



College of Traditional Chinese Medicine
Practitioners and Acupuncturists of Ontario
Ordre des praticiens en médecine traditionnelle
chinoise et des acupuncteurs de l'Ontario

COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

PUBLIC AGENDA

Council Meeting

Wednesday, June 12, 2024

9:00 a.m. – 2:50 p.m.

705-55 Commerce Valley Drive West, Thornhill, Ontario

Item	Open/ In-Camera	Time	Speaker	Action	Section No.
1. Welcome and Call to Order	Open Session	9:00 a.m. (2 mins)	D. Worrada <i>Chair</i>	Information	Section 1
2. Declarations of Conflicts of Interest	Open Session	9:05 a.m. (3 mins)	D. Worrada <i>Chair</i>	Information	Section 2
3. Briefing on Meeting Procedure	Open Session	9:05 a.m. (5 mins)	D. Worrada <i>Chair</i>	Information	Section 3
4. Adoption of the Agenda	Open Session	9:10 a.m. (5 mins)	D. Worrada <i>Chair</i>	Motion	Section 4
5. Consent Agenda 1) Draft Minutes of March 20, 2024 Executive Committee Meeting 2) Registration Committee Report 3) Inquiries, Complaints and Reports Committee Report 4) Quality Assurance Committee Report 5) Patient Relations Committee Report 6) Discipline Committee Report 7) Fitness to Practise Committee Report 8) Dr. Title Working Group Report <i>A consent agenda is a single item on an agenda that encompasses all the things the Council would normally approve with little comment. All those items combine to become one item for approval on the agenda to be called the consent agenda.</i> <i>As a single item on the agenda, the consent agenda is voted on with a single vote - to approve the consent agenda. This means that there is no discussion on the items, that are listed in the consent agenda.</i> <i>For item "i", only substantive decisions that the Executive Committee made on behalf of Council were included and ergo need to be ratified.</i> <i>However, if a person wishes to speak about any component of the consent agenda, they will alert the Chair. The component will be removed from the consent agenda and discussed at some point in the meeting. The remaining components of the consent agenda can then be approved.</i>	Open Session	9:15 a.m. (5 mins)	D. Worrada <i>Chair</i>	Motion	Section 5

Item	Open/ In-Camera	Time	Speaker	Action	Section No.
6. President's Remarks	Open Session	9:20 a.m. (10 mins)	J. Pritchard-Sobhani <i>President</i>	Information	Section 6
7. Registrar's Report	Open Session	9:30 a.m. (10 mins)	S. Cassman <i>Acting Registrar & CEO</i>	Information	Section 7
8. Finance 1) Financials – 4th Quarter Statement of Operations	Open Session	9:40 a.m. (20 mins)	F. Ortale <i>Director IT, Finance & Corporate Services</i>	Information	Section 8
MOVE TO "IN-CAMERA"	Closed			Motion	
	In-Camera /Closed	10:00 a.m. (5 minutes)			
	In-Camera /Closed	10:05 a.m. (45 mins)			
BREAK		10:50 a.m. (15 mins)			
	In-Camera /Closed	11:05 a.m. (20 mins)			
	In-Camera /Closed	11:25 a.m. (45 mins)			
MOVE OUT OF "IN-CAMERA"				Motion	
LUNCH		12:10 p.m. (60 mins)			
9. Elections 1) Election of District 3 2) By-Election of District 5	Open Session	1:10 p.m. (15 mins)	S. Cassman <i>Acting Registrar & CEO</i>	Motion	Section 9
10. CTCMPAO By-Law Amendment 1) Consultation Results	Open Session	1:25 p.m. (30 mins)	S. Cassman <i>Acting Registrar & CEO</i>	Motion	Section 10
11. Supervision Policy	Open Session	1:55 p.m. (30 mins)	S. Cassman <i>Acting Registrar & CEO</i>	Motion	Section 11
12. Risk Management Framework	Open Session	2:25 p.m. (5 mins)	S. Cassman <i>Acting Registrar & CEO</i>	Information	Section 16

Item	Open/ In-Camera	Time	Speaker	Action	Section No.
13. Other Business	Open Session	2:30 p.m. (5 mins)	S. Cassman <i>Acting Registrar & CEO</i>	Information	Section 17
14. Review of March 20th, 2024 Council Meeting Effectiveness Survey	Open Session	2:35 p.m. (5 mins)	D. Worrada <i>Chair</i>	Information	Section 18
15. Next Meeting Dates and Meeting Effectiveness Survey	Open Session	2:40 p.m. (5 mins)	D. Worrada <i>Chair</i>	Information	Section 19
16. Adjournment of the June 12th, 2024 Council Meeting	Open Session	2:45 p.m. (5 mins)	D. Worrada <i>Chair</i>	Motion	



**COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND
ACUPUNCTURISTS OF ONTARIO**

CONSENT AGENDA

Council Meeting

Wednesday, June 12, 2024

9:00 a.m. – 2:55 p.m.

“In person” at the College

705-55 Commerce Valley Drive West, Thornhill, Ontario

Item	Open/ In-Camera	Time	Speaker	Action	Page No.
1. Consent Agenda a) Draft Minutes of March 20, 2024 Council Meeting b) Executive Committee Report c) Registration Committee Report d) Inquiries, Complaints and Reports Committee Report e) Quality Assurance Committee Report f) Patient Relations Committee Report g) Discipline Committee Report h) Fitness to Practise Committee Report i) Dr. Title Working Group Report <i>A consent agenda is a single item on an agenda that encompasses all the things the Council would normally approve with little comment. All those items combine to become one item for approval on the agenda to be called the consent agenda.</i> <i>As a single item on the agenda, the consent agenda is voted on with a single vote - to approve the consent agenda. This means that there is no discussion on the items, that are listed in the consent agenda.</i> <i>For item “i”, only substantive decisions that the Executive Committee made on behalf of Council were included and ergo need to be ratified.</i> However, if a person wishes to speak about any component of the consent agenda, they will alert the Chair. The component will be removed from the consent agenda and discussed at some point in the meeting. The remaining components of the consent agenda can then be approved.	Open Session	9:20 a.m. (5 mins)	D. Worrada <i>Chair</i>	Motion	 Page 2 Page 12 Page 13 Page 17 Page 19 Page 20 Page 21 Page 23 Page 24



COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

MEETING OF COUNCIL

MINUTES

March 20, 2024 from 9:00 a.m. to 4:43 p.m.
Via Webex

IN ATTENDANCE

External Chair

Deborah Worrada

Council

Kimberley Bishop

Meiying Chen

Iftikhar Choudry

Judy Cohen

Kevin Ho

Terry Hui

Christine Lang

Deborah Sinnatamby

Joanne Pritchard-Sobhani

Xianmin Yu

Jin Qi (Jackie) Zeng

Public Member (as of 9:55 a.m.)

Professional Member (as of 9:15 a.m.)

Public Member

Public Member

Public Member

Professional Member

Professional Member

Public Member

Professional Member / President

Professional Member / Vice-President

Professional Member

Regrets

Kathy Feng

Justin Lee

Professional Member

Professional Member

Absent

Mark Handelman

Public Member

Staff

Sean Cassman

Francesco Ortale

Ryan Chu

Mohan Cappuccino

Mary Kennedy

Jennifer Nghiem

Laurie Krol

Temi Adewumi

Acting Registrar and CEO

Director, IT, Finance and Corporate Services

Manager of Professional Conduct

Manager of Registration and Examinations

Manager of Quality Practice

Policy Analyst

Executive Assistant

Recorder

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Observers

Ryan Brooks

Vivian Pang (MOH)

Nathalie Xian Yan

1. WELCOME AND CALL TO ORDER

After calling the meeting to order at 9:02 a.m., Ms. Worrada welcomed participants to the March 20, 2024 Council meeting of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario.

Council members were referred to the excerpt of *Schedule 2 of the Health Professions Procedural Code*, *Schedule 1 to 3 of the By-Laws* and the *Decision-Making Tool*.

a. DECLARATIONS OF CONFLICT OF INTEREST AND REMINDER OF CONFIDENTIALITY

Ms. Worrada asked if any Council members had any conflicts of interest with regard to the matters being considered at the day's meeting. There were no conflicts declared.

b. BRIEFING ON MEETING PROCEDURE

Ms. Worrada provided an overview of the meeting procedure.

2. ADOPTION OF THE AGENDA

The agenda was adopted as presented.

MOTION: C. Lang - I. Choudry

THAT the Agenda of the March 20, 2024 Meeting of the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario be adopted as presented.

CARRIED

3. CONSENT AGENDA

- a) Draft Minutes of December 7, 2023 Council Meeting
- b) Executive Committee Report
- c) Registration Committee Report
- d) Inquiries, Complaints and Reports Committee Report

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- e) Quality Assurance Committee Report
- f) Patient Relations Committee Report
- g) Discipline Committee Report
- h) Fitness to Practise Committee Report
- i) Dr. Title Working Group Report

In response to a query regarding the school approval project, the phrase “approval” has been adopted by the Council and Registration Committee in place of “accreditation.” The latter implies a more formal process.

The consent agenda of the March 20, 2024 Council Meeting was approved as presented.

MOTION: I. Choudry - T. Hui

THAT the Consent Agenda of the March 20, 2024 Meeting of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario, be approved as presented.

CARRIED

4. PRESIDENT’S REMARKS

The President welcomed all participants to the meeting, starting with an introduction to Mr. Cassman, the Acting Registrar and CEO of the College, effective February 1, 2024.

Mr. Cassman and senior staff met with the President on February 6, to discuss transition plans until a new Registrar and CEO is recruited. The staff leadership team was commended for its ability to adapt to emerging situations.

The Council has engaged a third party to establish a process for succession planning in the future.

An overview was provided of Council initiatives in progress, in line with the five year strategic plan.

The President reported the risk to self-regulation, with the changes to regulation in British Columbia, and the Ontario government’s proposals for governance modernization.

Council was informed that the British Columbia government has paused the proposed regulations to amalgamate the colleges and is now seeking consultation. CARB is submitting strong objections to the regulations which ignore the practice of TCM, and use of TCM diagnosis and techniques. It was also noted that this development could also impact the Pan-Canadian exam, as well as labour mobility.

Council members were reminded that the College must be vigilant to ensure that its decisions are always guided by public interest. The importance of engaging with the

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public and stakeholders was also emphasized.

5. REGISTRAR'S REPORT

Mr. Cassman welcomed all participants. College staff and the outgoing Registrar were thanked for their work during this period. Council was also informed about the hiring of Ms. Kennedy, the new Manager of Quality Practice.

A special Council meeting will be scheduled in April to discuss the Doctor Title competencies.

Updates were provided on the various projects, which include the electoral competencies, progress on Phase 2 of the Doctor Title project, the school approval project, work on the quality assurance enhancement project, as well as selections for peer practice and self-assessments.

To fulfill its mandate of communicating with stakeholders, the President and Registrar will meet with TCM school representatives on March 26, to discuss registration matters and the school approval process.

Stakeholders have also been assured that the College is continuing to operate as usual. Mr. Cassman is now working with CARB and HPRO on behalf of the College.

In regard to governance, the College is working to meet the CPMF's requirements, and the Council's input will be sought regarding the hiring of a governance coach. Council members were also reminded about the requirement to complete a third party assessment of governance practices.

6. COLLEGE PERFORMANCE MEASUREMENT FRAMEWORK

The report was prepared for Council's approval. There have been no changes to the requirements or benchmark evidence.

Significant progress has been made on the electoral competencies, and the College also believes it can make good progress on areas that are in deficit.

The report will be submitted before the March 31 deadline.

MOTION: C. Lang - J. Zeng

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approves the College Performance Measurement Framework for submission to the Ministry of Health.

CARRIED

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7. BY-LAW UPDATES

Mr. Cassman provided an overview of the By-law updates, which are related to meeting the CPMF requirements for Council competencies.

The amendments reflect the decisions already approved by Council, and also include fees for the Emergency and Temporary classes.

Once approved, the By-laws will be sent for a 60 day public consultation.

Mr. Cassman provided an overview of changes to:

- Section 4.08 - Eligibility for Election, and items (viii), (xvii), (xviii) and (xix).
- Section 4.09 - Nominations, and item (iii)
- Section 4.09.1 - Competency Assessment by the Nominations Committee, and items (i), (ii) and (iii)
- Section 4.10 - Nominations Package, item (i)
- Section 12.08 - Nominations Committee, item (i)
- Schedule 4 (Fee Schedule)

An overview was provided of the fees to be charged for the Emergency and Temporary classes, both based on the fees for the General class.

Discussion ensued on concerns about the lack of appeals in the Nominations process. Council members were assured that the College is planning to provide education and resources to candidates who are not eligible. It was also noted that some colleges have noted an increase in engagement, as the changes to the elections process increases the perception of fairness.

In addition, the composition of the Nominations committee is weighted more towards public members, which may help with the perceptions of professional bias. Only professional members who are not eligible for election will be appointed to the Committee.

MOTION: T. Hui - X. Yu

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approves the proposed By-Law amendments for consultation as amended.

CARRIED

8. FINANCE

Mr. Ortale provided an overview of the Statement of Operations for the third quarter of the 2023 to 2024 fiscal year.

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The cash amount for the College is just above \$7 million, and the College had collected 98.1% of its projected revenue by December 31, 2023.

The bulk of the revenue was obtained from annual renewal, at 102.6% of the projection. There was also a 13% increase in registration, which resulted in a 12% increase in administrative fees. There were also increases in the Pan-Canadian exam revenue, the Safety and Jurisprudence courses and other income.

Overall, expenses are below budget at 57.64%. An overview was provided of each section, with all of the components under budget.

As of December 31, 2023, the College's net income is \$1.4 million.

BREAK

9. FINANCE – OPERATING BUDGET FOR FISCAL YEAR 2024-25

Mr. Ortale provided an overview of the budget. An explanation was provided for how the budget is created, based on historical data, actual revenue and expenses, membership growth projection, staffing levels based on projects, as well as the strategic plan.

Revenue is based mostly on fees for annual membership renewal, and registration. The projected annual renewal revenue for the College will be \$3,625,000, which corresponds to an increase of 9.9%. The total projected revenue is \$5 million, which is an increase of 5.7% over the previous fiscal year.

An overview was provided of expenses in each category.

The overall deficit is at \$256,000, which is lower than the deficit of \$926,000 for the previous fiscal year.

The Acting Registrar has contacted the Public Appointments Secretariat to determine if preparation time for public members can be compensated. The public members' work on the Working Group was acknowledged, as well as the amount of preparation time required.

MOTION: K. Bishop - I. Choudry

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approves the proposed Operating Budget for the Fiscal Year of 2024-25 as presented.

CARRIED

Council Meeting

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10. RATIFICATION OF DECISION BY EXECUTIVE COMMITTEE OF THE COLLEGE LEASE

This item had first been presented to the Council in March 2023. Council approved the search for a new office space, and several spaces have been reviewed.

Staff proposed staying in the same building or the same unit, due to huge moving expenses for the server room and filing unit. These findings were brought to the Executive Committee for input. The Executive Committee had to make a decision about the space, due to the building management's deadline and to prevent the risk of the office space being lost.

At its February 21, 2024 meeting, the Executive Committee was presented with three options: To renew the current lease; renew the current lease, but return the Boardroom, or to move to a smaller unit in the same building.

The Executive Committee decided on option two, noting the usefulness of the Boardroom for staff and other College projects. The Council has also proposed additional in-person meetings. With the third option, the College would have still incurred moving and construction costs.

Staff was asked to negotiate the costs with the building management, and reported on a savings for the square footage of the office space. Council was asked to ratify the decision by March 22.

The President also noted that the location of the office was specifically chosen to be in the heart of the TCM community, and supported the need for the Executive Committee to move quickly on a decision.

Council members agreed to ratify the Executive Committee's decision.

MOTION: K. Bishop - T. Hui

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario ratify the decision by Executive Committee to extend the CTCMPAO College's lease at 55 Commerce Valley Drive West, Suite 705, Thornhill, ON.

CARRIED

11. GOVERNANCE COACH

Council members agreed to hire a governance coach, in order to meet the CPMF's requirement that the Council have an annual assessment framework to review its performance.

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To help the Council develop a self-assessment process, staff have recommended Kevin McCarthy, a consultant with a long history regulation work, and experience with the CPMF.

As there is no internal capacity for this task, it has also been recommended that Mr. McCarthy provide a third party assessment of the College's governance structure.

The training session was proposed for June.

It was also reported that the President and Ms. Bishop have been meeting with the Assistant Deputy Minister of Health to discuss the College's transition plan. The Ministry is aware of Mr. McCarthy's expertise and use of his services will demonstrate the College's commitment to governance.

MOTION: I. Choudry - J. Cohen
THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approves the hiring of the Governance Coach to present and train at an upcoming Council meeting as presented.

CARRIED

12. COMMITTEE APPOINTMENTS FOR REGISTRATION

As recommended by the Executive and Registration Committees, Council approved the appointment to the Registration Committee for Mr. Ming Cha and Ms. Akari Yokokawa.

MOTION: J. Pritchard-Sobhani - T. Hui
THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approves the appointment of Ming C. Cha and Akari Yokokawa to the Registration Committee.

CARRIED

LUNCH

MOVING IN-CAMERA

The meeting moved in camera at 12:46 p.m.

MOTION: K. Ho - M. Chen
THAT, in accordance with Sections 7. (2)b of the Health Professions Procedural Code, the meeting will now move in-camera.

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CARRIED

Observers were excused from the meeting.

The discussion within the in-camera session is recorded separately.

MOVING OUT OF CAMERA

MOTION: M. Chen - J. Cohen

THAT the meeting be moved out of in-camera at 4:15 p.m.

CARRIED

Council members were reminded that discussions held during the in-camera session are private, confidential and not to be discussed out of camera.

13. REGULATORY CHANGES IN BRITISH COLUMBIA

The College has been asked to provide a response to the British Columbia Ministry of Health's consultation regarding changes to TCM regulation.

Mr. Cassman provided background information on this issue. CTCMA-BC is to be merged with colleges for the chiropractic, and naturopath professions. Changes have also been announced to TCM regulation. As a result of negative feedback, the government has paused to ask for targeted feedback.

Colleges and TCM associations will be responding on the changes, taking into account the effect on regulation and public protection.

Concerns were expressed about the impact on labour mobility, long term use of the Pan-Canadian exam, as well as the Doctor Title and the school approval project.

The lack of a controlled act for acupuncture will impact the public due to a lack of TCM education, and a lack of understanding of the treatment.

Changes occurring in British Columbia could be adopted across Canada, and in particular, Ontario. It was stated that the College needs to stand up with a strong voice against the changes.

Based on feedback, Mr. Cassman will draft a letter for Council's review.

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14. RISK MANAGEMENT REPORT

Mr. Cassman reported that there have not been any changes to the risk level. However, the regulatory changes in British Columbia, and the transition to a new Registrar are being observed.

15. OTHER BUSINESS

There was no other business.

16. DECEMBER 7TH, 2023 MEETING EVALUATION REVIEW

Four responses were received from the December evaluation. Members were thanked and encouraged to send their suggestions for improvement for the day's meeting.

17. NEXT MEETING DATES AND MEETING EFFECTIVENESS SURVEY

A poll will be sent to the Council asking for their availability for the review of the Doctor Title competencies.

The next meeting will be held on June 12, with another half day meeting scheduled in June.

22. ADJOURNMENT

The meeting was adjourned at 4:43 p.m.

MOTION: K. Ho - M. Chen

THAT the meeting of the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario of March 20, 2024 be adjourned until the next meeting or at the call of the President.

CARRIED

The President thanked Ms. Worrada for her work in chairing the meeting, and thanked staff for their hard work.

Council Meeting

College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario

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FOR: Information

SUBJECT: Executive Committee Report

Executive Committee Members

Joanne Pritchard-Sobhani	Professional Member/President
Xianmin Yu	Professional Member/Vice-President
Judy Cohen	Public Member
Deborah Sinnatamby	Public Member
Jin Qi (Jackie) Zeng	Professional Member

Since the last Council meeting held on March 20, 2024, the Executive Committee met on April 5, 2024 and May 15, 2024.

FOR INFORMATION

1) Finance Update

The Executive Committee reviewed the 4th quarter financial statements on May 15th, 2024.

2) Update on Government Relations

The Executive committee received and update on interactions the College has had with Government officials and departments.

3) Policy Discussion

The Executive Committee a reviewed and discussed a draft Records Management Policy and Record Retention Schedule. The draft policy will be brought back to the Executive Committee at a later meeting for further deliberation.

4) Executive Search

The Executive Committee received an update on the Executive Search Firm's timeline for the Executive Search process.

This report is current as of May 27th, 2024 in anticipation of the Council meeting scheduled for June 12, 2024.



FOR: Information

SUBJECT: Registration Committee Report

Registration Committee Members

Terry Hui (Chair)	Professional Member
Iftikhar Choudry	Public Member
Kevin Ho	Public Member
Kimberley Bishop	Public Member
Akari Yokokawa (Non-Council)	Professional Member
Brendan Cheung (Non-Council)	Professional Member
Joanne Pritchard-Sobhani	Professional Member
Justin Lee – Until May 21, 2024	Professional Member
Ming C. Cha (Non-Council)	Professional Member
Xianmin Yu	Professional Member

Since the last report, the Registration Committee met on the following dates:

- March 7, 2024 - Panel 1 Meeting
- April 11, 2024 - Annual Training and RC Meeting
- May 2, 2024 - Panel 2 Meeting

All meetings were held via Webex meeting.

This report is current to May 21, 2024 unless otherwise noted, in anticipation of the Council meeting scheduled for June 12, 2024.

FOR INFORMATION

1. PAN-CANADIAN EXAMINATIONS

April 2024 Pan-Canadian Examination

Practitioners' exam results for April 2024 were released to candidates on May 21, 2024. A total of 49 candidates wrote the exam, and the passing rate was 71%. We anticipate the results for the Acupuncturists' examination will be released in June.



October 2024 Pan Canadian Examination

The application window for the October 2024 examinations will open on June 3, 2024 and will close on July 15, 2024. The examinations are scheduled to take place in person at venues across Canada.

The examinations will be held on the following dates:

- TCM Practitioners examination – October 3 and 4, 2024
- Acupuncturists examination – October 23 and 24, 2024

2. ANNUAL RENEWAL

2024-2025 Registration Renewal

As of today's date, 2862 members have successfully renewed their registration with the College. Forty members have been administratively suspended for failing to submit their online renewal form and/or annual renewal fees.

3. SUPERVISION POLICY

The Registration Committee reviewed and subsequently approved revisions to the Supervision Policy for members. The revisions enhance and clarify the eligibility criteria for proposed supervisors, to help ensure that appropriate and effective supervision is provided at all times.

4. LANGUAGE FLUENCY POLICY

The Office of the Fairness Commissioner has directed the College to include a new language test, the Pearson Test of English, as another option in the Language Fluency policy. The policy has now been updated, and scores for the new test have been aligned. The updated policy has now been posted on the website.

5. PROGRAM APPROVAL PROJECT

The Pilot phase of the Program Approval project is ongoing, with trial site visits upcoming at two schools. Due to some unexpected delays in coordinating schedules with reviewers and schools, the Pilot phase has taken longer than anticipated, but is otherwise unfolding as planned.

In March, two of the reviewers who were trained in January, together with our consultant from FICS, completed a two-day site visit at a local school. Initial feedback from the consultant indicates that the visit went well and there were no significant concerns about the process used to verify standards. More formal feedback will be compiled and submitted for review after the remaining site visits have been completed.

6. OFFICE OF THE FAIRNESS COMMISSIONER

In March 2024, the OFC launched a new reporting portal and schedule for this year's Fair Registration Practices Report (FRP). Health profession regulators are required to submit a report to the OFC each calendar year with data about applicants and registration processes. Staff are compiling the necessary information and will submit the report by the June 12 deadline.



7. MEETING WITH SCHOOLS

On March 26, the College held an online meeting with educators from Ontario-based TCM and acupuncture programs. The purpose of the meeting was to provide updates on various College initiatives, and to discuss topics of interest or concern. Attendees from 12 TCM schools, including both private and public institutions, participated. The College provided updates on the Program Approval Process, the Doctor Title Project and other College matters. A productive discussion session followed the updates, with educators providing valuable feedback for the Registration Committee to consider.

8. APPEAL TO HEALTH PROFESSIONS APPEAL AND REVIEW BOARD (HPARB)

The College has been notified of an appeal to HPARB by an applicant regarding a condition for registration that was imposed by the Registration Committee. Legal counsel has been engaged, and a case conference call is scheduled in June for parties to discuss the matter.

9. REGISTRATION COMMITTEE PANEL UPDATES (FROM February 30, 2024 – May 21, 2024)

	Decisions made by the Registration Committee				
	Approved	Approved with TCLs	Request for More Info	Rejected	Total
Fourth Exam Attempt Proposal	1	0	0	0	1
General Class application	0	4	0	0	4
TCL Variation	0	0	1	0	1
Title Variation	0	1	0	0	1
Transfer from Inactive Class	0	2	0	0	2
Totals	1	7	1	0	9

The Registration Committee Panel reviewed 5 cases in the March 7, 2024 meeting and 4 in the May 2, 2024 meeting.

10. QUARTERLY MEMBERSHIP STATS (As of May 21, 2024)

Registration by District

	District 1	District 2	District 3	District 4	District 5	Practicing outside ON/Unknown*	Total
General	203	162	1659	546	77	87	2734
Inactive	15	6	96	18	3	39	177
Student	0	1	6	0	0	0	7
Total Members	218	169	1761	564	80	126	2918

*Please note that General Class members who recently registered with the College are given 30 days to



submit their business address. We are following up with the General Class members who did not provide their business address information to the College.

Registration updates as of May 21, 2024

	23-May-23	16-Aug-23	16-Nov-23	28-Feb-24	21-May-24
General R. Ac	1318	1328	1388	1408	1355
General R. TCMP	1319	1333	1358	1396	1379
Student R. Ac	2	2	5	3	5
Student R. TCMP	4	6	5	2	2
Inactive R. Ac	86	94	89	87	90
Inactive R. TCMP	80	81	80	79	87
Current Members	2809	2844	2925	2975	2918
Resigned	571	575	580	602	681
Expired	662	662	661	661	661
Revoked	83	83	83	84	84
Suspended	206	206	203	187	226
Deceased	16	16	17	18	20
Total	4347	4387	4469	4527	4590

Changes since previous reports

	2-Mar-2023 to 23-May-2023	24-May-2023 to 16-Aug-2023	17-Aug-2023 to 16-Nov-2023	17-Nov-2023 to 28-Feb-2024	29-Feb-2024 to 21-May-2024
Current members	71	39	81	50	-57
Resignations	73	4	5	22	79
Revocation	0	0	0	1	0
Suspensions	44	0	-3	-16	39
Expired	0	0	-1	0	0

Members practicing with terms, conditions and limitations: 219

Jurisprudence Course Tests (From February 29, 2024 – May 21, 2024)

Passed	Failed	Total
38	5	43

Safety Program Tests (From February 29, 2024 – May 21, 2024)

Passed	Failed	Total
53	1	54



FOR: Information

SUBJECT: Inquiries, Complaints and Reports Committee Report

Inquiries, Complaints and Reports Committee Members

Xianmin Yu	Professional Member, Chair
Meiying Chen	Professional Member
Bo (Kathy) Feng	Professional Member
Christine Lang	Professional Member
Jin Qi (Jackie) Zeng	Professional Member
Matthew Colavecchia	Non-Council Professional Member
Melody Hon	Non-Council Professional Member
Fanny Ip	Non-Council Professional Member
Hui Liu	Non-Council Professional Member
Judy Cohen	Public Member
Iftikhar Choudry	Public Member
Kevin Ho	Public Member
Deborah Sinnatamby	Public Member

The Inquiries, Complaints and Reports Committee (the “ICRC”) is divided into three main panels to accommodate the number of ongoing matters, and to accommodate the selection of panel members, should the need arise for a discipline hearing. Since the last quarterly report, the ICRC met six times on March 11, March 28, April 25, May 8, May 10, and May 21, 2024. There is an upcoming ICRC meeting scheduled for May 27, 2024.

New Cases and Nature of Concerns

Note: Some cases may have more than one concern

Complaints	Nature of Concerns		Registrar Report Investigations	Nature of Concerns	
2		Advertising	1		Advertising
		Billing and Fees		1	Billing and Fees
		Communication			Communication
	1	Competence / Patient Care			Competence / Patient Care
		Fraud			Fraud
		Professional Conduct & Behaviour			Professional Conduct & Behaviour



		Record Keeping		1	Record Keeping
	1	Sexual Abuse / Harassment / Boundary Violations			Sexual Abuse / Harassment / Boundary Violations
		Unauthorized Practice			Unauthorized Practice

Completed Cases and Outcomes*

Note: Some decisions have more than one outcome

Complaints	Outcomes		Registrar Reports Investigations	Outcomes	
4	1	Take no action	8	6	Take no action
	2	Advice		1	Advice
		Written Caution			Written Caution
		Oral Caution			Oral Caution
		SCERP		1	SCERP
		Refer to Discipline		1	Refer to Discipline
	1	Undertaking/Withdraw			Undertaking/Withdraw

Complaints cases before Health Professions Appeal and Review Board

New Cases	Pending Cases	Cases Upheld
-	1	-

Pending Cases

Complaints	Registrar Report Investigations	Incapacity Inquiries	Total # cases
9	44		53

This report is current as of May 22, 2024, in anticipation of the Council meeting scheduled for June 12, 2024.



FOR: Information

SUBJECT: Quality Assurance Committee Report

Quality Assurance Committee Members

Christine Lang (Chair)	Professional Member
Kimberley Bishop	Public Member
Evelyn Cho	Non-Council Professional Member
Iftikhar Choudry	Public Member
Judy Cohen	Public Member
Terry Hui	Professional Member
Justin Lee	Professional Member
Kathy Feng	Professional Member

Since the last quarterly report, the Quality Assurance Committee (QAC) has had no formal meeting.

FOR INFORMATION

1. Quality Assurance Enhancement Program

The new Self-Assessment Tool (SAT) and professional development plan (PDP) was posted on the College website in March 2024.

2. Self, Peer and Practice Assessment – Random Selections

Random Selection to Submit Self-Assessment

The QA Committee directed that 5% of members be randomly selected to submit their completed Self-Assessment Tool (SAT) and professional development plan (PDP) in 2024. For the reporting cycle: January 1, 2023 through December 31, 2023, 133 members were randomly selected with a submission deadline of July 26, 2024.

As of May 28, 2024, 42 forms have been received and reviewed.

Random Selection to Participate in a Peer and Practice Assessment

The QA Committee directed that 2.5% of members be randomly selected to undergo a Peer and Practice Assessment in 2024. All 67 members were notified of their random selection and assessments are being arranged.

This report is current to May 28, 2024, in anticipation of the Council meeting scheduled for June 12, 2024.



FOR: Information

SUBJECT: Patient Relations Committee Report

Patient Relations Committee Members

Meiying Chen (Chair)	Professional Member
Iftikhar Choudry	Public Member
Deborah Sinnatamby	Public Member
Nisha Thadani	Non-Council Professional Member
Akari Yokokawa	Non-Council Professional Member
Kimberley Bishop	Public Member

Since the last quarterly report, the Patient Relations Committee (PRC) met on April 8, 2024.

FOR INFORMATION

1. Funding for Therapy

One application for funding was received, reviewed and subsequently approved by the Committee during this reporting period.

2. Funding for Policy Discussion

The Committee was presented with a proposal that staff review funding applications and approve those that follow the criteria as set out in policy. Only applications that appear to not meet criteria and potentially be denied will be referred to the Committee for review and decision. The Committee accepted the proposal and directed staff to edit the current policy for review at next meeting.

This report is current to May 28, 2024, in anticipation of the Council meeting scheduled for June 12, 2024.



FOR: Information

SUBJECT: Discipline Committee Report

Discipline Committee Members

Christine Lang	Professional Member, Chair
Meiying Chen	Professional Member
Bo Feng	Professional Member
Terry Hui	Professional Member
Justin Lee	Professional Member
Joanne Pritchard-Sobhani	Professional Member
Xianmin Yu	Professional Member
Jin Qi (Jackie) Zeng	Professional Member
Evelyn Cho	Non-Council Professional Member
Matthew Colavecchia	Non-Council Professional Member
Hui Liu	Non-Council Professional Member
Akari Yokokawa	Non-Council Professional Member
Kimberley Bishop	Public Member
Iftikhar Choudry	Public Member
Judy Cohen	Public Member
Mark Handelman	Public Member
Kevin Ho	Public Member
Deborah Sinnatamby	Public Member

The Discipline Committee did not conduct any discipline hearings in this quarter.

As of May 22, 2024, there are five open cases which have been referred to the Discipline Committee by the Inquiries, Complaints and Reports Committee (ICRC).

	Member Name	Status
1	Delon Dik-Lung Cheng (1)	PHC completed on April 26, 2024. Hearing dates to be canvassed.
2	Delon Dik-Lung Cheng (2)	PHC completed on April 26, 2024. Hearing dates to be canvassed.
3	Esther Yu Kwan Cheng	Received information that this Member recently passed away. Member's estate provided death certificate. College to seek a permanent stay of proceedings tentatively scheduled on August 7, 2024



4	Mohmed Shoeb M. Chikhlikar	PHC completed April 11 & May 17, 2024. To proceed to a contested hearing, which is anticipated to be over 2 weeks. Hearing dates to be canvassed.
5	Xiaoyun Tian	PHC completed May 14, 2024. Parties appear to have consensus on an ASF and JSP. Subject to certain conditions, once ASF and JSP is signed, this matter can tentatively proceed to a hearing. Hearing tentatively scheduled for August 7, 2024.

There is no discipline decision currently under appeal.

This report is current as of May 22, 2024, in anticipation of the Council meeting scheduled for June 12, 2024.



FOR: Information

SUBJECT: Fitness to Practise Committee Report

Fitness to Practise Committee Members

Iftikhar Choudry	Public Member (Chair)
Meiying Chen	Professional Member
Bo Feng	Professional Member
Terry Hui	Professional Member
Christine Lang	Professional Member
Justin Lee	Professional Member
Joanne Pritchard-Sobhani	Professional Member
Xianmin Yu	Professional Member
Jin Qi (Jackie) Zeng	Professional Member
Kimberley Bishop	Public Member
Judy Cohen	Public Member
Mark Handelman	Public Member
Kevin Ho	Public Member
Deborah Sinnatamby	Public Member

Pursuant to the College Bylaw, every member of Council is a member of the Fitness to Practise Committee.

The Fitness to Practise Committee participated in training on March 25, 2024.

This report is current as of May 22, 2024, in anticipation of the Council meeting scheduled for June 12, 2024.



FOR: Information

SUBJECT: Doctor Title Working Group Report

Doctor Title Working Group Members

Joanne Pritchard-Sobhani (Chair)	Professional Member
Kimberly Bishop	Public Member
Iftikhar Choudry	Public Member
Judy Cohen	Public Member
Terry Hui	Professional Member
Xianmin Yu	Professional Member
Ming C. Cha	Non-Council Professional Member

Since the last quarterly report, the Doctor Title Working Group (the Working Group) met 4 times, on March 27, 2024, April 10, 2024, April 23, 2024, and May 9, 2024.

FOR INFORMATION

1. Draft Competencies

The Doctor Title Working Group prepared final drafts of the competency documents for review by Council. These documents were reviewed and approved by Council at the April 29, 2024 special Council meeting.

2. Doctor Title Survey

Following approval by Council, the Working Group has begun to validate the work completed so far. A survey went out to members to gain valuable feedback on the Doctor Title Competencies and Assessment Process that has been formulated by the Working Group to date. The College is also in the process of setting up a meeting with the OFC to discuss the assessment paths and competencies.

This report is current to May 27, 2024, in anticipation of the Council meeting scheduled for June 12, 2024.

**UNAUDITED College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario
Statement of Operations**

Q4 April 2023-March 2024

		Q4 Actuals 2023-2024	Annual Budget 2023-2024	Actual to Budget %	Budget Remaining (balance of Year)
GL Code	Revenue				
4101000	Registration Fees	\$ 229,275.00	\$ 182,750.00	125.46%	\$ (46,525.00)
4102000	Renewal Fees	\$ 3,385,325.00	\$ 3,298,600.00	102.63%	\$ (86,725.00)
4200000	Administration Fees	\$ 93,725.00	\$ 68,750.00	136.33%	\$ (24,975.00)
4300000	Pan Can Examination Fees	\$ 466,219.00	\$ 545,240.00	85.51%	\$ 79,021.00
4400000	Other Income-Government Funds	\$ 500,000.00	\$ 503,600.00	99.29%	\$ 3,600.00
4500000	Other Fees	\$ 54,900.00	\$ 42,000.00	130.71%	\$ (12,900.00)
4600000	Other Income	\$ 302,698.48	\$ 75,000.00	403.60%	\$ (227,698.48)
	Total Income	\$ 5,032,142.48	\$ 4,715,940.00	106.70%	\$ (316,202.48)
GL Code	Expenses				
	Council & Committees	\$ 782,577.05	\$ 1,145,200.00	68.34%	\$ 362,622.95
6100000	Council	\$ 70,340.44	\$ 101,500.00	69.30%	\$ 31,159.56
6201000	Executive Committee	\$ 17,057.60	\$ 30,500.00	55.93%	\$ 13,442.40
6202000	Registration Committee and Panel	\$ 54,021.41	\$ 69,300.00	77.95%	\$ 15,278.59
6203000	ICRC Committee	\$ 315,676.13	\$ 373,800.00	84.45%	\$ 58,123.87
6204000	Quality Assurance Committee	\$ 62,111.03	\$ 150,100.00	41.38%	\$ 87,988.97
6205000	Patient Relations Committee	\$ 5,838.15	\$ 47,750.00	12.23%	\$ 41,911.85
6206000	Discipline Committee	\$ 256,844.79	\$ 368,000.00	69.79%	\$ 111,155.21
6207000	Fitness to Practice Committee	\$ 687.50	\$ 4,250.00	16.18%	\$ 3,562.50
6300000	Professional Services	\$ 196,537.32	\$ 215,500.00	91.20%	\$ 18,962.68
6301000	Legal Fees	\$ 100,262.55	\$ 67,000.00	149.65%	\$ (33,262.55)
6302000	Accounting Fee	\$ 30,147.85	\$ 31,500.00	95.71%	\$ 1,352.15
6303000	Expert Consultation	\$ 3,450.87	\$ 7,000.00	49.30%	\$ 3,549.13
6304000	Government Relations	\$ 62,676.05	\$ 110,000.00	56.98%	\$ 47,323.95
6400000	Special Programs/Projects	\$ 943,561.80	\$ 1,576,466.00	59.85%	\$ 632,904.20
6401000	Pan-Canadian Examinations	\$ 355,761.00	\$ 381,366.00	93.29%	\$ 25,605.00
6402000	Doctor Title	\$ 190,937.71	\$ 406,500.00	46.97%	\$ 215,562.29
6403000	Strategic Initiatives	\$ -	\$ 100,000.00	0.00%	\$ 100,000.00
6404000	Program Approval	\$ 53,078.17	\$ 50,000.00	106.16%	\$ (3,078.17)
6405000	Safety and Jurisprudence Test	\$ 37,459.54	\$ 135,000.00	27.75%	\$ 97,540.46
6800000	Pan Can Chinese Language Examination	\$ 306,325.38	\$ 503,600.00	60.83%	\$ 197,274.62
6500000	Salaries and Benefits	\$ 2,021,035.11	\$ 1,889,107.00	106.98%	\$ (131,928.11)
6500000	Salaries and Benefits	\$ 2,021,035.11	\$ 1,839,107.00	109.89%	\$ (181,928.11)
6502000	Casual Labour	\$ -	\$ 50,000.00	0.00%	\$ 50,000.00
6600000	Information Technology	\$ 223,373.55	\$ 280,000.00	79.78%	\$ 56,626.45
6602000	Equipment Expenses	\$ 6,966.17	\$ 10,000.00	69.66%	\$ 3,033.83
6603000	Software Licenses & Development	\$ 82,734.00	\$ 148,500.00	55.71%	\$ 65,766.00
6604000	Maintenance and Support Contracts	\$ 67,263.36	\$ 58,500.00	114.98%	\$ (8,763.36)
6605000	Online Services	\$ 55,565.41	\$ 53,000.00	104.84%	\$ (2,565.41)
6606000	Network Security	\$ 10,844.61	\$ 10,000.00	108.45%	\$ (844.61)
6700000	Operating Expenses	\$ 454,829.24	\$ 536,050.00	84.85%	\$ 81,220.76
6701000	General Operating Costs	\$ 257,178.39	\$ 296,050.00	86.87%	\$ 38,871.61
6702000	Payment Gateway	\$ 127,013.59	\$ 130,000.00	97.70%	\$ 2,986.41
6703000	Subscriptions and Conferences	\$ 32,153.74	\$ 55,000.00	58.46%	\$ 22,846.26
6704000	Communications and Publications	\$ 38,483.52	\$ 55,000.00	69.97%	\$ 16,516.48
45	Total Expenses	\$ 4,621,914.07	\$ 5,642,323.00	81.92%	
46	Net Income	\$ 410,228.41	\$ (926,383.00)		



Meeting Date:	June 12, 2024
Issue:	Elections
Reported By:	Sean Cassman
Action:	Motion

Issue

The College is proposing an election date of October 24 for the 2024 Council elections.

Public Interest Rational

Council elections help ensure that Council is constituted with the appropriate number of Council members, which allows the College to function. Professional Council members, making decisions in the public interest, help the College achieve its mandate of public protection.

Background

As per section 4.06 of the College By-Laws, the professional Council Member positions for District 3 (three seats) and District 1 (one seat) are up for election in 2024 for a three-year term ending in 2027:

The regularly scheduled election will be held for District 3 and by-election for District 5. There are currently three seats available in District 3 and one in District 5:

District 3

There are three vacant positions on Council from Electoral District 3. There are approximately 1652 Members eligible to vote in District 3 – Central, which is comprised of the city of Toronto and the regional municipality of York.

District 5

There is 1 available position on Council from Electoral District 5. There are approximately 76 Members eligible to vote in District 5 – West, which is comprised of the counties of Essex, Bruce, Grey, Lambton, Elgin, Middlesex, Huron, Perth, Oxford, and the regional municipality of Chatham- Kent.

In total, the College is looking to fill four positions on Council with this upcoming election.

Section 4.07 of the By-Laws state that the Registrar, as directed by Council, shall set the date for the election to Council of candidates in each electoral district.

Proposed Dates and Time Lines

The chart below shows the proposed timelines along with the schedule of dates in line with By-Laws 4.01 – 4.26.



Members eligible to vote may cast their ballot beginning September 24, 2024 and ending October 24, 2024 at 5:00 p.m. The electronic ballot will contain a link to the member's profile on the public registry, their biographical statement and, if desired, a head shot photograph.

ELECTION DATE	October 24
Nomination Package Out (minimum 90 days prior to election date)	July 12
Nominations due (minimum 60 days prior to election date)	August 14
Option to withdraw nomination deadline (minimum 30 days prior to election date)	September 13
Voting instructions sent to members	September 21
Voting Ballots sent to members (no later than 30 days prior to election date)	September 24
End of Voting timeline Election Day 5:00 p.m. EST	October 24
Ballot Report	October 24
Notification of candidates	October 25
Deadline for recount (no more than 15 days after the date of election)	November 8
Completion of recount, if required (no more than 10 days after receiving request)	November 15
Notification of candidates of results of recount	November 15
Notification to members & posting of results on website (if no recount is requested)	November 8

The first Council meeting following the elections if held on October 24, 2024 (in accordance to the By-Laws, the appointment to Committees and election of officers will occur at this meeting):

Council Training Day	Wednesday, December 4, 2024
Council Meeting	Thursday, December 5, 2024



Meeting Date:	June 12, 2024
Issue:	By-Law Updates
Reported By:	Sean Cassman
Action:	Motion

Issue

College staff prepared draft by-law amendments related to the College's election process and fees. At the March 20, 2024 meeting, Council approved the amendments for consultation.

The by-law amendments were posted online for public consultation on April 11, 2024. The College received feedback from one member in response.

Public Interest Rationale

The College by-laws are a set of binding rules and processes that are applicable to the Council, Committees, Staff, and members of the College. They are intended to ensure the College is fulfilling its public safety mandate, and any changes to them must consider the public interest first and foremost.

Background

At the March 2024 Council meeting, Council approved a set of by-law amendments for consultation. These by-law amendments reflected decisions made by Council regarding updates to the election process that would allow for competency requirements for eligibility to serve on Council. The by-law amendments have been circulated for 60 days as required.

Feedback

The College only received one response from a member who voiced support for the amendments. With the Doctor Class consultation ongoing, stakeholders have been directed to our consultation page 4 times during this period and directly encouraged to provide feedback on by-laws twice. Despite this the college has received just the one supportive comment, and received no questions or concerns.

The information will remain on the College website until June 11, 2024. If any additional comments are received Council will be updated at the time of the meeting.

Next Steps

With the required consultation period complete, Council can provide final approval to the by-law amendments. Due to the timeline involved in the election process, the changes related to the election will come into effect for the 2025 election. However, this will give the College time to work on the required documentation and establish the necessary Committee.

Proposed Amendments to CTCMPAO By-Laws

Changes to Election Process

Section 4.08 Eligibility for Election

Section	Action	Reason
4.08(viii) the Member is not in default of payment of any fees or costs to the College;	Amended	For clarity.
4.08(xvii) the member has satisfied the Nominations Committee that the member has all of the competencies to be an effective member of Council as set out in a list of competencies approved by Council;	New provision	Section 4.08 outlines eligibility criteria for a member to stand for Council elections. This addition will set competencies as a criterion.
4.08 (xviii) the member has successfully completed the College's current training program relating to the duties, obligations and expectations of Council and committee members;	New provision	It is a CPMF requirement that members attend a pre-orientation program before being eligible for election.
4.08 (xix) Has not been found guilty of a criminal offence within the preceding eight years.	New provision	Section 5.01 disqualifies sitting Council members who have been found guilty of a criminal offence. This is added for consistency.

Section 4.09 Nominations

Section	Action	Reason
4.09(ii) No later than 90 120 days before the date of an election, the Registrar shall notify every Member eligible to vote of the date, time and electoral district of the election and of the nomination procedure.	Amended	Current timeline only gives 30 days to complete and submit nomination documents. With new process, Council is considering a longer timeframe for the member, and Nominations Committee to prepare.

Section 4.09.1 Competency Assessment by Nominations Committee

Section	Action	Reason
4.09.1(i) A member wishing to satisfy the competency requirement as set out in section 4.08(xvii) shall provide to the Registrar the completed form, a current CV, and supporting documentation no later than 90 days before the date of the election so as to allow the Nominations Committee time to decide if the member meets the requirement of that article.	New	This provision sets the process of review by the Nominations Committee.
4.09.1 (ii) The Nominations Committee shall notify each member affected and the Registrar of any decision at least 60 days before the date of the election.	New	Nominations Committee will be required to make timely decisions to allow the election process to occur uninterrupted.

4.09.1 (iii) The Nominations Committee decision under section 4.08(xvii) is solely within the discretion of the Nominations Committee, final and not subject to challenge and an election result is not subject to challenge on the basis that a member of the College was not permitted to stand for election as a result of the decision of the Nominations Committee.	New	This provision identifies who makes decisions on competency reviews and protects the election process.
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4.10 Candidates Biography Nomination Package

Section	Action	Reason
4.10(i) completed nomination form; and	New	This provision requires a nomination form be submitted with their nomination.
4.10 (ii) biographical information in a manner acceptable to the Registrar for the purpose of distribution to eligible Members in accordance with the By- Laws.	Amended	Currently required. Separated for clarity.

12.08 Nominations Committee

Section	Action	Reason
(i) 12.08(i) The Nominations Committee shall be composed of: a. Two (2) members of Council who are Professional Members; b. Three (3) Public Members;	New	Sets the Nomination Committee composition.

Changes to Fee Schedule

The following fees will be added to the by-laws:

Fees Relating to Temporary Class	
Application Fee	\$125.00
Registration Fee	\$650.00
Fees Relating to Emergency Class	
Application Fee	\$250.00
Registration Fee (first year of registration pro-rated by quarter in which registered)	
<i>April 1 - June 30</i>	\$1,300.00
<i>July 1 – September 30</i>	\$975.00
<i>October 1 - December 31</i>	\$650.00
<i>January 1 - March 31</i>	\$325.00
Annual Renewal for Certificate of Registration for Emergency Class	\$1300.00
Late Payment Fee	\$200.00
Reinstatement Fee	\$250.00

From: [Hong Chen](#)
To: [Consultation](#)
Subject: Proposed Amendments to CTCMPAO By-Laws
Date: April 24, 2024 4:17:36 PM

Dear Sir/ Madam:

I have reviewed documents about Proposed by-law amendments related to the election process and fee. I agree with them.

Thanks Tracy Hong Chen

#823



Meeting Date:	June 12, 2024
Issue:	Supervision Policy
Reported By:	Sean Cassman
Action:	Motion

Issue

The Registration Committee of the College has approved several changes to the Supervision Policy to strengthen the requirements and improve the maintenance of the Policy.

Public Interest Rationale

Supervisors have an important role in helping other members meet the standard of care and demonstrate the knowledge, skill, judgment, and attitude expected of a Traditional Chinese Medicine Practitioner or Acupuncturist. An effective policy will help ensure that supervision is conducted by only qualified members, in a safe, effective, and practical manner.

Background

Currently, the College has one [Supervision Policy](#) that covers the requirements for applicants to meet the entry-to-practice supervised practice requirement and the requirements for the supervision of members. While similar issues, the College has found that on a policy level, there is a need to treat these as separate. Because of this, staff proposed to the Registration Committee that the Supervision Policy be split into two policies; one for students and one for members. At the same time, in light of the new Emergency Class and proposed Provisional Class, there have been ongoing discussions about the supervision of members. The Registration Committee approved the division of the Supervision Policy, and also discussed changes to the Supervision Policy of Members.

Supervision Policy for Members

The Supervision Policy for Members sets guidelines and eligibility criteria for members who act as supervisors to other members. In cases where a member of the College requires supervision, the supervisor must be pre-approved by the Registrar. This policy ensures that there are clear criteria to guide the Registrar in making decisions on approval. In addition, the policy clearly states the supervisor's obligations to the College and the member.

As noted, the Registration Committee has discussed ways to strengthen the Supervision Policy for Members. A number of changes have been recommended by the Registration Committee. The Policy and a full list of the recommended changes can be found in the meeting package.

Supervision Policy for Applicants and Students



Also found in the meeting package is the draft Supervision Policy for Applicants and Students. The College's Registration Regulation states that applicants must have successfully completed a program of clinical experience in the profession that is structured, comprehensive, supervised and evaluated and which consists of at least 45 weeks of clinical experience involving at least 500 hours of direct patient contact. However, to ensure transparency the College has found it necessary to provide our interpretation of what we believe "structured, comprehensive, supervised and evaluated" means. The Supervision Policy for Students provides this interpretation.

The College is not recommending any changes to the wording of the Supervision Policy for Applicants and Students at this time. Staff the Registration Committee have discussed revisiting this policy for review once the Program Approval Project is complete, as any changes would benefit from being informed by the results of this project.

Next Steps

Council is asked to review and discuss a motion on:

- Separating the current Supervision Policy into two standalone policies:
 - Supervision Policy for Members including changes recommended by the Registration Committee
 - Supervision Policy for Applicants and Students

If approved by Council, the policies would be circulated for consultation for 30 days.

Encl.:

- Draft Supervision Policy of Members;
- List of amendments to the Draft Supervision Policy of Members;
- Draft Supervision Policy for Applicants and Students.



NAME	Supervision Policy for Members		
TYPE	Registration		
STATUS	Draft Revision	VERSION	4
DATE APPROVED	November 3, 2014	DATE REVISED	April 11, 2024

Intent

This policy applies to members of the College who act as supervisors to other members, in the practice of traditional Chinese medicine. The purpose of the policy is to identify the eligibility criteria and the professional obligations of members of the College who agree to supervise others.

For purposes of clarity, “supervisor” or “proposed supervisor” will refer to those who act as a supervisor and “member” will apply to the persons who are being supervised.

Which Members Require Supervision?

Some members of the College may be required to practice under supervision, for a variety of reasons. For example;

- Under the Registration Regulation:
 - Members in the Student Class shall only practise the profession while under the supervision of a member who holds a General certificate of registration who can communicate with the member in the member’s language and who has been approved by the Registrar.
 - Members in the Temporary Class may only practise traditional Chinese medicine under the supervision of a supervisor who holds a General certificate of registration.
- In some cases, a College committee may direct that a member practise under supervision. This may occur when, for example, a member resumes practice after being away from the profession for an extended period of time.

Policy

General Accountability and Responsibility

In all cases,

- a. The supervisor is ultimately responsible for the quality of care provided by those under their supervision. This includes ensuring that those under their supervision meet the required clinical standard of care and display the expected knowledge, skill, judgment and attitude expected of a traditional Chinese medicine practitioner and/or acupuncturist.
- b. Supervisors may only supervise in the areas of TCM practice in which they are educated and experienced. In particular, only supervisors who hold the R. TCMP designation may supervise herbal treatments.
- c. Only supervisors registered in the General class of registration may supervise members. Furthermore, members in the General class, who are registered with a condition of supervised



practice (i.e., they can only practice if supervised by a member of the profession), are not permitted to supervise others.

- d. Supervisors must not supervise individuals to whom they are related or are closely associated with in any way (for example, a spouse, family member, or business partner). Additionally, there must not be a real or perceived conflict of interest between the supervisor and the individual they are supervising).
- e. Supervisors must have the skills to:
 - i. communicate effectively with those under their supervision; and
 - ii. evaluate members' skills and knowledge to ensure that they are able to practise the profession competently and safely.

Criteria for the approval of a supervisor

The following criteria do not apply to members who supervise students within TCM practical training programs. Education programs set their own supervisor criteria, but may also adopt College Policies, as appropriate.

Supervisors must be pre-approved by the Registrar.

The following are the criteria that the Registrar will use to determine whether to approve the proposed supervisor.

- The proposed supervisor must have been registered in the General class for at least the immediate past five years;
- The proposed supervisor must have conducted at least 500 TCM patient visits in the last three years, as of their most recent registration renewal.
- The proposed supervisor's registration status with the College must be in good standing (e.g., not be in default of any fee);
- The proposed supervisor must not be the subject of a referral to the Discipline Committee, Fitness to Practice Committee or the Quality Assurance Committee;
- The proposed supervisor must not have any terms, conditions or limitations (TCLs) on their certificate of registration, except those that apply to all certificates of that class of registration.

The Registrar will also consider the proposed supervisor's history with the College. For example, the Registrar will take into account whether the proposed supervisor has a history of practice concerns or if they are, or have been, the subject of an investigation (whether it is as a result of a complaint or a Registrar's Investigation), and may decline a supervisor proposal accordingly.

Undertaking

Once approved, the supervisor will be required to enter into an undertaking in the form approved by the College that outlines their obligations as a supervisor. The undertaking may address responsibilities and



obligations in addition to those set out in this policy. A copy of the signed Supervision Undertaking will be provided to the supervisor and the supervised member.

The Registrar may rescind a supervisor agreement in the event that the Supervisor no longer meets the approval criteria noted above.

Supervisors' Obligations

The supervisor will at minimum:

- (a) Supervise the member under their supervision while they are providing patient care.

The supervisor may adjust the level of supervision to allow a member under their supervision to treat patients without being directly observed once the supervisor has assessed their abilities and is satisfied that they have the necessary knowledge, skills, judgement and competencies. The level of supervision must be adjusted in consideration of the individual patient's needs and the relevant risk factors. The supervisor must be immediately available, in person, to the member being supervised;

- (b) Be available to the member on a regular basis for support and guidance;
- (c) May not be a supervisor of more than six members at any given time;
- (d) Review and co-sign the member's patient records;
- (e) Promptly discuss any concerns arising from patient interactions and/or chart reviews and/or anything of relevance to the practice of the profession with the member;
- (f) Make recommendations to the member for practice improvements and ongoing professional development, and make inquiries of the member to determine that he or she is incorporating recommendations into their practice;
- (g) Report necessary information (including but not limited to the Written and Immediate Reports described below) to the College in a form acceptable to the Registrar; and
- (h) Participate in any other activities, such as reviewing other documents or conducting interviews with or obtaining feedback from the member's colleagues, co-workers and staff that the supervisor deems necessary to the member's supervision.

Written Reports

The supervisor will be required to submit written reports to the College. Such reports shall be in a form acceptable to the Registrar. The reports must include reasonable detail and contain all information that the supervisor believes will assist the College in evaluating the member's standard of practice, and the member's compliance with the terms, conditions and limitations imposed on their certificate of registration.

Please see Appendix A for a supervisor report template.



Immediate Reports

There will be situations where the supervisor must immediately alert the College, in writing, as it is relevant to the supervision relationship. These include situations where there is a concern that the member is not practising safely or may be engaging in professional misconduct, the supervision relationship has terminated or the supervisor is concerned that they have breached a term of the undertaking. If the supervisor is not certain if a written report is required, they should call the College as soon as possible to obtain advice.

Legislative Provisions

O. Reg. 27/13: Registration under Traditional Chinese Medicine Act, 2006, S.O. 2006, c. 27



Appendix A - Supervisor Report Template

Supervisor Information		
Name		
<i>First</i>	<i>Middle</i>	<i>Last</i>
Registration Number:	Designation: <input type="checkbox"/> R. TCMP <input type="checkbox"/> R. Ac	
Member Information		
Name		
<i>First</i>	<i>Middle</i>	<i>Last</i>
Registration Number:	Designation: <input type="checkbox"/> R. TCMP <input type="checkbox"/> R. Ac	
Reporting Period		
1. Supervised Practice Location(s) (e.g., practice name and address)		
2. Reporting Period (e.g., from the first day of supervised practice to current date)	From:	To:
3. Total number of patient visits completed under supervision during this reporting period:		
Evaluation Report		
4. Patient Treatments: Please comment on the member's skills in the following areas:		
a. Taking patient history and current health information	Expectations: <input type="checkbox"/> Consistently met <input type="checkbox"/> Somewhat met* <input type="checkbox"/> Unfulfilled*	*Explain
b. Communicating a TCM diagnosis	Expectations: <input type="checkbox"/> Consistently met <input type="checkbox"/> Somewhat met* <input type="checkbox"/> Unfulfilled*	*Explain
c. Preparing a treatment plan	Expectations: <input type="checkbox"/> Consistently met <input type="checkbox"/> Somewhat met* <input type="checkbox"/> Unfulfilled*	*Explain
d. Explaining the plan to the patient	Expectations: <input type="checkbox"/> Consistently met <input type="checkbox"/> Somewhat met* <input type="checkbox"/> Unfulfilled*	*Explain



e. Following up on the effects of treatment	Expectations: <input type="checkbox"/> Consistently met <input type="checkbox"/> Somewhat met* <input type="checkbox"/> Unfulfilled*	*Explain
f. Dealing with challenging or difficult patients	Expectations: <input type="checkbox"/> Consistently met <input type="checkbox"/> Somewhat met* <input type="checkbox"/> Unfulfilled*	*Explain
5. Health and Safety and Infection Control Practices		
a. Does the member use appropriate cleaning, disinfection and sterilization techniques?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Does the member use proper management of waste materials including sharps and materials contaminated by blood or body fluids?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Additional Comments		
6. Clinic Conditions		
a. Does the member provide patient privacy in the consultation area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Does the member keep the area clean, sanitary, pest-free, and in good repair?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Additional Comments		
7. Scope of Practice - describe the member's practice, giving examples of the full range of treatments they provide to patients.		
8. Assessment of the Member's Practice - provide YOUR assessment of the quality of the member's practice based on your own observations. Please provide specific examples.		



9. Supporting Documentation Checklist

- ☐ Liability Insurance (required) - attach a copy of the member's professional liability insurance policy.
- ☐ If applicable, attach a copy of the member's business card and advertising materials.
- ☐ Patient Records (required) – **attach a copy of at least six (6) unique patient records/files for each reporting period**; include the following:
 - ☐ Informed consent forms
 - ☐ Records of each visit (initial treatment and follow-up treatment record)
 - ☐ Receipts for treatments

Important: When submitting patient records to the College you must ensure that the patient's personal health information is protected. To do so, you may **redact identifying patient information** (e.g., patient's names, home addresses)

To submit the files, you may either:

- Upload the files to a secure cloud folder accessible through your member portal
- Submit the files by email to registration@ctcmpao.on.ca in a password protected pdf format.

10. Supervisor's Signature

Name (Printed)

Signature

Date



Changes to Supervision Policy

Section – Intent

Separate the policy for supervision of students in an education setting from the policy for supervision of members. The proposed policy changes described below apply to the supervision of members. The policy for supervision of students will be reviewed at another time.

Action

Amended

Reason

Current policy has two distinct components: one for supervision of the clinical component of education programs and the other for supervision of a member by another member. For clarity, it is recommended to separate the components into two distinct policy documents.

Section – Which Members Require Supervision?

Reworded

Action

Amended

Reason

For clarity

Section – General Accountability and Responsibility

In all cases,

- a. The supervisor is ultimately responsible for the quality of care provided by those under their supervision. This includes ensuring that those under their supervision meet the required clinical standard of care and display the expected knowledge, skill, judgment and attitude expected of a traditional Chinese medicine practitioner and/or acupuncturist.
- b. Supervisors may only supervise in the areas of TCM practice in which they are educated and experienced. In particular, only supervisors who hold the R. TCMP designation may supervise herbal treatments.
- c. Only supervisors registered in the General class of registration may supervise members. Furthermore, members in the General class, who are registered with a condition of supervised practice (i.e., they can only practice if supervised by a member of the profession), are not permitted to supervise others.
- d. Supervisors must not supervise

Action

New

Reason

To clarify the general responsibilities and accountabilities that apply to all members who act as supervisors, in a distinct section.



individuals to whom they are related or are closely associated with in any way (for example, a spouse, family member, or business partner).

Additionally, there must not be a real or perceived conflict of interest between the supervisor and the individual they are supervising).

- e. Supervisors must have the skills to:
 - i. communicate effectively with those under their supervision; and
 - ii. evaluate members' skills and knowledge to ensure that they are able to practise the profession competently and safely.

Section – Criteria for the approval of a supervisor

- The proposed supervisor must have been registered in the General class for at least the immediate past five years;
- The proposed supervisor must have conducted at least 500 TCM patient visits in the last three years, as of their most recent registration renewal.
- The proposed supervisor's registration status with the College must be in good standing (e.g., not be in default of any fee);
- The proposed supervisor must not be the subject of a referral to the Discipline Committee, Fitness to Practice Committee or the Quality Assurance Committee;
- The proposed supervisor must not have any terms, conditions or limitations (TCLs) on their certificate of registration, except those that apply to all certificates of that class of registration.

Action

New

Reason

To establish clear expectations regarding the qualifications and experience required for a supervisor, in order to ensure safe and effective oversight.

If there are concerns about a proposed supervisor's suitability beyond what is defined here, the Registrar may decline the proposal on a case-by-case basis.



The Registrar will also consider the proposed supervisor's history with the College. For example, the Registrar will take into account whether the proposed supervisor has a history of practice concerns or if they are, or have been, the subject of an investigation (whether it is as a result of a complaint or a Registrar's Investigation), and may decline a supervisor proposal accordingly.

Section – Undertaking

The Registrar may rescind a supervisor agreement in the event that the Supervisor no longer meets the approval criteria noted above.

Action

New

Reason

Wording has been added to clarify that an existing supervisor agreement may be rescinded if a supervisor's standing should change, such that they no longer meet the approval criteria.

Section – Supervisor' Obligations

The supervisor will at minimum:

- (a) Supervise the member under their supervision while they are providing patient care.

The supervisor may adjust the level of supervision to allow a member under their supervision to treat patients without being directly observed once the supervisor has assessed their abilities and is satisfied that they have the necessary knowledge, skills, judgement and competencies. The level of supervision must be adjusted in consideration of the individual patient's needs and the relevant risk factors. The supervisor must be immediately available, in person, to the member being supervised;

- (b) Be available to the member on a regular basis for support and guidance;

Action

Amended

Reason

The language in this section has been revised to provide clear guidance on the responsibilities of supervisors. Additionally, a new requirement has been added, limiting supervisors to overseeing a maximum of 6 members at a given time. This measure is implemented to ensure that supervisory responsibilities remain manageable and can be effectively carried out.



- (c) May not be a supervisor of more than six members at any given time;
- (d) Review and co-sign the member's patient records;
- (e) Promptly discuss any concerns arising from patient interactions and/or chart reviews and/or anything of relevance to the practice of the profession with the member;
- (f) Make recommendations to the member for practice improvements and ongoing professional development, and make inquiries of the member to determine that he or she is incorporating recommendations into their practice;
- (g) Report necessary information (including but not limited to the Written and Immediate Reports described below) to the College in a form acceptable to the Registrar; and
- (h) Participate in any other activities, such as reviewing other documents or conducting interviews with or obtaining feedback from the member's colleagues, co-workers and staff that the supervisor deems necessary to the member's supervision.

Section – Written Reports

Please see Appendix A for a supervisor report template.

Action

New

Reason

In order to evaluate anyone under supervision, reports should be detailed. A template for creating a supervisor report had also been developed.



NAME	Supervision Policy for Applicants and Students		
TYPE	Registration		
STATUS		VERSION	
DATE APPROVED		DATE REVISED	

Intent

This policy applies to members of the College who act as supervisors to applicants or students in the practice of traditional Chinese medicine. The policy addresses the following:

1. How the College interprets the “clinical experience” requirement as set out in s. 9(1) para 2 of the Registration Regulation; and
2. The professional obligations of members who agree to supervise the clinical experience for applicants or students.

In all cases, the supervisor is ultimately responsible for the quality of care provided by those under their supervision. This includes ensuring that those under their supervision meet the expected clinical standard of care and display the expected knowledge, skill, judgment and attitude expected of a traditional Chinese medicine practitioner/acupuncturist. Furthermore, members may only supervise in the areas of TCM in which they are educated and experienced. In particular, only members who hold the R. TCMP designation may supervise herbal treatments.

Policy

1. Meeting the Program of Clinical Experience Requirement

Applicants to the College must complete a program of clinical experience in the profession that is structured, comprehensive, supervised and evaluated and which consists of at least 45 weeks of clinical experience involving at least 500 hours.¹ The College interprets “structured, comprehensive, supervised, and evaluated” as including the following criteria:

- The student is directly supervised by a member of the College in the General Class
 1. The supervisor may allow students to independently treat patients without being observed by the supervisor, once the supervisor has assessed the student’s abilities and is satisfied that the student has the necessary knowledge, skills, judgement and competencies. However, the supervisor must be immediately available to the student if needed.
- The supervisor is, at all times, physically present at the treatment location while the student treats the patient.
- The supervisor must observe interactions between the student and patient to assess:
 1. The student’s performance, capabilities, and educational needs
 2. Whether the student has the requisite competence to safely participate in a patient’s care
- The supervisor will review and sign patient records to confirm accuracy.

¹ See s. 9(1) para 2 of the Registration Regulation



It is the supervisors' responsibility to ensure that students receive comprehensive training. The College will consider the training to be comprehensive if the following requirements are met:

R. TCMP

- All patient visits completed within the 500 hours of direct patient contact must involve the full scope of traditional Chinese medicine including herbal medicine.
- If a student has completed a program of clinical training in acupuncture only, and wishes to be eligible for the R. TCMP designation, they must complete 250 hours of direct patient contact involving herbal medicine.

R. Ac

- All patient visits completed within the 500 hours of direct patient contact must involve the full scope of traditional Chinese medicine not including herbal medicine.



Meeting Date:	June 12, 2024
Issue:	Risk Management Plan
Reported By:	Sean Cassman
Action:	Information

Issue

The College is updating Council on the current risk management plan, which includes a complete look at the risks facing the College.

Public Interest Rationale

The College must be able to carry out its responsibilities set out in legislation. In order to avoid situations where we are prevented from doing that, a risk management plan is necessary to predict and mitigate risks.

Changes to Risk Register

There have been no changes to the assessed risk since last Council meetings.

Next Steps

Staff will continue to monitor risks and maintain the risk management plan

College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMAO) Risk Management Plan

Risk Management Vision

CTCMAO is committed to building and fostering an enterprise risk management culture that clearly faces reality through systematic process of risk identification, assessment, and management and will affect this through its strategic planning process. CTCMAO’s value of serving and protecting the public interest, providing quality service, accountability and transparency, teamwork and collaboration are the foundation of the organizational risk culture and will guide our actions.

Stakeholder Roles and Responsibilities

Role	Risk Management Responsibility	Assignment
Council	Responsible for approving Risk Tolerance Evaluation, reviewing Risk Management Plan and periodically reassessing success of Risk Management strategies.	Council Members
President	Responsible for leading Council in reviewing the Risk Management Plan, implementing certain procedures needed in specified emergency situations, ensuring action is taken as necessary to protect the separation of Council from operations.	Joanne Pritchard-Sobhani
Registrar and CEO	Responsible for ensuring comprehensive risk assessment within the organization, development and implementation of mitigation strategies, and ongoing evaluation of effectiveness of risk management by the organization.	Sean Cassman (Acting)
Director, IT, Finance and Corporate Services	Responsible for identifying risk factors relating to financial management policies and procedures, adhering to sound financial risk management and mitigation policies and strategies. Champions organization-wide effort to protect the vital assets of the College and engage key stakeholders in risk management activities.	Francesco Ortale
Program Managers	Responsible for complying with obligations outlined in the Health Professional Procedural Code respecting procedure, timelines, transparency, objectivity and fairness.	Ryan Chu, Mary Kennedy, Mohan Cappuccino, Sean Cassman



Risk Management Process and Activities

The CTCMPAO regularly undertakes risk management activities to protect the interests of the public, its members and the Government of Ontario to which it is accountable. Risk management involves complex processes of risk assessment, development and implementation of mitigation strategies and evaluation of effectiveness, change and opportunity. Effective risk management requires the active engagement of everyone actively engaged in the organization and may include consultation with external experts such as auditors. The College adheres to a Risk Management Policy which requires regular review, evaluation and reporting to Council.

Risk Analysis Matrix

College staff engage in a collective and joint process to identify types of risks that are likely to affect the achievement of business goals. For each risk, staff consider what could happen, how and why it could happen, and the consequences of said risk.

Staff systematically review the following to identify potential risks and to categorize potential risks using a risk occurrence matrix:

- each function performed within the College,
- records and reports generated or retained by the College.
- business processes, policies and procedures.
- resources of the College including knowledge of history, processes and legislative, operational and policy environment, staff, furnishings and equipment.

Types of Risk Identified:

1. Governance
2. Loss Confidence in CTCMPAO
3. Finance
4. Information Management
5. Facility/Site Safety and Security
6. Human Resources
7. Statutory Obligations
8. Exam



Risk Occurrence Matrix

<div>Likelihood (probability of occurring)</div> <div>Consequence/ Impact</div>		Rare <div>The event may occur in exceptional circumstances.</div> (0 – 5 %)	Unlikely <div>The event has happened at some time.</div> (6-33%)	Possible <div>The event has happened periodically</div> (34-65%)	Likely <div>The event has happened previously and could reasonably occur again.</div> (66-79%)	Almost Certain <div>The event is extremely likely to occur</div> (80-100%)
		1	2	3	4	5
Negligible <div>Low financial/reputation loss, small impact on operations</div>	1	1	2	3	4	5
Minor <div>Some financial loss, moderate impact on business</div>	2	2	4	6	8	10
Moderate <div>Moderate financial loss, moderate loss of reputation, moderate business interruption</div>	3	3	6	9	12	15
Major <div>Major financial loss, several stakeholders raised concerns, major loss of reputation, major business interruption</div>	4	4	8	12	16	20
Extreme <div>Complete cessation of business, extreme financial loss, irreparable loss of reputation</div>	5	5	10	15	20	25

Risk Rating	Risk Priority	Description
1-4	L	Low Risk: May require consideration in any future changes to the work area or processes, or can be fixed immediately
5-9	M	Medium Risk: May require corrective action, planning and budgeting process



10-16	H	High Risk: Requires immediate corrective action
20-25	E	Extreme Risk: Requires immediate prohibition of the work, process and immediate corrective action

Risk Assessment

This step involved analysing the likelihood and consequences of each identified risk using the measures provided in the table above. The College considers two types of risk:

- Inherent risk – represents the current level risk that exists given the existing set of controls.
- Residual risk – represents the amount of risk that remains after additional controls are in place.

The staff looked at the existing controls for each risk and identified what we would do to control the risk. Then, using the chart, they rated the effectiveness of existing controls in preventing the risk from happening or minimising its impact should it occur.

- Likelihood is a qualitative description of probability and frequency, asking the question ‘what is the likelihood of the risk occurring?’
- Consequence was described as the outcome of the event, being a financial loss, loss of reputation, or business interruption, asking the question, ‘what is the consequence of the risk event?’
- The risk rating was the sum of the consequence rating times the likelihood rating.
- The risk priority chart provides an indication of urgency to how soon the staff needed to implement a strategy to address the risk.



CTCMPAO Risk Registry

Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Governance	Not reaching quorum to constitute a Committee resulting in or Council becomes unconstituted: <ul style="list-style-type: none">Public perception of not meeting College mandate of public protectionDelays in decision-making affecting applicants (i.e. registration) or members (QA/ICRC/Discipline)	4 Likely	5 Extreme	20 Extreme	Council, President, Registrar	Current Treatment: <ul style="list-style-type: none">Staff try to accommodate Council/committees members' schedules to ensure quorum in all meetings.Continued ongoing communications with Public Appointments SecretariatThe College has procedures in place to ensure the College functions properly while the Council is unconstituted.<ul style="list-style-type: none">Committees continue to function as per section 12.09 of College by-laws. Committees remain constituted as long as there is quorum.The College has hired a government relations consultant to help press this issue with the government.Re-evaluate government relations approach to improve relationship with MoHAllow non-council members to sit on statutory committees
						Additional Proposed Treatment: <ul style="list-style-type: none">Outreach to TCM associations and schools to reach prospective members to ensure understanding of the College's role and why regulation matters.Create and advertise opportunities for engagement with the College.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Governance	Council/Committees operating outside of mandate or becoming engaged with operational matters resulting in: <ul style="list-style-type: none">Poor or inconsistent decisionsIncreased likelihood of conflictInefficiencies in operations	3 Possible	4 Major	12 High	President, Council, Registrar	Current Treatment: <ul style="list-style-type: none">Council and Committee orientation to occur annually.Prepare Terms of References for all statutory/non-statutory committeesConduct a governance review with a third party consultant to examine governance practices.New strategic plan in development to establish priorities for how to best achieve our mandate.
						Additional Proposed Treatment: <ul style="list-style-type: none">Prepare a College governance manual outlining major responsibilities and separation of roles between Council and operations.
Governance	Council/Committee not adhering to Code of Conduct, Conflict of interest, bylaws and other Council policies resulting in: <ul style="list-style-type: none">InefficienciesPoor decisionNegative reporting by stakeholdersDecreased morale on Council/Committees	3 Possible	4 Major	12 High	President, Registrar, Council	Current Treatment: <ul style="list-style-type: none">Each Council/Committee are properly trained and prepared for their service.Legal Counsel delivers the orientation at the Council/Committee levels.Evaluate Council effectiveness on its performance through a council effectiveness survey after each meeting.Have each Council/Committee member annually complete and signs a statement declaring any known conflicts and agreeing to comply with the Code of Conduct.Conduct regular Council/Committee training.
						Additional Proposed Treatment: <ul style="list-style-type: none">Competency requirements for prospective Council/Committee members



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Governance	CTCMPAO unable to retain current Council and Committee members	4 Likely	3 Moderate	12 High	President, Council, Registrar	Current Treatment: <ul style="list-style-type: none">Non-Council Committee members to better manage workload
Loss of Confidence in CTCMPAO	Applicant/member disengagement resulting in: <ul style="list-style-type: none">Lack of interest for election to CouncilLack of membership on Committees/working groupsReduction in overall registration numbers	4 Likely	4 Major	16 High	Council, Registrar,	Current Treatment: <ul style="list-style-type: none">Create and advertise opportunities for engagement with College.Regular outreach meetings and educational sessions through professional associations, TCM schools, and other events as presented. Additional Proposed Treatment: <ul style="list-style-type: none">Continuous outreach to key stakeholders to ensure they are able to keep their members informed and engaged.Develop “stories” for publication, describing benefits of engagement.Incorporate simple plain language in all college documents.Develop a recruitment plan for new Council and Committee members
Loss of Confidence in CTCMPAO	Public, government, stakeholders perceive the College as not being transparent and/or fair	3 Possible	4 Major	12 High	President, Council, Registrar	Current Treatment: <ul style="list-style-type: none">Implementation of bylaws related to transparency i.e. posting additional information on public register.Conduct annual review of bylaws.Continuous outreach to TCM schools to reach prospective members to ensure understanding of the College’s role and why regulation matters.Posting workplan update on College website



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
						Additional Proposed Treatment: <ul style="list-style-type: none">Adoption of ARGE transparency principles.Update and post all statutory policies on website.Collaborate with other regulatory colleges on strategies to promote transparency.
Loss of Confidence in CTCMPAO	CTCMPAO provides insufficient support to external stakeholders	3 Possible	2 Minor	6 Medium	Registrar, Director, IT, Finance and Corporate Services, Program Managers	Current Treatment: <ul style="list-style-type: none">One point of contact. An enquirer is provided with the name by respondent and that person commits to and takes necessary action.
						Additional Proposed Treatment: <ul style="list-style-type: none">Research and develop internal organizational customer service standards and policies (i.e. client services policy part of AODA requirement).Statutory teams to prepare FAQs for each department.Invite feedback through customer service surveys.Review of website material to ensure accessible and easy to understand.
Financial	Insufficient financial resources impact the ability of the College to meets its mandate. This will result in: <ul style="list-style-type: none">Lack of retained funds to carry outLow membership in College	2 Unlikely	4 Major	8 Medium	Registrar, Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">Prepare operating budgets using 5-year projections and outlook.Strategies in place for cost savings.Develop reserve funds to cover unexpected expensesPrepare multiple scenarios for forecasting and develop plans that are flexible.Calendarize revenue to predict cash flow.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
	<ul style="list-style-type: none">Uneven cash flow					
Financial	Poor financial management results in the College being unable to meet strategic initiatives	2 Unlikely	4 Major	8 Medium	Registrar, Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">Budget is prepared annually and approved by Council.Use of 5-year time horizon for financial planning.Prepare multiple scenarios for forecasting and develop plans that are flexible.Prepared a formal Reserve Fund Policy outlining specific purpose of each internally restricted fund to ensure funds are used for its intended purposeCalendarize revenue to predict cash flow.
Finance	Risk of Fraud/Theft	2 Unlikely	4 Major	8 Medium	Registrar, Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">Financial audit completed annually by chartered accountants.Finance coordinator reviews and verifies invoices prior to submitting Registrar for approval.Bank cheques require documentation and two signaturesBank statements are reviewed and reconciled monthly.Financial update provided at each Council meeting.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
						Proposed Treatment: <ul style="list-style-type: none">• Prepare formal financial policies to document financial procedures as part of the College's financial policies.• Establish a procurement policy through a process that is open, fair and transparent.
Information Management	Information and computer systems are compromised due to: <ul style="list-style-type: none">• Viruses, worms and malicious software• Security breach/hacking• Loss of power	3 Possible	4 Major	12 High	Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">• Backup procedures carried out daily on electronic files.• Processes such as encryption, access control procedures, and network firewalls in place.• Adequate cyber security insurance in place.
						Proposed Additional Treatment: <ul style="list-style-type: none">• Prepare a disaster recovery plan.• Solicit services of an external vendor to conduct an IT audit, vulnerability assessment and security penetration assessment.
Information Management	Improper handling of digital data by staff or vendors leads to exposure of sensitive data	3 Possible	4 Major	12 High	Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">• College ensures that personal information is stored in electronic and physical files that are secure. Physical files are under lock and key.
						Additional Proposed Treatment: <ul style="list-style-type: none">• Add additional security measures to safeguard information which include restricting access to personal information to authorized personnel.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Information Management	Breach of confidentiality: <ul style="list-style-type: none">Member/applicant personal informationPublic informationVendor informationCouncil member informationStaff information	3 Possible	4 Major	12 High	All	Current Treatment: <ul style="list-style-type: none">Applicant/registrant information housed on secure external server (CRM).Use secure login protocols, data encryption, and passwords.
						Additional Proposed Treatment: <ul style="list-style-type: none">Develop protocols for reporting, investigating and correcting security breaches to ensure PHIPA compliance.Require signed commitment to adhere to College confidentiality requirements by Council and College staff.Facilitate regular orientation and training on privacy and confidentiality for Council and College staff.
Information Management	Unintended destruction or loss of records	2 Unlikely	3 Moderate	6 High	Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">Staff adopt filing protocols for naming, deletion of copies, electronic and paper storage.Backup procedures carried out daily on electronic files.File room/cabinets are secured and locked daily.
						Proposed Additional Treatment: <ul style="list-style-type: none">Increase security in the College server room.
Facility/Site Safety and Security	Permanent damage to equipment and/or furnishings due to water/fire damage.	2 Unlikely	4 Major	8 Medium	Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">Office building is code compliant for building and fire standards.Adequate insurance in place to recover replacement.
						Additional Proposed Treatment: <ul style="list-style-type: none">Ongoing annual fire training for all staff, Council and Committee members.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Facility/Site Safety and Security	Computers, servers and other items of value belonging to the College are stolen	2 Unlikely	4 Major	8 Medium	Director, IT, Finance and Corporate Services	Current Treatment: <ul style="list-style-type: none">Security cameras installed at each exit, common hallways and meeting rooms.College maintains a complete inventory of its electronic equipment, computers and technology systems.Adequate insurance in place to recover replacement of loss goods.
Human Resources	Disruption in work due to unexpected and/or extended absence of an employee, or employee permanently leave organization resulting in: <ul style="list-style-type: none">Backlog of workInability to meet required timelinesMajor interruption in work	2 Unlikely	3 Moderate	6 Medium	Registrar, Director, IT, Finance and Corporate Services, Program Managers	Current Treatment: <ul style="list-style-type: none">Job descriptions have been created for all positions.Regular staff meetings are held to update all staff on work in progress.
						Additional Proposed Treatment: <ul style="list-style-type: none">Prepare succession plan for the Registrar position.All college departments to document procedures for all key functions.
Human Resources	Interpersonal conflicts result in: <ul style="list-style-type: none">Complaints of harassmentDecrease productivityPoisoned work environmentStaff discontent and poor moraleHigh turnover rate in staff	2 Unlikely	2 Minor	4 Low	Registrar Program Managers	Current Treatment: <ul style="list-style-type: none">HR policies in place.Staff receive legislated training on violence in the workplace. and this is documented.Team-building events held involving all staff.Registrar addresses all issues of conflict promptly.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (Patient Relations)	College is not taking appropriate measures to keep client/patients safe from sexual abuse.	3 Possible	3 Moderate	9 Medium	Registrar, Program Manager, Policy and Governance Analyst	<p>Current Treatment:</p> <ul style="list-style-type: none">• Therapy and counselling forms have been updated to be compliant with legislation.• Available Standards for Maintaining Professional Boundaries and Preventing Sexual Abuse.• Provide resources to the membership and public to be aware of the measures the College has in place to prevent and deal with sexual abuse.• QA self and peer and practice assessment include a section on Sexual Abuse, also covering required consent for services provided in sensitive areas.• Regular communication (e.g., Webinars, Education Tips and articles in Qi Newsletter) regarding Boundaries and Sexual Abuse. <p>Additional Proposed Treatment:</p> <ul style="list-style-type: none">• Develop a comprehensive and effective Sexual Abuse Plan.• Adopt a number of policies and measures that underpin a zero-tolerance approach to sexual abuse.•
Statutory Obligations (Registration)	CTCMPAO not taking steps to mitigate lack of oversight in TCM education	3 Possible	4 Major	12 High	Registrar, Program Managers	<p>Current Treatment:</p> <ul style="list-style-type: none">• Registration regulations outline entry requirements.• College is working with provincial regulators to develop approval framework. <p>Additional Proposed Treatment:</p> <ul style="list-style-type: none">• Encourage the Ministry to accredit TCM education programs.• All departments assist in outreach to students/educators



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (Registration)	The College's registration process is not transparent, objective, impartial, and fair.	2 Unlikely	4 Major	8 Medium	Registrar Program Managers	Current Treatment: <ul style="list-style-type: none">College underwent an audit of its registration practices from the Office of the Fairness Commissioner (OFC).Recommendations from the OFC have been implemented
Statutory Obligations (QA)	Quality Assurance Program is not an effective tool for maintaining the continuing competency of members	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	<div>Current Treatment:<ul style="list-style-type: none">Small percentage of members randomly selected to submit self-assessment form.All members are required to meet minimum professional development criteria and maintain a record of their self-assessment for a minimum of 3 years.Members are required to declare non-compliance if they do not meet the minimum criteria.Both random and targeted (i.e., directed based on identified criteria, non-compliance with professional development) Peer and Practice Assessment are conducted.QA policies developed to support QA program including a review of new and existing standards of practice.Redevelopment of the QA program under way. Will include features to support member engagement</div> <div>Additional Proposed Treatment:<ul style="list-style-type: none">Develop additional standards of practice.Improved technology to support self-assessment will enable improved assurance that members are maintaining the minimum professional development requirements.</div>



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (All Departments)	Lack of tools enabling members to understand, and meet, their statutory obligations.	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Current Treatment: <ul style="list-style-type: none">Record-keeping guideline developed and webinar developed.QA Confirmation of Completion Form
						Additional Proposed Treatment: <ul style="list-style-type: none">Develop working group to establish TCM specific standards of various modalities i.e. Acupuncture
Statutory Obligations (ICRC)	Complaints received are not resolved in a timely manner. Backlog of Registrar's reports.	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Current Treatment: <ul style="list-style-type: none">Complaints and Reports are triaged by risk.<ul style="list-style-type: none">Depending on the risk level of a matter, higher risk matters are expedited, whereas lower risk matters are addressed through investigation process.Once matters are triaged, they are processed based on chronological so that resources are devoted to addressing historical matters first prior to newer matters.
Statutory Obligations (ICRC/Discipline)	Ensuring fairness to member who receives a complaint or is going through discipline.	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Additional Proposed Treatment: <ul style="list-style-type: none">Post more information on the website for members related to:<ul style="list-style-type: none">Sexual abuse complaints and investigation processMandatory reporting of sexual abuseProviding additional information to the registrant when they are self-represented.Revamping the available information on the College website regarding the Discipline process.



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (CPMF)	The College must be able to demonstrate to the Ministry that it is meeting its statutory obligations in a clear and transparent way.	3 Possible	3 Moderate	9 Medium	All	Current Treatment: <ul style="list-style-type: none">Staff have conducted a full review of the College based on CPMF requirements and to identify where we are deficient.Some deficiencies have been identified. Steps have been taken to either address the deficiency in the previous reporting period, or to address it in future reporting periods.
Exam	Exam security is breached	3 Possible	4 Major	12 High	Registrar Program Managers	<div>Current Treatment:<ul style="list-style-type: none">Examination and Item-Writing Committee sign confidentiality agreement and are provided with training from ASI.Computer-based examination developed with provincial regulators</div> <div>Additional Proposed Treatment:<ul style="list-style-type: none">Strict protocols should be in place for handling examination materials.Any report of a breach of agreement will be referred to registration/ICRC for immediate action.No hard copies or electronic copies of the examination or items are retained by the College or any other person involved in the development of the exam.</div>
Exam	Validity of the administration of the exam sitting is challenged due to: <ul style="list-style-type: none">Hydro failureIllnessMedical Emergency	2 Unlikely	2 Minor	4 Low	Registrar, Program Manager	<div>Current Treatment:<ul style="list-style-type: none">Research sites to ensure stability of sites.Procedures in place for invigilators to deal with emergencies.</div> <div>Additional Proposed Treatment:<ul style="list-style-type: none">Educate exam candidates on withdrawing prior to exam</div>



Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Exam	Validity of examination is challenged	2 Unlikely	2 Minor	4 Low	Registrar, Program Manager	<div>Current Treatment:<ul style="list-style-type: none">Examination development and administration conducted by highly qualified vendor with extensive experience and highly credible.Each exam sitting undergoes extensive psychometric analysis and further review by examination committee.</div> <div>Additional Proposed Treatment:<ul style="list-style-type: none">Performance of vendor is reviewed annually and any concerns addressed at that meeting.Clear separation between non-statutory committee (Examination/Item Writing Committee) and Council members so no perceived conflict of interest.Work with provincial counterparts to establish proper governance channels.</div>