

## BRIEFING NOTE

**TO:** Board of Directors

**FROM:** Governance Committee

**DATE:** December 2, 2024

**SUBJECT:** 11.0 Quarterly Policies for Content Review

☒ For Decision

☐ For Information

☐ Monitoring Report

---

**Purpose:**

To carry out a scheduled content review of policies 2-09, 2-10, 3-09 and 4-07 for the purpose of determining whether any amendments are necessary.

**Background:**

The board has implemented a schedule to regularly review the content of its governance policies to ensure they remain relevant and continue to serve the board's needs and strategic objectives.

**For Consideration:**

The following policies are scheduled for content review in Q4 of 2024:

- 1. Relationship with Public and Stakeholders Policy 2-09:** This policy outlines the board's expectations and risk boundaries for the Registrar, CEO regarding the College's interactions with the public and external stakeholders. **No updates are proposed to this policy at this time (see Appendix A).**
- 2. Registrant Relations Policy 2-10:** This policy outlines the board's expectations and the risk boundaries for the Registrar, CEO regarding the College's interactions with its registrants. **No updates are proposed to this policy at this time (see Appendix B).**
- 3. Vote Majority for Termination of a Registrar Policy 3-09:** This policy is designed to outline that a super majority vote of three quarters (or 75%) must be established when a motion to terminate the employment of a Registrar, CEO is before the Board of Directors. **No updates are proposed to this policy at this time (see Appendix C).**
- 4. Board and Committee Principles Policy 4-07:** This policy outlines the principles used by the COO Board of Directors to mandate and operate all Statutory Committees and any Non-Statutory Committees (Standing or Ad-Hoc) formed by the board. **No updates are proposed to this policy at this time (see Appendix D).**

**Public Interest Considerations:**

The board has recognised the importance of strong governance to carry out its object of regulating the profession in the public interest and has invested significant time and resources into updating its governance policies and processes. Reviewing the content of these policies ensures that they remain consistent and effective, and that the College is up to date with regulations, technology, and regulatory best practices.

**Diversity, Equity, and Inclusion Considerations:**

The Governance Committee did not identify any concerns from a diversity, equity, and inclusion perspective.

**Risk Management Considerations:**

Regularly reviewing the content of governance policies to ensure that they remain relevant and continue to serve the board's needs and strategic objectives aligns with the COO Strategic Plan and helps to mitigate organisational risk.

**Recommendations/Action Required:**

The Governance Committee recommends that the board approve no changes to the **Relationship with Public and Stakeholders Policy (2-09)**, **Registrant Relations Policy (2-10)**, **Vote Majority for Termination of a Registrar Policy (3-09)** and **Board and Committee Principles Policy (4-07)**.

**POLICY TYPE: OPERATIONAL BOUNDARIES****2-09 Relationship with Public and Stakeholders Policy**

---

**Purpose:**

To outline the Board's expectations and the risk boundaries for the Registrar, CEO regarding interactions with the public and other external stakeholders.

**Policy:**

With respect to interactions with the public and other external stakeholders, the Registrar, CEO shall ensure that organizational conditions, processes, and decisions are safe, respectful, provide appropriate confidentiality, and meet people's legitimate needs.

Accordingly, the Registrar, CEO shall not operate without:

1. Engaging with the public in a manner that is consistent with the Regulated Health Professions Act and Regulations, and that:
  - a. Reflects the value the organization places on the public, and
  - b. Uses open and transparent processes for public involvement.
2. Providing a professional, safe environment that enables communication and engagement by the public and others with the College.
3. Ensuring a culture that is reflective of a commitment to providing fair, transparent, prompt/timely and courteous service.
4. Ensuring a process for addressing a member of the public's requests, concerns, and complaints in a fair, objective, respectful, and timely manner.
5. Establishing a clear understanding by the public of what may be expected from the services offered by the College.
6. Making all reasonable plans to ensure that persons may use French in dealings with the College.
7. Providing services with appropriate consideration of client differences: cultural, geographic, language, and other differences
8. Ensuring a person's confidentiality, except where otherwise required by law.
9. Ensuring a process exists to encourage persons who believe they have not been protected under this policy to express their concerns.

**POLICY TYPE: OPERATIONAL BOUNDARIES****2-10 Registrant Relations Policy**

---

**PURPOSE**

The purpose of this policy is to outline the Board's expectations and the risk boundaries for the Registrar, CEO regarding interactions with the registrants.

**POLICY**

With respect to interactions with the registrants, the Registrar, CEO shall ensure that organizational conditions, procedures, and decisions are safe, respectful, and provide appropriate confidentiality and privacy.

Accordingly, the Registrar, CEO shall not operate without:

1. Using methods of collecting, reviewing, or storing registrant information that:
  - a. Protects privacy and confidentiality; and
  - b. Restricts improper access.
2. Informing registrants about their professional responsibilities and the consequences of noncompliance.
3. Enacting policies and procedures that comply with statutory requirements and principles of procedural fairness.
4. Taking reasonable steps to ensure that policies and procedures are communicated to registrants in a manner that is clear and timely.
5. Informing registrants of significant COO policy updates or changes that affect COO registrants.
6. Complying with the Human Rights Code and the Access for Ontarians with Disabilities Act and their regulations.
7. Taking reasonable steps to respond to registrants' requests and concerns in a timely manner.

**POLICY TYPE: BOARD - STAFF RELATIONSHIP**

3-09 Vote Majority for Termination of a Registrar

---

**POLICY**

In the event that there is a motion before the Board to terminate the employment of a Registrar, CEO, a three quarters super majority vote (or 75%) of the Board is necessary to carry the motion.

**DEFINITION**

Super Majority Vote – is defined as a majority vote by the Board which requires 75% or more of directors present and voting to vote in the affirmative of the action in order for the motion to be carried.

**POLICY TYPE: GOVERNANCE PROCESS****4-07 Board and Committee Principles Policy**

---

**Purpose:**

To outline the principles used by the COO Board with respect to the operation of COO Committees.

**Policy:**

1. This policy applies to all Statutory Committees and any Non-Statutory Committees (Standing or Ad Hoc) established by the Regulated Health Professions Act (RHPA) and/or as set out in the COO by-laws.
2. Committees are established to carry out specific functions defined by the RHPA and/or to help the Board carry out its mandate. By contrast, committees are not established to advise staff, help staff do their jobs, or to exercise authority over staff.
3. The Registrar, CEO or their delegate may provide administrative support to facilitate the work of committees. In the case of committee members requesting information or assistance without Board authorization, the Registrar, CEO can refuse such requests that require, in the Registrar, CEO's opinion, a material amount of staff time or funds or is otherwise disruptive or contrary to the Board's strategic objectives.
4. Committees may not speak or act for the Board except when formally given such authority for specific and/or time limited purposes.
5. Committees will reinforce the Board's wholeness and will not interfere with the Board's delegation to the Registrar, CEO.
6. All committee members will adhere to the Board's policies, including the Code of Conduct, and any policies relating to confidentiality and conflict of interest
7. All Committee members will take part in appropriate orientation and/or training as required.
8. All Committees will report regularly to the Board on their activities and participate in an annual committee self-evaluation.
9. Except as defined in their written Terms of Reference Policy, no Committee has the authority to commit funds or resources of the College.