

Excerpt from the Regulated Health Professions Act, 1991

Schedule 2 Health Professions Procedural Code

Duty of College

2.1 It is the duty of the College to work in consultation with the Minister to ensure, as a matter of public interest, that the people of Ontario have access to adequate numbers of qualified, skilled and competent regulated health professionals. 2008, c. 18, s. 1.

Objects of College

- 3. (1) The College has the following objects:
 - To regulate the practice of the profession and to govern the members in accordance with the health profession Act, this Code and the Regulated Health Professions Act, 1991 and the regulations and by-laws.
 - 2. To develop, establish and maintain standards of qualification for persons to be issued certificates of registration.
 - 3. To develop, establish and maintain programs and standards of practice to assure the quality of the practice of the profession.
 - 4. To develop, establish and maintain standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among the members.
 - 4.1 To develop, in collaboration and consultation with other Colleges, standards of knowledge, skill and judgment relating to the performance of controlled acts common among health professions to enhance interprofessional collaboration, while respecting the unique character of individual health professions and their members.
 - 5. To develop, establish and maintain standards of professional ethics for the members.
 - 6. To develop, establish and maintain programs to assist individuals to exercise their rights under this Code and the Regulated Health Professions Act, 1991.
 - 7. To administer the health profession Act, this Code and the Regulated Health Professions Act, 1991 as it relates to the profession and to perform the other duties and exercise the other powers that are imposed or conferred on the College.
 - 8. To promote and enhance relations between the College and its members, other health profession colleges, key stakeholders, and the public.
 - 9. To promote inter-professional collaboration with other health profession colleges.
 - 10. To develop, establish, and maintain standards and programs to promote the ability of members to respond to changes in practice environments, advances in technology and other emerging issues.

Duty

- 11. Any other objects relating to human health care that the Council considers desirable. 1991, c. 18, Sched. 2, s. 3 (1); 2007, c. 10, Sched. M, s. 18; 2009, c. 26, s. 24 (11).
- (2) In carrying out its objects, the College has a duty to serve and protect the public interest. 1991, c. 18, Sched. 2, s. 3 (2).

SCHEDULE 1 TO THE BY-LAWS

Code of Conduct for Members of the Council and All Committees

- 1. This Schedule applies to members of the Council and of all committees of the College.
- 2. Council and Committee Members must, at all times, maintain high standards of integrity, honesty and loyalty when discharging their College duties. They must act in the best interest of the College. They shall:
 - a. be familiar and comply with the provisions of the RHPA, its regulations and the Code, the Act, its regulations, and the By-Laws and policies of the College;
 - b. promote the public interest in his/her contributions and in all discussions and decision making;
 - c. direct all activities toward fulfilling the College's objects as specified in legislation;
 - d. diligently take part in committee work and actively serve on committees as appointed by the Council;
 - e. regularly attend meetings on time and participate constructively in discussions;
 - f. offer opinions and express views on matters before the College, Council and committee, when appropriate;
 - g. participate in all deliberations in a respectful and courteous manner, recognizing the diverse background, skills and experience of members on Council and committees;
 - h. uphold the decisions made by a majority of Council and committees, regardless of the level of prior individual disagreement;
 - i. place the interests of the College, Council and committee above all other interests;
 - j. avoid and, where that is not possible, declare any appearance of or actual conflicts of interest;
 - k. refrain from including or referencing Council or committee positions held at the College in any personal or business promotional materials, advertisements and business cards.
 - I. preserve confidentiality of all information before Council or committee unless disclosure has been authorized by Council or otherwise exempted under s. 36(1) of the RHPA;
 - m. refrain from communicating to Members, including other Council or Committee Members, on statutory committees regarding registration, complaints, reports, investigations, disciplinary or fitness to practice proceedings which could be perceived as an attempt to influence a statutory decision or a breach of confidentiality, unless he or she is a member of the panel or, where there is no panel, of the statutory committee dealing with the matter;
 - respect the boundaries of staff whose role is not to report to or work for individual Council or Committee Members:
 - o. be respectful of others and not engage in behaviour that might reasonably be perceived as verbal, physical or sexual abuse or harassment; and
 - p. regularly evaluate his or her individual performance, and that of the collective to assure continuous improvement.

PROVISION 11.16 OF THE BY-LAWS - Language of Meetings

Meetings of the Council and Committees shall be conducted in English.

SCHEDULE 2 TO THE BY-LAWS

Rules of Order of the Council

- 1. In this Schedule, "Member" means a Member of the Council.
- Each agenda topic will be introduced briefly by the person or committee representative
 raising it. Members may ask questions of clarification, then the person introducing the
 matter shall make a motion and another Member must second the motion before it can
 be debated.
- 3. When any Member wishes to speak, he or she shall so indicate by raising his or her hand and shall address the presiding officer and confine himself or herself to the matter under discussion.
- 4. Staff persons and consultants with expertise in a matter may be permitted by the presiding office to answer specific questions about the matter.
- 5. Observers at a Council meeting are not allowed to speak to a matter that is under debate.
- 6. A Member may not speak again on the debate of a matter until every other Member of Council who wishes to speak to it has been given an opportunity to do so. The only exception is that the person introducing the matter or a staff person may answer questions about the matter. Members will not speak to a matter more than twice without the permission of the chair.
- 7. No Member may speak longer than five minutes upon any motion except with the permission of Council.
- 8. When a motion is under debate, no other motion can be made except to amend it, to postpone it, to put the motion to a vote, to adjourn the debate or the Council meeting or to refer the motion to a committee.
- 9. A motion to amend the motion then under debate shall be disposed of first. Only one motion to amend the motion under debate can be made at a time.
- 10. When it appears to the presiding officer that the debate in a matter has concluded, when Council has passed a motion to vote on the motion or when the time allocated to the debate of the matter has concluded, the presiding officer shall put the motion to a vote.
- 11. When a matter is being voted on, no Member shall enter or leave the Council room, and no further debate is permitted.
- 12. No Member is entitled to vote upon any motion in which he or she has a conflict of interest, and the vote of any Member so interested will be disallowed.
- 13. Any motion decided by the Council shall not be re-introduced during the same session except by a two-thirds vote of the Council then present.
- 14. Whenever the presiding officer is of the opinion that a motion offered to the Council is contrary to these rules or the By-Laws, he or she shall rule the motion out of order and give his or her reasons for doing so.
- 15. The presiding officer shall preserve order and decorum, and shall decide questions of order, subject to an appeal to the Council without debate.
- 16. The above rules may be relaxed by the chair if it appears that greater informality is beneficial in the particular circumstances unless the Council requires strict adherence.
- 17. Members are not permitted to discuss a matter with observers while it is being debated.

- 18. Members shall turn off cell phones during Council meetings and, except during a break in the meeting, shall not use a cell phone, blackberry or other electronic device. Laptops shall only be used during Council meetings to review materials related to the matter under debate (e.g., electronic copies of background documents) and to make personal notes of the debate.
- 19. Members are to be silent while others are speaking.
- 20. In all cases not provided for in these rules or by other rules of Council, the current edition of Robert's Rules of Order shall be followed so far as they may be applicable.
- 21. These rules shall apply, with necessary modifications, to meetings conducted by teleconference or any other electronic means permitted by the By-Laws, including audio or teleconference.

SCHEDULE 3 TO THE BY-LAWS - Code of Ethics for Registered Members

Code of Ethics for Registered Members

All registered members of the College shall strive to attain the ideals identified in the College's Code of Ethics. The College's Code of Ethics for registered members is as follows:

- 1. General Responsibility
 - Practise within the scope of TCM practice and abide by the laws of the jurisdiction;
 - Maintain high competence (i.e., skills, knowledge and judgment) at all times;
 - Practise professionally, honestly and with integrity;
 - Respect the authority of the College and uphold the principles of self-regulation;
 - Place the health and care of patients above personal gain.

2. Responsibility to Patients

- Recognize that the primary duty of a practitioner is the health and well-being of their patients;
- Respect a patient's value, needs, dignity and choices;
- Provide care to patients regardless of their race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, family status or disability;
- Listen and explain to patients the available treatment options, and their goal, risks, effectiveness and cost. Provide the best treatment plan to the patient after the patient understands his or her options:
- Provide timely and quality care that is consistent with the standards of the profession;
- Provide the best care to patients, recognizing one's own limitations and referring patients to other
 practitioners, or other health care providers when the level of care needed is beyond one's
 competence;
- Being honest and fair when charging fees for services and any products or prescriptions;
- Protect patients from unsafe, incompetent and unethical care;
- Respect the physical, emotional or financial integrity of patients;
- Protect the privacy and confidentiality of the health information of patients.

3. Responsibility to Oneself and the Profession

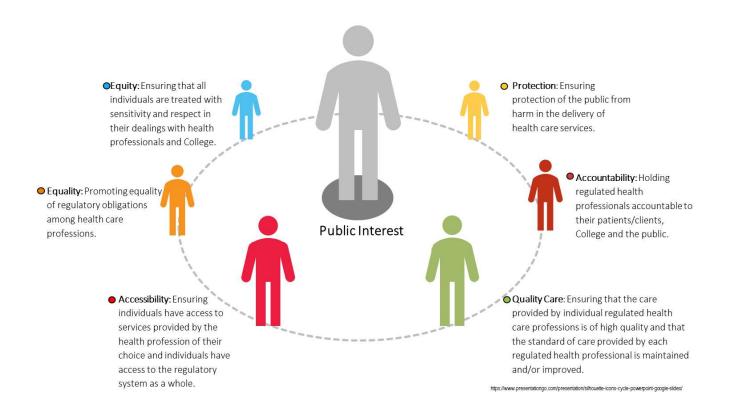
- Acknowledge the limitation of one's knowledge, skills and judgment;
- State one's qualification and experience honestly and fairly;
- Continually upgrade one's knowledge, skills and judgment to improve one's services to patients;
- Respect other health professionals and members of the TCM profession;
- Refrain from passing judgment on the services of another health professional or another member of the TCM profession, except when required in the interest of the patient and after obtaining appropriate information;
- Collaborate with other members of the TCM profession and with other health professionals in the interest of the patient and the public;
- Be transparent and timely in providing information to patients, or a third party when requested or authorized by the patient or by law;
- Contribute to the ongoing development of TCM practices and pass on one's knowledge and skills to others;
- Uphold the honour and dignity of the TCM profession.

4. Responsibility to the Public

- Contribute to improving the standards of health care in general;
- Contribute in matters of public health, health education, environmental protection and legislation issues that affect the quality of care to the public;
- Offer help in emergency situations, if appropriate;
- Promote and enhance inter-professional collaboration;
- Represent the profession well.

PUBLIC INTEREST

in the context of the College Performance Measurement Framework



Decision Making Tool for Council

It is the mandate of the College to regulate the profession of traditional Chinese medicine and acupuncture in the public interest. As such, all decision made by Council must uphold the public interest. Below are a series of considerations for Council members to help guide their decision-making process. Council members should consider each question prior to making any policy decision.

- 1. The proposed policy is related to the practice of traditional Chinese medicine and acupuncture.
- 2. The proposed policy falls within the College's statutory mandate in that it reflects a government directive or the duty, object of the College.
- 3. The proposed policy is related to the public interest.
- 4. The proposed policy is supported by the College's strategic plan, mission or goals.
- 5. The proposed policy impacts on: a) health care system, b) patients, c) College resources, d) College reputation, e) legal, f) stakeholders, or g) members?
- 6. The proposed policy is consistent with current College policies/positions and best practices amongst regulatory colleges.
- 7. The policy is being proposed to address a particular issue or concern.
- 8. There are consequences for NOT supporting this policy at this time.
- 9. After having considered all other alternatives the policy is the most effective solution at this time.

BRIEFING ON MEETING PROCEDURE

Guideline for Observers Attending a Virtual Council Meeting

Council meetings are open to the public. However, the public may be excluded from any Council meeting or part of a meeting pursuant to section 7 of the *Health Professions Procedural Code*.

Individuals attending as observers are requested to:

- Turn off or mute all electronic devices;
- Refrain from recording of proceedings by any means, including the taking of photographs, video recordings, voice recordings or via any other means;
- Ensure that your audio is on mute for the duration of the virtual meeting;
- Avoid using any of the virtual meeting features such as chat, reactions, etc.;
- Stop streaming video so that only Council members are visible to the Council;
- Refrain from disruptive behaviour;
- Refrain from addressing or speaking to the Council while the meeting is in process;
- Refrain from lobbying of Council members during the meeting, even during breaks;
- Respect that observers are not allowed to participate in debate of any matter before the Council, or ask any questions of the Council;
- Respect the authority of the presiding officer.

The College reserves the right to remove any observer from a Council meeting if these guidelines are not met. Once removed, you are prohibited from returning to the meeting.

In the event that the Council goes in-camera pursuant to Paragraph (d) of Section 7(2) of the Code, all observers will be returned to the "waiting room/lobby" until the Council completes its in-camera discussions. When Council returns, observers who remain in the waiting room/lobby will be returned to the meeting.

Robert's Rules of Order – Quick Reference

- 1. All those who wish to speak to an item MUST go through the Chair.
- 2. The Chair will keep a list of who wishes to speak. The Chair will call on you to speak.
- 3. Please raise your hand to let the Chair know you wish to speak.
- 4. To speak more than once to the same item, you need to wait till everyone else has had a chance to speak.
- 5. You may ask only one question at a time.
- 6. Voting is done by a show of hands. If a secret ballot is necessary (i.e. elections) paper ballots are used. For teleconference meetings, members are asked to voice their vote.
- 7. Each item to be decided will have a MOTION. A motion will be moved and seconded prior to discussion.
- 8. Should an amendment be made to the motion, the amended motion will be the item to be discussed and voted upon.
- 9. An amendment to a motion may be done as a "friendly" amendment, meaning the person who made the motion agrees with the change.

 And once again, the amended motion is the one that is voted upon.
- 10. Once the Chair calls an end to the discussion, a vote will be taken on the motion or amended motion.
- 11. Council members will be asked to vote:
 - a. in favour of the motion;
 - b. opposed to the motion; or
 - c. abstain from voting.(Abstentions do not affect the outcome of the vote)
- 12. A simple majority is required to pass a motion. (50% plus 1)
- 13. All votes will be noted by the minute taker.

Council Meeting Day 1 - September 20th



CTCMPAO

Sep 20, 2023 at 9:00 AM EDT to Sep 20, 2023 at 5:00 PM EDT

Public Agenda

1. Welcome and Call to Order Presenter: D. Worrad, Chair	9:00 AM
Information	
2. Declarations of Conflicts of Interest Presenter: D. Worrad, Chair	9:02 AM
Information	
3. Briefing on Meeting Procedure Presenter: D. Worrad, Chair	9:04 AM
Information	
4. Adoption of the Agenda for Sept. 20th & 21st, 2023 Presenter: D. Worrad, Chair	9:05 AM
Motion	
5. Consent Agenda Presenter: D. Worrad, Chair	9:10 AM
Motion 1) Draft Minutes of June 14, 2023 Council Meetings 2) Executive Committee Report 3) Registration Committee Report 4) Inquiries, Complaints and Reports Committee Report 5) Quality Assurance Committee Report 6) Patient Relations Committee Report 7) Discipline Committee Report 8) Fitness to Practise Committee Report 9) Dr. Title Working Group Committee Report	
6. June 14th, 2023 Meeting Evaluation Review Presenter: D. Worrad, Chair	9:15 AM
Information	

9:20 AM

Information

7. President's Remarks

Presenter: J. Pritchard-Sobhani Council, President

8. Registrar's Report Presenter: A. Zeng, Registrar & CEO	9:25 AM
Information	
8.1. Chinese Exam Funding Information	
8.2. Annual Report Motion	
8.3. School Program Approval Project Information	
9. Election Update Presenter: A. Zeng, Registrar & CEO	9:45 AM
Information	
9.1. Election of District 1 & 2 Information	
9.2. By-Election of District 3 & 5 Information	
10. Regulation Amendment Update Presenters: A. Zeng, Registrar & CEO, S. Cassman, Manager of Policy & Governance	9:55 AM
Motion	
11. Break	10:10 AM
12. CPMF Requirements Presenter: S. Cassman, Manager of Policy and Governance	10:20 AM
Information	
12.1. Council Competencies Presentation Presenter: M. Boon, Registrar & CEO, CMTO	10:40 AM
Information	
13. Financial Update Presenter: F. Ortale Director IT, Finance & Corporate Services	11:00 AM
Information	
13.1. Drafted Audited Statement Review Presenter: F. Zou, CPA, CA Associate Partner, Hilborn LLP Information	11:05 AM

13.2. Appointment of Auditors for 2023-2024 Presenter: F. Ortale, Director of IT, Finance and Corporate Services Motion	11:20 AM
13.3. Q1 Financial Statements Presenter: F. Ortale, Director of IT, Finance and Corporate Services Information	11:30 AM
14. Counsel for Council Presenters: A. Zeng, Registrar & CEO, S. Cassman, Policy & Governance Manager	11:40 AM
Discussion & Direction	
15. Lunch	12:00 PM
16. MOVE TO "IN-CAMERA" SESSION	1:00 PM
The meeting will move in-camera in accordance with Section 7(2)b & d of the Health Professions Presenter: D. Worrad, Chair	ocedural Code
Motion	
17. Approval of "In-Camera" Minutes Presenter: J. Pritchard-Sobhani, President	2:00 PM
Motion	
18. Information	
19. Motion	
20. Break	2:45 PM
21. Information	2:55 PM
22. MOVE OUT OF "IN-CAMERA" SESSION Presenter: D. Worrad, Chair	
Motion	
23. Stakeholders Presentation on Dr. Title Project Presenter: D. Kirk, CTCMASO	3:55 PM
Information	
24. Acupuncture Standards of Practice Working Group Presenters: S. Cassman, Policy & Governance Manager, J. Nghiem, Policy Analyst	4:10 PM
Information	
24.1. Acupuncture Standards of Practice "Terms of Reference" Motion	

24.2. Acupuncture Standards of Practice Ad hoc Working Group "Call for

Information

Interest"

	orking Group "Terms of Reference" ng, Registrar & CEO, S. Cassman, Policy & Governance Manager	4:30 PM	
Motion			
26. Work Plan Presenter: A. Zen	g, Registrar & CEO	4:40 PM	
Motion			
	gement Assessment sman, Policy & Governance Manager	4:50 PM	
Information			
28. Adjournme Presenter: D. Wo	ent of the September 20th, 2023 Council Meeting rad. Chair		
Motion			
College of frauthered Chowae Residence College of frauthered Chowae Residence College of College	Council Meeting Day 2 - September 21st CTCMPAO Sep 21, 2023 at 9:00 AM EDT to Sep 21, 2023 at 12:00 PM EDT Public Agenda		
29. Welcome a Presenter: D. Woo	and Call to Order rrad, Chair	9:00 AM	
Information			
30. Declaratio Presenter: D. Woo	ns of Conflicts of Interest rrad, Chair	9:05 AM	
Information			
31. Briefing or Presenter: D. Woo	Meeting Procedure rad, Chair	9:08 AM	
Information			
	32. CPMF Requirements Presenter: S. Cassman, Policy & Governance Manager		

Presenter: S. Cassman, Policy & Governance Manager

Information

33. Break 10:20 AM

34. CPMF Requirements Continued 10:35 AM

Presenters: A. Zeng, Registrar & CEO, S. Cassman, Policy & Governance Manager

Discussion

35. Next Meeting Dates & Effectiveness Survey in OnBoard 11:45 AM

Presenter: D. Worrad, Chair

Information

Next Meeting Date: Wednesday, December 6, 2023 Council Orientation: Thursday, December 7, 2023

35.1. September 20 & 21, 2023 Council Meeting Survey

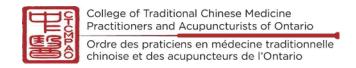
Presenter: D. Worrad, Chair

Action

36. Adjournment of the September 21st, 2023 Council Meeting

11:55 AM

Motion

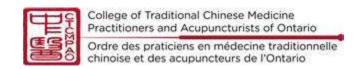


COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

CONSENT AGENDA

Council Meeting Wednesday, September 20, 2023 9:00 a.m. – 5:00 p.m. via Webex

		Open/				
	Item	In-Camera	Time	Speaker	Action	Page No.
1.	Consent Agenda	Open Session	9:20 a.m.	D. Worrad	Motion	
	a) Draft Minutes of June 14, 2023		(5 min.)	Chair		Page 2
	Council Meeting					
	b) Executive Committee Report					Page 13
	c) Registration Committee Report					Page 15
	d) Inquiries, Complaints and Reports					Page 19
	Committee Report					
	e) Quality Assurance Committee Report					Page 21
	f) Patient Relations Committee Report					Page 23
	g) Discipline Committee Report					Page 24
	h) Fitness to Practise Committee Report					Page 26
	i) Dr. Title Working Group Report					Page 27
A	consent agenda is a single item on an agenda					
tha	at encompasses all the things the Council					
wc	ould normally approve with little comment. All					
tho	ose items combine to become one item for					
ар	proval on the agenda to be called the consent					
ag	enda.					
As	a single item on the agenda, the consent					
ag	enda is voted on with a single vote - to					
ар	prove the consent agenda. This means that					
the	ere is no discussion on the items, that are					
list	ed in the consent agenda.					
Но	wever, if a person wishes to speak about any					
со	mponent of the consent agenda, they will alert					
the	Chair. The component will be removed from					
the	e consent agenda and discussed at some point					
in	the meeting. The remaining components of					
the	e consent agenda can then be approved.					



COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

MEETING OF COUNCIL

MINUTES

June 14, 2023 from 9:00 a.m. to 2:53 p.m.

55 Commerce Valley Drive West, Suite 705, Thornhill, ON and via WEBEX

IN ATTENDANCE

External Chair

Deborah Worrad

Council

Joanne Pritchard-Sobhani Professional Member / President

Meiying Chen Professional Member

Iftikhar Choudry Public Member
Judy Cohen Public Member

Matthew Colavecchia Professional Member

Kevin Ho Public Member

Terry Hui Professional Member

Deborah Sinnatamby Public Member (10 a.m. onwards)

Xianmin Yu Professional Member

Jin Qi (Jackie) Zeng Professional Member (via Webex)

Regrets

Kimberley Bishop Public Member

Justin Lee Professional Member

Absent

Mark Handelman Public Member

Staff

Ann Zeng Registrar and CEO

Francesco Ortale Director, IT, Finance and Corporate Services

Claudia Frisch Manager of Quality Practice

Mohan Cappuccino Manager of Registration and Examinations

Ryan Chu Manager of Professional Conduct Sean Cassman Manager of Policy and Governance

Jennifer Nghiem QA Coordinator

Council Meeting

College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario

June 14, 2023

Laurie Krol Executive Assistant

Temi Adewumi Recorder

Legal

Rebecca Durcan Steinecke Maciura LeBlanc

Guests

Danny Li ATCMPAO (2:03 p.m. to 2:17 p.m.)

Nolan Matthews Metrix Group (11:17 a.m. to 12:14 p.m.)

Observers (Remote)

Pierre Chen Robert Chi Dylan Kirk Danny Li Vivian Pang Mary Wu Nathalie Yan

1. WELCOME AND CALL TO ORDER

After calling the meeting to order at 9:05 a.m., the Chair welcomed participants to the June 14, 2023 Council meeting of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario.

2. DECLARATIONS OF CONFLICT OF INTEREST AND REMINDER OF CONFIDENTIALITY

Ms. Worrad 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.

3. BRIEFING ON MEETING PROCEDURE

Ms. Worrad provided an overview of the meeting procedure.

4. ADOPTION OF THE AGENDA

The agenda was adopted as presented.

MOTION: T. Hui - M. Colavecchia

THAT the Agenda of the June 14, 2023 Meeting of the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario be

Council Meeting

adopted as presented.

CARRIED

5. CONSENT AGENDA

- a) Draft Minutes of March 22, 2023 and April 27, 2023 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 Practice Committee Report
- i) Dr. Title Working Group Report

The consent agenda of the June 14, 2023 Council Meeting was approved as presented.

MOTION: J. Cohen - I. Choudry

THAT the Consent Agenda of the June 14, 2023 Meeting of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario, be approved as presented.

CARRIED

6. PRESIDENT'S REMARKS

The President welcomed all participants to the meeting, noting that this meeting is the first in person Council meeting since the pandemic.

Council members and guests were invited to the College's 10th anniversary which was held on June 14.

Note was made of the College's various challenges, which have led to new efficiencies in work. Appreciation was expressed for the diverse background and different perspectives of Council members, as well as staff.

With the new strategic plan in place, the College will be busy with projects designed to increase public confidence, collaboration in health care, and engagement with members. The CPMF will be used to gauge progress.

7. REGISTRAR and CEO REMARKS

Ms. A. Zeng thanked all for attending and provided an overview of different projects,

Council Meeting

which include a new strategic plan, adoption of right touch regulation, improvements to QA, more communication with stakeholders and modernized governance.

Ongoing projects include Phase 2 of the Doctor title project, the QA enhancement project, acupuncture standards and TCM educational program approval. Updates were also provided on the Chinese Pan-Canadian exam, and meetings with the Ministry of Health via the government relations firm.

The College is also collaborating with CARB and HRPO. Staff are implementing recommendations from the CPMF. Bill 60 received royal assent on May 18, and the government has released further details on the legislation.

The College's 10th anniversary was announced in various communications channels and celebrated on June 14.

Council members and staff were thanked for their hard work, support and dedication.

8. APRIL 27, 2023 MEETING EVALUATION REVIEW

Eight responses were received for the review, and Council members were encouraged to complete the evaluation.

9. ELECTIONS

- a) Election of District 1 & 2
- b) By-Election of District 3 & 5

Ms. A. Zeng reported that elections are planned for Districts 1 and 2, with terms running from 2023 to 2026. There are two seats available for District 1, and one for District 2. According to the Bylaws, by-elections are required for Districts 3 and 5.

October 26 was proposed as the election date for both elections.

While it is within Council's power to modify the timeline between nominations and the elections, such a change would require consultation.

MOTION: M. Chen - T. Hui

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approve the date of October 26, 2023 for the upcoming 2023 elections as presented.

CARRIED

10. PROPOSED REGULATION AMENDMENT

Council Meeting

The Registrar led the discussion on the regulation amendments.

The amendment proposals for the Emergency and Provisional class were approved at the March 22 Council meeting. The Emergency class amendments were approved at the April 27 Council meeting and have now been submitted to the Ministry of Health (MOH).

The Ministry has acknowledged receipt and thanked the College for its submission. The Ministry is focusing on Emergency class proposals and has advised that other regulation proposals will not be reviewed until the Fall.

Council will be updated once further direction has been received from the Ministry.

Provisional class

Mr. Cassman presented feedback obtained from stakeholders, associations, educators and the Citizens' Advisory Group (CAG). The following were identified:

- Add more information to the description of the transfer process, or adopt the suggestion to use the Pan-Canadian exam.
- Address concerns regarding verification of experience.
- Outline how the supervision process will be improved.
- Address in messaging lack of support for the Provisional class.

Council members noted that:

- Regulation language is usually broad. Once the regulation is approved, Council will identify how to proceed in the public interest.
- The need for an enhanced supervision policy has been discussed at the Registration Committee.
- The transfer process can be similar to the PLAR process, and will be determined by Council.

The following concerns were raised by a professional member, and addressed in the discussions.

- 1. Verification of educational documents
- All international education documents are verified by WES or equivalent organizations.
 This applies to all registration classes.

- The College is working on the school approval project, which can also be used as another way to verify information.
- Falsified documents may lead to revocation. The case would be referred to ICRC, who would be authorized to respond to such concerns. While the ICRC has the ability to take no action, it was stated that the Committee is active in its fiduciary duty to protect the public and a take no action on such a concern is unlikely.
- Council was reminded that a majority voted for the Provisional class to not to have an exam.
- 2. The Panel's qualifications for assessing applicants
- If there are a large number of applicants, a third-party firm might be hired to conduct
 the assessments, using criteria set by the Registration Committee panel. The previous
 PLAR process can be used as a template.
- It was advised that in creating a Provisional class, the College needs to consider the implications of changes to registration of different classes in the future.
- Council agreed to make the following change (in italics) to the amendment.
 - i) "Satisfy a panel of the Registration Committee, or another body approved by the Council, that he or she possesses the current knowledge, skills and judgement relating to the practice of the profession that would be expected of a member holding a General certificate of registration or"

There is no need for a recirculation, as the change is based on feedback.

- 3. Years of experience required to qualify, as well as location from which experience was obtained
- It was clarified that 10 years of experience can be obtained from any country, not just Canada or Ontario.
- This is also in keeping with the new direction from the government. Regulators are no longer allowed to require Canadian experience for registration, unless an exemption can be justified.
- There is also no time parameter on this requirement. The 10 years are required to have been completed before 2013. Any practice after 2013 would point to the applicant's illegal practice. However, applicants may present experience outside of Ontario after 2013.

Council voted on two amendments:

10 years' experience can be obtained from any location.

Council Meeting

• For the transfer process, another body approved by Council may conduct assessments, which includes the potential use of the Pan-Canadian case study.

Staff will submit the amended document to the Ministry of Health.

MOTION: I. Choudry - M. Colavecchia

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approves the proposed Provisional Class amendment to the Registration Regulation in general for submission to the Ministry of Health, as amended.

CARRIED No: T. Hui

11. CONSULTANT PRESENTATION QUALITY ASSURANCE ENHANCEMENTS PROJECT

Mr. Matthews from Metrix Group, joined the meeting at 11:17 a.m.

The presentation provided an overview of Phase 2 of the QA Enhancement project for both the self-assessment and peer and practice assessment (PPA).

Mr. Matthews outlined Metrix Group's redevelopment process, which included clarification of the overall QA process, key analysis, as well as modifications to both the self-assessment and peer and practice assessment.

Modifications include streamlining the questions in both assessments, changing the order in which concepts are presented, adding specific real-life examples, as well as addition of a professional development plan.

Council members commended the modifications, and made recommendations that were captured by staff.

Mr. Matthews left the meeting at 12:14 p.m.

12. ACUPUNCTURE STANDARDS OF PRACTICE WORKING GROUP

Ms. J. Zeng presented on the need for a standard for the practice acupuncture. Based on Section 12.08 of the College By-laws, the QAC is recommending the creation of an adhoc working group. The group will define the scope of acupuncture in context of other controlled acts in Ontario and other provinces.

Advice was provided that as per the section quoted in the By-laws, the Working Group

Council Meeting

should be an adhoc committee. The Committee will be accountable to the QAC, who will then make recommendations to Council.

Council approved the adhoc committee and directed staff to create the Terms of Reference, calls for interest and budget. Staff will also conduct an environmental scan, and develop guidance on membership criteria.

MOTION: M. Colavecchia - J. Cohen

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario approve the recommendation of the Quality Assurance Committee to create an Acupuncture Standards of Practice ad hoc committee in principle, and direct staff to draft the Terms of Reference.

CARRIED

MOVING IN-CAMERA

The minutes of the in-camera session are recorded separately.

13. SCHOOL PROGRAM APPROVAL PROJECT

The Registrar reported that the school program approval project is included in the strategic plan and was worked on at the CARB level. However, CARB has put this project on pause. The consultant, Facilitated Improvement for Corporate Success (FICS), also withdrew from the project.

As the project is a priority for the College, the Registration Committee discussed continuation at the provincial level. FICS has agreed to work with the College to pilot the program.

A number of standards have already been drafted, with piloting as the next stage. CARB is currently working on an MOU to share the standards with member colleges. The Registration Committee also agreed to continue working with FICS due their knowledge of the project and expertise.

It was recommended to Council by the Registration Committee that the College continue to work with FICS and that the budget should be increased to from \$50.000 to \$150,000 to accommodate this.

FICS will present to the Registration Committee at its July meeting. As of present, a contract with the firm has not yet been signed.

Support was expressed for the project, and for using the same consultant, which saves on

Council Meeting

starting from scratch or issuing another RFP.

MOTION: M. Chen - I. Choudry

THAT the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario appoint Facilitated Improvement for Corporate Success (FICS) as the consultant for the CTCMPAO Education Program Approval Project, and the necessary budget increase to accommodate the project.

CARRIED

14. PRESENTATION ON DR. TITLE IMPLEMENTATION

Mr. Li joined the meeting at 2:03 p.m.

According to the College By-laws, members may present to Council for a maximum of 10 minutes. The request must be sent to the Executive Committee 10 business days before the Council meeting.

Mr. Li presented the results of a survey regarding requirements for implementation of the Doctor Title. The survey was conducted with R. TCMP members of the Association of Traditional Chinese Medicine Practitioners of Ontario (ATCMPAO).

The survey was conducted in February 2023, using a WeChat group. These four questions were covered:

- Minimum TCM requirements for the Doctor of TCM title
- Determining competency for current TCM practitioners
- How many years of experience should define a highly experienced practitioner?
- Who is qualified to run a bridging program?

Mr. Li left the meeting at 2:17 pm.

15. FINANCE

a) Financial statements – 4th Quarter

Mr. Ortale provided an overview of the 4th quarter financial statements, as of March 31, 2023.

The College's cash position is \$8.7 million.

Revenue:

Council Meeting

- The College is at 101% of project revenue, the bulk of which has been obtained from membership fees. There has been an increase in new registrations, which has also increased collection fees for admin, the Pan-Canadian exam, as well as Safety and Jurisprudence tests. Other income has been obtained from collected cost orders and a rise in banking interest.
- The funds from the government were received in April, and are not part of this report.

Expenses

- The fiscal year was completed with expenses at 94%, and a net income of \$130,000. (With the addition of government funds, this amount is \$280,000.)
- Council and Committees are above budget, mostly due to per diems, legal expenses, services provided by the government relations firm, and increased investigation expenses in ICRC.
- Professional services are above budget, while special projects are below the budget projection.
- For the Pan-Canadian exam, a significant amount of the expenses has been allocated to communication expenses.
- Staff are currently working with the auditors.

16. UPDATE ON THE STRATEGIC PLAN

The Registrar provided the Strategic plan update. The plan was approved in March, with plans to translate in French and Chinese.

Staff are now working on a work plan with key performance indicators. Council was advised that more staff will need to be hired to achieve the goals, and an increase in the registration fees is currently being considered.

These changes are in line with other colleges' activities. Council feedback is needed, and the item will be brought back for further discussion.

The President outlined support for hiring additional staff, commending staff's work, recognizing their value and the need to prevent burnout.

17. OTHER BUSINESS

a) Letter to the Ontario Ministry of Agriculture, Food and Rural Affairs

Council Meeting

The letter had been discussed at the May 16, 2023 Executive Committee meeting. Due to the tight timeline, there was no opportunity to discuss the response with Council. However, a clause was added in the letter stating that Council could amend or alter the position taken in the letter.

The College was invited to comment on the proposed modernization of the *Veterinarian Act* in Ontario. The goal is to define the scope of practice for the College of Veterinarians and uphold public interest.

While certain professions practice acupuncture on animals, the College's position is that the *RHPA* and *TCM Act* only apply to humans, and the College's registrants are not authorized to practice on animals.

Council members agreed with this position.

18. NEXT MEETING DATES

- Wednesday, September 20, 2023 (remote)
- Wednesday, December 6 and Thursday, December 7, 2023 (including orientation) (remote)

Council members were asked to complete the effectiveness survey.

Thanks were extended to staff for preparing the in-person meeting, which was the first after three years.

20. ADJOURNMENT

The meeting was adjourned at 2:53 p.m.

MOTION: M. Colavecchia - K. Ho

THAT the meeting of the Council of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario of June 14, 2023 be adjourned until the next meeting or at the call of the President.

CARRIED

FOR: Information

SUBJECT: Executive Committee Report

Executive Committee Members

Joanne Pritchard-Sobhani Professional Member/President
Xianmin Yu Professional Member/Vice-President

Iftikhar ChoudryPublic MemberDeborah SinnatambyPublic MemberJin Qi (Jackie) ZengProfessional Member

Since the last Council meeting held on June 14, 2023, the Executive Committee met once on August 9, 2023 for an Executive Committee meeting.

FOR INFORMATION

1) College Submissions to Government

The Executive Committee was provided with an update on various submissions that have been made to both the Provincial and Federal governments. These submissions included feedback to consultations that are relevant to the regulation of TCM, invitations to the College's 10th anniversary celebration, and formal meeting requests to discuss important regulatory matters.

2) Government Relations Update

The Executive Committee was updated on the College's government relations strategy.

3) Legal Counsel

The Executive Committee discussed the Council's approach to its legal counsel during Council meetings. Further discussion will be brought to Council at its next meeting.

4) Finance

The Executive Committee reviewed the 1st quarter financial statements, and received an update on the annual audit.

5) Stakeholder Requests

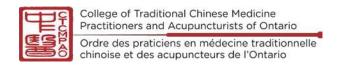
The Executive Committee reviewed and discussed requests from stakeholders on several matters.

6) Translating Important Documents and Communications into Chinese

The Executive Committee had preliminary discussions on how the College should prioritize the translation on documents into Chinese. Discussions will continue at Council in the future.

7) In-Camera Meeting

The Executive Committee met "in-camera" for the afternoon of the August 9th, 2023 Executive Committee meeting.



This report is current as of August 31, 2023 in anticipation of the Council meeting scheduled for September 20, 2023.

FOR: Information

SUBJECT: Registration Committee Report

Registration Committee Members

Iftikhar Choudry (Chair)Public MemberKevin HoPublic MemberKimberley BishopPublic Member

Akari Yokokawa (Non-Council) **Professional Member** Brendan Cheung (Non-Council) **Professional Member Professional Member** Joanne Pritchard-Sobhani **Professional Member** Justin Lee **Professional Member** Melody Hon (Non-Council) Ming C. Cha (Non-Council) **Professional Member** Terry Hui **Professional Member** Xianmin Yu **Professional Member**

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

June 1, 2023 (RC and Panel)

July 27, 2023 (RC and Panel)

August 2, 2023 (Panel)

All meetings were held via Webex meeting.

FOR INFORMATION

1. PAN-CANADIAN EXAMINATIONS

October 2023 Pan-Canadian Examination

The application deadline for the October exam administration was July 14th. However, to accommodate students whose educational programs finished after this date, the College accepted final school transcripts up to August 15th. Applications are now being reviewed for candidate eligibility to sit the exams. A breakdown of the applications the College has received is shown in the following table.

October 2023 Pan-Canadian Examination						
ACU PRA Total						
Total Applicants	124	89	213			
Applicants for English language exam	102	69	171			
Applicants for Chinese language exam	22	20	42			
Simplified Chinese	18	16	34			
Traditional Chinese	4	4	8			

In early July, the exam administrator, CARB-TCMPA, informed us that the October 2023 exam sessions would be conducted in-person rather than by remote proctoring. This change, though sudden, is in keeping with the original intention that remote-proctoring would be an interim measure to mitigate pandemic-related safety concerns and restrictions. For the October exams, candidates will be able to write at twelve designated test centres in Ontario, or alternatively at various other locations across the country.

April 2023 Pan-Canadian Examination

Results from the April 2023 administration have been communicated to candidates. For the Practitioner's exam, 68% of Ontario candidates passed, as compared to 71% nationally. For the Acupuncturist's exam, the pass rate for Ontario was 84% compared to 87% nationally.

2. Registration Regulation Update

At its meeting on July 27, 2023, the Committee was updated on recent feedback and questions from the Ministry regarding the Emergency class. The Committee agreed with the responses that staff had prepared and will be kept informed of any new developments.

3. Temporary Class of Registration

Requirements for registration in the Temporary class are set out in the Registration Regulation, but to date, the College has not implemented this class as there has not been demand for it. However, with pandemic travel restrictions removed, there has been a growing number of inquiries about and requests for temporary registration. In light of these requests, the Registration Committee determined that the College should implement the Temporary class, and accordingly, directed staff to develop an application form and any supporting policy documentation that may be required.

4. Policy Updates

In recent meetings, the Registration Committee approved revisions to the policy for a Certificate in the Inactive Class. The changes provide greater transparency around possible remedial measures that the Committee could impose, and ensure consistency of currency requirements for members transferring from the Inactive class.

The Committee also directed staff to draft revisions to the Supervision policy, based on input from the Committee, to clarify the eligibility and reporting requirements, and to research additional elements to be considered for inclusion in the policy. Staff were also asked to develop a guideline, incorporating recommendations from the Committee, to be used to evaluate refresher courses for pre-approval.

5. Program Approval Project

Further to direction received from both the Registration Committee and Council, the College is moving forward with the education program approval project. To that end, Christian Vulpe, a principal at the consultant (FICS) that we are engaging with, presented further details of the project plan to the Committee at their July 27th meeting. His presentation was well received and Committee members reiterated their support for the project. The Registrar then updated the Committee on some of the complexities involved in finalizing agreements to use the draft accreditation standards for the project, as doing so involves negotiations with both FICS and CARB.

6. QUARTERLY MEMBERSHIP STATS (As of August 16, 2023)

Registration by District

	District 1	District 2	District 3	District 4	District 5	Practicing outside ON/Unknown*	Total
General	197	154	1622	547	72	69	2661
Inactive	20	4	89	16	3	43	175
Student	0	0	6	2	0	0	8
Total Members	217	158	1717	565	75	112	2844

^{*}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 34 General Class members who did not provide their business address information to the College.

Registration updates as of August 16, 2023

	19-Aug-2022	15-Nov-2022	1-March-2023	23-May-2023	16-Aug-2023	
General R. Ac	1285	1318	1355	1318	1328	
General R. TCMP	1279	1306	1342	1319	1333	
Student R. Ac	4	4	2	2	2	
Student R. TCMP	1	4	4	4	6	
Inactive R. Ac	80	81	79	86	94	
Inactive R. TCMP	78	80	76	80	81	
Current 2727		2793 2858		2809	2844	
Members	2/2/	2/95	2030	2009	2044	
Resigned	491	494	498	571	575	
Expired	663	662	662	662	662	
Revoked	85	85	83	83	83	
Suspended	164	165	162	206	206	
Deceased	-	-	-	16	16	
Total Registrants	4130	4199	4263	4347	4386	

Changes since previous reports

	Jun 1, 2022 – Aug 19, 2022	Aug 20, 2022 – November 15, 2022	November 16, 2022 – March 1, 2023	March 2, 2023 - May 23, 2023	May 24, 2023 – Aug 16, 2023
New members	74	68	66	71	39
Resignations	2	2	4	73	4
Revocation	0	0	0	0	0
Suspensions	2	2	1	44	0
Expired	1	0	0	0	0

Members practicing with terms, conditions and limitations: 237

Jurisprudence Course Tests (From May 24, 2023 – August 16, 2023)

Passed	Failed	Total
52	3	55

Safety Program Tests (From May 24, 2023 – August 16, 2023)

Passed	Failed	Total
47	1	48

FOR: Information

SUBJECT: Inquiries, Complaints and Reports Committee Report

Inquiries, Complaints and Reports Committee Members

Xianmin Yu (Chair) **Professional Member Professional Member** Meiying Chen **Professional Member** Matthew Colavecchia Jin Qi (Jackie) Zeng **Professional Member** Melody Hon (Non-Council) **Professional Member** Fanny Ip (Non-Council) Professional Member Christine Lang (Non-Council) **Professional Member Professional Member** Hui Liu (Non-Council)

Kimberley Bishop Public Member
Iftikhar Choudry Public Member
Judy Cohen Public Member
Deborah Sinnatamby Public Member
Kevin Ho 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 three times on June 21, 2023, June 29, 2023 and August 8, 2023.

New Cases and Nature of Concerns

Note: Some cases may have more than one concern

Complaints	Nature of Concerns	Registrar Report	Natı	ure of Concerns
		Investigations		
	Advertising			Advertising
	Billing and Fees			Billing and Fees
_	Communication	2	1	Communication
1	Competence / Patient	: Care	1	Competence / Patient
				Care
	Fraud			Fraud
	1 Professional Conduct &		2	Professional Conduct &
	Behaviour			Behaviour
	Record Keeping		1	Record Keeping

Sexual Abuse / Harassment /		Sexual Abuse /
Boundary Violations		Harassment / Boundary
		Violations
Unauthorized Practice		Unauthorized Practice

Completed Cases and Outcomes*

Note: Some decisions have more than one outcome

Complaints	Οι	utcomes	Registrar Reports	Outcomes	
			Investigations		
		Take no action			Take no action
		Advice			Advice
		Written Caution			Written Caution
		Oral Caution			Oral Caution
		SCERP			SCERP
		Refer to Discipline			Refer to Discipline
		Undertaking			Undertaking

Complaints cases before Health Professions Appeal and Review Board

New Cases	Pending Cases	Cases Upheld
-	2	-

Pending Cases

Complaints	Registrar Report Investigations	Incapacity Inquiries	Total # cases
13	55		68

This report is current as of August 18, 2023, in anticipation of the Council meeting scheduled for September 20, 2023.

FOR: Information

SUBJECT: Quality Assurance Committee Report

Quality Assurance Committee Members

Jin Qi Zeng (Chair) Professional Member

Kimberley Bishop Public Member

Ming C. Cha
Non-Council Professional Member
Evelyn Cho
Non-Council Professional Member

Iftikhar Choudry Public Member

Julia Chuang Non-Council Professional Member

Judy Cohen Public Member

Matthew Colavecchia Professional Member
Terry Hui Professional Member
Justin Lee Professional Member

Since the last quarterly report, the Quality Assurance Committee (QAC) met three times -- June 9, 2023 (Panel), July 4, 2023 (QAC Meeting) and August 21, 2023 (Panel).

FOR INFORMATION

1. Quality Assurance Enhancement Program

On June 14, 2023, the Consultant, Metrix Group, presented to Council on the completion of Phase II of the Self, Peer and Practice Assessment components of the Quality Assurance (QA) Program development. The College is working on having the approved Self-Assessment tools hosted online and the Peer and Practice Assessment tools have been implemented for all newly selected Peer and Practice Assessments.

2. Quality Assurance Program

Peer and Practice Assessor Orientation and Training

On July 14, 2023, the Quality Assurance Program held a full-day Assessor Orientation and Training session for both new and returning Peer and Practice Assessors.

The session was divided into two main components.

a) **Quality Assurance Program, Committee and Regulatory Requirements:** This section provided an overview of the general Quality Assurance activities and regulatory requirements. For this

component, both legal counsel and some Committee members were present to start off the day.

b) Specific Peer and Practice Assessor Training on the Assessment Visit and Use of the New Tools: The second component was very much focused on the Assessor role, their responsibilities in communicating with members being assessed, including what to do before, during and after the actual assessment. This portion covered all of the sections of the redeveloped Peer and Practice Assessment, while engaging both new and current Assessors through role play, illustration and interactive exercises.

All appointed Peer and Practice Assessors were in attendance.

3. 2023-2024 QAC Workplan (Reflecting the College's new Strategic Initiatives and Vision)

At its July 4, 2023 Quality Assurance Committee (QAC) meeting, the Committee reviewed the 2023-2024 QAC Workplan prepared to reflect the College's new strategic initiatives and vision. Further discussion is scheduled for the next meeting being held on September 14, 2023.

4. Self, Peer and Practice Assessment – Random Selections

Random Selection to Submit Self-Assessment

The QA Committee directed that 2% of members be selected at random to submit the Self-Assessment Tool (SAT) and professional development plan (PDP) in 2023. For the January 1, 2022 through December 31, 2022 reporting cycle. All 56 members satisfied the requirements and no submissions remain outstanding.

Random Selection to Participate in a Peer and Practice Assessment

The QA Committee directed that 1.1% of members (31) be selected at random to undergo a Peer and Practice Assessment in 2023. Most of the assessments have been scheduled with some assessments having been conducted and reviewed by the QA Committee to date.

5. Council Meeting Follow-up - Acupuncture Standard

In follow-up to Council approving the Acupuncture Standard Ad Hoc Committee on June 14, 2023, the Quality Assurance Committee met on July 4, 2023 to provide input on the Ad Hoc Committee Terms of Reference (ToR), membership criteria and composition.

As directed by Council, this information will be presented at the September 20, 2023 meeting.

This report is current August 18, 2023, in anticipation of the Council meeting scheduled for September 20, 2023.

FOR: Information

SUBJECT: Patient Relations Committee Report

Patient Relations Committee Members

Meiying Chen (Chair) Professional Member

Iftikhar Choudry Public Member
Kevin Ho Public Member

Terry Hui Professional Member

Christine Lang Non-Council Professional Member

Joanne Pritchard-Sobhani Professional Member

Deborah Sinnatamby Public Member

Nisha Thadani Non-Council Professional Member Akari Yokokawa Non-Council Professional Member

The Patient Relations Committee (PRC) has had no formal meeting since May 29, 2023 and the June quarterly report. However, the Committee continued to provide feedback on its outreach initiatives.

FOR INFORMATION

1. Funding for Therapy

No new applications for funding have been received or are outstanding.

This report is current to August 18, 2023, in anticipation of the Council meeting scheduled for September 20, 2023.

FOR: Information

SUBJECT: Discipline Committee Report

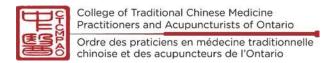
Discipline Committee Members

Matthew Colavecchia (Chair) Professional Member Meiying Chen **Professional Member Professional Member** Terry Hui **Professional Member** Justin Lee Joanne Pritchard-Sobhani Professional Member Xianmin Yu Professional Member Jin Qi (Jackie) Zeng Professional Member Evelyn Cho (Non-Council) **Professional Member Professional Member** Bo Feng (Non-Council) 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 Deborah Sinnatamby Public Member** Kevin Ho Public Member

The Discipline Committee did not release decisions in this quarter.

As of September 20, 2023, there are four open cases which has been referred to the Discipline Committee by the Inquiries, Complaints and Reports Committee (ICRC).

	Member Name	Status
1	Christine Richards	The Notice of Hearing was served on the Member on August 30, 2022. Discipline hearing scheduled for October 12, 2023.
2	Yu-Zhen Ma	The Notice of Hearing was served on the Member on December 21, 2022. The pre-hearing conference was scheduled on June 7, 2023. Discipline hearing scheduled for October 11, 2023.
3	Chanpheng Anousaya (1)	The Notice of Hearing was served on the Member on December 20, 2022. Pre-hearing conference is scheduled for August 18, 2023.



4	Chanpheng	The Notice of Hearing was served on the Member on December 20, 2022.
	Anousaya (2)	Pre-hearing conference is scheduled for August 18, 2023.

There is one discipline decision currently under appeal by the Member. This matter relates to the <u>Nathalie Xian Yi Yan</u> decision.

This report is current as of August 18, 2023, in anticipation of the Council meeting scheduled for September 20, 2023.

FOR: Information

SUBJECT: Fitness to Practise Committee Report

Fitness to Practise Committee Members

Matthew Colavecchia (Chair) **Professional Member** Meiying Chen **Professional Member** Terry Hui **Professional Member** Justin Lee **Professional Member** Joanne Pritchard-Sobhani Professional Member Xianmin Yu **Professional Member Professional Member** Jin Qi (Jackie) Zeng Bo Feng (Non-Council) **Professional Member**

Kimberley Bishop Public Member
Iftikhar Choudry Public Member
Judy Cohen Public Member
Mark Handelman Public Member
Deborah Sinnatamby Public Member
Kevin Ho Public Member

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

Since the last quarterly report, the Fitness to Practise Committee did not meet.

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 7 times, on June 22, 2023, July 13, 2023, July 20, 2023, August 3, 2023, August 17, 2023, August 24, 2023, and August 31, 2023.

FOR INFORMATION

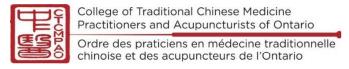
1. Draft Competencies

The Doctor Title Project consultant has proposed an initial set of competencies as a starting point for the working group. The Working Group has taken the approach to meet on a regular basis, and review 1-2 competencies per meeting.

2. Assessment Process

While the initial priority is to develop competencies for the Doctor Title, the consultant has begun work on the assessment process, which is another important outcome of phase 2 of the project.

This report is current to August 31, 2023, in anticipation of the Council meeting scheduled for September 20, 2023.



Council Meeting Evaluation Results Meeting Date: June 14, 2023

	Item	Yes	Most of the time	No	Other	Please provide comments
1.	The agenda and supporting materials were provided one week prior to the meeting.	5				
2.	The materials were presented in a clear, succinct, and timely manner to allow meeting preparation.	5				
3.	The meeting agenda was well planned and allowed for adequate time to deal with the necessary committee business.	4	1			
4.	The Chair managed the meeting well allowing each member an adequate opportunity to participate in discussion and decision-making.	4	1			Excellent!
5.	The treatment of all persons was courteous, dignified and fair.	5				
6.	I received sufficient information and training to participate in deliberations and decision-making.	5				
7.	Technology: I was able to access the material on the Cloud easily. Webex Meetings and other communication devices worked well.	5				Using OnBoard is very easy and I'm pleased to see the improvements here.

8. Any further comments?

I'd like to acknowledge the Registrar's and Presidents significant contribution to Council's discussions in providing more detailed information and explanations of issues raised.

Well organized and efficient meeting. Things get done with sufficient discussion. Everyone is respected.

I'm really proud of our Council after this meeting. We accomplished some powerful things and set a huge portion of our storied past behind us. It is time to move forward.

Meeting Date:	September 20, 2023
Issue:	Election Update
Reported By:	Ann Zeng
Action:	Information

Issue

Staff will provide an update on the 2023 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

At the June Council meeting, Council approved an election date of October 26, 2023, and the corresponding timeline to facilitate the election (see chart below). The College is set to open voting on September 26, 2023 as scheduled. Below are the total nominees received for each district; however, the deadline for nominees to withdraw is September 15, 2023. If there are any changes before the Council meeting, staff will provide an update.

District 1

Three nominations have been received. The voting process will proceed as planned.

District 2

One nomination has been received. This candidate will be acclaimed to the seat, and no voting will be necessary.

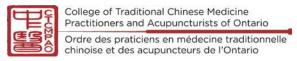
District 3

Five nominations have been received. The voting process will proceed as planned.

District 5

No nominations have been received. As per the College by-laws, the College is required to hold another by-election to fill this seat. However, staff would like to seek Council input on the timing of this by-election.

ELECTION DATE	October 26	
Nomination Package Out (minimum 90 days prior to election date)	July 11	
Nominations due (minimum 60 days prior to election date)	August 15	
Option to withdraw nomination deadline (minimum 30 days prior to election date)	September 15	
Voting instructions sent to members	September 21	
Voting Ballots sent to members (no later than 30 days prior to election date)	September 26	



End of Voting timeline Election Day 5:00 p.m. EST	October 26		
Ballot Report	October 27		
Notification of candidates	October 27		
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 16		
Notification to members & posting of results on website (if no recount is requested)	November 8		

Next Steps

- Council discusses district 5 by-election.
- Voting for districts 1 and 3 will begin on September 26.
- Candidate for district 2 will be acclaimed to Council.

Meeting Date:	September 20, 2023			
Issue:	Regulation Amendment Update			
Reported By:	Ann Zeng and Sean Cassman			
Action:	Information			

Issue

College staff will provide an update on the status of the two proposed amendments to the College's Registration Regulation.

Public Interest Rationale

The College is responsible for ensuring that only qualified individuals are permitted entrance into the profession. It is also the College's responsibility to ensure that there are no unnecessary barriers to obtain registration with the College. The College is working to find a solution to allow experienced practitioners to obtain registration while ensuring they are competent to practise safely and effectively.

Background

At a special Council meeting on April 27, 2023, Council approved in principle a proposed amendment for the creation of the Emergency Class. Following that, at the June 14, 2023 Council meeting, Council approved in principle a proposed amendment for the creation of the Provisional Class. Below is an update on the status of the new classes.

Emergency Class

At the previous Council meeting, staff reported the Emergency Class proposal had been submitted, and that staff were communicating with the Ministry to address and questions or concerns that arose during the Ministry's review. Resulting from that communication, the Ministry requested some changes to the language of the proposal; however, these changes were minor and did not alter the intent of the College's original proposal. This was confirmed by Council via email before, and no objections or concerns were raised by Council members.

The College received a final copy of the amendment on August 2, 2023, which was then signed by the Council President and Registrar. The signed copy was returned to the Ministry on August 4, 2023.

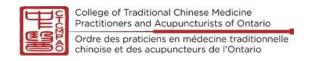
Ontario's Regulatory Registry now indicates that our Emergency Class has been approved effective August 21, 2023. The e-laws for the Registration Regulation have been updates as of August 31, 2023.

Attached is the final copy of the regulation and a copy of the Regulatory Registry posting.

Provisional Class

On July 7, 2023, staff submitted the Provisional Class proposal to the Ministry. The College has received confirmation that the proposal was received; however, Ministry staff stated that it would not be reviewed until Fall at the earliest. It is possible that the review of the Provisional Class proposal is delayed further.

College staff have inquired about the reason for delay, and Ministry staff have indicated that there is a backlog of regulatory projects that must be worked through.



Next Steps

- With the Emergency Class approved, the College must complete the policy and administrative work to be able to open the class (if required). College staff will begin work with the Registration Committee to move this forward.
- College staff will continue to stay engaged with the Ministry regarding the Provisional Class proposal.

Encl:

- Confirmation of approval from Ontario Regulatory registry
- Copy of Regulation signed by Council President and Registrar

Regulation - LGIC

College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario: Creation of Emergency Class Certificate of Registration

Regulation Number(s): O. Reg. 27/13

Instrument Type: Regulation - LGIC

Bill or Act: Traditional Chinese Medicine Act, 2006

Summary of Decision: The regulation was amended to add an emergency class certificate of

registration.

Analysis of Regulatory The proposed regulation amendment is not anticipated to result in increased

administrative costs to members and/or businesses as it creates additional pathways for new health professionals to begin practicing their profession in

Ontario.

Further Information: Regulation

Impact:

Proposal Number: 23-HLTC035

Posting Date: March 31, 2023

Summary of Proposal: In Ontario, the regulation of health professions is based on a self-

governance model. There are 26 health regulatory colleges governing 28 health professions under the Regulated Health Professions Act, 1991,

(RHPA) and their respective health profession Acts.

The RHPA was amended in October 2022 to reduce barriers to registration and require Colleges to establish an Emergency Class. To meet this requirement, the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario is proposing to amend its Registration Regulation

made under the Traditional Chinese Medicine Act, 2006, to add an

emergency class certificate of registration.

The proposed regulation amendments are subject to prior review by the Minister of Health and the approval of the Lieutenant Governor in Council.

Contact Address: Health Workforce Regulatory Oversight Branch

Nursing and Professional Practice Division

438 University Avenue, 10th Floor

Toronto ON M5G 2K8

Regulatoryprojects@Ontario.ca

Effective Date: August 21, 2023

Decision: Approved

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Traditional Chinese Medicine Act, 2006

ONTARIO REGULATION 27/13 REGISTRATION

Consolidation Period: From August 31, 2023 to the e-Laws currency date.

Last Amendment: 300/23.

Legislative History: 27/13, 184/19, 300/23.

This is the English version of a bilingual regulation.

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Definition

1. In this Regulation,

"full-time education" means a program of study that annually consists of at least 480 hours of classroom theoretical instruction or at least 620 hours of practical instruction or some combination of the two where, for every hour of classroom theoretical instruction that is less than 480 hours there must be a corresponding increase of 1.3 hours in the number of hours of practical instruction. O. Reg. 27/13, s. 1.

Classes of certificates

- 2. The following are prescribed as classes of certificates of registration:
- 1. General.
- 2. REVOKED: O. Reg. 27/13, s. 24 (1).
- 3. Student.
- 4. Temporary.
- 5. Inactive.
- 6. Emergency. O. Reg. 27/13, ss. 2, 24 (1); O. Reg. 300/23, s. 1.

Application for certificate of registration

- **3.** (1) A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar, together with any applicable fees required under the by-laws and any supporting documentation requested by the Registrar. O. Reg. 27/13, s. 3 (1).
- (2) An applicant shall be deemed not to have satisfied the registration requirements for a certificate of registration if the applicant makes a false or misleading statement or representation on or in connection with his or her application, and any certificate of registration issued to such an applicant may be revoked by the Registrar. O. Reg. 27/13, s. 3 (2).

Requirements for issuance of certificate of registration, any class

- **4.** (1) An applicant must satisfy the following requirements for the issuance of a certificate of registration of any class:
- 1. The applicant must, at the time of application, provide written details about any of the following that relate to the applicant, and where any of the following change with respect to the applicant after submitting the application but before the issuance of a certificate, the applicant must immediately provide written details with respect to the change:
 - i. A finding of guilt for any of the following:
 - A. A criminal offence.
 - B. An offence resulting in either a fine greater than \$1,000.00 or any form of custody or detention.
 - ii. A finding of professional misconduct, incompetence or incapacity, or any similar finding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iii. A current proceeding for professional misconduct, incompetence or incapacity, or any similar proceeding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iv. A finding of professional negligence or malpractice in any jurisdiction.
 - v. A refusal by any body responsible for the regulation of a profession in any jurisdiction to register or license the applicant.
 - vi. An attempt to pass a registration examination required for the purposes of being licensed or certified to practise any regulated health profession, whether in Ontario or another jurisdiction, that has not resulted in a passing grade.
 - vii. Whether the applicant was in good standing at the time he or she ceased being registered, whether in Ontario or another jurisdiction, with a body responsible for the regulation of a profession.
 - viii. Where the applicant is a member of another regulated profession in Ontario or any regulated profession in another jurisdiction, any failure by the applicant to comply with any obligation to pay fees or provide information to the body responsible for the regulation of such professions, the initiation of any investigations by such bodies in respect of the applicant or the imposition of sanctions on the applicant by such bodies.
 - ix. Any other event that would provide reasonable grounds for the belief that the applicant will not practise traditional Chinese medicine in a safe and professional manner.
- 2. The applicant must, at the time of application, provide the Registrar with the results of a criminal background check.
- 3. The applicant's previous conduct must afford reasonable grounds for the belief that he or she will practise the profession in a safe and professional manner.
- The applicant must be able to speak, read and write either English or French with reasonable fluency.
- 5. The applicant must not have a physical or mental condition or disorder that would make it desirable in the interest of the public that he or she not be issued a certificate of registration unless, should the applicant be given a certificate of registration, the imposition of a term, limit or condition on that certificate is sufficient to address such concerns.
- 6. If the applicant is registered by any body responsible for the regulation of any other profession in Ontario or of any profession in any other jurisdiction, the applicant's registration must be in good standing and must continue to be in good standing until such time as the applicant is issued a certificate of registration.
- 7. If the applicant ceased being registered with any body responsible for the regulation of a profession in Ontario or in any other jurisdiction, the applicant must have been in good standing at the time he or she ceased being registered.
- 8. The applicant must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form required under the by-laws as of the anticipated date for the issuance of his or her certificate of registration. O. Reg. 27/13, s. 4 (1).
- (2) REVOKED: O. Reg. 27/13, s. 24 (1).

Terms, conditions and limitations of every certificate

5. (1) Every certificate of registration is subject to the following terms, conditions and limitations:

- 1. The member shall provide the College with written details about any of the following that relate to the member no later than 30 days after the event occurs:
 - i. A finding of professional misconduct, incompetence or incapacity, or any similar finding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - ii. A current proceeding for professional misconduct, incompetence or incapacity, or any similar proceeding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iii. A finding of professional negligence or malpractice in any jurisdiction.
 - iv. A refusal by any body responsible for the regulation of a profession in any jurisdiction to register or license the member.
 - v. An attempt to pass a registration examination required for the purposes of being licensed or certified to practise any regulated health profession, whether in Ontario or another jurisdiction, that has not resulted in a passing grade.
 - vi. Whether the member was in good standing at the time he or she ceased being registered with a body responsible for the regulation of a profession in Ontario or any other jurisdiction.
 - vii. Where the member is a member of another regulated profession in Ontario or any regulated profession in another jurisdiction, any failure by the member to comply with any obligation to pay fees or provide information to the body responsible for the regulation of such professions, the initiation of any investigations by such bodies in respect of the member or the imposition of sanctions on the member by such bodies.
 - viii. Any other event that would provide reasonable grounds for the belief that the member will not practise traditional Chinese medicine in a safe and professional manner.
- 2. The member shall provide the College with written details about any finding of guilt relating to any offence as soon as possible after receiving notice of the finding, but not later than 30 days after receiving the notice.
- 3. The member shall maintain professional liability insurance in the amount and in the form required under the by-laws, and the member shall provide the College, within two days, with written notice if the member no longer maintains such insurance.
- 4. The member shall not practise the profession if the member does not have professional liability insurance in the amount and in the form required under the by-laws.
- 5. The member shall.
 - i. where the member is issued a certificate of registration by the College, prominently display his or her certificate of registration at any location at which he or she practises the profession, and
 - ii. where the member is issued a badge by the College, at all times while practising the profession, prominently display the badge on the outside of his or her clothing.
- 6. Immediately prior to the member's resignation, or to the suspension, revocation or expiry of the member's certificate of registration, the member shall return his or her certificate of registration and, if he or she has one, his or her related badge, to the Registrar.
- 7. Subject to subsection (2), a member who holds a certificate of registration listed in Column 1 of the Table to this subsection.
 - i. shall only use the titles listed in Column 2 opposite the certificate of registration, and
 - ii. shall only use the designations listed in Column 3 opposite the certificate of registration, if applicable.
- 8. The member shall only practise in the areas of traditional Chinese medicine in which the member is educated and experienced.

TABLE

		TABLE	
Item	Column 1	Column 2	Column 3
	Certificate of Registration	Title	Designation
1.	General	Traditional Chinese Medicine Practitioner	R. TCMP
2.	General	Acupuncturist	R. Ac
3.	Student	Student Traditional Chinese Medicine Practitioner	none
4.	Student	Student Acupuncturist	none
5.	Inactive	Traditional Chinese Medicine Practitioner (Inactive)	R. TCMP (Inactive)

6.	Inactive	Acupuncturist (Inactive)	R. Ac (Inactive)
7.	Temporary	Traditional Chinese Medicine Practitioner (Temp.)	R. TCMP (Temp.)
8.	Temporary	Acupuncturist (Temp.)	R. Ac (Temp.)
9.	Emergency	Traditional Chinese Medicine Practitioner (Emergency)	R. TCMP (Emerg.)
10.	Emergency	Acupuncturist (Emergency)	R. Ac (Emerg.)

O. Reg. 27/13, ss. 5 (1), 23 (1), 24 (1); O. Reg. 184/19, s. 1; O. Reg. 300/23, s. 2.

- (2) A member who is subject to the term, condition and limitation specified in paragraph 2 of subsection 10 (1) and who has not successfully completed the registration examinations shall only use the titles "Provisional Traditional Chinese Medicine Practitioner" or "Provisional Acupuncturist" and the designations "R. TCMP (Provisional)" and "R. Ac (Provisional)". O. Reg. 27/13, s. 23 (2).
 - **6.-8.** REVOKED: O. Reg. 27/13, s. 24 (1).

Registration requirements, General class

- **9.** (1) Subject to subsection (3), the following are non-exemptible registration requirements for a General certificate of registration:
 - 1. The applicant must have successfully completed a post-secondary program in traditional Chinese medicine that,
 - i. in the case of a full traditional Chinese medicine program, consists of at least four years of full-time education, or education that is of equivalent duration, and
 - ii. in the case of a traditional Chinese medicine acupuncture program, consists of at least three years of full-time education, or education that is of equivalent duration.
 - 2. The applicant 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.
 - 3. The applicant must have successfully completed the Safety Program that was set or approved by the Council or by a body that is approved by the Council for that purpose.
 - 4. The applicant must have successfully completed the jurisprudence course set or approved by the Registration Committee.
 - 5. The applicant must have successfully passed an assessment conducted by a panel of the Registration Committee, or by another body that is approved by the Council for that purpose, that demonstrates that the applicant has the necessary competency to safely practise the profession as the holder of a General certificate of registration.
 - 6. The applicant must have successfully completed the registration examinations that are set or approved by the Council. O. Reg. 27/13, ss. 9 (1), 23 (3).
- (2) If the applicant has not satisfied the requirements set out in paragraph 1 of subsection (1) either within one year immediately before the date that the applicant submitted his or her application or at some point following the submission of his or her application, the applicant must,
 - (a) have practised the profession during the three-year period of time that immediately preceded the date that the applicant submitted his or her application, which practice included conducting a minimum of 500 traditional Chinese medicine patient visits, which may include traditional Chinese acupuncture patient visits; or
 - (b) have, within the 12-month period that immediately preceded the date that the applicant submitted his or her application, successfully completed a refresher program approved by the Registration Committee. O. Reg. 27/13, s. 9 (2).
 - (3), (4) REVOKED: O. Reg. 27/13, s. 24 (1).
- (5) The requirement in paragraph 2 of subsection (1) is not considered to have been met if the program referred to in that paragraph commenced prior to the commencement of the program in traditional Chinese medicine referred to in paragraph 1 of subsection (1). O. Reg. 27/13, s. 9 (5).
- (6) The requirements in paragraphs 3 and 4 of subsection (1) are not considered to have been met unless the applicant satisfies those requirements either within the three-year period immediately before the date of that applicant's application or at some point following the submission of his or her application. O. Reg. 27/13, s. 9 (6).
- (7) Subject to subsections (8) and (9), the requirements in paragraph 6 of subsection (1) are not considered to have been met unless the applicant successfully completed the examinations,
 - (a) after the date on which he or she met the requirements in paragraph 5 of subsection (1); or

- (b) within three attempts. O. Reg. 27/13, s. 23 (4).
- (8) In the case of an applicant who does not successfully complete the examinations within three attempts, the requirements in paragraph 6 of subsection (1) will be considered to have been met if the applicant successfully completed the examinations on the applicant's fourth attempt after having first successfully completed the further education or training or combination of education and training, if any, required by a panel of the Registration Committee. O. Reg. 27/13, s. 23 (4).
- (9) Where, by virtue of clause (b) of subsection (7) and subsection (8), an applicant is not considered to have met the requirements in paragraph 6 of subsection (1), the successful completion of the examinations on any further attempt will not be considered as satisfying the requirements in paragraph 6 of subsection (1) unless, prior to sitting the examinations, the applicant completes another program mentioned in paragraph 1 of subsection (1). O. Reg. 27/13, s. 23 (4).
- (10) Where, by virtue of clause (a) of subsection (7), an applicant is not considered to have met the requirements in paragraph 6 of subsection (1), the attempt or attempts to sit the examinations that led to the meeting of those requirements will not be considered for the purposes of clause (7) (b) and subsection (8). O. Reg. 27/13, s. 23 (4).

Terms, etc., General certificate

- 10. (1) The following are terms, conditions and limitations on every General certificate of registration:
- 1. The member must either,
 - i. conduct a minimum of 500 traditional Chinese medicine patient visits, which may include traditional Chinese acupuncture patient visits, during every three-year period where the first three-year period begins on the day that the member is issued a General certificate of registration and each subsequent three-year period begins on the first anniversary of the commencement of the previous period, or
 - ii. within the 12 months prior to the expiry of each period referred to in subparagraph i in which the member does not meet the requirements of that subparagraph, successfully complete a refresher program approved by the Registration Committee.
- 2. Subject to subsection (4), a member who was issued a General certificate of registration before the coming into force of this paragraph must successfully complete the registration examinations referred to in paragraph 6 of subsection 9 (1). O. Reg. 27/13, ss. 10 (1), 23 (5).
- (2) If a member fails to meet the term, condition and limitation described in paragraph 1 of subsection (1), the Registrar shall refer the member to the Quality Assurance Committee for a peer and practice review. O. Reg. 27/13, s. 10 (2).
- (3) A member referred to in paragraph 2 of subsection (1) must successfully complete the examinations referred to in that paragraph within two attempts and must attempt every set of those examinations that is offered until such time as the examinations are successfully completed or he or she fails the examinations for a second time, whichever comes first. O. Reg. 27/13, s. 23 (6).
- (4) A member who is issued a General certificate of registration pursuant to subsection 9 (3) or section 11 is not required to meet the term, condition and limitation described in paragraph 2 of subsection (1). O. Reg. 27/13, s. 23 (6).

Labour mobility, General class

- 11. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a General certificate of registration, the applicant is deemed to have met the requirements set out in paragraphs 1, 2, 3, 5 and 6 of subsection 9 (1) and in subsection 9 (2) of this Regulation. O. Reg. 27/13, s. 23 (7).
- (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a practitioner of traditional Chinese medicine in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 27/13, s. 11 (2).
- (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of traditional Chinese medicine to the extent that would be permitted by a General certificate of registration at any time in the three years immediately before the date of that applicant's application, it is a non-exemptible requirement that the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. O. Reg. 27/13, s. 11 (3).
- (4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 4 of subsection 4 (1) if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 27/13, s. 11 (4).
- (5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 27/13, s. 11 (5).

Registration requirements, Student class

- 12. (1) The following are registration requirements for a Student certificate of registration:
- 1. The applicant must,
 - i. be enrolled in a post-secondary program in traditional Chinese medicine referred to in paragraph 1 of subsection 9 (1),
 - ii. be enrolled in a program referred to in paragraph 2 of subsection 9 (1), or
 - iii. have applied to take the registration examinations referred to in paragraph 6 of subsection 9 (1), but have not yet taken the examinations.
- 2. The applicant must not have previously held a Student certificate of registration and been unsuccessful in an attempt to meet the requirements of paragraph 1, 2 or 6 of subsection 9 (1) unless the Registrar is of the opinion that there are exceptional circumstances that likely contributed to the applicant's failure to meet those requirements. O. Reg. 27/13, ss. 12 (1), 23 (8, 9).
- (2) The requirements of paragraph 1 of subsection (1) are non-exemptible. O. Reg. 27/13, s. 12 (2).

Terms, etc., Student class

- 13. The following are terms, conditions and limitations on every Student certificate of registration:
- 1. The member 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.
- 2. The member's certificate of registration expires on the earliest of,
 - i. the date the holder is no longer actively engaged in pursuing the educational program, examinations or program of clinical experience referred to in paragraph 1 of subsection 12 (1) unless the Registrar permits the holder, in writing, to interrupt the pursuit of those requirements,
 - ii. the date that is seven years following the date on which the Student certificate of registration was issued unless a panel of the Registration Committee determines that exceptional circumstances exist which warrant an extension of the holder's certificate of registration, and
 - iii. the date the holder is issued a certificate of registration of another class.
- 3. Where a certificate of registration is extended by a panel of the Registration Committee under subparagraph 2 ii, the extension is subject to any terms, conditions and limitations as determined by that panel of the Registration Committee. O. Reg. 27/13, ss. 13, 23 (10), 24 (2).

Labour mobility, Student class

- **14.** (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a Student certificate of registration, the applicant is deemed to have met the requirements set out in paragraph 1 of subsection 12 (1). O. Reg. 27/13, s. 14 (1).
- (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a practitioner of traditional Chinese medicine in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 27/13, s. 14 (2).
- (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of traditional Chinese medicine to the extent that would be permitted by a Student certificate of registration at any time in the three years immediately before the date of that applicant's application, it is a non-exemptible requirement that the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. O. Reg. 27/13, s. 14 (3).
- (4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 4 of subsection 4 (1) if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 27/13, s. 14 (4).
- (5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 27/13, s. 14 (5).

Registration requirements, Inactive class

- **15.** (1) The following are registration requirements for an Inactive certificate of registration:
- 1. The applicant must be a member holding a General certificate of registration.
- 2. The applicant must not be in default of any fee, penalty or other amount owing to the College.

- 3. The applicant must have provided the College with any information that it has required of the applicant.
- 4. The applicant must have provided the College with an undertaking, in a form acceptable to the Registrar, that he or she will not practise the profession while holding an Inactive certificate of registration.
- 5. The applicant must not have held an Inactive certificate of registration within the five-year period immediately before the date on which he or she submitted the application unless the Registrar is of the opinion that exceptional circumstances justify exempting the applicant from this requirement. O. Reg. 27/13, s. 15 (1), 24 (2).
- (2) The requirements of paragraphs 1 to 4 of subsection (1) are non-exemptible. O. Reg. 27/13, s. 15 (2).

Additional terms, etc., Inactive class

- 16. The following are additional terms, conditions and limitations on every Inactive certificate of registration:
- 1. The member shall not engage in the practice of traditional Chinese medicine.
- 2. The member shall not supervise the practice of the profession.
- 3. The member shall not make any claim to or representation of having any competence in the profession. O. Reg. 27/13, s. 16.

Issuing other certificate to Inactive holder

- 17. (1) The Registrar may issue to the holder of an Inactive certificate of registration the General certificate of registration that he or she previously held if the member,
 - (a) makes an application to the Registrar;
 - (b) pays any penalty or other amount owed to the College;
 - (c) pays any fees required under the College's by-laws;
 - (d) provides the College with any information that it has required of the member;
 - (e) satisfies the Registrar that he or she will be in compliance with all of the terms, conditions and limitations of the certificate that is being applied for as of the anticipated date on which the certificate will be issued; and
 - (f) satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding the type of certificate which is being applied for. O. Reg. 27/13, s. 17 (1), 24 (2).
- (2) Despite subsection (1), the Registrar shall not reissue a Grandparented certificate of registration after the fifth anniversary of the day this section came into force. O. Reg. 27/13, s. 17 (2).

Registration requirements, Temporary class

- **18.** (1) The following are registration requirements for a Temporary certificate of registration:
- 1. The applicant must be registered or licensed to practise traditional Chinese medicine in another jurisdiction in which the requirements for registration or licensure are similar to those in paragraphs 1 and 2 of subsection 9 (1).
- 2. The applicant must have an offer of employment or appointment that relates to the practice or teaching of the profession and which does not exceed six months.
- 3. A holder of a General certificate of registration who is approved by the Registrar must have agreed to supervise the applicant and to be responsible for ensuring that the applicant provides appropriate and continuing care to patients.
- 4. The applicant must not have held a Temporary certificate of registration in the 12-month period immediately before the date on which he or she made the application unless the Registrar is of the opinion, based on exceptional circumstances, that this requirement should not apply.
- 5. The applicant must have successfully completed the jurisprudence course set or approved by the Registration Committee. O. Reg. 27/13, s. 18 (1), 24 (2).
- (2) The requirements of paragraphs 1 to 4 of subsection (1) are non-exemptible. O. Reg. 27/13, s. 18 (2).
- (3) The requirement in paragraph 5 of subsection (1) is not considered to have been met unless the applicant satisfies the requirement within the three-year period immediately before the date of the applicant's application. O. Reg. 27/13, s. 18 (3).
- (4) If the applicant completed the education that was part of the requirements for the registration or licensure referred to in paragraph 1 of subsection (1) more than one year immediately before the date that the applicant submitted his or her application for a Temporary certificate of registration, the applicant must,
 - (a) have practised the profession during the three-year period of time that immediately preceded the date that the applicant submitted his or her application, which practice included conducting a minimum of 500 traditional Chinese medicine patient visits, which may include traditional Chinese acupuncture patient visits; or

(b) have, within the 12-month period that immediately preceded the date that the applicant submitted his or her application, successfully completed a refresher program approved by the Registration Committee. O. Reg. 27/13, s. 18 (4).

Additional terms, etc., Temporary class

- 19. The following are additional terms, conditions and limitations on every Temporary certificate of registration:
- 1. The member may only practise traditional Chinese medicine under the supervision of the General member referred to in paragraph 3 of subsection 18 (1).
- 2. Upon the request of the Registrar, the member shall provide evidence satisfactory to the Registrar of the member's compliance with the terms, conditions and limitations set out in paragraph 1 and shall provide such evidence within the time period set by the Registrar.
- 3. The member's certificate of registration expires on the earlier of the expiry date noted on his or her certificate of registration and the day that is six months after the date on which the certificate was issued. O. Reg. 27/13, s. 19, 24 (2).

Labour mobility, Temporary class

- **20.** (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a Temporary certificate of registration, the applicant is deemed to have met the requirements set out in paragraph 1 of subsection 18 (1). O. Reg. 27/13, s. 20 (1).
- (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a practitioner of traditional Chinese medicine in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 27/13, s. 20 (2).
- (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of traditional Chinese medicine to the extent that would be permitted by a Temporary certificate of registration at any time in the three years immediately before the date of that applicant's application, it is a non-exemptible requirement that the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. O. Reg. 27/13, s. 20 (3).
- (4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 4 of subsection 4 (1) if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 27/13, s. 20 (4).
- (5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 27/13, s. 20 (5).

Registration Requirements, Emergency class

- 20.1 The following are registration requirements for an Emergency certificate of registration:
- 1. The Minister must have requested that the College initiate registrations under this class based on the Minister's opinion that emergency circumstances call for it or the Council must have determined, after taking into account all of the relevant circumstances that impact the ability of applicants to meet the ordinary registration requirements, that there are emergency circumstances, and that it is in the public interest that the College issue emergency certificates.
- 2. The applicant must have successfully completed a post-secondary program in traditional Chinese medicine that is approved by the Registration Committee and that,
 - i. in the case of a full traditional Chinese medicine program, consists of at least four years of full-time education, or education that is of equivalent duration, and
 - ii. in the case of a traditional Chinese medicine acupuncture program, consists of at least three years of full-time education, or education that is of equivalent duration.
- 3. The applicant 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.
- 4. The applicant must have successfully completed the Safety Program that was set or approved by the Council or by a body that is approved by the Council for that purpose within the two years preceding the submitting of the application.
- 5. The applicant must have successfully completed the jurisprudence course set or approved by the Registration Committee within the two years preceding the submitting of the application. O. Reg. 300/23, s. 3.

Additional terms, etc., Emergency Class

- 20.2 The following are additional terms, conditions and limitations on every Emergency certificate of registration:
- 1. The member may only practise the profession under the supervision of a holder of a General certificate of registration who has been approved by the Registrar.
- 2. Upon the request of the Registrar, the member shall provide evidence satisfactory to the Registrar of the member's compliance with the term, condition and limitation set out in paragraph 1 and shall provide such evidence within the time period set by the Registrar.
- 3. The member shall practise the profession a minimum of 170 patient visits during each 12-month period that they hold registration in the Emergency class.
- 4. If a member fails to meet the condition described in paragraph 3, the Registrar shall refer the member to the Quality Assurance Committee for a peer and practice assessment unless the member,
 - i. has successfully completed a refresher program approved by the Registration Committee, or
 - ii. has resigned their Emergency certificate of registration.
- 5. The member may not supervise another person in the practice of the profession.
- 6. Unless stated otherwise on the certificate, an Emergency certificate of registration expires one year after it is issued unless it is renewed.
- 7. Unless stated otherwise on the certificate, a renewed Emergency certificate of registration expires one year after it is issued unless it is renewed again.
- 8. Despite paragraphs 6 and 7, an Emergency certificate of registration expires six months after the Council determines that the emergency circumstances referred to in paragraph 1 of section 20.1 no longer exist. O. Reg. 300/23, s. 3.

Issuing General certificate to Emergency holder

- **20.3** (1) A member who holds an Emergency certificate of registration may be issued a General certificate of registration if the member,
 - (a) applies for the General certificate of registration;
 - (b) pays all fees as set out in the by-laws and any penalty or other amount owed to the College; and
 - (c) provides the College with any information that it has required of the member. O. Reg. 300/23, s. 3.
- (2) If the member has held an Emergency certificate of registration for less than three years, the member must successfully complete the registration examinations, as identified in paragraph 6 of subsection 9 (1), within two attempts, and must attempt every set of those examinations that is offered until such time as the examinations are successfully completed or the member fails the examinations for a second time, whichever comes first. O. Reg. 300/23, s. 3.
 - (3) If the member has held an Emergency certificate of registration for three years or more, the member must,
 - (a) satisfy a panel of the Registration Committee that the member possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding a General certificate of registration; or
 - (b) have successfully completed such additional education, training or examination requirements that are determined to be necessary by a panel of the Registration Committee. O. Reg. 300/23, s. 3.
- (4) Every member described in this section is exempt from the requirement to pay the application fee required under the by-laws of the College. O. Reg. 300/23, s. 3.

Suspensions, revocations and reinstatements

- 21. (1) If a member fails to provide the College with information about the member as required under the by-laws,
- (a) the Registrar may give the member notice of intention to suspend the member's certificate of registration; and
- (b) the Registrar may suspend the member's certificate of registration if the member fails to provide the information within 30 days after the notice is given. O. Reg. 27/13, s. 21 (1).
- (2) If the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that,
 - (a) the former member has given the required information to the College;
 - (b) the former member has paid any fees required under the by-laws for lifting the suspension;
 - (c) the former member has paid any other outstanding fees required under the by-laws; and

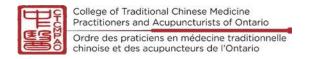
- (d) in the case of a former member whose certificate of registration was suspended under subsection (1) more than three years prior to the date on which he or she made his or her application for reinstatement, he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding the type of certificate that is being applied for. O. Reg. 27/13, s. 21 (2).
- (3) Despite subsection (2), after the fifth anniversary of the day this subsection comes into force, the Registrar shall not lift the suspension of a Grandparented certificate of registration. O. Reg. 27/13, s. 21 (3).

Registrar to give notice

- 22. The Registrar shall provide notice to a member where the member fails to meet the term, condition and limitation described in paragraph 2 of subsection 10 (1) within the timeframe provided for in subsection 10 (3) and the member's General certificate of registration shall be revoked 30 days following the date on which the notice is provided. O. Reg. 27/13, s. 22.
 - 23. OMITTED (PROVIDES FOR AMENDMENTS TO THIS REGULATION). O. Reg. 27/13, s. 23.
 - 24. OMITTED (PROVIDES FOR AMENDMENTS TO THIS REGULATION). O. Reg. 27/13, s. 24; O, Reg. 184/19, s. 2.
 - 25. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION). O. Reg. 27/13, s. 25.

Français

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COUCNIL

Meeting Date:	September 20, 2023
Issue:	CPMF Requirements – Council Competencies Presentation
Reported By:	Ann Zeng and Sean Cassman
Action:	Discussion

Issue

The College Performance Measurement Framework (CPMF) Includes a requirement that Council and Committee members meet a set of competencies before they are eligible for election. In order to meet this requirement, Council must approve competencies, and put in place an assessment process.

Public Interest Rationale

Council and Committee members are responsible for the decision making on policy matters of the College, and for ensuring that decisions are in the interest of public protection. It is because of this important function that there is increased pressure to have council and committee members meet a competency framework to be eligible.

Background

The 2022 CPMF Report identified the Council Competency requirement as a baseline requirement. This means that the Ministry expects all Colleges to meet this requirement, and if not, develop an improvement plan to quickly meet the requirement. This is a requirement that the College does not meet, and an improvement plan has been put in place. To help fulfill this improvement plan, a half-day Council meeting has been scheduled for Council to discuss and approve a set of competencies, and a method to assess those competencies.

In the past, Council and the Executive Committee heard presentations on competency frameworks from third-part consultants and the College of Naturopaths of Ontario. However, it will likely be beneficial to have an additional presentation on the matter to refresh this knowledge. To help with this, the College has invited Maureen Boon, Registrar and CEO of the College of Massage Therapists of Ontario (CMTO), to speak about their Council competency requirements and process.

The CMTO has completed a significant amount of work in this area, enacting Council competencies, annual Council self-evaluation, Committee competencies, President core competencies, Vice-President core competencies, and Committee Chair competencies.

Council will have the opportunity to hear about the CMTO's experience in adopting these measures and ask any questions that may arise.

Next Steps

At the September 21, 2023 session, Council will be asked to discuss and approve:

- A set of competencies and indicators for use in determining Council eligibility. These competencies have been developed by HPRO for use by all Colleges.
- The method in which members will demonstrate their competencies.

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

1st Quarter (April - June 2023)

			Actuals of Q1 2023-2024		Annual Budget 2023-2024	Actual to Budget %		Budget Remaining (balance of Year)	
GL Code	Revenue								
4101000	Registration Fees	\$	106,200.00	\$	182,750.00	58.11%	\$	76,550.0	
4102000	Renewal Fees	\$	3,386,500.00	\$	3,298,600.00	102.66%	\$	(87,900.0	
4200000	Administration Fees	\$	36,250.00	\$	68,750.00	52.73%	\$	32,500.0	
4300000	Pan Can Examination Fees	\$	221,734.00	\$	545,240.00	40.67%	\$	323,506.0	
4400000	Other Income-Government Funds	\$	-	\$	503,600.00	0.00%	\$	503,600.0	
4500000	Other Fees	\$	10,500.00	\$	42,000.00	25.00%	\$	31,500.0	
4600000	Other Income	\$	64,630.78	\$	75,000.00	86.17%	\$	10,369.2	
	Total Income	\$	3,825,814.78	\$	4,715,940.00	81.13%	\$	890,125.2	
GL Code	Expenses								
	Council & Committees	\$	134,448.12	\$	1,145,200.00	11.74%	\$	1,010,751.8	
6100000	Council	\$	11,360.75	\$	101,500.00	11.19%	\$	90,139.2	
6201000	Executive Committee	\$	3,353.45	\$	30,500.00	10.99%	\$	27,146.5	
6202000	Registration Committee and Panel	\$	9,417.81		69,300.00	13.59%	\$	59,882.1	
6203000	ICRC Committee	\$	89,812.35	\$	373,800.00	24.03%	\$	283,987.6	
6204000	Quality Assurance Committee	\$	8,543.16	\$	150,100.00	5.69%	\$	141,556.8	
6205000	Patient Relations Committee	\$	1,194.65	\$	47,750.00	2.50%	\$	46,555.3	
6206000	Discipline Committee	\$	10,765.95	\$	368,000.00	2.93%	\$	357,234.0	
6207000	Fitness to Practice Committee	\$	-	\$	4,250.00	0.00%	\$	4,250.0	
6300000	Professional Services	\$	30,749.99	\$	215,500.00	14.27%	\$	184,750.0	
6301000	Legal Fees	\$	7,627.15	\$	67,000.00	11.38%	\$	59,372.8	
6302000	Accounting Fee	\$	2,172.61	\$	31,500.00	6.90%	\$	29,327.3	
6303000	Expert Consultation	\$	-	\$	7,000.00	0.00%	\$	7,000.0	
6304000	Government Relations	\$	20,950.23	\$	110,000.00	19.05%	\$	89,049.7	
6400000	Special Programs/Projects	\$	291,714.50	\$	1,576,466.00	18.50%	\$	1,284,751.5	
6401000	Pan-Canadian Examinations	\$	161,676.00	\$	381,366.00	42.39%	\$	219,690.0	
6402000	Doctor Title	\$	29,046.20	\$	406,500.00	7.15%	\$	377,453.8	
6403000	Strategic Initiatives	\$	25,040.20	\$	100,000.00	0.00%	\$	100,000.0	
6404000	Program Approval	\$	_	\$	50,000.00	0.00%	\$	50,000.0	
6405000	Safety and Jurisprudence Test	\$	4,833.36	\$	135,000.00	3.58%	\$	130,166.6	
6800000	Pan Can Chinese Language Examination	\$	96,158.94	\$	503,600.00	19.09%	\$	407,441.0	
6500000	Salaries and Benefits		390,059.42			20.65%	\$		
6500000	Salaries and Benefits	\$ \$	390,059.42	\$ \$	1,889,107.00 1,839,107.00	21.21%	\$	1,499,047.5 1,449,047.5	
6502000	Casual Labour	\$	390,039.42	\$	50,000.00	0.00%	\$	50,000.0	
6600000	Information Technology	\$	100,795.86	\$	280,000.00	36.00%	\$	179,204.1	
6602000	Equipment Expenses	\$	146.89	\$	10,000.00	1.47%	\$	9,853.1	
6603000	Software Development	\$	63,097.91	\$	148,500.00	42.49%	\$	85,402.0	
6604000	Maintenance and Support Contracts	\$	20,348.63	\$	58,500.00	34.78%	\$	38,151.3	
			*		•			•	
6605000 6606000	Online Services	\$	14,405.68 2,796.75		53,000.00 10,000.00	27.18% 27.97%	\$ \$	38,594.3	
6606000	Network Security	\$	2,796.75	\$	10,000.00	27.97%		7,203.2	
6700000	Operating Expenses	\$	128,704.76		536,050.00	24.01%	\$	407,345.2	
6701000	General Operating Costs	\$	66,685.71		296,050.00	22.53%	\$	229,364.2	
6702000	Payment Gateway	\$	11,108.19		130,000.00	8.54%	\$	118,891.8	
6703000	Subscriptions and Conferences	\$	17,321.70	\$	55,000.00	31.49%	\$	37,678.3	
6704000	Communications and Publications	\$	33,589.16	\$	55,000.00	61.07%	\$	21,410.8	
45	Total Expenses	\$	1,076,472.65	\$	5,642,323.00	19.08%			
46		\$	2,749,342.13	_	(926,383.00)				



College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario

Audit Findings Communication for the year ended March 31, 2023



A message from Liana Bell to the Executive Committee

I am pleased to provide you with the findings of our audit of the financial statements of College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (the "College") for the year ended March 31, 2023.

Our audit findings communication is designed to highlight and explain key issues, which we believe to be relevant to the audit and to continue effective two-way communication with you regarding our audit. This will assist the Executive Committee in fulfilling their responsibility of overseeing the financial reporting process of the College.

This communication has been prepared to comply with the requirements outlined in Canadian Auditing Standard 260, *Communication with those Charged with Governance*. The information in this document is intended solely for the use of the Executive Committee, the Council and management and should not be distributed to others without our consent.

We look forward to discussing our audit findings with you in detail as well as any other matters that you may wish to address.

"Our commitment to quality is reflected in every aspect of our work. If you have any questions or comments, please contact me."

Tonal !

Liana Bell, CPA, CA

Partner Hilborn LLP

August 3, 2023

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Significant Qualitative Aspects of the [Entity's] Accounting Practices	2
Other Significant Matters	4

Your client service team

Liana Bell, Engagement Partner lbell@hilbornca.com

Fiona Zou, Senior Manager fzou@hilbornca.com

John Campbell, Partner and Tax Group Leader jcampbell@hilbornca.com

"At Hilborn, we are committed to audit quality and strong client service. Audit quality is integral to our business and is an overarching consideration in our training, our processes, and our systems and controls."

Executive Summary



Audit status

We have substantially completed our audit of the financial statements of the College for the year ended March 31, 2023, with the exception of the following procedures:

- Completion of subsequent events procedures
- Receipt of the signed management representation letter
- Council's approval of the financial statements

These procedures require completion before we may issue our auditor's report. If we become aware of significant matters after completing these procedures, we will bring them to your attention.



Auditor's report and representations from management

We expect to issue an unmodified opinion. The expected form and content of our report is included in the draft financial statements being provided.

We will provide the management representation letter upon the Council's approval of the draft financial statements. We will ask management to sign and return this letter to us before we issue our auditor's report.



Independence

We are independent and have been so throughout the audit process. We have complied with all relevant ethical requirements regarding independence.



Significant difficulties encountered

There were no significant difficulties encountered while performing the audit.



Changes from the audit plan

Our audit approach was consistent with the approach communicated to you in our audit plan dated June 8, 2023.

Final materiality is consistent with preliminary materiality set at \$180,000.

Significant Qualitative Aspects of the College's Accounting Practices

Canadian Auditing Standards require that we communicate with you about significant qualitative aspects of the entity's accounting practices, including accounting policies, accounting estimates and financial statement disclosures.

Accounting policies, accounting estimates and financial statement disclosures	Hilborn's response and views
The significant accounting policies are disclosed in Note 1 to the financial statements. Management is responsible for the appropriate selection and application of accounting policies under Canadian accounting standards for not-for-profit organizations.	 The revenue recognition accounting policy for contributions including government grants was added for the 2023 fiscal year. We reviewed all other accounting policies adopted by the College, and based on audit work performed, the accounting policies are appropriate for the College and applied consistently.
Management is responsible for the accounting estimates included in financial statements. Estimates and the related judgements and assumptions are based on management's knowledge of the operations and past experience about current and future events.	- Based on audit work performed, we are satisfied with the estimates made by management.
Financial statement presentation and disclosure	 We reviewed the overall financial statement presentation and disclosure to ensure that it is in accordance with the accounting standards for not-for-profit organizations.

Accounting policies, accounting estimates and financial statement disclosures	Hilborn's response and views
Annual report	 We acknowledge that a copy of the College's financial statements for the year ended March 31, 2023 and a copy of our audit report related to the financial statements will be included in the College's annual report. As agreed in our engagement letter, we will review the annual report prior to it being finalized to ensure that there are no inconsistencies with the audited financial statements. If, based on the work that we will perform on the annual report, we conclude that there is a material misstatement of the annual report we will communicate that fact to you.

Other Significant Matters

In accordance with Canadian Auditing Standards, there are a number of required communications between the auditor and those charged with governance related to the oversight of the financial reporting process. Those communications will primarily be written in the form of our audit plan and audit findings communication. We may also communicate orally through discussions. The table below summarizes the communications required at the conclusion of the audit.

Significant Matter	Discussion
Summary of uncorrected misstatements	We did not identify any misstatements that remain uncorrected in the financial statements.
Corrected misstatements	During the course of the audit, management and Hilborn LLP worked collaboratively to identify adjustments required in the financial statements. All the adjustments proposed by Hilborn were approved and made by management.
Significant deficiencies in internal control	We did not identify any control deficiencies that, in our judgement, would be considered as significant deficiencies. It should be noted that due to the size of the College and the limited number of personnel involved, adequate segregation of duties is not practical; therefore, reliance is placed on supervision and approvals by the Executive Committee and the Council.

Significant Matter	Discussion
Fraud and non-compliance with laws and regulations	No fraud or non-compliance with laws and regulations came to our attention during the course of the audit.
	We would like to reconfirm with the Executive Committee that you are not aware of any fraud or non-compliance with laws and regulations not previously discussed with us.
Significant difficulties encountered	No difficulties were encountered while performing the audit and there are no unresolved disagreements. We received full cooperation from management during our audit.
Related parties	We did not identify any related party balances or transactions that require disclosure in the financial statements.
Subsequent events	No subsequent events, which would impact the financial statements, have come to our attention.



COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

FINANCIAL STATEMENTS

MARCH 31, 2023

Draft statement subject to Revision





Independent Auditor's Report

To the Members of Council of College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario

Opinion

We have audited the financial statements of College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (the "College"), which comprise the statement of financial position as at March 31, 2023, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at March 31, 2023, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Information

Management is responsible for the other information. The other information comprises the information, other than the financial statements and our auditor's report thereon, in the annual report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

We obtained the annual report prior to the date of our auditor's report. If, based on the work we have performed on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact in our auditor's report. We have nothing to report in this regard.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the ability of the College to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the financial reporting process of the College.



Independent Auditor's Report (continued)

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or
 error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is
 sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material
 misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve
 collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that
 are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
 effectiveness of the internal control of the College.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the ability of the College to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

Toronto, Ontario
Date to be determined

Chartered Professional Accountants Licensed Public Accountants

Statement of Financial Position		
March 31	2023 \$	2022 \$
ASSETS		
Current assets Cash Accounts receivable (note 3) Accounts receivable - Minister of Health (note 4) Prepaid expenses	8,889,076 96,712 250,000 38,953	8,631,851 103,412 - 31,198
	9,274,741	8,766,461
Long-term assets Capital assets (note 5)	220,611	314,531
	9,495,352	9,080,992
LIABILITIES	E	
LIABILITIES Current liabilities Accounts payable and accrued liabilities Account payable - Minister of Health (note 4) Deferred membership dues Deferred lease inducements (note 6) NET ASSETS Operating Fund Investigations and Hearings Reserve Fund	209,039 95,208 3,533,976	223,567 - 3,353,530
	3,838,223	3,577,097
Deferred lease inducements (note 6)	37,231	65,154
Elle	3,875,454	3,642,251
NET ASSETS		
Operating Fund Investigations and Hearings Reserve Fund Sexual Abuse Therapy Fund Strategic Initiatives Fund Contingency Reserve Fund Property and Technology Fund	3,119,898 1,000,000 200,000 500,000 500,000 300,000	2,938,741 1,000,000 200,000 500,000 500,000 300,000
	5,619,898	5,438,741
	9,495,352	9,080,992

The accompanying notes are an integral part of these financial statements

Approved on behalf of the Board:

Director

Director

Statement of Operations Year ended March 31 2023 2022 \$ \$ Revenues Membership dues 3,565,778 2,693,444 Examination fees 477,618 385,630 Minister of Health funding (note 4) 154,792 193,887 Other 75,552 4,392,075 3,154,626 Expenses Salaries and employee benefits 1,393,252 1,534,957 Council and committees 1,308,363 755,368 Consulting and professional services (Schedule) 127,301 108,595 Special programs and project (Schedule) 713,483 610,686 Office and general operational costs (Schedule) 427,724 372,817 4,111,828 3,240,718 Excess (deficiency) of revenues over expenses from operations before the following 280,247 (86,092)Depreciation (99,090)(98,962)Excess (deficiency) of revenues over expenses for the (185,054) 181,157 year

Statement of Changes in Net Assets

Year ended March 31							2023
	Operating Fund \$	Investigations and Hearings Reserve Fund \$	Sexual Abuse Therapy Fund \$	Strategic Initiatives Fund	Contingency Reserve Fund \$	Property and Technology Fund \$	Total
Balance - at beginning of year	2,938,741	1,000,000	200,000	500,000	500,000	300,000	5,438,741
Excess of revenues over expenses for the year	181,157	-	-) <u>K</u>	0 -	-	-	181,157
Balance - at end of year	3,119,898	1,000,000	200,000	500,000	500,000	300,000	5,619,898
			30)				2022
	Operating Fund \$	Investigations and Hearings Reserve Fund \$	Sexual Abuse Therapy Fund \$	Strategic Initiatives Fund \$	Contingency Reserve Fund \$	Property and Technology Fund \$	Total \$
		KEI					
Balance - at beginning of year	3,423,795	1,000,000	150,000	400,000	500,000	150,000	5,623,795
Excess (deficiency) of revenues over expenses for the year Inter-fund transfers (note 1)	(185,054) (300,000)	- -	- 50,000	- 100,000	- -	- 150,000	(185,054) -
Balance - at end of year	2,938,741	1,000,000	200,000	500,000	500,000	300,000	5,438,741

Statement of Cash Flows		
Year ended March 31	2023 \$	2022 \$
Cash flows from operating activities Cash received from members Interest received Cash paid to employees and suppliers	4,327,242 97,187 (4,162,034)	4,015,453 18,152 (3,211,927)
	262,395	821,678
Cash flows from investing activity Purchase of capital assets	(5,170)	(3,276)
Change in cash during the year and cash at end of year	257,225	818,402
Cash, beginning of year	8,631,851	7,813,449
Cash, end of year	8,889,076	8,631,851

Schedules to Financial Statements

Year ended March 31

Schedule of Expenses

	2023 \$	2022 \$
Consulting and professional services Professional services	127,301	108,595
	127,301	108,595
Special programs and projects Special projects and programs Information technology	504,551 208,932	406,309 204,376
	713,483	610,685
Office and general operational costs General operating costs	427,724	372,817
	427,724	372,817

Notes to Financial Statements

March 31, 2023

Nature of operations

The College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (the "College") regulates the practice of traditional Chinese medicines and governs the actions and conduct of its members to ensure the public has access to safe, competent and ethical services from qualified traditional Chinese medicine professionals.

The College is a not-for-profit organization, incorporated without share capital by a special act of the Ontario Legislature and, as such, is generally exempt from income taxes. The College is governed by the Regulated Health Professions Act, 1991 and the Traditional Chinese Medicine Act, 2006.

1. Significant accounting policies

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and are in accordance with Canadian generally accepted accounting principles. These financial statements have been prepared within the framework of the significant accounting policies summarized below.

(a) Basis of accounting - operations

The operating fund reflects the day-to-day activities of the College which are financed generally by registration, renewal and application fees. All investment income earned is allocated to the operating fund.

The College's Council has internally restricted net assets to be used for specific purposes. These funds are not available for operations without approval of the Council. The details of internally restricted funds are as follows:

- (a) The Investigations and Hearings Reserve Fund is designated to cover costs, including legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, the Health Professions Appeal and Review Board registration appeals hearings and other hearings that may arise related to regulating the profession. During the fiscal year, the Council approved the transfer of \$Nil (\$Nil 2022) from the operating fund.
- (b) The Sexual Abuse Therapy Fund is designated to cover costs for funding for therapy and counselling. During the fiscal year, the Council approved the transfer of \$Nil (\$50,000 2022) from the operating fund.
- (c) The Strategic Initiatives Fund is designated to meet the anticipated future requirements of the College for strategic directions and key activities as outlined in the College's Strategic Plan. During the fiscal year, the Council approved the transfer of \$Nil (\$100,000 2022) from the operating fund.
- (d) The Contingency Reserve Fund is designated to provide for extraordinary expenses that exceed or fall outside of the provisions of the College's operating budget and are not otherwise covered by the Investigations and Hearings Reserve Fund or to fund the College's obligations in extreme circumstances as determined and approved by the Council of the College including in the event that the College ceases to exist as a corporate statutory body. During the fiscal year, the Council approved the transfer of \$Nil (\$Nil - 2022) from the operating fund.

Notes to Financial Statements (continued)

March 31, 2023

1. Significant accounting policies (continued)

(a) Basis of accounting - operations (continued)

(e) The Property and Technology Reserve fund is designated to cover costs, for future needs of the College such as office moves and renovations. It is also designated to fund expenses related to asset replacement, rehabilitation, and significant repair for equipment that fall outside of the provisions of the College's operating budget. During the fiscal year, the Council approved the transfer of \$Nil (\$150,000 - 2022) from the operating fund.

(b) Revenue recognition

The College's principal source of revenue is membership dues which are recognized as revenue in the period to which the membership dues relate. Membership dues received in the current year, applicable to a subsequent year are recorded as deferred revenue on the Statement of Financial Position and will be accounted for as revenue in the year to which they pertain.

The College follows the deferral method of accounting for contributions which include government grants. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Externally restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Contributions approved but not received at the end of an accounting period are accrued. Where a portion of a contribution relates to a future period, it is deferred and recognized in that subsequent period.

Other fees and revenue include application fees, examination fees, course fees and interest. Fees are recognized as revenue when the services and courses have been provided. Interest is recorded when earned. Fees received in the current year, applicable to a subsequent year are recorded as deferred revenue on the Statement of Financial Position and will be accounted for as revenue in the year to which they pertain.

(c) Capital assets

The costs of capital assets are capitalized upon meeting the criteria for recognition as capital assets, otherwise, costs are expensed as incurred. The cost of capital assets comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Capital assets are measured at cost less accumulated amortization and accumulated impairment losses.

Notes to Financial Statements (continued)

March 31, 2023

1. Significant accounting policies (continued)

(c) Capital assets (continued)

Depreciation is provided for, upon the commencement of the utilization of the assets, using methods and rates designed to amortize the cost of the capital assets over their estimated useful lives. The annual amortization rates and methods are as follows:

Furniture and equipment 5 years straight line Computer equipment 3 years straight line Computer software 3 years straight line 10 years straight line

Leasehold improvements straight line over the term of the lease

Capital assets are tested for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. If any potential impairment is identified, the amount of the impairment is quantified by comparing the carrying value of the capital assets to its fair value. Any impairment of capital assets is recognized in income in the year in which the impairment occurs. An impairment loss is not reversed if the fair value of the capital assets subsequently increases. There were no impairment indicators in 2023.

(d) Deferred lease inducements

Deferred lease inducements are amortized on a straight line basis over the term of the premise lease.

(e) Financial instruments

(i) Measurement of financial instruments

The College initially measures its financial assets and financial liabilities at fair value adjusted by, in the case of a financial instrument that will not be measured subsequently at fair value, the amount of transaction costs directly attributable to the instrument.

The College subsequently measures its financial assets and financial liabilities at amortized cost. Amortized cost is the amount at which a financial asset or financial liability is measured at initial recognition minus principal repayments, plus or minus the cumulative amortization of any difference between that initial amount and the maturity amount, and minus any reduction for impairment. Financial assets and liabilities measured at amortized cost include cash, accounts receivable, accounts receivable - Minister of Health, accounts payable and accrued liabilities and accounts payable - Minister of Health.

Notes to Financial Statements (continued)

March 31, 2023

1. Significant accounting policies (continued)

(e) Financial instruments (continued)

(ii) **Impairment**

Financial assets measured at amortized cost are tested for impairment when there are indicators of possible impairment. When a significant adverse change has occurred during the period in the expected timing or amount of future cash flows from the financial asset or group of assets, a write-down is recognized in net income. The write down reflects the difference between the carrying amount and the higher of:

- the present value of the cash flows expected to be generated by the asset or group of assets;
- the amount that could be realized by selling the assets or group of assets;

When the events occurring after the impairment confirm that a reversal is necessary, the reversal is recognized in net income up to the amount of the previously recognized impairment. The amount of the reversal is recognized in income in the period that the reversal occurs.

(f) Management estimates

The preparation of the College's financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the year.

Key areas where management has made difficult, complex or subjective judgments include allowance for doubtful accounts and useful lives of capital assets. Actual results could differ from these and other estimates, the impact of which would be recorded in future affected periods.

Notes to Financial Statements (continued)

March 31, 2023

2. Financial instrument risk management

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure at the statement of financial position date. The financial instruments of the College and the nature of the risks to which those instruments may be subject, are as follows:

_			Risks		
				Market risk	
Financial instrument	Credit	Liquidity	Currency	Interest rate	Other price
					_
Cash	X				
Accounts receivable	Χ			? ′	
Accounts receivable - Minister of Health	Χ		DEN'	,	
Accounts payable and accrued liabilities		X	0		
Account payable - Minister of Health		X			

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The College is exposed to credit risk on its cash and accounts receivable.

The College reduces its exposure to the credit risk of cash by maintaining balances with a Canadian financial institution.

The College mitigates its exposure to the credit risk of accounts receivable and accounts receivable - Minister of Health by monitoring receivable balances on a regular basis and providing for receivables that are uncollectible. Management has included a provision for doubtful accounts receivable in these financial statements (see note 3).

Liquidity risk

Liquidity risk is the risk that the College will encounter difficulty in meeting obligations associated with financial liabilities. The College is exposed to this risk mainly in respect of its accounts payable and accrued liabilities, and account payable to Minister of Health. The College expects to meet these obligations as they come due by generating sufficient cash flow from operations.

Notes to Financial Statements (continued)

March 31, 2023

2. Financial instrument risk management (continued)

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk: currency risk, interest rate risk and other price risk. The College is not exposed to significant currency, interest rate or other price risks.

Changes in risk

There have been no significant changes in the College's risk exposure from the prior year.

3. Accounts receivable

Accounts receivable includes an amount receivable for cost awards totalling \$88,276 (\$94,976 - 2022) net of an allowance for doubtful accounts of \$475,104 (\$475,104 - 2022).

4. Minister of Health Funding

The Minister of Health (MOH) has approved funding to the College in the amount of \$750,000 under an agreement, expiring March 31, 2024. The funding is for the College to work with the Canadian Alliance of Regulatory Bodies of Traditional Chinese Medicine Practitioners and Acupuncturists to offer the College's required entry-to-practice exams in the Chinese language for the next three sittings, starting in October 2022. The amount of funding is to be received over the 2 fiscal years ending March 31, 2023 and 2024. A summary of the funding receivable during the year is as follows:

CXO	2023 \$
Funding receivable Amount refundable - 2022/2023	250,000 (95,208)
Revenue recognized for the year	154,792

5. Capital assets

			2023
	Cost \$	Accumulated Amortization \$	Net Book Value \$
Furniture and equipment Computer equipment and software Customized computer software Leasehold improvements	248,524 115,197 558,560 302,859	248,524 110,658 374,723 270,624	- 4,539 183,837 32,235
	1,225,140	1,004,529	220,611

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Notes to Financial Statements (continued)

March 31, 2023

5. Capital assets (continued)

			2022
	Cost \$	Accumulated Amortization \$	Net Book Value \$
Furniture and equipment Computer equipment and software	248,524 110,027	248,524 97,710	- 12,317
Customized computer software Leasehold improvements	558,560 302,859	318,867 240,338	239,693 62,521
	1,219,970	905,439	314,531

6. **Deferred lease inducements**

Deferred lease inducements represent the unamortized amount of a leasehold improvement allowance under the premise lease and free rent at various times during the lease.

	2023 \$	2022 \$
Balance - at beginning of year Amortization of lease inducements	65,154 (27,923)	93,078 (27,924)
Balance - at end of year	37,231	65,154

7. Lease commitments

The College has entered into a lease for its premises which expires on July 31, 2024. The minimum annual lease payments are as follows:

		\$_
2024		114,384
2025	7	38,128
		152,512

In addition, the College is obligated to pay its proportionate share of operating costs and taxes which amounted to \$65,154 (\$73,421 - 2022).

8. Contingent liabilities

There are currently two matters under review to assess whether the College has potential liabilities. As the outcome of these matters are not determinable at this time, no amounts have been recorded in the financial statements.



LISTENERS. THINKERS. DOERS.

COUNCIL

Meeting Date:	September 20, 2023
Issue:	Legal Counsel to Council
Reported By:	Ann Zeng and Sean Cassman
Action:	Discussion and Direction

Issue

The Executive Committee Chair has requested that a discussion on the Council legal counsel take place.

Public Interest Rationale

The College operates within an expansive and complicated regulatory framework, that sets a number of legal obligations on how the College carries out its duties. It is important that Council has legal counsel that is well versed in this framework to help guide Council as they make decisions. This helps ensure that Council properly carries out its duties of public protection.

Background

At an operational level, staff use the services of several law firms, represented by different lawyers from each firm. These lawyers bring different expertise to the College, however one commonality that staff look for when seeking legal counsel is experience with professional regulation, as this is a niche field of law in Ontario that many lawyers would not be familiar with.

Throughout the College's history, it has been common practice to have legal counsel present at Council meetings to offer advice when needed. This legal counsel has typically been the same lawyer that serves as general counsel to the College at the operational level. However, Council can discuss this practice if they believe that changes are necessary.

The Executive Committee discussed this issue at their last meeting on August 8, 2023, and expressed concern about the Council legal representation. The Committee have requested this item be brought to Council for further discussion.

Program managers have been asked to provide feedback on the current legal counsel, and the experience shared has been uniformly positive. Staff appreciate the quality of legal advice, which has been objective and in line with the College's direction of right touch regulation. Staff do not currently have any concern with the legal representation, and are not planning any changes at an operational level, as it would disrupt efficiency, and would not be in the best interest of the College.

Next Steps

Council discusses approach to their legal counsel and provide staff with a direction.



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Recommendations on the Implementation of Doctor Title In Ontario From the Council of Traditional Chinese Medicine and Acupuncture Schools of Ontario

Introduction:

The Doctor Title was a contentious issue in passing the TCM Act and among other reasons, one of the reasons some of the profession did not support the Act. The majority of the profession who did support the Act anticipated the approval and implementation of a Doctor Title to follow. 17 years later we are still waiting.

The following recommendations are made based on the views of both experienced practitioners and educational institutions. We have kept these in point form for easy future reference.

Background:

- The 2001 HPRAC report does not recommend the use of Doctor title due to the lack of oversight and established educational standards. Since the establishment of the College, minimum educational standards have been upheld.
- The CTCMPAO must make recommendations that bridge the expectations of the Ministry of Health, the local and foreign trained members of the TCM and Acupuncture profession, TCM and Acupuncture educational sector in Ontario, and the public.
- Standards set in Canada and other jurisdictions already exist. Largely this
 includes a combination of minimum entry requirements, length of training,
 program approval, and a competency based framework combined with a
 credentialing exam.
- There is no legislation that says a "Doctor" title must have a degree. There is no degree program at the present time in Canada. It is unrealistic and unreasonable to require a degree for the doctor title registration. We should allow for a natural progression as other professions such as N.D. and D.C have had.
- Ontario should implement a grandparenting process for the title that treats domestic and foreign trained applicants equally while upholding an acceptable standard. This should offer multiple routes including educational, experiential, or examination.



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 Doctor level equivalency education programs¹ have been offered in Ontario for over 20 years. These programs surpass the minimum requirements for doctor registration in other jurisdictions (3250 hr in BC vs 4000 + hr in ON). Graduates of these programs have been approved, able to pass the competence examinations, and successfully registered as Doctor of TCM with CTCMA-BC. Persons with this credential should be accepted with the doctor title in Ontario, following the Labor mobility reciprocity

Since 2002, there have been a few Ontario schools that have continued to offer doctor level equivalent TCM programs, but without using this title, as Advanced level programming. Interestingly these Ontario programs surpass the educational standards of the US Doctor Degree Program in Oriental Medicine (3700 hours), and the Doctor Registration requirements in British Columbia (3250 hours). The Private education sector have historically been the only institutions to offer this advanced level of training.

In 2002 the schools offering the Doctor of TCM Diploma Programs were directed to remove any use of the term "Doctor" in their diploma or educational programming. It was felt the use of such a title was confusing to the public and other professionals, as there was no 3rd party oversight to either the educational process or the profession. Since that time, the landscape has changed remarkably and there is now a regulatory board/college overseeing the profession, graduates of the educational programs have their education vetted and accepted by the CTCMPAO, there is a set of National Competencies and the requirement to pass independently proctored examinations.



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1. History

The historical issue with Doctor of TCM is found in the 2001 report and states:

Doctor Title HPRAC examined the pattern of educational preparation and authorized controlled acts of the five professions that are currently entitled to use the "Doctor" title under the RHPA (physicians, dentists, optometrists, chiropractors and psychologists). All five professions require a minimum of seven years of post-secondary education, including some university prerequisite for entry into a professional school or program. They are also all authorized to perform the controlled act of "communicating a diagnosis". Traditional Chinese medicine does not fit into this pattern. HPRAC notes that the educational programs in TCM vary widely in length and content. Some schools offer a four year full-time programs with over 3,000 hours of instruction, while others offer a 2 year part-time program with 600 hours of instruction. Although some TCM practitioners are trained to the level of post-secondary education identified above, there is no education standardization to this level in Ontario. Therefore, HPRAC is of the view that the profession of TCM not be granted the "Doctor" title.

- a. Before the TCM Act, there was no oversight of use of "Doctor" title. At this time, some Private Post-Secondary Schools ran 5 year full time "Doctor of TCM Diploma" programs matching the requirements for this designation in other jurisdictions such as BC and USA. These institutions continue to offer this program under other names.
- b. The TCM Act included two titles (R.Ac and R.TCMP) with the third additional approval of a Doctor Title to be detailed at a later time. After the TCM act came into effect, no practitioner or school could use the term "Doctor" in relation to the profession, even if that practitioner had a PhD or if the educational program was designed to offer such a level of training.
- c. At that time, the MOH did not recommend the use of the Dr. of TCM because there was no minimum requirement of education. Since that time, the CTCMPAO has already implemented a minimum educational requirement for R.Ac and R.TCMP designations. The HPRAC report states: "All five professions (other RHPA in Ontario that have Doctor Title and can offer a diagnosis) require a minimum of seven years of



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post-secondary education, including some university prerequisite for entry into a professional school or program." This matches the current situation in other provinces across Canada. 2 years of postsecondary education as a prerequisite followed by a minimum of 5 years full time educational requirement. There is no requirement that this be at a degree level or that this be offered at a public rather than private college.

2. Concerns about the Surveys related to the Doctor Title Registration:

- Two surveys were conducted by the CTCMPAO to consult the profession, public and stakeholders on the Doctor Title
 - i. The second and most recent survey was written in such a way to elicit biased responses and lacked understanding of the current state of the profession in this province.
 - ii. The questions did not account for the current situation in Ontario and led respondents to idealized responses
- b. Associations may produce surveys that lack validity. Any professional association should be able to verify the number of members currently registered with the CTCMPAO and should be able to validate the survey method and responses.
- c. It is important to note, that members of this profession that are foreign trained may keep the perspective that it is normal to have a BSc degree, and hospital internship such as is the normal requirement in China, but these programs simply do not exist in Canada due to different legislative frameworks. Especially at the CTCMPAO, public and professional members must be briefed on the situations in Canada in order to make appropriate decisions.
- d. R.Ac professional members of the College may lack the insight, experience and incentive to support or advise on the Doctor title due to known or unknown bias.
- e. Foreign trained professional members of the CTCMPAO have assumptions and expectations about education that are based on other jurisdictions. An equivalent length program with similar competencies in the US is an MSc. In China, the publicly funded medical infrastructure and educational infrastructure is supportive of TCM and Acupuncture as integrated into the healthcare and educational institutions. It is only



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- educators and policy makers who understand the reality of the situation in Ontario.
- f. The essential role of the College is to protect the public and this is largely achieved through ensuring adequate education and professional competence through program approval and credentialing exams.

3. Grandparenting

- a. Grandparenting process to allow current members to achieve proposed title
 - A grandparenting process is necessary in Ontario, especially from the perspective of education. We need someone with this designation to provide education to this level of training.
 - ii. A grandparenting process must treat practitioners equally including foreign and Canadian trained
 - iii. A grandparenting process should consider parity with other jurisdictions while recognizing the current state of regulation (or lack thereof) in Ontario
 - iv. Due to the great diversity of our profession in this province, a grandparenting process should allow for various routes. For example:
 - 1. Educational Route: Current CTCMPAO Member who can demonstrate equivalent education
 - Experience Route: Current CTCMPAO Member who has been practicing and/or teaching for a certain amount of time
 - 3. Examination Route: Current CTCMPAO Member who is given a temporary allowance to take the exam without having to meet the future educational requirements.
 - 4. Alternate Examination Route: Such as a PLAR exam where necessary to combine with above numbers 1 or 2.
- b. Lastly, a bridging program may be considered
 - i. Bridging program based on the difference between R.TCMP and Dr.TCM (for example) competencies.
 - ii. This may also fulfill a need by the MOH to ensure certain standards are met.



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4. Education requirements

a. Program Approval

- i. In Ontario there is currently no program approval requirement
- ii. The province is behind others because of the exemption in the PCC Act.
- It is not reasonable to have no education oversight when issuing a Doctor title.
- iv. The most important part of program approval is related to the professional competencies taught within the program and this type of approval must be done through the profession (CTCMPAO or other professional organization such as CARB-TCMPA, or a new independent accrediting body).
- v. Public Colleges are internally approved and not by any independent body and still operate with effectively no TCM program approval process.
- vi. Public and private programs should go through the same process that does not favor large/ public institutions

b. Private Education in Ontario

- i. Pass rates demonstrate efficacy of private programs, more diversity and ability to meet the unique needs of students, graduation rates for private schools, and the majority of practitioners since 2000 are private school graduates.
- ii. Public colleges can be negatively affected through cuts by administrative, government policy changes, or financial reasons.

c. Degree

- In Canada there are no degree granting programs for TCM and Acupuncture.
- ii. Obtaining Degree Granting Status in Canada is prohibitive compared to other jurisdictions, Canada is very large and sparsely populated making it more challenging to sustain such a program.
- iii. Other similar professions such as Chiropractic and Naturopathic education first had Doctor title and program accreditation and only recently achieved degree granting status. It took CMCC approximately 60 years and CCNM approximately 40 years to get degree granting status. Our profession is still working towards this standard so it should not be set as a minimum requirement.



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iv. Other provinces (such as BC) offer Diploma Programs for the same designation. This should be considered in regards to healthcare portability.

d. Council Recommendations

- As is done in BC, the Council recommends to use a combination of competency based requirements + total program hours + minimum clinical hours.
 - 1. Competency based
 - 2. Program Hours
 - 3. Minimum Clinical Education

e. Educational Prerequisite

- i. Currently in BC there is a 2 years post secondary prerequisite to enter TCM and Acupuncture education. This allows for the R.Ac education to be a minimum of 5 years and Dr. of TCM 7-8.
- ii. In Ontario there is currently no such requirement.
- iii. If this requirement is implemented in Ontario, current students and educational institutions should be given transition time. We suggest to follow the route of BC and implement in stages:
 - 1. First, grandparenting
 - Second, require 2 years post secondary to take the Doctor Title exam but allow it to be completed before or after the TCM education
 - 3. Then after all current students are trained out (5-10 years or 200% of program length) make this a prerequisite for the sector.

f. Jurisdictional Difference

i. Anyone trained in another jurisdiction, for example US or China, will have different expectations based on those jurisdictions. In the US, most Acupuncture programs are MSc. In China, they are equal to M.D. These are not directly applicable to Canada or Ontario.

5. Titles:

a. It is the view of this council that keeping the professional designations uniform across Canada is the simplest and most logical solution. This supports the development of a "Doctor of TCM" similar to B.C.



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- b. Although "Doctor of Acupuncture" is used in Alberta, this council does not support the use of this title in Ontario to avoid over complication of the profession and educational requirements.
- c. Other Titles: Generally more titles may make the process and public and legislative understanding and communication more complicated.
- d. It is the suggestion of this Council that eventually R.TCMP would be phased out in favor of "Doctor of TCM" leaving only R.Ac and DTCM.

6. Unique considerations for this profession

a. Standards of practice and competencies

i. TCM and TCM Acupuncture is based on a unique medical paradigm. While the profession bridges this paradigm with the biomedical requirements, many problems arise when attempting to view TCM through a biomedical lens. Simply put, a round object can not be put in a square space. Therefore it is imperative that while respecting and recognizing the views of the public and other stakeholders, the competencies of "Doctor" must be developed and confirmed by members of the profession.

b. Education

- i. As with standards of practice and competencies, education for "Doctor" title must be given special consideration when compared to other medical professions. Some reasons why a "Doctor" title education in the TCM and Acupuncture profession may differ from other professions include:
 - 1. Ancient and modern: Most medical education is based on the most recent research and methods of practice. The very nature of *Traditional* medicine is that the historical usage is equally as important. It is also the case that the thousands of years of history give the modern day practitioner a very wide breadth of application. A balance between defining a standard and preserving a tradition must be found.
 - 2. The nature of acupuncture, tuina, and other manual techniques require hands-on skill based training with many possible avenues of approach, all of which may be "correct". For example, one acupoint may be needled in many different angles or depths, and with many different stimulation



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- techniques, to achieve different results, in different clinical presentations.
- 3. Evidence informed medicine, a standard held by other professions, faces some unique challenges when applying it to TCM. This discussion deserves its own complete discussion but to put it simply, there are many challenges when applying a traditional medical paradigm based on patient centered individualized approaches to statistically significant data that is directly transferable to other medical professions.
 - a. For example: Is acupuncture effective for _____
 condition?

7. A process of growth

- a. A profession, its regulatory framework, and education need to grow naturally together.
- b. Regarding TCM education:
 - i. First create a program approval process ensuring a minimum standard of education
 - ii. Then multiple institutions can progress to offer degree programs
 - iii. If the Educational sector can support it in the future, then the degree offering program can be set as a minimum requirement
- c. Policy makers and members of the public that are not intimately familiar with the profession should be open minded and cautious to make assumptions.



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Summary of Recommendations:

CTCMASO, representing 9 private TCMA institutions in Ontario as well as many registered practitioners, our graduates and students, supports the granting of the Doctor Title to qualified R.TCMPs. Our recommendations to CTCMPAO:

- 1. **Grandparenting** approach should be considered for those who may not have the five year formal TCM education, but have
 - a. minimum of 15 years clinical experience prior to implementation of the "Doctor Title", OR
 - b. Full time education requirement
 - c. AND registered as R.TCMP in Ontario for a minimum of 5 years.
 - d. Everyone must demonstrate their doctor level competencies via PLAR and/or Clinical Case Study Assessments
- 2. **Bridge/Upgrade programs** to ensure the five-year formal TCM education offered by approved institutions (private or public) for R.TCMPs and demonstration of doctor level competencies is required via Clinical Case Study Assessments for R.TCMPs who do not qualify for grandparenting.
- 3. **Window opportunity** for recent graduates and people who are currently enrolled in their educational programs in Ontario for doctor level competencies examination without the two-year university prerequisite.
- 4. **Minimum Requirements: after the doctor title registration regulation is approved**, everyone must meet the doctor of TCM requirements:
 - a. Five-year full-time doctor level TCM program with minimum of 4000 hours of education including a minimum of 1000 hours of supervised clinical training or equivalent.
 - i. CTCMA requires a minimum of 3,250 hours of study over 5 academic years, including a minimum of 1,050 clinical hours
 - 1. *This represents minimum requirements of the regulator, not a single or average program length.
 - ii. CCNM Degree requires 4200 hours (including 1,134 clinic)
 - 1. *This represents single program length, not minimum requirements of the regulator.
 - iii. CMCC Degree requires 4500 hours (including 1,365 clinic)



Working together to achieve the highest educational and professional standards

- 1. *This represents single program length, not minimum requirements of the regulator.
- iv. CPSO requires at least 130 weeks of instruction over a minimum of thirty-six months. The medical education must include a clerkship of at least forty weeks taken as part of the second half of the undergraduate program of medical education that includes.... (internal med, gynecology, surgery, pediatrics, psychiatry, family...etc...)
- b. Two-year University education as a prerequisite for entering the doctor level program.
 - i. It is necessary to have a phase in time that allows current students to complete this requirement after their TCMA education before making this a prerequisite.
- c. Successful completion of the TCM Doctor Competence examination.

These recommendations were prepared by the collaborative efforts of Council members including: Ben Wu, President, OCTCM; Dachao Su, Director, RNACTCM; Dylan Kirk, President, CTCMASO; Enza Ierullo, President, AIMA; Ian Marshall, President, IATCM; John J.H. Liu, President, JJTCMC; Mary Wu, President, TSTCM; Pierre Chen, Director, CCTCM; Ryan Brooks, President, EBCEM



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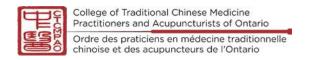
Appendix I: 2005 HPRAC Report

The 2005 HPRAC Report provides clear recommendations regarding the Doctor Title, grandparenting, and education.

Current Education and Training for TCM Practitioners

- 3. That, given TCM practitioners have a diverse range of education and experience in TCM, different classes of practitioners be developed by a future regulatory college for TCM based on the practitioner's level of education, acquired competencies, and experience.
- 4. That the classes of TCM practitioners include TCM practitioners with general TCM education, acquired competencies, experience, and who focus on one or more TCM treatment modalities; and a Doctor of TCM with advanced TCM education, acquired competencies, experience, and who practise the full range of TCM treatment modalities.
- 5. That a future regulatory college for TCM consider, among other things, the experience of British Columbia and other jurisdictions that have recently regulated TCM when determining regulatory issues such as, classes of registration, education and the acceptance of individuals currently practising in Ontario (grandparenting).
- 6. That a future regulatory college for TCM develop and implement an appropriate, fair and transparent grandparenting process for the different classes of registration to facilitate the registration of qualified individuals currently practising TCM in Ontario.

https://www.health.gov.on.ca/en/common/ministry/publications/reports/tc med/tc med eng.pdf



COUNCIL

Meeting Date:	September 20, 2023
Issue:	Standards for Acupuncture
Reported By:	Sean Cassman and Jennifer Nghiem
Action:	For Discussion and Direction

Issue

Council has approved a new by-law Committee that will create recommendations for an Acupuncture Standard of Practice. Staff have worked with the Quality Assurance Committee to draft Terms of Reference (ToR).

Public Interest Rationale

In order for the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO) to provide guidance to the profession, while assuring protection of the public, there is a need to better define the scopes of acupuncture; especially, based on continued inquiries from the public, profession and other stakeholders.

As there are variations in the types of acupuncture and how these are practised, it will be important to note, from a public protection perspective, what is within the scope of Traditional Chinese Medicine Practitioners and Acupuncturists' practice, considering current controlled acts within Ontario and/or other Provinces within Canada.

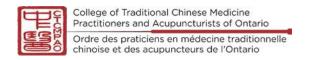
Background

At the June 14, 2023 Council meeting, Council discussed a recommendation from the QA Committee to establish a Standard of Practice for acupuncture. This process would begin by creating a new by-law Committee to conduct research and come up with recommendations to Council, that will ultimately be used to draft a Standard of Practice. After discussion, Council approved the proposal from the QA Committee and directed staff to draft the necessary documents.

Terms of Reference

The ToR is an important document as it will set the parameters for the:

- Purpose
- Accountability
- Limitations
- Duties and Responsibilities
- Composition of Committee
- Criteria for Membership
- Term of Office



COUNCIL

- Meetings
- Quorum
- Selection of Chair
- Voting
- Reporting
- Conflict of Interest
- Committee Records
- Confidentiality
- Evaluation

The Committee will rely on this document to guide their work. Staff are seeking input from Council on this ToR, and if acceptable, a motion to approve the ToR.

Call for Interest

Once criteria for membership is determined, a Call for Interest will be drafted and distributed to members.

Next Steps

Review ToR for the Committee

Encl:

• Draft Terms of Reference

NAME	Terms of Reference – Acupuncture Standard Ad Hoc Committee		
TYPE	Council		
DATE APPROVED	DATE REVISED		

Purpose

The Acupuncture Standard Ad Hoc Committee (the "Committee") is mandated to develop an evidence-based TCM Acupuncture Standard for R. TCMPs and R. Acs in Ontario.

Accountability

The Committee is a non-statutory ad hoc committee of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO) and is established pursuant to section 12.08 of the CTCMPAO By-laws.

Each member of the Committee must sign a binding Confidentiality Agreement at the time of appointment indicating their agreement to maintain the confidentiality, security and integrity of all materials during and after their term on the Committee.

Members must declare any conflict of interests prior to the discussion of materials, topics and/or examples are presented at any time a conflict of interest or the potential for one arises.

Council will ensure that members of the Committee receive training in their role to carry out the responsibilities of the Committee. In addition, Council will ensure that members receive such legislated training and other training deemed necessary for the effective discharge of their responsibilities.

Limitations

The Committee shall only exercise the authority, and fulfill the duties and responsibilities authorized under the By-laws and will reference the *Regulated Health Professions Act, 1991*, the *Traditional Chinese Medicine Act, 2006* (the "Act") and the Regulations made under these Act, when considering its duties in the public interest.

Duties and Responsibilities

The Committee shall, in collaboration with the Quality Assurance Committee, be responsible for the following activities:

- Develop and modify/refine currently available content for the Standard of Acupuncture.
- Review and make recommendations to develop, edit, or modify information currently available relating to the Standard of Acupuncture, to be submitted for approval of Council;

Composition of Committee

The Committee shall be appointed by Council and shall include:

- i) Three (3) professional members who are members of the Council;
- ii) Two (2) public members who are a member of the Council; and
- iii) Three (3) professional members who are not members of Council.

Criteria for Membership

Professional Council Members (4.08) / Non-Council Professional Members (9.02)

- The Member holds a General class of certificate of registration.
- The Member is in good standing.
- The Member is not nor has been at any time within the last two years, a director, owner, board member, officer or employee of any Professional Association.
- The Member is not at present nor has been at any time within the last two years, a director, owner, board member or officer of an educational institution relating to Traditional Chinese Medicine.
- Possesses Traditional Chinese Medicine and Acupuncture expertise acquired either through education preparation or clinical experience.
- Has in-depth knowledge of the current practice of TCM Acupuncture.
- Has 10 years clinical experience.
- Possesses flexibility in using different approaches to solving problems.
- Thinks critically and creatively, and express ideas effectively both orally and in writing.
- Works collaboratively in a group (e.g., achieving consensus, accepting feedback and constructive criticism).
- Experience in research and analysis of TCM Acupuncture theories is an asset.

Term of Office

The Committee shall be appointed for a 3-year term or until the work is completed.

Meetings

Meetings shall, whenever possible, be held at a place and on a date set in advance and shall occur at regular intervals and at such frequency as necessary for the Committee to conduct its business.

Quorum

Pursuant to section 12.10 of the By-laws of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario, quorum for meetings of the Committee shall be three (3) members of the Committee.

Selection of the Chair

The Chair shall be appointed by the Committee.

In the event that the Chair is unable or unwilling to preside at the meeting, the Chair shall designate an acting Chair from among the Committee members to preside at the meeting. If the Chair is unable to delegate his or her chairing duties, the Committee shall then select an acting Chair to preside at the meeting from among its members.

Voting

Whenever possible, decision-making at the Committee level shall be conducted using a consensus model. When necessary, formal voting will be used.

Unless specifically provided for otherwise under the Code or the By-laws, every motion that properly comes before a Committee shall be decided by a simple majority of the votes cast at the meeting by the Committee members present.

The Chair, as a member of the Committee, may vote.

In the event of a tie vote, the motion is defeated.

Reporting

The Committee shall provide a report of its activities at relevant Council meetings on activities that have been undertaken since the last report.

Conflict of Interest

All Committee members have a duty to carry out their responsibilities in a manner that serves and protects the interest of the public. As such, they must not engage in any activities or in decision-making concerning any matters where they have a direct or indirect personal or financial interest. All Committee members have a duty to uphold and further the intent of the Act to regulate the professional practice of traditional Chinese medicine practitioners and acupuncturists in Ontario, and not to represent the views of advocacy or special interest groups.

Comprehensive information regarding conflict of interest obligations is included in the By-laws.

Committee Records

The Committee Chair shall ensure that accurate minutes of all Committee meetings and proceedings are recorded and approved.

Confidentiality

Members of the Committee may have access to confidential information which they must keep in the strictest confidence. Members of the Committee shall not discuss with anyone any information that the Committee considers, even in a general nature, except for the purposes of providing reports to Council.

Evaluation

The Committee terms of reference will be reviewed annually and amended where necessary. Any amendments to the terms must be approved by Council.

COUNCIL

Meeting Date:	September 20, 2023		
Issue:	Doctor Title Working Group Terms of Reference		
Reported By:	Ann Zeng and Sean Cassman		
Action:	Motion		

Issue

The Doctor Title Working Group (the Working Group) is requesting Council approve an amendment to the Working Group Terms of Reference to allow for longer appointment terms.

Public Interest Rationale

The TCM Act allows the College to make regulations to allow members to use the Doctor title. The expectation of the public on those who are permitted to use the Doctor title is high. Council is tasked with overseeing the Doctor Title Working Group to ensure is it meeting the expectations of the public in their work. Part of this oversight is deciding on who is appointed to the Working Group, and for how long.

Background

Previous versions of the Working Group Terms of Reference did allow for 3-year appointments to the Working Group. This is not typical for Committee appointments which are done on an annual basis. However, due to the long-term nature of the project, and the need for continuity of knowledge on the project, it was determined that it is appropriate to maintain the composition of the Working Group over a longer period of time.

However, it is Council's responsibility to oversee the Doctor Title Working Group and its progress towards completing its work on the project. This oversight includes ensuring the Working Group is comprised of the right members able to carry out the work. In 2022, a change was made to the Terms of Reference, following discussion with the Working Group, to better allow for this oversight, while also addressing the need for continuity. The appointment terms were changed to 1-year appointments, but language was added stating that Council should consider those currently serving on the Working Group for reappointment.

The Working Group has discussed this change at a recent meeting, and are making a formal request to revert the Terms of Reference back to 3-year appointments. The Working Group believes that this secured continuity is vitally important to the success of the project, and that annual changes should not be encouraged. The Working Group further requested that Council appoint the current Working Group members to a three-year term effective immediately.

Next Steps

Council deliberates the recommendation from the Working Group and decide the appointment terms for the Working Group.

Encl: Doctor Title Working Group Terms of Reference

NAME	Terms of Reference – Doctor Title Working Group			
ТҮРЕ	Council			
DATE APPROVED	June 20, 2019	DATE REVISED	March 21, 2022	

Purpose

The Doctor Title Working Group (the "Working Group") shall, after researching and analyzing options, prepare recommendations to the Council as to whether the development of the "Dr." Title Class regulation should occur, and if so, the terms of such a regulation. The working group shall conduct research, synthesize information, make recommendations and undertake project activities at the request of the Council.

Accountability

The Working Group is a non-statutory committee of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario and is accountable directly to Council. The Working Group understands that the College has a mandate to serve and protect the public interest and that the recommendations of the Working Group will adhere to this mandate.

Each member of the Working Group must sign a binding Confidentiality Agreement at the time of each appointment indicating their agreement to maintain the confidentiality, security and integrity of all materials during and after their term on the Working Group. For more detail please see below.

Members must declare any conflict of interests prior to the discussion of individual files or at any time a conflict of interest or the potential for one arises. For more detail please see below.

Council will ensure that members of the Working Group receive training in their role to carry out the responsibilities of the Working Group. In addition, Council will ensure that members receive such legislated training and other training deemed necessary for the effective discharge of their responsibilities,

Limitations

The Working Group shall only exercise the authority, and fulfill the duties and responsibilities authorized by these Terms of Reference.

Duties and Responsibilities

Working under the direction of the Council and with the Registrar, the Working Group shall do the following:

 Consider the background material and supporting documentation provided to it by the Registrar for the regulation development process;

- Propose an appropriate Work Plan and budget;
- Review and recommend regulation development projects and initiatives;
- Co-ordinate, follow-up, monitor and report on programs as project development and operations proceed;
- Provide any requested reports to Council on the activities of the working group.

Composition of Working Group

The Working Group shall be appointed by Council and will consist of a minimum of six and a maximum of 10 members. A priority of the Working Group will be to ensure that there is a balanced representation of both professional and public members of the Council. However, the composition may change depending on the subject matter to be reviewed. From time to time, the working group may recruit non-Council members, members of the public, and such other subject matter experts in order to provide necessary advice to the working group. Such engagement may or may not require membership in the ad hoc working group.

When appointing members to the Working Group, Council shall consider the length of the project, and the need for a continuation of knowledge. To achieve this, Council should consider those currently serving on the Working Group for reappointment.

Criteria for Membership

Members of the working group are expected to be:

- Understands the RHPA, the Traditional Chinese Medicine Act, 2006 and the regulatory framework for healthcare professions in Ontario;
- Understand that the mandate of the College is to serve and protect the public interest;
- Comply with the Code of Conduct for Members of the Council and All Committees;
- Familiar with the concept and process of developing competencies;
- Available and committed to participating fully in the working group; and
- Able to synthesize and analyze complex data and information;

Professional Members or members of the College should have a minimum of 5 (five) years of clinical experience in the TCM profession.

Professional Members cannot be an owner, director, board member or officer in a TCM/Acupuncture Association or a director, owner, board member or officer in a TCM/Acupuncture School (public or private).

Non-Council members of the public may be appointed to the Working Group if they have demonstrated significant knowledge or experience relevant to the working group.

Term of Office

The Working Group shall be appointed for a 1-year term.

Meetings

Meetings shall, whenever possible, be held at a place and on a date set in advance by the Registrar and shall occur at regular intervals and at such frequency as necessary, as determined by the Registrar, for the Working Group to conduct its business.

Quorum

Pursuant to section 12.10 of the By-laws of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario, quorum for meetings of the Working Group shall be three (3) members of the Working Group.

Selection of the Chair

The Chair shall be selected by the Working Group.

In the event that the Chair is unable or unwilling to preside at the meeting, the Chair shall designate an acting Chair from among the Working Group members to preside at the meeting. If the Chair is unable to delegate his or her chairing duties, the Working Group shall then select an acting Chair to preside at the meeting from among its members.

Voting

Whenever possible, decision-making at the Working Group level shall be conducted using a consensus model. When necessary, formal voting will be used.

Unless specifically provided for otherwise under the By-laws, every motion that properly comes before a Working Group shall be decided by a simple majority of the votes cast at the meeting by the Working Group members present.

The Chair, as a member of the Working Group, may vote.

In the event of a tie vote, the motion is defeated.

Reporting

The Working Group shall provide a report of its activities at every Council meeting on activities that have been undertaken since the last report. The Working Group prepares an annual report of its activities at the end of each fiscal year.

Conflict of Interest

All Working Group members have a duty to carry out their responsibilities in a manner that serves and protects the interest of the public. As such, they must not engage in any activities or in decision-making concerning any matters where they have a direct or indirect personal or financial interest. All Working

Group members have a duty to uphold and further the intent of the Act to regulate the professional practice of traditional Chinese medicine practitioners and acupuncturists in Ontario, and not to represent the views of advocacy or special interest groups.

Comprehensive information regarding conflict of interest obligations is included in the by-laws and must be reviewed and understood by all Working Group members.

Working Group Records

The Working Group Chair shall ensure that accurate minutes of all meetings and proceedings are recorded, approved and provided to the Registrar. The Registrar shall act as a group leader during the meetings and provide advice and recommendation.

Confidentiality

Members of the Working Group will have access to highly sensitive and confidential information that they must keep in the strictest confidence. It is understood that the duty of confidentiality for members of this Working Group are especially stringent. Members of the Working Group shall not discuss with anyone any information that the Working Group considers, even in a general nature, except for the purposes of providing the annual report to Council.

Evaluation

The Working Group terms of reference will be reviewed annually and amended where necessary, for example in response to statutory, regulatory, or policy amendments. Any amendments to the terms must be approved by Council.

COUNCIL

Meeting Date:	September 20, 2023		
Issue:	College Work Plan		
Reported By:	Ann Zeng		
Action:	Motion		

<u>Issue</u>

College Staff have continued drafting the organizational work plan, based on the 2023-2028 Strategic Plan.

Public Interest Rationale

The College work plan allows the College to achieve its strategic plan by identifying required activities and tack their progress. This helps ensure the College is fulfilling its mandate of public protection by organizing and prioritizing work towards the mandate.

Background

At the June 14, 2023 Council meeting, staff presented a draft work plan to Council that was based on the new strategic priorities identified in the 2023-2018 Strategic Plan. Staff sought feedback from Council so that a more detailed version can be provided at a later meeting. This work plan will help the College track its progress towards achieving the strategic plan.

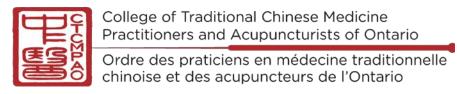
Since the last meeting, staff have updated the work plan, and are bringing it back to Council for review and approval.

Next Steps

Once the work plan is approved, staff will use this document to update Council on the progress of the strategic projects set out in the plan. This update will occur quarterly, at each Council meeting.

Encl:

• Draft Work Plan



CTCMPAO Draft Operational Plan 2023 –2028

The purpose of this **Work Plan** is to set the targets of the College for the period of 2023 –2028. The work plan is a high-level document that outlines what is needed to accomplish each goal (collaboration, resources, important milestones, anticipated obstacles and solutions).

Strategic	Kev Activities	Accountability/	Budget	Important Milestones/Timelines	Current Status
	,		24464		
Strategic Direction Effective Right- Touch Regulation	1.1 Develop a data governance framework to inform risk-based decision-making: Review risk-based data available and identify impacts/outcome of risks Create data repository including what risk-based data exists, type of risk (e.g., registration, practice, quality assurance, and financial) and how risks were identified Define how decisions will be made for each type of risk and prioritization of risks Define data governance including who will be responsible for data collection, analysis and sharing of data as well as who will be responsible for decision-making Develop tools to collect risk-based decisions, and report decisions to appropriate stakeholders Determine cadence of decision-making and sharing (e.g., how often stakeholders meet, how will information be shared) Train stakeholders on new data governance framework and implement new processes/policies/By-law changes if necessary Review current data and initiate strategies to address or prevent current risks (e.g., education material and programming etc.) Continue to monitor and adapt	Accountability/ Anticipated Resources Council Registrar Program Managers IT Policy Staff External Consultants	• TBD	• Ongoing until 2028	Current Status (Updates since April, 2023) • Environmental scanning
	risk-based decision-making				
	processes				
	1.2 Educate and communicate risk-based	Council	• \$15,000 annually		
	decision-making processes and procedures	 Registrar 	for consultation		

 Develop a training module, session and/or factsheet with clear outlined risk-based decision-making information of the College Engage current stakeholders to understand current risk-based decision-making processes Continuously communicate progress related to the current risk-based decision-making processes with relevant stakeholders Continue to engage stakeholders to receive feedback about how to improve current process Implement new changes as appropriate 	 Policy staff Communications 	and communications		
 1.3 Develop a Doctor Class registration regulation Undertake Phase 2 of the Doctor Title Project Begin and complete Phase 3 of Doctor Title Project Submit proposal to Ministry of Health 	 Council DTWG Registrar Policy Staff Consultant Legal Counsel 	• Total \$1,470,000	Phase 2 kick off	Reviewed an initial set of competencies proposed by the project consultant The working group has begun work on the assessment process
 1.4 Amend current registration regulation to reduce potential barriers for registration Continue existing work related to the amendment of the registration regulation Submit proposal to Ministry of Health Implement registration processes for Emergency and Provisional classes upon approval 	 Council RC Registrar Program Managers IT Legal Counsel 	• TBD	Emergency Class was submitted on May 5, 2023 and approved on August 21, 2023 It came in force on August 31, 2023	The Ministry of Health approved the College's Emergency Class proposal The College is moving forward with the education program approval project

Continuous Quality Improvement	2.1 Develop a clear professional development plan for members • Monitor members' participation in the QA Program	 QAC Registrar Program managers Consultant IT SMEs (practitioners) 	• TBD	• Ongoing	
	2.2 Enhance the Member Assessment process	 QAC Registrar Program managers Consultant IT SMEs (practitioners) 	• TBD	• Ongoing	The new peer assessment tool was approved on May 17, 2023.
	2.3 Develop an Education Approval Process Building on the existing college project underway for this work, determine draft standards for TCM education program Pilot test program approval program Formalize a process for approval and share/communicate broadly Implement TCM education approval program	 RC Registrar Manager of Registration Project Manager SMEs (practitioners) 	150,000 Annually with potential cost recoverable through educational programs	• Ongoing	Council has approved the consultant for the piloting project.
	 Develop and implement online General Class application Implement Temporary Class 	RCRegistrarManager of RegistrationIT	• TBD	Ongoing	Drafting RFP

Informed and	3.1 Enhance engagement and	Council	• \$20,000 annually	Ongoing	The College visited several
Interactive	communication with stakeholders. Review	President	720,000 amidany		TCM Schools and provided
Stakeholders	existing communication and engagement	Registrar			presentations.
	plans, structures and standard documents:	Program managers			p
	' '	Communications			
	workshops/webinars	Coordinator			
	School visits	Coordinator			
	Qi news				
	Educational Tips				
	Website review				
	 Conduct assessment of stakeholder understanding of 				
	College's role and mandate				
	Create an Engagement Plan and				
	prioritize activities				
	Define how communications will				
	be made for each of the College's				
	goals in the future using standard				
	communication tools and				
	messaging where				
	possibleDevelop engagement				
	plan to continuously				
	communicate and inform				
	stakeholders about the College's				
	evolving role, successes and				
	other pertinent information				
	Implement the Engagement Plan				
	in phases according to				
	prioritization and develop				
	relationships to support College				
	work and goals				
	Continue to build out				
	communication materials and				
	engagement supports				
	Continue phased implementation				
	of Engagement Plan				
	monitor the success of				
	communication channels and				
	continue to iterate based on				
	feedback				

	 3.2 Establish formal advisory groups for public and members Assess existing advisory groups (e.g., Citizen Advisory Group) within the College to determine gaps Develop new groups to fill existing gaps in advisory 	CouncilRegistrarPolicy staff			
Modernized Governance	4.1 Focus on Diversity, Equity, and Inclusion (DEI) Conduct an equity impact assessment of practices and processes at the College Develop a Diversity Equity, and Inclusion (EDI) strategy and action plan and potential working group Continue implementation of DEI Plan and seek feedback on the success of the plan	Council Registrar Policy staff HPRO Consultant	• \$30,000		•College is collaborating with HPRO
	 4.2 Enhance Regulatory CPMF external review requirement and Governance practices and transparency Build a plan to enhance governance practices based on government direction and CPMF Address recommendations from 2021 governance review CPMF requirement for external governance review every 3 years Develop decision-making frameworks and processes that clearly identify appropriate roles for Council and Registrar Review and update Council processes, policies, and by-laws as needed based on the plan and decision frameworks 	 Council Registrar Policy Staff Communications Coordinator Governance Consultant 	• \$30,000 every three years	oing	Significant research has been done by the College on the CPMF requirements and this will be presented to Council at the next meeting on September 20, 2023 The College engaged a Consultant to provide Chair training to our Council and they were given a manual for reference

4.3 Develop a competency framework for Council members and committees Assess and document what is required for each role • Develop clear guidelines and procedures for current stakeholders Develop orientation training for perspective Council/Committee members	Council Registrar Policy staff Consultant	• \$30,000	• Ongoing	Council is recommended to approve a set of competencies and indicators for use by the College in determining eligibility.
4.4 Develop Council effectiveness evaluation framework	Council Registrar Policy staff Consultant	• \$20,000	Ongoing	

^{*}Please note that the budget is subject to change. A more precise estimate will be furnished when we present our next budget and five-year projection to the Council.

Meeting Date:	September 21, 2023
Issue:	CPMF Requirements – Council Competencies
Reported By:	Ann Zeng and Sean Cassman
Action:	Motion

<u>Issue</u>

The College Performance Measurement Framework (CPMF) Includes a requirement that Council and Committee members meet a set of competencies before they are eligible for election. In order to meet this requirement, Council must approve competencies, and put in place an assessment process.

Public Interest Rationale

Council and Committee members are responsible for the decision making on policy matters of the College, and for ensuring that decisions are in the interest of public protection. It is because of this important function that there is increased pressure to have council and committee members meet a competency framework to be eligible.

Background

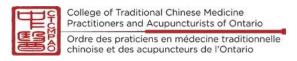
Continuing from the introduction of this topic at the September 20, 2023 session, Council is asked to review and approve a set of competencies to be used for determining eligibility for election to Council. First, it is important to reiterate what these competencies are trying to accomplish:

- Council competencies are used to measure an individual's ability to serve on an organization's Council/Board
- Council competencies **are not** a measure of TCM professional competencies.
- Competencies **are not** meant to limit who can obtain a seat on Council. The College will need to develop an orientation process and other resources to enable members in learning more about being a Council member and obtaining the necessary competencies.

HPRO Competencies

To assist Colleges in implementing this CPMF requirement, Health Professions Regulators of Ontario (HPRO), has developed a set of competencies that are common to all Councils. Each competency comes with a set of indicators to help assess the competency, and are identified as "must have" and "can learn". The full description of the competencies is attached, but at a high level they are:

- Leadership
- Professionalism/Good Character
- Emotional Intelligence
- Communicator
- Understanding of Governance/Fiduciary Duties
- Thinks Broadly
- Inclusiveness/Respectful of Diversity
- Understanding of Systems and Organizations



COUCNIL

The College has held previous discussions on these competencies in the past, and based on those discussions, staff is recommending that Council approve the HPRO competencies for use by the College. However, if Council members wish to add or remove certain competencies, Council is urged to make those decisions at this meeting to ensure the College is able to meet Ministry expectations.

Next Steps

Council is recommended to approve a set of competencies and indicators for use by the College in determining eligibility.

Once competencies are approved, Council can focus their attention on the process for assessing competencies.

Encl:

- HPRO Draft Board/Council Competencies
- Competency Framework Environmental Scan

Governance practices:

- 1. Have they changed from Council to Board and President to Chair?
- 2. Are their professional members elected to Council by districts?
- 3. What's the max term of their Council members?
- 4. How do they evaluate their Council/committees performance?
- 5. How do they evaluate their Council members and Chair's performance?
- 6. What are the competencies for officers (Chair, Vice Chair etc.)?

Environmental scan:

- 1. Does the college use competencies?
- 2. What are the competencies used?
- 3. Are there indicators identified for the competencies?
- 4. Are there other requirements for eligibility? (geographical, practice setting, etc.)
- 5. How are competencies evaluated?
- 6. Is there a Council/Committee training program?
- 7. Is there a committee assigned for evaluation?

College		Governance Structure & Practices		Use	Notes
			Co	ompetencies?	
College of Audiologists and Speech- Language Pathologists of Ontario (CASLPO)	•	By-Laws Committee Descriptions	•	Yes	 Comprehensive <u>orientation</u> regarding CASLPO's role, mandate, and governance framework. The Board is provided with orientation and learning development sessions. <u>Committee Competencies</u> 7 competencies: Knowledge of Speech-Language Pathology and Audiology Governance and Fiduciary Duty Strategic Leadership Financial Knowledge Communications and Stakeholder Relations Understanding of Systems and Organizations Quality Improvement

College of Chiropodists of Ontario	 By-Laws The competencies for statutory and non-statutory committee service can be found on the College's website, Mandate of Statutory and Non-statutory Committees of the College. Elections Committee 	• Yes	 2022 CPMF Report At a special Council meeting in May 2022, Council adopted a knowledge, skills, and experience matrix that candidates must complete prior to standing for election. The assessment requires candidates to self-reflect on their competency in the following areas: finance, human resources, regulatory knowledge, clinical experience, leadership/change management, health system knowledge, strategic planning, risk management, technology skills, governance, continuous quality improvement, critical thinking, and stakeholder relations/communications.
College of Chiropractors of Ontario	 By-Laws Code of Conduct Competencies For Council and Committee Members 	• Yes	 2022 CPMF Report In April 2021, Council approved a mandatory orientation session (communicated to members and stakeholders as part of the 2022 Notice of Election) for candidates for CCO Council for the 2022 elections to Council. This training session was led by CCO staff and outside legal counsel and took place on February 23, 2022 from 6 pm - 8 pm.
College of Dental Hygienists of Ontario	 By-Laws Council Competency Profile 	• Yes	 Resource manual Orientation 2022 CPMF Report Interested individuals were required to attend an information session prior to the election to provide them with information that included the Council Competency Profile. Registrants who then wished to run for election were required to complete the nomination package. All Council members completed a self-assessment of their level of expertise in the competencies in the profile in October 2021. Professional members interested in standing for election completed the self-assessment in 2022 following the election.

College of Dental Technologists of Ontario	By-LawsGovernance Policy Manual	• No	 Orientation Program Tour of College office Meet with Registrar Orientation package Presentation
Royal College of Dental Surgeons of Ontario	 By-Laws Council Competencies Committee Competencies 	• Yes	 Completion of an <u>orientation module</u> is one of the eligibility requirements to be considered for Council and non-Council positions This requirement is in the by-laws at article 7.2.4(p) for elected registrants and 8.1.1(p) for selected registrants. There is also an extensive orientation program for Council members (professional and public) once they become a member of the Council, as well as committee orientation (detail concerning orientation is captured in the following sections). This intensive orientation takes place during the first few months of the two-year term, with plenary sessions occurring throughout the term. Voluntary Diversity Self-Identification Questionnaire 2022 CPMF Report & Summary
College of Denturists of Ontario	• <u>By-Laws</u>	• No	The desired skills, traits and knowledge of Council members include: the ability to work with a group to make decisions the ability to understand and follow democratic processes a willingness to devote time and effort to the work of the College and the Council good communication skills awareness of the College mission, vision, regulations and bylaws, and an understanding that the goal of the College is to serve and protect the public interest in its access to denturism care. 2022 CPMF Report
College of Dietitians of Ontario	By-LawsGovernance Manual	• Yes	

	• Competency and Attribute Framework		
College of Homeopaths of Ontario	 By-Laws Elections Manual 	• Yes	 2022 CPMF Report Professional members are eligible to stand for election to Council only after: i. Meeting pre-defined suitability criteria defined in the College's Bylaws, (see below, bylaw 10.04) ii. Reviewing the elections manual which details pre-defined competency criteria, and iii. Attending an interactive online orientation training about the College's mandate and expectations pertaining to the individual's roles and responsibilities as a Council member. (This training is a requirement as detailed in the College's Bylaws).
College of Kinesiologists of Ontario	 By-Laws Council and Committee Competency Profile 	• Yes	 <u>Council Orientation Module</u> (one of the requirements to run in the election) Orientation package and training <u>2022 CPMF Report</u>
College of Massage Therapists of Ontario	By-LawsGovernance Handbook	• Yes	 President core competencies Vice President core competencies Council members core competencies Committee / Panel Chair core competencies Orientation of new council members
College of Medical Laboratory Technologists of Ontario	 By-Laws Governance Modernization Principles 	• No	 All Board Members are expected to be effective contributors. The desired skills, traits and knowledge include: The ability to work with a group to make decisions, The ability to understand and follow democratic processes, A willingness to devote time and effort to the work of the CMLTO and the Board, Good communication skills, and, An understanding that the goal of the CMLTO is to serve and protect the public.

College of Medical Radiation and Imaging Technologists of Ontario	 By-Laws Council Competencies 	• Yes	
College of Midwives of Ontario	 By-Laws Governance Education Modules Governance Manual Governance Policies (including Governance Evaluation Policy) 	• No	 Completion of Modules 2022 CPMF Report "Our College currently does not have pre-defined competencies as an eligibility requirement, however our College did assess competencies of current Council members as part of its annual evaluation. This process is currently under review for consideration of pre-defined competencies as a requirement for eligibility for election/appointment. This review is expected to take place over the 2023/2024 fiscal year. While our College is seriously considering competency-based criteria for eligibility for election, the College is not yet committed to a firm date for implementation unless directed by legislative change."
College of Naturopaths of Ontario	 By-Laws Council Policies Council Member, Staff Interactions Council job description CEO job description Role of Council Chair Governance Committee Governance Report Approved Implementation Plan 	• Yes	 Governance Evaluation Council and Committee Training Program Council and Committee Qualifying Program
College of Nurses of Ontario	 By-Laws Information Page Nominating Committee Competency Profile Council member role description Governance Principles 	• Yes	 Core competencies: Leadership skills Change management Decision maker Public interest Specialized competencies

College of Occupational Therapists of Ontario	 Governance Vision By-Laws Code of Conduct 	• Yes	 Diversity considerations Character attributes Board Pre-Election Module Board Competency Framework Committee Competency Framework 2022 CPMF Report
College of Opticians of Ontario	 By-Laws Council Competencies Policies Governance Committee Screening Committee Board-Staff Relationship 	• Yes	 Annual Board Self-Evaluations Board Effectiveness Self-Evaluation Policy Pre-Election Training Module Policy
College of Optometrists of Ontario	 By-Laws Council and Committees Governance/HR Committee 	• Yes	2022 CPMF Report
Ontario College of Pharmacists	 By-Laws Screening Committee No electoral districts 	• Yes	 Board Competencies (in By-Laws) Video on self regulation Board Director Profile
College of Physicians and Surgeons of Ontario	 By-Laws Member Skills and Attributes Governance Committee Declaration of Adherence Package 	• Yes	 2022 CPMF Report All professional members who wish to stand for election must complete CPSO's Governance Orientation
College of Physiotherapists of Ontario	 By-Laws Governance Manual Candidate Eligibility Code of Conduct 	• No	Online module to run for election
The College of Psychologists of Ontario	By-LawsCode of Conduct	• Yes	 Online Orientation Program (<u>training module</u>) 2022 CPMF Report

	 Competency suitability information is further elaborated upon on the Council Elections webpage. 		
College of Registered Psychotherapists of Ontario	 By-Laws Council Competency Matrix Governance Review (June 2019) Committee Chair Role Description Executive Committee Member-at-Large Role Description President Role Description Vice President Role Description Panel Chair Role Description Nominations and Elections Committee Regulatory Objectives Policies Committee Appointments Council Registrar Relationship Non-Council Member	• Yes	Pre-Candidacy Module 2022 CPMF Report
College of Respiratory Therapists of Ontario	 By-Laws Council and Committee Competency Profile 	• No	 Orientation Module 2022 CPMF Report The CRTO has retained an external consultant to evaluate our March 3, 2023, Council meeting. Once that is complete, they will finalize the CRTO Council and Committee Competency Profile and plan to have it approved at our May 26, 2023, Council meeting in time for implementation in our 2023 election cycle. This profile will assess potential Professional Member Council candidates for a foundational understanding in critical areas.

INTRODUCTION

This document articulates broad Board/Council competencies for *RHPA* College consideration. Competencies are listed for both individuals and Boards/Councils as a whole, and they include definitions/descriptions of those competencies and indicators for competency measurement. Indications on whether the competency is a "must have" as the person assumes the role or if the competency can be learned are also provided. Note that competencies related to clinical knowledge and experience have not been included in the competencies for individual directors.

These competencies can also be applied to committees and committee members, although perhaps not as rigorously. It is recognized that committee service could assist in training/educating a person for a future position on the Board/Council.

A list of eligibility and disqualification criteria follows. This information was gathered from 14 *RHPA* Colleges' current by-laws, processes and/or procedures. Any application to a position on the Board/Council or Committee must be consistent with that criteria or the person applying would not proceed further in the application process.

Reference documents are also listed at the conclusion of this document. This material includes recent reports and promising practices in health profession regulation.

Colleges are encouraged to use this document and reference material, customizing the information to suit individual profession-/organizational culture-specific needs.

WORDS OF APPRECIATION

Sincere thanks are extended to the Governance Working Group who dedicated months of time and talent to create this resource:

- Deborah Adams, College of Registered Psychotherapists of Ontario (joined July 2019)
- Fazal Khan, College of Opticians of Ontario
- Brenda Kritzer, College of Kinesiologists of Ontario (through September 2019)
- Kevin McCarthy, College of Nurses of Ontario (Working Group resource)
- Andrew Parr, College of Naturopaths of Ontario (joined July 2019)
- Andrea Lowes, College of Dental Hygienists of Ontario (joined September 2019)
- Melisse Willems, College of Dietitians of Ontario
- Melanie Woodbeck, College of Opticians of Ontario

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BOARD/COUNCIL COMPETENCIES

To understand the competencies required of a member of the Board of Directors or Council of the College, it is imperative to understand the role of the Board. In his 2018 Report on the College of Dental Surgeons of British Columbia, Harry Cayton articulated the role of the Board as:

- to ensure the College complies with its mandate and the law
- to set strategy, to monitor performance
- and to hold the registrar and chief executive to account for delivery.

This approach to the role of the Board and competency-based Board appointments is consistent with most current literature regarding Boards of Directors and effective governance.

COMPETENCIES FOR INDIVIDUALS DIRECTORS ON THE BOARD

Section	Definition/Description	Competency – Indicator	Must	Can
			Have	Learn
Leadership	Demonstrates skills and ability	Vision – understands the importance of an organizational vision and	Yes	No
	to lead others to solve	the methods/processes for developing a collective vision		
	problems, adapt and manage	Team-Building – knowledge and understanding of team building	No	Yes
	change, innovate and achieve	techniques and dynamics		
	results	Facilitation – knowledge and understanding of consensus building	No	Yes
		and use of effective facilitations techniques		
		Change Management – knowledge of change management	Yes	Yes
		techniques for both projects/plans the College generally		
		Flexibility – knowledge of the importance of flexibility to the	Yes	No
		negotiation and decision-making processes		
Professionalism/	Acts transparently with	Diplomacy – is diplomatic in interactions with others	Yes	Yes
Good Character	integrity, discretion, and	Judgement – demonstrates good judgement in decisions and actions	Yes	No
	humility to consider a range of	Ethical Behaviour – knowledge and understanding of ethical	Yes	No
	perspectives and diverse ways	responsibilities and dilemmas and demonstrating ethical behaviour		
	of thinking to challenge the	Respectfulness – ability to respect others regardless of their	Yes	Yes
	status quo, reject	background, culture, or divergent opinions; able to effectively		
		locate/center issues considering the individuals and/or concerns		

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Section	Definition/Description	Competency – Indicator	Must	Can
			Have	Learn
	assumptions, and take nothing	involved; able to weigh/discuss competing considerations in a		
	for granted	manner that is appropriate and respectful		
		Honesty & Integrity – ability to commit to being honest in actions and	Yes	No
	Attributes of integrity,	to act with integrity		
	accountability, and openness	Transparency – emanates openness; adheres to established rules on	Yes	Yes
	support Board/Council	transparency		
	members in exercising proper	Credibility – perceived trustworthiness; delivers on commitments to	Yes	No
	authority and good judgment	others to build credibility		
	in dealing with all	Compliancy – adheres to the code of conduct and acts in a way that	Yes	Yes
	stakeholders in a responsible,	exemplifies and reinforces culture and values		
	respectful, and professional			
	manner			
Emotional Intelligence	The capacity to be aware of,	Collaboration – inclusive and unifying; consensus-building; seeks	Yes	Yes
	control, and express	stakeholder/partnerships as appropriate		
	emotions, and to handle	Self-Awareness/Recognition of Limits – understanding personal	Yes	Yes
	interpersonal relationships	strengths, areas of development and potential biases and remaining		
	judiciously and empathetically	open to self-reflection, feedback, continuous growth and		
		improvement; open about mistakes and knows when to ask for help;		
		recognizing how individual strengths can be leveraged to improve the		
		performance of the board		
		Relationship-Building – able to relate to others congenially and	Yes	Yes
		connect with others to support teamwork and cooperation; seeks		
		appropriate relationships to further the work of the College		
		Tenacity – demonstrates perseverance; works effectively under	Yes	No
		pressure, not giving up in spite of difficulties		
		Resiliency – coping in spite of setbacks, barriers, or obstacles and	Yes	No
		demonstrates perseverance in the face of challenges and strong		
		personalities		
		Motivation – recognizes and celebrates success to reward and	Yes	Yes
		motivate others		

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Section	Definition/Description	Competency – Indicator	Must	Can
			Have	Learn
		Tactfulness – understanding of the need to be tactful in individual	Yes	Yes
		and group discussions		
Communicator	Able to communicate clearly,	Articulate – has the ability to describe thinking to others in a manner	Yes	Yes
	concisely, and accurately,	that is clear and concise		
	orally and in writing	Participatory – actively interacting and continuing to participate	Yes	No
		when difficulties arise		
		Active Listening – has the ability to listen to others and articulate the	Yes	Yes
		views of others		
Understanding of	Understands the	Understanding of the Roles of the Board/Council – understands the	Yes –	Yes –
Governance/	Board/Council Member's role,	role of the Board/Council and the role of individual Board/Council	Basic	Adv
Fiduciary Duties	fiduciary duties, good	Members		
	governance principles, and the	Understanding of the Roles of Management – understands of the	Yes –	Yes –
	stewardship responsibilities of	distinction between the role of the Board/Council versus role of	Basic	Adv
	a Board/Council:	management, while being rigorous in asking the Registrar for		
	 Risk Management 	information to support the Board/Council in carrying out its fiduciary		
	 Business Acumen 	duty		
	 Human Resources 	Understanding of the Relationship with the Registrar –	Yes –	Yes –
	 Financial Literacy 	understanding responsibilities related to the sole employee	Basic	Adv
		Risk Management – understands the concept of risk management	Yes –	Yes –
	Governance competence	and commits to identification and mitigation of organizational risk	Basic	Adv
	supports the provision of	Loyalty – understands and commits to the duty of loyalty to the	Yes –	Yes –
	strategic direction and	organization and places this loyalty above all other obligations for self	Basic	Adv
	oversight for Boards/Colleges;	and corporate interests; identifies viable options and puts aside		
	it allows members to able to	vested interests to make decisions that are most likely to achieve the		
	carry out the stewardship	College's mandate of public protection; actively avoids conflicts of		
	responsibilities, creates robust	interest or otherwise declares and manages them		
	accountability for regulatory	Accountability – understands the concept of accountability, both	Yes –	Yes –
	and financial performance,	individually and organizationally, and is committed to ensuring	Basic	Adv
		Board/Council-based accountability; ensures decisions are in the		

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Section	Definition/Description	Competency – Indicator	Must	Can
			Have	Learn
	and enables Board/Council to	public interest and that appropriate information is available to the		
	set and achieve strategic goals	public		
		Equality – understands that all Board/Council Members are to be	No	Yes
	Board/Council members have	treated equally, including access to information and resources		
	a commitment to the public	Financial Literacy – an understanding of finance and generally	Yes –	Yes –
	and their right to safe, ethical	accepted accounting principles; can read, interpret, and ask questions	Basic	Adv
	care, demonstrated by an	about financial statements; applies a basic understanding of financial		
	understanding and	management to ensure the integrity of financial information received		
	appreciation of, and	by the Board/Council		
	commitment to, the public	Adherence to Confidentiality – understands and adheres to	Yes	No
	protection mandate and the	confidentiality obligations		
	time required to execute the role effectively	Preparedness – understands the need to be prepared for	Yes –	Yes –
		Board/Council meetings; commits to reading, understanding and	Basic	Adv
		questioning information presented; devotes the required time and		
		energy to the role, determined to achieve best possible outcomes in		
		public protection		
Thinks Broadly	Listening to others' views and	Analytical/Critical Thinking/Objectivity – ability to understand and	Yes –	Yes –
	considering them; being	interpret information from different sources and system knowledge,	Basic	Adv
	openminded to information	process the information, connect ideas and concepts and draw logical		
	presented	connections and conclusions		
		Independence – free expression without considering personal	Yes	No
		interests or interests outside the College's interests		
		Strategic Thinking – ability to recognize the issues facing the	Yes –	Yes –
		organization; can think long term, set long term goals and identify a	Basic	Adv
		path to achieving long term objectives; ensures risks are assessed and		
		monitored		
		Innovative – ability to step outside of perceived limitations, consider	No	Yes –
		new ideas, willing to experiment with new approaches to solutions		Adv

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Section	Definition/Description	Competency – Indicator	Must Have	Can Learn
		Proactive – has the ability and willingness to discuss and debate matters before they become organizational issues or crises; thinks ahead and beyond current day issues	No	Yes
		Commitment to Continuous Learning – determining mechanisms for enhancing knowledge and understanding and developing and monitoring learning plans to support personal improvement arising from self-awareness; setting goals and working on initiatives that improve Board/Council performance	Yes – Basic	Yes – Adv
		Unbiased Attitudes and Behaviour – recognizing personal biases and working to mitigate effects of those biases	Yes – Basic	Yes – Adv
Inclusiveness/ Respectful of Diversity	Understanding and valuing differences in the values and norms of others and having the ability to apply this knowledge of the experience of diversity to deliberations and decision-making	Appreciation of Different Perspectives — shifting personal cultural perspectives and incorporating varying perspectives into decision-making related to attributes such as differences in gender, ethnicity, religion, sexual orientation, disability, and socio-economic class, or profession-specific diversities such as region of practice, practice setting and context, specialization or modality; responding to inappropriate and non-inclusive behaviour to re-direct and build awareness	Yes – Basic	Yes – Adv
		Adaptability – adapting behavior to work effectively with others who have attributes different than their own and conducting self-assessments to understand how personal attitudes and values might create bias; adjusting and adapting communication behavior to reduce the impact of bias and to be effective across diverse contexts (e.g., not using ethnophaulisms or outdated terms; using preferred terms)	Yes – Basic	Yes – Adv
		Openness – contributes to an environment and culture that welcomes diverse perspectives, new partners, and ideas	Yes – Basic	Yes – Adv
	Awareness of the complex system in which the College	Commitment to Public Service – committed to serve the public and the people of the Province of Ontario	Yes	No

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Section	Definition/Description	Competency – Indicator	Must	Can
			Have	Learn
Understanding of	works, including the	Commitment to Serving in the Public Interest – knowledge of the	Yes –	Yes –
Systems and	stakeholders in the system,	concept of public interest and the ability to place the interests of the	Basic	Adv
Organizations	and the impact that the	broad public ahead of the interests of individuals and organizations		
	College's decisions have on	and to communicate this to others		
	the public	Understanding of Health Systems – knowledge of the health care	Yes –	Yes –
		system in Ontario and Canada, the roles played by different levels of	Basic	Adv
		government and institutions and the political, economic and social		
		context within which health systems operate; understands how these		
		systems intersect and impact the public		
		Understanding of Health Regulation – knowledge of the health	Yes –	Yes –
		regulatory system, its purpose and how it functions; analyzes the	Basic	Adv
		potential impact of decisions on the public; able to think strategically		
		about systemic issues and the role of the organization in the broader		
		regulatory and profession-specific sectors		

ADDITIONAL COMPETENCIES FOR THE BOARD/COUNCIL AS A WHOLE

Competency	Definition/Description	Indicator	Board	One or
			as a	more
			Whole	individ
				-uals
Diversity	Deliberations are informed and decisions include and respect diverse perspectives, biases are identified and questioned, and the College's	Recruitment Strategies – adoption of recruitment strategy to ensure representation of a variety of cultural and historical perspectives, region of practice, practice setting and context, specialization or modality	Yes	
	collective work of public protection supports positive	Performance Evaluation – evaluating Board/Council performance using measures that assess inclusivity	Yes	

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Competency	Definition/Description	Indicator	Board	One or
			as a	more
			Whole	individ
				-uals
	systemic change in these and	Risk Mitigation – recognition of organizational risks that lack of	Yes	
	other areas:	diversity can present and identification of ways to mitigate risk		
	• Cultural – including	Correction – formalized processes to respond to inappropriate and	Yes	
	indigenous cultures	non-inclusive behavior		
	• Gender – representation			
	from individuals with			
	differing gender identities			
	• Educational – including			
	individuals with and			
	without post-secondary			
	education and training			
	Regional – including rural			
	and urban as well as			
	northern communities			
	Background/Experience –			
	including work experience			
Experience	Previous experience in	Spectrum of Experience – identification of the various aspects of	Yes	
	governance work, either at a	experience needed		
	Board, committee or			
	community level			
Clinical Knowledge	Knowledge of the legislation	Training – has knowledge of the regulated health profession being		Yes
•	and regulations governing the	governed and an in-depth knowledge of the written and unwritten		
	profession	standards of practise of the profession		

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ELIGIBILITY/DISQUALIFICATION CRITERIA

In order to qualify for a position on the Council/Board or a Committee, a person must meet the following criteria.

Eligibility Criteria	Note
Current member	Holds certificate of registration
No default in anything owing to the College	Including fees, forms, or requested information, e.g., quality assurance program requirements
No proceedings/findings	Inside or outside of Ontario, including terms/conditions/limitations, professional misconduct, incompetence, discipline, incapacity, revocation or suspension, fitness to practice, informal disposition or resolution, or Registrar's investigation, SCERP
No finding of guilt of criminal offence	In any jurisdiction
No offence relevant to the registrant's ability to practice the profession	Such as bail conditions
No conflict of interest	
Not College employee/staff member	Of this College or any other
Not director, officer, or staff member of a professional advocacy organization	That relates to the College in any way
Not holding a responsible position with any organization/group whose mandate or interests conflict with the College	
Not a member of the Board/Council of any other RHPA College	
Has not initiated, joined, continued, or materially contributed to a legal proceeding against the College, its Committee, or its representative	

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Not a consultant to third party provider	
No bankruptcy or subject of a consumer proposal	Within the last seven years
Not found to be mentally incompetent	
Computer literate	Able to send/receive emails, open and process pdfs, word processed documents, and spreadsheets
Available	Time to meet the needs of their roles at the College

Disqualification Criteria	Note
Fails to uphold any eligibility criteria	See list above
Misses no more than xx meetings	Consecutive, without reason
Fails to attend hearing or proceeding of a panel	Whether Chair or member
Fails to be in the class/specialty/faculty represented on the Board	
Breaches conflict of interest	
Breaches confidentiality	S26 of the <i>Act</i>
Misuse of social media	Any posting that would harm the reputation of the College
Fails to comply with Code of Conduct	
Resigns from Council	
Advocates or makes a public statement (other than at a Council meeting) against a position taken by Council or the College	

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REFERENCE DOCUMENTS:

- AGRE Committee Eligibility and Competency Framework
- BCCNP Board and Committee Composition Matrices
- CMO Governance Resources
- CNO Governance Resources
- FHRCO Governance WG Competency Comparison
- FHRCO Governance Survey
- Field Law Article "Professional Regulation: The Political Winds Are Blowing"
- Government of Ontario Member-Regulatory and Adjudicative Agencies
- NAPRA Board Competencies
- Ontario College of Teachers Governance Review Report
- PSA Good Practice in Making Council Appointments
- RCDSO Resources

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Meeting Date:	September 21, 2023	
Issue:	CPMF Requirements – Council Competencies Assessment Process	
Reported By:	Ann Zeng and Sean Cassman	
Action:	Motion	

<u>Issue</u>

The College Performance Measurement Framework (CPMF) Includes a requirement that Council and Committee members meet a set of competencies before they are eligible for election. In order to meet this requirement, Council must approve competencies, and put in place an assessment process.

Public Interest Rationale

Council and Committee members are responsible for the decision making on policy matters of the College, and for ensuring that decisions are in the interest of public protection. It is because of this important function that there is increased pressure to have council and committee members meet a competency framework to be eligible.

Background

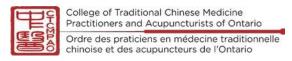
Once a set of competencies have been decided on, Council will be able to focus their attention on how interested members will demonstrate that they have those competencies. At this meeting, Council is asked to consider two key factors of this process; who will conduct a review, and what mechanisms will be used to demonstrate competencies.

Based on the processes used by other Colleges, staff have prepared options for both below. However, the main consideration used in these options is objectivity. It is imitative that this process is not subject to biases against certain members who may otherwise be eligible to serve on Council. This means that those making the decisions should not be personally connected to the member, and objective review tools are used.

Who Conducts a Review

The College has identified two options, that can be used together, to create an objective process.

- Third-party contractor conducts initial review
 - A third-party contractor would remove any actual or perceived bias against a member looking for nomination
 - Can help develop assessment process documents/modules and review tools
 - Provide the College with access to expertise when it comes to the area of Council/Board competencies
 - Limits the additional strain on staff resources that this process will add
- Nominations Committee
 - A Nominations Committee can act as an appeal process when third-party contractor is used for the initial review.



COUCNIL

- Nominations Committee can be responsible for oversight of the Council competencies, and nomination process, who make recommendations to Council on policy changes/improvements.
- To best ensure bias and conflict of interest is limited, the voting members of this
 Committee would be Public Members of Council. Review of Council competencies is not
 a review of TCM competencies, and detailed knowledge of the profession should not be
 required. However, Council can assign a professional member to act in an advisory, non voting role.
- Alternatively, a method used by other College's is to have a Nomination Committee comprised of non-Council members of the public, recruited specifically to serve on this Committee. This could be a mix of governance experts and staff from other Colleges.

Mechanisms for Demonstrating Competencies

Other Colleges use a number of different methods to collect information on a member's competencies, and Council may wish to adopt more than one to be used together. If Council wishes to use a third-party contractor to assist the College with this process, it will also expand our ability to implement some of these options. Below are possible options for use by the College:

- Online survey/module. This would likely require the assistance of a third-party, but would allow for integration with an orientation program, and provide decision makers with objective information
- Questionnaire/application form
- Written submission
- Interview process

The option of an online survey/module in particular will require some time to develop, which is why staff are seeking input on this process now. Once direction is given, staff can begin the development process.

Next Steps

Staff will require direction on this process before the necessary documents, including by-law amendments, are drafted. Staff will bring back material for review at the December Council meeting based on Council direction.



sml-law.com/resources/grey-areas/

Addressing Gender-Based Violence

by Rebecca Durcan September 2023 - No. 282

While Canadian <u>politicians spar</u> over whether gender-based violence, particularly intimate partner violence (IPV), is an epidemic, regulators are assessing their role.

Regulators of professions, particularly in the health and law enforcement domains, treat IPV in a registrant's private life as serious professional misconduct. While important, questions arise as to whether regulators can and should do more.

In 2022, a Renfrew County inquest looked into the 2015 murders of three women, making 86 recommendations. None were directed specifically at regulators of professions (although some recommendations aimed at educating service providers to perpetrators or survivors of IPV apply to practitioners of some professions). However, some of the recommendations might be adapted by regulators when dealing with registrants with the potential, or reality, of gender-based violence, including the following:

 Using "a trauma-informed approach to interacting and dealing with survivors and perpetrators";

- "Explore incorporating restorative justice and community-based approaches in dealing with appropriate IPV cases to ensure safety and best outcomes for survivors";
- Sharing of information with law enforcement agencies in appropriate cases;
- Safety planning for survivors;
- Professional education and training for staff and investigators dealing with IPV matters, including risk assessment training, traumainformed practices, indicators of IPV, and crisis management coaching;
- Guidance for registrants who support survivors or counsel, treat or otherwise intervene with perpetrators;
- Track and study decisions made in matters involving IPV for relevant information including on "longitudinal studies for recidivism, violence escalation, and future victims"; and
- Policies for monitoring and responding appropriately to noncompliance with terms, conditions, and limitations imposed on a

perpetrator, such as non-participation in counselling.

In contrast, the Nova Scotia Mass Casualty Commission report specifically addresses professional regulators. The Commission investigated Canada's worst-ever mass casualty crime spree that lasted 13 hours and resulted in 22 deaths.

The perpetrator was a denturist who had faced discipline for various billing and angry interactions with clients. During the process, the perpetrator also verbally attacked a member of the complaints screening committee and an expert witness who had filed a report critical of his work. Eventually there was a joint submission to the discipline panel that included a requirement to attend counselling, which he apparently completed. Unbeknownst to the regulator at the time, the perpetrator had engaged in a pattern of behaviour involving financial, emotional, and sexual abuse of several vulnerable and marginalized patients.

Many of the recommendations of the Commission related to police and emergency However. services. several recommendations relate to community entities that might have identified "red flags" and perhaps intervened to enhance community safety. Some of those recommendations are applicable to regulatory bodies. One, in particular, is directed specifically at regulatory bodies:

Recommendation C.19
PROACTIVE MONITORING BY
PROFESSIONAL LICENSING BODIES
The Commission recommends that
All professional licensing bodies should:

- (a) Monitor their members proactively to better ensure the safety and wellbeing of their licensees' clients/patients;
- (b) Through careful monitoring, track and proactively demand accountability when discernible patterns of

- unethical or illegal behaviour are uncovered; and
- (c) Take steps to promote awareness of complaints mechanisms, including by requiring that licensees prominently display the Code of Ethics and information about the complaints process in their offices/clinic and online.

Implementation points:

- Practice audits and quality control systems can assist in proactive monitoring
- Professional licensing bodies should:
 - acknowledge that marginalized communities face barriers to reporting concerning behaviour; and
 - take steps to minimize these barriers through engagement with these communities.

In addition, recommendation V.14 states that:

(b) Non-governmental bodies, including learning institutions, professional and trade associations, and business, declare gender-based, intimate partner, and family violence to be an epidemic that warrants a meaningful and sustained society-wide response.

The Mass Casualty report (vol. 4, p. 501) also commented favourably on the changes that the College of Nurses of Ontario has made to address nurses who intentionally harm patients (which is not limited to gender-based violence) through raising awareness and developing a risk assessment process for complaints and reports.

The Commission did not, however, provide much guidance on how regulators can access external resources if they identify red flags.

Raising awareness of its role and providing alternative methods of communication

(besides a formal written letter of complaint) in a safe space is consistent with initiatives by several regulators in recent years. For example, in our July 2023 issue of Grey Areas we discuss efforts being made by regulators to engage with Indigenous communities as part of redressing anti-Indigenous racism.

These recommendations also tie in with riskregulation activities regulators. Identifying the most serious (as well as the most frequent) forms of harm to the public helps regulators focus on activities matter. For example, enforcing that compliance with continuous professional development requirements and advertising rules might be accorded lesser regulatory resources, even if they are not completely abandoned, compared to abuse and violence concerns. Risk-based regulation also contemplates a proactive and multipronged approach to these risks (e.g., identifying registrants at risk of causing harm and proactively engaging with them, often with supportive measures). Risk-based regulation also involves providing support to vulnerable registrants and complainants or witnesses.

These recommendations will have to contend with competing considerations. For example, the concept of gathering all available information to look for "red flags" is not entirely consistent with a regulator's tendency to only rely on reliable and relevant evidence. For example, recently a tribunal held that complaints investigators can reasonably choose to not look at online internet ratings of registrants: <u>Complainant v.</u>

College of Physicians and Surgeons of British Columbia (No. 1), 2023 BCHPRB 48 (CanLII). While the trustworthiness of such information is doubtful, it can still provide some data that, combined with other data, might be able to identify registrants who are at risk and who might warrant special attention, as recommended by the Mass Casualty report. Research has shown, and the example provided in the Mass Casualty report indicates, that a prior history of complaints is a fairly reliable predictor of future concerns.

Similarly, procedural fairness requirements, including full disclosure of evidence about reporters of concerning behaviour, may pose challenges for regulators.

Another challenge for regulators is that their intervention with a potentially violent registrant might provoke the very behaviour that is sought to be addressed. Regulators may not have the expertise to mitigate that risk effectively.

Fortunately, the work of regulators in analogous areas of concern (e.g., sexual abuse, discrimination, and abuse of colleagues) will provide significant synergies in addressing gender-based violence by registrants.

Disclosure: One of the SML team was a Commission Counsel for the Nova Scotia Mass Casualty Commission. The opinions expressed in this article are those of the author and not of the Commission.

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