

## EXECUTIVE COMMITTEE REPORT

June 2025 Executive Committee  
Report to the Board of Directors

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### 2025 Committee Members:

Derick Summers, RO, Chair, Elected Member  
Kevin Cloutier, RO, Vice-Chair, Elected Member  
Omar Farouk, Public Member  
Stephen Kinsella, Public Member  
Tonya Nahmabin, RO, Elected Member

Number of meetings since the March Board Meeting:

- One on May 20, 2025

### Report:

#### 1. General Business

##### *Review of the Executive Committee Evaluations*

The Executive Committee reviewed and discussed the committee evaluations for 2024. No action plan items were identified for 2025.

#### 2. Exercise of Board Powers in Between Meetings

*Under section 12 of the Health Professions Procedural Code, the Executive Committee has all of the powers of the Board for any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend, or revoke a regulation or by-law. Where the Executive Committee exercises this power, it must report on its actions to the Board at its next meeting.*

The Executive Committee has not exercised its powers to act as the Board since the last meeting.

#### 3. Finance Committee

##### *Financial Statements*

The Executive reviewed the financial variance report to March 31, 2024.

##### *2024 Audited Financial Statements and Audit Report Findings*

The Auditors, S. Dhanotta and M. Vaz thoroughly reviewed the 2024 Audited Financial Statements, and the Audit Findings Report with the committee. It was noted that following a recent database reconciliation, it

was identified that there was a discrepancy in the timing of deferred revenue reported for 2023. Accordingly, the auditors issued a restatement for the 2023 financial year. It was confirmed that there was no change in actual revenue amounts; rather it was a matter of which fiscal year certain funds were allocated to.

The audit report will be presented for approval at the Board meeting on June 2.

#### *Annual Auditor Assessment*

The Executive Committee reviewed the process for the annual auditor assessment. Once the Board approves the audit report, the committee will conduct its annual review of the audit process and address the auditor's performance. The assessment will help inform the committee's recommendations to the Board regarding the appointment of an auditor for the next fiscal year.

#### **Submitted by:**

Derick Summers, RO, Chair, Elected Member

## CLINICAL PRACTICE COMMITTEE REPORT

June 2025 Committee 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  
Rebecca Forte, Community Appointee  
Parminder Kalsi, RO, Professional Appointee

Number of meetings since the March Board Meeting: 0

### **Report:**

At their next meeting, the Committee will review a draft of proposed updates to the Standards of Practice.

### **Submitted by:**

Parneet Dhillon, RO, Chair, Professional Appointee  
Peggy Dreyer, Director, Professional Practice and Quality Assurance

## QUALITY ASSURANCE COMMITTEE REPORT

June 2025 Committee Report to the Board of Directors

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### Committee Members:

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

### Accreditation Panel Members:

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

Number of meetings since the March Board Meeting: 1

- May 7, 2025

### Report:

#### ***2024 Committee Self-Evaluation***

The Committee reviewed the results of the 2024 survey and did not identify any concerns or action items for 2025. All members indicated that they are satisfied with the current processes related to orientation/training and feel the expectations are clearly outlined.

### ***Policies***

In 2024, the Committee approved a structured, scheduled review of their policies and guidelines. This supports the Boards ability to manage risk. The following policies were reviewed and updated at the May meeting:

Policy	Amendments
Policy 1.3 Jurisprudence	<ul style="list-style-type: none"><li>• A minor amendment to include that registrants must complete Chapter 1: Professional Boundaries and Sexual Abuse Prevention</li></ul>
Policy 4.1 Course Activity Accreditation Criteria	<ul style="list-style-type: none"><li>• Removing additional continuing education requirements for refracting opticians as this status has been retired.</li></ul>
Continuing Education Accreditation Policy	<ul style="list-style-type: none"><li>• The layout of the policy has been reorganized in an effort to make it more logical and easier to follow</li></ul>

	<ul style="list-style-type: none"> <li>• New language around relying on experience-based knowledge for the purposes of CE activities to provide clarity</li> <li>• New language around demonstrating a presenter's knowledge or expertise to provide clarity</li> <li>• New language around speaker criteria clarifying this includes all professional registrations and relevant academic positions</li> <li>• Outlining how accreditation values are determined for scholastic courses or programs</li> <li>• Additional language around subject matter of activities and the relevancy to applicable accreditation categories</li> <li>• Removing the requirement that professional growth activities be supported by objective, neutral and reliable sources. All other policy criteria continue to apply.</li> <li>• Updating the verification of attendance criteria</li> <li>• 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.</li> <li>• 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.</li> </ul>
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### ***Competency Review and Evaluation Process***

For 2025, the Committee directed that 20% of registrants be selected to participate in the CRE. Based on the criteria of the policy 669 registrants were randomly selected to participate in the 2025 CRE process. An additional 15 registrants were required to participate due to a deferral or deficiency in the 2024 CRE process. Of these, 4 registrants were granted a deferral and 1 was not required to participate.

As of May 9<sup>th</sup>, 402 of the expected 679 portfolios have been reviewed. These registrants have been notified of their results including those with deficient and/or incomplete portfolios.

### ***Peer and Practice Assessments***

Peer and Practice Assessments have begun for those who were also randomly selected to participate in one as part of the 2025 CRE process. Registrants are notified on a rolling basis to allow time for assessors to review/assess materials and conduct interviews. This will also allow for providing results in a timely manner.

***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 collaborated with the College of Audiologists and Speech Language Pathologists of Ontario to present a 2-part webinar "Toward Accountable Action on Equity, Allyship, and Peacemaking in Healthcare."

Session 1 held on March 31<sup>st</sup> introduced mind-maps that can impact the delivery and receipt of healthcare within a colonial-built system. Session 2 held on April 28<sup>th</sup> offers alternative perspectives to help build new habits of mind that support peacemaking and inclusive approaches to care.

The recordings of both webinars are available on our website for those who were unable to attend. Each webinar has been accredited as 1 Professional Growth hour.

**Submitted by:**

Tonya Nahmabin, RO, Chair, Board Professional Member  
Peggy Dreyer, Director, Professional Practice & Quality Assurance

# QUALITY ASSURANCE COMMITTEE

## Q2 Report

### 2025 Competency Review & Evaluation Process

#### Notable Points

- As of May 9, 452 of the expected 679 portfolios have been assessed
- 42% of incomplete portfolios have been resolved

*\*Reported in percentage*

### Professional Portfolio Trends

#### Notable Points:

- To date, between 12- 21% of registrants have uploaded at least some of their 2025 Professional Portfolio requirements. This is trending consistently with the past years as the majority of uploads typically take place in the latter part of the calendar year.

*\*Reported in percentage of registrants who have completed at least some component of their Portfolio*

### Accreditation Requests

#### Notable Points:

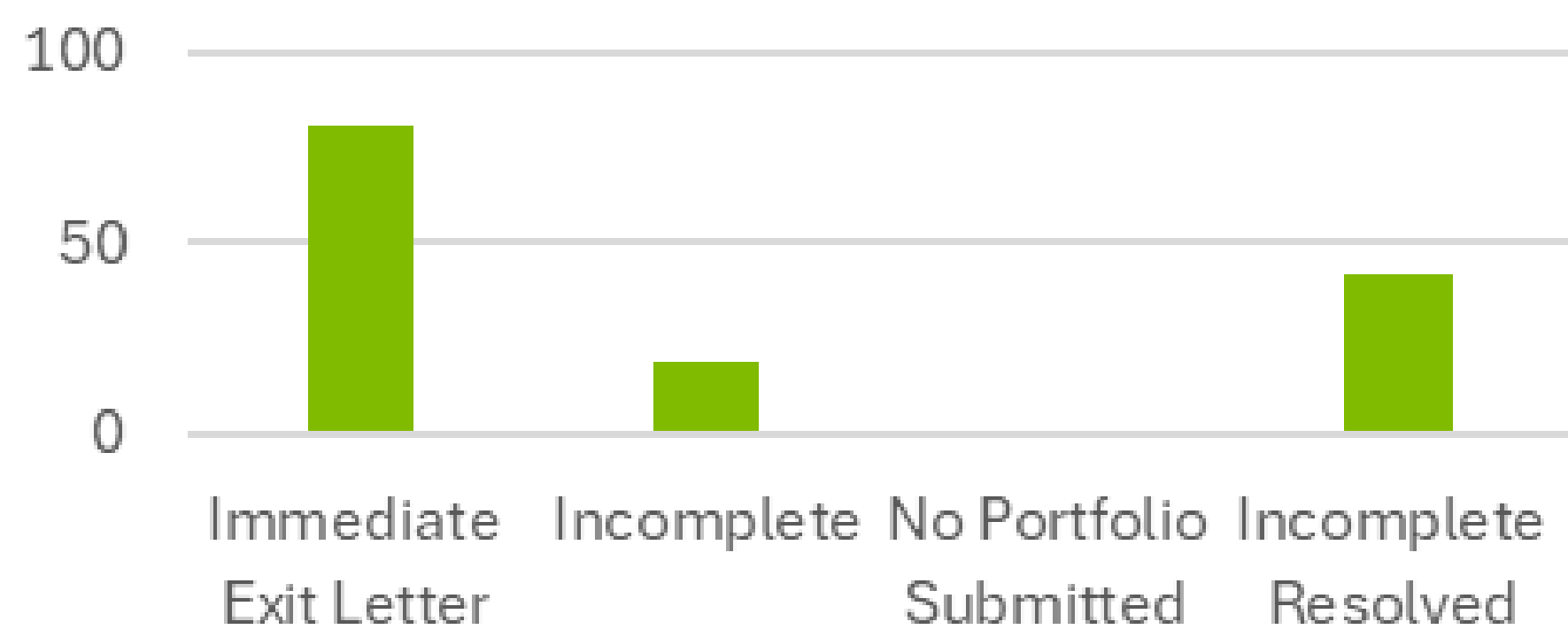
- Following an anomalous year in 2024 that happened as a result of two new CE providers entering the market, accreditation numbers appear to be on trend for this point in the year.

#### Legend\*

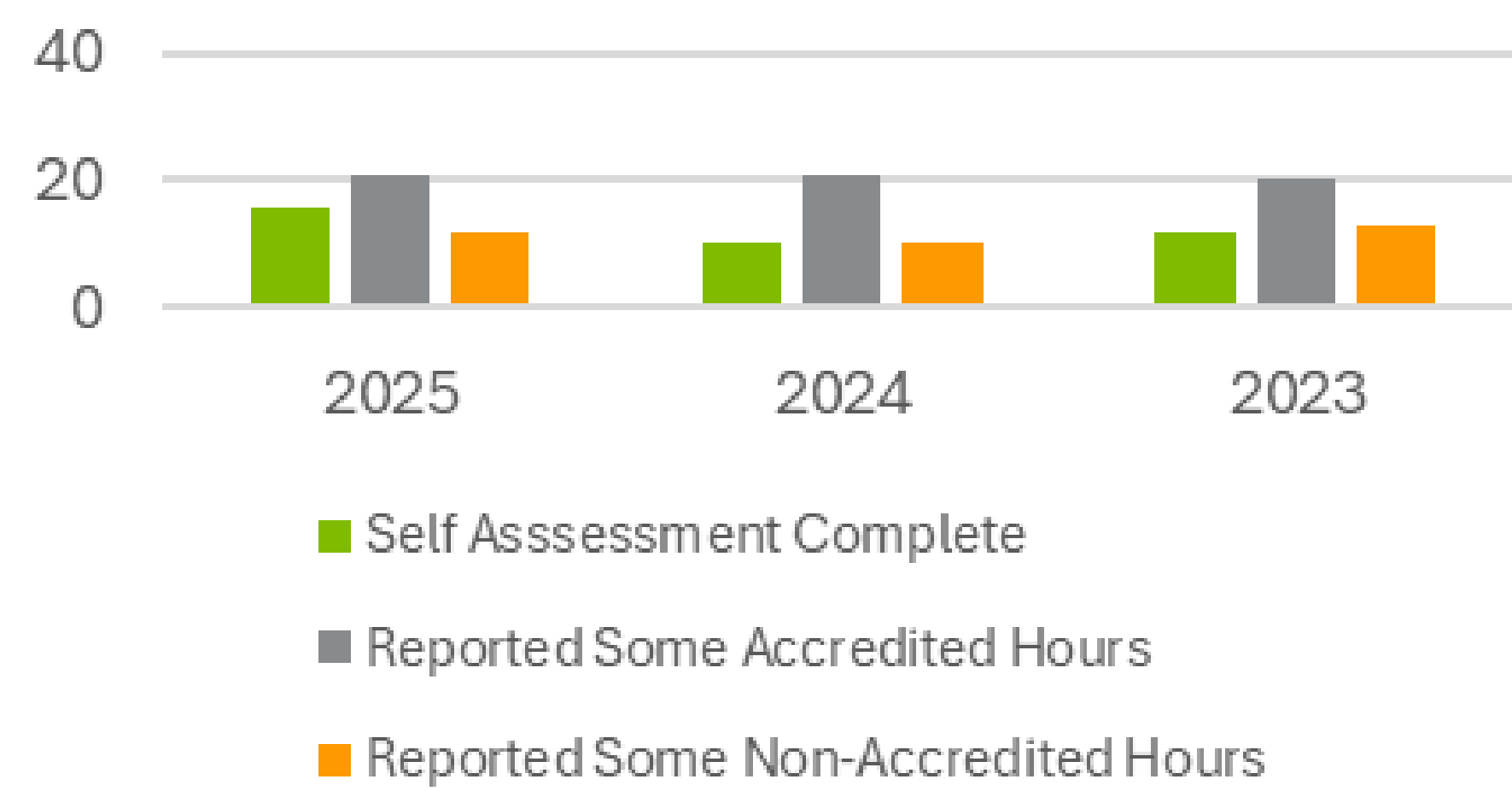
Eyeglass Hours - EG  
Contact Lens Hours - CL  
Eyeglass/Contact Lens Hours - EG/CL  
Eyeglass/Contact Lens/Refracting Hours - EG/CL/RF  
Professional Growth Hours - PG

*\*Reported in hours*

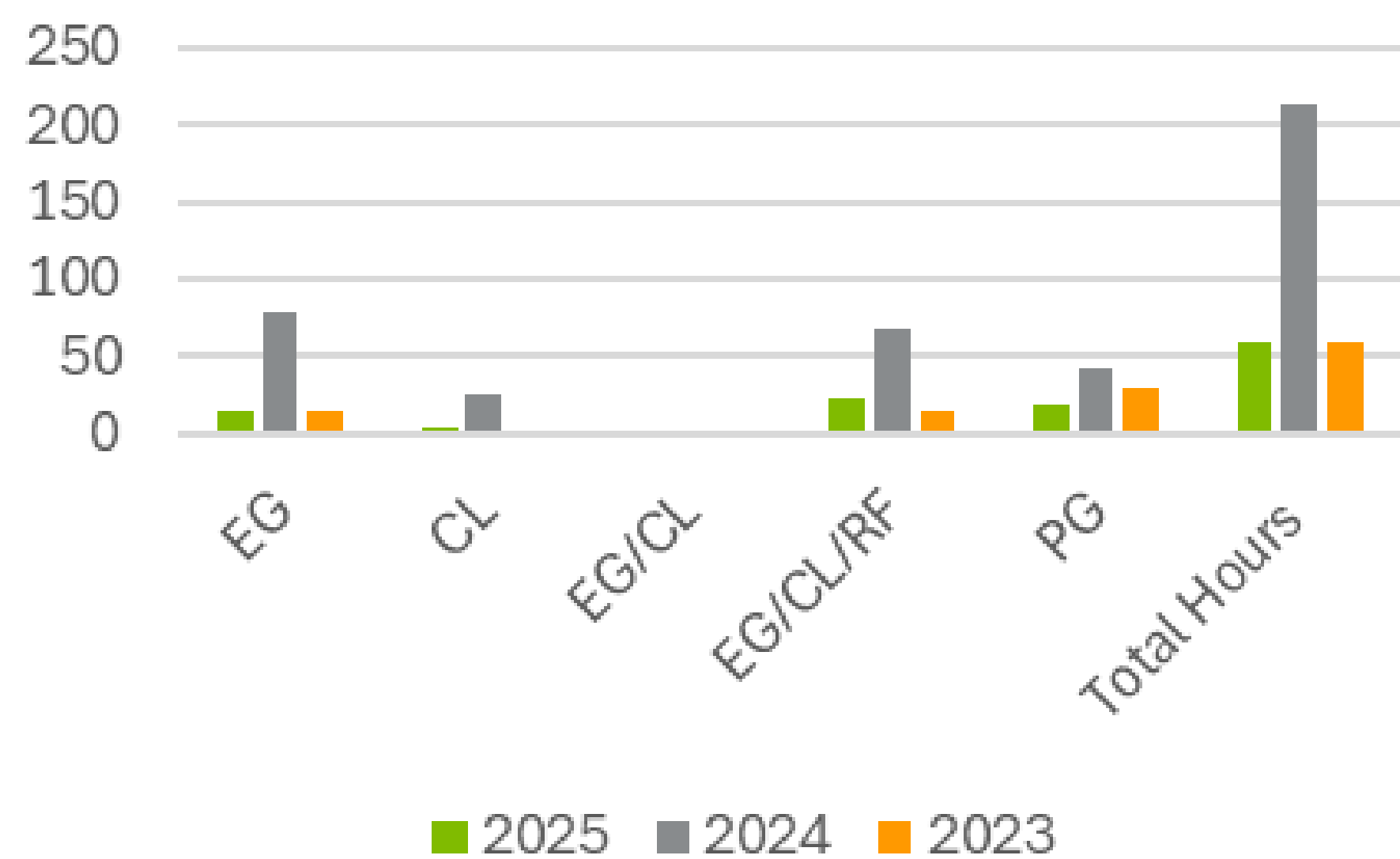
### Assessment Progress\*



### YTD Portfolio Trends\*



### YTD Hours Accredited\*



## DISCIPLINE COMMITTEE REPORT

June 2025 Discipline Committee Report to the Board of Directors

### 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  
Grazyna Sepczynska, 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

Number of meetings since last Board Meeting: n/a

**Report:** The Discipline Committee had 7 members complete the Health Profession Regulators of Ontario (HRPO) Discipline Orientation Workshops in May 2025. 2 members attended the basic as well as the advanced training, and 5 members attended the advanced training. The Committee anticipates sending an additional 7 members to complete the Discipline Orientation Workshops in Fall 2025.

The following matters have been referred to the Discipline Committee:

#### **Matter**

*College of Opticians v. Murtaza Ahmed Janmohamed*  
*College of Opticians v. David Gallo*  
*College of Opticians v. Gopal Puri*

#### **Hearing Date**

July 25, 2025  
TBD  
TBD

#### **Submitted by:**

David Milne, Chair, Appointed Member  
Tertia van Jaarsveld, Senior Coordinator, Professional Conduct



## INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

June 2025 Committee Report to the Board of Directors

### Committee Members:

When reviewing cases, the ICRC sits as two independent panels. When necessary, the Chair of the ICRC strikes additional special panels to review appropriate cases.

Panel 1	Panel 2
Robert Quinn, RO, Chair, Elected Member	Stephen Kinsella, Vice Chair, Public Member
Omar Farouk, Public Member	Peggy Judge, Public Member
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

### Number of meetings since the March 2025 Board Meeting:

The ICRC holds full committee meetings for the purpose of orientation and training, as well as to discuss committee policies and other issues of common concern. The balance of ICRC meetings are held as panel meetings to review and dispose of cases.

Number of Meetings in 2025	
Full Committee Meeting	1
Panel Meetings	2

Number of Meetings Since Last Board Meeting in December 2023	
Full Committee Meeting	0
Panel Meetings	2

**Report:** The Committee met in their panels to review completed investigations. Panel 1 met on March 14, 2025, reviewed 4 matters, two of which resulted in referrals to the Discipline Committee. Panel 2 met on March 20, 2025 and reviewed 4 matters.

The Committee will meet as a group on June 25, 2025 to have an additional training session with Anastasia-Maria Hountalas, Legal Counsel, Steinecke, Macuire and Leblanc Barristers and Solicitors.

### Submitted by:

Robert Quinn, RO, Chair, Elected Member  
Raj Bhatti, Director, Professional Conduct

# INQUIRES, COMPLAINTS & REPORTS COMMITTEE

## Q2 Report

### Complaints

# of Complaints Received (2025 YTD): **7**  
# of Complaints Open (TOTAL) : **20**  
# of Complaints Closed\* (2025 YTD) : **7**  
# of Complaints Awaiting\*\* Decisions : **11**

\* complaints in which the decision and reasons have been sent to both parties  
\*\* complaints in which the ICRC has met and reviewed the files and the decision and reasons is being finalized

### Processing Times

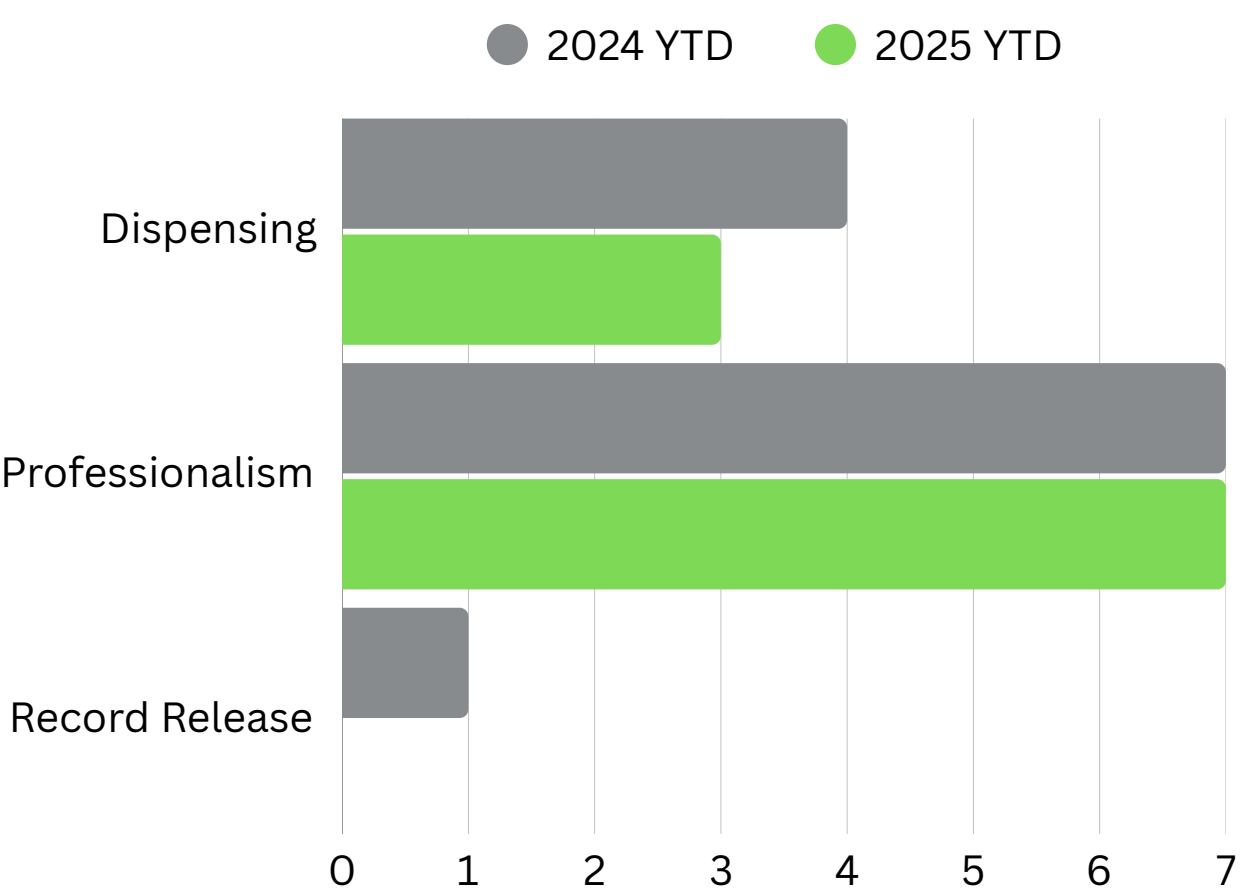
Avg. Days 2022: **351**  
Avg. Days 2023: **284**  
Avg. Days 2024: **183**

### Complaint Themes

#### Trends

The themes in Q2 2025 YTD are more concentrated on dispensing issues and professionalism where as in Q2 2024, there was more variety of concerns.

More than one area of concern may be identified within a complaint.

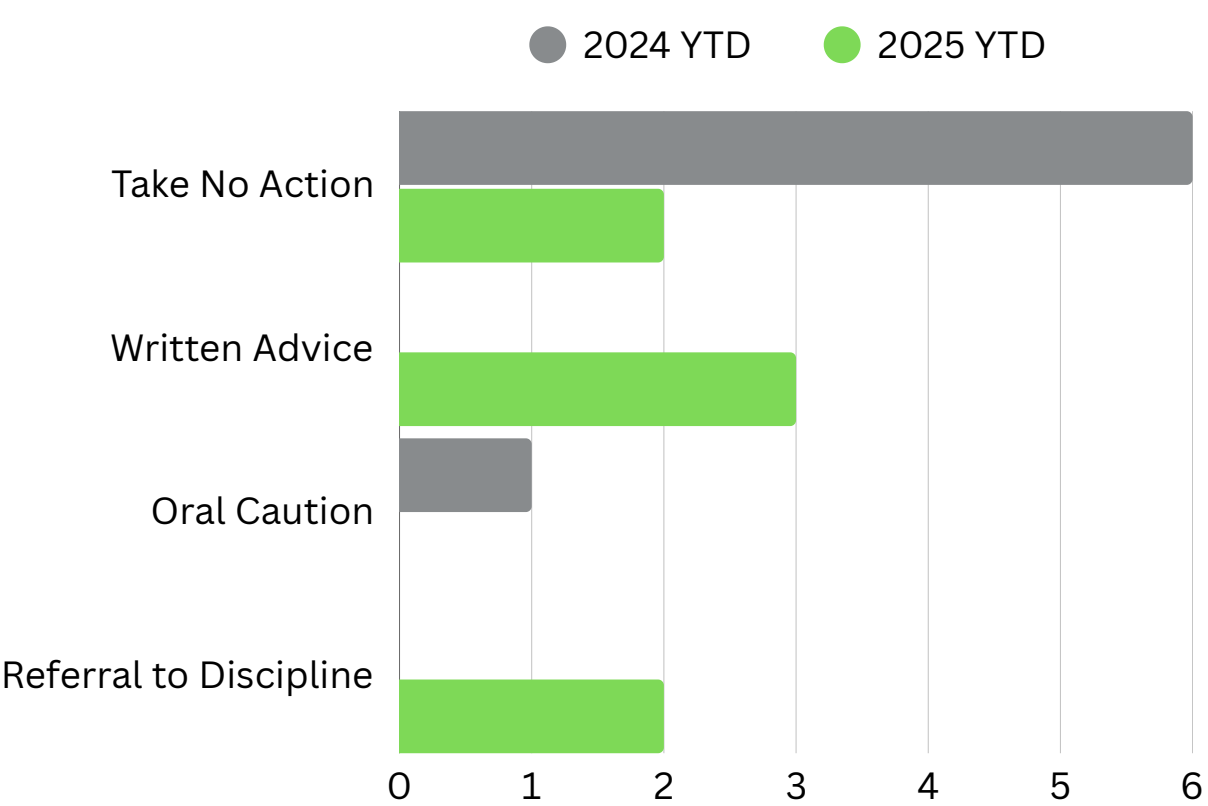


### Complaint Dispositions Themes

#### Trends

The disposition themes so far in 2025 lend to more varied outcomes.

A complaint may have more than one disposition.



### Reports

# of Reports Received (2025 YTD): **0**  
# of Reports Open (TOTAL): **17**

### Unauthorized Practice (UAP)

# of UAP Reports Received (2025 YTD): **6**  
# of UAP Reports Closed (2025 YTD): **2**

1 report has proceeded to the injunction stage

### Total Open Matters

Number of Open Complaints & Reports

<b>2025 YTD</b>	<b>2024 YTD</b>
48	75

## GOVERNANCE COMMITTEE REPORT

### June 2025 Committee 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 since March 2025:

- May 21, 2025

**Report:***Governance Committee Self-Evaluation 2024 Results*

The committee reviewed and discussed the results of the Governance Committee effectiveness self-evaluations for 2024. During the discussion, members queried the impact of “neutral” responses on the average score, noting that this may inadvertently skew the results. Consequently, the committee agreed to reassess the current scoring matrix and added this task to its 2025 work plan.

*Governance By-laws and Policies*

The committee reviewed the following policies as per the Policy Review Schedule set out in the Governance Manual:

1. Quality Assurance Committee Terms of Reference and Mandate Policy 4-15
2. Clinical Practice Committee Terms of Reference and Mandate Policy 4-16
3. Intellectual Property Policy 4-28

Updates will be proposed to these policies at the upcoming board meeting.

*2025 Board Action Plan*

The committee reviewed a draft of the board’s 2025 Action Plan. The 2025 Action Plan will be presented for approval at the upcoming board meeting.

**Submitted by:**

Elliot Borins, Community Appointee, Chair  
Sarah Scott, Director, Policy and Governance

## PATIENT RELATIONS COMMITTEE REPORT

June 2025 Committee 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:**

Number of Meetings since March 2025 board meeting: 0

### **Submitted by:**

David Milne, Community Appointee, Chair  
Sarah Scott, Director, Policy and Governance

## REGISTRATION COMMITTEE REPORT

June 2025 Report to Board of Directors

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### **Committee Members:**

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

### **Number of meetings since March Board Meeting:**

- March 10, 2025
- April 14, 2025
- May 12 2025

### **Report:**

#### *Refresher Program:*

The Committee reviewed a proposed Refresher Program for applicants and opticians who need to complete this requirement in order to become registered, maintain currency, or transfer from the Inactive to RO registration class.

The proposed Refresher Program utilizes pre-existing bridging modules that were developed by the National Alliance of Canadian Optician Regulators (NACOR) for the purposes of the Prior Learning Assessment and Recognition (PLAR) process. Modules have been organized into proposed bundles, based on the amount of time that the applicant/optician has been out of practice.

The proposed Refresher Program will be circulated for feedback over the summer and the Committee anticipates bringing a final proposal to the board for approval in September.

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

Since the last meeting, the transfer of PLAR administration to NACOR has been finalized. The College will continue to process in-progress applications, but all new applications will be directed to NACOR going forward.

#### *Family Supervision of Upgrading Proposals*

The Registration Committee requested that the administration carry out an environmental scan and review on the issue of whether family members should be permitted to supervise student or intern

opticians for the purposes of meeting practicum requirements. The Committee will review the question further at subsequent meetings.

#### *Committee Self-Evaluation*

The Committee reviewed the results of its 2024 self-evaluation. No action items were identified for the committee in 2025.

#### *File Review*

The Committee reviewed the following files:

- Class change requests: 1
- Upgrading proposals: 7
- Extension requests (PLAR): 2
- Registration Applications: 2

#### **Submitted by:**

Derick Summers, Chair, RO  
Amy Stein, Deputy Registrar

# REGISTRATION COMMITTEE


## Q2 Report

### Registrant Numbers (at May 26, 2025)


**3,383** Registered Opticians

 1%  
From Q1

**187** Intern Opticians

 10%  
From Q1


**133** Inactive Opticians

 23%  
From Q1


- Notes:
- Registration numbers fluctuate throughout the year depending on factors such as the timing of National Examinations and graduation dates.
  - Growth in the new Inactive Class is partly stemming from suspended opticians who are opting to maintain registration with the College beyond the July 1 2025 automatic revocation deadline.

### New registrations in each category (YTD)

**154**  
Registered Opticians

 25%  
From same period last year

**69**  
Registered Interns

 5%  
From same period last year

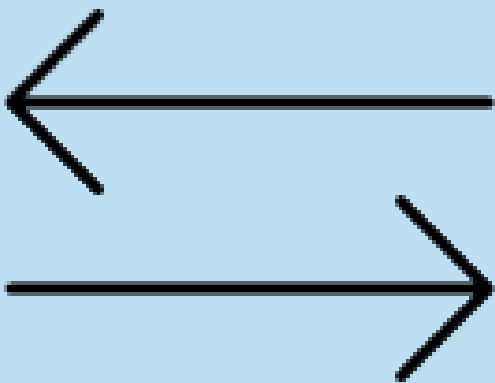
Average application processing time\*: **8 days**

\*Refers to the average calendar days from completed application to registration, as reported to the Ministry of Health in its most recent report.

### National Mobility (YTD)

Left Ontario for  
another province

**9**



Registered in  
Ontario from  
another province

**8**