal information in compliance with our Privacy Policy, which is viewable on our website at www.hilbornca.com.

Confidentiality

Hilborn LLP will maintain the strictest confidence with respect to client information. Accordingly, your confidential information will not, without your consent, be disclosed to anyone not employed or engaged by Hilborn LLP (in Canada or abroad) for the purposes of performing services hereunder, except as required by law or in accordance with the profession's Code of Professional Conduct.

Working Papers

The working papers, files, other materials, reports and work created, developed or performed by our Firm during the course of the engagement are the property of our Firm, constitute confidential information and will be retained by us in accordance with our Firm's policies and procedures.

During the course of our work, we may provide, for your own use, certain software, spreadsheets and other intellectual property to assist with the provision of our services. Such software, spreadsheets and other intellectual property must not be copied, distributed or used for any other purpose. We also do not provide any warranties in relation to these items and will not be liable for any damage or loss incurred by you in connection with your use of them.

We retain all intellectual property rights in any original materials provided to you.

File Inspections

In accordance with professional regulations and by Firm policy, our client files must periodically be reviewed by CPA Ontario practice inspectors and other file quality reviewers to ensure that we are adhering to professional and Firm standards. File reviewers are required to maintain confidentiality of client information.

Use and Distribution of Our Report

Our independent auditor's report on the financial statements and independent auditor's report on the summary financial statements (referred to as our reports) will be issued solely for the use of the College and those to whom our independent auditor's report is specifically addressed by us. We make no representations of any kind to any third party in respect of the financial statements and we accept no responsibility for their use by any third party.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions (continued)

Use and Distribution of Our Report (continued)

We ask that our name be used only with our consent and that any information to which we have attached a communication be issued with that communication, unless otherwise agreed to in writing by us.

Reproduction of Our Report

If reproduction or publication of our independent auditor's report (or reference to our independent auditor's report) is planned in an annual report or other document, including electronic filings or posting of the annual report on a website, a copy of the entire document should be submitted to us in sufficient time for our review before the publication or posting process begins.

Management is responsible for the accurate reproduction of the financial statements, the independent auditor's report and other related information contained in an annual report or other public document (electronic or paper-based). This includes any incorporation by reference to either the full or summarized financial statements that we have audited.

We are not required to read the information contained in your website or to consider the consistency of other information on the electronic site with the audited financial statements.

Accounting Advice

Except as outlined in this letter, this audit engagement does not contemplate the provision of specific accounting advice or opinions or the issuance of a written report on the application of accounting standards to specific transactions and to the facts and circumstances of the College. Such services, if requested, would be provided under a separate agreement.

Other Services

In addition to the audit services referred to above, we may, as allowed by our provincial Code of Professional Conduct, provide other services (for example, preparation of special reports or other reporting services) as required. Management will provide the information necessary to complete these other services. Management is responsible for filing all reports with the appropriate authorities on a timely basis. We will discuss such services with you prior to undertaking any work and will establish an appropriate fee arrangement with you before incurring any costs.

Governing Legislation

This Agreement is subject to and governed by the laws of the Province of Ontario. The Province of Ontario will have exclusive jurisdiction in relation to any claim, dispute or difference concerning this Agreement and any matter arising from it. Each party irrevocably waives any right it may have to object to any action being brought in those courts, to claim that the action has been brought in an inappropriate forum, or to claim that those courts do not have jurisdiction.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions (continued)

Fees at Regular Billing Rates

Our fees for the audit engagement described above will be based on our regular billing rates plus direct out-of-pocket expenses and applicable HST and are due when invoices are rendered.

Costs of Responding to Government Information Requests, etc.

If, with respect to this audit engagement or related services, we are required as a result of actions or demands placed upon or initiated by the College, government regulation, subpoena, or other legal process to produce our working papers, or to respond to information requests, such work will be outside the scope of this audit engagement. We will discuss such matters with you prior to undertaking any work and will establish an appropriate fee arrangement with you before incurring any costs.

Communications

You agree that in connection with this audit engagement, we may communicate with you or others via telephone, facsimile, post, courier, email, or other electronic media. Given the inherent risks associated with the electronic transmission of information on the internet or otherwise, Hilborn LLP does not guarantee the security or integrity of any electronic communications sent or received in relation to this engagement nor does Hilborn LLP guarantee that transmissions will be free from interception or infection including, but not limited to, “malware”, “spyware”, “ransomware”, and “worms”.

We specifically disclaim, and you release us from, any liability or responsibility related to interception of communications, unintentional disclosure of communications, viruses or ‘malware’, or any other similar form of data breach, indirect, punitive, exemplary, or special, without limitation and including:

(a) losses of data, revenues or anticipated profits;
(b) losses flowing from the impersonation of an identity; or
(c) losses relating to payment of a ‘ransom’ to release data.

It is our Firm policy to use certain file sharing services we have designated, including Microsoft OneDrive, for the purposes of file sharing. Where you authorize and / or request Hilborn LLP to use any file sharing service other than those designated by Hilborn LLP to download, upload, amend or otherwise access in any manner your information stored and/or located on such file sharing services, you acknowledge that this may lead to a loss or unintended exposure of your confidential information to unintended audiences. You expressly accept that any such exposure and/or release of confidential information as a result of using such services will not be the responsibility of Hilborn LLP and you will indemnify Hilborn LLP for any losses incurred as a result of loss or exposure of your information arising from the use of such file sharing services.

Termination

Management acknowledges and understands that failure to fulfill its obligations as set out in this Agreement will result, upon written notice, in the termination of this Agreement.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Terms and Conditions (continued)

Termination (continued)

Either party may terminate this Agreement for any reason upon providing written notice to the other party not less than 30 calendar days before the effective date of termination. If early termination takes place, the College shall be responsible for all time and expenses incurred up to the termination date.

If we are unable to complete the audit engagement or are unable to come to a conclusion on the financial statements, we may withdraw from the engagement before issuing our audit report, or we may issue a denial of assurance on the financial statements. If this occurs, we will communicate the reasons and provide details.

Other Matters

Neither party to this Agreement will directly or indirectly agree to assign, transfer or sell to anyone any claim against the other party arising out of this Agreement, except that the College may assign its rights to any such claim to its insurer.

Hilborn LLP is a limited liability partnership. The individuals involved in the audit engagement and related services will be partners, employees and subcontractors of the partnership. The total aggregate liability of Hilborn LLP and any of its partners, employees and subcontractors for all claims, losses, liabilities and damages as a result of breach of contract, tort (including negligence), or otherwise, arising from any professional services performed or not performed by Hilborn LLP or by any of its partners, employees and subcontractors for you, shall be limited to the amount of professional liability insurance available for your claim. You further acknowledge and agree that this provision may be pleaded as a complete estoppel to any claim by you for damages in excess of the foregoing amount.

Our liability shall be several and not joint and several. We shall only be liable for our proportionate share of any loss or damage, based on our contribution relative to the others' contributions. In addition, we will not be liable in any event for consequential, incidental, indirect, punitive, exemplary, aggravated or special damages, including any amount for loss of profit, data or goodwill, whether or not the likelihood of such loss or damage was contemplated.

We will use all reasonable efforts to complete the audit engagement as described in this Agreement within the agreed upon time frames. However, we shall not be liable for failures or delays in performance that arise from causes beyond our control, including the untimely performance by the College of its obligations.

Conclusion

This Agreement reflects the entire agreement between the College and Hilborn LLP relating to the services described herein and supersedes any previous proposals, correspondence and understandings, whether written or oral. The agreements of the College and Hilborn LLP contained herein shall survive the completion or termination of this Agreement.

College of Denturists of Ontario
Toronto, Ontario
June 8, 2026

Acknowledgement

Please confirm your agreement with the above terms by signing a copy of this Agreement in the space provided and return it to us.

We are pleased to have this opportunity to serve you and assure you that this audit engagement will be given our close attention.

Yours very truly,

Hilborn LLP

I.B. MacKenzie/cbj

Chartered Professional Accountants

The services and terms set out above are as agreed.

College of Denturists of Ontario

_____
Roderick Tom-Ying, Registrar and CEO

_____
Kristine Bailey, Chair

APPENDIX B

Hilborn LLP
Chartered Professional Accountants
375 University Avenue, Suite 301
Toronto, Ontario
M5G 2J5

This representation letter is provided in connection with your audit of the financial statements of College of Denturists of Ontario (the "College") for the year ended March 31, 2026, for the purpose of expressing a opinion as to whether the financial statements are presented fairly, in all material respects, in accordance with Canadian accounting standards for not-for-profit organizations.

We acknowledge that we are responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations and for the design, implementation and maintenance of internal controls to prevent and detect fraud and error. We understand that your audit was planned and conducted in accordance with Canadian generally accepted auditing standards so as to enable you to express an opinion on the financial statements. We understand that while your work includes an examination of the accounting system, internal control and related data to the extent you considered necessary in the circumstances, it is not designed to identify, nor can it necessarily be expected to detect fraud, shortages, errors or other irregularities, should any exist.

Certain representations in this letter are described as being limited to matters that are material. An item is considered material, regardless of its monetary value, if it is probable that its omission from or misstatement in the financial statements would influence the decision of a reasonable person relying on the financial statements.

We confirm, to the best of our knowledge and belief, having made such inquiries as we consider necessary for the purpose of informing ourselves as of TBD, the following representations made to you during your audit:

Financial Statements

1. We have fulfilled our responsibilities, as set out in the terms of the audit engagement letter dated June 8, 2026.

2. The financial statements referred to above comprise the statement of financial position as at March 31, 2026, 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. These financial statements present fairly, in all material respects, the financial position of the College as at March 31, 2026, 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.

3. We acknowledge our responsibility for the design, implementation, and maintenance of internal controls to enable us to prepare financial statements that are free from material misstatement, whether due to fraud or error. We are not aware of any significant deficiencies in internal control of the College.

4. We have reviewed and approved the adjusting journal entries and trial balance.

5. The financial statements have been produced by you, and we have designated someone in management with the suitable skill, knowledge and financial expertise to accept responsibility for the preparation of the financial statements. We hereby approve the financial statements for issuance.

Going Concern

6. The financial statements have been prepared on a going concern basis, which we believe to be appropriate and consistent with our assessment of the College.

Completeness of Information

7. We have made available to you all financial records and related data and all minutes of the meetings of directors and committees of directors through TBD.

8. All transactions have been recorded in the accounting records and are reflected in the financial statements.

9. We are unaware of any known or probable instances of non-compliance with the requirements of regulatory or governmental authorities, including their financial reporting requirements.

10. We are unaware of any violations or possible violations of laws or regulations, including illegal and possibly illegal acts, the effects of which should be considered for disclosure in the financial statements or as the basis of recording a contingent loss.

11. We are aware of the environmental laws and regulations that impact the College and we are in compliance. There are no known environmental liabilities that have not been accrued for or disclosed in the financial statements.

12. We have disclosed to you the identity of all known related parties and all related party relationships and transactions, including guarantees, non-monetary transactions and transactions for no consideration. We have appropriately accounted for and disclosed such relationships and transactions in the financial statements in accordance with Canadian accounting standards for not-for-profit organizations.

13. We have disclosed all material non-monetary transactions or transactions for no consideration undertaken by the College.

Fraud and Error

14. We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.

15. We have no knowledge of fraud or suspected fraud affecting the College involving management; employees who have significant roles in internal control; or others, where the fraud could have a material effect on the financial statements.

16. We have no knowledge of any allegations of fraud or suspected fraud affecting the College's financial statements as communicated by employees, former employees, analysts, regulators or others.

17. There are no uncorrected financial statement misstatements or uncorrected presentation and disclosure departures

Recognition, Measurement and Disclosure

18. We believe that the significant assumptions used by us in making accounting estimates, including those relating to fair value measurements included and disclosed in the financial statements, are reasonable and appropriate in the circumstances.

19. We have no plans or intentions that may materially affect the carrying value or classification of assets and liabilities reflected in the financial statements.

20. The nature of all material measurement uncertainties has been appropriately disclosed in the financial statements, including all estimates where it is reasonably possible that the estimate will change in the near term and the effect of the change could be material to the financial statements.

21. We have informed you of all outstanding and possible claims, whether or not they have been discussed with legal counsel.

22. All liabilities and contingencies, including those associated with guarantees, whether written or oral, have been disclosed to you and are appropriately reflected in the financial statements.

23. The College has satisfactory title to all assets, and there are no liens or encumbrances on the College's assets, nor has any asset been pledged except as disclosed in the financial statements.

24. We have disclosed to you, and the College has complied with, all aspects of contractual agreements that could have a material effect on the financial statements in the event of non-compliance, including all covenants, conditions or other requirements of all outstanding debt.

25. There have been no events subsequent to the date of the financial statements through to the date of this letter that would require recognition or disclosure in the financial statements. Further, there have been no events subsequent to the date of the comparative financial statements that would require adjustment of those financial statements and the related notes.

Yours very truly,

College of Denturists of Ontario

_____

Roderick Tom-Ying, Registrar and CEO

HILBORN

LISTENERS. THINKERS. DOERS.

375 University Avenue · Suite 301 · Toronto · ON · CA · M5G 2J5 · P416-364-1359 · F416-364-9503 · hilbornca.com

HPRO Health Profession Regulators of Ontario

HEALTH PROFESSION REGULATORS OF ONTARIO (HPRO) 2025–2026 ANNUAL REPORT

Collaborating for Better Regulation. Protecting the Public Interest

HPRO Health Profession Regulators of Ontario

At a Glance

HPRO serves as Ontario's forum for health regulatory Colleges, bringing together the province's health profession regulators to collaborate, learn, and address shared challenges. During 2025–2026, HPRO strengthened relationships with Government, expanded communities of practice through its Networks, invested in governance excellence, and continued leadership in the regulatory sector.

Metric	By the Numbers	
Regulatory Colleges	26	All *RHPA* Colleges are active members of HPRO, each providing unique perspectives.
Health Professions	30	Colleges take their role as protectors of the public interest seriously; four Colleges regulate two professions.
Governance Conference Attendance	100+	Speakers shared governance expertise with College Board/Council and Committee Members, and staff for a full day of learning and networking.
Communicators' Day Conference Attendance	35	Staff from 20 Colleges met for a half-day at the College of Physiotherapists of Ontario, engaging with Network members and learning about ways to advance their communications work.
Affiliates	2	Ontario College of Social Workers and Social Service Workers (OCSWSSW) and the Health and Supportive Care Providers Oversight Authority (HSCPOA)
Network Meetings	25+	Direct interaction with other network members is a valued benefit of HPRO.
Network Outreaches	100+	Sharing information is a key feature of HPRO's networks, allowing these communities of practice to find resources and inspiration from others.
Participants Engaged	500+	Nine networks, plus subgroups across 26 Colleges and 2 Affiliates – along with guests – boost engagement.
Ministry Meetings	10+	HPRO appreciates the Ministry's willingness to engage with HPRO on behalf of *RHPA* Colleges and recognizes the importance of ongoing partnership in advancing effective regulation and public protection.
Board Meetings	25	With four in-person meetings, and Bi-Weekly check-ins, HPRO's Board stays connected.

Message from HPRO Leadership

Ontario's health profession regulators share a common purpose: protecting the public through effective, accountable, and responsive regulation. Throughout 2025–2026, HPRO continued to bring together Ontario's 26 health profession regulatory Colleges to address shared challenges, identify opportunities for improvement, and support excellence in health profession regulation. HPRO exists to strengthen that work.

- This year was characterized by collaboration, engagement, and growth.
- Working closely with the Ministry of Health, HPRO advanced discussions on regulatory modernization, labour mobility, governance, public appointments, and performance measurement. Through our government relations initiatives, HPRO strengthened its role as a trusted voice on issues affecting Ontario's health regulatory system.
- At the same time, HPRO continued to invest in the professional development of College staff and Board/Council members through governance education, Network activities, and conferences that foster knowledge sharing across the sector.
- Our Equity, Diversity and Inclusion (EDI) initiatives continued to mature, helping regulators strengthen their understanding of inclusive regulatory practices and supporting meaningful conversations across the regulatory sector.
- The accomplishments highlighted in this report reflect the dedication of HPRO's members, Board of Directors, committees, network leads, volunteers, and the Executive Director and CAG Coordinator. We thank every individual who contributed their expertise, time, and leadership throughout the year.
- Together, we continue to strengthen professional regulation in Ontario and support the public interest.

Maureen Boon, HPRO Chair

Who We Are

- HPRO is a not-for-profit organization that brings together Ontario's health profession regulatory Colleges under the *Regulated Health Professions Act (RHPA)*.
- HPRO's member Colleges regulate nearly 400,000 healthcare professionals across 30 health professions throughout Ontario.
- HPRO supports its members through collaboration, advocacy, education, information sharing, and regulatory leadership.
- Our work is guided by three strategic priorities.

Strategic Priorities

Government Relations

HPRO cultivates and maintains positive, collaborative relations with the Government, informing decision-making and change in support of regulatory excellence.

Equity, Diversity, Inclusion (EDI)

HPRO commits to and promotes the principles of Equity, Diversity, and Inclusion, supporting Colleges in their EDI journeys.

Excellence in Member Services

HPRO provides its members with the services Colleges need to support their work.

Statement of Purpose: HPRO advocates for ongoing regulatory improvement that supports the public interest

Year in Review

2025–2026 AT A GLANCE

Highlights from June 23, 2025, to June 4, 2026, included:

- Ongoing engagement with the Ministry of Health on key regulatory priorities
- Continued development of HPRO's government relations strategy
- Advancement of legislative modernization initiatives
- Delivery of HPRO's Governance and Communicators' Day Conferences
- Training programs re. governance and discipline orientation
- Growth and strengthening of HPRO Networks
- Continued leadership in EDI
- Enhanced support for member Colleges through information sharing and collaboration
- Expansion of online collaboration through digital resources

HPRO Board Meeting – June 23, 2025

Strategic Priority: GR

Strengthening HPRO's Voice

Government relations (GR) remained a central strategic priority throughout the year. HPRO appreciates the Ministry's willingness to engage with regulators and recognizes the importance of ongoing partnership in advancing effective regulation and public protection.

HPRO maintained regular engagement with Ministry of Health leadership, including quarterly meetings and ongoing discussions. HPRO's approach remains collaborative and solutions-focused. We continue to position health profession regulators as trusted partners in strengthening Ontario's healthcare system.

HPRO advanced constructive dialogue regarding:

- Labour mobility and "As of Right" initiatives
- Public member appointments
- Governance modernization opportunities
- Regulatory efficiency
- Red Tape Reduction proposals
- Performance measurement and accountability

HPRO's 2025 AGM Attendees with Hon. Sylvia Jones, Minister of Health

Strategic Priority: EDI

Supporting Inclusive Regulation

HPRO's EDI Network continued to provide leadership, education, and collaboration opportunities across Colleges.

Throughout the year, Network members shared promising practices, resources, and lessons learned, helping strengthen inclusive approaches across Ontario's health profession regulators. Four working groups were formed to focus on areas of interest:

- Data Collection
- Governance through an EDI Lens
- Indigenous Cultural Competencies
- Tool Development

HPRO remains committed to supporting regulators in creating equitable and accessible systems that serve the diverse populations of Ontario.

Strategic Priority: Excellence in Member Services

Supporting Regulatory Excellence

HPRO's greatest strength remains its ability to connect regulators and facilitate learning across organizations. Through conferences, education and training programs, Networks' communities of practice, and regular networking opportunities, HPRO supported member Colleges in addressing common challenges and sharing expertise.

Highlights from 2025-2026:

- The active Citizen Advisory Group (CAG) with a dedicated Committee and CAG Coordinator, providing public input into College work
- Governance Conference that brought together Board members, Council members, committee members, and College staff to discuss current issues in professional regulation, including regulatory case law, building consensus among decision-makers, conflict of interest management, government relations in health regulation
- Governance training to support effective decision-making and Board performance across the sector
- Discipline Orientation Workshops to provide foundational and advanced learning opportunities

HPRO's Governance Conference – May 1, 2026

Networks in Action

HPRO Networks remain one of our most valued services. During the year, active communities of practice continued to support collaboration among professionals working in specialized regulatory functions.

These Networks provide practical opportunities for members to exchange ideas, identify emerging issues, share resources, and strengthen regulatory practice across Ontario.

HPRO Networks Communications

- Corporate Services
- Deputy Registrars
- EDI
- Investigations and Hearings
- Patient Relations
- Policy and Governance
- Practice Advisors
- Quality Assurance
- Registration

HPRO's Communicators' Half-Day Conference – November 19, 2025

Transitions & Looking Forward

Transitions

- **College of Occupational Therapists of Ontario (COTO): Elinor Larney** retired July 11, 2025. **Kimberley Woodland** was Acting Registrar July 11 - August 7, 2025, and **Gillian Slaughter** was appointed Registrar & CEO.
- **Ontario College of Pharmacists (OCP): Susan James** Acting Registrar to November 17, 2025, when **Jay O'Neill** assumed the role of Registrar & CEO

Looking Forward

HPRO remains committed to supporting excellence in regulation. Priorities for the coming year include:

- Continuing constructive engagement with Government
- Advancing regulatory modernization initiatives
- Strengthening member services and educational offerings
- Supporting communities of practice through active Networks
- Continuing leadership in EDI
- Exploring emerging issues including artificial intelligence and workforce challenges
- Working with system partners in Ontario and across Canada, including the Canadian Provincial-Territorial Network of Health Profession Regulators (CPTNOHPR)
- Supporting governance excellence across member Colleges

HPRO is the place where Ontario's health profession regulators come together to solve common problems, strengthen regulation, and support the public interest.

Canadian Provincial-Territorial Network of Health Profession Regulators (CPTNOHPR)

Thank You

HPRO extends sincere appreciation to:

- Member Colleges
- Board of Directors
- Management Committee
- Committees and Networks
- Citizen Advisory Group
- Affiliates
- Ministry of Health and other Government Partners
- Conference and training planners and speakers

Your commitment, expertise, and leadership make HPRO's work possible.

HPRO's Education Committee

HPRO Health Profession Regulators of Ontario

HPRO Member Colleges

College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO)
College of Chiropodists of Ontario (COCOO)
College of Chiropractors of Ontario (CCO)
College of Dental Hygienists of Ontario (CDHO)
College of Dental Technologists of Ontario (CDTO)
College of Denturists of Ontario
College of Dietitians of Ontario
College of Homeopaths of Ontario (CHO)
College of Kinesiologists of Ontario (CKO)
College of Massage Therapists of Ontario (CMTO)
College of Medical Laboratory Technologists of Ontario (CMLTO)
College of Medical Radiation and Imaging Technologists of Ontario (CMRITO)
College of Midwives of Ontario (CMO)
College of Naturopaths of Ontario (CoNO)
College of Nurses of Ontario (CNO)
College of Occupational Therapists of Ontario (COTO)
College of Opticians of Ontario
College of Optometrists of Ontario
College of Physicians and Surgeons of Ontario (CPSO)
College of Physiotherapists of Ontario (CPO)
College of Psychologists and Behaviour Analysts of Ontario (CPBAO)
College of Registered Psychotherapists of Ontario (CRPO)
College of Respiratory Therapists of Ontario (CRTO)
College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO)
Ontario College of Pharmacists (OCP)
Royal College of Dental Surgeons of Ontario (RCDSO)

COLLEGE OF DENTURISTS OF ONTARIO

To: **Board of Directors**

From: **Kristine Bailey**

Date: **September 18, 2026**

Subject: **Chair's Report**

End of summer approaches with the hot, humid, dry and wet weather behind us. We get to welcome the cooler weather with the beauty of autumn in front of us.

All said, the College continues its work.

We should be so proud of the work that has occurred over the past several years. The Board recruited, selected and hired, in 2022, a CEO who is shepherding a strategic plan that was daunting and is completed or nearly done. In doing so, the current and new cohort of well skilled managers are working in a collegial and effective manner. The move to the Hub saved operational dollars and more importantly provided opportunities for collaboration with other Colleges, a meeting space that is large and technologically innovative with space for hoteling of staff and visitors when required.

- Migrating from paper to digital was a huge project and now the days of printing, paper and filing cabinets is history.
- Other digital services included on-line labour mobility application and resignation forms and a simplified renewal portal.
- The launch of the historic Inactive Class was approved earlier this year.
- Changes made to dental insurance have increased the work for the ICRC and in doing so, the committee changed to two panels to balance workload.

During the past year there was a lot of work done on the MCQ and OSCE exams, working across Canada and with new tools. At our last board meeting we approved an extension of the Strategic Plan to complete some new items and those that we got surprised approval for.

So where are we in terms of work …

1. One of the important aspects of our role as governors is to modernize our governance system and practices. Fortunately, we have Dundee Consulting Group Ltd advising and steering the College into governance modernization. There are three phases of work that the Board has

deliberated and made decisions on. Now, we are into the work required to deliver on those decisions.

2. The biggest, most important and exciting developments was the approval of the Scope of Practice allowing Denturists to order and apply x-rays, operate x-ray equipment, serve as Radiation Protection Officers, and manage denture-related implant components, including healing caps, abutments, and implant-supported dentures. Next steps include the drafting of regulations, developing educational requirements and resources, and informing registrants of the steps required before implementation. This process and deliverables may take several months to over a year before these new activities are permitted by the working group, subject matter experts, legal counsel and the Ministry Staff.

3. Continuation of the OSCE exam changes, as determined, by the working group.

4. The CNAR Conference will be held in October attended by a few governors and professional members.

Registrar's Updates

Since the last meeting of the Board on June 12th, 2026:

- Annual audit underway for FY26.
- Updated Public Register to remove unofficial status of "Active, Not Practicing".
- Updated resignation confirmation process to bolster record keeping & health information custodian requirements.
- OFC risk rating decision awarded - low risk rating awarded until March 2030.
- July 21 – CNAR Lunch and Learn – Financial Resilience for Regulators in Uncertain Times: The Case for Reserves
- July 21 – HPRO Colleges met with PHO to further collaboration on IPAC investigations
- July 29 – CNAR Presentation – Enhancing Fair Registration for Internationally Trained Professionals

Top: HPRO Registrars with Minister of Health at HPRO AGM, June 5, 2026.

Bottom: Photos taken by exam assessor Luc Tran in Hamilton, ON, at the June 2026 OSCE Exam

SCOPE OF PRACTICE UPDATE

- Implementation plan submitted to Ministry Staff.
- Radiographic Consultant onboarded.
- Environmental scan completed for current Standards of Practice for Radiography and requirements for Radiation Protection Safety Officer role.
- College Staff currently drafting Standard of Practice for Radiography, guidelines to follow. Aiming for December Board Meeting review followed by public consultations.
- Identify competency profiles for new scope elements
  - Discuss what regulatory requirements and tools are necessary for implant components piece of scope expansion.
- Set continuing education requirements including obtaining HARP certification.
- Establish credentialing process & updating the Public Register to display certification/credentials.
- Await legislative updates from Ontario Legislature re: Denturism Act, RHPA Controlled Acts amendments

Current Strategic Initiatives

Agenda Item 8.1

Strategic Initiatives	Operational Leads	Governance Leads	Progress
Scope of Practice	Registrar & CEO Deputy Registrar	Board Vice-Chair Scope Working Group	Radiography Standard of Practice and Guidelines currently under drafting Awaiting updates from Ministry of Health
Governance Modernization	Registrar & CEO Manager, Board of Directors & Corporate Services Governance Consultant	Board Chair All of Board	Ongoing, timelines reprioritized for Scope of Practice implementation Draft Elections Policy for Board review
Qualifying Examination	Deputy Registrar Chief Examiner Third-Party Psychometricians	Chair, Qualifying Examination	Draft policies for Board review Call for Chief Examiner position to open shortly

COLLEGE OF DENTURISTS OF ONTARIO

BRIEFING NOTE

To: **Board of Directors**

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

Date: **September 18, 2026**

Subject: **Financial Report: April 1, 2026 – August 31, 2026**

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 Board 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. The Board must ensure that the College has a fiscally responsible and strategic operating budget each year. As part of this commitment, the Board reviews the financials of the CDO on a quarterly basis.

Statement of Operations for period April 1, 2026 – August 31, 2026

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. Since this report covers the first five months of the fiscal year, consequently, the anticipated expenses will be lower within their budget line items. However, not every line item adheres to this because some expenses are not expensed over time but are lump sum payments.

The only revenue budget line item of note is "Other Fees". The College continues to report increased late fees collected during the renewal period; these are captured under Other Fees. The College has seen an uptick of late renewals including late fees applied compared to previous years. College processes and reminders remain unchanged. As well, there is no uptick in the number of complaints or feedback received from those remitting late fees.

On the expenses side, the only item of note is QA Peer Circles. Due to a push by the Quality Assurance Department over the summer months and into the fall, the College is investing in the recruitment, training, and development of new peer circle facilitators and cases. The College has currently recruited 11 new peer circles facilitators with training slated for the weekend of September 26 & 27. As a result, the original budget of $30,000 will be exceeded and subsequent future budgets will need to be re-examined to reflect the College's prioritization of QA activities.

Updated 2026-2027 Operating Budget at Last Board Meeting

As a reminder, the Board of Directors approved an updated 2026-2027 operating budget at its last meeting in June 2026 due to a series of events. This included transferring the previously standalone strategic initiatives budget into the operating budget, an unexpected CDO server replacement estimated to cost $25,530.86, and the Government of Ontario announcing that the Scope of Practice expansion proposal submitted was successful resulting in future implementation expenses.

The updated 2026-2027 Operating Budget projects a slight surplus of $13,650.00.

College of Denturists of Ontario
Statement of Operations (April 1 - August 31, 2026)

YTD Budget to Actual	2026-2027 BUDGET	August 31, 2026 YTD Totals	YTD as Percentage of Budget	Remainder or In Excess of Budgeted Amount*
REVENUE				
Professional Corporation Fees	$ 79,800.00	$ 84,550.00	106%	$ 4,750.00*
Registration Fees	$ 1,369,350.00	$ 1,363,535.00	100%	$ 5,815.00
Other Fees	$ 5,500.00	$ 15,019.50	273%	$ 9,519.50*
Qualifying Examination Fees	$ 400,000.00	$ 213,554.68	53%	$ 186,445.32
Other Income	$ 45,000.00	$ 28,906.04	64%	$ 16,093.96
TOTAL REVENUE	**$ 1,899,650.00**	**$ 1,705,565.22**	**90%**	**$ 194,084.78**
EXPENDITURES				
Wages & Benefits	$ 723,000.00	$ 305,204.41	42%	$ 417,795.59
Professional Development	$ 60,000.00	$ 18,369.59	31%	$ 41,630.41
Professional Fees	$ 155,000.00	$ 42,273.40	27%	$ 112,726.60
Office & General	$ 175,000.00	$ 133,467.80	76%	$ 41,532.20
Rent	$ 17,000.00	$ 6,250.00	37%	$ 10,750.00
Qualifying Examination	$ 350,000.00	$ 180,411.87	52%	$ 169,588.13
Board and Committees	$ 45,000.00	$ 1,950.20	4%	$ 43,049.80
Quality Assurance				
QA Peer Circles	$ 30,000.00	$ 31,071.61	104%	$ 1,071.61*
QA Assessor Expenses	$ 35,000.00	$ 9,680.53	28%	$ 25,319.47
Complaints & Discipline	$ 200,000.00	$ 99,979.78	50%	$ 100,020.22
Capital Expenditures	$ 30,000.00	$ -	0%	$ 30,000.00
Strategic Initiatives				
Governance Modernization	$ 20,000.00	$ 1,140.00	0%	$ 18,860.00
Scope of Practice Implementation	$ 30,000.00	$ 2,920.33	0%	$ 27,079.67
Policy Review	$ 6,000.00	$ -	0%	$ 6,000.00
General Projects	$ 10,000.00	$ -	0%	$ 10,000.00
TOTAL EXPENDITURES	**$ 1,886,000.00**	**$ 832,719.52**	**44%**	**$ 1,053,280.48**
NET INCOME	**$ 13,650.00**	**$ 872,845.70**		

COLLEGE OF DENTURISTS OF ONTARIO

BRIEFING NOTE

To: **Board of Directors**

From: **Meghan Hoult, Deputy Registrar**

Date: **September 18, 2026**

Subject: **Substantial Equivalency Assessment Policy, Substantial Equivalency Assessment Form, Third-Party Credential Evaluation Policy & Language Proficiency Policy**

Public Interest Rationale

The mandate of the College of Denturists of Ontario (the "College") 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 is responsible for determining the substantial equivalency of academic programs that have not been approved by the Board of Directors (the "Board"). The process of determining the substantial equivalency includes the evaluation and authentication of credentials by a third-party. In addition, applicants must satisfy the requirement of reasonable fluency in either English or French to be issued a Certificate of Registration (COR) with the College.

The proposed policies outline the process, guidelines and requirements for the Substantial Equivalency Assessment, Third-Party Credential Evaluation and Language Proficiency for initial applicants and applicants to the College.

Background

One of the non-exemptible registration requirements for a general Certificate of Registration is the successful completion of a post-secondary program in Denturism or equivalent that is, (a) approved by the Board or an accreditation body designated by the Board ("Approved Program") or (b) in the opinion of a panel of the Registration Committee (the "Committee"), substantially equivalent to an Approved Program.

Any initial applicant who has not completed an Approved Program must provide satisfactory documentary evidence that their academic program is substantially equivalent, prior to becoming eligible to sit the Qualifying Examination (QE). During the substantial equivalency assessment process,

the Committee may rely on the use of forms completed by initial applicants and third-party credential evaluation reports to assist with its determination of substantial equivalency.

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. The College's Registration Regulation (O. Reg. 183/25) requires that applicants to the College must be able to speak, read and write in either English or French with reasonable fluency.

Currently, the College policies and guidelines in place to address these matters include the Academic Equivalency Review Policy (and its associated Form A1), Academic Credential Authentication Policy, Academic Credential Authentication Process Guidelines, and Language Proficiency Requirements Policy.

The College is proposing:

- Revisions and updates to the Academic Equivalency Review Policy, renamed the Substantial Equivalency Assessment Policy
    - Related revisions and updates to the Academic Equivalency Assessment Form (Form A1), renamed the Substantial Equivalency Assessment Form (Form A1)
- Combining the Academic Credential Authentication Policy and its Process Guidelines into a single policy, along with revisions and updates, renamed the Third-Party Credential Evaluation Policy
- Revisions and updates to the Language Proficiency Requirements Policy

Proposed Changes

Substantial Equivalency Assessment Policy	
Current Policy	**Draft Policy**
• Titled "Academic Equivalency Review Policy" • Last published/updated in 2017 • Dated equivalency language ("…equivalent to a diploma in denture therapy or denturism from George Brown College") • Dated required program course areas linked to George Brown College • Dated supporting documentation requirements ("copies of the complete course descriptions and a copy of the program syllabus") and credentialling agencies (inclusion of "World Education Services" only)	• Renamed "Substantial Equivalency Assessment Policy" • Updated language to reflect the wording within O. Reg. 183/25 (Registration) • Replacement of George Brown College course areas with entry-to-practice subject areas and minimum learning outcomes • Updated language regarding documentation requirements to reflect current reduced requirements and broadened language ("credential evaluation agency")

• Dated related legislation and documents section	• Added additional related documents and revised existing related documents; revised existing related legislation

Substantial Equivalency Assessment Form	
Current Form	**Draft Form**
• Titled "Academic Equivalency Assessment Form" • Language no longer harmonizes with the use of the terms "Substantial Equivalency", "Third-Party Credential Assessment", "credential assessment agency", etc.	• Renamed "Substantial Equivalency Assessment Form" • Updated language to harmonize with related policies

Third-Party Credential Evaluation Policy	
Current Policy & Guidelines	**Draft Policy**
• Two (2) separate documents • Policy last published/updated in 2014; guideline date not specified • Policy titled "Academic Credential Authentication Policy" • Dated equivalency language ("…equivalent to the diploma in denture therapy or denturism offered by George Brown College") • No specific third-party credential report requirements • Dated related legislation and documents section	• Combined policy and guideline into one policy to consolidate information for potential candidates • Renamed "Third-Party Credential Evaluation Policy" • Updated language to reflect the wording within O. Reg. 183/25 (Registration) • Added specific credential report requirements • Added additional related documents; revised existing related legislation

Language Proficiency Requirements Policy	
Current Policy	**Draft Policy**
• Last updated in 2024 • Dated referencing of O. Reg. 833/93 (Registration)	• Updated language to reflect the wording within O. Reg. 183/25 (Registration) • Removal of the Canadian Language Benchmark Assessment and Placement Test

• Dated recognized language proficiency tests • Dated formatting	(CLBA, CLBPT) due to discontinuation of the two tests. • Updated formatting consistent with modern College policies

Risk Considerations

Procedural Fairness & Potential for Legal Review

Inconsistent, unreasonable or insufficiently supported decisions between candidates could lead to allegations of unfairness, bias or discrimination. These risks can be mitigated with the requirement for a third-party credential evaluation to compare the initial applicant's education to an education obtained in Canada, and a Substantial Equivalency Assessment Form where the candidate is provided the opportunity to self-identify whether they obtained learning outcomes through a variety of sources including academic programs, practice, work, clinical experience and/or continuing education. The College also works closely with the Office of the Fairness Commissioner (OFC) to ensure that registration practices are transparent, objective, impartial and fair. Initial applicants are provided the opportunity to respond to significant deficiencies in their Substantial Equivalency Assessment Form, to ensure fairness. Consistency in decisions is ensured through the documentation and precedents for specific academic institutions and programs.

Public Protection

While overly restrictive substantial equivalency decisions can create access and fairness risks, overly generous substantial equivalency decisions can create public safety risks. These risks are safeguarded by the requirement for candidates whose education is deemed substantially equivalent to subsequently pass the QE. In the event that currency, or diminishment of knowledge due to extended lengths of time since graduation, is a concern, candidates who are eligible to apply for registration with the College may be referred by the Registrar to the Committee for a potential supervision requirement or other terms, conditions, or limitations as deemed necessary. The Committee may also recommend additional safeguards such as recommending that the candidate self-study certain learning outcomes which may be deficient prior to attempting the QE. Potential language concerns, if the original language of instruction was not in English or French, are addressed and identified within the substantial equivalency decision issued by the Committee. The substantial equivalency assessment process must balance fair access to registration with the College's obligation to ensure that candidates have the required education and competencies.

Third-Party Oversight Risks

The College relies on third-party credential evaluations in making its substantial equivalency decisions. To ensure authentication standards, methodology, accountability, and verifiability the College only recognizes member organizations of the Alliance of Credential Evaluation Services of Canada as approved credential evaluation agencies.

Operational Risks

There is a risk that inadequate processes on behalf of the College or a third-party credential evaluation agency results in a substantial equivalency determination that is inaccurate, inconsistent, or insufficiently supported, particularly given the complexity and high-stakes nature of the assessment. These risks can be mitigated through defined substantial equivalency assessment criteria and requirements, standardized processes, use of reputable third-party credential evaluation agencies, comprehensive substantial equivalency decisions, and collaborative efforts with the OFC.

Policy and Form Clarity & Communication

Policies and forms must be clearly written and accessible, so potential candidates understand the process, guidelines and requirements expected of them. The draft policies and form add clarity and more accurately reflect the process and requirements as they currently exist.

Options

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

1. Approve the draft policies and form as **presented** with immediate implementation.
2. Approve the draft policies and form as **amended** with immediate implementation.
3. Request further drafting with a return to the Board for consideration.
4. Other.

After consideration of these matters, the Board may:

Suggested Motion – That the Board approves the draft Substantial Equivalency Assessment Policy & Form, the draft Third-Party Credential Evaluation Policy, and the draft Language Proficiency Requirements Policy for immediate implementation.

Attachments

1. Draft Substantial Equivalency Assessment Policy
2. Current Academic Equivalency Review Policy
3. Draft Substantial Equivalency Assessment Form
4. Current Academic Equivalency Assessment Form (Form A1)

5. Draft Third-Party Credential Evaluation Policy
6. Current Academic Credential Authentication Policy
7. Current Academic Credential Authentication Process Guidelines

8. Draft Language Proficiency Requirements Policy
9. Current Language Proficiency Requirements Policy

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Registration**
NAME	**Substantial Equivalency Assessment Policy**
DATE APPROVED BY BOARD	**March 3, 2017**
DATE REVISED BY BOARD	**DATE**

INTENT

This policy outlines the process employed by the Registration Committee (the "Committee") of the College of Denturists of Ontario (the "College") when it seeks to determine the substantial equivalency of an academic program that has not been approved by the Board.

BACKGROUND

One of the non-exemptible registration requirements for a General certificate of registration is the successful completion of a post-secondary program in denturism or equivalent that is, (a) approved by the Board or an accreditation body designated by the Board or (b) in the opinion of a panel of the Committee, substantially equivalent to a program approved by the Board or an accreditation body designated by the Board.

The Board has approved certain post-secondary programs in denturism ("Approved Programs"). For initial applicants whose post-secondary program in denturism or equivalent has not been approved by the Board ("Non-Approved Programs"), the Committee will determine whether the post-secondary program completed by the initial applicant is substantially equivalent to an Approved Program.

THE POLICY

If an initial applicant's post-secondary program in denturism or equivalent is a Non-Approved Program, the Committee will conduct a substantial equivalency assessment. Initial applicants are advised that in order to conduct a thorough and fair assessment, certain documents and information will be required.

The Committee will not commence its assessment until it receives the following:

- a complete QE Initial Application including all required supporting documentation
- a complete Substantial Equivalency Assessment Form (Form A1)

Graduates of Non-Approved Canadian Programs must also submit:

- official transcripts sent directly to the College from their academic institution

- a notarized copy of their diploma in Denturism

Internationally educated individuals must also submit:

- a third-party credential evaluation report sent directly to the College from the credentialing agency containing copies of official transcripts and any degrees/diplomas that were used for the evaluation

Initial applicants may provide information from more than one educational program.

If the Committee is unable to make a determination based on the information provided, the Committee will request additional documentation and/or information from the initial applicant, including but not limited to course outlines, academic references, and credible references from other sources. Upon receipt of this additional documentation and/or information, the Committee will reconvene to make a determination.

Translations
Notarized English translations must be provided for any original documents which are not in French or English.

Learning Outcomes
In order for an initial applicant's academic program to be considered substantially equivalent to an Approved Program, the Committee will determine if the following learning outcomes were obtained:

- Clinical Practice
- Communication
- Complete Dentures
- Dental Materials
- Denturism Practice Management
- Gerontology
- Head, Neck & Dental Anatomy
- Human Anatomy & Physiology
- Infection Prevention and Control
- Jurisprudence, Ethics and Professional Responsibilities
- Nutrition
- Oral Pathology
- Partial Dentures
- Pathophysiology & Pharmacology
- Periodontology, Dental Histology & Embryology
- Radiographic Interpretation
- Removable Implant Prosthodontics

Substantial Equivalency Assessment Determinations
Following the assessment, the Committee may make one of the following determinations regarding the initial applicant's academic program:

1. **Substantially Equivalent**
   Sufficient information has been provided to satisfy the Committee that the initial applicant's degree or diploma was earned as a result of completing course subject areas and minimum learning outcomes required of Denturists at an entry-to-practice level and, if applicable, through practice experience or Continuing Education. The initial applicant will be deemed to have met

the requirement for successful completion of a post-secondary program in denturism or equivalent and will become eligible to attempt the Qualifying Examination.

2. **Not Substantially Equivalent**
   The Committee has found discrepancies and/or gaps in the course subject areas and minimum learning outcomes required of Denturists at an entry-to-practice level and, if applicable, in the practice experience or Continuing Education completed by the initial applicant. The Committee has determined that the academic program completed by the initial applicant is not considered substantially equivalent to a program approved by the Board or an accreditation body designated by the Board. The initial applicant will be deemed to have not met the requirement for successful completion of a post-secondary program in denturism or equivalent and will not be eligible to sit the Qualifying Examination.

   The Committee will provide the reasons for its determination in writing. The initial applicant will be provided with information regarding applicable resources and strategies that can be undertaken to assist with establishing educational equivalency.

RELATED LEGISLATION AND DOCUMENTS

Ontario Regulation 183/25 (Registration)

Health Professions Procedural Code, Schedule 2 to the Regulated Health Professions Act, 1991

Approved Denturism Programs Policy

Third-Party Credential Evaluation Policy

Substantial Equivalency Assessment Form (Form A1)

REVISION CONTROL

Date	Revision	Effective
March 3, 2017	Initial publication date.	December 12, 2014
DATE	Updates to the policy to ensure harmony with O. Reg. 183/25 (Registration). Replaced course areas with entry-to-practice subject areas and minimum learning outcomes. Updated assessment determinations. Updated and added related legislation and documents. Policy renamed from Academic Equivalency Review Policy to Substantial Equivalency Assessment Policy.	DATE

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Registration**
NAME	**Academic Equivalency Review Policy**
DATE APPROVED BY COUNCIL	**March 3, 2017**

INTENT

This policy describes the assessment process employed by the Registration Committee when it seeks to determine whether or not a potential candidate's diploma or degree is equivalent to a diploma in denture therapy or denturism from George Brown College, per Ontario Regulation 833/93 (Registration Regulation).

BACKGROUND

Individuals wishing to apply for a Certificate of Registration with the College must meet a number of requirements, one of which is successful completion of the Qualifying Examination.

In order to sit the Qualifying Examination and, when successful, to subsequently apply for a Certificate of Registration, candidates must have a diploma in denture therapy or denturism from George Brown College or any other institution that, in the opinion of the Registration Committee, issues an equivalent diploma or degree.

THE POLICY

Program of Study

In order for a degree or diploma to be considered equivalent to a diploma from George Brown College it must offer courses in the areas identified in the Schedule to the Registration Regulation. The areas are as follows:

- Basic Sciences
- General Anatomy and Physiology
- Orofacial Anatomy
- General Histology
- Microbiology and Infection Control
- Dental Sciences
- Dental Histology and Embryology
- Periodontology
- Oral Pathology and Medicine
- Dental Kinesiology (Biomechanics)
- Dental Psychology
- Dental Psychology and the Aging Process
- Pharmacology and Emergency Care
- Health Promotion
- Public Health, Legislation and Research Nutrition
- Management
- Ethics and Professional Responsibilities
- Small Business Management
- Practice Management
- Denturist Practice
- Dental Materials
- Preclinical Prosthetics
- Clinical Prosthetics
- Radiographic Pattern Recognition
- Removable Partial Dentures (R.P.D.)
- Dentures Over Implants

Requesting Academic Equivalency Review
Potential candidates who do not have diploma in denturism from George Brown College or from another Ontario educational institution that is deemed, by the Registration Committee, to issue an equivalent degree or diploma, must provide satisfactory documentary evidence that their degree or diploma is substantially equivalent to the diploma offered by George Brown College.

For the Registration Committee to undertake an academic equivalency assessment, the potential candidate must submit:

a. a completed *Academic Assessment Request Form;* and
b. a completed *Academic Assessment Form*; and
c. copies of the complete course descriptions* and a copy of the program syllabus sent directly from the educational institution to the College*; and
d. official transcripts, either sent directly by World Education Services to the College or original documents sent directly to the College from the educational institution.

* If the original documents are not in French or English, they must be provided as notarized English translations. The potential candidate is responsible for any fees associated with translation and notarization of any documents that the Registration Committee requires in its assessment.

Potential candidates may provide information from more than one educational program.

Possible Outcomes:
Following an academic equivalency assessment, the Registration Committee may make one of the following determinations regarding the potential candidate's degree or diploma:

1. **Equivalent** - Sufficient information has been provided to satisfy the Registration Committee that the potential candidate's degree or diploma was earned as a result of taking courses that align with the areas identified in the Schedule. The potential candidate will be deemed to have met the education requirement.
2. **Not equivalent** – The Registration Committee has found discrepancies and/or gaps in the areas identified in the Schedule and the potential candidate's program of study. Where the Registration Committee has determined that the degree or diploma earned by the potential candidate cannot be considered equivalent to the diploma issued by George Brown College, the potential candidate will be deemed to have not met the education requirement in order to write the Qualifying Examination.

   The Registration Committee will provide, in writing, the reasons for its determination. The potential candidate will be provided with information regarding applicable resources and strategies that can be undertaken to assist with establishing educational equivalency. The potential candidate will be informed of the process for re-application.
3. **Further documentation and information required** – Based on the information before it, the Registration Committee could not make a determination regarding academic equivalency. The Registration Committee will request additional evidence from the potential candidate in the form of information from textbooks, course outlines, academic references, and credible references from other sources. Upon receipt of this additional information, the Registration Committee will reconvene to determine if the new information provides it with information that enables it to reach a decision.

RELATED LEGISLATION AND DOCUMENTS

Denturism Act, 1991
Ontario Regulation 833/93 (Registration)
Health Professions Procedural Code, Schedule 2 to the *Regulated Health Professions Act, 1991*

REVISION CONTROL

Date	Revision	Effective

Substantial Equivalency Assessment Form

This form contains a list of subject areas and minimum learning outcomes required of denturists at an entry-to-practice level. This form is required to demonstrate how these learning outcomes have been met either through academic programs, practice experience and/or Continuing Education.

Form Instructions:

1. For each of the subject areas in Column 1, identify whether the learning outcomes (LOs) in Column 2 were taught in your academic programs and/or learned as part of your practice/work/clinical experience and/or Continuing Education by selecting "Yes/No" in Column 3 and/or Column 4.
2. If the LOs were learned as part of your practice/work/clinical experience and/or Continuing Education, please provide specific and detailed examples that show how you have achieved the LOs in your practice/work/clinical experience and/or how the LOs were achieved through completion of a structured Continuing Education course (please include course titles if applicable).

Required Supporting Documentation:

1. For Graduates of Out of Province Colleges & Non-Accredited Canadian Programs: Official Transcripts from your Denturism program of study *sent directly from* the academic institution to the College, and a notarized copy of your diploma in Denturism.
2. For Internationally Educated Individuals: A third-party credential evaluation report, *sent directly from* an approved academic credential evaluation agency to the College (please review the Third-Party Credential Evaluation Policy for details). Please ensure that any transcripts and degrees/diplomas are included within the third-party credential evaluation report.

Optional Supplemental Documentation:

1. If your educational program was completed ten (10) or more years prior to the date of your application, it is optional to provide supplemental documentation to support any concerns regarding the currency of your knowledge, skill and judgement in the field. This could include letters from employers/mentors, Continuing Education certificates, other evidence of experience, etc.

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Personal Information:

First Name:

Last Name:

Educational Institution: **Language of Study:**

Educational Institution: **Language of Study:**

Educational Institution: **Language of Study:**

**Please ensure that you fully complete all required information within this form.
Incomplete submissions will delay the Substantial Equivalency Assessment process.**

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Human Anatomy & Physiology	▪ Describe the foundational anatomical and physiological concepts necessary to understand the structure and function of the human body. ▪ Examine how specific organ systems function and the role of homeostasis in maintaining normal function. ▪ Describe how common disorders associated with the integumentary, skeletal, muscular, endocrine, nervous, cardiovascular, lymphatic, immune, respiratory, urinary, digestive and reproductive systems can impact the denturism patient and the provision of denture care.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Head, Neck & Dental Anatomy	▪ Understand the structure, function and interrelationships between the various anatomical features of the head and neck, especially pertaining to the oral cavity. ▪ Identify landmarks of the oral cavity and describe the development, anatomy, and function for all types of human teeth. ▪ Identify fundamental and preventative curvatures of the tooth, alignment of the dentition, and occlusion in relation to protecting the supporting structures. ▪ Discuss preventive clinical considerations and examine dental anomalies.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Periodontology, Dental Histology & Embryology	▪ Describe the development, structure, and function of oral and periodontal tissues. ▪ Explain changes that occur in oral tissues due to age, disease, or denture use. ▪ Recognize and describe the signs, causes, and treatments of periodontal diseases. ▪ Understand the role of the denturist in implantology and surgical support. ▪ Relate knowledge of oral anatomy and histology to patient care and prosthetic design.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Pathophysiology & Pharmacology	▪ Understand basic disease processes, the body's responses, and how they affect oral health. ▪ Explain the actions, effects, and precautions of commonly used drugs and treatments. ▪ Identify when consultation or referral to other health providers is needed for safe care. ▪ Recognize and respond appropriately to potential medical emergencies in the clinical setting. ▪ Adapt treatment plans based on medical history, medications, and patient needs.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Oral Pathology	▪ Competently assess the oral and perioral areas with an understanding of pathologic abnormalities, their etiology, clinical manifestations, treatment options, management and need for referral. ▪ Interpret and demonstrate the necessary role a denturist contributes to the identification and management of oral and perioral pathologies. ▪ Evaluate and explain the systemic impact of disease processes encountered in the clinical environment.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Nutrition	▪ Understand the principles of good nutrition and how diet affects oral and overall health. ▪ Identify nutritional needs across different life stages and conditions. ▪ Recognize the relationship between diet and oral diseases such as caries. ▪ Provide dietary guidance and counselling related to oral treatments and healing. ▪ Promote healthy habits involving diet, exercise, and stress management for disease prevention.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Gerontology	▪ Understand how aging affects oral health, general health, and denture care. ▪ Recognize physical, psychological, and communication needs of older clients. ▪ Identify common oral changes and medication-related effects in the elderly. ▪ Be aware of available social supports and resources for older adults in Ontario. ▪ Recognize signs of elder abuse and follow mandatory reporting requirements in Ontario.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Infection Prevention and Control (IPAC)	▪ Follow current Ontario IPAC standards, safety protocols, and best practices in clinical and laboratory settings. ▪ Understand how infectious diseases develop, spread, and can be prevented. ▪ Conduct risk assessments and apply evidence-based measures to protect patients and staff. ▪ Demonstrate knowledge of oral microbiology and its relevance to health and disease. ▪ Maintain a safe, compliant, and hygienic work environment in all denturism settings.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Dental Materials	▪ Explain the physical and chemical properties of dental materials. ▪ Select and discuss the proper dental material for a specific procedure and the optimal method of manipulation of dental products (gypsum, waxes, hydrocolloids, acrylics, metals, etc.) to elicit the best clinical/laboratory performance. ▪ Recognize satisfactory and unsatisfactory characteristics of materials when prepared for clinical/laboratory use. ▪ Identify biohazardous implications associated with materials in client care and describe Ontario legislation governing the handling of hazardous substances.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Radiographic Interpretation	▪ Understand how dental x-rays work and practice safe radiographic procedures. ▪ Identify teeth, anatomy, restorative materials, and common conditions (like caries and lesions) on dental radiographs. ▪ Recognize and describe radiographic signs of periodontal, pulpal, and periapical disease, and dental injuries. ▪ Use descriptive terminology to explain radiographic findings. ▪ Integrate radiographic interpretation into patient assessment, treatment planning, and care.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Complete Dentures	▪ Understand and describe normal oral-facial anatomy, denture occlusion concepts, and clinical considerations essential for complete denture (CD) fabrication. ▪ Apply laboratory procedures, including constructing custom trays, bite blocks, and performing reline/rebase, while ensuring safe handling of materials, equipment, and adherence to safety protocols. ▪ Demonstrate proficiency in various phases of CD fabrication, including clinical and laboratory workflows, with an emphasis on occlusion, materials, and correct procedures. ▪ Identify and troubleshoot common laboratory problems, perform corrective procedures like rebasing and repairs, and understand the relationship between clinical and lab steps. ▪ Explore and critique emerging technologies such as CAD/CAM and digital denture workflows, analyzing their impact on prosthodontic procedures and outcomes. ▪ Reflect on case studies, research topics, and theoretical concepts to inform clinical decision-making and improve treatment planning in CD prosthodontics.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Partial Dentures	▪ Explain fundamental removable partial denture (RPD) theory and principles, including different types, materials, indications, and contraindications. ▪ Formulate comprehensive treatment plans and apply theoretical knowledge to design, simulate, and fabricate various types of RPDs, including cast and wrought wire frameworks. ▪ Identify and manage clinical and laboratory factors affecting RPD success, including adjustments, modifications, and corrective procedures for optimal fit, function, and aesthetics. ▪ Engage in clinical simulation activities, critically analyze case studies, and develop decision-making skills to address complex RPD cases and patient-specific needs. ▪ Explore emerging trends such as digital design and fabrication techniques and incorporate innovations into clinical practice for improved patient outcomes. ▪ Reflect on professional practice through self-assessment, peer review, and continuous learning to enhance technical skills, clinical judgment, and contemporary practices in RPDs.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Removable Implant Prosthodontics	▪ Understand dental implants and their role in denturism, including how osseointegration works and when implants are used to improve patient care. ▪ Compare and perform key steps in making CDs, RPDs, and implant-retained overdentures, including choosing attachment systems and maintaining them properly. ▪ Assess patients effectively by gathering medical and dental histories, doing oral examinations, and creating accurate treatment plans that meet each patient's needs. ▪ Fabricate and fit dental prostheses and oral devices (such as dentures, mouthguards, and anti-snoring devices) that function well, fit comfortably, and meet professional standards of the CDO. ▪ Communicate clearly with patients to explain treatment options, get informed consent, and make sure they understand the benefits, risks, and care instructions. ▪ Work with other healthcare professionals to coordinate care, consult when needed, and ensure the best outcomes for patients with implants and dentures.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Denturism Practice Management	▪ Demonstrate professional communication and teamwork in the practice environment. ▪ Maintain organized, accurate, and compliant patient and business records. ▪ Understand key business concepts including marketing, financial management, and human resources. ▪ Apply professional standards of the CDO when advertising, billing, and managing practice operations. ▪ Develop a business plan that aligns with professional, ethical, and legal requirements in Ontario.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Clinical Practice	▪ Apply the denturism process of care to provide complete and partial denture treatment. ▪ Create and maintain accurate patient records that meet the CDO standards and Ontario legislation. ▪ Integrate theory and clinical skills in community or institutional placements. ▪ Work collaboratively with patients, peers, and other professionals in diverse community settings. ▪ Reflect on personal growth, learning goals, and the role of the denturist in community health.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Communication	▪ Communicate clearly and professionally with patients, colleagues, and other health professionals. ▪ Use culturally sensitive and respectful communication to support positive patient relationships. ▪ Apply effective written, verbal, and digital communication skills in a variety of contexts. ▪ Work collaboratively and manage challenges in interprofessional communication and teamwork. ▪ Use self-awareness and reflection to improve communication and learning strategies.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:
Jurisprudence, Ethics and Professional Responsibilities	▪ Follow all Ontario legislation, CDO standards, and ethical guidelines related to denturism practice and patient care. ▪ Maintain complete, accurate, and confidential patient records in line with professional regulations in Ontario. ▪ Stay informed about updates to Ontario laws, reporting obligations, and CDO policies related to denturism practice. ▪ Demonstrate professionalism, leadership, and ethical decision-making in clinical and business settings. ▪ Reflect on the role and vision of the denturist within the broader oral health community.	❑ Yes ❑ No	❑ Yes ❑ No Please describe how the LOs were obtained:

Academic Equivalency Assessment Form

This form contains a list of subject areas and minimum learning outcomes required of denturists at an entry-to-practice level. This form is required to demonstrate how these learning outcomes have been met either through academic programs, practice experience and/or Continuing Education.

Form Instructions:

1. For each of the subject areas in Column 1, identify whether the learning outcomes (LOs) in Column 2 were taught in your academic programs and/or learned as part of your practice/work/clinical experience and/or Continuing Education by selecting "Yes/No" in Column 3 and/or Column 4.
2. If the LOs were learned as part of your practice/work/clinical experience and/or Continuing Education, please provide specific and detailed examples that show how you have achieved the LOs in your practice/work/clinical experience and/or how the LOs were achieved through completion of a structured Continuing Education course (please include course titles if applicable).

Required Supporting Documentation:

1. For Graduates of Out of Province Colleges & Non-Accredited Canadian Programs: Official Transcripts from your Denturism program of study *sent directly from* the academic institution to the College, and a notarized copy of your diploma in Denturism.
2. For Internationally Educated Individuals: A Third-Party Credential Assessment, *sent directly from* an approved academic credential assessment agency to the College (please review the Academic Credential Authentication Policy for details). Please ensure that any transcripts and degrees/diplomas are included within the Third-Party Credential Assessment report.

Optional Supplemental Documentation:

1. If your educational program was completed ten (10) or more years prior to the date of your application, it is optional to provide supplemental documentation to support any concerns regarding the currency of your knowledge, skill and judgement in the field. This could include letters from employers/mentors, Continuing Education certificates, other evidence of experience, etc.

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Personal Information:

First Name:

Last Name:

Educational Institution: **Language of Study:**

Educational Institution: **Language of Study:**

Educational Institution: **Language of Study:**

**Please ensure that you fully complete all required information within this form.
Incomplete submissions will delay the Academic Equivalency Assessment process.**

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Human Anatomy & Physiology	▪ Describe the foundational anatomical and physiological concepts necessary to understand the structure and function of the human body. ▪ Examine how specific organ systems function and the role of homeostasis in maintaining normal function. ▪ Describe how common disorders associated with the integumentary, skeletal, muscular, endocrine, nervous, cardiovascular, lymphatic, immune, respiratory, urinary, digestive and reproductive systems can impact the denturism patient and the provision of denture care.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Head, Neck & Dental Anatomy	▪ Understand the structure, function and interrelationships between the various anatomical features of the head and neck, especially pertaining to the oral cavity. ▪ Identify landmarks of the oral cavity and describe the development, anatomy, and function for all types of human teeth. ▪ Identify fundamental and preventative curvatures of the tooth, alignment of the dentition, and occlusion in relation to protecting the supporting structures. ▪ Discuss preventive clinical considerations and examine dental anomalies.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Periodontology, Dental Histology & Embryology	▪ Describe the development, structure, and function of oral and periodontal tissues. ▪ Explain changes that occur in oral tissues due to age, disease, or denture use. ▪ Recognize and describe the signs, causes, and treatments of periodontal diseases. ▪ Understand the role of the denturist in implantology and surgical support. ▪ Relate knowledge of oral anatomy and histology to patient care and prosthetic design.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Pathophysiology & Pharmacology	▪ Understand basic disease processes, the body's responses, and how they affect oral health. ▪ Explain the actions, effects, and precautions of commonly used drugs and treatments. ▪ Identify when consultation or referral to other health providers is needed for safe care. ▪ Recognize and respond appropriately to potential medical emergencies in the clinical setting. ▪ Adapt treatment plans based on medical history, medications, and patient needs.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Oral Pathology	▪ Competently assess the oral and perioral areas with an understanding of pathologic abnormalities, their etiology, clinical manifestations, treatment options, management and need for referral. ▪ Interpret and demonstrate the necessary role a denturist contributes to the identification and management of oral and perioral pathologies. ▪ Evaluate and explain the systemic impact of disease processes encountered in the clinical environment.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Nutrition	▪ Understand the principles of good nutrition and how diet affects oral and overall health. ▪ Identify nutritional needs across different life stages and conditions. ▪ Recognize the relationship between diet and oral diseases such as caries. ▪ Provide dietary guidance and counselling related to oral treatments and healing. ▪ Promote healthy habits involving diet, exercise, and stress management for disease prevention.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Gerontology	▪ Understand how aging affects oral health, general health, and denture care. ▪ Recognize physical, psychological, and communication needs of older clients. ▪ Identify common oral changes and medication-related effects in the elderly. ▪ Be aware of available social supports and resources for older adults in Ontario. ▪ Recognize signs of elder abuse and follow mandatory reporting requirements in Ontario.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Infection Prevention and Control (IPAC)	▪ Follow current Ontario IPAC standards, safety protocols, and best practices in clinical and laboratory settings. ▪ Understand how infectious diseases develop, spread, and can be prevented. ▪ Conduct risk assessments and apply evidence-based measures to protect patients and staff. ▪ Demonstrate knowledge of oral microbiology and its relevance to health and disease. ▪ Maintain a safe, compliant, and hygienic work environment in all denturism settings.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Dental Materials	▪ Explain the physical and chemical properties of dental materials. ▪ Select and discuss the proper dental material for a specific procedure and the optimal method of manipulation of dental products (gypsum, waxes, hydrocolloids, acrylics, metals, etc.) to elicit the best clinical/laboratory performance. ▪ Recognize satisfactory and unsatisfactory characteristics of materials when prepared for clinical/laboratory use. ▪ Identify biohazardous implications associated with materials in client care and describe Ontario legislation governing the handling of hazardous substances.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Radiographic Interpretation	▪ Understand how dental x-rays work and practice safe radiographic procedures. ▪ Identify teeth, anatomy, restorative materials, and common conditions (like caries and lesions) on dental radiographs. ▪ Recognize and describe radiographic signs of periodontal, pulpal, and periapical disease, and dental injuries. ▪ Use descriptive terminology to explain radiographic findings. ▪ Integrate radiographic interpretation into patient assessment, treatment planning, and care.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Complete Dentures	▪ Understand and describe normal oral-facial anatomy, denture occlusion concepts, and clinical considerations essential for complete denture (CD) fabrication. ▪ Apply laboratory procedures, including constructing custom trays, bite blocks, and performing reline/rebase, while ensuring safe handling of materials, equipment, and adherence to safety protocols. ▪ Demonstrate proficiency in various phases of CD fabrication, including clinical and laboratory workflows, with an emphasis on occlusion, materials, and correct procedures. ▪ Identify and troubleshoot common laboratory problems, perform corrective procedures like rebasing and repairs, and understand the relationship between clinical and lab steps. ▪ Explore and critique emerging technologies such as CAD/CAM and digital denture workflows, analyzing their impact on prosthodontic procedures and outcomes. ▪ Reflect on case studies, research topics, and theoretical concepts to inform clinical decision-making and improve treatment planning in CD prosthodontics.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Partial Dentures	▪ Explain fundamental removable partial denture (RPD) theory and principles, including different types, materials, indications, and contraindications. ▪ Formulate comprehensive treatment plans and apply theoretical knowledge to design, simulate, and fabricate various types of RPDs, including cast and wrought wire frameworks. ▪ Identify and manage clinical and laboratory factors affecting RPD success, including adjustments, modifications, and corrective procedures for optimal fit, function, and aesthetics. ▪ Engage in clinical simulation activities, critically analyze case studies, and develop decision-making skills to address complex RPD cases and patient-specific needs. ▪ Explore emerging trends such as digital design and fabrication techniques and incorporate innovations into clinical practice for improved patient outcomes. ▪ Reflect on professional practice through self-assessment, peer review, and continuous learning to enhance technical skills, clinical judgment, and contemporary practices in RPDs.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Removable Implant Prosthodontics	▪ Understand dental implants and their role in denturism, including how osseointegration works and when implants are used to improve patient care. ▪ Compare and perform key steps in making CDs, RPDs, and implant-retained overdentures, including choosing attachment systems and maintaining them properly. ▪ Assess patients effectively by gathering medical and dental histories, doing oral examinations, and creating accurate treatment plans that meet each patient's needs. ▪ Fabricate and fit dental prostheses and oral devices (such as dentures, mouthguards, and anti-snoring devices) that function well, fit comfortably, and meet professional standards of the CDO. ▪ Communicate clearly with patients to explain treatment options, get informed consent, and make sure they understand the benefits, risks, and care instructions. ▪ Work with other healthcare professionals to coordinate care, consult when needed, and ensure the best outcomes for patients with implants and dentures.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Denturism Practice Management	▪ Demonstrate professional communication and teamwork in the practice environment. ▪ Maintain organized, accurate, and compliant patient and business records. ▪ Understand key business concepts including marketing, financial management, and human resources. ▪ Apply professional standards of the CDO when advertising, billing, and managing practice operations. ▪ Develop a business plan that aligns with professional, ethical, and legal requirements in Ontario.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Clinical Practice	▪ Apply the denturism process of care to provide complete and partial denture treatment. ▪ Create and maintain accurate patient records that meet the CDO standards and Ontario legislation. ▪ Integrate theory and clinical skills in community or institutional placements. ▪ Work collaboratively with patients, peers, and other professionals in diverse community settings. ▪ Reflect on personal growth, learning goals, and the role of the denturist in community health.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

1	2	3	4
Subject Area	**Learning Outcomes (LOs)**	**Were the LOs obtained through school/ academic programs attended?**	**Were the LOs obtained through practice/work/clinical experience and/or Continuing Education?**
Communication	▪ Communicate clearly and professionally with patients, colleagues, and other health professionals. ▪ Use culturally sensitive and respectful communication to support positive patient relationships. ▪ Apply effective written, verbal, and digital communication skills in a variety of contexts. ▪ Work collaboratively and manage challenges in interprofessional communication and teamwork. ▪ Use self-awareness and reflection to improve communication and learning strategies.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:
Jurisprudence, Ethics and Professional Responsibilities	▪ Follow all Ontario legislation, CDO standards, and ethical guidelines related to denturism practice and patient care. ▪ Maintain complete, accurate, and confidential patient records in line with professional regulations in Ontario. ▪ Stay informed about updates to Ontario laws, reporting obligations, and CDO policies related to denturism practice. ▪ Demonstrate professionalism, leadership, and ethical decision-making in clinical and business settings. ▪ Reflect on the role and vision of the denturist within the broader oral health community.	☐ Yes ☐ No	☐ Yes ☐ No Please describe how the LOs were obtained:

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Registration**
NAME	**Third-Party Credential Evaluation Policy**
DATE APPROVED BY BOARD	**December 12, 2014**
DATE REVISED BY BOARD	**December 6, 2019, September 18, 2026**

INTENT

This policy outlines the requirements and process guidelines for third-party evaluation and authentication of academic credentials obtained by initial applicants who are applying to the College of Denturists of Ontario (the "College") in order to attempt the Qualifying Examination (QE), whose post-secondary program in denturism or equivalent has not been approved ("Non-Approved Programs") by the Board of Directors (the "Board").

BACKGROUND

One of the non-exemptible registration requirements for a General certificate of registration is the successful completion of a post-secondary program in denturism or equivalent that is, (a) approved by the Board or an accreditation body designated by the Board or (b) in the opinion of a panel of the Registration Committee ("Committee"), substantially equivalent to a program approved by the Board or an accreditation body designated by the Board.

The Board has approved certain post-secondary programs in denturism ("Approved Programs"). Initial applicants from Non-Approved Programs will undergo a substantial equivalency assessment by the Committee to determine whether the post-secondary program completed by the initial applicant is substantially equivalent to an Approved Program.

During the substantial equivalency assessment process, the Committee may rely on use of third-party credential evaluation reports to assist with its determination of substantial equivalency.

THE POLICY

Initial applicants undergoing the substantial equivalency assessment process are required to provide a third-party credential evaluation report to assist the Committee in its determination of substantial equivalency of their academic program. Academic credentials used to establish substantial equivalency must be authenticated by a third-party credential evaluation agency approved by the College.

The use of a third-party credential evaluation agencies does not transfer the College's statutory or

regulatory responsibility for registration decisions to such agencies.

Approved Agencies

The College recognizes any member organization of the Alliance of Credential Evaluation Services of Canada (ACESC) as an approved credential evaluation agency.

Process Guidelines

1. Initial applicants whose post-secondary program in denturism or equivalent is a Non-Approved Program must apply to a member organization of the ACESC to have their academic credentials evaluated and authenticated. It is the responsibility of the initial applicant to ensure that the organization they select is a member of the ACESC, as third-party credential evaluations from other organizations are not accepted.

2. The third-party credential evaluation report must be comprehensive (or course-by-course), meaning that it must:

    - verify that the degree or diploma is authentic and original;
    - confirm that the institution is recognized in Canada;
    - identify the level of Canadian equivalency; and
    - contain certified true copies of the official transcripts and degrees/diplomas that were used for the evaluation.

    Note: Third-party credential evaluation reports used for immigration purposes are not suitable and cannot be used.

3. The initial applicant must arrange for the third-party credential evaluation report to be sent directly to the College from the credential evaluation agency.

4. The Registration Committee will review the third-party credential evaluation report as part of the substantial equivalency assessment process to determine whether substantial equivalency has been met and whether the initial applicant is eligible to attempt the QE.

RELATED LEGISLATION AND DOCUMENTS

Ontario Regulation 183/25 (Registration)

Approved Denturism Programs Policy

Substantial Equivalency Assessment Policy

Substantial Equivalency Assessment Form (Form A1)

REVISION CONTROL

Date	Revision	Effective
December 12, 2014	Initial publication date.	December 12, 2014
December 6, 2019	Recognition of any member of the Alliance of Credential Evaluation Services of Canada as an approved assessment agency. Separate process guidelines created.	December 6, 2019
DATE	Updates to the policy to ensure harmony with O. Reg. 183/25 (Registration). Updated credential assessment report requirements. Consolidated separate process guidelines into this updated policy.	DATE

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Registration**
NAME	**Academic Credential Authentication Policy**
DATE APPROVED BY COUNCIL	**December 12, 2014**
DATE REVISED BY COUNCIL	**December 6, 2019**

INTENT

A diploma or degree that, in the opinion of the Registration Committee, is equivalent to the diploma in denture therapy or denturism offered by George Brown College is one of the non-exemptible requirements for a Certificate of Registration (Ontario Regulation 833/93). Establishing equivalency may involve an academic assessment that includes the authentication of internationally obtained academic credentials.

This policy describes the College's requirement that international academic credentials be authenticated by an approved third-party academic credential assessment agency.

THE POLICY

Internationally educated individuals are required to establish equivalency of their academic credentials for the purpose of meeting one of the non-exemptible requirements for a Certificate of Registration. Academic credentials used to establish equivalency must be authenticated by a third-party credential assessment agency approved by the College.

The College recognizes any member of the Alliance of Credential Evaluation Services of Canada (ACESC) as an approved assessment agency.

A current list of member organizations can be found here: https://canalliance.org/en/.

RELATED LEGISLATION

Denturism Act, 1991

Ontario Regulation 833/93 (Registration)

REVISION CONTROL

Date	Revision	Effective
December 6, 2019	Recognition of any member of the Alliance of Credential Evaluation Services of Canada as an approved assessment agency. Process guidelines are a separate document.	December 6, 2019

COLLEGE OF DENTURISTS OF ONTARIO

Academic Credential Authentication – Process Guidelines

1. Internationally educated applicants must apply to an organization that is a member of the Alliance of Credential Evaluation Services of Canada (ACESC) to have their academic credentials authenticated.

   Applicants should check the Alliance's website to confirm that the organization is a member: https://canalliance.org/en/

   Current members include:

   - Comparative Education Service (CES);
   - International Credential Assessment Service of Canada (ICAS);
   - International Qualifications Assessment Service (IQAS);
   - International Credential Evaluation Service (ICES);
   - *Ministère de l'Immigration, de la Diversité et de l'Inclusion du Québec (MIDI)*; and
   - World Education Services Canada (WES).

2. Once the evaluation has been completed, the applicant must arrange for the report to be sent directly to the College of Denturists of Ontario from the credential agency.

3. The evaluation report must:

   - verify the credentials as authentic and original;
   - confirm that the institution is recognized in Canada; and
   - identify the level of Canadian equivalency.

   The evaluation report can also contain certified true copies of the official transcripts and diplomas that were used for the evaluation.

4. The College's Registration Committee will review the report as part of the academic assessment process to determine whether educational equivalency has been met and whether the applicant is eligible to attempt the Qualifying Examination.

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Registration**
NAME	**Language Proficiency Requirements Policy**
DATE APPROVED BY BOARD	**December 12, 2014**
DATE REVISED BY BOARD	**March 22, 2019, December 6, 2019, September 7, 2021, December 9, 2022, June 14, 2024, September 18, 2026**

INTENT

This policy outlines the minimum language proficiency requirements that must be demonstrated in order to satisfy Section 4(3) of the Registration Regulation (O. Reg. 183/25), which requires that applicants must be able to speak, read and write in either English or French with reasonable fluency.

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 assessments contribute 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, Denturists must be able to understand and respond to College materials that are related to Registration, Quality Assurance, and Inquiries, Complaints & Reports and Discipline. Proficiency in English or French is an essential part of a Denturist's accountability to the College and to the public 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 reasonable fluency.

An applicant whose first language is not English or French, or who did not complete their relevant 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 (COR).

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

Demonstrating Language Fluency

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

1. Complete a standardized language proficiency test administered by a recognized third-party testing agency and meet or exceed the minimum cut-off score for that test (Appendix A). The cut-off scores required in the recognized language tests reflect the minimum level of English or French language proficiency the College believes is necessary for an applicant to function successfully as a Denturist.

   Applicants are responsible for the cost of language proficiency tests.

   Test results will be considered valid for two (2) years from the date the test was administered and must be sent directly from the third-party testing agency to the College.

   OR

2. Provide non-objective evidence (NOE) of language proficiency. The College accepts alternatives to a standardized language proficiency test. An applicant who wishes to meet the language proficiency requirement through NOE of language proficiency must submit evidence supporting **at least two (2)** of the following:

   a. Successful completion of their relevant education in a majority English or French country.

   b. 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 COR for which the application is being made.

   c. Successful completion of the four (4) final years of school in Canada that establishes eligibility to apply for university or college.

   d. Successful completion of a Canadian college or university degree.

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

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 **all** of 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 (2) years.

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 registrant of the College.

An extension to the validity of an applicant's language proficiency test scores is valid for a period of up to one (1) year. A second extension of up to one (1) 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 test scores is denied, the application will be referred to the Registration Committee for review.

Appendix A: Recognized Language Proficiency Test & Cut-Scores

Language Proficiency Test	Minimum Score
Test of English as a Foreign Language (TOEFL)	Overall minimum of 89 Including a minimum of: Reading: 20/30 Listening: 21/30 Speaking: 24/30 Writing: 21/30
International English Language Testing System (IELTS)	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 Academic English Language Test Computer Edition (CAEL CE)	A minimum of: Reading: 60 Listening: 60 Speaking: 60 Writing: 60
Canadian English Language Proficiency Index Program (CELPIP)	A minimum of: Reading: 7.0 Listening: 7.0 Speaking: 7.0 Writing: 7.0
Pearson Test of English (PTE Core)	A minimum of: Reading: 60-68 Listening: 60-70 Speaking: 68-75 Writing: 69-78
Test de connaissance du français pour le Canada (TCF Canada)	A minimum of: Reading: 453-498 Listening: 458-502 Speaking: 10-11 Writing: 10-11
Test d'évaluation de français pour le Canada (TEF Canada)	A minimum of: Reading: 207-232 Listening: 249-279 Speaking: 310-348 Writing: 310-348

RELATED LEGISLATION

Ontario Regulation 183/25 (Registration)

REVISION CONTROL

Date	Revision	Effective
March 22, 2019	• 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	• Addition of CAEL CE and CELPIP to list of accepted standardized tests for English Language Proficiency	December 6, 2019
September 7, 2021	• 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	• Addition of TCF Canada and TEF Canada to list of accepted standardized tests for French Language Proficiency	December 9, 2022
June 14, 2024	• Addition of Pearson Test of English to list of accepted standardized tests for English Language Proficiency	June 14, 2024
September 18, 2026	• Updates to the policy to ensure harmony with O. Reg. 183/25 (Registration). Removal of the Canadian Language Benchmark Assessment and Placement Test (CLBA, CLBPT) due to discontinuation of the two tests.	September 18, 2026

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, June 14, 2024**

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:

a) 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

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
Pearson Test of English (PTE Core) https://www.pearsonpte.com/	Reading: 60-68 Listening: 60-70 Speaking: 68-75 Writing: 69-78
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

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

TOEFL®PBT- Test of English as a Foreign Language- Paper Based

CLB – Canadian Language Benchmark

CLBPT – Canadian Language Benchmark Placement Test

CLBA – Canadian Language Benchmark Assessment

CAEL CE – Canadian Academic English Language Test, Computer Edition

CELPIP – Canadian English Language Proficiency Index Program

REVISION CONTROL

Date	Revision	Effective
March 22, 2019	• 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	• Addition of CAEL CE and CELPIP to list of accepted standardized tests for English Language Proficiency	December 6, 2019
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COLLEGE OF DENTURISTS OF ONTARIO

BRIEFING NOTE

To: **Board of Directors**

From: **Meghan Hoult, Deputy Registrar**

Date: **September 18, 2026**

Subject: **Qualifying Examination Additional Attempt Decision-Making Framework & Candidate Guidelines**

Public Interest Rationale

The mandate of the College of Denturists of Ontario (the "College") 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 develops and hosts its own Qualifying Examination (QE) to ensure a smooth, orderly, and defensible examination process.

The implementation of a structured and objective process and framework for addressing candidates who may exhaust their attempt limit for the QE is important not only to ensure public protection, but also to promote future candidate success and ensure that all candidates are provided with fair opportunity to demonstrate entry-to-practice competencies.

Background

The QE consists of two components, the Multiple-Choice Question (MCQ) Examination and the Objective Structured Clinical Examination (OSCE). With the introduction of the new Registration Regulation in 2025 (O. Reg. 183/25), a limit of three (3) attempts at each component was put in place and attempts at the QE began counting in February 2026. Previous attempts prior are not counted.

The Registration Regulation includes a stipulation whereby candidates are eligible to apply to the Registration Committee (the "Committee") to attempt a QE component for an additional time following three (3) unsuccessful attempts.

The College is proposing a decision-making framework as well as candidate guidelines to establish clear processes for additional QE attempts, to ensure clarity for both candidates and the Committee.

Risk Considerations

Public Protection

Candidates who are repeatedly unsuccessful at the QE may ultimately go on to become registrants despite ongoing competency concerns. It is important that the process and framework maintain a high evidentiary threshold, requiring objective evidence of remediation, and to ensure that the Committee's decisions prioritize public protection.

Procedural Fairness & Potential for Legal Review

Inconsistent decisions between candidates could lead to allegations of unfairness or bias. Similarly, decisions in extreme cases which may require a candidate to successfully complete another program in Denturism may be challenged through appeals or legal review. These risks can be mitigated with the use of a quantitative process and framework which establishes clear criteria, decision-making principles, standardized documentation reviews, and decision-making guidance for the Committee.

Reputational Risk

The public may perceive additional QE attempts beyond the established limit as lowering standards. The purpose of the additional attempts framework is to balance candidate fairness with public protection, and minimum competency standards remain unchanged.

Options

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

1. Approve the draft framework and guidelines as **presented** with immediate implementation.
2. Approve the draft framework and guidelines as **amended** with immediate implementation.
3. Request further drafting with a return to the Board for consideration.
4. Other.

After consideration of these matters, the Board may:

Suggested Motion – That the Board approves the draft Qualifying Examination Additional Attempt Decision-Making Framework and Candidate Guidelines for immediate implementation.

Attachments

1. Draft Qualifying Examination Additional Attempt Decision-Making Framework
2. Draft Qualifying Examination Additional Attempt Candidate Guidelines

Qualifying Examination Additional Attempt Decision-Making Framework

Background

The mandate of the College of Denturists of Ontario (the "College") 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 typically hosts its Qualifying Examination (QE) twice a year to ensure a smooth, orderly, and defensible examination process.

The QE is made up of two components, including a Multiple-Choice Question (MCQ) Examination and Objective Structured Clinical Examination (OSCE). There is a limit of three (3) attempts at each component of the QE. However, candidates can apply for an additional attempt following three (3) unsuccessful attempts with the approval of the Registration Committee (the "Committee").

Candidate Application Process

Candidates applying for an additional attempt will submit a self-study and competency gap identification plan ("self-study plan") to the Committee, documenting how they propose to rectify any deficient competency areas found in their previous QE performances.

Committee Decision-Making Process & Framework

Step 1: Review & Analysis of Candidate QE Performance Reports

Objectives:

- **Distribution:** Identify whether the candidate's performance deficiencies are consistently widespread across multiple competency areas or isolated to specific competency areas.
- **Criticality:** Identify whether the candidate's performance deficiencies are consistently in critical competency areas (as defined by the Committee).
- **Severity:** Determine the severity of performance deficiencies in competency areas across performance reports.

QE Performance Reports	Yes (1)	No (0)
Are there consistent widespread performance deficiencies in multiple competency areas?		
Are there consistent deficiencies in critical competency areas?		
Are there moderate to severe deficiencies in any competency areas (i.e. well below the group mean)?		
SCORE (out of 3)		

Step 2: Review & Analysis of Candidate Self-Study Plan

Self-Study Plan Requirements:

A self-study plan must:

- Identify deficient competency areas.
- Include a section on self-reflection.
- Consist of additional proposed self-study, continuing education, training and/or mentoring sessions.
- Provide details of the proposed plan.

Self-Study Plan Criteria:

✓ **Completeness** – are all relevant competency areas addressed by the candidate?

✓ **Specificity** – does the candidate's plan specify targeted actions to rectify deficiencies?

✓ **Feasibility** – are the candidate's proposed actions practical and aligned with available resources?

✓ **Commitment** – does the candidate's plan demonstrate understanding and commitment to improvement?

Step 3: Additional Considerations & Mitigating Factors

- **Prior Examination Attempts**
  - The Committee's review may include information related to prior QE attempts by the candidate (and their outcomes) – including attempts prior to the implementation of the attempt limit.

- **Prior Appeals**
  - The Committee's review may include information related to prior appeals by the candidate (and their outcomes).

Step 4: Determine Course of Action to Best Support the Candidate

Possible courses of action that the Committee can take include:

1. **Approval of additional attempt**
    a. Any suggested modifications/advice to improve the candidate's proposed self-study plan can be provided.
    b. No proof of completion is required to be provided to the College prior to applying for an additional attempt. Exam preparation and adherence to the self-study plan is the candidate's sole responsibility.

2. **Require additional training or remediation such as requiring the candidate to find a mentor, attend specific courses or webinars, etc.**
    a. Any suggested modifications/advice to improve the candidate's proposed self-study plan can be provided.
    b. Candidate must provide proof to the College that they have completed an additional training or remediation program prior to becoming eligible to apply for an additional attempt.

3. **In rare/serious circumstances involving multiple mitigating factors – require successful completion of another post-secondary program in Denturism (or equivalent)**
    a. Candidate must provide proof to the College that they have successfully completed another post-secondary program in Denturism (or equivalent) prior to becoming eligible to apply for an additional attempt.

See **Appendix 1** for the Candidate Performance Analysis table.

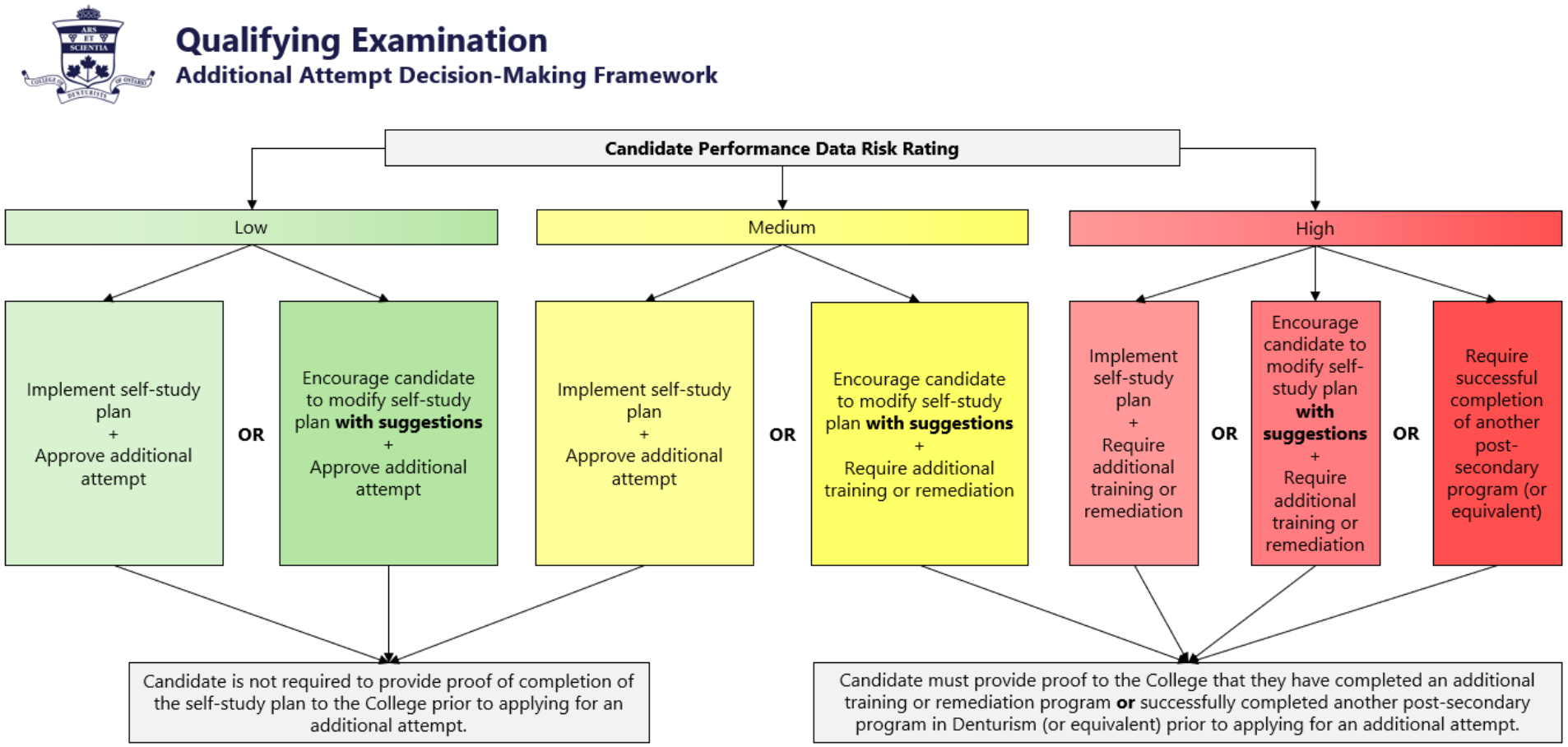
See **Appendix 2** for the additional attempt decision-making tree.

Appendix 1
Candidate Performance Analysis Table

Candidate Performance Data	Suggested Course of Action	Next Steps
SCORE: 0 No widespread or critical systemic deficiencies indicative of serious concerns for safe and competent practice. Deficiencies point to knowledge gaps that can be addressed through self-guided strategies.	Implement self-study plan + Approve additional attempt	Candidate is not required to provide proof of completion of the self-study plan to the College prior to applying for an additional attempt.
	Encourage candidate to modify self-study plan **with suggestions** for improvement + Approve additional attempt	Candidate is not required to provide proof of completion of the self-study plan to the College prior to applying for an additional attempt..
SCORE: 1-2 Multiple competency areas are deficient. Specific deficiencies point to knowledge gaps that can be addressed through a robust self-study plan or targeted remediation/training. Moderate concerns for safe and competent practice.	Implement self-study plan + Approve additional attempt	Candidate is not required to provide proof of completion of the self-study plan to the College prior to applying for an additional attempt.
	Encourage candidate to modify self-study plan **with suggestions** for improvement + Require additional training, courses, webinars, or remediation	Candidate must provide proof to the College that they have completed an additional training or remediation program prior to applying for an additional attempt.
SCORE: 3 Failure in multiple critical areas, indicating foundational knowledge gaps.	Implement self-study plan + Require additional training, courses, webinars, or remediation	Candidate must provide proof to the College that they have completed an additional training or remediation program prior to applying for an additional attempt.

Performance suggests knowledge gaps that cannot be addressed through targeted remediation/training alone. Serious concerns for safe and competent practice and/or mitigating factors.	Encourage candidate to modify self-study plan **with suggestions** for improvement + Require additional training, courses, webinars, or remediation	Candidate must provide proof to the College that they have completed an additional training or remediation program prior to applying for an additional attempt.
	Require the candidate to successfully complete another post-secondary program in Denturism (or equivalent)	Candidate must provide proof to the College that they have successfully completed another post-secondary program in Denturism (or equivalent) prior to applying for an additional attempt.

Appendix 2
Additional Attempt Decision-Making Tree



College of Denturists of Ontario
Approved by the Board: September 18, 2026

COLLEGE OF DENTURISTS OF ONTARIO

Candidate Guidelines: QE Additional Attempt

Background

The College of Denturists of Ontario's Qualifying Examination ("College" & "QE") consists of two components – the Multiple-Choice Question ("MCQ") Examination and Objective Structured Clinical Examination ("OSCE"). There is a limit of three attempts at each component of the QE.

This document outlines the required process that candidates must undertake in order to apply for an additional attempt following three unsuccessful attempts.

Right to Appeal

Any candidate who is unsuccessful on a specific component of the QE and who meets specific criteria has the right to appeal their attempt according to the Qualifying Examination Appeal Policy.

If a candidate appeals their result following their third unsuccessful attempt, the decision and reasons for that appeal must be issued prior to the candidate becoming eligible to apply for an additional attempt. In the event that the candidate's appeal is successful, the additional attempt application process does not apply as the candidate's third attempt will have been nullified.

Application

Candidates who wish to apply for an additional attempt will be provided with the opportunity to submit a self-study plan to the Registration Committee, documenting how they propose to rectify any deficient competency areas found in their previous QE performances.

Candidates must submit their proposed self-study plans in writing to exams@denturists-cdo.com.

Self-Study Plan

The self-study plan will consist of two key areas:

1. Identify Deficient Competency Areas & Self-Reflection

Candidates should review their previous performance reports, including their performance across the competency areas as compared to successful first-time candidates.

Candidates should identify deficient competency areas and self-reflect on why they may have fared poorly in the areas of deficiency.

2. Develop a Proposed Self-Study Plan

Using the self-identified deficient competency areas, candidates should then develop a proposed self-study plan for each deficient area.

Details of the **proposed plan** may include but are not limited to:

- A breakdown of **what** the candidate intends to self-study e.g. specific subject topics, courses and their materials/resources, textbooks, course descriptions, course syllabi, clinical and/or laboratory skills, etc. by deficient competency area.
- A breakdown of **how** the candidate intends to study e.g. self-study, continuing education, training and/or mentoring, or a combination thereof.
- A breakdown of **how much** the candidate intends to study e.g. weekly plan/schedule, number of hours dedicated to specific competency areas, number of hours dedicated to specific self-study activities, etc.
- If applicable, a breakdown of **who** the candidate intends to propose as a mentor e.g. names of any proposed mentors, how the mentors can help the candidate target their identified competency areas requiring improvement, etc.

Assessing Proposed Self-Study Plans

The Registration Committee will assess self-study plans based on the following criteria:

- **Completeness** – are all relevant competency areas addressed by the candidate?
- **Specificity** – does the candidate's plan specify targeted actions to rectify deficiencies?
- **Feasibility -** are the candidate's proposed actions practical and aligned with available resources?
- **Commitment -** does the candidate's plan demonstrate understanding and commitment to improvement?

Self-Study Plan Review Process

1. At the next available opportunity, the Registration Committee will review the candidate's self-study plan along with the candidate's performance reports.

2. Additional considerations by the Registration Committee may include prior QE attempts by the candidate, including attempts prior to the implementation of the attempt limit and/or information related to prior appeals by the candidate (and their outcomes).

3. The Registration Committee may request additional information or documentation in order to evaluate the self-study plan and to specify a course of action to best support the candidate.

4. Following review, a course of action will be communicated to the candidate in writing. This could include:

    a. Approving the self-study plan and permitting an additional attempt.

    b. Offering guidance or suggested modifications for improvement regarding the self-study plan.

    c. Requiring the candidate to complete a specified additional training/remediation program (such as requiring a candidate to find a mentor, attend specific courses or webinars, etc.) prior to attempting the QE for an additional time. Proof of completion may be required prior to applying for an additional attempt.

    d. Requiring the candidate to successfully re-complete another post-secondary program in Denturism (or equivalent) prior to an additional attempt, in rare/serious circumstances involving multiple mitigating factors. Proof of completion is required prior to applying for an additional attempt.

5. Candidates are not eligible to register for an additional attempt of the QE until they receive confirmation from the Registration Committee.

Goal of the Review Process

The Registration Committee's review process aims to balance fairness, transparency, and public safety while supporting the candidate and offering clear criteria and pathways based on performance data.

Accountability

Exam preparation and adherence to the self-study plan is the candidate's sole responsibility. Candidates are accountable for assessing their own needs, competency gaps and learning barriers, and for developing an individualized plan based on their specific requirements.

Appendix

List of Revisions

Date	Revision
September 18, 2026	• Initial publication date.

COLLEGE OF DENTURISTS OF ONTARIO

BRIEFING NOTE

To: **Board of Directors**

From: **Tera Goldblatt, Manager, Registration and Quality Assurance**

Date: **September 18, 2026**

Subject: **Funding for Therapy or Counselling Eligibility Policy**

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 a zero-tolerance policy for any form of abuse – verbal, physical, emotional, or sexual abuse - of patients by Denturists. The College is committed to preventing sexual abuse by promoting awareness of the College's expectations and by effectively addressing patient complaints.

The Funding for Therapy or Counselling Eligibility Policy outlines the funding available and the eligibility requirements for patients who have experienced sexual abuse by a registrant to access therapy or counselling.

Background

The College's Funding for Therapy or Counselling Eligibility Policy requires routine updating as the amount of available funding quoted in the current policy, approximately $17,940.00, was increased to $20,470.00 on July 1, 2026. This is based on the newly published Schedule of Benefits for Physician Services Under the Health Insurance Act – updated July 22, 2026, and effective as of July 1, 2026. The amount of available funding is equivalent to the amount that (OHIP) would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist.

Proposed Updates

While the schedule of benefits is not updated annually, it is routinely updated requiring the College's policy to be updated as well since the amounts of funding are listed in the current policy. The proposed updated draft removes the funding amounts to mitigate the unknown frequency of the updates to the amount covered by the Ontario Health Insurance Plan (OHIP).

In addition to the funding for therapy, the current policy allows for $9000.00 per patient in support funding. This additional funding was implemented prior to the COVID-19 pandemic and was intended to address barriers to accessing treatment by assisting with ancillary expenses, such as childcare, medications, and travel, that would not be covered by the cost of therapy itself.

As the College has traditionally budgeted for up to 10 patients, the amount of funding available as of June 12, 2026, is $179,400, in accordance with the current policy. However, following the increase implemented by OHIP effective July 1, 2026, this amount would need to increase to $204,700. In addition, the College would need to reserve a further $90,000 to accommodate support funding for up to 10 patients. Since there is no cap to the amount of potential patients, the current policy as it stands, can create a significant financial liability for the College.

While recovery of the funds is theoretically possible, the College has not, to date, recovered any of the funding that has been provided.

In addition, no individual has ever accessed the support funding outlined in the policy. In the years since the support funding was put in place, availability of online mental health services has expanded significantly. While therapy was previously provided primarily in person, virtual mental health services are now widely available, offering greater flexibility and reducing barriers to accessing care. In light of these changes, the continued need for the support funding may warrant reconsideration.

Summary of Proposed Changes

Funding for Therapy or Counselling Eligibility Policy	
Current Policy	**Draft Updated Policy**
• Last published/updated March 27, 2026 • Out-of-date funding amounts • Contains $9000 in support funding for expenses related to attending therapy sessions • Dated terminology	• Removal of specific funding amount to future proof policy • Removed support funding to reduce potential financial liability • Updated terminology and language and formatting reflective of the ongoing governance modernization and current plain language best practices

Reserve Fund Top-Up

As OHIP has once again increased the base funding amount, the College will need to restrict additional funds to top up the restricted reserve fund for Counselling and Therapy. At the June 12, 2026, Board Meeting, the Board already restricted an additional $42,010 for a total of $179,400. Immediately after

the Board meeting, OHIP announced another increase in the base funding, requiring the CDO's reserve fund for therapy to be $204,700. Therefore, an additional $25,300 is required to be restricted.

Accordingly, the Board of Directors is formally asked to approve the following motion: "That the Board restricts $25,300 from the Unrestricted Net Assets to Internally Restricted for Therapy and Counselling."

Risk Considerations

Eliminating the support funding could leave patients with potential barriers to treatment. This was particularly true in the past when access to mental health care services depended on one's ability to travel to the mental health professional. This is no longer the case as online services or telephone sessions are now the standard mode of treatment that is widely available.

In addition, no individual has ever accessed the support funding outlined in the policy. Given the expanded availability of virtual mental health services and the fact that the support funding has never been accessed, there is limited evidence that maintaining the funding is necessary to address current barriers to treatment.

Policy Clarity and Communication

Policies must be clearly written and reflect current information, so applicants understand the current amount of funding available and eligibility requirements when seeking funding for therapy or counseling. The draft updated policy includes current funding data and includes modernized language for clarity.

Options

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

1. Approve the updated policy as **presented**.
2. Approve the updated policies as **amended**.
3. Request further drafting with a return to the Board for consideration.
4. Other.

After consideration of these matters, the Board may:

Suggested Motion #1 – That the Board approves the Funding for Therapy or Counselling Eligibility Policy as presented.

Suggested Motion #2 – That the Board restricts $25,300 from the Unrestricted Net Assets to Internally Restricted for Therapy and Counselling

Attachments:

1. Draft Funding for Therapy or Counselling Eligibility Policy
2. Current Funding for Therapy or Counselling Eligibility Policy

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Patient Relations**
NAME	**Funding for Therapy or Counselling Eligibility Policy**
DATE APPROVED BY BOARD	**June 14, 2019**
DATE REVISED BY BOARD	**March 27, 2026, September 18, 2026**

THE POLICY

Eligibility Criteria

A person is eligible for funding for therapy and counselling if it is alleged that the person was sexually abused while the person was a patient of a registrant of the College of Denturists of Ontario (the "College").

Funding

The maximum funding available to each applicant for therapy or counselling is established by the Regulated Health Professions Act (the "RHPA") and is equivalent to the amount that the Ontario Health Insurance Plan (OHIP) would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist. Under the RHPA, the funding provided is reduced by the amount that OHIP or a private insurer is willing to pay.

Funding is paid directly to the chosen therapist/counsellor and may only be used to pay for therapy or counselling. Funding if available for a maximum period of five years from the date on which the applicant became eligible.

The College is entitled to recover funding from:

- Reimbursement orders made by the Discipline Committee against the Denturist found guilty of sexually abusing the applicant;

- A civil action against the Denturist to recover the funding.

Choice of Therapist/Counsellor

1. An applicant for funding for therapy or counselling may choose any therapist or counselor except one who:
    a. is a family member; or

b. to the College's knowledge, has at any time or in any jurisdiction been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.

2. The College strongly recommends that applicants select a regulated health professional for provision of their therapy/counselling; however, this is not a requirement for funding.

3. Where an applicant selects a non-regulated practitioner, the applicant must submit an acknowledgement that the therapist/counsellor is not a regulated professional and therefore not subject to oversight and discipline by a regulatory authority.

REVISION CONTROL

Date	Revision	Effective
June 14, 2019	Initial approval date	June 14, 2019
March 27, 2026	Updated funding amount, terminology and language and formatting reflective of ongoing governance modernization and current plain language principles.	March 27, 2026
DATE	Funding amount and support funding removed. Minor content and formatting changes.	DATE

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Patient Relations**
NAME	**Funding for Therapy or Counselling Eligibility Policy**
DATE APPROVED BY BOARD	**March 27, 2026**

ELIGIBILITY

If you have been sexually abused by a registrant of the College of Denturists of Ontario (the "College"), you may qualify for this program. A person is eligible for funding if **any** of the following scenarios apply:

(a) It is alleged in a complaint or report that the applicant, while a patient, was sexually abused by a current or former registrant.
(b) There has been a finding by a panel of the College's Discipline Committee that the applicant, while a patient, was sexually abused by a current or former registrant.
(c) A current or former registrant enters into an undertaking with the College to provide funding for therapy or counselling.
(d) There is an admission made by a registrant in a statement to the College or in an agreement with the College that he or she sexually abused the applicant while the applicant was a patient of the registrant.
(e) A current or former registrant has been convicted under the Criminal Code of Canada of sexually assaulting the applicant while the applicant was a patient of the registrant and the facts supporting the sexual assault constitute sexual abuse within the meaning of the Health Professions Procedural Code.
(f) There is a statement, contained in the written reasons of a committee of the College given after a hearing, that the applicant, while a patient, was sexually abused by a current or former registrant.
(g) There is sufficient information presented to the Patient Relations Committee to support a reasonable belief that the applicant, while a patient, was sexually abused by a current or former registrant.

THE POLICY

Funding for Therapy or Counselling Eligibility Policy

Therapy and Counselling

The maximum funding available to each applicant for therapy or counselling is established by the *Regulated Health Professions Act* (the "RHPA") and is equivalent to the amount that the Ontario Health Insurance Plan (OHIP) would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist. This funding amounts to approximately $17,940 per person and is accessible over a

five-year period. Under the RHPA, the funding provided is reduced by the amount that OHIP or a private insurer is willing to pay.

Support Funding

The College will provide additional funding for certain expenses associated with accessing therapy or counselling related to the sexual abuse. This support funding is only available concurrently with therapy or counselling that a patient is receiving pursuant to the RHPA. The total amount of support funding available is $9,000. The $9,000 may be used towards any of the following expenses:

Medications, Treatments or Remedies

The College will provide funding for medications, treatments or remedies directly connected to therapy for sexual abuse by a registrant, if it is prescribed or recommended by an Ontario regulated health professional and it is not paid for either through a government payment program (e.g., ODSP) or a third-party insurance company. These may take the form of prescription drugs, natural remedies, homeopathic treatments and other supplements.

The following documentation is required:

- Receipts identifying the medications, treatments or remedies and their costs.

Dependent care

The College will provide funding to support the cost of dependent care for one or more dependents who require care during the hours that an applicant attends therapy or counselling for sexual abuse by a registrant.

The following documentation is required:

- Completion of an attestation form provided by the College attesting that they have one or more dependent that requires care services while the patient is receiving therapy or counselling.

Travel expenses

The College will provide funding to a patient for the following expenses for travel to their therapist's office – mileage, public transit, taxi/ride share.

The following documentation is required:

- Mileage: a Google map setting out the kilometres between their home and therapist's office.
- Public Transit: Completion of an attestation form provided by the College regarding the costs to take public transit to their therapist's office.
- Taxi/Ride Share: Receipts for the costs for a taxi or ride share to their therapist's office.

REVISION CONTROL

Date	Revision	Effective
February 10, 2026	Funding amount and terminology updated. Minor content and formatting changes.	March 27, 2026

Dundee Consulting Group Ltd.

To: College of Denturists of Ontario Board of Directors

From: Dundee Consulting Group Ltd.

Date: September 18, 2026

Re: Implementation of Approved Changes to the Elections Process and Eligibility Requirements – DRAFT Elections Policy

Recommendation/Action Required:
That the Board approve the DRAFT Elections Policy.

Background:
The CDO Board has embraced several changes associated with governance modernization over the past several years. At its September 2025, March 2026 and May 2026 meetings, the Board considered and approved a number of changes to the elections process and eligibility requirement. These include:

- Ontario-wide elections with 3-year term limits
- Selection of a slate of candidates using election criteria informed by the Board's identified skills, competencies and experiences, as set out in the Board's Competency and Skills Based Self-Assessment
- Automatic inclusion of incumbents on the election slate
- Expansion of the Mandatory Eligibility Criteria to require all prospective candidates to complete a learning module and skills and competency based self-assessment and to provide a summary of the skills and experiences they would bring to their role on the Board
- Creation of an objective process for the recruitment and screening of candidates overseen by an External Review Panel. The process would include:
    - an initial screening for basic eligibility conducted by staff
    - a review of all materials provided by prospective candidates; an assessment of each eligible candidate against approved criteria and desired skills and competencies; and the development of a long list of recommended candidates

to be interviewed to be conducted by the External Review Panel comprised of external experts with experience in regulation and governance
- Candidate interviews conducted by the External Review Panel on behalf of the Board
- An appeals process for unsuccessful candidates adjudicated by the Executive Committee.

Following its approval of these changes, the Board also approved a project plan which included, in Phase 2, the development of a DRAFT Elections Policy. The DRAFT Policy, which was developed by DCG and has been reviewed by CDO staff and legal counsel, is included with this Briefing Note for the Board's consideration.

Action Item:

- To approve the draft Elections Policy as is, with an implementation date to be set by the Board at a later date.

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Governance**
NAME	**Elections Policy**
DATE APPROVED BY BOARD	
DATE REVISED BY BOARD	

INTENT

This policy outlines the College of Denturists of Ontario's (the "College") elections process. The College is committed to governance modernization and continuous improvement. As part of that commitment, the College has implemented an Ontario-wide competency-based elections process that includes an external review panel and appeals process.

THE POLICY

Section 94 (1) of the Health Professions Procedural Code gives the College the authority to make by-laws respecting the qualifications of **elected Board Directors.** Section xx of the College by-laws sets out the following:

- Ontario-wide elections with 3-year term limits
- Selection of a slate of candidates using election criteria informed by skills, competencies and experiences set out in the Board and Committee Competency Profile/Skills Matrix.
- Automatic inclusion of incumbents on the election slate (for the first election cycle only)
- Mandatory Eligibility Criteria requiring all prospective candidates to complete a learning module and skills and competency based self-assessment and provide a summary of the skills and experiences they would bring to their role on the Board
- An objective process for the recruitment and screening of candidates overseen by an External Review Panel
- Final approval of a slate of candidates by the Election Committee and an appeals process adjudicated by the Executive Committee

ELECTIONS PROCESS AND MATERIALS

Elections for the College Board will be held every three years, with Professional Directors being elected for a 3-year term. Incumbents sitting on the Board for the first election cycle following the decision to implement Ontario-wide elections will be automatically included on the ballot. Incumbents will be required to go through the election process for all subsequent elections.

There will be a Call for Election at least 90 days prior to the date of the election. The Call for Election will include the Board and Committee Competency Profile/Skills Matrix and set out the deadline by which candidates wishing to stand for election will be required to complete and submit election materials. These may include:

- A candidate's questionnaire summarizing the skills and experiences the prospective candidate would bring to their role on the College Board
- Online Learning Module
- Competency and Skills Based Self-Assessment

EXTERNAL REVIEW PANEL

To avoid any actual or perceived conflicts of interest in the elections process, an External Review Panel (ERP) comprised of up to 2-3 individuals will be selected prior to the Call for Election. These individuals may include external consultants and/or individuals with extensive experience in governance and the elections process. Members of the ERP will be trained to carry out their role in considering applications and providing a list of qualified candidates to the Election Committee. Current Board Directors, Committee Members, and Volunteers of the College are excluded from serving on the ERP.

SCREENING AND APPEALS

Qualified candidates for election to the College Board will be selected through the following process:

- College staff will conduct an initial screening of prospective candidates to ensure that they meet basic eligibility requirements and have submitted and completed all required materials.
- Following this initial screening, College staff will provide a list of prospective candidates and supporting materials to the ERP.
- The ERP will review all materials provided by prospective candidates and assess each eligible candidate against approved criteria and desired skills and competencies set out by the Board in its Board and Committee Competency Profile/Skills Matrix.

- Prospective candidates who meet the approved criteria and have demonstrated the desired skills and competencies through their applications may be interviewed by the ERP to stand for election.
    - Interviews will be conducted and will focus exclusively on determining if prospective candidates meet the criteria set out in the Board and Committee Competency Profile/Skills Matrix.
    - Questions may include scenarios and behaviour-based questions.
- Once the interviews are complete, the ERP will recommend a list of candidates to the Election Committee.
- All prospective candidates will be notified of the outcome of the preliminary screening process. Unsuccessful candidates will have 10 days to appeal the ERP's decision to the Executive Committee.
- The Executive Committee will convene to determine whether the appeal should be upheld or the appeal is successful. If the appeal is successful, the candidate will be added to the slate of candidates for election.
- Once the 10-day appeals process has expired, the Election Committee will consider and approve a final slate of candidates for election.
- Qualified candidates will be placed on the election ballot.

REVISION CONTROL

Date	Revision	Effective

COLLEGE OF DENTURISTS OF ONTARIO

BRIEFING NOTE

To: **Board of Directors**

From: **Meghan Hoult, Deputy Registrar**

Date: **September 18, 2026**

Subject: **Qualifying Examination Chief Examiner and Deputy Chief Examiner Eligibility & Selection Policies**

Public Interest Rationale

The mandate of the College of Denturists of Ontario (the "College") 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 develops and hosts its own Qualifying Examination (QE). The Chief Examiner and Deputy Chief Examiner oversee the QE to ensure that each candidate is afforded a fair and optimal standardized assessment and that the examination is valid, objective and defensible.

The proposed policies outline the criteria and requirements for establishing the eligibility and selection criteria for the Chief Examiner and Deputy Chief Examiner for the College.

Background

The Chief Examiner and Deputy Chief Examiner eligibility and selection criteria ensure that the registrants appointed to these roles:

- Have current practice experience in a patient care setting.
- Have experience in the development, administration, and/or oversight of the QE process.
- Are well equipped to lead and oversee, or assist with the leadership and oversight of, all aspects of the QE process.
- Avoid perceived or real conflicts of interest or bias.
- Are committed to transparency, accountability, and fairness.
- Protect the security of the examination.

Currently, the "Roles and Responsibilities" and "Selection Process Document" for both the Chief Examiner and Deputy Chief Examiner are found within separate documents. The College is proposing

two new eligibility and selection policies for the roles of Chief Examiner and Deputy Chief Examiner that combines aspects of the two current documents.

Proposed Changes

Current Eligibility & Selection Criteria	Draft Policies
• Two separate documents for each role (four in total) • Last published/updated in 2023 (Chief Examiner) and 2025 (Deputy Chief Examiner) • Dated eligibility requirements ("The applicant must have been registered in a Canadian jurisdiction in the general, active class, or equivalent") - missing inactive class • Eligibility and ineligibility criteria are combined into single sections • Roles, responsibilities, expectations and time commitments do not fully reflect the requirements as they currently exist now that the QE is independent/no longer multi-jurisdictional • Selection processes are lengthy, resource-intensive and do not account for succession planning	• Combined into one policy for each role (two in total) • Updated language to reflect the inclusion of registrants in other classes (e.g. inactive) under O. Reg. 183/25 (Registration) • Separated eligibility and ineligibility criteria into independent sections for clarity • Updated roles, responsibilities, expectations and time commitments to better reflect the current requirements of each role • Streamlined selection processes for more efficient use of College and Board resources – from the current selection committee that drew members from multiple places to just the Qualifying Examinations Committee conducting the selection process. • Simplified and standardized application process for registrants using Microsoft Forms • Added sections on succession planning and direct reappointment powers of the Board

Risk Considerations

Operational Risks

Due to the high-stakes environment and nature of the QE, and in consideration of the significant roles and responsibilities of the Chief Examiner and Deputy Chief Examiner, a substantial operational risk exists should the Board not recruit a suitable Chief Examiner and Deputy Chief Examiner. The draft policies utilize the Qualifying Examination Committee, College staff and psychometricians as contributors to the selection processes, all of whom are the most familiar with the Chief Examiner and Deputy Chief Examiner roles, responsibilities and expectations.

Policy Clarity and Communication

Policies must be clearly written and accessible, so registrants understand the eligibility, selection criteria, roles and responsibilities, expectations and selection process relating to the Chief Examiner and Deputy Chief Examiner roles. The draft policies add clarity and more accurately reflect the roles as they currently exist. The policies also simplify and standardize the application process for registrants using an online form.

Options

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

1. Approve the draft policies as **presented** with immediate implementation.

2. Approve the draft policies as **amended** with immediate implementation.

3. Request further drafting with a return to the Board for consideration.

4. Other.

After consideration of these matters, the Board may:

Suggested Motion – That the Board approves the draft Qualifying Examination Chief Examiner Eligibility & Selection Policy and the Deputy Chief Examiner Eligibility & Selection Policy for immediate implementation.

Attachments

1. Draft Qualifying Examination Chief Examiner Eligibility & Selection Policy
2. Draft Qualifying Examination Deputy Chief Examiner Eligibility & Selection Policy

3. Current Chief Examiner Roles and Responsibilities Document
4. Current Chief Examiner Selection Process Document
5. Current Deputy Chief Examiner Roles and Responsibilities Document
6. Current Deputy Chief Examiner Selection Process Document

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Qualifying Examination**
NAME	**Qualifying Examination Chief Examiner Eligibility & Selection Policy**
DATE APPROVED BY BOARD	**DATE**
DATE REVISED BY BOARD	

INTENT

This policy outlines the criteria and requirements for establishing the eligibility and selection criteria for the Qualifying Examination (QE) Chief Examiner for the College of Denturists of Ontario (the "College").

BACKGROUND

The Chief Examiner oversees the QE to ensure that each candidate is afforded a fair and optimal standardized assessment and that the examination is valid, objective and defensible.

The Chief Examiner eligibility and selection criteria ensure that the Chief Examiner:

- Has current practice experience in a patient care setting.
- Has experience in the development, administration, and oversight of the QE process.
- Is well equipped to lead and oversee all aspects of the QE process.
- Avoids perceived or real conflicts of interest or bias.
- Is committed to transparency, accountability, and fairness.
- Protects the security of the examination, avoiding intentional or unintentional use or distribution of exam information and materials other than for actual review, development and administration of the QE.

THE POLICY

Roles and Responsibilities

1. Is familiar and knowledgeable with all examination policies, procedures, and protocols.
2. Oversee and assist with managing all aspects of the examination process.
3. Ensure that examination activities and decisions align with the principles of fairness, validity, reliability, and defensibility expected of a high-stakes examination.
4. Provide effective leadership and direction to examiners and item writers in accordance with established examination policies, procedures, and protocols.

   a. Establish and maintain a safe, respectful, and collaborative examination culture that includes attention to expected professional boundaries and ethics.
   b. Support and uphold evidence-informed decisions made by College staff and/or examination advisors through established examination governance processes.
5. Participate in, lead and/or supervise item writing workshops and working groups throughout the year.
   a. Manage item writing activities by tracking assignments, monitoring completion status, and facilitating the timely development and submission of examination items by item writers.
6. Lead and participate in candidate orientation sessions.
7. **Multiple Choice Question (MCQ) Examination**
   a. Remain on-call, along with the Deputy Chief Examiner, to monitor and supervise the online examination and to assist with any inconsistencies or candidate matters.
   b. Assist in the evaluation of the MCQ assessment process.
      i. Provide feedback regarding MCQ content, format, process and procedures, etc.
      ii. Ensure the implementation of required edits to MCQ content (i.e. follow-up on post-examination feedback and MCQ item review).
8. **Objective Structured Clinical Examination (OSCE)**
   a. Maintain familiarity with all OSCE cases, materials, and marking checklists for each exam administration.
   b. Participate in, and lead examiner case review/training, with attention to:
      i. a thorough orientation for all examiners to the requirement for fair, equitable, confidential, safe and consistent treatment of all candidates.
      ii. the goals of the examination process.
      iii. the procedures to be followed during the examination.
      iv. the process and requirements for recording a candidate's performance.
      v. the process for completing an Incident Report.
   c. Assist in the evaluation of the OSCE assessment process.
      i. Provide feedback regarding OSCE content, format, process and procedures, scenarios, and marking checklists.
      ii. Ensure the implementation of required edits to OSCE content (i.e. follow-up on post-examination feedback and OSCE item review).
   d. Provide clarification and guidance to the Standardized Patient Program (SPP) in the training of standardized patients.
9. Prepare the Chief Examiner's Summary Report.
10. Attend (and lead, as required) any post-examination analysis and appeal meetings following the QE administration.
11. Ensure the protection and security of the QE and all examination materials.
12. Act as a formal representative of the CDO, along with the Deputy Chief Examiner, as required.
13. Liaise with College staff on matters of legislation and College policies that relate to the examination process.

Requirements & Eligibility Criteria

In order to be eligible to represent the College as a Chief Examiner, registrants must meet and maintain the following requirements and criteria:

- Must be a Denturist that has been registered in a Canadian jurisdiction for at least ten (10) years.
- Must be a registrant in good standing with the College, meaning that a registrant:
    - Is not in default of payment of any fees or completing and returning any form or information required by the College.
    - Is not currently or has not been in the past five (5) years, a subject of proceedings for professional misconduct, incompetence or incapacity, or any similar proceeding.
    - Has not had a finding of professional misconduct, incompetence or incapacity, or any similar proceeding, in the past five (5) years.
    - Is not currently or has not been in the past five (5) years, a subject of unresolved investigation by the College or any other professional body.
    - Is not currently subject to any terms, conditions or limitations on their Certificate of Registration.
    - Is not subject to public findings on the public register related to Complaints & Investigations and/or Discipline.
    - Has not had their Certificate of Registration revoked or suspended in the past five (5) years for any reason other than non-payment of fees.
    - Has not been disqualified from the Board of Directors or its Committees in the past five (5) years.
    - Has demonstrated commitment to continuing professional development.
- Must comply with the College's confidentiality, security, conflict of interest and code of conduct policies and agreements.
- During the course of their tenure and for a period of ten (10) years after the completion of service as Chief Examiner, must agree to refrain from participating in the development, administration, or dissemination of preparatory practice exams, cases or courses or other materials that are specifically designed to prepare candidates for the College's QE.
- Must have a strong commitment to transparency, accountability, security, and fairness.
- Must have an appreciation for and attention to the risk of real or perceived bias in the administration of the QE.
- Must have experience in the development, administration, and oversight of the QE process (e.g. previous experience as an examiner, item writer and/or Deputy Chief Examiner).

Ineligibility Criteria

Due to real or perceived conflicts of interest, the following are ineligibility criteria for serving as Chief Examiner:

- Must not be a member of the Board of Directors, the Registration Committee, the Qualifying Examination Committee or the Qualifying Examination Appeals Committee.

- Must not be a member of the Board of Directors or Council of any other College regulated under the RHPA.
- Must not be or have not been a member of the College staff within the past five (5) years.
- Must not have held a position such as director, owner, board member, officer or employee, with any professional association whose business is directed toward the profession of denturism within the past five (5) years.
- Must not have been an instructor in a Denturism program within the past five (5) years.
- Must not have any immediate family or a close associate who is a potential candidate or candidate who may undertake the exam during their appointment as Chief Examiner.
- Must not have been involved in the past five (5) years in Denturism program curriculum development or in the training or assessment of professional skills of groups of students or candidates (e.g. professional practice labs, bridging programs or other small group sessions involving the use of standardized patients, role-playing scenarios or simulations).
- Must not currently be involved in external examination preparatory activities (e.g. developing or providing practice questions, practice exams, educational sessions or coaching to assist one or more current or potential candidates in QE preparation).

Expectations

The Chief Examiner is a significantly demanding role. The following are expectations for serving as Chief Examiner:

1. Access to a vehicle and/or the ability to commute to the College Office in downtown Toronto, Ontario and/or examination sites in Hamilton, Ontario, or designated location.
2. Strong familiarity with the use of Microsoft Applications, online meeting and file sharing platforms, and conducting/hosting online meetings.
3. Comfort with reviewing emails and frequent participation in meetings or teleconferences during or outside of normal business hours.
4. Attendance at full-day in-person meetings/workshops (one (1) to three (3) days each), approximately once per quarter.
5. Attendance at approximately three (3) to four (4) item selection/review teleconferences leading up to and following each examination administration (February and June of each year, including additional exam administrations as required).
6. Attendance at one (1) to two (2) candidate orientation sessions leading up to each examination administration (February and June of each year, including additional exam administrations as required).
7. Attendance for up to three (3) full days (generally Friday, Saturday and/or Sunday) during examination weekends (up to twice per year, including additional exam administrations as required) in Hamilton, Ontario, or designated location.
8. Travel within or outside of Ontario up to once a year to attend conferences, examination workshops or observe examinations administered by other regulators or third-party examination bodies (potential).
9. Assistance with the succession planning process of the Deputy Chief Examiner and Chief Examiner roles.

Term and Honoraria

Once appointed by the Board of Directors (the "Board"), the Chief Examiner's term will span three (3) years or approximately six (6) administrations of the Qualifying Examination (February and June of each year, including additional exam administrations as required).

Activity	**Honorarium Rate**
Qualifying Examination days	$400 (full day) or $200 (half day)
Meetings or teleconferences	$400 (full day) or $200 (half day)

All applicable expenses in keeping with the College's policies, including travel, parking, accommodation, and meals are reimbursed.

Application & Selection Process

In the event of a Chief Examiner vacancy, the Qualifying Examination Committee (the "Committee") may:

1. *Open Recruitment*

   The College will recruit for the role by way of a call for applications to registrants. Interested registrants who meet the eligibility criteria may apply for the role by completing the Qualifying Examination Chief Examiner Application.

   The Committee will be responsible for recommending a candidate to the Board for appointment. The Committee will be responsible for screening applicants for eligibility and suitability and conducting interviews (at the discretion of the Committee). College staff and third-party psychometricians will support the panel in an advisory role only. College staff will also be responsible for the administrative duties of the application and selection process.

   Following the Committee's selection process, the Committee will prepare a recommendation which the Chair of the Committee will present to the Board, and the Board will appoint a candidate as Chief Examiner.

2. *Recommend another Candidate for the role of Chief Examiner*

   In order to avoid duplicative recruitment processes, the Committee may recommend any other candidate from previous Deputy Chief Examiner or Chief Examiner recruitment processes (including the incumbent Deputy Chief Examiner) to the Board for the Chief Examiner role.

While the Board makes the final decision in the appointment of the Chief Examiner position, it will take into serious consideration the Committee's recommendation.

The selection process balances the values of transparency, objectivity, suitability for the role, fairness, public protection, and efficient use of College and Board resources.

Succession Planning

At the conclusion of their term as Chief Examiner, the Chief Examiner may request an objective evaluation of their performance by the Committee supported by College staff, third-party psychometricians and (at the discretion of the Committee) the Deputy Chief Examiner, to potentially be recommended to the Board as a candidate for either:

1. The role of Chief Examiner through direct reappointment by the Board; or
2. The role of Deputy Chief Examiner through direct appointment by the Board.

The Board reserves the right to determine the succession plan and may choose to open the Chief Examiner recruitment process, or appoint another candidate to the role instead.

RELATED LEGISLATION AND DOCUMENTS

Ontario Regulation 183/25 (Registration)
Qualifying Examination Chief Examiner Application

REVISION CONTROL

Date	Revision	Effective

COLLEGE OF DENTURISTS OF ONTARIO

TYPE	**Qualifying Examination**
NAME	**Qualifying Examination Deputy Chief Examiner Eligibility & Selection Policy**
DATE APPROVED BY BOARD	**DATE**
DATE REVISED BY BOARD	

INTENT

This policy outlines the criteria and requirements for establishing the eligibility and selection criteria for the Qualifying Examination (QE) Deputy Chief Examiner for the College of Denturists of Ontario (the "College").

BACKGROUND

The Deputy Chief Examiner assists and supports the Chief Examiner with the oversight of the QE to ensure that each candidate is afforded a fair and optimal standardized assessment and that the examination is valid, objective and defensible.

The Deputy Chief Examiner eligibility and selection criteria ensure that the Deputy Chief Examiner:

- Has current practice experience in a patient care setting.
- Has experience in the development, administration, and/or oversight of the QE process.
- Is well equipped to assist in the leadership and oversight of all aspects of the QE process.
- Avoids perceived or real conflicts of interest or bias.
- Is committed to transparency, accountability, and fairness.
- Protects the security of the examination, avoiding intentional or unintentional use or distribution of exam information and materials other than for actual review, development and administration of the QE.

THE POLICY

Roles and Responsibilities

1. Is familiar with all examination policies, procedures, and protocols.
2. Assist and support the Chief Examiner with all aspects of the examination process.
3. Ensure that examination activities and decisions align with the principles of fairness, validity, reliability, and defensibility expected of a high-stakes examination.

4. Assist and support the Chief Examiner in providing effective leadership and direction to examiners and item writers in accordance with established examination policies, procedures, and protocols.
    a. Establish and maintain a safe, respectful, and collaborative examination culture that includes attention to expected professional boundaries and ethics.
    b. Support and uphold evidence-informed decisions made by College staff and/or examination advisors through established examination governance processes.
5. Participate in, lead and/or supervise item writing workshops and working groups throughout the year.
    a. Assist and support the Chief Examiner with the management of item writing activities by tracking assignments, monitoring completion status, and facilitating the timely development and submission of examination items by item writers.
6. Lead and participate in candidate orientation sessions.
7. **Multiple Choice Question (MCQ) Examination**
    a. Remain on-call, along with the Chief Examiner, to monitor and supervise the online examination and to assist with any inconsistencies or candidate matters.
    b. Assist in the evaluation of the MCQ assessment process.
        i. Provide feedback regarding MCQ content, format, process and procedures, etc.
        ii. Support the Chief Examiner in ensuring the implementation of required edits to MCQ content (i.e. follow-up on post-examination feedback and MCQ item review).
8. **Objective Structured Clinical Examination (OSCE)**
    a. Maintain familiarity with all OSCE cases, materials, and marking checklists for each exam administration.
    b. Participate in, and assist with examiner case review/training, with attention to:
        i. a thorough orientation for all examiners to the requirement for fair, equitable, confidential, safe and consistent treatment of all candidates.
        ii. the goals of the examination process.
        iii. the procedures to be followed during the examination.
        iv. the process and requirements for recording a candidate's performance.
        v. the process for completing an Incident Report.
    c. Assist in the evaluation of the OSCE assessment process.
        i. Provide feedback regarding OSCE content, format, process and procedures, scenarios, and marking checklists.
        ii. Support the Chief Examiner in ensuring the implementation of required edits to OSCE content (i.e. follow-up on post-examination feedback and OSCE item review).
    d. Assist the Chief Examiner to provide clarification and guidance to the Standardized Patient Program (SPP) in the training of standardized patients.
9. Support the Chief Examiner in preparing the Chief Examiner's Summary Report.
10. Attend any post-examination analysis and appeal meetings following the QE administration.
11. Ensure the protection and security of the QE and all examination materials.
12. Act as a formal representative of the CDO, along with the Chief Examiner, as required.

13. Assist the Chief Examiner to liaise with College staff on matters of legislation and College policies that relate to the examination process.
14. Support the Chief Examiner in the execution of their duties or any duties as assigned by the Chief Examiner during and prior to QE administrations.
15. Be prepared to serve as Acting Chief Examiner in instances where the Chief Examiner is unable to fulfil their duties due to incapacitation, medical emergencies, scheduling conflicts, personal emergencies, etc.

Requirements & Eligibility Criteria

In order to be eligible to represent the College as a Deputy Chief Examiner, registrants must meet and maintain the following requirements and criteria:

- Must be a Denturist that has been registered in a Canadian jurisdiction for at least five (5) years.
- Must be a registrant in good standing with the College, meaning that a registrant:
    - Is not in default of payment of any fees or completing and returning any form or information required by the College.
    - Is not currently or has not been in the past five (5) years, a subject of proceedings for professional misconduct, incompetence or incapacity, or any similar proceeding.
    - Has not had a finding of professional misconduct, incompetence or incapacity, or any similar proceeding, in the past five (5) years.
    - Is not currently or has not been in the past five (5) years, a subject of unresolved investigation by the College or any other professional body.
    - Is not currently subject to any terms, conditions or limitations on their Certificate of Registration.
    - Is not subject to public findings on the public register related to Complaints & Investigations and/or Discipline.
    - Has not had their Certificate of Registration revoked or suspended in the past five (5) years for any reason other than non-payment of fees.
    - Has not been disqualified from the Board of Directors or its Committees in the past five (5) years.
    - Has demonstrated commitment to continuing professional development.
- Must comply with the College's confidentiality, security, conflict of interest and code of conduct policies and agreements.
- During the course of their tenure and for a period of ten (10) years after the completion of service as Deputy Chief Examiner, must agree to refrain from participating in the development, administration, or dissemination of preparatory practice exams, cases or courses or other materials that are specifically designed to prepare candidates for the College's QE.
- Must have a strong commitment to transparency, accountability, security, and fairness.
- Must have an appreciation for and attention to the risk of real or perceived bias in the administration of the QE.
- Must have experience in the development, administration, and/or oversight of the QE process (e.g. previous experience as an examiner, item writer and/or working group participant, or previous experience serving on the Board of Directors or its Committees).

Ineligibility Criteria

Due to real or perceived conflicts of interest, the following are ineligibility criteria for serving as Deputy Chief Examiner:

- Must not be a member of the Board of Directors, the Registration Committee, the Qualifying Examination Committee or the Qualifying Examination Appeals Committee.
- Must not be a member of the Board of Directors or Council of any other College regulated under the RHPA.
- Must not be or have not been a member of the College staff within the past five (5) years.
- Must not have held a position such as director, owner, board member, officer or employee, with any professional association whose business is directed toward the profession of denturism within the past five (5) years.
- Must not have been an instructor in a Denturism program within the past five (5) years.
- Must not have any immediate family or a close associate who is a potential candidate or candidate who may undertake the exam during their appointment as Deputy Chief Examiner.
- Must not have been involved in the past five (5) years in Denturism program curriculum development or in the training or assessment of professional skills of groups of students or candidates (e.g. professional practice labs, bridging programs or other small group sessions involving the use of standardized patients, role-playing scenarios or simulations).
- Must not currently be involved in external examination preparatory activities (e.g. developing or providing practice questions, practice exams, educational sessions or coaching to assist one or more current or potential candidates in QE preparation).

Expectations

The Deputy Chief Examiner is a significantly demanding role. The following are expectations for serving as Deputy Chief Examiner:

1. Access to a vehicle and/or the ability to commute to the College Office in downtown Toronto, Ontario and/or examination sites in Hamilton, Ontario, or designated location.
2. Strong familiarity with the use of Microsoft Applications, online meeting and file sharing platforms, and conducting/hosting online meetings.
3. Comfort with reviewing emails and frequent participation in meetings or teleconferences during or outside of normal business hours.
4. Attendance at full-day in-person meetings/workshops (one (1) to three (3) days each), approximately once per quarter.
5. Attendance at approximately three (3) to four (4) item selection/review teleconferences leading up to and following each examination administration (February and June of each year, including additional exam administrations as required).
6. Attendance at one (1) to two (2) candidate orientation sessions leading up to each examination administration (February and June of each year, including additional exam administrations as required).

7. Attendance for up to three (3) full days (generally Friday, Saturday and/or Sunday) during examination weekends (up to twice per year, including additional exam administrations as required) in Hamilton, Ontario, or designated location.
8. Travel within or outside of Ontario up to once a year to attend conferences, examination workshops or observe examinations administered by other regulators or third-party examination bodies (potential).
9. Assistance with the succession planning process of the Deputy Chief Examiner and Chief Examiner roles, including learning and preparing for the role of Chief Examiner in the event of appointment by the Board.

Term and Honoraria

Once appointed by the Board of Directors (the "Board"), the Deputy Chief Examiner's term will span three (3) years or approximately six (6) administrations of the Qualifying Examination (February and June of each year, including additional exam administrations as required).

Activity	**Honorarium Rate**
Qualifying Examination days	$400 (full day) or $200 (half day)
Meetings or teleconferences	$200 (full day) or $100 (half day)

All applicable expenses in keeping with the College's policies, including travel, parking, accommodation, and meals are reimbursed.

Application & Selection Process

In the event of a Deputy Chief Examiner vacancy, the Qualifying Examination Committee (the "Committee") may:

1. *Open Recruitment*

   The College will recruit for the role by way of a call for applications to registrants. Interested registrants who meet the eligibility criteria may apply for the role by completing the Qualifying Examination Deputy Chief Examiner Application.

   The Committee will be responsible for recommending a candidate to the Board for appointment. The Committee will be responsible for screening applicants for eligibility and suitability and conducting interviews (at the discretion of the Committee). College staff and third-party psychometricians will support the panel in an advisory role only. College staff will also be responsible for the administrative duties of the application and selection process.

   Following the Committee's selection process, the Committee will prepare a recommendation which the Chair of the Committee will present to the Board, and the Board will appoint a candidate as Deputy Chief Examiner.

2. *Recommend another Candidate for the role of Deputy Chief Examiner*

   In order to avoid duplicative recruitment processes, the Committee may recommend any other candidate from previous Deputy Chief Examiner or Chief Examiner recruitment processes (including the incumbent Chief Examiner) to the Board for the Deputy Chief Examiner role.

While the Board makes the final decision in the appointment of the Deputy Chief Examiner position, it will take into serious consideration the Committee's recommendation.

The selection process balances the values of transparency, objectivity, suitability for the role, fairness, public protection, and efficient use of College and Board resources.

Succession Planning

At the conclusion of their term as Deputy Chief Examiner or in the event of a Chief Examiner vacancy, the Deputy Chief Examiner may request an objective evaluation of their performance by the Committee supported by College staff, third-party psychometricians and (at the discretion of the Committee) the Chief Examiner, to potentially be recommended to the Board as a candidate for either:

1. The role of Deputy Chief Examiner through direct reappointment by the Board; or
2. The role of Chief Examiner through direct appointment by the Board.

The Board reserves the right to determine the succession plan and may choose to open the Deputy Chief Examiner recruitment process, or appoint another candidate to the role instead.

RELATED LEGISLATION AND DOCUMENTS

Ontario Regulation 183/25 (Registration)
Qualifying Examination Deputy Chief Examiner Application

REVISION CONTROL

Date	Revision	Effective

COLLEGE OF DENTURISTS OF ONTARIO

CHIEF EXAMINER

3-Year Term

Position Overview

The Chief Examiner oversees the Qualifying Examination to ensure that each candidate is afforded a fair and optimal standardized assessment and that the examination is valid, objective and defensible. The College of Denturists of Ontario is currently seeking applicants for the Chief Examiner role.

ROLE AND RESPONSIBILITIES

1. Is familiar with all examination policies, procedures, and protocols.

2. Oversee and assist with all aspects of the examination process.

3. Lead and supervise item writing, standard setting working groups throughout the year.

4. Establish and maintain a safe and respectful examination culture that includes attention to expected professional boundaries and ethics.

5. **Multi-Jurisdictional Multiple Choice Question (MCQ) Examination:**
   - Monitors and supervises the online examination and is available to assist with any inconsistencies or candidate matters.

6. **Objective Structured Clinical Examination (OSCE):**
   a) Is familiar with the OSCE cases, materials and checklists before exam administration.

   b) Participate in assessor training with attention to:
      - a thorough orientation for all assessors to the requirement for fair, equitable, confidential, safe and consistent treatment of ALL candidates;
      - the goals of the examination process;
      - the procedures to be followed during the examination;
      - the process and requirements for recording a candidate's performance; and
      - the process for completing an Incident Report.

   c) Act as the liaison with the Standardized Patient Program (SPP) in the provision of clarification and guidance in the training of standardized patients.

d) Assist in the evaluation of the OSCE assessment process.
   - Provide feedback regarding the assessment content, format, procedures, scenarios, ratings, and processes.

7. Prepare the Chief Examiner's Summary Report.

8. Attend the QEC item analysis meetings following the exam administration.

9. Lead and participate in the candidate orientation session

10. Liaise with the Registrar on matters of legislation and College policies that relate to the examination process.

REQUIREMENTS AND ELIGIBILITY

Desirable

Experience in the development, administration, and oversight of the College Qualifying Examination Process. Such experience may be gained as a member of a College Qualifying Examination Working Group, a Qualifying Examination Assessor, or a member of the College Qualifying Examination Committee.

Required

The successful candidate will have a strong commitment to transparency, accountability, and fairness and an appreciation for and attention to the risk of real or perceived bias in the administration of the College's Qualifying Examination.

At the time of application:

- The applicant must be a denturist registered with the College of Denturists of Ontario;
- The applicant must have been registered in a Canadian jurisdiction in the general, active class, or equivalent, for at least ten (10) years;
- The applicant must not be in default of payment of any fees prescribed by the College By-laws;
- The applicant is not in any default of returning any required form or information to the College;
- The applicant must not be the subject of any disciplinary or incapacity proceedings;
- The applicant must not have been the subject of any findings related to professional misconduct, incompetence, or incapacity in the preceding five (5) years;
- The applicant's Certificate of Registration must not have been revoked or suspended in the preceding five (5) years for any reason other than non-payment of fees;
- The applicant's Certificate of Registration is not currently subject to any terms, conditions, or limitations imposed by either the Discipline or Fitness to Practise Committees;

- The applicant does not hold or has not held in the preceding five (5) years, a position, such as director, owner, board member, officer or employee, with any provincial or national Professional Association whose business is directed toward the profession of denturism;
- The applicant is not currently or has not been in the preceding five (5) years involved in teaching denturism in an academic setting or bridging program or the training and/or assessment of professional skills of groups of students or candidates (e.g., professional practice labs, or other small group sessions involving the use of standardized patients, role-playing scenarios or simulations);
- The applicant is not currently or has not been in the preceding five (5) years involved in denturism program curriculum development;
- The applicant is not currently a member of the College Council, the Registration, Qualifying Examination, or Qualifying Examination Appeals Committee;
- The applicant has not been disqualified from Council or a Committee within the preceding five (5) years;
- The applicant is not a member of a council of any other College regulated under the RHPA;
- The applicant is not currently or has not been in the preceding five (5) years an employee of the College; and
- The applicant must not have an immediate family member or a close associate who is likely to be a Qualifying Examination candidate during their appointment as Chief Examiner.

Expectations

- During the course of their tenure and for a period of ten (10) years after the completion of service as Chief Examiner, the successful applicant must agree to refrain from participating in the development, administration or dissemination of preparatory practice exams, cases or courses or other materials that are specifically designed to prepare candidates for the CDO Qualifying Examination.

- The successful applicant must agree to comply with the confidentiality, security, conflict of interest and code of conduct policies and agreements.

- To assist with the future succession planning of the Chief Examiner role

- Selected applicants will be interviewed by the Selection Committee composed of the following:
    - Current Chair of the Qualifying Examination Committee
    - Public Member of the Qualifying Examination Committee
    - Senior Qualifying Examination Assessor
    - Public Member of Council
    - Professional Member of Council

Time Commitment

The Chief Examiner is a demanding role. Attendance at frequent meetings during business hours is required.

- Around 1-2 full day in person meetings per quarter or teleconference calls during business hours or weekday evenings.
- Around 2-3 meetings during examination months (February and June of each year)
- Required for 3 full days (Friday, Saturday, Sunday) during examination week, twice per year (each exam administration) in Hamilton, Ontario, or designated city.

Terms and Honoraria

- To serve a 3-year term covering approximately 6 administrations of the Qualifying Examinations (February and June of each year).
- A full day honorarium rate of $400, or $200 for half day rate for each day of meetings or teleconferences.
- All applicable expenses in keeping with the College's honorarium policy, including travel, parking, accommodation, and meals are reimbursed.

COLLEGE OF DENTURISTS OF ONTARIO

Chief Examiner Selection Process and Timeline

Position Overview

The Chief Examiner oversees the Qualifying Examination to ensure that each candidate is afforded a fair and optimal standardized assessment and that the examination is valid, objective and defensible. The Council of the College of Denturists of Ontario is currently seeking applicants for the Chief Examiner role.

The selected Chief Examiner will serve a 3-year term encompassing approximately six administrations of the Qualifying Examination.

Process

The Council of the College of Denturists of Ontario will form a Selection Committee to recruit a permanent Chief Examiner.

The Selection Committee will be responsible for the following:

- Determine the interview format including the length, time, location and method, i.e. electronic, teleconference, in-person
- Determine the scoring matrix for candidates
- Determine the interview questions
- Determine the number of candidates to interview
- Conduct the interviews with prospective candidates
- Recommend to Council a candidate for appointment

College Staff will assist the Selection Committee with the administration of the interview process including liaising with the Committee and potential candidates, booking interview dates/times, assisting with and facilitating committee meetings, and corresponding with candidates on behalf of the Committee.

The Selection Committee will interview prospective candidates and recommend to Council a candidate for appointment as the permanent Chief Examiner.

The selected candidate will undergo training that will include shadowing the interim Chief Examiner at the next administration of the Qualifying Examination, with the interim Chief Examiner taking the lead role during that examination. The permanent Chief Examiner will then assume the permanent role for the reminder of the term.

Selection Committee Composition

Selected applicants will be interviewed by the Selection Committee composed of the following:

- Current Chair of the Qualifying Examination Committee
- Public Member of the Qualifying Examination Committee
- Senior Qualifying Examination Assessor
- Public Member of Council
- Professional Member of Council

COLLEGE OF DENTURISTS OF ONTARIO

DEPUTY CHIEF EXAMINER

3 Year Term (Approx)

Position Overview

The Deputy Chief Examiner oversees the Qualifying Examination to ensure that each candidate is afforded a fair and optimal standardized assessment, and that the examination is valid, objective, and defensible. The College of Denturists of Ontario is currently seeking applicants for the Deputy Chief Examiner role.

ROLE AND RESPONSIBILITIES

1. Is familiar with all examination policies, procedures, and protocols.

2. Assists and supports the Chief Examiner with all aspects of the examination process.

3. Participate, lead, and/or supervise item writing working groups throughout the year.

4. Establish and maintain a safe and respectful examination culture that includes attention to expected professional boundaries and ethics.

5. Prepared to serve as an Acting Chief Examiner in instances where the Chief Examiner is unable to fulfil their duties due to incapacitation, medical emergencies, scheduling conflicts, personal emergencies, etc.

6. Support the Chief Examiner in the execution of their duties or any duties as assigned by the Chief Examiner during and prior to the Qualifying Examinations.

7. **Multi-Jurisdictional Multiple Choice Question (MCQ) Examination:**
   - Be on-call along with the Chief Examiner, to monitor and supervise the online examination and is available to assist with any inconsistencies or candidate matters.

8. **Objective Structured Clinical Examination (OSCE):**
   a) Is familiar with the OSCE cases, materials, and checklists before exam administration.

   b) Participate in assessor training with attention to:

- a thorough orientation for all assessors to the requirement for fair, equitable, confidential, safe and consistent treatment of ALL candidates.
- the goals of the examination process.
- the procedures to be followed during the examination.
- the process and requirements for recording a candidate's performance.
- the process for completing an Incident Report.

c) Assist in the evaluation of the OSCE assessment process.
- Provide feedback regarding the assessment content, format, procedures, scenarios, ratings, and processes.

9. Support the Chief Examiner on writing the Chief Examiner's Summary Report.

10. Attend any post-examination analysis meetings following the exam administration.

11. Lead and participate in the candidate orientation session.

12. Ensure the protection and security of the examination and examination materials.

13. Act as one of CDO's formal representatives, along with the Chief Examiner, in national or multi-jurisdictional workshops.

REQUIREMENTS AND ELIGIBILITY

Desirable

Experience in the development, administration, and oversight of the College Qualifying Examination Process. Such experience may be gained as a member of a College Qualifying Examination Working Group, a Qualifying Examination Assessor, item writing workshops, examination development workshops, or previously serving on Council or its Committees.

Required

The successful candidate will have a strong commitment to transparency, accountability, security, and fairness and an appreciation for and attention to the risk of real or perceived bias in the administration of the College's Qualifying Examination.

At the time of application:

- The applicant must be a Denturist registered with the College of Denturists of Ontario.
- The applicant must have been registered in a Canadian jurisdiction in the general, active class, or equivalent, for at least five (5) years.

- The applicant must not be in default of payment of any fees prescribed by the College By-laws.
- The applicant is not in any default of returning any required form or information to the College.
- The applicant must not be the subject of any disciplinary or incapacity proceedings.
- The applicant must not have been the subject of any findings related to professional misconduct, incompetence, or incapacity in the preceding five (5) years.
- The applicant's Certificate of Registration must not have been revoked or suspended in the preceding five (5) years for any reason other than non-payment of fees.
- The applicant's Certificate of Registration is not currently subject to any terms, conditions, or limitations imposed by either the Discipline or Fitness to Practise Committees.
- The applicant does not hold or has not held in the preceding five (5) years, a position, such as director, owner, board member, officer or employee, with any provincial or national Professional Association whose business is directed toward the profession of denturism.
- The applicant is not currently or has not been in the preceding five (5) years involved in teaching denturism in an academic setting or bridging program or the training and/or assessment of professional skills of groups of students or candidates (e.g., professional practice labs, or other small group sessions involving the use of standardized patients, role-playing scenarios or simulations).
- The applicant is not currently or has not been in the preceding five (5) years involved in denturism program curriculum development.
- The applicant is not currently a member of the College Council, the Registration, Qualifying Examination, or Qualifying Examination Appeals Committee.
- The applicant has not been disqualified from Council or a Committee within the preceding five (5) years.
- The applicant is not a member of a council of any other College regulated under the RHPA.
- The applicant is not currently or has not been in the preceding five (5) years an employee of the College.
- The applicant must declare, at the time of their application and throughout their appointment as Deputy Chief Examiner, any conflicts of interest and/or potential or perceived conflicts of interest (for example, if the applicant has an immediate family member or close associate who is or is likely to be a Qualifying Examination candidate during their appointment, etc.).

Expectations

- Access to a vehicle and ability to drive themselves to the CDO Office in Downtown Toronto or examination sites in Hamilton, Ontario.

- Strong familiarity with conducting and hosting online meetings, use of Microsoft Office suite of applications, and comfort with reviewing emails outside of normal business hours.

- During the course of their tenure and for a period of ten (10) years after the completion of service as Deputy Chief Examiner, the successful applicant must agree to refrain from participating in the development, administration, or dissemination of preparatory practice exams, cases or courses or other materials that are specifically designed to prepare candidates for the CDO Qualifying Examination.

- The successful applicant must agree to comply with the confidentiality, security, conflict of interest and code of conduct policies and agreements.

- To assist with the succession planning process of the Chief Examiner role including learning and preparing for the role.

- Selected applicants will be interviewed by the Selection Committee composed of the following:
    - Current Chair of the Qualifying Examination Committee
    - Public Member of the Qualifying Examination Committee
    - Senior Qualifying Examination Assessor
    - Public Member of Council
    - Professional Member of Council

Time Commitment

The Deputy Chief Examiner is a significantly demanding role. Attendance at frequent meetings during business hours or evenings is required.

- Approximately one (1) to two (2) full day in person meetings per quarter or teleconference calls during business hours or weekday evenings.

- Weekend travel once a year to attend a national item-writing workshop (potential).

- Approximately two (2) to three (3) meetings during examination months (February and June of each year).

- Required for three (3) full days (Friday, Saturday, Sunday) during examination week, twice per year (each exam administration) in Hamilton, Ontario, or designated city.

Terms and Honoraria

- To serve approximately six (6) administrations of the Qualifying Examinations (February and June of each year) ending with the June 2028 administration.

- ***During examination days***: a full day honorarium rate of $400, or $200 for half day rate for each examination day.

- ***For meetings or teleconferences related to duties as a Deputy Chief Examiner***: a full day honorarium rate of $200, or $100 for half day rate for each day of.

- ***For meetings or teleconferences related to national or multi-jurisdictional meetings***: a full day honorarium rate of $150, or $75 for half day rate for each day of.

- All applicable expenses in keeping with the College's honorarium policy, including travel, parking, accommodation, and meals are reimbursed.

COLLEGE OF DENTURISTS OF ONTARIO

Deputy Chief Examiner Selection Process and Timeline

Position Overview

The Deputy Chief Examiner supports the Chief Examiner in overseeing the Qualifying Examination to ensure that each candidate is afforded a fair and optimal standardized assessment, and that the examination is valid, objective, and defensible. The Council of the College of Denturists of Ontario is currently seeking applicants for the Deputy Chief Examiner role.

The selected Deputy Chief Examiner will serve a three (3)-year term encompassing approximately six administrations of the Qualifying Examination.

Process

The Council of the College of Denturists of Ontario will form a Selection Committee to recruit a Deputy Chief Examiner.

The Selection Committee will be responsible for the following:

- Determine the interview format including the length, time, location and method, i.e. electronic, teleconference, in-person
- Determine the scoring matrix for candidates
- Determine the interview questions
- Determine the number of candidates to interview
- Conduct interviews with prospective candidates
- Recommend to Council a candidate for appointment

College Staff will assist the Selection Committee with the administration of the interview process including liaising with the Committee and potential candidates, booking interview dates/times, assisting with and facilitating committee meetings, and corresponding with candidates on behalf of the Committee.

The Selection Committee will interview prospective candidates and recommend to Council a candidate for appointment as the Deputy Chief Examiner.

The selected candidate will undergo training that will include shadowing the Chief Examiner during the administration of the Qualifying Examinations including the preparation and lead up to the administration. The training and onboarding provided by College Staff and the incumbent Chief Examiner will be tailored to the successful candidate.

Selection Committee Composition

Selected applicants will be interviewed by the Selection Committee composed of the following:

- Current Chair of the Qualifying Examination Committee
- Public Member of the Qualifying Examination Committee
- Senior Qualifying Examination Assessor
- Public Member of Council
- Professional Member of Council

Role of the Chief Examiner in the Selection Process

The Chief Examiner will be invited to participate in the selection process for the Deputy Chief Examiner position in a consultatory role only and will not participate in the scoring of applicants.

Succession Planning

While the Deputy Chief Examiner role is intended to support the Chief Examiner and serve in a backup capacity in times where the Chief Examiner is unable to fulfil their duties, the Deputy Chief Examiner will play a part in the succession planning of the Chief Examiner. It is Council's intent that the Deputy Chief Examiner, after successfully undergoing objective evaluation processes of their performance, potentially serve as a candidate for the role of Chief Examiner through appointment by Council.

Throughout the three (3)-year term, the Deputy Chief Examiner will be expected to learn the role of the Chief Examiner and should be prepared to serve in the role if appointed by Council.

Council reserves the right to determine the assessment process and evaluation framework at that time and may choose to open the Chief Examiner recruitment process rather than appoint the Deputy Chief Examiner directly. Council may delegate the assessment/evaluation process to a Selection Committee who may provide a formal recommendation to Council. Council will balance the intent of the Deputy Chief Examiner role in succession planning processes along with the values of transparency, fairness, and suitability.

In a situation of vacancy, Council reserves the right to determine whether to appoint the Deputy Chief Examiner to the role of Chief Examiner, or open recruitment for the role of Chief Examiner. In the event of a crisis, it may be appropriate for Council to appoint the Deputy Chief Examiner to serve as Interim Chief Examiner until the role can be filled.

Council has the final determination in the recruitment and selection of both the Chief Examiner and Deputy Chief Examiner positions but will take into serious consideration the recommendations from the Selection Committee.