



College of Dietitians of Ontario

annual report

2007/2008

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

We are dedicated to the ongoing enhancement of safe, ethical and competent nutrition services provided by Registered Dietitians in their fields of practice.

Results-Based Accountability



Cecily Alexander, RD
President



Mary Lou Gignac, MPA
Registrar & Executive Director

The College of Dietitians of Ontario, like all health professions regulatory colleges, is empowered by the Ontario Provincial Government to regulate the profession of dietetics in the interest of all people in Ontario. This delegation of authority is made through the *Regulated Health Professions Act* and the *Dietetics Act*, which set out our College objects, structure, procedures and our accountability mechanisms. With successive amendments to the RHPA, accountability has become a major focus of the provincial government and its agencies - the Health Professions Regulatory Advisory Council, the Health Professions Appeal and Review Board and the Office of the Fairness Commissioner. These agencies have increasingly become involved in the oversight of how regulatory colleges are carrying out their delegated authority.

In response to increasing demands for accountability, the College has created the *Results-based Management Accountability Framework (RMAF)*, which has two primary purposes:

1. Accountability

Demonstrate, in concrete terms, to internal and external stakeholders, that the College is fulfilling its regulatory obligations and its public protection mandate through effective regulatory and business practices.

2. Responsible Management

Manage our programs, services and products efficiently by monitoring results and identifying areas that need improvement.

A significant aspect of the RMAF project was mapping the five major College programs: Patient Relations; Standards & Compliance; Practice Advisory, Quality Assurance and Registration. The RMAF Logic Model (Table, page 13) shows how these CDO programs interrelate. It shows how their strategic goals, activities, outcomes and indicators are all aligned with the College's ultimate purpose which is to work in the public interest by regulating and supporting dietitians to offer safe, ethical and competent nutrition services. Performance measures have been developed for each of these programs to help us monitor our performance in key areas related to our regulatory mandate. In this year's annual report, the program highlights show only four program areas (page 20); next year, using our new RMAF plan, the Patient Relations Program will be added.

Apart from the RMAF project, there were other notable accomplishments in 2007/08. A key strategic direction set out in 2006/07 was to support RDs in all areas of dietetic practice. This work has begun through initiatives such as:

- developing three formats of the *Jurisprudence Knowledge and Assessment Tool (JKAT)*;
- laying the foundation for practice assessments specific to individual practice-areas;
- publishing a greater variety of *résumé* articles;
- embarking on the development and interpretation of standards for different areas of dietetic practice, a project which will continue with collaborative effort and input from RDs in Ontario.

Other significant accomplishments in 2007/08 included the IDEAS workshop where the College listened to and is acting on feedback from RDs about practice issues in Ontario. The College newsletter, *résumé*, also received a fresh look.

Within our new accountability framework, CDO will continue to monitor and evaluate programs that regulate and support RDs to provide safe, ethical and competent nutrition services to the Ontario public. The increasing accountability to government complements our commitment to be accountable to the moral owners of the College — the people in Ontario and Registered Dietitians.

Results-based Management Accountability Framework - Logic Model

www.cdo.on.ca > About the College Strategic Planning & Goals: RMAF

	Patient Relations	Standards & Compliance	Practice Advisory	Quality Assurance	Registration
PROGRAMS	Provides information and services to support the public's access to RDs and CDO's services (Outputs 1, 2, 3, 5)	Develops and maintains programs to assist individuals to exercise their rights under the RHPA and to ensure that RDs practice competently and ethically in keeping with standards and laws. Ensures a fair, effective, transparent and legal way to handle issues of conduct, competency/fitness to practice in keeping with the RHPA. It relates to the Discipline Committee, the Fitness to Practice Committee and the Complaints Committee. It works with Patient Relations to prevent and address sexual abuse of patients. (Outputs 2, 3, 4, 5)	Supports compliance with standards by providing advice, assistance and education to members on practice issues such as laws, ethics and regulations. It provides one-to-one support to members, practice articles in résumé, workshops and presentations and online resources (Output 5)	Provides tools and services that help RDs meeting their obligations under the Quality Assurance Regulation. The principal focus is to provide tools and services to assist RDs in self assessment and professional development and for the purpose of practice/peer reviews and practice enhancement. The other focus includes the collection, analysis and dissemination of information. (Outputs 2, 3, 5, 6, 7)	The primary goal is to ensure that only qualified and competent people become RDs in Ontario and only CDO members use the RD title and that registration practices are fair, objective, transparent and impartial. It ensures the College has accurate information and financial resources to regulate and support RDs in the interest of the public. The other focus is CDO's collaborative work to increase the supply of RDs by expanding practical training opportunities in Ontario. (Outputs 2, 3, 7, 8, 9)
OUTPUTS	1. Education and communication tools for the public and employment settings. (Outcomes A, B, C, D) 2. Policies, regulations, standards, and guidelines developed and maintained (Outcome E)	3. Fair, effective, transparent and legal way to handle issues of conduct, competency/fitness to practice in keeping with the Regulated Health Professions Act, 1991. (Outcomes C, D) 4. CDO Regulatory Standards Framework ▲	5. Education and communication tools for RDs (Outcome F)	6. Mandatory tools for all areas of dietetic practice that assess and enhance RDs' continued competence (Outcomes E, F)	7. Registration and annual renewal of qualified people. Annual submission of SDL Tools (Outcomes E,G) 8. RD Title Protection (Outcome H) 9. HHR Planning Reports and Dissemination of Information (Outcome I)
OUTCOMES	A. Public understands the public protection role of CDO ■ B. Public is aware that RDs are regulated experts in nutrition ■ C. Public accesses services of CDO ■	D. RDs, the public, and relevant government bodies feel that proceedings are transparent, fair and effective ● E. RDs are competent and comply with policies, regulations, laws, standards, and guidelines ● ▲	F. RDs feel supported in their practice ▲		G. The Public and Staff have access to accurate and reliable information on the Register of RDs. ■ H. Only CDO members use RD title ■ I. Increased supply of RDs ■
LONG TERM OUTCOMES	■ Support the public's access to the services of Registered Dietitians	● Ensure effective compliance with CDO standards	▲ Develop CDO Regulatory Standards Framework	▲ Support CDO membership in providing safe, competent and ethical practice	
Public Protection Safe, ethical and competent nutrition services by RDs					

Quality Assurance Program

\$315,000 (24% of CDO Total Expenditures)

- Supported members in learning about the laws, regulations, standards and guidelines that affect RDs by launching the JKAT in January 2008. The 2051 RDs who completed the tool now have the knowledge and skills to apply jurisprudence to their practice.
- Completion of the SDL Tool ensures that RDs reflect on practice, continue to learn and apply the learning in their practice. A record 94.5% of RDs completed the tool online in 2007, a 3.7% increase from 2006 (90.8%) resulting in continued improvement in program efficiency and delivery.
- Through the development of a framework for a new practice assessment program, CDO is strengthening its QA tools to be more relevant to RDs in all areas of dietetic practice, thereby fulfilling public protection mandate and supporting members to be safe, competent and ethical.

Practice Advisory Program

\$462,000 (34% of CDO Total Expenditures)

- Supported members in providing safe, competent and ethical service, by responding to 367 inquiries about practice and ethical issues. This represented a 35% increase from the previous year (2006/2007 = 271).
- 10% of College members participated in the IDEAS Consultation Series. RD discussion of practice issues generated a wealth of information for future development of College educational programs and tools.
- The second edition of the *Jurisprudence Handbook for Dietitians in Ontario* was published in January 2008 to support members in completing the JKAT and facilitate learning about the laws, regulations, and standards that affect their practice.
- Educated members about key professional practice issues by publishing articles in *résumé* regarding liability and collaborative care (Summer and Fall 2007, Winter 2008), record keeping (Spring and Fall 2007), and medical directives (Winter 2008).

Program Highlights 2007/08

Standards & Compliance

\$208,000 (15% of CDO Total Expenditures)

- Fulfilling its public protection mandate, the College investigated 2 new complaints and four new reports. Through these investigative processes the College assists individuals to exercise their right under the *Regulated Health Professions Act*, and ensures that RDs are competent and comply with the policies, regulations, laws, standards, and guidelines that apply to their practice.
- The College held two hearings dealing with allegations of professional misconduct and incapacity.
- Held consultation meetings with dietitians in different areas of dietetic practice about potential conflict of interest and advertising regulations.

Registration Program

\$357,000 (27% of CDO Total Expenditures)

- The total CDO membership increased by 99 members (4%).
- Trends in registration include a 25% increase in male members (40 to 50 RDs) who now represent 1.8% of Ontario RDs.
- 166 candidates wrote the Canadian Dietetic Registration Examination to validate the competence.
- Efficiency of program administration and services increased with the introduction of online receipts and a 5% increase in online registration renewals (72% in 2006 to 77% in 2007).

TOTAL 2007/08 CDO EXPENDITURE \$1,341,540

Distribution of College Funds to Programs

Costs allocated to programs include specific program administration and the proportional allocation of general administration costs such as governance, general management, information systems, office supplies, rent, and communications (e.g. website, resume, annual report). While, there have been consistent patterns of expenditure over the past 3 years, the percentage cost for each program varies annually reflecting planned program activities.

Executive Committee

President & Chair

Cecily Alexander RD

Vice-President

Elizabeth Wilfert

Public Appointee

Member

Fiona Press RD

The Executive Committee acts for Council between Council meetings. It has all the powers of Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke regulations or by-laws. The executive committee met eleven times in 2007/08. Committee activities included:

- Monitored issues relating to the Essential Competencies and gave the Registrar & Executive Director direction relating to external communications.
- Approved CDO support for the IDPP program's request for funding from the Ministry of Culture and Citizenship.
- Gave the Registrar & Executive Director direction to hire a consultant to review the proposed expanded scope of practice for nurses.
- Reviewed the HPRAC consultation report on Scope of Practice and Controlled Acts
- Worked with an external consultant to assess the Registrar & Executive Director's compensation and performance indicators for Council review and approval.

In keeping with the *Regulated Health Professions Act*, the Executive Committee reviews referrals from the Registrar & ED, the Complaints Committee and the Quality Assurance Committee and approves the Registrar & ED's appointment of investigators for professional misconduct or incompetence. Seven reports were addressed (3 carried from 06/07 and 4 new).

- 1 report was referred to the Fitness to Practice Committee
- 1 report was referred to the Discipline Committee
- 2 cautions were issued
- 3 reports required no action



Complaints Committee

Chair

Laurel Hoard, RD

Professional Members

Jane Dummer, RD

Fiona Press, RD

Laura West, RD

Public Appointees

Harpal Buttar

Carole Wardell

The *Regulated Health Professions Act* requires the College to follow a process to receive complaints concerning members' professional conduct, competence or fitness to practice. This process is designed to ensure procedural consistency and fairness to both the complainant and the member.

The Complaints Committee considered five complaints from April 1, 2007 to March 30, 2008 (2 new complaints and 3 carried over from the previous fiscal period):

- The Committee directed the Registrar & ED to conduct 2 formal investigations:
 - 1 investigation is still ongoing
 - 1 written caution was delivered
- 3 complaints required no further action

Discipline Committee

Chair

Francis Omoruyi
Public Appointee

Professional Members

Jane Dummer RD
Terry Koivula RD
Irene Lees RD
Nichole Carnochan RD

Public Appointees

Harpal Buttar
Edith Brown

The Discipline Committee is responsible for holding hearings about allegations of professional misconduct or incompetence by members. Matters requiring a discipline hearing are referred to the committee by the Executive or Complaints Committee. During a disciplinary procedure, the Discipline Committee, in consultation with its lawyer, provides a fair process for hearing evidence and determining member conduct. The Discipline Committee determines an appropriate action in order to protect the public in keeping with the *Regulated Health Professions Act* and regulations under the *Dietetics Act*. Discipline hearings are normally open to the public and a report of discipline decisions must be featured in the annual report.

For the 2007/2008 fiscal year, there was one referral to the Discipline Committee. A hearing was held to consider a joint submission from the member and the College. The submission of guilt was accepted by the panel and a summary of the discipline hearing was published in *résumé*.

In order to maintain committee readiness for the disciplinary process, members of the committee attended workshops on the disciplinary process held by the Federation of Health Regulatory Colleges of Ontario.

Fitness to Practice Committee

Chair

Francis Omoruyi
Public Appointee

Professional Members

Jane Dummer RD
Terry Koivula RD
Irene Lees RD
Nichole Carnochan RD

Public Appointees

Harpal Buttar
Edith Brown

The Fitness to Practice Committee provides a fair review of all matters regarding the potential incapacity of members to practice safely. Due to physical, mental or emotional reasons, or perhaps due to substance abuse, members suspected of incapacity are referred to the Fitness to Practice Committee by the Executive Committee, which will appoint a Board of Inquiry to investigate cases of suspected incapacity. After reviewing the report from the Board, the Executive Committee may refer the member to the Fitness to Practice Committee for an incapacity hearing. Based on the evidence given at the hearing, the Fitness to Practice Committee makes a finding about capacity, and may either move to revoke or suspend the member's Certificate of Registration or impose terms, conditions and limitations on the Certificate of Registration.

For the 2007/2008 fiscal year, there was one referral to the Fitness to Practice Committee. A hearing was held to consider a joint submission from the member and the College. Incapacity as defined in the *Regulated Health Professions Act* was confirmed and the Fitness to Practice Panel accepted the joint resolution that was submitted.

Quality Assurance Committee

Chair

Fiona Press, RD

Professional Members

Nicole Carnochan RD

Laurel Hoard RD

Laura West RD

Sharon Zeiler RD

Daniela Catallo RD

Public Appointees

Elsie Petch

Carole Wardell

Elizabeth Wilfert

The *Regulated Health Professions Act* mandates the College's Quality Assurance (QA) Committee to identify quality standards which promote excellent dietetic care and to make program proposals to Council for implementation through the College.

The QA committee held a total of seven face-to-face meetings and two teleconferences. Its activities included:

- Oversight of the first administration of the *Jurisprudence Knowledge and Assessment Tool (JKAT)*, to more than 2000 eligible members by approving policies and procedures to ensure fair administration of the JKAT and initiated an evaluation plan for the JKAT.
- Approval of a consultation process to get input from members of the College which was used to further the revision of the Colleges Practice Assessment (PA). The committee used the findings to build on the work done last year on the model development. Broad concepts on method and content for a PA were added to the work done on assumptions, goals and guiding principles for the revised PA.
- Based on the research and CDO member consultations, approval of a PA model that uses multi-source feedback surveys and behavioral-based interviews administered by peer assessors based on criteria from the *Essential Competencies for Dietitians in Canada, 2006*. A request for proposals was approved for a consultant to develop and validate tools for a competency based PA.
- Attendance to the *National Continuing Competence Conference* in Toronto in November 2007 by four committee members. The committee committed to improving their knowledge about continuing competence by adding an education component to their meetings which is a review journal articles and other relevant resources.
- Revision of the *Quality Assurance Regulation* because of the *Health Systems Improvement Act (HSIA), 2007*, which comes into force in June 2009. Working with legal counsel and the *Registrar & Executive Director* of the College, the Committee revised the QA Regulation and circulated it to members and other stakeholders for their feedback
- Initiation of a review of the *Self-Directed Learning Tool* to explore the need for revisions in view of the *Essential Competencies for Dietitians in Canada, 2006* and to make sure the Tool is in keeping with the latest research on self assessment.



Patient Relations Committee

Chair

Sue Skopelianos RD

Professional Members

Cecily Alexander RD

Fiona Aris RD

Sharon Zeiler RD

Public Appointees

Francis Omoruyi

Elsie Petch

Jeannine Roy-Poirier

The *Regulated Health Professions Act* requires regulatory colleges to have a Patient Relations Program for preventing or dealing with abuse of patients. The College of Dietitians of Ontario has a zero tolerance policy for any form of patient abuse. The Patient Relations Committee will coordinate requests for funding for therapy and counselling should any patient suffer sexual abuse by a member of the College. The Patient Relations Committee will help provide member education about patient relations, guidelines for the professional conduct of members with their patients, training for the College's staff and information to the public. The Patient Relations Committee met three times in 2007/08. The Committee:

- Approved and reviewed the Committee terms of reference;
- Participated in a gap analysis comparing College information elements to those recommended by *Health Professions Regulatory Advisory Council* for patient relations programs;
- Reviewed *Health Professions Regulatory Advisory Council* requirements and CDO accomplishments in terms of patient relations and public education. Confirmed that management will be responsible for maintaining the website and other publications for the public and membership. The Committee will focus on developing a public education strategy.

Registration Committee

Chair

Linda Hines, RD

Professional Members

Cecily Alexander, RD

Irene Lees, RD

Jane Dummer, RD

Carolyn Lordon, RD (from June 2007 to August 2007)

Public Appointees

Jeannine Roy-Poirier

Don Evans (to June 2007)

Elizabeth Wilfert

Carole Wardell (from June 2007)

Edith Brown (from Sept. 2007)

If the Registrar & ED has doubts about whether applicants have met registration requirements, the Registration Committee receives referrals under section 15 of the *Regulated Health Professions Act*. This year, the Committee:

- Reviewed 59 applications;
- Revised procedures and created new tools to increase efficiency in preparing and reviewing applicant files and writing decisions.
- Revised upgrading submission and supervision guidelines and *Canadian Academic & Practical Training* submission and supervision guidelines.
- Revised the *Educational Summary Form*;
- Explored methods of completing academic assessments;
- Revised the list of approved courses for applicants needing upgrading and Canadian content to complete requirements for registration.
- Began a review of the registration regulation.
- Provided input into the content and format of reports to the Ontario Fairness Commissioner.
- Created a new policy to define the minimum number and type of members needed to make a decision on an application.
- Begun revision of several policies related to internationally educated applicants and assessment of continuing education requirements.

Registration Statistics

TOTAL RDS REGISTERED (MAR 31/08) 2821

Female: 2,771 98.0% Male: 50 2.0%

TOTAL APPLICATIONS 203

Professional Corporation 1
 Canadian Educated Applicants 157
 Internationally Educated Applicants 46

Total Admitted 174

Resignations 56
 Retired 17
 Suspended 2

NET GROWTH 99 RDS

APPLICATIONS REFERRED TO THE REGISTRATION COMMITTEE

The Registration Committee made decisions on referrals from 2007/08 and previous years. Some referrals were carried forward into the next fiscal year:

2007/08 — 59 referrals
 2006/07 — 56 referrals
 2005/06 — 54 referrals

Decisions

Admitted — 46
 More Training Required — 21
 Refused — 5

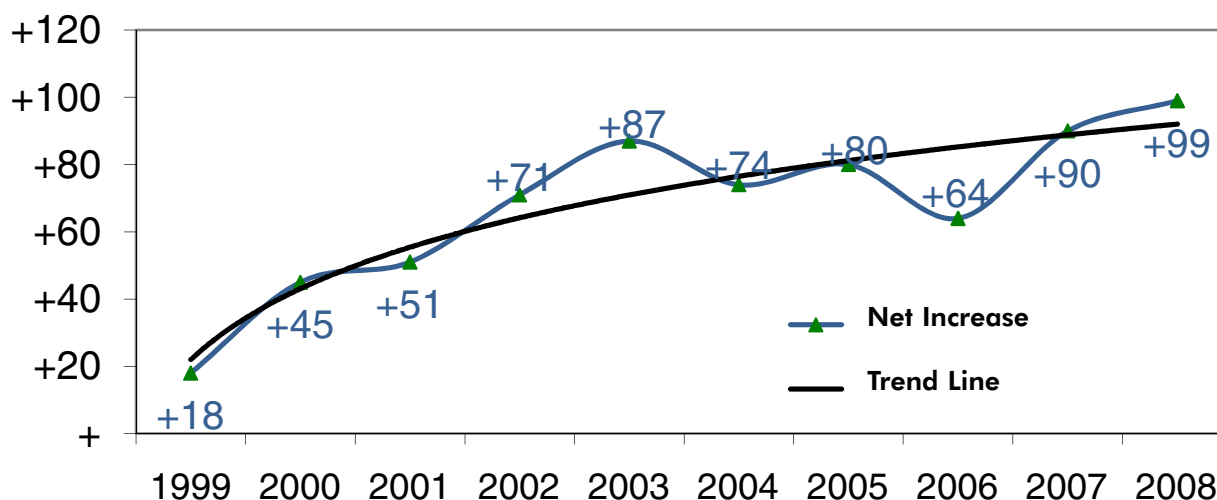
NUMBER OF RDS BY DISTRICT

DISTRICT	TOTAL	GENERAL MEMBERS	TEMP. MEMBERS
1 South Western	336	334	2
2 Central Western	551	547	4
3 Central Eastern	1,238	1,218	20
4 Eastern	402	398	4
5 North Eastern	114	112	2
6 North Western	64	60	4
7 Out of Province	49	49	0
8 Out of Country	67	65	2
	2,821	2,783	38
		98.7%	1.3%

EMPLOYMENT STATUS FOR GENERAL MEMBERS ONLY

ACTIVE (employed)	NON-ACTIVE (unemployed)
319	17
526	25
1,186	52
387	15
109	5
61	3
59	6
39	12
2,686	135
95.2%	4.8%

GROWTH IN THE NUMBER OF RDS 1999-2008



Area of Practice

DISTRIBUTION OF RDs BY DISTRICT AND AREA OF PRACTICE

District	Clinical/ one-to-one	Food & Nutrition Management	Sales & Marketing	Policy Development & Program Planning	Clinical Nutrition Management	Education & Research	Other
1	218	37	10	56	30	73	53
2	351	52	38	114	43	135	77
3	740	154	99	219	112	354	192
4	249	43	20	84	31	95	66
5	82	12	2	17	11	18	12
6	40	7	4	11	9	13	8
Total	1,680	305	173	501	236	688	408
	42.1%	7.6%	4.3%	12.6%	5.9%	17.2%	10.2%

Members, in Ontario, that have more than one area of practice, approximately: 935

Work Settings

1 Hospital including rehabilitation centres	31.01%
2 Chronic care/LTC residence, group home, home for the aged	13.45%
3 Business, including food industry & retail	10.29%
4 Private practice and counselling	8.19%
5 Community Health centre, agency, clinic, elementary and secondary schools	7.86%
6 Public Health department	6.76%
7 University / Community College	4.21%
8 CCAC/ Home Care program or agency serving the CCACs	3.78%
9 Other	3.42%
10 Government agency	3.14%
11 Professional Service	1.74%
12 Non-gov/Not-for-Profit	1.71%
13 Research Facility	1.12%
14 Occupational Health/Corporate Wellness	1.07%
15 Private Health Care	0.84%
16 Professional Assoc	0.59%
17 Recreational Facility	0.54%
18 Correctional Institute	0.15%
19 Regulatory Body	0.13%
TOTAL	100.00%

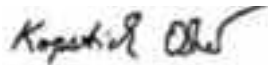
College of Dietitians of Ontario

Auditors' Report

To the Council of the College of Dietitians of Ontario.

We have audited the financial statements of the *College of Dietitians of Ontario* as at March 31, 2008 in accordance with Canadian generally accepted auditing standards and expressed an unqualified opinion about these statements in our report of July 30, 2008.

The information presented in the accompanying *Condensed Statement of Operations and Changes in Fund Balances* is derived from the above mentioned financial statements and in our opinion presents fairly the information therein.



Kopstick Osher
Chartered Accountants, LLP

TORONTO, ONTARIO
July 30, 2008

Copies of the 2008 audited financial statements are available upon request.

CONDENSED STATEMENT OF OPERATIONS AND CHANGES IN FUND BALANCES FOR THE YEAR ENDED MARCH 31, 2008

	2008	2007
Revenue		
Membership fees	\$ 1,397,872	\$ 1,344,036
Other income	140,525	55,897
	1,538,397	1,399,933
Expenses		
Salaries and benefits	674,803	645,262
Contracted services	49,306	60,405
Council and committee expenses	102,851	147,282
Communication Initiatives	69,706	59,411
Administration	269,784	267,712
Professional services	97,564	50,998
Amortization	77,526	75,332
	1,341,540	1,306,402
Revenue over Expenses	196,857	93,531
Fund balances, beginning of year	1,159,374	1,065,843
Fair value adjustment to investments ¹	(39,744)	-
Fund balances, end of year	\$ 1,316,487	\$ 1,159,374

Allocation of Fund Balances As at March 31, 2008

	2008	2007
Investment in capital assets	\$ 270,707	\$ 316,986
Internally restricted ²	771,636	837,169
Unrestricted	274,144	5,219
Fund balances, end of year	\$ 1,316,487	\$ 1,159,374

1. In accordance with new standards recommended in the *Canadian Institute of Chartered Accountants (CICA) Handbook on financial instruments standards* (Sections 3855 and 3861), the College's investments are classified as available for sale and are recorded at fair value (effective April 1, 2007). Fair values are estimated using quoted market prices. The adjustment changes the value of the investments on the Statement of Financial Position to the fair value.

2. Internally restricted funds are reserved for:

- Strategic planning initiatives
- Future hearings
- Therapy and counselling of sexually abused patients
- Development of programs

These funds are not available for other purposes without the approval of Council.

College Council 2007/2008

Executive Committee



Cecily Alexander, RD
President



Elizabeth Wilfert
Vice-President



Irene Lees, RD



Harpal Buttar



Edith Brown



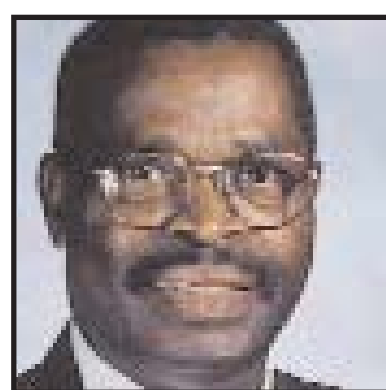
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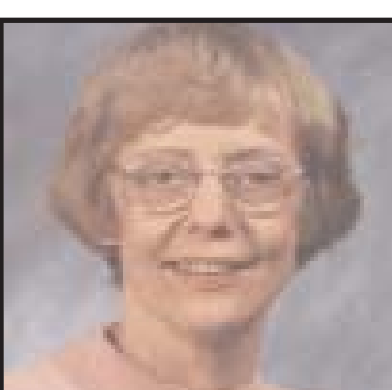
Non-Council Members 2007/08



Laura Bewick, RD



Nicole Carnochan, RD



Linda Hines, RD



Susan Skopelianos, RD

Picture not shown
Fiona Aris, RD

Staff 2008

Mary Lou Gignac, MPA
Registrar &
Executive Director

Sarah Ahmed, CMA — Controller

Sue Behari McGinty MHS., RD — Quality Assurance Program Manager

Carolyn Lordon, MSc., RD — Registration Program Manager

Deborah Cohen MHS., RD — Practice Advisor & Policy Analyst

Heena Vyas — Registration & IT Coordinator

Antiope Papageorgiou, MA — Quality Assurance & Information Coordinator

Monique Poirier, MA — Executive Office & Communications Coordinator

Bev Nopra — Administrative Assistant

Elsene Randall — Program Assistant