

COMMITTEE REPORT

October 2018 Executive Committee Report to Council

Committee Members:

David Milne, Chair, Public Member
Bryan Todd, Vice Chair, RO, Elected Member
Peggy Dreyer, RO, Elected Member
Trudy Mauth, Public Member
Ingrid Koenig, RO, Elected Member

Number of meetings since May Council:

- July 16, 2018 (teleconference)
- September 17, 2018 (in-person)

Report:

Quality Assurance Policy - Accreditation Policy for Continuing Education (CE) Providers

At its July 17 meeting, the Executive Committee approved amendments to the Quality Assurance Committee's [Accreditation Policy for CE Providers Policy](#). Normally, policy amendments would be submitted to Council for consideration and approval, however, a concern was raised about the content of a specific CE course, such that the Quality Assurance Committee identified the need to amend its policy on the accreditation of CE courses immediately to ensure that all new CE accreditation requests meet the standards set out in the policy. The policy changes include guidelines on professional and anti-discriminatory expectations¹, which includes CE materials and as well as the content delivered by the speaker.² Changes were also made with respect to accreditation monitoring and a formalized process for addressing serious concerns with CE providers was added to the policy.³ Under sections 12(1) and 12(2) of the [Health Professions Procedural Code](#) under the RHPA, the Executive Committee has the authority, in between Council meetings, to approve policies that require an immediate decision.⁴ When the Executive Committee acts on this authority, it is required to report this information to Council.⁵

¹ Refer to the "Professional and Anti-Discriminatory Expectations" section of the policy (page 3).

² Refer to bullets 3) and 9) under the "Accreditation Process and Criteria" section of the policy (pages 1-2).

³ Refer to the Ongoing Accreditation Monitoring section of the policy (pages 4-5)

⁴ Section 12(1) states: "Between the meetings of the Council, the Executive Committee has all the powers of the Council 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."

⁵ Section 12(2) states: "If the Executive Committee exercises a power of the Council under subsection (1), it shall report on its actions to the Council at the Council's next meeting."

Quality Assurance Program

At its July 17 meeting, the Executive Committee explored the notion of whether to connect registrant non-compliance with the CE requirements with registration renewal. The Executive Committee directed the QA Committee to further explore the matter at its next policy meeting.

Policy on Honoraria and Expenses for Council and Committee

The Executive Committee considered the honoraria policy and is recommending a number of changes to the existing policy. The draft policy is before Council for its consideration and approval at its October 1, meeting.

By-law Article 6: Elected Council Members

The Committee considered Council election voter eligibility under section 6.6 of the existing by-laws. The Committee resolved to recommend an amendment to this section of the by-law to improve its clarity. This recommendation will be presented to Council for its consideration at its October 1, meeting.

Appointed Member Policy

The Executive Committee considered the current complement of appointed non-council committee members and decided to recommend to Council that it expand the current roster of appointed members. The Committee is also requesting that the Council approve a new special category of appointed members who solely participate in discipline hearings. The recommendation is before Council for its consideration and approval at its October 1, meeting.

The Committee also determined that interviews for Appointed Members will take place at the November 2018 Executive Committee meeting. Recommended appointments will be submitted to Council for consideration and approval at its December 2018 meeting.

Ontario Opticians Association (OOA) Meeting

At its September meeting, the Executive Committee met with the Executive team of the OOA. The Executive Committee and the OOA both shared information about its respective program and initiatives updates. Among the topics discussed were: the College's Quality Assurance program, the upcoming Council elections and the new electronic voting format, the new member portal for College registrants, and upcoming CE events. The Executive Committee and the OOA also discussed areas where the two groups could collaborate in the public interest and areas where the OOA could provide feedback to Council and Committee policies and programs.

Quebec Optometry Standards of Practice

The Executive Committee reviewed a newly developed Guideline on the Practice of Optometry via Telepractice developed by the Quebec Order of Optometrists. The Guideline will be reviewed further by the Standards of Practice Committee.

Submitted by:
David Milne, Chair, Public Member

DRAFT



INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

Report to Council – October 1, 2018

Panel Information and Composition:

The Inquiries, Complaints and Reports Committee (ICRC) reviews concerns made to the College regarding its members. This includes formal complaints, Registrar investigations arising from information that is brought to the attention of the College or referrals from the Quality Assurance Committee. Each complaint and report is thoroughly and objectively investigated. A Risk Assessment Framework is used to guide panels of the ICRC in the decision-making process when determining outcomes of complaints and reports. The Committee considers concerns relating to a member's conduct, competency and capacity to determine if a referral to the Discipline Committee is needed, or if other recommendations are more suitable. The ICRC also investigates and, where appropriate, refers matters to the Executive Committee to commence prosecution in matters involving unauthorized practice.

The Committee's business is conducted by 2 panels:

Panel 1	Panel 2
Omar Farouk (Chair)	Bryan Todd (Vice Chair)
Ingrid Koenig	John Battaglia
Ed Viveiros	Neda Mohammadzadeh
Gord White	Robert Quinn
Margaret Osborne	Jacalyn Cop-Rasmussen
Daniela Celi	

In order to work efficiently, and taking into consideration convenience and cost-effectiveness, the panels attempt to alternate in-person meetings and conference calls whenever possible. The panels also conduct some of their work via email.

The Committee held an in-person group meeting on July 9, 2018. Both Panel 1 and 2 held in-person meetings in conjunction with the group meeting. In addition, between June and

September, there was one additional in-person panel meeting and five panel meetings held via teleconference or webinar.

There are currently 16 open complaints and 14 Registrar's Reports that are under investigation. The College has 5 SCERPs to monitor and 7 oral cautions pending. The matters in this report involve concerns pertaining to unprofessional behaviour, unsatisfactory eyeglasses, performing eye exams, record keeping, insurance/OHIP fraud, and failing to complete QAC portfolios.

Submitted by:

Omar Farouk Public Member, Committee Chair
Amy Stein, Manager, Professional Conduct

ICRC Statistical Report 2018
(Statistics accurate as of May 28, 2018)

*Inquiries, Complaints and Reports Committee Report
May 28, 2018*

Complaints Disposition	# of Files
Inquiries:	
Total number of complaint inquiries received in 2018	24
Inquiries that became a formal complaint	1
Inquiries abandoned	8
Inquiries outside jurisdiction	4
General Inquiries	11
Formal Complaints:	
Complaint files opened in 2018	3
Cases brought forward from 2017	10
Frivolous and vexatious	-
Closed with no further action	3
Closed with oral caution	1
Closed with an oral caution & specified continuing education and remediation	1
Closed with a referral to discipline	-
Complaints disposed of in 2018	5
Open complaints pending further investigation	8

Registrar's Reports Disposition	# of Files
Inquiries:	
Total number of registrar's report inquiries received in 2018	4
Inquiries that became a registrar's report	2
Registrar's Reports:	
Registrar's Reports referred to ICRC in 2018	3
Cases brought forward from 2017 (8 new QAC files in November)	13
Closed with a referral to discipline	2
Closed with no further action	2
Closed with written advice	-
Closed with oral caution issued	-
Closed with oral caution issued and a specified continuing education and remediation program	4
Closed with an undertaking	-
Reports disposed of in 2018	8
Open Registrar's Reports pending further investigation	8

HPARB Appeals	# of Files
Total number of HPARB appeals in 2018	6
HPARB review pending (files opened in 2017)	4

*Inquiries, Complaints and Reports Committee Report
May 28, 2018*

HPARB review pending (files opened in 2018)	2
Committee decisions confirmed	4
Committee decisions returned for further investigation and reconsideration	-

Unauthorized Practice	# of Files
Total number of UPC inquiries in 2018	4
Inquiry abandoned – not enough information / outside jurisdiction / not unauthorized practice	4
Inquiry pending – further information needed	-
Inquiry – formal file	-
UPC files opened in 2018	0
Open files pending further investigation	4

DISCIPLINE COMMITTEE REPORT
October 2018 Committee Report to Council

Discipline Committee Members

Elected Members

Ingrid Koenig RO
Balbir Dhillon RO
Peggy Dreyer RO
Neda Mohammadzadeh RO
Rob Vezina RO
Bryan Todd RO
Ed Viveiros RO
Dorina Reiz RO

Public Members

Trudy Mauth, Chair
David Milne
Joseph Richards
Gord White
Jacalyn Cop-Rasmussen
Omar Farouk

Appointed Non-Council Members

Derick Summers RO VC
John Battaglia RO
Margaret Osborne RO
Daniela Celi RO
Robert Quinn RO
Bezad Safati RO
Dennis Tse RO

Hearings:

The Discipline Committee has held four discipline hearings this year to date. One matter was contested and held over the course of four days. Three matters proceeded on an uncontested basis.

Copies of the Committee's decisions in the following matters are available on the College's website:

College of Opticians v. Teclé
College of Opticians v. Atyeo
College of Opticians v. Garnhum

A copy of the decision in the following matter will be available on the College's website for 90 days pursuant to subsection 23(11.1) of the *Health Professions Procedural Code*:

College of Opticians v. Sanger

One additional matter has been referred to discipline this year. The matter is currently awaiting a hearing date.

Submitted by:

Trudy Mauth, Chair
Amy Stein, Manager, Professional Conduct

FITNESS TO PRACTISE COMMITTEE REPORT

October 2018 Report to Council

Committee Members:

Robert Vezina, Chair, RO
John Battaglia, Vice Chair, RO
Bryan Todd, RO
Ed Viveiros, RO
Jacalyn Cop-Rasmussen, Public Member
Omar Farouk, Public Member
Behzad Safati, RO
Derick Summers, RO
Balbir Dhillon, RO
David Milne, Public Member
Robert Quinn, RO

Number of meetings since May Council:

The Fitness to Practise Committee holds hearings to determine if a member is incapacitated to such a degree that this prevents him/her from practicing safely and effectively. The Committee meets on an as-needed basis, should allegations of incapacity of a member be referred.

There have been no referrals made to the Fitness to Practise Committee.

Submitted by:

Robert Vezina, Chair, RO
Laura Briard, Manager, Professional Programs

PATIENT RELATIONS COMMITTEE REPORT

October 2018 Committee Report to Council

Patient Relations Committee Members:

David Milne, Chair, Public Member
Dennis Tse, Vice Chair, Appointed Member
Dorina Reiz, Elected Member
Daniela Celi, Appointed Member
Joseph Richards, Public Member
Behzad Safati, Appointed Member

Number of Meetings:

The committee met once via teleconference since the last Council meeting.

Report:

The Committee reviewed the Communications Chapter of the Jurisprudence module in detail along with the questions. The proposed edits have been made to the Jurisprudence module.

In addition, the Committee reviewed options for the Advanced Training for Discipline Committee Members for Sexual Abuse cases. The training will involve presentations by The Barbra Schlifer clinic and Gillian Hnatiw.

Submitted by:

David Milne, Chair, Public Member
Carolyn Robertson, Manager, Communications and Executive Office

REGISTRATION COMMITTEE REPORT

October 2018 Report to Council

Committee Members:

Robert Vezina, Chair, RO
John Battaglia, Vice Chair, RO
Bryan Todd, RO
Ed Viveiros, RO
Jacalyn Cop-Rasmussen, Public Member
Omar Farouk, Public Member
Behzad Safati, RO
Derick Summers, RO

Registration Appeal Panel:

Balbir Dhillon, RO
David Milne, Public Member
Robert Quinn, RO

Number of meetings since May Council:

- July 6, 2018 (teleconference)
- August 20, 2018

A statistical report of the number of applications received and reviewed by the Registration Committee is attached.

Report:

Examination and Upgrading Policy

At its meeting on August 20, 2018, the Registration Committee considered historical data of all upgrading applicants to determine whether a course-based upgrading proposal was more beneficial than a tutor-based upgrading proposal. The Committee determined that there was not enough data to make a decision and have made no changes to the current Examination and Upgrading policy. The Committee has agreed to review the Examination and Upgrading policy, with updated data, on an annual basis.

Prior Learning Assessment and Recognition Training

At its meeting on August 20, 2018, all members of the Registration Committee underwent additional training on the Prior Learning Assessment and Recognition (PLAR) assessment process. A section of the Competency Gap Analysis (CGA) component of the assessment was reviewed and completed by all Committee members. In addition, a mock in-person interview was conducted to provide all Committee members with a realistic example of what the in-person interview component of the PLAR assessment entails. All professional members of the Committee agreed to complete the CGA and then observe an in-person interview with an actual PLAR candidate within the next few months in order to have a better understanding of the assessment process PLAR candidates experience.

In-Person Interviews

Since May, 2018, five in-person interview days were conducted for PLAR and upgrading applicants.

Submitted by:

Robert Vezina, Chair, RO
Laura Briard, Manager, Professional Programs

DRAFT

Statistical Report (since May 2018)

PLAR Applicants	
Initial Inquiries Received	22
<ul style="list-style-type: none"> • Internationally educated applicants 	19
<ul style="list-style-type: none"> • Applicants from non-accredited Canadian programs 	3
<ul style="list-style-type: none"> • No formal education 	0
New Applications Received	8
<ul style="list-style-type: none"> • Internationally educated applicants 	5
<ul style="list-style-type: none"> • Applicants from non-accredited Canadian programs 	3
<ul style="list-style-type: none"> • Applicants that completed international training & non-accredited Canadian education 	0
<ul style="list-style-type: none"> • No formal education 	0
Applications Refused	0
Applications Completed (Decision and Reasons Issued)	4
<ul style="list-style-type: none"> • Applicants required to complete bridging 	3
<ul style="list-style-type: none"> • Applicants permitted to write the National Examinations 	1

Active Applications in Process	20
<ul style="list-style-type: none"> • Awaiting further information from applicant 	5
<ul style="list-style-type: none"> • Initial Registration Committee review pending 	2
<ul style="list-style-type: none"> • Applicants currently scheduled for the CGA/eligible to write CGA 	8
<ul style="list-style-type: none"> • CGA completed, interview pending 	1
<ul style="list-style-type: none"> • Final Registration Committee review pending 	4

Other Applications for Registration	
New Applications for Reinstatement (3+ yrs.) Received	3
Active Applications in Process	3
<ul style="list-style-type: none"> • Initial Registration Committee review pending 	0
<ul style="list-style-type: none"> • Applications considered by Registration Committee 	3
<ul style="list-style-type: none"> • Applications approved to reinstate, with/without continuing education 	1
<ul style="list-style-type: none"> • Competency assessments required 	2
Internal Registration Appeals	0
HPARB Appeals	0
Upgrading Programs Considered by Committee	0
Previously Approved Upgrading Programs Completed	0
Requests for Extension of Registration Committee Decision	0

GOVERNANCE COMMITTEE REPORT

October 2018 Committee Report to Council

Governance Committee Members:

Gord White, Chair, Public Member
Ingrid Koenig, Vice-Chair, Elected Member
Peggy Dreyer, Elected Member
Neda Mohammadzadeh, Elected Member
Omar Farouk, Public Member
Margaret Osborne, Appointed Member

Number of Meetings:

The Governance Committee held two in-person meetings since the last Council Meeting.

Report:

The committee reviewed the following policies:

- 2-07 Asset Protection Policy
- 2-08 Vendor Relations policy
- 2-09 Investment Policy
- 4 3-04 Accountability of the Registrar, CEO Policy
- 3-06 Registrar, CEO Position Description Policy
- 3-05 Registrar, CEO Job Products Policy
- 2-70 Intellectual Property Policy

The committee recommended that the above listed policies come to Council for approval at the October 1, 2018 Council meeting.

The committee continues to work with Ms. Karen Fryday-Field of Meridian Edge Consulting and has made significant progress in the overhaul of the governance manual. The Governance Committee is also developing a policy that articulates the Council's strategic objectives.

In addition, at the last meeting, the committee reviewed the changes to the Council Self Evaluation tool and is working on a separate evaluation tool for Appointed Members.

Submitted by:

Gord White, Chair, Public Member
Carolyn Robertson, Manager, Communications and Executive Office

EXAMINATIONS REPORT

October 2018 Report to Council

The National Contact Lens and Eyeglass Examinations are a non-exemptible requirement for a certificate of registration as a Registered Optician in Ontario.

The College, in connection with the National Association of Optician Regulators (NACOR), conducts two national examination sessions in Ontario each year. All eligible examination candidates can complete the examinations anywhere in Canada.

Spring Examinations:

The spring session of examinations was held at Georgian College in Barrie on May 4-6, 2018 with the following number of candidates:

Candidate Type	Total	Ontario Applicants ¹	Out-of-Province Applicants ²
Contact Lens	79	76	3
Eyeglass	55	53	2

¹Ontario applicants intend to seek registration in Ontario

²Out-of-province applicants intend to seek registration in other Canadian provinces

Of the Ontario contact lens candidates, 77% were successful at the exam. Of the Ontario eyeglass candidates, 88% were successful at the exam.

Fall Examinations:

The fall session of examinations will take place November 2-4, 2018, and will be held at Georgian College in Barrie.

Submitted by:

Peggy Dreyer, Chief Examiner for Ontario
Laura Briard, Manager, Professional Programs

QUALITY ASSURANCE COMMITTEE REPORT

October 2018 Report to Council

Committee Members:

Peggy Dreyer, Chair, RO
Joseph Richards, Vice Chair, Public Member
Dorina Reiz, RO
David Milne, Public Member
Derick Summers, RO
Dennis Tse, RO

Number of meetings since May Council:

- July 10, 2018 (teleconference)
- September 25, 2018

Report:

2018 Competency Review and Evaluation Process Update

In February 2018, 546 members received notice that they had been randomly selected to participate in this year's Competency Review and Evaluation (CRE) process. Half of these members were selected to participate in Stream One and half of these members were selected to participate in Stream Two:

- Stream One – 273 members were required to submit their 2017 Professional Portfolio to the College by April 5, 2018.
- Stream Two – 273 members were required to submit their 2017 Professional Portfolio to the College by April 5, 2018 and participate in the Multi-Source Feedback (MSF) process by April 25, 2018.

In addition, 72 members were re-selected to participate in this year's CRE process. These members participated in last year's CRE process and were re-selected to participate in this year's CRE process due to a deficiency in their original portfolio submission.

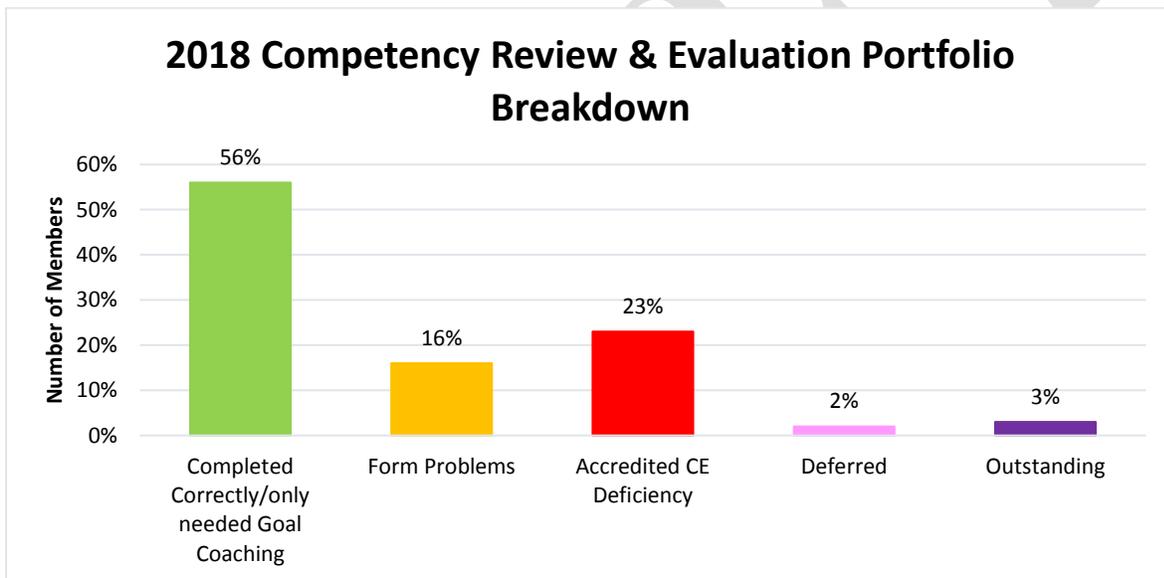
On July 13, 2018, QA department staff completed the assessment of all Professional Portfolios and MSF results received. All members who successfully completed the CRE process were notified on July 27, 2018. All members who had deficient Professional Portfolios or MSF results were notified of their outstanding requirements by August 31, 2018.

All members with Professional Portfolios or MSF results which have been flagged as deficient by QA department staff will be considered by the QA Committee. To date, the Committee has considered 67 deficient files. It is anticipated that the Committee will review the remaining 74 deficient submissions by the end of October.

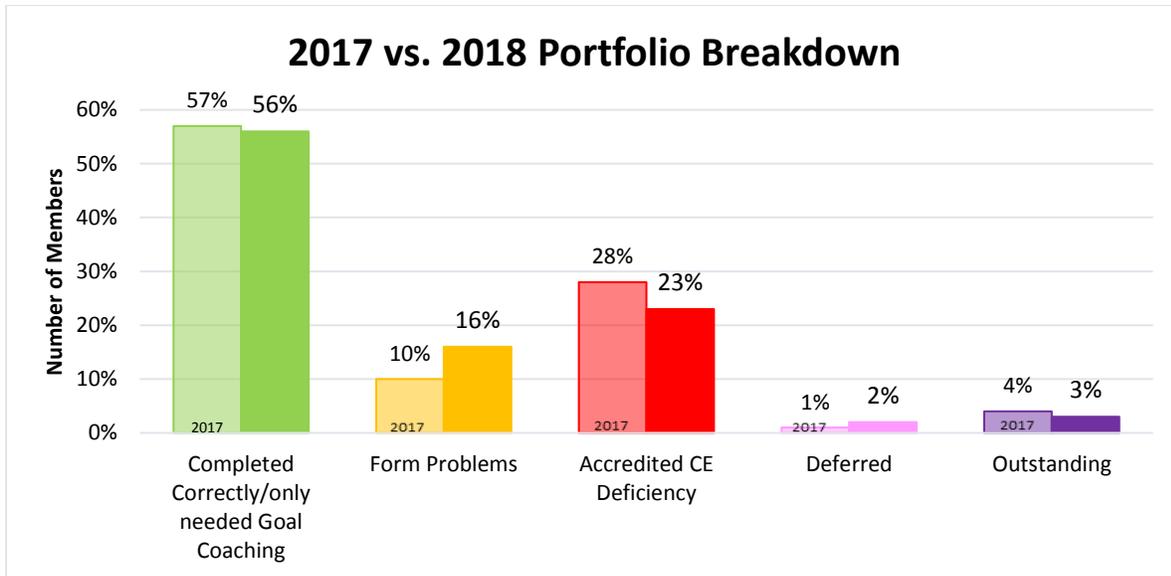
2018 Competency Review & Evaluation Statistics

The charts below provide information about member outcomes with respect to Professional Portfolio submission.

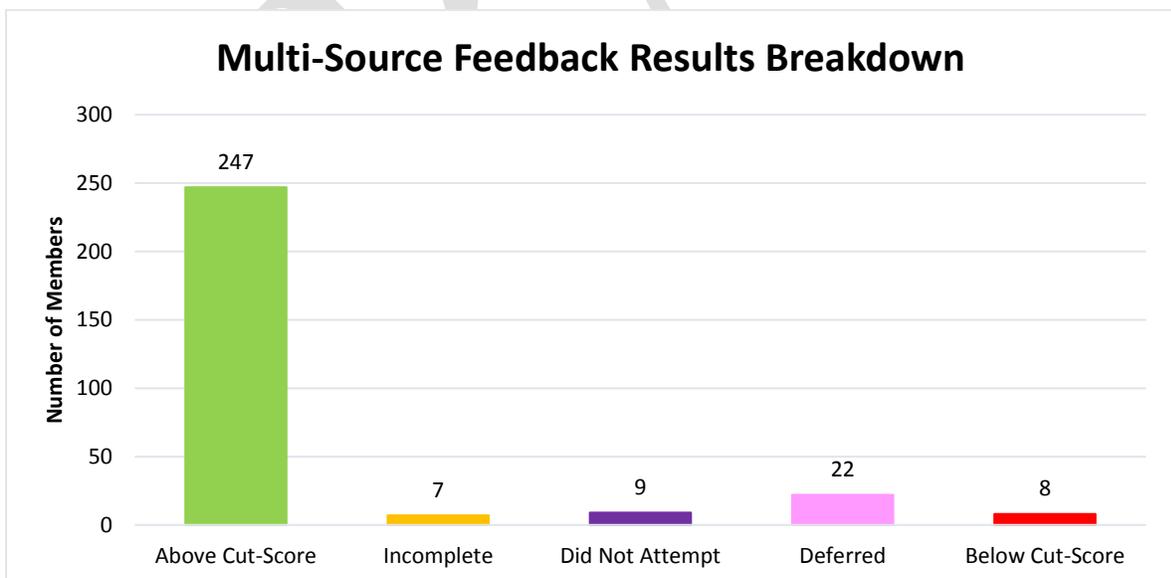
Members who have “completed correctly/only needed goal coaching” successfully completed the Professional Portfolio requirements. Members with “form problems” did not complete the Professional Portfolio forms correctly or did not complete the required number of self-directed activities and required staff assistance to complete their Professional Portfolio requirements. Members with “accredited CE deficiency” did not complete the accredited continuing education requirements.



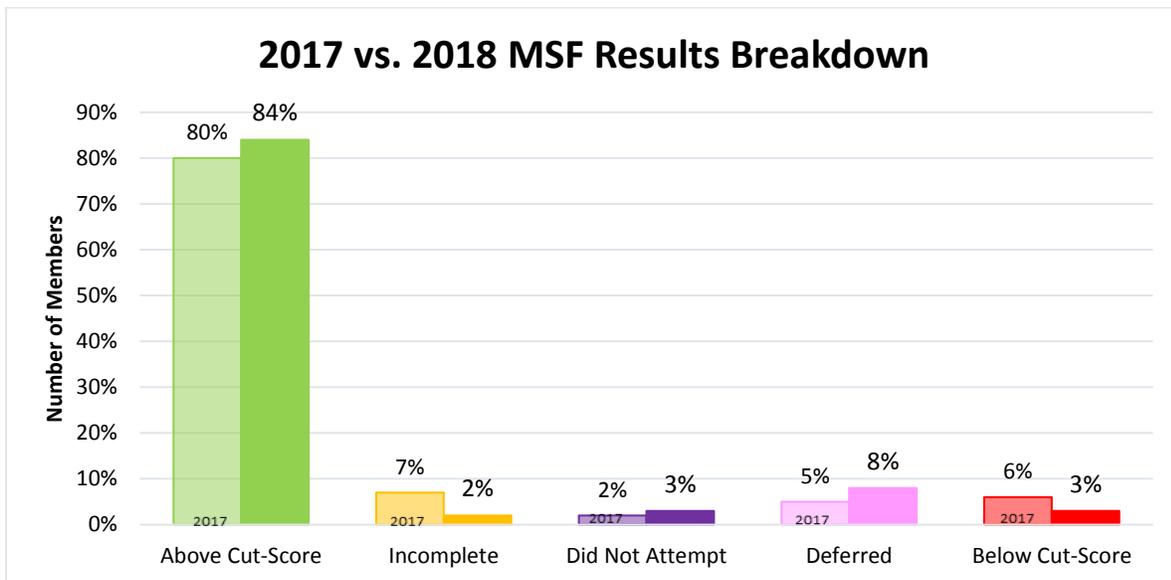
Overall, Professional Portfolio submissions for the 2018 CRE were very similar to those submitted for the 2017 CRE:



The charts below provide information about member outcomes with respect to the Multi-Source Feedback (MSF) process. Members who are “above cut-score” have successfully completed the MSF requirements. Members who are “incomplete” or “did not attempt” failed to complete the MSF requirements. Members who are “below cut-score” had MSF results which were below the established threshold and have been referred for a peer and practice assessment.



Overall, MSF results for the 2018 CRE were very similar to those for the 2017 CRE:



Quality Assurance Program Fees

The new Quality Assurance Program Fees came into effect January 1, 2018, and have been implemented for the first time during this year's Competency Review and Evaluation process.

On August 1, 2018, 141 members were notified that they would be charged the deficient portfolio fee of \$100 (plus HST) and 20 members were notified that they would be charged the late portfolio fee of \$50 (plus HST). The majority of these members paid their fees on time. On September 18, 2018, 31 members were sent a follow-up letter regarding their outstanding QA program fees, and will be sent notice of their license suspension on October 1, 2018 if they fail to pay the outstanding fee by this date.

It is anticipated that a handful of members will be charged the peer and practice assessment fee of \$850 (plus HST) by the end of this year.

Continuing Education Accreditation Policy

After receiving information from a member of the College that inappropriate presentation material as well as alleged inappropriate presenter behavior was displayed at an event offering accredited activities, the Committee reviewed its Continuing Education Accreditation Policy ("Accreditation Policy"). At its meeting on July 10, 2018, the Committee reviewed and revised its Accreditation Policy to ensure: a) material that is unprofessional and/or discriminatory is not included in accredited activities; b) accredited activities are regularly audited to ensure that presenters are professional at all time during presentations; and c) where unprofessional and/or discriminatory content is identified, there is a clear mechanism in place to suspend accreditation until the offending content is removed. A revised Accreditation Policy was provided to the Executive Committee on July 16, 2018 to ensure that changes

to the Accreditation Policy could be communicated to all continuing education providers well in advance of the fall season of continuing education events.

Suspending Members due to QA Non-Compliance

At its meeting on September 25, 2018, the Committee reviewed legal advice on the topic of suspending members who are non-compliant with the Quality Assurance Program at annual renewal. Currently, non-compliant members are referred to the Inquiries, Complaints and Reports Committee with allegations of professional misconduct and are ordered to complete a Peer and Practice Assessment. In addition, non-compliant members are charged a Quality Assurance Program Fee. In accordance with section 11(1)(b) of the College's *Registration Regulation*, the failure to pay a fee required by the College will result in notice of suspension of a certificate of registration. The Committee noted that using this current process of charging Quality Assurance Program fees, non-compliant members are notified of suspension faster than if the Quality Assurance Committee was to suspend a non-compliant member's certificate of registration at annual renewal. As such, the Committee has determined that it will not be suspending non-compliant members at annual renewal, but has agreed to review the topic again in September, 2019 in order to implement any changes beginning in January, 2020.

Quality Assurance Program Review

At its meeting on September 25, 2018, the Committee reviewed the current Quality Assurance Program. The Committee noted that the current program was developed and implemented in 2014 and that by the end of 2019, all members will have been selected to participate in the Competency Review and Evaluation (CRE) process at least once. Over the next year, the Committee will review the Quality Assurance Program and CRE requirements in order to implement any changes beginning in January, 2020. The Committee will seek feedback from members who have completed the CRE process, explore updating the current Multi-Source Feedback tool, and explore hosting accredited continuing education hours on the newly revised Member Portal to improve overall member engagement in the program.

Quality Assurance Outreach

The QA Committee Chair recently attended a continuing education event in Ottawa and answered questions about the QA program and the new member portal. QA department staff and the QA Committee Chair plan to attend two upcoming continuing education events in October to answer questions from members about the QA program.

Accreditations

The QA Committee continues to work via email to review accreditation requests submitted by continuing education providers. Since May 2018, the QA Committee has accredited 28 continuing education courses.

Peer and Practice Assessments

Since May 2018, the College's peer assessors have completed three peer and practice assessments.

Submitted by:

Peggy Dreyer, Chair, RO
Laura Briard, Manager, Professional Programs

DRAFT