The College of Dietitians of Ontario regulates dietitians for public protection. We deliver regulatory excellence to contribute to the health of Ontarians.



### COUNCIL MEETING AGENDA

September 30, 2022 (9:00am-4:30pm)

Join Zoom Meeting

https://collegeofdietitians-org.zoom.us/j/88543495606?pwd=aG5RU0cvUVBZZGxZWk1ic0J1d1U2Zz09

Meeting ID: 885 4349 5606 Passcode: 608842 Dial +1 647 558 0588 Canada

| ITEM & DISCUSSION              | DECISION    | ΤΙΜΕ           | OWNER   | ATTACHMENT                    |
|--------------------------------|-------------|----------------|---------|-------------------------------|
|                                | NEEDED      |                |         |                               |
| 1.0 Call To Order and Land     |             | 9:00 - 9:05    | KL      |                               |
| Acknowledgement                |             | (5 mins)       |         |                               |
| 2.0 Approval of Agenda         | Approval /  | 9:05 - 9:10    | KL      | 2.1 DRAFT Council Meeting     |
|                                | Motion      | (5 mins)       |         | Agenda – September 30,        |
|                                |             |                |         | 2022                          |
| 3.0 Declaration of Conflict of |             |                | KL      |                               |
| Interest                       |             |                |         |                               |
| 4.0 Declaration of Bias        |             |                |         |                               |
|                                | INFORMATION | ITEMS (Consent | Agenda) |                               |
| 5.0 Council Meeting Minutes:   | Approval /  | 9:10 -9:15     | KL      | 5.1 DRAFT Council Meeting     |
| June 16 & 17, 2022             | Motion      | (5 mins)       |         | Minutes June 16, 2022         |
| July 5, 2022                   |             |                |         | 5.2 DRAFT Council Meeting     |
|                                |             |                |         | Minutes June 17, 2022         |
|                                |             |                |         | 5.3 DRAFT Special Council     |
|                                |             |                |         | Meeting Minutes July 5,       |
|                                |             |                |         | 2022                          |
| 6.0 Executive Committee        |             |                |         | 6.1 Executive Committee       |
| Report                         |             |                |         | Report - August 2022          |
|                                | SHARI       | NG & LEARNING  |         |                               |
| 7.0 EDI-B Learning: National   | Discussion  | 9:15 –9:35     | KL      | 7.1 Briefing Note – EDI-B     |
| Truth and Reconciliation       |             | 20 mins        |         | Learning                      |
| Day                            |             |                |         |                               |
| POLICY, BY-LAW & REGULATION    |             |                |         |                               |
| 8.0 EDI-B Vision, Mission,     | Approval /  | 9:35 –10:05    | MW      | 8.1 Briefing Note – EDI-B     |
| Values                         | Motion      | (30 mins)      |         | Vision, Mission, Values       |
| 9.0 Financial Management       | Approval /  | 10:05 -10:50   | SA      | 9.1 Briefing Note – Financial |
| Policy                         | Motion      | (45 mins)      |         | Management Policy             |
|                                | l           | BREAK          |         |                               |
| 10:50 –11:10 (20 mins)         |             |                |         |                               |
|                                |             |                |         |                               |

| ITEM & DISCUSSION            | DECISION      | Тіме             | OWNER | ATTACHMENT                     |
|------------------------------|---------------|------------------|-------|--------------------------------|
|                              | NEEDED        | TIVIE            | OWNER | ATTACHMENT                     |
| 10.0 Council Code of Conduct | Approval /    | 11:10 -11:30     | MW    | 10.1 Briefing Note – Council   |
|                              | Motion        | (20 mins)        | 10100 | Code of Conduct                |
| 11.0 Governance              | Approval /    | 11:30 - 12:30    | MW    | 11.1 Briefing Note – CDO Role  |
| Modernization                | Motion        | (60 mins)        | 10100 | Terminology                    |
| Role Terminology             | Woton         | (00 11113)       |       | 11.2 Briefing Note – Elections |
| Elections                    |               |                  |       | 11.3 Briefing Note – Council   |
| Council Competencies         |               |                  |       | Competency & Attribute         |
| & Attributes                 |               |                  |       | Framework                      |
| & Attributes                 |               |                  |       | Папечотк                       |
|                              |               | LUNCH            |       |                                |
|                              |               | – 1:15 (45 mins) |       |                                |
|                              |               | & ACCOUNTAB      | P     |                                |
| 12.0 Management Report       | Information / | 1:15 –1:35       | MW    | 12.1 Management Report         |
|                              | Discussion    | (20 mins)        |       | 12.2 Attachment 1 –            |
|                              |               |                  |       | Statement of Operations        |
|                              |               |                  |       | F2023 as at June 30, 2022      |
|                              |               |                  |       | 12.3 Attachment 2 – Capital    |
|                              |               |                  |       | Asset Purchases Report         |
|                              |               |                  |       | F2023 as at June 30,           |
|                              |               |                  |       | 2022                           |
|                              |               |                  |       | 12.4 Attachment 3 – Audit of   |
|                              |               |                  |       | the Operations of the          |
|                              |               |                  |       | Register 2021-2022             |
| 13.0 Council Meeting         | Information/  | 1:35 -1:40       | KĽ    | 13.1 Council Meeting           |
| <b>Evaluations and Trend</b> | Discussion    | (5 mins)         |       | Evaluation Results –           |
| Analysis                     |               |                  |       | June 17, 2022                  |
|                              |               |                  |       | 13.2 Council Meeting           |
|                              |               |                  |       | Evaluation Trends - June       |
|                              |               |                  |       | Council Meeting 2022           |
| 14.0 Review Council Meeting  | Approval/     | 1:40 -2:00       | MW    | 14.1 Briefing Note – Council   |
| Evaluation Questions         | Motion        | (20 mins)        |       | Meeting Evaluation             |
| Evaluation Questions         |               | (20 mms)         |       | Questions                      |
| 15.0 Risk Monitoring Report  | Information/  | 2:00 -2:20       | MW    | 15.1 Briefing Note - Risk      |
| (Q2)                         | Discussion    | (20 mins)        |       | Monitoring Report Q2           |
| (42)                         |               |                  |       | Monitoring Report Q2           |
|                              |               | BREAK            |       |                                |
|                              |               | –2:40 (20 mins)  |       |                                |
| 16.0 Strategic Plan Update   | Information / | 2:40 -3:10       | MW    | 16.1 Briefing Note – Strategic |
|                              | Discussion    | (30 mins)        |       | Plan                           |
| 17.0 Registrar Coverage Plan | Information / | 3:10 -3:25       | MW    | 17.1 Registrar Coverage Plan   |
|                              | Discussion    | (15 mins)        |       |                                |

| ITEM & DISCUSSION                       | DECISION | Тіме        | OWNER | ATTACHMENT |
|---|----------|-------------|-------|------------|
|   | NEEDED   |             |       |            |
| 18.0 In Camera Minutes                  |          | 3:25 –3:30  |       |            |
| from June 17 & July 5, 2022             |          | (5 mins)    |       |            |
| In Camera session pursuant to           |          |             |       |            |
| s. 7(2)(b) and (e) of the <i>Health</i> |          |             |       |            |
| Professions Procedural Code,            |          |             |       |            |
| being Schedule 2 to the                 |          |             |       |            |
| Regulated Health Professions            |          |             |       |            |
| Act, 1991                               |          |             |       |            |
| 19.0 In Camera session                  |          | 3:30 - 4:00 |       |            |
| Financial/Property matter and           |          | (30 mins)   |       |            |
| legal advice pursuant to s.             |          |             |       |            |
| 7(2)(b) and (d) of the <i>Health</i>    |          |             |       |            |
| Professions Procedural Code,            |          |             |       |            |
| being Schedule 2 to the                 |          |             |       |            |
| Regulated Health Professions            |          |             |       |            |
| Act, 1991                               |          |             |       |            |
| 20.0 Adjournment                        |          |             |       |            |

0.0 Reference - Land Acknowledgement

0.0 Council Action List as of June Council 2022

0.0 Reference - 2020-2024 Strategic Plan - One Pager

Council and Committee Members Completed Conflict of Interest Forms:

- Committee Appointees
- Elected Members
- Public Members



#### **COUNCIL MEETING MINUTES**

Registered Dietitians in their changing practice environments

June 16, 2022 (9:00a.m. – 4:30p.m.) Videoconference

#### Present

Kerri LaBrecque RD-Chair Anahita Djalilvand RD Ann Watt RD Denis Tsang RD Donna Hennyey RD Lesia Kicak RD Julie Slack RD (left mtg. 11:21am) Karine Dupuis Pominville RD Ray D'Sa, Public Member Santhikumar Chandrasekharan, Public Member Sharanjit Padda, Public Member

#### Regrets

The College of Dietitians of Ontario exists to regulate and support all RDs in the interest of the public of Ontario

We are dedicated to the ongoing enhancement of safe, ethical and competent nutrition services provided by

Douglas Ellis, Public Member Israel Ogbechie, Public Member John Regan, Public Member

**Guests** Don McCreesh - The Garnet Group Inc.

#### Staff

Melanie Woodbeck - Registrar & Executive Director Jada Pierre - Executive & General Office Administrative Assistant Sandra Brazel-Manager, Governance & Operations

| ITEM & DISCUSSION  | ACTION   |
|--|--|
| <b>1.0 Call to Order</b><br>K. LaBrecque opened the meeting with a Land<br>Acknowledgement and Council had a minute of silence<br>for a personal reflection. | The meeting was called to order at 9:02 a.m. by K.<br>LaBrecque President and Chair. |
| 2.0 Approval of Agenda   | MOTION to approve the agenda as amended.   |
| Council requested that the agenda on June 17, 2022<br>be amended to include the topic "To Consider Legal<br>Advice" for the in camera session (item 3).      | Moved by: K. LaBrecque<br>Seconded by: D. Tsang                                      |
|  | Carried  |
| 3.0 Declaration of Conflict of Interest  |  |
| No conflict of interest was declared.  |  |
| <b>4.0 Declaration of Bias</b><br>No declaration of bias was declared.   |  |

| ITEM & DISCUSSION  | ACTION   |
|--|--|
| <ul> <li>Information Items (Consent Agenda)</li> <li>5.0 Council Meeting Minutes:<br/>March 24 &amp; 25</li> <li>6.0 Executive Committee Report</li> <li>7.0 Confirmation of Audit Committee Chair</li> </ul>  | MOTION to approve the Consent Agenda.<br>Moved by: K. LaBrecque<br>Seconded by: S. Chandrasekharan   |
|  | Carried  |
| 8.0 ELECTION of Executive Committee Members <ul> <li>Election of President</li> <li>Election of Vice-President</li> <li>Election of Third Member of the Executive Committee</li> <li>Election of Fourth Member of the Executive Committee</li> </ul> | <ul> <li>Election of President/Chair</li> <li>K. LaBrecque submitted a statement of interest to be nominated as President. After three calls, no further nominations were received for President.</li> <li>K. LaBrecque was acclaimed as President of the College.</li> <li>Election of Vice-President</li> <li>D. Tsang submitted a statement of interest to be nominated as Vice- President. After three calls, no further nominations were received for Vice-President.</li> <li>D. Tsang was acclaimed as Vice-President of the College.</li> <li>Election of Third Member of the Executive Committee</li> <li>S. Chandrasekharan nominated J. Slack as the Third Member of the Executive Committee. J. Slack declined the nomination.</li> <li>S. Padda nominated himself to run as Third Member of the Executive Committee.</li> <li>S. Padda was acclaimed as Third Member of the Executive Committee.</li> <li>S. Padda was acclaimed as Third Member of the Executive Committee.</li> <li>S. Padda was acclaimed as Third Member of the Executive Committee.</li> <li>S. Padda was acclaimed as Third Member of the Executive Committee.</li> <li>S. Padda was acclaimed as Third Member of the Executive Committee.</li> </ul> |

| ITEM & DISCUSSION  | ACTION  |
|--|---|
|  | Election of Fourth Member of the Executive  |
|  | Committee   |
|  | A. Watt nominated herself to run as Fourth  |
|  | Member of the Executive Committee. After three  |
|  | calls, no further nominations were received for the Fourth Member of the Executive Committee. |
|  | Fourth Member of the Executive Committee.   |
|  | A. Watt was acclaimed as Fourth Member of the   |
|  | Executive Committee.  |
|  |   |
|  | Upon the completion of the Executive Committee  |
|  | elections, K. LaBrecque assumed chairing the rest   |
|  | of the meeting.   |
| 9.0 Governance Workshop with Don McCreesh  |   |
| D. McCreesh, an external consultant with expertise in  |   |
| governance, provided a training session on best  |   |
| governance practices for health regulatory colleges.   |   |
| The session discussed Council Accountabilities,  |   |
| Individual Duties and how Councillors fulfill the  |   |
| Council's Role. D. McCreesh covered five   |   |
| responsibilities of the Council in detail: strategic direction, Registrar, oversight, risk, and governance |   |
| system processes. He also reviewed the concepts of   |   |
| duty of care, obedience and loyalty and the various  |   |
| tools used by Council to assess and monitor  |   |
| performance, and highlighted areas of focus for  |   |
| governance modernization at CDO.   |   |
| <b>5</b>   |   |

| ITEM & DISCUSSION  | ACTION   |
|--|--|
| <ul> <li>10.0 Governance Modernization with<br/>Recommendations</li> <li>A. Watt and M. Woodbeck presented an overview of<br/>the work completed by the Governance Committee<br/>along with the Committee's recommendations for<br/>changes to CDO's governance model and processes.</li> <li>They also showed the list of changes by priority -<br/>evaluating each recommendation against factors such<br/>as CDO's strategic plan, CPMF commitments,<br/>resources, or governance advocacy/leadership work.</li> <li>The recommendations were based on findings from<br/>Governance Review Report by D. McCreesh, resulting<br/>from interviews with council members and staff and<br/>an analysis of current council policies and governance<br/>structure.</li> </ul> | MOTION to approve the recommendations for<br>change to CDO Governance as recommended by the<br>Governance Committee.<br>Moved by: K. LaBrecque<br>Seconded by: S. Chandrasekharan<br>Carried |
| Council discussed how the proposed changes could<br>impact the College, including effects on the election<br>process, title terminology, selection criteria of council<br>members and committee appointments, and<br>compositional makeup of CDO's council and<br>committees. D. McCreesh was present to respond to<br>questions related to the Governance Review Report.  |  |
| Adjournment  | Motion to adjourn at 1:45p.m. was moved by K.<br>LaBrecque.  |
|  | Carried  |
|  |  |
| K. LaBrecque RD, President   | Jada Pierre, Recorder  |

Date

Date



#### **COUNCIL MEETING MINUTES**

Registered Dietitians in their changing practice environments

The College of Dietitians of Ontario exists to regulate and support all RDs in the interest of the public of Ontario We are dedicated to the ongoing enhancement of safe, ethical and competent nutrition services provided by

> June 17, 2022 (9:00a.m. – 3:50p.m.) Videoconference

#### Present

| Kerri LaBrecque RD-Chair                   |   |
|--|---|
| Anahita Djalilvand RD                      | Guests  |
| Ann Watt RD                                | Richard Steinecke – Steinecke Maciura LeBlanc (SML) |
| Denis Tsang RD                             | Dale Tinkham -Tinkham LLP                           |
| Donna Hennyey RD                           |   |
| Lesia Kicak RD                             | Staff   |
| Julie Slack RD (left mgt. 11:21am)         | Melanie Woodbeck - Registrar & Executive Director   |
| Karine Dupuis Pominville RD                | Jada Pierre - Executive & General Office            |
| Ray D'Sa, Public Member                    | Administrative Assistant                            |
| Santhikumar Chandrasekharan, Public Member | Sandra Brazel-Manager, Governance & Operations      |
| Sharanjit Padda, Public Member             | Carole Chatalalsingh - Director of Professional     |
|  | Practice  |
| Regrets                                    | Sarah Ahmed- Director of Finance and Corporate      |

Services

Douglas Ellis, Public Member Israel Ogbechie, Public Member John Regan, Public Member

# ITEM & DISCUSSIONACTION1.0 Call to OrderThe meeting was called to order at 9:03 a.m. by K.<br/>LaBrecque President and Chair.Motion THAT Council moves in camera at 9:03<br/>pm.Motion THAT Council moves in camera at 9:03<br/>pm.Moved by: K. LaBrecque RD<br/>Seconded by: D. TsangCarried

| ITEM & DISCUSSION  | ACTION                                      |
|--|---|
| <b>2.0 Education Accreditation Provider</b><br>M. Woodbeck reviewed the recommendation from the<br>Alliance on accepting a new accreditation provider and<br>the benefits of using the services of EQual/Accreditation<br>Canada.  | Motion deferred until next Council Meeting. |
| Council proposed to defer the discussion on the<br>Accreditation provider considering the letter provided by<br>the educators, dated June 16, 2022. Council agreed that a<br>Special Council Meeting should be called as soon as<br>possible to discuss the matter.  |   |
| <ul> <li>3.0 Management Report</li> <li>M. Woodbeck presented the Management Report to<br/>Council and highlighted key information, including:<br/>Finance HR and Corporate Services</li> <li>Successful audit completed, surplus in 2022</li> <li>Database Upgrade in progress</li> <li>Staffing updates: Registration Summer Student</li> <li>Re-opening of office to staff in July</li> <li>Equity Diversity Inclusion Working Group continues to<br/>meet</li> <li>Communications</li> <li>Closing out fiscal year with continued growth in web<br/>pageviews</li> <li>New social media strategy development</li> <li>Regulation Matters, Spring 2022 Issue Launched</li> <li>Professional Practice and QA</li> <li>Responsive member communications in a rapidly<br/>changing environment</li> <li>Planning underway for membership education (reg<br/>talks and annual workshop)</li> <li>Continue to refine QA tools in line with risk and right<br/>touch</li> <li>Registration</li> <li>Focus on ensuring a robust PLAR process</li> <li>Engagement with OFC, Low Risk Rating</li> <li>Bill 106 Response</li> <li>Council commended CDO staff on their recent<br/>communications with membership, which were provided<br/>in English and French as well as the latest Regulation</li> </ul> |   |

| ITEM & DISCUSSION   | ACTION |
|---|--------|
| <b>4.0 Council Meeting Evaluations and Trend Analysis</b><br>Council discussed the results of the March 25, 2022,<br>Council meeting evaluations. To manage the speaker's list,<br>Council agreed to put a "C" (for comment) or "Q" (for<br>question) in the chat box to indicate they wish to be added<br>to the speaker's list. The Registrar (or expert presenter)<br>will be the only attendee using Zoom's "hands-up" icon to<br>indicate their wish to speak, and they will be invited to<br>speak at the Chair's discretion. |        |
| Council also agreed that, generally, Council would not<br>pose questions to a presenter until the end of their talk,<br>allowing presenters a chance to complete their<br>presentations in the allotted time. This information will<br>become part of the Council meeting norms.  |        |
| <ul> <li>5.0 Annual Council and Committee Surveys and Needs<br/>Assessments</li> <li>Council discussed the results of the Annual Council<br/>Performance Evaluation 2021-22 and the EDI-B Needs<br/>Assessment Surveys. They also agreed that it is essential<br/>that members should complete the meeting evaluation<br/>each time.</li> </ul>   |        |
| M. Woodbeck reported on the EDI-B Needs Assessment by<br>Dr. Sukhera and recommendations for Council training. M.<br>Woodbeck informed Council that Dr. Sukhera has agreed<br>that CDO can use the assessment tool in perpetuity. For<br>future use, Council requested that the race category<br>(White) on the tool be broken into subgroups to better<br>represent this category.   |        |

| ITEM & DISCUSSION  | ACTION  |
|--|---|
| <b>6.0 Committee Composition and Appointments</b><br>M. Woodbeck reviewed the chart. Council approved this<br>draft committee composition for 2022-23.   | MOTION to approve the reappointment of Ruchika<br>Wadhwa and Barbara Grohmann for another term<br>from June 2022 – June 2025.   |
| Council also discussed potential reforms in governance,<br>committee composition and competency- and diversity-<br>requirements of members and how that will impact the<br>number of committee appointments required by the<br>College.<br>In preparation, Council reappointed two committee<br>appointees (Ruchika Wadhwa and Barbara Grohmann),<br>extended the term for three committee appointees<br>(Barbara Major – McEwan, Cindy Tsai and Khashayar<br>Amirhosseini) and appointed three new committee<br>appointments for three-year terms (Hannah Chan, Laura<br>Bjorklund and Jane Lac). | Moved by: K. LaBrecque<br>Seconded by: S. Chandrasekharan<br>Carried<br>MOTION to approve extending Barbara Major –<br>McEwan, Cindy Tsai and Khashayar Amirhosseini's<br>terms to end in June 2024 in accordance with the<br>updated by-law (3- year term appointment)<br>Moved by: K. LaBrecque<br>Seconded by: K. Dupuis Pominville<br>Carried   |
|  | MOTION to approve the appointment of three<br>committee appointees for three-year terms –<br>Hannah Chan, Laura Bjorklund and Jane Lac.<br>Moved by: K. LaBrecque<br>Seconded by: D. Tsang<br>Carried<br>MOTION to approve the DRAFT Committee<br>Composition Chart as amended.<br>Moved by: D. Tsang<br>Seconded by: S. Chandrasekharan<br>Carried |

| ITEM & DISCUSSION   | ACTION   |
|---|--|
| 7.0 Conflict of Interest Training with Richard Steinecke<br>R. Steinecke provided Council with training on conflict of<br>interest and unconscious bias. This session was<br>developed after Council expressed a desire for additional<br>training. Included in the training were multiple scenarios<br>of potential conflicts for Council members and how these<br>scenarios should be managed.  |  |
| <b>8.0 Council Workplan and Training Calendar</b><br>M. Woodbeck reviewed the Council Workplan and<br>Training Calendar for approval. The new work plan<br>aligns with the measures set out in the CPMF. Council<br>appreciated the easy-to-follow display of relevant Council<br>work in this new format and how it categorized the work<br>by Council meeting throughout the 2022-23 term. Also,<br>Council felt the work plan would heighten Council<br>members' awareness of upcoming Council work and<br>provide them additional time to consider their potential<br>COI before a Council meeting. | MOTION to approve the 2022 Council Workplan<br>and Training Calendar.<br>Moved by: K. LaBrecque<br>Seconded by: S. Chandrasekharan<br>Carried  |
| 9.0 Proposed Council Calendar<br>Council reviewed and discussed the proposed meeting<br>dates for 2022-2023. Council agreed to a hybrid return to<br>Council meetings, with one-day meetings (September<br>and March) being virtual and two-day meetings<br>(December and June) conducted in-person.  | <ul> <li>MOTION to approve the 2022/2023 Council meeting dates as follows:</li> <li>Friday, September 30, 2022</li> <li>Thursday, December 8 &amp; Friday, December 9, 2022</li> <li>Friday, March 24, 2023</li> <li>Thursday, June 15 &amp; Friday, June 16, 2023</li> </ul> Moved by: K. LaBrecque Seconded by: S. Padda Carried |

| ITEM & DISCUSSION   | ACTION |
|---|--------|
| <b>10.0 Risk Monitoring Report (Q1)</b><br>M. Woodbeck reported on the Risk Monitoring Report<br>for this quarter and shared that CDO has an internal Risk<br>Working Group made up of some CDO staff who will<br>work to identify risk and mitigate risk at the College. CDO<br>staff will continue to complete and review the CDO Risk<br>Register. |        |
| Council appreciated the new monitoring report. They requested adjusting the risk monitor report to identify new risks more clearly.   |        |
| <b>11.0 Presentation on Internal Controls</b><br>S. Ahmed provided training on Internal Controls. This was<br>a high level presentation for Council, based on a more<br>detailed Internal Questionnaire, which was presented to<br>the Audit Committee at their April 2022 meeting.   |        |
|   |        |

| ITEM & DISCUSSION  | ACTION   |  |
|--|--|--|
| <ul> <li>12.0 Audited Financial Statement presentation by auditor</li> <li>L. Kicak, Audit Chair, introduced Dale Tinkham from Tinkham LLP. She also reported that after meeting with Dale Tinkham and reviewing the audit, the Audit Committee recommends the approval of the Audited Financial Statements.</li> <li>D. Tinkham, presented the Audited Financial Statements for the Fiscal Year Ended March 31, 2022. Mr. Tinkham reported no changes or adjustments to the presentation of the financial statements, to the accounting standards applicable to the College or to the accounting policies used by the College. Mr. Tinkham stated that in the opinion of Tinkham LLP, the audited Financial Statements fairly presented the financial position, and there were no unusual transactions. Mr. Tinkham thanked the CDO staff and Audit Committee for their involvement in this process.</li> </ul> | MOTION to approve the Draft Audited Financial<br>Statements for the Year Ended March 31, 2022 as<br>presented.<br>Moved by: K. LaBrecque<br>Seconded by: D. Tsang<br>Carried |  |
| <b>13.0 Appointment of Auditor 2022-23</b><br>Council agreed that Tinkham LLP should be appointed as<br>auditors for the 2022-23 Fiscal year. There were no<br>concerns with the Auditors' performance on the Audit;<br>however Council requested that the College ask the<br>Auditors to have slides when presenting the Audit in the<br>future so that they can better follow the discussion.  | MOTION to reappoint Tinkham LLP as the auditors<br>for the fiscal year ending March 31, 2023.<br>Moved by: K. LaBrecque<br>Seconded by: D. Hennyey<br>Carried                |  |
|  |  |  |

| ITEM & DISCUSSION   | ACTION   |  |
|---|--|--|
| 14.0 Reserve Fund Policy                                  | MOTION to approve the updated Reserve Fund         |  |
| S. Ahmed updated Council on the Reserve Fund Policy,      | Policy as recommended by the Audit Committee,      |  |
| stating that the policy was first approved in March 2019; | with an approximate target level for the General   |  |
| Council should review this policy every 3 years. S. Ahmed | Reserve Fund established at 8 months of budgeted   |  |
| reported that the College's General Reserve Fund should   | operating expenses, and with an increase in the    |  |
| have sufficient funds to cover eight months of operating  | target level for the Hearings Fund from \$100,000  |  |
| expenses. This target was based on a 2018                 | to \$200,000. This is reflected in the audited     |  |
| environmental scan of other Colleges, which showed that   | financial statements for the Fiscal Year Ended     |  |
| their Reserve Funds ranged between 6 and 12 months.       | March 31, 2022.                                    |  |
| S. Ahmed reported that currently the College has enough   | Moved by: K. LaBrecque                             |  |
| funds in the General Reserve Fund to cover 13 months of   | Seconded by: S. Chandrasekharan                    |  |
| annual operating expenses. The surplus in the current     | Seconded by. S. Chandrasekharan                    |  |
| year financial statements was allocated to the various    | Carried  |  |
| reserve funds.  |  |  |
|   | MOTION to approve the establishment a Sexual       |  |
| S. Ahmed also reviewed the recommendation to              | Abuse Therapy and Counselling Fund, with a target  |  |
| establish a Sexual Abuse Therapy and Counselling Fund.    | level of \$40,000. This will be implemented by the |  |
| This fund will be a new fund in addition to the General   | College in Fiscal 2022 - 2023.                     |  |
| Reserve Fund, the Capital Asset Fund and the Hearings     |  |  |
| Fund.   | Moved by: K. LaBrecque                             |  |
|   | Seconded by: S. Chandrasekharan                    |  |
|   |  |  |
|   | Carried  |  |

|  | I  |
|--|--|
| <b>15.0 Investment Policy</b><br>Council reviewed the draft Investment Policy as<br>recommended by the Audit Committee with the<br>following amendments:   |  |
| <ul><li>The Registrar &amp; ED shall:</li><li>consult with the Director of Finance &amp; Corporate Services</li></ul>  |  |
| <ul> <li>negotiate with the investment advisor periodically to<br/>ensure that fees and commissions are fair and<br/>competitive.</li> </ul>   | MOTION to approve the DRAFT investment policy<br>as recommended by the Audit Committee with<br>their recommended amendments. |
| The Investment Firm or Institution (not the Advisor) shall<br>prepare a monthly list of portfolio holdings and an annual<br>evaluation of the portfolio  | Moved by: K. LaBrecque<br>Seconded by: D. Tsang  |
| <ul> <li>Authorized Investments:</li> <li>Equity investments shall be in low risk or conservative Common Shares of any Company listed.</li> </ul>  | Carried  |
| Guidelines & Restrictions:   |  |
| <ul> <li>Investment brokers must be registered with<br/>Investment Industry Regulatory Organization of<br/>Canada (IIROC); both the institution and the<br/>broker individually</li> </ul>   |  |
| <ul> <li>The portfolio mix should be determined after<br/>assessing the College's appetite for risk; in general a<br/>low risk portfolio will contain more Cash &amp; Cash<br/>Equivalents with low returns on the investments and a<br/>high risk portfolio will contain more Equity holdings<br/>and higher returns on investments.</li> </ul> |  |
| The Audit Committee reported that the Committee is comfortable with Council's current risk tolerance level of the the College's investments.   |  |
| The Audit Committee recommended that Council not<br>hire an external consultant at this time to thoroughly<br>evaluate Council's risk tolerance and the portfolio; it may<br>consider doing so at a later date.  |  |
|  |  |

| ITEM & DISCUSSION  | ACTION  |
|--|---|
| <ul> <li>16.0 Policy (Final) on Determining Currency Hours with<br/>Definition of Practising Dietetics Revisions</li> <li>C. Chatalalsingh reviewed the policy based on<br/>redeployment and consultation. Council agreed to the<br/>final draft policy on determining hours and approved the<br/>following next steps:</li> </ul> | MOTION to approve the final draft of Policy on<br>Determining Currency Hours in Dietetic Practice<br>for Registered Dietitians<br>Moved by: K. LaBrecque<br>Seconded by: J. Slack |
| <ol> <li>Publish and Communicate Broadly - Policy on<br/>Determining Currency Hours in Dietetic Practice on<br/>the College website and develop a communication<br/>plan for education to dietitians and other relevant<br/>system partners, including the public.</li> </ol>  | Carried   |
| <ol> <li>Incorporate into College Programs: Include the final<br/>Policy on Determining Currency Hours in Dietetic<br/>Practice into College publications and program tools<br/>such as the Quality Assurance Program and<br/>Professional Practice Resources.</li> </ol>  |   |
| Adjournment  | Motion to adjourn at 2:48p.m. was moved by K.<br>LaBrecque.<br>Carried  |

K. LaBrecque RD, President

Jada Pierre, Recorder

Date

Date



#### SPECIAL COUNCIL MEETING MINUTES

Registered Dietitians in their changing practice environments

July 5, 2022 (2:00-4:00p.m) Videoconference

#### Present

Kerri LaBrecque RD-Chair Anahita Djalilvand RD Ann Watt RD Denis Tsang RD Donna Hennyey RD Israel Ogbechie Public Member Lesia Kicak RD Julie Slack RD Karine Dupuis Pominville RD Santhikumar Chandrasekharan Public Member Sharanjit Padda Public Member

#### Regrets

The College of Dietitians of Ontario exists to regulate and support all RDs in the interest of the public of Ontario

We are dedicated to the ongoing enhancement of safe, ethical and competent nutrition services provided by

Douglas Ellis Public Member John Regan Public Member Ray D'Sa Public Member

#### Guests

Richard Steinecke – Steinecke Maciura LeBlanc (SML) Law

#### Staff

Melanie Woodbeck - Registrar & Executive Director Sandra Brazel-Manager, Governance & Operations Jada Pierre - Executive & General Office Administrative Assistant Colin Ellis – Director of Communications Deborah Cohen – Director of Registration

| ITEM & DISCUSSION  | ACTION   |  |
|--|--|--|
| <b>1.0 Call to Order</b><br>K. LaBrecque opened the meeting with a Land<br>Acknowledgement and Council had a minute of silence for a<br>personal reflection. | The meeting was called to order at 2:02 p.m.<br>by K. LaBrecque President and Chair. |  |
| 2.0 Approval of Agenda   | MOTION to approve the agenda as presented.   |  |
|  | Moved by: D. Tsang<br>Seconded by: K. LaBrecque<br>Carried                           |  |
| 3.0 Declaration of Conflict of Interest  |  |  |
| No conflict of interest was declared.  |  |  |

| ITEM & DISCUSSION  | ACTION  |
|--|---|
| <b>4.0 Declaration of Bias</b><br>No declaration of bias was declared.   |   |
| 5.0 In Camera Session – Legal Advice   | Motion to move In Camera<br>Moved by: K. LaBrecque<br>Seconded by: I. Ogbechie<br>Carried   |
| <ul><li>6.0 Accreditation Provider</li><li>K. LaBrecque, Council chair, thanked the stakeholders that provided written submissions to Council for consideration.</li></ul>   | MOTION that Council approve<br>EQual/Accreditation Canada as the approved<br>accreditation agency in accordance with the<br>Registration Regulation.                                  |
| Several factors were discussed by Council as they considered<br>Alliance's recommendation to approve EQual/Accreditation<br>Canada as the national accreditation agency and to approve<br>the proposed transition period for PDEP accreditation<br>following the withdrawal of the current accreditation service | Moved by: K. LaBrecque<br>Seconded by: S. Chandrasekharan<br>Carried  |
| provider. These included a discussion of the risks and<br>available options. Council noted that a common national<br>accreditation process facilitates labour mobility and CDO's<br>obligation for timely registration of new Registered Dietitians<br>in Ontario.   | MOTION that Council continue to recognize<br>PDEP accreditation awards until August 31,<br>2023, regardless of the date of the programs'<br>last accreditation and award expiry date. |
| Council also discussed the fee structure of accreditation service providers , sustainable pricing and the scaling of fees based on the size of the educational program.  | Moved by: K. LaBrecque<br>Seconded by: D. Tsang   |
| College's regulatory obligations and timelines.  | Carried   |

| ITEM & DISCUSSION | ACTION  |
|-------------------|---|
|                   | Council requested to move in-Camera to<br>receive legal advice.<br>Motion to move in-Camera at 3:12p.m. |
|                   | Moved by: L. Kicak<br>Seconded by: K. LaBrecque<br>Carried  |
|                   |   |
|                   | Motion to adjourn at 3:29 p.m. was moved by K. LaBrecque.   |
|                   | Carried   |

K. LaBrecque RD, President

Date

Jada Pierre, Recorder

Date

#### EXECUTIVE COMMITTEE REPORT September 2022



Committee Members: Kerri LaBrecque RD (Chair), Denis Tsang RD, Ann Watt RD, Shan Padda

Supporting Staff: Melanie Woodbeck (Registrar & ED), Jada Pierre, Lisa Dalicandro

| Executive Committee met on the following date(s)        | Rationale for the Meeting              |
|---|--|
| August 17 <sup>th</sup> , 2022                          | Routine Meeting                        |
| August 30 <sup>th</sup> to September 6 <sup>th</sup> by | Review the Financial Management Policy |
| Email   |  |

| SUMMARY OF DISCUSSIONS AND DECISIONS  | WILL DECISION BE<br>RATIFIED BY COUNCIL |
|---|---|
| Approved and made amendments to the Council agenda for the September<br>Council meeting   | Yes                                     |
| Received a Registrar's Report   | N/A                                     |
| Discussed a potential Equity, Diversity, Inclusion and Belonging learning moment for upcoming Council meeting                         | Yes                                     |
| Reviewed the Inter-fund transfers for Fiscal Year ending on March 31 <sup>st</sup> , 2022 with Recommendation to Council for approval | Yes                                     |
| Reviewed the draft Financial Management Policy with recommendation to<br>Council for approval   | Yes                                     |

Respectfully Submitted, Kerri LaBrecque, RD President



## **Council Briefing Note**

| Торіс:                       | EDI-B Learning: National Day for Truth and Reconciliation   |
|------------------------------|---|
| Purpose:                     | For Discussion  |
| Strategic Plan<br>Relevance: | Regulatory Effectiveness and Performance Measurement<br>Governance Modernization and Enhancing Public Trust |
| From:                        | Melanie Woodbeck, Registrar and Executive Director  |

#### ISSUE

To engage in Equity, Diversity, Inclusion and Belonging (EDI-B) learning and reflection related to the annual National Day of Truth and Reconciliation, which falls on September 30.

#### PUBLIC INTEREST RATIONALE

Organizational learning around EDI-B is key to driving strategy, building organizational EDI-B capacity and affecting systemic change. Training assists in ensuring that an EDI-B 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 EDI-B training that has been informed by self-identified learning needs.

#### BACKGROUND

As part of the CDO's work on advancing 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 indicated that Council and Committee members wished to have more education on trauma and decolonization. This fall, Council, Committee members, and staff will engage in a workshop titled "Unsettling & Trauma Informed Practices: An Indigenous Lens." During the session, participants will:

• Be introduced to Ontario's settler colonial history and ongoing context and understand

how this has led to anti-Indigenous institutional racism & settler colonial violence in health care

- Learn about the Allyship cycle and how to continue this critical work to inform unsettling and trauma-informed practice
- Engage with applied techniques to help address systemic barriers through unsettling and trauma-informed practice

Dr. Sukhera also made the recommendation, accepted by Council at its June 17, 2022 meeting, that it 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. Council agreed to commence this practice in its September 2022 meeting.

#### FOR DISCUSSION

September 30 marks the National Day for Truth and Reconciliation. The day commemorates the children who never returned home and survivors of residential schools, as well as their families and communities. Widespread public acknowledgement of the tragic and painful history and continued impact and intergenerational trauma of Canada's residential school legacy is a vital component of the reconciliation process.

Council is invited to review some of the resources below to inform the discussion.

Additional resources for more information:

Truth and Reconciliation Commission of Canada: Calls to Action

What are the Truth and Reconciliation Commission's 94 Calls to Action & How are we Working Toward Achieving them Today?

#### In Plain Sight Report

COBC, Indigenous Racism and Colonialism in Dietetics in BC and Canada

The dark history of Canada's Food Guide: How experiments on Indigenous children shaped nutrition policy

"Hunger was never absent": How residential school diets shaped current patterns of diabetes among Indigenous peoples in Canada

#### **NEXT STEPS**

For discussion and reflection.



# **Council Briefing Note**

| Торіс:         | Draft Equity, Diversity, Inclusion and Belonging (EDI-B) Vision Statement and consideration of CDO's Corporate Values |
|----------------|---|
| Purpose:       | Decision Required   |
| Strategic Plan | Regulatory Effectiveness and Performance Measurement  |
| Relevance:     | Effective and Transparent Communication   |
|                | Risk-Based and Right-Touch Regulation   |
| From:          | Governance Committee  |

#### ISSUE

To review and approve the Draft EDI-B Vision Statement and CDO's corporate values that would broadly express to system partners CDO's intent in relation to Equity, Diversity, Inclusion and Belonging and the relevance of this work to the College's public interest mandate.

#### PUBLIC INTEREST RATIONALE

As a regulator and an employer, the College's policies and practices affect its staff, members and the public. The EDI-B vision statement acknowledges and communicates the College's focus on EDI-B to promote learning and inclusive experiences of its staff and dietetic professionals to fulfill its mandate of serving and protecting the public.

#### BACKGROUND

Systemic discrimination has resulted in health disparities amongst different groups in Ontario's healthcare system and these disparities continue to widen with the impact of the global COVID-19 pandemic. Recognizing its role as the provincial dietetic regulator and the role that dietetic professionals can play in addressing these disparities, the College is well positioned to help drive positive change in collaboration with the profession, to support the delivery of more equitable healthcare in Ontario.

The College recognizes that its own policies and programs, as well as its own internal practices, can be evaluated through an EDI-B lens with a view to eliminating potential barriers to inclusive and equitable delivery of its statutory and regulatory programs. Over the past two years, the

College has identified and participated in a number of opportunities to address EDI-B, September 30, 2022 Meeting

acknowledging that a more formal initiative would be required to guide the College's focus in this area. To this end, the College engaged Dr. Javeed Sukhera in 2020 to assist the College in the two areas of focus:

- 1. **Capacity Building and Culture Change**. The activities in this area included: An internal task force of staff and Council members was identified, and the group received training and coaching to help establish a self-sustaining infrastructure. Providing wider training to staff and Council on unconscious bias and providing training and coaching to College Registration and Quality Assurance assessors who assessing internationally trained applicants or Registered Dietitians engaging in continuous improvement activities.
- 2. **Policy and Public Relations.** The activities in this area included: A literature review and an audit of 74 CDO diverse policy documents pertaining to professional standards, assessment, registration and HR. Policy audit recommendations were also informed by stakeholder engagement by way of a focus group with staff and Council and a stakeholder survey to seek perspectives on prejudice and discrimination in regulatory processes.

A summary of Dr. Sukhera's findings and recommendations are attached as *Appendix 1*. Among Dr. Sukhera's recommendations is that the EDI-B Working Group develop a workplan to further the College's EDI-B efforts. One of the items on the workplan is the development of a College EDI-B statement reaffirming the College's commitment and intention in furthering EDI-B at the College and within dietetics. The Governance Committee considered a draft statement at its meeting on August 22, 2022 and recommends that Council adopt the statement and consider reflecting the College's EDI-B commitment in its corporate values.

#### CONSIDERATIONS

#### EDI-B Mission and Vision Statement

The purpose of the statement is to: 1) Serve as a beacon to stakeholders — letting everyone know what the College stands for and where it's headed with respect to EDI-B and 2) to build trust between the College, its staff, Council, Registered Dietitians and the public.

The statement (*Appendix 2*) was developed by the EDI-B Working Group, reviewed by Dr. Javeed Sukhera, and is provided to Council for its consideration and adoption.

#### Organizational Core Values

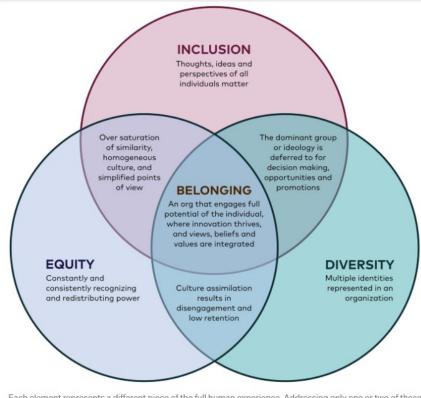
An organization's core values support its vision and mission, shape its culture and educate stakeholders about the organization's identity and beliefs and behaviours.

The College's current organizational core values are: Integrity, Collaboration, Accountability, September 30, 2022 Meeting

Transparency and Innovation. At this point in the College's EDI-B journey, it may be valuable to formally recognize an EDI-B value as part of the College's core organizational values, which would help demonstrate the significance of these values in carrying out its public protection mandate.

In determining an additional value word that summarizes the CDO's commitment, the Governance Committee considered the following graphic and how the terms Equity, Diversity, Inclusion and Belonging intersect.

The Governance Committee recommends that Council consider adding Equity, Diversity, Inclusion and Belonging **(EDI-B)** as additional corporate values.



Each element represents a different piece of the full human experience. Addressing only one or two of these falls short on gaining, what I think is the full human experience — a sense of belonging.

Source: https://www.krysburnette.com/blog/belonging-a-conversation-about-equity-diversity-amp-inclusion

#### RECOMMENDATION

- 1. That Council approve the EDI-B Vision and Mission Statement.
- 2. That Council add "Equity, Diversity, Inclusion and Belonging" as additional core organizational values.

#### ATTACHMENTS

September 30, 2022 Meeting

- Appendix 1: Advancing Equity Findings and Recommendations
- Appendix 2: EDI-B Mission and Vision Statement

# **EXECUTIVE SUMMARY**

Appendix 1

he importance of advancing equity and anti-racism within health professions has gained recent attention. Regulators have attempted to increase diversity while seeking structural reforms to advance equity. However, efforts remain constrained while persons from racialized groups continue to experience discrimination. To support a more fulsome, rigorous, and sustained effort in this area, the College of Dietitians of Ontario (CDO) sought external consultation and commissioned a report to inform future work.

Several activities were conducted including a literature search, environmental scan, internal/external engagement, and a policy audit. There were multiple discussions with CDO and this report provides a set of key findings and recommendations:

# **FINDINGS**

- 1. Potential areas to advance EDI-B within dietitian regulation are mostly similar to other health professions with a few unique opportunities for CDO.
- 2. Specific ways that CDO can address equity and antiracism include capacity building within the organization while promoting thought leadership among the profession.
- 3. The CDO has a strong professional practice infrastructure that can be leveraged to promote education/training opportunities and the development of standards in anti-oppressive dietetic practice.
- 4. There is currently limited infrastructure, particularly within CDO Council to address equity/antiracism.
- 5. Existing policy would benefit from a more inclusive approach to policy codesign.

# Recommendations

- 1. **Thought Leadership:** Promote thought leadership by establishing professional standards related to EDI-B in the profession.
  - Take the lead on developing a new professional practice standard related to cultural safety, cultural humility, and anti-racist practice for Dietitians.
- 2. Enhance Evaluative Mechanisms: Enhance mechanisms for feedback and appeal for potential registrants.
  - Ensure that there is sufficient infrastructure and communication for appropriate stakeholders to provide feedback and appeal regarding CDO decisions and processes.
- 3. Address the Representation Gap: Enhance representation and diversity within CDO staff and governance.
  - Develop a new advisory structure that includes racialized, minoritized, and internationally trained professionals.
  - Conduct inventory and skills matrix for existing staff and Council in accordance with other regulatory practices.
- 4. **Co-design Policy:** Critically appraise existing policies and consider an inclusive approach to policy co-design with racialized and minoritized stakeholders.
  - Existing policies should be modified in accordance with specific recommendations provided including more inclusive policy language.
  - Policy can be leveraged to develop a new EDI-B advisory structure with adequate representation from minoritized and racialized stakeholders.

- Rewrite policies pertaining to harassment, violence, and anti-discrimination in accordance with best practices in EDI-B and in consultation with EDI-B's new advisory structure.
- Co-write key registration policy with new advisory structure
- Ensure each policy includes a policy mechanism for feedback and appeal where appropriate.
- 5. **Build Capacity:** Identify and adequately resource an EDI-B lead within CDO to promote future activities.
  - CDO should identify a key leader within its staff to support the operationalization of EDI-B work in the organization. The EDI-B lead should be a member of CDO Staff and have appropriate reporting relationships within the organization.
  - The EDI-B task force that has been established should be primarily led by EDI-B staff and chaired by the newly identified EDI-B lead, however, the task force should ensure that it has a regular reporting mechanism with CDO Council.
  - The EDI-B task force should develop an annual work plan and report regularly to college and other stakeholders regarding its activities.
  - The EDI-B task force should develop key metrics and an EDI-B score card to track CDO's progress.
- 6. Enhance and Spread Training: Leverage existing professional practice infrastructure to develop and expand existing training
  - Seek collaboration with educational programs to share and spread a newly developed professional standard in EDI-B for Dietitians.
  - Ensure existing professional practice educational activities include opportunities to enhance EDI-B training for Dietitians.

- Conduct regular surveys and needs assessments within the profession to identify and address training needs for those in practice.

#### Appendix 2

#### Equity, Diversity, Inclusion and Belonging (EDI-B) Statement

The College of Dietitians of Ontario recognizes the important role we play as an employer and as a regulator that serves and protects the public interest. We are committed to informed equity, diversity, inclusion and belonging (EDI-B) action to minimize systemic barriers and to help build a more inclusive and equitable health system for all, including Indigenous peoples, immigrants, refugees, people who are racialized, people with disabilities and the 2SLGBTQIA communities.

Our commitment to informed EDI-B action is a conscious decision to foster respectful partnerships with the public, dietitians, employers and healthcare providers. It is our shared responsibility to encourage anti-oppressive practices that embrace innovation and recognize the value of diversity to achieve sustainable and meaningful change.

We promise to listen, reflect, learn and act in collaboration with our Council, staff, dietitians and the public. We are committed to being transparent about our EDI-B work and actions and why they are important to us. This work is never done. As individuals and as an organization, we commit to being life-long learners and will continue to educate ourselves to better our work within our regulatory mandate and daily practices.



# **Council Briefing Note**

| Topic:                       | Financial Management Policy  |
|------------------------------|--|
| Purpose:                     | Decision Required  |
| Strategic Plan<br>Relevance: | Risk-Based and Right-Touch Regulation<br>Governance Modernization and Enhancing Public Trust |
| From:                        | Executive Committee  |

#### ISSUE

To review and approve the draft Financial Management Policy.

#### PUBLIC INTEREST RATIONALE

Governance best practices calls for clearly articulated policies and processes that ensure a regulator's overall effectiveness and accountability. As part of this, financial management policy provides assurance that the planning and management of the CDO's finances are consistent with the goals, objectives, and priorities set by Council and ultimately allow the CDO to achieve its public protection mandate.

#### BACKGROUND

At its March 2021 meeting, Council adopted a revised Governance Manual that reflects best practices for regulatory excellence. With the elimination of the Executive Limitations, Council directed staff to convert the financial limitations related to asset protection (specifically to address points 13, 15, 16, 17 and 19) and Registrar expenses (specifically to address points 1, 2) into a separate policy to provide assurance that proper financial management practices are in place. (See Appendix 1)

To align with good governance practices and support the CDO's commitment to transparency and fiscal integrity, staff expanded the scope of the financial policy work to communicate the operating standards currently in place that allow for the effective management of CDO funds.

The CDO's Investment Policy was approved by Council at its June 2022 meeting, which addresses some of the policy elements that existed in the Executive Limitations. Remaining

policy elements have been incorporated into CDO by-law 1 and the proposed Financial Management Policy

The Executive Committee reviewed the policy via email and directed staff to provide it to Council for consideration.

#### CONSIDERATIONS

The draft Financial Management Policy (*Appendix 2*) set out the CDO's philosophy of ensuring that the principles of fiscal integrity and accountability govern its financial planning and management practices. This policy aligns with the style of the revised Governance Manual in that it is streamlined and simplified. It addresses the internal controls, procurement of goods and services, asset protection, budgeting, and reporting. The policy has been reviewed by legal counsel.

The policy works in conjunction with section 2 of <u>CDO by-law 1</u> and address:

- Asset Protection, specifically to address the point that Registrar cannot independently acquire, encumber or dispose of real estate; and
- Registrar expenses, to require that Registrar expenses (credit card and out of pocket) are reviewed by either the president or vice-president.

#### RECOMMENDATION

That Council approve the draft Financial Management Policy.

#### ATTACHMENT

- Appendix 1 Executive Limitations L8 & L16
- Appendix 2 Draft Financial Management Policy

#### POLICY TYPE: EXECUTIVE LIMITATIONS

#### **L8: ASSET PROTECTION**

Approval Date: June 28, 1994; March 28, 1995 (R); March 13, 1997 (R); Jun.18, 1998 (R); March 8, 2000 (R); Nov. 23, 2000 (R); March 27, 2001(R); June 19, 2001 (R); November 27, 2003 (R); June 16, 2005 (R); June 15, 2006 (R); March 29, 2007(R); June 20, 2007 (R). (November 2007) (R). (November 2009) (R) June 24, 2010 (R); June 26, 2015 (R)

The Registrar & Executive Director 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 Councillors, 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:
  - a) Wherein normally prudent protection has not been given against conflict of interest
  - b) Of over \$15,000 without having obtained comparative prices and except where the vendor has been established by the Registrar & 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 i) financial institutions that are CDIC member institutions, including deposits in bank accounts or GICs or ii) bonds that have a rating of not less than Dominion Bond "A" rating or iii) investments in equities that are recommended by the College's financial advisor.
- 14. Fail to review and sign bank statements.
- 15. 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.
- 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.
- 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 and the Registrar & Executive Director.

### POLICY TYPE: EXECUTIVE LIMITATIONS

### L16: REGISTRAR & EXECUTIVE DIRECTOR EXPENSES

Approval Date: October 22, 1996; March 13, 1997 (R); March 25, 2004 (R); June 15, 2006 (R).

The Registrar & Executive Director may not fail to obtain the review of the President or Vice-President for all expenses charged to the CDO Visa under the Registrar & Executive Director's name.

The Registrar & Executive Director may not fail to obtain the authorization of the President or Vice- President for payment of CDO out-of-pocket expenditures.

### **CDO FINANCIAL MANAGEMENT POLICY**

### **Purpose and Application**

Council has a fiduciary duty to provide financial oversight of the College. It is committed to ensuring that the principles of fiscal integrity and accountability govern the College's financial planning and management practices.

The Registrar & Executive Director is responsible for the day-to-day financial management of the College in accordance with this policy and College by-laws relating to banking, finances, expenditures, and business practices. The Registrar & Executive Director has a duty to execute all financial matters with care, integrity, and in the best interests of the organization.

The purpose of this policy is to provide reasonable assurance that the planning and management of the College's finances are consistent with the goals, objectives, and priorities set by Council and ultimately allow the College to achieve its public protection mandate. In addition, they provide a framework of operating standards aimed at protecting and preserving the assets of the College to allow for an effective management of the College's funds. This policy will be reviewed every three years.

### **Internal Controls**

The Registrar shall ensure that the College maintains a robust system of internal controls to safeguard the College's financial assets, and that staff comply with College financial policies and by-laws, financial management principles and any applicable legislative, statutory or audit requirements.

As part of these internal controls, the College strives for segregation of financial duties among staff to help ensure protection from theft, fraud and error. The segregation of duties aims for maximum protection of the College's assets while also considering efficiency of operations. This means that to the extent possible given the College's human resources capacity, there will be a separation of financial roles.

In addition, all expenses charged to the College credit card(s) by the Registrar & Executive Director and any expenditures paid out-of-pocket by the Registrar & Executive Director must be consistent with College by-laws and reviewed and approved by the President or Vice-President.

### Procurement of Goods and Services and Asset Protection

To ensure that the College's assets are adequately protected and maintained, the College will:

- Insure against theft and casualty losses to the College and against liability losses to Council members, staff, or the College itself to levels indicated in consultation with suitable professional resources.
- Not make any contractual or other commitment to acquire, encumber or dispose of real estate without Council approval.
- Not make any payments from reserve funds or inter-fund transfers without approval from Council, or Executive Committee, acting on behalf of Council.

• Engage in competitive bidding for any procurement of goods and/or services. The College will use sound business practices, such as pricing, product and service quotations when procuring goods and services for amounts less than \$40,000 plus applicable taxes. The College will obtain at least three competitive bids for contracts or expenditures greater than \$40,000 plus applicable taxes, excluding employment contracts, unless otherwise authorized by Council.

### **Budgeting and Reporting**

To ensure that planned activities minimize the risk of financial jeopardy and are consistent with the College's priorities, strategic goals, and public protection mandate, annual capital and operating budgets are the responsibility of the Registrar & Executive Director and are provided to Council for review and approval. The budget is developed using responsible assumptions and projections needed to fund the proposed expenses.

Within the Council approved annual budget, the Registrar & Executive Director is accountable for use of financial resources, for compliance with legal and administrative policies, for efficiency and economy in operations, and for the achievement of annual objectives.

Council monitors variance to the budget through quarterly financial reports from the Registrar & Executive Director.



# **Council Briefing Note**

| Topic:                       | Financial Management Policy  |
|------------------------------|--|
| Purpose:                     | Decision Required  |
| Strategic Plan<br>Relevance: | Risk-Based and Right-Touch Regulation<br>Governance Modernization and Enhancing Public Trust |
| From:                        | Executive Committee  |

## ISSUE

To review and approve the draft Financial Management Policy.

## PUBLIC INTEREST RATIONALE

Governance best practices calls for clearly articulated policies and processes that ensure a regulator's overall effectiveness and accountability. As part of this, financial management policy provides assurance that the planning and management of the CDO's finances are consistent with the goals, objectives, and priorities set by Council and ultimately allow the CDO to achieve its public protection mandate.

## BACKGROUND

At its March 2021 meeting, Council adopted a revised Governance Manual that reflects best practices for regulatory excellence. With the elimination of the Executive Limitations, Council directed staff to convert the financial limitations related to asset protection (specifically to address points 13, 15, 16, 17 and 19) and Registrar expenses (specifically to address points 1, 2) into a separate policy to provide assurance that proper financial management practices are in place. (*See Appendix 1*)

To align with good governance practices and support the CDO's commitment to transparency and fiscal integrity, staff expanded the scope of the financial policy work to communicate the operating standards currently in place that allow for the effective management of CDO funds.

The CDO's Investment Policy was approved by Council at its June 2022 meeting, which addresses some of the policy elements that existed in the Executive Limitations. Remaining

policy elements have been incorporated into CDO by-law 1 and the proposed Financial Management Policy

The Executive Committee reviewed the policy via email and directed staff to provide it to Council for consideration.

## CONSIDERATIONS

The draft Financial Management Policy (*Appendix 2*) set out the CDO's philosophy of ensuring that the principles of fiscal integrity and accountability govern its financial planning and management practices. This policy aligns with the style of the revised Governance Manual in that it is streamlined and simplified. It addresses the internal controls, procurement of goods and services, asset protection, budgeting, and reporting. The policy has been reviewed by legal counsel.

The policy works in conjunction with section 2 of <u>CDO by-law 1</u> and address:

- Asset Protection, specifically to address the point that Registrar cannot independently acquire, encumber or dispose of real estate; and
- Registrar expenses, to require that Registrar expenses (credit card and out of pocket) are reviewed by either the president or vice-president.

## RECOMMENDATION

That Council approve the draft Financial Management Policy.

# ATTACHMENT

- Appendix 1 Executive Limitations L8 & L16
- Appendix 2 Draft Financial Management Policy

## POLICY TYPE: EXECUTIVE LIMITATIONS

## **L8: ASSET PROTECTION**

Approval Date: June 28, 1994; March 28, 1995 (R); March 13, 1997 (R); Jun.18, 1998 (R); March 8, 2000 (R); Nov. 23, 2000 (R); March 27, 2001(R); June 19, 2001 (R); November 27, 2003 (R); June 16, 2005 (R); June 15, 2006 (R); March 29, 2007(R); June 20, 2007 (R). (November 2007) (R). (November 2009) (R) June 24, 2010 (R); June 26, 2015 (R)

The Registrar & Executive Director 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 Councillors, 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:
  - a) Wherein normally prudent protection has not been given against conflict of interest
  - b) Of over \$15,000 without having obtained comparative prices and except where the vendor has been established by the Registrar & 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 i) financial institutions that are CDIC member institutions, including deposits in bank accounts or GICs or ii) bonds that have a rating of not less than Dominion Bond "A" rating or iii) investments in equities that are recommended by the College's financial advisor.
- 14. Fail to review and sign bank statements.
- 15. 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.
- 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.
- 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 and the Registrar & Executive Director.

### POLICY TYPE: EXECUTIVE LIMITATIONS

### L16: REGISTRAR & EXECUTIVE DIRECTOR EXPENSES

Approval Date: October 22, 1996; March 13, 1997 (R); March 25, 2004 (R); June 15, 2006 (R).

The Registrar & Executive Director may not fail to obtain the review of the President or Vice-President for all expenses charged to the CDO Visa under the Registrar & Executive Director's name.

The Registrar & Executive Director may not fail to obtain the authorization of the President or Vice- President for payment of CDO out-of-pocket expenditures.

### DRAFT CDO FINANCIAL MANAGEMENT POLICY

### **Purpose and Application**

Council has a fiduciary duty to provide financial oversight of the College. It is committed to ensuring that the principles of fiscal integrity and accountability govern the College's financial planning and management practices.

The Registrar & Executive Director is responsible for the day-to-day financial management of the College in accordance with this policy and College by-laws relating to banking, finances, expenditures, and business practices. The Registrar & Executive Director has a duty to execute all financial matters with care, integrity, and in the best interests of the organization.

The purpose of this policy is to provide reasonable assurance that the planning and management of the College's finances are consistent with the goals, objectives, and priorities set by Council and ultimately allow the College to achieve its public protection mandate. In addition, they provide a framework of operating standards aimed at protecting and preserving the assets of the College to allow for an effective management of the College's funds. This policy will be reviewed every three years.

### **Internal Controls**

The Registrar shall ensure that the College maintains a robust system of internal controls to safeguard the College's financial assets, and that staff comply with College financial policies and by-laws, financial management principles and any applicable legislative, statutory or audit requirements.

As part of these internal controls, the College strives for segregation of financial duties among staff to help ensure protection from theft, fraud and error. The segregation of duties aims for maximum protection of the College's assets while also considering efficiency of operations. This means that to the extent possible given the College's human resources capacity, there will be a separation of financial roles.

In addition, all expenses charged to the College credit card(s) by the Registrar & Executive Director and any expenditures paid out-of-pocket by the Registrar & Executive Director must be consistent with College by-laws and reviewed and approved by the President or Vice-President.

## Procurement of Goods and Services and Asset Protection

To ensure that the College's assets are adequately protected and maintained, the College will:

- Insure against theft and casualty losses to the College and against liability losses to Council members, staff, or the College itself to levels indicated in consultation with suitable professional resources.
- Not make any contractual or other commitment to acquire, encumber or dispose of real estate without Council approval.
- Not make any payments from reserve funds or inter-fund transfers without approval from Council, or Executive Committee, acting on behalf of Council.

• Engage in competitive bidding for any procurement of goods and/or services. The College will use sound business practices, such as pricing, product and service quotations when procuring goods and services for amounts less than \$40,000 plus applicable taxes. The College will obtain at least three competitive bids for contracts or expenditures greater than \$40,000 plus applicable taxes, excluding employment contracts, unless otherwise authorized by Council.

### **Budgeting and Reporting**

To ensure that planned activities minimize the risk of financial jeopardy and are consistent with the College's priorities, strategic goals, and public protection mandate, annual capital and operating budgets are the responsibility of the Registrar & Executive Director and are provided to Council for review and approval. The budget is developed using responsible assumptions and projections needed to fund the proposed expenses.

Within the Council approved annual budget, the Registrar & Executive Director is accountable for use of financial resources, for compliance with legal and administrative policies, for efficiency and economy in operations, and for the achievement of annual objectives.

Council monitors variance to the budget through quarterly financial reports from the Registrar & Executive Director.



# **Council Briefing Note**

| Торіс:                       | Revised Council/Committee Code of Conduct           |
|------------------------------|---|
| Purpose:                     | Decision Required                                   |
| Strategic Plan<br>Relevance: | Governance Modernization and Enhancing Public Trust |
| From:                        | Governance Committee                                |

## ISSUE

To review and approve updates to the Council's Code of Conduct governance policy to align with the College's commitment to EDI-B and to comply with College Performance Measurement Framework (CPMF)'s evidence measures.

## PUBLIC INTEREST RATIONALE

A transparent Code of Conduct that includes elements that are reflective of the expectations of the public instills confidence and trust in the Council's governance framework and the ability of Council to regulate the profession in the public interest.

# BACKGROUND

The CPMF<sup>1</sup> requires that Colleges have a Code of Conduct policy that is "reviewed every three years to ensure that it reflects current legislation, practices, public expectations, issues, and emerging initiatives (e.g. EDI) and is accessible to the public."

In the 2021 CPMF report, the CDO committed to updating the Code of Conduct to incorporate the organization's Equity, Diversity, Inclusion and Belonging (EDI-B) values and to ensure that the policy is reviewed at least every three years. Updating this policy will move CDO from partial to full compliance with this evidence measure.

At its August meeting, the Governance Committee reviewed updates to the Code of Conduct and the revised Annual Acknowledgement and Confirmation Form. The Committee approved these documents for recommendation to Council.

<sup>&</sup>lt;sup>1</sup> See <u>CDO 2021 CPMF Report</u>, page 18

## CONSIDERATIONS

## Code of Conduct Amendments

The proposed amendments to the Council Code of Conduct are included as Appendix 1.

Environmental scanning was conducted to review the Code of Conduct policies of other health regulatory Colleges including: Optometrists, Pharmacists, Nurses, Physicians, Occupational Therapists, Opticians, Dentists and Medical Imaging Technologists. The draft was reviewed by legal counsel and sections relevant to EDI-B were reviewed by Dr. Javeed Sukhera.

## Changes include:

- Inclusion of a three-year review date.
- Commitment to make decisions on best-evidence and cross-referencing the impartiality in decision-making governance policy.
- Commitment to applying an EDI-B lens in College work.
- Incorporation of EDI-B as a component of respectful conduct.
- Reiteration of Council's determination to work toward consensus decision-making.
- Deletion of the reference to the President's authority and "corporate obedience" as an EDI-B recommendation. One of the findings in the EDI-B audit/recommendations were to review policies to examine where policies consolidate power/perpetuate power asymmetries or otherwise diminish influence of participants rather than distribute it in a more egalitarian way. The President's role is set out in another section of the Governance Manual and the rules of order clearly establish the President's ability to facilitate discussions, seek consensus and keep order during a meeting.
- Use of gender-neutral language and pronouns (they/their instead of his or hers)
- Inclusion of a Social Media Use section as an "emerging initiative" as the College begins to expand its social media presence.
- Deletion of the need for Council to approve amendments to the Annual Acknowledgement and Conformation form. Forms are usually considered operational tools, and removal of this would allow greater flexibility to make small amendments as needed and identified by Council and/or management.

## Annual Acknowledgement and Confirmation Form

Proposed amendments to the Annual Acknowledgement and Confirmation Form are included as *Appendix 2*.

These amendments reflect Council's feedback to include a preamble and relocate the document to an appendix of the governance manual.

## RECOMMENDATION

That Council:

- 1. Approve the revised Code of Conduct policy (as proposed or with further revisions)
- 2. Approve the revised Annual Acknowledgement and Confirmation Form (as proposed or with further revisions)

## ATTACHMENTS

- Appendix 1: Proposed Revised Code of Conduct Policy (with tracked changes)
- Appendix 2: Revised Annual Acknowledgement and Confirmation Form (with tracked changes)

### COUNCIL CODE OF CONDUCT

#### **Purpose and Application**

The Council is dedicated to achieving the highest standards of public trust and integrity in its governance of the College. This commitment applies to Council as a whole and to individual Council and committee members. The purpose of the Code of Conduct is to maintain this standard. The Code <u>is a College</u> <u>governance policy that</u> applies to all members of Council and to all non-Council committee members. (For ease of reference the term "Council member" will include non-Council committee members, with any necessary modification to fit the context.). The Code of Conduct <u>-will be reviewed every three years</u>.

### **Fiduciary Duties**

All Council members stand in a fiduciary relationship to the College. This means that Council members must act honestly, in good faith, and in the best interests of the College consistent with its mandate to protect the public. Council members who consider themselves as being elected or appointed by a particular interest group, must act in the best interests of the College, even if this conflicts with the interests of that group. Council members are subject to strict standards of honesty, integrity and loyalty. They must not place their own personal interest above the best interests of the College. Council members also have duties relating to confidentiality and conflict of interest.

### Acting in the Public Interest

When making decisions on behalf of the College, Council members must act\_-in the public interest. This means that the objectives and outcomes of the decision-making process are in the public interest, and that the process and procedures followed to make the decision are in the public interest. A process that reflects the public interest involves among other things, complying with applicable law, acting fairly and impartially, <u>making decisions on best-evidence</u> and ensuring proper accountability and transparency. <u>Council members are expected comply with all expectations set out in the governance manual regarding impartiality in decision-making.</u>

The public interest and public protection must always be in the forefront of Council and committee decision making. It is possible that in advancing the public interest, a Council member may seek to advance the interests of the profession. But the public interest and public protection will not always align with the interests of the profession. If this occurs a Council member must favour the public interest.

### Equity, Diversity, Inclusion and Belonging

The College is committed to Equity, Diversity, Inclusion and Belonging (EDI-B) as a critical component of public protection and safety. Council supports and fosters an environment that is culturally safe and that promotes belonging at the College, within the profession, and for the public. Accordingly, Council members are expected to engage in EDI training and reflection with an open-mind and approach all College work and decision making with an EDI lens.

### **Respectful Conduct**

<u>Council members are expected to recognize and respect the value of diversity and the contributions of all other members.</u> Council discussions and debate will take place in an atmosphere of mutual respect and civility, <u>avoiding discrimination and bias</u>. <u>A Council member's behaviour must be consistent with this principle.</u> <u>Council members are expected to contribute to discussions, remain open to differing viewpoints, and work towards consensus.</u> <del>A Council member's behaviour must be consistent with this principle.</del> In support of this principle a Council member must refrain from any conduct or communication that would reasonably be viewed as verbal, physical or sexual abuse or harassment. They must also maintain appropriate decorum during all Council and committee meetings and follow the rules of order (appendix c) when deemed appropriate. <u>Council members must respect the authority of the President and the presiding chair in the context of meetings</u>.

### **Corporate Obedience &** Council Solidarity

The Council speaks with one voice. Council members acknowledge that Council decisions must be supported by all Council members. A Council member who has abstained or voted against a motion or decision must still adhere to and support the decision of the majority regardless of the degree of <u>their</u> his or her disagreement with the decision.

### **Conflict of Interest**

As fiduciaries, Council members must avoid situations where their personal or financial interests conflict with their duties to the College. They must avoid situations where the duties they owe to the College may conflict with duties that they owe to other organizations or individuals. Council members must take steps to avoid these types of conflict and comply with College by-laws and policies relating to conflict of interest.

### Confidentiality

Council members must respect the confidentiality of the information they obtain through exercising their duties on behalf of the College. They must comply with College by-laws and policies relating to confidentiality. They must also comply with the confidentiality obligations in legislation governing the College.

#### **College Spokesperson and Media Contact**

A Council member must not speak on behalf of the College unless <u>they have she or he has</u> Council authorization, or authorization from the President and Registrar. If a Council member has this authorization, <u>they he or she</u> must represent Council in a way consistent with Council's direction and with its policies and accepted positions. Council members must refer media requests or questions to the Registrar. Council members must comply with Council and College processes and policies relating to communications and College representation.

### Social Media Use

Council members who use social media must ensure that they engage in social media in a way that is consistent with the Code of Conduct and their fiduciary role with the College. Council members are not required to follow or engage with the College's social media accounts. Council members may "like" or "share" College social media, however, should generally refrain from commenting or otherwise responding to posts, which could create the appearance of speaking on behalf of the College or the Council.

<u>Council members must refrain from including or referencing Board or Committee titles or positions held</u> at the College in any personal or business promotional materials, advertisements and business cards used for economic gain (although referencing one's titles or positions held at the College in one's curriculum vitae or resume, including virtual CVs such as LinkedIn, is acceptable so long as the CV is not overtly used in a promotional manner).

### Commitment

All Council members must devote the time and effort necessary to regularly attend meetings and engage in constructive discussion. This involves preparing appropriately for meetings and proceedings and participating meaningfully in them. Council members must participate to the best of their ability in performance evaluations, orientation and ongoing education relating to their role.

### **Compliance with Council and College By-laws and Policies**

All Council members must comply with the College's by-laws, policies and processes. All Council members must also comply with the provisions that apply to them in the <u>Regulated Health Professions</u> <u>Act (RHPA)</u> and the Dietetics Act (and the regulations under these acts) and other statutory requirements that apply to them in the exercise of their role. All Council members must sign an acknowledgement (see the Annual Acknowledgement & Commitment) that they have reviewed Council's governance policies and other materials, and understand their obligations to the College. The acknowledgement will be in form that Council approves from time-to-time.

### **External Advice and Counsel**

A Council member must have Council approval to retain external advice or counsel with respect to College or Council business. A Council member who wants to retain external opinions or advice should make a request to the President.

### ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

<u>Council and committee members have a duty to understand and abide by their obligations to the</u> <u>College, as outlined in the Council's Code of Conduct policy. To achieve this, Council and committee</u> <u>members are expected to review Council's governance policies and other materials.</u>

I acknowledge and confirm that as a member of Council or as a member of a Council committee:

1. I have read and am familiar with the College's by-laws and governance policies.

2. I stand in a fiduciary relationship with the College.

3. I am bound by and must comply with the by-laws and policies that apply to Council, including <u>the</u> <u>College's Code of Conduct and other established governance policies</u>, <u>the Code of Conduct</u>, by-laws relating to conflict of interest, the confidentiality policy, and the applicable role statements.

4. I must act in the public interest when making decisions on behalf of the College.

5. I am aware of my confidentiality obligations under section 36 of the RHPA and understand that it is an offence to breach section 36, with a fine upon conviction of up to \$25,000 for the first offence.



# **Council Briefing Note**

| Topic:                       | Updating the CDO's terminology                      |
|------------------------------|---|
| Purpose:                     | Decision Required                                   |
| Strategic Plan<br>Relevance: | Governance Modernization and Enhancing Public Trust |
| From:                        | Governance Committee                                |

## ISSUE

To consider approving terminology changes that make the roles and responsibilities of those who govern the CDO clearer to the public and reflective of the CDO's regulatory relationship with dietitians.

## PUBLIC INTEREST RATIONALE

It is the responsibility of the CDO to build and strengthen the public's confidence in its ability to achieve its public protection mandate. To support this, changes to the terminology used by the CDO will better reflect the fundamental role of the positions and will support the public's understanding of the CDO.

## BACKGROUND

In recent years, regulatory colleges across Ontario have been analyzing trends and best practices with respect to governance within the professional regulation sector.

The Ontario Ministry of Health has maintained an interest in strengthening the accountability of health regulatory colleges through reporting tools such as the College Performance Measurement Framework and has confirmed its support for a modern and effective governance framework.

At its June 2022 meeting, Council approved a governance modernization framework that reflects best practices in regulatory governance. This governance structure is designed to further the CDO's public protection mandate while strengthening public trust.

The Governance Committee considered the proposed changes to the CDO's terminology and at its August meeting. The proposed changes were approved by the Committee for recommendation to Council.

## CONSIDERATIONS

Included in the governance modernization framework is the recommendation that the CDO change the terminology to more commonly used language that would better reflect the fundamental role of the positions and acknowledge the responsibility of the CDO to those it regulates and protects. The proposed terms for CDO positions are listed below:

| Current Terminology       | Proposed Terminology                 |
|---------------------------|--------------------------------------|
| Council of the College    | Board of Directors of the College    |
| Council member(s)         | Director(s)                          |
| President of Council      | Chair of the Board of Directors      |
| Vice-President of Council | Vice-Chair of the Board of Directors |
| Member                    | Registrant                           |

Although the current terminology will still exist in the Regulated Health Professions Act (RHPA), the CDO can adopt these terminology changes via the by-laws as other RHPA Colleges have done.

The proposed terminology changes do not require public consultation and can therefore take effect immediately; however, staff will require a transitionary period to update existing documents.

## RECOMMENDATION

That Council approve the proposed changes to the CDO's terminology, as described above.

Council attachment 11.2



# **Council Briefing Note**

| Topic:                       | Proposed Change to Electoral Districts              |
|------------------------------|---|
| Purpose:                     | Decision Required                                   |
| Strategic Plan<br>Relevance: | Governance Modernization and Enhancing Public Trust |
| From:                        | Governance Committee                                |

## ISSUE

To consider restructuring the electoral districts to create a single district that encompasses all of Ontario and approve in principle pending future by-law revisions.

## **PUBLIC INTEREST RATIONALE**

Reflecting the emerging best practices in health regulatory governance demonstrates the CDO's ongoing commitment to the public and its ability to adapt to a rapidly changing landscape. Governance best practice supports the use of competency-based tools to aid in the selection of Council members, rather than electing Council members based solely on geographical districts. Changing the current electoral district structure will reinforce the CDO's commitment to good governance practices that support its public protection mandate.

## BACKGROUND

The Regulated Health Professions Act sets out that a College's professional members are elected to sit on Councils. However, in recent years, there is an increasing understanding among regulators around the challenges with this model. These challenges include: a lack of diversity in Council composition, the inability for Council to select members based on typical board competencies and attributes, and the perception that being elected by one's peers constitutes representation to a constituency of professional members rather than to the public. Several Ontario regulators who are engaged in governance reform are incorporating changes to the election process.

At its August meeting, the Governance Committee considered options for updating the electoral districts to support the anticipated reforms to the CDO's governance structure.

The Governance Committee considered three options for updating the electoral districts:

- Option 1: Adoption of a single electoral district that encompasses all of Ontario
- Option 2: Adoption of two electoral districts Toronto/GTA and outside Toronto/GTA
- Option 3: Moving from seven to six electoral districts

The Governance Committee recommends that Council adopt Option 1 – a single electoral district that encompasses all of Ontario.

# CONSIDERATIONS

Currently, the College has seven geography-based districts for the purpose of electing members to Council. Dietitians are eligible to run and vote in the electoral district of their primary employer or primary residential address if they are not presently working.

The legislation does not require multiple electoral, geographical districts – a single district encompassing all of Ontario meets the legislative requirement. At this time, changes to the CDO's current governance structure will be limited to what can reasonably be achieved through by-law amendments. For this reason, the CDO still requires an election process for the selection Council members. As noted, selecting Council members based on the electoral districts may create the perception that professional members of Council represent the profession, rather than the public interest. Eliminating multiple, geography-based districts from the elections process will reinforce the public-serving role of Council members.

Other challenges with the districts include: member voter apathy/low engagement in elections and periodic lack of interest in a district leading to a by-election. The adoption of a single electoral district that encompasses all of Ontario will allow for the largest pool of potential candidates for each election cycle.

Should legislation be enacted which eliminates Council elections as the Ministry of Health has recently proposed, this option would likely best prepare the CDO for that scenario. This option will also enable the CDO to gradually reduce the size of its Council.

With this option, it would not be possible to ensure geographical diversity in an elections-based system, and there may be disproportionate number of Council members from Toronto and the GTA. However, should elections be eliminated, geographical diversity could be taken into account in Council member selection/appointment by the College. In the meantime, this may also be mitigated by ensuring geographical diversity in Committee appointments.

Council is also being asked to consider a recommendation to approve a draft competency and attribute framework. The decision on the competency and attribute framework will play into the discussion of this matter and may impact the outcome. If Council decides to proceed with the adoption of a competency and attribute framework, the number and structure of the electoral districts will impact the effectiveness of the proposed framework. The more electoral September 30, 2022 Meeting

districts, the smaller the candidate pool. If the CDO continues with multiple electoral districts, there is a risk that none of the candidates will meet the desired competency and attribute profile. Maximizing the number of eligible individuals to participate in the CDO's election process increases the likelihood that at least one of the candidates will meet the desired competency and attribute profile if approved.

Given the strong interconnectedness of College governance systems and processes, updates to the CDO's governance structure demands careful consideration and decision-making to ensure that the changes achieve the intended outcomes while avoiding unintended consequences. One governance decision impacts and sets the context for another.

For the proposed changes to be operationalized, by-law 1 will have to be amended. However, before the by-law is amended, it is recommended that Council discuss and determine the size of Council within the current legislation, to ensure that any modifications are transparent to stakeholders and are systematic in approach. For example, the *Dietetics Act* sets out that Council shall be composed of at least 6 and no more than 9 professional members and at least 5 and no more than 8 appointed public members. Through the existing by-law, Council has 8 professional members. There are currently 6 public appointed members.

Accordingly, the Governance Committee will be bringing additional recommendations to Council at a subsequent meeting. Certain amendments to CDO by-laws require circulation for public feedback prior to ratification by Council. To ensure that stakeholders have a clear picture of the direction of CDO's governance modernization, and to avoid repeated requests for public feedback, the intention is to have one consultation that would encompass all anticipated bylaw revisions. For this reason, Council will be provided with draft revisions to by-law 1 at a later meeting to approve in principle for public consultation.

# EQUITY IMPACT ASSESSMENT

The proposed change to the CDO's electoral districts is designed to support a competency and attribute framework that will bring a variety of backgrounds, insights, perspectives, and life experiences to the composition of Council. Equity, diversity, and inclusion is identified as a core competency, which requires Council nominees to understand the roots of inequality, value diversity, and prioritize inclusion to foster an atmosphere where all belong. The framework also seeks to identify the attributes that will contribute to diversity on Council, which will help guide the selection process of Council nominees. By incorporating these elements into the competency and attribute framework, the CDO acknowledges its commitment to EDI-B and the promotion of learning and inclusive experiences that fulfill its mandate of serving and protecting the public. Once operational, it is recommended that Council assess the process on a regular basis to ensure it is achieving the intended effect.

## RECOMMENDATION

That Council approve in principle, the Governance Committee's recommendation to adopt a single electoral district that encompasses all of Ontario.

This approval will provide additional context for the Governance Committee to make further recommendations about the elections process.

Council attachment 11.3



# **Council Briefing Note**

| Topic:                       | Council Competency and Attribute Framework  |
|------------------------------|---|
| Purpose:                     | Decision Required   |
| Strategic Plan<br>Relevance: | Regulatory Effectiveness and Performance Measurement<br>Governance Modernization and Enhancing Public Trust |
| From:                        | Governance Committee  |

## ISSUE

To consider a draft competency and attribute framework and how it might be incorporated in the election process going forward.

## PUBLIC INTEREST RATIONALE

Good governance is the foundation for effective regulation and public trust. Emerging best practices in regulation support the adoption of a framework which outlines the knowledge, skills, experience, and attributes required for Council to effectively serve its mandate. With this framework, Council members will collectively possess a range of governance competencies and attributes to make evidence-informed decisions in the public interest.

## BACKGROUND

With the adoption of the CDO's Strategic Plan 2020-2024, the College is committed to updating its governance structure based on modern, risk- and evidence-based practices. To support the CDO in its governance modernization work, Don McCreesh, a 3<sup>rd</sup> party governance expert, was retained to facilitate the CDO's governance review and develop a set of recommendations to establish a best practice model of governance. The recommendations align with the Ministry of Health's (MOH) recent proposal on governance reform and regulatory modernization. The development and adoption of a competency-based selection process for Council and committees was included in D. McCreesh's and the MOH's recommendations.

At its June 2022 meeting, Council approved the recommendations and timeline for change as brought forward by the governance committee.

At its August meeting, the Governance Committee approved the draft Council competency and attribute framework for consideration by Council, along with its proposed application (see *Appendix 1*). The Committee also recommends that Council expand the Governance Committee's Terms of Reference to allow it to assist in assessing Council candidates for eligibility to run for election.

# CONSIDERATIONS

# Competency Framework

Many regulators across Ontario, Canada, and in other jurisdictions have started to introduce comprehensive competency and attribute frameworks to determine the composition of their Councils and committees. An environmental scan was conducted to inform the proposed approach for the Governance Committee to consider, including: Professional Standards Authority in the UK, Ontario College of Pharmacists, College of Teachers, College of Physicians and Surgeons of Ontario, College of Nurses of Ontario, and the British Columbia College of Nurses & Midwives.

A draft Council competency and attribute framework is attached for consideration (Appendix 1).

The framework includes a set of competencies and attributes. Competencies are categorized as core, preferred, and specific. Attributes are categorized as core and general. The following is a high-level description of these terms:

- Competencies: things that you bring
  - Knowledge: things that you understand (theoretical or practical)
  - Skills: things that you can do
  - Experience: things that you have done
- Attributes: things that you are
- Core: all Council members must have
- Preferred: ideally all Council members have, but not a requirement
- Specific and general: a select number of Council members should have

The framework provides a basis for future Council appointments that ensure a diverse mix of individuals with complementary competencies and attributes. Not all Council members are expected to have competencies and attributes in every area. Council competencies and attributes will be continually assessed to identify potential gaps, which will support a tailored approach to the recruitment of new members.

# Application of the Framework

The framework supports a future state where Council elections are removed from the legislation and College Councils select and appoint members to serve as directors. In addition to September 30, 2022 Meeting 2

ensuring Council has the appropriate competency and attribute mix to fulfill the regulatory mandate, a defined competency and attribute framework will enable the College to:

- Communicate to potential applicants, members of the College, and the public what is needed for successful participation as a Council member
- Identify strengths and potential gaps within the Council composition
- Ensure that appropriate training and professional development is provided to support regulatory and governance excellence
- Support a transparent and independent selection process

In the absence of legislative change to eliminate Council elections, the eligibility criteria outlined in the current by-law 1 can be expanded to include the requirement that candidates meet the core competencies in order to stand for election. This will involve the development of a transparent assessment process, which may include typical human resource tools like self-assessment on a scale of proficiency, interviews, etc. The Governance Committee recommends that this be an eligibility criterion for both new and returning Council members.

To support this work, the Governance Committee is recommending that its terms of reference is expanded to include the role of an independent screening committee, which will assess Council candidates. The Committee will screen applications, may conduct interviews, and determine which candidates meet the competency/attribute profile. Individuals who meet the eligibility and competency/attribute criteria will be an approved Council nominee.

To operationalize the Council competency and attribute framework, by-law 1 will have to be amended and must be circulated for public consultation, along with other governance changes that must still be considered.

Pending a by-law update, the competencies can begin to be incorporated in election and other council processes. For example, in the 2023 election, the Framework could be shared as suggested competencies for potential candidates, although candidates wouldn't be formally assessed. The competencies can also be reinforced in the pre-election training session currently in development. Council may also decide to incorporate into self-assessment evaluations and utilize them as a basis for consideration of future training needs.

# EQUITY IMPACT ASSESSMENT

The proposed competency and attribute framework is designed to bring a variety of backgrounds, insights, perspectives, and life experiences to the composition of Council. Equity, diversity, and inclusion is identified as a core competency, which requires Council nominees to understand the roots of inequality, value diversity, and prioritize inclusion and contribute to an atmosphere where all belong. The framework also seeks to identify the attributes that will contribute to diversity on Council, which will help guide the selection process of Council nominees. By incorporating these elements into the competency and attribute framework, the

CDO acknowledges its commitment to EDI-B and the promotion of learning and inclusive experiences that fulfill its mandate of serving and protecting the public.

# RECOMMENDATION

- 1. That Council approve the competency and attribute framework, and that these be incorporated into College governance processes and in Council elections. A by-law will be presented to Council for approval to circulate at an upcoming meeting.
- 2. That Council approve adding the role of the independent assessment committee to the terms of reference for the Governance Committee. The revised terms of reference will be presented to Council for approval at an upcoming meeting.

# ATTACHMENTS

• Appendix 1: Draft Competency and Attribute Framework

## **Draft Competency and Attribute Framework**

**Competencies:** things that you bring

- **Knowledge:** things that you understand (theoretical or practical)
- Skills: things that you can do
- **Experience:** things that you have done
- Attributes: things that you are
- **Core:** all Council members must have
- Preferred: ideally all Council members have, but not a requirement, can be learned
- Specific and general: a select number of Council members should have

### Competencies

| Core Competencies                              |  |
|--|--|
| Technology                                     | Familiar with and comfortable using technology for College work. Able to work effectively in a remote/hybrid environment.  |
| Public Interest/Public Service                 | Experience protecting and acting in the public interest. Understanding and passion for the CDO's mandate.  |
| Evidence-Based Decision-Making                 | Able to find, critically assess, interpret, synthesize, and evaluate information.<br>Able to practice independent and objective decision-making in a timely manner.  |
| Strategic                                      | Able to think strategically and further the mandate of the CDO by adapting to changing situations, responding to issues, planning, and evaluating progress.<br>Understands the difference between strategic and operational decisions.   |
| Critical Thinking/Problem Solving              | Able to evaluate complex issues to reach solutions and considers whether there is a better, or more efficient option.  |
| Equity, Diversity, Inclusion, and<br>Belonging | <ul> <li>Awareness of structures of power and how they contribute to inequality.</li> <li>Understanding of unconscious bias, microaggressions, and cross-cultural communications.</li> <li>Value diversity and prioritize creating equitable and inclusive environments and contributes to an atmosphere of belonging.</li> <li>Able to apply EDI-B knowledge to deliberations and decision-making.</li> </ul> |

| Preferred Competencies             |  |
|------------------------------------|--|
| Leadership                         | The skill and ability to lead others to solve problems, adapt and manage change, innovate,       |
|                                    | and achieve results.   |
| Risk Management/Oversight          | Able to take a proactive, continuous, and systemic approach to identifying, understanding,       |
|                                    | and communicating risks from an integrated oversight perspective.                                |
| Board/Governance/Fiduciary         | Experience providing stewardship of an organization by ensuring its financial and                |
|                                    | organizational well-being and that it achieves its mandate and strategic goals.                  |
|                                    | Understanding of the distinction between the role of the board and the role of management/staff. |
|                                    | Knowledgeable about the principles of good governance and the roles and responsibilities of      |
|                                    | board members.   |
| Health Systems                     | Understanding of how health care is delivered in Ontario.  |
|                                    | Experience working directly with or for the Ministry of Health and/or health agencies, such      |
|                                    | as Ontario Health.   |
|                                    | Specific Competencies  |
| Financial/Accounting               | Knowledge and experience in auditing, accounting, or financial management.                       |
|                                    | A strong understanding of investments, generally accepted accounting principles (GAAP) and       |
|                                    | financial statements.  |
|                                    | May have accounting credentials (e.g. CPA).  |
| Legal Expertise                    | Formal legal training and experience (e.g. paralegal, LLB, LLM)                                  |
| Rural practice experience          | Experience working with clients in rural or remote areas. Knowledgeable about unique             |
|                                    | needs and challenges of the demographic.   |
| Cross-Cultural Practice Experience | Experience working with diverse teams and marginalized or vulnerable groups.                     |
| French Fluency                     | Able to fully participate in College work in French.   |
| Change Management                  | Experience providing leadership and support for strategic organizational change.                 |
|                                    | Able to identify opportunities for change and innovation.  |

# Attributes

| Core                                 |   |
|--------------------------------------|---|
| Collaborative                        | Prepared to listen to and work towards consensus in partnership with others. Understanding the importance of building strong working relationships within the Council and staff, members, and systems partners.   |
| Committed                            | Available to perform the College's work and play an active role on Council. Includes providing timely responses to CDO communications, and adequately preparing for and attending meetings for Council and committees.  |
| Self-Aware<br>Effective communicator | <ul> <li>Able to understand and manage emotions, especially when faced with conflict and confrontation.</li> <li>Have a clear understanding of personal strengths and areas for growth.</li> <li>Able to recognize biases and potential conflicts of interest and understand the consequences of each.</li> <li>Committed to continuous development and improvement to support governance and regulatory excellence.</li> <li>Open to reflection, feedback, and opportunities to learn, relearn, and unlearn.</li> <li>Able to convey information and express opinions clearly and succinctly in a way that is receptive and responsive to the audience.</li> </ul> |
|                                      | General   |
| Identifies as Female                 |   |
| Identifies as Male                   |   |
| Identifies as Non-Binary             |   |
| 2SLGBTQ+                             | For this application, 2SLGBTQ+ includes persons who identify as two-spirit, lesbian, gay, bisexual, transgender, queer or questioning, and additional sexual orientations and gender identities.  |
| Indigenous person                    | For this application, Indigenous person includes persons who identify as First Nations (Status, non-Status, Treaty), Métis, Inuit, Native or North American Indian.   |

| Racialized person        | For this application, racialized persons are people (other than Indigenous persons) who are non-white in colour and/or non-Caucasian in race, regardless of their place of birth or citizenship.   |
|--------------------------|--|
| Person with disabilities | For this application, persons with disabilities are people who have a chronic, long-term or recurring physical, sensory, mental, learning or intellectual impairment that, in interaction with a barrier, hinders that person's full and effective participation in society. |
| Internationally Educated | Completed post-secondary education outside of Canada.  |

### MANAGEMENT REPORT – September 30, 2022

### **SECTION 1 OVERSIGHT/METRICS**

### **FINANCIAL**

A Statement of Operations for the fiscal year 2023 for the period April 1, 2022 to June 30, 2022 (first quarter or Q1), is attached to this report (see Attachment 12.2). A review of the revenues and expenditures in the first quarter shows that revenues from members and applicants are in line with the Q1 budget and 4% higher than the prior year.

Investment income consists of a negative interest amount from the sale of bonds, which reflects a correction in the bond market in Q1. Market volatility also resulted in unrealized depreciation in the fair market value of investments (on unsold investments) and a realized gain on sale of investments. Since then, more Guaranteed Investment Certificates have been purchased to limit the College's exposure to risk. Dividend income was also earned during the period.

General Administration expenses are in line with the Q1 budget and all Program expenses are significantly lower than the Q1 budget due to timing, since many program activities will occur from July 2022 to March 2023.

A Capital Asset Purchases Report is also attached (see Attachment 12.3). This report shows that the project to upgrade the member database is proceeding as planned. Other projects and purchases will continue throughout the fiscal year.

## Investments held by RBC Dominion Securities inc. (details from May 1, 2022, to July 31, 2022):

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

In May 2022, the College used cash on hand and dividend income to purchase common shares of Northwest Healthcare Real Estate Investment Trust (REIT) for \$4,639 and common shares of Riocan REIT for \$2,356.

In June 2022, the College used cash on hand to purchase common shares of Northwest Healthcare REIT for \$4,237. Later in the month, it sold the balance of its investment in common shares of Northwest Healthcare REIT and Riocan REIT for total proceeds of \$486,690. These sales generated a capital loss of \$9,821. These funds were used to purchase a Royal Bank of Canada Guaranteed Income Certificate (G.I.C.) for \$488,363. The College also sold the balance of its investment in a Brookfield Asset Management bond and a Greater Toronto Airport Authority bond for total proceeds of \$768,818. These funds were used to purchase common shares of Loblaw Cos Ltd. for \$767,550.

In July 2022, the College used cash on hand to purchase preferred shares of Great West Lifeco for \$25,496. It also sold the balance of its investment in a TD Bank bond and a Royal Bank of Canada bond and a portion of its investment in a Bell Canada for total proceeds of \$478,891. These funds

were used to transfer \$475,000 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 \$3,984,827 on July 31, 2022.

Note that the College's Investment Policy states: "Investments in equities must be limited to 40% of the book fund value of the total portfolio". A review was conducted of the book values of the investments from May 2022 to July 2022; equities comprised 22% of the book fund value in May, 12% in June and 14% in July. Therefore, the College complied with the policy from May to July 2022.

# **HUMAN RESOURCES**

Based on recent changes to provincial public health guidelines, the College staff has resumed in-person work in July. Going forward, smaller groups will be in office for meetings, collaboration and ideation, and remote work will continue to be the primary way of working. The College has developed health and safety protocols to keep everyone safe.

Lisa Dalicandro has returned from parental leave to her position as Manager, Governance and Operations. We thank Sandra Brazel for her valuable contribution in the interim role.

Zoell Richards, Registration Administrative Assistant (Summer Student) contract ended on August 19, 2022. This role was subsidized by the Federal Government Canada Summer Jobs Program. Zoell made significant contributions to our administrative processes, freeing up staff time to engage in database upgrade testing.

After 16 years at the College, Sarah Ahmed, Director of Finance & Corporate Services, will be retiring effective September 30, 2022. Sarah has made tremendous contributions to the College over the years. Her expertise and good humor will be missed. Recruitment for this role is in progress.

# EQUITY, DIVERSITY, INCLUSION AND BELONGING

The Equity, Diversity, Inclusion and Belonging Working Group (EDI-B WG) met on June 13, July 19, and August 23, 2022. Over the last quarter, activities included:

- Discussing, developing, and finalizing CDO's EDI-B Mission and Vision Statement for recommendation to the Governance Committee and Council at the September meeting.
- Dr. Javeed Sukhera attended the August meeting and provided some guidance to the group on operationalizing the EDI-B workplan.
- College benchmarking to the <u>Global Diversity, Equity and Inclusion Benchmarks</u> is underway.

# Staff Needs Assessment Survey

As part of CDO's work on advancing Equity, Diversity, Inclusion and Belong (EDI-B), an educational needs assessment was developed by Dr. Javeed Sukhera and circulated to staff to assess current EDI-B competencies. Staff identified trauma informed approaches as their top area of interest, followed by decolonization, allyship, bias recognition/management, and microaggressions. The results will be used to plan and prioritize training for staff.

In the last quarter, 11 employees completed various types of EDI-B training based on their roles and own self-identified learning goals:

- Legal and Ethical Admissions that Promote Diversity
- Deconstructing Muslim Hate and Islamophobia in the Workplace
- Allyship and Speak up Culture
- Dismantling Structures to Support Diversity, Equity and Inclusion
- Rebuilding Ontario's healthcare Workforce: Integrating Internally Educated Professionals
- It's okay to 'Say Gay' in the Workplace: Workplace Issues for the 2SLGBTQIA Community
- Moving Towards Building a Reconciliation Action Plan: Indigenous Inclusion with Employers
- EDI Learning Exchange Webinar
- Diversity Dialogue: From Hatred to Healing
- Tokenization, Representation, and Inclusion
- Contemporary & Aversive Racism: Impact on Organizational Life & Clinical Care
- What is best? Reflecting on Context and Contingency in 'best' Practice
- Culture, Equity & Justice in Occupational Therapy Practice
- Effective Investigation Processes: A Matter of Communication
- Showing up for Racial Justice
- Indigenous Canada
- Racism at the Front Line
- Beyond Positive Intentions: Providing Equitable Services for LGBTQ+ Newcomers
- Addressing Cultural Competency and Cultural Safety in Nutrition Practice
- From Bias to Belonging: Moving Beyond Buzzwords to Advance Equity
- Health Equity Impact Assessment

# **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 CDO programs and initiatives during fiscal Q2, in addition to leading the following initiatives:

# **BEST PRACTICES**

## CDO embarks on relational communications journey

As one of Communications fiscal year workplan objectives, the College contracted with Arrow Brand and Communications, which specializes in relational communications, which is the concept of achieving organizational goals through a focus on relationships and values such as inclusion, transparency, and clarity through communications. The project comprises three parts:

- 1. A survey of members that seeks feedback on the College's communications.
- 2. An audit of the College's communications to set a baseline relational score and set strategic goals to improve its relationship with major stakeholders, particularly its registrants.
- 3. An all-staff workshop on relational communications (conducted on September 7, 2022).

The audit and survey will be finalized in October 2022. The results will support the College in adapting and improving its communications to current best practices at many regulatory colleges. This will be an ongoing journey in achieving the underlying objectives of Goal Two.

# Communications begins French language gaps analysis

As the provincial government places more emphasis on the delivery of French language services by regulatory colleges, Communications has begun an analysis of the current gaps that exist between its default English language content and French language content. This analysis comprises website content, governance documents, registration and professional practice policies, and more. Once the report is finalized, Communications will triage French language translations with the goal of considerably closing language gaps that currently exist in the College's communications materials.

# PUBLIC AWARENESS CAMPAIGN

# 2022-23 campaign launches October 1 with new creative

Communications worked with marketing vendor Fifth Story throughout Q1 and Q2 to optimize the public awareness campaign for a new launch date on October 1, 2022. The recent CDO Benchmarking Survey revealed valuable target audience information that was used to focus on the upcoming campaign:

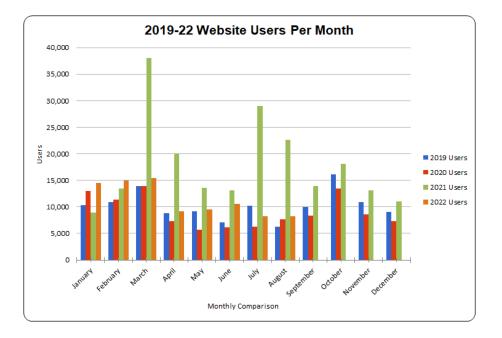
- 1. CDO's primary audience of people over 55 expects to receive information about dietitians from medical practitioners;
- 2. Younger Ontarians are more likely to expect information through social media or a legislated regulator;
- 3. Target audiences identify as female.

Given the findings, the content marketing will target CDO's primary audience through advertising on the digital screens in the offices of medical practitioners across the province. The campaign will feature edited versions (in English and French) of CDO branded videos currently on YouTube. These videos will run in clinic waiting rooms on the screens provided by the Canadian Health Medical Network (CMHN).

# Q1 website metrics demonstrate importance of digital advertising support

After record calendar and fiscal years, website traffic for the first quarter of 2021-22 decreased across all metrics, as the 2021-22 campaign concluded. Metrics from the first quarter demonstrate the necessity of the public awareness campaign in driving website traffic and greater public awareness of the College's public protection mandate.

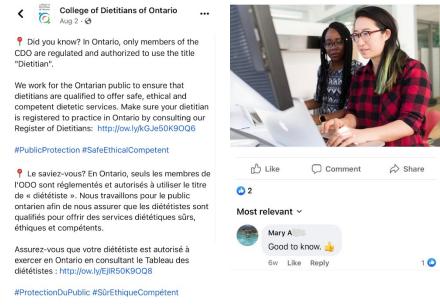
First quarter website users decreased 37% from 2021 (46,689) to 2022 (29,196). First quarter pageviews of the Protecting the Public webpage decreased 88% from 2021 (28,866) to 2022 (3,245) and pageviews of the Public Register decreased 9.7% from 2021 Q1 (55,342) to 2021 Q1 (49,968).



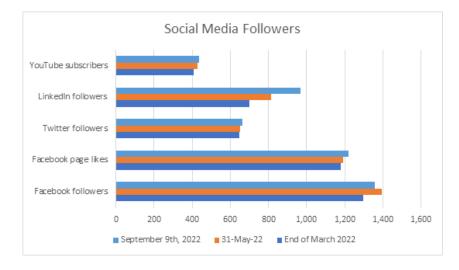
#### **SOCIAL MEDIA**

#### Current social media strategy performing well

Communications is continuing to post consistently in both English and French and increase our online presence and following. The College now posts regular reminders about our Public Protection mandate in addition to initiatives such as Reg Talks, webinars, renewal season, days of recognition, and more.



LinkedIn is our fastest growing platform. We are currently at 967 followers, marking 28% growth since March 2022, the end of the last fiscal. Overall, we are on track to surpass our annual goal for social media followers and launch the College's first-ever page on Instagram.



# **PROFESSIONAL PRACTICE PROGRAM – PRACTICE ADVISORY**

# PRACTICE ADVISORY SERVICE (PAS)

- 204 inquiries were received in Q1 (April-June 2022)
- Q2 (July-September 2022) was not reported due to an incomplete quarter
- Top areas of inquiry for Q1:
  - College Requirements & Processes
  - Scope of Practice
  - Find an RD
  - Ethical Issues
  - Record-Keeping/Authority Mechanisms
  - Pandemic issues (masking requirements and in-person care)

## Q1 PAS Satisfaction Survey

The Q1 PAS feedback survey was disseminated to 104 dietitians in July 2022. Feedback from respondents (n=9, 9%) shows:

- 78% felt the information received was relevant and valuable to their dietetic practice
- 78% felt their issue/question was sufficiently addressed.
- 78% were satisfied or very satisfied with the response they received from the PAS.
- 44% reported making changes to their dietetic practice (44% reported not applicable), and 78% said that the PAS confirmed their understanding of the laws, standards, and ethics.
- Since using the PAS, 56% have accessed the CDO (College of Dietitians of Ontario) website as a resource.
- 89% would use the PAS again, and 78% would recommend the Service to their colleagues.

#### Sample Comments from PAS Survey Respondents

- *Professional response and provided the appropriate information to guide me.*
- Prompt response to my question, arranged a call to discuss the issue and provided information to resolve my concerns verbally, which was nice rather than via email.

#### Q2 PPP PRESENTATIONS DEVELOPMENT AND FACILITATION:

- Regulatory Talks Member Education (Reg Talks) Webinars: <u>SMART Learning Goals</u>
  - Two one-hour regulatory Reg Talks webinars in July and August 2022.
  - Writing SMART goals and the Self-Directed Learning (SDL) Tool were discussed.
  - 166 dietitians and students participated
  - Recording and slides available <u>here</u>.
- Regulatory Talks Member Education (Reg Talks) Webinars: <u>Practising Dietetics: What counts</u> <u>as a practice currency hour?</u>
  - Council approved the <u>policy</u> on determining practice hours in June 2022.
  - The policy provides an updated <u>definition of practising dietetics</u> and categories to assist members regarding dietetic practice hours/currency requirements.
  - CDO webpage has been updated to assist dietitians in applying the policy and definition.
  - Reg Talk Webinar promotions available for sessions in September and October.
  - Thanks to all participants who responded to the member consultation.

#### • CDO 2022 Annual Workshop

- The CDO annual workshops will be facilitated using Zoom in six 2-hour sessions and is titled: Exploring the Complexities of Consent
- Participants will critically examine consent approaches in enabling informed decisionmaking in dietetic practice.
- Participants will identify opportunities to advance equity, diversity, inclusion and belonging by reflecting on practice experiences and scenarios facilitated by staff.

#### **COLLABORATIONS:**

- Collaborative Anti-Racism and Equity Workshops
  - The College is collaborating with the College of Physiotherapists of Ontario and other health regulatory colleges on <u>Anti-Racism and Equity Workshops</u>
  - This two-part series (Sept 15 and 29), facilitated by <u>Future Ancestors</u>, will help participants reflect, identify inherent beliefs and biases that underpin decisions, and implement social change strategies for safe, competent, and ethical dietetic services.
  - We encourage everyone to <u>register for both parts</u>.
- CDO is an active member of the Citizen Advisory Group
  - CDO launched a survey in partnership with CAG to solicit public feedback on Insulin Adjustments explanatory document, "For Clients Living with Diabetes: What to Expect when seeing a Dietitian for Insulin Dose Adjustments," to accompany the <u>Insulin</u> <u>Adjustments Position Statement and Practice Guideline</u>.

#### MONITORING AND NEWS UPDATES:

- **COVID –19** Ministry updates and provided content updates for the COVID-19 Updates page
- Infant Formula Shortage:
  - The College <u>has notified</u> dietitians of a Health Canada update regarding the shortage of infant formula for babies with food allergies.
  - The PPP continues to participate in Health Canada System Partner calls and will continue to monitor and provide updates to dietitians as needed.
- Monkeypox Virus:
  - PPP continues to monitor this emergent public health issue.
  - <u>Updates on monkeypox</u> were provided to dietitians.

#### Other Committees and Working Groups PPP participated in:

- Cross-Canada Dietetic Practice Advisor Group
- Clinical Nutrition Leaders Action Group of Ontario (CNLAG
- Interprofessional Practice Advisors Group
- COVID-19 Rehab Group
- Quality Assurance Working Group (Director of Professional Practice is co-chair)

## **COMMITTEE SUPPORT: PROFESSIONAL PRACTICE COMMITTEE (PPC)**

CDO's Professional Practice Program reviews standards, policies and practice procedures considering legislative changes, trends in inquiries, complaints/reports, and consultation with partner groups. Policy work includes:

## • Insulin Adjustments Position Statement:

- The draft 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 Insulin Adjustments Position Statement and Practice Guideline.
- Public consultation via survey with the <u>Citizen Advisory Group</u> (CAG) has been completed. Feedback is currently being analyzed, and the final draft is forthcoming.
- Definition of Practising Dietetics and Policy on Determining Practice Hours:
  - This policy provides an updated <u>definition of practising dietetics</u> and categories to assist members in completing their annual renewal declaration regarding dietetic practice hours/currency requirements.
- Draft Social Media Standard and Guidelines:
  - Legal review and two focus groups consultation (n=19 RDs) has been completed.
  - A report is in progress and pending participant validation. Updates will be presented to the Professional Practice Committee (PPC) at the next meeting TBD.
- Draft Virtual Care Standards and Guidelines for Dietitians in Ontario:

- The PPC provided preliminary feedback on the draft copy of the *Draft Virtual Care Standards and Guidelines for Dietitians in Ontario*.
  - Revisions will be applied followed by legal review.
  - Updates will be presented at the next PPC meeting TBD.

#### **PROFESSIONAL PRACTICE PROGRAM - QUALITY ASSURANCE**

The QA component is designed to support dietitians' professional development and continuous improvements in a manner aligned with right touch regulation.

## 2021 Self-Directed Learning (SDL) Tool

- Forty-Three members attended the mandatory webinars:" Writing Professional Learning Goals" in June conducted by Director of Professional Practice Program.
- Three (3) members did not attend and were offered to participate in the Reg Talks Webinar: "Writing SMART Learning Goals for Professional Development" in August.
- One (1) member resigned during the process.

| 2021 SDL Tool Data Sum      | imary |
|-----------------------------|-------|
| Resubmissions Reviewed      | 157   |
| Resubmissions Acceptable    | 110   |
| Required to attend the      | 47    |
| Mandatory Webinar           |       |
| Did not attend but attended | 3     |
| the Reg Talks               |       |
| Resigned during the process | 1     |
| Attended the Mandatory      | 43    |
| Webinar                     |       |

#### 2022 Self-Directed Learning (SDL) Tool

- The College's SDL tool aligns with the annual renewal process. Members complete their online SDL tool between September 1– October 31, 2022.
- A new template for writing SMART learning goals was implemented to assist dietitians in formulating their annual goals.
- Upgrading the competency-based self-assessment process with New ICDEP v. 3.0 to support reflection in the development learning goals and learning outcomes has been completed.

## Jurisprudence Knowledge & Assessment Tool (JKAT)

• The 2022 JKAT was closed on August 15, 2022. 99.8% of the RDs required to complete the JKAT this year did so successfully. There was one instance of non-compliance which will be referred to the Quality Assurance Committee for further consideration.

| 2022 JKAT Data Summary                            |     |
|---|-----|
| Total Eligible Members plus one KCAT<br>Applicant | 855 |
| Deferrals   | 27  |
| Exempt (Out of<br>Province*/Retired/Resigned      | 19  |
| Total Participants                                | 809 |
| Passed  | 808 |
| Failed  | 0   |
| Non-Compliant                                     | 1   |

\*9 - Practicing outside Ontario with no clients in Ontario

## Practising fewer than 500 hours in 3 years

- 23 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.
  - 18 learning diaries were deemed sufficient.
  - 5 learning diaries were insufficient:
    - 2 signed VUTs
    - 1 appealed QAC decision for a reassessment
    - 1 members chose to undergo a competency assessment (completed Aug 15, 2022).
    - 1 intends to resign
- The Learning Diary template and scoring card were updated to reflect the New ICDEP v. 3.0

## Peer and Practice Assessment

- The Peer and Practice Assessments (PPA) 2022 was postponed
- Postponement presents minimal risk to the public.

- PPA postponement allows dietitians to focus on the necessary dietetic and redeployed health services required to alleviate the effects of COVID-19 pandemic on the healthcare system 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 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.
- Consultation is administered by Rigor, a research company that specializes in QA consulting. Interviews and survey data collection will be completed by September 23, 2022.

## STANDARDS AND COMPLIANCE PROGRAM

# Inquiries, Complaints and Reports Committee (ICRC) Quarterly Stats from June 1, 2022 to August 31, 2022

#### 5 new matters received by the College of Dietitians of Ontario

- 2 Complaints
- 2 Reports
- 0 Referrals from the Quality Assurance Committee
- 1 Inquiry

## 3 matters closed at the preliminary review stage

• The Registrar did not refer 3 reports to the ICRC after making preliminary inquiries.

## 19 matters closed by the Inquiries, Complaints and Reports Committee

- 2 Complaints: 1 no further action, 1 written reminder
- 1 Report: 1 specified continuing education and remediation program (SCERP)
- 16 Referrals from the Quality Assurance Committee: 8 closed with no formal investigation; 3 no further actions; 4 written reminders; 1 member referred to another panel for incapacity proceedings
- Outcomes grouped by risk: 12 No or Minimal Risk; 5 Low Risk; 2 Moderate Risk; 0 High Risk
  - Average time for disposal: 176.7 days for all matters; 219.5 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.

#### 14 matters currently open

3 Complaints:

- 1 complaint still in the initial exchange of correspondence
- 1 investigation ongoing after investigator appointed
- 1 decision reached in principle awaiting finalization

10 Reports:

- 2 reports still at the preliminary stage
- 6 ongoing investigations after investigators appointed

- 2 investigations completed and returning to panel shortly
- 0 Referrals from the Quality Assurance Committee
- 1 Inquiry: initial stage
  - Average time matters have been open: 112.7 days for all matters; 115 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.

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

• 2 case conferences completed and reviews are scheduled for December 2022

#### **REGISTRATION PROGRAM**

#### **Annual Renewal**

The 2022 Annual Renewal notices were sent out to 4426 eligible General Members and 22 health professional corporations on August 30, 2022. The renewal deadline is October 31, 2022.

#### **Canadian Dietetic Registration Examination (CDRE)**

- 126 candidates in Ontario wrote the May 19<sup>th</sup> and 20<sup>th</sup>, 2022 CDRE via an online remoteproctored process.
- Results were disseminated to candidates on June 27, 2022:
  - 119 passed = a 94% pass rate.
  - The May 2022 national pass rate was 93%, which reflects a pass rate typically seen on the CDRE, except for the dip in 2021 attributed to the pandemic.
  - 7 failed:
    - 5 on their first attempt supervision required to continue practising dietetics.
    - 2 on their second attempt Temporary Certificates of Registration expire; upgrading is required prior to attempting the CDRE for a third and final time.
  - No appeals were received.

#### Prior Learning Assessment and Recognition (PLAR) Process

Knowledge and Competence Assessment Tool (KCAT):

- The next scheduled annual administration of the KCAT is February 22, 2023.
- As part of the College's project to incorporate the 2020 Integrated Competencies for Dietetic Education and Practice into its processes:
  - The KCAT Item Writing session to develop new question content based on the 2020 ICDEP was held on June 14-17, 2022. The session included nine subject matter experts and was facilitated by the Touchstone Institute.

 Question content is currently being refined by Touchstone and the College's KCAT Lead Exam Reviewer and will be completed in the fall of 2022 for final incorporation into the 2024 KCAT administration, as planned.

# Performance Based Assessment (PBA):

Following extensive planning and lessons learned from the December 8, 2021 PBA, we are pleased to report that the 2022 PBA was successfully administered, with no reported technical issues, on July 27, 2022 via a hybrid process:

- 10 candidates wrote from home (or other private location) via an online remote proctored process.
- 4 candidates chose to write in-person at the CDO office. A quiet space, laptop computer, and on-site technical support were provided. Otherwise, as per exam best practices, a similar process for both the in-person and home-based PBA was administered.

# Office of the Fairness Commissioner (OFC)

- On August 31, 2022, the College responded to the OFC's consultation on their draft release of the *Legislated Obligations and Fair Registration Best Practices Guide for Health Regulatory Colleges* (refer to information in your Council meeting materials).
- Regulators were notified that the revised annual Fair Registration Practices (FRP) report template for 2021 will be provided in the latter half of September 2022, with a deadline of December 14, 2022.
- The OFC anticipates that the 2022 FRP template will be distributed in winter 2023, the deadline date for submission is still to be determined.

## Wall Certificates

Following a two-year pause of printing and mailing wall certificates of registration during the pandemic, over 450 wall certificates were mailed to General members. Moving forward, an efficient process has been implemented to ensure wall certificates are mailed to members in a timely manner.

## **Registration Committee Panel Meetings**

- June 28, 2022 2 application files were reviewed by a panel of the Registration Committee: 1 refused, 1 admitted.
- August 5, 2022 3 application files were reviewed by a panel of the Registration Committee: 1 refused, 1 admitted, 1 deferred for review by the Registration Committee Consultants.
- September 9, 2022 3 application files were reviewed by a panel of the Registration Committee: 3 refused.

## **INFORMATION TECHNOLOGY**

IT projects are on schedule and remain within budget. Ahead of the annual renewal period, an upgrade was made to the online payment backend to ensure smooth processing of member payments. In light of this upgrade, updates to CDO's PCI Compliance assessment are in progress,

which ensure and demonstrate that CDO meets security standards that keep credit card data transmitted through card processing transactions secure.

Staff received in-house training on Microsoft OneNote and iMIS. A needs assessment/gaps analysis with respect to cybersecurity awareness was conducted and training will be customized to the results.

# Audit of the Register

The Audit of the Register for the 2021 – 2022 fiscal period was conducted by the Manager of Governance and Operations. The findings of the Audit, included as Attachment 3, demonstrate that the CDO's public register is well maintained and the information about members is accurate. Next year, the process for auditing the public register will be reexamined to ensure that critical risks are assessed in a way that is both efficient and practical.

# **SECTION 2 ISSUES TRACKING**

# Legislative

The College sent a letter of welcome to new Health Minister and Deputy Premier Sylvia Jones, providing an introduction to the CDO.

The College responded to the Ministry of Health's request for feedback on operationalizing proposed Bill 106 Registration Regulation amendments under the *Regulated Health Professions Act, 1991*, which were in line with Council's June 10 submission to the ministry. The legislation would require Colleges to: adopt language proficiency tests accepted by Immigration, Refugees and Citizenship Canada, comply with specific timelines for communicating and making decisions about registration applications, develop an emergency class of registration, and remove any Canadian experience requirements.

## **Regulatory Environmental Scanning**

In August, the Minister of Health sent directives to the CPSO and CNO to develop plans to register more internationally trained physicians and nurses to help alleviate current hospital and healthcare system shortages. Responses have been provided by the <u>CPSO</u> and <u>CNO</u>. Included among the recommendations are that legislative requirements set out in the RHPA, the *Health Professions Procedural Code* and profession specific legislation be modernized to allow regulators to adopt registration requirements in policy and bylaw which would enable Colleges to become more agile in responding to changes in the healthcare system and professional regulation.

# SECTION 3 OTHER INFORMATION ITEMS

- 12.1 Management Report
- 12.2 Attachment 1 Statement of Operations F2023 as at June 30, 2022
- 12.3 Attachment 2 Capital Asset Purchases Report F2023 as at June 30, 2022
- 12.4 Attachment 3 Audit of the Operations of the Register 2021-2022
- SML Grey Areas Article, "<u>Applied Governance</u>", September 2022: Summary of Cayton and Williams Report of the OCSWSSW.

#### COLLEGE OF DIETITIANS OF ONTARIO STATEMENT OF OPERATIONS as at June 30, 2022 FISCAL YEAR ENDED MARCH 31, 2023

Attachment 12.2

|  |           |              |                      |                | Comparative  |              |
|--|-----------|--------------|----------------------|----------------|--------------|--------------|
|  |           | Total Annual | Actual vs            | Total Annual   | 3 Month      | June 2022 vs |
| A                                      | ctuals    | Budget       | Budget %             | Budget         | Actuals      | June 2021 %  |
| Jun                                    | 30 2022   | Jun 30 2022  | Variance             | Mar 31, 2023   | June 30 2022 | Variance     |
| REVENUE                                |           |              |                      |                |              |              |
| Membership & Other Fees (1) \$         | 755,005   | \$ 738,      | 31 2%                | 6 \$ 2,954,924 | \$ 724,258   | 4%           |
| Interest & Dividends (2)               | (97,986)  | 46,          | 00 -311%             | 6 186,000      | 39,442       | -348%        |
| Realized Gain/(Loss) on Sale of        |           |              |                      |                |              |              |
| Investments (3)                        | 67,546    |              |                      | -              | 14,859       | -            |
| TOTAL REVENUE                          | 724,564   | 785,2        | 31 <mark>-8</mark> % | 3,140,924      | 778,559      | -7%          |
|  |           |              |                      |                |              |              |
| EXPENSES (Operating)                   |           |              |                      |                |              |              |
| General & Administrative (4)           | 611,382   | 636,         |                      | ,,             |              | -5%          |
| Registration Program (5)               | 21,217    | 49,9         |                      | ,              |              | -419%        |
| Quality Assurance Program (6)          | 6,633     | 38,          | 25 83%               | 6 154,901      | 6,052        | -10%         |
| Practice Advisory Program (7)          | 6,056     | 10,2         | 16 41%               | 6 40,864       | 5,786        |              |
| Patient Relations Program (8)          | -         | :            | 81 100%              | 6 1,125        | -            |              |
| Standards & Compliance Program (9)     | 52,805    | 65,9         | 56 20%               | 6 263,825      | 74,140       | 29%          |
| TOTAL EXPENSES BEFORE AMTZ'N           | 698,094   | 801,0        | 98 13%               | 3,206,787      | 673,711      | -4%          |
|  |           |              |                      |                |              |              |
| EXCESS REVENUE OVER EXPENSES           | 00 470    | (40          | <b>CO</b> )          | (05.004)       | 104.040      | 750/         |
| (EXPENSES OVER REVENUE)                | 26,470    | (16,4        | 08)                  | (65,864)       | ) 104,848    | -75%         |
|  |           |              |                      |                |              |              |
| Less: Non-cash expenses:               |           |              |                      |                |              |              |
| Capital Asset Fund - Amortization (10) | (17,036)  | (17,         | 00) 3%               | 6 (70,000)     | (19,071)     |              |
| Unrealized FV appreciation             |           |              | -                    |                |              |              |
| (depreciation) of Investments (3)      | (376,884) |              |                      |                | 154,106      |              |
|  |           |              |                      |                |              |              |
| SURPLUS/(DEFICIT)                      | (367,450) | (33,9        | 68) 982%             | 6 (135,864)    | 239,882      |              |
|  | 2 000 700 | 0.040        | <b>F</b> 4           | 2 000 700      | 2 700 070    |              |
| FUND BALANCES - beginning of year      | 3,896,732 | 2,846,4      | 54                   | 3,896,732      | 3,728,079    |              |
| FUND BALANCES - March 31, 2023         | 3,529,282 | \$ 2,812,4   | 86                   | \$ 3,760,868   | \$ 3,967,961 |              |

#### NOTES and HIGHLIGHTS:

#### REVENUE (actual revenues were 8% less than the first quarter (Q1) budget)

- (1) Revenues from members in all categories have generated \$755,005 in Q1. This amount is in line with the budget and 4% higher than the prior year. Membership fees are being reported on an accrual basis to recognize revenues paid in Fiscal 2022, but earned from April 1 to June 30, 2022. The budget and prior year fees have also been adjusted to recognize 3 months of income earned.
- (2) Investment income (interest \$ & dividends) consists of a negative interest amount of \$136,793 from the sale of bonds held at RBC Dominion Securities. This was the result of a correction in the bond market. Since then, more Guaranteed Investment Certificates have been purchased to limit the College's exposure to risk. Dividends income was \$38,807 in Q1.
- (3) Unrealized depreciation in the fair value of investments was \$376,884 (on unsold investments). The College also had a Realized a Gain on Sale of Investments of \$67,546.

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.

#### EXPENSES (actual expenses were 13% less than the Q1 budget)

(4) Overall, General & Administrative expenses were in line with the budget (variance less than 5% from the Q1 budget):

Council costs were 16% less than budget since some in-person meetings were budgeted for (including travel, accomodation and food) but the June 2022 meeting was virtual. In person meetings are planned from December 2022 on. Training for Council on Conflict of Interest and on governance occurred as planned.

Executive, Audit and Governance Committees all held meetings virutally as planned in Q1, but were underspent because some in person meetings were budgeted for.

Other General & Administrative Expenses such as Salaries & Benefits, Membership Dues, Professional Fees, Rent and Insurance were in line with the budget.

Computer and Telephone/Internet costs were higher than budget due to timing; the costs of upgrading the database were budgeted for the entire year, but the actual expenses occurred in Q1. Legal Fees for employment law matters were also higher than budget due to timing, since legal fees were incurred in Q1.

Underspending occurred in a number of areas, including Communications, Annual Report, Staff Development and Contracted Services. Work on the Public Education Campaign is underway and the Annual Reports for Fiscal 2021 and 2022 will be published later in the fiscal year. Staff development and training will occur later in the year and contracted services will be utilized as needed.

(5) The <u>Registration Program</u> expenses were 41% less than budget due to timing. Most credit card fees, which comprise a large portion of administrative costs, will occur in September and October 2022 as members renew their licenses online. Computer expenses related to the Registration area of the database upgrade and renewals are occuring as planned. Most other program activities will occur in the last 3 quarters. A summer student was hired to assist Registration as budgeted; these costs were charged to General Administration and are not reflected in Registration for ease of administration.

\$53,650 is the annual budget for administration and maintenance costs of the Performance Based Assessment (PBA) and the Knowledge and Competence and Assessment Tool (KCAT). The PBA was administered in July 2022; all related cost of administration, scoring, arbitration and psychometric analysis will occur later in the fiscal year. These costs will be offset by fees from writers. Item writing to develop new question content for the KCAT cost \$9,192 in Q1; the session included nine subject matter experts. Work on the KCAT will continue until the next administration in February 2023. **Registration Committee** expenses were significantly less than budget because the in person meetings and most consulting fees for work on credential assessments for members will occur later in the year.

#### COLLEGE OF DIETITIANS OF ONTARIO STATEMENT OF OPERATIONS as at June 30, 2022 FISCAL YEAR ENDED MARCH 31, 2023

Attachment 12.2

- (6) The <u>Quality Assurance Program</u> expenses were 83% less than budget since the major work to revise the Peer & Practice Assessment (PPA) processes to move the assessment to a virtual, paperless platform will be done later in the fiscal year. Phase 1 of this project was completed in Fiscal 2022 and work on Phase 2 started in Q2. Modifications to the Jurisprudence Knowledge Assessment Tool (JKAT) will also be done later in the fiscal year. Related computer expenses and assessor training will occur as well. <u>QA Committee</u> expenses were significantly less than budget since the meeting held was virtual and the in person meetings will occur later in the year.
- (7) The <u>Practice Advisory Program</u> expenses were 41% less than budget since the fall workshops (5 will be in person), focus groups, Town Hall and consulting costs will all occur later in the fiscal year. Computer and Staff Development activities have occurred as planned. \$7,300 was budgeted for Legal Fees; actual Legal Fees of fees of \$4,428 were for a review of the College's Social Media Policy and for a policy determining currency hours with a definition of Practising Dietetics.

Professional Practice Committee held no meetings in Q1. Focus groups with dietitians who are Subject Matter Experts on policy development were held in Q2 for work on the Social Media policy.

- (8) The <u>Patient Relations Program</u> incurred no expenses. This program now consists of <u>PR Committee</u> meetings alone. All program administration expenses are accounted for in General Administration - Communication Initiatives. <u>The Committee</u> 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, <u>Standards & Compliance Program</u> expenses were 20% less than budget due to timing, since the costs of hearings and legal and consulting fees are budgeted for the entire year, but most of these costs have not yet occured.

\$74,000 is the annual budget for Investigations of members (conducted by an external investigator) and \$76,000 for Case Management (conducted by an external manager) of member files. \$21,100 was spent on Investigations of members and \$25,164 was spent on Case Management in Q1. The College had a higher than predicted number of complex ICRC matters that have required case management and investigation in the first quarter. It is difficult to predict and budget for the total costs of investigations from year to year.

The <u>Discipline Committee</u> was underspent because it held no meetings; <u>ICRC</u> was underspent since the meetings were held were conducted virtually. \$30,000 was budgeted for Legal Fees for matters going to ICRC; no legal advice was required in Q1.

\$6,000 is the annual budget for subject matter experts/consultants to conduct interviews and/or provide opinions/reports to the investigator for ICRC; no consulting work was required in Q1.

\$70,500 is the annual budget for hearings and the Hearings Reserve Fund has \$200,000 for restricted use. \$5,653 was spent on legal and other court fees for a hearing held for a member on June 30, 2022

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

# COLLEGE OF DIETITIANS OF ONTARIO

| COLLEGE OF DIETITIANS OF ONTARIO<br>CAPITAL ASSET PURCHASES REPORT<br>FOR THE FISCAL YEAR ENDED MARCH 31, 2023, as at June 30 2022   |                       | Attachment 12.3                       |             |
|--|-----------------------|---------------------------------------|-------------|
|  | Budget<br>2022/2023   | Actual Purchases<br>April - June 2022 | Description |
| 1. 7 desktops that are 5 years old (7 contingency) (7 x \$1,200)   | 8,400                 |                                       |             |
| 2. 6 monitors (5 contingency, 1 required) (6 x \$250)<br>Subtotal (Computer Hardware)  | 1,500<br><b>9,900</b> | <u> </u>                              |             |
| I - Leasehold Improvements<br>Changes to Office Space  | -                     |                                       |             |
| Subtotal (Leasehold Improvements)  | -                     | -                                     |             |
| III - Office equipment<br>Office furniture   | -                     |                                       |             |
| Subtotal (Office Furniture & Equipment)  | -                     | -                                     |             |
| V - Non-iMIS Software  |                       |                                       |             |
| MS Office for new laptops (3 x \$150 x 1.13)<br>Subtotal (Computer Software - non-iMIS)  | 509<br>509            | -                                     |             |
| V - IMIS: Visual Antidote Programming Costs (Quote - Use estimate of Average)<br>Gen Admin - IMIS Upgrade & Sonic Forms Upgrade - VA (74 hrs x \$185 x 1.13)+(31 hrs x \$185 x 1.13) | 21,951                | 17.961                                |             |
| Sen Admin - Finance - Online Claims (45.5 hrs x \$185 x 1.13)<br>Sen Admin - Public Register (25 hours x \$185 x 1.13)   | 9,512<br>5,226        | 888                                   |             |
| PAP Workshops (6 hrs x \$185 x 1.13)   | 1,254                 | 209                                   |             |
| Registration - Liability Insurance (7.5 hrs x \$185 x 1.13)<br>Registration - Renewal (13.5 hrs x \$185 x 1.13)  | 1,568<br>2,822        |                                       |             |
| Subtotal (Computer Software - iMIS)  | 42,333                | 19,059                                |             |
| Total additions anticipated  | 52,742                | _                                     |             |
| Capital Assets Purchases Budget F'2022-2023  | \$ 53,000             | \$ 19,059                             |             |

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

#### College of Dietitians of Ontario 2021/2022 AUDIT OF THE OPERATIONS OF THE REGISTER OF DIETITIANS Report to Council September 2022

#### PURPOSE

The Audit of the Operations of the Register of Dietitians (Audit) is a continuous improvement activity which normally takes place annually from April to May. The Register of Dietitians is the official list of members who currently practice or have practiced dietetics in Ontario. It contains restrictions on a dietitian's practice (as applicable) and provides important information about a dietitian's registration and disciplinary history.

The purpose of this Audit is to ensure that the information about members that appears online is accurate. The Audit is conducted annually by the Manager of Governance and Operations, who is not involved in the day-to-day activities of the Registration Program.

The Audit adds value by assessing operational risks and providing information that contributes to the optimization of the operations related to the management of member records. It evaluates risks by examining:

- 1. **Compliance with the laws and College by-laws**, which means the Register contains the member information required by the <u>Regulated Health Professions</u> <u>Act, 1991</u> (the "RHPA") and the College by-laws, and that the member records in the database contain the information needed to conduct College business.
- 2. Reliability and integrity of the information contained in the Register, which means having appropriate registration and Information Technology (IT) policies and procedures for maintaining and verifying the accuracy and currency of the member records.
- 3. Checking that security measures and policies are in place to protect the database which produces the Register, the College's key business asset, against systems breaches and breakdowns.
- 4. Ensuring measures are in place to protect the privacy of member information, which means having appropriate access policies and procedures to prevent breaches of privacy, or to deal with them according to the law if they do happen.
- 5. Assuring business continuance in the event of a disaster. The Audit identifies strengths and weaknesses in the operations of the Register of Dietitians and makes recommendations for improvement in areas where opportunities or deficiencies are identified.

#### AUDIT CONCLUSION

The Audit of the Register of Dietitians 2021-2022 for the fiscal period, demonstrated the following:

- The College's member records are highly accurate. The manual and automated operations are working well.
- One error was found on the Register of Dietitians due to manual operations.
- The results of this audit suggest that the appropriate policies, procedures, and tools are in place:
  - To secure the member database, which produces the Register of Dietitians, from physical harm and cyberspace intrusions (hackers/viruses); and
  - To ensure the reliability and accuracy of member records.

#### PROCESS

A random sample of approximately 2% (161/7114) of current/former member records were tested to verify that:

- Information showing in the records is consistent with College policies;
- Note fields are populated when they should have a note;
- Terms, conditions, and limitations are recorded appropriately, or removed as required by law;
- Names are displayed properly; and
- Dates clearly indicate when certificates of registration were issued and when they are no longer valid.

| FINDINGS<br>outcomes                | INDICATORS            |                     | AUDIT RESULTS   |
|-------------------------------------|-----------------------|---------------------|---|
| 1. Compliance with the              | I. Online Register of | Compare the         | 1. Register Information Table is Posted Online  |
| laws and College by-                | RDs contains the      | information         |   |
| laws, which means:                  | information           | required by the     | For transparency, the table showing the information that should be posted online, as  |
| <ul> <li>the Register of</li> </ul> | stipulated by the     | RHPA and College    | stipulated by the RHPA and College by-laws, is posted on the College website:   |
| Dietitians contains                 | RHPA.                 | by-laws that should | https://www.collegeofdietitians.org/resources/maintaining-your-rd-  |
| the member                          | Member records in     | be in the member    | certification/information-available-on-the-register-of-dietitian.aspx   |
| information required                | the database          | records and be      |   |
| by the RHPA and the                 | contain information   | appearing online in | 2. During the 2021-2022 fiscal period, the following changes were made to the   |
| by-laws of the                      | stipulated in         | the Register of     | Register of Dietitians:   |
| College; and                        | College by-laws for   | Dietitians.         |   |
| <ul> <li>that the member</li> </ul> | conducting            |                     | I. General Members who were revoked are no longer inaccurately displayed as   |
| records in the                      | business.             |                     | "Resigned" when they reapply to the College. Rather, they now have a status of  |
| database contain the                |                       |                     | "Resigned" until their license is reinstated.   |
| information needed                  |                       |                     | II. Former Temporary Members, whose certificates of registration expired (after 16 months or failure of the licensing exam twice) and who reapply to the College and the second secon |
|                                     |                       |                     | are no longer inaccurately displayed as "Resigned." Rather, they now have the   |

| FINDINGS<br>outcomes                      | INDICATORS   | AUDIT ACTIVITIES   | AUDIT RESULTS  |
|---|--|--|--|
| to conduct College<br>business optimally. |  |  | <ul> <li>status of "Certificate Expired" until they are subsequently licensed with the College.</li> <li>III. An automated processes has been created to remove Terms, Conditions and Limitations for Temporary Members when their certificate expires.</li> <li>IV. The Language of Service information only displays for active General and Temporary Members and Suspended General Members.</li> <li>FINDINGS</li> <li>The Audit of the Operations of the Register found that the records were displaying the revised information accurately. Automated operations were accurate for the records to which they were applied.</li> </ul>   |
|   | II. The Register<br>records are<br>updated to include<br>terms, conditions,<br>and limitations<br>(TCLs),<br>referrals/findings,<br>voluntary<br>undertakings,<br>ICRC, discipline<br>findings, and<br>changes in<br>member's status,<br>e.g., active,<br>suspended or<br>revoked, retired,<br>and resigned. | Spot check records<br>to ensure TCLs,<br>suspensions,<br>revocations and<br>resignations have<br>been entered into<br>the appropriate<br>member file and<br>are showing in the<br>Register.<br>Verify that all<br>Specified<br>Continuing<br>Education or<br>Remediation<br>Programs (SCERPs),<br>oral cautions,<br>discipline and<br>Fitness to Practice<br>matters that need<br>to be made public<br>on the Register<br>have been recorded | <ul> <li>The online Register was checked against lists generated from the database and a staff-generated Microsoft Excel spreadsheet to ensure that suspensions, revocations, TCLs, and resignations were displayed accurately online on the Register of Dietitians. The criteria used to create the lists included: <ul> <li>Any member who retired, resigned, or was suspended, revoked, or deceased from April 1, 2021 to March 31, 2022</li> <li>Any member who entered into a Voluntary Undertaking</li> <li>Any member who had a Temporary Certificate of Registration between April 1, 2021 to April 2022</li> </ul> </li> <li>Records were also randomly selected from the Register of Dietitians online and examined for accuracy and completeness of information.</li> <li>Most records were found to include all required information and to not include any unnecessary information. There was one issue identified with errors.</li> <li>A summary of the findings and remedial action is below:</li> </ul> <li><b>a) The expiry date displayed for a Temporary Member's certificate was the same as the issue date.</b> The former Temporary Member did not pay the initial membership fees after passing the Canadian Dietetic Registration Exam. As a result, the temporary certificate expired, and the expiry date should have been displayed on the public register.</li> |

| FINDINGS<br>outcomes | INDICATORS   |   | AUDIT RESULTS   |
|----------------------|--|---|---|
|                      |  | in the member<br>record and are<br>available in the<br>online Register of<br>Dietitians.  | <b>Cause</b> : Data entry error.<br><b>Remediation</b> : The error was manually corrected to reflect the accurate expiry date.<br>Since this error was made in 2010, automated processes have been put in place to<br>prevent it from occurring in the future.  |
|                      | III. Number of<br>members who<br>update their<br>records within<br>and outside of the<br>renewal period. | Verify ratio of<br>members who<br>update their profile<br>online during the<br>renewal period vs.<br>outside of renewal<br>period. The<br>purpose is to verify<br>member<br>compliance with<br>the section 35.2 of<br>the <u>Professional</u><br><u>Misconduct</u><br><u>Regulation</u> under<br>the <u>Dietetics Act</u> ,<br>1991, and section<br>14.4 of <u>College By-<br/>Law 1: General</u> to<br>update profiles<br>within 30 days of a<br>change to<br>determine whether<br>our<br>communications<br>regarding this issue<br>is having an effect<br>(if so, data should<br>show that<br>members are | Verifying member compliance with requirement to update their records.<br>When members move or change their employment or home address, they are required<br>by law to update their profile information within 30 days of the change. The table below<br>shows that members generally update their profile information during the annual<br>renewal period: September and October.<br>Member's Home and Employer Contact Info Changes from April 1, 2021 to March 31,<br>2022<br>One count per member per month – if a member changed their address multiple times in<br>a month, then only one change is counted.<br>Contact Changes per Month<br>April 1, 2021 to March 31, 2022<br>1200<br>1000<br>1000<br>1000<br>246<br>168<br>227<br>238<br>203<br>314<br>113<br>108<br>245<br>277<br>141<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0<br>0 |

| FINDINGS<br>outcomes   | INDICATORS  | AUDIT ACTIVITIES   | AUDIT RESULTS   |
|--|---|--|---|
|  |   | updating their<br>records more<br>consistently<br>throughout the<br>year, not only<br>during the renewal<br>period). | <b>FINDING</b><br>The spike in changes during October suggests that despite reminders, dietitians still predominately change their profile information when prompted to do so by the College at renewal, and not within 30 days of a change as required by law. This obligation is also highlighted in registration acknowledgement letters, and on the <u>Welcome to New</u> <u>Members</u> and the <u>Professional Obligations</u> sections on the College's website. In early 2022, the College implemented a reminder email to all General and Temporary Members via process automation. It is sent out on Feb 1st and June 1st annually. Following this reminder email, there was a 156% increase in updates to members' profiles, compared to the same time period in Feb 2021. |
| 2. Reliability and<br>integrity of the<br>information contained<br>in the Register, which<br>means having<br>appropriate<br>registration and IT<br>policies and<br>procedures for<br>maintaining and<br>verifying the accuracy<br>and currency of the<br>member records. | I. Number of email<br>bounce-backs is<br>very low, which<br>means emails are<br>reliable. | Count the number<br>of email bounce-<br>backs.   | <ul> <li>Email bounce-back report</li> <li>Email bounce-backs: From April 1, 2021 – March 31, 2022, 8 mass emails were sent to the College membership. On average, 9 out of 4245 emails bounced-back (per mass email) for various reasons. The successful delivery of emails averages over 99.8%.</li> <li>FINDING</li> <li>These numbers are consistent with previous years where the average of emails delivered was also very high. This indicates that member email addresses are highly accurate.</li> </ul>   |
|  | II. Health<br>professions<br>database (HPD)<br>information was<br>uploaded                | Verify that<br>formatting and<br>other errors<br>identified by the IT  | Ongoing Verification of Errors and Data Clean-up<br>Each week, the IT Manager runs data checks and corrections. Annually, the IT Manager<br>and Registration Program staff evaluate the quality of the data received during annual<br>renewal. For data elements where significant resources are required to correct data entry   |

| FINDINGS<br>OUTCOMES  | INDICATORS  | AUDIT ACTIVITIES  | AUDIT RESULTS  |
|---|---|---|--|
|   | successfully to the<br>Ministry's<br>database.  | queries were<br>corrected.  | errors, they consider whether there are changes to the instructions or programming that<br>could prevent the errors. Where feasible and within a reasonable cost, these changes are<br>incorporated into the annual renewal form for the following year.<br>The volume of activity for data cleanup needed for the Health Professions Database<br>(HPD) remains low due to the logic that was previously added to the required data fields.<br>This ensures the consistency and formatting of entries into the fields by both by staff and |
|   | II. Policies and<br>procedures are<br>appropriate for<br>technology<br>currently in place.                | Review the<br>comments and<br>suggestions from<br>the Ministry with<br>regards to the<br>quality of data that<br>was submitted by<br>the College for the<br>HPD.  | <ul> <li>members to reduce errors, enabling the successful annual HPD upload of College data.</li> <li>Quality of Data Submitted for the Health Professions Database Demonstrates High Accuracy of College Data</li> <li>Feedback from the Ministry regarding the quality of the College's HPD data remains very positive and demonstrates that our records are highly accurate.</li> </ul>  |
|   |   | Verify that policies<br>relating to<br>maintaining<br>accuracy and<br>integrity of the data<br>are reviewed and<br>updated regularly,<br>and that they relate<br>to technology and<br>procedures<br>currently in<br>practice. | Policies and Automated Procedures for Monitoring Data in Place<br>Registration Program General Administration Data Quality Policy 3-5. The Audit<br>confirmed that the policy is current and that the IT Manager has procedures in place to<br>verify the quality of the data on a weekly basis, and submits requirements for corrections<br>to Registration Program staff, as needed, in keeping with this policy.  |
| 3. Business continuance<br>is assured by<br>safeguarding the<br>Register as a key<br>business asset against<br>systems breaches and | I. Number of hours<br>and times the<br>Register was not<br>available to the<br>public during the<br>year. | Review how many<br>times the Register<br>of Dietitians was<br>not available to the<br>public throughout<br>the year.  | Public Access to Register of Dietitians on College Website<br>Comment: At 20 minutes, the website downtime was lower this year compared to the<br>previous year (2 hours) and to two years ago (27 hours and 5 minutes). The downtime<br>this year was attributed to a newly issued and installed SAN SSL certificate that needed to<br>be reinstalled.  |

| FINDINGS<br>outcomes   | INDICATORS   | AUDIT ACTIVITIES   | AUDIT RESULTS   |
|--|--|--|---|
| breakdowns, which<br>means having<br>appropriate security<br>measures and policies<br>in place to prevent<br>them. | II. The database<br>and web access<br>are safe with<br>appropriate IT<br>security. | Verify that IT<br>security has been<br>updated and<br>obtain<br>appropriate<br>information or<br>security<br>certificates from<br>vendors. | <ul> <li>Total Downtime Between April 1, 2021 to March 31, 2022 = 20 minutes</li> <li>April 9, 2021 8:39am – 8:59am <ul> <li>Time to resolve issue: 20 minutes</li> <li>Areas affected: Public and member portal websites</li> <li>Reason: newly issued and installed SAN SSL certificate needed to be reinstalled</li> </ul> </li> <li>Secure Member Database and Protected Member Information <ul> <li>This Audit confirmed that there are security procedures in place for keeping the member database safe, including: <ol> <li>system protection network security protocols, vulnerability scans, network security and email anti-virus software from hackers and viruses;</li> <li>storing files, websites and databases on MS Azure servers in a highly-secured, controlled off-site area; and</li> </ol> </li> <li>This Audit also confirmed that appropriate system back-ups and firewalls are updated and in place to protect the database that contains the information for the member records.</li> </ul></li></ul> |
|  | II. Password and<br>security policies<br>have been<br>implemented as<br>required.  | Verify compliance<br>with password<br>policies.  | <ul> <li>The Passwords and College Information Security Policy</li> <li>All staff passwords were changed according to the policy requirements.</li> <li>Council approved a new Passwords and College Information Security policy in June 2019.</li> <li>The policy outlines a set of practices and protocols for securing the College's information, information technology assets, and technology infrastructure. This Audit confirmed that the policy is current and the IT Manager has processes in place to confirm policy compliance.</li> <li>The Audit concluded that following the departure of a staff member, all measures for ensuring information security, as required by the Employee Departure policy, were followed.</li> </ul>   |

| FINDINGS<br>outcomes   | INDICATORS   | AUDIT ACTIVITIES  | AUDIT RESULTS  |
|--|--|---|--|
| 4. Ensuring that the<br>privacy of member<br>information including<br>systems protection,<br>having appropriate<br>access policies and<br>emergency measure<br>for breaches of<br>privacy. | I. Appropriate<br>protocols for access<br>to the database,<br>copies of the<br>database, and/or<br>member records<br>are in place,<br>including: policies,<br>procedures, and<br>confidential<br>agreements, where<br>appropriate. | Verify access and<br>make sure that staff<br>and vendor<br>protocols for access<br>to the database are<br>in place, updated as<br>needed to reflect<br>current staff access<br>codes and current<br>vendors.            | <ul> <li>Protocols and Policies to Protect Member Personal Information</li> <li>Policies are in place to ensure that member information is protected and confidentiality of information is maintained:</li> <li>Access to the database is limited to staff needing it to conduct their work.</li> <li>Passwords are changed regularly to protect access to records.</li> <li>Emergency protocols are in place to ensure business continuance.</li> <li>Emergency protocols are in place to deal with privacy breaches.</li> <li>Vendors and temporary staff must sign confidentiality agreements before they begin work for the College.</li> <li>The <u>College of Dietitians of Ontario Privacy Code</u> is accessible online.</li> <li>Comment: Policies concerning security of records and privacy of member information are reviewed regularly with staff. This review is a reminder of employee responsibilities with regards to confidentiality and privacy of information. All new employees are required to read the policies and sign a confidentiality agreement. All new employees, Council and Committee members must read and acknowledge the IT Security Policy.</li> </ul> |
|  | 2. Protocols and<br>procedures for<br>accessing the<br>database, access to<br>member records,<br>and for managing a<br>privacy breach,<br>should one occur.  | <ul> <li>Policy review:</li> <li>a. Protocols and procedures for accessing the database/ member records;</li> <li>b. Protocols and procedures for managing a privacy breach; and</li> <li>c. Privacy Policy.</li> </ul> | <ul> <li>Managing Access to the Member Database</li> <li>The following policies and procedures are in place to protect the College database and access to member records:</li> <li>Policy for Handling a Request for Member Information by the Police (May 2013)</li> <li>The policy for managing a privacy breach is stated in law: when privacy of member data has been breached, by law, the College must advise the member or members in question. The College's Privacy Policy appears on its website at the bottom of each page.</li> </ul>  |

| FINDINGS<br>outcomes                    | INDICATORS                        | AUDIT ACTIVITIES   | AUDIT RESULTS  |
|---|-----------------------------------|--|--|
| 5. Assuring business continuance in the | Emergency and disaster procedures | Review and update<br>emergency                               | Planning for Emergency and Disaster Recovery   |
| event of a disaster.                    | and policies are current.         | procedures to make sure the                                  | The CDO Emergency Files were reviewed and updated in March 2021.   |
|   |                                   | information is<br>current. Staff is<br>aware of<br>emergency | The Emergency Files include the Emergency and Disaster Recovery Plan Checklist, Internal Office Communications Plan, and the Emergency & Disaster Recovery Scenarios.  |
|   |                                   | procedures.  | FINDING  |
|   |                                   |  | Appropriate measures are in place to ensure that College work can continue in the event<br>of an emergency and that the public can contact the College for information they need.<br>Staff are given the information necessary for dealing with emergencies should they arise. |

Submitted by:

Lisa Dalicandro, Manager of Governance and Operations Sandra Brazel, Acting Manager of Governance and Operations July 2022

# Council Meeting Evaluation Results- June 17, 2022

#### Participation = 100%

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

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    |  |

- Please add a comment if you selected Most of the Time, Some of the Time or None of the Time.
- Some time a member may not able to participate due to time constrain due to time allocation for each item

#### 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    | 45.45%     | 5     |  |
| Agree             | 45.45%     | 5     |  |
| Disagree          | 9.09%      | 1     |  |
| Strongly disagree | 0.00%      | 0     |  |
| Total             | 100%       | 11    |  |

# Additional Comments:

#### 4) Time was efficiently managed during the meeting.

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     |  |
| Total            | 100%       | 11    |  |

- # Additional Comments:
- 1 minor tech delays
- 2 N
- 3 Some member are more actively participate than others

#### 5) Decisions made were summarized after each agenda item.

# Respondents: 11

| Choice           | Percentage | Count |  |
|------------------|------------|-------|--|
| All of the Time  | 81.82%     | 9     |  |
| Most of the Time | 9.09%      | 1     |  |
| Some of the Time | 9.09%      | 1     |  |
| None of the Time | 0.00%      | 0     |  |
| Total            | 100%       | 11    |  |

- # Additional Comments:
- 1 ?unsure, motions read, call for second, call for votes "carried", don't recall summaries
- 2 N

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

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    |  |

- # Additional Comments:
- 1 participation varies individually
- 2 A few professional members participate more than the public members.

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

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:

#### 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

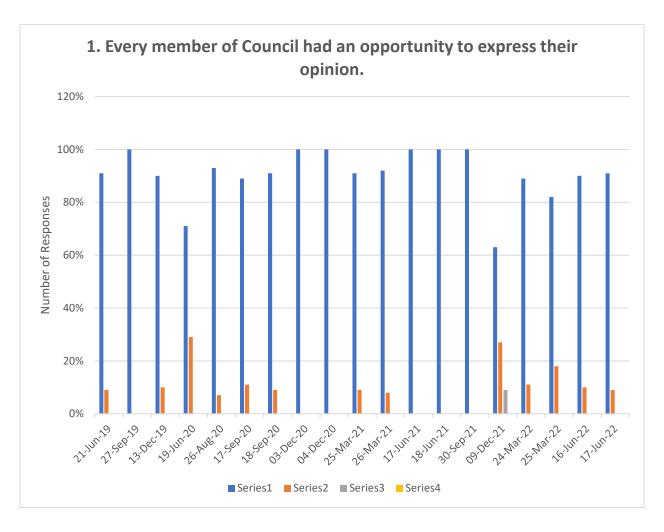
| Choice | Percentage | Count |  |
|--------|------------|-------|--|
| Yes    | 0.00%      | 0     |  |
| No     | 100.00%    | 11    |  |
| Total  | 100%       | 11    |  |

# Additional Comments:

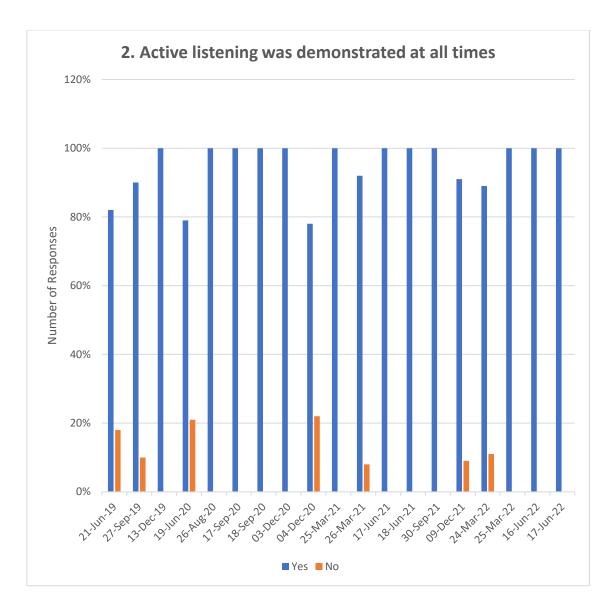
#### 10) Additional Remarks:

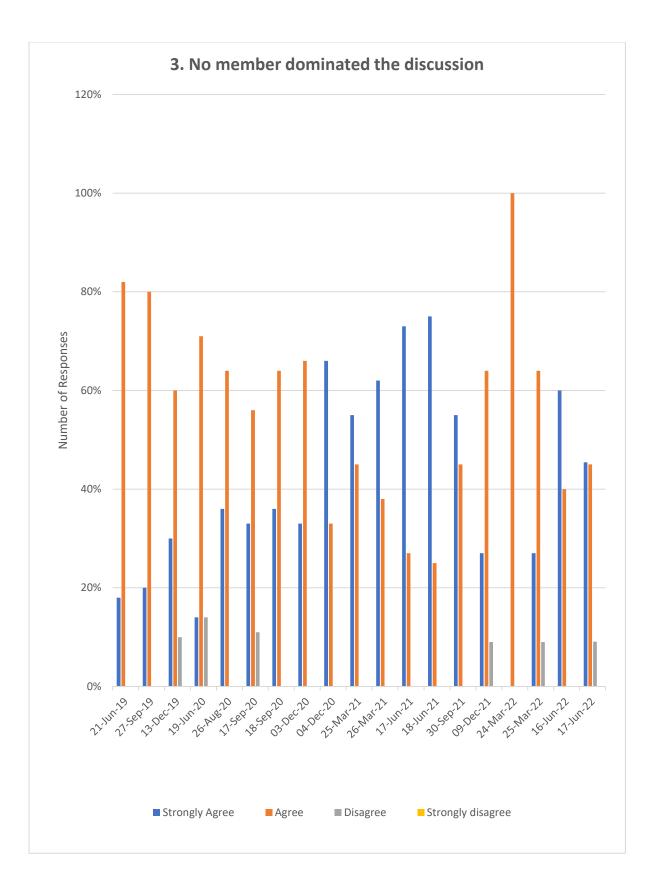
Respondents: 2

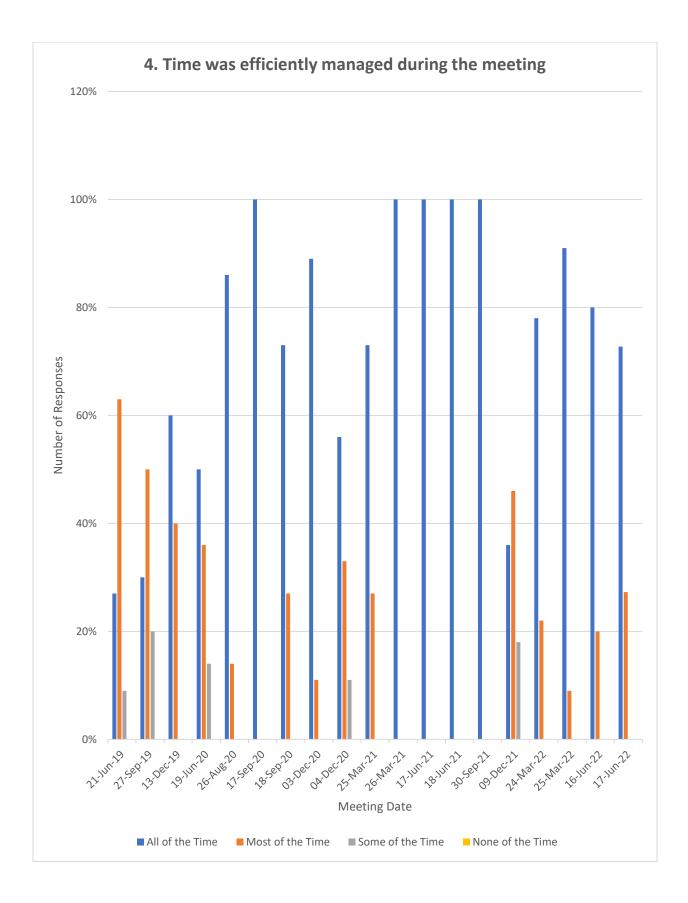
- # 10) Additional Remarks:
- 1 Some errors in agenda...item posted on wrong day, one item misnumbered, one item mistitled. Makes it more cumbersome to follow Excellent briefing notes
- 2 would be helpful if everyone sharing documents maximized the documents and ensured it was readable

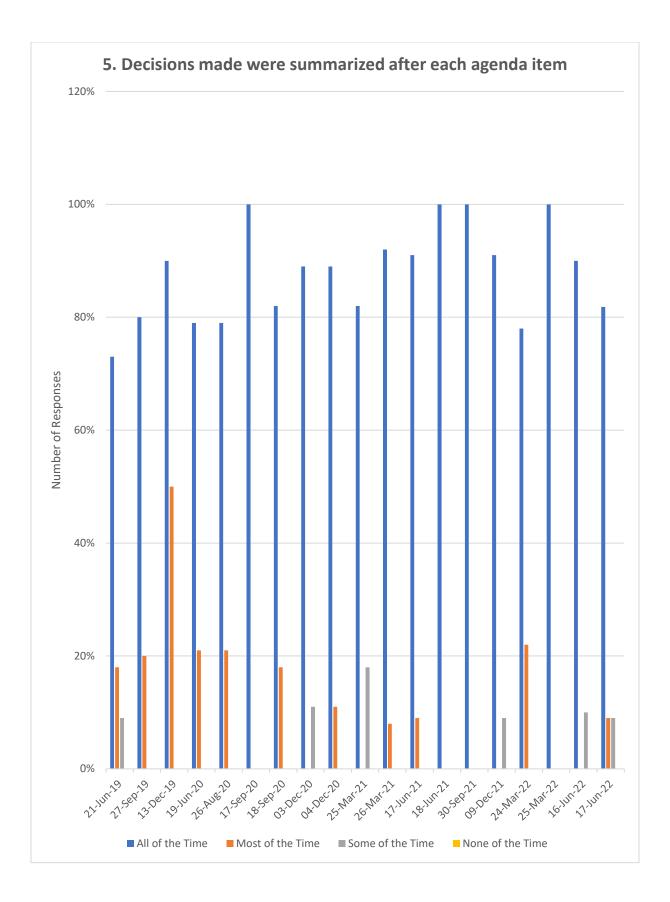


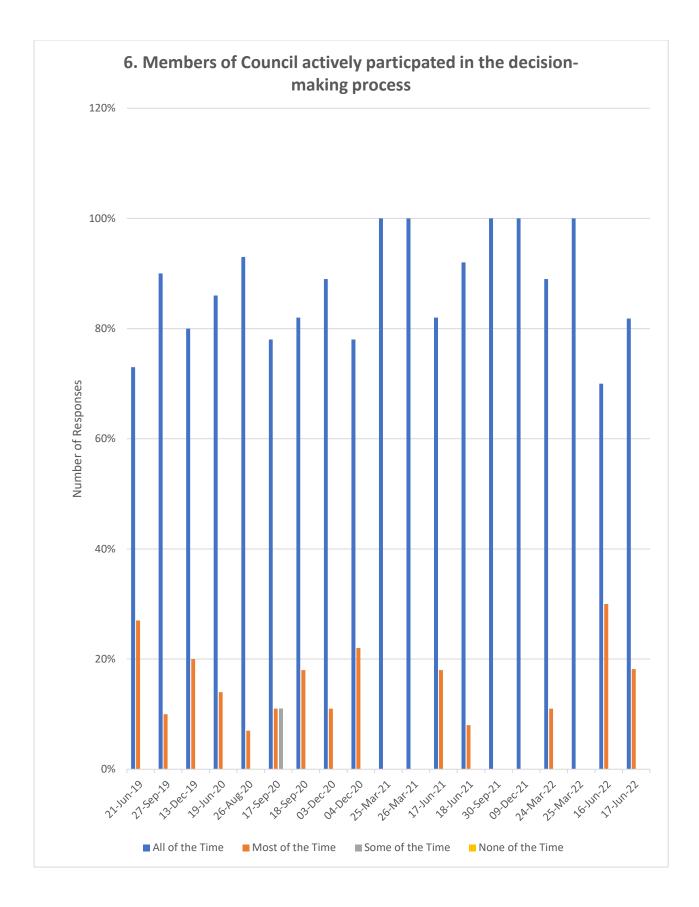
# Council Meeting Evaluation Trends updated with June 16 & 17– September Council Meeting

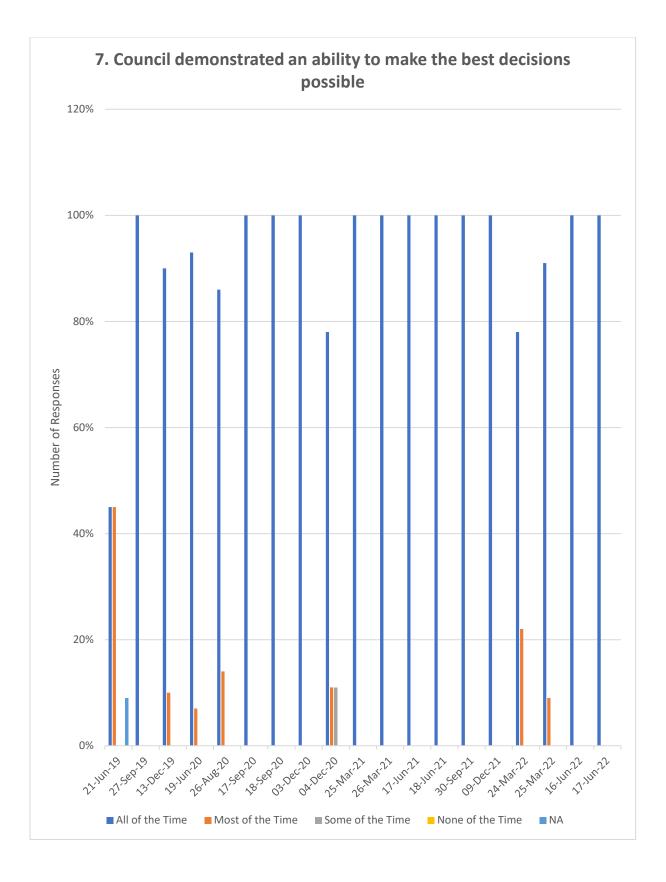


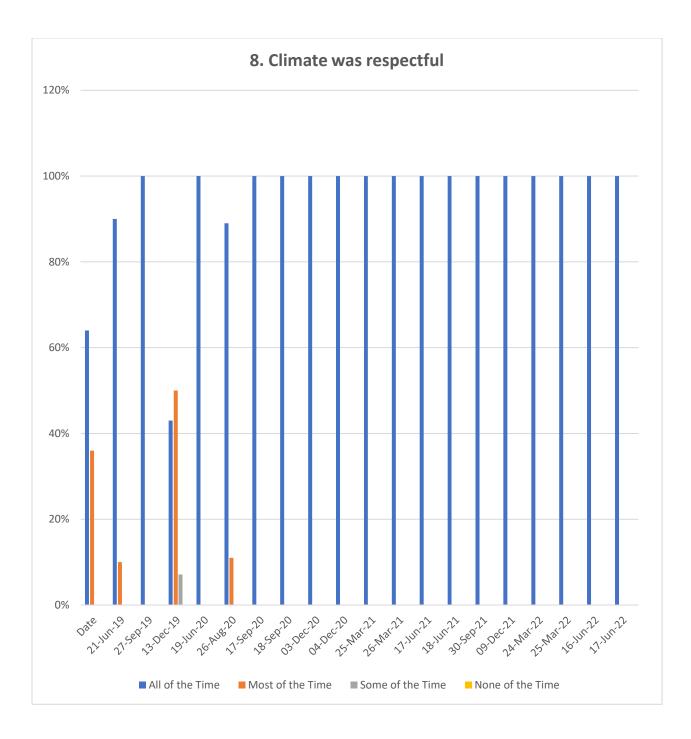


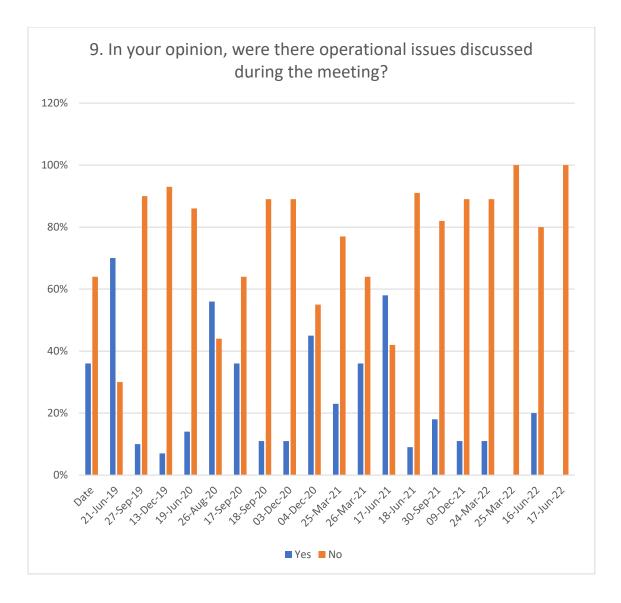














# **Council Briefing Note**

| Topic:                       | Updates to the Council Meeting Evaluation Questionnaire   |
|------------------------------|---|
| Purpose:                     | Decision Required   |
| Strategic Plan<br>Relevance: | Regulatory Effectiveness and Performance Measurement<br>Governance Modernization and Enhancing Public Trust |
| From:                        | Executive Committee   |

## ISSUE

To review recommended changes to the Council Meeting Evaluation questions and consider other ways to improve the assessment of Council's effectiveness.

## PUBLIC INTEREST RATIONALE

Good governance is the foundation for effective regulation and public trust. Best practices in regulation support the ongoing assessment of Council meetings with a focus on interactions, behaviours, and decisions, to evaluate Council's effectiveness at achieving its mandate. This transparent and reflective performance review demonstrates Council's commitment to continuous improvement and good governance.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires Council to regularly assesses its effectiveness.

#### BACKGROUND

Following each Council meeting, a questionnaire is circulated to evaluate the effectiveness of the meeting and identify improvements for future meetings.

The Executive Committee reviewed and discussed the feedback from the June 16 and 17 meeting. It was suggested that the evaluation questions be revised to better reflect Council's consensus culture. This includes questions that focus on whether Council members engage in discussions, feel heard, and remain on topic.

## CONSIDERATIONS

As a review of the Council Meeting Evaluations is on the workplan for this fiscal year, the Executive Committee is requesting Council's feedback on the proposed revisions and whether there are additional revisions that should be considered.

### Proposed revisions

- Phrase questions in a positive tone.
- Include a question about whether discussions remained on topic.
- Include a question about whether Council members felt heard.
- Address how council engages in decision-making.
- Include an EDI-B check-in.

#### NEXT STEPS

Council is being asked to discuss the proposed revisions, as recommended by the Executive Committee, and provide direction on the other ways the Council Meeting Evaluation can be modified and improved.

#### ATTACHMENTS

• Appendix 1: Council Meeting Evaluation Questionnaire

# **Council Meeting Evaluation Questionnaire**

Participation % = (Number of council members completed/Number of attendees)

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

Respondents:

| Choice           | Percentage | Count | (chart colour added<br>to this column) |
|------------------|------------|-------|--|
| All of the Time  |            |       |  |
| Most of the Time |            |       |  |
| Some of the Time |            |       |  |
| None of the Time |            |       |  |
| Total            |            |       |  |

# Please add a comment if you selected Most of the Time, Some of the Time or None of the Time.

#### 2) Active listening was demonstrated at all times.

Respondents:

| Choice | Percentage | Count | (chart colour added<br>to this column) |
|--------|------------|-------|--|
| Yes    |            |       |  |
| Νο     |            |       |  |
| Total  |            |       |  |

# Additional Comments:

# 3) No member dominated the discussion.

# Respondents:

| Choice            | Percentage | Count | (chart colour added<br>to this column) |
|-------------------|------------|-------|--|
| Strongly Agree    |            |       |  |
| Agree             |            |       |  |
| Disagree          |            |       |  |
| Strongly disagree |            |       |  |
| Total             |            |       |  |

## # Additional Comments:

# 4) Time was efficiently managed during the meeting.

# Respondents:

| Choice           | Percentage | Count | (chart colour added<br>to this column) |
|------------------|------------|-------|--|
| All of the Time  |            |       |  |
| Most of the Time |            |       |  |
| Some of the Time |            |       |  |
| None of the Time |            |       |  |
| Total            |            |       |  |

## # Additional Comments:

# 5) Decisions made were summarized after each agenda item.

Respondents:

| Choice           | Percentage | Count | (chart colour added<br>to this column) |
|------------------|------------|-------|--|
| All of the Time  |            |       |  |
| Most of the Time |            |       |  |
| Some of the Time |            |       |  |
| None of the Time |            |       |  |
| Total            |            |       |  |

# # Additional Comments:

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

Respondents:

| Choice           | Percentage | Count | (chart colour added<br>to this column) |
|------------------|------------|-------|--|
| All of the Time  |            |       |  |
| Most of the Time |            |       |  |
| Some of the Time |            |       |  |
| None of the Time |            |       |  |
| Total            |            |       |  |

# # Additional Comments:

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

Respondents:

| Choice           | Percentage | Count | (chart colour added<br>to this column) |
|------------------|------------|-------|--|
| All of the Time  |            |       |  |
| Most of the Time |            |       |  |
| Some of the Time |            |       |  |
| None of the Time |            |       |  |
| Total            |            |       |  |

# Additional Comments:

# 8) Climate was respectful.

# Respondents:

| Choice           | Percentage | Count | (chart colour added<br>to this column) |
|------------------|------------|-------|--|
| All of the Time  |            |       |  |
| Most of the Time |            |       |  |
| Some of the Time |            |       |  |
| None of the Time |            |       |  |
| Total            |            |       |  |

# Additional Comments:

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

Respondents:

| Choice | Percentage | Count | (chart colour added<br>to this column) |
|--------|------------|-------|--|
| Yes    |            |       |  |
| No     |            |       |  |
| Total  |            |       |  |

# Additional Comments:

## 10) Additional Remarks:

Respondents:

# 10) Additional Remarks:



# **Council Briefing Note**

| Topic:         | Quarterly Risk Management Monitoring Report          |
|----------------|--|
| Purpose:       | Monitoring Report                                    |
| Strategic Plan | Regulatory Effectiveness and Performance Measurement |
| Relevance:     | Risk-Based and Right-Touch Regulation                |
| From:          | Melanie Woodbeck, Registrar & Executive Director     |

#### ISSUE

To review the Q2 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 September 2022 (Q2) Risk Monitoring Report is before Council for its consideration

(*Appendix 1*) with updates on the status and progress towards treatment of the various risks identified.

Updates to the Risk report include:

#### New risks identified:

• Potential risk of harm to the clients/public

Areas where risk and mitigation plans have been reassessed as situation evolves:

- Accreditation provider transition
- Potential Registration Regulatory Changes
- Regulatory Governance Changes
- Cybersecurity (*Risk response only*)

#### Risk downgraded

 Delays on CPMF Commitments – strong progress has been made towards meeting the commitments made, with many projects complete or close to completion. Accordingly, this is now identified as a much lower risk. It is anticipated the Ministry of Health will publish its list of commendable regulatory practices and will provide the 2022 CPMF template this fall.

#### **RECOMMENDATION/NEXT STEPS**

To provide feedback on the current risk assessment and mitigation efforts.

#### ATTACHMENTS

• Appendix 1: September 2022 (Q2) Risk Monitoring Report

| Risk Area | Risk<br>Identification  | Risk Assessment   | Risk Response  | Current Status/Mitigation Update<br>as of September 20, 2022  |
|-----------|---|---|--|---|
| Program   | Accreditation<br>Provider<br>Transition<br>(risk<br>assessment<br>& response<br>updated)            | Following the withdrawal of the national education<br>accreditation provider effective March 31, 2022, the<br>Alliance signed an agreement with EQual as the new 3rd<br>party accreditation service provider. Each provincial<br>dietetics regulatory College has approved EQual as the<br>accreditation provider and will continue to recognize<br>previous PDEP awards until August 31, 2023.<br>Should some programs (in Ontario or outside of Ontario)<br>choose not to sign on to the new accreditation process,<br>the College would need to determine how to assess<br>Canadian graduates from unaccredited programs. This<br>would be an individualized, labour-intensive equivalency<br>process for the College. | <ul> <li>Alliance to work with PDEP to discuss how to collaborate going forward.</li> <li>EQual to conduct info sessions and 1.5-day orientation workshops for education and practicum program representatives (at no cost to the schools for 1 attendee) to provide more information to programs on the process, fees, standards, etc. ahead of enrollment.</li> <li>CDO communication with the MOH and OFC on the transition.</li> </ul>   | <ul> <li>PDEP has been working with the assistance of a facilitator to understand the needs and perspectives of educators, the association, and the Alliance to reach consensus for ongoing collaboration.</li> <li>Info sessions have been scheduled for September 2022 and all programs have registered.</li> <li>Workshops are being scheduled.</li> <li>After the workshop, each participant will receive a copy of the EQual standards.</li> </ul> |
| Program   | Potential<br>Registration<br>Regulatory<br>Changes<br>(risk<br>assessment<br>& response<br>updated) | In February and early September 2022, the Ministry of<br>Health consulted with Colleges regarding potential<br>registration amendments related to Canadian<br>experience, registration timelines, language proficiency,<br>and registration processes during emergencies. It is<br>anticipated that legislation may be introduced shortly.<br>The College has a PLAR process and does not require<br>Canadian experience. Significant resources may be<br>required to comply with the new requirements (e.g.,<br>Legal fees, committee time, and the reallocation of<br>staff time, which may affect other strategic projects<br>and initiatives).  | <ul> <li>Conduct an internal review of registration policies, internal timelines, and service standards</li> <li>Monitor changes to registration practices. occurring at other regulatory bodies, refresh our regulatory networks with health and non-health regulators through the Ontario Regulators for Access Consortium (ORAC) regulatory registration working group.</li> <li>Monitor and improve on the resiliency of registration processes, including offering online competency assessment processes.</li> <li>Provide feedback to MOH on the proposed legislation and potential impacts.</li> </ul> | <ul> <li>CDO provided comments to the MOH consultation on June 10 and September 2, 2022.</li> <li>CDO provided comments to OFC on the Guide on August 31, 2022, and changes to the reporting template on June 3, 2022.</li> <li>PLAR assessment tools have been successfully adapted to remote and hybrid proctoring</li> <li>Continue to monitor.</li> </ul>   |

| Risk Area            | Risk<br>Identification   | Risk Assessment   | Risk Response   | Current Status/Mitigation Update<br>as of September 20, 2022   |
|----------------------|--|---|---|--|
|                      |  | There may also be some new requirements from the<br>Office of the Fairness Commissioner (OFC) in connection<br>with an updated reporting template coming out in the<br>fall and a new Legislated Obligations and Fair<br>Registration Best Practices Guide for Health Regulatory<br>Colleges that is being finalized.         |   |  |
| Public<br>Protection | Potential Risk<br>of Harm to<br>Clients/Public<br>(new)                              | Potential risk to the public due to unethical,<br>incompetent, or unprofessional care.<br>An increase in the number and complexity of complaints<br>and reports also has an impact on College resources and<br>how they are utilized.   | <ul> <li>Refresh risk in dietetic practise research.</li> <li>Monitor ICRC data to identify patterns of concern<br/>and develop and update member education,<br/>standards of practice, guidelines, and other<br/>initiatives accordingly.</li> <li>Professional Practice Program will develop and<br/>implement a continuous monitoring and<br/>evaluation plan to assess currency and revisions<br/>to policy/standards of practice.</li> <li>Update College programs and tools with a risk-<br/>based approach to prevent harm.</li> </ul> | <ul> <li>Risk tool created for ICRC assessments ensures<br/>that risk of harm is connected to outcome.</li> <li>ICRC data collection chart updated to capture<br/>risk categories.</li> </ul>                            |
| Governance           | Regulatory<br>Governance<br>Changes<br>(risk<br>assessment<br>& response<br>updated) | Earlier this year, the Ministry of Health recently<br>consulted on a governance modernization and oversight<br>proposal. It is anticipated that legislative amendments<br>will be proposed in the coming months. The governance<br>changes may have significant financial and human<br>resource implications for the College. | <ul> <li>Move ahead with CDO's strategic goal of<br/>governance modernization and begin preparing<br/>for legislative changes.</li> <li>Through regulatory collaboration and networking,<br/>stay informed of potential changes.</li> <li>Conduct a French language audit of College<br/>communications to identify priority areas.</li> <li>Continue to work towards fully meeting CPMF<br/>measures.</li> </ul>   | <ul> <li>Council participated in the consultation and provided a letter to the Ministry on February 23, 2022.</li> <li>Increased the number of committee members on the roster.</li> <li>Continue to monitor.</li> </ul> |

| Risk Area   | Risk<br>Identification   | Risk Assessment  | Risk Response  | Current Status/Mitigation Update<br>as of September 20, 2022   |
|-------------|--|--|--|--|
| Operational | Cybersecurity<br>Breach<br>(risk<br>response<br>updated)                                   | Risk arises from the current geopolitical situation,<br>increasing sophistication of phishing scams, and greater<br>connectivity of people, systems and programs at the<br>College. Potential risks include: privacy breaches,<br>organizational/staff downtime, reputation, and financial<br>costs. | <ul> <li>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 during Q2.</li> <li>The College maintains insurance which covers IT and cybersecurity.</li> <li>A security audit was completed in September 2021 and minor gaps were identified and addressed.</li> <li>Post security audits will take place to ensure compliance with audit recommendations</li> <li>Staff regularly engage in awareness dialogue regarding phishing scams.</li> <li>Additional formal training for Council and Staff on cybersecurity will be explored.</li> <li>New staff data governance working group to identify and mitigate risks in this area through its project work.</li> <li>CDO staff attends regular Cyber security community of practice meetings to stay abreast of developments and best practices.</li> </ul> | <ul> <li>Training needs analysis survey and internal<br/>phishing campaigns conducted in order to<br/>customize staff cyber security training.</li> </ul>  |
| Operational | Succession<br>Planning/Staff<br>Turnover and<br>Retention<br>(risk<br>response<br>updated) | Risks around business continuity, retention of<br>institutional knowledge through retirement, leave of<br>absence, or resignation. The pandemic has led to<br>societal changes and re-evaluation of priorities, work-life<br>balance, and return to work policies.                                   | <ul> <li>Review of staffing model by third party HR<br/>consulting firm completed in fall 2021, resulting in<br/>the addition of staffing resources to ensure the<br/>College can successfully meet its regulatory<br/>obligations now and into the future. These<br/>additional HR resources improve the distribution<br/>of workload, assist with succession planning, and</li> </ul>  | <ul> <li>Staff survey conducted and staff have begun<br/>meeting in-person periodically for<br/>collaboration, remote work is the focus.</li> <li>HR policy review in progress.</li> <li>Registrar coverage plan refreshed, on<br/>September 30 Council agenda.</li> </ul> |

| Risk Area | Risk<br>Identification  | Risk Assessment  | Risk Response  | Current Status/Mitigation Update<br>as of September 20, 2022   |
|-----------|---|--|--|--|
|           |   |  | <ul> <li>help to diffuse the centralization of institutional knowledge.</li> <li>A return to office plan will be developed and evaluated in Q1 – Q2.</li> <li>College HR processes and procedures are undergoing review in 2022.</li> <li>Conduct process documentation for key College activities to further decentralize knowledge of processes and procedures and ensure continuity.</li> <li>Develop a records management policy to ensure documentation, continuity and accessibility of institutional knowledge.</li> </ul>  | <ul> <li>Internal Data Governance Working Group has<br/>begun to meet and set initial priorities with<br/>respect to records management.</li> </ul>  |
| Financial | Increasing<br>Costs of<br>Regulation<br>(risk<br>response<br>updated) | Resources required to keep pace with complex and<br>evolving regulatory requirements and economic inflation<br>are increasing. Annual membership fees have been static<br>over the last two years. | <ul> <li>Prudent financial habits are in place at the<br/>College. For example, the College engages in zero-<br/>based budgeting; assesses vendor contracts to<br/>ensure the best value for the College (quality<br/>balanced with price) and Council and<br/>Management regularly monitor expenditures<br/>against the approved budget. Internal controls<br/>are in place for the highest risk areas, including on<br/>College purchases, and the audit Committee and<br/>Management review these internal controls<br/>annually.</li> <li>Will require either additional resources or<br/>reduction of strategic projects.</li> <li>Conduct analysis on By-law 2: Fee Schedule in Q3.</li> <li>Reserve fund policy to be reviewed by Council in<br/>Q2.</li> </ul> | <ul> <li>Inflation rates have increased (~7% at August 2022), may have an impact on price of goods and services that could affect the CDO.</li> <li>Reserve fund policy approved by Council in June 2022.</li> </ul> |

| Risk Area | Risk<br>Identification                                 | Risk Assessment  | Risk Response   | Current Status/Mitigation Update<br>as of September 20, 2022  |
|-----------|--|--|---|---|
| Financial | Investment<br>Returns<br>(risk<br>response<br>updated) | Markets may become volatile due to current geopolitical<br>conditions, presenting a risk to the College's investment<br>returns. | <ul> <li>Monitor situation with investment advisor.</li> <li>To diffuse the risk, some funds have been moved to stable GICs.</li> <li>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.</li> </ul> | <ul> <li>Investment policy approved by Council in June 2022.</li> <li>Portfolio risk reduced, now comprises 14% in equities and a number of bonds have been sold and the proceeds reinvested in stable GICs.</li> </ul> |



# **Council Briefing Note**

| Торіс:                       | Strategic Plan Monitoring Report for 2022 – 2023 |
|------------------------------|--|
| Purpose:                     | Monitoring Report                                |
| Strategic Plan<br>Relevance: | Strategic Plan Progress                          |
| From:                        | Melanie Woodbeck, Registrar & Executive Director |

#### ISSUE

To review the CDO's mid-year progress on the strategic plan.

#### PUBLIC INTEREST RATIONALE

The Strategic Plan Monitoring Report enables Council to monitor the CDO's performance on work aimed at advancing its strategic priorities and public protection mandate.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires the CDO to identify activities that support its strategic plan.

#### BACKGROUND

Council approved the College's Strategic Plan and Goals in March 2020.

The Strategic Plan Monitoring Report is provided to Council twice a year – in the second quarter for a mid-year check-in and the fourth quarter when the budget is set. This report allows Council to monitor the progress and achievement of outcomes, and to ensure that the plan is appropriately resourced.

#### CONSIDERATIONS

The Strategic Plan Monitoring Report is attached for Council's information and feedback (*Appendix 1*).

When reviewing the monitoring report, Council will note:

September 30, 2022 Meeting

- The goals set out the direction in terms of the outcomes that the College should strive to achieve. The strategies provide focus to how the goals will be achieved and the types of projects and initiatives that management will pursue. The strategies will remain in place for the duration of the strategic plan.
- KPIs, with targets (as applicable) have been set for processes where existing data is present. Benchmarking will be done in 2022 for new KPI measures for the organization.
- The 2022 2023 accomplishments highlight the CDO's progress towards the goals.

## NEXT STEPS

The Strategic Plan Monitoring Report is being presented for Council's information and feedback.

#### ATTACHMENT

• Appendix 1: Strategic Plan Monitoring Report

| Goal 1: Regulatory Effectiveness and Performance Measurement<br>The College will measure and report its regulatory performance to the public. |  |   |        |  |  |  |  |
|---|--|---|--------|--|--|--|--|
| Strategies  | Key Activities 2022 – 2023   | KPI Measure   | Target | Actual<br>To-<br>date                    | Progress and Accomplishments   |  |  |
| <b>1.1</b> Enhance IT systems and data governance to support data collection, analysis, reporting   | <ul> <li>Conduct database needs assessment/gaps<br/>analysis</li> <li>Upgrade database</li> </ul>  | % 'meets<br>expectations'<br>rating on CPMF   | 85%    | 90%<br>(based on<br>current<br>measures) | <ul> <li>Created new Council Meetings <u>Highlights</u> process and<br/>document to be published online no later than one week<br/>after close of Council meetings (CPMF action item).</li> </ul>  |  |  |
| and security  | <ul> <li>Review, update/develop data governance and records management policies and procedures</li> <li>Review and update reporting templates</li> </ul> | % of CPMF<br>committed<br>action items in<br>completed in<br>subsequent yr                                    | 100%   | TBD                                      | <ul> <li>Council briefing material templates updated - now<br/>include sections connecting materials to EDI-B, public<br/>interest and strategic plan.</li> <li>Database needs assessment completed</li> <li>Database upgrade was completed on schedule and</li> </ul>   |  |  |
| <b>1.2</b> Convey information about<br>College effectiveness in clear,<br>concise, transparent, and<br>accessible reporting formats           |  | % of registration<br>applications<br>opened within 5<br>business days of<br>application form<br>+ fee receipt | 90%    | 100%                                     | <ul> <li>within budget.</li> <li>Staff Data Governance Working Group struck</li> <li>163 application files were received and opened within 5 days of application form + fee receipt between April 1 - August 31, 2022.</li> <li>184 registration decisions were made between April 1 - August 31, 2022, all within 6 months of the file completion date.</li> </ul>  |  |  |
|   |  | % registration<br>decisions issued<br>within 6 months<br>of file<br>completion date                           | 90%    | 100%                                     | <ul> <li>CPMF projects have made excellent progress. At time of<br/>reporting in December 2021, CDO met expectations on<br/>38/50 measures (76%). To date, CDO has completed 7<br/>additional activities, which would bring the 'meets'<br/>rating to 45/50 measures. Activities include updates to:<br/>Council Code of Conduct, Conflict of Interest form,<br/>Executive Committee report and Council Action list,<br/>Development of Council Competencies and Completion<br/>of 3<sup>rd</sup> Party Council Evaluation.</li> </ul> |  |  |

| Strategies  | Key Activities 2022 – 2023  | KPI Measure  | Target   | Actual To-<br>date  | Progress and Accomplishments   |
|---|---|--|--|---|--|
| <ul> <li>2.1 Increase our understanding about the public and RDs and use learning to design communication and educational initiatives</li> <li>2.2 Enhance College consultation, outreach processes, and communication methods in a way that considers equity, diversity and inclusion, and right-touch regulation</li> <li>2.3 Refresh College branding and use communication methods that are engaging, accessible and meet the evolving needs of the public, members, and other groups we engage with</li> </ul> | <ul> <li>Develop data-based public<br/>awareness campaign</li> <li>Develop educational<br/>sessions/resources for members<br/>based on data</li> <li>Conduct gaps analysis for French<br/>language services</li> <li>Review College branding, website,<br/>key messaging</li> <li>Engage in a relational<br/>communications audit and create<br/>College style guide</li> <li>Increase social media presence</li> <li>Gather and consolidate internal<br/>data (including EDI – B data) and<br/>create strategy for engagement</li> </ul> | Public Awareness<br>RatingRelational<br>Communication<br>RatingIncrease in social<br>media followersIncreased web traffic<br>Public Protection &<br>Register sections# targeted<br>educational topics% satisfaction<br>educational sessions# priority documents/<br>processes/<br>webpages translated<br>into French | N/A<br>Baseline<br>in 2022<br>5%<br>increase<br>5%<br>increase<br>8<br>8<br>85%<br>Baseline<br>in 2022 | uarce16% BaselineMeasure(March 2022)N/A7%0%2 complete;3 in-progress95%N/A | <ul> <li>Rollout of refreshed public awareness campaign that includes advertising on digital screens in medical offices across Ontario, based on data from the public awareness baseline survey.</li> <li>Relational Communications Audit by consultant in progress. Staff training conducted in September.</li> <li>Launched French language gaps analysis. Data collection in progress.</li> <li>Social media presence has increased ahead of schedule.</li> <li>Three Educational Sessions for RDs complete/in-progress: 1) Reg Talks: Writing Goals for Self-Directed Learning for RDs in Ontario and 2) Reg Talks - Insulin Dose Adjustments for RDs in Ontario 3) Collaborative Anti-Racism and Equity Workshops (2-part series)</li> <li>Two Educational Sessions for RDs planned: 1) Reg Talks: Practicing Dietetics: What counts as a practice currency hour? and 2) CDO Annual Workshop - Consent is Not a Checklist: Exploring the Complexities of Consent</li> </ul> |

| Goal 3: Risk-Based and Right-Touch Regulation<br>The College will make decisions in accordance with a risk (harm reduction) framework.   |  |   |        |   |   |  |  |
|--|--|---|--------|---|---|--|--|
| Strategies   | Key Activities 2022 – 2023   | KPI Measure   | Target | 1 | Progress and Accomplishments  |  |  |
| <ul> <li>3.1 Develop risk-based and<br/>right-touch regulation tools<br/>and processes for College<br/>decision-making</li> <li>3.2 Align standards and<br/>resources for Registered<br/>Dietitians with risk-based,<br/>right-touch and EDI<br/>principles</li> <li>3.3 Leverage organizational data<br/>and external information to<br/>identify and act on areas of<br/>risk</li> </ul> | <ul> <li>Refresh the College's Risk<br/>Management Policy and<br/>Procedures</li> <li>Adopt an Equity Impact<br/>Assessment Framework</li> <li>Create new registrant guidelines:<br/>virtual care guideline, social media<br/>guidelines, definition of dietetics,<br/>Insulin guidelines, private practice<br/>guidelines</li> <li>Create schedule for College policy<br/>refresh and evaluation (includes<br/>Registration, Professional Practice,<br/>ICR)</li> <li>Conduct analysis and update<br/>College programs to reflect new<br/>ICDEPs</li> <li>Review internal program process<br/>and create/ update tools to get at<br/>risks (Registration, QA, ICR)</li> </ul> | # of regulatory<br>policies<br>created/updated<br>with EDI lens | 5      | 3 | <ul> <li>Policy 3-30: Currency for Applicants approved by the Registration<br/>Committee to recognize graduate studies to demonstrate currency of<br/>dietetic knowledge, skills, and competence. Revisions improve equitable<br/>access to registration.</li> <li>Position Statement and Practice Guidelines: Scope of Practice – Insulin<br/>Dose Adjustments for RDs approved. A public explanatory document for<br/>clients living with diabetes seeing a Dietitian for insulin dose<br/>adjustments has been developed with Citizen Advisory Group input.</li> <li>Practising Dietetics Policy was developed to help dietitians reflect on<br/>their practice and determine their currency hours given recent changes<br/>in dietetics practice, ensuring a right-touch, risk-based approach to<br/>currency.</li> <li>Completed Council Finance Policies on Investments, Financial<br/>Management and Reserve Fund, which ensures that CDO considers and<br/>mitigates risk in its stewardship of resources, has adequate resources to<br/>carry out strategic priorities and mandate and can ensure continuity of<br/>operations.</li> <li>Risk Management Policy approved by Council. Internal working group<br/>established to monitor and provide mitigation activities for risks.</li> <li>College programs are being adapted to reflect new ICDEPs. Completed:<br/>SDL Tool competency self-assessment; Learning Diary template and<br/>scoring card. In-progress: Registration program tools</li> <li>ICRC Risk Assessment Framework developed to ensure consistent, fair<br/>and transparent decision making guided by assessment of risk to public.</li> <li>Policies in progress include: QA - PPA Review, Social Media Standard<br/>and Guidelines, Virtual Care Standard and Guidelines.</li> </ul> |  |  |

| Goal 4: Governance Modernization and Enhancing Public Trust<br>The College will update its governance model in accordance with evidence-based practices.  |  |  |  |                   |  |  |  |
|---|--|--|--|-------------------|--|--|--|
| Strategies  | Key Activities 2022 – 2023   | KPI Measure  | Target                                     | Actual<br>To-date | Progress and Accomplishments   |  |  |
| <ul> <li>4.1 Implement governance<br/>initiatives that promote<br/>regulatory excellence,<br/>accountability and EDI<br/>principles</li> <li>4.2 Operationalize EDI in<br/>College processes, policies<br/>and decision making</li> </ul> | <ul> <li>Develop governance<br/>modernization action plan</li> <li>Develop/refine pre- and post-<br/>engagement<br/>council/committee/chair training</li> <li>Engage in a 3rd party council<br/>assessment</li> <li>Continue to finalize the<br/>governance manual</li> <li>Create Council and operational EDI<br/>plans and action recommendations<br/>from EDI report</li> </ul> | % of <u>Global Diversity</u> ,<br><u>Equity and Inclusion</u><br><u>Benchmarks</u> in<br>proactive,<br>progressive or best<br>practice categories<br>3 <sup>rd</sup> party council<br>assessment | Baseline in<br>2022<br>Baseline in<br>2022 | N/A<br>Complete   | <ul> <li>Third-party governance expert conducted a review of CDO's governance structure and processes, paving the way for a Council approved governance modernization action plan.</li> <li>Progress by Governance Committee include Council Elections, Council Competencies, and Role Terminology recommendations</li> <li>Council Code of Conduct updated with EDI-B lens.</li> <li>Orientations conducted for new members of committees.</li> <li>Council and committee member training completed on governance and conflict of interest.</li> <li>Council and staff learning needs assessment completed and EDI-B learning moments added to Council meetings.</li> <li>Training session on "Unsettling &amp; Trauma Informed Practices: An Indigenous Lens" planned for Council, Committee members and staff</li> <li>College assessors scoring the Registration Program's performance-based assessment received unconscious bias training.</li> <li>Council amended the Governance Committee's TOR to include EDI-B responsibilities related to supporting the CDO's EDI-B strategy.</li> <li>College EDI-B Lead Appointed and operational workplan created with EDI-B Working Group</li> <li>EDI-B Vision, Mission and Values developed and proposed to Council</li> </ul> |  |  |



# **Council Briefing Note**

| Topic:   | Updated Registrar Coverage Plan in the Event of an Extended Absence |
|----------|---|
| Purpose: | For Information and feedback  |
| From:    | Melanie Woodbeck, Registrar and Executive Director                  |

#### ISSUE

To review updates to the Registrar Coverage plan in the Event of an Extended Absence.

#### PUBLIC INTEREST RATIONALE

A coverage plan for various scenarios where the Registrar and Executive Director becomes temporarily or permanently unavailable ensures continuity of operations, programs and legislative activities which support the College's mandate of public protection.

#### BACKGROUND

The Registrar Coverage Plan was first reviewed by Council at its meeting on May 27, 2020.

#### FOR CONSIDERATION

An updated Coverage plan is attached for Council's information and feedback.

#### ATTACHMENTS

• Appendix 1: Registrar & Executive Director Coverage in the Event of an Extended Absence

# Registrar & Executive Director Coverage in the Event of an Extended Absence

The CDO Leadership Team is prepared to cover the Registrar and Executive Director's duties and ensure business continuity in the event of a limited absence of the Registrar for any reason. Continued coverage will depend on the length of the absence, absence reasons, and the ability of the Registrar to provide leadership and oversight during the absence.

**Level 1:** Short-term absence, approximately 1-month, where the Registrar is able to provide guidance or attend to some duties. The Registrar is still involved in major decision making and legislated tasks if possible.

# Procedure:

- 1. Registrar (or the Manager, Governance) to notify Executive Committee, Council, legal counsel and other stakeholders, consultants and vendors. The Registrar will keep current a list of stakeholders and their contact information for this purpose.
- 2. Registrar (or the Manager, Governance) directs staff to cover duties in accordance with the coverage schedule.
- 3. Committee and Council meetings should continue wherever possible and practicable. Legal counsel may attend meetings that are not postponed.

**Level 2:** 1-month or more, but not permanent. The Registrar may or may not be available to provide guidance or attend to some duties.

# Procedure:

In addition to steps 1 - 3, above, Council will appoint an Acting Registrar in accordance with s. 6.7 and 6.8 of the by-law, subject to an anticipated extended absence.

Executive Committee will meet to determine whether to recommend to Council the appointment of an Acting Registrar (this may involve the Registrar if available to contribute to this decision). The recommendation will be reported to Council, and if necessary, a special meeting of Council will be called. If an external recruitment is conducted, Council will decide in a timely manner on the recruitment process, which may require external recruitment support.

**Level 3:** Registrar permanently unavailable and not able to provide guidance or attend to any duties. An Acting Registrar, and subsequently, a Permanent Registrar needs to be appointed.

# Procedure:

In addition to steps 1 – 3 above, Executive Committee/Council will appoint an Acting Registrar as soon as possible. Legal Council will support the process of appointing an Acting Registrar and

will provide direction to staff and Council as needed. Council will also establish a search committee and seek external recruitment support to appoint a permanent Registrar.

# Coverage Schedule

| Finance                 |                        |  |  |  |  |
|-------------------------|------------------------|--|--|--|--|
| Tasks                   | Authorized individuals |  |  |  |  |
| Sign cheques            | President &            |  |  |  |  |
| Sign critical contracts | Vice-President         |  |  |  |  |

| Executive Committee  |                     |  |  |  |  |  |
|--|---------------------|--|--|--|--|--|
| Tasks  | Trained staff       |  |  |  |  |  |
| Schedule and support critical meetings, reschedule non-critical meetings | Manager, Governance |  |  |  |  |  |
| Keep Committee updated on situation                                      |                     |  |  |  |  |  |
| Contact person for Committee members                                     |                     |  |  |  |  |  |

| Council  |   |                        |  |
|--|---|------------------------|--|
| Tasks  | Trained staff                           | External support       |  |
| Staff contact for Council members  | Manager,                                | Legal counsel          |  |
| <ul> <li>Keep Council updated on situation<br/>(work with President)</li> <li>Develop agendas and draft minutes</li> </ul> | Governance                              |                        |  |
| <ul> <li>Arrange for legal counsel to be present<br/>at meetings</li> <li>Postpone non-critical activities</li> </ul>      |   |                        |  |
| <ul> <li>Support process for hiring Acting<br/>Registrar, if needed</li> </ul>   | Manager,<br>Governance &<br>Manager, HR | Professional Recruiter |  |

| Conduct: Inquiries, Complaints & Reports Committee, Discipline Committee & Fitness to |                     |  |
|---|---------------------|--|
| Practice Committee  |                     |  |
| Tasks   | Trained staff       |  |
| Arrange for legal counsel to review files, support panel                              | Case Manager &      |  |
| deliberations, review draft decisions and review information                          | Manager, Governance |  |
| to be posted on public register   |                     |  |
| Schedule and arrange cautions   |                     |  |

| Conduct: Legislative Role         |                       |  |
|-----------------------------------|-----------------------|--|
| Tasks                             | Authorized individual |  |
| Sign appointments of investigator | Acting Registrar      |  |

- Sign notices of hearing
- Suspend & revoke certificates of registration
- Impose/revoke terms, conditions & limitations

| Communications   |                |  |
|--|----------------|--|
| Task   | Trained staff  |  |
| Approve external communication materials               | Director,      |  |
| • Develop, publish and share messaging about Registrar | Communications |  |
| situation, as required                                 |                |  |

| HR   |               |                  |
|--|---------------|------------------|
| Task   | Trained staff | External support |
| Ensure safe work environment                           | Manager, HR   | Legal counsel    |
| <ul> <li>Manage staff and issues that arise</li> </ul> |               |                  |

| Registration   |               |                  |  |
|--|---------------|------------------|--|
| Task   | Trained staff | External support |  |
| <ul> <li>Issue certificates of registration</li> </ul> | Director,     | Legal counsel    |  |
| Arrange for legal counsel to assist with               | Registration  |                  |  |
| complex files  |               |                  |  |

| Quality Assurance   |                                    |                  |
|---|------------------------------------|------------------|
| Task  | Trained staff                      | External support |
| <ul> <li>Impose/remove terms, conditions &amp;<br/>limitations on certificates of registration</li> </ul> | Director,<br>Professional Practice | Legal counsel    |

| Network Meetings   |                        |  |  |
|--|------------------------|--|--|
| Groups   | Trained Staff          |  |  |
| <ul> <li>Health Profession Regulators of Ontario<br/>(HPRO)</li> </ul> | Manager, Governance    |  |  |
| The Dietetic Education Leadership Forum of<br>Ontario (DELFO)          | Director, Registration |  |  |
| <ul><li>Alliance</li><li>CDRE Administration Oversight</li></ul>       |                        |  |  |

# College of Dietitians of Ontario (CDO) Land Acknowledgement

College of Dietitians of Ontario

Council attachment 0.0

We acknowledge that the College of Dietitians of Ontario's office is located on the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples and is now home to many diverse First Nations, Inuit and Métis peoples. We also acknowledge that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

We are acknowledging the traditional keepers of these lands as part of a deeper commitment to Ontario's Indigenous communities. As provincial health regulators, we have a large role to play in reconciliation to meet the broader goal of public protection.

| <b>Mission</b><br>The College of Dietitians of Ontario regulates dietitians for public protection. | <b>Vision</b><br>The College of Dietitians of Ontario delivers regulatory excellence to<br>contribute to the health of Ontarians. |  |
|--|---|--|
| Values   |   |  |
| Integrity   Collaboration   Accountability   Transparency   Innovation                             |   |  |



# **Council Action List**

Council attachment 0.0

| Actions as of September 16, 2022 |   |   |             |   |
|----------------------------------|---|---|-------------|---|
| Meeting<br>Date                  | Agenda Item   | Action  | Status      | Notes   |
| <u>June 16,</u><br><u>2022</u>   | 10.0 Governance<br>Modernization with<br>Recommendations  | Develop a strategy for<br>implementing<br>governance<br>recommendations.  | In progress | Governance Committee<br>recommendations on September<br>Council agenda.   |
| <u>June 17,</u><br><u>2022</u>   | 6.0 Council Meeting<br>Evaluation   | Review the evaluation<br>form and consider<br>adding to future<br>Governance Committee<br>agenda.   | In progress | Executive Committee reviewed the<br>evaluation forms and will be<br>discussed at the September Council<br>meeting.  |
|                                  | 7.0 Annual Council and<br>Committee Surveys<br>and Needs Assessment   | Build in a teaching a<br>learning moment into<br>each Council meeting.<br>Schedule Council<br>training on trauma<br>informed approaches to<br>EDI-B and<br>decolonization | Complete    | Council participated in Anti-racism<br>and equity workshop with Future<br>Ancestors.<br>Additional workshops are either<br>scheduled or being scheduled for<br>fall 2022. |
|                                  | 18.0 Policy (Final) on<br>Determining Currency<br>Hours with Definition<br>of Practising Dietetics<br>Revisions | Publish policy on CDO<br>website and develop a<br>communication plan for<br>education to dietitians<br>and other relevant<br>system partners,<br>including the public.    | In progress | Education – RegTalks webinars<br>scheduled:<br>• September 19 from 12-1pm<br>• September 24 from 6-7pm<br>• September 27 from 1-2pm<br>• October 3 from 1-2pm             |
|                                  |   | Incorporate policy into<br>CDO publications and<br>program tools.   | In progress | Webpage created   |

| College of Dietitians of Ontario (CDO) Strategic Plan<br>2020 – 2024<br>For more information about the CDO's Strategic Plan, <u>visit our website</u>  |   |  | Council attachment 0.0   |  |
|--|---|--|--|--|
| Goal 1: Regulatory<br>Effectiveness &<br>Performance Measurement   | Goal 2: Transparent & Effective<br>Communications   | Goal 3: Risk-Based & Right<br>Touch Regulation   | Goal 4: Governance<br>Modernization & Enhancing<br>Public Trust  |  |
|  |   |  |  |  |
| The CDO will Measure and<br>Report our Regulatory<br>Performance to the Public   | The CDO will Communicate<br>Effectively to Support Understanding<br>of our Mandate, Services &<br>Resources   | The CDO will Make Decisions in<br>Accordance with a Risk (Harm<br>Reduction) Framework   | The CDO will Update its<br>Governance Model in<br>Accordance with Evidence-Based<br>Practices  |  |
|  | These four goals will be accomplished   | d through the following strategie  | 25:  |  |
| <ul> <li>Enhance IT systems and data<br/>governance to support data<br/>collection, analysis, reporting<br/>and security.</li> <li>Convey information about<br/>College effectiveness in clear,<br/>concise, transparent, and<br/>accessible reporting formats.</li> </ul> | <ul> <li>Increase our understanding about the public and RDs and use learnings to design communication and educational initiatives.</li> <li>Enhance College consultation, outreach processes, and communication methods in a way that considers equity, diversity and inclusion (EDI), and right-touch regulation.</li> <li>Refresh College branding and use communication methods that are</li> </ul> | <ul> <li>Develop risk-based and right-<br/>touch regulation tools and<br/>processes for College decision-<br/>making.</li> <li>Align standards and resources for<br/>Registered Dietitians with risk-<br/>based, right-touch and EDI<br/>principles.</li> <li>Leverage organizational data and<br/>external information to identify<br/>and act on areas of risk.</li> </ul> | <ul> <li>Implement governance initiatives<br/>that promote regulatory<br/>excellence, accountability and EDI<br/>principles.</li> <li>Operationalize EDI in College<br/>processes, policies and decision-<br/>making.</li> </ul> |  |
|  | engaging, accessible and meet the<br>evolving needs of the public, members,<br>and other groups we engage with.<br>Wission  | Vi   | sion   |  |
| The College of Dietitians of Ontario   | o regulates dietitians for public protection.   | contribute to the  | io delivers regulatory excellence to health of Ontarians.  |  |
|  | Valu<br>Integrity   Collaboration   Accounta  |  |  |  |



**COIs - Committee Appointees** 

#### Annual Conflict of Interest Declaration for Council and Committee Members

Council and committee members have a fiduciary duty to the CDO in which they must avoid situations where their personal, professional or financial interests or relationships conflict with their duties to the College. Council and Committee members should avoid situations where the duties they owe to the CDO may conflict with duties they owe to other organizations or individuals. The definition of 'conflict of interest', and obligations relating to conflicts of interest, are set out in CDO **By-law 1: General By-law**, Article 16:

#### **16.1 Definition of Conflict of Interest**

A conflict of interest exists if a reasonable person would conclude that a councillor or committee member's personal, professional or financial interest or relationship may affect his or her judgement, impartiality or the discharge of his or her duties to the College. A conflict of interest may be real or perceived, actual or potential, or direct or indirect.

#### 16.2 Duty to Avoid and Consult

Councillors and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a councillor or committee member is in doubt about whether he or she has or might have a conflict of interest, the councillor or committee member must consult with an appropriate person, for example the President, Registrar or legal counsel (if the conflict arises in a hearing setting).

#### **16.3 Process for Resolution of Conflicts**

If a councillor or committee member believes that he or she may have a conflict of interest in any matter relating to Council or committee business the councillor or committee member must consult with an appropriate person such as the President, Registrar or legal counsel (if the conflict arises in a hearing context). If there is any doubt as to whether a conflict exists the member must declare it to Council or the committee and accept the Council's or committee's decision as to whether a conflict exists. For adjudicative matters, a committee member should disclose the conflict at the earliest opportunity and in any case before the committee considers the matter.

A councillor or committee member who has a conflict of interest must:

a) before any consideration of the matter, disclose the fact that he or she has a conflict of interest,

b) not participate in any discussion of the matter,

c) not attend any meeting of part or part of a meeting involving the matter, and

d) not vote on the matter, or influence or try to influence the vote.

#### 16.4 Undeclared Conflict

If a councillor or committee member believes another councillor or committee member has not declared a conflict of interest (despite information notification or inquiry) the councillor or committee member who has that belief must advise an appropriate person such as the president, Registrar or legal counsel (if the conflict arises in a hearing context). If Council or a committee chair concludes that a councillor or committee member respectively has an undeclared conflict of interest, Council or the chair may direct the councillor or committee member to immediately comply with clauses (b), (c and (d) of section 16.3.

□ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

□ I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

☑ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

I work as a long-term care homes inspector for the Ministry of Long-Term Care. The ministry is aware and has provided me with restrictions to prevent any possible conflict of interest. This information was provided to the College on 11/02/22

I<sup>Barbara Grohmann</sup> have read the Council Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Orginal signed by Barbara Grohmann>

June 21, 2022 | 11:04:51 AM EDT

Signature

□ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Barbara Major-McEwan

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

## DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Barbara Major-McEwan>

June 17, 2022 | 7:02:19 AM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

☑ I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Cindy Tsai

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- □ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Cindy Tsai>

June 22, 2022 | 10:27:17 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

☑ I **do not** have any conflicts of interest to declare.

#### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Jane Lac, RD

\_\_\_have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Jane Lac>

August 1, 2022 | 10:02:21 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

#### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Hannah Chan

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Hannah Chan>

August 2, 2022 | 9:16:36 AM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

#### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Khashayar Amirhosseini

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Khashayar Amirhosseini>

June 14, 2022 | 5:35:08 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

#### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Laura Bjorklund, RD

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Laura Bjorklund>

July 29, 2022 | 5:23:14 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

#### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Ruchika Wadhwa

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- □ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Ruchika Wadhwa>

June 14, 2022 | 6:50:16 PM EDT

Signature



# Annual Conflict of Interest Declaration for Council and Committee Members

Council and committee members have a fiduciary duty to the CDO in which they must avoid situations where their personal, professional or financial interests or relationships conflict with their duties to the College. Council and Committee members should avoid situations where the duties they owe to the CDO may conflict with duties they owe to other organizations or individuals. The definition of 'conflict of interest', and obligations relating to conflicts of interest, are set out in CDO **By-law 1: General By-law**, Article 16:

#### 16.1 Definition of Conflict of Interest

A conflict of interest exists if a reasonable person would conclude that a councillor or committee member's personal, professional or financial interest or relationship may affect his or her judgement, impartiality or the discharge of his or her duties to the College. A conflict of interest may be real or perceived, actual or potential, or direct or indirect.

#### 16.2 Duty to Avoid and Consult

Councillors and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a councillor or committee member is in doubt about whether he or she has or might have a conflict of interest, the councillor or committee member must consult with an appropriate person, for example the President, Registrar or legal counsel (if the conflict arises in a hearing setting).

#### **16.3 Process for Resolution of Conflicts**

If a councillor or committee member believes that he or she may have a conflict of interest in any matter relating to Council or committee business the councillor or committee member must consult with an appropriate person such as the President, Registrar or legal counsel (if the conflict arises in a hearing context). If there is any doubt as to whether a conflict exists the member must declare it to Council or the committee and accept the Council's or committee's decision as to whether a conflict exists. For adjudicative matters, a committee member should disclose the conflict at the earliest opportunity and in any case before the committee considers the matter.

A councillor or committee member who has a conflict of interest must:

a) before any consideration of the matter, disclose the fact that he or she has a conflict of interest,

b) not participate in any discussion of the matter,

c) not attend any meeting of part or part of a meeting involving the matter, and

d) not vote on the matter, or influence or try to influence the vote.

#### 16.4 Undeclared Conflict

If a councillor or committee member believes another councillor or committee member has not declared a conflict of interest (despite information notification or inquiry) the councillor or committee member who has that belief must advise an appropriate person such as the president, Registrar or legal counsel (if the conflict arises in a hearing context). If Council or a committee chair concludes that a councillor or committee member respectively has an undeclared conflict of interest, Council or the chair may direct the councillor or committee member to immediately comply with clauses (b), (c and (d) of section 16.3.

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Ana Djalilvand

\_\_\_have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- □ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Ana Djalilvand>

June 15, 2022 | 2:12:24 PM EDT

Signature

□ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

□ I **do not** have any conflicts of interest to declare.

OR

☑ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization                    | Role                     |
|---------------------------------|--------------------------|
| Huron Perth Healthcare Alliance | Manager                  |
| The Local Community Food Center | Volunteer Board Director |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Ann Watt

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Ann Watt>

June 16, 2022 | 4:09:23 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Denis Tsang

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Denis Tsang>

June 14, 2022 | 4:25:41 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Donna Hennyey

\_\_\_have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Donna Hennyey>

June 14, 2022 | 5:13:43 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

☑ I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Julie Slack

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Julie Slack>

June 14, 2022 | 5:19:30 PM EDT

Signature

□ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Karine Dupuis Pominville

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

### DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Karine Dupuis Pominville>

June 20, 2022 | 5:02:59 AM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Kerri LaBrecque

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

**\*To be completed by public council members only.** Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.

- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- ☑ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Kerri LaBrecque>

June 17, 2022 | 3:47:51 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Lesia Kicak

\_\_\_have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Lesia Kicak>

June 15, 2022 | 3:49:57 PM EDT

Signature



# Annual Conflict of Interest Declaration for Council and Committee Members

Council and committee members have a fiduciary duty to the CDO in which they must avoid situations where their personal, professional or financial interests or relationships conflict with their duties to the College. Council and Committee members should avoid situations where the duties they owe to the CDO may conflict with duties they owe to other organizations or individuals. The definition of 'conflict of interest', and obligations relating to conflicts of interest, are set out in CDO **By-law 1: General By-law**, Article 16:

### 16.1 Definition of Conflict of Interest

A conflict of interest exists if a reasonable person would conclude that a councillor or committee member's personal, professional or financial interest or relationship may affect his or her judgement, impartiality or the discharge of his or her duties to the College. A conflict of interest may be real or perceived, actual or potential, or direct or indirect.

### 16.2 Duty to Avoid and Consult

Councillors and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a councillor or committee member is in doubt about whether he or she has or might have a conflict of interest, the councillor or committee member must consult with an appropriate person, for example the President, Registrar or legal counsel (if the conflict arises in a hearing setting).

### **16.3 Process for Resolution of Conflicts**

If a councillor or committee member believes that he or she may have a conflict of interest in any matter relating to Council or committee business the councillor or committee member must consult with an appropriate person such as the President, Registrar or legal counsel (if the conflict arises in a hearing context). If there is any doubt as to whether a conflict exists the member must declare it to Council or the committee and accept the Council's or committee's decision as to whether a conflict exists. For adjudicative matters, a committee member should disclose the conflict at the earliest opportunity and in any case before the committee considers the matter.

A councillor or committee member who has a conflict of interest must:

a) before any consideration of the matter, disclose the fact that he or she has a conflict of interest,

b) not participate in any discussion of the matter,

c) not attend any meeting of part or part of a meeting involving the matter, and

d) not vote on the matter, or influence or try to influence the vote.

### 16.4 Undeclared Conflict

If a councillor or committee member believes another councillor or committee member has not declared a conflict of interest (despite information notification or inquiry) the councillor or committee member who has that belief must advise an appropriate person such as the president, Registrar or legal counsel (if the conflict arises in a hearing context). If Council or a committee chair concludes that a councillor or committee member respectively has an undeclared conflict of interest, Council or the chair may direct the councillor or committee member to immediately comply with clauses (b), (c and (d) of section 16.3.

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Douglas Ellis

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

# DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Douglas Ellis>

June 24, 2022 | 6:56:05 PM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

☑ I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

ISRAEL OGBECHIE

\_\_have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Israel Ogbechie>

June 20, 2022 | 12:34:17 AM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

John Regan

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by John Regan>

June 26, 2022 | 8:10:46 AM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Ray D'Sa

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Ray D'Sa>

June 17, 2022 | 6:51:09 AM EDT

Signature

□ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Santhikumar Chandrasekharan

have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Santhikumar Chandrasekharan>

June 23, 2022 | 7:29:42 AM EDT

Signature

☑ I have not held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

 $\boxtimes$  I **do not** have any conflicts of interest to declare.

### OR

□ I have an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

| Organization | Role |
|--------------|------|
|              |      |
|              |      |

□ I have an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

Sharanjit Padda

\_\_\_have read the Council Code of Conduct, the

CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Council President (or Registrar) immediately and prior to participating further in any ongoing Council and/or Committee discussion, correspondence, or business; and will also advise Council at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Council and/or committee meetings should they arise.

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- ☑ I have not been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.
- □ I have been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:

<Original signed by Sharanjit Padda>

June 15, 2022 | 4:05:08 PM EDT

Signature