



94th Council Meeting

Friday, December 14, 2018 – 9:00 a.m. – 3:30 p.m.

HELD AT

Postmedia Place, 365 Bloor Street E., Suite 1606, Toronto, ON M4W 3L4

AGENDA

Item	Action	Page #
1. Call to Order	Decision	
2. Approval of Agenda		1
3. Declaration of Conflict(s)		
4. College Mandate	Information	
5. Denturism Academic Program Accreditation Presentation on Health Education Program Accreditation, Accreditation Canada Dr. Louise Clement, Executive Director, Health Education Assessment & Clinical Partnership Ms. Sarah Ingimundson, Director, EQual.	Information/ Decision	
6. Health Regulatory College Performance Measurement Tara Breckenridge, Senior Policy Analyst, Regulatory Oversight and Performance Unit, Ministry of Health and Long-Term Care	Information	
7. Consent Agenda 7.1 Minutes of the 92nd Council meeting held on Friday, September 14, 2018. 7.2 Executive Committee Report 7.3 Inquiries, Complaints and Reports Committee Report 7.4 Quality Assurance Committee – Panel A Report 7.5 Quality Assurance Committee – Panel B Report 7.6 Qualifying Examination Committee Report 7.7 Qualifying Examinations Appeals Committee Report 7.8 Registration Committee Report 7.9 Patient Relations Committee 7.10 President's Report – Verbal 7.11 Registrar's Report 7.12 Financial Report Memo and YTD Income - Expenses – April 1, 2018 – October 31, 2018 7.13 Update on Strategy Map 2017-2020 Progress 7.14 Legislative Update – October 2018 7.15 Correspondence – Commission on Accreditation for Denturism	Information/ Decision	3 7 8 10 12 13 15 16 17 18 19 22 25 27 33
8. Consideration of the College's Document Retention Schedule 8.1 Briefing Note 8.2 Draft Retention Schedule 8.3 Citation Table	Decision	35 36 72

9. Waiving the Fee Increase for 2019-2020 – By-law Article 31.05 Briefing Note	Decision	87
10. Consideration of the Draft of the College's 2017-2018 Annual Report Draft 2017-2018 Annual Report		88
LUNCH BREAK		
11. In Camera Meeting of Council, pursuant to Schedule 2, the Health Professions Procedural Code of the Regulated Health Professions Act (1991), Section 7 ss (1) (e) of the Regulated Health Professions Act (1991).		
12. A By-law amendment to allow for members of the public to be appointed to College Committees Briefing Note	Decision	120
13. Draft Terms of Reference – Patient Relations Committee 13.1 Briefing Note 13.2 Draft Terms of Reference	Decision	122 123
14. Consultation Report – Proposed Amendment to College By-laws to Provide for an "Honourary" status for retired Denturists. 14.1 Briefing Note 14.2 Consultation Report	Decision	125 128
15. Proposed Amendments to the Supervision of Students and Examination Candidates Policy 15.1 Briefing Note 15.2 Current Supervision of Students and Examination Candidates Policy 15.3 Draft of Amended Clinical Supervision of Students, Examination Candidates, and Potential Examination Candidates Policy	Decision	140 141 144
16. Next Meeting Date Next Council Meeting Date: Friday March 22, 2019	Information	
17. Adjournment		



93rd Council Meeting In-Person

365 Bloor Street East, Suite 1606, Toronto, ON M4W 3L4
Friday September 14, 2018- 9:00 a.m. to 3:30 p.m.

MINUTES

Members Present:

Dr. Ivan McFarlane
Mr. Joey Della Marina
Mr. Hanno Weinberger
Mr. Jack Abergel
Mr. Latif Azzouz
Ms. Alexia Baker-Lanoue
Ms. Anita Kiriakou
Mr. Mark Fenn
Mr. Keith Collins
Ms. Barbara Smith
Mr. Michael Vout Jr.
Mr. Christopher Reis

Regrets:

Mr. Robert Gaspar
Ms. Wangari Muriuki

Legal Counsel:

Ms. Rebecca Durcan, Legal Counsel, Steinecke, Maciura and LeBlanc

Auditor:

Mr. Blair MacKenzie, Auditor, Hilborn LLP

Staff:

Dr. Glenn Pettifer, Registrar and CEO
Ms. Tyneesha Du, Coordinator of Council and Corporate Services
Ms. Jennifer Slabodkin, Manager, Registration, Quality Assurance & Policy

1. Call to Order

The President called the meeting to order at 9:04 am.

2. Approval of Agenda

MOTION: That the agenda be approved as amended.

MOVED: Keith Collins

SECONDED: Anita Kiriakou

CARRIED

3. Declaration of Conflict of Interest

None noted or declared.

4. College Mandate

The President presented the College Mandate and the College Mission.

5. Governance Training: Financial Literacy for Council Members

Presentation: Draft Audited Financial Statements by Blair MacKenzie, Hilborn LLP

MOTION: To approve the financial statements as presented.

MOVED: Hanno Weinberger

SECONDED: Anita Kiriakou

CARRIED

MOTION: To increase funds restricted for therapy and counselling to \$160,000.

MOVED: Barbara Smith

SECONDED: Keith Collins

CARRIED

MOTION: To approve the financial statements as amended (increase in funds restricted for therapy and counselling).

MOVED: Hanno Weinberger

SECONDED: Michael Vout Jr.

CARRIED

6. Consent Agenda

6.1 Minutes of the 92nd Council meeting held on June 22, 2018

MOTION: That the minutes for the 92nd Council meeting be adopted as amended.

MOVED: Alexia Lanoue-Baker

SECONDED: Collins

CARRIED

6.3 Inquiries, Complaints and Reports Committee Report

MOTION: To adopt the report as presented.

MOVED: Barbara Smith

SECONDED: Christopher Reis

CARRIED

6.4 Quality Assurance Committee – Panel A Report

MOTION: That Council adopt the Quality Assurance Panel A report.

MOVED: Keith Collins

SECONDED: Anita Kiriakou

CARRIED

6.9 Registrar's Report

MOTION: That Council accept the Registrar's report.

MOVED: Keith Collins

SECONDED: Michael Vout JR.

CARRIED

MOTION: That the Consent agenda be adopted.

MOVED: Keith Collins

SECONDED: Latif Azzouz

CARRIED

7. Communications Survey Results

8. Draft Standard of Practice: Denturism Educations

MOTION: Approve the draft Standard of Practice: Denturism Educators and Guide to the Standard for stakeholder consultation.

MOVED: Keith Collins

SECONDED: Anita Kiriakou

CARRIED

9. Key Performance Indicators – Strategy Map 2017-2020

10. Academic Program Accreditation – Commission on Accreditation for Denturism

MOTION: That Council direct the Registrar to inform the CAD that the College will not be participating in the CAD accreditation program and that the Registrar request representatives from EQual Canada attend the December Council meeting to provide Council with an overview of the EQual Canada academic program accreditation process.

MOVED: Keith Collins

SECONDED: Hanno Weinberger

CARRIED

11. Standard of Practice: Advertising - Amendments

MOTION: To approve the Standard of Practice: Advertising as amended and to place the details of possible interpretations of the definition of a consultation in the Guide to the Standard.

MOVED: Barbara Smith

SECONDED: Alexia Baker-Lanoue

CARRIED

12. Policy Item: Criminal Matters and Judicial Matters Check

Motion: To adopt the proposed amendments to the Criminal Background Check Policy (new name: Criminal Record and Judicial Matters Check Policy).

MOVED: Anita Kiriakou

SECONDED: Hanno Weinberger

CARRIED

13. Mentoring Program for New Members of Council

14. Next Meeting Date: December 14, 2018

15. Adjournment

The meeting adjourned at 2:40 pm.

DRAFT



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Executive Committee**

Reporting Date: **November 28, 2018**

Number of Meetings since
last Council Meeting: **3**

The Executive Committee met September 7, September 14 and November 28, 2018. The next Executive Committee meeting will be on Friday February 22, 2019.

The Committee reviewed the draft audited financial statements for the 2017-2018 fiscal period which were presented by Mr. Blair MacKenzie of Hilborn LLP. The Committee also reviewed the current financial statements for April 1, 2018 – July 31, 2018 and April 1, 2018 – October 31, 2018.

A possible amendment to the College By-laws to allow for the appointment of members of the public to College Committees and Working Groups was considered and approved for presentation to Council.

The Committee considered 8 Clinic Name applications and 2 Clinic Name decision appeals.

Respectfully submitted by
Dr. Ivan McFarlane
President and Chair of the Executive Committee



COMMITTEE REPORT TO COUNCIL

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

Reporting Date: **November 28, 2018**

5 meetings.

Number of Meetings since last report to Council (August 30, 2018):
1 Health Inquiry Panel teleconference held on October 10, 2018.
1 ICRC teleconference held on October 18, 2018.
1 in-person Health Inquiry Panel meeting held on November 16, 2018.
2 in-person ICRC meetings held on September 21, 2018 and November 16, 2018

Decisions finalized

Investigations closed and draft decisions approved:	12
a) Complaints	9
b) Registrar's Reports	2
c) Registrar's Reports – Referral from QA	1

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

No Further Action	7
Advice/Recommendation/Reminder	
SCERP	1
Caution	
Referral to Health Inquiry Panel	2
Referral to Discipline	2

Practice Issues (identified by ICRC when approving decisions)

Practice Issue	Primary Issue	Secondary Issue
Patient harm/Patient Safety		
Clinical knowledge/understanding		
Clinical Skill/Execution	6	
Communication		3
Relationship with Patient	2	1
Professional Judgment		
Legislation, standards & ethics	3	3
Laboratory Procedures		
Practice Management	1	

HPARB appeals:

Total Appeals pending	4
ICRC Decision confirmed – case closed	2
ICRC Decision returned to ICRC	0
Appeal withdrawn – case closed	0
HPARB has no jurisdiction due to no qualified personal reps. (for applicant) wanting to pursue matter – case closed	1

Respectfully submitted by Barbara Smith, Chair



COMMITTEE REPORT TO COUNCIL

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

Reporting Date: **December 14, 2018**

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

Panel A of the Quality Assurance Committee (QAC-A) considers Peer & Practice Assessment reports as an indicator of whether or not a member's knowledge, skill and judgement are satisfactory. The Committee also monitors member compliance with the CPD program and develops tools, programs and policies for the College's Quality Assurance Program.

QAC-A met twice since its last report to Council on September 14, 2018.

Meeting: October 19, 2018

Requirement Considered	Result
2016-17 Peer & Practice Assessments	<ul style="list-style-type: none">• 1 – Ordered to participate in the full assessment• 1 – Remedial submission considered
2017-18 Peer & Practice Assessments	<ul style="list-style-type: none">• 1 – Satisfactory (no further action)
2018-19 Peer & Practice Assessments	<ul style="list-style-type: none">• 3 – Satisfactory (no further action)• 2 – Satisfactory Modified Non-Clinical Peer & Practice Assessments• 2 Ordered to participate in a Modified Non-Clinical Peer & Practice Assessment¹• 5 – Remedial action required
2017-18 Annual CPD Requirements	<ul style="list-style-type: none">• 1 – Satisfactory (no further action)

¹ Modified Non-Clinical Assessment requests may be granted to members who are currently not practising the profession because of illness or other personal circumstances. In these cases, members who have received approval from QAC-A would be required to submit proof of their CPD activities for the previous renewal period to the College for review. Additionally, the member would be required to notify the College of a return to practise, so the full Clinical Peer and Practice Assessment can be completed.

Peer & Practice Assessment Report Summary:

Renewal Period	Satisfactory	Remediation	Reassessment Ordered for Remediation	Modified Non-Clinical Assessment	Referral to ICRC	Resigned	Files Still In Progress
2016-17 (Total = 37)	19	11	1	3	1	2	4
2017-18 (Total = 35)	17	17	0	1	0	0	0
2018-19 (Total = 36)	3	3	2	4			33

CPD Compliance Summary:

Renewal Period	Extensions Granted	CPD Audit Ordered	Peer & Practice Assessment Ordered	Referred to ICRC for Non-Compliance
2016-17	7	7	0	1
2017-18	2	4	TBA	TBA

Program Development:

The Committee was provided with a verbal update regarding the Peer Circles project. On November 1, 2018, Peer Circles were piloted at Perfecting Your Practice 2018, the annual education conference of the Denturist Association of Ontario. 100% of the individuals who responded to a feedback survey for the Peer Circle program, (52 members) indicated that they would recommend attending a Peer Circle to a colleague. To provide members across the province with an opportunity to benefit from the Peer Circle Program, Collee staff will be scheduling Peer Circle events across Ontario.

The Committee was provided with an update regarding the Self-Assessment Tool project and decided that, in order to encourage member engagement with the tool, it will be optional for the 2019-2022 CPD cycle, refined as feedback indicates and then will be mandatory thereafter.

The Committee discussed the random selection process for Peer and Practice Assessments, reviewed examples of Chart-Stimulated Recall processes employed by other regulators and determined that the Jurisprudence program will be an optional component of the 2019-2022 CPD cycle.

Meeting: November 27, 2018

Requirement Considered	Result
2018-19 Peer & Practice Assessments	• 2 – Remedial submissions considered

The Committee will be meeting in January 2019 for further review of Peer & Practice Assessment reports, CPD compliance matters, and discussion on the development of the Chart Stimulated Recall component of the Peer and Practice Assessment.

Respectfully submitted,
Keith Collins, Chair



COMMITTEE REPORT TO COUNCIL

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

Reporting Date: **December 14, 2018**

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

Panel B of the Quality Assurance Committee (QAC-B) met once since its last report to Council on September 14, 2018.

The Committee considered the following draft Standards and Guides, and moved to recommend these documents to Council for consideration and eventual stakeholder consultation:

- Standard of Practice: Professional Boundaries
- Guide to the Standard of Practice: Professional Boundaries
- Standard of Practice: Professional Collaboration
- Guide to the Standard of Practice: Professional Collaboration

The Committee revisited the Standard of Practice: Code of Ethics that was approved for stakeholder consultation at the December 2015 Council meeting. As the document revision project plan was recalibrated in early 2016, neither the consultation report nor the Standard were returned to Council for consideration. The Committee took this opportunity to review the original draft and make any revisions that it felt necessary. Several of the statements in the original draft have been moved into a Guide to the Standard of Practice: Code of Ethics. The Committee moved to recommend this revised Standard and the new Guide to Council for consideration and eventual stakeholder consultation.

The Committee was provided with legal opinion regarding the use of the “HIS” (hearing instrument specialist) designation.

The Committee was provided with a workplan update and discussed a Standard revision schedule to ensure that all Standards and Guides are reviewed periodically to ensure relevance and suitability.

Respectfully submitted by Hanno Weinberger, Chair



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Qualifying Examination Committee (QEC)**

Reporting Date: **December 14, 2018**

Number of Meetings since last Council Meeting: **Two teleconference meetings: November 13 & 20, 2018**

The Committee met on two occasions and completed the item selection process for the MCQ (Multiple Choice Question) examination and also approved the OSCE (Objective Structured Clinical Examination) assessor roster for the winter 2019 Qualifying Examination.

Winter 2019 Qualifying Examination (QE)

Candidate registrations are well underway with final numbers to be confirmed in mid-December. The MCQ component of the QE will be administered on January 17 at Yorkville Conference Centre and the OSCE (Objective Structured Clinical Examination) will be administered at Princess Margaret Hospital on January 19 and 20.

Assessor Selection and Training

The assessor selection process has been completed and the training session has been scheduled for January 2019. Each assessor undergoes extensive training specifically for the cases which they are assigned to score as this is critical to the validity of any OSCE process. This training ensures that the decisions assessors make are consistent and contribute to valid test scores.

The cases and scoring checklists have been validated by practising denturists from across Ontario, in conjunction with the University of Toronto Standardized Patient (SP) Program, to ensure clarity, fairness, and relevance to practice.

Standard Setting

The process of recommending the cut (pass) score to the Committee for both components of the QE was completed on November 30 and December 1, facilitated by our assessment consultant.

A standard setting group of eight denturists practicing in Ontario reflecting a range of professional maturity were assembled and trained in using the Angoff Method, which is based on an understanding of the concept of “minimal competence”. Minimal competency is defined as the level of competence that reflects safe and effective practice and ensures the College’s public protection mandate is met.

Candidate scores falling below the established cut score indicate that the candidate has not demonstrated the minimum knowledge, skills and judgement required for entry to practice. For any given examination, it is theoretically possible for all candidates to pass.

Other Discussion Items:Continued Development of the QE

QE working groups continue to refine examination content for both the MCQ & OSCE examinations. An OSCE working group met on October 20-21 and developed new non-interactive stations in addition to the MCQ item writing workshops held on September 8-9 and November 9-11, 2018 to develop additional multiple-choice questions.

Summer 2019 Qualifying Examination

The number of non-interactive OSCE stations will be reduced from six to four as previously agreed by the Committee. This change has been communicated to the educational institutions and is reflected on the College's website. The revised QE blueprint distribution will be made available following the winter 2019 QE administration.

Respectfully submitted by Christine Reekie, Chair



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Qualifying Examination Appeals Committee (QEAC)**

Reporting Date: **December 14, 2018**

Number of Meetings since
last Council Meeting: **One teleconference meeting: October 9, 2018**

The Committee met on one occasion to consider the Qualifying Examination (QE) appeal submission for one unsuccessful candidate for the summer 2018 QE.

The Committee considered the candidate's "Notice of Appeal" along with supporting documentation. In consideration of the information before them, the Committee granted the appeal.

Respectfully submitted by Michael Vout Jr., Chair



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Registration Committee**

Reporting Date: **December 14, 2018**

Number of Meetings since last

Council Meeting: **3**

The Registration Committee (RC) met twice since its last report to Council on September 14, 2018.

At its September 24th, 2018 meeting, the Committee considered 1 request for an academic assessment and 1 application for a Certificate of Registration.

At its November 12th, 2018 meeting, the Committee considered 2 requests for academic assessment, and 1 application for a Certificate of Registration.

The Committee also considered the following:

Discussion Item	Action
Language Proficiency Requirements Policy	Approved draft amendments of policy for recommendation to Council
Credential Authentication Policy	Directed program staff to draft amendments for consideration at the next in-person meeting
Refresher Programs	Directed program staff to develop a framework for the refresher program that will be implemented when the revised Registration Regulation comes into force

The Committee will be meeting on December 6th, 2018 to consider requests for academic assessments for individuals who may be eligible to attempt the Winter 2019 Qualifying Examination.

Respectfully submitted by Elizabeth Gorham-Matthews, Chair



COMMITTEE REPORT TO COUNCIL

Name of Committee: **Patient Relations**

Reporting Date: **December 14, 2018**

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

The Patient Relations Committee met on November 21, 2018.

At this meeting the Committee, with the assistance of Cathi Mietkiewicz of Mietkiewicz Law, considered the legislative framework surrounding the Patient Relations Committee and its mandated responsibilities related to program items, including funding support for therapy and counselling for victims of alleged sexual abuse by members of the College.

The Committee considered a draft set of Terms of Reference and approved them for presentation to Council at its December 14, 2018 meeting.

The Committee also considered elements of a sexual abuse prevention program that is a legislated responsibility of the Committee. The discussion around the sexual abuse prevention program included considerations of education for members, education for students, guidelines for the conduct of members, training for College staff, provision of information to the public, funding for therapy and counselling and a process for the evaluation of the program's effectiveness.

The Committee directed staff to review and update the forms and information sheets related to the Patient Relations Committee and a sexual abuse prevention program. These forms and information sheets will be circulated to the members of the Committee for comment too. At the next meeting of the Committee in 2019, the Committee will consider details of the Sexual Abuse Prevention Program elements.



To: **Council**

From: **Dr. Ivan McFarlane**

Date: **December 14, 2018**

Subject: **President's Report - Verbal**



To: **Council**
From: **Dr. Glenn Pettifer**
Date: **December 5, 2018**
Subject: **Registrar's Report**

STAKEHOLDER REPRESENTATION

September 28, 2018 – Jennifer Slabodkin co-presented at the CLEAR (Council on Licensure, Enforcement & Regulation) Annual Education Conference in Philadelphia.

October 11, 2018 and December 3, 2018 – FHRCO Board of Directors Meetings.

October 12, 2018 – Special Council Meeting of the College of Physiotherapists of Ontario

October 18, 2018 – Jennifer Slabodkin presented a lecture on Confidentiality and Privacy at the DGO annual education conference.

October 16 – 19, 2018 - Attended the Canadian Network of Agencies for Regulation (CNAR) annual conference in Banff, Alberta.

October 17, 2018 – team taught in the “Regulatory SOS! Fundamentals of Professional Regulation” workshop. Presented a lecture on “Challenges to Good Governance and Some Potential Remedies”.

October 18, 2018 – co-presented a lecture on “Bringing the Public Into Your Regulatory Work – The Citizen Advisory Group in Action.”

Met with the Registrar of the CDHO on numerous occasions to discuss interests of common concern between the CDHO and the CDO.

Attended the inaugural administration of the Peer Circle Program at the DAO PYP – Annual education conference on November 3, 2018.

Attended the George Brown College Denturism Program Advisory Committee bi-annual meeting.

November 26 and December 5, 2018 – new Member Orientation Webinar presentation with Jennifer Slabodkin.

December 4, 2018 – Introduction to Becoming a Member of the CDO – Lecture/Presentation to 3rd year George Brown College students .

Met with representatives of the Ministry of Health and Long-Term Care regarding Oral Health College cooperation.

FINANCE

Year-to-date financial reports are provided.

ICRC & DISCIPLINE

There are currently 12 active complaint files, seven registrar's reports/investigations, two health inquiry panels, four decisions at HPARB. There are currently three matters awaiting discipline hearings.

REGISTRATION

There are currently 720 individuals holding Certificates of Registration. This number is up from 696 reported in my September 7, 2018 report and reflects the registration of individuals who completed the June administration of the Qualifying Examination.

PROGRAM AND POLICY DEVELOPMENT

Jurisprudence Project

The Jurisprudence Project was piloted successfully. A communication strategy will be developed early in the new year before launching the program.

Peer Circle Project

The Peer Circle project was piloted at the recent DAO PYP Annual Education Conference. The pilot went very well and the College received very positive comments from participants. Tools such as the Peer Circle are not only meant to provide a positive learning experience for the participants but are also meant to drive positive change in behaviour as it relates to clinical practice. The College will undertake to follow the extent of any continuing impact of participation in a Peer Circle on clinical behaviour.

Standards and Development.

Infection Prevention and Control Guidelines

The drafting of the revised IPAC Guidelines continues. The College continues to provide information support to Registered Denturists who have questions regarding this area of clinical practice.

Self-Assessment Tool.

The College is finishing up the online formatting of this tool. The tool will be piloted to all Registered Denturists over the next three years to coincide with the Continuing Professional Development cycle.

Document Management Project

The needs assessment was completed in April 2018. The document classification structure was developed over the last two months. The College has assessed a number of programs for document management and has selected one program. This program will be formatted for College use and introduced within the next 3 months. The document retention schedule will be considered for adoption by Council at the December meeting.

CONTINUING PROFESSIONAL DEVELOPMENT INITIATIVES

Educational webinars and self-directed learning assignments have been developed for the Standards listed below. Members who attend the webinars have the option to complete self-directed learning assignments for additional CPD credit. Staff have developed on-demand modules for each of these Standards (Strategic Plan Priority 1). The table below details the number of attendees at a variety of online webinars this past fall. There is also an accounting of the number of on-demand viewings there have been for each webinar in the online library.

Standard	# of Sessions	# of Attendees	On Demand Views
Record Keeping	2	53	8
Informed Consent	2	20	7
Confidentiality & Privacy	2	34	12
Advertising	2	59	21
Conflict of Interest	2	26	15

OPERATIONS

A search for qualified individuals to fill the Manager, Professional Conduct position was conducted. Three individuals were interviewed and the College was successful in hiring Mr. Ryan Pirtam who started with the College on October 22, 2018.

STAFF PROFESSIONAL DEVELOPMENT ACTIVITIES

Attended WeirFoulds seminars on "The Ungovernable Professional" and "Legal Strategies in Dealing with Unauthorized Practice".

Jennifer has been accepted into the Masters in Public Administration (Management) and will begin her first course January 2019.

Ty attended the FHRCO – Communicators' Day on November 23, 2018.

Vicci is enrolled in courses on Project Management and Occupational Health and Safety.



MEMO

To: **Council**
From: **Dr. Glenn Pettifer, Registrar and CEO**
Date: **December 5, 2018**
Subject: **Financial Report Memo**

Financial Reports are attached for the period April 1 – October 31, 2018.

You will find revenue and expenditure summaries. 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 revenue, received. Since this report covers the first 7 months of the fiscal year, we expect that approximately 60% of a budgeted amount is spent or, in the case of revenue, received.

Revenue:

Most revenue comes from Registration renewal (ends on April 15) and associated activities. The total revenue at this point in the current fiscal year is 97% of the budgeted amount. Remaining revenue will come from examination fees from the January 2019 sitting of the Qualifying Examination.

Expenses:

There are some line items that are not expensed over time but are lump sum payments. Depending on when lump sum items are invoiced, these items will show a YTD percentage of budget greater or less than 60%.

There is a single item of note:

1. Included in the Complaints line are expenditures for Decision Writing, Legal Advice and Investigation Costs that noticeably exceed the budgeted amounts for the entire fiscal year. This excess arises because:
 - We are not able to predict the number, type and complexity of complaints that are presented to the College.
 - Staffing changes in the area of Professional Conduct necessitated short-term contracting of file management and decision writing services.

Despite the overage in the area of ICRC, the total expenditures at this point in the fiscal year as a percentage of the budgeted amounts is 54%. This is well within the anticipated range for this point in the fiscal year.

College of Denturists of Ontario

Income Statement (April 1- October 31, 2018)

YTD Budget to Actual	2018-2019 BUDGET	October 31/18 YTD Totals	YTD as Percentage of Budget	Remainder or In Excess of Budgeted Amount*
REVENUE				
Professional Corporation Fees	\$ 64,950.00	\$ 57,950.00	89%	\$ 7,000.00
Registration Fees	\$ 1,369,625.00	\$ 1,391,836.00	102%	\$ 22,211.00*
Other Fees	\$ 8,484.50	\$ 9,449.74	111%	\$ 965.24*
Qualifying Examination Fees	\$ 243,750.00	\$ 188,825.00	77%	\$ 54,925.00
Other Income	\$ 37,800.00	\$ 30,053.05	80%	\$ 7,746.95
TOTAL REVENUE	\$ 1,724,609.50	\$ 1,678,113.79	97%	\$ 46,495.71
EXPENDITURES				
Wages & Benefits	\$ 505,770.17	\$ 280,828.86	56%	\$ 224,941.31
Professional Development	\$ 35,000.00	\$ 14,292.72	41%	\$ 20,707.28
Professional Fees	\$ 209,900.00	\$ 77,405.53	37%	\$ 132,494.47
Office & General	\$ 137,957.05	\$ 83,675.73	61%	\$ 54,281.32
Rent	\$ 117,756.80	\$ 63,566.44	54%	\$ 54,190.36
Qualifying Examination	\$ 321,750.00	\$ 185,253.44	58%	\$ 136,496.56
Council and Committees	\$ 40,000.00	\$ 13,764.84	34%	\$ 26,235.16
Quality Assurance				
QA Panel A	\$ 4,000.00	\$ 2,424.70	61%	\$ 1,575.30
QA Panel B	\$ 5,000.00	\$ -	0%	\$ 5,000.00
QA Assessments	\$ 18,300.00	\$ 12,299.48	67%	\$ 6,000.52
Complaints & Discipline				
Complaints	\$ 66,000.00	\$ 92,815.50	141%	-\$ 26,815.50
Discipline	\$ 80,000.00	\$ 6,587.80	8%	\$ 73,412.20
Capital Expenditures	\$ 15,000.00	\$ 9,967.81	66%	\$ 5,032.19
TOTAL EXPENDITURES	\$ 1,556,434.02	\$ 842,882.85	54%	\$ 713,551.17
NET INCOME	\$ 168,175.48	\$ 835,230.94		



BRIEFING NOTE

To: **COUNCIL**

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

Date: **December 14, 2018**

Subject: **Update on Strategy Map 2017-2020 progress**

Priority 1 – Enhanced Communication and Stakeholder Engagement

The Peer Circle Program was launched at DAO PYP in November. Details of this launch are provided in the QA-A Committee report.

Educational webinars and self-directed learning assignments have been developed for the Standards listed below. Members who attend the webinars have the option to complete self-directed learning assignments for additional CPD credit. Staff have developed on-demand modules for each of these Standards (Strategic Plan Priority 1). The table below details the number of attendees at a variety of online webinars this past fall. There is also an accounting of the number of on-demand viewings there have been for each webinar in the online library.

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Confidentiality & Privacy	2	34	12
Advertising	2	59	21
Conflict of Interest	2	26	15

Interprofessional collaboration has been an item of discussion at meetings with the Registrars of the CDHO and CDTO.

Priority 2 – Excellence in Governance

Council, Committee Members and Peer Advisors have engaged in training sessions on Unconscious Bias. Training on financial literacy was provided by Blair MacKenzie at the June 2018 Council meeting.

The mentoring process for new Council members is being drafted.

Policy Coordination has been introduced to the Registration Committee with a view to expanding this across all policy areas of the College. A schedule for policy review has been developed and approved. A revision schedule for the Standards of Practice will be developed once all the Standards are developed and implemented.

Included under this policy coordination initiative is the development of a document management strategy. As noted in the Registrar's Report, the needs assessment has been concluded. A classification structure has been developed and a vendor of document management software has been identified.

Priority 3 – Enhanced Relations with Educational Institutions

College staff continue to attend all 3 academic institutions to deliver presentations on the College, its role in the regulation of the profession of denturism, registration requirements, qualifying examination processes and opportunities for engagement.

The College continues to explore accreditation model options. EQual Canada will be providing an overview of its process to Council at the December meeting.

The CDO has initiated conversations with some of our provincial counterparts regarding revisions to the National Competency Profile.

Federation of Health Regulatory Colleges of Ontario

Prepared by Richard Steinecke

In this Issue:

- Bill 47 will amend *Employment Standards Act* and winds down the Ontario College of Trades, see p. 1
- Bill 51 will require long-term care homes to give preference to veterans, see p. 1
- Special Feature: Explanation of new Police Records Check rules, see pp. 2-3

Bonus Features:

- Excessive Delay, see pp. 3-4
- More Guidance on Awarding Costs at Discipline, see p. 4
- Refusing to Consider Competencies Obtained Outside of School, see pp. 4-5
- Process Challenges, see p. 5
- Not Enforcing Administrative Penalties, see pp. 5-6
- Wording of Restraining Orders, see p. 6

Ontario Bills

(See: <https://www.ola.org>)

Bill 47, *Making Ontario Open for Business Act, 2018* – (*government Bill – passed first reading and in second reading debate*) – Bill 47 repeals many recent changes to the *Employment Standards Act* including raising the minimum wage to \$15 per hour in 2019. The Bill also provides for the winding down of the Ontario College of Trades.

Bill 51, *Long-Term Care Homes Amendment Act (Preference for Veterans), 2018* – (*private member's Bill – passed first reading*) – Bill 51 would require long-term care homes to give preference to admitting veterans.

Proclamations

(See www.ontario.ca/en/ontgazette/gazlat/index.htm)

There were no relevant proclamations this month.

Regulations

(See www.ontario.ca/en/ontgazette/gazlat/index.htm)

There were no relevant regulations made this month.

Proposed Regulations Registry
(See <http://www.ontariocanada.com/registry>)

There were no relevant consultations this month.

Special Feature: *Police Record Checks Reform Act, 2015*

What is the Act?

The *Police Record Checks Reform Act, 2015* (the “Act”) comes into force in Ontario on November 1, 2018, and will update the criminal background check system in Ontario. The legislation was born out of concerns regarding the disclosure of “non-conviction records” revealing unproven allegations as well as concerns regarding the disclosure of sensitive mental health information. Overall, the Act brings consistency to the procedure and scope of criminal background checks – now called “police record checks” – across the province.

Most notably, the Act establishes three distinct types of “police record checks”, each of which reveals specific types of information regarding an individual’s record:

- Criminal Record Check
- Criminal Record and Judicial Matters Check
- Vulnerable Sector Check

Police are restricted to only disclose information that is authorized under the particular type of police record check (section 9). For instance, police would not be able to disclose an individual’s non-conviction record in response to a request for a basic criminal record check, whereas that information may appear in the other two types of police record checks.

Does it apply to regulators?

Yes. The new Act captures police record checks performed by regulators for the purpose of licensing and membership. Specifically, the Act applies to individuals who require a search of the Canadian Police Information Centre (“CPIC”) databases or another police database maintained by a police service in Canada for the purpose of determining her or his suitability for “employment, volunteer work, a licence, an office, membership in any body or to provide or receive goods or services”. It also applies to searches for the purposes of assessing applications to an educational institution.

How do regulators ensure compliance?

To ensure compliance, regulators must observe the disclosure and consent provisions set out in the Act. Police may only disclose the results of a police record check to a regulator directly if the applicant or member provides written consent (section 12). In a case of direct disclosure to a regulator, the regulator may only use or disclose the information it receives for “the purpose for which it was

requested or as authorized by law” (section 13). To do otherwise is an offence under the *Act*. Therefore, regulators who request police record checks directly from police must ensure that they clearly indicate the purpose for which the information will be used and restrict its use accordingly.

The *Act* does not contain a similar provision for instances where an individual collects the results of a check from the police and subsequently provides a copy of that information to a regulator. However, it would be prudent for regulators to clearly outline the purpose(s) for which such information is being requested and to restrict the use of that information accordingly.

It is an offence under the *Act* for a person or organization to willfully contravene the provisions regarding the manner and form of a request (sections 5, 8 and 19). As noted above, a request must include the type of police record check, the applicable fee, and written consent for the type of police record check (from the individual in question). Regulators will want to update their policies to inform members about the type of check required as well as responsibility for any applicable fees.

The *Act* also prescribes specific rules regarding the disclosure of non-conviction information and youth records (sections 10 and 11). Regulators that request this type of information should be aware that police are required to disclose the information in a particular manner (e.g. in a separate record).

Finally, when requesting a police record check in the employment context, a regulator must ensure that it uses the information obtained in a manner that is consistent with its obligations under the *Ontario Human Rights Code*.

Bonus Features

(Includes Excerpts from our Blog and Twitter feed found at www.sml-law.com)

Excessive Delay

It is rare for a disciplinary case to be stayed on the grounds of excessive delay. However, *Diaz-Rodriguez v British Columbia (Police Complaint Commissioner)*, 2018 BCSC 1642, <http://canlii.ca/t/hv9pz>, is an example of where the test for a stay was met. The case involved allegations of the use of excessive force and of giving misleading statements by a transit police officer. The delay was for seven years despite the inclusion of tight timelines within the enabling legislation. The delay included the restarting of proceedings at least twice because the oversight body was not satisfied with earlier determinations.

The Court acknowledged that the timeliness requirements of criminal proceedings did not apply, and that case was governed by the *Blencoe v British Columbia (Human Rights Commission)*, [2000] 2 SCR 307, <http://canlii.ca/t/525t>. The test in *Blencoe* is that: “the applicant must establish that: (1) the delay is unacceptable; and (2) there is a serious prejudice arising from the delay itself, not from the underlying allegations or charges”. The Court also accepted that section 7 of the *Canadian Charter of Rights and Freedoms* did not apply. The Court concluded that there was no material unfairness to the

hearing process as the core evidence remained available through video recordings and promptly-taken witness statements.

However, the Court found that the extraordinary delay did meet the “inordinate” criterion given the time-sensitive nature of the legislative scheme and the circular nature of the proceedings. The Court also found that there was significant prejudice to the practitioner largely because of the career limiting restrictions he had worked under for five years and the impact the delays had on him and his family.

This case is a reminder to regulators that, despite the non-criminal law approach taken to regulatory delays, excessive delays can result in the staying of proceedings in appropriate cases. This is particularly true where interim restrictions are imposed.

More Guidance on Awarding Costs at Discipline

The Ontario Divisional Court provided additional guidance on the awarding of costs by a discipline tribunal against practitioners found guilty of professional misconduct. In *Robinson v College of Early Childhood Educators*, 2018 ONSC 6150, <http://canlii.ca/t/hvmwg>, the practitioner was found guilty of having abused a child. The panel ordered the practitioner to pay \$257,000 in costs which was more than five times his salary when he was fully employed. The practitioner challenged the authority of the tribunal to award costs on a technical argument related to the failure to provide a process in the tribunal’s rules of procedure and the intersection of the enabling statute with the provisions of the *Statutory Powers Procedure Act*. The Court found the tribunal’s interpretation of its provisions was reasonable even though another regulator had interpreted similar provisions differently.

The Court made non-binding observations, however, that the awarding of costs could have a chilling effect on practitioners facing discipline where the tribunal adopted a policy of awarding costs in every case in which a finding was made. The Court would also be concerned if the regulator sent mixed signals as to whether costs would only be awarded where the practitioner acted unreasonably, but then proceeded to award costs where the practitioner’s defence was acknowledged to have been diligent and appropriate.

In this case, however, the costs order was upheld.

Refusing to Consider Competencies Obtained Outside of School

The trend in registration matters has been to consider competencies rather than credentials. This is an essential part of the legal requirements imposed on regulators relating to national and international mobility. It is also consistent with the public interest in having all competent practitioners practise their professions. However, credential-based registration requirements are still legal and enforceable when required by legislation.

In *Marshall v. College of Psychologists of Ontario*, 2018 ONSC 6282, <http://canlii.ca/t/hvn9f>, the Divisional Court was faced with a challenge by a psychologist who had obtained a doctorate in Canada from a non-accredited program. At the time that the Canadian degree was obtained, the applicant likely met the requirements for registration. However, a subsequent regulation amendment (of which the applicant indicated he had not received prior notice) required equivalency to an accredited program, which the regulator concluded did not exist. After graduation, the applicant had obtained significant relevant experience and had published a number of peer-reviewed articles in the field. It also appeared that, if the applicant were internationally trained, he might have faced a more flexible registration process.

The regulator concluded that the non-exemptible requirement had not been met since it spoke specifically about the applicant's educational "program" which did not permit the consideration of post-graduation experience and writing. The appeal tribunal found this interpretation of the language of the regulation was reasonable. The Court, while acknowledging the policy arguments for considering competencies obtained outside of the program itself, agreed.

The *Marshall* case highlights the importance of the legislative language in registration matters.

Process Challenges

In some discipline cases, the defence relates to the process rather than the merits. To a large extent, *Walia v. College of Veterinarians of Ontario*, 2018 ONSC 6189, <http://canlii.ca/t/hvl9g>, was such a case. In brief, the following process challenges were dismissed by the Ontario Divisional Court:

- So long as a referral to discipline is for allegations within the scope of the complaint and is particularized, it does not matter that formulation of the allegations in the notice of hearing differs from the summary of the complaint provided by the regulator.
- It is acceptable for prosecuting counsel to draft the specific allegations referred to discipline.
- So long as members of the screening committee did not participate in the case, they can be part of the adjudication committee in the matter.
- It is permissible for a member of the hearing panel to have heard preliminary motions.
- It is not an apparent lack of neutrality for an expert witness to have sat on committees of the regulator in the past.
- When assessing costs for a discipline hearing, the dockets of prosecuting counsel need not have been disclosed or filed.

Courts look to whether the procedures followed actually affected the fairness of the hearing.

Not Enforcing Administrative Penalties

When regulators impose a fine or administrative penalty, do they have an obligation to try to collect it? In *British Columbia (Securities Commission) v Thow*, 2018 BCSC 1823, <http://canlii.ca/t/hvn8g>, the Court said no. Mr. Thow misappropriated a large amount of money from his clients. He was found

criminally responsible and a large restitution order was issued. The Securities Commission also prosecuted him and obtained an administrative penalty in the amount of \$250,000. The Commission did not take steps to collect the administrative penalty so that Mr. Thow could continue to make payments on the restitution order. Mr. Thow argued that, because of this inaction, any attempt to now collect the administrative penalty would be an abuse of process. The Court disagreed:

On basis of the record, the most compelling conclusion is that the plaintiff's decision to refrain from actively pursuing collection was based on a recognition that money paid in satisfaction of the restitution order was the preferable outcome because funds would find their way to the benefit of the victims, rather than to government coffers, as would result from payments on the penalty. If that is the case, as it seems to be, in my view it is eminently commendable, and quite the opposite of an abuse of the court's process or action taken for some ulterior motive.

The Court deferred dealing with the second argument (that the Commission had promised not to collect the administrative penalty) until better evidence could be obtained.

This case confirms that regulators are not compelled to make immediate collection efforts on a fine or administrative penalty in order to preserve their claim.

Wording of Restraining Orders

The wording of restraining orders is definitely an art, rather than a science. In the past, courts have encouraged such orders to be worded as specifically as possible, and not to simply follow the wording of the statute, so as to make its scope clearer and its enforcement easier: *Law Society of Saskatchewan v Mattison*, 2015 SKQB 323, <http://canlii.ca/t/glpws>. However, the law of unintended consequences can supersede all. In *College of Midwives of British Columbia v Lemay*, 2018 BCSC 1827, <http://canlii.ca/t/hvp09>, the regulator obtained an injunction against an unregistered person preventing her from performing various midwifery procedures or holding themselves out as a midwife. Subsequently the enabling legislation was amended, changing some of the language used to describe the regulated activities. While the changes were not substantive, it became less clear what the individual was prohibited from doing. The regulator sought, and obtained, an order from the Court amending the wording of the restraining order to ensure that its manifest intent of preventing the individual from practising midwifery was maintained. Interestingly, the revised wording of the order required compliance with the legislation as it was worded from time to time. The specific prohibited activities were removed from the order.



Tuesday, September 25, 2018

Via Email: cadaccreditation@gmail.com

Nathan J. Hoffer, DD
Chair, Commission on Accreditation for Denturism
#30 A 2325 Preston Avenue
Saskatoon, Saskatchewan, S7J 2G2.
Telephone: 613-977-2238

Dear Nathan;

I write on behalf of the Council of the College of Denturists of Ontario.

At its meeting on Friday September 14, 2018, Council considered information regarding the Commission on Accreditation of Denturism that you provided. Since Council was being asked to contribute to the financial support of the CAD, they were particularly interested in information related to medium and long-range business plans for the Commission. Council was also very interested in the information you provided regarding both the goals of the corporation and the benefits of members of the CAD.

In its discussion, Council focussed on its responsibility, under its governing legislation, to create and support a process of approval and accreditation of denturism academic programs in the province of Ontario. To date, the thrust of Council's attention in this regard has been on academic program approval. It is now interested in extending those efforts to create a framework that includes both academic program approval and cyclic accreditation. Marrying this with the College's responsibility to attend to the public interest in all its activities, Council was clear in its opinion that such a process must be fiscally responsible and that it must reflect best practices in health profession academic program accreditation.

To those ends, Council was very clear in its opinion that supporting an academic program accreditation process cannot be combined with efforts to support the interests of the profession as they relate to "pertinent issues" including "scopes of practice". This is not the work of the College. Its mission is to "regulate and govern the profession of Denturism in the public interest". It is the work of the professional associations, both provincial and national, to advance the interests of the profession. The interests of the profession are credible, but they cannot, in the opinion of Council, be combined with the goals of academic program accreditation. I do not think that this is a new conversation. This complete divorce of the accreditation of denturism academic programs from advocacy of the interests of the profession is a challenge that the DAC, the CAC and now the CAD have faced and will continue to face.

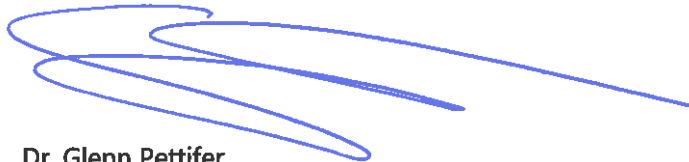
Because of its desire to support an accreditation process that is completely independent of advocacy of the interests of the profession, Council has turned its attention to developing an accreditation framework and process with a national, independent, third-party health profession academic program accreditation organization. This will support Council's desire to focus the efforts of this work solely on accrediting

academic programs, in the public interest of access to safe, competent and ethical denturism care and service.

Council was also mindful of its responsibility to invest the College's resources in a manner that supports its public protection mandate. Within the context of academic program accreditation, it was unsure as to the CAD's medium to long-range business plans. Nor was Council convinced that the financial burden for academic program accreditation should be carried by the regulatory bodies.

For these reasons Council has instructed me to inform you that the College will not be supporting the work of the CAD, in principle or financially. I realize that this news may be disappointing to you and the CAD but it was a decision made carefully by Council, in consideration of all of the information before it, with the execution of its mandate to serve the public interest at the forefront.

Sincerely



Dr. Glenn Pettifer
Registrar & CEO



COLLEGE OF
DENTURISTS
OF ONTARIO

BRIEFING NOTE

To: **Council**

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

Date: **December 14, 2018**

Subject: **Document Management Strategy – Retention Schedule**

Background

The College is in the process of developing a document management strategy that will provide an information governance structure that successfully manages the College's information. This structure must be compliant with all regulatory responsibilities (of which there are many!).

As part of this document management strategy, a retention schedule was drafted. The retention schedule defines the lifespan of the various document types outlined in the College's classification scheme. Some of the retention schedules are determined by regulation, some by utility, and some by common sense. The retention schedule was drafted by the College's document management consultant, Ms. Caroline Werle of RIM Management. The drafts and legal citations were reviewed by College counsel to ensure regulatory compliance.

Options:

After review of the attached documents, discussion and consideration of this matter, Council may elect to:

1. Adopt the proposed retention schedule.
2. Modify the proposed retention schedule and adopt the modified schedule.
3. Other.

Attachments:

Draft Retention Schedule
Legal Citations

Classification Structure and Retention Schedule

Overview

The records classification and retention structure is a valuable tool to manage the records and information created or received by the College of Denturists of Ontario (CDO) and as such, it is an important strategic business resource. The systematic application of managing information through a classification structure allows for the control of information assets throughout its lifecycle – from cradle to grave. By consistently identifying information, regardless of where it is held, the structure removes barriers to access (assuming appropriate permissions) while also protecting privacy and allows information to be available in a timely fashion to those who need it. This access is essential for supporting decision-making and sharing the knowledge developed through collaboration efforts. Such a system also supports accountability and good governance, protects personal and confidential information captures and preserves the corporate memory and the history of CDO while improving organization efficiencies and mitigating risk.

CDO's Classification and Retention Schedule is the official policy for the management of records at CDO. It provides staff with the authority to manage records in accordance with relevant policies, legislation and regulations. CDO has adopted the ISO 15489 standard of a functionally based classification structure to provide a hierarchical framework for the organization and description of records. This standard is endorsed by the Ontario Government through the Archives of Ontario. The structure is based on the content of the document and applies to all records, regardless of whether they are in paper, digital, image, audio or video format. Each classification category is accompanied by a retention timeframe that reflects applicable legislation and business need. The main reasons for a functional approach are as follows:

- Eliminates duplication of records because all records related to a specific function are grouped together rather than split up among departments. For example, all agreements and contracts would be in under the GOVERNANCE/LEGAL function;
- Provides integrity and thus reliability when searching for information within the central repository because all “like” things are filed together rather than “classified” under different departments or programs;
- Business functions are independent of organizational structure. Changes in organizational structure do not affect the classification scheme. It doesn't have to be “re-invented”;
- Department names change but functions remain constant;
- Reduces silos of information.

The functions of the CDO are as follows:

- | | |
|--|-------------------------|
| • Administration | • Financial Management |
| • Communications & Stakeholder Relations | • Governance/Legal |
| • Employee Management | • Membership Management |

Definitions

RECORD - The International Organization for Standardization (ISO) defines a record as “recorded information in whatever physical format created, collected or received in the initiation, conduct or completion of an activity which has content, context and structure, is authoritative and reliable, provides evidence of decision-making”. Records can include books, papers, maps, electronic documents, digital, video, voice recordings, web pages, etc.

TRANSITORY RECORD is useful for only a short time and has minor importance. When its use is over it should be deleted or destroyed. A transitory record can be destroyed at any time before the retention period of the original document as the official or original document is held by the originator/primary area of accountability and subject to the approved retention period. Examples of transitory records include the following:

- personal messages
- general notices and announcements
- copies of documents and emails
- cc, bcc, or FYI emails kept only for convenience
- drafts and working documents to prepare final records with a few exceptions such as agreements/contracts, drafts in developing legislation.

NON-RECORD has no bearing on the organization’s functions, operations, or mandate. A non-record may be a general distribution item, reference book, published legislation from other stakeholders or government agencies as examples. A non-record is typically used, if ever, only for a very limited period of time. It does not have to be collected and maintained. This document is not required to be retained and therefore does not appear on a records retention schedule.

When applying the retention schedule to CDO records, the above definitions of a record, transitory and non-record, determine what should be classified and focus on core business documents generated by the originator or the primary area of accountability.

However, notwithstanding the above definition of a non-record, it is recommended that convenience copies and drafts be subject to classification if they are to be kept for some reason.

Classification and Retention Schedule Headings

Record Series and Filing Methodology

Record Series are defined as a group of related records that have the same form and function, are filed as a unit and are maintained together for retention scheduling purposes. Record series are destroyed as a unit when the retention period is up unless there is a litigation or audit hold on the record series. The record series are grouped into broad organizational functions, then by the activities that take place within each function. Activities are created based on the roles and responsibilities of staff who partake within that activity. Within each activity are the records that are created through that activity – it is the evidence of a business transaction – these are the record series where retention is applied. The types of documentation described within a record series is referred to as a scope note.

Accountability

This classification scheme identifies the Office of Accountability – the business unit or program who is accountable for ensuring that the official record is managed throughout its lifecycle. This is the business area that has primary interest or ownership of the records. They are considered to be the official holder of the original records. When accountability refers to the “ALL” it applies if all business units and programs within CDO involved in creating and saving records for that record series. There is no one department/program accountable. Everyone is accountable for their own records.

Retention

The column labelled “**Total Retention**” specifies the length of time records must be kept. An event such as the termination of an agreement or project close may be used to indicate when the retention calculation begins. Retention periods are reviewed and approved by the Office of Accountability and Registrar. The retention schedule has been approved by the College’s Legal firm of Steinecke Maciura LeBlanc.

Disposition

The column labelled “**Disposition**” refers to how the records are disposed of at the end of their lifecycle. Once the records have reached the end of their total retention period they may be totally destroyed/expunged, or all or part of the record series may be designated as archival selection or archival which means the entire record series is kept for future generations. Records identified in the classification structure and retention schedule can only be destroyed/disposed of in accordance with CDO’s records destruction procedures and in conjunction with approval from Director/Manager of the Program and/or Business Unit. All destroyed records should be documented by a certificate of destruction as proof of final disposition. The certificate of destruction is kept permanently as proof that destruction took place, what records were destroyed and when they were destroyed as promulgated by the Electronic Record as Documentary Evidence from the Canadian Standards Board CAN/CGSB-72.34-2017.

Security Classification

In order to protect the confidentiality, integrity and availability of CDO’s data, each record series is assigned a security classification, being public, internal or confidential. *(See legend for definitions –pg.4)*

Citations and Comments

The Citation/Comments column provides the cross-reference identifier to the legislative citations that are recommended as applicable for each category of records. FED refers to the Federal legislation and ONT refers to Ontario legislation.

Legend for Retention Terms

CODE	DEFINITION	DESCRIPTION
A	Archival	Record Series which has been assessed to have historic significance. Archival documents are retained for 10 years at which point they are appraised again for historic importance and possibly archived for another 10 years. Every 10 years they are reviewed for historical significance. For electronic records, they are reviewed to determine if these will continue to be migrated.
AS	Archival Selection Before Destruction	Refers to reviewing the records series before destruction to see whether they have historic significance prior to destruction. This is different from archival because in the case of an archival designation the entire records series is kept for posterity, whereas, in archival selection before destruction, records are “selected” for potential historic significance. The entire record series is not kept.
CY	Current Year	Refers to January 1 st to December 31 st .
FY	Current Fiscal Year	Refers to April 1 st to March 31 st .
D	Destroy	Requires that upon expiration of the retention period the document is destroyed – shredded, recycled, deleted (expunged).
S/O	Superseded or Obsolete	Refers to the replacement of a document once it has been updated or revised. The new document supersedes the previous version.
T/E	Event Trigger for termination or close of an event or activity	Refers to a record being retained until it has been closed or terminated, typically used for case-based or project records where the retention refers to the case being closed or the transaction being completed. For example, this retention applies to an employee file and is triggered at the point at which the employee leaves the organization. These records are usually maintained until the case or transaction or employee record is closed/terminated plus a pre-defined number of years, e.g. T/E+3 means retained until the case is closed plus 3 more years.
PI	Personal Information	Refers to records of individuals who have personal information with the College and needs to be protected on a need-to-know basis.
	Permanent	Kept for the life of the organization.
LOC	Life of Corporation	Refers to records that are designated by legislation to keep for the life of the organization + a specific number of years. General ledgers are an example.

Security Classification Levels

Public: This classification applies to information in the public domain. The information is fit for distribution via public channels such as email and websites. Disclosure of *Public* information is not expected to adversely impact CDO employees, its stakeholders, its business partners, and/or its members.

Internal: This classification applies to general information intended or appropriate for any internal audience or a restricted external audience such as stakeholders. Internal access is unrestricted, but external access is based on a business need-to know basis.

Confidential: This classification applies to the most sensitive business information that is intended for a limited audience. Its unauthorized disclosure could seriously and adversely impact CDO, its employees, its stakeholders, its business partners, and/or its members. Records, which are designated as confidential, are accessible only by a defined sub-group of CDO. Access permissions may be given to staff based on their membership to a specific group or individually as CDO management deems appropriate.

Table of Contents: Summary of Functions / Activities and Record Series

ADMINISTRATION	COMMUNICATION & STAKEHOLDER RELATIONS	EMPLOYEE MANAGEMENT	FINANCIAL MANAGEMENT	GOVERNANCE/LEGAL	MEMBER MANAGEMENT
<ul style="list-style-type: none"> Administrative Office Records External Publications Logs Meetings & Committees – Internal Policies & Procedures – Administrative Project Management Templates & Forms -Blank <p>Information Technology</p> <ul style="list-style-type: none"> Computer System Access & Controls 	<ul style="list-style-type: none"> Branding Contact Lists Events Media Relations Photos Presentation & Speeches Published Program/Promotional materials Website /Social Media Content Management & Analytics <p>Stakeholder Relations</p> <ul style="list-style-type: none"> Government/ Intergovernmental Relations & Regulatory Bodies Universities/ Colleges & Organizations 	<p>Recruiting & Selecting</p> <ul style="list-style-type: none"> Job Descriptions Staff positions <p>Staff Management</p> <ul style="list-style-type: none"> Accessibility for Ontarians with Disabilities Act Employee Files <p>Training & Skills Development</p> <ul style="list-style-type: none"> Training & Development Courses 	<p>Accounting Administration</p> <ul style="list-style-type: none"> Accounts Payable Accounts Receivable(Renewals) Banking Transactions & Investments Reconciliation General Ledger Month-end Closing & Analysis <p>Financial Planning & Investments</p> <ul style="list-style-type: none"> Budget Forecasting <p>Financial Reporting</p> <ul style="list-style-type: none"> Financial Statements – Audited Council & Executive Reports Journal Entries Delegation of Authority <p>Audit</p> <ul style="list-style-type: none"> Year End Audit – Working Papers Year End Audit – Final Submission to Auditor 	<p>Governance</p> <ul style="list-style-type: none"> Enabling Legislation, Incorporation & By-laws Committee members’ records (includes non-council appointments) Professional Members & Working Groups Council Meeting Records Council meeting Records –In camera Policies & Procedures - Governance Position Statements Reports to Council Statutory, Standing & Ad Hoc Committees Standards of Practice <p>Elections</p>	<p>Advice</p> <ul style="list-style-type: none"> Practice Advice <p>Registration</p> <ul style="list-style-type: none"> Applications –In Progress Applications-Closed Applications-Refuse Applications-Clinic Name Applications-Health Profession Corporation <p>Registration-Membership Management</p> <p>Member File</p> <p>Qualifying Examination</p> <ul style="list-style-type: none"> Potential Candidate Files Candidate Files Qualifying Exams – Administration Qualifying Exams – Development Qualifying Exams- Appeals <p>Professional Conduct</p>

ADMINISTRATION	COMMUNICATION & STAKEHOLDER RELATIONS	EMPLOYEE MANAGEMENT	FINANCIAL MANAGEMENT	GOVERNANCE/LEGAL	MEMBER MANAGEMENT
			<p><u>Payroll Administration</u></p> <ul style="list-style-type: none"> • Time & Attendance Reporting • Payroll Processing • Payroll Remittances <p><u>Tax Management</u></p> <ul style="list-style-type: none"> • Tax Returns/Federal & Provincial – Final Filed <p><u>Procurement</u></p> <ul style="list-style-type: none"> • Supplier Contract Management 	<p><u>Management</u></p> <ul style="list-style-type: none"> • Elections <p><u>Legal</u></p> <ul style="list-style-type: none"> • Agreements/ Contract & Leases • Legal Advice & Opinions 	<ul style="list-style-type: none"> • Complaints • Inquiries • Conduct Concerns • Discipline Committee • Fitness to Practice • Reports • Registrar's Investigations • Unauthorized Practice • Professional Conduct Appeals <p><u>Quality Assurance</u></p> <ul style="list-style-type: none"> • Random Selection • QA Program Development • Assessment - Administration • Continuing Professional Development Compliance • Self Assessment Tool Compliance • Refresher & Remediation Courses

Classification and Retention Schedules

Administration

	Records relating to administrative function of departments and programs such as records relating to general office information such as, office administration records, internal and staff committee meetings, minutes, agendas, project management, templates and forms, library and reference materials and includes information technology activities.
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RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Administrative Office Records Records relating to daily or regular (routine) operational activities including business processes, annual recurring activities, general work plans, calendars where no other subject-specific record series already exists.	By topic or subject	All	CY + 3	Destroy	Internal	
External publications Records relating to the management of external publications such as library material used for reference purposes, fee guides, newspaper clippings. Also includes the management of office subscriptions, books, and digital publications purchased by staff or Departments/Programs. This includes subscriptions for professional newsletters, printed and electronic journals, business and news periodicals, and book orders.	By name of publication	All	S/O	Destroy	Internal	
Logs Records relating to keeping track of mail sent or received by the College including mail and	By date	All	CY + 3	Destroy	Internal	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
evidentiary logs.						
Meetings & Committees-Internal Records relating to staff meetings and committees of CDO staff that are not related to council or committees of council. Documents may include meeting agendas, terms of reference, membership list, minutes for such committees, etc FOR: Statutory/Standing & AD HOC Committees FOR: Council Meetings	By name of meeting	All	CY+3	Destroy	Internal	
Policies & Procedures-Administrative Records relating to the production and authorization of prescribed organization wide and departmental focused policies, procedures and business processes within CDO.	By function, then by subject. For example: <ul style="list-style-type: none"> • Qualifying Exams • Registration • QA • Operational 	Registrar	S/O +1	Destroy	Internal	
Project Management Records relating to staff projects and research activities such as research for various regulatory programs, policies, competency profiles, etc. Records may include project charter and scope, terms of reference, project plan, project timelines or schedules, feasibility studies, progress reports, case studies, cost information, correspondence, working notes, and final project report as examples.	By name of project	All	T/E + 6 years T/E = when project completed	Archival Selection before destruction	Internal	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Templates & Forms - Blank Records relating to CDO business where a blank master document provides a standard format for data collection and formatting, or provides a best practice format for document creation. Records may include employee and volunteer forms, vacation, lieu and personal days templates, house monthly timesheet templates and honoraria/expense forms to mention a few.	By function and then name of template Alphabetical by topic <i>Communications</i> <ul style="list-style-type: none"> PowerPoint template <i>Finance</i> <ul style="list-style-type: none"> Expenses Claim Form <i>Human Resources</i> <ul style="list-style-type: none"> Benefits claim forms <i>Registration</i> <ul style="list-style-type: none"> Certificate of Professional Conduct Application forms (Forms A, B, C, D, checklist; professional corporation; renewals) 	All	S/O	Destroy	Internal	
Information Technology						
Computer System Access & Controls Records relating to the security and confidentiality of CDO's online information resources located in the User Authentication System, Network Drives, and specific application/system configuration.	By name of system/Subject <ul style="list-style-type: none"> passwords 	Co-ordinator of Council and Corporate Services	S/O+3	Destroy	Confidential	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Includes information about computer security practices and tools. Documents may include, computer security records, security audit and passwords.						

Communications & Stakeholder Relations

	The function of managing communications at the College of Denturists of Ontario including media, public, and stakeholder relationships and event planning and logistics. Records include branding, media relations, and the coordination of print and electronic publications such as those on websites, video and social media forums.
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RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Branding Records relating to the planning, development and administration of the corporate identity. Records may relate to design elements, logos, wordmarks, letterhead design, branding and visual identity guidelines. Includes approved logo masters used to create corporate documents and signs and plain language resources.	Alphabetical by subject	Co-ordinator of Council and Corporate Services	S/O	Archival Selection before destruction	Public	
Contact Lists Listing of contacts and/or mailing lists of individuals who are employees or have dealings with CDO.	Alphabetical by name of organization Employees Media contact lists	All	S/O	Destroy	Internal	
Events Records relating to the logistics of events, meetings, training, orientations, etc. The records document administrative arrangements (e.g. logistics, planning, advertising). Records may include but are not limited to records, invitations, venue bookings, catering, sign-in sheets	<ul style="list-style-type: none"> Alphabetical by name of event type then coordination activity: Speaker 	All	T/E+2 T/E = Completion of the event	Archival Selection before destruction	Internal	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
<p>arrangements, accommodation and transport arrangements, participant registrations, and related background material. May also include correspondence with third-party vendors.</p> <p>Events include webinars, committee and member training, etc.</p>	<p>coordination</p> <ul style="list-style-type: none"> • Material preparation • Expenses tracking • Results • Dietary requests • Catering • Invitations • Facility & Room bookings 					
<p>Media Relations</p> <p>Records relating to the fostering of positive and ongoing relationships with news media, government and members and the promotion of the CDO and its role in fostering standards and positive community relations. Records may include background information such as key message development material and media response, media kits, correspondence, press releases, news clippings, briefing notes and media announcements.</p>	Alphabetical by subject	Co-ordinator of Council and Corporate Services	CY+6	Archival Selection before destruction	Public	
<p>Photos</p> <p>Photographs relating to CDO events, staff and stakeholders (i.e. iStock). Includes consent release forms.</p>	Alphabetical by subject	Co-ordinator of Council and Corporate Services	CY+6	Archival Selection before destruction	Public	
Presentations & Speeches	Alphabetical by Subject, then by Event	All	CY+6	Archival Selection	Public	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Records relating to presentations and speeches prepared and/or delivered by staff or Council and committee members to external parties at special events, conferences and other public events.	Name, then by Date			before destruction		
Published Program/Promotional Materials Records relating to the production of print or digital CDO publications including the development, design, and editing of books, pamphlets, articles, guides, newsletters, social media, E-blasts, posters, pins, business cards, calendars, Contact Update, and other publications, as well as revised versions.	By name of Promotional Material	Co-ordinator of Council and Corporate Services	S/O +1	Archival Selection	Public	Note: CDO should ensure that a master copy of printed publications is retained or converted to PDF/A.
Website/Social Media Content Management & Analytics Records relating to the management of the web and social media through source files and web analytics including the measurement, collection, analysis and reporting of Internet data for the purposes of understanding and optimizing Web usage and social media. Analytics may study the habits and behaviour of users, stakeholders, partners and trends. Records may also include approved material copy, registrar's review of copy, working copies and website updates	Alphabetical by type of topic	Co-ordinator of Council and Corporate Services	Superseded/ Obsolete +1	Archival Selection	Public	Note: CDO should ensure that a master copy of major changes either in content or design is retained for historic purposes.
Stakeholder Relations						
Government / Intergovernmental Relations & Regulatory Bodies Records relating to federal, provincial, municipal	By name of government body CIHI FHRCO (Federation of	All	CY+6	Destroy	Internal	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
government departments, commissions, boards, regulatory bodies, authorities and related agencies whose functions may impact on, or be involved with CDO's administration and operations. Subjects may include consultations on initiatives, government requested feedback on submissions, reports, etc, the exchange of information, routine notifications and inquiries and offers of service.	Health Regulatory College of Ontario) HPDB HPRAC OFC (Office of the Fairness Commissioner MOHLTC Regulatory Colleges <ul style="list-style-type: none"> College of Dental Technologists 					
Universities, Colleges & Organizations Records relating to the relationships and formal partnerships with universities, associations and other external organization whose functions may impact on, or are involved with CDO. Records may include agendas, minutes, presentations, mentorship programs, research projects, student placements, etc.	By name of University/College/ Organization Colleges <ul style="list-style-type: none"> George Brown Oxford Georgian Organizations <ul style="list-style-type: none"> Denturists Association of Ontario (DAO) Denturist Group of Ontario (DGO) Denturist Association of Canada (DAC) 	All	CY+6	Destroy	Internal	

Employee Management

	The function of managing the College of Denturists of Ontario's employees and their relationship with the organization. Activities included defining the organization through organization charts and job descriptions, recruitment, benefits administration, and employee training and skills development.
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RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Recruiting & Selecting						
Job Descriptions Records relating to identifying the positions within CDO and detailing job specifications, duties and responsibilities and performance expectation levels.	By name of position	Registrar	S/0 +1	Destroy when superseded or obsolete	Public	
Staff positions Records relating to staffing positions. Includes resumes, job applications, requisite approvals to begin the search, position descriptions, internal and external job postings/ advertisements, etc. May include interview formats and questions, rating and ranking materials, candidates' written consent to check references, reference check information, applications for employment and rejection letters where applicable.	By job title	Registrar	CY+1	Destroy	Confidential	PI Successful candidate information moves into employee file
Staff Management						
Accessibility for Ontarians with Disabilities Act	By date	All	CY+2	Destroy	Internal	ON-7

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Records include compliance letters, contract inquiries, correspondence, accessibility audits and employment standards.						
Employee Files Records relating to the work history of employees. Records may include performance appraisals, employee application, exit interview, certificates for the completion of training, and group insurance enrolment forms, Workplace Safety and Insurance Board (WSIB) information, return to work or employment accommodation plans, disciplinary letters, accident information, grievance and appeal information and return to work documents.	Alphabetically by employee last name	Registrar	T/E+ 3 T/E = termination of employment	Destroy	Confidential	PI ON-18, On-19, ON-20
Training & Skills Development						
Training and Development Courses Records relating to staff training and development for staff or program contractors, including the planning and funding of training, conferences and seminars, includes employee onboarding, etc.	Alphabetically by type of training and name of person ORAC workshop Quality Assessor Item Writing Materials workshop	All	CY + 2	Destroy	Internal	

Financial Management

	The function of managing the financial resources of College of Denturists of Ontario through the execution of financial transactions and accounting processes including the receipt, control, and expenditure of funds and the reporting and auditing of results.
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RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Accounting Administration						
Accounts payable Records relating to the processing of payables and payments made by CDO. Records may include cheque requisitions, purchase requisitions, purchase order and payment approvals, cheque copies, vendor, council, assessor and other invoices, credit card statements, travel expense claims, employee expenses, petty cash and contract instalment payments.	By fiscal year, then alphabetical by vendor name	Co-ordinator of Council and Corporate Services	FY+6	Destroy	Confidential	PI FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16
Accounts Receivable (Renewals) Records relating to the processing of receivables mainly those of registrants at annual renewal, professional corporation renewals, and certificates of professional conduct. Records may include invoices, a copy of the cheque received, batch deposit details and summaries, daily payment journals and reports and other backup information.	By fiscal year, then alphabetical by vendor name	Co-ordinator of Council and Corporate Services	FY+6	Destroy	Confidential	PI FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16
Banking Transactions & Investments Reconciliation Records relating to banking and account reconciliation such as the reconciliation of bank statements and investment accounts. Records may	By fiscal year, then banking institution/ account number	Co-ordinator of Council and Corporate Services	FY+6	Destroy	Internal	FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
include electronic funds/wire transfers, confirmations, stop payments, bank statements, cancelled cheques and bank reconciliations, Quick book deposit register and payment journal.						
GENERAL LEDGER Records relating to all financial accounts and statements summarizing year over year financial transactions. Records include all books of original and final entry summarizing year over year transactions. Also includes the chart of accounts.	By fiscal year	Co-ordinator of Council and Corporate Services	LOC+2	Destroy	Internal	FD-10
Month End Closing & Analysis Records relating to month end close. Records include month-end process checklist, statement of financial position, statement of operations, expense analysis, and accrued liability schedule and adjustments.	By fiscal year, then month	Co-ordinator of Council and Corporate Services	FY+6	Destroy	Internal	FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16
Financial Planning & Investments						
Budget Records relating to the creation of budgets for CDO cost centre. Records include the Budget performance (BP) and expense analysis by account (ED) reports, and budget analysis. Also includes budget change requests, budget worksheets, quarter over budgets & reports and the approved budget.	By fiscal year, then cost centre	Co-ordinator of Council and Corporate Services	FY +6	Destroy	Confidential	
Forecasting Records relating to checking CDO's cash positions and ensuring that the required liquidities are	By fiscal year	Co-ordinator of Council and Corporate	FY+2	Destroy	Internal	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
available to meet upcoming transactions. Records relating to tracking financial reserves, including investments, reconciliations and cash flows in order to monitor the existing cash balance including liquid cash reserves. Records include cash management daily reports, cash position forecasting and supporting documentation.		Services				
Financial Reporting						
Financial Statements – Audited Records relating to the final, audited year-end financial statements. Records include the year end audited financial statements and notes to the statements.	By fiscal year	Registrar	P	Permanent	Public	ON-5
Council & Executive reports Records relating to financial reporting to Executive and Council. Records include balance sheets, budgets, annual investment reports.	By fiscal year and then by type of document	Registrar	FY + 6	Destroy	Internal	FD-1, FD-2, FD-3, FD-12, ON-13, ON-16
Journal Entries Records relating to accounting information for business transactions. Entries are made in a journal and then posted to the ledger. May include completed journal voucher forms, all background documentation used to substantiate journal entries, journal entry detail reports, and year end journal entries.	By fiscal year	Co-ordinator of Council and Corporate Services	FY + 6	Destroy	Internal	FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16
Delegation of Authority Records relating to the reviewing, notification and acceptance of individuals to be awarded delegation responsibilities assigned by corporate policy.	BY DOCUMENT TYPE: <ul style="list-style-type: none"> Banking authorities 	Registrar	S/O+1 S/O= when delegation of authority is	Destroy	Internal	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Records related to sub-delegations and revocations.	<ul style="list-style-type: none"> • Powers of Attorney • Signing Authority 		changed			
Audit						
Year - end audit – working papers Records relating to all financial accounts and statements summarizing year over year financial transactions. Records include all books of original and final entry summarizing year over year transactions. Also includes the chart of accounts.	By fiscal year	Co-ordinator of Council and Corporate Services	FY+6	Destroy	Confidential	
Year - end audit – final submission to auditor Records relating to finalized CDO audit by the external auditor for the annual report.	By fiscal year	Registrar	FY+6	Destroy	Internal	FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16
Payroll Administration						
Time & Attendance Reporting Records relating to vacation/sick days taken by CDO staff. It may include attendance records timesheets, and schedules.	By year, then pay run date	Co-ordinator of Council and Corporate Services	CY+6	Destroy	Confidential	PI ON-24
Payroll Processing Records relating to the regular entry, posting and	By year, then alphabetically by document type and	Co-ordinator of Council and Corporate	CY+6	Destroy	Confidential	PI FD-1, FD-2, FD-3, FD-5,

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
reconciliation of employee payroll, committee members, professional members and working groups such as payroll audit reports, payroll stub confirmation, Records of Employment (ROE), TD1, T4, T4A, payroll transfers, timesheets, Canada Savings Bonds and relevant Statistics Canada reports. This includes the production of an employee record detailing deductions including family support (garnishments), pay and termination of pay at the end of employment. Includes the payroll register.	date	Services				FD-6, ON-13, ON-22
Payroll – Remittances Records relating to the annual summaries of year-end reporting to government (reconciliation for the year) such as to Canada Revenue Agency (CRA), Workers’ Compensation, Employee Health Tax.	By year	Co-ordinator of Council and Corporate Services	CY+6	Destroy	Confidential	FD-1, FD-2, FD-3, FD-5, FD-6, ON-16, ON-17
Tax Management						
Tax returns/federal & provincial - final filed Records relating to the preparation and submission of statutory income tax filings. Includes tax filings and returns, assessment notices, notice of objections, working papers, reconciliations and supporting schedules.	By fiscal year	Registrar	FY+6	Destroy	Internal	FD-1, FD-2, FD-3, FD-12, FD-16, ON-13, ON-16
Procurement						
Supplier Contract Management Records relating to the negotiation of contracts and the management of the engagement with bidders whether successful, unsuccessful, cancelled	By RFP (RFI, RFQ) number	Co-ordinator of Council and Corporate Services	T/E +6 T/E= contract completed or	Destroy	Confidential	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
<p>or abandoned. Records include RFPs, RFQs, RFIs responses, bid submission documents, evaluation matrices, business cases, Q&A's, purchase justification, draft contract correspondence, purchase order change requests and related documentation.</p> <p>For: Executed contract Agreements</p> <p>SEE: AGREEMENTS/CONTRACTS/LEASE-EXECUTED</p>			termination			

Governance/Legal

	Records relating to the ways in which CDO is governed and regulated to ensure accountability, transparency, and compliance with statutory requirements. Records include bylaws, statutory and sub-committee agendas and minutes, reports to council and legal records such as agreements and contracts and legal opinions and advice.
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RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Governance						
Enabling legislation & Incorporation & by-laws Records relating to approved by-laws and regulations set by council. Also includes the College's incorporation documentation	By name of by-law/regulation & number	Registrar	Permanent	Permanent	Public	ON-4
Committee Members' Records (includes non-council appointments) Records relating to information created, received, and used to document board members' records including applications, advertising vacancies, receiving nominations for board membership and facilitating appointments, instituting board member files containing profiles biographies, reference letters, conflict of interest, correspondence, board member mailings, attendance, honoraria, public appointment letters to MOHLTC, Thank you letters of appreciation, , etc. Also includes orientating new directors to their roles and responsibilities.	Alphabetical by Committee member name	Registrar	CY+3	Destroy	Confidential	PI FD-1, FD-2, FD-3, FD-5, FD-6, ON-13, ON-22
Professional Members & Working Groups Records relating to staffing other positions such as mentors, Peer Assessors, clinical exam evaluators,	By Group Name/then alphabetical by member name	Registrar	CY+3	Destroy	Confidential	PI FD-1, FD-2, FD-3, FD-5,

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Peer Circle facilitators, Peer/Practice assessors, etc. Includes resumes, job applications, requisite approvals to begin the search, position descriptions, tests, internal and external job postings/ advertisements, tests, etc. May include interview formats and questions, rating and ranking materials, candidates' written consent to check references, reference check information, applications for employment and rejection letters where applicable.						FD-6, ON-13, ON-22
Council Meeting Records Records relating to council meetings including teleconferences such as terms of reference, council structure and term dates, member listing and attendance, consultations such as advertising and conflict of interest, agenda, minutes, action lists & motions, attachments, council highlights, briefing notes, backgrounders, council packages and annual report and orientation packages. Also includes any Special General Meetings.	By date	Registrar	Permanent	Permanent	Internal	ON-5
Council Meeting Records In-Camera Records relating to minutes taken during a closed session.	By date	Registrar	Permanent	Permanent	Confidential	ON-5
Policies & Procedures - Governance Records relating to College wide governance and regulatory policies used to guide the decisions and actions of CDO. May include working drafts and background information.	By name of policy Governance process Executive Limitations Council-Registrar delegation policies Remuneration	Registrar	Archival	Archival	Internal	ON-4

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Position Statements Records relating to CDO ministry submissions and responses including stakeholder feedback to government and other health care professionals and the public in the form of submissions, briefs, discussion papers.	By topic	Registrar	AS	Archival Selection before destruction	Public	
Reports to Council Records relating to all reports to council such as Registrar's report, annual report, insurance audit, audit report, legal audit, security audit, monitoring reports for financial condition, evaluation reports, etc.	By name of committee Executive Registration Quality Assurance Inquiries, Complaints & Reports Discipline Fitness to Practice Patient Relations Examinations (Qualifying and Appeals)	Registrar	Archival	Archival	Internal Public for annual report, strategic plan, evaluation reports, President and Registrar's reports	ON-5
Statutory, Standing & Ad Hoc Committees Records relating to terms of reference, agenda, minutes of meetings, attachments, briefing notes, action lists, orientation packages, pre-meeting notes, teleconferences, attendance register, and orientation packages	By name of Committee or sub-committee then document type Discipline Executive Fitness to Practise Inquiries, Complaints & Reports Patient Relations	All	Permanent	Permanent	Internal PUBLIC – Agenda and minutes of statutory committees available upon request.	ON-5

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
	Quality Assurance Qualifying Examination Qualifying Examination Appeals Registration					
Standards of Practice Records relating to official CDO standards of practice, guides, guidelines and essential competencies. May include working drafts and background information.	By name	Registrar	Archival Selection	Archival = Standards of practice, guides, guidelines and essential competencies Archival Selection for background information	Public: Standards of practice, guides, guidelines and Essential Competencies Internal: Working drafts and background information	ON-4
Elections Management						
Elections Records relating to calls for non council nominations, slate of candidates, nomination letter, nomination forms, notice of elections, voting packages, biographies, ballot counts, and resumes of candidates, statements of intent, post-election letters , (congratulations & decline letters), acclamation letters, election results and complaints.	By Year and then By district #	Registrar	CY+4	Destroy	Internal	
Legal						
Agreements / Contracts/Leases-Executed	Agreement of Internal	Registrar	T/E+6	Destroy	Confidential	PI

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Records relating to agreements between CDO and its partners and stakeholders.	Trade Assessor contracts Confidentiality Agreements ICRC Investigators IT Licencing Vendor Agreements		T/E= when agreement terminated or cancelled			ON-1
Legal Advice & Opinions Records relating to opinions and advice provided by legal counsel to document the specific legal opinion or advice provided.	By topic Council Conduct Professional Corporations Registration	All	Permanent	Permanent	Confidential	

Member Management

	Programs are responsible for ensuring that Denturists provide dental services in a safe, professional and ethical manner from registering new members, to investigating complaints, and ensuring their continuing education including refresher and remediation courses. Records relate to the services provided by the College including renewal education sessions, examinations, assessments, registration, investigating complaints and disciplining members.
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RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
Advice						
Practice Advice Records relating to questions from members regarding a broad range of topics such as advertising, incorporation, education, employment, professional designation, patient records, registration, to name a few.	By topic	Manager, Registration, QA & Policy	CY+3	Destroy	Internal	
Registration						
Applications - In Progress Records relating to applications and supporting documentation for registration which includes copy of birth certificate, character affidavit, filing fee forms with photo, education credentials, transcripts, professional liability insurance, regulatory history form.	By status then surname, first name Applicants	Manager, Registration, QA & Policy	Permanent	Permanent	Confidential	PI ON-10
Applications - Closed Records relating to applications and supporting documentation for registration which includes copy of birth certificate, character affidavit, filing fee forms with photo, education credentials, transcripts, professional liability insurance, regulatory history form, WES reports received with	By status then surname, first name Potential Candidates Candidates Applicants	Manager, Registration, QA & Policy	CY + 6	Return to Applicant	Confidential	PI ON-10

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
no application, etc. NOTE: This retention period is for applicants who did not pursue registration or who submitted an incomplete application.						
Applications – Refused Records relating to applications and supporting documentation of applicants who were refused registration.	By surname, first name	Manager, Registration, QA & Policy	Permanent	Permanent	Confidential	PI ON-10
Applications - Clinic Name Records relating to applicants applying for a clinic name to be approved by the Executive Committee. Includes clinic name tracker.	By Clinic Name	Co-ordinator, Council & Corporate Services	Permanent	Permanent	Confidential	PI ON-10
Applications - Health Profession Corporations Records relating to completed application forms and relating documentation such as articles of incorporation, corporation profile, notice of change forms and renewal information. Includes COA Tracker.	By COA #	Co-ordinator, Council & Corporate Services	Resignation of member + 60 years	Destroy	Internal	PI ON-10
Registration - Membership Management						
Member Files Records relating to include general registration information, education records, obtain consent (dental equipment requests), clinical competency exam documentation, insurance policies, registrar	By registration #, surname, first name and status Active	Manager, Registration, QA & Policy	Permanent	Destroy	Confidential	PI ON-10

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
review and registration committee decision related to the application, decisions letters from any of the committees, HPARB appeals, case summary, undertakings and any correspondence related to Terms, Conditions and Limitations (TCL) also includes change of status reinstatements. Also includes records in IN1Touch	Resigned Suspended Deceased Revoked Expired					
Qualifying Examination						
Potential Candidate Files Records relating to requests for academic assessments including credential reports, transcripts, diplomas, course outlines, initial application, payment information, affidavits, file summaries and Registration Committee decisions and reasons.	By surname, first name	Manager, Registration, QA & Policy	Permanent	Permanent	Permanent	PI
Candidate Files Records relating to applications for writing exams which includes examination registration forms, application fee payment, performance reports, letters to candidates, result letters, and successful/unsuccessful candidates, etc.	By surname, first name	Coordinator, Examinations & Operations	Permanent	Permanent	Confidential	PI
Qualifying Exams - Administration Records relating to the administration of the examination including specific cases/questions for that administration. The examination schedule, QE assessor assignments; exam instructions, marking sheets and exam booklets specific to that	By date of exam/summer/winter	Coordinator, Examinations & Operations	CY+10	Destroy	Confidential	

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
administration; scanned candidate checklists.						
Qualifying Exams – Development Records relating to the development of exams and clinical exam materials such as OSCE case materials, MCQ materials, physical models, research, concerns with previous exams, etc.	By date of exam/summer/winter	Coordinator, Examinations & Operations	CY+10	Destroy	Internal	
Qualifying Exams – Appeals Records relating to appeals which include a written submission and payment fee for those who feel they were treated unfairly or if there were any other significant irregularities in the examination process.	By surname, first name	Coordinator, Examinations & Operations	Permanent	Permanent	Confidential	PI
Professional Conduct						
Complaints Records relating to complaints initiated against a Denturist such as the letter of complaint, acknowledgement letter informing Denturist of complaint, investigation materials, response from Denturist, May also include resolution of complaint including panel decisions and reasons Also includes undertakings, agreements to resign, mandatory reports and Specified Continuing Educational or Remediation Program (SCERP) and oral cautions.	By registration#, surname, first name Correspondence Record of Investigation Privilege	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-6
Inquiries Records relating to member capacity and	By registration #, surname, first name	Manager, Professional	Permanent	Permanent	Confidential	PI

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
competence inquiries	Correspondence Record of Investigation	Conduct				ON-6
Conduct Concerns Records relating to concerns expressed about a member's conduct where no complaint is filed. Intake is not completed and information does not establish reasonable and probable grounds for Registrar Investigation. Records relating to reports received from the public addressing issues such as advertising where a Denturist is involved. These matters are handled informally by the Registrar.	By registration #, surname, first name	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI
Discipline Committee Records relating to ICRC referrals to the Discipline Committee dealing with allegations of professional misconduct or incompetence for registrants. Also includes reinstatement hearing documentation for Certificates of Registration that have been revoked for conduct. Includes Hearing and Exhibits that are the result of a discipline hearing, such as Agreed Statements of Fact, Joint Submissions on Penalty, Written Pleas, Notices of Hearing and Affidavits of Service, and any other evidence tendered and accepted as an exhibit by the Discipline Committee in a hearing. Hearing documents include the Decision and Reasons, transcripts of the proceeding, as well as Orders of the committee.	By registration #, surname, first name Hearings/Exhibits Disclosures (investigation)	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-3, ON-6
Fitness to Practice Records relating to ICRC referrals to Fitness to Practice Committee concerning Denturists who	By registration #, surname, first name	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-6

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
may be suffering from a physical or mental incapacity.						
Reports Records related to registrar reports and others. Records could include investigator's report, anonymous reports (if there are reasonable and probable grounds for an investigation), self-declarations of criminal offences or unauthorized practice, mandatory reports from employers, and matters that come to the attention of the ICRC.	By registration #, surname, first name	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-6
Registrar's Investigations Records relating to Registrar's investigations when an investigator is appointed,	By registration #, surname, first name	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-6
Unauthorized Practice Records relating to non-registrants working as a Denturist, or using the College's protected titles or abbreviations, or holding themselves out as a denturist .Cease and desist letters are sent for those unauthorized to practise.	By surname, first name Correspondence Record of Investigation Privilege	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-6
Professional Conduct Appeals Records relating to HPARB appeals connected to complaints matters. Matters that have been appealed to the appellate courts (Divisional Court, Court of Appeal of Ontario and the Supreme Court of Canada). Records relating to discipline appeals and fitness to	By registration #, surname, first name	Manager, Professional Conduct	Permanent	Permanent	Confidential	PI ON-6

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
practice appeals (Divisional Court, Court of Appeal of Ontario and the Supreme Court of Canada). For Registration Appeals SEE: Registration-Member Records						
Quality Assurance						
Random Selection Records relating to the selection letter providing notice to participant informing them of the requirement to participant in a competency review assessment. FOR: Allegations to ICRC SEE: Reports	By registration #, surname, first name	Manager, Registration, QA & Policy	CY+2	Destroy	Confidential	QA records that may be disclosed— <i>i.e.</i> , if the member knowingly gave false information (see s. 83(2) of the Code) or if the QAC refers allegations to the ICRC (see s. 80.2(1)(4))—should be maintained permanently.
Quality Assurance (QA) Program Development Records relating to the development of the Quality Assurance program including environmental scans, drafts of content, updates to report templates, briefing notes.	By Program Component	Manager, Registration, QA & Policy	CY + 10	Destroy	Confidential	
Assessments - Administration Records relating to Quality Assurance program assessments containing assessor practice reports (ongoing, on hold) and peer reports, member submissions, clinic assessment lists, questionnaire results, and correspondence. Include remediation.	By registration #, surname, first name	Manager, Registration, QA & Policy	Permanent	Permanent	Confidential	PI
Continuing Professional Development	By Annual and/or Cycle, then by	Manager, Registration,	Permanent	Permanent	Confidential	PI

RECORD SERIES	FILING METHODOLOGY	ACCOUNTABILITY	TOTAL RETENTION	DISPOSITION	SECURITY CLASSIFICATION	CITATIONS/ COMMENTS
(CPD) Compliance Records related to monitoring and compliance of annual and cycle cpd requirements.	Registration #, surname, first name	QA and Policy				
Self-Assessment Tool (SAT) Compliance Records related to monitoring and compliance of self-assessment requirements	By Cycle, then by Registration #, surname, first name	Manager, Registration, QA and Policy	Permanent	Permanent	Confidential	PI
Refresher & Remediation Courses Records relating to remediation and refresher courses designed for those who require additional support for the purpose to correct or improve deficient skills in a specific subject area to help denturists graduates and practising denturists to meet the same standard as that prescribed qualification for entry to practice. Records include course submissions and approvals, course outline and descriptions, list of course facilitators with credentials.	By name of course	Manager, Registration, QA & Policy	CY+5	Destroy	Internal	

FEDERAL and ONTARIO Citation Table - December 2018

RECORDKEEPING REQUIREMENTS

The recordkeeping requirements documented here consist of the College of Denturists of Ontario's regulatory requirements as they relate to the Federal Government and the Province of Ontario. They have been organized by jurisdiction. For each of the regulatory recordkeeping requirement, the following information is provided:

- **Citation Number**
Consists of the unique citation number assigned to each citation. The citation number starts with a 2-digit alphabetical code identifying the jurisdiction and is followed by a hyphen and a sequential number (e.g. FD-1). This number is assigned sequentially.
 - FD – Federal
 - ON - Ontario
- **Citation**
Consists of the reference to the specific paragraph, clause, or section of the legislation, regulation or other source that contains the requirement.
- **Subject Matter**
Consists of the marginal note taken from the statutes or regulation for the section or paragraph the citation is from.
- **Retention / Limitation Requirements**
Consists of the precise text in the legislation, regulation or other source that specifies or implies the requirement.
- **Remarks**
Consists of notes and remarks pertaining to a specific Recordkeeping / Limitation Requirement.

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
FD-1	<i>Income Tax Act, R.S.C. 1985 (5th Supp.), c. 1, s. 230(4)</i>	Income Tax Records Retention	<p>Retention/Limitation:</p> <p>FY + 6 years (FY= Fiscal Year)</p> <p>4) Every person required by this section to keep records and books of account shall retain</p> <p>(a) the records and books of account referred to in this section in respect of which a period is prescribed, together with every account and voucher necessary to verify the information contained therein, for such period as is prescribed; and</p> <p>(b) all other records and books of account referred to in this section, together with every account and voucher necessary to verify the information contained therein, until the expiration of six years from the end of the last taxation year to which the records and books of account relate.</p> <p>(4.1) Every person required by this section to keep records who does so electronically shall retain them in an electronically readable format for the retention period referred to in subsection 230(4).</p> <p>(4.2) The Minister may, on such terms and conditions as are acceptable to the Minister, exempt a person or a class of persons from the requirement in subsection 230(4.1).</p>	
FD-2	<i>Income Tax Act, R.S.C. 1985 (5th Supp.), c. 1, s. 230(1), (2.1), (5)</i>	Tax Payment/Collections Records	<p>Retention/Limitation</p> <p>Filing date +6 years</p> <p>Where, in respect of any taxation year, a person referred to in subsection (1) has not filed a return with the Minister as and when required by section 150, that person shall retain every record and book of account that is required by this section to be kept and that relates to that taxation year, together with every account and voucher necessary to verify the information contained therein, until the expiration of six years from the day the return for that taxation year is filed.</p>	
FD-3	<i>Income Tax Act, R. S. C., 1985, c. 1 (5th)</i>	Taxpayer Records	Retention/Limitation:	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
	Supp.), s. 230; as am. S. C. 1994, c. 21, s. 105; as am. S. C. 1998, c. 19, s. 227		<p>Event + 6 years (Event = end of last taxation year to which records and books of account relate, or year return filed, as long as no other exceptions apply)</p> <p>230.(1) Every person carrying on business and every person who is required, by or pursuant to this Act, to pay or collect taxes or other amounts shall keep records and books of account (including an annual inventory kept in prescribed manner) at the person's place of business or residence in Canada or at such other place as may be designated by the Minister, in such form and containing such information as will enable the taxes payable under this Act or the taxes or other amounts that should have been deducted, withheld or collected to be determined.</p> <p>3) Where a person has failed to keep adequate records and books of account for the purposes of this Act, the Minister may require the person to keep such records and books of account as the Minister may specify and that person shall thereafter keep records and books of account as so required.</p> <p>(4) Every person required by this section to keep records and books of account shall retain</p> <p>(a) the records and books of account referred to in this section in respect of which a period is prescribed, together with every account and voucher necessary to verify the information contained therein, for such period as is prescribed; and</p> <p>(b) all other records and books of account referred to in this section, together with every account and voucher necessary to verify the information contained therein, until the expiration of six years from the end of the last taxation year to which the records and books of account relate.</p> <p>(4.1) Every person required by this section to keep records who does so electronically shall retain them in an electronically readable format for the retention period referred to in subsection 230.(4).</p> <p>(4.2) The Minister may, on such terms and conditions as are acceptable to the Minister, exempt a person or a class of persons from the requirement in subsection 230.(4.1).</p> <p>(5) Where, in respect of any taxation year, a person referred to in subsection 230.(1) has not filed a return with the Minister as and when required by section 150, that person shall retain every record and book of account that is required by this section to be kept and that relates to that taxation year, together with every account and voucher necessary to verify the information contained therein, until the expiration of six years from the day the return for that taxation year is filed.</p> <p>(6) Where a person required by this section to keep records and books of account serves a notice of objection or where that person is a party to an appeal to the Tax Court of Canada under this Act, that person shall retain every record, book of account, account and voucher necessary for dealing with the objection or appeal until, in the case of the serving of a notice of objection, the time provided by section 169 to appeal has elapsed or, in the case of an appeal, until the appeal is disposed</p>	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			<p>of and any further appeal in respect thereof is disposed of or the time for filing any such further appeal has expired.</p> <p>(7) Where the Minister is of the opinion that it is necessary for the administration of this Act, the Minister may, by registered letter or by a demand served personally, require any person required by this section to keep records and books of account to retain those records and books of account, together with every account and voucher necessary to verify the information contained therein, for such period as is specified in the letter or demand.</p> <p>(8) A person required by this section to keep records and books of account may dispose of the records and books of account referred to in this section, together with every account and voucher necessary to verify the information contained therein, before the expiration of the period in respect of which those records and books of account are required to be kept if written permission for their disposal is given by the Minister.</p>	
FD-4	<i>Employment Insurance Regulations, under the Employment Insurance Act, SOR/96-332, ss. 19.(2),(3), (5), (6), 55.1</i>	Record of Employment	<p>Retention/Limitation:</p> <p>CY +6 years (CY = Current year)</p> <p>19.(2) Every employer shall complete a record of employment, on a form supplied by the Commission, in respect of a person employed by the employer in insurable employment who has an interruption of earnings.</p> <p>(3) Subject to subsection (4), copies of the record of employment completed pursuant to subsection (2) shall be distributed by the employer in the following manner:</p> <p>(a) the employee's copy shall be delivered to the insured person not later than five days after the later of</p> <p>(i) the first day of the interruption of earnings, and</p> <p>(ii) the day on which the employer becomes aware of the interruption of earnings;</p> <p>(b) the Commission's copy shall be sent to the Commission within the time limit set out in paragraph (a); and</p> <p>(c) the employer's copy shall be kept and retained as a part of the employer's records and books of account in accordance with s. 87.(3) of the Act.</p>	
FD-5	<i>Employment Insurance Act, S.C. 1996, c. 23, s. 87(3)</i>	Employment Insurance Requirements Corporate books of account	<p>Retention/Limitation</p> <p>CY +6 years</p> <p>The employer shall retain the records and books of account and every account and voucher necessary to verify the information contained in them for six years after the year for which they are kept, or until written permission for their prior disposal is given by the Minister.</p>	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
FD-6	<i>Employment Insurance Act, S.C. 1996, c. 23, s. 87, as am., S.C. 1998, c. 19, s. 267</i>	Records and books of account	Retention/Limitation CY+6 years 87.(3) The employer shall retain the records and books of account and every account and voucher necessary to verify the information contained in them for six years after the year for which they are kept, or until written permission for their prior disposal is given by the Minister. (4) If the employer or one of their employees is subject to a ruling under section 90 or has made an appeal to the Minister under section 91, the employer shall retain every record, book of account, account and voucher necessary for dealing with the ruling or the appeal until the ruling is made or the appeal is disposed of and any further appeal is disposed of or the time for filing a further appeal has expired.	
FD-7	<i>Employment Insurance Act, S.C. 1996, c. 23, s. 102(4), as am., S.C. 1999, c. 17, s. 135(e)</i>	Complaint Limitations	Retention/Limitation Five years after the subject-matter of the information or complaint arose.	
FD-8	<i>Intentionally left blank</i>			
FD-9	<i>Intentionally left blank</i>			
FD-10	<i>Revenue Canada, Information Circular 78-10R2, as am., Information Circular 78-10R2SR paragraphs 16-20, February 10, 1995. Updated IC78-10R3, October 5, 1998. Revenue Canada, Information Circular 78-10R3, October 5, 1998</i> SML Comment: The citation is as follows: <i>Income Tax Regulations, C.R.C., c. 945, s. 5800(1)(a)-(b), under the Income Tax Act, RSC 1985, c 1 (5th Supp)</i>	Limitation Period for Keeping Records	Retention/Limitation: 2 years after the business ceased 5800 (1) For the purposes of paragraph 230(4)(a) of the Act, the required retention periods for records and books of account of a person are prescribed as follows: (a) in respect of (i) any record of the minutes of meetings of the directors of a corporation, (ii) any record of the minutes of meetings of the shareholders of a corporation, (iii) any record of a corporation containing details with respect to the ownership of the shares of the capital stock of the corporation and any transfers thereof, (iv) the general ledger or other book of final entry containing the summaries of the year-to-year transactions of a corporation, and (v) any special contracts or agreements necessary to an understanding of the entries in the general ledger or other book of final entry referred to in subparagraph (iv), the period ending on the day that is two years after the day that the corporation is dissolved; (b) in respect of all records and books of account that are not described in paragraph (a) of a corporation that is dissolved and in respect of the vouchers and	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			accounts necessary to verify the information in such records and books of account, the period ending on the day that is two years after the day that the corporation is dissolved;	
FD-11	<i>Intentionally left blank</i>			
FD-12	<i>Canada Pension Plan, R. S. C. 1985, c. C-8, s. 24</i>	Canada Pension Plan Records	Retention/Limitation Event + 6 years Event + 6 years (Event = end of year for which records and books of account are kept or written permission for their prior disposal is given by Minister, or end of appeal period.)	
FD-13	<i>Canada Pension Plan, R. S. C. 1985, c. C-8, s. 90.(2); as am. S. C. 1997, c. 40, s. 86</i>	Canada Pension Plan proceedings limitation period	Retention/Limitation Event + 5 years (Event = Minister becomes aware of subject-matter of proceedings)	
FD-15	<i>Intentionally left blank</i>			
FD-16	<i>Excise Tax Act, R. S. C. 1985, c. E-15, ss. 286.(1) to (4),(6); as am. S. C. 1990, c. 45, s. 12; as am. S. C. 1998, c. 19, s. 282</i>	GST/HST Accounting Records	Retention/Limitation: Event + 6 years (Event = end of year to which records relate unless appeal or other matter outstanding, unless Minister provides written permission for shorter retention)	SML Comment: Does not apply to CDO (excise taxes are not charged on CDO's services).
FD-17	<i>Excise Tax Act, R. S. C. 1985, c. E-15, s. 323.(5); as am. S. C. 1990, c. 45, s. 12</i>	GST Assessments — Limitation Period	Retention/Limitation: Event + 2 years (Event = person last ceased to be a director) Description: 323.(5) An assessment under subsection (4) of any amount payable by a person who is a director of a c	SML Comment: Does not apply to CDO (excise taxes are not charged on CDO's services).
ON-1	<i>Limitations Act, 2002, S.O. 2002, c.24, s.4</i>	Basic Limitation Period for keeping records pertaining to agreements, contracts, licences	Retention/Limitation T+2 years (T= after termination or closure) Unless this Act provides otherwise, a proceeding shall not be commenced in respect of a claim after the second anniversary of the day on which the claim was discovered. 2002, c. 24, Sched. B, s. 4.	Agreements, Contracts, Licences granted, denied or revoked up to December 31, 2003 retention is T +6 years (termination of agreement, contract, Licence) Agreements, Contracts,

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
				Licences granted, denied or revoked after Jan.1, 2003 retention is T+2 years (termination of agreement, contract, Licence) <i>Retention changed from T+6 to T+2 as per Limitations Act.</i>
ON-2	<i>Limitations Act, 2002 S.O. c. 24 s. B, s. 15 (2)</i>	Ultimate Limitation Period	Retention/Limitation T+15 years (after the cause of action arose) No proceeding shall be commenced in respect of any claim after the 15th anniversary of the day on which the act or omission on which the claim is based took place.	
ON-3	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2: Health Professions Procedural Code, s. 5</i>	Discipline Committee Evidence	Retention/Limitation: Event = Shall return to person who produced them, on request, within reasonable time after matter finally determined Description: 55. The Discipline Committee shall release documents and things put into evidence at a hearing to the person who produced them, on request, within a reasonable time after the matter in issue has been finally determined.	
ON-4	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2: Health Professions Procedural Code, s. 94(3); ss. 94(3), (3.1); as am. S.O. 2007, c. 10, Sched. M, s. 73</i>	Council By-laws	Retention/Limitation: Keep to make available for inspection on request Description: 94.(3) A copy of the by-laws and standards of practice made by the Council, and any documents that are referred to in the by-laws and regulations made by the Council shall be given to the Minister and to each member and shall be made available to the public during normal business hours in the office of the College. (3.1) Any person is entitled to a copy of any by-law, standard of practice or other document mentioned in subsection (3) on the payment of a reasonable fee, if required, to the Registrar.	
ON-5	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, s. 6; as am. S.O. 1998, c. 18, Sched. G, s. 2; as am. S.O. 2007, c. 10, Sched. M, s. 2; Schedule 2:</i>	College and the Advisory Councils and Committees — Annual Reports and Financial Statements	Retention/Limitation: Not specified "shall report" Description: 6.(1) Each College and the Advisory Council shall report annually to the Minister on its activities and financial affairs. (2) Section repealed: S.O. 2007, c. 10, Sched. M, s. 2(1). (3) Each College's annual report shall include an audited financial statement.	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
	<i>Health Professions Procedural Code, s. 11; as am. S.O. 2007, c. 10, Sched. M, s. 22</i>		(4) The Minister may specify the content and form of the annual reports submitted by the College and the Advisory Council and, where the Minister has done so, the annual reports shall contain that content and be in that form. (5) The Minister may, in every year, publish information from the annual reports of the Colleges. (6) Information from the annual reports published by the Minister shall not include any personal information.	
ON-6	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2: Health Professions Procedural Code, s. 26(2)</i>	Prior Complaints	Description: (2) A panel of the Inquiries, Complaints and Reports Committee shall, when investigating a complaint or considering a report currently before it, consider all of its available prior decisions involving the member, including decisions made when that committee was known as the Complaints Committee, and all available prior decisions involving the member of the Discipline Committee, the Fitness to Practise Committee and the Executive Committee, unless the decision was to take no further action under subsection (5). 2007, c. 10, Sched. M, s. 30.	
ON-7	<i>Accessibility for Ontarians with Disabilities Act, 2005, S. O. 2005, c. 11, ss. 14.(1) to (4), 17</i>	Persons or Organizations to whom Accessibility Standard Applies — Accessibility Reports	Retention/Limitation: Keep to make available to the public on request Description: 14.(1) A person or organization to whom an accessibility standard applies shall file an accessibility report with a director annually or at such other times as the director may specify. (2) A person or organization shall make an accessibility report filed under subsection (1) available to the public. (3) An accessibility report shall be in the form approved by the Minister and the Minister may require that the report or a part of the report be provided electronically in a format approved by the Minister. (4) An accessibility report shall contain such information as may be prescribed.	
ON-8	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, ss. 114, 81.(10)</i>	Orders to Pay Wages, Fees or Compensation and Notices of Contravention — Limitation Period	Retention/Limitation: 2 years 114 (1) An employment standards officer shall not issue an order to pay wages, fees or compensation or a notice of contravention with respect to a contravention of this Act concerning an employee, (a) if the employee filed a complaint about the contravention, more than two years after the complaint was filed; (b) if the employee did not file a complaint but another employee of the same employer did file a complaint, more than two years after the other employee filed his or her complaint if the officer discovered the contravention with respect to the employee while investigating the complaint; or (c) if the employee did not file a complaint and clause (b) does not apply, more than two years after an employment standards officer commenced an inspection with	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			respect to the employee's employer for the purpose of determining whether a contravention occurred. 81 (10) A limitation period set out in section 114 prevails over a limitation period in any other Act, unless the other Act states that it is to prevail over this Act.	
ON-9	<i>Intentionally left blank</i>			
ON-10	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2: Health Professions Procedural Code, s. 16; s. 22.3; as am. S.O. 2009, c. 24, s. 33(4)</i>	Registration/Application Information / Documents	Retention/Limitation: Keep to make available on request Description: 16.(1) The Registrar shall give an applicant for registration, at his or her request, all the information and a copy of each document the College has that is relevant to the application. (2) The Registrar may refuse to give an applicant anything that may, in the Registrar's opinion, jeopardize the safety of any person. 22.3 The College shall provide information on its website with respect to the requirements for registration, the procedures for applying for registration and the amount of time that the registration process usually takes.	
ON-11	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2: Health Professions Procedural Code, s. 22.9; as am. S.O. 2006, c. 31, s. 35</i>	College — Fair Registration Practices Reports	Retention/Limitation: Keep to make available on request Description: 22.9(1) The College shall file its fair registration practices reports with the Fairness Commissioner by the dates specified by the Fairness Commissioner. (2) The College shall make reports filed under subsection (1) available to the public.	
ON-12	<i>Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2: Health Professions Procedural Code, s. 48(1)(a)</i>	Oral Evidence Records	Retention/Limitation: Not specified "shall ensure recorded" Description: 48.(1) The panel holding a hearing shall ensure that, (a) the oral evidence is recorded;	
ON-13	<i>Income Tax Act, R.S.O. 1990, c. I.2, s. 39, as am., S.O. 1999, c. 9, s. 129</i>	Income Tax accounting records	Retention/Limitation: No retention specified 39.(1) Every person carrying on business in Ontario and every person who is required, by or pursuant to this Act, to pay or collect taxes or other amounts shall keep records and books of account (including an annual inventory kept in prescribed manner) at the person's place of business or residence in Ontario or at such other place as is designated by the Provincial Minister, in such form and containing such information as will enable the taxes payable under this Act or the taxes or other	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			amounts that should have been deducted, withheld or collected to be determined. (2) Subsections 230(2.1), (3), (4), (4.1), (4.2), (5), (6), (7) and (8) of the Federal Act apply for the purposes of this Act and, in the application thereof, any reference to subsection 230(1) of the Federal Act shall be read as a reference to subsection (1).	
ON-14	<i>Income Tax Act</i> , R.S.O. 1990, c. I.2, s. 48(3)	Income Tax Offences Limitations	Retention/Limitation: 48.(3) An information or complaint under the Provincial Offences Act, in respect of an offence under this Act may be laid or made on or before the day that is eight years after the day on which the subject-matter of the information or complaint arose.	
ON-15	<i>Employer Health Tax Act</i> , R.S.O. 1990, c. E.11, s. 37	Employer Health Tax Offences Limitations	Retention/Limitation: 37. Proceedings for an offence under this Act or the regulations shall not be commenced after six years after the date on which the offence was, or is alleged to have been, committed.	
ON-16	<i>Employer Health Tax Act</i> , R.S.O. 1990, c. E.11, s. 12, as am., S.O. 1994, c. 8, s. 13	Employer Health Tax Accounting Records	Retention/Limitation: No retention specified 12.(4) Every person required by this section to keep records and books of account shall, until permission for their disposal is given by the Minister, retain each such record and book of account and every primary source document required to support and verify the entries and information in the records and books of account.	
ON-17	<i>Employer Health Tax Act</i> , R.S.O. 1990, c. E.11, s. 6(1)(b), as am., S.O. 1994, c. 8, s. 6(1); S.O. 2001, c. 23, s. 75	Employer Health Tax Refund Limitation	Retention/Limitation: 6.(1) If the return required to be delivered by a taxpayer under this Act is delivered within four years from the day the return is required to be delivered under section 5, (b) the Minister shall refund the amount the Minister determines under subsection 8(1) to be an over-payment made on account of the tax payable under this Act for the year if the taxpayer applies in writing to the Minister for the refund within four years after the day on which the return was required to be delivered under section 5.	
ON-18	<i>Employment Standards Act</i> , 2000, S.O. 2000, c. 41, s. 15(1), par. 1	Employee Records	Retention/Limitation: T +3 years after employee ceased to be employed 15.(5) The employer shall retain or arrange for some other person to retain the records of the Information required under this section for the following periods: 1. For information referred to in paragraph 1 or 3 of subsection (1), three years after the employee ceased to be employed by the employer.	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
ON-19	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, s. 96, as am. S.O. 2001, c. 9, s. 1(18)</i>	Complaints Limitations	Retention/Limitation: two years before the day on which the complaint was filed 96.(3) A complaint regarding a contravention that occurred more than two years before the day on which the complaint was filed shall be deemed not to have been filed.	
ON-20	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, s. 15(1), par. 3</i>	Employment Records	Retention/Limitation: T +3 years after employee ceased to be employed 15.(5) The employer shall retain or arrange for some other person to retain the records of the information required under this section for the following periods: 1. For information referred to in paragraph 1 or 3 of subsection (1), three years after the employee ceased to be employed by the employer.	
ON-21	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, s. 15(1), par. 4</i>	Employee Work Hours	Retention/Limitation: CY +3 years 15.(5) The employer shall retain or arrange for some other person to retain the records of the information required under this section for the following periods: 3. For information referred to in paragraph 4 of subsection (1) or in subsection (3), three years after the day or week to which the information relates.	
ON-22	<i>Employment Standards Act, 2000, S. O. 2000, c. 41, ss. 12.(1),(3), 12.1, 15.1 par. 5, 15.5 par. 4, 16, 23.2, 23.2, 36.(3)(b)</i>	Wage Statements & Termination of pay	Retention/Limitation: Retention/Limitation: Event + 3 years (Event = information given to employee) 12.(1) On or before an employee's pay day, the employer shall give to the employee a written statement setting out, (a) the pay period for which the wages are being paid; (b) the wage rate, if there is one; (c) the gross amount of wages and, unless the information is provided to the employee in some other manner, how that amount was calculated; (d) [Repealed S. O. 2002, c. 18, Schedule J, s. 3.(3).]	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			<p>(e) the amount and purpose of each deduction from wages; (f) any amount with respect to room or board that is deemed to have been paid to the employee under subsection 23.(2); and (g) the net amount of wages being paid to the employee. (2) [Repealed S. O. 2002, c. 18, Schedule J, s. 3.(4).] (3) The statement may be provided to the employee by electronic mail rather than in writing if the employee has access to a means of making a paper copy of the statement.</p> <p>.....</p> <p>12.1 On or before the day on which the employer is required to pay wages under s. 11.(5), the employer shall provide the employee with a written statement setting out, (a) the gross amount of any termination pay or severance pay being paid to the employee; (b) the gross amount of any vacation pay being paid to the employee; (c) unless the information is provided to the employee in some other manner, how the amounts referred to in clauses (a) and (b) were calculated; (d) the pay period for which any wages other than wages described in clauses (a) or (b) are being paid; (e) the wage rate, if there is one; (f) the gross amount of any wages referred to in clause (d) and, unless the information is provided to the employee in some other manner, how that amount was calculated; (g) the amount and purpose of each deduction from wages; (h) any amount with respect to room or board that is deemed to have been paid to the employee under subsection 23.(2); and (i) the net amount of wages being paid to the employee.</p> <p>.....</p> <p>15.(1) An employer shall record the following information with respect to each employee, including an employee who is a home-worker: . . . 5. The information contained in each written statement given to the employee under subsection 12.(1), section 12.1 and clause 36.(3)(b).</p> <p>.....</p> <p>15.(5) The employer shall retain or arrange for some other person to retain the records of the information required under this section for the following periods: . . . 4. For information referred to in paragraph 5 of subsection (1), three years after the information was given to the employee.</p> <p>.....</p>	
ON-23	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, s. 15(7)</i>	Leaves	<p>Retention/Limitation:</p> <p>T+3years (T = leave expired)</p>	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			<p>15 (7) An employer shall retain or arrange for some other person to retain all notices, certificates, correspondence and other documents given to or produced by the employer that relate to an employee taking pregnancy leave, parental leave, family medical leave, organ donor leave, family caregiver leave, critical illness leave, child death leave, crime-related child disappearance leave, domestic or sexual violence leave, personal emergency leave, emergency leave during a declared emergency or reservist leave for three years after the day on which the leave expired.</p> <p>Note: On January 1, 2019, <u>subsection 15 (7)</u> of the Act is amended by striking out "personal emergency leave" and substituting "sick leave, family responsibility leave, bereavement leave".</p>	
ON-24	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, ss. 15.1(1), (4), (5); as am. S.O. 2002, c. 18, Sched. J, s. 3(9)</i>	Vacation Records	<p>Retention/Limitation:</p> <p>5 years</p> <p>15.1 (1) An employer shall record information concerning an employee's entitlement to vacation time and vacation pay in accordance with this section. 2002, c. 18, Sched. J, s. 3 (9).</p> <p>Content of record</p> <p>(2) The employer shall record the following information:</p> <ol style="list-style-type: none"> 1. The amount of vacation time, if any, that the employee had earned since the start of employment but had not taken before the start of the vacation entitlement year. 2. The amount of vacation time that the employee earned during the vacation entitlement year. 3. The amount of vacation time, if any, taken by the employee during the vacation entitlement year. 4. The amount of vacation time, if any, that the employee had earned since the start of employment but had not taken as of the end of the vacation entitlement year. <ol style="list-style-type: none"> 4.1 The amount of vacation pay that the employee earned during the vacation entitlement year and how that amount was calculated. 5. The amount of vacation pay paid to the employee during the vacation entitlement year. 6. The amount of wages on which the vacation pay referred to in paragraph 5 was calculated and the period of time to which those wages relate. 2002, c. 18, Sched. J, s. 3 (9); 2017, c. 22, Sched. 1, s. 9 (1). <p>(3) If the employer establishes an alternative vacation entitlement year for an employee, the employer shall record the following information for the stub period:</p> <ol style="list-style-type: none"> 1. The amount of vacation time that the employee earned during the stub period. 2. The amount of vacation time, if any, that the employee took during the stub 	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			<p>period.</p> <p>3. The amount of vacation time, if any, earned but not taken by the employee during the stub period.</p> <p>3.1 The amount of vacation pay that the employee earned during the stub period and how that amount was calculated.</p> <p>4. The amount of vacation pay paid to the employee during the stub period.</p> <p>5. The amount of wages on which the vacation pay referred to in paragraph 4 was calculated and the period of time to which those wages relate. 2002, c. 18, Sched. J, s. 3 (9); 2017, c. 22, Sched. 1, s. 9 (2).</p> <p>...</p> <p>(5) The employer shall retain or arrange for some other person to retain each record required under this section for five years after it was made. 2002, c. 18, Sched. J, s. 3 (9); 2017, c. 22, Sched. 1, s. 9 (3).</p>	
ON-25	<i>Intentionally left blank</i>			
ON-26	<i>Intentionally left blank</i>			
ON-27	<i>Intentionally left blank</i>			
ON-28	<i>Intentionally left blank</i>			
ON-29	<i>Employment Standards Act, 2000, S.O. 2000, c. 41, ss. 139, 81.(10)</i>	Prosecution — Limitation Period	<p>Retention/Limitation: 2 years</p> <p>139. No prosecution shall be commenced under this Act more than two years after the date on which the offence was committed or alleged to have been committed.</p>	
ON-30	<i>Occupational Health and Safety Act, R.S.O. 1990, c. O.1, s. 69</i>	Health & Occupational Safety Prosecutions – Limitations	<p>Retention/Limitation: 69. No prosecution under this Act shall be instituted more than one year after the last act or default upon which the prosecution is based occurred.</p>	
ON-31	<i>Occupational Health and Safety Act, R. S. O. 1990, c. O.1, ss. 32.0.1.(1),(2), 32.0.5.(2) to (4), 32.0.7, 55.1; as en. S. O. 2009, c. 23, s. 3</i>	Employers — Workplace Violence / Harassment Policies and Information	<p>Retention/Limitation: Not specified "shall prepare/keep to provide on request"</p> <p>Description: Note: On June 15, 2010, the Act is amended by adding the following Part: 32.0.1.(1) An employer shall, (a) prepare a policy with respect to workplace violence; (b) prepare a policy with respect to workplace harassment; and (c) review the policies as often as is necessary, but at least annually. (2) The policies shall be in written form and shall be posted at a conspicuous place in the workplace. 32.0.5.(2) An employer shall provide a worker with,</p>	

CDO RECORDKEEPING REQUIREMENTS – CITATION TABLE				
Citation Number	Citation	Subject Matter	Recordkeeping / Limitation Requirements	Remarks
			<p>(a) information and instruction that is appropriate for the worker on the contents of the policy and program with respect to workplace violence; and</p> <p>(b) any other prescribed information or instruction.</p> <p>(3) An employer's duty to provide information to a worker under clause 25.(2)(a) and a supervisor's duty to advise a worker under clause 27.(2)(a) include the duty to provide information, including personal information, related to a risk of workplace violence from a person with a history of violent behaviour if,</p> <p>(a) the worker can be expected to encounter that person in the course of his or her work; and</p> <p>(b) the risk of workplace violence is likely to expose the worker to physical injury.</p> <p>(4) No employer or supervisor shall disclose more personal information in the circumstances described in subsection (3) than is reasonably necessary to protect the worker from physical injury.</p> <p>.....</p> <p>32.0.7 An employer shall provide a worker with,</p> <p>(a) information and instruction that is appropriate for the worker on the contents of the policy and program with respect to workplace harassment; and</p> <p>(b) any other prescribed information.</p> <p>.....</p> <p>Note: On June 15, 2010, the Act is amended by adding the following sections:</p> <p>55.1 In the case of a workplace at which the number of employees regularly employed is five or fewer, an inspector may in writing order that the policies with respect to workplace violence and workplace harassment required under section 32.0.1 be in written form and posted at a conspicuous place in the workplace.</p>	



BRIEFING NOTE

To: **COUNCIL**

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

Date: **December 5, 2018**

Subject: **Waiving Fee Increase – By-law Article 31.05**

Background

Article 31.05 of the College By-laws states:

“31.05 Fee Increases

Each year each fee described in Schedule 7 shall be increased by the percentage increase in the Consumer Price Index for goods and services in Canada as published by Statistics Canada or any successor organization unless Council decides to waive a fee increase for that year”.

This fee increase has not been applied from 2014-2019. As the increase is scheduled to occur annually, a decision regarding the fee increase for the 2019-2020 fiscal year is requested of Council.

Options

In consideration of the financial position of the College presented in the financial statements that were adopted at the September 14, 2018 meeting (included in the draft Annual Report included in the December 14, 2018 agenda), Council may elect to:

1. Waive the fee increase prescribed by By-law Article 31.05 for the 2019-2020 fiscal year
2. Implement the fee increase prescribed by By-law Article 31.05 for the 2019-2020 fiscal year.
3. Request further information before deciding.
4. Other



COLLEGE OF
DENTURISTS
OF ONTARIO

2017-2018

ANNUAL REPORT

TARGETED

targeted

PUBLIC INTEREST

GOVERNANCE

agile

**PROFESSIONALISM
COMPETENCE**

proportionate

accountable

consistent

ENGAGED

TRANSPARENT



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ABOUT THE COLLEGE

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

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

The CDO does this by:

Setting the requirements that must be met for an individual to practise Denturism in Ontario.

Issuing Certificates of Registration to Denturists who meet these professional requirements. Once an individual has obtained a Certificate of Registration they may practise Denturism.

Establishing comprehensive Standards of Practice and policies that every Registered Denturist must follow.

Developing and administering a Quality Assurance Program that helps Registered Denturists stay current and develop their knowledge and skills throughout their careers.

Giving the public a way to raise issues and hold Registered Denturists accountable for their conduct and practice.

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



M E S S A G E F R O M T H E P R E S I D E N T



Dr. Ivan McFarlane

As President of the College Council, it is my privilege to work with all members of Council as we undertake to accomplish the College's mission – to regulate the profession of Denturism in the public interest.

Each Council member has discharged their important role in ensuring that the public has unfettered access to safe, competent, and ethical professional care and service, while simultaneously promoting the collaborative measures that assist Registered Denturists in practising in a safe, competent and ethical manner. These measures also assist Registered Denturists in maintaining their professional competence throughout the course of their career.

My first duty is to acknowledge the work of retiring Council members who have served the Council and College so well over the past year; to thank Council for electing me to this important position of President; and, to welcome those professionals newly elected to Council, and the public members appointed by the Lieutenant Governor in Council. I have benefited from working with, and learning from, all of you in the past year.

This past year saw Council very active and engaged. All Committees worked hard and assiduously to deal with the spate of legislative changes to the RHPA and Ministerial directives.

What follows is a list of our achievements this past year.

1. Patient Protection

The Protecting Patients Act, 2017 (including an amendment to the RPHA, 1991) strengthened the zero-tolerance policy on patient sexual abuse, increased the support of victims of sexual abuse by regulated health professionals, and improved regulatory oversight and accountability of health profession regulatory colleges.

2. Patient Privacy

The Personal Health Information Protection Act (PHIPA) 2004 was amended to increase patient privacy and improve accountability and transparency in the health care system.

3. Strengthening Oversight and Safeguarding the Quality of Care

The Strengthening Quality and Accountability for Patients Act, 2017 introduced key changes to legislation dealing with long-term care facilities and pharmaceutical companies.

In addition to these measures, your Council approved Standards of Practice on Informed Consent, Confidentiality & Privacy, Advertising, and a policy on Quality Assurance Program requirements for Denturists.

Council also approved and oversaw the development of three major Program Initiatives:

Peer Circles: This element of the Quality Assurance Program was developed to provide Registered Denturists with a rewarding opportunity to collaborate in groups as they discussed challenging practice issues. The Peer Circle initiative also fosters the development of enhanced problem-solving skills. Development of this initiative included case writing and facilitator training;

Self Assessment Tool: This is another element of the Quality Assurance Program that is under development. The self-assessment tool is designed to assist Registered Denturists in identifying those areas of their practice that may benefit from further education, training or review. This past year saw the development of content and an online platform for this tool;

Jurisprudence Program: This program was developed with a view to providing Denturists with an opportunity to gain a deeper understanding of the requirements to practice as a regulated health professional. The Jurisprudence program provides a thorough review of the legislation, regulations and standards that establish the regulatory framework for the practice of Denturism in Ontario.

I would like to offer very sincere and special acknowledgements to the members of the College who volunteered their time and talent to assist the College and Council in its Committee work. Much of the success of the College is due to the commitment of members of the profession to assisting the College with its work. This success is also attributable to the dedication of the Registrar & CEO and staff, including the College's legal counsel. Their work has been invaluable as the College executes its mission to regulate and govern the profession of Denturism in the public interest.

In 2017, the College Council adopted a Strategy Map for 2017-2020. This map charts the course for the College's efforts over the next three years. It is an ambitious plan and an exciting time as the College moves forward with this work of promoting regulatory excellence and leading our members to provide exemplary Denturism care to the people of Ontario.

Respectfully submitted by:





STRATEGY MAP SUMMARY

On June 23, 2017, Council adopted the College's Strategy Map 2017 – 2020. The 2017 – 2020 Strategy Map is the product of the Council's Strategic Planning day on December 10, 2016. This Strategy Map identifies the College's priorities and charts the course of its work over the period leading up to 2020.

In this Strategy Map, Council identified three priority areas:

Priority 1: Enhanced Communication and Stakeholder Engagement

Success in the work of the College can only occur when the College engages in effective, open communication with its stakeholders. Under this Priority, Council seeks to engage in promoting public awareness of the College's role in the safe delivery of Denturism care, modernize its member communications strategy, promote transparency of the College operations, and foster inter-professional collaboration.

Priority 2: Excellence in Governance

The profession and the College have the opportunity to engage in the governance of the profession of Denturism in a manner that reflects the commitment to excellence demonstrated by the profession. The profession is committed to this excellence and because of its relatively small size, the College can be nimble as it engages in the activities that support excellence in governance. Activities associated with this priority area will be aimed at promoting a culture of public confidence and transparency, improving Council and Committee member training, clarifying Council and Committee roles, and improvement in internal policy coordination and priority setting.

Priority 3: Enhanced Relations with Educational Institutions

The College recognizes the strong contribution by educators to the profession of Denturism. For the 2017-2020 Strategy Map, Council recognized opportunities to strengthen the relationship between the College and educational program administrators, encourage quality and consistency in academic program content, and explore the relationship between the existing Denturism competency profile and new registrant needs.

The Strategy Map 2017-2020 charts the work of the College over the next three years. It is an ambitious yet attainable plan, particularly given the commitment and skill of the public members of the Council and all of the members of the profession, Council members and non-Council members who are committed to, and assist with, the work of the College.

CDO STRATEGY MAP 2017–2020

MISSION

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

VISION

Leading our members to provide exemplary denturism care to Ontarians.

PROMOTING REGULATORY EXCELLENCE - ACTION PLAN FOR 2017–2020



Priority 1

Enhanced Communication and Stakeholder Engagement:

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

Priority 2

Excellence in Governance:

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

Priority 3

Enhanced Relations with Educational Institutions:

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

GUIDING PRINCIPLES

Integrity, Honesty, Transparency, Accountability, Fairness, Inclusivity

COLLEGE COUNCIL

OFFICERS

Dr. Ivan McFarlane, *Public Member* – **President & Chair**
 Joey Della Marina, *Professional Member* – **Vice President**

PROFESSIONAL MEMBERS

Jack Abergel
 Alexia Baker-Lanoué
 Keith Collins
 Robert C. Gaspar
 Christopher Reis
 Luc Tran
 Michael Vout Jr.

PUBLIC MEMBERS

Arnella Csongradi
 Mark Fenn
 Anita Kiriakou
 Wangari Muriuki
 Barbara Smith
 Hanno Weinberger

WHAT WE DO

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

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

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

Council meets 3-4 times per year to discuss regulatory policy and make decisions in the public's best interest, as mandated in the [*Regulated Health Professions Act, 1991 \(RHPA\)*](#).



COMMITTEE REPORTS

STATUTORY COMMITTEES

Executive Committee

Inquiries, Complaints and Reports Committee

Registration Committee

Quality Assurance Committee

Panel A

Panel B

Patient Relations Committee

Discipline Committee

Fitness to Practise Committee

NON-STATUTORY COMMITTEES

Qualifying Examination Committee

Qualifying Examination Appeals Committee

EXECUTIVE COMMITTEE

WHO WE ARE

Chair

Dr. Ivan McFarlane *Public Member, **President***

Professional Members

Joey Della Marina, Vice President
Luc Tran
Michael Vout Jr.

Public Members

Wangari Muriuki

WHAT WE DO

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

ACHIEVEMENTS

As part of its mandate, the Executive Committee provides routine, continuous oversight to the financial management of the College. The Committee considered and approved 26 Clinic Name requests. The work of the Executive Committee provides for consistent, timely College governance on matters that arise in between Council meetings.



INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

WHO WE ARE

Chair

Barbara Smith, *Public Member*

Professional Members

Alexia Baker-Lanoue
Joey Della Marina
Christopher Reis
Michael Vout Jr.

Public Members

Wangari Muriuki
Dr. Ivan McFarlane

Non-Council Members of the Profession

Carmelo Cino
Eugene Cohen
Norbert Gieger

WHAT WE DO

When a concern about a Registered Denturist comes to the attention of the College, the Inquiries, Complaints and Reports Committee (ICRC) investigates the matter. This includes a wide range of issues related to a Registered Denturist's conduct or practice, such as:

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

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

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

- **Take no further action.**
- **Offer guidance to the Denturist in writing or in person.** This is done by the Committee when it feels that guidance will help the Denturist to understand how to conduct himself or herself in the future.

- **Direct the Denturist to complete education or remediation** to improve his or her practice.
- **Refer the matter** to either the Discipline Committee or to the Fitness to Practise Committee for a hearing.
- Take any other action not inconsistent with the *Regulated Health Professional Act, 1991 (RHPA)*.

ACHIEVEMENTS

- In keeping with Priority 2 “Excellence in Governance” of the College’s 2017-2020 Strategy Map which identifies a commitment to improving Council and Committee member training, in **July 2017**, ICRC members participated in a training and orientation session presented by Rebecca Durcan, the College’s legal counsel. The training session included a presentation outlining the statutory framework for the ICRC focusing on ICRC process and current practices. Members were introduced to a new decision-making tool that included a risk assessment framework and a risk assessment flow chart.
- The Committee met **19** times to review **74** cases (**20** of them carried forward from 2016-2017). That included **54** complaints, **19** reports, and **1** incapacity inquiry. Below are the outcomes of the ICRC deliberations, based on **49** decisions. A decision on a particular matter may involve more than one outcome.

Took no further action	26
Issued reminders or advice to member	12
Required member to appear for an oral caution	3
Required member to complete a SCERP – specified continuing education or remediation program	3
Referral to a separate panel of the ICRC to conduct an incapacity inquiry	5
Referred to Discipline Committee	0
Undertaking	1

DISCIPLINE COMMITTEE

WHO WE ARE:

Chair

Hanno Weinberger, *Public Member*

Professional Members

Alexia Baker-Lanoue
Jack Abergel
Keith Collins
Joey Della Marina
Robert C. Gaspar
Christopher Reis
Luc Tran
Michael Vout Jr.

Public Members

Mark Fenn
Anita Kiriakou
Dr. Ivan McFarlane
Wangari Muriuki
Barbara Smith

Non-Council Members of the Profession

Carrie Ballantyne
Emilio Leuzzi
Braden Neron
Marija Popovic
Garnett Pryce
Bruce Selinger
Robert Velensky

WHAT WE DO


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

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

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

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

- revoke a Certificate of Registration;
- suspend a Certificate of Registration;
- place terms, conditions and/or limitations on a Certificate of Registration;

- 
- require a Registered Denturist to appear before the panel to be reprimanded; or
 - require a Registered Denturist to pay a fine and/or pay the College's legal, investigation and hearing costs, and other expenses.

At the end of the process, the panel issues written decision and reasons. The College publishes these on its website, and on the online listing of registrants, the Public Register.

This year, panels of the Discipline Committee held 2 hearings. Findings of professional misconduct were made against the following member:

- Hong (Tracy) Tran

A Summary of the decision and a full-text version of the Discipline Panel's decision and reasons are available in the member's profile that can be accessed through the College's online **Public Register** (www.denturists-cdo.com).

FITNESS TO PRACTISE COMMITTEE

WHO WE ARE

Chair

Michael Vout Jr., Professional Member

Professional Members

Alexia Baker-Lanoue
Jack Abergel
Keith Collins
Joey Della Marina
Robert C. Gaspar
Luc Tran
Christopher Reis

Public Members

Arnella Csongradi
Mark Fenn
Anita Kiriakou
Dr. Ivan McFarlane
Wangari Muriuki
Barbara Smith
Hanno Weinberger

Non-Council Members of the Profession

Abdelatif Azzouz
Bruce Selinger
Carrie Ballantyne
Carmelo Cino
Braden Neron
Marija Popovic

WHAT WE DO

As with some members of the general population, sometimes a Registered Denturist might be suffering from a physical or mental condition, illness or ailment. If this affects their ability to practise safely or effectively, that's called "incapacity".

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

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

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

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

There were no Fitness to Practise hearings this fiscal year.

PATIENT RELATIONS COMMITTEE

WHO WE ARE

Chair

Alexia Baker-Lanoue, *Professional Member*

Professional Members

Jack Abergel
Keith Collins
Robert C. Gaspar

Public Members

Mark Fenn
Dr. Ivan McFarlane

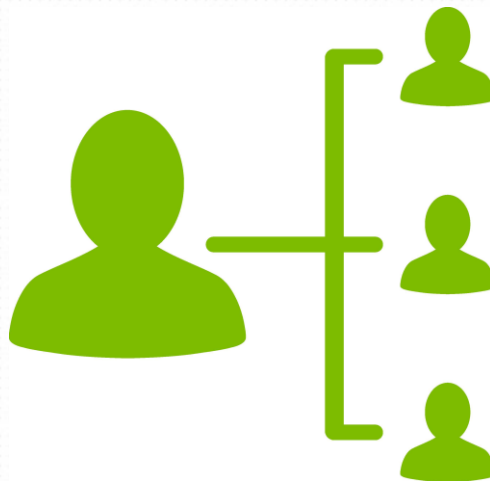
Non-Council Members of the Profession

Elizabeth Gorham-Matthews
Abdelatif Azzouz
Carrie Ballantyne

WHAT WE DO

The Committee oversees the patient relations program, including implementing measures for preventing or dealing with sexual abuse of patients. It administers the funding program for therapy and counselling for patients who have been sexually abused. The Patient Relations Committee also advises the Council on a program to enhance relations between Denturists and their patients. The program includes education of the profession, Council and staff and the provision of information to the public.

The Committee did not meet during this fiscal year.



QUALITY ASSURANCE COMMITTEE

WHO WE ARE

Chair

Keith Collins, *Professional Member*

Professional Members

Peter Cassano (Until June 2017)

Joey Della Marina (Until June 2017)

Jack Abergel (From June 2017)

Public Members

Anita Kiriakou

Hanno Weinberger

Arnella Csongradi (Until June 2017)

Wangari Muriuki (Until June 2017)

Non-Council Members of the Profession

Abdelatif Azzouz

Robert Velensky

Marija Popovic

WHAT WE DO

As part of belonging to a College, Denturists must maintain and enhance their knowledge, skill and judgment – all to keep providing appropriate high-quality care that the public expects. The Quality Assurance (QA) program is one way that the College gives registered Denturists the tools and feedback to continually improve their competence. That adds to public protection.

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

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

Panel A

ACHIEVEMENTS

- Met 7 times during the year to develop Quality Assurance Program components, monitor compliance with the Continuing Professional Development requirements, and review Peer & Practice Assessment reports. Of the 35 assessments, 17 were satisfactory, 17 required some remedial action and 1 participated in a modified non-clinical assessment.
- Continued development of the new Self-Assessment Tool by drafting the content and designing the rating scale.
- Continued development of the Peer Circles project, which included:
 - Conducting 2 case-writing sessions where 11 members of the profession met to develop Peer Circle cases; and
 - Hosting 1 facilitator training session where 14 members of the profession met to learn the facilitation, problem-solving and communication skills necessary to guide a Peer Circle discussion.
- Implemented the QA Program Requirements Policy which outlines the Committee's approach when considering requests for extensions to the deadlines for Continuing Professional Development completion and reporting, a deferral of a Peer and Practice Assessment or a request to participate in a Modified Non-Clinical Peer and Practice Assessment.
- Referred 2 members to the Inquiries, Complaints and Reports Committee for non-compliance with the Quality Assurance Program.

31

The average number of hours of Continuing Professional Development reported by Registered Denturists in 2017 - 2018

21,891

The total number of Continuing Professional Development hours reported by all Registered Denturists in 2017 - 2018

Panel B

WHO WE ARE

Chair

Patrick McCabe *Professional Member (Until June 2017)*

Hanno Weinberger, *Public Member (From June 2017)*

Professional Members

Alexia Lanoue

Mordey Shuhendler (Until June 2017)

Robert C. Gaspar (From June 2017)

Christopher Reis (From June 2017)

Public Member

Barbara Smith

Non-Council Members of the Profession

Tom Bardgett (Until June 2017)

Theodore Dalios

Damien Hiorth

Carrie Ballantyne (From June 2017)

Braden Neron (From June 2017)

ACHIEVEMENTS

- Met twice, with a mandate to recommend to Council new or revised Standards of Practice and guidelines associated with providing patient care. Standards describe the College's expectations for professional practice.
 - The following Standards of Practice were developed:
 - Conflict of Interest,
 - Restricted Title & Professional Designations, and
 - Denturism Educators.
 - The following Standards of Practice were implemented:
 - Informed Consent,
 - Confidentiality & Privacy, and
 - Advertising.
- The College continues to offer webinars related to the Standards of Practice. These webinars assist members of the profession with understanding the expectations articulated in the Standards.
- This past year, the College offered webinars on the following Standards of Practice:
 - Advertising – 4 sessions – 134 attendees
 - Record Keeping – 6 sessions – 119 attendees
 - Confidentiality and Privacy – 8 sessions – 164 attendees
 - Informed Consent – 12 sessions – 255 attendees
- The College has also developed an e-Learning library of on-demand webinars for members of the profession to access at their convenience. The e-Learning library contains webinars on the following Standards of Practice:
 - Advertising
 - Record Keeping
 - Confidentiality and Privacy
 - Informed Consent

PEER CIRCLES WORKING GROUP MEMBERS

The Peer Circle, an innovative continuing professional development tool, was developed in collaboration between the College of Denturists of Ontario and several members of the profession. As part of the development, members of the profession volunteered to either draft cases that were used in the Peer Circle discussions or act as facilitators of these discussions. The College acknowledges the hard work and dedication from the following members:

ITEM WRITERS

- Sam Tram
- Shampao Chung
- Milania Shahata
- Iran Arifovski
- George Grivogianis
- Ricardo Iaboni
- Sultana Hashimi
- Mary Shinouda
- Giovanni Cruz
- Carrie Ballantyne
- Braden Neron

FACILITATORS

- Xin (Cindy) Chen
- Adam Lima
- Paul Conrad
- Christine Reekie
- Robert Velensky
- Naresh Garg
- Sanjiv Biala
- Tessa Tsang
- David Mulzac
- Carrie Ballantyne
- Braden Neron
- Sam Tran
- Angela Moisa
- Carman Burgess
- Michelle Abbott
- Marina Glick

CONSULTANT

- Dr. Anthony Marini, Martek Assessments



REGISTRATION COMMITTEE

WHO WE ARE

Chair

Elizabeth Gorham-Matthews,
Non-Council Member

Professional Members

Peter Cassano (Until June 2017)
Luc Tran
Robert C. Gaspar (From June 2017)

Public Members

Mark Fenn
Anita Kiriakou
Wangari Muriuki (From Sept 2016)

Non-Council Members of the Profession

Damien Hiorth

WHAT WE DO

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

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

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

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

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

During 2017-2018, the College had 46 new registrants, 15 members resigned their Certificate of Registration and 7 members were suspended for non-payment of registration fees. As of March 31, 2018, the College had 698 registrants.

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

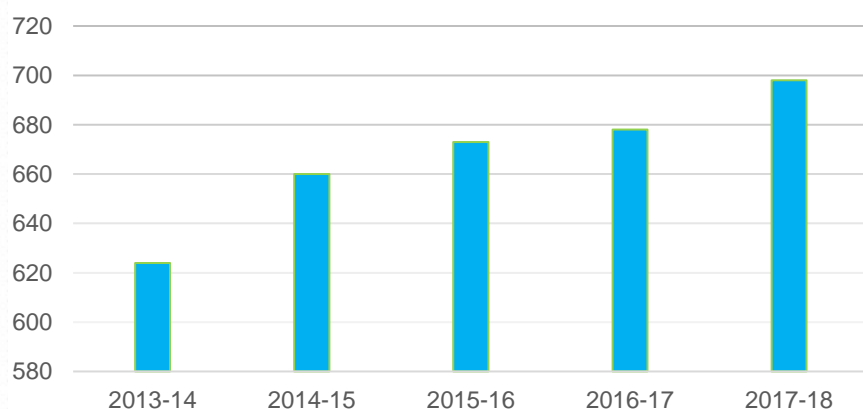
ACHIEVEMENTS

- Met 8 times
- Conducted 9 academic assessments.
- Considered 4 applications for registration.
- Considered 1 practice hours matter.
- Considered submissions made by Georgian College regarding its Denturism Program. The program received approval and students who are graduates of the Georgian College program are eligible to attempt the College's Qualifying Examination.
- Continued to work collaboratively with the Ministry of Health and Long-Term Care on revising the College's Registration Regulation.
- Participated in ongoing training and development regarding the application of fair access law and registration practices recommended by the Ontario Fairness Commissioner.
- Participated in the Ontario Fairness Commissioner's registration practices assessment.
- Piloted the College's newly developed Jurisprudence program. The purpose of this program is to give Denturists a deeper understanding of the regulatory framework in which they practise.
- As part of the College's Strategic Map 2017-2020 - Priority #2 Excellence in Governance – the Committee reviewed and approved a policy revision schedule to improve internal policy coordination and oversight.

52%

The percentage of members who are practice owners

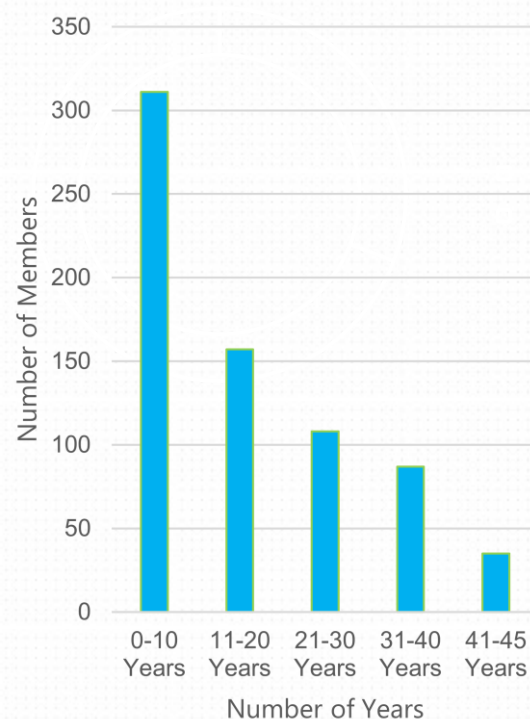
CDO MEMBERSHIP



41%

The percentage of members who practice in a solo practice setting

Years in Practice



QUALIFYING EXAMINATION COMMITTEE

WHO WE ARE

Chair

Christine Reekie, *Non-Council Member*

Professional Members

Joey Della Marina
Robert C. Gaspar

Public Members

Mark Fenn

Non- Council Members of the Profession

Abdelatif Azzouz

WHAT WE DO

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

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

ACHIEVEMENTS

- The Committee met on several occasions and completed the item selection process ensuring that examination content is fair and relevant to the day to day practice of denturism. Following each administration of the Qualifying Examination, the Committee met to review the item analysis for each component.
- The Committee reviewed and revised the Qualifying Examination blueprint to a 16 station Objective Structural Clinical Examination (OSCE) format by reallocating some of the themes of the non-interactive stations to the MCQ examination resulting in a redistribution to the weightings of the MCQ. The new distribution of the QE blueprint will be implemented in June 2019.

QUALIFYING EXAMINATION APPEALS COMMITTEE

WHO WE ARE

Chair

Michael Vout Jr., *Professional Member*

Professional Member

Alexia Baker-Lanoue

Public Member

Dr. Ivan McFarlane

Non-Council Members of the Profession

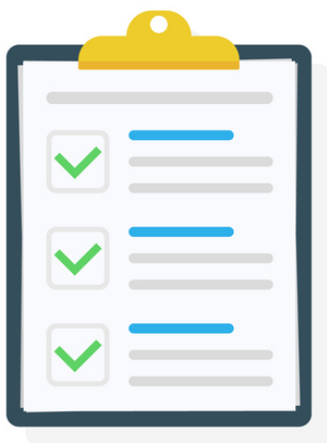
Carmelo Cino
Emilio Leuzzi

WHAT WE DO

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

ACHIEVEMENTS

- No appeals of the Summer 2017 or Winter 2018 examination results were received.



WORKING GROUP MEMBERS & OSCE ASSESSORS

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

Working Groups continue to meet on a regular basis to develop and refine examination materials and content for both the MCQ & OSCE components of the Qualifying Examination.

WHO WE ARE

PROFESSIONAL MEMBERS

Adam-Christian Mazzuca
 Adita Shirzad
 Akram Ghassemiyan
 Albert Ang
 Artour Eldarov
 Ben Vorano
 Braden Neron
 Brandon Lilliman
 Carlo Zanon
 Chi-Sam Tran
 David Barrick
 David Mulzac
 Dean McTaggart
 Douglas Beswick
 Eric Kukucka
 Esther Kang
 Eugene Cohen
 Ivana Culum
 James Durston
 Jason Gillooly
 Jeffrey Choi
 Jim Harrison
 Joe Adamec
 John Rafailov
 Marianne Dyczka
 Matthew Barclay-Culp
 Nadezda Bajic
 Norbert Gieger
 Paul Conrad
 Ricardo Iaboni
 Robert MacLeay
 Sultana Hashimi

CONSULTANTS

Dr. Anthony Marini, Martek Assessment
 Richard Bondy, Chief Examiner (Summer 2017)
 Robert Velensky, Chief Examiner (Winter 2018)



COLLEGE OF DENTURISTS OF ONTARIO

SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2018

HILBORN_{LLP}

Report of the Independent Auditor on the Summary Financial Statements

To the Council of the
College of Denturists of Ontario

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2018, 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 for the year ended March 31, 2018. We expressed an unmodified audit opinion on those financial statements in our report dated September 14, 2018.

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, therefore, is not a substitute for reading the audited financial statements of the College of Denturists of Ontario.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of a summary of the audited financial statements on the basis described in the note to the summary financial statements.

Auditor's Responsibility

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

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of the College of Denturists of Ontario for the year ended March 31, 2018 are a fair summary of those financial statements, on the basis described in the note to the summary financial statements.



Toronto, Ontario
September 14, 2018

Chartered Professional Accountants
Licensed Public Accountants

COLLEGE OF DENTURISTS OF ONTARIO

Summary Statement of Financial Position

March 31	2018 \$	2017 \$
ASSETS		
Current assets		
Cash	2,271,148	1,735,186
Investments	-	203,341
Prepaid expenses	17,788	26,627
	2,288,936	1,965,154
Capital assets	86,513	91,439
Intangible assets	1,829	1,251
	88,342	92,690
	2,377,278	2,057,844
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities	175,176	141,746
Deferred registration fees	331,851	358,732
	507,027	500,478
Deferred lease incentives	58,791	67,190
	565,818	567,668
NET ASSETS		
Invested in capital and intangible assets	51,382	50,450
Internally restricted for therapy and counselling	160,000	10,000
Internally restricted for complaints and discipline	360,000	360,000
Unrestricted	1,240,078	1,069,726
	1,811,460	1,490,176
	2,377,278	2,057,844

COLLEGE OF DENTURISTS OF ONTARIO

Summary Statement of Operations

Year ended March 31

	2018	2017
	\$	\$
Revenues		
Registration fees	1,381,076	1,340,489
Examination fees	230,675	203,250
Administration fees	14,183	16,013
Investment income	15,430	14,868
	1,641,364	1,574,620
Expenses		
Salaries and benefits	481,328	451,563
Examinations	314,991	321,895
Council and committees	19,246	34,173
Professional fees	123,868	124,753
Quality assurance	55,137	27,566
Rent	101,687	98,412
Complaints and discipline	45,563	100,928
Office and general	154,885	145,606
Amortization of capital assets	22,831	18,661
Amortization of intangible assets	544	536
	1,320,080	1,324,093
Excess of revenues over expenses for year	321,284	250,527

Note to Summary Financial Statements

March 31, 2018

1. **Basis of presentation**

These summary financial statements have been prepared from the audited financial statements of the College of Denturists of Ontario (the "College") for the year ended March 31, 2018, on a basis that is consistent, in all material respects, with the audited financial statements of the College except that the information presented in respect of changes in net assets and cash flows has not been presented and information disclosed in the notes to the financial statements has been reduced.

Complete audited financial statements are available to members upon request from the College.





BRIEFING NOTE

To: **Council**

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

Date: **December 14, 2018**

Subject: **Appointment of members of the public to College committees**

The following item was considered by the Executive Committee at its most recent meeting and is provided to Council for its consideration and action. This item speaks to the appointment of members of the public (who are not public appointees appointed by the Lieutenant Governor in Council) to College Committees.

This existence of a strong public voice in the work of the College and Council is essential to achieving the mandate of the College.

Since before the most recent provincial election, appointments and reappointments of public appointees has been frustratingly slow and, in the case of some health regulatory Colleges, non-existent. At least one health profession regulatory College is not legally constituted because the sitting government has failed to appoint the public appointees required to legally constitute the Council.

Barb Smith, a public appointee to the CDO Council, is currently the Chair of ICRC. Her work with this Committee is invaluable. Her appointment is due to expire on December 31, 2018. If her appointment expires, she would not be eligible to sit on any College committee.

One remedy would be to have Barb appointed to the Committee as a member of the public. The College by-laws do not provide for the appointment of members of the public other than Public Appointees. However, with the following modifications, such appointments could be made. Rebecca Durcan has reviewed this matter and provided the suggested modifications to the relevant by-law articles.

Such modifications could be adopted by Council with a 2/3 vote. A 60 day consultation is not required for changes to these particular articles.

24.08 Appointment of Committee Members and Members of Working Groups

Unless otherwise stated in the by-laws or the Code, the Nominating Committee shall put forward to Council for approval a proposed slate of every Committee member and every member of a working group, including persons and Members who are not members of Council with the exception of the Executive Committee, whose members shall be elected to office.

24.09 Appointment of Non-Council Members

Subject to any specific composition requirements in these by-laws or the Code, the Executive Committee may, where vacancies arise during the Council year, appoint Members, including members of Council, and persons, to any Committee or working group and report such appointment(s) to Council.

Schedule 5 to the Bylaws

Honoraria Paid by the College to Professional Members, and Public Members who are not appointed pursuant to s. 6(1)(b) of the Denturism Act, 1991, of Council and Committees



COLLEGE OF
DENTURISTS
OF ONTARIO

BRIEFING NOTE

To: **Council**

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

Date: **December 14, 2018**

Subject: **Patient Relations Committee – Terms of Reference**

Background

The Patient Relations Committee met on November 21, 2018. The Committee discussed the responsibilities of the Committee; both legislated and otherwise. Since it had been some time that the Committee had met, a reiteration of the Terms of Reference was indicated. The Committee approved the draft Terms of Reference for Council's consideration and approval.

Options:

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

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

Attachments:

Draft Terms of Reference – Patient Relations Committee

Terms of Reference Patient Relations Committee

Purpose

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

Responsibilities

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

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

Accountability and Reporting Relationships

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

Members

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

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

Review

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

Revision Control

Date	Revision	Effective



COLLEGE OF
DENTURISTS
OF ONTARIO

BRIEFING NOTE

To: **Council**

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

Date: **December 14, 2018**

Subject: **Consultation Report – “Retired” Status – By-law Amendment**

At its September 14, 2018 meeting, Council approved the following proposed By-law amendments for stakeholder consultation:

Designation of Retired Members

Upon receiving a request, the Registration Committee may designate a Member a Retired Member if,

- (i) at the time of making the request, the Member is in good standing; and*
- (ii) the Member has retired from the practice of Denturism and agrees not to engage in the practice of Denturism.*

Entitlements of Retired Members

A Retired Member is entitled to,

- (i) remain on the register of the College as a Retired Member;*
- (ii) use the title Denturist (Retired), Registered Denturist (Retired) or DD (Ret); and*
- (iii) participate in the activities of the College; however, a Retired Member is not entitled to vote in the election of the Council or to hold elected office.*

Termination of Retired Membership Status

A Retired Member status shall terminate if the Registrar has reasonable grounds to believe that the person,

- (i) has been found to be in default of any obligation to the College under the regulations or the by-laws;*
- (ii) practises the profession or uses the protected title without first obtaining a certificate of registration from the College;*
- (iii) is the subject of a finding of incompetence, professional misconduct or incapacity; or*
- (iv) otherwise acts in a manner that is inconsistent with an ongoing association with the College.*

Retired Members that wish to return to the Active class of registration will be referred to the Registration Committee to determine if any additional training or education is required.

The consultation report is attached. Answers to pertinent questions raised in the consultation report are provided below. Should Council approve these By-law amendments, these questions and answers will also be included in the Guide to the Standard: Restricted Title and Professional Designations.

First, there is an opportunity for clarification of the distinction between a “Class” of Registration and an “Honourary Title”. This proposed amendment to the College By-laws is seeking to establish the Honourary Title “Retired” for use by an individual who has **previously held** a Certificate of Registration with the College and **has resigned** that Certificate. The establishment of a “Retired” Class of Registration is not being sought. Permitting an individual to use the Honourary Title “Retired” would allow an individual who had previously held a Certificate of Registration with the College to continue to use the protected title of Denturist, but with the addition of “Retired” to that title.

Since the “retired” status is not a Class of Registration, a retired Denturist will no longer be permitted to practise through a denturist health profession corporation, or be a shareholder, director or officer of any denturist health profession corporation. Individuals who wish to remain shareholders, directors or officers of any health profession corporation authorized by the College must retain their registration.

The current College By-laws do not permit non-members of the profession to sit on Committees. However, Council could decide to permit former members to sit on committees. The current By-laws allow Council to determine eligibility criteria for committees. Therefore these criteria would have to be updated.

Whether or not a retired Denturist could act as an instructor in an educational institution will depend on the educational institution. However, courses that require clinical and/or laboratory supervision should be taught by members of appropriate regulated health professions who are currently registered with the appropriate regulatory body.

Retired denturists could not participate in Council, elections or, as noted above, act as shareholders, directors or officers of a Denturist Health Profession Corporation.

The type of obligation to the College that a retired Denturist may be in default of that could lead to termination of the “retired” status could include the payment of any annual fees as set by Council, updating contact information, failing to report a finding of incompetence, professional misconduct or incapacity in this or any other jurisdiction; failing to report criminal charges, bail conditions etc. in this or any other jurisdiction.

Options:

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

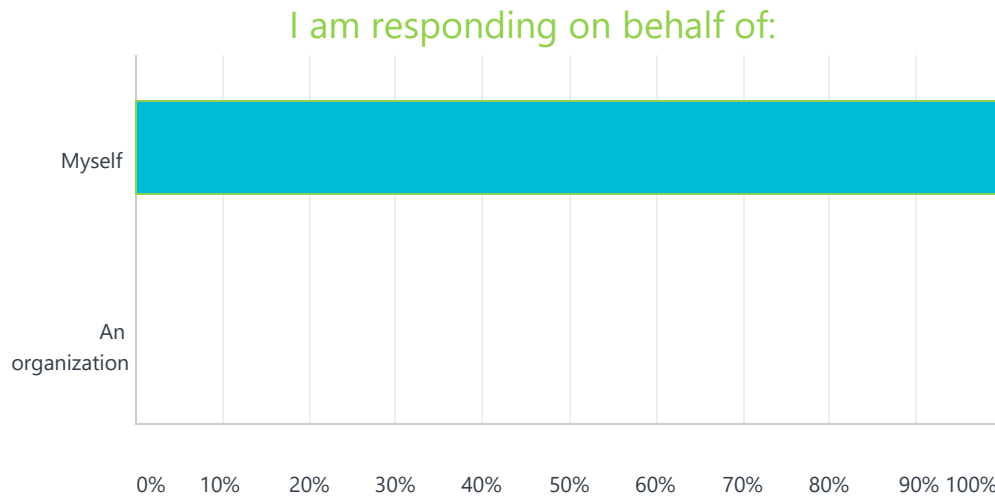
1. Adopt the proposed amendments to the College By-laws.
2. Modify the proposed amendments, adopt the modified amendments and re-circulate them for stakeholder consultation.
3. Because of the confusion demonstrated in the consultation report between a retired "Class of Registration" and an Honourary Title of "Retired Denturist", and because there is no urgency in making a decision on this matter, there is an option for Council to return the draft with clarifying comments and information for a second, but shorter (30 day) consultation.
4. Other

Attachments:

Consultation Report

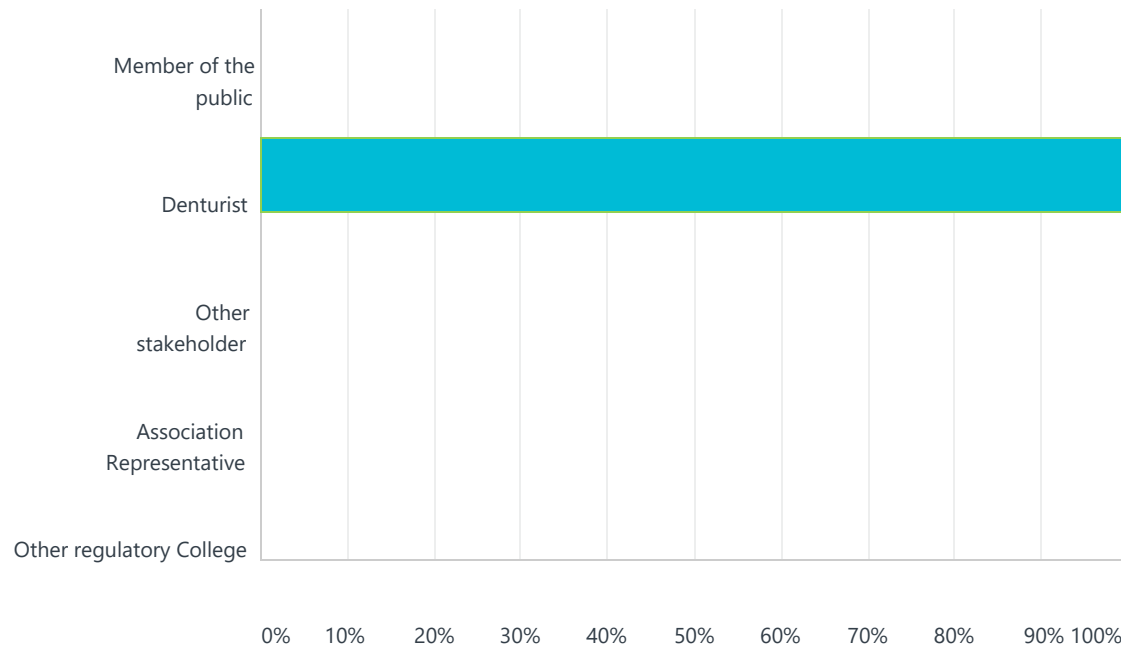


Consultation Report – By-law Amendments “Retired” Status



ANSWER CHOICES	RESPONSES	
Myself	100.00%	25
An organization	0.00%	0
TOTAL		25

I am a:



ANSWER CHOICES	RESPONSES	
Member of the public	0.00%	0
Denturist	100%	25
Other stakeholder	0.00%	0
Association Representative	0.00%	0
Other regulatory College	0.00%	0
TOTAL		25

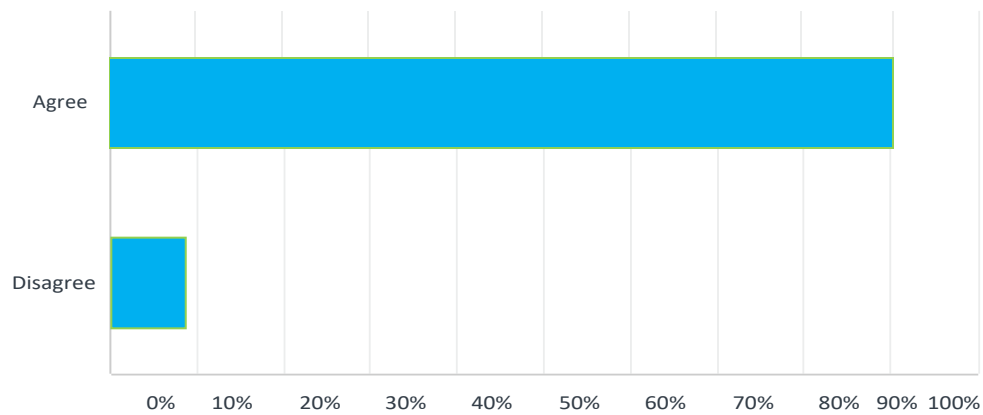
Designation of Retired Members

Do you agree with these requirements?

REQUIREMENTS

Upon receiving a request, the Registration Committee may designate a Member a Retired Member if,
(i) at the time of making the request, the Member is in good standing; and
(ii) the Member has retired from the practice of Denturism and agrees not to engage in the practice of Denturism.

Answered: 23 Skipped: 2



ANSWER CHOICES	RESPONSES	
Agree	91.3%	21
Disagree	8.7%	2
TOTAL		23

Please provide your feedback on the designation of retired members.

Answered: 9 Skipped: 16

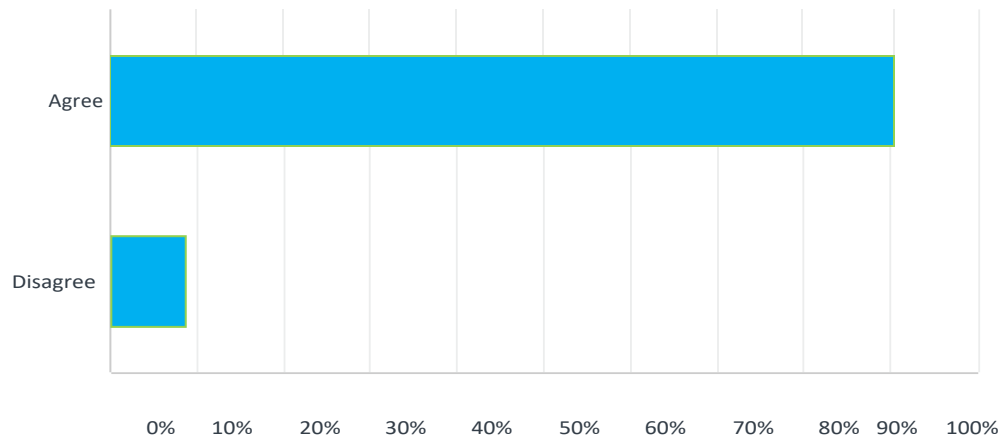
RESPONSES
I agree with these considerations.
Retired members should be permitted and have the designation
As a health care professional who has spent many years practicing, providing the best care that you can to patients, your identity becomes entangled in both that service and the profession. Your skills and knowledge don't magically disappear with retirement, or your interest in the health and state of the profession. A retired status would be a recognition of the professionals' service and knowledge, while also providing an avenue for their continued participation in the profession without the need to keep up the requirement of practice hours. This would allow retired practitioners to participate in regulatory and educational forums which require a standing with the regulatory college, allowing the profession to benefit from their skills, experience and knowledge after they have decided to stop regular practice.
I don't believe you should ask for a request to retire; you are stating you are retiring. Definitely you should know engage in denture is in once you are retired. If you are not in good standing that needs to be dealt with for sure.
Anybody who has held any type of position or job in their life in the rest of the world would say "I'm a retired....". Come on.
Very appropriate, I applaud this decision
I would like clarification on a retired dentist still maintaining ownership of shares in a professional "dentist" corporation? How will that be viewed?
Dentist(retired)
I have a question regarding ones right to still be able to own shares of a corporation. Does this constitute practicing as a dentist?

Entitlements of Retired Members

Do you agree with these entitlements?

ENTITLEMENTS	
A Retired Member is entitled to,	
(i)	remain on the register of the College as a Retired Member;
(ii)	participate in the activities of the College; however, the Retired Member is not entitled to vote in the election of the Council or hold elected office; and
(iii)	to use the title Denturist (Retired), Registered Denturist (Retired) or DD (Ret).

Answered: 23 Skipped: 2



ANSWER CHOICES	RESPONSES	
Agree	91.30%	21
Disagree	8.70%	2
TOTAL		23

Please provide your feedback on the entitlements of retired members.

Answered: 7 Skipped: 18

RESPONSES
I do not like DD[Ret].It looks odd.
The retired member should be permitted to sit on council committees
I believe that it would be advantageous to the profession to also allow retired practitioners to act as instructors in educational institutions and other educational forums, although this would be an admittedly difficult position to define. It could permit involvement in non-clinical areas, or clinical interaction with an active member in overall supervision.
People can say what they did for a career but once you are done practicing you should be done in every other way. This shouldn't be a way for someone to figure out a second career.
Retired members should still be allowed to serve on committee. Their maturity,experience and availability would be an asset to the college
Between ii and iii; the and at the end of ii suggests that iii is also prohibited. My understanding is they can use the designation.
Does this allow a retired member to maintain their shares in a corporation?

Termination of Retired Membership Status

Do you agree with the grounds for termination of retired status?

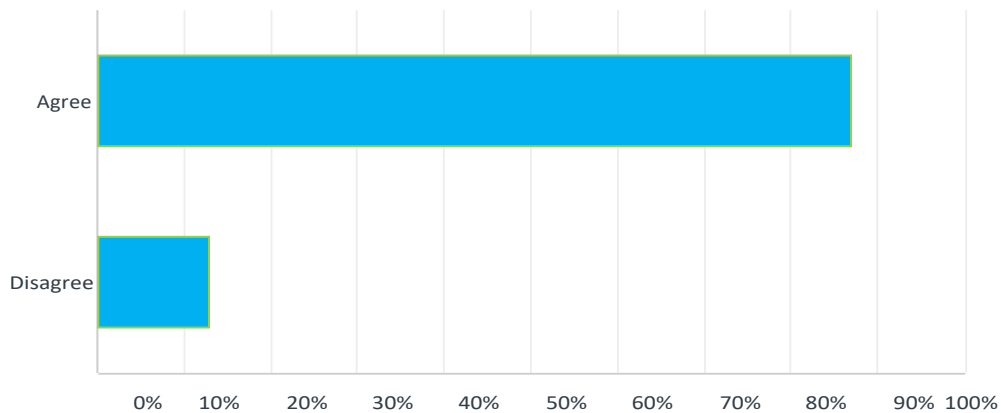
GROUND FOR TERMINATION OF RETIRED STATUS

A Retired Member status shall terminate if the Registrar has reasonable grounds to believe that the person,

- (i) has been found to be in default of any obligation to the College under the regulations or the by-laws;
- (ii) practises the profession or uses the protected title without first obtaining a certificate of registration from the College;
- (iii) is the subject of a finding of incompetence, professional misconduct or incapacity; or
- (iv) otherwise acts in a manner that is inconsistent with an ongoing association with the College.

Retired Members that wish to return to the Active class of registration will be referred to the Registration Committee to determine if any additional training or education is required.

Answered: 23 Skipped: 2



ANSWER CHOICES	RESPONSES	
Agree	86.96%	20
Disagree	13.04%	3
TOTAL		23

Please provide your feedback on the termination of retired membership status.

Answered: 3 Skipped: 22

RESPONSES
I believe that the statement; "default of any obligation to the College under the regulations or the by-laws" needs clarification. As written it appears to refer to all regulations or bylaws, including practice hours, educational requirements, etc. I believe the statement should include a definition such as "default of any obligation to the College under the regulations or the by-laws as pertaining to the Retired Membership Status."
Who needs to be part of this when they aren't anymore?
If they can still own share in the corporation or practice.



September 21, 2018

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

Via Email

RE: Proposed By-Law amendments per Retired Status

Dear Dr. Pettifer,

The Denturist Association of Ontario (DAO, Association) thanks the College of Denturists of Ontario (CDO, College) for the opportunity to comment and provide stakeholder feedback on the College's proposed amendments to the CDO By-laws that provide for retired member status.

The DAO acknowledges the CDO for making by-law provisions for "Retired Members" and supports the creation of a Retired class of certificate of registration.

The College's current Registration Regulation does not create classes of membership although previous CDO By-laws defined categories of membership which included "Inactive". However, the College Supervisor viewed the categories to be classes of certificates of registration that were not authorized or supported by regulation and the CDO eliminated the "Inactive" status. This clarified that classes of membership i.e. classes of certifications of registration are created by regulation, not by by-laws alone.

Subsequently, the College submitted a new proposed Registration Regulation to Government for approval that would create three classes of member: General, Inactive, and Temporary. Also, in preparation for approval of this proposed regulation, the Council in Schedule 7 of the current CDO By-laws approved a by-law for the Inactive class. Pending Government approval of the regulation this by-law provision has not yet come into effect.

Creating New Class of Membership

The DAO commends the CDO for considering stakeholder consultation on the Standard of Practice: Restricted Titles and Professional Designations regarding the need for a “retired” or “life member” status for a denturist who is no longer engaged in clinical practice.

The Association applauds the College for making amendments to the CDO By-laws for Retired members. However, in addition to by-law amendments a new class of certificate of registration also requires regulation. As such, the DAO respectfully recommends that the CDO amend the proposed Registration Regulation to include a fourth class of member: “Retired”. As a proposed Registration Regulation is currently before the Government, an amended regulation could be reviewed by Government for approval.

Similar to the other classes of membership, the proposed Registration Regulation for a Retired certificate of registration would establish: non-exemptible registration requirements; additional terms, conditions and limitations; issuing a General certificate. The registration requirements, additional terms, and issuing other certificate would be the same as or similar to those for the Inactive class in the proposed Registration Regulation currently before the Government. This would simplify amendments to the CDO By-laws as many of the requirements and terms being proposed would be included in the regulation and would not need to be included in the by-laws.

By-law Amendments

The “*Entitlements of Retired Members*” section of the proposed by-law in part includes “*participate in the activities of the College; however, the Retired Member is not entitled to vote in the election of the Council or hold elected office*”.

Section 94(1) of the Health Professions Procedural Code provides that Council may make by-laws relating to voting and requirements for members of Council. As such the Council has the authority to exclude Retired members from eligibility to vote or to run for Election to Council. However, in addition to making this by-law provision, the College would need to support it by making amendments to the

current by-laws 12.01 Eligibility to Vote and 13.01 Eligibility to Run for Election. The later by-laws make no ruling on exclusion of eligibility based on class of membership.

Termination of Retired Membership Status

The DAO has grave concerns about the proposed by-law regarding Termination of Retired Membership. A Retired member as a registrant of the College would hold a certificate of registration for the Retired class. They would have obligations, responsibilities, as well as rights under the Regulated Health Professions Act to procedural fairness.

The by-law as proposed would give the Registrar broad powers to revoke a Retired member's certificate of registration based on reasonable grounds they believe that the member *'practises the profession ... or otherwise acts in a manner that is inconsistent with an ongoing association with the College'*.

Revocation is the most severe penalty ordered by a panel following investigation, and a finding of a disciplinary or incapacity proceeding. Members who have resigned their certificate would have more procedural fairness and protection than Retired members under this section of the proposed by-law.

It is the view of the DAO that revoking a Retired member's certificate simply based on the Registrar's "belief" is inconsistent with the RHPA and would be a breach of procedural fairness. The Association trusts that all members of the College would be afforded the same rights under the RHPA and the Health Professions Procedural Code. The DAO requests that the by-law amendment for Termination of Retired Membership Status be removed.

Provisions under the Regulated Health Professions Act give the College the authority to revoke a member's certificate following due process, procedural fairness and a finding of incompetence, professional misconduct or incapacity. The CDO can fulfill its mandate to protect the public with the authority granted to the College under the RHPA and the Denturism Act without the need for this particular by-law amendment.

In Conclusion

The DAO supports the creation of a Retired member class of certificate of registration. The DAO recommends amendment to the proposed Registration Regulation to include a Retired class of membership. In preparation for pending Government approval of the regulation the Association supports certain amendments to the CDO By-laws to make provision for retired members.

The DAO strongly opposes the proposed amendment related to Termination of Retired Member Status and requests that this be removed. However, the DAO is supportive of the other proposed by-law amendments.

The Denturist Association of Ontario thanks the College for the opportunity to provide stakeholder comments on the proposed by-law amendments.

On behalf of the Board of Directors

Regards,

A handwritten signature in cursive script, reading "Frank Odorico", enclosed within a rectangular box.

Frank Odorico, B.Sc., DD
President
The Denturist Association of Ontario

Cc: The CDO Executive Committee



BRIEFING NOTE

To: **Council**

From: **Registration Committee**

Date: **December 14, 2018**

Subject: **Amendments to Supervision of Students and Examination Candidates Policy**

As part of the policy revision and coordination project, the Registration Committee considered information regarding the current Supervision of Students or Examination Candidates Policy.

At the April 5th, 2018 meeting, the Committee moved to recommend amendments to the current policy for Council's consideration. A summary of the recommended changes is included below:

- Type of Policy was changed from Qualifying Examination to Registration;
- Title was changed from *Supervision of Students and Examination Candidates Policy* to *Clinical Supervision of Students, Examination Candidates, and Potential Examination Candidates Policy*;
- Added definition of student, candidate and potential candidate;
- Added potential candidate's eligibility to work under the supervision of a denturist;
- Better aligned with RHPA in terms of who can receive delegation; and
- Identified a requirement for professional liability insurance of supervising denturists to cover students working under their supervision.

The current version of the policy and an amended draft version of the policy are attached for Council's consideration.

Options:

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

1. Adopt the proposed amendments to the Supervision of Students and Examination Candidates Policy (new name: Clinical Supervision of Students, Examination Candidates, and Potential Examination Candidates Policy).
2. Modify the proposed amendments.
3. Other.

Attachments:

Current Supervision of Students and Examination Candidates Policy

Clinical Supervision of Students, Examination Candidates, and Potential Examination Candidates Policy (Draft)



COLLEGE OF
DENTURISTS
OF ONTARIO

TYPE	Qualifying Examination
NAME	Supervision of Students or Examination Candidates Policy
DATE APPROVED BY COUNCIL	June 14, 2013

Purpose of this Policy:

The College recognizes the value of practical learning and encourages its members to supervise and educate students. The purpose of this policy is to set out the expectations for denturists involved in the supervision of students.

In this policy, a student is defined as a person who is fulfilling the requirements to become a registered denturist and may include students enrolled in recognized denturism programs, recent graduates and international candidates.

Expectations for Denturists in the Supervision of Students:

1. The denturist is fully responsible for all aspects of patient care provided by a student while under the denturist's direct or indirect supervision.¹
2. The denturist will obtain the patient's informed consent before involving a student in that patient's care.
3. The denturist will educate the student about the confidentiality of personal health information and will ensure that the student does not inappropriately collect, use or disclose patients' personal health information.
4. The denturist will evaluate the student's knowledge, skills and judgment before involving the student in patient care and the denturist will ensure that the student's knowledge, skills and judgment are appropriate for the tasks assigned and that the student can perform all acts (including controlled acts) safely.

¹ Direct supervision is considered supervision where the denturist is physically present with the student while the student performs a task. Indirect supervision is considered supervision where the student performs tasks at the denturist's direction, but the denturist is not physically present in the same room.

5. The denturist will ensure that the student only performs tasks that are within the scope of practice of the profession or are in the public domain.
6. The denturist will provide an appropriate level of supervision (i.e., direct or indirect supervision) based on the student's knowledge, skills and judgment and the nature of the task.
7. The denturist will only delegate the controlled act of fitting and dispensing removable dentures to a student in the following circumstances:
 - a. the student is attending a course of study leading to a diploma or degree in denturism at an institution recognized by the Registration Committee or is a candidate who is eligible to participate in entry-to-practice examinations and whose application for a certificate of registration has not been finally refused by the Registration Committee; and
 - b. the denturist has the authority to perform the controlled act and is competent to perform the controlled act; and
 - c. the denturist has determined that it would be appropriate in the circumstances to perform the controlled act on the patient; and
 - d. the denturist directly supervises the student in the performance of the act until the denturist determines that the student is competent to perform the act safely under indirect supervision. Where the denturist indirectly supervises the student, the denturist must remain on the premises at all times and be available to assist with the act if necessary.
8. The denturist will ensure that all record keeping meets the standards of the profession, as set out in the College's Patient Record Keeping Policy. In particular, the denturist will ensure that all patient health records completed by the student include the student's name and status and are co-signed by the supervising denturist.
9. The denturist will continue to evaluate the student's knowledge, skills and judgment throughout the period of supervision.
10. The denturist will terminate the student's involvement in patient care if the denturist determines that it is necessary to do so for the protection of the public or if the patient withdraws his or her consent for student involvement.

Relevant Legislative Framework:

The *Regulated Health Professions Act, 1991* ("RHPA") limits the performance of certain controlled health care acts to registered members or to persons who have had the act delegated to them by a registered member (RHPA, s. 27). The RHPA provides an exception for students, however, if that only applies if the student is performing the procedure as a part of their training (which is not the case in the circumstances covered by this policy) and they are acting under the supervision or direction of a registered member (RHPA, s. 29(1)(b)).

Registered denturists are authorized under the *Denturism Act, 1991* to perform the controlled act of fitting and dispensing removable dentures (*Denturism Act, s. 4*). The Professional Misconduct Regulation made under the *Denturism Act* limits the persons to whom a denturist may delegate the controlled act (O. Reg. 854/93, s. 1(3)). Accordingly, a denturist may only delegate the controlled act to:

- i. a student attending a course of study leading to a diploma or degree in denturism at an institution recognized by the Registration Committee, or
- ii. a candidate who is eligible to participate in entry-to-practice examinations, and whose application for a certificate of registration has not been finally refused by the Registration Committee.

Under the College's By-laws, a member must notify the College of the names of any graduates of denturist training that the member supervises as part of his or her practice (art. 33.08(xiii)).

RELATED LEGISLATION AND DOCUMENTS

Regulated Health Professions Act, 1991, ss. 27-29

Denturism Act, 1991, s. 4

Denturism Act, 1991, Professional Misconduct Regulation, O. Reg. 854/93, s. 1 (3)

CDO By-laws, art. 33.08(xiii)

REVISION CONTROL

Date	Revision	Effective



TYPE	Registration
NAME	Clinical Supervision of Students, Examination Candidates, and Potential Examination Candidates Policy
DATE APPROVED BY COUNCIL	June 14, 2013

INTENT

The College recognizes the value of practical learning and encourages denturists to supervise and participate in the education of individuals who are in the process of becoming members of the profession. The purpose of this policy is to set out the expectations for denturists involved in the supervision of these individuals. Before acting as a supervisor, the denturist must confirm that all professional liability insurance requirements have been met.¹

In this policy, a student is defined as a person who is enrolled in an approved denturism program. An examination candidate is defined as a person who has met the academic requirements for a Certificate of Registration set out in the Registration Regulation (s 1. (1) 1) and is eligible to attempt the Qualifying Examination. A potential candidate is a person who has not met the academic requirements for a Certificate of Registration and is currently completing any additional requirements set out by the Registration Committee prior to becoming eligible to attempt the Qualifying Examination.

THE POLICY

1. The supervising denturist retains complete and full responsible for any and all aspects of patient care provided by a supervised individual who is under the denturist's indirect or direct supervision².
2. The supervising denturist must notify the College of the names of any individuals that the member supervises as part of his or her practice.
3. The supervising denturist will obtain the patient's expressed, informed consent, before involving a supervised individual in the patient's care, according to the Standard of Practice: Informed Consent.
4. The supervising denturist will educate the supervised individual about the confidentiality of personal health information and ensure that no patient personal health information is inappropriately collected, used or disclosed.

¹ Professional liability insurance that is held by the denturist or the educational institution at which a student is registered must meet the College's requirements and include coverage of an individual who is being supervised by a Registered Denturist. Regardless, a Registered Denturist is responsible for ensuring that sufficient professional liability insurance coverage is in place before permitting the involvement of a student, candidate or potential candidate in the treatment of patients.

² Direct supervision is supervision where the denturist is physically present in the room with the student while the student performs a task. Indirect supervision is supervision where the student performs tasks at the denturist's direction, but the denturist is not physically present in the same room.

5. The supervising denturist will evaluate the supervised individual's knowledge, skills and judgment throughout the entire period of supervision. Prior to involving the supervised individual in any patient care, the supervising denturist will ensure that their knowledge, skills and judgment are appropriate for the assigned tasks and that they are able to safely perform all assigned tasks.
6. The supervising denturist will provide the level of supervision (i.e., direct or indirect) appropriate for the supervised individual's knowledge, skills and judgment and the nature of the task.
7. The supervising denturist will only delegate elements of the controlled act of fitting and dispensing removable dentures to a supervised individual in the following circumstances:
 - a. the supervised individual is enrolled in a course of study leading to a diploma or degree in denturism at an institution approved by the Registration Committee *or* is a candidate who is eligible to attempt the Qualifying Examination *or* is a potential candidate who is currently completing any additional requirements set out by the Registration Committee prior to becoming eligible to attempt the Qualifying Examination.
 - b. the supervising denturist has the authority to perform the controlled act, is competent to perform the controlled act, and will ensure that the supervised individual only performs tasks that are within the scope of practice of the profession or are in the public domain;
 - c. the supervising denturist has determined that it is appropriate in the circumstances to perform the controlled act; and
 - d. the supervising denturist directly supervises the individual in the performance of the act until the denturist determines that the individual is competent to perform the act safely under indirect supervision.
8. The supervising denturist will ensure that any patient health records amended by the supervised individual include a notation of their name and status. The supervising denturist must co-sign any entries in the patient record made by a supervised individual.
9. The supervising denturist must terminate the supervised individual's involvement in patient care if the patient is at risk or if the patient withdraws their consent for the supervised individual's involvement in their care.

RELATED LEGISLATION AND DOCUMENTS

Regulated Health Professions Act, 1991, ss. 27-29

Denturism Act, 1991, s. 4

Denturism Act, 1991, Professional Misconduct Regulation, O. Reg. 854/93, s. 1 (3)

CDO By-laws, Article 33.08 (xi)

Standard of Practice: Informed Consent

Standard of Practice: Confidentiality & Privacy

REVISION CONTROL

Date	Revisions	Effective
April 5, 2018	<ul style="list-style-type: none">- Update title and type of policy- Include definitions of candidate and potential candidate- Addition of potential candidate's eligibility to work under the supervision of a registered denturist- Additional language regarding professional liability insurance requirements	