College of Traditional Chinese Medicine
Practitioners and Acupuncturists of Ontario

Ordre des praticiens en médecine traditionnelle
chinoise et des acupuncteurs de l'Ontario

Council Meeting

Thursday, December 7, 2023

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:

1.   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.

   l. 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;

   n. 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.

2. 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.
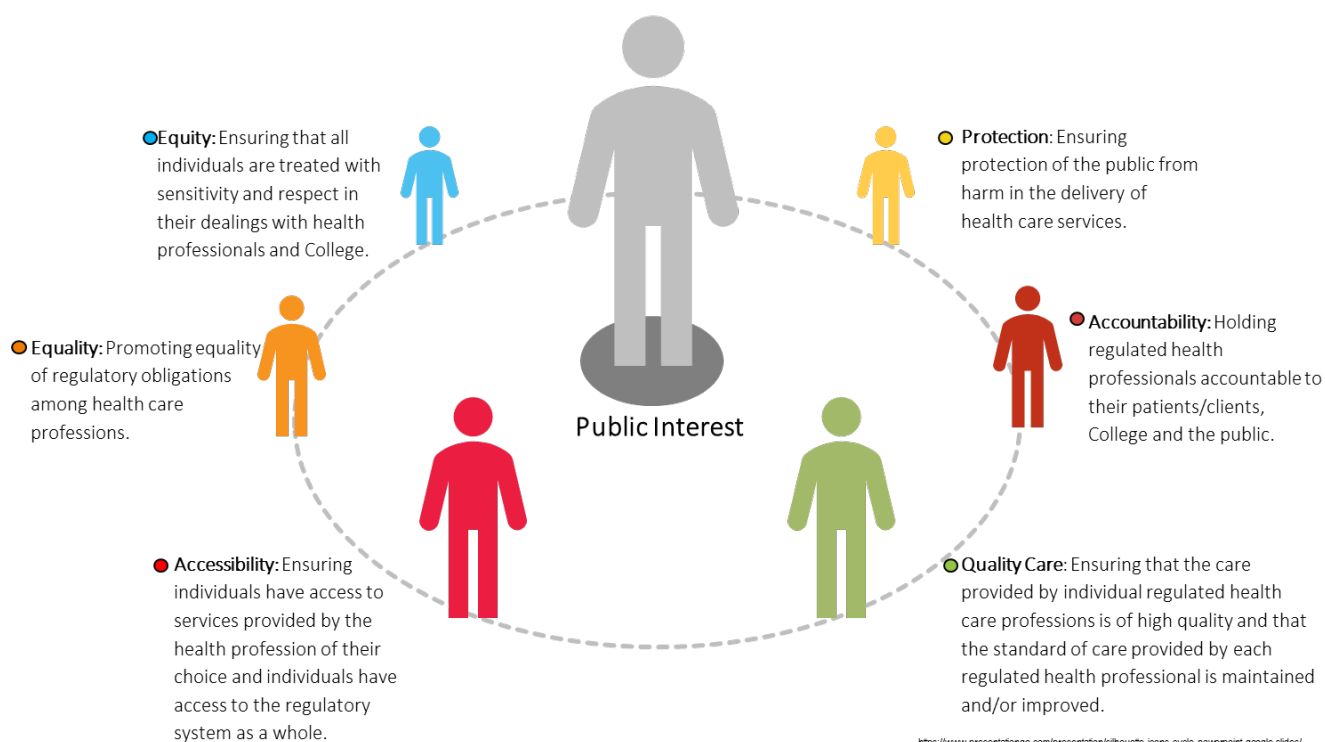
3. Responsibility to Oneself and the Profession

- 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

Equity: Ensuring that all individuals are treated with sensitivity and respect in their dealings with health professionals and College.

Protection: Ensuring protection of the public from harm in the delivery of health care services.

Equality: Promoting equality of regulatory obligations among health care professions.

Accountability: Holding regulated health professionals accountable to their patients/clients, College and the public.

Public Interest

Accessibility: Ensuring individuals have access to services provided by the health profession of their choice and individuals have access to the regulatory system as a whole.

Quality Care: Ensuring that the care provided by individual regulated health care professions is of high quality and that the standard of care provided by each regulated health professional is maintained and/or improved.

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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.

COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

PUBLIC AGENDA

Council Meeting
Thursday, December 7, 2023
9:00 a.m. – 4:00 p.m.
via Webex

Item	Open/ In-Camera	Time	Speaker	Action	Section No.
1. Welcome and Call to Order **2.** Declarations of Conflicts of Interest **3.** Briefing on Meeting Procedure	Open Session	9:00 a.m. (10 mins)	D. Worrad *Chair*	Information	1-3
4. Appointment of External Chair for 2024	Open Session	9:10 a.m. (5 mins)	J. Pritchard-Sobhani *President*	Motion	4
5. Adoption of the Agenda	Open Session	9:15 a.m. (5 mins)	D. Worrad *Chair*	Motion	5
6. Consent Agenda a. Draft Minutes of September 20 & 21, 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 Practise Committee Report i. Dr. Title Working Group Report A consent agenda is a single item on an agenda that encompasses all the things the Council would normally approve with little comment. All those items combine to become one item for approval on the agenda to be called the consent agenda. As a single item on the agenda, the consent agenda is voted on with a single vote - to approve the consent agenda. This means that there is no discussion on the items, that are listed in the consent agenda. **However, if a person wishes** to speak about any component of the consent agenda, they will alert the Chair. The component will be removed from the consent agenda and discussed at some point in the meeting. The remaining components of the consent agenda can then be approved.	Open Session	9:20 a.m. (5 mins)	D. Worrad *Chair*	Motion	6

Item	Open/In-Camera	Time	Speaker	Action	Section No.
7. **President's Remarks**	Open Session	9:25 a.m. (10 mins)	J. Pritchard-Sobhani *President*	Information	7
8. **Registrar's Report** 8.1 Operational Plan 8.2 Project updates	Open Session	9:35 a.m. (20 mins)	A. Zeng *Registrar & CEO*	Information	8
9. **Election Update** 9.1 Public Appointment 9.2 Election, District 1 & 2, & By-election 3 & 5	Open Session	9:55 a.m. (10 mins)	A. Zeng *Registrar & CEO*	Information	9
BREAK		10: 05 a.m. (10 mins)			
10. **Election Process Overview**	Open Session	10:15 a.m. (10 mins)	D. Worrad *Chair*	Motion	10
11. **Election: President**	Open Session	10:25 a.m. (20 mins)	D. Worrad *Chair*	Motion	11
12. **Election: Vice-President**	Open Session	10:45 a.m. (20 mins)	D. Worrad *Chair*	Motion	12
13. **Election: Executive Committee Members**	Open Session	11:05 a.m. (25 mins)	D. Worrad *Chair*	Motion	13
LUNCH		11:30 a.m. (90 mins)			
14. **Executive Committee Meets to Discuss Committee Appointments**	Closed Meeting	11:30 a.m. (30 mins)	Executive Committee	Executive Committee Meeting	
15. **Committee Appointments**	Open Session	1:00 p.m. (10 mins)	President	Motion	15
16. **Finance -** 2nd Quarter Statement of Operations	Open Session	1:10 p.m. (10 mins)	F. Ortale *Director IT, Finance & Corporate Services*	Information	16
17. **College Performance Measurement Framework** a. Council Competencies	Open Session	1:20 p.m. (60 mins)	S. Cassman *Manager of Policy & Governance*	Motion	17
BREAK		2:20 p.m. (10 mins)			
MOVE TO "IN-CAMERA" The following agenda items will be held In-Camera in accordance with Section 7.(2)b of the Health Professions Procedural Code, [7. (2) Despite subsection (1), the Council may	Open Session	2:30 p.m. (5 mins)	D. Worrad, *Chair*	Motion	

Item	Open/ In-Camera	Time	Speaker	Action	Section No.
exclude the public from any meeting or part of a meeting if it is satisfied that, (b) financial or personal or other matters may be disclosed of such a nature that the harm created by the disclosure would outweigh the desirability of adhering to the principle that meetings be open to the public]					
18. In-Camera	Closed	2:35 p.m. (35 mins)			
19. In-Camera	Closed	3:10 p.m. (10 mins)			
MOVE OUT OF "IN-CAMERA"	Closed	3:20 p.m. (5 mins)	*President & Chair*	Motion	
20. Risk Management Report	Open Session	3:25 p.m. (5 mins)	S. Cassman *Manager of Policy & Governance*	Information	19
21. Other Business	Open Session	3:30 p.m. (5 mins)	A. Zeng *Registrar & CEO*	Information	20
22. September 20 & 21, 20232 Meeting Evaluation Review	Open Session	3:35 p.m. (10 mins)	D. Worrad *Chair*	Information	21
23. Next Meeting Dates for 2024 and Meeting Effectiveness Survey	Open Session	3:45 p.m. (10 mins)	D. Worrad *Chair*	Information	22
24. Adjournment	Open Session	3:55 p.m. (5 mins)	D. Worrad *Chair*	Motion	23

FOR INFORMATION

COLLEGE OF TRADITIONAL CHINESE MEDICINE PRACTITIONERS AND ACUPUNCTURISTS OF ONTARIO

CONSENT AGENDA
Council Meeting
Thursday, December 7, 2023
9:00 a.m. – 4:00 p.m.
via Webex

Item	Open/ In-Camera	Time	Speaker	Action	Page No.
1. Consent Agenda	Open Session	9:20 a.m. (5 min.)	D. Worrad *Chair*	Motion	
a) Draft Minutes of September 20 & 21, 2023 Council Meeting					Page 2
b) Executive Committee Report					Page 19
c) Registration Committee Report					Page 21
d) Inquiries, Complaints and Reports Committee Report					Page 25
e) Quality Assurance Committee Report					Page 27
f) Patient Relations Committee Report					Page 29
g) Discipline Committee Report					Page 30
h) Fitness to Practise Committee Report					Page 32
i) Dr. Title Working Group Report					Page 33
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FOR: Information

SUBJECT: Executive Committee Report
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Executive Committee Members

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

Since the last Council meeting held on September 20, 2023, the Executive Committee met once on November 8, 2023.

FOR INFORMATION

1) **College meetings with Government**
   The Executive Committee was provided with an update on various meetings with Provincial Government officials that have taken place since the September Council meetings. These meetings were held to discuss important matters at the College and build relationships with the Government.

2) **Acupuncture Standard Ad Hoc Committee Update**
   The Executive Committee was provided with an update on the College's efforts to recruit non-Council members for the Committee.

3) **Finance**
   The Executive Committee reviewed the 2nd quarter financial statements.

4) **Stakeholder Requests**
   The Executive Committee reviewed and discussed a request from a stakeholder to present to Council at an upcoming Council meeting.

5) **Council Meeting and Orientation**
   Staff sought feedback from the Executive Committee regarding training and agenda items for the upcoming December Council meeting.

6) **CPMF Update**
   Staff provided an update on the status of the 2023 CPMF report.

7) **Council Election Update**
   Staff provided an update on the results of the 2023 Council elections.

8) **Letter to Registration**
   The Executive Committee reviewed a letter raising concerns about the College's registration process and provided direction to staff regarding next steps.

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9) In-Camera Meeting
The Executive Committee held an "in-camera" session.

This report is current as of November 21, 2023 in anticipation of the Council meeting scheduled for December 7, 2023.

FOR: Information

SUBJECT: Registration Committee Report

Registration Committee Members

Iftikhar Choudry (Chair)	Public Member
Kevin Ho	Public Member
Kimberley Bishop	Public Member
Akari Yokokawa (Non-Council)	Professional Member
Brendan Cheung (Non-Council)	Professional Member
Joanne Pritchard-Sobhani	Professional Member
Justin Lee	Professional Member
Melody Hon (Non-Council)	Professional Member
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:
September 28, 2023 (RC and Panel 1)
October 20, 2023 (Panel 2)
All meetings were held via Webex meeting.

This report is current to November 16, 2023, in anticipation of the Council meeting scheduled for December 7, 2023.

FOR INFORMATION

1. **PAN-CANADIAN EXAMINATIONS**

   October 2023 Pan-Canadian Examination

   The Pan-Canadian Examination for Acupuncturists was held on October 4 and 5, 2023. The Pan-Canadian Examination for Practitioners was held on October 25 and 26, 2023. This exam administration marked the return of in-person exams, instead of the online-proctored format that has been the norm over the last few years.

   Online proctoring was initially introduced at the outset of the COVID-19 pandemic to ensure continuity of service for candidates writing the PCE. As of October 2023, to preserve the integrity and security of the examinations, they returned to an in-person format at testing centers across the country. This

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change was expected to reduce the number of technical issues experienced by candidates, minimize test taker anxiety, and ensure the timely launch of examinations at each testing center.

Preliminary observations indicate that the transition back to in-person delivery was successful and relatively problem-free. Staff will be meeting with the exam administrators later in November to review processes and discuss potential enhancements.

For the October sessions, 186 candidates were eligible to sit the examinations:

	TCMP	ACU	Total
English	59	85	144
Chinese Simplified	16	20	36
Chinese Traditional	2	4	6
Total	77	109	186

 Examination results are expected to be released in December 2023.

 The application window for the April 2024 examinations will open on December 1st, and will close on January 15th.

2. **Emergency Class Approved**

The College's Emergency Class proposal has been approved by the Provincial government. This follows some final, minor changes requested by the Ministry which was approved by Council. 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 and Ontario's Regulatory Registry now indicates that our Emergency Class has been approved effective August 21, 2023. College staff has created the application form and guide for this class, and is developing the related policy documents.

3. **Interim Changes to the application process due to COVID-19**

During the pandemic, changes to document submissions were made so that the registration process would not be hindered due to pandemic restrictions. Given that applicants no longer have to contend with such restrictions, the Registration Committee revisited some of the temporary application processes that were created during COVID-19. The Committee has approved the recommended changes to the interim measures, which include accepting electronic documents on a permanent basis, and reverting to the original requirement of having criminal record checks submitted prior to registration, rather than up to six months after registration.

4. **Program Approval Project**

With agreements in place now regarding use of the Standards that were developed with CARB, the education program approval project is underway. The College issued a renewed call for interest to recruit additional program reviewers, and received a healthy response. Our consultant on the project, FICS, is interviewing candidates and expects to have at least twelve well-qualified reviewers from among

the applicants. In January, this group will participate in four days of in-person training, conducted by FICS, after which they will pilot the new approval process at several Ontario schools. The training will be delivered at the College's office, which will have the benefit of saving costs and of developing a stronger connection between the Reviewer team and the College.

5. **Office of the Fairness Commissioner**

In August, the College submitted its annual report to the Office of the Fairness Commissioner (OFC), with qualitative and quantitative information on registration practices. In November, the OFC sent out a supplementary questionnaire to regulators as part of its transition to a new Risk Informed Compliance Framework (RICF), which is intended to help achieve more objective and outcome-focused assessments. Based on the information gathered from the new questionnaire along with data from the August report, the OFC will assign the College a provisional risk rating in February or March. Risk ratings include the following three categories: low; moderately low; moderate to high. A College's risk rating will determine the degree of scrutiny, additional reporting and meetings with the OFC that they will be subject to.

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

Registration by District

	District 1	District 2	District 3	District 4	District 5	Practicing outside ON/Unknown*	Total
General	199	158	1671	549	74	95	2746
Inactive	19	4	85	16	3	42	169
Student	0	0	8	2	0	0	10
Total Members	218	161	1757	567	77	137	2925

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 47 General Class members who did not provide their business address information to the College.

Registration updates as of November 16, 2023

	15-Nov-2022	1-March-2023	23-May-2023	16-Aug-2023	16-Nov-2023
General R. Ac	1318	1355	1318	1328	1388
General R. TCMP	1306	1342	1319	1333	1358
Student R. Ac	4	2	2	2	5
Student R. TCMP	4	4	4	6	5
Inactive R. Ac	81	79	86	94	89
Inactive R. TCMP	80	76	80	81	80
Current Members	**2793**	**2858**	**2809**	**2844**	**2925**
Resigned	494	498	571	575	580
Expired	662	662	662	662	661

Revoked	85	83	83	83	83
Suspended	165	162	206	206	203
Deceased	-	-	16	16	17
Total	**4199**	**4263**	**4347**	**4387**	**4469**

Changes since previous reports

	Aug 20, 2022 – November 15, 2022	November 16, 2022 – March 1, 2023	March 2, 2023 – May 23, 2023	May 24, 2023 – Aug 16, 2023	August 17, 2023 – November 16, 2023
New members	68	66	71	39	81
Resignations	2	4	73	4	5
Revocation	0	0	0	0	0
Suspensions	2	1	44	0	-3
Expired	0	0	0	0	-1

Members practicing with terms, conditions and limitations: 218

Suspended Registrants

As noted in one of the charts above, the College currently has just over 200 suspended registrants. The majority of these individuals are administratively suspended, meaning they are suspended because they have not renewed their registration, in some cases for years. As it is not known whether these registrants intend to resume practising at any point in the future, staff have sent them letters to inform them of the reinstatement process and the fees that would be required to bring their accounts up to date. The letter also outlines the process to resign from the College, should they wish to do that instead.

Jurisprudence Course Tests (From August 17, 2023 – November 16, 2023)

Passed	Failed	Total
75	5	80

Safety Program Tests (From August 17, 2023 – November 16, 2023)

Passed	Failed	Total
76	2	78

FOR: Information

SUBJECT: Inquiries, Complaints and Reports Committee Report

Inquiries, Complaints and Reports Committee Members

Xianmin Yu (Chair)	Professional Member
Meiying Chen	Professional Member
Matthew Colavecchia	Professional Member
Jin Qi (Jackie) Zeng	Professional Member
Melody Hon (Non-Council)	Professional Member
Fanny Ip (Non-Council)	Professional Member
Christine Lang (Non-Council)	Professional Member
Hui Liu (Non-Council)	Professional Member
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 five times on September 6, 2023, October 19, 2023, November 6, 2023, November 17, 2023 and November 20, 2023.

New Cases and Nature of Concerns

Note: Some cases may have more than one concern

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

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

Completed Cases and Outcomes*

Note: Some decisions have more than one outcome

Complaints	Outcomes		Registrar Reports Investigations	Outcomes	
8		Take no action	6	1	Take no action
	3	Advice			Advice
		Written Caution			Written Caution
		Oral Caution		2	Oral Caution
	4	SCERP		2	SCERP
	2	Refer to Discipline		3	Refer to Discipline
		Undertaking		1	Undertaking

Complaints cases before Health Professions Appeal and Review Board

New Cases	Pending Cases	Cases Upheld
-	1	1

Pending Cases

Complaints	Registrar Report Investigations	Incapacity Inquiries	Total # cases
9	50		59

This report is current as of November 20, 2023, in anticipation of the Council meeting scheduled for December 7, 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 – September 14, 2023 (QAC Meeting), November 24, 2023 (QAC Meeting and Panel), and November 27, 2023 (Panel).

FOR INFORMATION

1. **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 September 14, 2023 to finalize the Ad Hoc Committee Terms of Reference (ToR), membership criteria and composition.

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

2. **Self, Peer and Practice Assessment – Random Selections**

    Random Selection to Submit Self-Assessment

    The QA Committee directed that 5% of members be selected at random to submit the Self-Assessment Tool (SAT) and professional development plan (PDP) in 2024 for the January 1, 2022 through December 31, 2023 reporting cycle.

<u>Random Selection to Participate in a Peer and Practice Assessment</u>

The QA Committee directed that 2.5% of members be selected at random to undergo a Peer and Practice Assessment in 2024.

This report is current to November 24, 2023, in anticipation of the Council meeting scheduled for December 7, 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 not had a 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 November 15, 2023, in anticipation of the Council meeting scheduled for December 7, 2023.

FOR: Information

SUBJECT: Discipline Committee Report

Discipline 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
Jin Qi (Jackie) Zeng	Professional Member
Evelyn Cho (Non-Council)	Professional Member
Bo Feng (Non-Council)	Professional Member
Hui Liu (Non-Council)	Professional Member
Akari Yokokawa (Non-Council)	Professional Member
Kimberley Bishop	Public Member
Iftikhar Choudry	Public Member
Judy Cohen	Public Member
Mark Handelman	Public Member
Deborah Sinnatamby	Public Member
Kevin Ho	Public Member

The Discipline Committee released the following decisions and orders in this quarter.

1. Yu-Zhen Ma
2. Christine Richards

As of November 17, 2023, there are five open cases which have been referred to the Discipline Committee by the Inquiries, Complaints and Reports Committee (ICRC).

	Member Name	Status
1	Chanpheng Anousaya (1)	The Notice of Hearing was served on the Member on December 20, 2022. The matter came before a panel on November 10, 2023 on an uncontested basis. Matter was adjourned to a new panel for a contested hearing.
2	Chanpheng Anousaya (2)	The Notice of Hearing was served on the Member on December 20, 2022. The matter came before a panel on November 10, 2023 on an uncontested basis. Matter was adjourned to a new panel for a contested hearing.

3	Xiaoyun Tian	The Notice of Hearing was served on the Member on September 15, 2023. Discipline office canvassing the parties for pre-hearing conference availability.
4	Esther Yu Kwan Cheng	The Notice of Hearing was served on the Member on September 15, 2023. Discipline office canvassing the parties for pre-hearing conference availability.
5	Mohmed Shoeb M. Chikhlikar	The Notice of Hearing was served on the lawyer for the Member on October 10, 2023. Discipline office canvassing the parties for pre-hearing conference availability.

There is no discipline decision currently under appeal.

This report is current as of November 17, 2023, in anticipation of the Council meeting scheduled for December 7, 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
Jin Qi (Jackie) Zeng	Professional Member
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 5 times, on September 7, 2023, October 4, 2023, October 23, 2023, November 2, 2023, and November 16, 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 November 21, 2023, in anticipation of the Council meeting scheduled for December 7, 2023.

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 Direction	Key Activities	Accountability/ Anticipated Resources	Budget	Important Milestones/Timelines	Current Status (Updates since April, 2023)
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 data, monitor 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 risk-based decision-making processes	• Council • Registrar • Program Managers • IT • Policy Staff • External Consultants	• TBD	• Ongoing until 2028	• Environmental scanning
	1.2 Educate and communicate risk-based decision-making processes and procedures	• Council • Registrar	• $15,000 annually 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	• The entire set of areas of competencies proposed by the project consultant has been reviewed by the working group • The working group is now reviewing the Competency Assessment Paths to Registration and Blueprint summary of the Dr. Class exam
	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 • Registration Committee and staff are working on the necessary details, including policies and forms, for the implementation of the Emergency Class

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. • The College is moving forward with the education program approval project, recruiting and training assessors
	• Develop and implement online General Class application • Implement Temporary Class	• RC • Registrar • Manager of Registration • IT	• TBD	• Ongoing	• Drafting RFP

Informed and Interactive Stakeholders	3.1 Enhance engagement and communication with stakeholders. Review existing communication and engagement plans, structures and standard documents: - workshops/webinars - School visits - 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	• Council • President • Registrar • Program managers • Communications Coordinator	• $20,000 annually	• Ongoing	• The College staff visited several TCM schools and provided presentations • Council received presentations from two associations on the Dr. Title • The College is scheduling a presentation to Council from a TCM school in the new year. • The College is collaborating with other regulators to deliver a presentation and formula to assist Council and staff on Trauma Informed Regulation. • The College continues to send out educational tips by email to our members, and publish social media posts • College renewed its contract with the GR firm to assist with communication and strategy with MOH and other stakeholders • College staff regularly meet with Ministry Staff

	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	• Council • Registrar • Policy 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 and other regulatory Colleges to develop a DEI frame work, and to deliver a presentation to assist Council and staff to apply DEI throughout their operations.
	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	• Ongoing	• Significant research has been done by the College and staff will present recommendations to Council to fulfil the CMPF requirements

	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 has approved a set of competencies and indicators for use by the College in determining eligibility • College is working on the TOR and creation of a Nominations Committee
	4.4 Develop Council effectiveness evaluation framework	• Council • Registrar • Policy staff • Consultant	• $20,000	• Ongoing	• Staff have conducted research and reached out to other Colleges/consultants.

*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:	December 7, 2023
Issue:	Council Update
Reported By:	Ann Zeng
Action:	Information

Issue
Staff will provide an update on the 2023 Council elections.

Public Interest Rationale
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.

Public Appointments
The appointment term for public member Mark Handelman is ending in February 2024. The Registrar has reached out to the Public Appointments Secretariate regarding this, and will provide a verbal update on their response, if any, to Council.

The College currently has six public members of Council including Mr. Handelman. The minimum number require for a constituted Council is five, meaning the College is not at risk of becoming unconstituted.

Council Election
The 2023 Council elections have concluded and the results are available. Below is a summary of the results.

District 1
Joanne Pritchard-Sobhani and Jackie Zeng have been successful in their re-election.

District 2
Christine Lang has been acclaimed to the seat for District 2. Ms. Lang is returning to Council after previously serving from 2013-2018.

District 3
Kathy (Bo) Feng has been elected to the seat in District 3. This will be Ms. Fengs first term on Council.

Congratulations to all successful candidates!

Next Steps
As previously reported, no candidates were received for District 5. Staff were previously directed to plan for a by-election for this district, which will be carried out in 2024.

Staff will continue to follow up on the matter of public appointments with the government.

SUBJECT: Elections Process Overview

The process for the elections of officers (President, Vice-President and Executive Committee Members) to Council is subject to the College By-Laws. The process for the election of each position, their duties and the eligible nominees for each position as well as the required composition of the Executive Committee, are spelled out in the following documents:

President	Item 11 of Package
Vice-President	Item 12 of Package
Executive Committee Member	Item 13 of Package

With the concurrence (i.e. approval) of Council, two members of the College staff and legal counsel will act as returning officers for the voting process.

1. Where there is only one candidate for the office, the said candidate shall be acclaimed.

2. Where there is more than one candidate for the office, voting shall be conducted by secret ballot. The candidate who receives a majority of the votes cast (i.e. 50% + 1) on a ballot shall be declared elected.

3. Where no candidate receives a majority of the votes cast on the ballot, the one receiving the lowest number of votes on the ballot shall be deleted from the next ballot and a fresh vote shall take place.

4. If there is a tie on the lowest number of votes for two members, there shall be a recount. If there is still a tie, one of the returning officers shall break the tie by lot and the member who prevailed shall then proceed to the next round until one candidate receives a majority of votes.

5. This procedure shall be followed until one candidate receives a majority of the votes cast on a ballot.

Prior to the opening vote for each position, each nominee for each position will be allowed a maximum of **two minutes** to speak to Council regarding their candidacy for the position.

The election will be conducted virtually. The following voting process will be used.

1. Once the candidates have made their opening comments, a returning officer will send an email with the list of candidates to all Council members.

2. Council members will reply to the email with the name of their selected candidate.

3. Council members will be given a 5-minute time limit to respond with their vote.

4. The returning officer will tally the votes, verify with the other returning officers, and relay the winner to the Chair. The Chair will announce the result.

Executive Committee's Exercise of Council's Powers

The Executive Committee's exercise of Council's powers is subject to Section 12 of the Health Professions Procedural Code, Schedule 2 of the *Regulated Health Professions Act, 1991*.

Between the meetings of the Council, the Executive Committee has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or by-law.

If the Executive Committee exercises a power of the Council under subsection (1), it shall report on its actions to the Council at the Council's next meeting

FOR: Information

SUBJECT: Elections – President

Election of the President

The election of the President is subject to Section 7.03 of the College By-Laws.

At the meeting of the Council when the election of officers shall take place, the Registrar shall present the names of candidates who have indicated their interest for the position of President. Where there is only one candidate, the Registrar shall declare the candidate elected by acclamation.

Where there is more than one candidate for the office, voting shall be conducted by secret ballot and for this purpose, the Registrar shall, with the concurrence of the Council, appoint three (3) returning officers to count the ballots and report the results to the Council. The candidate who receives a majority of the votes cast on a ballot shall be declared elected.

Where no candidate receives a majority of the votes cast on the ballot, the one receiving the lowest number of votes on the ballot shall be deleted from the next ballot and a fresh vote shall take place. If there is a tie on the lowest number of votes for two members, there shall be a recount. If there is still a tie, a returning officer shall break the tie by lot and one member shall then proceed to the next round of the election process until one candidate receives a majority of votes.

This procedure shall be followed until one candidate receives a majority of the votes cast on a ballot. Where an issue arises during an election that is not governed by this paragraph, the Registrar shall, with the concurrence of the Council, adopt a fair and democratic process including, where appropriate, selection by a returning officer by lot.

Duties of the President

The specific duties of the President are set out in Section 8.01 of the College By-Laws.

(i)   The President, in conjunction with the Council, is ultimately responsible for fulfilling the mandate, objectives and strategic plans of the College. He or she is directly accountable to the Council and indirectly accountable to the government, the public and the profession for the effective governance of the College in accordance with all applicable legislative requirements.

(ii)   Specific duties of the President include:

a. presiding as chair of all meetings of the Council, the Executive Committee and of Members, unless a non-voting chair has been appointed to facilitate the meeting;
b. overseeing the operations and performance of the Council;
c. working with the Registrar to ensure smooth, efficient conduct of all meetings and that decisions of the Council and Executive Committee are implemented;
d. participating in cultivating, recruiting and orienting new Council Members, officers, committee Members and chairs, and volunteers;
e. overseeing and ensuring that a process is in place to evaluate the performance and employment conditions of the Registrar;
f. representing the College as the authorized spokesperson on Council policies and positions to promote the mandate and objectives of the College;
g. signing contracts, documents or instruments in writing as required by the College;
h. liaising with the Registrar on any issues relating to the interactions between Members of the Council and College staff;
i. is an ex-officio member of all committees; attendance at any committee meetings will be at the discretion of the President; chairs of committees shall file minutes and reports with the Registrar to keep the President informed; and
j. other duties as assigned by the Council from time to time.

FOR: Information

SUBJECT: Elections – Vice-President

Election of the Vice-President

The election of the Vice-President is subject to Section 7.04 of the College By-Laws.

At the meeting of the Council when the election of officers shall take place, the Registrar shall present the names of candidates who have indicated their interest for the position of Vice-President. Where there is only one candidate, the Registrar shall declare the candidate elected by acclamation.

Where there is more than one candidate for the office, voting shall be conducted by secret ballot and for this purpose, the Registrar shall, with the concurrence of the Council, appoint three (3) returning officers to count the ballots and report the results to the Council. The candidate who receives a majority of the votes cast on a ballot shall be declared elected.

Where no candidate receives a majority of the votes cast on the ballot, the one receiving the lowest number of votes on the ballot shall be deleted from the next ballot and a fresh vote shall take place. If there is a tie on the lowest number of votes for two members, there shall be a recount. If there is still a tie, a returning officer shall break the tie by lot and one member shall then proceed to the next round of the election process until one candidate receives a majority of votes.

This procedure shall be followed until one candidate receives a majority of the votes cast on a ballot. Where an issue arises during an election that is not governed by this paragraph, the Registrar shall, with the concurrence of the Council, adopt a fair and democratic process including, where appropriate, selection by a returning officer by lot.

Duties of the Vice-President

The duties of the Vice-President are set out in Section 8.02 of the College By-Laws.

(i)   The Vice-President shall have all the powers and shall perform all the duties of the President in the event of the absence, or the inability of the President to act. The Vice-President is directly accountable to the Council and indirectly accountable to the government, the public and the profession for the effective governance of the College in accordance with all applicable legislative requirements.

(ii)   Specific duties of the Vice-President include:

a. serving on the Executive Committee;
b. any duties delegated by the President unless not approved by the Council;
c. acting as a signing officer on cheques and other documents as required by the Council; and
d. other duties as assigned by the Council from time to time.

FOR: Information

SUBJECT: Elections – Executive Committee Members

Election and Composition

The election and composition of the Executive Committee is subject to Sections 7.06 and 12.01 of the College by-laws.

The three Executive Committee Members shall be elected following a procedure similar to the election of the President. The Executive Committee shall be composed of the President, the Vice-President and three (3) Members of the Council. Two of the Members of the Executive Committee shall be Public Members. The President shall be the chair of the Executive Committee.

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

2nd Quarter (April - September 2023)

GL Code		Actuals of Q2 2023-2024	Annual Budget 2023-2024	Actual to Budget %	Budget Remaining (balance of Year)
GL Code	Revenue				
4101000	Registration Fees	$ 161,100.00	$ 182,750.00	88.15%	$ 21,650.00
4102000	Renewal Fees	$ 3,383,375.00	$ 3,298,600.00	102.57%	$ (84,775.00)
4200000	Administration Fees	$ 61,100.00	$ 68,750.00	88.87%	$ 7,650.00
4300000	Pan Can Examination Fees	$ 466,219.00	$ 545,240.00	85.51%	$ 79,021.00
4400000	Other Income-Government Funds	$ 250,000.00	$ 503,600.00	49.64%	$ 253,600.00
4500000	Other Fees	$ 29,000.00	$ 42,000.00	69.05%	$ 13,000.00
4600000	Other Income	$ 134,491.99	$ 75,000.00	179.32%	$ (59,491.99)
	Total Income	$ 4,485,285.99	$ 4,715,940.00	95.11%	$ 230,654.01
GL Code	Expenses				
	Council & Committees	$ 407,541.52	$ 1,145,200.00	35.59%	$ 737,658.48
6100000	Council	$ 32,633.85	$ 101,500.00	32.15%	$ 68,866.15
6201000	Executive Committee	$ 6,362.43	$ 30,500.00	20.86%	$ 24,137.57
6202000	Registration Committee and Panel	$ 35,929.47	$ 69,300.00	51.85%	$ 33,370.53
6203000	ICRC Committee	$ 194,861.47	$ 373,800.00	52.13%	$ 178,938.53
6204000	Quality Assurance Committee	$ 42,822.74	$ 150,100.00	28.53%	$ 107,277.26
6205000	Patient Relations Committee	$ 1,307.15	$ 47,750.00	2.74%	$ 46,442.85
6206000	Discipline Committee	$ 93,624.41	$ 368,000.00	25.44%	$ 274,375.59
6207000	Fitness to Practice Committee	$ -	$ 4,250.00	0.00%	$ 4,250.00
6300000	Professional Services	$ 102,786.76	$ 215,500.00	47.70%	$ 112,713.24
6301000	Legal Fees	$ 39,845.10	$ 67,000.00	59.47%	$ 27,154.90
6302000	Accounting Fee	$ 21,463.28	$ 31,500.00	68.14%	$ 10,036.72
6303000	Expert Consultation	$ 450.87	$ 7,000.00	6.44%	$ 6,549.13
6304000	Government Relations	$ 41,027.51	$ 110,000.00	37.30%	$ 68,972.49
6400000	Special Programs/Projects	$ 470,697.71	$ 1,576,466.00	29.86%	$ 1,105,768.29
6401000	Pan-Canadian Examinations	$ 161,676.00	$ 381,366.00	42.39%	$ 219,690.00
6402000	Doctor Title	$ 95,972.37	$ 406,500.00	23.61%	$ 310,527.63
6403000	Strategic Initiatives	$ -	$ 100,000.00	0.00%	$ 100,000.00
6404000	Program Approval	$ 90.40	$ 50,000.00	0.18%	$ 49,909.60
6405000	Safety and Jurisprudence Test	$ 13,770.54	$ 135,000.00	10.20%	$ 121,229.46
6800000	Pan Can Chinese Language Examination	$ 199,188.40	$ 503,600.00	39.55%	$ 304,411.60
6500000	Salaries and Benefits	$ 816,168.48	$ 1,889,107.00	43.20%	$ 1,072,938.52
6500000	Salaries and Benefits	$ 816,168.48	$ 1,839,107.00	44.38%	$ 1,022,938.52
6502000	Casual Labour	$ -	$ 50,000.00	0.00%	$ 50,000.00
6600000	Information Technology	$ 144,612.11	$ 280,000.00	51.65%	$ 135,387.89
6602000	Equipment Expenses	$ 4,871.13	$ 10,000.00	48.71%	$ 5,128.87
6603000	Software Development	$ 70,147.05	$ 148,500.00	47.24%	$ 78,352.95
6604000	Maintenance and Support Contracts	$ 36,083.89	$ 58,500.00	61.68%	$ 22,416.11
6605000	Online Services	$ 27,916.54	$ 53,000.00	52.67%	$ 25,083.46
6606000	Network Security	$ 5,593.50	$ 10,000.00	55.94%	$ 4,406.50
6700000	Operating Expenses	$ 201,796.68	$ 536,050.00	37.65%	$ 334,253.32
6701000	General Operating Costs	$ 129,014.31	$ 296,050.00	43.58%	$ 167,035.69
6702000	Payment Gateway	$ 19,883.54	$ 130,000.00	15.30%	$ 110,116.46
6703000	Subscriptions and Conferences	$ 18,501.14	$ 55,000.00	33.64%	$ 36,498.86
6704000	Communications and Publications	$ 34,397.69	$ 55,000.00	62.54%	$ 20,602.31
45	Total Expenses	$ 2,143,603.26	$ 5,642,323.00	37.99%	
46	Net Income	$ 2,341,682.73	$ (926,383.00)		

College of Traditional Chinese Medicine
Practitioners and Acupuncturists of Ontario

Ordre des praticiens en médecine traditionnelle
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Meeting Date:	December 7, 2023
Issue:	College Performance Measurement Framework
Reported By:	Sean Cassman
Action:	Motion

Issue
College staff would like to follow up on previous discussions regarding Council competencies, and provide an update on other items related to the CPMF report.

Public Interest Rationale
The CPMF has been implemented by the Ministry of Health to ensure colleges are regulating in the public interest according to Ministry standards. The College will be required to make changes to meet these standards.

a. Council Competencies

Background
At the September 21, 2023 Council meeting, Council approved a competencies framework to be implemented for upcoming Council elections. College staff have continued to make progress on this project, with the target of having the competencies effective for the 2024 Council election. In addition, Council also discussed establishing a Nominations Committee to facilitate the process of nominations to Council, and provided direction to staff regarding Terms of Reference (TOR).

Nominations Committee Terms of Reference
Based on feedback from Council, staff have drafted a TOR for the Nominations Committee for Council's review. If acceptable, staff will work with the Executive Committee to select members for Council's consideration for appointment.

Further Updates
In addition to the TOR, staff have been working on the following items, which will be brought for Council's consideration in the new year:
- By-law amendments to codify the competency requirements.
- Orientation session for members to attend prior to being nominated for Council
- Communications plan to inform members of the new process

b. Other CPMF Items

Background
In addition to Council competencies, there are a number of other CPMF requirements that the College has not yet fully met. Staff believe the majority of these requirements can be met in 2024, if not by the end of this year. Below is a list of outstanding items, and staff will update Council on the options for addressing each.

Requirements Not Yet Met

1. Measure 1.2.a. - Council has developed and implemented a framework to regularly evaluate the effectiveness of Council
2. Measure 1.2.b. - The framework includes a third- party assessment of Council effectiveness at a minimum every three years.
3. Measure 3.1.a. - Council minutes (once approved) and status updates on the implementation of Council decisions to date are accessible on the College's website, or a process for requesting materials is clearly outlined.
4. Measure 3.3.a. - The DEI plan is reflected in the Council's strategic planning activities and appropriately resourced within the organization to support relevant operational initiatives (e.g., DEI training for staff).
5. Measure 14.1.a. - Outline the College's KPIs, including a clear rationale for why each is important.
6. Measure 14.3.a. - Performance results related to a College's strategic objectives and regulatory outcomes are made public on the College's website.

Next Steps
- Motion to approve Nominations Committee TOR
- Staff will continue working on CPMF related items, with updates to Council as progress is made.

Meeting Date:	December 7, 2023
Issue:	Risk Management Plan
Reported By:	Sean Cassman
Action:	Information

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

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

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

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

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

Risk Management Vision

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

Stakeholder Roles and Responsibilities

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

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Risk Management Process and Activities

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

Risk Analysis Matrix

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

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

- each function performed within the College,

- records and reports generated or retained by the College.

- business processes, policies and procedures.

- resources of the College including knowledge of history, processes and legislative, operational and policy environment, staff, furnishings and equipment.

Types of Risk Identified:

1. Governance

2. Loss Confidence in CTCMPAO

3. Finance

4. Information Management

5. Facility/Site Safety and Security

6. Human Resources

7. Statutory Obligations

8. Exam

Risk Occurrence Matrix

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

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

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

Risk Assessment

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

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

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

- Likelihood is a qualitative description of probability and frequency, asking the question 'what is the likelihood of the risk occurring?'

- Consequence was described as the outcome of the event, being a financial loss, loss of reputation, or business interruption, asking the question, 'what is the consequence of the risk event?'

- The risk rating was the sum of the consequence rating times the likelihood rating.

- The risk priority chart provides an indication of urgency to how soon the staff needed to implement a strategy to address the risk.

CTCMPAO Risk Registry

Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Governance	Not reaching quorum to constitute a Committee resulting in or Council becomes unconstituted: • Public perception of not meeting College mandate of public protection • Delays in decision-making affecting applicants (i.e. registration) or members (QA/ICRC/Discipline)	4 Likely	5 Extreme	20 Extreme	Council, President, Registrar	**Current Treatment:** • Staff try to accommodate Council/committees members' schedules to ensure quorum in all meetings. • Continued ongoing communications with Public Appointments Secretariat • The College has procedures in place to ensure the College functions properly while the Council is unconstituted. ○ Committees continue to function as per section 12.09 of College by-laws. Committees remain constituted as long as there is quorum. • The College has hired a government relations consultant to help press this issue with the government. • Re-evaluate government relations approach to improve relationship with MoH • Allow non-council members to sit on statutory committees **Additional Proposed Treatment:** • Outreach to TCM associations and schools to reach prospective members to ensure understanding of the College's role and why regulation matters. • Create and advertise opportunities for engagement with the College.

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Governance	Council/Committees operating outside of mandate or becoming engaged with operational matters resulting in: • Poor or inconsistent decisions • Increased likelihood of conflict • Inefficiencies in operations	3 Possible	4 Major	12 High	President, Council, Registrar	Current Treatment: • Council and Committee orientation to occur annually. • Prepare Terms of References for all statutory/non-statutory committees • Conduct a governance review with a third party consultant to examine governance practices. • New strategic plan in development to establish priorities for how to best achieve our mandate. Additional Proposed Treatment: • Prepare a College governance manual outlining major responsibilities and separation of roles between Council and operations.
Governance	Council/Committee not adhering to Code of Conduct, Conflict of interest, bylaws and other Council policies resulting in: • Inefficiencies • Poor decision • Negative reporting by stakeholders • Decreased morale on Council/Committees	3 Possible	4 Major	12 High	President, Registrar, Council	Current Treatment: • Each Council/Committee are properly trained and prepared for their service. • Legal Counsel delivers the orientation at the Council/Committee levels. • Evaluate Council effectiveness on its performance through a council effectiveness survey after each meeting. • Have each Council/Committee member annually complete and signs a statement declaring any known conflicts and agreeing to comply with the Code of Conduct. • Conduct regular Council/Committee training. Additional Proposed Treatment: • Competency requirements for prospective Council/Committee members

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Governance	CTCMPAO unable to retain current Council and Committee members	4 Likely	3 Moderate	12 High	President, Council, Registrar	**Current Treatment:** • Non-Council Committee members to better manage workload
Loss of Confidence in CTCMPAO	Applicant/member disengagement resulting in: • Lack of interest for election to Council • Lack of membership on Committees/working groups • Reduction in overall registration numbers	4 Likely	4 Major	16 High	Council, Registrar,	**Current Treatment:** • Create and advertise opportunities for engagement with College. • Regular outreach meetings and educational sessions through professional associations, TCM schools, and other events as presented. **Additional Proposed Treatment:** • Continuous outreach to key stakeholders to ensure they are able to keep their members informed and engaged. • Develop "stories" for publication, describing benefits of engagement. • Incorporate simple plain language in all college documents. • Develop a recruitment plan for new Council and Committee members
Loss of Confidence in CTCMPAO	Public, government, stakeholders perceive the College as not being transparent and/or fair	3 Possible	4 Major	12 High	President, Council, Registrar	**Current Treatment:** • Implementation of bylaws related to transparency i.e. posting additional information on public register. • Conduct annual review of bylaws. • Continuous outreach to TCM schools to reach prospective members to ensure understanding of the College's role and why regulation matters. • Posting workplan update on College website

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
				■■■		Additional Proposed Treatment: • Adoption of ARGE transparency principles. • Update and post all statutory policies on website. • Collaborate with other regulatory colleges on strategies to promote transparency.
Loss of Confidence in CTCMPAO	CTCMPAO provides insufficient support to external stakeholders	3 Possible	2 Minor	6 Medium	Registrar, Director, IT, Finance and Corporate Services, Program Managers	Current Treatment: • One point of contact. An enquirer is provided with the name by respondent and that person commits to and takes necessary action.
						Additional Proposed Treatment: • Research and develop internal organizational customer service standards and policies (i.e. client services policy part of AODA requirement. • Statutory teams to prepare FAQs for each department. • Invite feedback through customer service surveys. • Review of website material to ensure accessible and easy to understand.
Financial	Insufficient financial resources impact the ability of the College to meets its mandate. This will result in: • Lack of retained funds to carry out • Low membership in College	2 Unlikely	4 Major	8 Medium	Registrar, Director, IT, Finance and Corporate Services	Current Treatment: • Prepare operating budgets using 5-year projections and outlook. • Strategies in place for cost savings. • Develop reserve funds to cover unexpected expenses • Prepare multiple scenarios for forecasting and develop plans that are flexible. • Calendarize revenue to predict cash flow.

Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
	• Uneven cash flow					
Financial	Poor financial management results in the College being unable to meet strategic initiatives	2 Unlikely	4 Major	8 Medium	Registrar, Director, IT, Finance and Corporate Services	Current Treatment: • Budget is prepared annually and approved by Council. • Use of 5-year time horizon for financial planning. • Prepare multiple scenarios for forecasting and develop plans that are flexible. • Prepared a formal Reserve Fund Policy outlining specific purpose of each internally restricted fund to ensure funds are used for its intended purpose • Calendarize revenue to predict cash flow.
Finance	Risk of Fraud/Theft	2 Unlikely	4 Major	8 Medium	Registrar, Director, IT, Finance and Corporate Services	Current Treatment: • Financial audit completed annually by chartered accountants. • Finance coordinator reviews and verifies invoices prior to submitting Registrar for approval. • Bank cheques require documentation and two signatures • Bank statements are reviewed and reconciled monthly. • Financial update provided at each Council meeting.

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
						Proposed Treatment: • Prepare formal financial policies to document financial procedures as part of the College's financial policies. • Establish a procurement policy through a process that is open, fair and transparent.
Information Management	Information and computer systems are compromised due to: • Viruses, worms and malicious software • Security breach/hacking • Loss of power	3 Possible	4 Major	12 High	Director, IT, Finance and Corporate Services	Current Treatment: • Backup procedures carried out daily on electronic files. • Processes such as encryption, access control procedures, and network firewalls in place. • Adequate cyber security insurance in place. Proposed Additional Treatment: • Prepare a disaster recovery plan. • Solicit services of an external vendor to conduct an IT audit, vulnerability assessment and security penetration assessment.
Information Management	Improper handling of digital data by staff or vendors leads to exposure of sensitive data	3 Possible	4 Major	12 High	Director, IT, Finance and Corporate Services	Current Treatment: • College ensures that personal information is stored in electronic and physical files that are secure. Physical files are under lock and key. Additional Proposed Treatment: • Add additional security measures to safeguard information which include restricting access to personal information to authorized personnel.

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Information Management	Breach of confidentiality: • Member/applicant personal information • Public information • Vendor information • Council member information • Staff information	3 Possible	4 Major	12 High	All	Current Treatment: • Applicant/registrant information housed on secure external server (CRM). • Use secure login protocols, data encryption, and passwords. Additional Proposed Treatment: • Develop protocols for reporting, investigating and correcting security breaches to ensure PHIPA compliance. • Require signed commitment to adhere to College confidentiality requirements by Council and College staff. • Facilitate regular orientation and training on privacy and confidentiality for Council and College staff.
Information Management	Unintended destruction or loss of records	2 Unlikely	3 Moderate	6 High	Director, IT, Finance and Corporate Services	Current Treatment: • Staff adopt filing protocols for naming, deletion of copies, electronic and paper storage. • Backup procedures carried out daily on electronic files. • File room/cabinets are secured and locked daily. Proposed Additional Treatment: • Increase security in the College server room.
Facility/Site Safety and Security	Permanent damage to equipment and/or furnishings due to water/fire damage.	2 Unlikely	4 Major	8 Medium	Director, IT, Finance and Corporate Services	Current Treatment: • Office building is code compliant for building and fire standards. • Adequate insurance in place to recover replacement. Additional Proposed Treatment: • Ongoing annual fire training for all staff, Council and Committee members.

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Facility/Site Safety and Security	Computers, servers and other items of value belonging to the College are stolen	2 Unlikely	4 Major	8 Medium	Director, IT, Finance and Corporate Services	Current Treatment: • Security cameras installed at each exit, common hallways and meeting rooms. • College maintains a complete inventory of its electronic equipment, computers and technology systems. • Adequate insurance in place to recover replacement of loss goods.
Human Resources	Disruption in work due to unexpected and/or extended absence of an employee, or employee permanently leave organization resulting in: • Backlog of work • Inability to meet required timelines • Major interruption in work	2 Unlikely	3 Moderate	6 Medium	Registrar, Director, IT, Finance and Corporate Services, Program Managers	Current Treatment: • Job descriptions have been created for all positions. • Regular staff meetings are held to update all staff on work in progress. Additional Proposed Treatment: • Prepare succession plan for the Registrar position. • All college departments to document procedures for all key functions.
Human Resources	Interpersonal conflicts result in: • Complaints of harassment • Decrease productivity • Poisoned work environment • Staff discontent and poor morale • High turnover rate in staff	2 Unlikely	2 Minor	4 Low	Registrar Program Managers	Current Treatment: • HR policies in place. • Staff receive legislated training on violence in the workplace. and this is documented. • Team-building events held involving all staff. • Registrar addresses all issues of conflict promptly.

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (Patient Relations)	College is not taking appropriate measures to keep client/patients safe from sexual abuse.	3 Possible	3 Moderate	9 Medium	Registrar, Program Manager, Policy and Governance Analyst	Current Treatment: • Therapy and counselling forms have been updated to be compliant with legislation. • Available Standards for Maintaining Professional Boundaries and Preventing Sexual Abuse. • Provide resources to the membership and public to be aware of the measures the College has in place to prevent and deal with sexual abuse. • QA self and peer and practice assessment include a section on Sexual Abuse, also covering required consent for services provided in sensitive areas. • Regular communication (e.g., Webinars, Education Tips and articles in Qi Newsletter) regarding Boundaries and Sexual Abuse. Additional Proposed Treatment: • Develop a comprehensive and effective Sexual Abuse Plan. • Adopt a number of policies and measures that underpin a zero-tolerance approach to sexual abuse. •
Statutory Obligations (Registration)	CTCMPAO not taking steps to mitigate lack of oversight in TCM education	3 Possible	4 Major	12 High	Registrar, Program Managers	Current Treatment: • Registration regulations outline entry requirements. • College is working with provincial regulators to develop approval framework. Additional Proposed Treatment: • Encourage the Ministry to accredit TCM education programs. • All departments assist in outreach to students/educators

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (Registration)	The College's registration process is not transparent, objective, impartial, and fair.	2 Unlikely	4 Major	8 Medium	Registrar Program Managers	Current Treatment: • College underwent an audit of its registration practices from the Office of the Fairness Commissioner (OFC). • Recommendations from the OFC have been implemented
Statutory Obligations (QA)	Quality Assurance Program is not an effective tool for maintaining the continuing competency of members	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Current Treatment: • Small percentage of members randomly selected to submit self-assessment form. • All members are required to meet minimum professional development criteria and maintain a record of their self-assessment for a minimum of 3 years. • Members are required to declare non-compliance if they do not meet the minimum criteria. • Both random and targeted (i.e., directed based on identified criteria, non-compliance with professional development) Peer and Practice Assessment are conducted. • QA policies developed to support QA program including a review of new and existing standards of practice. • Redevelopment of the QA program under way. Will include features to support member engagement Additional Proposed Treatment: • Develop additional standards of practice. • Improved technology to support self-assessment will enable improved assurance that members are maintaining the minimum professional development requirements. •

Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (All Departments)	Lack of tools enabling members to understand, and meet, their statutory obligations.	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Current Treatment: • Record-keeping guideline developed and webinar developed. • QA Confirmation of Completion Form • Additional Proposed Treatment: • Develop working group to establish TCM specific standards of various modalities i.e. Acupuncture
Statutory Obligations (ICRC)	Complaints received are not resolved in a timely manner. Backlog of Registrar's reports.	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Current Treatment: • Complaints and Reports are triaged by risk. – Depending on the risk level of a matter, higher risk matters are expedited, whereas lower risk matters are addressed through investigation process. – Once matters are triaged, they are processed based on chronological so that resources are devoted to addressing historical matters first prior to newer matters.
Statutory Obligations (ICRC/Discipline)	Ensuring fairness to member who receives a complaint or is going through discipline.	3 Possible	3 Moderate	9 Medium	Registrar, Program Managers	Additional Proposed Treatment: • Post more information on the website for members related to: – Sexual abuse complaints and investigation process – Mandatory reporting of sexual abuse • Providing additional information to the registrant when they are self-represented. • Revamping the available information on the College website regarding the Discipline process.

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Statutory Obligations (CPMF)	The College must be able to demonstrate to the Ministry that it is meeting its statutory obligations in a clear and transparent way.	3 Possible	3 Moderate	9 Medium	All	Current Treatment: • Staff have conducted a full review of the College based on CPMF requirements and to identify where we are deficient. • Some deficiencies have been identified. Steps have been taken to either address the deficiency in the previous reporting period, or to address it in future reporting periods.
Exam	Exam security is breached	3 Possible	4 Major	12 High	Registrar Program Managers	Current Treatment: • Examination and Item-Writing Committee sign confidentiality agreement and are provided with training from ASI. • Computer-based examination developed with provincial regulators Additional Proposed Treatment: • Strict protocols should be in place for handling examination materials. • Any report of a breach of agreement will be referred to registration/ICRC for immediate action. • No hard copies or electronic copies of the examination or items are retained by the College or any other person involved in the development of the exam.
Exam	Validity of the administration of the exam sitting is challenged due to: • Hydro failure • Illness • Medical Emergency	2 Unlikely	2 Minor	4 Low	Registrar, Program Manager	Current Treatment: • Research sites to ensure stability of sites. • Procedures in place for invigilators to deal with emergencies. Additional Proposed Treatment: • Educate exam candidates on withdrawing prior to exam

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Risk Type	Risk and Description	Risk Likelihood	Risk Impact	Risk Priority	Risk Owner	Mitigation Actions
Exam	Validity of examination is challenged	2 Unlikely	2 Minor	4 Low	Registrar, Program Manager	**Current Treatment:** • Examination development and administration conducted by highly qualified vendor with extensive experience and highly credible. • Each exam sitting undergoes extensive psychometric analysis and further review by examination committee.
						Additional Proposed Treatment: • Performance of vendor is reviewed annually and any concerns addressed at that meeting. • Clear separation between non-statutory committee (Examination/Item Writing Committee) and Council members so no perceived conflict of interest. • Work with provincial counterparts to establish proper governance channels.

September 20th & 21st Council Meeting Survey

Survey Details

Open Date: 09/21/2023 11:30 AM EDT   Close Date: 10/31/2023 12:00 PM EDT

Survey Results

Question 1. The agenda and supporting materials were available in OnBoard Meetings one week prior to the meeting.

<u>Graphical Results</u>

Selection	Percent	Count
Yes	100%	7
Most of the time	0%	0
No	0%	0
Write-In	0%	0
		Total 7

Question 2. The materials were presented in a clear, succinct, and timely manner to allow meeting preparation.

Comments
Most of the time, Sometimes difficult to understand materials and what was being asked
No, EC's opinion was not fully reflected in the item 14 counsel for council, but the majority contents are the opposite information of the registrar/staff. That may not be appropriate. Staff 's feedback can be additional, but the EC's comments should be the focus.

<u>Graphical Results</u>

Selection	Percent	Count
Yes	56%	5
Most of the time	11%	1
No	11%	1
Write-In	22%	2
		Total 9

Question 3. The meeting agenda was well planned and allowed for adequate time to deal with the necessary committee business.

Comments
Most of the time, Perhaps more meetings should happen as we navigate the CPMF to ensure understanding
Most of the time, for some big projectors, more discussion time is appreciated

Graphical Results

Selection	Percent		Count
Yes		44%	4
Most of the time		33%	3
No		0%	0
Write-In		22%	2
			Total 9

Question 4. The Chair managed the meeting well allowing each member an adequate opportunity to participate in discussion and decision-making.

Comments
Most of the time, One exception in which a vote was put forward without deliberation.
Some item went to directly for voting without deliberation, that was extremely inappropriate and should be avoided. The procedure is not right.

Graphical Results

Selection	Percent		Count
Yes		62%	5
Most of the time		12%	1
No		0%	0
Write-In		25%	2
			Total 8

Question 5. The treatment of all persons was courteous, dignified and fair.

Comments
Yes, Despite difficult discussions identified concerns in a dignified way.
No, When the council has different voice, the staff do not take it with professional manner, but with too strong personal feeling. Registrar does not look into the concern of council. Hope to improve and understand different opinions are common in the workplace and should be respected with etiquette manner and concerned raised by the council needs to be reflected.

Graphical Results

Section	Percent		Count
Yes		67%	6
Most of the time		0%	0
No		11%	1
Write-In		22%	2
			Total 9

Question 6. I received sufficient information and training to participate in deliberations and decision-making.

Graphical Results

Selection	Percent		Count
Yes		71%	5
Most of the time		29%	2
No		0%	0
Write-In		0%	0
			Total 7

Question 7. I was able to access the meeting book in OnBoard Meetings, and am able to use the annotation function without difficulty. If you feel you need more support or training in OnBoard, please leave a comment.

Comments
Yes, I like that everything is in one place and the site is easy to navigate.

Graphical Results

Selection	Percent		Count
Yes		88%	7
Most of the time		0%	0
No		0%	0
Write-In		12%	1
			Total 8

Question 8. Webex Meetings and other communication devices (if any) worked well.

Comments
Most of the time, A number of members had connective issue. Is it the new platform or related to physical proximity?

Graphical Results

Selection	Percent		Count
Yes		75%	6
Most of the time		12%	1
No		0%	0
Write-In		12%	1
			Total 8

Question 9. Any additional comments?

Comments
Everything was excellent.
Sean did an excellent job presenting the CPMF and as result the College can now move forward on Council's direction!
Meeting materials need to be discussed with the president for accuracy and appropriately. EC's discussion need to be appropriately reflected in the meeting material. Council needs to be respected and feel safe to express different option, not be threatened by governance issue. All votes need to be fully deliberated before voting.
It seems to be a good idea to have extra time on the next day to finish the meeting. There is a lot of important information to discuss and debate.
In the future, if the agenda has big topic to discuss, it's better to have more time. In addition, plan 1.5 days for the meeting if it's necessary, we want to have more time to discuss the matters, and have enough time to make the decision. Thank you.

Graphical Results

Selection	Percent	Count
Write-In	100%	5
		Total 5

2024 Meeting Dates

Council Meeting Dates		
Wednesday	March	20th
Wednesday	June	14th
Wednesday	September	18th
Wednesday/Thursday	December	4th & 5th
Executive Committee Possible Dates		
Wednesday	January	24th (half day for Registrar's performance review)
Wednesday	February	21st
Wednesday	May	15th
Wednesday	August	14th
Wednesday	November	6th