

## BRIEFING NOTE

**TO:** Board of Directors

**FROM:** Governance Committee

**DATE:** December 1, 2025

**SUBJECT:** COO Skills and Diversity Matrix

☒ For Decision

☐ For Information

☐ Monitoring Report

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### **Purpose:**

To review and approve a proposed updated skills and diversity matrix for elected board members and appointed committee members.

### **Background:**

In December 2024, the board approved restructuring the electoral districts for professional board members to create a single province-wide district, effective for the 2026 elections.

To ensure that patient needs across the province continue to be reflected in the College's work, the board tasked the Governance Committee with exploring ways of updating the appointed committee recruitment process to better ensure geographic representation at the committee level, as well as other types of diversity. To support this, Sandi Verrecchia of Satori Consulting Inc. was engaged to revise the current matrix to ensure that, in addition to geographic representation, committees collectively possess a broad range of skills and attributes to effectively understand and address patient needs across the province.

The current skills matrix was introduced in 2021 as part of the competency framework for elected board members and appointed committee members. Its purpose is to assess the diversity of skills and knowledge among current members. All candidates are asked to complete the matrix through an online survey. The information collected is then used to evaluate existing skills and preferences, identify potential gaps at the board and committee levels and to guide future training.

### **For Consideration:**

The proposed updated skills and diversity matrix is attached at **Appendix A**.

A copy of the current skills matrix is attached at **Appendix B**.

	Current Matrix	Proposed Updated Matrix
<b>Overall Approach</b>	<ul style="list-style-type: none"> <li>Provides a static snapshot of board and committee members</li> <li>Focused mainly on qualifications and experience</li> </ul>	<ul style="list-style-type: none"> <li>Adopts a dynamic, strategic approach</li> <li>Links skills and diversity to governance effectiveness &amp; the College's strategic plan</li> </ul>
<b>Skill/Experience Information Collected</b>	<ul style="list-style-type: none"> <li>Specialized training</li> <li>Education</li> <li>Opticianry experience</li> <li>Board/committee service</li> <li>Time commitment</li> <li>Familiarity with the RHPA</li> </ul>	<ul style="list-style-type: none"> <li>Continues to capture core qualifications</li> <li>Includes whether RO candidates serve as contact lens mentors</li> </ul>
<b>DEI Information</b>	<ul style="list-style-type: none"> <li>No DEI information collected</li> </ul>	<p>Collects demographic data including:</p> <ul style="list-style-type: none"> <li>Gender</li> <li>Age</li> <li>Racial and ethnic identity</li> </ul> <p>Providing this information is voluntary; individuals only share what they are comfortable with.</p>
<b>Geographic &amp; workplace data</b>	<ul style="list-style-type: none"> <li>No geographic or workplace setting information collected</li> </ul>	<p>Captures:</p> <ul style="list-style-type: none"> <li>Primary region of practice (ROs)</li> <li>Primary residence (non-opticians)</li> <li>Community setting of practice (urban/suburban/rural) (ROs)</li> <li>Practice/workplace setting (e.g. independent practice) (ROs)</li> </ul> <p>Regions align with those used in registrant and patient surveys to allow for comparison across data sets.</p> <p>Community setting definitions are provided to support accurate selection.</p>
<b>Competency Assessment</b>	<ul style="list-style-type: none"> <li>Binary (yes/no) self-assessment of</li> </ul>	Introduces a two-part self-assessment for individuals to rate:

	competencies (e.g., governance and ethics, risk management, compliance, public interest)	<ul style="list-style-type: none"> <li>• Their proficiency in each skill</li> <li>• The importance of each skill relative to the College's current strategic plan</li> </ul>
<b>Use</b>	<ul style="list-style-type: none"> <li>• Limited ability to identify gaps in representation</li> </ul>	<ul style="list-style-type: none"> <li>• Diversity assessment results will help to identify gaps in representation</li> <li>• Skills assessment results will be analysed against the weighted importance of each skill, based on strategic priorities</li> <li>• Insights will inform future committee appointments by identifying areas where additional skills or diversity would strengthen the board's ability to meet the needs of patients across the province</li> <li>• The most qualified and capable individuals will continue to be selected, with diversity and skills insights serving as one of several inputs</li> </ul>

Several Regulated Health Professions Act (RHPA) Colleges have also adopted similar competency and diversity-based processes when transitioning to a single province-wide district, including the [College of Physicians and Surgeons of Ontario](#) (CPSO), [College of Dietitians of Ontario](#) (CDO) and the [Ontario College of Pharmacists](#) (OCP).

### *Implementation*

- Returning board and committee members will complete the updated matrix annually in December. The information will provide a snapshot of the current composition of the College's board and committees.
- In Q2, the Governance Committee will review the aggregated board and committee profile to identify priority areas for recruitment in the fall, focusing on gaps in representation and considering whether any group has not had the opportunity to participate. The priority areas will then be presented to the board for approval. The data on board/committee composition will be presented in aggregate form only, such that no identifying information will be provided about any individual members.

- In the fall, candidates will be invited to apply for appointed committee member positions. Staff will screen applications to ensure that all candidates meet the eligibility requirements outlined in the [College's by-laws](#). If a high volume of applications is received, the Screening Committee may conduct a paper review to assess candidates' qualifications and experience and determine who advances to the interview stage. No demographic information will be shared with the Screening Committee.
- Screening interviews will then be conducted to assess whether candidates demonstrate the five behavioural competencies as approved by the board. In accordance with the by-laws, candidates are only eligible for appointment once the Screening Committee has confirmed that they meet these competencies. Candidates who do not meet the competencies will not proceed to the board for consideration. Interview questions may also be expanded on to evaluate overall suitability and lived experience and tailored to identify attributes that the board wishes to prioritize. For example, candidates could be asked, *"Do you serve an ethnically diverse patient group?"*, *"Do you serve a rural patient population?"*
- Once the Screening Committee confirms that a candidate meets the competencies, they will complete the Skills and Diversity Matrix and submit their committee preferences, as usual. The completed matrix will be handled by staff and will not be shared with the Screening Committee.
- At its Q4 meeting, the board will hold an in-camera session to review the Screening Committee's scores and feedback to appoint individuals. Where relevant, staff will highlight whether a candidate's profile aligns with one or more priority areas identified by the board. For example, if the board seeks greater representation from Northern Ontario, staff will indicate which candidates are from or serve that region, rather than limiting consideration solely to candidates from Northern Ontario. No other personal or demographic details about the candidates will be shared with the board.

#### *Addressing Potential Concerns*

In considering the inclusion of demographic questions within the updated matrix, the Committee carefully reflected on several potential concerns with this approach, as well as whether the proposed process would address and/or mitigate these concerns.

- **Privacy and voluntariness:** The Committee emphasized that providing demographic information must be entirely voluntary, and that this information must remain confidential and should only be used in appropriate circumstances. The proposed process has been carefully designed with these priorities in mind.
- **Candidate selection will be biased:** The Committee identified that it would be important to ensure that demographic information does not improperly influence candidate selection. To mitigate this, the proposed process ensures that the Screening Committee will not have access to candidates' skills and diversity profiles, and individual profiles will remain

confidential from the board. Staff will only share information directly relevant to the board's identified priority areas; all other details will remain confidential. Only candidates who have been confirmed by the Screening Committee as meeting all the required competencies will be presented to the board for consideration.

- **Candidates will be selected based on their attributes, rather than their competency:** The Committee reaffirmed that all candidates would continue to undergo competency screening, and only those candidates who demonstrate the competencies will be invited to complete the skills and diversity matrix and subsequently forwarded on to the board for their consideration. The Board will continue to be provided with candidates' interview scores, and no demographic information will be shared about a candidate unless it is relevant to the board's identified priority areas.
- **Identifying with a particular trait does not necessarily indicate that a candidate serves that community:** One of the primary rationales for wanting diverse representation on the board and committees is to be responsive to the needs of diverse patient populations across the province. The Committee noted that the fact that a board/committee member identifies with a particular trait, or lives in a particular region, does not necessarily mean they serve patients with that trait or in that region. In order to account for this, the proposed matrix will request additional data on ROs practice settings. Additional information could be gathered via the screening interview process, in the form of questions that explore the candidate's practice environment in more detail. For example, a question could ask, *"Do you serve an ethnically diverse patient group?"*.

#### *Collecting DEI information*

One of the goals of the draft COO Strategic Plan 2026 – 2028 is to ensure that *"The College builds capacity toward ensuring Indigenous and other equity deserving voices are represented at the committee level."* Collecting DEI information will provide valuable insights, enabling the board to identify underrepresented groups and monitor board and committee diversity across priority areas on an ongoing basis.

Collecting demographic data is a foundational step in building meaningful, data-driven DEI policies. Without understanding who is actually being represented at the committee, board, or organizational level, the College can only operate blindly and/or based on assumptions that may not be accurate. This limits the ability of the College to identify its strengths, gaps and opportunities for improvement. It is for these reasons that many regulatory colleges have begun collecting demographic information about their registrant base. This is a practice that has been identified by the Office of the Fairness Commissioner (OFC) as being in line with best practices for regulators, and it is expecting that all regulatory bodies will implement this in the near future.

#### **Public Interest Considerations:**

The proposed matrix is designed to ensure that committee members reflect geographic diversity while also collectively possessing a wide range of attributes and skills. This approach supports

committees in better representing the diversity of Ontario's population and promotes evidence-informed decision-making in the public interest.

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

The aggregated board and committee profile will be used to identify underrepresented groups and to support the ongoing monitoring of diversity across priority areas. These insights will enable a more inclusive, skills-based approach that strengthens the board's ability to meet the needs of patients across Ontario.

**Risk Management Considerations:**

The proposed matrix aligns with leading practices in regulatory governance by promoting a balanced mix of skills, perspectives and lived experience at the committee level. This approach supports the [COO Strategic Plan 2023-2025](#) by demonstrating regulatory leadership through governance excellence and aligns with the COO's draft Strategic Plan 2026 – 2028, which aims to build capacity to ensuring that Indigenous and other equity deserving voices are represented at both the board and committee levels.

**Recommendations/Action Required:**

The Governance Committee recommends that the Board of Directors **approve** the proposed updated skills and diversity matrix for elected board members and appointed committee members.

**Board Weighted Skills and Diversity Matrix**

**Diversity Questions**

**Registered Optician Board/Committee Member:**

Gender	Male	Female	Non-binary	Prefer to self-describe	Prefer not to say							
Age	18-30	31-40	41-50	51-60	61-70	70+						
Education	(Open text box)											
Opticianry Industry Experience	0 - 5 years	5-10 years	10 years +									
Board/Committee Experience	None	0 - 5 years	5 years +									
Capacity to Serve for Committee Work (time)	1 day per month	2-3 days per month	3 days per month +									
Familiarity with Regulated Health Professions Act, 1991	None	Low	Medium	High								
Primary region of practice in Ontario	Hamilton – Niagara Peninsula	Kingston-Pembroke	Kitchener – Waterloo - Barrie	Greater London Area	Muskoka - Kawarthas	Northeast	Northwest	Greater Ottawa Area	Stratford – Bruce Peninsula	Greater Toronto Area	Windsor - Sarnia	

College of Opticians  
Draft 2025 Skills and Diversity Recommendation  
Board Weighted Skills and Diversity Matrix

Community setting of practice	Urban	Suburban	Rural									
Practice/ Workplace Setting	Independent Practice	Chain Store/ Corporate Retail	Other (Open text box)	Ophthalmic Clinic/ Optometry Clinic	Mobile Practice							
Racial and ethnic identity (please select all that apply if you wish to disclose)	Black	Caribbean	East Asian	Indigenous	Latinx	Middle Eastern	Multi- Racial (Open text box)	South Asian	Southeast Asian	White	I identify with a group not listed (Open text box)	Prefer not to answer
Contact Lens Mentor	Yes	No										

Community setting of practice	
Urban	Densely populated areas with many buildings, businesses, and services such as public transit, hospitals and entertainment hubs. For example, Toronto, Ottawa and Hamilton.
Suburban	Residential communities located near larger cities, offering more space, quieter neighbourhoods and local amenities while remaining close to urban centers. For example, Brampton, Burlington and Kanata.
Rural	Sparsely populated regions with open spaces, often focused on agriculture, forestry, or natural landscapes. For example, Bruce County, Huron County and Muskoka.

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Draft 2025 Skills and Diversity Recommendation  
Board Weighted Skills and Diversity Matrix  
**Non- Optician Board/Committee Member:**

<b>Gender</b>	Male	Female	Non-binary	Prefer to self-describe	Prefer not to say							
<b>Age</b>	18-30	31-40	41-50	51-60	61-70	70+						
<b>Education</b>	(Open text box)											
<b>Opticianry Industry Experience</b>	None	0 - 5 years	5-10 years	10 years +								
<b>Board/ Committee Experience</b>	None	0 - 5 years	5 years +									
<b>Capacity to Serve for Committee Work (time)</b>	1 day per month	2-3 days per month	3 days per month +									
<b>Familiarity with Regulated Health Professions Act, 1991</b>	None	Low	Medium	High								
<b>Primary residence in Ontario</b>	Hamilton – Niagara Peninsula	Kingston-Pembroke	Kitchener – Waterloo - Barrie	Greater London Area	Muskoka - Kawarthas	Northeast	Northwest	Greater Ottawa Area	Stratford – Bruce Peninsula	Greater Toronto Area	Windsor - Sarnia	
<b>Racial and ethnic identity (please select all that apply if you wish to disclose)</b>	Black	Caribbean	East Asian	Indigenous	Latinx	Middle Eastern	Multi- Racial (Open text box)	South Asian	Southeast Asian	White	I identify with a group not listed (Open text box)	Prefer not to answer

### Skills Questions (Board Self-assessment)

Competency Level	Description (Experience/Qualifications)
No Experience	No relevant experience or familiarity with the competency.
Basic	Some knowledge of the competency; <b>"Know about it"</b> Understands terminology and can identify skills and attributes associated with the competency
Good	Good understanding of the fundamentals of the competency gained through an appropriate combination of education, working knowledge, previous board experience and completion of introductory director training; <b>"Can explain it"</b>
Strong	Significant understanding and expertise of the competency gained through an appropriate combination of education, practical work experience, previous board experience and completion of advanced director training; <b>"Can do it"</b>
Expert	Expert understanding of the competency gained through an appropriate combination of direct practical working experience in a senior position or function, previous board experience, professional designation, qualification or degree in the subject matter and completion and accreditation of a director training program; <b>"Can teach it"</b>

### **1. Governance & Ethics**

I understand the legal and ethical responsibilities of Board Directors, including duty of care, accountability, conflict of interest, and the need for independent judgment in decision-making.

### **2. Financial Literacy**

I can read and interpret financial statements, understand fiduciary responsibilities, the role of the Auditor, and key financial principles like materiality that support effective oversight.

### **3. Risk Management and Oversight**

I understand the Board's role in identifying, assessing, and monitoring organizational risk, including concepts like risk appetite, tolerance, and enterprise risk management (ERM).

### **4. Compliance and Public Interest**

I understand the mandate to act in the public interest, how Ontario's health regulatory system functions, and how to assess issues objectively within that context.

### **5. Decisions and Adjudication**

I can apply relevant regulatory and legal frameworks to case materials and contribute to fair, unbiased decisions supported by clear and reasoned analysis.

## **6. Strategic Thinking and Systems Awareness**

I understand how the College's mandate fits within the broader health and regulatory system and can contribute to strategic decisions that anticipate future needs and challenges.

## **7. Equity, Diversity, Inclusion**

I value and respect diverse perspectives and experiences, and I contribute to inclusive, evidence-informed discussions that support fair and balanced Board decision-making.

## **8. Communication and Collaboration**

I communicate clearly, listen actively, and work respectfully with others to support informed, inclusive, and collaborative Board decisions.

## **9. Board Governance Practices and Continuous Improvement**

I understand effective Board governance practices, including roles, responsibilities, meeting protocols, and continuous improvement approaches that support the Board's overall effectiveness.

### Strategic Plan Rating of Skills that Support the Plan

**Please rate the importance of each skill (from a governance perspective) to achieving the current COO's Strategic Plan goals. (Scale: 1 = Nice to Have, 5 = Very Important)**

- Governance & Ethics
- Financial Literacy
- Risk Management and Oversight
- Compliance and Public Interest
- Decisions and Adjudication
- Strategic Thinking and Systems Awareness
- Equity, Diversity, Inclusion
- Communication and Collaboration
- Board Governance Practices and Continuous Improvement

# Skills Matrix and Committee Preferences

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\* Indicates required question

Please enter your name \*

Your answer

Do you have any specialized training, education or certifications (e.g. refraction, finance, legal, etc.)

Your answer

How much experience do you have in the opticianry profession? \*

- ☐ Not a Registered Optician
- ☐ 0-5 years
- ☐ 5-10 years
- ☐ More than 10 years

How much experience do you have as a member of a Board of Directors or similar \*  
(including experience on committees?)

- ☐ None
- ☐ 0-5 years
- ☐ 5 years or more

Serving on committees of the College can require a significant time commitment, \*  
however some committees require a greater time commitment than others.  
Please indicate what your expected capacity will be for committee work?

- ☐ 1 day per month
- ☐ 2-3 days per month
- ☐ More than 3 days per month

Some committees require emergency meetings from time to time. If necessary, are  
you able to make yourself available for meetings on short notice (e.g. less than one  
week's notice)?

- ☐ Yes
- ☐ No
- ☐ Maybe

Is there anything else the College should be aware of with respect to your  
availability for committee work (e.g. certain days of the week that you are never  
available, etc.)?

Your answer



What is your level of familiarity with the Regulated Health Professions Act? \*

- ☐ None
- ☐ Low
- ☐ Medium
- ☐ High



Please indicate whether the following statements describe your skills or experience relating to Governance and Ethics?

\*

	Yes	No
I understand the College's role in governing the practice of opticianry in the public interest	<input type="radio"/>	<input type="radio"/>
I can explain the difference between the role/authority of the board and the role/authority of a committee	<input type="radio"/>	<input type="radio"/>
I can explain the meaning of due care and diligence	<input type="radio"/>	<input type="radio"/>
I understand to whom the Board is accountable	<input type="radio"/>	<input type="radio"/>
I can explain what ethical considerations committee members must consider when supporting decisions	<input type="radio"/>	<input type="radio"/>
I can explain what a committee member must do when they have a conflict of interest.	<input type="radio"/>	<input type="radio"/>
I can explain the principle of a reasonable prudent person and its implications.	<input type="radio"/>	<input type="radio"/>
I can explain how a committee member can demonstrate "independence".	<input type="radio"/>	<input type="radio"/>

Please indicate whether the following statements describe your skills or experience relating to Risk Management and Oversight

\*

	Yes	No
I understand the concept of risk management.	<input type="radio"/>	<input type="radio"/>
I can explain the role of a committee and/or a board of directors in risk management oversight.	<input type="radio"/>	<input type="radio"/>
I can explain how a board of directors monitors risk and risk management.	<input type="radio"/>	<input type="radio"/>
I can explain risk appetite and risk tolerance.	<input type="radio"/>	<input type="radio"/>
I can explain what is meant by enterprise risk management (ERM).	<input type="radio"/>	<input type="radio"/>
I can explain the a board of directors' role in ERM.	<input type="radio"/>	<input type="radio"/>

Please indicate whether the following statements describe your skills or experience relating to Compliance and Public Interest

\*

	Yes	No
I understand the concept of public interest.	<input type="radio"/>	<input type="radio"/>
I can explain the concept of placing the interests of the public ahead of the interests of individuals and organizations	<input type="radio"/>	<input type="radio"/>
I understand the health regulatory system, its purpose and how it functions.	<input type="radio"/>	<input type="radio"/>
I possess the knowledge and ability to effectively analyze case materials and form an unbiased opinion on a case.	<input type="radio"/>	<input type="radio"/>
I can explain how the system within the health care system in Ontario intersect and impact the public.	<input type="radio"/>	<input type="radio"/>

Please indicate whether the following statements describe your skills or experience relating to Decision Making and Adjudication

\*

Yes

No

I understand that regulations, standards and guidelines are in place that set rules and expectations for prospective and existing opticians.

☐☐

I can make challenging decisions based on individual case files.

☐☐

I can apply legal criteria (with legal counsel support) when making decisions.

☐☐

I can explain the legal standard for the duty to provide reasons.

☐☐

Please rank your interest in sitting on each of the following College Committees <sup>\*</sup> from 1 to 6 (1 being your top choice, and 6 being your bottom choice).

	1 (Top choice)	2	3	4	5	6 (Bottom choice)	I cannot sit on this committee due to a conflict
Registration Committee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality Assurance Committee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inquiries, Complaints and Reports Committee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient Relations Committee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Governance Committee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinical Practice Committee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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