

## CLINICAL PRACTICE COMMITTEE

### 2025 Annual Report to The Board of Directors

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**Committee Members:**

Parneet Dhillon, RO, Chair, Professional Appointee  
Stephanie Kelly, RO, Vice Chair, Professional Appointee  
Grazyna Sepczynska, RO, Board Professional Member (until October 30, 2025)  
Rebecca Forte, Community Appointee  
Parminder Kalsi, RO, Professional Appointee

**Number of Meetings: 3****Report:*****Orientation and Training***

Committee members were provided orientation and training at the first meeting of the year.

***Standards of Practice and Practice Guidelines***

In 2025, the Committee reviewed a draft of proposed updates to the Standards of Practice and Practice Guidelines. These updates were made at the direction of the Committee after considering feedback received from registrants and other stakeholders.

The proposed updates include:

- Updating Standard 3: Dispensing of Appropriate Ophthalmic Appliances to include criteria related to dispensing specialty lenses
- Updating Standard 7: Remote Practice and Technology to include criteria around incorporation technology in any aspect of practice
- Updating Standard 10: Delegation to account for the discontinuation of the refraction designation
- Adding and/or updating practice guidelines:
  - Professional judgement
  - Sexual abuse
  - Treating Spouse, Sexual Partner, Family Member or Friends
  - Remote Delivery of Contact Lenses
  - Selling a Practice or Retiring
  - Health Information Custodian versus Agent
  - Technology and the Use of Artificial Intelligence
  - Discontinuing/Declining Service to a Patient
  - Social Media

The proposed updates were circulated for stakeholder feedback to determine whether the proposed updates:

- Were clear, or if more guidance was needed
- Were appropriate for guiding professionals, and what areas may not be appropriate
- Whether they reflect the realities of current practice environment

And:

- Whether registrants were confident they would be able to apply the proposed updates in their day-to-day practice
- Where registrants supported the implementation of the proposed updates

The committee agreed that feedback indicated:

- the proposed updates were clear and enough guidance was given
- the majority of respondents feel they will be able to apply the proposed updates in their day-to-day practice

At the December Board of Directors meeting, the committee recommended they approve the proposed updates to the Standards of Practice and Practice Guidelines

Submitted by:

Parneet Dhillon, RO, Vice Chair, Professional Appointee

Peggy Dreyer, RO, Director, Professional Practice & Quality Assurance

## DISCIPLINE COMMITTEE

### 2025 Annual Report

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#### 2025 Discipline Committee Members:

##### Committee Members:

###### *Elected Members*

**Tonya Nahmabin, Vice Chair, RO**

Derick Summers, RO

Paul Imola, RO

Kevin Cloutier, RO

Samir Modhera, RO

Carlos Pacheco, RO

###### *Public Members*

Omar Farouk

Stephen Kinsella

Peggy Judge

Carlo Sicoli

Alicia Munian

###### *Appointed Members*

**David Milne, Chair, Non-RO**

Jay Bhatt, RO

John Battaglia, RO

Robert Quinn, RO

Stephanie Kelly, RO

Parneet Dhillon, RO

Elisabeth Roche, RO

Lindsay Beriault, RO

Melissa Campbell, RO

Parminder Kalsi, RO

Elliot Borins, Non-RO

Jamuna Balaram, Non-RO

Panos Petrides, Non-RO

Patrick Mott, Non-RO

Elyse Jackson, Non-RO

Rebecca Forte, Non-RO

The Discipline Committee holds hearings into specified allegations of professional misconduct or incompetence that are referred by the Inquiries, Complaints and Reports Committee.

##### Committee Highlights:

Seven members of the Committee attended the Discipline Committee training workshop via videoconference put on by the Health Profession Regulators of Ontario (HPRO) in Spring 2025.

Seven members of the Committee attended the Discipline Committee training workshop via videoconference put on by the Health Profession Regulators of Ontario (HPRO) in Fall 2025.

##### Hearings:

In 2025, a panel of the Discipline Committee held a hearing in the following matter:

**Matter**  
*College of Opticians v. Janmohamed*

**Hearing Date**  
July 25, 2025

A copy of the Discipline Committee's decision is available on the College's website.

The following matters have been referred to the Discipline Committee in 2025:

**Matter**  
*College of Opticians v. Gallo*  
*College of Opticians v. Puri*

**Hearing Date**  
TBD  
February 24, 2026

**Submitted by:**  
Stephanie Kelly, Chair, RO Appointed Member  
Tertia van Jaarsveld, Senior Coordinator, Professional Conduct

## GOVERNANCE COMMITTEE REPORT

### 2025 Annual Report to The Board of Directors

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#### **Committee Members:**

Elliot Borins, Community Appointee, Chair  
Lindsay Beriault (RO), Professional Appointee, Vice-Chair  
Elyse Jackson, Community Appointee  
Carlos Pacheco (RO), Board (Professional) Member  
Carlo Sicoli, Board (Public) Member

#### **Number of Meetings:**

In 2025, the Governance Committee held four virtual meetings via Zoom.

#### **Training**

At its first meeting of the year (February 2025), all Governance Committee members received orientation and training. This included an overview of the committee's role, a review of the Board's Policy Governance Framework and Manual, and an update on the College's ongoing governance reforms.

#### **Report:**

##### *Board Policy Review Schedule*

The committee reviewed the following policies in accordance with the schedule set out in Appendix 2 to the Policy Governance Manual, and recommended amendments to the Board where appropriate:

1. Registration Committee Terms of Reference and Mandate Policy 4-13
2. Fitness to Practice Committee Terms of Reference and Mandate Policy 4-14
3. Quality Assurance Committee Terms of Reference and Mandate Policy 4-15
4. Clinical Practice Committee Terms of Reference and Mandate Policy 4-16
5. Intellectual Property Policy 4-28
6. Investment Policy 2-06
7. Delegation to the Registrar, CEO 3-03
8. Board Strategic Agenda/Workplan Policy 4-21
9. Board Monitoring System Policy 4-25
10. Code of Conduct for Directors and Committee Members
11. Director Job Description Policy 4-04
12. Board Meeting Process Policy 4-22

13. Board Policy Development Policy 4-24
14. Pre-Election/Pre-Appointment Screening Policy 4-29
15. Financial Condition Policy 2-03

#### *2024 Committee Self Evaluation Results*

In May, the committee reviewed and discussed the results of the Governance Committee effectiveness self-evaluations for 2024.

#### *2025 Board Action Plan*

In May, the committee reviewed a draft of the board's 2025 Action Plan and confirmed that it aligned with the priorities identified during the board's working session in March 2025. The committee recommended, and the board approved, the 2025 Board Action Plan.

#### *COO Skills and Diversity Matrix*

In December 2024, the board approved restructuring the electoral districts for professional board members into a single province-wide district, effective for the 2026 elections. To ensure patients' needs across the province continue to be reflected, the board agreed to maintain geographic representation at the committee level. Sandi Verrecchia, of Satori Consulting Inc. was engaged to update the Skills and Diversity Matrix, to ensure committees collectively possess a broad range of skills and attributes in addition to geographic representation.

At its August meeting, the Governance Committee reviewed the updated matrix and its use in the appointments process. The committee raised concerns about the collection and use of personal data and agreed to continue discussion at its November meeting.

In November, the committee continued its discussion and concluded that the matrix would help to identify underrepresented groups and support ongoing diversity monitoring across priority areas. These insights would enable a more inclusive skills-based approach that would strengthen the board's ability to meet the needs of patients across Ontario.

Following this discussion, the committee recommended, and the board approved, the updated Skills and Diversity Matrix for elected board members and appointed committee members.

#### *By-Law Amendments – Election Districts*

The committee recommended, and the board approved, the proposed amendments to the by-laws intended to give effect to the board's decision to transition to a single all-Ontario district beginning in 2026.

#### *Board and Committee Effectiveness Self-Evaluations*

In May, while reviewing the evaluation results, the committee noted that "neutral" responses could distort the overall average scores and agreed to reassess the scoring matrix. In November, the committee

discussed the need for further research into alternative scoring models and best practices. In the interim, the committee recommended introducing a staff-developed glossary of terms to accompany the self-evaluation process and to clarify the meaning of each response option.

**Submitted by:**

Elliot Borins, Community Appointee, Chair

Sarah Scott, Director, Policy and Governance

## INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

Annual Report 2025

### Inquiries, Complaints and Reports Committee's Mandate

The role of the Inquiries, Complaints and Reports Committee (ICRC) is to review concerns about the conduct and actions of opticians. These concerns come to the ICRC's attention in several ways, including complaints, reports from the Registrar, or referrals from the College's Quality Assurance Committee. The ICRC investigates all complaints, considers all reports put before it, and determines whether it is appropriate to refer a matter to the Discipline Committee or Fitness to Practice Committee for a hearing, require some form of remedial or educational activity, or take no action. The ICRC also reviews information received by the College about unregistered individuals who may be practicing opticianry or referring to themselves as opticians.

The Committee and Panel composition in 2025 is below:

Table 1: 2025 Committee & Panel Composition	
Panel 1	Panel 2
Robert Quinn, RO, Chair, Elected Member	Stephen Kinsella, Vice Chair, Public Member
Omar Farouk, Public Member	Peggy Judge, Public Member (term ended July 8, 2025)
Alicia Munian, Public Member	Melissa Campbell, RO, Appointed Member
Elizabeth Roche, RO, Appointed Member	John Battaglia, RO, Appointed Member
Samir Modhera, RO, Appointed Member	Kevin Cloutier, RO, Elected Member
	Elyse Jackson, Appointed Member

### 2025 Committee Highlights

#### Number of meetings in 2025:

In 2025, the ICRC held 11 meetings. The ICRC held an orientation session for all members at the February 2025 as well as a refresher training meeting in June 2025. The two panels of the ICRC collectively held 9 meetings. The orientation included presentations by Raj Bhatti, Director, Professional Conduct and Amy Stein, General Counsel and Deputy Registrar. The refresher training was provided by Anastasia-Maria Hountalas, Partner, Steinecke Maciura LeBlanc Barristers & Solicitors.

Table 2: Number of Meetings in 2024	
Full Committee Meeting	2
Panel Meetings	9

**In 2025, panels of the ICRC reviewed 30 separate matters.** This included reviewing new complaints (12)



and reports (8), making decisions on ongoing matters (7), and approving the appointment of investigators (3) pursuant to sections 75(1)(a) and 75(1)(c) of the RHPA.

### Committee Work in 2025

Table 3: Matters Opened & Disposed of in 2025		
Categories	Opened in 2025	Disposed of in 2025
Complaints	27	23
Reports	1	0
Referrals from the Quality Assurance Committee	0	0
<b>Total</b>	<b>28</b>	<b>23</b>

Table 4: Themes in Complaints Opened in 2025	
2025 Complaint Themes	Complaints
Patient Abandonment	3
Sexual Abuse	1
Scope of Practice	1
Record Release	1
Dispensing	5
Professionalism	22
Improper Billing	1

\*Note that a complaint can have more than one theme

Table 5: Breakdown of Disposition Orders in 2025			
2024 ICRC Dispositions Orders	Complaints	Reports	QAC
Closed with no further action	8	0	0
Specified Continuing Education or Remediation Program	6	0	0
Oral Caution	3	0	0
Written Advice	9	0	0
Referral to Discipline	2	0	0

\*Note that dispositions may include one or more of the options listed above

### Unauthorized Practice (UAP)

The College opened 17 new UAP matters in 2025 in which 10 closed with various actions satisfactorily. Further, 2 matters have been escalated in which the College is seeking an injunction against the individuals who are engaging in unauthorized practice.

## **The Health Professions Appeal and Review Board**

The Health Professions Appeal and Review Board (HPARB) is an agency of the government, independent of the College, that is responsible for reviewing the decisions of the ICRC regarding complaints that are not referred to the Discipline Committee or the Fitness to Practice Committee. In 2025, reviews were requested of one ICRC decision, and HPARB issued its decision in an ongoing review, where it confirmed the ICRC's decision to take no action.

### **Submitted by:**

Rebecca Forte, Chair, RO

Raj Bhatti, Director, Professional Conduct

# INQUIRES, COMPLAINTS & REPORTS COMMITTEE 2025 ANNUAL REPORT

## ICRC Complaint Processing time

2025 data reflects the College's commitment to shortening processing times for complaint matter.

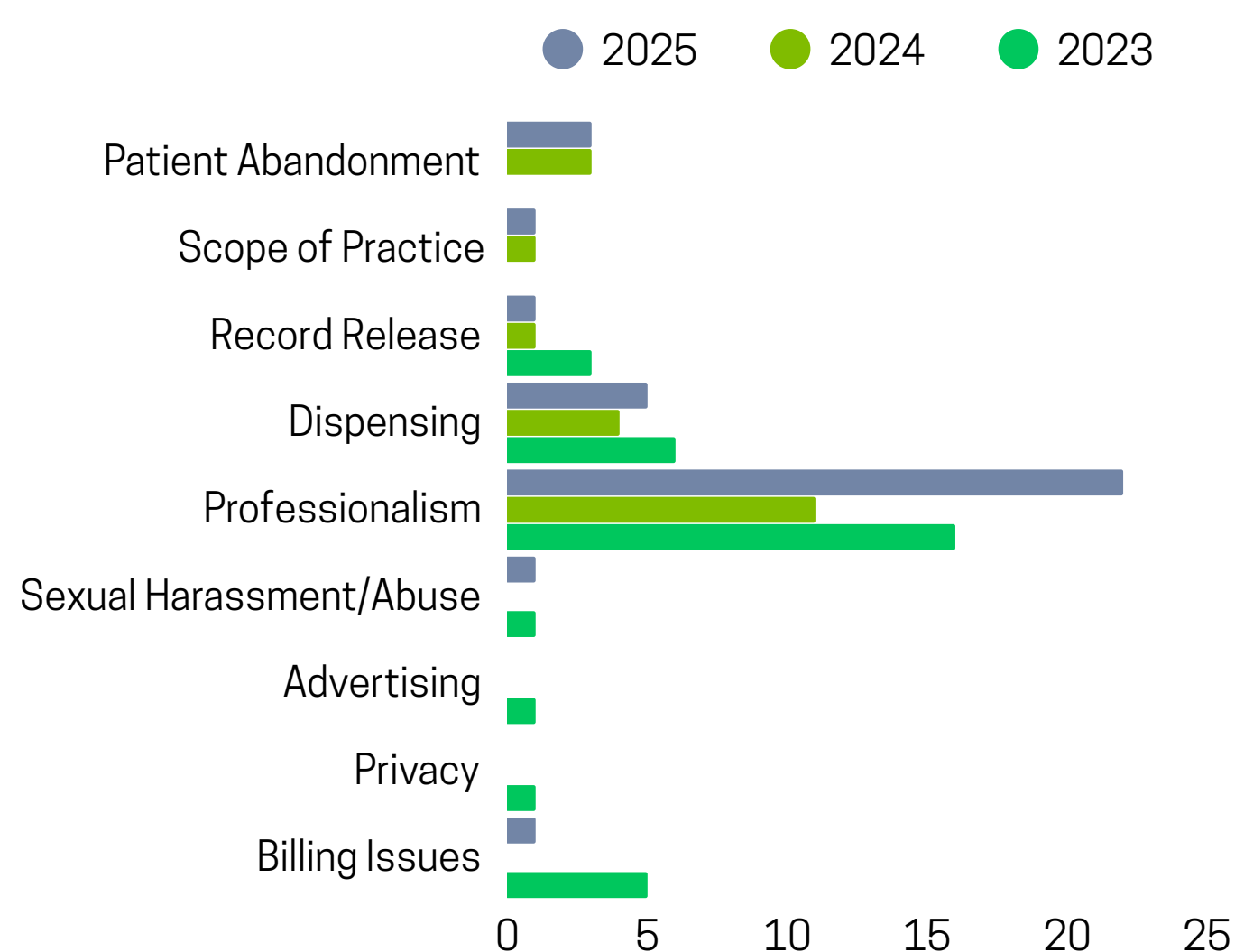
Avg. Days 2022: **477**

Avg. Days 2023: **368**

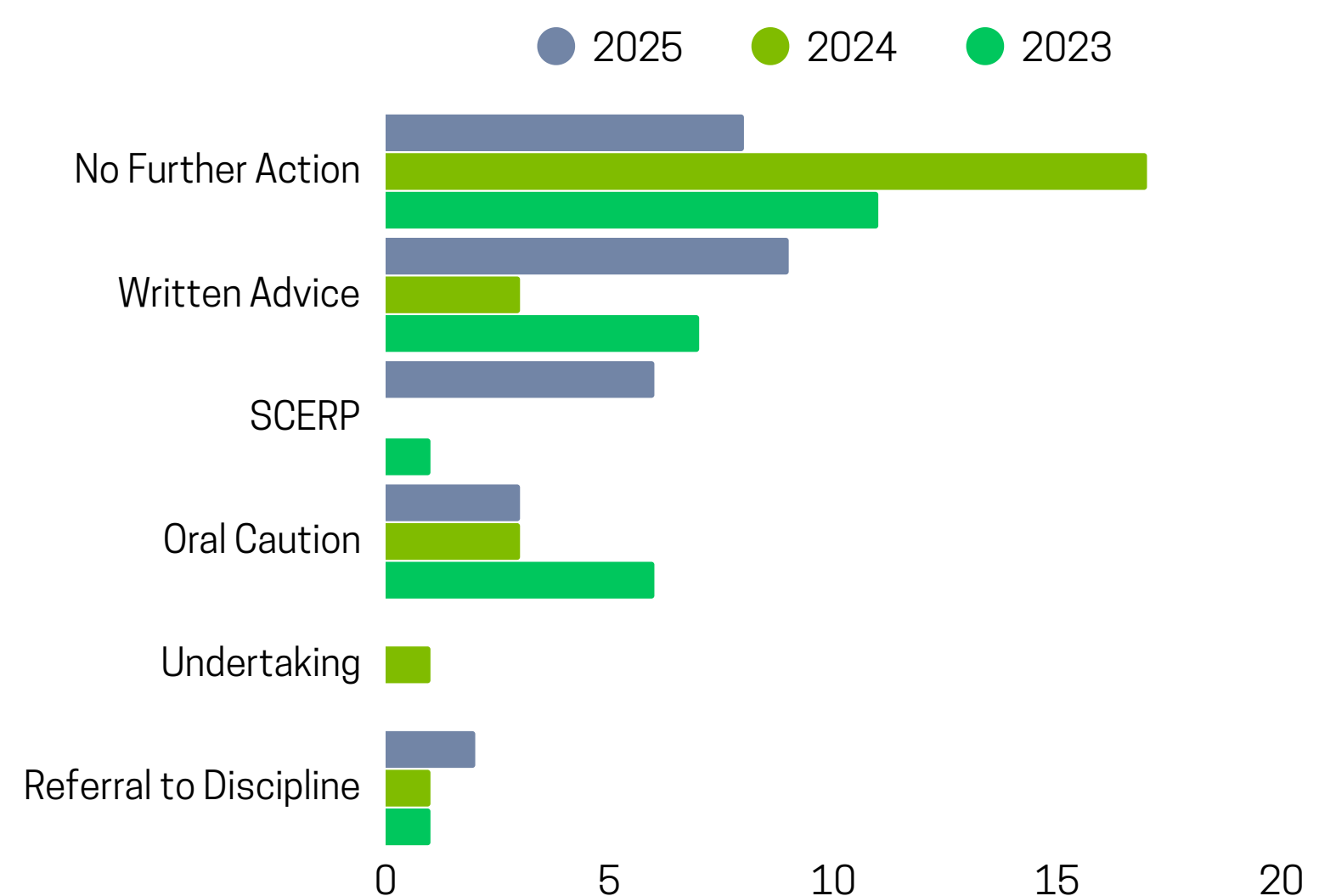
Avg. Days 2024: **254**

Avg. Days 2025: **225**

## Complaints Trends



## Disposition of Closed Matters



# Complaints/Reports Received in 2025: **28**

# Complaints/Reports Disposed in 2025: **23**

## Unauthorized Practice (UAP)

# UAP Reports Received: **17**

# UAP Reports Closed: **10**

# Referrals for Court Proceedings: **2**

# Court Orders: **0**

## PATIENT RELATIONS COMMITTEE REPORT

### 2025 Annual Report to The Board of Directors

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#### **Committee Members:**

David Milne, Community Appointee, Chair  
Jamuna Balaram, Community Appointee, Vice-Chair  
Parneet Dhillon (RO), Professional Appointee  
Paul Imola (RO), Board (Professional) Member  
Panos Petrides, Community Appointee

#### **Report:**

In 2025, the Patient Relations Committee held one virtual meeting via Zoom.

#### **Training**

Members of the Patient Relations Committee received comprehensive orientation and training covering the committee's mandate, the Patient Relations Program, the Sexual Abuse Prevention Guidelines and the funding for therapy and Counselling.

#### **Spousal Exemption Regulation**

Following the Ministry of Health's approval of the COO's spousal exemption regulation in August 2025, the committee met in October to review and update the relevant materials concerning the treatment of spouses.

The committee reviewed the following documents:

- Standard 2: Professional Conduct
- Jurisprudence Chapter 1; Professional Boundaries and Sexual Abuse Prevention
- Sexual Abuse Prevention Guidelines

The materials had been amended to reflect the College's position on the spousal exemption and to provide additional clarity regarding the treatment of family members and friends.

*Sexual Harassment Prevention Guidelines and Patient Bill of Rights.*

The committee conducted a scheduled review of the Sexual Harassment Prevention Guidelines and the Patient Bill of Rights to determine whether any amendments were required.

**Submitted by:**

David Milne, Community Appointee, Chair

Sarah Scott, Director, Policy and Governance

## QUALITY ASSURANCE COMMITTEE REPORT

2025 Annual Report to the Board of Directors

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### **Committee Members:**

Tonya Nahmabin, RO, Chair, Board Professional Member  
Omar Farouk, Vice Chair, Board Public Member  
Lindsay Beriault, RO, Professional Appointee  
Parminder Kalsi, RO, Professional Appointee  
Panos Petrides, Community Appointee

### **Accreditation Panel Members:**

John Battaglia, RO, Professional Appointee  
Jay Bhatt, RO, Professional Appointee  
Melissa Campbell, RO, Professional Appointee  
David Milne, Community Appointee  
Robert Quinn, RO, Professional Appointee  
Elisabeth Roche, RO, Professional Appointee  
Derick Summers, RO, Professional Appointee

In 2025, the Committee held 7 meetings and 2 Accreditation Panel meetings.

### **Report:**

#### **Orientation and Training**

Members of the Quality Assurance Committee (QAC) were provided with orientation and training related to the role of the committee and the Competency Review and Evaluation process at their first meeting of the year.

Anastasia-Maria Hountalas of Steinecke, Macura, LeBlanc provided members with an overview of the principles of Right Touch Regulation and explained that outcomes and/or decisions should be determined by the level of risk and may vary by file/case.

Amy Stein, Deputy Registrar and General Counsel provided an overview of the powers of the Committee and how to address concerns they may identify when reviewing files.

#### **Accreditation Panel**

Members of the accreditation panel were provided with orientation on the Accreditation Policy, accreditation categories, and the process of reviewing continuing education activities. In addition, they reviewed an activity submitted for accreditation as part of their training.

The accreditation panels reviewed 172 accreditation requests in 2025.

## **Peer Assessor Training**

The College's Peer Assessors were provided with annual training by Peggy Dreyer, Director, and Julie Borst, Senior Coordinator, Professional Practice & Quality Assurance.

## **QA Portal**

Ahead of the 2025 Competency Review and Evaluation (CRE) process, registrants identified as not completing some or all their 2024 Professional Portfolio through their Registrant portal were notified that they may have some deficiencies that required their attention.

## **Competency Review and Evaluation (CRE) Process**

In March 684 registrants received notice they were required to participate in the 2025 CRE process of these:

- 669 were randomly selected
- 15 were required to participate due to deferral or a deficiency in their 2024 Professional Portfolio

Of these:

- 6 were granted a deferral
- 8 were identified as not required to participate due to non-renewal, retirement, or not being registered during the relevant period

## **Peer and Practice Assessments**

As part of the CRE process, in addition to a fulsome review of their 2024 Professional Portfolio, 40 registrants were randomly selected to participate in a Peer and Practice Assessment (PPA):

In addition, the Committee:

- Ordered 21 PPAs due to non-compliance with the CRE process
- Revoked 2 PPAs placed on hold as the registrants have met the ordered requirements
- Deferred 3 PPAs
- Reviewed 26 PPA Reports

To date, there are:

- 11 PPAs outstanding
- 8 PPAs re in progress
- 9 PPA Reports to be reviewed by the Committee

## Quality Assurance Committee Policy Manual

The Quality Assurance Committee reviewed and approved updates to the following internal policies to ensure they remained current and relevant:

- Jurisprudence
- Professional Portfolio Review
- Defining the Role and Responsibilities of the College's Peer Assessors
- Peer Assessor Hiring Process
- Defining Peer Assessor Qualifications
- Course Activity Accreditation Criteria

Additionally, the Committee reviewed and approved updates to the Continuing Education Accreditation Policy. These updates included:

- The layout of the policy has been reorganized in an effort to make it more logical and easier to follow
- New language around relying on experience-based knowledge for the purposes of CE activities to provide clarity
- New language around demonstrating a presenter's knowledge or expertise to provide clarity
- New language around speaker criteria clarifying this includes all professional registrations and relevant academic positions
- Outlining how accreditation values are determined for scholastic courses or programs
- Additional language around subject matter of activities and the relevancy to applicable accreditation categories
- Removing the requirement that professional growth activities be supported by objective, neutral and reliable sources. All other policy criteria continue to apply.
- Updating the verification of attendance criteria
- Including a detailed chart outlining what must be submitted for each delivery format. This will help to eliminate confusion around submission requirements for each format.
- First Aid and CPR have been removed from the category definition of Professional Growth hours. On review, it appeared it was impractical to require providers of these courses to apply for accreditation from the College. Registrants can claim these courses can be claimed hour-for-hour in the non-accredited, self-directed category.

## Jurisprudence

The accreditation values for Jurisprudence Chapters 1 through 4 were amended to align with the Accreditation Policy. This more accurately reflects the time spent by a registrant promoting fairness to registrants and providing an increase in cost-free continuing education hours, which has previously been identified as a barrier.



Test questions for Chapters 1 -3 were updated by COO staff in consultation with John Wickett, a psychometrician to align with best practices for constructing multiple choice questions for quantitative assessments and to provide a better QA resource that objectively measures a registrant's knowledge and understanding of the material.

### **Free On-Demand Continuing Education**

As part of the College's commitment to actively work against discrimination, and to support the ongoing professional development of our registrants, the College partnered with the College of Audiologists and Speech Language Pathologists of Ontario to present the following webinars:

- Toward Accountable Action on Equity, Allyship, and Peacemaking in Healthcare (2-part series)
- Addressing Elder Ageism in Healthcare

Each webinar was accredited as 1 Professional Growth hour.

### **Quality Assurance Outreach**

In 2025, to provide information and answer questions related to the Quality Assurance Program, staff attended:

- 6 in person continuing education events
- Student night hosted by the Ontario Opticians Association
- Seneca College Student Trade Show

### **Submitted by:**

Omar Farouk, 2025 Vice Chair, Board Professional Member  
Peggy Dreyer, Director, Professional Practice & Quality Assurance

# QUALITY ASSURANCE COMMITTEE

## 2025 Annual Report

### 2025 Competency Review and Evaluation Process

Notable Points

- an increasing percentage of registrants are successfully correcting identified deficiencies compared to last year
- the percentage of registrants with outstanding requirements has remained fairly stable year over year

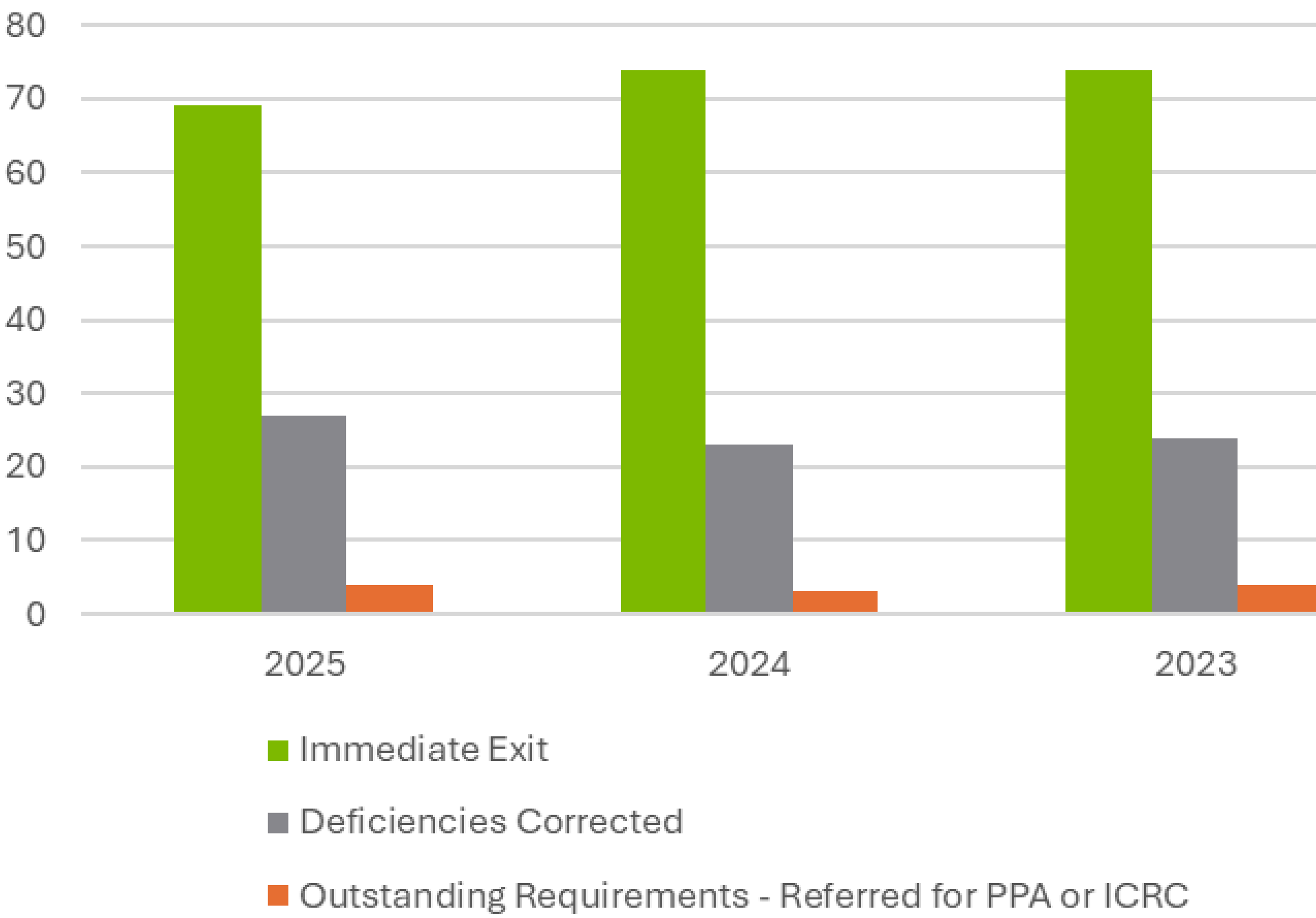
### Peer and Practice Assessment Results

Notable Points:

- the PPA Tool was updated in 2024 and includes a comprehensive chart review
- recommendations and SCERPs are all related to record keeping
- no other practice concerns have been identified

Legend\*  
SCERP = Specified Continuing Education or Remediation Program

### Professional Portfolio Results



### PPA Results



Accreditation Requests

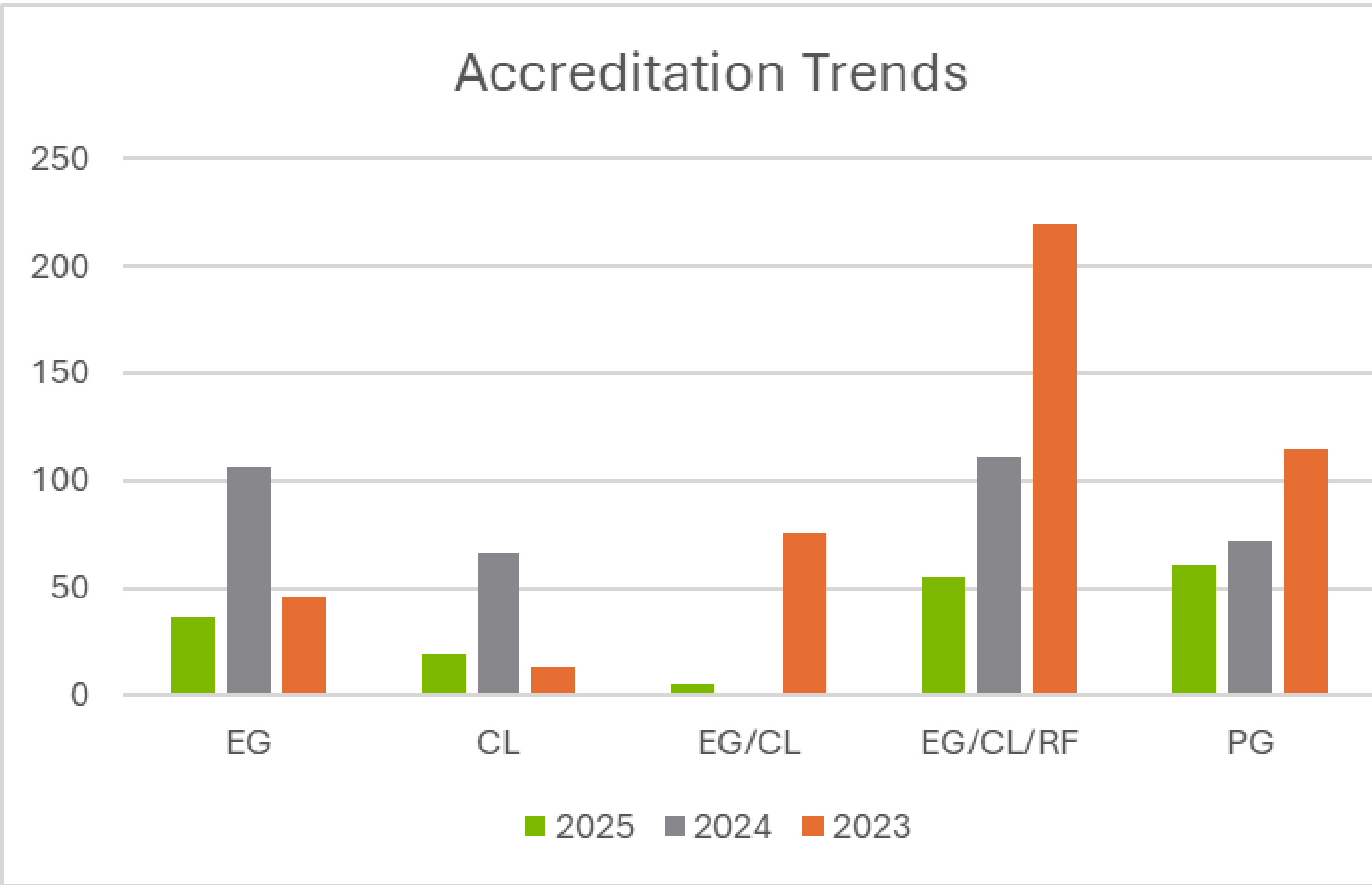
172 Continuing Education  
Activities Reviewed

164 Activities  
Accredited

177 Hours  
Of CE

Notable Points:

- while the number of accredited hours varies, the volume of requests received in 2025 is consistent to that of 2023
- the volume of requests received in 2024 was an anomaly as a new CE provider submitted 54 requests
- the number of accredited CE hours in 2023 is an anomaly due to scholastic continuing education courses being accredited



## REGISTRATION COMMITTEE

### 2025 ANNUAL REPORT

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#### **Committee Members:**

Derick Summers, RO, Chair, Elected Member  
Jay Bhatt, RO, Vice Chair, Professional Appointed Member  
Stephanie Kelly, RO, Professional Appointed Member  
Patrick Mott, Community Appointed Member  
Carlo Sicoli, Board Public Member

#### **Registration Appeals Panel:**

Alicia Munian, Board Public Member  
Robert Quinn, RO, Appointed Member  
Melissa Campbell, RO, Appointed Member

#### **Number of Meetings**

In 2025, the Registration Committee held 8 virtual meetings via Zoom. The Registration Appeals Panel (RAP) did not meet in 2025.

#### **Training**

The Committee received orientation training on the role of the College and the Registration Committee, an overview of the types of commonly reviewed applications, the appeal process, the role of the Office of the Fairness Commissioner (OFC), and fair access law, and unconscious bias.

Additionally, the Committee received training on the national examination and the Prior Learning Assessment and Recognition (PLAR) processes from Jodi Dodds, the Executive Director of the National Alliance of Canadian Optician Association (NACOR), and on the principles of right-touch regulation from Natasha Danson, partner with Steinecke Maciura Leblanc.

#### **Report**

##### *Transfer of PLAR Administration to NACOR*

Under the Registration Regulation, the Registration Committee is responsible for approving the PLAR process, such that applicants who successfully complete it will be deemed to have obtained the entry to practice competencies possessed by a graduate of an accredited program. In early 2025, the Registration Committee evaluated whether it would be advantageous to transfer full responsibility for administering the PLAR process to NACOR. The Committee noted that NACOR has expanded its resources to fully administer PLAR across multiple provinces, and transferring this responsibility to NACOR would align the College with other provinces and ensure consistency of the PLAR process across different provinces. The Committee further noted that transferring PLAR process administration to NACOR would reduce the

administrative workload for the College and shield the Registration Committee from potential challenges related to the consistency, fairness, or potential arbitrariness of its decision-making.

The Registration Committee approved NACOR as the third-party administrator for the PLAR process and a Memorandum of Understanding was signed by the College and NACOR.

#### *Stakeholder Feedback Review – Life Member Status*

In early 2025, the Committee reviewed stakeholder feedback on an alternative process to recognize long-serving opticians and that would balance protection of the public interest.

The alternative process proposed by the Committee included renaming the Life Member title to “Honorary Retired Status”; granting the title upon resignation (as opposed to administrative suspension) due to retirement; listing the honorary title holders on a designated webpage instead of the public register; and removing voting privileges to align with other opticians who no longer hold registration with the College.

Upon review of stakeholder feedback, the Committee decided to proceed with making a recommendation to the Board of replacing the Life Member title with Legacy Retired Optician. The Legacy Retired Optician status does not grant any voting rights and nominees would be reviewed by the Registration Committee.

#### *Legacy Retired Opticians*

The Registration Committee reviewed the first batch of Legacy Retired Optician nominees at their September 2024 meeting. Nine nominees were approved to be granted Legacy Retired Optician status.

The Committee also delegated approval of future Legacy nominees with no concerns or flags to College staff.

#### *Communication Timeline on Registration Regulation Change: July 1, 2025 Revocation Deadline*

Changes to the Registration Regulation under the Opticianry Act, 1991 were approved by the Ontario Government in February 2024. One of the changes was the revocation of registrants who had been suspended for three years or more. The first revocations occurred on July 1, 2025.

To communicate this change to suspended registrants, College staff utilized various methods to communicate the important registration changes to registrants and how it would affect them. These methods included:

- Email blasts, blog posts, and social media were utilized to alert registrants and applicants to the changes.
  - Creating a dedicated email address ([certificate@collegeofopticians.ca](mailto:certificate@collegeofopticians.ca)) to field questions about regulation changes and the impact to registrants.
- Communications to other impacted system partners, including educators and professional associations.

- Updates to the COO website with new pages providing details of the changes, how it would affect registrants, their options, and the deadline.
- Live presentations and printed flyers to hand out at registrant events.
- Webinars were held live and recorded and uploaded to the College's YouTube channel for registrants who were unable to attend the session live.
- Mail: Letters were sent via regular mail to affected registrants reminding them of the upcoming July 1, 2025 deadline, how it would affect them, and what their options were.
- LinkedIn Ad Campaign: In June 2025, as a last push to ensure we didn't miss anyone, an ad campaign was launched targeting specific job titles, rather than employers. It allowed us to reach individuals who were between jobs or who had listed their profession without an active employer. This group were the ones most likely to align with those who were administratively suspended.

1759 registrants who had been suspended for three years or more stood to be affected by the July 1, 2025 revocation deadline. From this group of suspended registrants, 351 were not revoked as:

- 23 reinstated;
- 90 moved to the Inactive class;
- 156 resigned; and
- 82 registrants were noted as deceased.
- 1408 registrants were revoked effective July 1, 2025

#### *Registration Policies for Content Review*

The Registration Committee reviewed the following registration policies to ensure the policies remain current and relevant:

- Photograph Submission Requirements policy
- Registration Appeals Panel policy
- Vulnerable Sector Check and Applicants with Charges or Findings policy

The Committee recommended that the Board approve the proposed amendments to the policies.

The Committee further reviewed and updated the Reinstatement and Changing from Inactive to Active Practice policy to remove references to the July 1, 2025 revocation deadline. The Committee recommended that the Board approve the proposed changes.

#### **File Review**

In 2025, the Registration Committee reviewed 4 registration applications, 2 reinstatement applications (over three years), 14 upgrading proposal, 2 class change request, and 3 extension requests (PLAR).

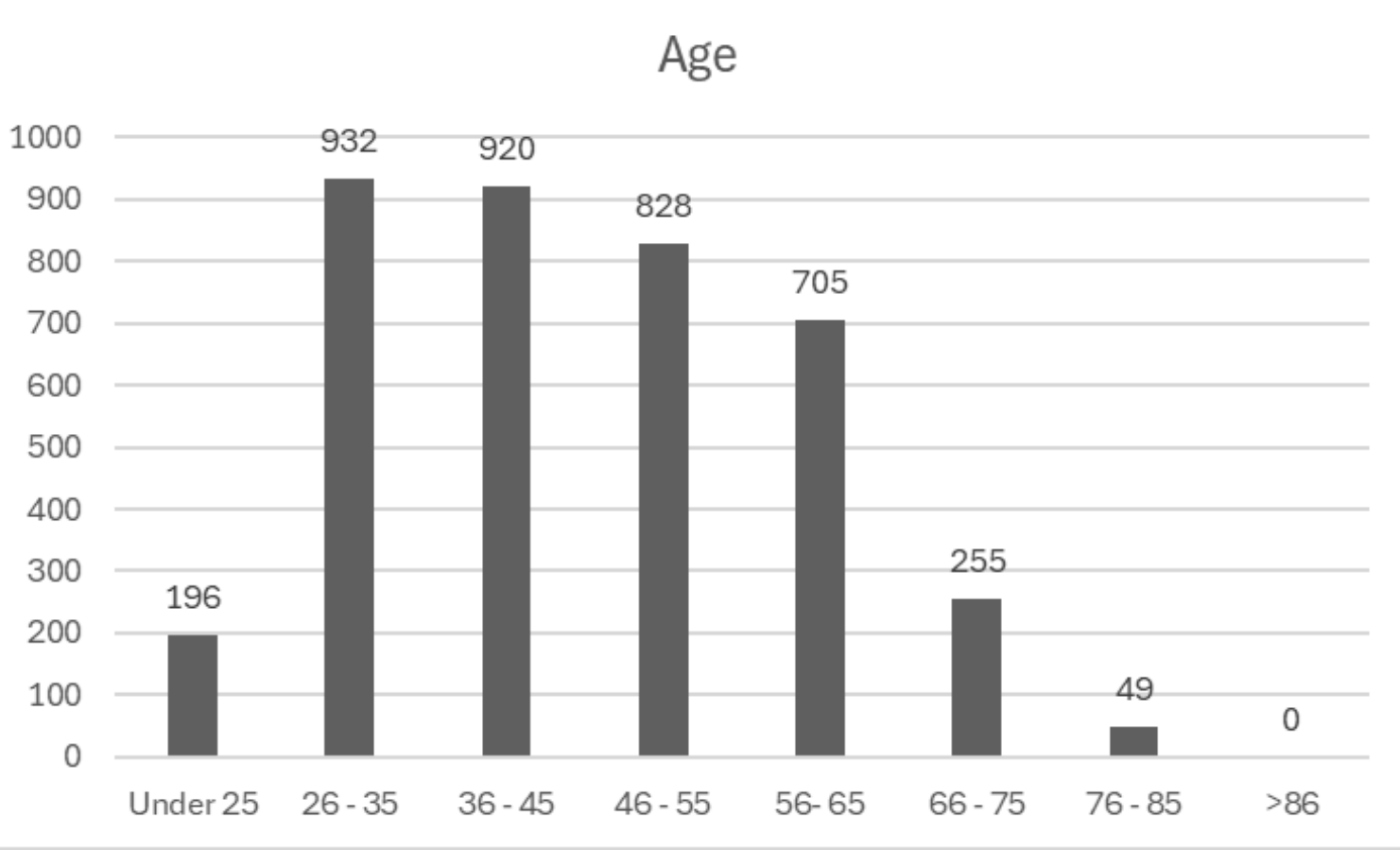
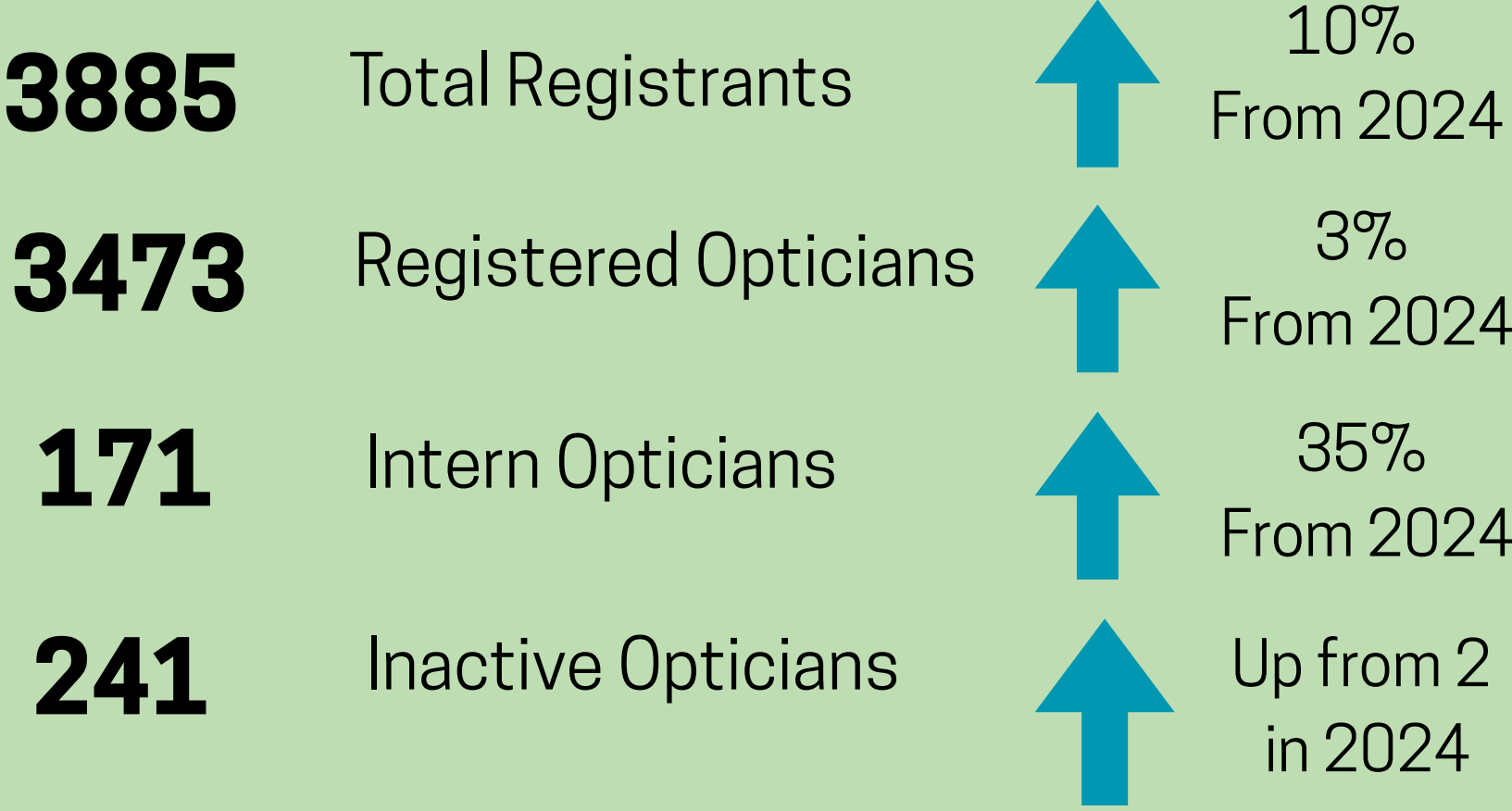
**Submitted by:**

Derick Summers, RO, Chair  
Stephanie Jung, Director, Registration

# REGISTRATION COMMITTEE

## 2025 Annual Report

### Registrants at End of 2025



Female: 2418  
Male: 1464  
Non-Binary: 3

### New Registrants

