

# EXECUTIVE COMMITTEE REPORT

June 2024 Executive Committee Report  
to the Board of Directors

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## 2024 Committee Members:

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

Number of meetings since the March Board Meeting:

- One on May 21, 2024.

## Report:

### 1. General Business

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

The Executive Committee reviewed and discussed the committee evaluations for 2023. No action plan items for 2024 were identified.

### 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 2024 financial variance reports to March 31, 2024.

#### *2023 Audited Financial Statements and Audit Report Findings*

The committee reviewed the 2023 Audited Financial Statements and the Audit Findings Report in detail. The audit report will be presented at the June 3rd Board meeting for approval.

#### *Annual Auditor Assessment*

The Executive Committee reviewed the process for the Annual Auditor Assessment. Once the Board has approved the audit report, the committee will carry out 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 on appointing an auditor for the next fiscal year.

**Submitted by:**

Derick Summers, RO, Chair, Elected Member

## CLINICAL PRACTICE COMMITTEE REPORT

June 2024 Committee Report to the Board of Directors

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### **Committee Members:**

Parneet Dhillon, RO, Chair, Appointed Member  
Grazyna Sepczynska, RO, Vice-Chair, Elected Member  
Elliot Borins, Appointed Member  
Parminder Kalsi, RO, Appointed Member  
Stephanie Kelly, RO, Appointed Member

Number of meetings since the March Board Meeting: 0

### **Report:**

In anticipation of the Committee's review of the Standards of Practice and Practice Guidelines, the College sought feedback from stakeholders. In particular, whether:

- The standards and guidelines are clear
- There are areas where registrants could use more guidance
- The standards reflect the current practice environment.

The Committee will review the results at their upcoming meeting on June 10. The results will help inform them of any changes required to update the current Standards of Practice and Practice Guidelines.

### **Submitted by:**

Parneet Dhillon, RO, Chair, Appointed Member  
Peggy Dreyer, Manager, Professional Practice and Quality Assurance

## QUALITY ASSURANCE COMMITTEE REPORT

March 2024 Committee Report to the Board of Directors

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### **Committee Members:**

Tanya Nahmabin, RO, Elected Member, Chair  
Omar Farouk, Public Member, Vice Chair  
Henry Wiersema, Public Member  
Angelia Brown, RO, Appointed Member  
Melissa Campbell, RO, Appointed Member  
Panos Petrides, Appointed Member

### **Accreditation Panel Members**

John Battaglia, RO, Appointed Member, Chair  
Robert Quinn, RO, Appointed Member, Vice Chair  
Derick Summers, RO, Elected Member  
Janice Mallette, RO, Appointed Member  
Lindsay Beriault, RO, Appointed Member  
Elizabeth Roche, RO, Appointed Member  
David Milne, Appointed Member

Number of meetings since the March Board Meeting: 1

- May 15, 2024

### **Report:**

#### ***2023 Committee Self-Evaluation***

The Committee reviewed the results of the 2023 survey and did not identify any concerns or action items for 2024. All members indicated that they are satisfied with the current processes related to orientation/training and feel the expectations are clearly outlined.

#### ***Policies and Guidelines***

At their May meeting, the Committee reviewed and approved a structured, scheduled review of their policies and guidelines. This will support the Board's ability to manage organizational risk.

The following policies were reviewed and updated at the May meeting:

- 1.1 Defining a List of Non-Exclusive Continuing Education (CE) Hours
- 2.1 Defining the Competency Review & Evaluation Process and the Selection Criteria
- 2.5 Peer Assessment Review
- 2.9 Peer and Practice Assessment: Registrant Participation Due Dates

#### ***Accrediting Continuing Education Activities***

Staff have created a system where accredited activities that have or will expire within a specific time frame are identified. Continuing Education providers are notified of expiring continuing education activities on a quarterly basis. The aim is to ensure that relevant continuing education activities remain available for registrants to complete as part of their accredited hour requirements.

After gathering information regarding the Accreditation Process, a new CE Provider, Optical Training Institute, submitted 54 distance learning modules for review. The Accreditation Panels have reviewed and approved 42 of these requests and are in the final stages of reviewing the remaining 12.

As of May 16, 132 accreditation requests have been received; this represents an increase of 110% over the same period in 2023.

### ***Competency Review and Evaluation Process***

The selection process for the CRE was updated in December of 2023. Under the new criteria, 403 registrants were randomly selected to participate in the 2024 CRE process and 35 were required to participate due to a deferral or deficiency in the 2023 CRE process.

As of May 3, 2024, all portfolios have been reviewed. As of May 6, 2024, all registrants have been notified of their results including those with deficient and/or incomplete portfolios. The QAC began reviewing deficient files at their meeting May 15, 2024.

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

The random selection of registrants to participate in a Peer and Practice Assessment has been completed. Registrants are being notified on a rolling basis to allow time for Peer Assessors to assess materials received and provide results to registrants in a timely manner.

### **Submitted by:**

Tonya Nahmabin, RO, Chair, Elected Member

Peggy Dreyer, Manager, Professional Practice & Quality Assurance

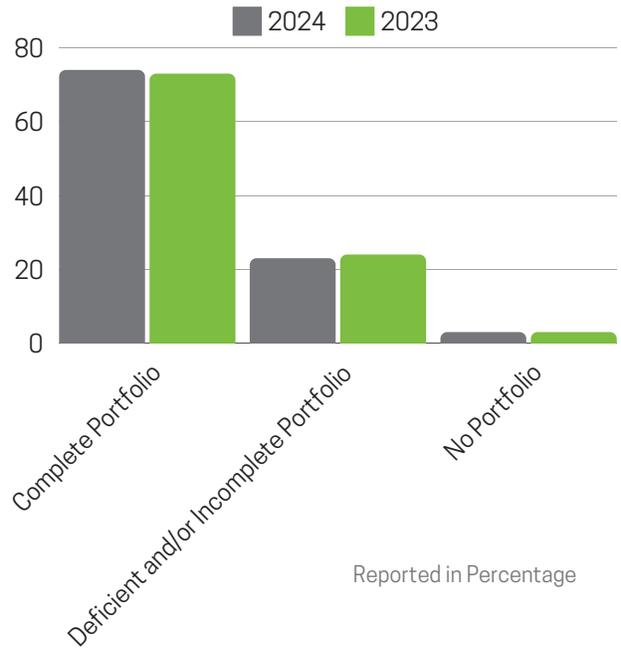
# QUALITY ASSURANCE COMMITTEE

## Q2 Report

### Results of the 2024 Competency Review & Evaluation

#### Noteable Points:

- Initial review of all portfolios was completed by May 3, 2024
- 57% of deficient and/or incomplete portfolios issues are resolved
- Only 1 deferral request was received versus in 7 requests 2023

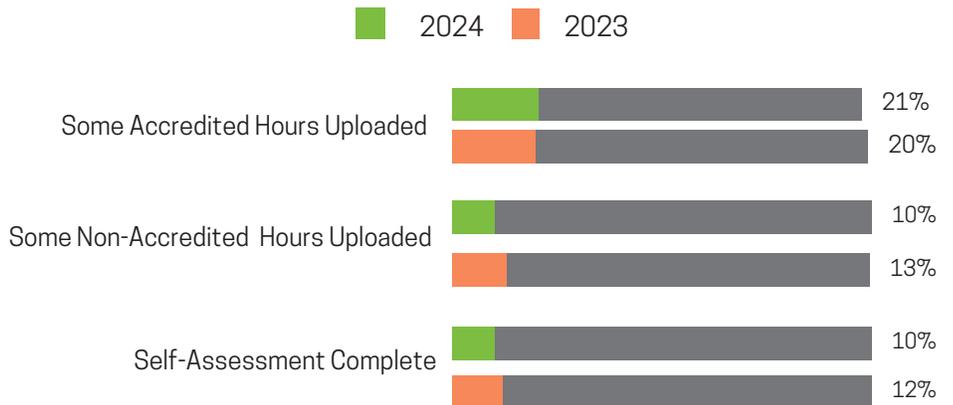


### YTD Professional Portfolio Uploads

Registrants are required to upload their professional portfolio to the Registrant Portall by December 31;

#### Noteable Points:

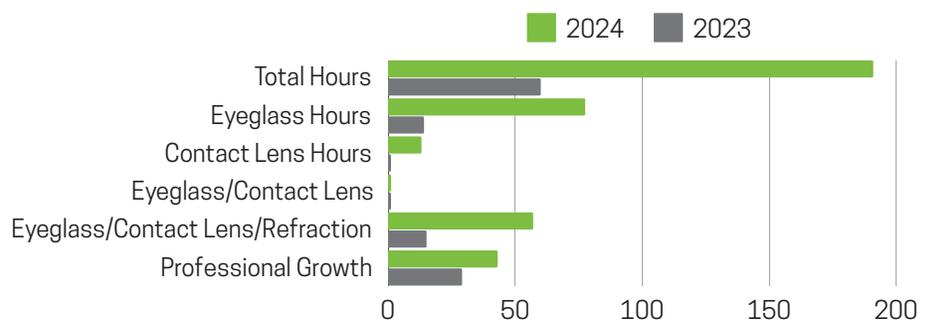
Registrants appear to be on trend with last year.



### Accreditation Requests

#### Noteable Points:

- 132 activities have been submitted for review versus 63 during the same time period last year. This represents an increase of 110%



## GOVERNANCE COMMITTEE REPORT

June 2024 Committee Report to the Board of Directors

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### Committee Members:

Elliot Borins, Appointed Public Member, Chair  
Carlos Pacheco, Elected Member, Vice-Chair  
Jamuna Balaram, Appointed Public Member  
Lindsay Beriault, Appointed Member  
Angelia Brown, Appointed Member

Number of Meetings since March 2024:

- May 10, 2024

### Report:

#### *Governance Committee Self-Evaluation 2023 Results*

The committee reviewed and discussed the results of the Governance Committee effectiveness self-evaluations for 2023. The committee did not identify any action plan items for 2024 from the results.

#### *Governance By-laws and Policies*

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

1. Reserves Policy 2-07
2. Human Resources and Relations Policy 2-08
3. Board Terms of Reference 4-03
4. Executive Committee Terms of Reference and Mandate Policy 4-08
5. Governance Committee Terms of Reference and Mandate Policy 4-09

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

#### *Governance Reform: Electoral Districts*

The committee reviewed three potential models for electoral reform and discussed the strengths and weaknesses of each. A case study of reform which had taken place at the College of Dietitians (CDO) was presented to the committee along with a review of changes that other *Regulated Health Professions Act* (RHPA) Colleges were incorporating into their election processes.

The committee agreed to recommend that models one and two should be circulated for stakeholder feedback. The request for approval to conduct the stakeholder consultation will be presented to the board at its upcoming meeting.

*Governance Reform: New Inactive Class Voting and Nomination Eligibility*

The committee reviewed the proposed amendments to the by-laws to address election, appointment, and voter eligibility for members of the new Inactive class of registration. Alongside the amendments, the committee discussed the direction that other RHPA Colleges had taken with regards to their inactive and non-practising classes of registration.

The committee agreed to recommend that the proposed by-law changes be circulated for stakeholder feedback. The proposed by-law amendments will be presented to the board at its upcoming meeting.

*Adjustment to Registrar, CEO Compensation Formula*

The committee considered a proposed adjustment to the Registrar, CEO Compensation Formula as recommended by the Performance Evaluation/Compensation Subcommittee. The proposed adjustment will be presented to the board at its upcoming meeting.

*2024 Board Action Plan*

The committee reviewed a draft of the board's 2024 Action Plan. The 2024 Action Plan will be presented for approval at the upcoming board meeting.

**Submitted by:**

Elliot Borins, Appointed Public Member, Chair  
Sarah Scott, Manager, Policy and Governance

## PATIENT RELATIONS COMMITTEE REPORT

June 2024 Committee Report to the Board of Directors

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### **Committee Members:**

David Milne, Appointed Public Member, Chair  
Parneet Dhillon, Appointed Member, Vice-Chair  
Melissa Campbell, Appointed Member  
Paul Imola, Elected Member  
Paul Wilk, Public Member

### **Report:**

Number of meetings since March 2024 board meeting: 0

The committee is scheduled to meet in June to review proposed amendments to Jurisprudence test questions for Chapters 1-3. An update on this will be provided in the September 2024 committee report.

### **Submitted by:**

David Milne, Chair, Public Appointed Member  
Sarah Scott, Manager of Policy and Governance

## INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

June 2024 Committee Report to the Board of Directors

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 formal complaints, reports from the Registrar, or referrals from the College's Quality Assurance Committee. The ICRC investigates all complaints and reports 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 Committee and Panel composition in 2024 is tabled below.

### ICRC 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.

Table 1: ICRC Panels 2024	
Panel 1	Panel 2
Samir Modhera, RO, Chair, Elected Member	Alicia Munian, Vice Chair, Public Member
Omar Farouk, Public Member	Peggy Judge, Public Member
Stephen Kinsella, Public Member	Jamuna Balaram, Appointed Member
Elizabeth Roche, RO, Appointed Member	Jay Bhatt, RO, Appointed Member
Robert Quinn, RO, Appointed Member	Kevin Cloutier, RO, Elected Member
	Janice Mallette, RO, Appointed Member

## REPORT

### Number of ICRC meetings:

The ICRC holds full committee meetings to provide orientation and training and 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.

	Table 2: Number of Meetings	
	2024 YTD	Since the Last Board Meeting
Full Committee Meetings	1	1
Panel Meetings	2	2

On February 12, 2024, the Committee met for an orientation and training session, which included presentations by Amy Stein, Deputy Registrar and Anastasia-Maria Hountalas, Partner, Steinecke Maciura LeBlanc Barristers & Solicitors.

Panel 1 of the ICRC met on March 18, 2024, to review four complaints. The next meeting is scheduled for May 31, 2024.

On March 25, 2024, Panel 2 of the ICRC held a meeting to review four complaints and one request for the appointment of an investigator. The next meeting is planned for June 14, 2024.

**Complaints**

In 2024, the College has received 12 complaints, which are in different processing stages. Including the 12 complaints, there are 39 open complaints, most of which date from 2022 to 2024.

<b>Table 3: Complaint Processing Times_ Year-To-Date</b>			
	Average Days to Close a 2022 Complaint (Working Days)	Average Days to Close a 2023 Complaint (Working Days)	Average Days to Close a 2024 Complaint (Working Days)
<b>Complaint Processing Times</b>	<b>351</b>	<b>195</b>	<b>Strategic Plan Target: 5% Reduction in Processing Time</b>

Note: Working days, exclude weekends

Information on themes of the complaints and the decisions issued is in the Dashboard.

**Registrar’s Reports**

There are currently 14 ongoing reports, including one opened this year. Another three will be tabled for the ICRC’s approval to appoint an investigator at the next panel meeting in June 2024. Year-to-date, the College has closed one report.

**Referrals from the Quality Assurance Committee**

Currently, 22 referrals from the Quality Assurance Committee are being processed.

**Unauthorized Practice (UAP) Reports**

In September 2023, in keeping with the 2023-2025 Strategic Plan, the College launched a new web-based Unauthorized Practice Reporting program.

<b>Table 4: UAP Reports</b>		
<b>Description</b>	<b>2023</b>	<b>2024 YTD</b>
UAP Reports Received	13	7
Reports Closed	12	3
Reviews On-going	1	4

Since the program's launch, the College has received 20 UAP reports, 13 in 2023 and 7 in 2024. Staff have

completed their review and closed 15 reports (12 from 2023 and 3 from 2024). 5 reports are open, including one that is being investigated by an external investigator.

The average processing time for reports received in 2023 is 102 working days, and for reports received in 2024, it is 26 working days. The combined average processing time is 86 working days.

College staff assess UAP reports using risk-based and right-touch approaches. The goal is to curtail unauthorized practice, educate registrants and operators as needed, and ensure that all investigations are completed in a timely fashion. Year-to-date, the College has sent 13 Compliance Packages and 10 Cease-and-Desist letters as part of the review.

Although the ICRC is not involved in the initial review of UAP reports, they will be involved if the Registrar recommends legal action. Given the College's right-touch approach to resolving these matters, the College expects that most reports will be resolved collaboratively and that the need to commence legal action will be rare.

**Submitted by:**

Samir Modhera, RO, Chair, Elected Member

Rudra Mukherji, Acting Manager, Professional Conduct

# INQUIRES, COMPLAINTS & REPORTS COMMITTEE

## Q2 Report

### Complaints

# of Complaints Received (2024 YTD): **12**  
 # of Complaints Open (TOTAL) : **39**  
 # of Complaints Closed\* (2024 YTD) : **7**  
 # of Complaints Awaiting\*\* Decisions : **7**

### Reports

# of Reports Opened (2024 YTD): **1**  
 # of Reports Open (TOTAL YTD) : **14**  
 # of Reports Closed (2024 YTD) : **1**  
 # of Reports Awaiting Decision : **1**

\* 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

### Complaint Processing Times

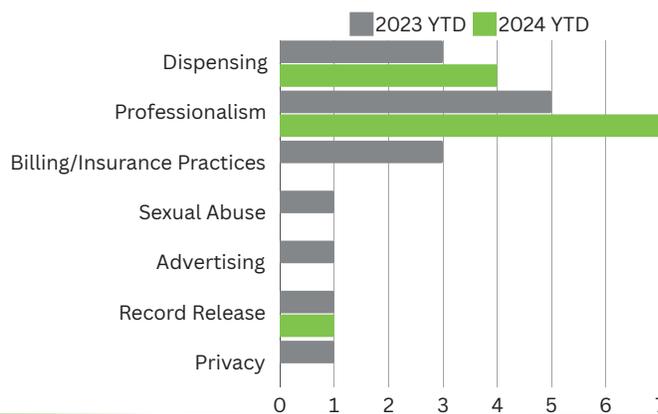
Avg. Days to Process a 2022 Complaint : **351**  
 Avg. Days to Process a 2023 Complaint (YTD) : **195**  
 Avg. Days to Process a 2024 Complaint : **Strategic Plan Target: 5% Reduction**

### Complaint Themes

#### Trends

The themes in Q2 2024 YTD are generally consistent with the themes observed in Q2 2023.

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



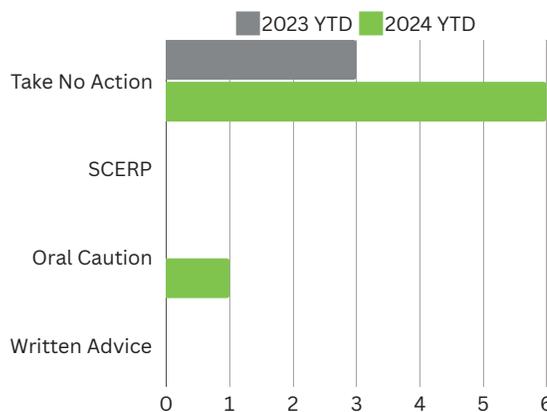
### Complaint Dispositions Themes

#### Trends

Between Jan 2023 to June 2023, the College issued 3 decisions.

Between Jan 2024-May 2024, the College issued 7 decisions.

A complaint may have more than one disposition.



### Total Open Matters

	2024 YTD	2023 YTD
Number of Open Complaints & Reports	53	47
Number of Open QAC Reports	22	12

## REGISTRATION COMMITTEE REPORT

June 2024 Report to Board of Directors

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### **Committee Members:**

Rob Vezina, Chair, RO, Elected Member  
Alicia Munian, Vice-Chair, Public Member  
Jay Bhatt, RO, Appointed Member  
Stephanie Kelly, RO Appointed Member  
Panos Petrides, Public Member

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

- March 27, 2024
- April 25, 2024
- May 8, 2024
- May 30, 2024

### **Report:**

#### *2023 Registration Committee Self-Evaluation*

The Registration Committee reviewed the results of the 2023 survey and did not identify any concerns and/or action items. The Committee members expressed satisfaction with the orientation they received and indicated they were comfortable with the pertinent policies, by-laws and guidelines. The Committee members agreed that they were provided with sufficient information in their meeting packages to enable them to make sound recommendations and/or decisions.

The Committee acknowledged that new members would benefit from more extensive training to enhance their understanding of possible outcomes of case reviews.

#### *Stakeholder Consultation Regarding Proposed Changes to the By-Laws*

The Registration Committee reviewed stakeholder feedback concerning the proposed by-law changes related to:

- Annual renewal process and timing
- Fees for the new Emergency Class of registration
- Fee for document requests

The Committee noted that the majority of survey respondents were in support of the proposed by-law changes thus reaffirming the direction the Registration Committee had taken.

The results of the stakeholder feedback will be brought forward to the Board of Directors at its next meeting on June 3, 2024. Based on the review of the stakeholder feedback, the Committee will be recommending that the Board approve the proposed changes to the by-laws.

### *Policy Development*

The Registration Committee undertook the development of new registration and examination policies, specifically:

- Inactive Class Policy
- Approved Education Programs Policy
- National Examinations Policy

The new registration policies are to support registration-related changes stemming from the amendments to the Registration Regulation as they relate to:

- The process of registering in the Inactive Class;
- Conditions of the Inactive Certificate of Registration and the annual obligations to maintain the certificate;
- Change of status process for opticians in the Inactive class of registration wishing to return to the active class;
- Opticianry programs recognized as approved by the College of Opticians of Ontario (College) for the purpose of meeting the education requirement for registration.

The new examination policy sets out the College's criteria for eligibility for the positions related to the administration of the national examinations for opticians by the National Alliance of Canadian Optician Regulators (NACOR), namely:

- National Examination Committee Representative
- Examination Observer
- Examiner

In developing the National Examinations policy, the Committee sought input from NACOR and the current Chief Examiner.

Upon review and consideration of the information presented, the Committee will be recommending that the Board approve the proposed new registration and examination policies.

### *Registration Policies for Content Review*

The Registration Committee undertook a content review of the following registration policies:

- Student and Intern Supervision Policy
- Language Proficiency Policy

The purpose of the review was to ensure the policies remain relevant and continue to serve the College's needs and objectives.

The Committee proposed several amendments to align the policies with the new regulatory requirements, and, in case of the Language Proficiency Requirements policy, ensure that the language tests listed in the policy remain current. Upon review and consideration of the information presented, the Committee will be recommending that the Board approve the proposed amendments to the aforementioned policies.

*File Review*

The Committee reviewed six initial reinstatement applications (over three years), eight upgrading proposals, and one PLAR assessment result.

**Submitted by:**

Rob Vezina, Chair, RO

Anna Jeremian, Manager, Registration

# REGISTRATION COMMITTEE

## Q2 Report

### New registrants in each registration category:

A comparison of year-to-date (Jan.1 - May 22, 2024) registrant numbers vs same time periods in 2023 and 2022

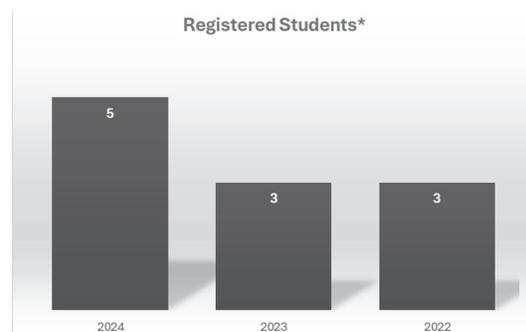
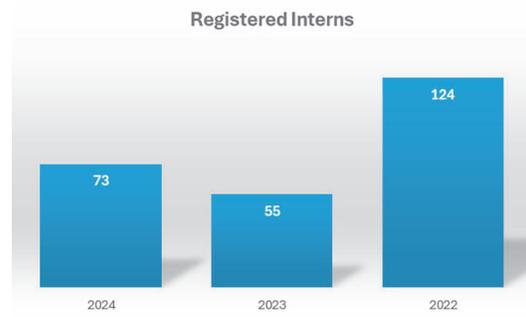
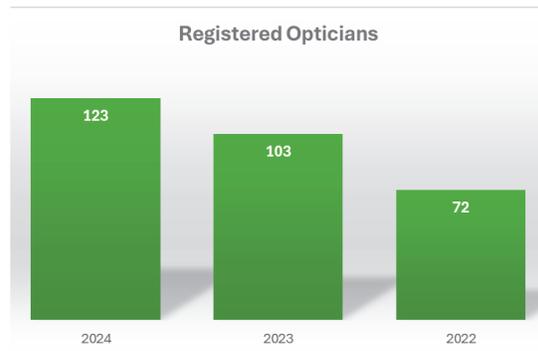
### Key Trends:

- Demonstrated increase in the number of new Registered Opticians in Q1/Q2 correlates with the timing of the national examinations in the previous year
- Intern registration numbers in 2024 and 2023 are consistent with the pre-pandemic numbers
- No significant change of Student Opticians



### National Mobility Key Trends:

- Less opticians left Ontario in 2024 compared to the same time periods in 2023 and 2022
- The number of opticians transferred from another province remains steady over 3 years



\*Student class of registration will be cancelled effective July 1, 2024

