



**MEETING OF THE COUNCIL OF THE COLLEGE OF
PHYSIOTHERAPISTS OF ONTARIO**

December 16-17, 2019

At

*The College Board Room
375 University Avenue, Suite 800, Toronto*

Council Member Networking Breakfast 8:30am – 9:00am

9:00 AM

Welcome

- 1 Approval of the Agenda**
Motion For Decision

- 2 Approval of the Council Meeting Minutes of September 27, 2019**
Motion For Decision

- 3 President's Report**
For Information
 - Q2 Committee Activity Summary
 - Q2 Executive Committee Report to Council
 - Councillor Conference Learnings
 - Other updates

- 4 Registrar's Report**
For Information
 - Quality Assurance Program Update

- 10:30 AM 5 Healthcare Insurance Reciprocal of Canada (HIROC)**
For Information

Presentation by Mr. Jey Sivaprasad, HIROC

- 6 Standards Review Process**
Motion For Decision

The College recently completed a comprehensive review and update of its Standards. Council is asked to consider and approve a proposed process for the ongoing review of College Standards to ensure they remain current over time



7 Framework for Approval of College Policies

For Discussion

Currently the College's governance policies do not provide clear guidance regarding the process for approving College policies. At this time, staff is asking Council to consider and provide feedback on a potential framework for the approval of College policies. The feedback will help staff refine the framework for Council's approval at a future meeting.

8 Topics for Council Discussion: Nominations for Executive Election and In Camera Minutes

For Discussion

During the Bylaw and Governance Policy review, the Executive Committee identified two topics that require Council discussion to assist with the refinement of the corresponding Bylaw. Council is asked to consider these two topics and provide direction to staff.

9 Program Area Quarterly Report

For Information

Council will be provided with an overview of the College's operational activities

10 Digital Practice Workshop

Group Workshop

Various professions and practice settings have been using digital practice or telepractice for years. Over the last year, the College has noticed a sharp increase in calls and emails to our practice advisory service from physiotherapists who are looking to move some or all of their practice in this direction.

Council will be asked to consider a number of different practice scenarios in order to help assess whether our current standards, tools and resources are fit for purpose or if additional guidance to members of the public and the profession is warranted.



99:00 AM

December 17, 2019

11 Honourary Membership Designation

Motion For Decision

In March 2019, Council agreed to explore the idea of creating an honorary membership designation. The exploratory work has been completed and additional work has been done to develop a corresponding honorary membership by-law. The Executive Committee is recommending that Council create a by-law to define an honorary membership designation and consider the proposed draft by-law that has been developed.

12 Registration Fee Reduction: Final Approval

Motion For Decision

The by-law changes for a registration fee reduction of \$20 have been circulated to the membership for consultation, and results so far have been mostly supportive. The Executive Committee recommends that Council approve the by-law changes to reduce registration fees to \$575 starting in the 2020-2021 registration year.

13 Q2 Financial Report

For Information

14 Strategic Planning

For Direction

In preparation for the next round of strategic planning in 2020-21, Council is asked to consider and provide direction on a process to assist Council to reimagine the College's mission and vision and establish a new strategic plan. The proposed process is based on issues Councillors have raised in the past two years.

15 Pre-Strategic Planning Brainstorm and Information Session

For Discussion

Council will be asked to participate in a workshop intended to identify information that Councillors will find useful to support the proposed strategic planning initiative.



16 Ministry of Health College Performance Measurement Framework
For Information

The Ministry of Health is developing a college Performance Measurement Framework which has the potential to impact the kinds of information that the College is required to collect and report on.

17 Evaluation of the Audit: Recommendation to Council
Motion For Decision

The Finance Committee has conducted an evaluation of the 2018-2019 audit and are recommending that Hilborn LLP be reappointed as the College's auditing firm for the 2019-2020 fiscal audit.

18 Notice of Motion: Consent
Motion For Decision

19 Members' Motion/s

20 Motion to go in camera pursuant to section 7(2)(b) of the Health Professions
Motion For Decision

Adjournment

Future Council Meeting Dates:

- March 23 and 24, 2020
- June 25 and 26, 2020
- September 21 and 22, 2020
- December 17 and 18, 2020



COLLEGE OF
PHYSIOTHERAPISTS
of ONTARIO

ORDRE DES
PHYSIOTHÉRAPEUTES
de l'ONTARIO

Motion No.: 1.0

**Council Meeting
December 16-17, 2019**

Agenda #1: Approval of the Agenda

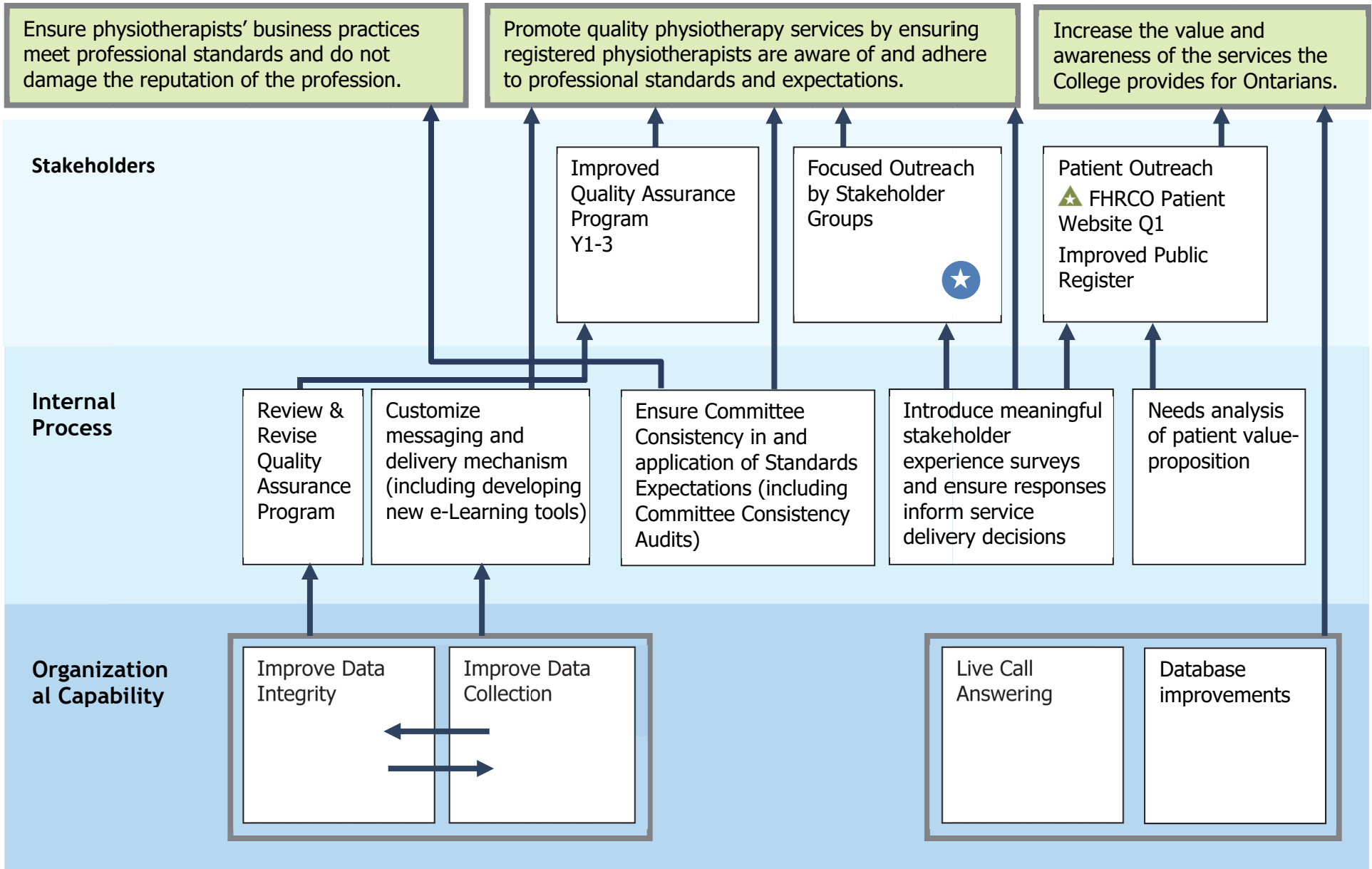
It is moved by

and seconded by

that:

the agenda be accepted with the possibility for changes to the order of items to address time constraints.

Strategy Map 2017 – 2021



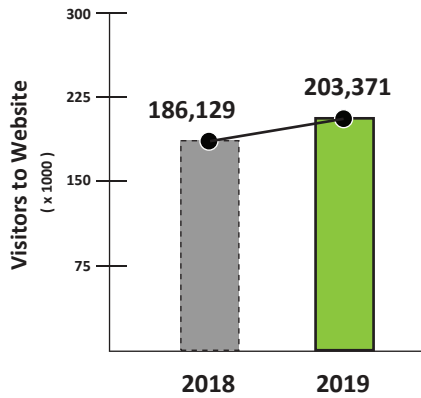
- ▲ Ongoing/External
- ★ Y1: Supervisors, Students, Educators
- ★ Y2-3: Internationally Educated PTs, Employers, Insurers and Registration Ceremony for new graduates

College Dashboard

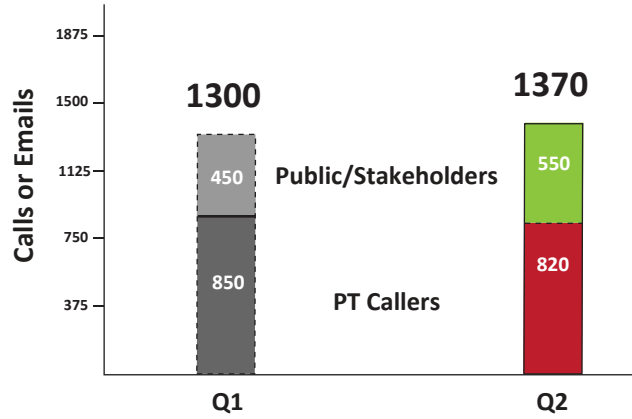
(Q2) JULY—SEPTEMBER 2019

Strategic

Stakeholder Awareness Q2



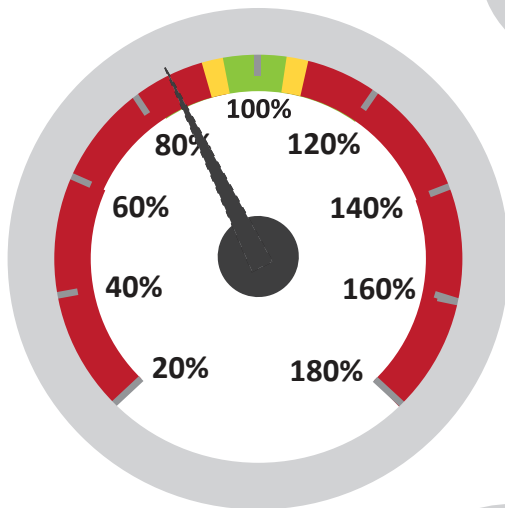
Practice Advice



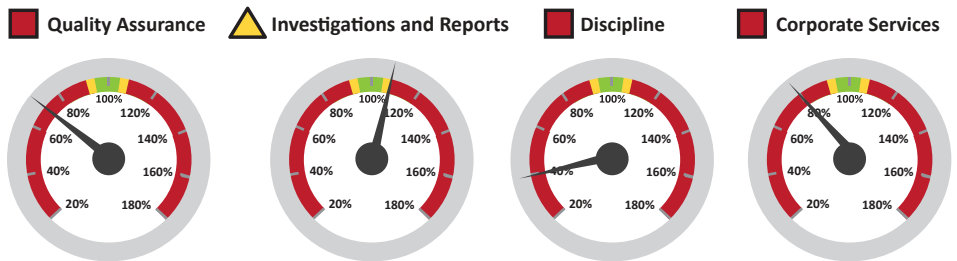
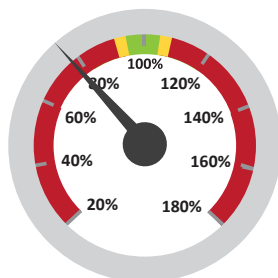
Operational

Financial Accountability

Overall 84% Q2



All Committees



	Target	Q2
Human Resource Excellence		
Absenteeism	< 1.7 days per employee	●
Turnover	Green ≤ 2 Amber > 3 ≤ 5	▲
Stat Program Performance		
ICRC	Met all Statutory timelines	■
Quality Management	Met all Statutory timelines	n/a
Registration	Met all Statutory timelines	●

Dashboard Explanatory Notes, Q1 2019-2020

OPERATIONAL INDICATORS

What We Measure	What this Demonstrates and How	Quarterly Results
<p>Financial Accountability Ratio of actual spending to budgeted spending</p>	<p>To demonstrate sound financial management by monitoring what was spent compared to what was budgeted.</p> <p>Target = Within 95% each quarter</p>	<p>Detailed explanations are contained in the quarterly statement of operations.</p>
<p>Human Resource Excellence Composite measure of absenteeism and turnover rates</p>	<p>To provide an indication of overall organizational health.</p> <p>Absenteeism and turnover rates serve as proxies for good recruiting and performance management policies.</p> <p>Target = Absenteeism and turnover rates that are within industry standard based on the Conference Board of Canada</p>	<p><u>Absenteeism</u>: on target.</p> <p><u>Turnover</u>: In the past 12 month's three employees left. One to pursue another opportunity and two were involuntary.</p>
<p>Meeting Statutory Obligations: Composite measure of the statutory obligations of all three committees</p>	<p>To monitor performance of core statutory duties. Specifically, whether each committee meets the specific timeline and notice requirements of the RHPA.</p> <p>Target:</p> <p>QA % PTs provided an opportunity to make a submission</p> <p>Reg % applicants provided 30 days to make a submission % individuals requiring notice of right to appeal were notified</p> <p>ICRC % complaints closed within 150 days <u>or with notice of delay</u> % complaints and reports given 14-day notice</p>	<p><u>Quality Assurance</u>: program on hold, no cases reviewed.</p> <p><u>Registration</u>: on target.</p> <p><u>Inquiries, Complaints and Reports Committee</u>: This measure requires 100% compliance. The extended delay in one case was due to the committee negotiating an undertaking with the physiotherapist which took longer than anticipated.</p>

Dashboard Explanatory Notes, Q1 2019-2020

STRATEGIC INDICATORS

What We Measure	What this Demonstrates and How	Quarterly Results
<p>Stakeholder Awareness Hits to College Resources</p>	<p>To monitor whether our communications efforts effectively bring people to our resources.</p> <p>We assume that if there are more visits to our resources, we can improve awareness of standards and other requirements.</p> <p>Target = Increase in the number of times College resources are accessed year over year</p>	<p>Hits to College Resources: 9.2% increase</p> <p>The increase in traffic is most likely due to the fact that organic searches leading to our website increased by 34% in 2019 for this period. Referrals from social media also increased. The increase in organic searches reflects increased awareness for the brand which could be attributed to outreach efforts such as in person events, social media presence, students returning to school, better search engine optimization, etc. Also released was a refreshed Ethics E-Learning Module during this time which received good traffic.</p>
<p>Practice Advice Increased number of calls over time to demonstrate improved stakeholder value</p>	<p>We assume that calls to practice advice reflect access to a valued service. Accordingly, increased call volume should indicate increase value to stakeholders.</p> <p>Target = increase from previous quarter</p>	<p>PT Callers: 5% decrease Public/Stakeholders: 5% increase</p> <p>Total calls have increased by 5%</p> <p>Top advisory trends:</p> <ul style="list-style-type: none"> • Practice Management • Patient Care • Professional Obligations • Record Keeping • Use of PTAs, Students etc.



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Motion No.: 2.0

**Council Meeting
December 16-17, 2019**

Agenda #2: Approval of the Council Meeting Minutes of September 27, 2019

It is moved by

and seconded by

that:

the Council meeting minutes of September 27, 2019, including the in-camera minutes,
be approved.



**MEETING OF THE COUNCIL OF THE COLLEGE OF
PHYSIOTHERAPISTS OF ONTARIO**

MINUTES

September 27, 2019

At

The College Board Room

375 University Avenue, Suite 800, Toronto

Attendees:

Mr. Darryn Mandel, President
Ms. Theresa Stevens
Mr. Ronald Bourret
Ms. Jane Darville
Mr. Martin Bilodeau
Mr. Gary Rehan
Mr. Mark Ruggiero
Mr. Kenneth Moreau

Ms. Janet Law
Ms. Nicole Graham
Ms. Sharee Mandel
Mr. Tyrone Skanes
Ms. Katie Schulz
Ms. Jennifer Dolling
Ms. Kathleen Norman

Staff:

Mr. Rod Hamilton
Ms. Anita Ashton
Ms. Joyce Huang
Ms. Tejia Bain
Ms. Lisa Pretty
Ms. Elicia Persaud

Recorder: Ms. Elicia Persaud

Guests: Sarah Kibaalya, Senior Policy Analyst

9:00 AM

Welcome

**1.0 Motion Approval of the Agenda
1.0**

It was moved by Ms. Nicole Graham and seconded by Mr. Mark Ruggiero that:

the agenda be accepted with the possibility for changes to the order of items to address time constraints.

CARRIED.

**2.0 Motion Approval of the Council Meeting Minutes of June 24-25, 2019
2.0**

It was moved by Ms. Sharee Mandel and seconded by Mr. Tyrone Skanes that:

the Council meeting minutes of June 24-25, 2019 be approved with the amendment to the Chair of the Patient Relations Committee.

CARRIED.



3.0 Registrar's Report

Mr. Rod Hamilton, Registrar, provided an update on operational and governance activities during the past quarter.

Council discussed the concept of delisting as a potential emerging issue and identified more information was needed. The President and Registrar will work together to determine next steps.

It was suggested that one method would be to in future remind universities that when they consider academic appointees to the College council, that they consider the importance of presenting diverse candidates.

4.0 Amendment to Committee Slate **Motion 4.0**

It was moved by Mr. Mark Ruggiero and seconded by Ms. Nicole Graham that:

the Council appoint Ms. Jane Darville to the Inquiries, Complaints and Reports Committee (ICRC) and adding Ms. Jennifer Dolling to the Patient Relations Committee.

CARRIED.

5.0 Q1 Financial Report

The Q1 Financial report was accepted; there was one recommendation to change abbreviations to include full terminology.

6.0 How to Access the College's Reserves **Motion 6.0**

It was moved by Mr. Tyrone Skanes and seconded by Mr. Martin Bilodeau that:

Council approves the process on how to access the College's Reserves.

CARRIED.

7.0 Registration Fee Reduction **Motion 7.0**

It was moved by Mr. Kenneth Moreau and seconded by Mr. Mark Ruggiero that:

Council approves in principle that the fees for a certificate of registration authorizing independent practice described in sections 8.4(1b) and 8.4(2a) of the College By-laws be amended from \$595



to \$575 to take effect on February 1, 2020 for the new registration year of 2020-2021.

CARRIED.

8.0 Financial Management Training

Mr. Bill Stephenson from the Chartered Professional Accountants Canada presented a financial literacy overview for non-profit directors.

9.0 Pro-rated Fees/Fee Credits Impact Assessment

As requested by Council, staff provided an update on the budgetary and operational impact of the pro-rated fees and fee credit policies that were implemented in April 2014.

10.0 Motion Use of Fee Credits for other online fees
10.0

It was moved by Mr. Tyrone Skanes and seconded by Mr. Gary Rehan that:

Council approves the use of fee credits for the following:

- Online requests (Letter of professional standing and wall certificate)
- Renewal fee
- Application fees
- Initial registration fee
- Late renewal fee

CARRIED.

11.0 QA Program Update and Decisions

Quality Assurance Program Review – Project Update: Remote Assessment Pilot Test and Tool Development

Council was provided with an update on the Quality Assurance Program pilot test process to date, a summary of feedback from registrants and assessors, and the next steps for the project.

11.1 Quality Assurance Program Review – Length of the Remote Assessment

Council discussed the circumstances in which a registrant may require additional time to complete the remote assessment and felt confident that some additional time would be acceptable.



Motion 11.1

It was moved by Mr. Tyrone Skanes and seconded by Ms. Jennifer Dolling that:

Council confirm it is acceptable for the remote assessment behaviour-based interview to be longer than one hour for some registrants.

CARRIED.

11.2 Motion to go in camera pursuant to section 7(2)(b) of the Health Professions Procedural Code

Motion 11.2

It was moved by Ms. Sharee Mandel and seconded by Mr. Kenneth Moreau that:

Council move in camera pursuant to section 7(2) of the Health Professions Procedural Code.

CARRIED.

Council moved in camera at 1:30 p.m. and moved back into the public portion of the meeting at 2:28 p.m.

Mr. Kenneth Moreau left the boardroom at 2:32 p.m.

11.4 Quality Assurance Program Review – Remote Assessment Record Review Component

It was noted that the record keeping component does not impact the cut score or determine if a registrant will continue to the onsite assessment. With this in mind council felt the change to the checklist approach was a reasonable alternative as a self audit.

Motion 11.4

It was moved by Ms. Kathleen Norman and seconded by Ms. Nicole Graham that:

Council approve the recommendation that for the record review component of the remote assessment, instead of the registrant submitting one de-identified record to the College for the assessor to review, that the registrant completes a self-review of one record using the Record Keeping Standard Checklist.

CARRIED.

11.3 Quality Assurance Program Review – Pilot Test Participants Who Could Not Complete the Record Review Component

Motion 11.3

It was moved by Ms. Sharee Mandel and seconded by Ms. Kathleen Norman that:



Council approve the recommendation to waive the record review component of the remote assessment for four PTs whose employer declined to provide copies of records to the College but submit the record self review of one record using the record keeping checklist.

CARRIED.

Ms. Theresa Stevens and Mr. Ronald Bourret left the Council chambers at 2:54 p.m.

12.0 Update on Performance Measurement Framework

Mr. Thomas Custers, Acting Manger, Strategic Planning, Policy and French Language Services, provided an update on the Ministry of Health Performance Measurement Framework and next steps in the development process.

11.5 Quality Assurance Program Review – On-site Assessment Written Policies Review Component

Motion 11.5

It was moved by Mr. Gary Rehan and seconded by Ms. Sharee Mandel that:

Council approve the recommendation that for the written policies review component of the on-site assessment, instead of the registrant submitting the policies to the College for the assessor to review, that the registrant completes a self-review of their policies using the checklists created for this review.

CARRIED.

11.6 Quality Assurance Program Review – Revised Project Timeline and Target Assessment Volume

Motion 11.6

It was moved by Ms. Jennifer Dolling and seconded by Ms. Nicole Graham that:

Council approve a reduction in the target number of assessments for the current fiscal year from the previous target of 794 to 250.

CARRIED.

Mr. Gary Rehan left the boardroom at 4:00 p.m.

13.0 President's Report

No report was provided due to time constraints.

14.0 Members' Motion/s

Mr. Gary Rehan added a member's motion on the development of a Consent Standard.



Adjournment

It was moved by Mr. Tyrone Skanes and Ms. Jennifer Dolling that the meeting be adjourned.

The meeting was adjourned at 4:09 p.m.

CARRIED.

Mr. Darryn Mandel, President

DRAFT

**REPORT TO COUNCIL- COMMITTEE ACTIVITY SUMMARY
(Q2) July, August, September**

	# of Meetings		# of Cases Considered	# of Appeal Decisions Received (HPARB or Divisional Court)	Type of Outcomes		Q2 2019/20
	F2F	Tel					
Registration	1	1	4 <i>(one of the cases is still ongoing pending additional information)</i>	1 <i>(has been withdrawn)</i>	Certificate Granted (with or without terms, conditions and limitations)		2
					Certificate Denied		1
ICRC	2	0	20	5	Direction provided to staff (case ongoing)		6
					Investigator appointed		1
					Referral to Discipline		2
					Incapacity Inquiry or Referral to Fitness to Practice		0
					Other decision		11
Quality Management	0	0	0	0	Practice Assessment	Successfully Completed (with or without recommendations)	0
						Practice Enhancement Required	0
					Practice Enhancement	Successfully Completed	0
						Second Practice Enhancement or Reassessment Required	0
						Practice Enhancement Rescinded after Submission	0
					Other Decision		0
					Requests for Deferral or Exemption	Granted	0
						Denied	0
Discipline ** deliberation days not included**	3	0	2	1	Hearings Pending		4
					Hearing Outcomes	Revoked	0
						Suspended (with or without terms, conditions and limitations)	1
						Terms, Conditions and Limitations only	0
						Other Adjourned indefinitely In progress	2
Fitness to Practice	0	0	0	0	Hearings Pending		0
					Hearing Outcomes	Revoked	0
						Suspended	0
						Terms, Conditions and Limitations	0
Patient Relations	0	0	0	0	Request for Funding	Granted	0
						Denied	0

**REPORT TO COUNCIL- COMMITTEE ACTIVITY SUMMARY
(Q2) July, August, September**

ISSUES AND TRENDS

Registration – 75% of the cases reviewed by the Committee were to determine compliance with non-exemptible good character requirement.

Inquiries, Complaints and Reports Committee – Nothing to report

Quality Assurance – During this period, the QA Committee did not meet due to the on-going work of the remote assessment pilot test.

Discipline and Fitness to Practice – Nothing to report

Patient Relations – Nothing to report



EXECUTIVE COMMITTEE REPORT TO COUNCIL

Date: December 16-17, 2019

Committee Chair: Mr. Darryn Mandel, President

Committee Members: Ms. Theresa Stevens
Mr. Gary Rehan
Ms. Sharee Mandel
Mr. Tyrone Skanes

Support Staff: Mr. Rod Hamilton
Ms. Elicia Persaud

Meetings:

Meetings held since last report:

- October 17, 2019
- November 27, 2019

OCTOBER 17, 2019 EXECUTIVE COMMITTEE MEETING

1. Governance and By-law Policy Review

The Executive Committee provided detailed feedback about section 3.21 – Validity of Elections and Inquiries to Part 8 Members Obligations, Fees General 8.6 (2)(i) of the By-laws.

NOVEMBER 27, 2019 EXECUTIVE COMMITTEE MEETING

1. Honourary Membership By-law

The Executive Committee recommended that Council consider and provide direction on the draft honorary membership by-law.

2. Registration Fee Reduction: Final Approval

The Executive Committee recommended to Council that the fees for a certificate of registration authorizing independent practice described in sections 8.4(1b) and 8.4(2a) of the College By-laws be amended from \$595 to \$575 to take effect starting in the 2020-2021 registration year.



3. Framework for Approval of College Policies

The Executive Committee was in support of the proposed framework for approving College policies with the amendment that policies should be approved by Council.

4. Strategic Planning

The Executive Committee was in support of the proposed Strategic Planning process.

5. Standards Review Framework

The Executive Committee recommended that Council approve the proposed framework with revisions for the ongoing review of College Standards.

6. Members Motion: Standard on Consent

The Executive Committee recommended that Council consider the notice of motion to for the Consent Standard.

7. Entry to Practice Scoping Review: Report and Next Steps

The Executive Committee deferred this item to the next Executive meeting to ensure adequate time is given to review the final report.

8. Evaluation of the Audit: Recommendation to Council

The Executive Committee supported the Finance Committee's recommendation that Council should reappoint Hilborn LLP as the College's auditing firm for the 2019-2020 fiscal audit.



Councillor Key Learning

Submitted by: Theresa Stevens

Name of Conference: CLEAR Annual Educational Conference

Location and Date: Minneapolis Minnesota, Sept 18 – 21, 2019

Conference website and URL link: <https://www.clearhq.org/events>

My top three key learnings from the conference:

My key learnings from the keynote presentation: **“Future Focused Governance for the 21st Century Regulator”**

1. The purpose of the board is to build tomorrow’s organization out of today’s.
 - Most Boards talk about the past, we need to talk about the future. When we drive to meetings, we spend 90% of our time looking forwards, and 10% of our time looking backwards in order to ensure we get safely to our destination, but when we get to the meeting, we do the opposite. Our job as governors is to set the course and then navigate to ensure we arrive. Translated, it means we need to set up the systems by which organizations are directed and controlled.
 - We should deal with strategic items up front (forward-thinking) and present historic information last (rear view mirror)
 - Things are changing so quickly that we need to have a tolerance for failure – fail fast, fail cheap.
 - Effective Boards are:
 - Forward-looking
 - Consensus-based
 - Decision-making
 - The whole is greater than the sum of the individuals

Westlake’s FICKS Governance Framework

Function	Focus	Why
F – Future Focus & Strategy	60%	Create Value
I – Issues, risk & Opportunity		
C – Compliance and Solvency	30%	Preserve Value
K – KPI Monitoring and Holding Management to Account		
S – Succession & Skills	10%	Ensure Value



3. We need the depth of experience that management brings and the breadth of experience that board members (outside the industry) bring.

Requirements of ALL Board Members

4. Independent, strategic perspective- healthy disagreements
5. Integrity
6. Openness
7. Courage
8. Collective responsibility
9. Boardroom confidentiality
10. Time
 - We are badly wired for making good decisions. We need to stop and think, slow down and listen to different perspectives to overcome biases.
 - Dissent, not disloyalty. If you can't agree you have 3 options:
 - Persuade the others to your view
 - Vote against...and get over it
 - If you can't get over it, get off (resign)

How these learnings will help me in my role as a councillor and/or committee member:

1. I will ground my decisions in future focus rather than the past and when developing agendas for meetings I chair, I will place strategic, future focused items at the beginning of the meeting.
2. I will continue to encourage more healthy debate and opposing views in meetings I chair because we do need to tap into the breadth of our experience.
3. I will ask myself after every meeting, "Is the organization better off now than before we met?"

Additional Comments:

As I listened to this engaging presentation, I was proud to be a member of our Council. We are doing most of what the speaker identified as best practice in governance. This was my second CLEAR conference and I believe that it offers a lot of educational value to councillors in terms of worldwide trends in regulation and best practices. Thank you for allowing me to attend this very worthwhile conference.



Councillor Key Learning

Submitted by: Janet Law_

Name of Conference: __Canadian Network Associations of Regulators

Location and Date: Quebec City, Oct 29-30, 2019

Conference website and URLink

<https://cnar.member365.com/publicFr/form/index/820452d8cb72f39ed2316065a215ae7b134aae01>

My top three key learnings from the conference:

1. Institute measures to ensure quality assurance test is defensible - the test must be fair, reliable and valid, and meet independent test standard, and can withstand legal scrutiny. Best practices included publishing the pass rate and how cut score is established, setting cut score prior to the exam, provision of study guide but NOT publishing the actual questions. The speaker also provided steps for defensible exam (“inputs”) – will bring photocopy of the handout

2. Recognize our (unconscious) bias – we all have inherent bias, and they can affect how we perceive investigations, credibility of the assessment or witness, reports from assessors etc, and have impact on the decision we make decision in our regulatory work. Examples of types of bias include affirmative bias (e.g. not from own PT school and may not have received comprehensive knowledge I have); gender bias (do we support females to take on board member roles?). The speaker advised us to take these measures to mitigate the bias: be aware of them, analyse past decisions (to see if there are clusters), ongoing and targeted training, getting feedback, and slow down.

3. Be prepared for the potential role of Artificial Intelligence in regulatory settings – Potential Artificial Intelligence use are stratifying risk factors, automate licensure requirements, enhance decision consistence. On the other hand, with AI being used in medical devices and other innovations, there are questions on role of regulators in the form of policy e.g. approval process of the quality and safety of devices, data bias in software development

How these learnings will help me in my role as a councillor and/or committee member:

1. The session provided valuable info for my role in QM committee when we review results from on-site assessment.

2. This reminds me to have an open mind and not having a decision made prior to deliberation of a case, or council discussion for a decision. Further, I also recognized that, at discipline hearing, I cannot put my own magnitude to others and that my own experience and emotion is different from people who lived through the experience.

3. I have not thought of the role of AI and how it can impact the profession of physiotherapy. As regulators, we need to keep pace with change of practice and technology. This talk sharpens my understanding and the relevance to our work at the Council.



Additional Comments:

1. Multiple speakers mentioned bias and this website was referenced a couple of times too.

Take the test and learn more about this topic

<https://implicit.harvard.edu/implicit/canada/takeatest.html>

2. Truth and Reconciliation – Ontario College of Teachers presented on the collaboration with Aboriginal groups



Councillor Key Learning

Submitted by: _

Ken Moreau

Name of Conference:

CNAR

Location and Date:

Quebec City

Conference website and URL link:

CNAR Quebec 2019

My top three key learnings from the conference:

1. There is a lot of shaming in Health Care....
2. Recent judicial decisions have broad implications on discipline and process work of the college
3. AI and technology will impact our role as regulators. It is critical to be aware of there impacts and how to work with them

How these learnings will help me in my role as a councillor and/or committee member:

1. Don't shame people as a member of Discipline
2. Books of authority should reference broader judicial decisions and include comprehensive applications as they impact panel decisions. As a member of the panel, we should not be afraid to ask if comfortable is comfortable with the range of authorities provided in the context of Supreme Court decisions
3. College technology projects are extremely complex and challenging. Managing the project and outcomes requires clear understanding of measurement tools and yardsticks- and knowing when things are "going south" and when tough decisions need to be made.

Additional Comments:

There was a broad range of sessions ranging from "umbrella oversight" to Truth and Reconciliation impacts on the professions. I was particularly interested in the potential for oversight mechanisms to be put in place to oversee the respective colleges such as in BC and Australia – though hypothetical in Ontario at this time. This does speak to the need for mature, responsible management and oversight within Colleges themselves.

Agenda #5

Healthcare Insurance Reciprocal of Canada (HIROC)

Presentation by

Mr. Jey Sivaprasad, HIROC



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de l'ONTARIO

Motion No.: 6.0

**Council Meeting
December 16-17, 2019**

Agenda #6: Standards Review Process

It is moved by

and seconded by

that:

Council approve the proposed process for the ongoing review of College Standards to ensure they remain current over time.

Meeting Date:	December 16-17, 2019
Agenda Item #:	6
Issue:	Standards Review Process
Submitted by:	Joyce Huang, Strategic Projects and Policy Manager

Issue:

The College recently completed a comprehensive review and update of its Standards. Council is asked to consider and approve a proposed process for the ongoing review of College Standards to ensure they remain current over time.

Background:

The College's governance policies require that College Standards are reviewed periodically in order to ensure that they remain relevant in a changing practice and legal environment. In addition to the periodic review, while Standards are in effect, they are also monitored to assess whether any emerging issues suggest a need for an expedited review.¹

In 2013, as one of its strategic tactics, the College initiated a comprehensive review of its Standards. First, the College conducted a comprehensive scan of the practice environment to identify trends and issues, then assessed the existing Standards to determine whether they were fit-for-purpose, to come up with a plan to review and update all College Standards. Then, the Standards were reviewed and updated starting in 2015, and this work was completed in 2018.

Now that the comprehensive Standards review is complete, and the updated Standards are in force, staff are proposing a process for the ongoing monitoring and review of Standards to ensure they remain current and responsive to emerging issues over time.

Executive Committee Consideration and Feedback:

The Executive Committee considered earlier iterations of a proposed process for the ongoing review of College Standards and provided feedback to help further refine the process.

In September 2019, the Executive Committee was asked to consider a proposed Standards review process where Standards will be reviewed in order based on which Standard has been in force the longest without having been reviewed.

¹ Governance Policy 6.2: College Policy Review Schedule.

The Executive Committee was in support of the concept of reviewing the Standards in order of when they were last reviewed. The Committee also discussed whether it is necessary to conduct a comprehensive review each time (which typically involves an environmental scan, literature review, and stakeholder consultation), considering the amount of resource required for that level of review. The Committee suggested that perhaps a more focused review, based on emerging issues identified from the College's internal data, could be sufficient. With this more focused review, it would be possible for staff to review several Standards each year.

In November 2019, the Executive Committee considered a revised process for the ongoing review of Standards which incorporates their earlier feedback. The revised process is based on a two-year review cycle, during which all Standards would be reviewed in order based on which Standard has been in force the longest without having been reviewed. The review would involve collecting internal College data to identify any emerging issues or gaps in the current Standard. If issues or gaps are identified, changes to the Standard would be proposed for Council approval. If no issues or gaps are identified, Council would be asked to re-affirm the existing Standard.

The Executive Committee was generally in support of this approach but noted again the need to consider the workload for Council and the number of Standards that Council will need to consider each year. The Executive Committee suggested that the goal of the ongoing review process should be to ensure that Standards are reviewed at least once every three years and ensure that any emerging issues in relation to Standards will be reviewed and resolved as they arise.

The Executive Committee recommended that Council consider and approve the proposed Standards review process with additional revisions based on their feedback.

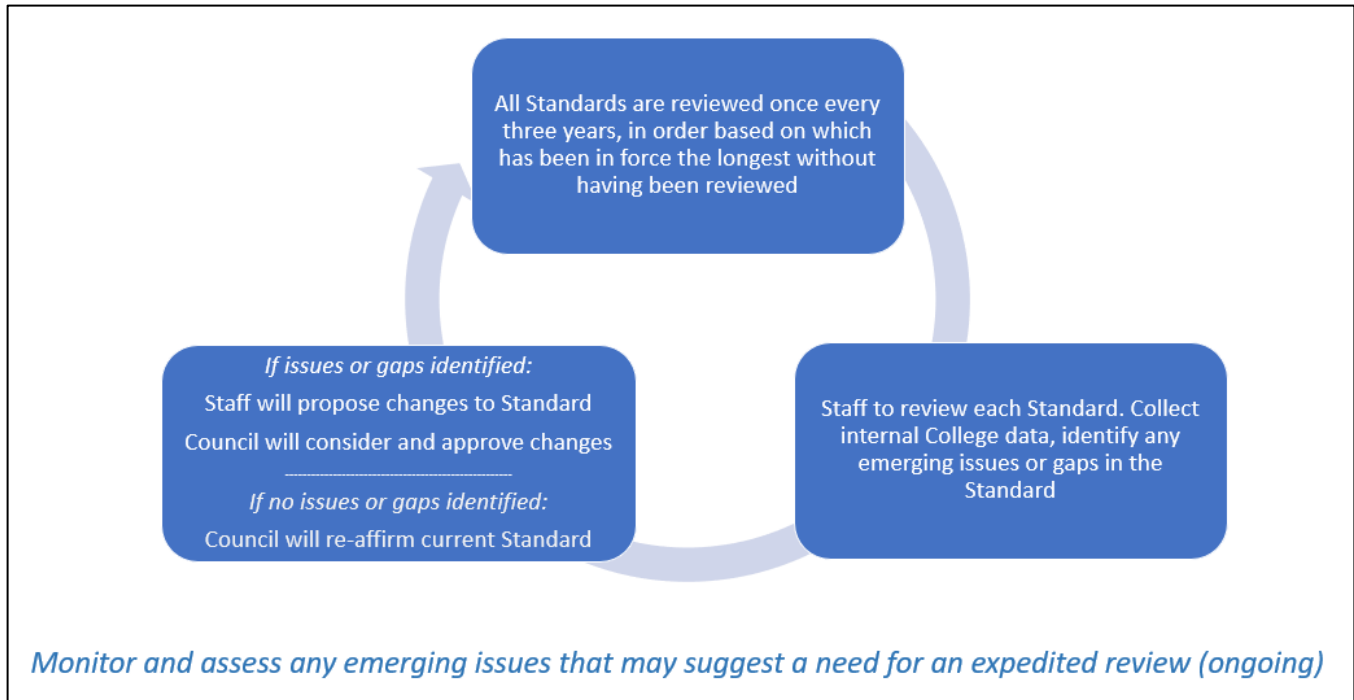
Proposed Standards Review Process:

Based on previous feedback from the Executive Committee, the following Standards review process is being proposed:

- All Standards will be reviewed over a three-year review cycle, in an order based on which Standard has been in force the longest without having been reviewed.
- Staff will review each Standard by collecting internal College data to identify any emerging issues or gaps in the current Standard.
- If issues or gaps are identified, staff would propose changes to the Standard for Council's consideration and approval.
- If no issues or gaps are identified, Council would be asked to re-affirm the current Standard.

In addition to the periodic review of the Standards as described above, there will also be ongoing monitoring and assessment of any emerging issues that may suggest a need for an expedited review.

The following diagram is a graphical depiction of the proposed Standards review process.



It was also recognized that there may be a need to periodically conduct a scan of practice and the broader environment to identify any significant changes and emerging trends, and to collect feedback from stakeholders, to help assess the relevance and utility of the College’s Standards. It is suggested that when the need for this type of broader review arises, that it would be undertaken as a strategic activity separate from the ongoing Standards review process.

Decision Sought:

That Council approve the proposed process for the ongoing review of College Standards to ensure they remain current over time.

Attachments:

- Appendix 1: List of Current Standards and Date Last Reviewed

Appendix 1: List of Current Standards and Date Last Reviewed

Title of Standard	Date Last Reviewed
Code of Ethics	March 2013
Controlled Acts and Restricted Activities Standard	June 2016
Working with Physiotherapist Assistants Standard	June 2016
Fees, Billing and Accounts Standard	December 2016
Boundaries and Sexual Abuse Standard	June 2017
Conflict of Interest Standard	June 2017
Restricted Titles, Credentials and Specialty Designations Standard	June 2017
Supervision Standard	June 2017
Collaborative Care Standard	September 2017
Infection Control and Equipment Maintenance Standard	September 2017
Record Keeping Standard	September 2017
Providing or Refusing Care Standard	March 2018
Advertising Standard	December 2018

Meeting Date:	December 16-17, 2019
Agenda Item #:	7
Issue:	Framework for Approval of College Policies
Submitted by:	Joyce Huang, Strategic Projects and Policy Manager

Issue:

Currently the College’s governance policies do not provide clear guidance regarding the process for approving College policies. At this time, staff is asking Council to consider and provide feedback on a potential framework for the approval of College policies. The feedback will help staff refine the framework for Council’s approval at a future meeting.

Background:

In early 2019, the Executive Committee and Council identified the need to review and update the College’s bylaws and governance policies, and directed staff to initiate a comprehensive review. At the same time, it was also recognized that the College’s program and Committee policies will also require review and update, and this work would be conducted separately. Program and Committee policies typically contain direction or criteria that provide guidance for program work and work conducted at the Committee level. Staff have begun planning for this review.

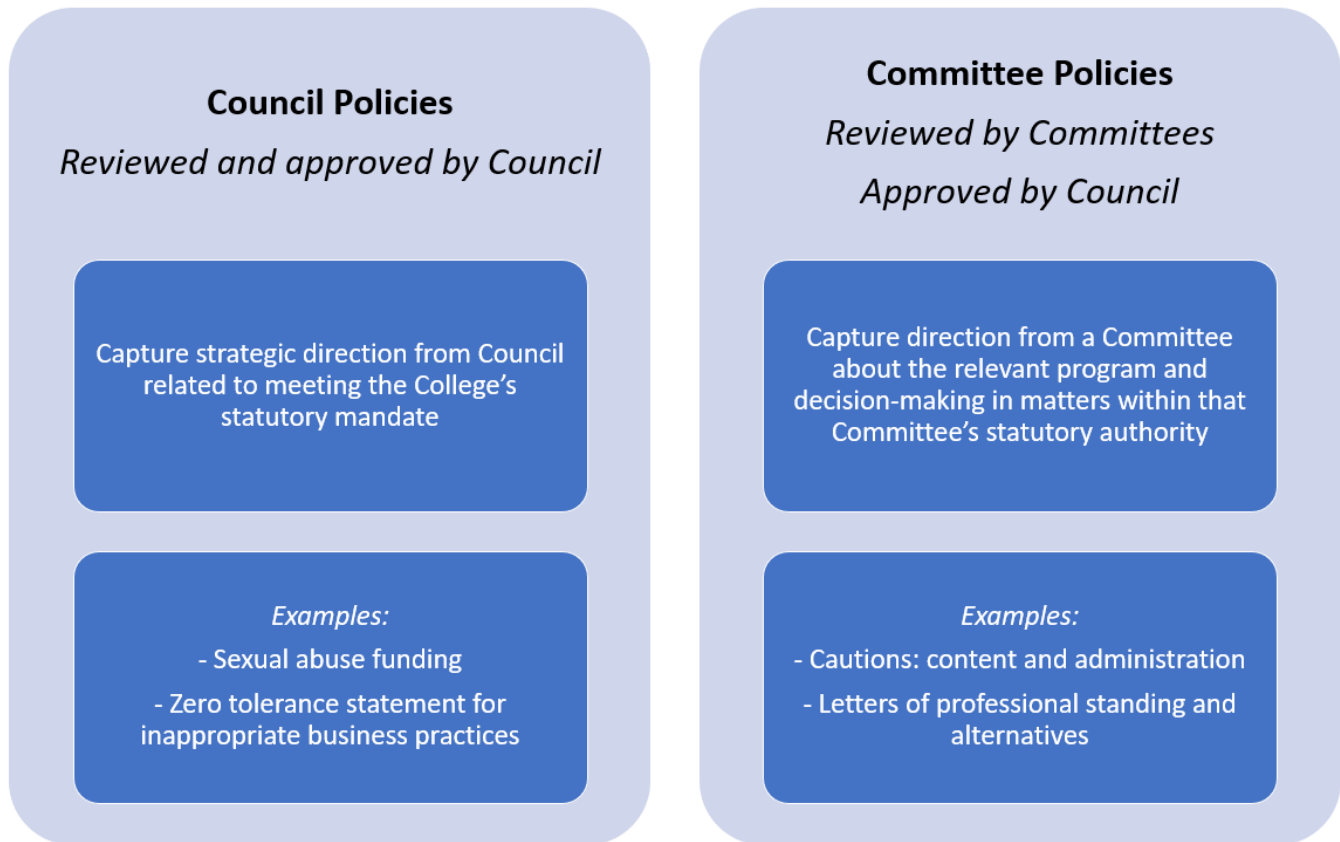
In the past, Committees had a duty to prepare and recommend policies or recommend changes to existing policies and submit them to Council for approval where necessary. Several years ago, Council reviewed and revised the terms of reference for College Committees including a change where Committees will not have an active role in policy development. This change would suggest that policies would be reviewed and approved by Council, although this is not explicitly stated in the current governance policy describing the role of Council.¹ This lack of clarity has been noted so that it can be addressed as part of the comprehensive bylaw and governance review.

In the interim, as staff began planning for a College policy review, a need has been identified to develop a framework that will help staff determine the appropriate approval process for the policies. Given the volume of policies that need to be reviewed and approved, it may not be feasible for all of them to be reviewed by Council. An alternative approach where the work is shared between Council and Committees could be one way to manage the workload.

¹ In Governance Policy 1.1: Role of Council, one of Council’s specific responsibilities is to “Review and approve College governance policies, regulations, by-laws, standards, guidelines and position statements.” It is not clear that this would include program and Committee policies.

Potential Framework for Review and Approval of College Policies:

Based on a high-level assessment of the types of policies that need review, and the nature of those policies, staff have identified a potential framework for the review and approval of College policies going forward.



The Executive Committee considered an earlier iteration of the framework and was generally supportive of the framework on a conceptual level. The Executive Committee also noted that while Committees should have a role in providing input and reviewing policies relevant to that Committee, that it should be Council who ultimately approves all of the policies.

Council is asked to consider and provide feedback on this framework.

Other items for consideration and feedback:

In addition to the general framework for the review and approval of policies by Council and Committees, it was noted that some other items would also need to be considered and defined. Council is asked to consider and provide feedback on the items below:

Roles of Council, Committees and staff in the policy development process

In light of the Executive Committee's feedback about the respective role of Council and Committees in the review and approval of policies, the roles in the development and approval of College policies could be described as the following:

- *The role of Council is to:*
 - Identify the need for, and provide direction and input on the development of Council policies
 - Review and approve Council policies
 - Consider and approve policies reviewed by Committees
- *The role of Committees is to:*
 - Identify the need for, and provide direction and input on the development of Committee policies
 - Review Committee policies and recommend them to Council for approval
- *The role of staff is to:*
 - Identify the need for the development of Council or Committee policies, where appropriate
 - Undertake the development of Council and Committee policies under the direction of and with input from Council and Committees respectively

Council is asked to consider whether these role descriptions are appropriate in light of the review and approval process described in the framework.

Role of statutory vs non-statutory Committees

The policy approval framework described above suggests that Committees will review policies relevant to their program area and decision-making authority. However, there may be a need to consider whether that same approach should be applied to both statutory and non-statutory Committees.

Most of the College's committees are statutorily required under the *Regulated Health Professions Act*, and the RHPA defines the purpose and authority of those statutory Committees.

The College also has a Finance Committee, which is a non-statutory Committee, whose role and duties are defined by Council. While Council has overall responsibility for the financial management of the College, Council has chosen to delegate some of that work to the Finance Committee.

Council is asked to consider whether it will also delegate the work to review policies related to financial management to the Finance Committee, or whether that work should be undertaken by Council.

Ongoing review of policies once they are approved

For official documents of the College, such as by-laws and Standards, the College's governance policies describe a need to periodically review those documents to ensure currency.

Council is asked to consider whether there should be a similar obligation to periodically review Council and Committee policies once they are approved. Alternately, those policies could be reviewed on an as needed basis, when there are issues or gaps identified.

Decision Sought:

Council is asked to consider and provide feedback on:

- The potential framework for the review and approval of College policies
- The description of roles of Council, Committees and staff in the development and approval of College policies
- The role of statutory vs non-statutory Committees to review policies
- The ongoing review of policies once they are approved

Council's feedback will help staff further refine the framework and bring forward a revised framework for Council's consideration and approval at a future meeting.

Should Council approve a framework for the review and approval of College policies, then the appropriate updates to the Terms of Reference for Council and Committees will be made in the relevant governance policies. Staff would also be able to do more detailed planning of the policy review work based on the approved policy review and approval framework.



Meeting Date:	December 16-17, 2019
Agenda Item #:	8
Issue:	Topics for Council Discussion: Nominations for Executive Election and In Camera Minutes
Submitted by:	Elicia Persaud, Governance Analyst

Issue

During the by-law and governance policy review, the Executive Committee identified two topics that require Council discussion to assist with the refinement of the corresponding by-law. Council is asked to consider these two issues.

Background

At its October by-law and governance policy review meeting, the Executive Committee identified the need for Council to have a discussion on two issues to assist with the refinement of the corresponding by-law:

- Nominations for President, Vice President and Executive Committee elections
- Developing a process for in-camera minutes

Nominations for President, Vice President and Executive Committee Elections

The Executive Committee identified potential concerns around whether a council member should be allowed to nominate more than one person for each role. Currently, there are no restrictions to the number of people that one councillor can nominate for a single seat.

The question raised was around whether a nomination for someone meant showing support and voting for that person. It was in this context that consideration of the idea of reviewing the ability to nominate multiple people was suggested.

Council is asked to consider if there should be limitations on the number of people that a single councillor can nominate for a vacant seat (President, Vice President and Executive Committee member at large).

Please note, based on the Kerr and King Rules of Order, there are three types of nominations: Invitation, Complement and Selection method. The College uses the Invitation method, in which a general invitation is sent out and nominations are invited for persons to fill a vacant position. Nominations are not seconded and there are no restrictions on candidates nominating



themselves. The rules of order are silent on the number of nominations a single person can nominate someone for a specific seat¹.

Discussion #1

Council is asked to discuss the concept of nominations and determine if any restrictions should be made to the number of candidates a single councillor can nominate someone for a particular vacancy.

Developing a process for in-camera minutes

The topic of in-camera minutes also arose from the by-law and governance policy review. Staff also identified a need for a clear process around how to manage in-camera minutes to ensure consistent practices are maintained.

As of now, there are no rules around how to manage in-camera minutes so it is unclear who is responsible for taking the minutes, what the approval process is and how the minutes should be retained.

Currently, for in-camera minutes where staff are present the recording secretary is responsible for the in-camera minutes, which includes recording, drafting and maintaining the in-camera minutes. A hard copy of the in-camera minutes is distributed to Council at their next meeting and are approved as part of the approval of council minutes in the public portion of the meeting. If there are changes or amendments required, Council would be required to go in-camera to make those changes.

For in-camera discussions where staff are not present there has been inconsistencies with the level of information provided for the minutes depending on who is appointed as the recorder. There is also no clear guidance on who should maintain the in-camera minutes, who should have access to them and what level of detail should be required.

To assist you with your discussion staff obtained advice on the College's minimum legal obligations for in camera meetings.

In summary this advice suggests that the requirements for minutes of in camera meetings of the Council are the same as a public meeting, except that the public is not able to obtain access to these minutes. This means that:

- Decisions that have legal implications should be documented in minutes.

¹ Kerr and King, *Procedures for Meetings and Organization*, (Edition 3), 167



- The level of detail in minutes of discussions held in camera should be the same as discussions held in public and should not affect the need to have record of the meeting for future use by the College
- Minutes should be accessible to Council both now and in the and future
- The minutes belong to the College, not to individual Council members or Council as a whole and should be retained as a part of the College's corporate records

Discussion #2

At this point in the process, Council is being asked to consider if the development of a formal process for approving in-camera minutes should be undertaken and if so, to consider the purpose of the minutes and determine the level of detail required for interpreting the discussion and outcomes.

Next Steps

The outcomes of the discussions will be fed into the by-law and governance policy review in developing any policies that are directed by Council.

Decision

No decision, for discussion only.

Attachments

None.

Agenda #9

Program Area Quarterly Report

Presentation – no materials

Agenda #10

Digital Practice Workshop

Facilitated by

Ms. Fiona Campbell, Senior Physiotherapy Advisor



COLLEGE OF
PHYSIOTHERAPISTS
of ONTARIO

ORDRE DES
PHYSIOTHÉRAPEUTES
de l'ONTARIO

Motion No.: 11.0

**Council Meeting
December 16 – 17, 2019**

Agenda #11: Honourary membership designation

It is moved by

and seconded by

that:

Council approves the creation of a by-law describing an honourary membership designation.



COLLEGE OF
PHYSIOTHERAPISTS
of ONTARIO

ORDRE DES
PHYSIOTHÉRAPEUTES
de l'ONTARIO

Motion No.: 11.1

**Council Meeting
December 16 – 17, 2019**

Agenda #11: Honourary membership designation

It is moved by

and seconded by

that:

Council approves the draft honourary membership by-law.

Meeting Date:	December 16-17, 2019
Agenda Item #:	11
Issue:	Honourary membership designation
Submitted by:	Téjia Bain, Policy Analyst

Issue:

At the March 2019 Council meeting, the President sought Council’s feedback on the idea of exploring the creation of a new by-law that would describe an honorary membership designation for the College. Councillors expressed interest in exploring this idea. Since that time staff has investigated how such a by-law could be created and what factors should be taken into consideration to develop an honorary membership designation. These considerations were brought forward to the Executive Committee over its last few meetings and staff was provided with direction on creating the designation.

The Executive Committee is recommending that Council:

1. Create a by-law to define an honorary membership designation
2. Consider and provide direction on a proposed draft of the honorary membership by-law

BACKGROUND

Rationale for exploring the idea of creating an honorary membership designation

Currently, when the time of service of a Councillor or non-Council Committee member is coming to an end, the outgoing Councillor or non-Council Committee member receives a College Service Award. This award comes in the form of a glass plaque inscribed with the Councillor or non-Council Committee member’s name and a note of appreciation. The recipient obtains their award at an official Council function, usually the President’s dinner.

In the past, the College has given a “Council Member of the Year” award to recognize Council members for their contributions, with the names of the award winners displayed in the Council boardroom in recognition. Some other organizations recognize the contributions of board members by providing them with a special recognition certificate with the organization’s seal, publishing a special message of recognition in the organization’s newsletter or in a large newspaper, or recording a video about the board member to highlight their contributions.

During the March 2019 Council meeting, the President proposed that something more substantial than the College's current practice could be done to honour past publicly appointed Councillors and to demonstrate public recognition of their work by the College. The President suggested that establishing an honorary membership designation could provide an alternative to the status quo for the College to demonstrate public recognition of past publicly appointed Councillors. After some discussion, Councillors agreed to explore how such a designation would be created and if it could be a viable alternative to the College's existing procedures for showing appreciation to past publicly appointed Councillors who have contributed significantly to the work of the College.

Exploration of creating an honorary membership designation

At the outset of the exploration, staff sought to confirm what the legislation says about the College's authority to create an honorary membership designation to honour non-physiotherapists.

Section 94(1)(z) of the Health Professions Procedural Code (Schedule 2 of the *Regulated Health Professions Act, 1991*) describes the authority of Council to make by-laws describing an honorary membership designation. In March 2019, staff received advice from legal counsel that the language used in section 94(1)(z) would capture an honorary member who is not a registered physiotherapist. The ordinary meaning of "honorary member" and use of the word "designation" in the Code suggests that such an individual would be different from a registered physiotherapist and would not otherwise meet the requirements to be a registrant of the College.

After confirming the legislative authority, additional work was completed to further explore the creation of an honorary membership designation and a corresponding by-law.

- Staff sought legal advice about what provisions should be considered should the College establish a by-law to create an honorary membership designation. Staff also obtained information from other organizations that currently have such a designation.
- At the June 2019 meeting, the Executive Committee considered the information that staff had gathered and were asked to consider and confirm the purpose and intent of creating an honorary membership designation, and to provide initial guidance on the potential criteria for a corresponding by-law.
- Staff obtained legal advice regarding the drafting of a potential honorary membership by-law based on the Executive Committee's initial guidance, and to identify any additional issues that the College may need to consider in the creation of such a by-law.

- At the September 2019 meeting, the Executive Committee reviewed an initial draft of a potential by-law and provided guidance on a number of additional issues identified by legal counsel.
- Staff sought additional legal advice on the draft honorary membership by-law in light of the additional guidance from the Executive Committee.
- At the November 2019 meeting, the Executive Committee reviewed a revised draft of the potential by-law and recommended a few changes to ensure clarity and consistency in the criteria of the by-law.

Previous Executive Committee considerations and recommendations

Considerations for establishing the purpose and intent of an honorary membership designation

At its June meeting, the Executive Committee was first asked to consider whether or not the College should create an honorary membership by-law. The Committee discussed the value of having an honorary membership designation in light of the following considerations:

Public protection value

Given that the mandate of the College is to protect the public first and foremost, decisions of Council should always be grounded in protecting the public, especially when creating new by-laws and rules. Therefore, the decision to create a by-law describing an honorary membership designation should be justifiable as one that was made with the public interest in mind.

Fairness and transparency

Considering that all activities related to facilitating the honorary membership designation process – including staff and Council's time and resources – would be funded by registrant fees, the College should be transparent to registrants about the purpose for creating the designation and be able to justify the value of investing the College's resources into managing the processes required to maintain the designation.

In addition to this, the College should ensure that any process developed for considering potential honorary membership candidates is as fair as possible. Although the idea for the honorary membership designation was proposed with the intent to honour past publicly appointed Councillors, the College is aware of requests from retired registrants to have a mechanism for them to remain

affiliated with the College after long years of service to the profession, and the honorary membership designation could be such a mechanism.

Regulators with an existing honorary membership designation

As part of the initial exploration, staff researched how four regulatory organizations with existing by-laws and policies on honorary membership have defined the process of maintaining an honorary membership designation. These organizations are the College of Respiratory Therapists of Ontario (CRTO), the College of Early Childhood Educators of Ontario (CECE), the Ontario Association of Architects (OAA), and the Chartered Professional Accountants of Ontario (CPA Ontario).

Notably, the two health regulatory Colleges investigated – the College of Respiratory Therapists of Ontario and the College of Early Childhood Educators of Ontario – no longer make use of the honorary membership designation. The CECE has only done so once over a decade ago and has no intention of designating any new honorary members in the future. The CRTO has only ever issued two honorary memberships since the designation was introduced in 2000 and have recently archived their honorary membership policies because their Council felt that these policies served no role in furthering public safety¹.

As for the two associations, the Ontario Association of Architects and the Chartered Professional Accountants of Ontario, both still have active honorary membership designation processes, but stress that the number of nominations approved should be kept to a minimum to preserve the value of the honour.

Executive Committee recommendation

After some deliberation during their June meeting, the Executive Committee decided to recommend to Council that a by-law defining an honorary membership designation be created based on the following rationale:

- The honorary membership designation would act as a formalized mechanism for the College to publicly recognize persons who have made a direct and significant contribution to furthering the mandate of the College to protect the public. This in turn would be a mechanism for the College to promote its role in public protection.

¹ Information on the status of the CECE and the CRTO's honorary membership designations were obtained directly from the Registrars of these Colleges.

- There would be minimal cost associated with managing the honorary member designation since the number of designees should be kept to a minimum in order to preserve the value of the honour.

Considerations for defining the criteria of an honorary membership by-law

Recommendations from legal counsel advice

Staff received advice from legal counsel on what should be addressed in a by-law describing an honorary membership designation. The following considerations were recommended:

- *Eligibility* – What criteria would make a person eligible to be an honorary member?
- *Nominations* – Who can nominate persons to be honorary members? What materials should accompany a nomination (e.g. letters of support)?
- *Approval process* – Is a simple majority of Council sufficient to approve an honorary membership designation or should there be different voting rules? Should registrants be allowed to vote on the approval of a nominated candidate?
- *Title and Certificate* – What title, if any, can an honorary member use? Should an honorary membership certificate be issued?
- *Privileges* – What privileges, if any, will an honorary member enjoy (e.g. receiving College publications, invitations to Council meetings, invitations to advise the College on certain matters)?
- *Fees* – specifying that there are no fees for honorary membership (if applicable)
- *Removal process* – What should be the process for removal of the designation if the honorary member no longer meets the eligibility requirements?

Criteria from the by-laws and policies of other organizations

As mentioned previously, staff initially researched how four regulatory organizations with existing by-laws and policies on honorary membership have defined the process for maintaining an honorary membership designation. A table summarizing how each of these four regulatory organizations define their honorary membership designations can be found in **Appendix 1**.

Executive Committee recommendations

The Executive Committee reviewed all of these considerations and provided recommendations for the honorary membership by-law during their June and September meetings.

Eligibility criteria

The Executive Committee first recommended at their June meeting that the honorary membership designation should be given to persons who have made a direct, significant contribution to further the College's mandate of public protection. This included current and former registrants, as well as staff members of the College, as long as they were not serving the College in any capacity at the time of nomination. It was also recommended that the eligibility criteria for honorary members should align with the eligibility requirements for elected Council members as described in section 3.1(8) of the College By-laws.

The eligibility criteria were discussed in more detail at the September Executive Committee meeting and additional recommendations were made:

- *Eligibility of current and former registrants*

After considering the Executive Committee's initial recommendations, legal counsel suggested that the College may wish to consider creating two categories of designation certificates – an "honorary member" certificate for members of the public and a "life member" certificate for current and former registrants of the College. The rationale for this suggestion was that the word "honorary" typically describes a designation for someone who otherwise does not meet the requirements for something, and therefore, it might seem odd to have this designation for current and former registrants.

When contemplating this idea, the Executive Committee discussed the potential risks of a current or former registrant having a "life member" designation. While some Committee members thought that it could cause confusion for the public about what the "life member" designation means, others thought that current and former registrants bestowed with the honour of the designation would uphold the integrity of that honour and make it clear, if ever asked, what the designation means and how it should be used.

Ultimately, the Executive Committee decided to recommend that a single category of "honorary member" be used and that the honorary membership designation be limited to persons who are not and never have been physiotherapists. The Executive Committee also concluded that the public recognition of being a registered physiotherapist should be sufficient recognition for current and former registrants and that the honorary membership designation should be a way to recognize persons who have no form of public recognition by the College.

- *Eligibility criteria with a conditional time frame*

Since some of the eligibility requirements from section 3.1(8) of the By-laws have conditional time frames, staff sought advice from legal counsel on if the same time frames should apply for honorary membership eligibility. Legal counsel advised that this is a policy question rather than a legal question, and that Council should decide on an appropriate time frame for the specific eligibility requirements that require one.

While discussing this issue, the Executive Committee pointed out that since it was recommended that physiotherapists be ineligible for the honorary member designation, these eligibility requirements would only apply if a candidate is or has been a member of a statutory body that governs a profession.

The eligibility requirements of concern were:

- if the individual is or has been a member of any statutory body that governs a profession, the individual has not been found guilty of professional misconduct, to be incompetent, or to be incapacitated by any statutory body that governs a profession in the six years before the designation.
- if the individual is or has been a member of any statutory body that governs a profession, the individual has not been revoked or suspended for professional misconduct, incompetence, or incapacity in the six years before the designation.
 - *NOTE: Legal counsel advised that if the timeframe for points 1 and 2 are the same then point 2 becomes redundant and should be removed.*
- if the individual is or has been a member of any statutory body that governs a profession, the individual's certificate or registration with the statutory body must not have been subject to terms, conditions, or limitations in the six years before the designation, unless the term, condition or limitation was prescribed by the application legislation.

The Executive Committee decided to recommend that the same time frames in by-law 3.1(8) be applied to the honorary membership by-law so that it aligns with the existing by-laws. As a result of this recommendation, point 2 is not included in the draft by-law.

- *Eligibility requirement to be mentally competent*

One of the eligibility requirements for elected Councillors – by-law 3.1(8)(e) – stipulates that to be eligible for election, the registrant must not have been found to be mentally incompetent under the *Substitute Decisions Act, 1992* or the *Mental Health Act*. Legal counsel suggested that the College consider not including this requirement for the honorary membership by-law because it is possible that even though a candidate may not be mentally competent at the time of nomination, this does not mean that the candidate is not worthy of the honour for work done in the past. Arguably, there is no

public protection risk in honouring such a person given that they cannot practice the profession by virtue of the honorary member designation.

The Executive Committee agreed with this rationale and recommended that mental competency at the time of nomination not be an eligibility requirement of the honorary membership by-law. Similarly, the Executive Committee also recommended that past findings of incapacity by another statutory body should not disqualify a candidate from being eligible for the designation.

- *Additional eligibility requirement recommended by staff*

After the September Executive Committee meeting, staff considered the administrative management of the honorary membership designation and made two additional recommendations for the eligibility requirements of the honorary membership draft by-law:

1. ***The individual has not engaged in any other conduct that, in the opinion of the Executive Committee, is disgraceful, dishonourable or unprofessional*** – This was recommended to align with the language under the revocation section of the draft by-law, the rationale being that if an individual can be revoked for this criterion then they should not be eligible in the first place if they have engaged in such conduct.

The Executive Committee considered this additional requirement at their November meeting and agreed with staff's rationale for adding it. It is included in the proposed honorary membership by-law.

2. ***The individual has not been previously nominated and denied the Honorary Member designation by Council*** – This was recommended to prevent multiple nominations of the same candidate even after they have been denied the designation by Council.

At the November meeting, the Executive Committee considered this addition and disagreed with preventing persons from being nominated after they have been denied the designation. The Committee acknowledged that Council's decisions about awarding the designation to an individual can change over time and that there will always be a mechanism in place to screen all candidates and ensure that only those deserving of the designation will be recognized. Therefore, this additional eligibility requirement is not included in the proposed honorary membership by-law.

Please note that as a part of the ongoing by-laws and governance policies review, the content regarding election eligibility may be reconsidered and subject to change. If any changes to the eligibility

requirements in by-law 3.1(8) are made as a result of the comprehensive review, the same changes will need to be applied to the honorary membership by-law as well.

Nominations and approval processes

- *Nominations*

The Executive Committee recommended the following details about the nominations process for the honorary membership designation:

- Only Council members and College staff can make nominations. The Council member or staff member nominating is responsible for providing a submission to the Registrar to support the nomination.
- The Registrar will collect nominations and bring them to the Executive Committee for consideration.
- Only nominations that receive unanimous support from the Executive Committee will be considered by Council.
- Council may consider nominees at any meeting of Council.

- *Approval of nominees*

The Executive Committee recommended the following details about the approval process for the honorary membership designation:

- Approval of an honorary membership designation must be authorized by Council.
- Council may designate a nominee as an honorary member by three-quarters majority vote of the Councillors present and voting.

- *Setting out the administrative process in a complementary governance policy*

Legal counsel advised that it would be appropriate for the details of the administrative process for managing the honorary membership designation, such as the nominations process, to be described in a governance policy rather than the by-law itself. This would provide more flexibility should the process need to be modified in the future.

The Executive Committee agreed with this rationale and recommended that a complementary honorary membership governance policy be created.

Title and Certificate

The Executive Committee recommended that the title for honorary members should be “Honourary Member of the College of Physiotherapists of Ontario”.

The Committee also recommended that honorary members be presented with a Certificate of Honourary Membership with the College of Physiotherapists of Ontario. This certificate would be presented at an official College event as determined by the President.

Rights, Privileges, Obligations and Restrictions

The following rights, privileges, obligations and restrictions were recommended by the Executive Committee for honorary members:

- Honourary members can only use the title of “honourary member of the College of Physiotherapists of Ontario”
 - Honourary members must maintain updated contact information with the College
 - Honourary members have no other rights, privileges, obligations and restrictions of a registrant of the College.
- *Allowing honorary members to sit on task force groups*

The Executive Committee initially recommended that honorary members should not be allowed to serve on Committees and task force groups. After considering this recommendation, legal counsel wondered if restricting honorary members from sitting on College task force groups may be too limiting given that there may be situations where the advice and expertise of an honorary member who has made significant contributions to the College may be useful for a task force group.

After considering this, the Executive Committee recommended that honorary members should not be restricted from sitting on task force groups.

Fees

The Executive Committee recommended that honorary members should not be required to pay fees to the College in order to be awarded the designation.

Removal of the designation

The Executive Committee recommended the following details about the removal of the honorary member designation:

- The honorary member must have engaged in conduct that is, in the opinion of Council, disgraceful, dishonourable or unprofessional. Removal in this circumstance would require a simple majority vote of those present at a meeting of Council.
- The honorary member designation can be revoked by the Registrar if the honorary member no longer meets certain eligibility requirements. These are specified in the draft by-law.
- Honorary members should not have the designation revoked if they become a Councillor, Committee member or staff member after they received the designation. This is based on a similar rationale as honorary members' eligibility to serve on task forces, the intention being to not preclude honorary members from serving the College in these roles because the College could benefit from the advice and expertise of an honorary member.

Listing honorary members on the Public Register

Given the language used to describe the designation (i.e. "honorary member"), there is a possibility that honorary members could be perceived by registrants and the public to be a type of member of the College. Therefore, it is important that thoughtful consideration be given to how the status of honorary members are communicated to the public and stakeholders of the College in order to prevent confusion with the status of physiotherapists.

To avoid this possible confusion, staff recommended that honorary members should not be listed on the Public Register. This recommendation was also made on the basis of Executive Committee's previous direction that honorary members should not have any rights, privileges or obligations of a registrant of the College, which includes being listed on the Public Register. Legal counsel agreed with this rationale and suggested that the College consider adding a section to the College's website listing the honorary members instead.

The Executive Committee agreed with these suggestions and recommended that honorary members not be listed on the Public Register but instead be listed in a separate section on the College's website.

COUNCIL CONSIDERATIONS

Council is asked to first consider the background information provided on exploring the creation of an honorary membership designation, as well as the Executive Committee's rationale for recommending that the designation be created, and decide whether or not the College should create a by-law to define an honorary membership designation.

Should Council agree that a by-law defining an honorary membership designation be created, Council is asked to consider the information provided about defining the criteria for an honorary membership by-law and provide direction on the draft honorary membership by-law being recommended by the Executive Committee in **Appendix 2**.

NEXT STEPS

Should Council approve the creation of a honorary membership designation and the corresponding by-law, the next steps in the process would be:

- *Consultation on the draft honorary membership by-law* – Although Council is not required by the Code to consult with registrants on the creation of an honorary membership by-law, the Executive Committee considered that the College should be transparent to registrants about the purpose for creating the designation and be able to justify the value of investing the College's resources into managing the processes required to maintain the designation. Circulating the draft honorary membership by-law for comment would achieve that transparency goal.
- *Creating a complementary governance policy* – The Executive Committee previously recommended that a complementary governance policy should be created to define the administrative processes for managing the honorary membership designation. The governance policy would need to be reviewed and approved prior to implementation of the honorary membership designation.

Decision Sought

Council is asked to decide whether to:

1. Approve the creation of a by-law to define an honorary membership designation
2. Approve the proposed draft of the honorary membership by-law for the purpose of consultation

Appendices

- Appendix 1: Comparison table of other regulators' honorary membership designation process
- Appendix 2: Draft Honorary Membership By-law

Appendix 1: Comparison table of other regulators' honorary membership process

Considerations	College of Respiratory Therapists of Ontario	College of Early Childhood Educators of Ontario	Ontario Association of Architects	Chartered Professional Accountants of Ontario
Eligibility requirements	<ul style="list-style-type: none"> - Person is not and never has been a member of the profession 	<ul style="list-style-type: none"> - Person is not and never has been a member of the profession - Person must have provided exemplary service in the furtherance of the College's mandate - Person must have made significant contributions to the profession 	<ul style="list-style-type: none"> - Person must have rendered valuable service to the architectural profession or scrupulously upheld the objects of the Association 	<ul style="list-style-type: none"> - Person does not meet the requirements for CPA Ontario Membership - Person has engaged in conspicuous service to CPA Ontario or the profession
Nomination process	<i>Nomination process is not addressed in the by-laws</i>	<ul style="list-style-type: none"> - Nominations must first be considered by the Executive Committee - Council can only consider nominations recommended by the Executive Committee 	<ul style="list-style-type: none"> - Each year a call for nominations is sent out to Association members in January; Council members may also nominate persons - Nominations are considered by Council during the in-camera portion of its March meeting 	<ul style="list-style-type: none"> - Nominations may only be made by a Council Member, the President or the CEO of CPA Ontario - Nominations shall be made to Council - Council considers the nominations and makes a recommendation to the membership at the Annual Meeting



Considerations	College of Respiratory Therapists of Ontario	College of Early Childhood Educators of Ontario	Ontario Association of Architects	Chartered Professional Accountants of Ontario
			<ul style="list-style-type: none"> - Nomination submissions must be accompanied by: <ol style="list-style-type: none"> 1) a letter of request to Council for nomination, 2) four additional letters of support from members of the profession, and 3) a draft citation for the individual which would be read at the Annual Meeting in June 	<ul style="list-style-type: none"> - Members Entitled to Vote only consider nominations approved by Council
<p>Approval process</p>	<ul style="list-style-type: none"> - Council may designate a person to be an honorary member 	<ul style="list-style-type: none"> - Council may designate a nominee as an honorary member by at least two-thirds of the votes cast by those present 	<ul style="list-style-type: none"> - A majority vote of those present at Council's March meeting is required to carry a nomination - If the nomination is carried, the individual who suggested the nomination is asked to move the motion for election at the June Annual Meeting; a 	<ul style="list-style-type: none"> - A vote of two-thirds of the votes cast by those Members Entitled to Vote who are present at the Annual Meeting is required



Considerations	College of Respiratory Therapists of Ontario	College of Early Childhood Educators of Ontario	Ontario Association of Architects	Chartered Professional Accountants of Ontario
			<p>supporter of the nomination is asked to second the motion. The citation for the individual is read.</p> <ul style="list-style-type: none"> - A vote of four-fifths of the members present at the meeting is required for approval of the designation 	
Title and Certificate	<ul style="list-style-type: none"> - Title: Honorary member of the College of Respiratory Therapists of Ontario - Certification: Honorary Certificate of Registration 	<ul style="list-style-type: none"> - Title: ECE (Hon) - Certification: Honorary member certificate 	<ul style="list-style-type: none"> - Title: Honorary Member - Certification: Certificate of Honorary Membership presented at the annual Celebration of Excellence 	<ul style="list-style-type: none"> - Title: “Honorary Member of CPA Ontario” OR “CPA Ontario (Honorary)” - Certification: Honorary Certificate of Membership
Rights, privileges, obligations, and restrictions	<ul style="list-style-type: none"> - Use of “honorary member” title only 	<ul style="list-style-type: none"> - Cannot use the title of early childhood educator or its equivalents or abbreviations 	<ul style="list-style-type: none"> - Use of “honorary member” title - If the honorary member was previously the holder 	<ul style="list-style-type: none"> - Use of the “honorary member of CPA Ontario” title only - May attend Members’ meetings



Considerations	College of Respiratory Therapists of Ontario	College of Early Childhood Educators of Ontario	Ontario Association of Architects	Chartered Professional Accountants of Ontario
	<ul style="list-style-type: none"> - Cannot vote or run for election to Council - Cannot perform controlled acts 	<ul style="list-style-type: none"> - Is an honorary member for life - Is provided notice of annual meetings and copies of official College publications - May attend the annual meeting at the invitation of the Chair of the meeting - Cannot engage in the practice of early childhood education or hold out - Cannot vote or be eligible for nomination to Council - Cannot be appointed to a Committee as a non-Council Committee member 	<p>of an architect license, he or she may use the title “architect”</p> <ul style="list-style-type: none"> - Entitled to receive general information issued by the Association - Entitled to attend the annual and general meetings of members of the Association - Eligible to serve on non-statutory committees and task groups - Cannot vote 	<ul style="list-style-type: none"> - May be consulted by the Council as an advisor at the discretion of the Chair - Cannot vote or run for election to Council
Fees	No fees	No fees	No fees	No fees
Removal process	<ul style="list-style-type: none"> - Council can withdraw the designation 	<ul style="list-style-type: none"> - Council can cancel the designation by at least 	<i>Removal process not addressed in the policy</i>	<ul style="list-style-type: none"> - Any Member Entitled to Vote may make a request to the Chair of Council to

Considerations	College of Respiratory Therapists of Ontario	College of Early Childhood Educators of Ontario	Ontario Association of Architects	Chartered Professional Accountants of Ontario
		two-thirds of the votes cast by those present		add to the agenda of any Members' meeting a motion to revoke an honorary membership - The Members Entitled to Vote may revoke an honorary membership by two-thirds of the votes cast by the Members present in person at the Members' meeting for which the notice was given

References:

- College of Respiratory Therapists of Ontario. *By-law 24-2016*. 2019 Mar 1. Available at <http://www.crto.on.ca/pdf/Bylaws/bylaws.pdf>
- College of Early Childhood Educators of Ontario. *Consolidation of Early Childhood Educators – General By-law*. 2019 Mar 27. Available at https://www.college-ece.ca/en/Documents/By_Laws_General_EN.pdf
- Chartered Professional Accountants of Ontario. *Members Handbook*. 2018 Nov 19. Available at <https://media.cpaontario.ca/stewardship-of-the-profession/pdfs/CPA-Ontario-Members-Handbook-November-19-2018.pdf>
- Ontario Association of Architects. *Procedures for Nomination of Honorary Members*. 1998 Nov 18. Available upon request.



Appendix 2: Draft Honourary Membership By-law

[Add the following definition to the definitions section:]

“Honourary Member” means an individual who is designated by Council as an honorary member of the College in accordance with these by-laws.

[Add the following to the By-laws:]

DESIGNATION OF HONOURARY MEMBERS

1. Council may designate an individual as an Honourary Member of the College based on a three-quarters majority vote of the Councillors present and voting.
2. Individuals may be nominated for designation as an Honourary Member in accordance with the College’s governance policies as approved by Council.

Eligibility for designation as Honourary Member

3. An individual may be designated as an Honourary Member if the individual has made a direct and significant contribution to the mandate of the College as a Councillor, Committee member, staff member or member of the public.
4. The following are additional eligibility requirements for designation as an Honourary Member:
 - a. The individual is not and never has been a Member;
 - b. if the individual is or has been a member of any statutory body that governs a profession, the individual is not the subject of any Discipline or Fitness to Practise proceedings at the time of the designation;
 - c. if the individual is or has been a member of any statutory body that governs a profession, the individual has not been found guilty of professional misconduct or to be incompetent by any statutory body that governs a profession in the six years before the designation;
 - d. if the individual is or has been a member of any statutory body that governs a profession, the individual’s certificate or registration with the statutory body must not have been subject to terms, conditions, or limitations in the six years before the designation, unless the term, condition or limitation was prescribed by the application legislation;



- e. the individual has not been found guilty of an offence under the *Criminal Code* or the *Health Insurance Act*, unless a pardon or record suspension has been granted with respect to the finding;
 - f. the individual is not a participant (other than on behalf of the College) in a legal action or application against the College;
 - g. if the individual is or has been a member of any statutory body that governs a profession, the individual does not have a current notation of an interim order, caution, undertaking, or specified continuing education or remediation program on the public register of that body;
 - h. the individual has not engaged in any other conduct that, in the opinion of the Executive Committee, is disgraceful, dishonourable or unprofessional; and
 - i. the individual is not an employee, a Councillor, or a Committee member of the College at the time of the nomination.
5. Any disputes about an individual's eligibility for designation as an Honourary Member shall be determined by the Executive Committee.

Rights and Privileges

6. An Honourary Member may use the title "Honourary Member of the College of Physiotherapists of Ontario".
7. An Honourary Member will be presented with a Certificate of Honourary Membership with the College of Physiotherapists of Ontario.
8. An Honourary Member does not have any of the rights or obligations of a Member of the College by virtue of their designation as an Honourary Member.
9. An Honourary Member shall not use the title "physiotherapist" or "physical therapist" (or a variation, abbreviation or equivalent in another language), hold himself or herself out as a person who is qualified to practise in Ontario as a physiotherapist or in a specialty of physiotherapy.
10. An Honourary Member is not authorized to perform any controlled acts set out in the RHPA by virtue of their designation as an Honourary member.
11. An Honourary Member is not responsible for any fees associated with the designation.



12. At the College's request, an Honourary Member shall provide the College with up-to-date contact information.

Revocation of designation

13. Council may revoke the designation of an Honourary Member based on a majority vote of the Councillors present and voting if, in the opinion of Council, the individual engages in conduct that is disgraceful, dishonourable or unprofessional.
14. The Registrar shall revoke an Honourary Member who no longer meets the eligibility criteria set out in sub-paragraphs 4(a) through (g) above.

DRAFT



COLLEGE OF
PHYSIOTHERAPISTS
of ONTARIO

ORDRE DES
PHYSIOTHÉRAPEUTES
de l'ONTARIO

Motion No.: 12.0

**Council Meeting
December 16 – 17, 2019**

Agenda #12: Registration Fee Reduction

It is moved by

and seconded by

that:

Council approves the by-law changes to sections 8.4(1)(b) and 8.4(2)(a) of the College By-laws to amend the fees for a certificate of registration authorizing independent practice from \$595 to \$575 to take effect starting in the 2020-2021 registration year.

Meeting Date:	December 16-17, 2019
Agenda Item #:	12
Issue:	Registration Fee Reduction
Submitted by:	Téjia Bain, Policy Analyst

Issue:

At its September meeting, Council decided to approve in principle a by-law change to reduce the College's independent practice annual registration fees by \$20 to \$575. This fee reduction was based on advice from the College's auditor to reduce the amount of money the College maintains in its Unrestricted Net Assets reserve. As prescribed by the Health Professions Procedural Code, changes to College By-laws that directly impact registrants, including registration fee changes, must be circulated to registrants for consultation after approval in principle by Council.

The proposed registration fee changes were circulated to registrants in early October and the College will be accepting feedback until December 9th. As of the time of writing, results have been supportive of the by-law changes. The Executive Committee recommends that Council approves the registration fee reduction by-law changes to take effect starting in the 2020-2021 registration year.

Background

Council decision in June 2019

Council made several decisions in June regarding the management of the College's reserves in order to comply with the advice of its auditors regarding their concern over the size of the reserves and the way they were being managed. After considering the auditor's advice, Council decided to eliminate two categories of Net Assets Internally Restricted for Strategic Initiatives and IT Improvement and reallocate the funds to the Unrestricted Net Assets. Council also decided to set a target of 25-50% (3-6 months) of operating costs for the Unrestricted Net Assets.

Because the Unrestricted Net Assets were above the new target range as a result of these decisions, Council decided to reduce the College registration fees for independent practice certificates by \$20 in order to draw down the Unrestricted Net Assets and achieve the set target range.

Council decision in September 2019

Council's decision in principle to reduce the registration fees for independent practice certificates required a corresponding change to the College's By-laws. Therefore, in September Council approved

the by-law change in principle to implement the proposed fee reduction. The Health Professions Procedural Code requires that any proposed changes to by-laws that directly affect registrants, including registration fees, must be circulated to every registrant at least 60 days before they are approved by Council.

Figure 1 shows the changes described to section 8.4 of the [College By-laws](#).

Figure 1: Proposed by-law change with tracked changes

FEES – REGISTRATION

- 8.4.** (1) (a) Upon application for registration, every applicant shall pay a non-refundable application fee and a non-refundable registration fee.
- (b) The application and registration fees are as follows:

Application fee	For an initial application or re-application	\$100.00
Certificate of Registration Authorizing Independent Practice	For a certificate issued until the next March 31 (the College may in its discretion pro-rate registration fees for part year certificates or may bank registration fees for the future credit of a Member for part year certificates in accordance with Appendix B)	\$595.00 <u>575.00</u>
Certificate of Registration Authorizing Provisional Practice		\$ 75.00

- (2) (a) Every Member with a certificate of registration authorizing independent practice shall pay a non-refundable renewal fee as follows:

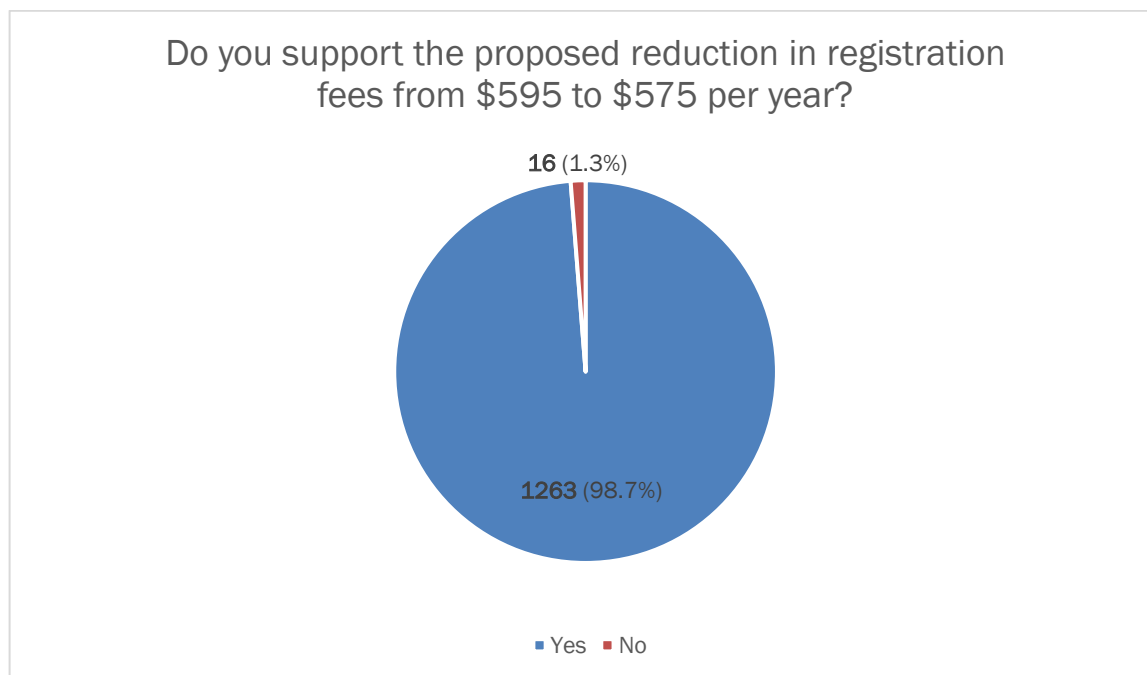
Certificate of Registration Authorizing Independent Practice	For a certificate issued until the next March 31 (the College may in its discretion pro-rate renewal fees for part year certificates or may bank renewal fees for the future credit of a Member for part year certificates in accordance with Appendix B)	\$595.00 <u>575.00</u>
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Consultation

The circulation of the registration fee by-law changes to registrants was initiated on October 11, 2019 via a survey sent through *Perspectives* that asked whether or not the participant supported the fee reduction. The response deadline is December 9, 2019. As of the time of writing, the College has received 1,279 responses. Most respondents have been in support of the fee reduction.

Figure 2 shows the results of the survey thus far.

Figure 2: Registration fee reduction survey results



Comments

199 survey respondents left comments. Many of those who commented said that they appreciated that Council is being fiscally responsible and were thankful for the reduction in fees.

Some respondents said that the fees should be reduced even lower because the costs of practicing as a physiotherapist (e.g. College fees, liability insurance fees) are too high.

Others suggested that instead of reducing fees, the College should use the money to enhance its existing essential programs, particularly its information management systems.

There was also some concern about the possibility of having fees raised again in the next year or two if the costs of doing the work of the College increases along with the rise in economic costs happening nationwide.

Executive Committee recommendation

The Executive Committee considered the survey results and feedback received at their November meeting and decided to recommend that Council approves the by-law changes to reduce registration fees for the 2020-2021 registration year.

Decision Sought:

Council approves the by-law changes to sections 8.4(1)(b) and 8.4(2)(a) of the College By-laws to amend the fees for a certificate of registration authorizing independent practice from \$595 to \$575 to take effect starting in the 2020-2021 registration year.



Meeting Date:	December 16-17, 2019
Agenda Item #:	13
Issue:	Q2 Financial Report
Submitted by:	Fazal Raza and Rod Hamilton

Issue:

The College has now come to the end of the second quarter of its fiscal year.

Background

In the first quarter Income was at 92.97% of planned revenue. Major contributors towards the first quarter variance were professional corporation fees, prorated fees and the fee credits.

At the end of second quarter Income is at 93.84% of planned revenue. Major contributors towards this variance were revenue from application fees, professional corporation fees and wall certificates.

Income Statement

We have started tracking income in more detail. The tracking of income in detail will help us in terms of predicting future income in the budget lines more accurately. Moving forward we are going to map the number of applications received per quarter and ensure that the value corresponds with peak periods.

For spending, historically, the second quarter often showed some variance in individual accounts but the larger category of income versus expense typically begin to get closer to projections as projects get underway and invoices arrive. Spending at Q2 came out at 83.81% of the financial limit.

Staff investigated actual spending on all planned expenditures as a way to measure the accuracy of their budgeting to determine whether programs and projects are going forward in the estimated timeframes.

In Q2 the year-to-date net income was \$105,107.90 instead of the planned overage by \$260K (approx.)

Major contributors in lower expenditures in the year to date were IT database costs that have not been spent yet, QA program development and Strategic Operations delays.

Furthermore, we would like to point out that there is a link between account 5401-Salaries and 5411-Printing, Filing and Stationery. These two accounts offset each other. We had originally budgeted the scanning project under salaries to engage summer students for the project. Instead, we hired Konica Minolta, an external service provider to digitize College records and charged the fees to account 5411. As a result, the salaries account was understated and the Filing and Stationery account was overstated.



The analysis with individual line items for explanations is presented as Appendix A.

Balance Sheet

We have provided you with the year-end and at Q2 2019 balance sheets as comparatives to the Q2 2018 statement. This is presented as Appendix B.

Accrued Liabilities:

Accrued liabilities are those expenses that have not yet been paid under accounts payable. You will note that Accrued Liabilities balance have been reduced since March 31, 2019. A number of transactions occurred since then resulting in a reduction in accrued liabilities:

Beginning balance at Mar. 31, 2019	= \$952,729.71
Complaints & Discipline accrual reversal	= (102,687.84)
Salary accrual reversal	= (206,870.55)
Additional accruals in Q1 and Q2	= <u>153,593.04</u>
Ending balance at Sep. 30, 2019	= \$796,764.36

You may find it is useful to note the change in the balances in the accounts over time.

Individual budget items where spending has not met the target (within 5%):

The items are numbered in accordance with the Statement of Operations for ease of cross reference.

Income

- 4019 166.67% - Some professional corporations expired and required the member to pay the application fee.
- 4018 20% - Most registrants completed annual renewal by March 31 resulting in fewer late fees.
- 4017 135% - A higher number of online requests were processed which is likely due to the start of a new registration year and registrants/previous members who registered in a new jurisdiction.
- 4016 113% - A higher number of online requests were processed which is likely due to the start of a new registration year and registrants/previous members who registered in a new jurisdiction.
- 4015 250.7% - New graduates applied for provisional practice from June-September. The June PCE-Clinical results were also released which led to more Independent Practice applications.
- 4022 The College is anticipating receiving delayed invoices from a therapist. Amount paid out will exceed what was budgeted

- 4007 133.29% - More PT's than expected went on leave and required a fee credit to be applied to their account.
- 4004 328.79% - More cost orders recovered than anticipated.
- 4003 28.04% - Fewer coaching programs were initiated this quarter.
- 4021 No cross border applications received.
- 4020 No courtesy applications received.
- 4014 46.38% - Most Provisional Practice applications are processed later in the year when there are new graduates. Income was split evenly across quarters but will be revised in the next budget to accurately reflect peak periods.
- 4013 64.0% - More registrants are permitting their certificate to expire and therefore must pay the initial \$700 fee.
- 4012 35.37% - Most Independent Practice applications are processed later in the year when the CAPR exam results are released. Moving forward we are going to map the number of applications received per quarter and ensure that the value corresponds with peak periods.
- 4010 200% - The college hosted 2 PT students from UFT in 2018. U of T runs on calendar year and we budget on a fiscal year which resulted in a variance.
- 5756 Reversal of accrual expense of 6 Complaints and Discipline cases that are now closed.
- 5001 50.4% - Budgeted for 7 attendees but only 6 attended and the rate claimed was less than budgeted.
- 5003 90.32% - Non-council committee members attendance at the In-service education day in Q2 cost less than expected.
- 5005 125.83% - Discipline panels have been proceeding with less than three professional members. Most hearings that were originally planned for Q2 occurred in Q3.
- 5006 58.44% - Underspensing resulted from less costs related to President claimed work and 1 less committee member attendance at Q2 meeting.
- 5010 No patient relations meetings required so far this year.
- 5011 3.67% - QAC meeting not required during this quarter based on altered timelines of the QA project.
- 5012 111.3% - New members claimed higher prep time than budgeted for the August meeting.
- 5017 138.45% - Originally scheduled a 1 hour teleconference changed to full day in-person meeting resulting in higher per-diems.



- 5051 127.03% - Overage resulted from higher than budgeted costs for the facilitator for chair's training day.
- 5053 116.15% - Originally planned for In-service education day in Q1 with non-council committee members. This was deferred to Q2 resulting in higher expenses this quarter.
- 5055 71.69% - Hearings that were planned to take place in Q2 occurred in Q3.
- 5056 38.44% - No legal counsel or external education required.
- 5062 Extensions in timelines for the remote assessment pilot and the on-site assessment pilot, the budgeted meeting for Q2 was not required.
- 5063 172.57% - Hotel costs higher than budgeted.
- 5075 256.46% - Originally scheduled a 1 hour teleconference changed to full day in-person meeting resulting in additional expenses.
- 5102 56.56% - PISA software integration cost initially planned in Q1 but deferred to Q4.
- 5103 116.96% - Outlook migration cost higher than anticipated due to greater project complexity.
- 5104 20.41% - New projects on hold pending agreement; working on enhancements.
- 5200 89.31% - Premiums are derived on industry claim ratio based on market performance. The claim ratio slightly lower than budgeted.
- 5403 35.57% - Repairs and maintenance not yet required.
- 5405 80.11% - Publication subscription and a membership originally budgeted no longer required.
- 5407 91.13% - Some kitchen supplies budgeted for were not required.
- 5408 64.47% - Vendors payments migrated to direct deposits. Postage not required.
- 5411 743.67% - Costs for external scanning project to digitize all outstanding college records was offset by reduction in costs for summer students to engage in this process.
- 5412 78.52% - Backup internet line was purchased in Q2 at less cost than anticipated.
- 5413 137.01% - Created an allowance for bad debts for anything outstanding in Accounts receivable greater than 90 days. This resulted in an increase in bad debt expense.
- 5502 Projects delayed - review of data management practices due to anticipated outcome of Ministry performance indicator project.

- 5503 36.68% - Under budget due to timing of some conferences occurring in different quarters. Some conference costs lower than anticipated.
- 5505 50.06% - Lower Citizen Advisory Group costs than anticipated due to Partnership cost savings.
- 5605 85.44% - Fewer requests for translation and QA program translations were delayed.
- 5620 71.81% - Creation of materials deferred to Q3, following stakeholder survey.
- 5621 19.29% - Work ongoing related to AODA compliance, website improvements and video production. All to be invoiced by Q4.
- 5702 265.54% - Catering and transcription costs for 3 day hearings not anticipated.
- 5704 339.7% - More third party investigators were required than anticipated; Unexpected increase in sexual abuse allegations requiring transcriptions of complainant's statement.
- 5757 No legal advice required.
- 5752 191.37% - Needed legal advice for a high risk case re: human rights that was unplanned.
- 5760 52.97% - Fewer hearings days were required due to early resolutions.
- 5761 80.46% - Fewer hearings days were required due to agreed statements of facts and joint submissions on penalty - cases deferred to Q3.
- 5763 100% - Accrual for court proceedings delayed to 2020.
- 5754 3.39% - Budgeted for miscellaneous legal, however no substantial legal advice needed.
- 5755 638.45% - Unanticipated legal fees related to Adoxio/KPMG contract.
- 5825 58% - QA Project timelines have changed therefore we have not started selecting screening interviews.
- 5811 70.63% - Extensions to the timeline of the QA pilot test process resulted in the spending occurring later in the year than budgeted.
- 5821 QA Project timelines have changed therefore we have not started selecting screening interviews.
- 5823 73.52% - Training funds will be spent in later quarters, timeline delays have delayed the delivery of training.
- 5824 QA Project timelines have changed therefore we have not started selecting screening interviews.



- 5871 Although QA did not order new programs since the program went on hiatus the coaching programs initiated last year are much lengthier than planned.
- 5880 49.07% - Fewer coaching programs in compliance monitoring were initiated this quarter.
- 5890 50.13% - Fewer applications for funding have been received.
- 5902 90.24% - Timing of employee hiring and departure resulted in lower benefit costs.
- 5890 50.13% - Fewer applications for funding have been received.
- 5904 72.17% - Plain language project to be completed in Q4. Extensions to the timeline of the QA pilot test process resulted in the spending occurring later in the year than budgeted.
- 5905 81.43% - Based on course availability and staff needs some training deferred to Q3 and Q4. Budgeted amount split evenly across quarters.
- 5907 93.5% - Costs to be incurred in Q3 and Q4.
- 5911 106.07% - CPP adjustment for former employee was required.
- 5913 110.9% - EHT adjustment for former employee was required.
- 6001 93.41% - Amortization expense spread equally however actual expense subject to asset purchase date. This will be fixed in the new budget.

College of Physiotherapists of Ontario
Statement of Operations - Budget vs. Actual
April 2019 through September 2019

	Q2 YTD			Full Year		Notes for Council
	Apr' 19 - Sep' 19	Budget	% of Budget	Budget	% of Budget	
Ordinary Income/Expense						
Income						
4008 - Admin Fees						
4019 - Prof Corp Application \$700	17,500.00	10,500.00	166.67%	21,000.00	83.33%	Some professional corporations expired and were required to pay the application fee.
4018 - Late Fees \$225	1,125.00	5,625.00	20.0%	5,625.00	20.0%	Most registrants completed annual renewal by March 31 resulting in fewer late fees.
4017 - Wall Certificates \$25	1,350.00	1,000.00	135.0%	2,000.00	67.5%	A higher number of online requests were processed which is likely due to the start of a new registration year and registrants/previous members who registered in a new jurisdiction.
4016 - Letter of Prof Stand / NSF \$50	5,650.00	5,000.00	113.0%	10,000.00	56.5%	A higher number of online requests were processed which is likely due to the start of a new registration year and registrants/previous members who registered in a new jurisdiction.
4015 - Application Fees \$100	62,800.00	25,050.00	250.7%	50,100.00	125.35%	New graduates applied for provisional practice from June-September. The June PCE-Clinical results were also released which led to more Independent Practice applications.
Total 4008 - Admin Fees	88,425.00	47,175.00	187.44%	88,725.00	99.66%	
4022 - Recovery of Therapy Costs	0.00	1,000.00	0.0%	2,000.00	0.0%	The College is anticipating receiving delayed invoices from a therapist. Amount paid out will exceed what was budgeted.
4007 - Registration fee credits	-37,276.90	-27,967.09	133.29%	-35,823.79	104.06%	More PT's than expected went on leave and required a fee credit to be applied to their account.
4004 - Cost recovery from cost orders	36,166.64	11,000.00	328.79%	48,500.00	74.57%	More cost orders recovered than anticipated.
4003 - Remediation Chargeback	2,572.32	9,175.00	28.04%	22,757.00	11.3%	Fewer coaching programs were initiated this quarter.
4001 - Registration Fees						
4021 - Cross Border Fee \$100	0.00	400.00	0.0%	800.00	0.0%	No cross border applications received
4020 - Courtesy Registration Fee \$100	0.00	600.00	0.0%	1,500.00	0.0%	No courtesy applications received
4014 - Provisional Practice Fees \$75	18,900.00	40,750.00	46.38%	69,875.00	27.05%	Most Provisional Practice applications are processed later in the year when there are new graduates. Income was split evenly across quarters but will be revised in the next budget to accurately reflect peak periods.
4013 - Prof Corp Fees \$250	40,000.00	62,500.00	64.0%	125,000.00	32.0%	More registrants are permitting their certificate to expire and therefore must pay the initial \$700 fee.
4012 - Independent Practice - Prorated	42,009.59	118,787.65	35.37%	146,531.45	28.67%	Most Independent Practice applications are processed later in the year when the CAPR exam results are released. Moving forward we are going to map the number of applications received per quarter and ensure that the value corresponds with peak periods.
4011 - Independent Practice - \$595	2,822,887.05	2,949,752.95	95.7%	5,883,160.32	47.98%	
Total 4001 - Registration Fees	2,923,796.64	3,172,790.60	92.15%	6,226,866.77	46.96%	
4002 - Interest Income	87,309.76	91,800.00	95.11%	183,600.00	47.55%	
4010 - Miscellaneous Income	500.00	250.00	200.0%	250.00	200.0%	The college hosted 2 PT students from UFT in 2018. U of T runs on calendar year and we budget on a fiscal year which resulted in a variance.
Total Income	3,101,493.46	3,305,223.51	93.84%	6,536,874.98	47.45%	
Gross Profit	3,101,493.46	3,305,223.51	93.84%	6,536,874.98	47.45%	
Expense						
5756 - C & D Accrual Expense	-102,687.84	0.00	100.0%	0.00	100.0%	Reversal of accrual expense of 6 Complaints and Discipline cases that are now closed.
5000 - Committee Per Diem						

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	Q2 YTD			Full Year		Notes for Council
	Apr' 19 - Sep' 19	Budget	% of Budget	Budget	% of Budget	
5001 - Chairs meeting - per diem	2,212.00	4,389.00	50.4%	4,389.00	50.4%	Budgeted for 7 attendees but only 6 attended and the rate claimed was less than budgeted.
5002 - ICRC - per diem	11,230.00	11,649.00	96.4%	20,073.00	55.95%	
5003 - Council - per diem	26,481.75	29,319.00	90.32%	52,503.00	50.44%	Non-council committee members attendance at the In-service education day in Q2 cost less than expected.
5005 - Discipline Committee - per diem	18,358.00	14,589.95	125.83%	37,795.84	48.57%	Discipline panels have been proceeding with less than three professional members. Most hearings that were originally planned for Q2 occurred in Q3
5006 - Executive - per diem	5,684.09	9,726.00	58.44%	20,553.00	27.66%	Underspending resulted from less costs related to President claimed work and 1 less committee member attendance at Q2 meeting.
5010 - Patient Relations - per diem	0.00	706.57	0.0%	1,271.81	0.0%	No patient relations meetings required so far this year.
5011 - QA Committee - per diem	252.00	6,872.00	3.67%	13,744.00	1.83%	QAC meeting not required during this quarter based on altered timelines of the QA project.
5012 - Registration Com. - per diem	2,841.50	2,553.00	111.3%	4,245.00	66.94%	New members claimed higher prep time than budgeted for the August meeting.
5017 - Finance Committee - per diem	5,715.00	4,128.00	138.45%	7,880.00	72.53%	Originally scheduled a 1 hour teleconference changed to full day in-person meeting resulting in higher per-diems.
Total 5000 - Committee Per Diem	72,774.34	83,932.52	86.71%	162,454.65	44.8%	
5050 - Committee Reimbursed Expenses						
5051 - Chairs meeting - expenses	10,689.83	8,415.00	127.03%	8,415.00	127.03%	Overage resulted from higher than budgeted costs for the facilitator for chair's training day.
5052 - ICRC - expenses	13,423.89	14,078.70	95.35%	26,258.70	51.12%	
5053 - Council - expenses	42,007.18	36,165.00	116.15%	62,268.00	67.46%	Originally planned for In-service education day in Q1 with non-council committee members. This was deferred to Q2 resulting in higher expenses this quarter.
5055 - Discipline Committee - expenses	22,786.42	31,785.00	71.69%	83,460.00	27.3%	Hearings that were planned to take place in Q2 occurred in Q3
5056 - Executive Committee - expenses	3,986.22	10,369.00	38.44%	20,431.00	19.51%	No legal counsel or external education required.
5062 - QA Committee - expenses	0.00	6,251.60	0.0%	12,503.20	0.0%	Extensions in timelines for the remote assessment pilot and the on-site assessment pilot, the budgeted meeting for Q2 was not required.
5063 - Registration Comm. - expenses	2,064.09	1,255.00	164.47%	1,255.00	164.47%	Hotel costs higher than budgeted.
5075 - Finance Committee - expenses	5,129.27	2,000.00	256.46%	4,000.00	128.23%	Originally scheduled a 1 hour teleconference changed to full day in-person meeting resulting in additional expenses.
Total 5050 - Committee Reimbursed Expenses	100,086.90	110,319.30	90.73%	218,590.90	45.79%	
5100 - Information Management						
5101 - IT Hardware	12,636.84	12,950.00	97.58%	25,900.00	48.79%	
5102 - Software	17,306.94	30,600.00	56.56%	50,200.00	34.48%	PISA software integration cost initially planned in Q1 but deferred to Q4.
5103 - IT Maintenance	53,257.47	45,535.00	116.96%	84,070.00	63.35%	Outlook migration cost higher than anticipated due to greater project complexity.
5104 - IT Database	40,469.80	198,310.00	20.41%	298,310.00	13.57%	New projects on hold pending agreement; working on enhancements.
Total 5100 - Information Management	123,671.05	287,395.00	43.03%	458,480.00	26.97%	
5200 - Insurance	4,822.98	5,400.00	89.31%	10,800.00	44.66%	Premiums are derived on industry claim ratio based on market performance. The claim ratio slightly lower than budgeted.

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	Q2 YTD			Full Year		Notes for Council
	Apr' 19 - Sep' 19	Budget	% of Budget	Budget	% of Budget	
5300 · Networking, Conf. & Travel	32,181.18	31,455.00	102.31%	36,322.50	88.6%	
5400 · Office and General						
5402 · Bank & service charges	18,375.93	18,400.00	99.87%	157,002.00	11.7%	
5403 · Maintenance & repairs	4,553.39	12,800.00	35.57%	18,900.00	24.09%	Repairs and maintenance not yet required.
5405 · Memberships & publications	7,192.10	8,977.41	80.11%	22,352.41	32.18%	Publication subscription and a membership originally budgeted no longer required.
5406 · Alliance Registration Levy	99,399.72	99,399.72	100.0%	198,799.44	50.0%	
5407 · Office & kitchen supplies	7,378.53	8,096.50	91.13%	15,893.00	46.43%	Some kitchen supplies budgeted for were not required.
5408 · Postage & courier	1,998.52	3,100.00	64.47%	6,200.00	32.23%	Vendors payments migrated to direct deposits. Postage not required.
5409 · Rent	241,890.47	243,846.36	99.2%	487,692.70	49.6%	
5411 · Printing, Filing & Stationery	31,977.82	4,300.00	743.67%	7,900.00	404.78%	Costs for external scanning project to digitize all outstanding college records was offset by reduction in costs for summer students to engage in this process.
5412 · Telephone & Internet	15,604.75	19,743.00	79.04%	36,783.00	42.42%	Backup internet line was purchased in Q2 at less cost than anticipated.
5413 · Bad Debt	1,781.07	1,300.00	137.01%	2,600.00	68.5%	Created an allowance for bad debts for anything outstanding in Accounts receivable greater than 90 days. This resulted in an increase in bad debt expense.
Total 5400 · Office and General	430,152.30	419,962.99	102.43%	954,122.55	45.08%	
5500 · Regulatory Effectiveness						
5502 · Strategic Operations	0.00	87,575.00	0.0%	87,575.00	0.0%	Projects delayed - review of data management practices due to anticipated outcome of Ministry performance indicator project.
5503 · Council Education	12,845.28	35,019.00	36.68%	47,459.00	27.07%	Under budget due to timing of some conferences occurring in different quarters. Some conference costs lower than anticipated.
5504 · Elections	0.00	0.00	0.0%	3,600.00	0.0%	
5505 · Policy Development	11,748.12	23,470.00	50.06%	38,826.00	30.26%	Lower Citizen Advisory Group costs than anticipated due to Partnership cost savings.
Total 5500 · Regulatory Effectiveness	24,593.40	146,064.00	16.84%	177,460.00	13.86%	
5600 · Communications						
5605 · French Language Services	5,553.79	6,500.00	85.44%	11,500.00	48.29%	Fewer requests for translation and QA program translations were delayed.
5620 · Print Communication	9,012.28	12,550.00	71.81%	20,200.00	44.62%	Creation of materials deferred to Q3, following stakeholder survey.
5621 · Online Communication	5,056.97	26,220.00	19.29%	55,665.00	9.09%	Work ongoing related to AODA compliance, website improvements and video production. All to be invoiced by Q4.

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	Apr' 19 - Sep' 19	Budget	% of Budget	Budget	% of Budget	
5622 - In-Person Communication	5,484.32	5,600.00	97.93%	25,200.00	21.76%	
Total 5600 - Communications	25,107.36	50,870.00	49.36%	112,565.00	22.31%	
5700 - Professional fees						
5705 - Additional Services	9,628.00	10,020.00	96.09%	10,020.00	96.09%	
5701 - Audit	18,080.00	18,080.00	100.0%	18,080.00	100.0%	
5702 - Hearing Expenses	8,367.30	3,151.00	265.54%	10,769.00	77.7%	Catering and transcription costs for 3 day hearings not anticipated.
5704 - Investigations	50,955.62	15,000.00	339.7%	20,000.00	254.78%	More third party investigators were required than anticipated; Unexpected increase in sexual abuse allegations requiring transcriptions of complainant's statement.
5750 - Legal						
5757 - Legal - Executive Office	0.00	4,000.00	0.0%	8,000.00	0.0%	No legal advice required.
5751 - Legal - QA	1,016.10	1,000.00	101.61%	2,000.00	50.81%	
5752 - Legal - Registration	12,439.27	6,500.00	191.37%	9,000.00	138.21%	Needed legal advice for a high risk case re: human rights that was unplanned.
5753 - Legal - Professional Conduct						
5760 - General Counsel	10,482.97	19,791.15	52.97%	35,791.15	29.29%	Fewer hearings days were required due to early resolutions.
5761 - Independent Legal Advice	40,411.30	50,225.09	80.46%	123,319.73	32.77%	Fewer hearings days were required due to agreed statements of facts and joint submissions on penalty - cases deferred to Q3
5762 - Hearing Counsel	80,204.09	84,011.62	95.47%	153,197.66	52.35%	
5763 - Court Proceedings & Appeals	50,000.00	0.00	100.0%	0.00	100.0%	Accrual for court proceedings delayed to 2020.
Total 5753 - Legal - Professional Conduct	181,098.36	154,027.86	117.58%	312,308.54	57.99%	
5754 - Legal - Council Advice	84.75	2,500.00	3.39%	5,000.00	1.7%	Budgeted for miscellaneous legal, however no substantial legal advice needed.
5755 - General Legal	6,384.50	1,000.00	638.45%	2,000.00	319.23%	Unanticipated legal fees related to Adoxio/KPMG contract
Total 5750 - Legal	201,022.98	169,027.86	118.93%	338,308.54	59.42%	
Total 5700 - Professional fees	288,053.90	215,278.86	133.81%	397,177.54	72.53%	
5800 - Programs						
5810 - Quality Program						
5825 - Assessor Remote Assessment	42,499.25	73,270.00	58.0%	134,980.00	31.49%	QA Project timelines have changed therefore we have not started selecting screening interviews
5811 - QA Program Development & Eval.	56,611.90	80,148.50	70.63%	86,285.50	65.61%	Extensions to the timeline of the QA pilot test process resulted in the spending occurring later in the year than budgeted.
5821 - Assessor Travel	0.00	6,900.00	0.0%	18,170.00	0.0%	QA Project timelines have changed therefore we have not started selecting screening interviews.
5823 - Assessor Training	8,983.58	12,220.00	73.52%	21,385.00	42.01%	Training funds will be spent in later quarters, timeline delays have delayed the delivery of training.
5824 - Assessor Onsite Assessment Fee	0.00	13,500.00	0.0%	35,550.00	0.0%	QA Project timelines have changed therefore we have not started selecting screening interviews.
Total 5810 - Quality Program	108,094.73	186,038.50	58.1%	296,370.50	36.47%	
5802 - Jurisprudence	13,088.85	13,680.00	95.68%	13,680.00	95.68%	
5870 - Practice Enhancement - QA						
5871 - QA Practice Enhancement fees	1,949.80	1,425.00	136.83%	1,900.00	102.62%	Although QA did not order new programs since the program went on hiatus the coaching programs initiated last year are much lengthier than planned.
Total 5870 - Practice Enhancement - QA	1,949.80	1,425.00	136.83%	1,900.00	102.62%	

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	Apr' 19 - Sep' 19	Budget	% of Budget	Budget	% of Budget	
5880 - Remediation - PC	4,501.77	9,175.00	49.07%	22,757.00	19.78%	Fewer coaching programs in compliance monitoring were initiated this quarter.
5890 - Sexual Abuse Therapy	5,739.60	11,450.00	50.13%	27,100.00	21.18%	Fewer applications for funding have been received.
Total 5800 - Programs	133,374.75	221,768.50	60.14%	361,807.50	36.86%	
5900 - Staffing						
5914 - Vacation Pay Adjustment	0.00	0.00	0.0%	15,000.00	0.0%	
5901 - Salaries	1,354,402.26	1,402,134.65	96.6%	2,791,974.65	48.51%	
5902 - Employer Benefits	61,637.07	68,304.78	90.24%	157,948.16	39.02%	Timing of employee hiring and departures resulted in lower benefit costs.
5903 - Employer RRSP Contribution	69,187.62	71,239.03	97.12%	148,728.34	46.52%	
5904 - Consultant fees	174,099.00	241,246.46	72.17%	440,889.42	39.49%	Plain language project to be completed in Q4. Extensions to the timeline of the QA pilot test process resulted in the spending occurring later in the year than budgeted.
5905 - Staff Development	28,500.76	35,000.00	81.43%	61,500.00	46.34%	Based on course availability and staff needs some training deferred to Q3 and Q4. Budgeted amount split evenly across quarters.
5906 - Recruitment	770.22	800.00	96.28%	1,600.00	48.14%	
5907 - Staff Recognition	4,184.22	4,475.00	93.5%	13,430.00	31.16%	Costs to be incurred in Q3 and Q4.
5911 - CPP - Canadian Pension Plan	45,787.20	43,166.35	106.07%	84,475.34	54.2%	CPP adjustment for former employee was required.
5912 - EI - Employment Insurance	18,186.39	17,617.27	103.23%	34,932.59	52.06%	
5913 - EHT - Employer Health Tax	32,090.14	28,937.37	110.9%	47,576.26	67.45%	EHT adjustment for former employee was required.
Total 5900 - Staffing	1,788,844.88	1,912,920.91	93.51%	3,798,054.76	47.1%	
Total Expense	2,920,975.20	3,485,367.08	83.81%	6,687,835.40	43.68%	
Net Ordinary Income	180,518.26	-180,143.57	-100.21%	-150,960.42	-119.58%	
Other Income/Expense						
Other Income						
6001 - Amortization	-75,410.36	-80,735.07	93.41%	-161,470.13	46.7%	Amortization expense spread equally however actual expense subject to asset purchase date. This will be fixed in the new budget.
Total Other Income	-75,410.36	-80,735.07	93.41%	-161,470.13	46.7%	
Net Other Income	-75,410.36	-80,735.07	93.41%	-161,470.13	46.7%	
Net Income	105,107.90	-260,878.64	-40.29%	-312,430.55	-33.64%	

Appendix B

Comparitive Balance Sheets

	<u>30 Sep 19</u>	<u>31 Mar 19</u>	<u>30 Sep 18</u>
ASSETS			
Current Assets			
Chequing/Savings			
1000 · Cash on Hand			
1001 · Petty Cash	250.00	250.00	250.00
1002 · Petty Cash (USD)	0.00	0.00	0.00
1003 · CC Clearing - RBC - 100-999-2	3,771.15	500,458.35	1,768.08
1005 · Operating - RBC - 102-953-7	105,593.34	79,534.27	83,318.18
1000 · Cash on Hand - Other	0.00	0.00	0.00
Total 1000 · Cash on Hand	<u>109,614.49</u>	<u>580,242.62</u>	<u>85,336.26</u>
1100 · Investments			
1104 · Investments - Long Term	4,204,277.97	4,204,277.97	3,637,498.58
1102 · Investments - Short Term	758,933.90	722,933.90	1,206,153.45
1103 · Savings - RBC - 100-663-4	4,223,295.37	6,455,080.61	4,279,196.60
Total 1100 · Investments	<u>9,186,507.24</u>	<u>11,382,292.48</u>	<u>9,122,848.63</u>
Total Chequing/Savings	9,296,121.73	11,962,535.10	9,208,184.89
Accounts Receivable			
1200 · Accounts Receivable	49,358.71	28,447.91	270,647.12
Total Accounts Receivable	<u>49,358.71</u>	<u>28,447.91</u>	<u>270,647.12</u>
Other Current Assets			
1201 · Allowance for Doubtful Accounts	-26,363.85	-24,582.78	-244,232.74
1400 · Prepaid Expenses			
1411 · Prepaid Rent	42,625.56	42,625.56	40,712.37
1401 · Prepaid Software	5,835.81	31,298.71	4,491.79
1403 · Prepaid IT services	19,019.77	21,988.85	24,957.93
1405 · Prepaid Insurance	3,662.04	3,302.10	4,366.98
1406 · Prepaid Membership	63,267.31	163,893.94	57,343.63
1408 · Prepaid staff development	0.00	0.00	3,775.60
1410 · Prepaid meetings	7,273.29	11,013.54	8,196.91
Total 1400 · Prepaid Expenses	<u>141,683.78</u>	<u>274,122.70</u>	<u>143,845.21</u>
Total Other Current Assets	<u>115,319.93</u>	<u>249,539.92</u>	<u>-100,387.53</u>
Total Current Assets	<u>9,460,800.37</u>	<u>12,240,522.93</u>	<u>9,378,444.48</u>
Fixed Assets			
1301 · Computer equipment	75,325.10	75,325.10	83,402.04
1302 · Computer Software	7,940.84	7,940.84	7,940.84
1305 · Computer equipment - Acc dep	-71,957.02	-68,823.12	-67,425.07
1306 · Computer Software - Acc Dep	-7,940.84	-7,940.84	-7,940.84
1310 · Furniture and Equipment	346,853.98	346,853.98	345,102.55
1312 · Furniture & Equipment -Acc Dep	-183,759.12	-151,380.84	-140,350.09
1320 · Leasehold Improvements	793,263.20	782,302.20	758,628.70
1322 · Leasehold Improvments -Acc dep	-185,696.57	-145,798.39	-69,540.96
1325 · Construction Work In Progress	0.00	0.00	0.00
Total Fixed Assets	<u>774,029.57</u>	<u>838,478.93</u>	<u>909,817.17</u>
TOTAL ASSETS	<u><u>10,234,829.94</u></u>	<u><u>13,079,001.86</u></u>	<u><u>10,288,261.65</u></u>

Appendix B

Comparitive Balance Sheets

	<u>30 Sep 19</u>	<u>31 Mar 19</u>	<u>30 Sep 18</u>
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable			
2000 · Accounts Payable	188,621.03	216,979.49	68,082.65
Total Accounts Payable	<u>188,621.03</u>	<u>216,979.49</u>	<u>68,082.65</u>
Other Current Liabilities			
2011 · Vacation Accrual	133,507.99	133,507.99	113,523.91
2010 · Accrued Liabilities	796,764.36	952,729.71	342,592.80
2100 · Deferred Revenue			
2101 · Deferred Registration Fees			
2103 · Pro-Rated Fee Revenue	71,194.11	0.00	71,391.63
2102 · Deferred Full Fee Revenue	2,799,475.00	5,600,735.00	2,646,145.83
Total 2101 · Deferred Registration Fees	<u>2,870,669.11</u>	<u>5,600,735.00</u>	<u>2,717,537.46</u>
2110 · Banked refunds	51,404.10	37,539.25	32,741.20
Total 2100 · Deferred Revenue	<u>2,922,073.21</u>	<u>5,638,274.25</u>	<u>2,750,278.66</u>
2150 · Other Payables			
2154 · Citizen's Advisory Group	0.00	20,621.42	21,012.53
2152 · Due to London Life (RRSP)	0.00	14,579.89	0.00
Total 2150 · Other Payables	<u>0.00</u>	<u>35,201.31</u>	<u>21,012.53</u>
Total Other Current Liabilities	<u>3,852,345.56</u>	<u>6,759,713.26</u>	<u>3,227,407.90</u>
Total Current Liabilities	<u>4,040,966.59</u>	<u>6,976,692.75</u>	<u>3,295,490.55</u>
Long Term Liabilities			
2125 · Deferred Rent - Tenant Incentiv	205,564.04	219,117.70	246,225.04
Total Long Term Liabilities	<u>205,564.04</u>	<u>219,117.70</u>	<u>246,225.04</u>
Total Liabilities	<u>4,246,530.63</u>	<u>7,195,810.45</u>	<u>3,541,715.59</u>
Equity			
3000 · Unrestricted Net Assets	4,163,830.41	3,962,801.00	3,862,812.95
3001 · Invested in Capital Assets	619,361.00	619,361.00	719,348.58
3010 · Restricted Reserves			
3011 · Professional Conduct Expense / Contingency	1,000,000.00	1,000,000.00	1,000,000.00
3012 · Sexual Abuse Therapy / Fee Stabilization	100,000.00	100,000.00	100,000.00
3013 - Strategic Initiatives	0.00	500,000.00	500,000.00
3014 - IT Improvements	0.00	250,000.00	250,000.00
Total 3010 · Restricted Reserves	<u>1,100,000.00</u>	<u>1,850,000.00</u>	<u>1,850,000.00</u>
3900 · Retained Earnings	0.00	0.00	0.88
Net Income	<u>105,107.90</u>	<u>-548,970.59</u>	<u>314,383.65</u>
Total Equity	<u>5,988,299.31</u>	<u>5,883,191.41</u>	<u>6,746,546.06</u>
TOTAL LIABILITIES & EQUITY	<u><u>10,234,829.94</u></u>	<u><u>13,079,001.86</u></u>	<u><u>10,288,261.65</u></u>

Meeting Date:	December 16-17, 2019
Agenda Item #:	14
Issue:	Strategic Planning
Submitted by:	Rod Hamilton, Registrar Joyce Huang, Strategic Projects and Policy Manager

Issue:

In preparation for the next round of strategic planning in 2020-21, Council is asked to consider and provide direction on a process to assist Council to reimagine the College's mission and vision and establish a new strategic plan. The proposed process is based on issues Councillors have raised in the past two years.

Background:

The College's current strategic plan ends in 2021. In order to establish a new strategic plan for 2021 and beyond, the planning activities need to take place in 2020. Council also previously identified the need to refresh the College's mission and vision. This presents an opportunity to both update the vision and mission and to establish the new strategic plan in 2020.

As the pace of change in the world increases, the approach to strategic planning in organizations need to be more nimble, by using a combination of long-term predictions about the future and planning for short-term initiatives and activities. The challenge with identifying all of the strategic initiatives and activities at the beginning of a three-year strategic plan is that if there are changes in the environment within those three years, some of the initiatives and activities may no longer be appropriate. Council has recently expressed a desire for a more useful strategic planning process.

Council's input suggests the need for a more layered approach to strategic planning going forward:

1. Envisioning the long-term future: extrapolate today's trends to predict the future state. Based on that future state, envision where the organization will be in that future state, which then translates into a mission and vision. For example, the question we may ask as a College is *"What kind of regulator do we want to be in the next 10 years?"*
2. Setting medium-term goals: using the mission and vision as guideposts, identify two to three strategic goals for the medium term (three years). These goals would form the basis of a 3-year strategic plan.

- Identifying specific short-term initiatives: identify initiatives for the next year that would help achieve the 3-year strategic goals. There will be periodic reporting on progress and opportunity to recalibrate if needed. This planning would take place each year to identify initiatives for the upcoming year, for the duration of the 3-year strategic plan.

In order to facilitate this series of planning activities at Council in the upcoming year, and based on Council's desire to have more sustained input into the planning, the following iterative process is proposed.



[†] This activity in September 2020 will likely need an additional meeting day just before or just after the regular Council meeting days.

* These dates may be subject to change to ensure alignment with the budget process.

Wherever possible, staff have aligned the timing of the planning activities to leverage Council's time during regular meetings. However, given the volume of work to be completed, it is anticipated that three extra meeting days may be necessary (in April/May 2020, September 2020, and October/November 2020).

Additional resources will be needed to support Council's planning activities, those will be included in the proposed budget for 2020-21.

The Executive Committee considered this process and was generally in support of the approach. The Executive Committee also noted that as we get closer to the final approval of specific strategic initiatives and the related spending, the timing of those decisions may need to be re-considered to ensure alignment with the budget process.

Decision Sought:

That Council consider the proposed process for strategic planning and direct staff to proceed with work based on this process.

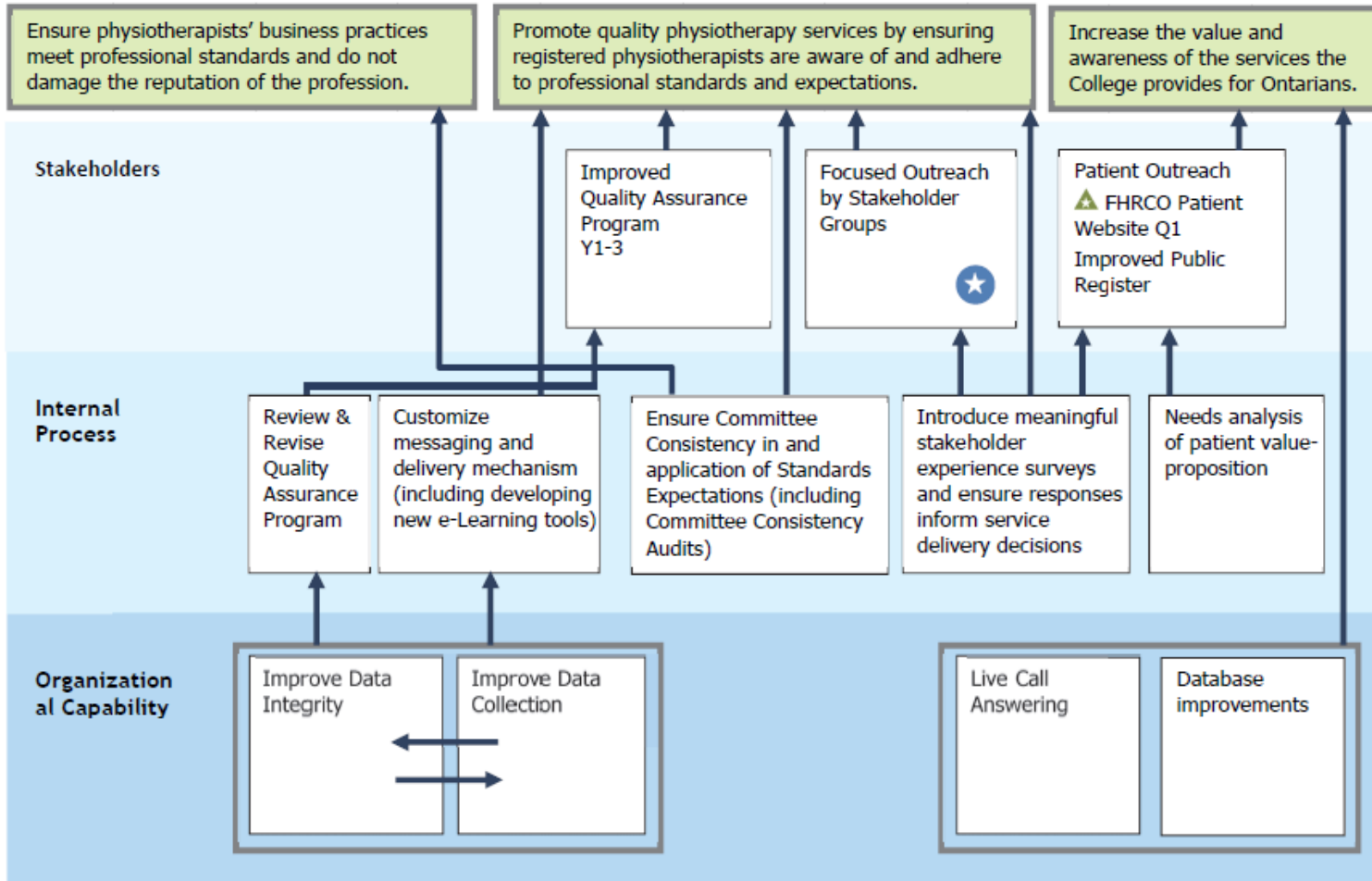
Attachments:

- Appendix 1: Strategic Map 2017-2021
- Appendix 2: Mission and Vision 2020



Appendix 1

Strategy Map 2017 – 2021



Ongoing/External

Y1: Supervisors, Students, Educators

Y2-3: Internationally Educated PTs, Employers, Insurers and Registration Ceremony for new graduates

Appendix 2

Aiming for High Performance – Our Values (Strategic Plan 2020)

Vision Statement: *Innovative Regulatory Leadership Promoting a Healthier Ontario*

Mission Statement: *To protect and serve the public interest by promoting collaboration and accountability for self regulation, and enabling a culture of continuous improvement to ensure that physiotherapists provide competent and ethical services.*

Values:

We demonstrate our values by:

Values	Actions
Proactive	<ul style="list-style-type: none"> • reflecting on current operations, policies, ways/methods of doing things which allow us to continue to evolve • researching and monitoring trends and anticipating what is to come • promoting a responsive customer service environment
Innovative	<ul style="list-style-type: none"> • seeking alternative ways to improve and enhance our programs and processes for all stakeholders • exploring solutions to identified risks and opportunities, and confidently proposing new ideas • keeping an open mind and always learning
Collaborative	<ul style="list-style-type: none"> • recognizing the impact of our work on others with respect to deadlines, priorities, and communication • identifying issues and initiatives which provide opportunities to collaborate with others both internally and externally • being available when others need support, resources and/or expertise and acting on opportunities to contribute • recognizing that collaboration may transcend job description
Accountable	<ul style="list-style-type: none"> • performing ongoing evaluation of all areas of our work and reporting the results • investigating and implementing systems of measurement • promoting and aligning our commitment to the mission and vision
Transparent	<ul style="list-style-type: none"> • ensuring all information is relevant, accurate, timely, honest and complete • allowing, seeking, and considering the perspective of others • reporting publicly on our standards, procedures and outcomes including our opportunities to improve.

Agenda #15

Pre-Strategic Planning Brainstorm and Information Session

Workshop– no materials



Meeting Date:	December 16, 17, 2019
Agenda Item #:	16
Issue:	Ministry of Health College Performance Measurement Framework
Submitted by:	Rod Hamilton, Registrar

Issue

The Ministry of Health is developing a college Performance Measurement Framework which will impact the kinds of information that the College is required to collect and report on.

Background

Council will recall that on a couple of occasions over the last 18 months, Thomas Custers from the Ministry of Health has attended Council meetings to inform the College of the Ministry’s progress on a project that is intended to arrive at a consistent Ministry-mandated performance measurement framework for Ontario’s health regulatory colleges.

When this framework is complete, the Ministry indicates that it will strengthen the Ministry’s ability to provide oversight of colleges and improve public accountability by providing transparent and consistent information about a college’s performance in meeting certain expectations, including acting in the interest of the public. The framework is also intended to support ongoing improvement of colleges’ performance through the identification of benchmarks and practices that are supported by research and evidence.

In order to assure that the outcome of the project addressed the perspectives and concerns of colleges, the Ministry solicited interest from colleges to participate on an advisory group the Ministry formed to assist it with the project. While our College did express an interest, it was not one of the colleges that was chosen to participate in the advisory group.

Initially the project was intended to be completed in early 2019, however due to the complexity of the issues identified, the Ministry has pushed its completion dates out until early 2020.

While the Ministry has been providing ongoing progress reports to colleges, real detail on the actual measures and indicators that the Ministry is proposing to use have been scarce.

However, on October 18th, the Ministry organized a consultation session with college registrars to obtain their feedback on a confidential working draft of the proposed performance measurement framework.



This was a very useful meeting in which the Ministry engaged directly with registrars to obtain detailed feedback on the proposal in terms of colleges' ability to provide the information being proposed as well as the reasonable timelines for implementing the complete framework. Registrars also suggested practical changes to some of the indicators that would make them more practical, useful and easy to provide.

Following this meeting, in late November the Ministry released a second version of its indicator framework document that incorporated some of the feedback it had obtained at the meeting.

While I am unable to provide you with the detail on the specific reporting requirements in the framework due to the Ministry's requirements for confidentiality, I can provide you with an overview of its structure and the kinds of reporting requirements that are being discussed.

However, it should be noted that the framework does appear to remain a work in progress so that ongoing changes which will impact its final appearance will likely still be made.

College Performance Measurement Framework – Structure

As of November, the Ministry is proposing a framework with four structural elements:

1. Measurement Domains – These are the attributes demonstrated by a health regulator that acts in the public interest. The Ministry is proposing four of these domains. Broadly speaking these domains relate to four areas of college work: its operations, its ability to register suitable candidates, its commitment to improvements in its processes and its ability to work with other agencies involved in health care.
2. Standards – Each measurement domain then has a number of standards grouped under it. Standards are regulatory practices that are supported by evidence and research. They will be used to measure the actual performance of colleges. There may be something like 15-20 standards.
3. Performance measures – Performance measures are intended to guide whether standards are achieved. Context measures will also be required and are intended to supplement the performance measures by providing additional information that will enable observers to understand college activities and decisions in context. There may be two to four measures for each standard.
4. Evidence – This is the required information, which may be either qualitative or quantitative, that will be used to assess the performance of a college on a measure. Each measure will likely need to be supported by multiple kinds of evidence.



Since the obligations of colleges under the RHPA are grounded in a duty to serve and protect the public interest, one key element that was considered by the Ministry in the consultation was the lack of a consistent understanding of what “public interest” was actually referring to. As such, one of the new issues for consideration is to consider the development of a common definition of this term.

Timing of the Implementation of the CPM Framework

As noted above it appears that the Ministry is planning to get the framework finalized by early 2020.

While it is not yet clear if this timeline is possible, the Ministry suggests that colleges can anticipate having this new set of reporting obligations in place sometime in 2020.

Feedback to the Ministry from this college and other colleges suggest that while most colleges will be able to provide some of the information that may be requested, no one college anticipates that it will be able to provide all the data immediately.

As a result, it appears that the Ministry may propose an initial phased implementation approach of one to two years that will enable colleges to ramp up the required data collection, the database infrastructure and the reporting itself.

After the system is fully up and running, the data generated will be used to help colleges consider how well they are meeting their regulatory expectations and then ultimately to consider individual college effectiveness.

Implications for colleges

Since no one college has all the data and infrastructure available to fully implement the framework, all colleges will need to dedicate some resources to this project in the coming years.

Note: this will likely end up being a critical factor supporting the College’s need to fully implement the information management system (ATLAS) that it has been working on these last few years. Without an effective data management system, it seems unlikely that any college would be able to provide the kind of data needed to support this set of Ministry expectations.

When the framework is fully implemented and it becomes possible for colleges to compare the data being collected into the framework, the Ministry will also expect colleges to compare their activities to those of their peers and make improvements to their processes as a result.



Impact on the College

As noted above, the Ministry's implementation of this framework will have at least two potential impacts on the College.

First, when the reporting obligations become clearer, the College will have to prepare to collect the required information and develop the technological infrastructure to store and report on it. This has the potential to not only require significant investments in technology, but in some cases, it may also require changes to existing processes or creation of new processes to support the reporting.

Second, the College will have to consider the relevance of the comparative reports from other colleges in its assessment of its own performance.

When more details become available, staff will be able to provide a fuller report on the operational impacts, the resources that would be needed to support the implementation, and if there is a need to re-prioritize other work.

Decision

No Decision required.



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Motion No.: 17.0

**Council Meeting
December 16-17, 2019**

Agenda #17: Evaluation of the Audit: Recommendation to Council

It is moved by

and seconded by

that:

Council reappoint Hilborn LLP as the College's auditor for the 2019-2020 fiscal audit.



Meeting Date:	December 16-17, 2019
Agenda Item #:	17
Issue:	Evaluation of the Audit: Recommendation to Council
Submitted by:	Elicia Persaud, Governance Analyst

Issue

The Finance Committee has conducted an evaluation of the 2018-2019 audit and are recommending that Hilborn LLP be reappointed as the College’s auditing firm for the 2019-2020 fiscal audit.

Background

A key duty of the College’s Finance Committee is to annually evaluate the performance of the external auditor and recommend to Council the appointment or changes to the appointment of a firm of chartered accountants as the College’s external auditors. In March 2019 Council adopted a formal process or tool to evaluate the performance of the external auditor. This process was developed and published by the Chartered Professional Accountants Canada, “Annual assessment of the external auditors: Tools for audit committees”.

Based on this tool, the annual assessment is intended to identify three key factors of audit quality for the Finance Committee to consider and assess:

1. *Independence, objectivity and professional skepticism* — Do the auditors approach their work with objectivity to ensure they appropriately question and challenge management’s assertions in preparing the financial statements?
2. *Quality of the engagement team* — Does the audit firm put forward team members with the appropriate industry and technical skills to carry out an effective audit?
3. *Quality of communications and interactions with the external auditor* — Are the communications with the external auditor (written and oral) clear, concise and free of boilerplate language? Is the auditor open and frank, particularly in areas of significant judgments and estimates or when initial views differ from management?

The Committee selected to focus this year’s assessment on independence, objectivity and professional skepticism, while incorporating selected questions from quality of the engagement team and quality of communications and interactions with external auditor and added some additional questions around contractual obligations.

In keeping with the tool, there were three stakeholder groups that were consulted in the development of the report: staff, the auditing committee and the auditor. Each of these groups were asked to answer the identified questions to help inform the auditing committee with the necessary information to make a recommendation to Council.



Summary of Report

Feedback from staff and the committee suggests that the auditor acted independently, objectively and demonstrated professional skepticism in addressing any potential misstatements. Staff felt the audit team members were knowledgeable and asked appropriate questions to better understand the college's work and processes.

The committee noted positive feedback around independence and interactions with the auditor and demonstrated confidence in the auditor's objectivity and professional knowledge.

The auditor provided feedback around interactions with staff and the committee and provided supporting details to questions answered by staff and the committee.

Based on all feedback received, no concerns were identified.

Finance Committee Recommendation

After reviewing the report, the committee determine they had sufficient information to come to a conclusion and are recommending that Council reappoint Hilborn LLP as the College's auditor for the 2019-2020 fiscal audit.

Executive Committee Recommendation

The Executive Committee supports the recommendation made by the Finance Committee to reappoint Hilborn LLP as the College's auditing firm for the 2019-2020 fiscal audit.

Decision Sought

Does Council approve the recommendation to reappoint Hilborn LLP as the College's auditing firm for the 2019-2020 fiscal audit?

Attachments

None.



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Motion No.: 18.0

**Council Meeting
December 16 – 17, 2019**

Agenda #18: Notice of Motion: Consent

It is moved by

and seconded by

that:

Council directs staff to explore additional support to registrants on consent.

Meeting Date:	December 16-17, 2019
Agenda Item #:	18
Issue:	Notice of Motion: Consent
Submitted by:	Gary Rehan, Councillor

Issue:

Should the College provide additional support to registrants about consent?

Background

Before a physiotherapist begins to assess or treat a patient, it is the physiotherapist's responsibility to ensure that the patient understands what will happen before giving the physiotherapist their consent to proceed. The [Health Care Consent Act](#) (HCCA) describes the rules on consent to treatment that apply in all health care settings. While the HCCA describes what is required to ensure that consent is informed, it does not specify how consent should be documented by health professionals.

In an effort to bring clarity to registrants on documenting consent, the College's Record Keeping Standard and Consent resources provide some guidance on expectations for documentation.

The [Consent resource page](#) states that,

Physiotherapists must document their conversations with patients about ongoing consent to assessment, treatment, and involvement of other care providers, including physiotherapist assistants.

The [Record Keeping Standard](#) states that,

Clinical records must contain relevant information about a patient's care in enough detail to allow another health provider to assume care of the patient or to follow the plan of care.

Information that is relevant to a patient's care includes, but is not limited to:

- *discussions with the patient to obtain ongoing consent to assessment, treatment, and involvement of other care providers*

In addition to this, practice scenarios about obtaining and documenting consent are currently being developed to provide additional guidance to registrants.

Even though these expectations provide more guidance than the HCCA, perhaps there is a need for the College to be more specific about how consent should be documented.

To determine if there is a need for more specific guidance on documenting consent, and what that guidance should be, the following issues would need to be explored:

- stakeholders' concerns or expectations about consent
- legal advice about the interpretation of the consent obligations in the *Health Care Consent Act*
- how courts have interpreted and applied consent obligations in the *Health Care Consent Act* in relevant case law
- concerns and issues identified within the College's program areas about consent
- guidance provided by other regulated professions and regulatory agencies about consent

Further exploration of this issue will require dedicated resources and funding as it is not a simple activity. Council is asked to consider whether the College should undertake additional exploration to determine the need to provide additional guidance to registrants about consent at this time. If so, Council is asked to consider the relative priority of this work.

Decision sought:

Council is asked to consider Gary Rehan's notice of motion about providing additional support to registrants on consent.

Appendices:

- Record Keeping Standard
- Consent resource page

Record Keeping Standard

Date Approved: September 28, 2017

Updated: November 1, 2017

The Purpose of Record Keeping

Clinical records are important communication tools that allow the physiotherapist and others to track the patient's past and current status, determine future care needs, give evidence of the care provided, collaborate when providing care, and transfer a patient's care smoothly. Good record keeping enhances outcomes and safety for patients.

Physiotherapists also keep records for other purposes, such as to demonstrate that they are accountable to patients, payers, the College, and other health care providers, and to meet any reporting requirements required by law or by organizations.

The requirements in this Standard apply to records in any medium, such as paper, electronic, audio, video, and photographs.

1. Responsibility and Accountability

Physiotherapists must maintain clinical records about their patients, and other records that are required by the College by law, or by other organizations.

2. General Requirements for All Records

Records must be well organized, understandable, and accurate.

Well Organized:

- Entries must be dated.
- Late entries must include both the date of the item being recorded and the date the entry was made.
- The person who provided the care and/or made the entry must be identified by name and job title, or by a unique identifier.

Understandable:

- Entries must be legible.
- Specialized terms, short forms, and diagrams must be understandable to anyone who may be involved in the care. This can be done by defining the terms, short forms, and diagrams in the record, or having a list of definitions available.
- Records must be in either English or French.
- Records must use appropriate, respectful, and non-judgmental language.

Accurate:

- Information must be entered within a reasonable time period.
- Entries must be permanent. That means there must be a way to ensure that content is not lost or deleted.
- If there are additions or corrections, the original content must remain readable. The new content must indicate who made the addition or correction, the date, and the reason for the addition or correction.
- If there are significant changes in the patient's condition or relevant new information is received, this must be entered as updated information.

3. Requirements for Clinical Records

Information in clinical records must support physiotherapists' rationale for the care that they provide.

Clinical records must contain objective data, evidence, and outcome measures whenever possible and appropriate. They should also include information to help anyone who may be involved in the care interpret the data or measure where necessary.

Clinical records must contain relevant information about a patient's care in enough detail to allow another health provider to assume care of the patient or to follow the plan of care.

Information that is relevant to a patient's care includes, but is not limited to:

- unique identifiers for the patient and for all providers involved in that patient's care
- information about the patient: demographic information, health, family, and social history, and patient-reported subjective data
- discussions with the patient to obtain ongoing consent to assessment, treatment, and involvement of other care providers
- care refusals
- the date of every patient encounter, including missed appointments
- results of tests, investigations, assessments, measures, and any reports received regarding the patient's care
- details about analysis, diagnosis, patient goals, treatment plan, and treatments performed
- progress notes, outcomes, reassessments, and resulting changes to the treatment plan
- details about any care that has been assigned to another person, or care provided collaboratively with other health providers, including consultations and correspondence
- discussions and communications with the patient including instructions, recommendations and advice
- referrals and transfers of care to another health provider, and any reports sent regarding the patient's care
- discharge summaries including reassessment findings, reason for discharge and other recommendations.

4. Requirements for Financial Records

Physiotherapists who charge fees for the care, service, or product provided must ensure there are financial records that contain:

- the name of the patient
- the name of the physiotherapist, physiotherapist assistant, and others who provided care under the physiotherapist's supervision
- date of service
- a description of the care, service, or product provided
- amount of the fee for the care, service or product
- any payment received.

5. Record Retention

Clinical and financial records must be retained for at least 10 years from the **later** of the following two dates:

- the date of the last patient encounter, or
- the date that the patient reached, or would have reached 18 years of age.

It must be possible to retrieve and reproduce a complete clinical and financial record for each patient throughout the retention period.

6. Privacy Requirements

Physiotherapists must comply with all legislation that protects the confidentiality of personal information and personal health information. The Personal Health Information Protection Act (PHIPA) sets out the duties physiotherapists have as either Health Information Custodians (HIC) or agents of a Health Information Custodian.

Here are some of the requirements in the *Personal Health Information Protection Act*:

- Physiotherapists must maintain patient confidentiality in the course of collecting, storing, using, transmitting and disposing of personal health information. Examples of secure storage and access include physical controls such as locks, and electronic controls such as passwords and encryption.
- Patients must know who has custody and control of their personal health information (the Health Information Custodian) and how their personal health information will be managed.
- Physiotherapists must obtain and record patient consent before disclosing a patient's personal health information to someone who is not a health provider involved in the patient's care.
- Physiotherapists must ensure that those who have the authority or patient consent can access a patient record in a timely way. A reasonable fee may be charged for providing the record.

The College's privacy resources provide more detailed information about privacy requirements.

Glossary

Treatment:

To determine whether the activity performed by the physiotherapist assistant was treatment, ask yourself if the activity was part of the physiotherapist's treatment plan, for example applying modalities, exercises, gait training, etc. Things such as tidying the treatment area, removing an ice pack or escorting patients to and from the treatment area would likely not be classified as treatment.

Confidentiality:

The obligation of a regulated health care provider not to disclose information obtained from a patient in a therapeutic relationship without the consent of the patient, or his or her authorized agent, or as required or permitted by law.

Understandable:

Being clearly laid out and written in language that is easy for the average person to understand.

Consent

Getting consent from a patient is more than just having a patient sign their name to a form. The physiotherapist must ensure that patients understand what they are consenting to.

The following list of expectations describes what physiotherapists are required to do when obtaining consent.

The information below is a summary of the legislative requirements on consent. Refer to the legislation for full details.

1. Before conducting an assessment or providing treatment, physiotherapists must get a patients' permission to do so. This is known as consent. The physiotherapist must be sure that patients understand what is going to happen before the treatment begins by providing information about the nature of the treatment, its benefits, risks, side effects, the alternative courses of action, and any possible consequences of not having the treatment. The physiotherapist must also answer any questions the patient may ask about the treatment.
2. Consent can be given verbally, in writing, or it can be implied through behaviour. For example, the patient rolls up their sleeve for their arm to be examined.
3. Patients are entitled to refuse to consent to treatment or withdraw their consent at any time.
4. If the patient is not capable of providing consent, the physiotherapist must find a substitute decision-maker to provide consent.
5. Physiotherapists cannot make decisions on behalf of a patient. The only exception is in an emergency when there is no substitute decision-maker available to make the decisions.
6. In a team environment, if there is any doubt about whether the patient provided consent to another health professional involved in the treatment plan, the physiotherapist must confirm that consent was provided or get it again.
7. Physiotherapists must obtain a patient's consent to involve others in the patient's care, such as physiotherapist assistants, students and volunteers. This requires a conversation with the patient about the roles and responsibilities of the physiotherapist and the physiotherapist assistant, student or volunteer.
8. Physiotherapists must document their conversations with patients about ongoing consent to assessment, treatment, and involvement of other care providers, including physiotherapist assistants.

Glossary

Capable

A person is capable of giving consent to treatment if he or she:

Understands the information needed to make a decision concerning the treatment, and
Appreciates the reasonably possible consequences of giving consent to the treatment or refusing to consent to the treatment.

Capacity to consent to treatment can vary over time. For example, the capacity of an elderly patient with dementia to give consent can change throughout the course of the treatment plan. The physiotherapist should therefore continuously re-evaluate the patient's capacity.

Substitute decision-maker

The substitute decision-maker is expected to make decisions based on the patient's known wishes expressed when he or she was 16 years of age or older and capable of providing consent. The hierarchy of substitute decision-makers is:

- 1) Guardian of the person—appointed by the court
- 2) Someone who has been named as the person's power of attorney for personal care
- 3) Someone appointed as a representative by the Consent and Capacity Board
- 4) Spouse, partner, or relative of the patient in the following order:
 - a. Spouse or partner,
 - b. Child, parent or a children's aid society or other person who is lawfully entitled to give or refuse consent in place of the parent
 - c. Parent who has only a right of access
 - d. Brother or sister
 - e. Any other relative (related by blood, marriage or adoption)
- 5) Public Guardian and Trustee.

Agenda #19
Members' Motion/s



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Motion No.: 20.0

**Council Meeting
December 16-17, 2019**

Agenda # 20: Motion to go in camera pursuant to section 7(2)(b) of the Health Professions Procedural Code

It is moved by

and seconded by

that:

Council move in camera pursuant to section 7(2)(b) of the Health Professions Procedural Code.

**Written Submission of Public Member Ron Bourret's
Attendance at the SOAR (Society of Ontario Adjudicators
and Regulators) Annual 2019 Conference**

It is with great gratitude that I thank the College of Physiotherapists for sponsoring my attendance at this year's one day SOAR Conference in Toronto. There were approximately 170 attendees, from every level of government and agency in attendance.

As a trained adjudicator by profession, and a member of the College's Disciplinary Committee, I embraced the opportunity to be able to learn the new developments and conventions now used by administrative tribunals.

I attended a workshop dealing with how non-legally trained tribunal members can interpret legislation in order to be able to apply the legislation as stated in the *Legislation Act* and the *Interpretation Act*. Furthermore, what happens when the Judiciary determine their own interpretation.

An excellent workshop dealing with improving decision writing skills was, in my view, a must for anyone on a Discipline Panel to attend. Though you would think that this topic would be dry, it was not. The panel was excellent and a lot of examples kept the attendees laughing. Many great strategies were discussed and advice given for preparing clear, concise, and timely decisions were much appreciated.

The final workshop that I chose dealt with assessing credibility of evidence. Tools and tips were offered to regulators and adjudicators in looking at opinion evidence and using best practices and procedural safeguards in administrative and regulatory proceedings.

I strongly recommend this conference to anyone on the Discipline Committee or considering the same.

Ron Bourret
Public Member
College of Physiotherapists