



COUNCIL MEETING AGENDA

June 17, 2022 (9:00am-3:50pm)

Join Zoom Meeting

<https://collegeofdietitians-org.zoom.us/j/81365467744?pwd=VlVDYWdZMlZGODZvZkgxTThldjZlZz09>

Meeting ID: 813 6546 7744

Passcode: 911904

Dial +1 647 558 0588 Canada

ITEM & DISCUSSION	DECISION NEEDED	TIME	OWNER	ATTACHMENTS
1.0 Call To Order		9:00am	KL	
OVERSIGHT & ACCOUNTABILITY				
2.0 In Camera Minutes from March 25, 2022 In Camera session pursuant to s. 7(2)(e) of the Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991	Approval/ Motion	9:00 – 9:05 (5 mins)		
3.0 In Camera session In Camera session pursuant to s. 7(2)(b) and (e) of the Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991	Information /Discussion	9:05-9:20 (15 mins)		
4.0 Education Accreditation Provider	Approval/ Motion	9:20 –9:30 (10 mins)	MW	4.1 Briefing Note – Accreditation Provider
5.0 Management Report	Information /Discussion	9:30 – 9:50 (20mins)	MW	5.1 Management Report 5.2 Statement of Earnings Fiscal 2022 5.3 Capital Asset Purchases Report Fiscal 2022

ITEM & DISCUSSION	DECISION NEEDED	TIME	OWNER	ATTACHMENTS
6.0 Council Meeting Evaluations and Trend Analysis	Approval/ Motion	9:50 - 9:55 (5mins)	KL	6.1 Council Meeting Evaluation Results – March 25, 2022 6.2 Council Meeting Evaluation Trends - June Council Meeting 2022 6.3 Council Meeting Evaluation – June 16, 2022 Results
7.1 Annual Council and Committee Surveys and Needs Assessments	Information /Discussion	9:55 –10:20 (25 mins)	KL	7.1 2021-22 Annual Council Performance Evaluation Results 7.2 2021-22 Annual Committee Performance Evaluation Results 7.3 2020-21 Annual Council Performance Evaluation Results (for reference) 7.4 2020-21 Annual Committee Performance Evaluation Results (for reference) 7.5 Briefing Note-EDI-B Needs Assessment Results – RAW DATA
8.0 Committee Composition and Appointments	Approval/ Motion	10:20 – 10:40 (20 mins)	MW	8.1 Briefing Note - Committee Appointments 8.2 Briefing Noting – Committee Composition for the 2022-2023 Term and Draft Committee Composition Worksheet
BREAK 10:40-11:00 (20 mins)				
TRAINING				
9.0 Conflict of Interest Training with Richard Steinecke (from SML-Law)	Information /Training	11:00- 11:35 (35mins)	MW	
STRATEGIC				
10.0 Council Workplan and Training Calendar	Approval/ Motion	11:35 – 11:50 (15mins)	MW	10.1 Briefing Note - Council Workplan and Training Calendar 2022-23

ITEM & DISCUSSION	DECISION NEEDED	TIME	OWNER	ATTACHMENTS
11.0 Proposed Council Calendar	Approval/ Motion	11:50 – 12:00 (10mins)	MW	11.1 Briefing Note - Proposed Council Meeting Dates 2022-23
LUNCH 12:00 – 12:45 (45 mins)				

OVERSIGHT & ACCOUNTABILITY				
12.0 Risk Monitoring Report (Q1)	Information/ Discussion	12:45-1:05 (20 mins)	MW	12.1 Briefing Note - Risk Monitoring Report Q1
TRAINING				
13.0 Presentation on Internal Controls	Information/ Training	1:05-1:20 (15 mins)	SA	
OVERSIGHT & ACCOUNTABILITY				
14.0 Audited Financial Statement presentation by auditor	Information/ Discussion	1:20- 2:05 (45 mins)	Auditor	14.1 Audited Financial Statements Mar 31, 2022-COUNCIL DRAFT
15.0 Appointment of Auditor 2022-23	Approval / Motion	2:05 – 2:10 (5 mins)	SA	
BREAK 2:10 – 2:30 (20mins)				
16.0 Reserve Fund Policy	Approval / Motion	2:30–3:00 (30 mins)	SA	16.1 Briefing Note - Reserve Fund policy
POLICY				
17.0 Investment Policy	Approval/ Motion	3:00 – 3:30 (30 mins)	SA	17.1 Briefing Note - Investment policy
18.0 Policy (Final) on Determining Currency Hours with Definition of Practising Dietetics Revisions	Approval / Motion	3:30 – 3:50 (20 mins)	CC	18.1 Briefing Note - Draft Policy on Determining Currency Hours
19.0 Adjournment		3:50	KL	

MANAGEMENT REPORT – June 16 & 17, 2022

SECTION 1 OVERSIGHT/METRICS

FINANCIAL

A Statement of Earnings for the fiscal period April 1, 2021 to March 31, 2022 is attached to this report (see Attachment 5.2). A review of revenues shows that general membership fees received during the year are in line with the budget. The membership grew by 3% over the prior fiscal year and the renewal fees remained at \$641 per member.

The College also earned higher than budgeted interest and dividends and a gain on sale of investments from its investment portfolio with RBC Dominion Securities. This income offset a depreciation in the fair market value of the investments. The net impact of the investments was to add \$114,677 to the College's surplus.

A review of the expenditures shows that General Administration expenses are in line with the budget and most of the Program expenses are significantly lower than budget due to the deferral of a number of expenditures to next fiscal year, and the reduction of expenses due to a virtual format for meetings. The Standards & Compliance Program expenses are significantly higher than budget due to a higher than usual number of complex ICRC matters which have required additional case management, investigation and legal fees.

A Capital Asset Purchases Report is also attached (see Attachment 5.3). This report shows that capital asset purchases were higher than budget for computer equipment due to the increased number of staff and were lower than budget for computer programming of the database since some projects required less work than expected.

The increase in membership, the strong performance of the College's investments and the deferral of some expenses have contributed to a surplus this year. This will position the College well to effectively carry out its planned activities and fulfill its public protection mandate over the next fiscal year.

Investments held by RBC Dominion Securities inc. (details from February 1, 2022, to April 30, 2022):

Investment decisions are made with the advice of the College's investment advisor at RBC Dominion.

In February 2022, the College used cash on hand to purchase common shares of Northwest Healthcare REIT for \$4,271.

In March 2022, the College used cash on hand to purchase common shares of Northwest Healthcare REIT for \$5,242. Later in the month, it sold part of its investment in common shares of Northwest Healthcare REIT, Riocan Real Estate REIT and Royal Bank of Canada REIT, for total proceeds of \$495,916. These sales generated capital gains of \$88,797. These funds and cash on hand were used

to purchase a Royal Bank of Canada Guaranteed Income Certificate (G.I.C.) for \$500,041. The College also used cash on hand to purchase common shares of Magna International Inc. for \$2,068.

In April 2022, the College used cash on hand to purchase common shares of Magna International Inc. for \$14,226. It also sold part of its investment in preferred shares of Great West Lifeco, common shares of Riocan Real Estate REIT, common shares of Royal Bank of Canada and units of a Brookfield Asset Management fixed income bond for total proceeds of \$663,530. These sales generated capital gains of \$77,367. These funds and cash on hand were used to transfer \$667,000 to the College's Scotiabank business operating bank account to finance ongoing operations. These transfers are made every 3-4 months as required.

The fair market value of investments was \$4,521,049 on April 30, 2022.

Note that Executive Limitation L8 (Asset Protection) #15 states: "The Registrar may not fail to limit investments in equities to 40% of the book fund value when market opportunities present, as recommended by the College's financial advisor". A review was conducted of the book values of the investments from February 2022 to April 2022; equities comprised 32% of the book fund value in February, 24% in March and 22% in April. Therefore, the College complied with the policy from February to April 2022.

HUMAN RESOURCES

In March 2022, the College hired Sharina Wynn as the Temporary Professional Practice Administrator (maternity leave coverage), providing support to both the Quality Assurance Program and the Practice Advisory Service. Sharina has over five years of experience working in the legal, healthcare and banking sectors. Sharina comes with an array of experience in administration, project management and customer service.

Zoell Richards, Registration Administrative Assistant (Summer Student) started on May 2, 2022. The Registration Summer Student position is partially funded by the Government of Canada, Youth Employment Strategy, Canada Summer Job initiative. Zoell is a first-year student studying Accounting and Human Resources. She will be assisting the Registration department with reviewing and entering data into the College's iMIS database and database upgrade testing.

EQUITY, DIVERSITY, INCLUSION AND BELONGING

The staff Equity, Diversity, Inclusion and Belonging Working Group (EDI-B WG) met on April 19 and May 9, 2022, and is expected to meet again in June. Over the last quarter, the EDI-B WG's activities have included:

- Discussing and updating the working group Terms of Reference.
- Discussing and finalizing the EDI-B WG Operational Workplan for 2022/2023

The group will make recommendations to the Governance Committee/Council on an EDI statement for the College. The EDI Lead will provide regular updates to Council and the public on the College's EDI work through the EDI webpage, Council management report and the annual report.

In April, Council members and staff were asked to complete an EDI-B Needs Assessment survey. The survey was designed by Dr. Javeed Sukhera to explore Council members and staff equity, diversity, inclusion and belonging learning needs. The information will help assess competencies while planning for future staff and council members education and training. The survey closed on May 3rd. The Council survey is included in the June council materials for consideration.

PROGRAM ADMINISTRATION

COMMUNICATIONS PROGRAM

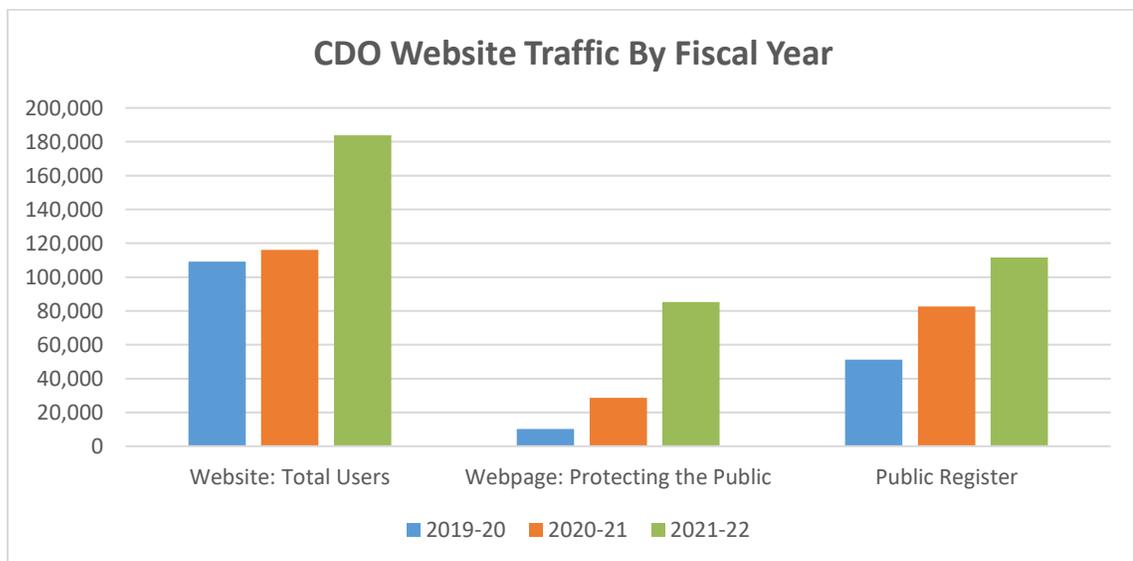
In alignment with Goal Two (*Communicate effectively to support the public’s understanding of the College’s mandate, services and resources*) of the CDO Strategic Plan 2020-24, the Communications Program actively supported a number of CDO programs and initiatives during fiscal Q4, in addition to leading the following initiatives:

PUBLIC AWARENESS CAMPAIGN

Fiscal year closes with substantial gains across target categories

At the close of fiscal year 2021-22, website traffic had increased substantially in three essential categories, compared to past fiscal years. This was due entirely to the success of the public awareness campaign, as the campaign targeted user increases specifically to the Public Protection webpage and the Public Register.

In addition, the CDO website continues to mark milestones in traffic overall. The 2021-22 fiscal year marked the first time in the history of the College that the CDO website passed one million pageviews: 1,237,303. During the 2021 calendar year, the website recorded 1,289,433 pageviews.



SOCIAL MEDIA

For the fiscal year 2021-22, the College’s social media metrics overall (Facebook, Twitter, LinkedIn and YouTube) were:

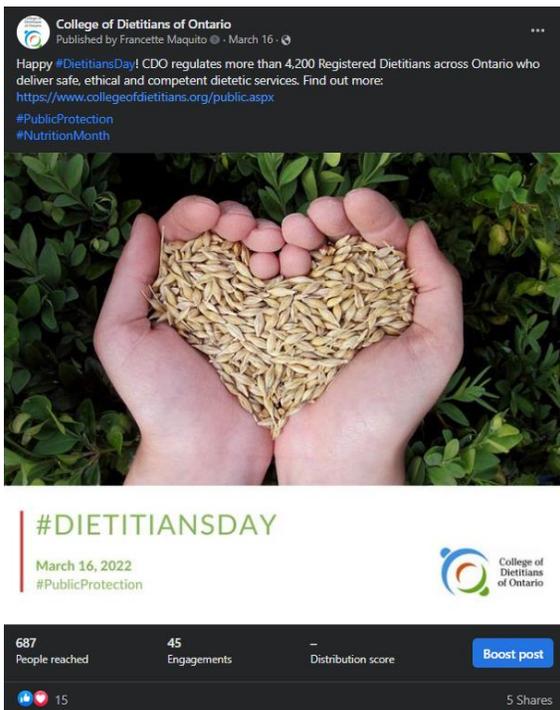
350,616 impressions (page and post impressions across all platforms)

860 total engagements (clicks + reactions + comments + shares across all platforms)

As part of a new social media strategy for the current fiscal year, communications has implemented more reporting metrics, an annual content calendar, key messages and social media hashtags. With a new staff member dedicated to social media, we will post consistent, branded content in both English and French.

At the end of fiscal 2020-21, the College had 620 followers on Twitter and 1,190 follows on Facebook. Current statistics, which shows the most growth on Facebook, are as follows:

Followers	End of March 2022	Current (as of May 31, 2022)
Facebook followers	1,297	1,394
Facebook page likes	1,180	1,192
Twitter followers	646	653
LinkedIn followers	700	812
YouTube subscribers	406	428



One of our top performing posts during fiscal Q4 was acknowledging Dietitians Day for the first time in the College’s history. Our social media strategy now includes recognizing days of importance, when relevant to the CDO mandate, our members and audience.

New issue of Regulation Matters published May 2022

The first 2022 issue of [Regulation Matters](#) was published in May and featured thought leadership, practice guidance, and College updates. It was led by a [Message from the Registrar and Executive Director](#) that recognized the contributions of Registered Dietitians during the COVID-19 pandemic, while introducing the concept of right tough regulation. It also included a new section provided brief updates on timely topics of interest to members.

The issue included five full-length articles from professional practice on a variety of important topics:

1. Keeping Up Quality Practice in Demanding Times. *This article provides suggestions on building individual capacity and capacity in the healthcare team to keep up with quality, client-centered care.*
2. Private Practice RDs: Do You Have Plans in Place To Manage Client Health Records? *This article provided updated obligations for dietitians who are health information custodians (HIC) and/or working with HICs.*
3. Professional Practice Question: What do I need to know about closing my private practice?
4. Professional Practice Question: What are my professional obligations for obtaining consent if the client's custody is in question? *This article is for dietitians who are faced with a client's custody agreement and not sure how to proceed.*
5. 5 Questions about the CDO Quality Assurance Program

This issue of Regulation Matters has been submitted for inclusion in newsletter of the Citizen Advisory Committee (CAG) for distribution to its members.

PROFESSIONAL PRACTICE PROGRAM – PRACTICE ADVISORY

Practice Advisory Service (PAS)

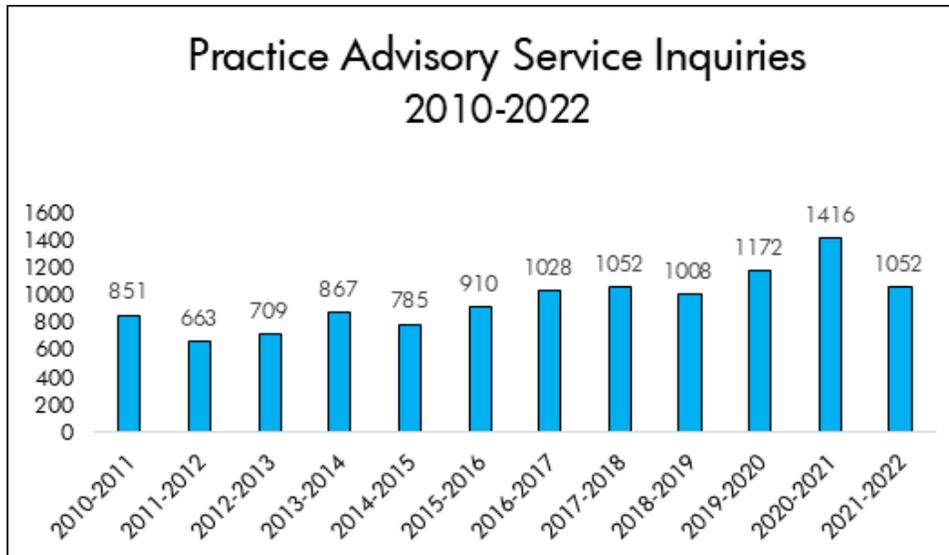
- 214 inquiries were received in Q4 (January-March 2022)
- Q1 (April-June 2022) was not reported in the June 2022 report due to an incomplete quarter
- Top areas of inquiry for Q4: College Requirements & Processes, Private Practice, Ethical Issues, Authority Mechanisms, Pandemic, and Find an RD.

Pandemic Inquiries for Q4 2021-2022

- 13 additional inquiries related to changes to directives, masking requirements and in-person care
- PPP monitored Ministry updates and provided content updates for the [COVID-19 Updates page](#)

Year-End Review - 2021-2022 PAS Inquiries

- Overall, 1,052 inquiries were received during fiscal 2021-2022, which have returned to pre-pandemic levels compared to the previous year (1,416 inquiries for 2020-2021). See the bar graph for a comparison of PAS inquiries from 2010-to 2022.



Q4 PAS Satisfaction Survey

The Q4 PAS Satisfaction Survey was disseminated to 105 members in April 2022. Feedback from respondents (10%) shows:

- 100% felt the information received was relevant and valuable to their dietetic practice.
- 91% felt their issue/question was sufficiently addressed.
- 91% were satisfied or very satisfied with the response they received from the PAS.
- 55% reported making changes to their dietetic practice (27% reported not applicable), and 100% said that the PAS confirmed their understanding of the laws, standards, and ethics.
- Since using the PAS, 82% have accessed the CDO (College of Dietitians of Ontario) website as a resource.
- 100% would use the PAS again, and 91% would recommend the Service to their colleagues.

Sample Comments from PAS Survey Respondents

- *The CDO Practice Advisors (PAs) provide as thorough responses as possible and ask clarifying questions. PAs listen and have their ears to the ground, sensitive to changing workforce demands and evolving practices.*
- *I felt confident in my decision-making around ethical practice issues. In addition, the advisor treated me with respect.*

Virtual Jurisprudence Sessions & Other Education

Q4 – January-March 2022

- Toronto Metropolitan University – 2 Jurisprudence Sessions held in March 2022 - 60 participants (dietetic students and RD).

Q1 – April-June 2022

- Brescia University College – Continued Competence for Dietetic Students - 32 estimated dietetic students from the Diploma in Dietetic Education and Practice Training

Q1 – Regulatory Talks Member Education (Reg Talks) Webinars: Insulin Position Statement & Practice Guidelines

- The College recently developed a [Position Statement and Practice Guidelines](#) for dietitians providing insulin dose adjustments.
- The Professional Practice Program will be holding two one-hour regulatory Reg Talks webinars about the Position and Practice Guidelines.
- The webinar will provide dietitians with an opportunity for shared dialogue, learning and practical scenarios.

Newsletter and Member News Updates

In addition to articles prepared for the recent issue of Regulation Matters, the following member news updates was provided:

- **Changes to Legislation for Dietitians Working in Long-Term Care** - [This article](#) updated dietitians working in Long-Term Care as the *Fixing Long Term Care Act, 2021* came into force in Ontario on April 11, 2022.
- **Infant Formula Shortage:** The College has notified dietitians of a Health Canada update regarding the shortage of infant formula for babies with food allergies. For full details, please refer to the [news item](#) that was shared with all registrants on June 1, 2022. To support ongoing information sharing, Health Canada is hosting weekly discussions for all [interested system partners](#). The Professional Practice Program is participating and will continue to monitor and provide updates to dietitians, as needed.
- **Monkeypox Virus:** Information related to [an order of the Chief Medical Officer of Ontario](#) for regulated health professional who work within the meaning of the Public Hospitals Act to provide information related to Monkeypox to Public Health Ontario.

PROFESSIONAL PRACTICE COMMITTEE (PPC)

Policy Work

Insulin Adjustments Position Statement:

- At the March Council Meeting, the Position Statement and Practice Guidelines: Scope of Practice – Insulin Dose Adjustments for Registered Dietitians in Ontario was approved for publication and dissemination.
- A public explanatory document, "For Clients Living with Diabetes: What to Expect when seeing a Dietitian for Insulin Dose Adjustments," has been developed to accompany the Position and Practice Guideline. The Professional Practice Committee will review at an upcoming meeting and recommend public consultation via the [Citizen Advisory Group](#) (CAG).

Review of Definition of Practising Dietetics

- As Council directed, College staff consulted with dietitians and other partners for feedback on the Policy Determining Currency Hours in Dietetic Practice for Registered Dietitians in Ontario, in principle, for consultation from April 13, 2022 – to May 30, 2022. Additionally, legal review was sought.
- Three hundred forty-nine participants (~8% of membership) responded to the online consultation survey. 98% of respondents were dietitians.
- After reading the Draft Policy on Determining Currency Hours for Dietitians in Ontario, 96% said yes, they understand the purpose of this Policy.
- This Policy is included in the June council materials for consideration and approval.

Social Media Standard and Guidelines:

- Legal counsel has reviewed a draft, and preliminary consultation with dietitians via focus groups is currently being planned.
- Two focus groups with ten dietitian members at each session will be held in July 2022. Dietitians are currently being recruited for focus group participation.

Draft Virtual Care Standards and Guidelines for Dietitians in Ontario

- Based on practice advisory inquiries, timeliness of this issue in the context of the COVID-19 pandemic, and an exponential increase in the use of this modality of practice, the Professional Practice Committee (PPC) is being asked to review and provide discussion and feedback on the draft copy of the *Draft Virtual Care Standards and Guidelines for Dietitians in Ontario* document at the June meeting.

PROFESSIONAL PRACTICE PROGRAM - QUALITY ASSURANCE

Self-Directed Learning (SDL) Tool

- The annual review of the 2021 SDL Tool has been completed. A total of 4,128 members completed the SDL Tool 2021.
- As noted in the CPMF commendable practice, the SDL Tool is a method for dietitians to self-assess risk and follow up on areas that need improvement.
- Forty-Seven members were required to attend the Mandatory Webinar (May 25, 26 & July 12).

	Total	Retired/ Resigned/ Signed VUT	Suspended due to non- payment	Automatic & Late	Total Reviewed
Total Reviewed	328	(9)	(2)	(2)	315
Required to Resubmit	157	(1)			156 (50%)
Required to Attend Mandatory Webinar	47 (15%)				

Practicing fewer than 500 hours in 3 years

- Twenty-three members submitted their learning diaries and were assessed to determine if the learning activities reflected application to dietetics and whether the members have maintained their competency to practice.
- Eighteen learning diaries were deemed sufficient. Five learning diaries were insufficient.

Declared fewer than 500 hours in 2021	Declared in the previous year/s	New this year (2021)	Total
Total assessed in 2021 (submitted Learning Diary)	14	9	23
Sufficient Learning Diaries	12	6	18
Insufficient Learning Diaries	2	3	5
Signed Voluntary Undertaking (VUT)*		2	2
Chose to Undergo a Competency Assessment	1	1	2
An appeal regarding QAC Decision	1		1

**VUT (Voluntary Undertaking) - Member undertakes not to practice dietetics until the Quality Assurance Committee has assessed them as having current knowledge, skill, and judgment, including completing any upgrading requested by the Committee.*

Jurisprudence Knowledge & Assessment Tool (JKAT)

- The JKAT is an online knowledge acquisition and assessment tool designed to improve registered dietitians' knowledge and application of laws, standards, guidelines, and ethics relevant to the profession of dietetics in Ontario.
- The 2022 JKAT is underway. Members will have until August 8, 2022 (4 months) to complete instead of three months due to the pandemic and achieve a 90% score. Eight hundred twenty-three members are participating in the 2022 JKAT.
- As of May 27, 2022, 199 or 24% of participants completed the JKAT.

Peer and Practice Assessments

- The Peer and Practice Assessments (PPA) 2022 cohort selection as amended in Policy 4-25: Peer & Practice Assessment - Procedure was postponed until summer or later this year.
- The delay of PPA presents a minimal risk to the public.
- PPA postponement is allowing dietitians to focus on the necessary dietetic and redeployed health services required to alleviate the effects of COVID-19 and lessen any burden of anxiety and stress on dietitians, colleagues, and clients/patients.
- We are exploring the feasibility of an upgrade for the Peer and Practice Assessments. This exploration is timely to align with the right touch regulation and ensure that the assessment process uses evidence-informed strategies to support the design, development, delivery, and evaluation of quality assurance tools.

STANDARDS AND COMPLIANCE PROGRAM

Inquiries, Complaints and Reports Committee (ICRC) Quarterly Stats for March 1, 2022 to May 31, 2022

7 new matters received by the College of Dietitians of Ontario

- 1 Complaint
- 6 Reports
- 0 Referrals from the Quality Assurance Committee
- 0 Inquiries

4 matters closed at the preliminary review stage

- Registrar did not refer 4 reports to the Inquiries, Complaints and Reports Committee after making preliminary inquiries.

4 matters closed by the Inquiries, Complaints and Reports Committee

- 3 Complaints: 1 no further action taken; 1 oral caution issued; 1 specified continuing education and remediation program (SCERP) & oral caution issued
- 1 Report: 1 no further action taken
- Outcomes grouped by risk: 2 No or Minimal Risk; 0 Low Risk; 2 Moderate Risk; 0 High Risk
 - *Average time for disposal: 430.7 days for all matters; 473.3 days for complaints only*
 - *Note: In accordance with the CPMF specifications, time for disposal is now calculated using the date received for Complaints and date the ICRC appointed an investigator for Reports and QA Referrals; Reports and QA Referrals where the ICRC does not appoint an investigator are omitted.*

30 matters currently open

- 3 Complaints:
 - 1 complaint still in initial exchange of correspondence
 - 1 investigation ongoing after investigator appointed
 - 1 decision reached in principle that will be finalized shortly
- 11 Reports:
 - 3 reports still in the preliminary stage of inquiries
 - 7 ongoing investigations after investigators appointed
 - 1 investigation completed and returning to panel shortly
- 16 Referrals from the Quality Assurance Committee:
 - 1 new referral to be reviewed by panel
 - 7 referrals closed without investigator appointed; closure letters will be sent shortly
 - 6 ongoing investigations after investigators appointed
 - 2 decisions reached in principle that will be finalized shortly
- 0 Inquiries
 - *Average time matters have been open: 164.9 days for all matters; 166 days for complaints only*
 - *Note: In accordance with the CPMF specifications, length of time a matter has been open is now based on date received for Complaints and date the ICRC appointed an investigator for Reports and QA Referrals; Reports and QA Referrals that are still under preliminary review are omitted.*

3 complaint decisions reviewed or under review by the Health Professions Appeal and Review Board

- 1 request for review was withdrawn by the appellant
- 2 initial case conferences scheduled

REGISTRATION PROGRAM

Canadian Dietetic Registration Examination (CDRE)

- In Ontario, 127 candidates wrote the May 19th and 20th, 2022 CDRE via an online remote-proctored process.
- 5 accommodation requests were granted by the national CDRE Accommodations Committee, consisting of additional writing time and/or extra break time.
- Results will be disseminated by mid-July 2022.

Prior Learning Assessment and Recognition (PLAR) Process

Knowledge and Competence Assessment Tool (KCAT):

- The annual KCAT was administered on February 23, 2022, via a remotely proctored process with the Touchstone Institute. A total of 36 candidates took the 2022 KCAT.
- Results are as follows:
 - *15 obtained a Level I result (sufficient knowledge competence)*
 - 10 Level I for PLAR
 - 5 Level I for demonstrating academic currency after completing an accredited academic program > 3 years (eligible to apply to Canadian or US accredited programs)
 - *13 Level II (partial knowledge and competence)*
 - 12 Level II for PLAR (2 candidate's 2nd attempts)
 - 1 Level II for return to practise 10+ years
 - All Level II candidates are eligible to retake the KCAT or apply to the bridging program at Toronto Metropolitan University
 - *8 Level III (did not demonstrate sufficient knowledge and competence)*
 - 7 candidates are eligible to retake KCAT
 - 1 is ineligible to retake the KCAT due to 3rd and final attempt
- As part of the College's work to incorporate the 2020 Integrated Competencies for Dietetic Education and Practice into its processes:
 - The KCAT Blueprinting session to map the KCAT to the 2020 Integrated Competences for Dietetic Education and Practice (ICDEP) was held on May 10th and 11th, 2022. The session included eight dietitian subject matter experts (SMEs) and was facilitated by the Touchstone Institute.
 - The KCAT Item Writing session to write new question content based on the 2020 ICDEP will be held June 14-17, 2022. The session will include nine SMEs and will be facilitated by the Touchstone Institute.
- The next Performance Based Assessment (PBA) will be administered on July 27, 2022, via a hybrid process offering candidates a choice to write online via a remotely proctored process or in-person.

Office of the Fairness Commissioner (OFC)

- In response to a request from the OFC, the College provided information regarding how missing documentation (e.g., authorization to work in Canada) may delay an applicant's registration process.
- On May 18, 2022, the College met with OFC staff to provide information regarding the upcoming changes to the accreditation process for dietetic education programs in Canada. The OFC commended the College on its low-risk rating under their Risk Informed Compliance

Framework, and the improved access for applicants to take both the CDRE and the PLAR exams remotely.

- In early June 2022, the College responded to the OFC's consultation on the proposed revisions to the 2021 Fair Registration Practices Reporting Tool, which all regulators will be required to submit to the OFC in the fall of 2022.

April 4, 2022 and May 30, 2022 Registration Committee Meetings

- Three application files were reviewed by panels of the Registration Committee.
- *Policy 2-25: Suitability to Practise for Applicants* was established to articulate how the College carries out its verification of good character and conduct process for applicants.
- *Policy 3-30: Assessing Currency for Applicants* was revised to recognize certain graduate studies along with a learning diary submission to demonstrate currency for return to practise applicants.

INFORMATION TECHNOLOGY

The College is in the process of upgrading its current database version, which is on schedule for a planned launch date of June 20th, 2022.

SECTION 2 ISSUES TRACKING

Council Election Results

Ann Watt was acclaimed in District 1 (Three-year term). Denis Tsang and Donna Hennyey were elected on April 21, 2022, in District 3 (Three-year terms).

Legislative Changes

Bill 106 – *An Act to enact two Acts and amend various other Acts*, received Royal Assent on April 14, 2022. Amendments to the Health Professions Procedural Code under the *Regulated Health Professions Act, 1991*, and accompanying regulations, will have the following implications for the College's Registration Program, if approved:

- **Language Proficiency:** Health regulatory Colleges would have to accept proof of completion of a language test accepted by Immigration, Refugees and Citizenship Canada for immigration purposes (with results satisfactory to the regulated profession) as proof of English or French language proficiency. Regulated professions may also accept (but not require) other tests or demonstrations of proficiency of their choosing.

Language test results that are valid at the time an application is received will be deemed to remain valid for the duration of the time it takes an applicant to complete the registration process.

- **Timely Registration Decisions:** The proposed regulation would prescribe the following time-limits to make and communicate registration decisions with respect to domestic labour mobility applicants. Initial registration decisions of the Registrar be made within 30 business days of receiving a complete application. Decisions by panels of the Registration Committee be made within 10 business days of the deadline for receiving an applicant's submission.
- **Emergency Class of Registration:** Requiring Councils of Colleges to make regulations establishing an Emergency Class of Registration that meets the requirements set out in the regulations; and
- **Canadian Experience:** Prohibiting Canadian experience as a qualification for registration, subject to any exemptions provided for in the regulations.

Pending the specific regulations, additional resources may be required such as legal advice to establish a new Emergency Class of Registration and ad-hoc Registration Committee meetings.

The College will be making a submission to the consultation by the deadline of June 10.

College Performance Measurement Framework (CPMF) Report

The CDO's second submission of the CPMF report was published on the [CDO website](#) on March 31, 2022.

Health Profession Regulators of Ontario (HPRO)

HPRO met on June 1 and received a presentation from [David Wright](#), Chair of the new Ontario Physicians and Surgeons Discipline Tribunal ([OPSDT](#)). The OPSDT (formerly known as the Discipline Committee) is an independent, administrative tribunal that adjudicates allegations of professional misconduct or incompetence of Ontario physicians made by the College of Physicians and Surgeons of Ontario. The Tribunal is made up of experienced adjudicators in addition to physicians and non-physician members of the public.

The highlights of HPRO's work for 2021 – 2022 is available [here](#).

Regulatory Environment Scanning

A number of governance reviews have been completed recently, including at the Ontario College of [Social Workers and Social Service Workers](#), by Deanna Williams and Harry Cayton (May 2022) and the [BC Law Society](#) by Harry Cayton (Nov 2021). Both reports assess the regulators against the Standards of Good Governance.

SECTION 3 OTHER INFORMATION ITEMS

5.1 Management Report

5.2 Statement of Earnings Fiscal 2022

5.3 Capital Asset Purchases Report Fiscal 2022

COLLEGE OF DIETITIANS OF ONTARIO
 CAPITAL ASSET PURCHASES REPORT
 FOR THE FISCAL YEAR ENDED MARCH 31, 2022

Council attachment 5.2

	Budget 2021/2022	Actual Purchases April/21 - Mar/22	Description
<u>I - Computer equipment (hardware) replacements</u>			
1. 3 Laptops (3 ProBook 640 laptops x \$1,000 x 1.13) + 4 monitors	4,290	5,386	3 laptops + 2 docking stations + 6 monitors
		305	1 tablet for Councillor
		1,066	4 monitors and misc equipment for new employees
Subtotal (Computer Hardware)	4,290	6,757	
<u>II - Leasehold Improvements</u>			
Changes to Office Space	-	-	
Subtotal (Leasehold Improvements)	-	-	
<u>III - Office equipment</u>			
Office furniture	-	-	
Subtotal (Office Furniture & Equipment)	-	-	
<u>IV - Non-iMIS Software</u>			
MS Office for new laptops (3 x \$150 x 1.13)	509	-	
Subtotal (Computer Software - non-iMIS)	509	-	
<u>V - iMIS: Visual Antidote Programming Costs (Quote - Use estimate of High Hours)</u>			
Gen Admin - Accounting - Online Claims	3,650	6,334	Additional changes were requested to automate online claims further.
Gen Admin - Refresh DEV database	2,882	961	
Gen Admin - Server Improvement	1,921	-	This project has been deferred to Fiscal 2023.
Gen Admin - PAP Workshops	961	816	
Gen Admin - Public Register	4,803	624	Contingency hours budgeted since changes to the Public Register are difficult to predict.
Registration - Professional Corporation Dashboard	3,842	2,689	
Registration - Renewal	7,300	5,720	
Subtotal (Computer Software - iMIS)	25,357	17,145	
Total additions anticipated	30,156		
Capital Assets Purchases Budget F'2021-2022	\$ 30,000	23,902	

Purchases of computer equipment were reasonable given the number of changes in staffing during the year.

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at March 31, 2022
FISCAL YEAR ENDED MARCH 31, 2022

Council attachment 5.3

	12 Months Ended			Comparative 12 Month Actuals Mar 31, 2021	Mar 2022 vs Mar 2021 % Variance
	Actuals Mar 31 2022	Total Annual Budget Mar 31 2022	Actual vs Budget % Variance		
REVENUE					
Membership & Other Fees (1)	\$ 2,920,497	\$ 2,871,935	2%	\$ 2,809,663	4%
Interest & Dividends (2)	193,286	138,000	40%	161,445	20%
Realized Gain/(Loss) on Sale of Investments (3)	96,849	-		140,462	-
Temporary Wage Subsidy (Fiscal 2021 only)				13,353	
TOTAL REVENUE	3,210,632	3,009,935	7%	3,124,923	3%
EXPENSES (Operating)					
General & Administrative (4)	2,353,836	2,334,620	-1%	2,011,310	-17%
Registration Program (5)	147,003	172,527	15%	115,556	-27%
Quality Assurance Program (6)	47,697	150,314	68%	44,001	-8%
Practice Advisory Program (7)	11,494	50,906	77%	3,665	
Patient Relations Program (8)	-	1,125	100%	-	
Standards & Compliance Program (9)	238,353	147,310	-62%	151,639	-57%
TOTAL EXPENSES BEFORE AMT'N	2,798,383	2,856,801	2%	2,326,172	-20%
EXCESS REVENUE OVER EXPENSES (EXPENSES OVER REVENUE)	412,248	153,133		798,750	-48%
<i>Less: Non-cash expenses:</i>					
Capital Asset Fund - Amortization (10)	(68,138)	(65,000)	-5%	(76,279)	
Unrealized FV appreciation (depreciation) of Investments (3)	(175,457)			609,152	
SURPLUS	168,653	88,133	91%	1,331,625	
FUND BALANCES - beginning of year	3,728,079	2,846,454		2,396,454	
FUND BALANCES - March 31, 2022	\$ 3,896,732	\$ 2,934,587		\$ 3,728,079	

NOTES and HIGHLIGHTS:

REVENUE (actual revenues were 7% higher than the budget)

- Revenues from members** in all categories generated **\$2,920,497** in Fiscal 2022. This amount was **in line with the budget** and **4% higher than the prior year**. This is reasonable since fees remained constant at \$641 per member in 2021 and 2022, but membership increased by **3%**. Membership fees are being reported on an accrual basis to recognize revenues which were paid in Fiscal 2021, but earned in Fiscal 2022 (from April 1 to October 31, 2021).
- Investment income (interest & dividends)** of **\$193,286** was received from long term investments held at RBC Dominion Securities and from an operating bank account with Scotiabank; this income is **40% higher than the budget** and **20% higher than the prior year**. The increase can be attributed to higher dividend income received from investments in equity holdings.
- Unrealized depreciation** in the fair value of investments was **\$175,457** (on unsold investments). The College also had a **Realized Gain on Sale of Investments** of **\$96,849**.

Due to the unpredictable nature of the market, gains and losses on sales of investments and the appreciation or depreciation of unsold investments cannot be budgeted for. The net impact of the investments was to **add \$114,677 to the College's surplus**.

EXPENSES (actual expenses were in line with the budget - variance less than 5%)

- Overall, **General & Administrative** expenses were **in line with the budget (variance less than 5% from budget)**:

Council costs were **19% less than budget** since some in-person meetings were budgeted for (including travel, accommodation and food) but all were virtual. In addition to regular Council meetings held virtually in June, September, December and March, there were a number of special meetings to discuss the appointment of the Interim Registrar and the Permanent Registrar. Council training was held as planned, but cost \$10,000 less than budget.

Executive Committee expenses were **44% less than budget** since some in-person meetings were budgeted for but all were virtual; in addition to 12 regular meetings, 15 meetings were held by the Registrar Recruitment Committee, to facilitate the hiring of the Interim and Permanent Registrar at the College.

Other **General & Administrative Expenses** such as **Membership Dues, Rent, Telephone & Internet and Insurance** were **in line with the budget**.

Salaries & benefits were **higher than budget** due to the unexpected costs of staff turnover, additions to the staff complement and maternity leave replacements during the year. **Computer Expenses** were **higher than budget** due to an IT vulnerability scan and new software licenses which were not known at the time of budgeting.

Legal Fees for employment law matters were **higher than budget** since more legal advice around HR matters such as maternity leave, offers of employment and the Registrars' contracts was required due to turnover of the Registrar and staff positions. Legal advice was also required for several operational policies and procedures.

Underspending occurred in a number of areas, including **Annual Report, Office Expenses, Professional Fees and Contracted Services**. Work on the Annual Report was deferred to early Fiscal 2023. The project to scan documents held offsite will occur when staff return to the office. Professional fees were required for the placement of the Registrars and the Communications and HR Manager positions, for a staff facilitation session and to review staff job descriptions. A consultant was also hired to assess the processes related to the database. These costs were less than budget.

- The **Registration Program** expenses were **15% less than budget**. Credit card fees, which are a large portion of administrative costs, were in line with the budget. Work related to mapping new dietetic competencies to U.S. and Australian competencies was started during the year. The scanning and shredding of files will be deferred to

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at March 31, 2022
FISCAL YEAR ENDED MARCH 31, 2022

Council attachment 5.3

Fiscal 2023 as part of a larger records and data management project.

\$44,770 was budgeted for administration and maintenance costs of the Performance Based Assessment (PBA) and the Knowledge and Competence and Assessment Tool (KCAT). The PBA was administered remotely with an external vendor in December 2021; PBA scoring, arbitration and psychometric analysis were completed as planned by the end of the fiscal year. Costs to administer the PBA were \$38,928 and were offset by fees from writers. The cost to maintain and administer the KCAT will occur in early Fiscal 2023. Registration Committee expenses were **4% higher than budget**, due to more consulting and legal costs on applicant files presented to the Committee.

- (6) The Quality Assurance Program expenses were **68% less than budget** since the major work to revise the Peer & Practice Assessment (PPA) processes to move the assessment to an online, paperless platform will be done in Fiscal 2023. Phase 1 was completed in Fiscal 2022. Modifications to the Jurisprudence Knowledge Assessment Tool (JKAT) will also occur in Fiscal 2023. Related computer expenses and assessor training will occur in Fiscal 2023. EDI training for assessors was completed, as was the work of the assessors for the Learning Diaries. QA Committee expenses were **48% less than budget**; this is due to the fact that some in-person meetings were budgeted for, but all were held virtually.
- (7) The Practice Advisory Program expenses were **77% less than budget** since the fall workshops were virtual and a Town Hall meeting, work on cultural competence and the production of videos for members were deferred. Staff development sessions were virtual as well. \$4,746 was budgeted for legal fees; actual legal fees were \$5,434.

Professional Practice Committee held 2 virtual meetings. Focus groups with dietitians who are Subject Matter Experts on policy development will be held for policy work in Fiscal 2023.

- (8) The Patient Relations Program incurred no expenses. This program now consists of PR Committee meetings alone. All program administration expenses have been moved to General Administration - Communication Initiatives. The Committee was underspent because it held no meetings. Minimal expenses were budgeted this year due to a planned review and revision of the Committee's terms of reference.

- (9) Overall, Standards & Compliance Program expenses were **62% higher than budget** since the College had a higher than usual number of complex matters going to ICRC that required investigations, case management and legal fees. It is difficult to predict and budget for the total costs of investigations from year to year.

\$40,000 was budgeted for Investigations of members (conducted by an external investigator) and \$65,000 for Case Management (conducted by an external manager) of complaints against members. \$78,910 was spent on Investigations and \$94,781 was spent on Case Management.

The Discipline Committee was underspent because it held no meetings; ICRC was underspent since all meetings were virtual. \$25,000 was budgeted for Legal Fees for matters going to ICRC; actual Legal Fees were significantly higher at \$48,530.

\$6,000 was budgeted for subject matter experts to conduct interviews and/or provide opinions/reports to the investigator for ICRC; actual costs were \$2,037.

No funds were budgeted for, or spent, on a Hearing. However, \$7,790 was paid for pre-hearing legal fees for a member. A Notice of Hearing has been posted on the CDO website, but the actual hearing did not occur in Fiscal 2022.

- (10) Amortization expense represents the cost of the decline in value of capital asset purchases over time.

Council Meeting Evaluation Results – March 25, 2022

1) Every member of Council had an opportunity to express their opinion.

Respondents: 11

Choice	Percentage	Count
All of the time	81.82%	9
Most of the Time	18.18%	2
Some of the Time	0.00%	0
None of the Time	0.00%	0
Total	100%	11

#	Please add a comment if you selected Most of the Time, Some of the Time or None of the Time.
1	I do suggest using hands up feature on our zoom meetings as adding in chat is not as efficient - in my opinion - i can 'deal' (4 fingers) with whatever the final decision is.
2	A few members take more time than the other and or do not stick to the point in discussion.

2) Active listening was demonstrated at all times.

Respondents: 11

Choice	Percentage	Count
Yes	100.00%	11
No	0.00%	0
Total	100%	11

Additional Comments:

3) No member dominated the discussion.

Respondents: 11

Choice	Percentage	Count	
Strongly Agree	27.27%	3	
Agree	63.64%	7	
Disagree	9.09%	1	
Strongly disagree	0.00%	0	
Total	100%	11	

Additional Comments:

1 A few member dominated the discussion

4) Time was efficiently managed during the meeting.

Respondents: 11

Choice	Percentage	Count	
All of the Time	90.91%	10	
Most of the Time	9.09%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

1 Members should be encouraged to stay at the topic being discussed.

5) Decisions made were summarized after each agenda item.

Respondents: 11

Choice	Percentage	Count	
All of the Time	100.00%	11	
Most of the Time	0.00%	0	

Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

6) Members of Council actively participated in the decision-making process.

Respondents: 11

Choice	Percentage	Count	
All of the Time	100.00%	11	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

7) Council demonstrated an ability to make the best decisions possible.

Respondents: 11

Choice	Percentage	Count	
All of the Time	90.91%	10	
Most of the Time	9.09%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

1 A few experienced member lead the discussion and or interpret the discussion

8) Climate was respectful.

Respondents: 11

Choice	Percentage	Count	
All of the Time	100.00%	11	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

9) In your opinion, were operational issues discussed inappropriately?

Respondents: 11

Choice	Percentage	Count	
Yes	0.00%	0	
No	100.00%	11	
Total	100%	11	

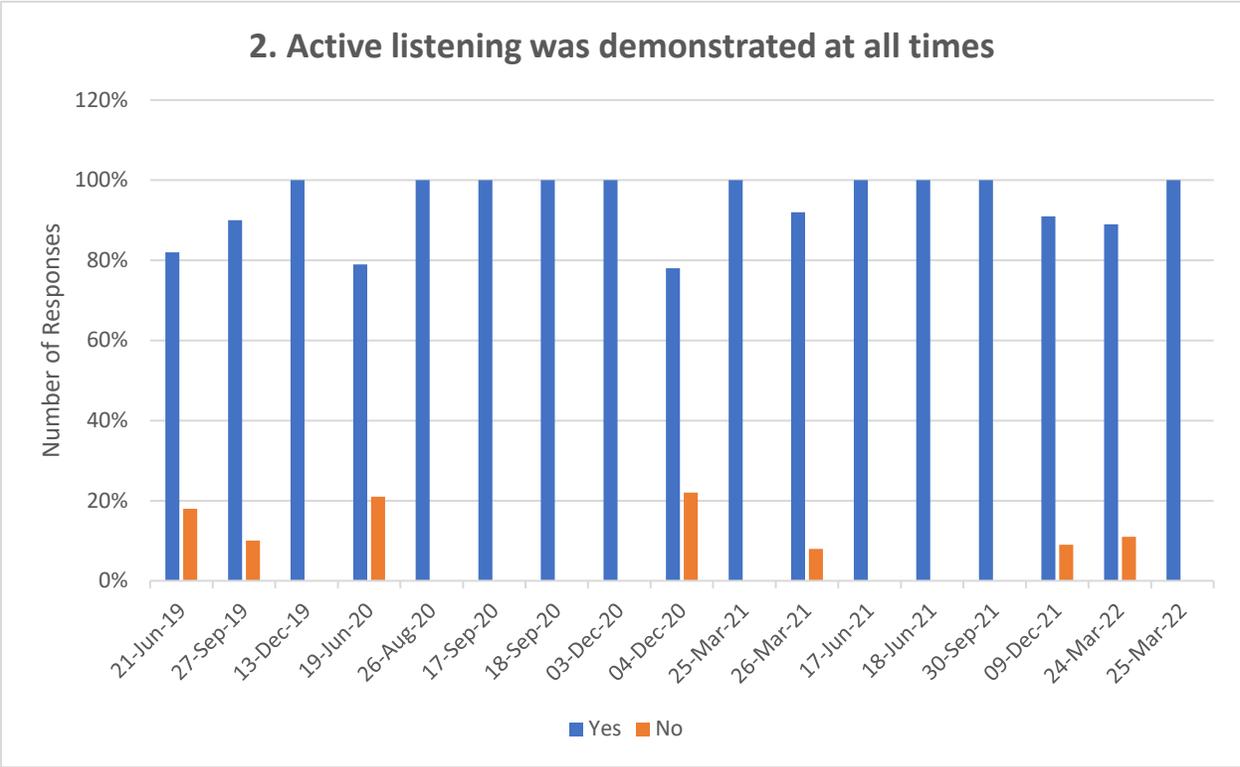
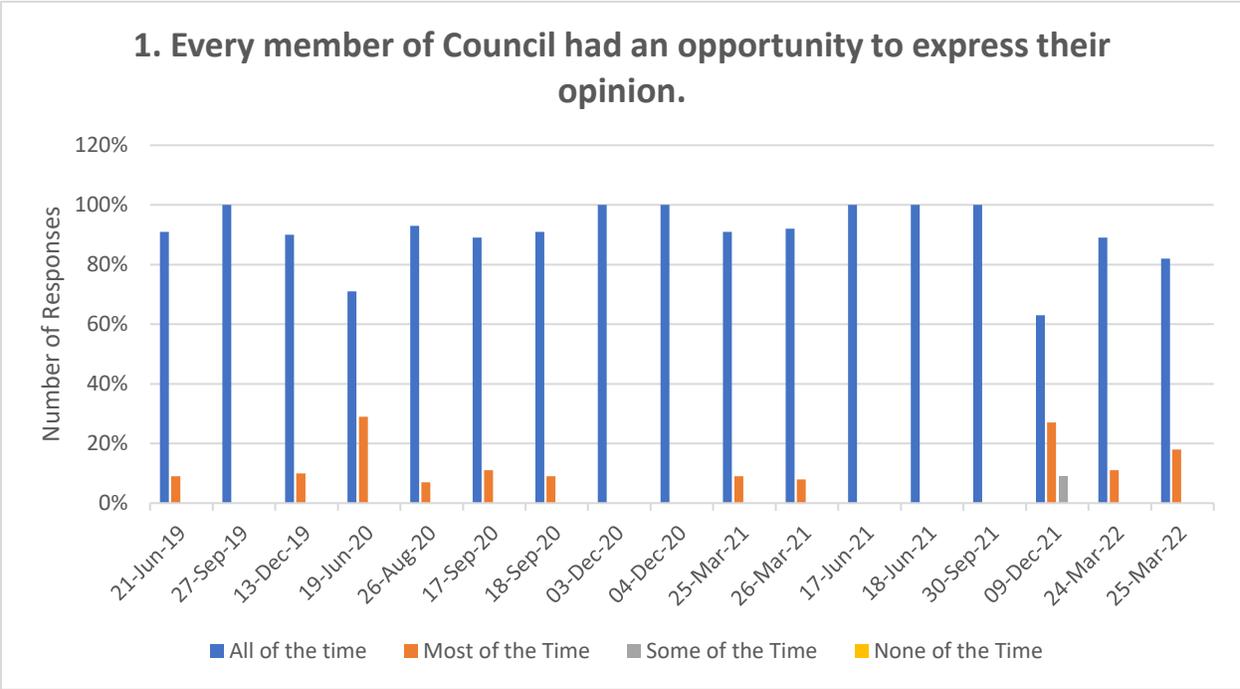
Additional Comments:

10) Additional Remarks:

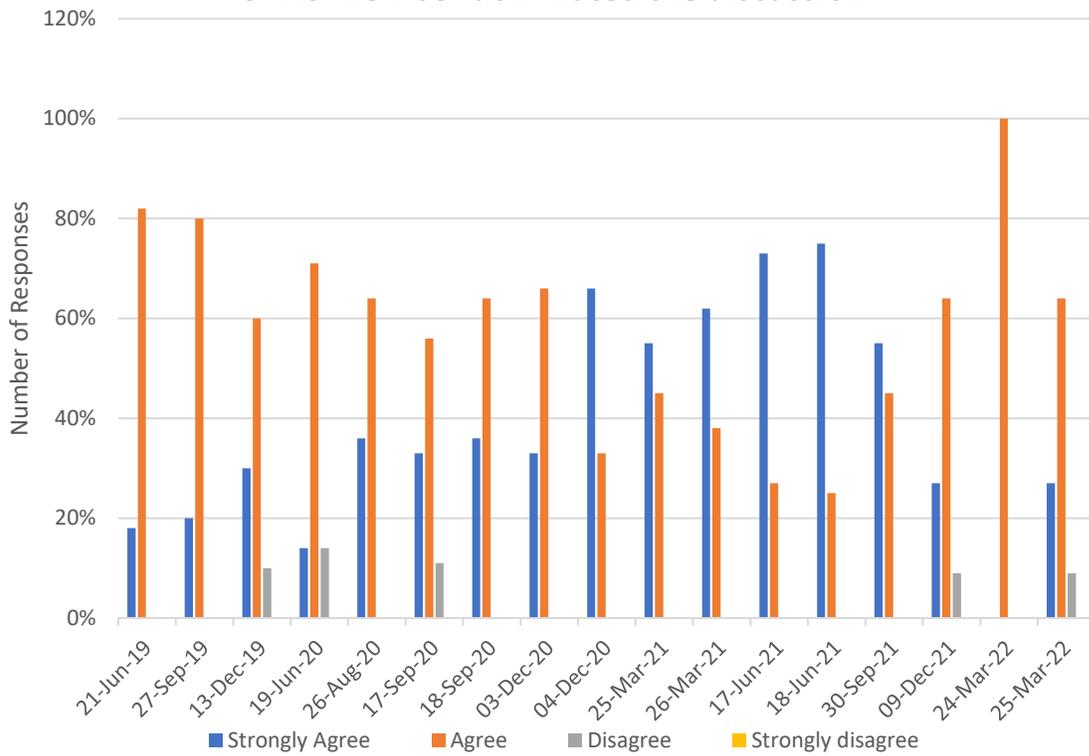
Respondents: 4

#	10) Additional Remarks:
1	very productive council Meeting. - I left feeling we had accomplished a great lot in very important areas
2	Chat worked much better with flexibilities we added to it.
3	Much better flow today with respect to speaking order and chat box
4	The council meeting is well run just a few members should be a little more considerate of the time so that other attendee should get fair time to participate

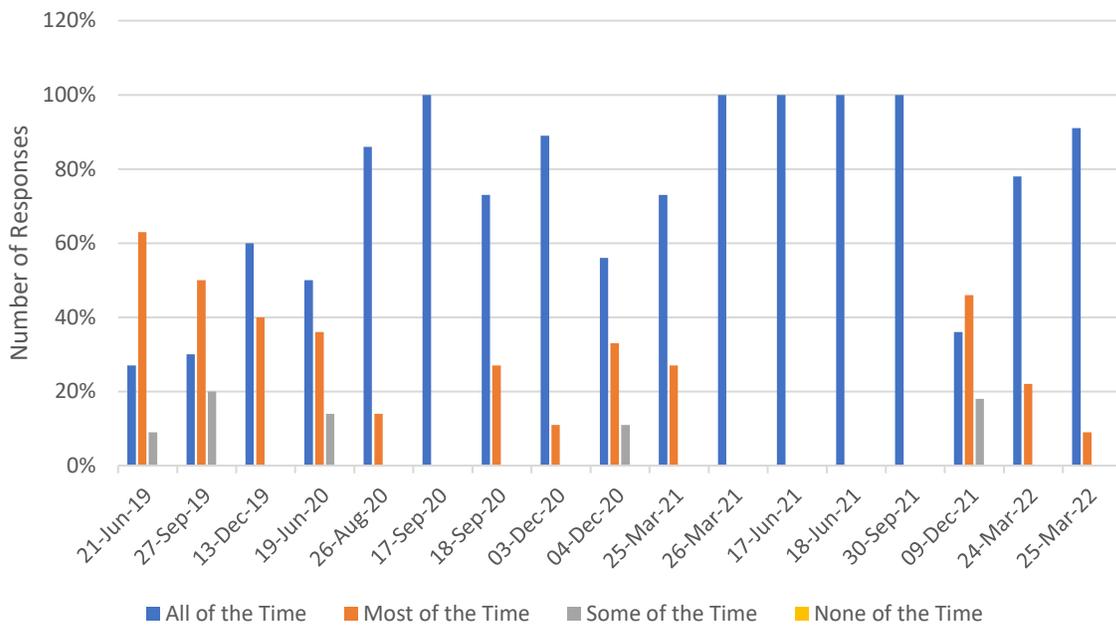
Council Meeting Evaluation Trends – June Council Meeting 2022



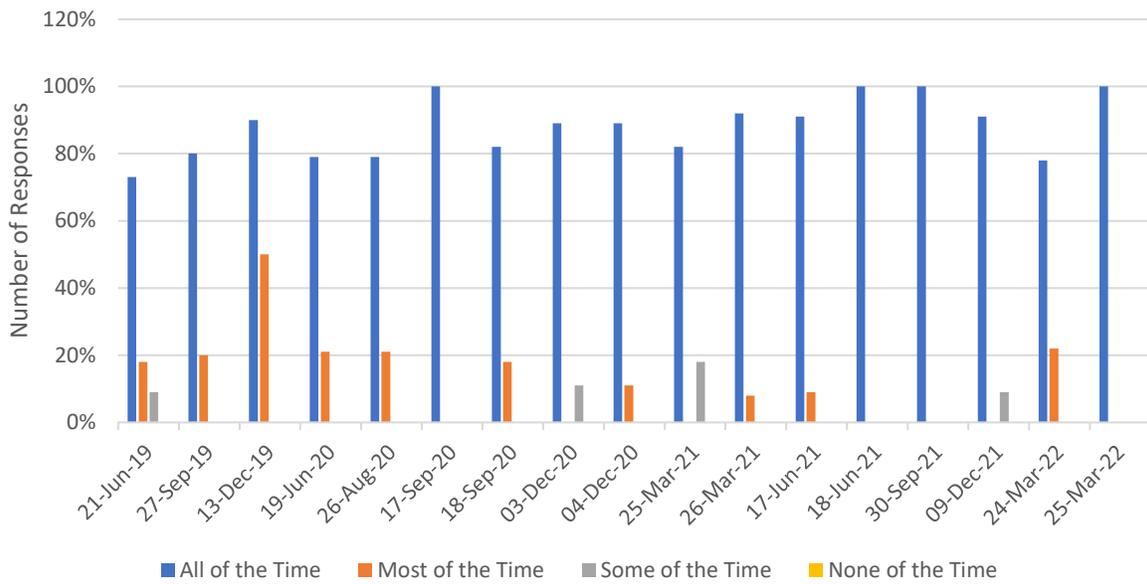
3. No member dominated the discussion



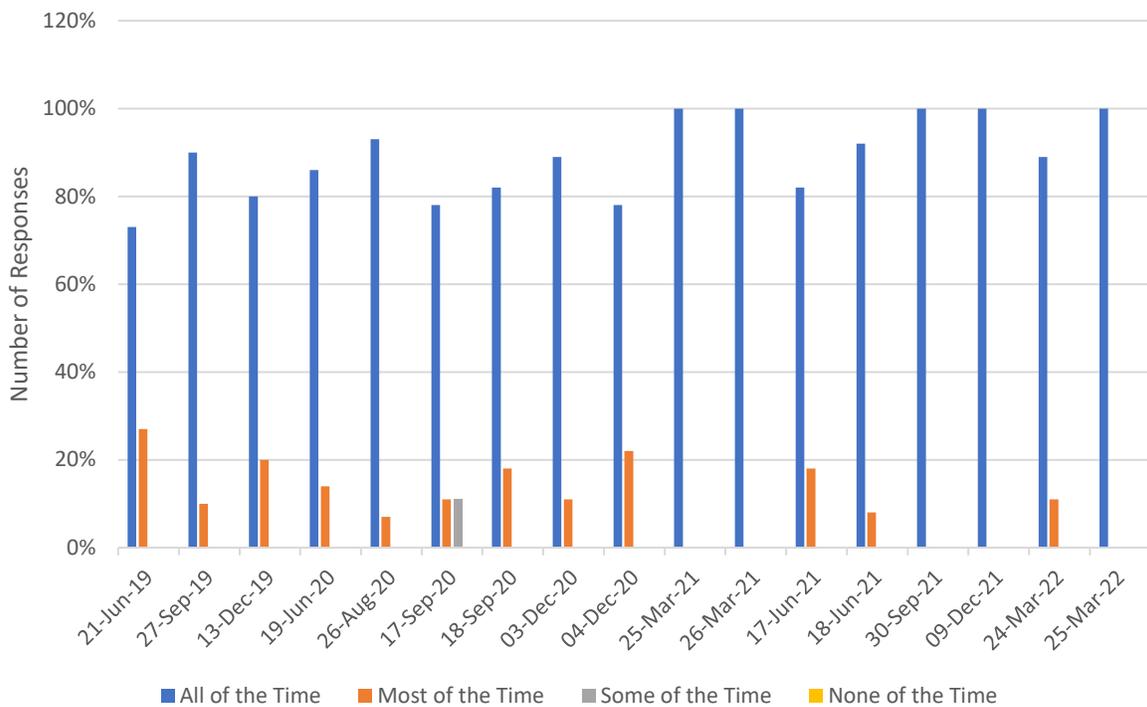
4. Time was efficiently managed during the meeting



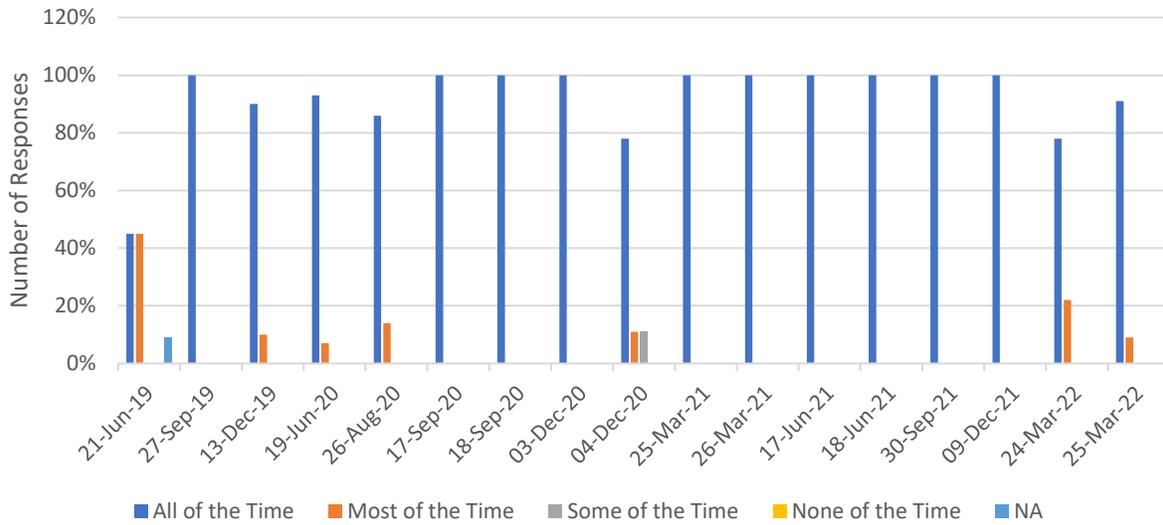
5. Decisions made were summarized after each agenda item



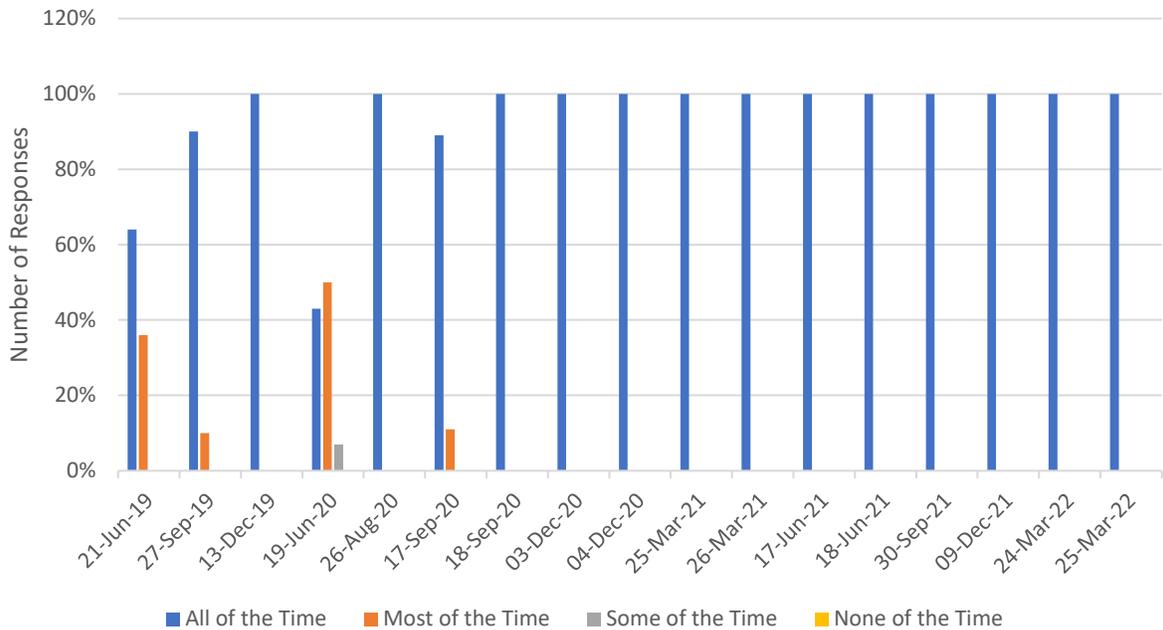
6. Members of Council actively participated in the decision-making process



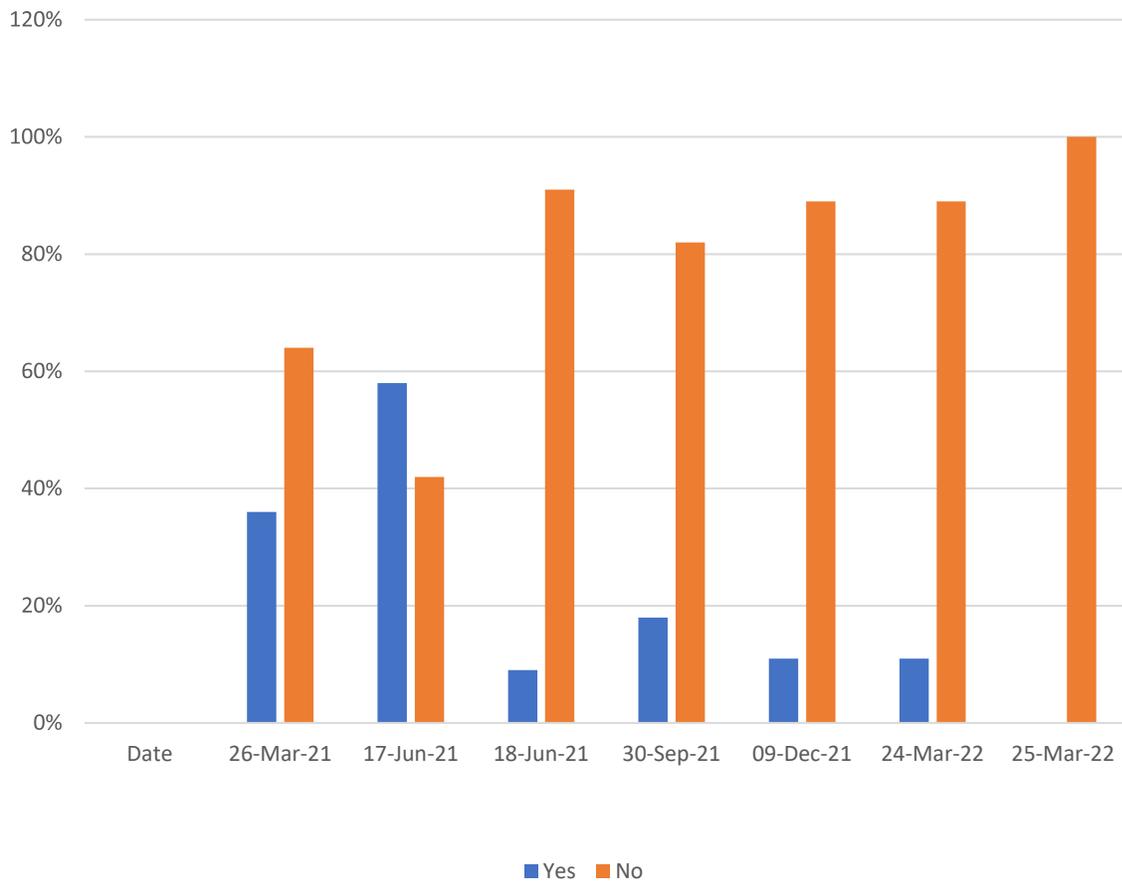
7. Council demonstrated an ability to make the best decisions possible



8. Climate was respectful



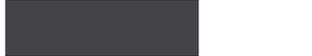
9. In your opinion, were operational issues discussed inappropriately?



2022 Annual Council Performance Evaluation Results

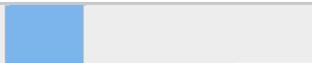
1) This is my first year on Council (If yes, answer Question 2 and 3, if no, proceed to question #4).

Respondents: 8

Choice	Percentage	Count	
Yes	37.50%	3	
No	62.50%	5	
Total	100%	8	

2) After the orientation process, I felt prepared to exercise my role on Council.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	25.00%	1	
Agree	75.00%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

3) What I found most useful to help me understand my role on Council was:

Respondents: 4

- # 3) What I found most useful to help me understand my role on Council was:
- 1 reviews
- 2 Governance manual and other documents on Box
- 3 Taking the orientation and then touching base with other members regarding various questions or aspects.

- 4 The governance manual and talking with other members during/after the first few meetings

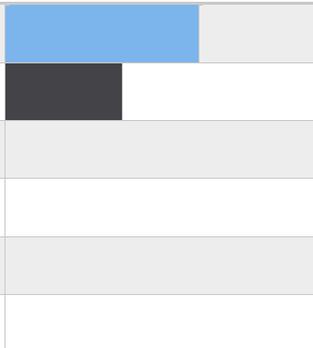
4) At Council meetings, the strategic oversight and public protection mandate of Council were clearly articulated in:

Respondents: 8

	All of the time	Most of the time	Some of the time	None of the time	NA	Total
Structure of the meeting agenda	62.50% (5)	37.50% (3)	0.00% (0)	0.00% (0)	0.00% (0)	100% (8)
Council discussion	87.50% (7)	12.50% (1)	0.00% (0)	0.00% (0)	0.00% (0)	100% (8)
Council decision making	87.50% (7)	12.50% (1)	0.00% (0)	0.00% (0)	0.00% (0)	100% (8)

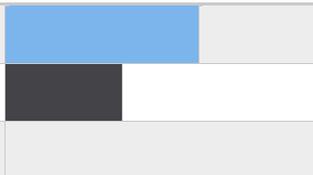
5) Council has the information needed to oversee how the College is meeting its goals and objectives.

Respondents: 8

Choice	Percentage	Count	
All of the time	62.50%	5	
Most of the Time	37.50%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

6) Council has the right information needed to monitor the finances of the College.

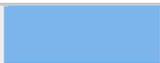
Respondents: 8

Choice	Percentage	Count	
Strongly agree	62.50%	5	
Agree	37.50%	3	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	8	

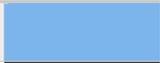
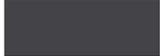
7) Questions and discussions at Council meetings added value beyond the information provided in writing to support effective decision making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

8) Council discussion focused on policy and outcomes rather than management and administrative processes.

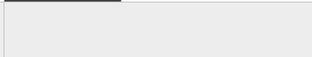
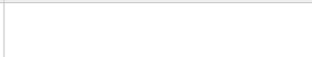
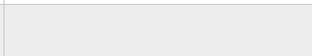
Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

9) From my perspective, decisions were based on evidence and information rather than opinion.

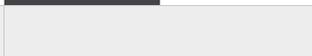
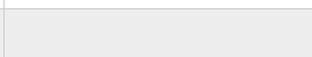
Respondents: 8

Choice	Percentage	Count	
All of the Time	62.50%	5	

Most of the Time	37.50%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

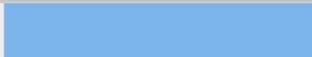
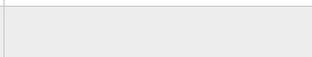
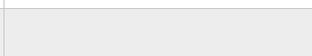
10) Reports and documents were sufficient to support informed discussions and effective decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

11) Discussions and decision-making favoured the public interest.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

12) I am encouraged to express my views fully in all matters discussed at Council.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	12.50%	1	
Total	100%	8	

13) There is an atmosphere of respect and trust among Council members, staff and the Registrar & ED.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	50.00%	4	
Agree	50.00%	4	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

14) I trust the information I received at and for Council meetings.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

15) Council meetings are chaired effectively to build consensus among Council members and manage conflict constructively.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

16) Both the decision-making role of Council and the decision-support role of the Registrar & ED are respected.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

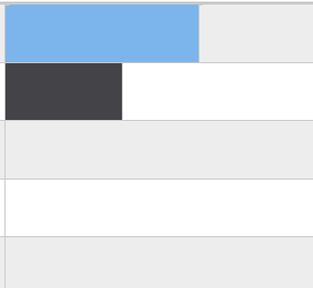
17) Overall, I felt that the quality and effectiveness of Council governance was:

Respondents: 8

Choice	Percentage	Count	
Excellent	62.50%	5	
Very Good	37.50%	3	
Good	0.00%	0	
Poor	0.00%	0	
Total	100%	8	

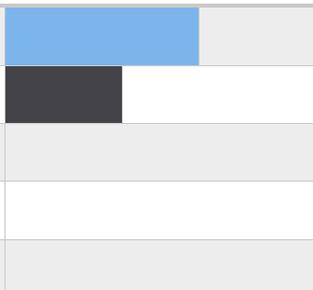
18) I look forward to Council Meetings.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	62.50%	5	
Agree	37.50%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

19) I felt that my role as a Council Member was valuable.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	62.50%	5	
Agree	37.50%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

20) What would have made Council work more valuable to you?

Respondents: 8

20) What would have made Council work more valuable to you?

1 -

2 Risk lens on all work done

3 I see nothing that is needed.

4 Less disruptions/interruptions from councillors

5 I can't think of anything.

6 more information on investment. More opportunities to collaborate directly with other college councils. It was beneficial to have the EDI support group with presidents from other colleges present.

7 At this point, I feel comfortable with the preparation and information provided. I strongly believe that being able to meet other council members in person will make council work

a bit more valuable. Knowing the members only virtually is not as supportive to my work as council member.

8 not sure

2022 Annual Audit Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 2

Choice	Percentage	Count	
Yes	100.00%	2	
No	0.00%	0	
Total	100%	2	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	2	
Strongly disagree	0.00%	0	
Total	100%	2	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	2	
Strongly disagree	0.00%	0	
Total	100%	2	

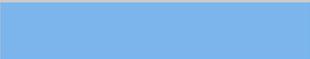
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

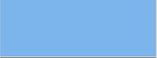
5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 2

Choice	Percentage	Count	
Yes	100.00%	2	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	2	

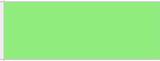
6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

7) Decision issues were clearly identified on the agenda.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

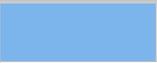
10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

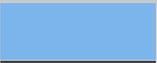
11) Committee members worked at achieving consensus in their decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

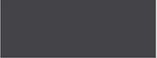
14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

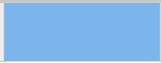
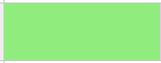
17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 2

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	50.00%	1	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

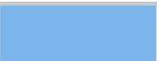
18) I felt that my contributions were respected.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

19) I listened to and considered the input of others.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

20) I found committee work worthwhile.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	50.00%	1	
Disagree	50.00%	1	
Strongly disagree	0.00%	0	
Total	100%	2	

21) What was accomplished that was most valuable to you and why?

Respondents: 2

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	5	Audit
2	6	Review of the Audit Report

22) What would have made this work more valuable to you?

Respondents: 2

#	Respondent	22) What would have made this work more valuable to you?
1	5	Orientation to issues
2	6	orientation

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	6	all comments based on 1 meeting only

2022 Annual Executive Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 2

Choice	Percentage	Count	
Yes	0.00%	0	
No	100.00%	2	
Total	100%	2	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	
Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	
Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 2

Choice	Percentage	Count	
Yes	100.00%	2	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	2	

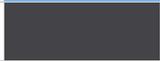
6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	100.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

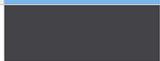
7) Decision issues were clearly identified on the agenda.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

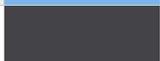
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 2

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	100.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

18) I felt that my contributions were respected.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

19) I listened to and considered the input of others.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

20) I found committee work worthwhile.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

21) What was accomplished that was most valuable to you and why?

Respondents: 2

- | # | Respondent | 21) What was accomplished that was most valuable to you and why? |
|---|------------|---|
| 1 | 3 | New governance discussions |
| 2 | 4 | thorough review of the budget, decisions around the governance committee and finding a home for EDI owrk. In addition, we had a vry constructive discussion around the proposed governance changes. |

22) What would have made this work more valuable to you?

Respondents: 2

#	Respondent	22) What would have made this work more valuable to you?
1	3	Input to agenda
2	4	nothing

23) Other Comments

Respondents: 0

#	23) Other Comments
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2022 Annual Governance Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count	
Yes	100.00%	3	
No	0.00%	0	
Total	100%	3	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

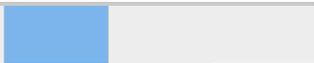
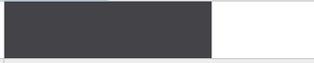
5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	66.67%	2	
No	0.00%	0	
I don't know	33.33%	1	
Total	100%	3	

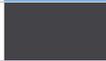
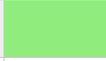
6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	33.33%	1	
Some of the Time	33.33%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

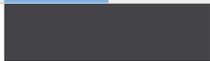
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	100.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

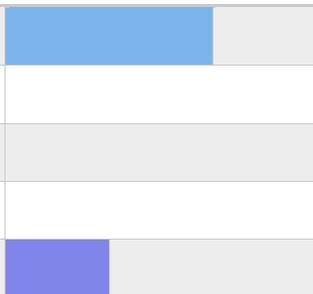
12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

18) I felt that my contributions were respected.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

21) What was accomplished that was most valuable to you and why?

Respondents: 3

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	3	Orientation and education
2	4	To start drafting a new governance model with anticipated legislative changes coming up
3	6	Working on the governance modernization

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	3	Just getting started so will see
2	4	More time for discussion as a committee, especially with the Apr 11th meeting
3	6	still in progress

23) Other Comments

Respondents: 0

23) Other Comments

2022 Annual Inquiries, Complaints and Reports Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 6

Choice	Percentage	Count	
Yes	33.33%	2	
No	66.67%	4	
Total	100%	6	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	83.33%	5	
Agree	16.67%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

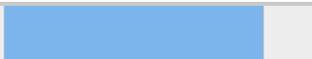
5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 6

Choice	Percentage	Count	
Yes	66.67%	4	
No	16.67%	1	
I don't know	16.67%	1	
Total	100%	6	

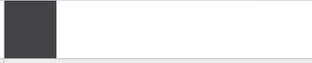
6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	16.67%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

7) Decision issues were clearly identified on the agenda.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 6

Choice	Percentage	Count	
All of the Time	50.00%	3	
Most of the Time	50.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	50.00%	3	
Most of the Time	50.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	33.33%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	33.33%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	100.00%	6	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

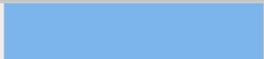
16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	50.00%	3	
Most of the Time	50.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

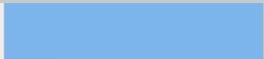
17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

18) I felt that my contributions were respected.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

19) I listened to and considered the input of others.

Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

20) I found committee work worthwhile.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	100.00%	6	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

21) What was accomplished that was most valuable to you and why?

Respondents: 6

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	Decisions made
2	4	We were able to close/resolve several very complex/complicated files. The discussions that the committee has about each and every case is beyond valuable. When reviewing all of the information and working through the decision sheet - it is so helpful to share thoughts, facts and others perspective are.
3	6	
4	7	I am very proud of Panel B. Through all the years I have spent on this committee, this has been the most prepared panel which facilitates the

		discussion. I feel most accomplished about one of the cases we reviewed that was very complex. I like the new risk assessment tool
5	8	public protection through processing the case in a timely way.
6	10	Completing decisions in a timely manner so the public feels they were adequately served

22) What would have made this work more valuable to you?

Respondents: 6

#	Respondent	22) What would have made this work more valuable to you?
1	2	Earlier orientation, more full cte meetings
2	4	I value the all committee member's opinions and perspectives, however the workings of other professions do not necessarily apply to the files we are working on. It's important to hear everyone's input, but we shouldn't be going down "rabbit holes" that have no impact on the issue(s) we're discussing. Time management during meetings is important and going "off topic" can only confuse the situation.
3	6	To meet in person as a group at some point to connect even more.
4	7	nothing. Sarah does a phenomenal job at providing supporting documents to allow us to make the best decisions with public protection at the forefront.
5	8	To have a sense of benchmarking and knowing if my panel is "doing well" in our work. (ie. are ICRCs evaluated based on case processing time? thoroughness of decision making? Unsure what benchmarks exists).
6	10	N/A

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	4	We deal with complaints of RDs from a variety of practice areas and committee members should realize that not all practice areas are alike. There are some very unique areas that, if a committee member is not familiar with, may be difficult for some that do not work in that area to understand, putting the member at an unfair disadvantage. Best practice for one area may not be transferable to another area.

2022 Annual Professional Practice Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count
Yes	33.33%	1
No	66.67%	2
Total	100%	3

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 1

Choice	Percentage	Count
Strongly agree	0.00%	0
Agree	100.00%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	1

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 1

Choice	Percentage	Count
Strongly agree	0.00%	0
Agree	100.00%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	1

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	100.00%	3	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	3	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

18) I felt that my contributions were respected.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

21) What was accomplished that was most valuable to you and why?

Respondents: 3

- | # | Respondent | 21) What was accomplished that was most valuable to you and why? |
|---|------------|--|
| 1 | 2 | Insulin guidance document |
| 2 | 3 | The policy decisions that were made. |
| 3 | 5 | Insulin adjusting medical directive - Good for public and RD's |

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	2	Reception or uptake from end-users of insulin document once published
2	3	The preparation, discussion and learning were all valuable to me. I have nothing further to suggest.
3	5	nothing

23) Other Comments

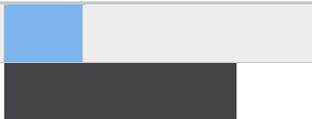
Respondents: 1

#	Respondent	23) Other Comments
1	3	A very enjoyable and value added experience

2022 Annual Quality Assurance Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 4

Choice	Percentage	Count	
Yes	25.00%	1	
No	75.00%	3	
Total	100%	4	

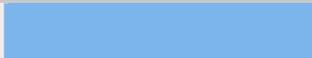
2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	100.00%	2	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	100.00%	2	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 4

Choice	Percentage	Count	
Yes	100.00%	4	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	4	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

7) Decision issues were clearly identified on the agenda.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 4

Choice	Percentage	Count	
All of the Time	50.00%	2	
Most of the Time	50.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

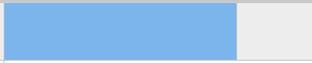
11) Committee members worked at achieving consensus in their decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	0.00%	0	
Some of the Time	25.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

18) I felt that my contributions were respected.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

19) I listened to and considered the input of others.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

20) I found committee work worthwhile.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

21) What was accomplished that was most valuable to you and why?

Respondents: 4

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	4	-
2	6	Policy updates
3	7	Full discussion and consideration of different points of view in assessing SDL Tools.
4	9	Reviewing policies such as the insulin management policy

22) What would have made this work more valuable to you?

Respondents: 4

#	Respondent	22) What would have made this work more valuable to you?
1	4	-
2	6	Will see what review of program brings out
3	7	I is fine the way it is.
4	9	Being in person. I know this will come eventually.

23) Other Comments

Respondents: 0

23) Other Comments

2022 Annual Registrar Performance & Compensation Review Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 1

Choice	Percentage	Count	
Yes	0.00%	0	
No	100.00%	1	
Total	100%	1	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	
Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	

Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	1	
Strongly disagree	0.00%	0	
Total	100%	1	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 1

Choice	Percentage	Count	
Yes	0.00%	0	
No	0.00%	0	
I don't know	100.00%	1	
Total	100%	1	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	

NA	0.00%	0	
Total	100%	1	

7) Decision issues were clearly identified on the agenda.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	

Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	100.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	1	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

18) I felt that my contributions were respected.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

19) I listened to and considered the input of others.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

20) I found committee work worthwhile.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	100.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	1	

21) What was accomplished that was most valuable to you and why?

Respondents: 1

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	n/a

22) What would have made this work more valuable to you?

Respondents: 1

#	Respondent	22) What would have made this work more valuable to you?
1	2	n/a

23) Other Comments

Respondents: 0

#	23) Other Comments
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2022 Annual Registration Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 5

Choice	Percentage	Count
Yes	40.00%	2
No	60.00%	3
Total	100%	5

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count
Strongly agree	100.00%	3
Agree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count
Strongly agree	33.33%	1
Agree	66.67%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3

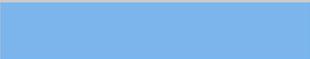
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 5

Choice	Percentage	Count	
Yes	100.00%	5	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	5	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

7) Decision issues were clearly identified on the agenda.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 5

Choice	Percentage	Count	
All of the Time	20.00%	1	
Most of the Time	80.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

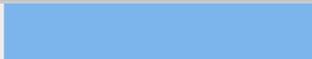
10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	20.00%	1	
Some of the Time	20.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

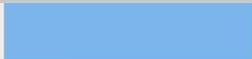
11) Committee members worked at achieving consensus in their decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

18) I felt that my contributions were respected.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

19) I listened to and considered the input of others.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

20) I found committee work worthwhile.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	80.00%	4	
Agree	20.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

21) What was accomplished that was most valuable to you and why?

Respondents: 5

- | # | Respondent | 21) What was accomplished that was most valuable to you and why? |
|---|------------|---|
| 1 | 2 | Policy updates |
| 2 | 3 | Full discussions are always helpful. |
| 3 | 4 | Review of international applicants |
| 4 | 6 | Having the opportunity to observe the first panel before doing it. |
| 5 | 7 | All the work done by the committee has been significant and valuable. Objective insights /inputs from staff and committee members have added value to the committee work. |

22) What would have made this work more valuable to you?

Respondents: 5

#	Respondent	22) What would have made this work more valuable to you?
1	2	N/a
2	3	Nothing more is needed here.
3	4	Can't think of anything more
4	6	I can't think of anything - it is valuable.
5	7	NA

23) Other Comments

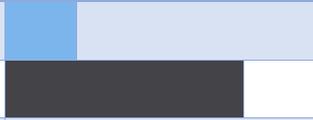
Respondents: 0

23) Other Comments

2021 Annual Council Performance Evaluation

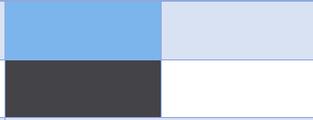
1) This is my first year on Council (If yes, answer Question 2 and 3, if no, proceed to question #4).

Respondents: 13

Choice	Percentage	Count	
Yes	23.08%	3	
No	76.92%	10	
Total	100%	13	

2) After the orientation process, I felt prepared to exercise my role on Council.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	50.00%	3	
Agree	50.00%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

3) What I found most useful to help me understand my role on Council was:

Respondents: 5

#	3) What I found most useful to help me understand my role on Council was:
1	consultants
2	Having the meeting materials ahead of time.
3	The orientation process was detailed & clearly communicated by Melisse.
4	The orientation training session by Mellise.
5	financial training, governance training

4) At Council meetings, the strategic oversight and public protection mandate of Council were clearly articulated in:

Respondents: 13

	All of the time	Most of the time	Some of the time	None of the time	NA	Total
Structure of the meeting agenda	69.23% (9)	23.08% (3)	7.69% (1)	0.00% (0)	0.00% (0)	100% (13)
Council discussion	76.92% (10)	23.08% (3)	0.00% (0)	0.00% (0)	0.00% (0)	100% (13)
Council decision making	84.62% (11)	15.38% (2)	0.00% (0)	0.00% (0)	0.00% (0)	100% (13)

5) Council has the information needed to oversee how the College is meeting its goals and objectives.

Respondents: 13

Choice	Percentage	Count
All of the time	53.85%	7
Most of the Time	46.15%	6
Some of the Time	0.00%	0
None of the Time	0.00%	0
NA	0.00%	0
Total	100%	13

6) Council has the right information needed to monitor the finances of the College.

Respondents: 13

Choice	Percentage	Count
Strongly agree	61.54%	8
Agree	38.46%	5
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	13

7) Questions and discussions at Council meetings added value beyond the information provided in writing to support effective decision making.

Respondents: 13

Choice	Percentage	Count	
All of the Time	46.15%	6	
Most of the Time	53.85%	7	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

8) Council discussion focused on policy and outcomes rather than management and administrative processes.

Respondents: 13

Choice	Percentage	Count	
All of the Time	30.77%	4	
Most of the Time	69.23%	9	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

9) From my perspective, decisions were based on evidence and information rather than opinion.

Respondents: 13

Choice	Percentage	Count	
All of the Time	38.46%	5	
Most of the Time	53.85%	7	
Some of the Time	7.69%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

10) Reports and documents were sufficient to support informed discussions and effective decision-making.

Respondents: 13

Choice	Percentage	Count	
All of the Time	69.23%	9	
Most of the Time	30.77%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

11) Discussions and decision-making favoured the public interest.

Respondents: 13

Choice	Percentage	Count	
All of the Time	92.31%	12	
Most of the Time	7.69%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

12) I am encouraged to express my views fully in all matters discussed at Council.

Respondents: 13

Choice	Percentage	Count	
All of the Time	84.62%	11	
Most of the Time	15.38%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

13) There is an atmosphere of respect and trust among Council members, staff and the Registrar & ED.

Respondents: 13

Choice	Percentage	Count	
Strongly agree	61.54%	8	
Agree	38.46%	5	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	13	

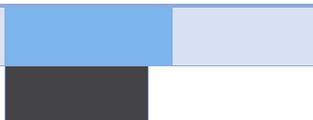
14) I trust the information I received at and for Council meetings.

Respondents: 13

Choice	Percentage	Count	
All of the Time	92.31%	12	
Most of the Time	7.69%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

15) Council meetings are chaired effectively to build consensus among Council members and manage conflict constructively.

Respondents: 13

Choice	Percentage	Count	
All of the Time	53.85%	7	
Most of the Time	46.15%	6	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

16) Both the decision-making role of Council and the decision-support role of the Registrar & ED are respected.

Respondents: 13

Choice	Percentage	Count	
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All of the Time	76.92%	10	
Most of the Time	23.08%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	13	

17) Overall, I felt that the quality and effectiveness of Council governance was:

Respondents: 13

Choice	Percentage	Count	
Excellent	53.85%	7	
Very Good	46.15%	6	
Good	0.00%	0	
Poor	0.00%	0	
Total	100%	13	

18) I look forward to Council Meetings.

Respondents: 13

Choice	Percentage	Count	
Strongly agree	76.92%	10	
Agree	23.08%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	13	

19) I felt that my role as a Council Member was valuable.

Respondents: 13

Choice	Percentage	Count	
Strongly agree	69.23%	9	
Agree	30.77%	4	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	13	

20) What would have made Council work more valuable to you?

Respondents: 13

#	20) What would have made Council work more valuable to you?
1	I am very satisfied and do not have any significant suggestion at the moment.
2	The council should also get feedback from the field regarding the results of knowledge and skill development programs initiated by the college to improve public protection and the competent services provided by our RDs.
3	less disruption from councillor and from electronic issues
4	Nothing to change
5	Everything is good as is
6	I know this wasn't possible this year, but face to face meetings would have made Council work more valuable. Hopefully next year we get a chance to do so a few times
7	Council was valuable to me based on the quality of materials / reports presented.
8	more succinct reporting and pre-reading materials
9	Meeting in person (obviously not an option, I know); I feel less engaged on line
10	Some members are reserve
11	More efficiency in some of the discussions - at times the discussions can go in circles. More decisiveness might be beneficial for all.
12	In the essence of timing of agenda items we need to ensure sticking to need to know information rather than nice to know as per Fay booker's presentation
13	A decision/risk matrix should have been trialled by now.

2021 Annual Audit Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 6

Choice	Percentage	Count		
Yes	33.33%	2		
No	66.67%	4		
Total	100%	6		

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count		
Strongly agree	33.33%	1		
Agree	33.33%	1		
Disagree	33.33%	1		
Strongly disagree	0.00%	0		
Total	100%	3		

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 4

Choice	Percentage	Count		
Strongly agree	0.00%	0		
Agree	75.00%	3		
Disagree	25.00%	1		
Strongly disagree	0.00%	0		
Total	100%	4		

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	50.00%	3	
Agree	50.00%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 6

Choice	Percentage	Count	
Yes	83.33%	5	
No	0.00%	0	
I don't know	16.67%	1	
Total	100%	6	

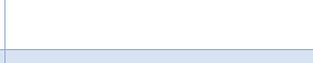
6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

7) Decision issues were clearly identified on the agenda.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

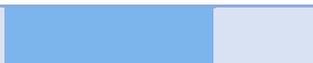
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

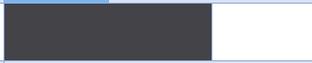
14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	33.33%	2	
Agree	66.67%	4	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

18) I felt that my contributions were respected.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

19) I listened to and considered the input of others.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

20) I found committee work worthwhile.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	83.33%	5	
Agree	16.67%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

21) What was accomplished that was most valuable to you and why?

Respondents: 6

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	6	in depth budget discussions, learning more about what we needed to know through the audit
2	7	The auditor didn't find any wrongdoing
3	10	Better understanding about: liability of alcohol served at events and the amount of reserve fund considered appropriate. The committee, with the support of the auditors and Sarah, makes well thought out decisions with the public interest and reputation at the forefront.
4	11	I was just added to the Committee and attended only one meeting so questions are essentially NA
5	13	The implementation of the suggesting to separate the committee from the executive (President/VP)
6	15	Removed Chair and Vice-Chair

22) What would have made this work more valuable to you?

Respondents: 6

#	Respondent	22) What would have made this work more valuable to you?
1	6	seeing all finance policies even if operational, for our knowledge
2	7	Getting compensated by the ministry for preparation time (only preparation to the statutory committee meetings are reimbursed for public members)
3	10	I did not receive audit committee orientation. I received executive committee orientation which spoke to the purpose of the audit committee, but additional training on this would have been helpful.
4	11	cannot comment
5	13	No comment
6	15	Reluctance to getting new auditors was disappointing initially

23) Other Comments

Respondents: 0

#	23) Other Comments
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2021 Annual Executive Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 4

Choice	Percentage	Count	
Yes	25.00%	1	
No	75.00%	3	
Total	100%	4	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

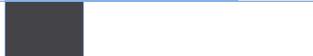
3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 4

Choice	Percentage	Count	
Yes	100.00%	4	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	4	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

7) Decision issues were clearly identified on the agenda.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 4

Choice	Percentage	Count	
All of the Time	50.00%	2	
Most of the Time	50.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 4

Choice	Percentage	Count	
All of the Time	50.00%	2	
Most of the Time	50.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

18) I felt that my contributions were respected.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

19) I listened to and considered the input of others.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

20) I found committee work worthwhile.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

21) What was accomplished that was most valuable to you and why?

Respondents: 4

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	3	finding interim Registrar
2	4	formation of the registrar performance review committee, recommended to council a self-reflection tool, work on the governance manual.
3	5	Handling the Registrar position opening.
4	6	Review of budget and recommendations to council as to the RD member fee; systematic review with good logic.

22) What would have made this work more valuable to you?

Respondents: 4

#	Respondent	22) What would have made this work more valuable to you?
1	3	not sure
2	4	I can not think of anything. It has been a very rewarding experience.
3	5	No comment
4	6	Chair and Registrar has some off line conversations that should have been discussed at executive earlier that they were

23) Other Comments

Respondents: 0

#	23) Other Comments
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2021 Annual Inquiries, Complaints and Reports Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 11

Choice	Percentage	Count
Yes	36.36%	4
No	63.64%	7
Total	100%	11

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 6

Choice	Percentage	Count
Strongly agree	83.33%	5
Agree	16.67%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	6

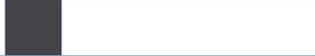
3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 6

Choice	Percentage	Count
Strongly agree	66.67%	4
Agree	33.33%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	6

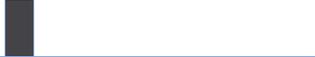
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 11

Choice	Percentage	Count	
Strongly agree	81.82%	9	
Agree	18.18%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	11	

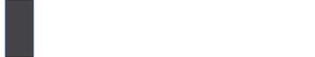
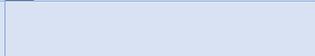
5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 11

Choice	Percentage	Count	
Yes	81.82%	9	
No	9.09%	1	
I don't know	9.09%	1	
Total	100%	11	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 11

Choice	Percentage	Count	
All of the Time	90.91%	10	
Most of the Time	9.09%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

7) Decision issues were clearly identified on the agenda.

Respondents: 11

Choice	Percentage	Count	
All of the Time	81.82%	9	
Most of the Time	18.18%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 11

Choice	Percentage	Count	
All of the Time	18.18%	2	
Most of the Time	54.55%	6	
Some of the Time	27.27%	3	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 11

Choice	Percentage	Count	
All of the Time	36.36%	4	
Most of the Time	63.64%	7	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 11

Choice	Percentage	Count	
All of the Time	81.82%	9	
Most of the Time	18.18%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 11

Choice	Percentage	Count	
All of the Time	72.73%	8	
Most of the Time	27.27%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 11

Choice	Percentage	Count	
All of the Time	54.55%	6	
Most of the Time	45.45%	5	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 11

Choice	Percentage	Count	
All of the Time	100.00%	11	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 11

Choice	Percentage	Count	
All of the Time	90.91%	10	
Most of the Time	9.09%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 11

Choice	Percentage	Count	
Strongly agree	81.82%	9	
Agree	18.18%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	11	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 11

Choice	Percentage	Count	
All of the Time	72.73%	8	
Most of the Time	27.27%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

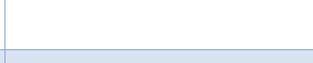
17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 11

Choice	Percentage	Count	
All of the Time	81.82%	9	
Most of the Time	18.18%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

18) I felt that my contributions were respected.

Respondents: 11

Choice	Percentage	Count	
All of the Time	90.91%	10	
Most of the Time	9.09%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	11	

19) I listened to and considered the input of others.

Respondents: 11

Choice	Percentage	Count
All of the Time	90.91%	10
Most of the Time	9.09%	1
Some of the Time	0.00%	0
None of the Time	0.00%	0
NA	0.00%	0
Total	100%	11

20) I found committee work worthwhile.

Respondents: 11

Choice	Percentage	Count
Strongly agree	90.91%	10
Agree	9.09%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	11

21) What was accomplished that was most valuable to you and why?

Respondents: 11

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	6	continual work of public protection through thorough deliberations of cases
2	7	It is a procedure for resolving complaints regarding professional misconduct.
3	8	The decisions made at the meetings put public protection first
4	9	Understanding the process and impact of RDs to the general public, and how the ICRC committee is making a difference to ensure this is done correctly.
5	10	Ability to review the cases presented and decisions taken on them.
6	11	We had difficult cases this past year. Sarah and Melisse's support were extremely helpful.
7	12	Making a final decision on a long standing case which was in favour of the member, thus mitigating any further stress, but also to provide closure for the complainant.
8	13	The continued focus on protecting the public

9	15	Hearing the perspectives and insights of both RD and non-RD committee members because it helps to consider/understand information from different points of view.
10	16	I think that Sarah does a great job and appreciate her reports.
11	19	Many cases closed with use of matrix and round table discussion

22) What would have made this work more valuable to you?

Respondents: 11

#	Respondent	22) What would have made this work more valuable to you?
1	6	can't think of anything
2	7	The outcome of the investigation.
3	8	.
4	9	In person meetings.
5	10	The work were valuable
6	11	I can not think of anything. Sarah's memos and decision documents are extremely helpful.
7	12	Just a thought, I wonder if it would be possible sometimes to have earlier legal or 3rd party/un-involved support on very complicated cases, to help the committee focus or streamline their train of thought when there is so much information and complaints that tend to get tangential and distract from the main RD-related issue - this makes is so challenging to focus on the primary issues and thus prolongs the decision making process.
8	13	No comment
9	15	nothing I can think of at the moment
10	16	no comments
11	19	Feedback to chair around round table use was appreciated and if had been earlier in the year more timely completion of meetings would have happened. The do not do your own investigation information could have been shared earlier.

23) Other Comments

Respondents: 2

#	Respondent	23) Other Comments
1	7	It is better to close the cases in a time-bound manner.
2	15	A committee member made a casual remark that I did not feel comfortable hearing or addressing at that time. I did not know how or to whom I should mention this incident.

2021 Annual Professional Practice Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count	
Yes	33.33%	1	
No	66.67%	2	
Total	100%	3	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

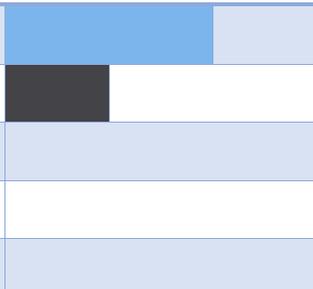
3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

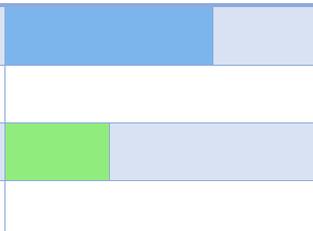
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

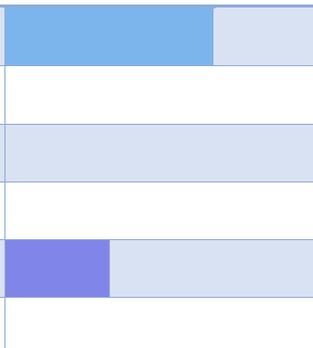
5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	66.67%	2	
No	0.00%	0	
I don't know	33.33%	1	
Total	100%	3	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

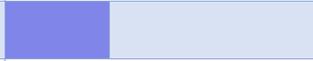
16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

18) I felt that my contributions were respected.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	

19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count
All of the Time	66.67%	2
Most of the Time	0.00%	0
Some of the Time	0.00%	0
None of the Time	0.00%	0
NA	33.33%	1
Total	100%	3

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count
Strongly agree	66.67%	2
Agree	33.33%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3

21) What was accomplished that was most valuable to you and why?

Respondents: 3

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	3	standards for directives
2	4	N/A. This committee did not meet in the 2020/21 fiscal year.
3	5	We had an orientation meeting with agenda items and then were unable to meet due to COVID 19. I believe getting the Committee Orientated was an accomplishment.

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	3	None that I can think of.

2	4	Having a meeting in the 2020/21 fiscal year.
3	5	The ability to have continued to meet throughout 2020.

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	5	I have answered this survey based on the one meeting that I was able to attend for Professional Practice.

2021 Annual Quality Assurance Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 8

Choice	Percentage	Count	
Yes	25.00%	2	
No	75.00%	6	
Total	100%	8	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	87.50%	7	
Agree	12.50%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 8

Choice	Percentage	Count	
Yes	100.00%	8	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	8	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	0.00%	0	
Some of the Time	12.50%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

7) Decision issues were clearly identified on the agenda.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	0.00%	0	
Some of the Time	12.50%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

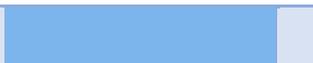
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 8

Choice	Percentage	Count	
All of the Time	75.00%	6	
Most of the Time	12.50%	1	
Some of the Time	12.50%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	87.50%	7	
Agree	12.50%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

18) I felt that my contributions were respected.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

19) I listened to and considered the input of others.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

20) I found committee work worthwhile.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	87.50%	7	
Agree	12.50%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

21) What was accomplished that was most valuable to you and why?

Respondents: 8

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	-
2	5	Improves patient care and public protection. The frequent QA training programs initiated by the college to the RDs such as mandatory webinar and the review of the SDL tool.
3	6	update of policies
4	7	Panel discussions were always thorough, but improved in efficiency with practice.
5	8	Collaborative work by committee members that looked for the best interests of the public
6	9	Better understanding the SDL structure and how the QA committee was contributing to better equip RDs to serve the public's best interest.
7	10	Gained consensus between committees re commonly seen goals and how to provide feedback and/or accept or decline the submission (eg. converting to virtual practice).
8	11	I'm still new so don't have a definitive answer.

22) What would have made this work more valuable to you?

Respondents: 8

#	Respondent	22) What would have made this work more valuable to you?
1	2	-
2	5	This can improve the professional competency of RDs
3	6	retraining for councillor who was struggling with understanding
4	7	I can't think of anything that could improve it for me.
5	8	N/A
6	9	In person meetings.
7	10	Nothing, I had a great experience this year. I do think it was helpful and of benefit for both committees to collaborate about their approaches to assessing member goals.
8	11	I'm still new so don't have a definitive answer.

23) Other Comments

Respondents: 3

#	Respondent	23) Other Comments
1	2	-
2	5	Virtual training programs have to be changed to classroom training after the current Covid situation.
3	7	Excellent team work with professional and public members sharing perspectives which ensures thorough discussions and decisions.

2021 Annual Registrar Performance Compensation Review Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 5

Choice	Percentage	Count	
Yes	40.00%	2	
No	60.00%	3	
Total	100%	5	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	60.00%	3	
Agree	40.00%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	60.00%	3	
Agree	20.00%	1	
Disagree	20.00%	1	
Strongly disagree	0.00%	0	
Total	100%	5	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	60.00%	3	
Agree	20.00%	1	
Disagree	20.00%	1	
Strongly disagree	0.00%	0	
Total	100%	5	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 5

Choice	Percentage	Count	
Yes	80.00%	4	
No	0.00%	0	
I don't know	20.00%	1	
Total	100%	5	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	40.00%	2	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	20.00%	1	
NA	0.00%	0	
Total	100%	5	

7) Decision issues were clearly identified on the agenda.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	20.00%	1	
Some of the Time	20.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 5

Choice	Percentage	Count	
All of the Time	20.00%	1	
Most of the Time	40.00%	2	
Some of the Time	20.00%	1	
None of the Time	20.00%	1	
NA	0.00%	0	
Total	100%	5	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	0.00%	0	
Some of the Time	20.00%	1	
None of the Time	20.00%	1	
NA	0.00%	0	
Total	100%	5	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	20.00%	1	
Some of the Time	20.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	0.00%	0	
Some of the Time	20.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	40.00%	2	
Agree	60.00%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

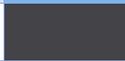
16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	40.00%	2	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	20.00%	1	
NA	0.00%	0	
Total	100%	5	

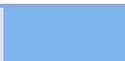
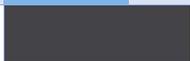
17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

18) I felt that my contributions were respected.

Respondents: 5

Choice	Percentage	Count	
All of the Time	40.00%	2	
Most of the Time	60.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

19) I listened to and considered the input of others.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

20) I found committee work worthwhile.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	40.00%	2	
Agree	40.00%	2	
Disagree	20.00%	1	
Strongly disagree	0.00%	0	
Total	100%	5	

21) What was accomplished that was most valuable to you and why?

Respondents: 5

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	My involvement in the design and development of the new performance review instrument and process.
2	3	Achieved new format for registrar assessment
3	4	new performance measurement tool based on both performance and behaviour
4	5	Implementing a new process to measure the performance of the Registrar.
5	6	New process

22) What would have made this work more valuable to you?

Respondents: 5

#	Respondent	22) What would have made this work more valuable to you?
1	2	I am highly content with my experience and involvement in this committee in this past year.
2	3	more time to prepare for meetings with items to pre read
3	4	nothing. Jodi is an excellent support for this work.
4	5	Less email chains - it became hard to keep track of the objectives the committee was tasked to complete.
5	6	Process issue transparency

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	6	We got in the weeds too much; should have allowed expert consultant to be the expert.

2021 Annual Registration Committee Performance Evaluation

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 7

Choice	Percentage	Count
Yes	14.29%	1
No	85.71%	6
Total	100%	7

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count
Strongly agree	100.00%	3
Agree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count
Strongly agree	100.00%	3
Agree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 7

Choice	Percentage	Count	
Strongly agree	85.71%	6	
Agree	14.29%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	7	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 7

Choice	Percentage	Count	
Yes	100.00%	7	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	7	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 7

Choice	Percentage	Count	
All of the Time	85.71%	6	
Most of the Time	14.29%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

7) Decision issues were clearly identified on the agenda.

Respondents: 7

Choice	Percentage	Count	
All of the Time	85.71%	6	
Most of the Time	14.29%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 7

Choice	Percentage	Count	
All of the Time	71.43%	5	
Most of the Time	28.57%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 7

Choice	Percentage	Count	
All of the Time	85.71%	6	
Most of the Time	14.29%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 7

Choice	Percentage	Count	
All of the Time	100.00%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 7

Choice	Percentage	Count	
All of the Time	85.71%	6	
Most of the Time	14.29%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 7

Choice	Percentage	Count	
All of the Time	85.71%	6	
Most of the Time	14.29%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 7

Choice	Percentage	Count	
All of the Time	100.00%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 7

Choice	Percentage	Count	
All of the Time	100.00%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 7

Choice	Percentage	Count	
Strongly agree	85.71%	6	
Agree	14.29%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	7	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 7

Choice	Percentage	Count	
All of the Time	100.00%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 7

Choice	Percentage	Count	
All of the Time	100.00%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

18) I felt that my contributions were respected.

Respondents: 7

Choice	Percentage	Count	
All of the Time	71.43%	5	
Most of the Time	28.57%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	7	

19) I listened to and considered the input of others.

Respondents: 7

Choice	Percentage	Count
All of the Time	85.71%	6
Most of the Time	14.29%	1
Some of the Time	0.00%	0
None of the Time	0.00%	0
NA	0.00%	0
Total	100%	7

20) I found committee work worthwhile.

Respondents: 7

Choice	Percentage	Count
Strongly agree	100.00%	7
Agree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	7

21) What was accomplished that was most valuable to you and why?

Respondents: 7

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	Being able to make recommendation (and being heard) to the registration review and policy development process. I learned much more about how a review process can be enhanced by interacting with different committee members throughout the year.
2	3	many policy changes and updates, to improve the program
3	4	Well thought out discussions on applications and policies, due to members and staff who are strongly committed to doing a good job, thoroughly respectful of each other and thorough in everything they do. A pleasure to serve on such a well focused team.
4	7	Decisions made by the committee favored the interest of the public
5	8	The ongoing transitioning from file reviews of candidates to PLAR
6	9	No comment
7	10	I'm still new so don't have a definitive answer at this time.

22) What would have made this work more valuable to you?

Respondents: 7

#	Respondent	22) What would have made this work more valuable to you?
1	2	Updates on the incorporation of the new ICDEP and accreditation requirement would be helpful.
2	3	don't know
3	4	I can think of nothing
4	7	.
5	8	The existing processes and work is valuable to me.
6	9	No comment
7	10	I'm still new so don't have a definitive answer at this time.

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	4	Great assistance, encouragement and support from Staff.



Council Briefing Note

Topic:	Council Needs Assessment
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Governance Modernization and Enhancing Public Trust
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

To review the Council and Committee Equity, Diversity, Inclusion and Belonging (EDI-B) Needs Assessment results (assessment data included as Appendix 1) and to confirm future EDI training needs.

PUBLIC INTEREST RATIONALE

Organizational learning around EDI is key to driving strategy, building organizational EDI capacity and affecting systemic change. Training ensures that an EDI lens is applied to Council and Committee decision making in the interest of the diverse public served by the CDO.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires that Council and Committees engage in training that has been informed by self-identified learning needs.

BACKGROUND

As part of the CDO's work on advancing Equity, Diversity, Inclusion and Belonging (EDI-B), an educational needs assessment was developed by Dr. Javeed Sukhera and circulated to Council and Committee members to assess current EDI-B competencies. The results will be used to identify and design future training and to continue to embed EDI into the Council and Committees' work.

Dr. Sukhera used an evidence-informed needs assessment, which utilized a competency-based approach which recognizes that competencies encompass many factors: knowledge, skills, and attitudes. The assessment focused on competencies within self, within team, and within the organization at large. The needs assessment was reviewed by the EDI-B Task Force and adapted to reflect the feedback received.

[June 17, 2022]

CONSIDERATIONS

Results and Analysis

The results of the assessment, (data included as Appendix 1), were analyzed by Dr. Javeed Sukhera:

- The small sample size makes interpretation of the competencies limited
- Council identified trauma informed approaches as their top learning area of interest, followed by decolonization, allyship, bias recognition/management, and microaggressions.
- The most preferred mode of learning was instructor led trainings, followed by training embedded within meetings, facilitated group discussion, and self-directed training was least preferred.
- Council identified that they could perform most competencies confidently, however, feedback seeking and critical reflection were identified as more tentative. Strengths were noted in the awareness and understanding of others with 6 participants indicating they could role model this competency for others.

RECOMMENDATION/NEXT STEPS

In light of the results, Dr. Sukhera makes the following recommendations:

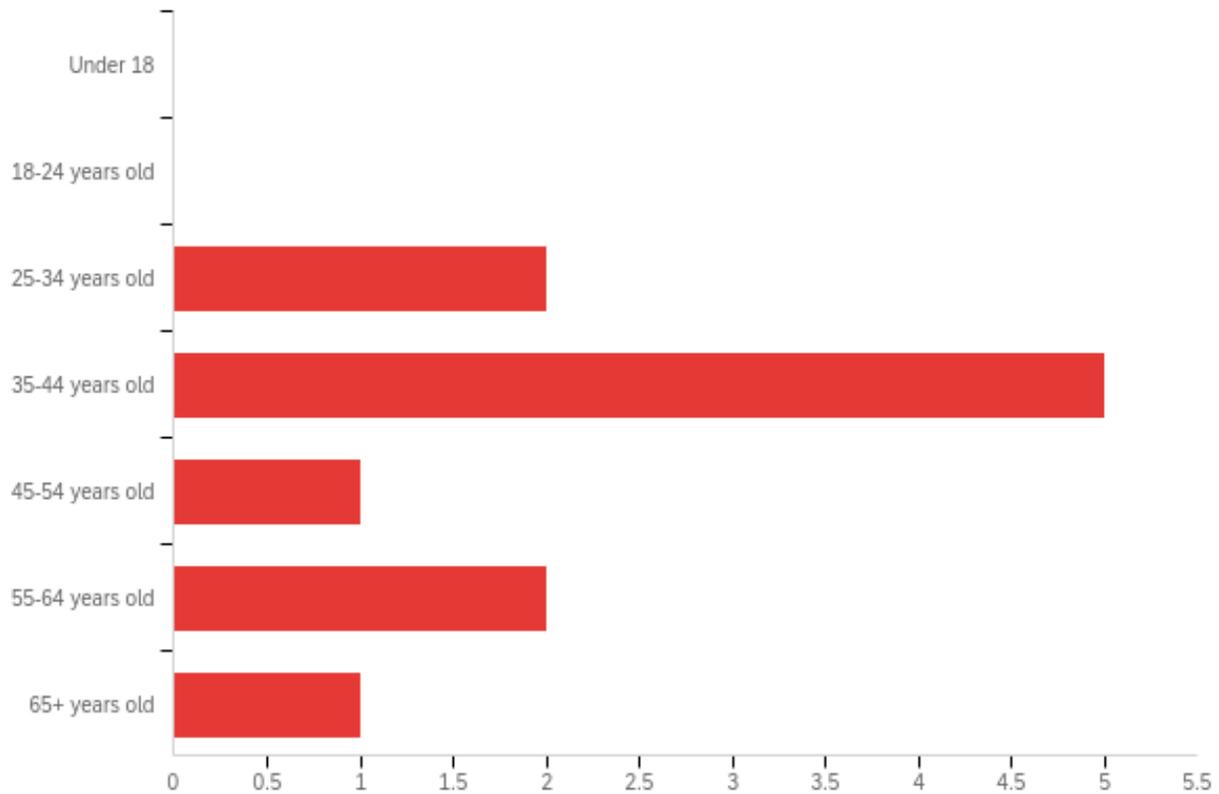
- Build in a 'teaching and learning moment' into each meeting to discuss relevant examples of how EDI-B can be incorporated into the practical work of Council.
- Additional areas of potential focus for Council should include other focused competencies, specifically: for (1) Monitoring - I am able to monitor and identify when prejudice or discrimination may influence Council/Committee's decision-making ability; and (2) Advocacy – I am able to take action in a constructive way when I encounter or notice prejudice or discrimination within Council.
- Consider bringing in external speakers and/or recorded talks on both trauma informed approaches to EDI-B and decolonization to complement existing training.

ATTACHMENTS

- Appendix 1: Council Needs Assessment Results

CDO Needs Assessment Template - Council – RAW DATA
 May 9th 2022, 10:21 am MDT

Demographics



8 Female participants, 3 Male.

2 East Asian/Pacific Islander. 1 South Asian. 7 White (non-Hispanic). 1 Preferred not to answer.

Competencies (Self)

	Aware	Understand	Perform tentatively	Perform confidently	Role model for others	N/A
Feedback Seeking			2	6	3	
Bias recognition and management			1	6	4	
Awareness and Understanding of Others				5	6	
Adaptability	1			8	2	
Modeling			1	8	1	
Critical Reflection			3	6	1	

Competencies (Other)

	Aware	Understand	Perform tentatively	Perform confidently	Role model for others	N/A
Conflict		1	5	3	1	
Encouraging Others		2	2	6		
Monitoring		3	4	3		
Advocacy		3	3	4		
Collaboration		1	3	6	1	
Policy			4	6		
Training			4	6		

Topics

Trauma informed approaches (4.08). Decolonization (3.58). Allyship (3.25). Bias recognition and management (2.25). Microaggressions (1.83). Other (institutional discrimination)

Delivery Formats

Instructor led (4.58). Embedded within meetings (3.92). Facilitated group discussion (3.33). Self directed (2.08).



Council Briefing Note

Topic:	Committee Member Reappointments and New Appointments
Purpose:	Decision Required
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

Council is being asked to appoint committee members for the 2022 – 2025 term as recommended by the Executive Committee.

PUBLIC INTEREST RATIONALE

CDO is committed to effective governance, which includes succession planning and modernizing its governance structure to enhance public confidence in professional regulation. This includes working towards the governance modernization reform of separating council and committee work. In preparation for potential legislative amendment, the College can begin building a roster of qualified and trained committee appointees and increasing the number of committees non-council appointees sit on.

BACKGROUND

Executive Committee typically recommends that Council appoint/reappoint committee members to sit on College committees. Committee members have typically sat on one committee.

The College currently has five non-council committee appointees. Given the Ministry of Health's governance modernization proposal that council members would not also serve on committees, the College may wish to begin recruiting more committee members gradually to build the capacity of the College should this be introduced in the future. Appointing more committee members would also assist with succession planning in light of the upcoming committee term limit dates.

To fill Committee vacancies, and to begin increasing the roster of committee members, a recruitment process was undertaken, which included interviews of the candidates.

CONSIDERATIONS

Committee Re - Appointments

Two existing members are eligible and have expressed interest in reappointment:

Ruchika Wadha	Currently completing a third term 2-year term from 2020 – 2022. Eligible for one more 3-year term for 2022 – 2025.
Barbara Grohmann	Currently completing first term 2-year term from 2020 – 2022. A second term would span from 2022 – 2025.

Committee Term Adjustments

Three existing members require formal adjustment to their term end date given the change to by-law 8.5 in 2021, which extended the term of office for committee members from two years to three years:

Cindy Tsai	Current terms are 2021 – 2023; could be extended to 2024
Khashayar Amirhosseini	
Barbara Major-McEwan	

New Committee Appointments

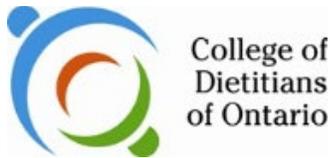
At its meeting on May 11, the Executive Committee considered CDO's committee appointment needs for the coming year and into the future, and recommends that Council appoint three committee members this year:

RDs	Area of Practice	Practice Region
Hannah Chan	Government	GTA
Laura Bjorklund	Hospital and internship	Northern Ontario
Jane Lac	Family health and community	GTA

RECOMMENDATION

Council is being asked to approve the following appointments, as recommended by the Executive Committee:

- Reappoint Ruchika Wadhwa and Barbara Grohmann for another term from June 2022 – June 2025.
- Extend Barbara Major – McEwan, Cindy Tsai and Khashayar Amirhosseini’s terms to June 2024 in accordance with the updated by-law.
- Appoint three new committee appointees for three-year terms – Hannah Chan, Laura Bjorklund, and Jane Lac.



Council Briefing Note

Topic:	Committee Composition for the 2022-2023 Term
Purpose:	Decision Required
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

Council is being asked to approve the draft committee compositions as recommended by the Executive Committee, subject to amendments based on the outcome of the Executive Committee Elections.

PUBLIC INTEREST RATIONALE

When Committees are fully constituted with the requisite number of public and professional members and the workload is evenly distributed, they can effectively perform their duties in accordance with their terms of reference and carry out the College’s mandate of public protection.

BACKGROUND

All College Committees are constituted at the June Council meeting. Council approves the committee compositions for the year based on a recommendation from the Executive Committee and the outcome of the Executive Committee Election.

CONSIDERATIONS

At its May 11th meeting, the Executive Committee reviewed the draft Committee Composition Chart for the 2022 – 2023 Council year in order to provide a recommendation to Council. The committee considered the composition chart from various perspectives, including committee members' preferences, workload balance and increasing the capacity of committee appointees.

In creating the draft chart, the following were considered:

- Committee composition requirements under the by-laws
- Composition needs of the committees based on projected workload and panel requirements

- Committee preferences as indicated by Council and committee members
- Workload of the committees to evenly distribute the workload
- Ensuring a mix of new and experienced committee members on each committee
- Any challenges of committee work raised by committee members over the previous year
- Availability of Council members and scheduling demands of the committees
- Placeholders have been added to the Draft Committee Composition Chart to indicate where appointed committee members could be placed.
- Placeholders are also present for committees that are made up of Executive Committee members, such as the Registrar Performance Committee and the Audit Committee.

Council will need to take into consideration the outcome of the Executive Committee election before finalizing the committee compositions for 2022 – 2023. The composition of the Executive Committee will affect the composition of the following committees:

- Registrar Performance, Compensation, and Review Committee: The Executive Committee and one other member of Council
- Audit Committee: The Executive Committee, minus the President and Vice-President, and two other members of Council. There must be two elected and two publicly appointed Council members on the Committee.

RECOMMENDATION

That Council approve the draft Committee Composition Chart as recommended by the Executive Committee, subject to amendments based on the outcome of the Executive Committee election.

APPENDIX

- 8.2 DRAFT Committee Composition Chart

APPENDIX 1: DRAFT COMMITTEE COMPOSITION WORKSHEET 2022-23

COMMITTEE	REQUIREMENTS/CONSIDERATIONS	PUBLIC COUNCILLORS	ELECTED COUNCILLORS	COMMITTEE APPOINTEES	2021-2022 MEMBERS
Registration	<ul style="list-style-type: none"> - works in panels - ideally 3 panels of 3 people each - panel must have public member on each - meets regularly <p>**pair with ICRC (who is not on QA)</p> <p>CHAIR – Denis Tsang</p>	<p><i>At least 2 public</i></p> <p>Israel – 1 Sharanjit – 2</p>	<p><i>At least 2 elected</i></p> <p>Donna – 1 Denis – 1 Julie – 2</p>	<p><i>At least 1 committee appointee</i></p> <p>Ruchika – 1 Laura Bjorklund (<i>pending appointment</i>)</p>	<p>Douglas Ellis Santhikumar Chandrasekharan Sharanjit Padda Denis Tsang RD, Chair Donna Hennyey RD Julie Slack RD Lesia Kicak RD Ruchika Wadhwa RD</p>
QA	<ul style="list-style-type: none"> - RDs from different fields - often works in panels - try to avoid overlap with ICRC due to potential conflict with QA referrals <p>CHAIR – Khashayar Amirhosseini</p>	<p><i>At least 2 public (three preferred)</i></p> <p>Santhikumar – 1 Doug - 2 Ray – n/a</p>	<p><i>At least 2 elected</i></p> <p>Ana D – 2 Donna – 2 Karine – 1 Denis – 3</p>	<p><i>At least 1 committee appointee</i></p> <p>Khashayar – 1 Hannah Chan (<i>pending appointment</i>)</p>	<p>John Regan Douglas Ellis Raynold D’Sa Santhikumar Chandrasekharan Denis Tsang RD Donna Hennyey RD Karine Dupuis RD Lesia Kicak RD Khashayar Amirhosseini RD, Chair</p>
ICRC	<ul style="list-style-type: none"> - works in panels - avoid overlap with QA <p>CHAIR – Kerri LaBrecque</p>	<p><i>At least 3 public</i></p> <p>John - 1 Doug - 1 Sharanjit – 1 Ray – n/a</p>	<p><i>At least 3 elected</i></p> <p>Kerri – 2 Julie – 1 Denis – 2 Leisa – 1</p>	<p><i>At least 2 committee appointees</i></p> <p>Barbara G – 1 Cindy – 2</p>	<p>Israel Ogbechie John Regan Raynold D’Sa Sharanjit Padda Ann Watt RD Kerri LaBrecque RD, Chair Lesia Kicak RD Julie Slack RD Cindy Tsai RD Barbara Grohmann RD</p>

<p>Patient Relations</p>	<p>-unknown how much work this will involve</p> <p>*pair with QA</p> <p>The Executive Committee has approved that the committee appointee position will remain open for the time being due to the current workload.</p> <p>CHAIR – Ann W</p>	<p><i>At least 2 public</i></p> <p>Israel – 2 Ray – n/a</p>	<p><i>At least 2 elected</i></p> <p>Karine – 2 Ann W – 3</p>	<p><i>At least 1 committee appointee</i></p> <p>Vacant</p>	<p>Douglas Ellis Santhikumar Chandrasekharan Ann Watt RD Donna Hennyey RD, Chair Karine Dupuis RD</p> <p>Vacant position</p>
<p>Discipline/ Fitness to Practice</p>	<p>-may not meet, however if needed, is very important</p> <p>-put all Council members on this committee</p> <p>*training prior to hearing with legal counsel and for who is available</p> <p>CHAIR – Barbara G</p>	<p><i>At least 2 public</i></p> <p>All</p>	<p><i>At least 3 elected</i></p> <p>All</p>	<p><i>At least 1 committee appointee</i></p> <p>Barbara G</p>	<p>All Public Members All Elected Council Members Cindy Tsai RD, Chair</p>
<p>Professional Practice</p>	<p>Working on social media guidelines, private practice guidelines</p> <p>CHAIR – Barbara MM</p>	<p><i>At least 2 public</i></p> <p>John - willing Santhi – n/a</p>	<p><i>At least 2 elected</i></p> <p>Ana D – 1 Ann – 2</p>	<p><i>At least 1 committee appointee</i></p> <p>Barbara MM – 1 Khashayar - 3 Jane Lac (<i>pending appointment</i>)</p>	<p>John Regan Israel Ogbechie Ana Djalilvand RD Ann Watt RD Denis Tsang RD Barbara Major-McEwan RD, Chair Vacant</p>
<p>RPCR</p>	<p>Exec Com plus one other member of Council</p> <p>TBD, pending Exec Comm election (Ann, John, Denis willing) (5th member)</p> <p>CHAIR – Kerri LaBrecque</p>			<p>N/A</p>	<p>Vacant Israel Ogbechie Denis Tsang RD Kerri LaBrecque RD, Chair Lesia Kicak RD</p>

Audit	-2 members of Exec (not President & VP) -2 other councillors CHAIR – Doug Ellis	2 public Doug – 3 (<i>if eligible</i>)	2 elected Donna – 3 (<i>if eligible</i>)	N/A	Douglas Ellis Israel Ogbechie Donna Hennyey RD, Chair Lesia Kicak RD
Governance Committee	CHAIR – Ann Watt	At least 1 public John - 2 Santhi - 3	At least 1 elected Ann W - 1 Leisa – 2	At least 1 committee appointee Cindy – 1 Barbara MM – 2	John Regan Santhikumar Chandrasekhan Ann Watt RD Lesia Kicak RD Cindy Tsai RD
Elections	- 3 Public Councillors only, no elected members allowed CHAIR – John Regan	3 public Israel – willing John – willing Sharanjit – willing	N/A	N/A	Douglas Ellis John Regan Israel Ogbechie

Numbers beside name indicate committee choice

Yellow – Served in 2021 – 2022

Green – Public councillor

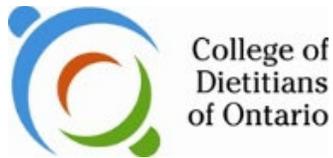
Blue – Elected councillor

Black – Committee appointee

Black – Committee Chair

	Councillors	Committees	Term
Elected	Anahita Djalilvand	Quality Assurance, Professional Practice	Term 1, 2024
Elected	Ann Watt	Governance, Professional Practice	Term 2, 2025
Elected	Denis Tsang	Registration, ICRC	Term 2, 2025
Elected	Donna Hennyey	Registration, Quality Assurance, Audit if eligible	Term 2, 2025
Elected	Karine Dupuis Pominville	Quality Assurance, Patient Relations	Term 1, 2024
Elected	Kerri LaBrecque	ICRC, RPCR	Term 1, 2023
Elected	Lesia Kicak	ICRC, Governance	Term 1, 2023
Elected	Julie Slack	Registration, ICRC	Term 1, 2024
Public	Douglas Ellis	Quality Assurance, ICRC, Audit if eligible	December 1, 2024
Public	John Regan	ICRC, Governance, Professional Practice, Elections	April 17, 2023
Public	Israel Ogbechie	Registration, Patient Relations, Elections	November 25, 2024
Public	Raynold D'Sa	Quality Assurance, ICRC, Patient Relations	July 8, 2024
Public	Santhikumar Chandrasekharan	Governance, Professional Practice, Quality Assurance	December 9, 2022
Public	Sharanjit Padda	Registration, ICRC, Elections	February 9, 2025

Appointees	Committees	Term
Amirhosseini Khashayar	Quality Assurance, Professional Practice	Term 4, 2024 (<i>Max limit</i>)
Barbara Grohmann	ICRC, Discipline	Term 2, 2025
Barbara Major-McEwan	Professional Practice, Governance	Term 2, 2024
Cindy Tsai	Governance, ICRC	Term 4, 2024 (<i>Max limit</i>)
Ruchika Wadhwa	Registration	Term 3, 2025 (<i>Max limit</i>)
Laura Bjorklund	Registration	Term 1, 2025
Hanna Chan	Quality Assurance	Term 1, 2025
Jane Lac	Professional Practice	Term 1, 2025



College of
Dietitians
of Ontario

Council Briefing Note

Topic:	Council Workplan and Training Calendar
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

Council is being asked to review the Council Workplan and Training Calendar for 2022-23 term.

PUBLIC INTEREST RATIONALE

A Council that effectively governs and performs the regulatory oversight of the College best serves the interests of the public. Having a well-developed plan for accomplishing work and training members helps Council meet this responsibility of public protection.

BACKGROUND

Each year at its June meeting, Council reviews the Council Workplan and Training Calendar. It should comprise key activities required to meet the College's [Strategic Plan 2020-2024](#) and the various regulatory and oversight duties performed by Council. Training activities should be relevant and support the performance of the Council's members and should be tied to Council and Committee learning goals and changing public expectations.

The workplan is part of the package of recommendations coming out of the Governance Committee's governance modernization review and is intended to give council a picture of its expected work over the coming year. It is a general outline of the proposed work, and actual council agendas may evolve or fluctuate over the year.

RECOMMENDATION/NEXT STEPS

That Council approve the 2022 Council Workplan and Training Calendar as recommended by the Executive Committee.

ATTACHMENTS

- Appendix 1 – Council Workplan 2022-23
- Appendix 2 – Training Calendar 2022-23

[June 17, 2022]

APPENDIX 1

JUNE COUNCIL WORK PLAN 2022	
Council Operations and Monitoring Reports	Policy, By-Law and Regulation
Minutes, March 2022	Governance Modernization Recommendations
Executive Committee Report	Final Policy on Determining Currency Hours with Definition of Practising Dietetics Revisions
Review of Council Meeting and Annual Evaluations	Investment Policy (replacing Exec limitations)
Review of Council Annual Workplan and Training Calendar	Reserve Fund Policy
Management Report	
Risk Monitoring Report (Q1)	
Approval of Committee Appointments and Committee Slate	
Executive Committee Election	
Audit of Register	
Presentation of Audit and Approval of Auditor	

SEPTEMBER COUNCIL WORK PLAN 2022

Council Operations and Monitoring Reports	Policy, By-Law and Regulation
Minutes, June 2022 Executive Committee Report Review of Council Meeting Evaluations Management Report Risk Monitoring Report (Q2) Strategic Plan Update Registrar Coverage Plan	EDI Policies Council Member Competencies and Elections Bylaw (circulation) Council Code of Conduct Policy Update Financial Policies (replacing Exec limitations L8 and L16)

DECEMBER COUNCIL WORK PLAN 2022	
Council Operations and Monitoring Reports	Policy, By-Law and Regulation
Minutes, September 2022	Governance Modernization Implementation Plan
Executive Committee Report	Updates to Governance Manual/By-laws
Review of Council Meeting Evaluations	Fees Bylaw, Annual Fee and Quality Assurance Fees (circulation)
Management Report	Elections by-law (post circulation)
Risk Monitoring Report (Q3)	Draft Social Media Standards and Practice Guidelines for Dietitians in Ontario
3 rd party Council Performance Assessment (<i>tentative</i>)	Registration Policy on Virtual Practice (<i>tentative</i>)
	ICRC Policy – Employer Information Sharing

MARCH COUNCIL WORK PLAN 2023	
Council Operations and Monitoring Reports	Policy, By-Law and Regulation
Minutes, December 2022 with Action	Final Social Media Standards and Practice Guidelines for Dietitians in Ontario
Executive Committee Report	Draft Private Practice Guidelines for Dietitians
Review of Council Meeting Evaluations	Honoraria Policy
Management Report	Final Registration Virtual Practice Policy <i>(tentative)</i>
2023 – 2024 Budget and Strategic Workplan	Fees Bylaw: Annual Fee and Quality Assurance Fees (post circulation)
Risk Monitoring Report (Q4)	
CPMF Report	

APPENDIX 2

Council Training Calendar – 2022-23

June – September 2022		
Training	Audience	Facilitator
President & VP orientation/training	President & Vice-President (after June Council meeting)	Registrar
Fiduciary Duties/Conflict of Interest training (June council)	All Council and Committee members	Registrar/External Consultant
Governance Modernization Workshop (June Council)	All Council and Committee members	
October – December 2022		
Training	Audience	Facilitator
EDI Training (Based on Needs Assessment)	All Council and Committee members	External consultant
January – March 2023		
Training	Audience	Facilitator
Orientation Training for Professional Members Eligible to Stand for Election	Professional Members Eligible to Stand for Election	Registrar and Manager of Governance
Zero-Based Budgeting	All Council members (March meeting)	Director of Finance
April – June 2023		
Training	Audience	Facilitator
Meeting Facilitation Training	All Council and Committee members	External Consultant
New Elected Council Member Orientation	Newly elected Council members	Registrar
Financial Statements 101 – and Investment Strategy Review	All Council members (optional)	Director of Finance and College’s Investment Advisor
Ongoing		
Training	Audience	Facilitator
New Public Council Member Orientation	Newly appointed public Council members as they are appointed by the government	Registrar
Training based on Council Evaluations and Feedback	Council will identify training needs through Council Evaluation instruments ongoing	As needed



Council Briefing Note

Topic:	Proposed Council Meeting Dates – 2022-2023
Purpose:	Decision Required
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

Council is being asked to consider the proposed calendar of Council meeting dates, as recommended by the Executive Committee, for the 2022-2023 term.

PUBLIC INTEREST RATIONALE

CDO is committed to effective governance. When Council meets, it can effectively make governance, strategic and oversight decisions in order to carry out the College's public protection mandate.

BACKGROUND

Each year at its June meeting, Council determines its meeting dates for the upcoming term. Council meets quarterly, typically in June, September/October, November/December, and March. Each Council meeting is scheduled for one to two days.

CONSIDERATIONS

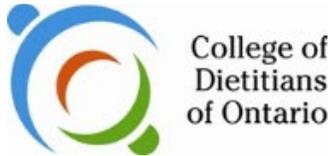
When determining the dates for the term, Council will consider the Council work plan, the Council training calendar, holidays and other conferences typically attended by CDO staff, Council, and committee members.

The following are proposed dates for Council meetings in the 2022-2023 term:

- Friday, September 30, 2022
- Thursday, December 8 & Friday, December 9, 2022
- Friday, March 24, 2023
- Thursday, June 15 & Friday, June 16, 2023

RECOMMENDATION

To approve the proposed Council meeting dates for the 2022-2023 term as recommended by the Executive Committee.



Council Briefing Note

Topic:	Quarterly Risk Management Monitoring Report
Purpose:	Monitoring Report
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Risk-Based and Right-Touch Regulation
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

To review the Q1 Risk Monitoring Report.

PUBLIC INTEREST RATIONALE

In the public's interest, an essential aspect of College's governance and management is to ensure that organizational and risks to the public are identified, assessed, and managed efficiently and effectively.

BACKGROUND

CDO's updated Risk Monitoring Policy was approved by Council at its March 25, 2022 meeting.

The policy sets out Council's role around risk management, how Council will ensure and cultivate a risk management culture, and the Registrar's accountability to Council through quarterly reporting and the establishment of operational procedures.

The Registrar will also report to Council on any urgent, rapidly developing and critical risks should they arise between council meetings. Low and frequently monitored risks will be recorded and managed.

The procedures will include staff involvement at all levels to ensure that emerging risks can be identified quickly, and that a strong risk management culture is cultivated throughout the organization.

CONSIDERATIONS

The June 2022 (Q1) Risk Monitoring Report is before Council for its consideration (Appendix 1) with updates on the status and treatment of the various risks identified. No new risks have been added or removed from the report.

RECOMMENDATION/NEXT STEPS

To provide feedback on the current risk assessment and mitigation efforts.

ATTACHMENTS

- Appendix 1: June 2022 (Q1) Risk Monitoring Report

**Risk Monitoring Report
June 2022**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Update as of June 1, 2022
Program	Accreditation Provider Withdrawal	<p>Dietitians of Canada has withdrawn as the national education accreditation provider effective March 31, 2022, resulting in the need to secure another defensible, objective, and fair accreditation process for programs that are acceptable to the College and Dietetic Regulators across Canada as per the legislative requirements of Colleges. <i>The Health Professions Procedural Code</i> requires Colleges to develop, establish and maintain standards of qualifications for the purposes of registration. <i>The Dietetics Act</i> in Ontario requires that Canadian programs are accredited by an accredited agency approved by Council. National accreditation supports the registration of competent entry to practice candidates and facilitates labour mobility.</p> <p>Should a program choose not to sign on to the new accreditation process, the College would need to determine how to assess Canadian graduates from unaccredited programs. This would be an individualized, labour-intensive equivalency process for the College.</p>	<ul style="list-style-type: none"> The College is part of the Alliance of National Dietetic Regulators. The Alliance meets regularly and collaborates on issues of national interest, including examinations and entry to practice standards. The Alliance has identified a credible third-party accreditation body (EQual/Accreditation Canada). EQual is an established and bilingual service provider that currently conducts accreditation for approximately 225 programs, including 22 health professions. Using each profession’s competency profile as the foundation (ICDEPs), they provide a framework and logistical support for the self-assessment, on-site review and determination of accreditation awards. Dietitian/educator surveyors are included on survey teams. The Alliance is working with educators to communicate on the EQual accreditation process, develop a transition plan, and engage in consultation on the accreditation standards. 	<ul style="list-style-type: none"> In May 2022, the Alliance signed an agreement with EQual as the new accreditation service provider. Each provincial regulatory College will confirm with their respective Councils recognition of EQual accreditation (as per legislation). The Alliance is creating a transition proposal and timeline, which will be presented for approval by respective provincial Councils. The Alliance will communicate with education and practicum programs the date when PDEP accreditation awards will no longer be recognized for the purpose of registration. The Alliance will be scheduling orientation workshops for education and practicum program representatives (at no cost to the schools for 1 attendee) and establishing a working group to address profession-specific standards for inclusion in the accreditation framework. The CDO has alerted the Ministry of Health and Office of the Fairness Commissioner regarding the change.
Program	Potential Registration	The Ministry of Health recently consulted with Colleges regarding potential registration amendments related to Canadian experience,	<ul style="list-style-type: none"> The College will be reviewing its registration policies, along with its internal timelines and service standards and will be reporting on its 	<ul style="list-style-type: none"> The Government has issued its proposal to Schedule 6 of Bill 106, Regulations under the Regulated Health Professions Act, 1991 (RHPA) - Registration

**Risk Monitoring Report
June 2022**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Update as of June 1, 2022
	Regulatory Changes	<p>registration timelines, language proficiency, and registration processes during emergencies. Consultations are also in progress for similar legislative amendments for non-health Colleges under the Fair Access to Regulated Professions and Compulsory Trades Act (FARPACTA).</p> <p>Similar amendments may effect RHPA Colleges in the near future. The College has draft Registration Regulation amendments that are on hold and may need further revisions/modifications in light of these potential changes.</p> <p>The Office of the Fairness Commissioner (OFC) launched its Risk-Informed Compliance Framework (RICF) in 2021, which assigned a baseline low risk rating to the College. New annual reporting requirements for Colleges in their fair registration practices reports will be implemented in the fall of 2022.</p>	<p>timelines as a KPI on the strategic plan. The College has a PLAR process and does not require Canadian experience.</p> <ul style="list-style-type: none"> The College is monitoring changes to registration practices occurring at other regulatory bodies and is working on refreshing our regulatory networks with health and non-health regulators through the Ontario Regulators for Access Consortium (ORAC) regulatory registration working group. The College is participating in a consultation with the Centre for Canadian Language Benchmarks (CCLB) to provide input into the usefulness of a test developed under federal government funding for high-stakes purposes which might include regulation. The College continues to monitor and improve on the resiliency of its registration processes including offering online competency assessment processes. 	<p>Barriers for Regulated Health Professionals. The proposal is slightly different than the FARPACTA amendments.</p> <ul style="list-style-type: none"> The CDO will be commenting on the consultation by the deadline of June 10, 2022 to communicate potential impacts on the registration process and the organization. Significant resources may be required to comply with new requirements (eg. Legal fees, committee time, and the reallocation of staff time which may affect other projects and initiatives). The OFC has confirmed that CDO continues to meet the low-risk category assessment for 2022/23. The OFC is finalizing the new RICF Fair Registration Practices annual reporting template and CDO has provided feedback by the deadline of June 3, 2022.
Governance	Delays on CPMF commitments	With multiple changes at the leadership level at the College in 2021 (Registrar and key staff leadership positions), coupled with the COVID-19 pandemic, the College has experienced	<ul style="list-style-type: none"> The College has communicated these challenges to the Ministry on two occasions in the context of CPMF discussions and will note where these have occurred in the College’s 2021 CPMF submission. 	<ul style="list-style-type: none"> A number of commitments have been completed including: the development of a risk monitoring report, KPIs, updates to the conflict-of-interest form, the inclusion of a council action item list in the

**Risk Monitoring Report
June 2022**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Update as of June 1, 2022
		delays on some of the commitments in the 2020 CPMF.	<ul style="list-style-type: none"> Through the strategic plan and our KPIs, the College will demonstrate compliance with the expectations set out in the CPMF going forward, mitigating the risk for non-compliance. 	materials, and an updated Executive Committee Report template.
Governance	Regulatory Governance Changes	The Ministry of Health recently consulted on a governance modernization and oversight proposal. It is anticipated that legislative amendments will be proposed in the coming months. The governance changes may have significant financial and human resource implications for the College.	<ul style="list-style-type: none"> Council participated in the consultation and provided a letter to the Ministry on February 23, 2022. The College’s new governance committee will be developing implementation options for Council consideration in Q2/Q3. Through regulatory collaboration and networking, the College is staying informed of potential changes, and how these changes may affect the College and other regulatory Colleges. The College will be recruiting committee members in the coming months and will consider building committee capacity by recruiting additional committee appointees in anticipation of the changes. 	<ul style="list-style-type: none"> Legislation has not yet been introduced. The CDO is monitoring this following conclusion of the provincial election. Council will consider a governance modernization roadmap with a plan for implementation to preparation for the proposed changes. Three new committee members are being recommended in the 2022/23 council year to expand the Committee roster.
Operational	Cybersecurity Breach	Risk arises from the current geopolitical situation, increasing sophistication of phishing scams, and greater connectivity of people, systems and programs at the College due to the COVID-19 pandemic. Potential risks include: privacy breaches, organizational/staff downtime, reputation and financial costs.	<ul style="list-style-type: none"> The College has a cyber security response plan, credit card incident response plan and an emergency disaster recovery plan that are reviewed on an annual basis. The review will be conducted by Q2. The College maintains insurance which covers IT and cybersecurity. 	<ul style="list-style-type: none"> CDO staff attends regular Cyber security community of practice meetings to stay abreast of developments and best practices.

**Risk Monitoring Report
June 2022**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Update as of June 1, 2022
			<ul style="list-style-type: none"> • A security audit was completed in September 2021 and minor gaps were identified and addressed. Post security audits will take place to ensure compliance with audit recommendations. • Staff regularly engages in awareness dialogue regarding phishing scams. Additional formal training for Council and Staff on cybersecurity will be explored. 	
Operational	Succession Planning/Staff Turnover and Retention	Risks around business continuity, retention of institutional knowledge through retirement, leave of absence, or resignation. The pandemic has led to societal changes and re-evaluation of priorities, work-life balance, and return to work policies.	<ul style="list-style-type: none"> • Review of staffing model by third party HR consulting firm completed in fall 2021, resulting in the addition of staffing resources to ensure the College can successfully meet its regulatory obligations now and into the future. These additional HR resources improve the distribution of workload, assist with succession planning, and help to diffuse the centralization of institutional knowledge. • A return to office plan will be developed and evaluated in Q1 – Q2. • College HR processes and procedures are undergoing review in 2022. • Conduct process documentation for key College activities to further decentralize knowledge of processes and procedures and ensure continuity. • Develop a records management policy to ensure documentation, continuity and accessibility of institutional knowledge. 	<ul style="list-style-type: none"> • Council and Staff return to office survey was conducted and planning is in progress. • Internal Data Governance Working Group struck, will meet in Q2.

**Risk Monitoring Report
June 2022**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Update as of June 1, 2022
Financial	Increasing Costs of Regulation	Resources required to keep pace with complex and evolving regulatory requirements and economic inflation are increasing. Annual membership fees have been static over the last two years.	<ul style="list-style-type: none"> • Prudent financial habits are in place at the College. For example, the College engages in zero-based budgeting; assesses vendor contracts to ensure the best value for the College (quality balanced with price) and Council and Management regularly monitor expenditures against the approved budget. Internal controls are in place for the highest risk areas, including on College purchases, and the audit Committee and Management review these internal controls annually. • Will require either additional resources or reduction of strategic projects. • Conduct analysis on By-law 2: Fee Schedule in Q3. • Reserve fund policy to be reviewed by Council in Q2. 	<ul style="list-style-type: none"> • Inflation rates have increased sharply (CPI <6% in April 2022), may have an impact on price of goods and services that could affect the CDO • Reserve fund policy will be considered by Council at June meeting.
Financial	Investment Returns	Markets may become volatile due to current geopolitical conditions, presenting a risk to the College’s investment returns.	<ul style="list-style-type: none"> • Monitor situation with investment advisor. • To diffuse the risk, some funds have been moved to stable GICs. • The College’s investment policy requires book value of investments in equities to not exceed 40% of the entire book value of the portfolio to limit market risk while allowing for a reasonable growth of the portfolio. The policy will be reviewed by the Audit Committee in Q1. 	<ul style="list-style-type: none"> • Investment policy to be considered by Council at June 2022 meeting.

Financial statements of the

COLLEGE OF DIETITIANS OF ONTARIO

March 31, 2022

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INDEPENDENT AUDITOR'S REPORT

To the Members of the
College of Dietitians of Ontario

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

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

Basis for Opinion

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

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

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

TORONTO, Ontario
June 17, 2022

Licensed Public Accountants

COLLEGE OF DIETITIANS OF ONTARIO

Statement of Financial Position

As at March 31	2022	2021
Assets		
Current		
Cash	\$ 209,956	\$ 763,552
Accounts receivable	3,561	2,908
Prepaid expenses	57,449	57,287
	270,966	823,747
Investments (note 3)	5,413,050	4,627,549
Capital assets (note 4)	45,966	63,471
Intangible assets (note 5)	58,061	84,791
	\$ 5,788,043	\$ 5,599,558
Liabilities		
Current		
Accounts payable and accrued liabilities (note 6)	\$ 261,958	\$ 255,942
Deferred revenue (note 7)	1,629,353	1,615,537
	1,891,311	1,871,479
Net assets		
Invested in capital and intangible assets	104,027	148,262
Internally restricted (note 8)	3,792,705	3,579,817
	3,896,732	3,728,079
	\$ 5,788,043	\$ 5,599,558

Commitments (note 10)

Approved on behalf of the Council

_____, President

_____, Member

See accompanying notes to the financial statements.

COLLEGE OF DIETITIANS OF ONTARIO

Statement of Operations

Year ended March 31	2022	2021
Revenues		
Member fees	\$ 2,799,930	\$ 2,717,840
Investment income (note 9)	193,285	161,444
Application and assessment fees	114,420	76,890
Other income	6,147	28,286
	3,113,782	2,984,460
Expenses		
Salaries and benefits	1,728,678	1,541,011
Investigations	173,661	111,774
Council and committee	163,467	119,280
Professional services	143,670	70,865
Rent	138,033	137,863
Computer related	110,088	99,532
Communication initiatives	95,050	26,278
Bank charges	63,803	61,954
Registration assessment components	38,928	38,703
Telephone and internet	30,149	31,650
Office	25,486	23,168
Memberships	24,053	22,878
Contracted services	19,527	-
Staff development	17,774	12,863
Quality assurance assessment components	16,409	19,359
Insurance	7,758	7,286
Staff travel	1,849	1,706
	2,798,383	2,326,170
Excess of revenues over expenses before undernoted	315,399	658,290
Amortization of capital assets	(25,983)	(25,324)
Amortization of intangible assets	(42,155)	(50,955)
Realized and unrealized gains (losses) on investments (note 9)	(78,608)	749,614
Excess of revenues over expenses for the year	\$ 168,653	\$ 1,331,625

See accompanying notes to the financial statements.

COLLEGE OF DIETITIANS OF ONTARIO
Statement of Changes in Net Assets

Year ended March 31	Unrestricted	Invested in capital and intangible assets	Internally restricted	2022 Total	2021 Total
Balance, beginning of year	\$ -	\$ 148,262	\$ 3,579,817	\$ 3,728,079	\$ 2,396,454
Excess (deficiency) of revenues over expenses for the year	236,791	(68,138)	-	168,653	1,331,625
Purchase of capital and intangible assets (net)	(23,903)	23,903	-	-	-
Inter-fund transfer	(212,888)	-	212,888	-	-
Balance, end of year	\$ -	\$ 104,027	\$ 3,792,705	\$ 3,896,732	\$ 3,728,079

COUNCIL DRAFT

COLLEGE OF DIETITIANS OF ONTARIO

Statement of Cash Flows

Year ended March 31	2022	2021
Cash flows provided by (used in) operating activities		
Excess of revenues over expenses for the year	\$ 168,653	\$ 1,331,625
Item not requiring a cash outlay		
Amortization of capital assets	25,983	25,324
Amortization of intangible assets	42,155	50,955
Realized and unrealized (gains) losses on investments	78,608	(749,614)
Amortization of deferred lease inducement	(3,472)	(3,472)
	311,927	654,818
Changes in non-cash working capital balances:		
Accounts receivable	(653)	7,628
Prepaid expenses	(162)	7,513
Accounts payable and accrued liabilities	6,016	20,843
Deferred revenue	17,288	28,187
Cash provided by operating activities	334,416	718,989
Cash provided by (used in) investing activities		
Purchase of investments	(3,305,355)	(4,001,743)
Proceeds on sale of investments	2,441,246	3,465,624
Purchase of capital assets	(6,758)	(2,858)
Purchase of intangible assets	(17,145)	(6,245)
Cash used by investing activities	(888,012)	(545,222)
Net increase (decrease) in cash	(553,596)	173,767
Cash, beginning of year	763,552	589,785
Cash, end of year	\$ 209,956	\$ 763,552

See accompanying notes to the financial statements.

COLLEGE OF DIETITIANS OF ONTARIO

Notes to the Financial Statements

March 31, 2022

1 Organization

The College of Dietitians of Ontario ("College") regulates and supports registered dietitians in Ontario. It enhances safe, ethical and competent nutrition services provided by dietitians. The College is governed by the provisions of the Regulated Health Professions Act, 1991 and the Dietetics Act, 1991.

The College is a not-for-profit corporation incorporated without share capital under the laws of the Province of Ontario and, as such, is exempt from income taxes.

2 Significant accounting policies

These financial statements have been prepared by management in accordance with Canadian accounting standards for not-for-profit organizations.

(a) Cash

Cash includes cash deposits with major financial institutions and petty cash.

(b) Capital assets

The cost of a capital asset includes its purchase price and any directly attributable cost of preparing the asset for its intended use. When conditions indicate a capital asset no longer contributes to the College's ability to provide services or that the value of future economic benefits or service potential associated with the capital asset is less than its net carrying amount, its net carrying amount is written down to its fair value or replacement costs. As at March 31, 2022, no such impairment exists.

Amortization is provided for on a straight-line basis over their estimated lives as follows:

Office furniture and equipment	5 - 8 years
Computer equipment	5 years
Leasehold improvements	10 years

(c) Intangible assets

Intangible assets comprise computer software and database programming and are recorded at cost and amortized over their estimated useful lives on a straight-line basis of five years.

(d) Revenue recognition

(i) Membership fees

Membership fees are billed for the period from November 1 to October 31 and recognized as revenue proportionally over the period to which these fees relate. Fees received in advance are recorded as deferred revenue.

(ii) Investment income

Investment income is comprised of interest, dividends and realized gains and losses on disposal of investments, and unrealized gains and losses on the fair value of investments. Interest is recognized as revenue when earned. Dividends are recorded as revenue when declared. Realized gains and losses on disposal of investments are recognized when the transactions occur. Unrealized gains and losses, which reflect the changes in fair value during the period, are recognized at each reporting date and are included in current period operating results.

(iii) Other income

All other fees and income are recognized as revenue when the services are provided.

COLLEGE OF DIETITIANS OF ONTARIO

Notes to the Financial Statements

March 31, 2022

2 Significant accounting policies continued

(e) Financial instruments

(i) Measurement

The College initially measures its financial assets and financial liabilities at fair value, adjusted by, in the case of a financial instrument that will not be measured subsequently at fair value, the amount of transaction costs directly attributable to the instrument. Transaction costs of those financial assets and financial liabilities subsequently measured at fair value are recognized in the year incurred.

The College subsequently measures its financial assets and liabilities at amortized cost, except for investments, which are measured at fair value. Changes in fair value are recognized in the statement of operations. Fair values are determined by reference to quoted market prices in active markets.

(ii) Impairment

At the end of each reporting period, the College assesses whether there are any indications that a financial asset measured at amortized cost may be impaired. There are no indications of impairment as at March 31, 2022.

(f) Management estimates

The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Significant estimates include carrying amounts of investments measured at fair market value, the useful lives of capital and intangible assets, certain accrued liabilities and deferred revenue.

Actual results may differ from these estimates, the impact of which would be recorded in future periods. Estimates and underlying assumptions are reviewed on an ongoing basis and revisions to accounting estimates are recognized in the year in which the estimates are revised and in any future years affected.

3 Investments

As at March 31		2022		2021	
		Cost	Fair Value	Cost	Fair Value
Fixed income	Maturing on dates between July 25, 2024 to December 15, 2032 (2021 - July 25, 2024 to December 15, 2032) bearing interest at rates between 0.82% to 3.80% annually (2021 - 0.82% to 2.90%)	\$2,916,277	\$2,652,741	\$1,472,370	\$1,372,693
Common shares		1,336,999	1,471,732	1,707,115	1,893,849
Preferred shares	Bearing interest at rates between 4.90% to 5.15% annually (2021 - 4.90% to 6.25%)	1,321,283	1,288,577	1,470,253	1,361,007
Total investments		\$5,574,559	\$5,413,050	\$4,649,738	\$4,627,549

COLLEGE OF DIETITIANS OF ONTARIO

Notes to the Financial Statements

March 31, 2022

4 Capital assets

As at March 31	2022		2021	
	Cost	Accumulated Amortization	Cost	Accumulated Amortization
Office furniture and equipment	\$ 143,337	\$ (124,303)	\$ 143,337	\$ (117,205)
Computer equipment	99,114	(79,951)	106,258	(85,646)
Leasehold improvements	265,035	(257,266)	265,035	(248,308)
	\$ 507,486	\$ (461,520)	\$ 514,630	\$ (451,159)
Net book value		\$ 45,966		\$ 63,471

5 Intangible assets

As at March 31	2022		2021	
	Cost	Accumulated Amortization	Cost	Accumulated Amortization
Computer software	\$ 252,733	\$ (194,672)	\$ 283,845	\$ (199,054)
Net book value		\$ 58,061		\$ 84,791

6 Accounts payable and accrued liabilities

As at March 31	2022	2021
Trade payables and accruals	\$ 230,744	\$ 234,528
Payroll withholding taxes	31,214	21,414
	\$ 261,958	\$ 255,942

7 Deferred revenue

(i) Deferred membership fees

	2022	2021
Balance, beginning of year	\$ 1,608,882	\$ 1,580,695
Fees received	2,817,218	2,746,027
Fees recognized as revenue	(2,799,930)	(2,717,840)
Balance, end of year	\$ 1,626,170	\$ 1,608,882

(ii) Deferred lease inducement

	2022	2021
Balance, beginning of year	\$ 6,655	\$ 10,127
Amortization of lease inducement	(3,472)	(3,472)
Balance, end of year	\$ 3,183	\$ 6,655

COLLEGE OF DIETITIANS OF ONTARIO

Notes to the Financial Statements

March 31, 2022

8 Net assets

The Council of the College has internally restricted net assets to be used for specific purposes. These funds are not available for unrestricted purposes without approval of Council.

Any transfers to internally restricted net assets must be approved by Council.

2022	Invested in Capital & Intangible Assets	Internally restricted			Total
		Capital & Intangible Assets Fund	Hearings Fund	General Reserve Fund	
Balance, beginning of year	\$ 148,262	\$ 109,024	\$ 100,000	\$ 3,370,793	\$ 3,728,079
Excess (deficiency) of revenue over expenses for the year	(68,138)	-	-	-	(68,138)
Purchase of capital and intangible assets (net)	23,903	-	-	-	23,903
Inter-fund transfers	-	-	100,000	112,888	212,888
Balance, end of year	\$ 104,027	\$ 109,024	\$ 200,000	\$ 3,483,681	\$ 3,896,732

2021	Invested in Capital & Intangible Assets	Internally restricted			Total
		Capital & Intangible Assets Fund	Hearings Fund	General Reserve Fund	
Balance, beginning of year	\$ 215,438	\$ 109,024	\$ 100,000	\$ 1,971,992	\$ 2,396,454
Excess (deficiency) of revenue over expenses for the year	(76,279)	-	-	-	(76,279)
Purchase of capital and intangible assets (net)	9,103	-	-	-	9,103
Inter-fund transfers	-	-	-	1,398,801	1,398,801
Balance, end of year	\$ 148,262	\$ 109,024	\$ 100,000	\$ 3,370,793	\$ 3,728,079

The details of internally restricted net assets are:

- (i) The Capital and Intangible Assets Fund is designated to provide a reserve for capital and intangible asset purchases.
- (ii) The Hearings Fund is designated to provide a reserve for the costs of hearing procedures.
- (iii) The General Reserve Fund is designated to provide a reserve for extraordinary expenses that exceed or fall outside the provisions of the College's approved operating budget, and are not otherwise covered by the Capital & Intangible Asset Fund or Hearings Fund. This fund is also intended to provide for budgeted expenses that exceed budgeted or actual income.

COLLEGE OF DIETITIANS OF ONTARIO

Notes to the Financial Statements

March 31, 2022

9 Investment income (loss)

Year ended March 31	2022	2021
Interest	\$ 26,939	\$ 33,820
Distributions from mutual funds	-	7,692
Distributions from common and preferred shares	166,346	119,932
	193,285	161,444
Realized and unrealized gains (losses) on investments	(78,608)	749,614
	\$ 114,677	\$ 911,058

10 Commitments

Pursuant to a lease for the premises expiring February 28, 2023, the College is obligated to pay \$133,211 in anticipated lease payments, which includes an estimate of additional rent and applicable GST/HST.

11 Financial instruments

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure at the statement of financial position date.

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The College is exposed to credit risk through its cash, accounts receivable and investments.

The College reduces its exposure to credit risk related to cash by maintaining deposits with a government regulated Canadian financial institution.

The College is not exposed to significant credit risk on its accounts receivable.

The College manages its exposure to credit risk related to fixed income investments by investing in high investment grade securities, in accordance with its investment policy.

Liquidity risk

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

The College meets its liquidity requirements and mitigates this risk by monitoring cash activities and expected outflows and holding assets that can be readily converted into cash, so as to meet all cash outflow obligations as they fall due.

COLLEGE OF DIETITIANS OF ONTARIO

Notes to the Financial Statements

March 31, 2022

11 Financial instruments (continued)

Market risk

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

Currency risk

Currency risk is the risk that the fair value of future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. The College is not subject to currency risk as it does not hold any financial instruments denominated in foreign currencies.

Interest rate risk

Interest rate risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in market interest rates. The exposure of the College to interest rate risk arises from its interest bearing investments and cash. The primary objective of the College with respect to its fixed income investments ensures the security of principal amounts invested, provides for a high degree of liquidity, and achieves a satisfactory investment return giving consideration to risk.

Equity risk

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

The College is exposed to equity risk on its investments in common shares and preferred shares. The College manages this risk by limiting the amount of equity investments that may be held, and requires that all investments be recommended by the College's investment portfolio manager.

Changes in risk

There have been no significant changes in the College's risk exposures in financial instruments from the prior year.



Council Briefing Note

Topic:	Review of Reserve Fund Policy
Purpose:	Decision Required
Strategic Plan Relevance:	Goal #3: Risk-Based and Right Touch Regulation
From:	Melanie Woodbeck, Registrar and Executive Director Sarah Ahmed, Director of Finance & Corporate Services

ISSUE

The Council is being asked to review and approve the Reserve Fund Policy, which was approved by Council on March 29, 2019 (see Appendix 1). The policy states that Council will review this policy every 3 years to ensure that the approximate target level for the General Reserve Fund is reasonable.

PUBLIC INTEREST RATIONALE

A decision to review and approve the Reserve Fund Policy serves the public interest by ensuring appropriate governance and oversight on financial matters. This will also ensure that CDO has sufficient funds to continue operations in the event of unforeseen circumstances.

BACKGROUND

Council approved the creation of a General Reserve Fund in March 2018. The purpose of this new fund was to create a segregated fund (a “savings” account) to provide for extraordinary expenses that exceed or fall outside the provisions of its approved operating budget and are not covered by the Capital & Intangible Assets or Hearings Funds. The final policy was approved by Council in March 2019. This policy is audited annually as part of the overall financial audit.

The reason for segregating “savings” from our day-to-day fund was to provide greater clarity on what that savings amount is, and to help Council to identify an appropriate amount or range to maintain as “savings”.

Council can, but does not have to, establish a target range for the balance of a General Reserve Fund. An environmental scan done in 2018 showed that other health regulatory Colleges in Ontario had set this target at a minimum of 6 months of annual operating expenses to a maximum of 12 months of annual operating expenses. The amount approved in the policy is 8

months of operating expenses. The policy also refers to the three other funds held by the College, i.e., the Operating Fund, the Capital & Intangible Asset Fund and the Hearings Fund.

CONSIDERATIONS

As per the draft audited financial statements as of March 31, 2022, the College has \$3,483,681 in the General Reserve Fund (see Appendix 2). The approved budgeted operating expenses for Fiscal 2023 are \$3,136,288. Therefore, the College currently has enough funds in the General Reserve Fund to **cover 13 months of annual operating expenses**.

Council can establish a target General Reserve fund of more or less than 8 months coverage of operating expenses, or it can choose to keep it at 8 months. If Council wishes to establish a target of more or less than 8 months, the College will need to develop a plan to move the Reserve Fund to that level. A target of less than 8 months in reserves implies that more funds are available to spend on operations with less saved as reserves; a target of more than 8 months in reserves implies that fewer funds are available to spend on operations with more saved in reserves

On May 31, 2022, the Audit Committee considered the policy and recommends that that Council approve the Reserve Fund Policy and,

- Maintain an approximate target level for the General Reserve Fund established at 8 months of budgeted operating expenses.
- Increase in the target level for the Hearings Fund from \$100,000 to \$200,000. Note that Council originally approved \$100,000 in 2019 as the target for the Hearings Fund in 2008. However, in the last 2 years, there has been a significant increase in the number and complexity of complaints against members. This has increased the possibility of hearings at the College. Transferring additional funds to the Hearings Fund will ensure that \$200,000 will be restricted for use for hearings alone.

Executive Committee is expected to approve the transfers from the Operating Fund to the General Reserve Fund and Hearings Fund prior to finalization of the Fiscal 2022 year end financial statements.

The Fiscal 2023 operating budget maintained the membership renewal fees at \$641 per member (with no change since 2019). While we are hopeful that the pandemic will not continue to impact operations, its presence continues to present some challenges to forecasting expenses. Coupled with this is the practical reality that while fees haven't increased and the costs of regulation are increasing. For example, compliance with the regulatory and governance modernization may result in higher costs. The rising cost of inflation and the work required to achieve the strategic goals approved by Council, after deferring some of the work in previous years due to the pandemic, will increase costs. As mentioned above, the College has also experienced an increasing number of complaints regarding members since the start of the pandemic. Any changes to the Reserve Fund Policy should be made with these contextual items in mind.

Looking prospectively to Fiscal 2023, Council should consider establishing a Sexual Abuse Therapy and Counselling Fund. Regulatory Colleges have a statutory obligation to provide funding for allegations of sexual abuse if requested. Having this fund will ensure that CDO has set aside funds and is prepared to meet this obligation if necessary. This fund would be designated and internally restricted to cover the costs for therapy and counselling for clients who have been sexually abused by members.

This addition to the policy was not originally considered by the Audit Committee at the time of review.

Funds may be transferred from the Operating Fund or the General Reserve Fund to the Hearings Fund on an as-needed basis, after approval from Council. \$40,000 is recommended as a target amount for this fund.

Since Council is required to review the Reserve Fund Policy every 3 years, the Sexual Abuse Therapy and Counselling Fund has been added to the updated draft policy (see Appendix I).

RECOMMENDATION

As recommended by the Audit Committee, that Council approve the Reserve Fund Policy presented, with an approximate target level for the General Reserve Fund established at 8 months of budgeted operating expenses, and with an increase in the target level for the Hearings Fund from \$100,000 to \$200,000. This will be reflected in the audited financial statements for the Fiscal Year Ended March 31, 2022.

It is also recommended that Council approve the establishment a Sexual Abuse Therapy and Counselling Fund, with a target level of \$40,000. This will be implemented by the College in Fiscal 2022 - 2023.

ATTACHMENTS

- Appendix 1: Updated Reserve Fund Policy
- Appendix 2: Reserve Funds Summary Fiscal 2022

Appendix 1: Updated Reserve Fund Policy

POLICY: RESERVE FUNDS

Approval Date: March 29, 2019

Amended:

Policy:

The College shall establish and maintain a General Reserve Fund. The purpose of this policy is to ensure that adequate funds are set aside to provide for the stability of ongoing operations and to provide sufficient funds in the event College operations cease.

Council will review this policy every 3 years to ensure that the approximate target level for the each reserve fund is reasonable.

~~Procedure: The details of the General Reserve Fund are as follows:~~

This fund is designated and internally restricted to provide for extraordinary expenses that exceed or fall outside the provisions of the College's approved operating budget and are not otherwise covered by the Capital & Intangible Asset Fund or Hearings Funds. This fund is also intended to provide for budgeted expenses that exceed budgeted or actual income. The General Reserve Fund is not intended to impact the discretion granted to the Registrar under the College's By-Laws to authorize unbudgeted expenditures within certain specified parameters.

Examples of extraordinary expenses include, but are not limited to, unplanned or unexpected material expenditures such as a large capital purchase not covered by the Capital & Intangible Asset Fund, or the costs in the event that the College must wind down operations.

~~The Council has set a~~An approximate target level for this fund of 8 months of operating expenses ~~was established by Council in March 2018~~. The 8 months of operating expenses will be calculated using expenses in the most current budget. In the event of dissolution of Council, these funds are to be used only upon approval of a person or entity legally authorized to oversee the financial affairs of the College.

~~Council will review this policy every 3 years to ensure that the approximate target level for the fund is reasonable.~~

Additional Reserve Funds~~Background Information:~~

The College also maintains other funds: An Operating Fund, a Capital & Intangible Asset Fund and a Hearings Fund. These funds are included in this policy to provide additional information and context as to how the College reports on and tracks all of its financial activities.

All transfers between any of the General Reserve Fund, Operating Fund, Capital & Intangible Asset Fund and Hearings Fund shall be approved by Council upon the recommendation of the Executive Committee, unless otherwise specified.

Operating Fund: This fund reflects the ongoing activities of the College which are financed generally by registration, application and examination fees and investment income generated from the College's long-term investments. The fund also holds residual or surplus funds for which there is no planned purpose after transfers to other funds, including but not limited to, the General Reserve Fund, have been made. The fund is considered to be "unrestricted" in terms of the types of costs which can be paid for.

Capital & Intangible Asset Fund: This fund was established by Council, and is designated and internally restricted to provide for purchases which have a useful life of longer than one year and are not intended for sale. Capital asset purchases include office furniture, computer equipment and leasehold improvements (i.e. renovations). Intangible asset purchases include computer software and the programming costs of the College's database.

Funds may be transferred from the Operating Fund or the General Reserve Fund to the Capital & Intangible Asset Fund on an annual basis specifically to make these purchases, and to replenish the decline in value of the assets as quantified by amortization expense.

Hearings Fund: This fund was established by Council, and is designated and internally restricted to cover the costs, including legal costs, for conducting discipline and fitness to practice hearings for members.

Funds may be transferred from the Operating Fund or the General Reserve Fund to the Hearings Fund on an as-needed basis. ~~A Council has set a target level of \$1200,000 for this fund was established by Council in 2008.~~

Sexual Abuse Therapy and Counselling Fund: This fund was established by Council, and is designated and internally restricted to cover the costs for therapy and counselling for patients who have been sexually abused by members.

Funds may be transferred from the Operating Fund or the General Reserve Fund to the Hearings Fund on an as-needed basis. Council has set a target level of \$40,000 for this fund.

Appendix 2: Reserve Funds Summary Fiscal 2022

**COLLEGE OF DIETITIANS OF ONTARIO
RESERVE FUNDS SUMMARY: BASED ON DRAFT AUDITED FINANCIAL STATEMENTS
FOR THE PERIOD ENDED MARCH 31, 2022**

	OPERATING FUND	CAPITAL ASSET FUND (1)	GENERAL RESERVE FUND	HEARINGS	TOTAL RESERVE FUNDS
Fund balance, April 1, 2021	-	257,286	3,370,793	100,000	
Net Revenue (Expenses), Fiscal 2022	236,791	(68,138)	-	-	
Fund balance - March 31, 2022	236,791	189,148	3,370,793	100,000	3,896,732
Transfer from Operating Fund to Capital Asset Fund for Purchases (recorded by Auditors)	(23,903)	23,903	-	-	-
Balance before transfer	212,888	213,051	3,370,793	100,000	3,896,732
Recommended transfer from Operating Fund to General Reserve & Hearings Fund (proposed by CDO, pending approval from Executive Committee)	(212,888)	-	112,888	100,000 (2)	-
Fund balances after transfers - March 31, 2022 (agreed to draft Audited Financial Statements)	\$ -	\$ 213,051	\$ 3,483,681	\$ 200,000	\$ 3,896,732

TOTAL BUDGETED EXPENSES AS PER APPROVED BUDGET FOR FISCAL 2023 **\$ 3,136,288**

NUMBER OF MONTHS OF OPERATIONS COVERED BY GENERAL RESERVE FUND BALANCE **13**

NOTES:

(1) The capital asset fund balance represents actual physical capital assets on hand (depreciated value), and funds available for future capital asset acquisitions. The funds available for future capital asset acquisitions are internally restricted and may not be used for any other purpose without the approval of Council.

(2) \$70,500 has been budgeted for a potential hearing in Fiscal 2023. The Audit Committee passed a motion on May 31, 2022 to recommend that Council approves the Reserve Fund Policy originally approved in March 2019, with an approximate target level for the General Reserve Fund established at 8 months of budgeted operating expenses and an increase in the target level for the Hearings Fund from \$100,000 to \$200,000.

Council Briefing Note

Topic:	Investment Policy
Purpose:	Decision Required
Strategic Plan Relevance:	Goal #3: Risk-Based and Right Touch Regulation
From:	Melanie Woodbeck, Registrar & Executive Director Sarah Ahmed, Director of Finance & Corporate Services

ISSUE

Council is being asked to review and approve the Draft Investment Policy, or consider the other options presented by the Audit Committee.

PUBLIC INTEREST RATIONALE

A decision to approve an investment policy serves the public interest by ensuring Council provides appropriate governance and oversight on the College's financial matters. The proper management of the College's funds will ensure that its strategic goals are fulfilled and that operations are supported through an appropriate investment structure, internal and external management, and strong returns from investments.

BACKGROUND

At its meeting on March 25, 2021¹, Council adopted a new governance manual in place of the Executive Limitations framework. Council directed that staff develop College policies to replace some of the financial executive limitation policies, in particular,

- L8: Asset Protection, specifically to address points 13, 15, 16, 17 and 19; and
- L16: Registrar expenses, specifically to address points 1 and 2

Policy L8, includes policies relating to College investments (Attached for information as Appendix 4).

The College's auditors, Tinkham LLP, have also recommended that Council update Policy L8, specifically to:

¹ See materials from [March 25 2021](#) (p 26) and [minutes](#)

- More clearly establish the risk appetite of Council, including portfolio investments and permitted investments, and
- Review whether the withholding tax is recoverable or whether there are best investment alternatives.

These recommendations were considered by Council at the September 30, 2021 meeting², and Council directed that staff proceed with incorporating the recommendations from the auditor in the conversion of Policy L8.

At its meeting on December 9, 2021³, Council considered a Draft Investment Policy. Council directed that the Audit Committee further consider the policy and make a recommendation to Council at a subsequent meeting.

CONSIDERATIONS

An amended draft policy is attached as Appendix 1. The overall objective of the draft policy is to ensure that College funds will be invested in a prudent and effective manner. All investments should be made with the goal of maximizing the return on investments while still meeting the day-to-day cash flow requirements of the College.

The Audit Committee reviewed the draft policy and April 20 and May 31, 2022. The following options were considered:

OPTION 1 – Approve the current draft policy, with the following amendments from the Audit Committee:

- An environmental scan of other Colleges was conducted to review common practices in managing investments. The scan showed that other Colleges who are investing in very low risk investments have not changed their advisors in 15-20 years and that the day-to-day management of investments includes assistance from the head of finance/corporate services. Given the College’s risk profile, the draft CDO policy requires that the policy be reviewed every 5 years and delegates the day-to-day management of the investments to the Registrar & Executive Director. In addition to managing investments with the assistance of an investment advisor, the Registrar will consult with the Director of Finance & Corporate Services.
- The responsibilities of the Registrar should include periodic negotiation with the Investment Advisor to ensure that fees and commissions are fair and competitive.

² See materials from [September 30 2021](#) (p 18) and [minutes](#)

³ See materials from [December 9 2021](#) (p 33) and [minutes](#)

- The preparation of monthly and annual reports should be prepared by the Investment Firm or Institution, not the Investment Advisor.
- The term “high quality” has been removed from the policy and has been replaced with “conservative or low risk”.
- Investment brokers must be registered with Investment Industry Regulatory Organization of Canada (IIROC); both the institution and the broker individually.
- The portfolio mix should be determined after assessing the College’s appetite for risk; in general a low risk portfolio will contain more Cash & Cash Equivalents with low returns on the investments and a high risk portfolio will contain more Equity holdings and higher returns on investments.
- The Audit Committee asked for a definition of the nature of Preferred Shares for information (see Appendix 2).

OPTION 2 – Assume a lower risk tolerance and reduce the investment in equities:

The current L8 policy states that “Investments in equities (i.e., common shares) must be limited to 40% of the book fund value of the total portfolio; this is based on an assumption of a low-moderate risk tolerance level”. This policy has been in place for over 15 years and in the last 5 years has yielded significant interest and dividend income, with total earnings of \$775,248 and average earnings of \$155,000 per year (see Appendix 3).

Reducing the percentage of investments in equities to 0 will reduce overall risk in the portfolio (although Fixed Income bonds carry risk as well). However, it will also reduce the earnings by potentially \$155,000 per year. To prevent deficit spending and drawing on reserves, the College will likely have to increase fees to members from its current level of \$641 per member or reduce spending in the next few years.

Alternatively, the College could take a gradual approach to reducing the percentage of investments in equities. For example, it could limit equity investments to 35% or 30% of the total portfolio.

The investment advisor has already reduced the amount of investments in equities to 31% of the total portfolio in February 2022, 24% in March 2022 and 22% in April 2022, to limit the exposure to market fluctuations.

OPTION 3 – further explore the objective of policy, risk tolerance of Council and investment asset mix with an external consultant with appropriate expertise:

This option will allow the College to delve deeper into these issues with an independent consultant. This would be an unbudgeted project.

Until a revised policy is in place, the College will continue to use the Executive Limitation policy on investments, as per the auditor’s recommendation.

RECOMMENDATION

That Council approve the draft policy as recommended by the Audit Committee.

ATTACHMENTS

- Appendix 1: Draft Investment Policy
- Appendix 2: Characteristics of Preferred Shares
- Appendix 3: Income and Dividends Received from RBC Dominion Securities
- Appendix 4: L8 Asset Protection Policy

PURPOSE

As per the College's **Bylaw 1 – 2.10** regarding investments, "The Registrar and Executive Director may authorize the investment of money on behalf of the College in compliance with applicable College policy as approved by Council from time to time. All share certificates, bonds and other records of investments shall be issued in the name of the College."

This policy establishes the responsibilities, objectives, authorized investments, policies and guidelines related to all assets held by the College for investment purposes and sets out the parameters, limitations and risk tolerances for the Registrar and Executive Director (ED) for the management of the College's investments.

ROLES AND RESPONSIBILITIES

Delegation of Responsibilities

Council has an oversight role regarding decisions that impact the use of College funds. Council has delegated responsibility for the management of College funds to the Registrar & ED.

Responsibilities of Council

Council shall ensure that its fiduciary responsibilities concerning the proper management of the College's funds are fulfilled through an appropriate investment structure, internal and external management, and portfolio performance consistent with all policies and procedures. Based on the advice and recommendations of the Registrar & ED, Council shall:

- approve investment policies and objectives that reflect the long-term investment-risk orientation of the College, and
- review the investment policy every 5 years.

Responsibilities of the Registrar and Executive Director

The Registrar & ED shall be responsible for the day-to-day administration and implementation of policies established by Council concerning the management of funds and will act in an advisory capacity to Council. Additionally, the Registrar & ED shall:

- manage the College's investments with the assistance of an investment advisor with appropriate financial management expertise;

-
- consult with the Director of Finance & Corporate Services;
 - be the primary liaison between the investment advisor and Council;
 - assess and monitor the performance of the investment advisor and ensure they adhere to the terms and conditions of their contracts; have no material conflicts of interest with the interests of the College; and ensure that performance monitoring systems are sufficient to provide Council with timely, accurate and useful information;
 - report to Council on the performance of the investment advisor as required from time to time or if any concerns arise; and
 - report on investment purchases, sales transactions and compliance with this policy to Council at a minimum frequency of quarterly.
 - negotiate with the investment advisor periodically to ensure that fees and commissions are fair and competitive.

Responsibilities of the Investment Advisor

The Investment Advisor shall invest the funds of the College within these specific written guidelines and in accordance with the Council's Investment Objectives and Risk Tolerance. In carrying out their duties and responsibilities, the Investment Advisor shall exercise such competence and skill as may be expected of a prudent, diligent Investment Advisor in similar circumstances. Specifically, the Investment Advisor shall:

- have at least one meeting a year with the Registrar & Executive Director to review the portfolio performance and discuss strategy for the ensuing period and make at least one presentation per year to Council in this regard;
- monitor market fluctuations and review asset class allocations at least quarterly, and recommend rebalancing when the asset class allocations fall outside of the ranges established in this policy;
- take into account the cash requirements of the College as set out by the Registrar & ED;
- disclose any material interest in any investment or proposed transaction. All investment activities must be conducted in accordance with the Chartered Financial Analyst code of ethics, and the Conflict of Interest Policy as adopted by the College's Council;
- exercise all share voting rights with the intent of fulfilling the objectives and goals of the College and maintain a record of how voting rights of securities in the portfolio were exercised; and
- assist in developing Investment Policies and guidelines and propose recommended changes as required from time to time, for approval by Council.

In addition, the Investment Advisor Firm or Institution shall prepare reports, which shall contain, as a minimum:

- **Monthly:** list of portfolio holdings and their cost vs. current market values; list of transactions for the month and portfolio listing by security showing cost vs. market value

-
- **Annual:** evaluation of the portfolio at the end of each fiscal year

Circumstances that may prompt a review of the investment advisor may include: Changes in ownership, fees, personnel, structure, investment philosophy, style or approach of the investment management firm, which might adversely affect the potential performance and/or risk level of the fund portfolio; unauthorized departure from the stated investment guidelines; and/or a decline in investment performance, which over a reasonable period of time, is less than the performance expectations.

INVESTMENT OBJECTIVES AND RISK TOLERANCE

The investment objectives are to ensure that funds will be invested in a prudent and effective manner. All investments should be made with the goal of maximizing the return on investments while still meeting the day-to-day cash flow requirements of the College. Primary investment objectives for the investment portfolio are:

- to preserve capital;
- to maintain liquidity necessary to meet cash requirements;
- to optimize the rate of return, within acceptable risk levels as set by Council; and
- to ensure appropriate diversification

AUTHORIZED INVESTMENTS

The College will invest its funds in the following types of assets, as recommended by the Investment Advisor:

- **Cash & Cash Equivalents** - Deposit receipts, deposit notes, certificates of deposit, bankers acceptances, guaranteed investment certificates, commercial paper and other similar instruments issued or endorsed by any chartered Bank to which the Bank Act (Canada) applies and Treasury Bills.
- **Fixed Income** - Federal, provincial or corporate investments with an investment grade rating (AAA to BBB low) and Preferred Shares of any Company listed and publicly traded upon a recognized stock exchange, mutual funds, trust units, exchange traded funds (ETFs) thereto. Investment in Preferred Shares will be rated at least PFD-2 or higher by DBRS and rated at least BBB- or higher by Standard & Poors.
- **Equity** - Equity investments shall be in **high-quality low risk or conservative** Common Shares of any Company listed and publicly traded upon a recognized stock exchange, mutual funds, trust units, exchange traded funds (ETFs) thereto.

For Characteristics of Preferred Shares, please refer to Appendix 2 below.

GUIDELINES AND RESTRICTIONS

-
- Borrowing from any source to make investments is not permitted.
 - Investments must be made in institutions that are not in conflict with the ethics, values and mandate of the College.
 - Financial institutions in which the College invests must be members of the Canadian Deposit Insurance Corporation (CDIC).
 - Investment brokers must be registered with Investment Industry Regulatory Organization of Canada (IIROC); both the institution and the broker individually.
 - Investments in equities must be limited to 40% of the book fund value of the total portfolio; this is based on an assumption of a low-moderate risk tolerance level.
 - The portfolio mix should be determined after assessing the College's appetite for risk; in general a low risk portfolio will contain more Cash & Cash Equivalents with low returns on the investments and a high risk portfolio will contain more Equity holdings and higher returns on investments.

Characteristics of Preferred Shares

Adapted from:

<https://corporatefinanceinstitute.com/resources/knowledge/finance/preferred-shares>

What are Preferred Shares?

Preferred shares (also known as preferred stock or preference shares) are securities that represent ownership in a corporation, and that have a priority claim over common shares on the company's assets and earnings. The shares are more senior than common stock but are more junior relative to bonds in terms of claim on assets. Holders of preferred stock are also prioritized over holders of common stock in dividend payments.

Features of Preferred Shares

Preference in assets upon liquidation: The shares provide their holders with priority over common stock holders to claim the company's assets upon liquidation.

Dividend payments: The shares provide dividend payments to shareholders. The payments can be fixed or floating, based on an interest rate benchmark.

Preference in dividends: Preferred shareholders have a priority in dividend payments over the holders of the common stock.

Non-voting: Generally, the shares do not assign voting rights to their holders. However, some preferred shares allow its holders to vote on extraordinary events.

Benefits of Preferred Shares

Secured position in case of the company's liquidation: Investors with preferred stock are in a more secure position relative to common shareholders in the event of liquidation, because they have a priority in claiming the company's assets.

Fixed income: These shares provide their shareholders with a fixed income in the form of dividend payments.

APPENDIX 3

College of Dietitians of Ontario

Interest & Dividends Received from Investments with RBC Dominion Securities

Source: Audited Financial Statements (2018 - 2021); Draft Audited Financial Statements (2022)

	Fiscal Year Ended March 31,					TOTAL	AVERAGE
	2018	2019	2020	2021	2022		
Interest	12,570.00	31,920.00	119,582.00	33,820.00	26,939.10		
Distributions from mutual funds	2,679.00	0.00	24,774.00	7,692.00	0.00		
Distributions from common & preferred shares	60,292.00	82,965.00	85,736.00	119,932.00	166,346.40		
Total Income from Interest & Dividends	75,541.00	114,885.00	230,092.00	161,444.00	193,285.50	775,247.50	155,049.50
Realized gains (losses) on sales of investments	(5,953.00)	24,977.00	(654,490.00)	749,614.00	(78,608.44)	35,539.56	
Total Income (Loss) from Investments	69,588.00	139,862.00	(424,398.00)	911,058.00	114,677.06	810,787.06	162,157.41

L8 ASSET PROTECTION

The Registrar & ED may not allow College assets to be unprotected, inadequately maintained, or unnecessarily risked. All investments should be made with the goal of maximizing the return on investments while still meeting the day to day cash needs of CDO.

Accordingly, he or she may not:

1. Fail to ensure that all investments are not in conflict with the ethics and values of the dietetic profession.
2. Fail to ensure that all investments are made with the end/goal of maximizing the return on investment while still meeting the day to day cash needs of the College
3. Fail to insure against theft and casualty losses to at least 80 percent replacement value and against liability losses to Council members, staff or the organization itself in an amount less than the average for comparable organizations.
4. Allow uninsured personnel to handle funds or College property or pledge credit of the College.
5. Unnecessarily expose the organization, its Council or staff to claims of liability.
6. Commit the organization to any expenditure of greater than \$25,000 except as approved by Council, including those approvals obtained in the budget approval process.
7. Fail to abide by By-law provisions 33.07 and 36.01 regarding contracts of over \$40,000.
8. Make any single purchase of goods or services, except where specifically approved by Council or the Executive Committee:
 - Wherein normally prudent protection has not been given against conflict of interest
 - Of over \$15,000 without having obtained comparative prices and except where the vendor has been established by Executive Director as a Vendor of record for recurring expenses.
9. Receive, process or disburse funds under controls that are insufficient to meet the Council-appointed auditor's standards.
10. Fail to report to Council the investments and sales transactions at a minimum frequency of twice annually.
11. Fail to ensure safekeeping of the College's securities and documents.
12. Fail to manage the College investments in keeping with By-law provisions set out in section 32
13. Fail to invest or hold operating capital in financial institutions that are CDIC member institutions, including bank accounts, GICs and bonds of no less than an A-High rating and in high quality equities as recommended by the College's financial advisor.
14. Fail to review and sign bank statements.
15. Fail to limit investments in high quality equities to 40% of the book fund value when market opportunities present, as recommended by the College's financial advisor.
16. Acquire, encumber or dispose of real estate.
17. Without approval of the Council, borrow money on the credit of the College, limit or increase the amount or amounts to be borrowed, or determine or alter security

arrangements.

18. Fail to respond to Council regarding the recommendations from the annual audit report and the management letter.
19. Fail to ensure that, except for payroll taxes, recurring monthly cheques exceeding \$10,000 and requiring the signature of the College shall be signed by one of the President, Vice-President or the Registrar & Executive Director.



College of
Dietitians
of Ontario

Council Briefing Note

Topics:	Final Draft Policy on Determining Currency Hours
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Effective and Transparent Communication Risk-Based and Right-Touch Regulation
From:	Carole Chatalalsingh, Director of Professional Practice

ISSUE

Council is being asked to review and approve the Final Draft Policy on Determining Currency¹ Hours in Dietetic Practice for Registered Dietitians in Ontario.

PUBLIC INTEREST RATIONALE

The role of the College is to protect the public by regulating the dietetic profession in Ontario in a way that promotes currency, competence, and safe dietetic practice.

This Policy on Determining Currency Hours in Dietetic Practice for Registered Dietitians in Ontario is related to the following:

- Council's commitment to right-touch regulation, mitigating the risk of harm and ensuring safe, competent, and ethical dietetic practice.
- The College's monitoring of members' practice hours to meet statutory obligations under the College's Registration Regulation ([O. Reg. 593/94](#))
- To assure the public and system partners that Registered Dietitians practise safely, competently, and ethically.

All eligible members of the College of Dietitians of Ontario annually declare whether they have practiced dietetics for 500 hours or more in the previous three-year period. This requirement was approved in 2012 and last reviewed by Council in 2018 (at the 2018 review, the definition was left unchanged). The Council's review was done during the proposed amendment to the Registration Regulation, which Council approved in March 2019. Currency hours requirement exists to ensure that dietitians remain current and competent in practice. This Policy on

¹ A 'currency requirement' refers to recent practice hours experience within a specific period, demonstrating that a member's skills or related work experience are up to date.

Determining Currency Hours will support the College in keeping pace with changing health care environments and public expectations.

BACKGROUND

The College definition of [practising dietetics](#) was developed to assist members in determining practice hours and was designed to elaborate on the Scope of Practice Statement in the *Dietetics Act (1991)*. The definition is quite broad and includes various practice areas and workplace settings. The description provides examples of activities for guidance but is not exhaustive.

For example, many dietitians do work that impacts the health care environment, public protection, policy, and resources – contributing to nutrition and dietetic services. Some of these activities may count as a practice hour, and others may not. In addition, there is some uncertainty about whether the extent of college and council work by dietitians can count towards a dietitian practice.

Recently, dietitians have been temporarily redeployed to respond to, prevent, or alleviate the effects of the COVID-19 outbreak. But, again, there is uncertainty about whether some of these redeployed activities may count as a practice hour and others may not.

The College's Professional Practice Program worked with committees on the draft policy. In March 2022, Council approved the Draft Policy Determining Currency Hours in Dietetic Practice for Registered Dietitians in Ontario, in principle, for consultation.

CONSIDERATIONS

Online consultation of the proposed Draft Policy on Determining Currency Hours was circulated to members for comment from April 13, 2022 – to May 30, 2022. The consultation included background information on the Draft Policy on Determining Currency Hours with Definition of Practising Dietetics Revisions, survey questions about overall understandability, purpose, relevance/support, and any additional comments or questions/scenarios. Consultation responses were accepted by completing an online survey and emailing a response to the College. A legal analysis of the policy was conducted.

What we found from the analysis of feedback from the consultation:

- Three hundred forty-nine participants (~8% of membership) responded to the online consultation survey. 98% of respondents were dietitians.

- After reading the Draft Policy on Determining Currency² Hours for Dietitians in Ontario, 96% said yes, they understand the purpose of this Policy.

The main themes from the feedback and legal analysis were around:

- Redeployment – some people indicated that they will be redeployed until 2023 – indicating that more clarity is needed regarding currency hours per year of redeployed work until we are out of a pandemic.
- According to [Practising Under the Delegation of Controlled Act](#) Standards, clarifying the context of dietetics is needed.
- The Definition of Practising Dietetics and assessing facility processes to meet accreditation standards – clarify that this does not refer to dietetic education related accreditation.
- Legal Implications: The Policy may have legal implications if applied outside of currency reporting hours, e.g., whether liability insurance is required for the activity, what cannot be done while one is suspended, or one's practice is restricted. Relevant footnotes and edits were included to address these implications.

While most of the responses supported the draft (96% agreement), some minor revisions have been made based on feedback (see Appendix 1 for track changes revision and Appendix 2 for a clean copy).

Overall, the revisions focused on simplifying the language and adding additional context to the policy, as follows:

Under ~~Criteria~~ Category to Determine What Counts as a Practise Hour

- **Used category** instead of criteria to clarify language to mitigate possible issues or unintended implications of applying this Currency hours policy to other contexts, e.g., impact on the registration process for applicants to seek consideration of informal activities
- **Added:** The activity or task falls within the performance of a delegated controlled act according to [Practising Under the Delegation of Controlled Act](#) Standards while **still relying on dietetic competencies as a foundation for performing the controlled act when practising the act as a dietitian.**
- **Refined:** The activity or task considered outside of the dietetic scope of practice has transferability to dietetic practice, reflects the knowledge and skills outlined in the [Integrated Competencies for Dietetic Education and Practice \(ICDEP, and](#) requires the status of **active** regulated health professional.

² A 'currency requirement' refers to recent practice hours experience within a specific period, demonstrating that a member's skills or related work experience are up to date.

- **Refined:** Dietitians as health care professionals were asked by their employers to perform **temporary** redeployment duties using the competencies they are expected to hold and maintain throughout their dietetic careers (e.g., communication and collaboration, management and leadership, professionalism and ethics).
- **Changed** - Given the above, starting at renewal 2022, dietitians who are redeployed will be able to **count up to 166 hours per year of redeployed work until we are out of a pandemic**. In addition, any time spent practising dietetics will be counted as usual.

Applying the Categories to Determine Practise Hours

- **Clarified:** b) should exercise **reasonable** professional judgement to refer to an objective test and not send the message that registrants can use "professional judgment" to define practice hours however they wish.
- **Added:** c) **Being a professional means practicing while** considering the following abilities:
 - b) Practise with integrity, humility, honesty, diligence, respect, and treat **others fairly and equitably**.
 - Added j) **Act ethically, respecting autonomy, beneficence, non-maleficence, and respect for justice**.
 - Removed duplication, as captured in definition:
 - If a dietitian works within food, nutrition, health or health education, health research or health management-related settings, these are considered practising dietetics.
 - Moved down to the exclusion section of the definition:
 - Know that professional development is not practising dietetics. While professional development can help a dietitian maintain or increase competency, it is not practicing dietetics; it is professional development

Revised Definition of Practising Dietetics – Added (in red):

- The College definition of practising dietetics, **for the purpose of counting current hours only**³, assists dietitians in determining which tasks count as practice hours
- Managing food **and nutrition** services, **food provision, and** developing food services processes in hospitals and other health care facilities, schools, universities, and businesses.
- Conducting **dietetic, health evaluation** research, product development, product marketing, and consumer education to develop, promote and market food and nutritional products and pharmaceuticals related to nutrition disorders or nutritional health.
- Teaching, **mentoring, and precepting related to dietetic competencies**, nutrition, food chemistry, **food policy**, or food **systems** service administration to students in dietetics or

³ All members of the College must ensure that they are clearly identified as a dietitian when practising dietetics by using the title of "Registered Dietitian" or the designation of "RD", or the French equivalent, "diététiste professionnel(le)" and "Dt.P." [June 9, 2022]

other professions, schools, the food and hospitality industry, and/or other healthcare providers.

- Directly managing, supervising or assuring the quality of front-line employees **and dietetic staff** engaged in any previously mentioned dietetic practice circumstances.
- Developing regulations, programs, **dietetic competencies**, and policies to deliver safe, ethical, and quality dietetic service to protect the public (including participation in Council and committee work, College assessors, Item writers and/or staff with a Dietetic Regulatory, or Health Professional body).

The College does not consider the following activities as practising dietetics:

- Assessing facility processes to meet accreditation standards **related to non-dietetic management of facility (e.g., hospital) processes to meet healthcare accreditation standards**
- Moved to this section: **Know that professional development is not practising dietetics. While professional development can help a dietitian maintain or increase competency, it is not practicing dietetics; it is professional development.**

EQUITY AND REGULATORY IMPACT ASSESSMENT

During the consultative process, respondents were asked if they foresee the Draft Policy on Determining Currency Hours impacting people who identify as equity-deserving groups or populations. Three hundred forty-five participants responded to the survey question. 38.37% of respondents (n=132) indicated they foresee a positive impact, 36.34% (n=125) indicated neutral or no impact and 4.07% (n=14) indicated they foresee negative impacts. 21.22% (n=73) were unsure of impacts.

Negative impacts were mainly around redeployed dietitians counting redeployed hours for two years, as many will be redeployed until 2023. Therefore, to address this negative impact, the document was edited to include starting at renewal 2022. Dietitians who are redeployed will be able to count up to 166 hours per year of redeployed work until we are out of a pandemic. In addition, any time spent practising dietetics will be counted as usual.

On the economic impact, consultation responses were positive. Respondents expressed that the Policy would make it easier for dietitians to continue redeployed work in the current environment and thus likely reduce economic burdens.

On the equity, diversity and inclusion impact, respondents also described that in a predominately female-identifying profession, the pandemic response may have impacted those required to take on caregiving roles within their families (i.e., due to school closures) on currency hours. As a result, the Policy will make it more flexible for these groups (e.g., parents, especially women, with childcare responsibilities; racialized or internationally trained

practitioners having difficulty obtaining paid employment) to meet the currency hours requirement.

Unpaid or voluntary work is not new for dietitians to count as currency hours. However, this may be seen to broaden the definition to include more unstructured, unsupervised or unaccountable activities, subsequently placing the public at risk. Dietitians are expected to meet the same obligation as those practising in paid positions and provide safe, competent, ethical practice, thereby mitigating the potential negative impact on the public.

Further, staff will evaluate the impact of the Policy on Determining Currency Hours via a survey of dietitians three years after implementation.

RECOMMENDATION

That Council approves the final draft of Policy on Determining Currency Hours in Dietetic Practice for Registered Dietitians

Next Steps, if approved:

Should Council approve the final Policy on Determining Currency Hours in Dietetic Practice for Registered Dietitians, staff will complete the following steps:

1. Publish and Communicate Broadly - Policy on Determining Currency Hours in Dietetic Practice on the College website and develop a communication plan for education to dietitians and other relevant system partners, including the public.
2. Incorporate into College Programs: Include the final Policy on Determining Currency Hours in Dietetic Practice into College publications and program tools such as the Quality Assurance Program and Professional Practice Resources.

ATTACHMENTS

- Appendix 1 for track changes revision Policy Determining Currency Hours in Dietetic Practice for Registered Dietitians in Ontario
- Appendix 2 for a clean copy policy Determining Currency Hours in Dietetic Practice for Registered Dietitians in Ontario



Policy on Determining Currency¹ Hours for Dietitians in Ontario

Effective Date

1.1 This policy takes effect on - TBD

Preamble

The purpose of the College's monitoring of members practising fewer than 500 hours in 3 years² is:

- To meet statutory obligations under the College's Registration Regulation ([O. Reg. 593/94](#)) under the [Dietetics Act, 1991](#)³, S.O. 1991, c.26, Part 1: Registration, Section 5 of the College of Dietitians of Ontario (the "College") which requires:

"5. (1) By the end of the third year following the issuance of a certificate of registration and in every subsequent year, every member shall provide evidence satisfactory to the Registrar that the member has practised dietetics for at least 500 hours during the preceding three years. "

AND

- To provide a measure that assures⁴ the public and interested parties that dietitians registered in Ontario practise safely, competently, and ethically.

Policy Purpose

To set out criteria for members to accurately complete their annual renewal declaration requirements regarding dietetic practise hours currency requirements.

¹ A 'currency requirement' refers to recent practice hours experience within a specific period, demonstrating that a member's skills or related work experience are up to date.

² The College is required to establish and operate a Quality Assurance Program for its members to encourage and assist members in being the best dietitians possible. The program is non-punitive, and participation is mandatory.

³ Under the *Dietetics Act*, the College has the mandate to regulate the dietetics profession. Its duty is to serve and protect the public interest. The College does not exist to advance the interests of the dietetic profession; this is the role of professional associations. Still, there is no doubt that a well-regulated profession preserves its reputation and stature.

⁴ [All members of the College, regardless of their employment status or area of practice are required to participate in the Quality Assurance Program. Members practicing and/or residing out-of-province are also included.](#)

This includes:

- i. What counts as dietetic practice; and
- ii. Criteria considerations when determining whether certain activities contribute to meeting the College's minimum 500 hours/3 years dietetic practise hour currency requirement.

Categories to Determine What Counts as a Practise Hour

Consider these overarching categories when deciding whether a task counts as dietetic practise hours:

1. The activity or task falls within the **updated** College definition of practising dietetics⁵ (Appendix i), and this definition assists dietitians in determining which tasks count as practise hours.
2. The activity or task falls within the performance of a delegated controlled act according to Practising Under the Delegation of Controlled Act Standards while still relying on dietetic competencies as a foundation for performing the controlled act when practising the act as a dietitian.
3. The activity or task considered outside of the dietetic scope of practice has transferability to dietetic practice, reflects the knowledge and skills outlined in the Integrated Competencies for Dietetic Education and Practice (ICDEP), and requires the status of active regulated health professional. For example:
 - Dietitians as health care professionals were asked by their employers to perform temporary redeployment duties using the competencies they are expected to hold and maintain throughout their dietetic careers (e.g., communication and collaboration, management and leadership, professionalism and ethics). For this policy, temporary redeployment should be understood as employment (either new or continuing) within the public health system to perform activities that are non-traditional for dietitians in support of the public health response to prevent or alleviate the effects of the COVID-19. These activities include but are not limited to contact tracing, health screening, assisting clients/patients with activities of daily living, supporting immunization clinics, or other related healthcare functions.
 - Given the above, starting at renewal 2022, dietitians who are redeployed will be able to count up to 166 currency hours per year of redeployed work until we are out of the a pandemic. In addition, any time spent practising dietetics will be counted as usual.

Applying the Category criteria to Determine Practise Hours

⁵ The College definition of practising dietetics was developed to assist members in determining practice hours. The definition is quite broad and includes various practice areas and workplace settings. The description provides examples of activities for guidance but is not exhaustive. This definition is not intended to apply to other contexts (e.g., whether liability insurance is required for the activity, what cannot be done while one is suspended or one's practice is restricted).

- a) Ultimately, the purpose of the requirement to maintain at least 500 hours of dietetic practice is to ensure that dietitians can practice dietetics safely, ethically and competently.
- b) Using the categories #riteria above, members should exercise reasonable professional judgement and make practise hour determinations based on the individual circumstances related to their specific role and practice setting
- ~~b)c)~~ Be a professional means practicing while considering the following abilities⁶:
- a. Being reflective and committed to safe, competent, ethical practice
 - b. Practising with integrity, humility, honesty, diligence, respect and treat others fairly and equitably.
 - c. Valuing dignity and worth of all persons regardless of age, race, culture, creed, sexual identity, gender, body weight, ableness and/or health status
 - d. Complying with legal requirements and professional obligations
 - e. Applying the principles of sensitive practice and functioning in a client-centred manner
 - f. Working within areas of personal knowledge and skills
 - g. Maintaining a safe work environment
 - h. Maintaining personal wellness consistent with the needs of the practice
 - i. Using an evidence-informed approach to your work
 - ~~i.j.~~ Act in an ethical manner, respecting autonomy, beneficence, non-maleficence, respect for justice.
- ~~c)~~ Members should compare their roles and responsibilities in their employment and/or volunteer work to the College's definition of practising dietetics.
- ~~d)~~ If a dietitian works within food, nutrition, health or health education, health research or health management related settings, these are considered practising dietetics.
- ~~e)d)~~ Out of province dietetic practice counts towards practice hours, provided members practise dietetics according to the definition of practising dietetics (dietitians must follow jurisdictional requirements as applicable).
- ~~f)e)~~ The definition of practising dietetics is quite broad and includes various practice areas and workplace settings. Practicing dietetics does not only include dietitians who work directly with patients/clients.
- ~~g)a)~~ Know that professional development is not practising dietetics. While professional development can help a dietitian maintain or increase competency, it is not practicing dietetics; it is professional development.

Monitoring

The policy will be monitored annually.

Risk of Harm Provision. The definition in the policy might have an impact on the risk of harm provision found in s. 30 of the RHPA. The College will address any unprofessional conduct through its discipline process.

⁶ Adapted from the College of Massage Therapist of Ontario (2021). Retrieved from <https://www.cmta.com/rmts/quality-assurance-program/strive/>

References

College of Dietitians of Ontario. 500 Hours (2020). Retrieved from <https://www.collegeofdietitians.org/programs/quality-assurance/500-hours-of-practice.aspx>

College of Dietitians of Ontario. What Counts as a Practice Hour (2021). Retrieved from <https://www.collegeofdietitians.org/cdo-masterpage/resources/newsletters/2021-issue-1-may/what-counts-as-a-practice-hour.aspx>

Knowles, M. (1980). *The Modern Practice of Adult Education*. Chicago, IL: Association/Follet Press

Appendix I: Proposed Revised Definition of Practising Dietetics (Revisions highlighted in Red)

The College definition of practising dietetics, for the purpose of counting current hours only⁷, assists dietitians in determining which tasks count as practice hours⁸.

- a) "Dietetic Practise can be in a paid or unpaid **capacity (e.g., volunteer work)** for which members use food & nutrition-specific knowledge, skills and judgment while engaging in:
 - i. the assessment of nutrition-related to health status and conditions for individuals, **groups** and populations;
 - ii. the management and delivery of nutrition therapy to treat disease;
 - iii. the management of food services systems; building the capacity of individuals and populations to promote, maintain or restore health and prevent disease through nutrition and related means;
 - iv. the management, education or leadership that contributes to the enhancement and quality of dietetic and health services."
- b) For greater clarity, the dietetic practice includes the following activities:
 - I. Assessing nutrition status in clinical settings to provide meal plans, nutrition guidance or advice and/or formulating therapeutic diets to manage and/or treat diseases or nutrition-related disorders.
 - II. Assessing, promoting, protecting and enhancing health and the prevention of nutrition-related diseases in populations using population health and health promotion approaches and strategies focusing on the interactions among the determinants of health, food security, and overall health.
 - III. Managing food- and nutrition ~~management~~ services, food provision, and developing food services processes in hospitals and other health care facilities, schools, universities, and businesses.
 - IV. Conducting dietetic, health and evaluation research, product development, product marketing, and consumer education to develop, promote and market food and nutritional products and pharmaceuticals related to nutrition disorders or nutritional health.
 - V. Assessing compliance of long-term care homes to meet the Ministry of Health and Long-Term Care standards related to nutrition and hydration of residents.
 - VI. Developing or advocating for food and nutrition policy.
 - VII. Teaching, mentoring, and precepting related to dietetic competencies, nutrition, food chemistry, food policy, or food systems service administration to students in dietetics **or other professions, schools**, the food, and hospitality industry, and/or other healthcare providers.
 - VIII. Planning and engaging in direct food & nutrition research.

⁷ All members of the College must ensure that they are clearly identified as a dietitian when practising dietetics by using the title of "Registered Dietitian" or the designation of "RD", or the French equivalent, "diététiste professionnel(le)" and "Dt.P."

⁸ Liability insurance is mandatory for all College members — temporary and general — who practice dietetics. However, the definition of what activities require liability insurance may differ slightly from those described in this policy.

- IX. Communicating food & nutrition information in any print, radio, television, video, Internet or multi-media format.
- X. Directly managing, supervising or assuring the quality of front-line employees [and dietetic staff](#) engaged in any previously mentioned dietetic practice circumstances.
- XI. **Developing regulations, programs, [dietetic competencies](#), and policies to deliver safe, ethical, and quality dietetic service to protect the public (including participation in Council and committee work, College assessors, Item writers and/or staff with a Dietetic Regulatory or Health Professional body).**

The College does not consider the following activities as practising dietetics:

- Holding a position solely in non-dietetic management (e.g., Vice President or Administrator of a hospital or other organization).
- Holding a position solely in human resources (HR), information technology (IT), or risk management.
- Engaging in sales or marketing of pharmaceuticals that are not related to nutrition.
- [Assessing facility processes to meet accreditation standards related to non-dietetic management of facility \(e.g., hospital\) processes to meet healthcare accreditation standards](#)
- [Know that professional development is not practising dietetics. While professional development can help a dietitian maintain or increase competency, it is not practicing dietetics; it is professional development.](#)
-



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³ Under the *Dietetics Act*, the College has the mandate to regulate the dietetics profession. Its duty is to serve and protect the public interest. The College does not exist to advance the interests of the dietetic profession; this is the role of professional associations. Still, there is no doubt that a well-regulated profession preserves its reputation and stature.

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To set out criteria for members to accurately complete their annual renewal declaration requirements regarding dietetic practise hours currency requirements.

This includes:

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Applying the Category to Determine Practise Hours

- a) Ultimately, the purpose of the requirement to maintain at least 500 hours of dietetic practice is to ensure that dietitians can practice dietetics safely, ethically and competently.
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- c) Being a professional means practicing while considering the following abilities⁶:
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 - b. Practise with integrity, humility, honesty, diligence, respect and treat others fairly and equitably.
 - c. Valuing dignity and worth of all persons regardless of age, race, culture, creed, sexual identity, gender, body weight, ableness and/or health status
 - d. Complying with legal requirements and professional obligations
 - e. Applying the principles of sensitive practice and functioning in a client-centred manner
 - f. Working within areas of personal knowledge and skills
 - g. Maintaining a safe work environment
 - h. Maintaining personal wellness consistent with the needs of the practice
 - i. Using an evidence-informed approach to your work
 - j. Act ethically, respecting autonomy, beneficence, non-maleficence, and respect for justice.
- d) Out of province dietetic practice counts towards practice hours, provided members practise dietetics according to the definition of practising dietetics (dietitians must follow jurisdictional requirements as applicable).
- e) The definition of practising dietetics is quite broad and includes various practice areas and workplace settings. Practicing dietetics does not only include dietitians who work directly with patients/clients.

Monitoring

The policy will be monitored annually.

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 - ii. the management and delivery of nutrition therapy to treat disease;
 - iii. the management of food services systems; building the capacity of individuals and populations to promote, maintain or restore health and prevent disease through nutrition and related means;
 - iv. the management, education or leadership that contributes to the enhancement and quality of dietetic and health services."
- b) For greater clarity, the dietetic practice includes the following activities:
 - I. Assessing nutrition status in clinical settings to provide meal plans, nutrition guidance or advice and/or formulating therapeutic diets to manage and/or treat diseases or nutrition-related disorders.
 - II. Managing food **and nutrition** services, **food provision, and** developing food services processes in hospitals and other health care facilities, schools, universities, and businesses.
 - III. Conducting **dietetic, health and evaluation** research, product development, product marketing, and consumer education to develop, promote and market food and nutritional products and pharmaceuticals related to nutrition disorders or nutritional health.
 - IV. Assessing compliance of long-term care homes to meet the Ministry of Health and Long-Term Care standards related to nutrition and hydration of residents.
 - V. Developing or advocating for food and nutrition policy.
 - VI. Teaching, **mentoring, and precepting related to dietetic competencies**, nutrition, food chemistry, **food policy**, or food **systems** service administration to students in **dietetics or other professions, schools**, the food and hospitality industry, and/or other healthcare providers.
 - VII. Planning and engaging in direct food & nutrition research.
 - VIII. Communicating food & nutrition information in any print, radio, television, video, Internet or multi-media format.
 - IX. Directly managing, supervising or assuring the quality of front-line employees **and dietetic staff** engaged in any previously mentioned dietetic practice circumstances.

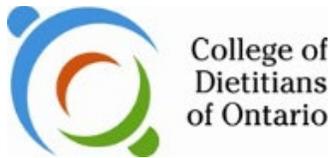
⁷ All members of the College must ensure that they are clearly identified as a dietitian when practising dietetics by using the title of "Registered Dietitian" or the designation of "RD", or the French equivalent, "diététiste professionnel(le)" and "Dt.P."

⁸ Liability insurance is mandatory for all College members — temporary and general — who practice dietetics. However, the definition of what activities require liability insurance may differ slightly from those described in this policy.

- X. Developing regulations, programs, dietetic competencies, and policies to deliver safe, ethical, and quality dietetic service to protect the public (including participation in Council and committee work, College assessors, Item writers and/or staff with a Dietetic Regulatory or Health Professional body).

The College does not consider the following activities as practising dietetics:

- Holding a position solely in non-dietetic management (e.g., Vice President or Administrator of a hospital or other organization).
- Holding a position solely in human resources (HR), information technology (IT), or risk management.
- Engaging in sales or marketing of pharmaceuticals that are not related to nutrition.
- Assessing facility processes to meet accreditation standards related to non-dietetic management of facility (e.g., hospital) processes to meet healthcare accreditation standards
- Know that professional development is not practising dietetics. While professional development can help a dietitian maintain or increase competency, it is not practicing dietetics; it is professional development.



Council Briefing Note

Topic:	Approval of Educational Accreditation Agency for the Purposes of Registration
Purpose:	Decision Required
Strategic Plan Relevance:	Risk-Based and Right-Touch Regulation
From:	Melanie Woodbeck, Registrar and Executive Director

ISSUE

To approve EQual/Accreditation Canada as the accreditation agency acceptable to the College effective immediately, and to approve a transition period for PDEP accreditation following the withdrawal of the current accreditation service provider.

PUBLIC INTEREST RATIONALE

Educational Program Accreditation ensures that Canadian educational programs provide nutrition education in alignment with the national Canadian practice competencies ([ICDEPs](#)) and have met evidence-based Quality Assurance and Improvement standards on an ongoing basis. Registering graduates from accredited Canadian educational programs provides assurance to the College and the public that Canadian dietetic graduates have the requisite academic and technical knowledge, skill and judgement to provide safe, ethical and competent care to the public.

BACKGROUND

The Partnership for Dietetic Education and Practice (PDEP) was founded in 2009 to enable the Alliance (consisting of the ten provincial regulatory bodies); educators; and the professional association, Dietitians of Canada (DC), to collaborate on issues of mutual interest agreed upon by the three parties. Regulatory bodies supported and approved the collaborative decision-making model to establish and revise entry-level competencies for dietitians.

In 2014, accreditation of education programs in Canada was added to the work of PDEP. Prior to this, accreditation was overseen by DC. Under the PDEP model, the association remained the accreditation service provider with accreditation award decisions being made by a subcommittee, the Accreditation Council, of PDEP.

On October 21, 2021, DC advised PDEP that they were withdrawing as the service provider for the accreditation process, effective March 31, 2022.

CONSIDERATIONS

The approval of education programs for the purposes of registration falls within the legislative mandates of regulatory bodies under the RHPA. The [Dietetics Act, 1991, O. Reg 593/94](#) further clarifies this responsibility and 6.(1) the Act allows Council to recognize Canadian programs that are “accredited by an accrediting agency approved by the Council.”

In fulfilling the mandate of regulatory bodies, the Alliance engaged in work to source an alternate accreditation provider. After a thorough analysis, the Alliance has entered into an agreement with an independent third-party service provider, EQual, a subsidiary of Accreditation Canada to conduct dietetic accreditation for the purposes of registration. The agreement announcement is attached as Appendix 1.

[EQual](#) is an established and bilingual service provider that currently conducts accreditation for approximately 225 programs, including 22 health professions. Using each profession’s competency profile as the foundation, EQual provides a framework and logistical support for the self-assessment, on-site review and determination of accreditation awards. Dietitian surveyors are included on survey teams. They have a program council composed of representatives from each of the professions involved in policy and standard development, and a leading practice library to support continuous quality improvement across professions.

A streamlined national process for accreditation facilitates labour mobility of dietitians across Canada, under the *Canadian Free Trade Agreement*, which includes provisions to ensure that regulated professionals can easily move from one province to another without having to undergo further assessment of their education and training.

The Alliance has proposed a transition plan to the new accreditation process that is fair and transparent in all provinces and provides adequate notice to educational programs and students. The Alliance recommends that all Canadian Dietetic Regulatory Bodies continue to recognize PDEP accreditation and awards until August 31, 2023 for the purposes of registration, regardless of the date of the programs’ last accreditation and expiry date. When programs sign on with EQual, previous awards will be recognized and they will be added to a review cycle.

The transition period also accords with the date that the Integrated Competencies for Dietetic Education and Practice (ICDEP), version 3.0, are required to be fully incorporated into dietetic education programs. The Canadian Dietetic Registration Examination will be based on the ICDEP beginning at the May 2024 exam sitting.

This information is before Council to determine whether to accept EQual/Accreditation Canada as the approved accreditation agency and if so, whether it approves the proposed transition

period for continued PDEP recognition.

RECOMMENDATION/NEXT STEPS

- That Council approve EQual/Accreditation Canada as the approved accreditation agency
- That Council continue to recognize PDEP accreditation and awards until August 31, 2023, for the purposes of registration, regardless of the date of the programs' last accreditation and expiry date.

ATTACHMENTS

- Appendix 1: EQual – Alliance Announcement



Strategic Partnership

Health Standards Organization (HSO), Accreditation Canada (AC), its Education Quality (EQual) program and the Alliance of Canadian Dietetic Regulatory Bodies (the “Alliance”) are very excited to announce their collaborative partnership to ensure that dietetic education programs continue to benefit from quality accreditation services and more importantly, that the dietetic workforce of tomorrow is competent and ready to provide safe and quality healthcare services.

Effective immediately, EQual will be responsible for providing education accreditation services for dietetic education programs in Canada for the purpose of program approval leading to registration with a dietetic regulatory body. As part of the partnership, the Alliance will be joining an existing list of 20+ other health professions and specialties who already use these services. For their part, dietetic education programs will be joining a long list of over 230 other health professional education programs that are accredited by EQual.

EQual and the Alliance have already been hard at work to ensure a smooth transition to EQual accreditation services. As part of this transition, EQual intends to communicate directly with all dietetic education programs in the near future. In the meantime, we provide the following preliminary information:

- **Recognition of previous accreditation status**
 Accreditation Canada/EQual will recognize the previous Partnership for Dietetic Education and Practice (PDEP) program accreditation status. Throughout the remainder of 2022, EQual will be working with education programs to adjust accordingly the timing of future accreditation activities while recognizing work done to date.
- **General EQual information session**
 We look forward to having the opportunity to connect shortly via teleconference sessions in English and French. These briefs (1 hour) introductory information sessions are intended to present an overview of the EQual program and provide opportunity to collaborate with education programs and answer questions.
- **EQual workshop**
 To facilitate a seamless transition, the Alliance has agreed to sponsor a series of English and French (two-day) education program accreditation workshops. Dietetic education programs are required to communicate with their respective provincial regulatory bodies to obtain specific sponsorship information. Additional information regarding the date and time of these workshops will be forwarded shortly by EQual to all Canadian dietetic education programs.

- **EQual on-boarding**

EQual and the Alliance have established a streamlined on-boarding process for existing (and new) dietetic education programs. The onboarding stage will enable us to obtain a better understanding of each individual program and establish a cohesive accreditation activity timeline. A fillable onboarding form will be electronically distributed by EQual. *Dietetic education programs are required to identify and communicate the contact information of their program's point of contact to their respective provincial regulatory bodies.*

- **EQual assessment activities**

Following the submission of a complete onboarding form, EQual will work with each dietetic education program to finalize their accreditation agreement and confirm assessment activities and timelines.

- **Accreditation agreement**

In the case that an educational institution is already an EQual partner, an addendum will be provided to add the dietetic program to their existing lists of programs. Complete signed agreement (or addenda) and payment of accreditation fees are required prior to any accreditation activities being scheduled.

We wish to again thank the Alliance members and all dietetic educators for the hard work you do everyday! We are looking forward to our on-going collaboration and working together in maintaining, supporting, and improving dietetic education.

Kind regards,



Joanie Bouchard

Registrar & Incoming Chair

College of Dietitians of BC and Alliance of Canadian Dietetic Regulatory Bodies

Carl Damour

Carl Damour

Director - EQual Program

Health Standards Organization / Accreditation Canada

Carl.Damour@healthstandards.org

Partenariat Stratégique

L'organisme des normes de santé (HSO), Agrément Canada (AC), son programme Qualité de l'éducation (EQual) et l'Alliance canadienne des organismes de réglementation diététique (l'« Alliance ») sont très heureux d'annoncer leur récent partenariat. Ce partenariat a pour but de promouvoir la collaboration inter organisationnel, assurée une qualité continue en éducation et, plus important encore, assurée que la main-d'œuvre en diététique de demain soit compétente et prête à fournir des services de santé sécuritaire et de qualité.

À compter de maintenant, EQual sera responsable des services d'approbation et d'agrément éducationnel pour les programmes en diététique et nutrition au Canada. Dans le cadre du partenariat, l'Alliance se joint à une liste existante de plus de 20 autres professions et spécialités de la santé qui utilisent déjà ces services. Pour leur part, les programmes d'éducation en nutrition et diététique se joindront à une longue liste de plus de 230 autres programmes d'éducation qui participe déjà à EQual.

EQual et l'Alliance ont déjà entamé le travail pour préparer la transition au programme d'EQual. Dans le cadre de cette transition, EQual a l'intention de communiquer directement avec tous les programmes d'éducation en nutrition et diététique sous peu. Entre-temps, nous sommes heureux de fournir les renseignements préliminaires suivants :

Reconnaissance du statut d'agrément antérieur

Agrément Canada/EQual reconnaîtra l'ancien statut d'agrément du Partenariat pour l'éducation et la pratique en diététique (PDEP). Tout au long du restant de l'année 2022, EQual travaillera avec les programmes d'éducation pour ajuster le calendrier des activités d'agrément futures, tout en reconnaissant le travail déjà accompli.

- **Séance d'information générale EQual**

EQual offrira bientôt des séances d'information. Ces séances, seront offerte en français et anglais (session d'une heure) et viseront à présenter un bref aperçu du programme EQual et donnera l'occasion pour EQual et les programmes de collaborer, discuter et répondre aux questions des programmes.

- **Atelier EQual**

Pour faciliter la transition, les organismes de réglementation canadiens en diététique ont accepté de parrainer une série d'ateliers d'agrément en français et en anglais (session de deux jours). Les programmes de formation en nutrition et diététique doivent communiquer avec leurs organismes de réglementation provinciaux pour obtenir de plus amples renseignements sur la commandite et l'enregistrement. Des renseignements supplémentaires pour la date et l'heure de ces ateliers seront transmis sous peu par EQual.

- **Intégration d'EQual**

EQual et l'Alliance ont établi des processus d'intégration simplifiés pour les programmes d'éducation en nutrition et diététique existants (et nouveaux). L'étape d'intégration permettra à EQual de mieux comprendre chaque programme et d'établir des échéanciers cohérents pour les activités d'agrément. Un formulaire d'intégration sera distribué sous peux et électroniquement par EQual. *Les programmes de formation en nutrition et diététique doivent identifier et communiquer les coordonnées de la personne-ressource de leur programme à leurs organismes de réglementation provinciaux.*

- **Activités d'évaluation EQual**

Après la soumission du formulaire d'intégration, EQual travaillera avec chaque programme de formation en nutrition et diététique pour plus formellement finaliser les contrats de programmes, pour confirmer les activités d'agréments et les échéanciers qui s'applique.

- **Contrats d'agrément**

Dans le cas où un établissement d'enseignement est déjà un partenaire EQual, un addenda sera fourni pour ajouter le programme de nutrition et diététique à leurs listes existantes de programmes. L'entente signée (ou les addenda) et le paiement des frais d'agrément sont requis avant d'entamer toute activité d'agrément.

Nous tenons à remercier encore une fois les membres de l'Alliance et tous les éducateurs en nutrition et diététique pour le travail acharné que vous faites tous les jours! Nous nous réjouissons de notre collaboration continue et de notre partenariat en vue de maintenir, supporter et améliorer l'éducation et les compétences des travailleurs de la santé en nutrition et diététique. Agrément

Cordialement,



Joanie Bouchard
Registrar & Incoming Chair
College of Dietitians of BC and Alliance of Canadian Dietetic Regulatory Bodies



Carl Damour
Director – Programme EQual
Health Standards Organization / Agrément Canada
Carl.Damour@healthstandards.org

Council Meeting Evaluation Results – June 16, 2022

1) Every member of Council had an opportunity to express their opinion.

Respondents: 10

Choice	Percentage	Count	
All of the time	90.00%	9	
Most of the Time	10.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	10	

Please add a comment if you selected Most of the Time, Some of the Time or None of the Time.

1 Presentation we're long

2) Active listening was demonstrated at all times.

Respondents: 10

Choice	Percentage	Count	
Yes	100.00%	10	
No	0.00%	0	
Total	100%	10	

Additional Comments:

3) No member dominated the discussion.

Respondents: 10

Choice	Percentage	Count	
Strongly Agree	60.00%	6	
Agree	40.00%	4	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	10	

Additional Comments:

4) Time was efficiently managed during the meeting.

Respondents: 10

Choice	Percentage	Count	
All of the Time	80.00%	8	
Most of the Time	20.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	10	

Additional Comments:

- 1 pace slow in beginning
- 2 There were irrelevant discussion

5) Decisions made were summarized after each agenda item.

Respondents: 10

Choice	Percentage	Count	
All of the Time	90.00%	9	
Most of the Time	0.00%	0	

Some of the Time	10.00%	1	
None of the Time	0.00%	0	
Total	100%	10	

Additional Comments:

1 don't recall summaries

6) Members of Council actively participated in the decision-making process.

Respondents: 10

Choice	Percentage	Count	
All of the Time	70.00%	7	
Most of the Time	30.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	10	

Additional Comments:

1 Some members do not take part but the majority do.

2 as needed

3 Discussion we're cut short due time constraints

7) Council demonstrated an ability to make the best decisions possible.

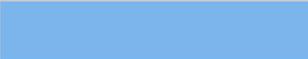
Respondents: 10

Choice	Percentage	Count	
All of the Time	100.00%	10	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	10	

Additional Comments:

8) Climate was respectful.

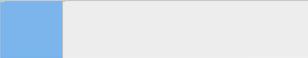
Respondents: 10

Choice	Percentage	Count	
All of the Time	100.00%	10	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	10	

Additional Comments:

9) In your opinion, were operational issues discussed inappropriately?

Respondents: 10

Choice	Percentage	Count	
Yes	20.00%	2	
No	80.00%	8	
Total	100%	10	

Additional Comments:

1 No operational issues we're on the agends

10) Additional Remarks:

Respondents: 1

10) Additional Remarks:

- 1 Session on governance was excellent. Session on discipline was packed with a lot of information. A few live examples / multiple sessions might have made it easier to digest the information.