

CLINICAL PRACTICE COMMITTEE REPORT

May 2021 Committee Report to the Board of Directors

Committee Members:

Neda Mohammadzedah, RO, Chair, Elected Member

Samir Modhera, RO, Vice Chair, Elected Member

Dorina Reiz, RO, Elected Member

Stephen Kinsella, Public Member

Jay Bhatt, RO, Appointed Member

Dennis O'Hagan, RO, Appointed Member

Daniella Schowalter, RO, Appointed Member

Number of meetings to date: 1

- March 26, 2021

Report:

Orientation

Members of the committee were provided with an overview of their role and responsibilities.

Refraction Standard of Practice

The committee was provided with an overview on the history of issues relating to the practice of refraction by opticians in Ontario, and about current considerations relating to refraction and the standards of practice.

The Committee will be engaging in stakeholder consultations and reviewing the current Refraction Standard over the coming year.

Submitted by:

Neda Mohammadzedah, RO, Chair, Elected Member

Peggy Dreyer, Manager, Professional Practice

EXECUTIVE COMMITTEE REPORT

May 2021 Executive Committee
Report to the Board of Directors

2021 Committee Members:

Bryan Todd, Chair, RO, Elected Member
Stephen Kinsella, Vice Chair, Public Member
Omar Farouk, Public Member
Neda Mohammadzadeh, RO, Elected Member
Dorina Reiz, RO, Elected Member

Number of meetings since the February 22, 2021 Board Meeting:

- One meeting on May 3, 2021.

Report:

1. General Business

Registrar's Evaluation Process Overview

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

Proposed Public Register By-Law Amendments Stakeholder Feedback

The Executive Committee reviewed stakeholder feedback regarding two proposed changes to the public register: 1) Information on the Public Register about Suspension and Practice Restrictions; and 2) Preferred name on the Public Register. The committee will be recommending at the May meeting that the Board approve the proposed by-law changes.

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, 2021.

The Executive Committee reviewed the process for the Annual Auditor Assessment. The Assessment will commence once the Board has reviewed and approved the 2020 Audited Financial Statements, which is anticipated in May.

2020 Auditor Report

The Auditors, Malcom Vaz and Adam Guyatt of Grewal Guyatt presented the 2020 Audit Report to the Executive Committee.

Honoraria Policy Update

At the December Board meeting the Executive Committee was tasked with further examination of possible changes to the Honoraria policy. At the February 8 Committee Meeting the committee discussed a number of options for the administration to investigate further. Administration conducted an environmental scan which revealed that no other colleges are currently compensating board members for internet, or other home office expenses during the COVID-19 pandemic. The Committee will be recommending that the board not make any changes to the honoraria policy at the May 17, Board meeting.

Registration Fees

The College reduced fees for registered opticians for 2021, reflecting the financial hardship many registrants endured as a result of the COVID-19 pandemic. For 2022, the Executive Committee reviewed several options and determined to recommend that 2022 fees be set at 2021 pre-adjusted rates. The committee will further be recommending that the board revisit fees for 2023 onward next year once more information about the financial impact of the pandemic including the impact on student graduation numbers, becomes available. The issue will be before the Board at the May Board meeting.

Submitted by:

Bryan Todd, RO, Chair, Elected Member

GOVERNANCE COMMITTEE REPORT

May 2021 Committee Report to the Board of Directors

Committee Members:

Diana Bristow, Chair, Public Member
Gord White, Vice-chair, Appointed Public Member
Kevin Cloutier, RO, Appointed Member
Amber Fournier RO, Elected Member
Ingrid Koenig RO, Elected Member
Robert Quinn RO, Appointed Member

Number of Meetings since February Meeting:

- May 5, 2021

Report:

2020 Committee Self-Evaluations

The Committee reviewed the results of the 2020 Committee Self-evaluation Reports and formulated action plans that will be shared with the Board and with each committee. The reports and action plans will be presented to the Board at their meeting in May.

Governance By-laws and Policies

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

1. Role of Board Officers Policy 4-05
2. Board Policy development Policy 4-24

These templates were 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 the May meeting to approve revisions:

1. Reserves Policy 2-07

2. Human Resources and Relations Policy 2-08
3. Board Terms of Reference Policy 4-03

Governance Reform

In keeping with the COO's 2020-2022 strategic plan and its 2020 Performance Measurement Framework (CPMF) Report to improve its performance as it relates to competencies of board and committee members, the Committee invited Ms. Sandi Verrecchia of Satori Consulting Inc. to assist the College in developing a competency framework for elected board members and committee members. Ms. Verrecchia presented to the Committee a proposed competency framework, as well as a method of assessing members against those competencies for the purpose of:

1. Determining eligibility for election
2. Making committee appointments

The Committee reviewed the competency framework and proposed the following implementation procedure:

1. That the Board assign the assessment of the elected Board Candidates to a (Nominations/Screening/Recruitment) subcommittee of the Governance Committee made up of three public members with support of a third-party

The Committee recommended that the proposed competency framework and implementation procedure be brought to the board for their approval at their next meeting in May.

Submitted by:

Diana Bristow Chair, Public Member
Deidre Brooks, Manager, Patient Relations & Governance

PATIENT RELATIONS COMMITTEE REPORT

May 2021 Committee Report to the Board

Committee Members:

Jay Bhatt RO, Chair, Appointed Member
Neda Mohammadzadeh, RO, Elected Member
Murray Angus, Public Member
Elsa Lee RO, Appointed Member
Tonya Nahmabin, Elected Member
Daniela Schowalter, Elected Member
Henry Wiersema, Public Member

Number of Meetings:

- April 15, 2021
- May 3, 2021

Report:

Orientation

On April 25, 2021, the Committee received an orientation on the role of the Patient Relations Committee and the Funding for Therapy and Counselling Program.

Code of Ethics

The Committee reviewed and discussed a proposed new Code of Ethics. The Code of Ethics identifies the ethical principles that all opticians must follow in order to meet their professional obligations and serves to help opticians make ethical decisions in their practice. It also addresses the responsibility that opticians must ensure that the optician-patient relationship is built on trust and respect, in a manner that enhances the integrity of the profession and protects patients' interests. Proposed updates to the Code aim to make the document more clear and relational, reflect changes to the profession since the Code was last reviewed in 2004, and incorporate the Board's values with respect to diversity, equity and inclusion. The Committee approved that the proposed Code of Ethics be sent out for stakeholder feedback.

Spousal Exemption Regulation

The Committee reviewed and discussed the recommendation that the Board propose a regulatory amendment that would exempt spouses from the sexual abuse provisions of the Regulated Health Professions Act. The committee's recommendation will be before the Board in May 2021.

Land Acknowledgments (Expanded Considerations)

The Committee reviewed and discussed expanding land acknowledgments to include committee members providing their own land acknowledgments at the beginning of meetings when introducing themselves. The Committee deferred the matter to consider other options.

Funding for Therapy and Counselling

The Committee received one application for Funding for Therapy and Counselling. The Committee reviewed the information provided and funding was approved.

Submitted by:

Jay Bhatt, Chair, Appointed Member
Deidre Brooks, Manager, Patient Relations & Governance

DISCIPLINE COMMITTEE REPORT

May 2021 Discipline Committee Report to the Board of Directors

Committee Members:

Elected Members

Ingrid Koenig, RO
Neda Mohammadzadeh, RO
Dorina Reiz, RO
Samir Modhera, RO
Bryan Todd, RO
Mike Smart, Vice-Chair, RO
Amber Fournier, RO
Elsa Lee, RO

Public Members

Omar Farouk
Stephen Kinsella
Diana Bristow
Henry Wiersema
Peggy Judge
Murray Angus

Appointed Members

Derick Summers, Chair, RO
Daniela Schowalter, RO
Kevin Cloutier, RO
Jay Bhatt, RO
Robert Quinn, RO
Gord White, (appointed PM)
Rob Vezina, RO
Margaret Osborne, RO
Tonya Nahmabin, RO
Behzad Safati, RO
Dennis O'Hagan, RO

Number of meetings since February Board Meeting: 0

Report:

On April 9, 2021 two members of the Committee attended a basic Discipline Committee training workshop and on April 30, 2021 one member of the Committee attended an advanced Discipline Committee training workshop via videoconference put on by the Health Profession Regulators of Ontario (HPRO). Additional workshops will be offered in the fall and any Committee members who have not yet had the training will be signed up.

A panel of the Discipline Committee held a hearing in the following matter:

Matter	Hearing Date
<i>College of Opticians v. Sanger</i>	March 19, 2021

A decision was issued in the following matter and is available on the College's website:

College of Opticians v. Sanger

Committee Update:

There are no committee updates.

Submitted by:

Derick Summers, Chair, RO

Daniël Jansen, Manager, Professional Conduct

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

May 2021 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
Omar Farouk, Chair, Public Member	Kevin Cloutier, Vice Chair, RO
Elsa Lee, RO	Ingrid Koenig, RO
Amber Fournier, RO	Margaret Osborne, RO
Samir Modhera, RO	Peggy Judge, PM
Behzad Safati, RO	Stephen Kinsella, PM

Number of meetings since February 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 2021	
Full Committee Meetings (in-person)	0
Full Committee Meetings (teleconference/webinar)	1
Total Full Committee Meetings	1
Panel Meetings (in-person)	0
Panel Meetings (teleconference/webinar)	9
Total Panel Meetings	9

Number of Meetings Since Last Board Meeting	
Total Full Committee Meetings	0
Panel Meetings (in-person)	0
Panel Meetings (teleconference/webinar)	8
Total Panel Meetings	8

Report:

Three out of the nine panel meetings held in 2021 involved the Panels administering five oral cautions to registrants. Oral cautions are one of the dispositions available to the ICRC when considering complaints or reports.

Submitted by:

Omar Farouk, Chair, Public Member

Daniël Jansen, Manager, Professional Conduct

ICRC Statistical Report 2021
(Statistics accurate as of May 5, 2021)

Complaints Dispositions	# of Files
Inquiries:	
Total number of complaint inquiries received in 2021	36
Covid-19 related inquiries	9
Inquiries that became a formal complaint in 2021	3
Formal Complaints:	
Complaint files opened in 2021	5
Cases brought forward from 2020 (not including 2 from 2019)	14
Frivolous and vexatious	-
Complaints disposed of in 2021:	5
No further action	3
Written advice/Recommendations	1
Oral caution	1
Specified Continuing Education or Remediation Program (SCERP)	1
Undertaking	-
Referral to Discipline Committee	-
Withdrawn by Registrar	-
Open complaints pending further investigation	17
Open complaints awaiting decisions	11

Quality Assurance Committee (QAC) and Registrar's Reports Dispositions	# of Files
Registrar's Reports:	
Registrar's Reports referred to ICRC in 2021	1
Registrar's Reports brought forward from 2020 (not including 2 from 2018, and 4 from 2019)	5
QAC Reports:	
QAC Reports referred to ICRC in 2021	0
QAC Reports brought forward from 2020 (not including 1 from 2018, 3 from 2019)	5
Reports disposed of in 2021:	1
No further action	1
Written advice	-
Oral caution	-
Specified Continuing Education and Remediation Program (SCERP)	-
Undertaking	-
Referral to Discipline Committee	-
Open Registrar's Reports pending further consideration	12
Open Registrar's Reports awaiting decisions	1

HPARB Reviews	# of Files
HPARB reviews requested in 2021	0
HPARB matters carried over from 2020 (not including 1 from 2019)	2
HPARB reviews pending	3
HPARB matters disposed of in 2021	0
Committee decisions confirmed	0
Committee decisions returned for further investigation and reconsideration	0

Unauthorized Practice	# of Files
Total number of UPC inquiries in 2021	1
UPC files carried over from 2020 (not including 10 from 2019)	11
Inquiry abandoned – not enough information / outside jurisdiction / not unauthorized practice	-
Inquiry pending – further information needed	-
Inquiry – formal file	-
Open files pending further investigation	22

REGISTRATION COMMITTEE REPORT

May 2021 Report to Board of Directors

Committee Members:

Derick Summers, Chair, RO
Tonya Nahmabin, Vice-Chair, RO
Bryan Todd, RO
Dorina Reiz, RO
Robert Quinn, RO
Behzad Safati, RO
Omar Farouk, Public Member
Peggy Judge, Public Member

Number of meetings since December Board Meeting:

- April 19, 2021

Report:

National Optical Sciences Examination Statistics

The Committee was provided with quantitative information on candidate performance on the National Optical Sciences Examinations for the past six years. The Committee requested additional information and will continue to review the statistics going forward.

File Review

The Committee reviewed one initial reinstatement (over three years) application, and five PLAR assessment results.

Submitted by:

Derick Summers, Chair, RO
Anna Jeremian, Manager, Registration

QUALITY ASSURANCE COMMITTEE REPORT

May 2021 Committee Report to the Board of Directors

Committee Members:

Bryan Todd, RO, Chair, Elected Member
Diana Bristow, Vice Chair, Public Member
Mike Smart, RO, Elected Member
Henry Wiersema, Public Member
Tonya Nahmabin, RO, Appointed Member
Margaret Osborne, RO, Appointed Member
Dennis O'Hagan, RO, Appointed Member
Derick Summers, RO, Appointed Member

Number of meetings to date: 3

- March 17 -Deferral Requests
- March 25
- April 26

Report:

Competency Review and Evaluation (CRE) Process

By April 5, 2021, those registrants randomly selected to participate in the CRE process were required to:

- notify the College their 2020 Professional Portfolio was ready for review in the Registrant Portal or;
- submit the components of their 2020 Professional Portfolio not completed in the Registrant Portal to the College

Of the 702 registrants that were randomly selected, 35 were subsequently notified that they were not required to submit their 2020 Professional Portfolio as they had not renewed their registration with the College. These registrants have been advised that should they renew their registration; they will be required to submit their 2020 Professional Portfolio at that time. An additional 14 registrants were removed from the random selection as they did not meet the criteria of random selection.

College staff sent outstanding portfolio reminders to 76 registrants on April 12, 2021.

To date, 576 of the expected 643 portfolios expected been received at the College:

- 549 were submitted by the due date.
- 27 were submitted after the due date.
- 13 were provided an extension.

Deferrals

A panel of the QAC reviewed and granted 10 requests for deferrals. A deferral is a delay in engaging in the CRE process until the next selection. As such, the registrants granted a deferral will be automatically requested to participate in the next CRE process.

CRE Non-Compliance

Registrants who have not submitted their professional portfolio will be sent a registered letter regarding their non-compliance in May. This is 2 months earlier than in previous years.

Professional Portfolio Assessments

Portfolio assessments are ahead of schedule with 309 portfolios assessed as of April 28th. The results thus far are:

- 229 registrants received immediate exit letters.
- 77 registrants had form problems (missing certificates, missing information; of these 58 have since been resolved)
- 3 registrants were assessed to be deficient in accredited hours.

Remote Peer and Practice Assessments

Leanne Worsfold, Director of Test Development and Quality Programs at iComp Consulting, provided the Committee with the results of a review that was carried out to assess the effectiveness of the remote peer and practice assessment (PPA) tools used by the College in 2020/2021.

The remote PPA was comprised of three tools:

- Behavioural Based Interview
- Infection Control Exercise
- Documentation Exercise

Overall, the Behavioural Based Interview and the Infection Control Exercise were found to be reliable and effective at assessing practice performance. On review, however, the Documentation Exercise did not appear to provide a reliable indicator of practice performance.

Accordingly, the committee will be investigating ways to improve the Documentation Exercise going forward.

In addition, the committee took steps to ensure that the concerns identified with respect to the Documentation Exercise would be taken into account when assessing the results of PPAs.

Peer and Practice Assessments

The committee reviewed 12 Peer and Practice Assessment reports. Of the assessments:

- 7 files were closed with no further action.
- 1 file was closed with recommendations.
- 4 files are pending further review.

Peer and Practice Assessment Non-Compliance

The QAC referred allegations of professional misconduct with respect to 5 registrants to the Inquiries, Complaints and Reports Committee. The allegations relate to non-compliance with the QA Program.

Accreditation Policy

The QAC developed new guidelines with respect to Criteria 7 of the Accreditation Policy to provide additional information about how this criteria will be interpreted with respect to the use of logos and brand names in CE presentation material. In addition, the accreditation checklist was streamlined for clarity by removing reference to material being “generic in nature” and to sources’ sponsorship.

Accreditation Requests

As of April 30th, there have been 47 accreditation requests received. Of these:

- 33 were standard requests.
- 12 were fast track requests.
- 2 were rush requests.

A panel of the QAC reviewed these requests and, the results were as follows:

- 39 activities were accredited.
- 5 activities were not accredited.
- 3 activities are being reviewed.

Jurisprudence Chapter 5

Chapter 5 of the College’s Jurisprudence Module (Diversity) was reviewed and approved as an accredited professional growth activity. Registrants will be able to complete this module once every 3 years.

Submitted by:

Bryan Todd, RO, Chair, Elected Member
Peggy Dreyer, Manager, Professional Practice