

EXECUTIVE COMMITTEE REPORT

May 2022 Executive Committee
Report to the Board of Directors

2022 Committee Members:

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

Number of meetings since the February Board Meeting:

- April 12, 2022
- May 16, 2022

Report:

1. General Business

Registrar's Evaluation Process Overview

The Executive Committee was briefed by Stephen Kinsella on the activities of the Executive Sub-committee responsible for carrying out the Registrar, CEO's annual performance review, and the milestones achieved to date, as well as the next steps.

Meeting Format Mid-Year Check-in

The committee discussed in-person, hybrid or virtual meeting formats and reached a consensus to move forward with a virtual meeting in May, followed by an in-person strategic planning meeting in June.

Strategic Planning

The committee was provided with an overview of the plans for the upcoming strategic planning session in June and expressed positive feedback on the proposed agenda and format.

Terminology for Board and Committee Members

The committee discussed options for internal terminology for board and appointed members and provided feedback that indicated a preference for referring to public members as "Government Appointees" going forward. The other groups can be known as "Elected Members" and "College Appointees".

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 with respect to 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 did not exercise its powers to act as the Board since the last meeting.

3. Finance Committee

The Executive Committee carried out the following activities in its capacity as the Finance Committee of the College:

Financial Statements and Annual Auditor Assessment

The Executive received a detailed review of the financial variance report to March 31, 2022.

2021 Auditor Report

The Auditors, Malcom Vaz and Adam Guyatt of Grewal Guyatt presented the 2021 Audit Report to the Executive Committee.

The Executive Committee reviewed the process for the Annual Auditor Assessment. The Assessment will commence once the Board has reviewed and approved the 2021 Audited Financial Statements, which is anticipated in May.

Submitted by:

Stephen Kinsella, Chair, Public Member

GOVERNANCE COMMITTEE REPORT

May 2022 Report to the Board of Directors

Committee Members:

Gord White, Public Appointed Member, Chair
Jamuna Balaram, Public Appointed Member, Vice-Chair
Elliot Borins, Public Appointed Member
Diana Bristow, Public Member
Elsa Lee, Elected Member
Tapiwa Musewe, Public Appointed Member
Robert Quinn, RO, Appointed Member
Derick Summers, Elected Member
Paul Wilk, Public Member

Number of Meetings since the last Board meeting:

- May 5, 2022

Report:

Governance By-laws and Policies

The Committee will be recommending the following new monitoring report template to the Board at its May meeting.

1. Board Terms of Reference 4-03 Policy Template

This template was created for the Board to monitor its own policies under Section 8b of the Board Policy Development Policy 4-24.

The Committee carried out a content review of the following policies in accordance with the Board's policy review schedule, and recommended that the following policies go before the Board at its meeting in May to approve the proposed updates:

2. Board-Staff Relationship Policy 3-04
3. Director and Committee Member Responsibilities Policy 4-27
4. Intellectual Property Policy 2-13
5. Pre-election Training Module Policy 4-18

Submitted by:

Gord White, Chair, Public Appointed Member
Deidre Brooks, Manager, Patient Relations & Governance

CLINICAL PRACTICE COMMITTEE REPORT

May 2022 Committee Report to the Board of Directors

Committee Members:

Dorina Reiz, RO, Chair, Elected Member
Dennis O'Hagan, RO, Vice-Chair, Appointed Member
Paul Jozsef Wilk, Public Member
Elliot Borins, Appointed Member
Daniella Schowalter, RO, Appointed Member

Number of meetings since February: 2

- April 12, 2022
- April 26, 2022

Report:***COVID-19 Return to Practice Guidelines***

To further guide registrants once the province lifts remaining COVID-19 restrictions, which is expected to happen in June, the Committee reviewed the COVID-19 Return to Practice Guidelines.

The Committee determined that the COVID-19 Return to Practice Guidelines could be re-worked to provide guidance for registrants once all remaining Government directives, masking guidelines and screening of patients/visitors ends. The updated document will become COVID-19 Practice Guidelines.

It was determined that measures no longer required under government directive could be identified as recommendations and that the guidelines should identify any enhanced safety measures that would still be required in the practice environment.

The draft COVID-19 Practice Guidelines are before the Board of Directors at this meeting for review and approval.

The COVID-19 Return to Practice Guidelines will remain available as a resource.

Submitted by:

Dorina Reiz, RO, Chair, Elected Member
Peggy Dreyer, Manager, Professional Practice and Quality Assurance

QUALITY ASSURANCE COMMITTEE REPORT

May 2022 Committee Report to the Board of Directors

Committee Members:

Tanya Nahmabin, RO, Appointed Member, Chair
Dennis O'Hagan, RO, Appointed Member, Vice-Chair
Mike Smart, RO, Elected Member
Derick Summers, RO, Elected Member
Stephen Kinsella, Public Member
Henry Wiersema, Public Member
David Milne, Appointed Member
Panos Petrides, Appointed Member
Tapiwa Musewe, RO, Appointed Member
Robert Quinn, RO, Appointed Member

Number of meetings since February meeting: 1

- March 17, 2022

Report:

Competency Review and Evaluation (CRE) Process

By April 4, 2022, those registrants randomly selected to participate in the CRE process were required to notify the College their 2021 Professional Portfolio was ready for review.

Of the 682 registrants that were required to participate in the CRE process:

- 17 registrants were identified as not having renewed their registration with the College
- 8 registrants were identified as having retired

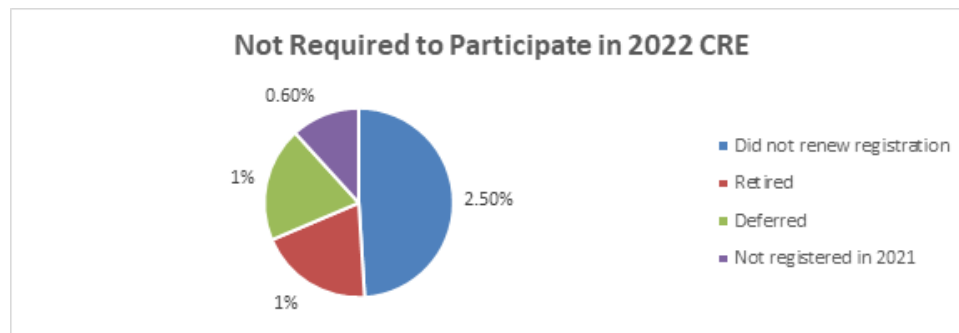
Those registrants were advised that their 2021 Professional Portfolio will not be reviewed at this time, however, should they re-instate their registration; their 2021 Professional Portfolio will be reviewed.

In addition, 3 registrants were not required to participate in the process as they were identified as not having been registered with the College in 2021.

Deferrals

The Quality Assurance (QA) Committee reviewed and granted 8 requests for deferrals.

A deferral is a delay in engaging in the CRE process until the next selection. As such, the registrants will be automatically required to participate in the next CRE process.



Professional Portfolio Assessment

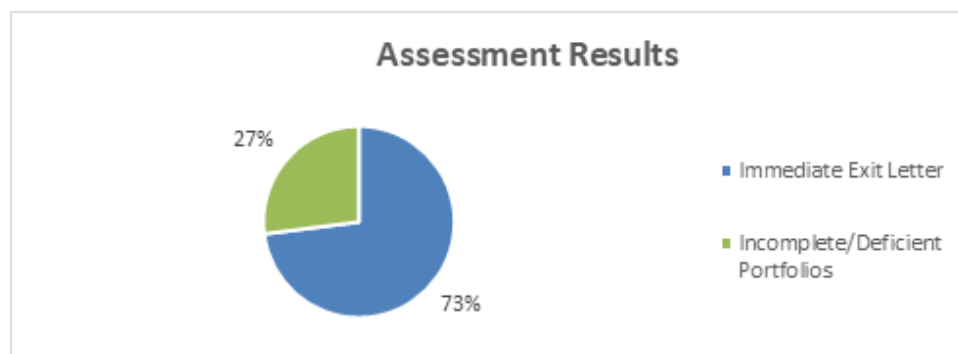
As of May 9th, 2022, 624 of the 646 expected portfolios have been received and assessed. This is an exceptional achievement as, in past years, the review of portfolios has not been completed until the end of summer at the earliest. The requirement that portfolios be completed online through the Registrant Portal contributed to the expedited review process.

Of the outstanding portfolios:

- 4 Registrants have been provided with an extension to submit their material
- 18 Registrants have not provided notice that their Professional Portfolio is ready for review and upon review of their Portal, do not have any information uploaded.

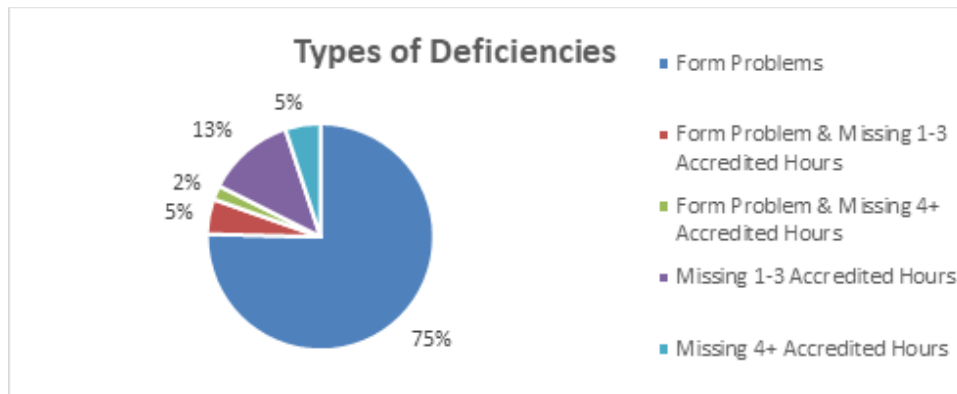
Of the 624 portfolios assessed:

- 454 registrants received immediate exit letters
- 170 registrants had form problems and/or deficient portfolios



Types of deficiencies found:

- 128 registrants had form problems
- 9 registrants had form problems *and* were missing 1-3 accredited Continuing Education (CE) hours
- 21 registrants were missing 1-3 accredited CE hours
- 3 registrants had form problems *and* were missing 4+ accredited CE hours
- 9 registrants were missing 4 or more accredited CE hours



A portfolio is considered to have a form problem if:

- Jurisprudence has not been completed
- Non-Accredited, self-directed hours are incomplete
- Completion certificates for accredited CE hours have not been uploaded or are incorrect

A portfolio is considered deficient if the required number of accredited CE hours have not been completed.

The QA Committee will review all deficient portfolios at their next meeting.

Re-instated Opticians

Registrants who are randomly selected to participate in the CRE process but are not current when notified are advised that, upon re-instatement of their registration, they will be required to submit their Professional Portfolio.

The committee reviewed 2 deferral requests from re-instated registrants and determined they would not be required to submit their Professional Portfolio, but they would be included in the next CRE cycle (2023).

Peer Assessor Training

On April 19, 2022, the College's Peer Assessors received annual training provided by Leanne Worsfold of iComp Consulting and Peggy Dreyer, Manager, Quality Assurance.

The training session included:

- Assessor roles and responsibilities
- Orientation of the QA Program, Peer and Practice Assessments and Behaviour-Based Interviewing
- Interviewing and Remote Assessment Skills
- Practice Session
- Challenging Assessments
- Report Writing
- Lessons learned from experienced Assessors

Both new and experienced assessors said they found excellent value in the session.

Peer and Practice Assessments

The QAC reviewed 1 Peer Assessment report, finding no concerns, the file was closed. The committee determined that the registrant would be required to participate in the 2023 Competency Review and Evaluation process.

Since February, assessors have completed 4 Peer and Practice Assessments. The results of these assessments will be reviewed by the committee at the next meeting.

Accreditation Requests

As of May 10, 2022, professional members of the Quality Assurance Committee have reviewed 39 accreditation requests.

Type of Request	Number of Requests	Number of Requests Accredited	Number of Requests Not Accredited
Standard Requests	20	20	0
Fast Track Requests	12	11	1
Rush Requests	4	4	0
Re-Accreditation Requests	3	3	0

There are 2 standard requests pending accreditation.

Submitted by:

Tonya Nahmabin, RO, Chair

Peggy Dreyer, Manager, Professional Practice & Quality Assurance

DISCIPLINE COMMITTEE REPORT

May 2022 Discipline Committee Report to the Board of Directors

Committee Members:

Elected Members

Derick Summers, **Chair**, RO
Neda Mohammadzadeh, RO
Dorina Reiz, RO
Kevin Cloutier, RO
Mike Smart, **Vice-Chair**, RO
Amber Fournier, RO
Elsa Lee, RO
Samir Modhera, RO

Public Members

Omar Farouk
Stephen Kinsella
Diana Bristow
Henry Wiersema
Peggy Judge
Paul-Josef Wilik

Appointed Members

Daniela Schowalter, RO
Dennis O'Hagan, RO
Desiree Petralito, RO
Jay Bhatt, RO
John Battaglia, RO
Robert Quinn, RO
Tapiwa Musewe, RO
Tonya Nahmabin, RO
David Milne, Non-RO
Elliot Borins, Non-RO
Gord White, Non-RO
Jamuna Balaram, Non-RO
Panos Petrides, Non-RO

Number of meetings since last Board Meeting: n/a

Report:

A panel of the Discipline Committee held hearings in the following matters:

Matter

College of Opticians v. Sheidaei
College of Opticians v. Heeremans

Hearing Date

April 4, 2022
April 29, 2022

On April 21, 2022, a panel of the Discipline Committee heard a motion to adjourn a discipline hearing regarding allegations against Registrant, Steven Sanger. Mr. Sanger signed an Acknowledgement and Undertaking in which he resigned and surrendered his membership with the College. The Panel ordered the College to adjourn the matter indefinitely.

Decisions were issued in the following matters and are available on the College's website:

College of Opticians v. Boddington
College of Opticians v. Sanger

Submitted by:

Derick Summers, Chair, RO
Raj Bhatti, Manager, Professional Conduct

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

May 2022 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 for the purpose of reviewing appropriate cases.

Panel 1	Panel 2
Amber Fournier, Chair, RO, Elected Member	Kevin Cloutier, Vice Chair, RO, Elected Member
Elsa Lee, RO, Elected Member	Daniela Schowalter, RO, Appointed Member
Samir Modhera, RO, Elected Member	Peggy Judge, Public Member
John Battaglia, RO, Appointed Member	Stephen Kinsella, Public Member
Desiree Petralito, RO, Appointed Member	Jamuna Balaram, Appointed Member
Omar Farouk, Public Member	Gord White, Appointed Member

Number of meetings since the May 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 for the purpose of reviewing and disposing of cases.

Number of Meetings in 2022	
Full Committee Meetings	1
Panel Meetings	2

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

Submitted by:

Amber Fournier, Chair, RO, Elected Member
Raj Bhatti, Manager, Professional Conduct

ICRC Statistical Report 2022
(Statistics accurate as of May 16, 2022)

Complaints Dispositions	# of Files
Inquiries:	
Total number of complaint inquiries received in 2022	14
Covid-19 related inquiries	0
Inquiries that became a formal complaint in 2022	1
Formal Complaints:	
Complaint files opened in 2022	15
Cases brought forward from 2021	18
Frivolous and vexatious	-
Complaints disposed of in 2022 (see the Note below):	2
No further action	2
Written advice/Recommendations	-
Oral caution	-
Specified Continuing Education or Remediation Program (SCERP)	-
Undertaking	-
Referral to Discipline Committee	-
Withdrawn by Registrar	-
Open complaints pending further investigation	24
Complaints awaiting decisions	6

Quality Assurance Committee (QAC) and Registrar's Reports Dispositions	# of Files
Registrar's Reports:	
Registrar's Reports referred to ICRC in 2022	0
Registrar's Reports brought forward from 2021	17
QAC Reports:	
QAC Reports referred to ICRC in 2022	0
QAC Reports brought forward from 2021	15
Reports disposed of in 2022 (see the Note below):	0
No further action	-
Written advice	-
Oral caution	-
Specified Continuing Education and Remediation Program (SCERP)	-
Undertaking	-
Referral to Discipline Committee	-
Open Registrar's Reports pending further consideration	8
Registrar's Reports awaiting decisions	2

Note: matters may have more than one outcome. For example, an oral caution and a SCERP.

HPARB Reviews	# of Files
HPARB reviews requested in 2022	0
HPARB matters carried over from 2021 (not including 1 from 2020)	2
HPARB reviews pending	3
HPARB matters disposed of in 2022	0
Committee decisions confirmed	0
Committee decisions returned for further investigation and reconsideration	0

Unauthorized Practice	# of Files
Total number of UPC inquiries in 2022	0
UPC files carried over from 2021 (not including 10 from 2019, 11 from 2020)	3
Inquiry abandoned – not enough information / outside jurisdiction / not unauthorized practice	-
Inquiry pending – further information needed	-
Inquiry – formal file	-
Open files pending further investigation	24

CLINICAL PRACTICE COMMITTEE REPORT

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Paul Jozsef Wilk, Public Member
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COVID-19 Return to Practice Guidelines

To further guide registrants once the province lifts remaining COVID-19 restrictions, which is expected to happen in June, the Committee reviewed the COVID-19 Return to Practice Guidelines.

The Committee determined that the COVID-19 Return to Practice Guidelines could be re-worked to provide guidance for registrants once all remaining Government directives, masking guidelines and screening of patients/visitors ends. The updated document will become COVID-19 Practice Guidelines.

It was determined that measures no longer required under government directive could be identified as recommendations and that the guidelines should identify any enhanced safety measures that would still be required in the practice environment.

The draft COVID-19 Practice Guidelines are before the Board of Directors at this meeting for review and approval.

The COVID-19 Return to Practice Guidelines will remain available as a resource.

Submitted by:

Dorina Reiz, RO, Chair, Elected Member
Peggy Dreyer, Manager, Professional Practice and Quality Assurance

REGISTRATION COMMITTEE REPORT
May 2022 Report to Board of Directors

Committee Members:

Dorina Reiz, Chair, RO, Elected Member
John Battaglia, Vice-Chair, RO, Appointed Member
Kevin Cloutier, RO, Elected Member
Jay Bhatt, RO, Appointed Member
Samir Modhera, RO, Elected Member
Desiree Petralito, RO, Appointed Member
Panos Petrides, Public Member
Omar Farouk, Public Member
Peggy Judge, Public Member

Number of meetings since March Board Meeting:

- March 14, 2022
- May 17, 2022

Report:

Proposed By-Law Amendments Relating to Inactive Class Fees and Professional Liability Insurance

The College is currently seeking amendments to the [Registration Regulation](#) under the *Opticianry Act, 1991* that include the addition of a new Inactive Class of registration and removal of the details of the liability insurance from the regulation. The intent of the proposed changes is to streamline the current Registration Regulation.

Proposed Fees for Inactive Class Registrants.

The Committee reviewed proposed by-law changes to establish a registration fee for the new Inactive Class of registration and to set out the requirements for professional liability insurance. The Committee also considered a proposed pro-rated fee structures for registrants who change their status mid-way through the calendar year from inactive to active. Upon review of the presented information, the Committee approved circulation of the proposed by-law changes relating to the fees associated with inactive class of registration and professional liability insurance to registrants and stakeholders of the College in accordance with s.94(2) of the *Health Professions Procedural Code*.

The Committee further requested to conduct an environmental scan of practices of other health regulators pertaining to inactive class of registration and the associated fees.

Stakeholder Survey and Environmental Scan Results.

The Committee reviewed the results of the stakeholder survey and the environmental scan results.

At the time of the Committee meeting, the survey received 119 responses. In addition to the survey results, the Committee reviewed a summary table of stakeholder feedback, which included highlights of the main themes that were identified in the comments. The Committee noted that the majority of survey respondents were in support of the proposed by-law amendments. A small number of respondents expressed concern about the inactive fee being set too high.

The Committee further reviewed the results of environmental scanning of practices of Ontario health regulators as they relate to inactive class of registration and the associated fees. The Committee noted that the direction the College had taken was in alignment with the practices of other health regulators, with the fees proposed by the College being on the lower side of the spectrum. The Committee also noted that only 25% of regulatory colleges offered the flexibility of prorated option to the registrants transferring from the inactive to active class, with the College being among those.

Upon review of the information presented, the Committee recommended that the Board approve the proposed by-law amendments as they relate to the fees associated with inactive class of registration and professional liability insurance. It was noted that these amendments will not come into effect immediately but will be held until the new Registration Regulation is approved.

File Review

The Committee reviewed one initial reinstatement (over three years) application, and one extension request to complete the prescribed bridging courses.

Submitted by:

Dorina Reiz, Chair, RO
Anna Jeremian, Manager, Registration