



# **CDHO COUNCIL MEETING**

Friday, September 16, 2022

9:00 a.m. – 12:00 p.m.

**Location:**

Virtual Meeting

## CDHO COUNCIL MEETING AGENDA

**Friday, September 16, 2022**

9:00 a.m. – 12:00 p.m.

Agenda Item	Topic and Relevant Council Policy	Action	Lead if not Chair	Verbal Report/ Attachment	Est. Time
<b>1.0</b>	<b>CALL TO ORDER</b>				<b>9:00</b>
1.1	Roll Call	Council Attendance	T. Strawn	<b>TAB 1</b>	<b>9:00</b>
1.2	Opening Remarks	Council Is Addressed	T. Strawn	--	<b>9:02</b>
1.3	Council Policy Manual Update	For Information	T. Strawn	<b>TAB 2</b>	<b>9:08</b>
1.4	Council Code of Conduct	For Information	T. Strawn	<b>TAB 3</b>	<b>9:09</b>
<b>2.0</b>	<b>APPROVAL OF AGENDA</b>				<b>9:10</b>
2.1	Review and Approval of Agenda	For Approval	T. Strawn	<b>TAB 4</b>	<b>9:10</b>
<b>3.0</b>	<b>DECLARATIONS OF POTENTIAL CONFLICT OF INTEREST</b>				<b>9:12</b>
3.1	Declarations of Conflict of Interest	Declare Conflicts	T. Strawn	<b>TAB 5</b>	<b>9:12</b>
<b>4.0</b>	<b>CONSENT AGENDA</b>				<b>9:15</b>
	<b>CONSENT AGENDA ITEMS (4.1. – 4.1.1)</b> A consent agenda is a bundle of items that is voted on, without discussion, as a package. It differentiates between routine matters not needing explanation and more complex issues needing examination. The Chair will ask if anyone wishes to remove an item from the consent agenda. Any Council member may request an item be removed so it can be discussed. To test whether an item should be included in the consent agenda, ask: <ol style="list-style-type: none"> <li>1. Is this item self-explanatory and uncontroversial? Or does it contain an issue that warrants board discussion?</li> <li>2. Is this item for information only? Or is it needed for another meeting agenda issue?</li> </ol>				
4.1	<b><u>Council Meeting Minutes</u></b>				
4.1.1	Meeting Minutes – June 10, 2022	For Information	T. Strawn	<b>TAB 6</b>	<b>9:15</b>
<b>5.</b>	<b>INFORMATION REQUESTED BY THE BOARD</b>				
5.1	<b><u>Statutory Committee Reports</u></b>				
5.1.1	Executive Committee	For Information	T. Strawn	<b>TAB 7</b>	<b>9:15</b>
5.1.2	Discipline Committee	For Information	J. White	<b>TAB 7</b>	<b>9:15</b>
5.1.3	Fitness to Practise Committee	For Information	TBD	<b>TAB 7</b>	<b>9:15</b>

5.1.4	Inquiries, Complaints and Reports Committee	For Information	M. Atkinson	<b>TAB 7</b>	<b>9:15</b>
5.1.5	Patient Relations Committee	For Information	M. Leuprecht	<b>TAB 7</b>	<b>9:15</b>
5.1.6	Quality Assurance Committee	For Information	T. Strawn	<b>TAB 7</b>	<b>9:15</b>
5.1.7	Registration Committee	For Information	C. Lotz	<b>TAB 7</b>	<b>9:15</b>
5.2	<b><u>Non-Statutory Committee Reports</u></b>				
5.2.1	Examinations Committee	For Information	L. Voytek	<b>TAB 7</b>	<b>9:15</b>
5.3	<b><u>Incidental Briefing Reports</u></b>				
5.3.1	Council President's Report	For Information	T. Strawn	<b>TAB 8</b>	<b>9:15</b>
5.3.2	Registrar's Administrative Report	For Information	G. Pettifer	<b>TAB 8</b>	<b>9:20</b>
<b>6.0</b>	<b>OWNERSHIP LINKAGE</b>				
6.1	Status of Ownership Linkage Activities <i>The Chair will provide a verbal update to Council on the committee's activities.</i>	For Information	C. Grbac	--	<b>9:30</b>
<b>7.0</b>	<b>GOVERNANCE PROCESS ITEMS</b>				
7.1	2023 Council Meeting Dates <i>Council will be asked to approve the 2023 meeting dates.</i>	For Approval	T. Strawn	<b>TAB 9</b>	<b>9:40</b>
7.2	Amendment to GP 7 Council Stipend and Expenses <i>Council will be asked to approve the proposed amendments providing the President fair, effective, and transparent compensation for work done in the President's role.</i>	For Approval	V. Pereira	<b>TAB 10</b>	<b>9:50</b>
7.3	Policy Content Review: GP 7 Council and Committee Stipend and Expenses <i>Council will be asked to consider amendments to the policy to bring the daily per diem rate and accommodation rate up to date for 2022 and consider remuneration for monitoring.</i>	For Approval	T. Strawn	<b>TAB 11</b>	<b>10:00</b>
	<b>BREAK</b>				
					<b>10:30</b>

7.4	Amendment to GP-10 Governance Succession Planning Council will be asked to approve the proposed amendments involving Council competencies and Council elections.	For Approval	V. Pereira	<b>TAB 12</b>	<b>10:45</b>
7.5	Governance Committee Update <i>The Chair will provide a verbal update to Council on the committee's activities.</i>	For Information	M. Atkinson	--	<b>11:00</b>
7.6	Policy Content Review: GP-3 Council Planning and Cycle Agenda	For Approval	T. Strawn	<b>TAB 13</b>	<b>11:10</b>
7.7	Policy Content Review: GP 6.4 Conduct Committee Terms of Reference	For Consideration	T. Strawn	<b>TAB 14</b>	<b>11:20</b>
<b>8.0</b>	<b>ENDS ITEMS FOR CONSIDERATION</b>				<b>11:25</b>
	There are no agenda items at this meeting				<b>11:25</b>
<b>9.0</b>	<b>COUNCIL REGISTRAR DELEGATION ITEMS FOR CONSIDERATION</b>				<b>11:25</b>
	There are no agenda items for this meeting.				<b>11:25</b>
<b>10.0</b>	<b>EXECUTIVE LIMITATIONS ITEMS FOR CONSIDERATION</b>				<b>11:25</b>
10.1	Policy Content Review: EL 3	For Approval	T. Strawn	<b>TAB 15</b>	<b>11:25</b>
10.2	Policy Content Review: EL 2, EL 4, EL 6 and EL 9	For Consideration	T. Strawn	<b>TAB 16</b>	<b>11:30</b>
<b>11.0</b>	<b>REQUIRED APPROVALS AGENDA</b>				<b>11:40</b>
	There are no agenda items at this meeting.				
<b>12.0</b>	<b>MONITORING BOARD PERFORMANCE</b>				<b>11:40</b>
12.1	GP-3 Council Planning and Cycle Agenda	For Approval	T. Strawn	<b>TAB 17</b>	<b>11:40</b>
12.2	GP- 6.4 Conduct Committee Terms of Reference	For Approval	T. Strawn	<b>TAB 17</b>	<b>11:45</b>
<b>13.0</b>	<b>BOARD EDUCATION</b>				<b>11:45</b>
13.1	There are no agenda items for this meeting.				<b>11:45</b>
<b>14.0</b>	<b>MONITORING CEO PERFORMANCE</b>				<b>11:45</b>
	There are no agenda items for this meeting.				<b>11:45</b>
<b>15.0</b>	<b>SELF-EVALUATION OF GOVERNANCE PROCESS</b>				<b>11:45</b>
15.1	Council Meeting Evaluation	For Evaluation and Discussion	T. Strawn	--	<b>11:45</b>
<b>16.0</b>	<b>NEXT MEETING DATE — December 2, 2022</b>				<b>12:00</b>
<b>17.0</b>	<b>ADJOURNMENT</b>			<b>TAB 18</b>	<b>12:00</b>

## Roll Call

### Council Meeting

Friday, September 16, 2022

*Virtual Meeting*

<input type="checkbox"/>	Michelle Atkinson	Elected
<input type="checkbox"/>	Loree Beniuk	Public
<input type="checkbox"/>	Erin Betts	Public
<input type="checkbox"/>	Maheen Cassim	Elected
<input type="checkbox"/>	Anne-Marie Conaghan	Academic
<input type="checkbox"/>	Jennifer Cooper	Academic
<input type="checkbox"/>	Pella Giabanis	Public
<input type="checkbox"/>	Carla Grbac	Elected
<input type="checkbox"/>	Alex Greco	Public
<input type="checkbox"/>	Farzana Hussain	Elected
<input type="checkbox"/>	Ehizele Martin Iyamabo	Public
<input type="checkbox"/>	Meghan Leuprecht	Public
<input type="checkbox"/>	Caroline Lotz	Elected
<input type="checkbox"/>	Angelica Palantzas	Public
<input type="checkbox"/>	Vanessa Pereira	Elected
<input type="checkbox"/>	Upneet (Sasha) Sidhu	Public
<input type="checkbox"/>	Terri Strawn	Elected
<input type="checkbox"/>	Margaret Wade	Public
<input type="checkbox"/>	Jacqueline White	Elected
<input type="checkbox"/>	Mary Yeomans	Elected
/20 total members		

## BRIEFING NOTE

**To:** Council

**From:** Chair

**Date:** September 16, 2022

**Topic:** Council Policy Manual Update

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The following policies were updated at the June 10, 2022 Council Meeting and the Policy Manual has been updated.

E 1-4 Global Ends  
GP 6.2 Ownership Linkage Committee Terms of Reference  
GP 6.6 Governance Committee Terms of Reference  
GP 11 Council Linkage with Ownership

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## COUNCIL CODE OF CONDUCT

### 4. GLOBAL GOVERNANCE PROCESS POLICY

The purpose of the Council, on behalf of the public of Ontario, is to see to it that the College of Dental Hygienists of Ontario achieves appropriate results for the appropriate people at an appropriate cost, as specified in Council's Ends policies, while avoiding unacceptable actions and situations.

#### GP-8 Code of Conduct

Council Members shall conduct themselves in accordance with the bylaws.

#### Excerpt from Bylaw 5

##### 3.7 Council and Non-Council Committee Member Code of Conduct

- (1) This entire Code of Conduct, from sections 3.7 through to and including section 3.9, shall apply to Council Members and with necessary modifications, to Non-Council Committee Members. Any reference to Council Members shall be interpreted as also applying to Non-Council Committee Members as the circumstances may require.

##### Fiduciary Duties

- (2) Council Members shall act in the best interests of the College and of the public of Ontario. They shall perform their duties in accordance with the Act, the bylaw and any policies of the College.
- (3) Council Members shall conduct themselves in a manner which is ethical, business-like and lawful and upholds the reputation of the CDHO. This includes proper use of authority and appropriate decorum when acting as Council Members. Council Members shall treat one another and staff members with respect, co-operation and a willingness to deal openly on all matters.
- (4) Council Members must have loyalty to the College that supersedes any loyalties to staff, other organizations or any personal interest as a consumer.
- (5) Council Members are accountable to exercise the powers and discharge the duties of their office honestly and in good faith. Members shall exercise the degree of care, diligence and skill that a reasonably prudent person would exercise in comparable circumstances.
- (6) Council Members will not attempt to exercise individual authority over the organization.
- (7) When interacting with staff, Council Members must recognize that individual Council Members have no authority to instruct or evaluate employees, and no authority to insert themselves into employee operations.

- (8) Council Members shall recognize that the President or designate is the only person authorized to speak to the media on behalf of the Council. Council Members shall not presume to speak for the Council when interacting with the public. Council Members shall only report actual Council policy decisions when interacting with the public.
- (9) Council Members shall be familiar with the incorporating documents, relevant legislation and regulations, bylaws, and policies of the organization as well as the rules of procedure and proper conduct of a meeting so that any decision of the Council may be made in an efficient, knowledgeable and expeditious fashion.
- (10) Council Members will be properly prepared for, and actively participate in Council deliberation.
- (11) Council Members will support the legitimacy and authority of Council decisions, regardless of the member's personal position on the issue.
- (12) Council Members shall regularly take part in educational activities that will assist them in carrying out their responsibilities.
- (13) Council Members are expected to attend all meetings and to be punctual.
- (14) Council Members who are unable to attend a meeting shall inform the President and the Registrar/CEO of their expected absence and the reason for it.
- (15) Council Members shall be prepared **to serve on** committees and complete individual tasks as assigned by the Council from time to time.

#### **Conflict of Interest**

- (16) The terms "conflict of interest" and "appearance of bias" are often used interchangeably. The term "conflict of interest" generally applies to policy or administrative decisions while the term "appearance of bias" generally applies to an adjudicative type of decision. For the purpose of this bylaw, they mean the same thing.
- (17) Council Members must not carry out their duties when they are in a conflict of interest. A conflict of interest exists where a reasonable person could conclude that the personal interests of the individual or a related person or company could improperly influence the individual's judgment in performing his or her duties as a Council Member.
- (18) There must be no self-dealing or any conduct of private business or personal services between any Council Member and the organization, except as procedurally controlled to assure openness, competitive opportunity, and equal access to otherwise "inside" information. Council Members will annually disclose their involvements with other organizations, with vendors, or any associations that might be or might reasonably be seen as being a conflict.
- (19) Council Members may not accept an employment or administrative position with the College, including that of the Registrar, unless one year has passed since he or she was a Council Member or Non-Council Member.



- (20) Council Members will not use their Council or committee position to obtain employment in the organization for themselves, family members, or close associates. Should a Council Member wish to apply for employment, he or she must resign from the Council and not apply before a date twelve (12) months from the effective date of their resignation. Family members are spouse, life partner, child, parent, in-law, live-in grandparent or sibling.

***Examples of Conflicts of Interest***

- (21) Without limiting the usual and ordinary meaning of “conflict of interest” or “appearance of bias”, some examples of activities or circumstances that would usually constitute a conflict of interest or an appearance of bias for a Council or Non-Council Member include the following:
- (a) Where the decision could confer a more than trivial financial or other benefit or burden to the Council Member or their close relative or friend or affiliated entity;
  - (b) Where the Council Member or their close relative or friend or affiliated entity seeks or accepts more than a nominal gift from a person or entity connected to or affected by the College or its mandate or a gift which could reasonably be viewed as influencing the Council or Committee Member;
  - (c) Where the Council Member or their close relative or friend or affiliated entity uses the Council Member’s position with the College to advance their personal or financial interests;
  - (d) Where the Council Member takes action or counsels another to take action against the College, the reputation of the College or its staff;
  - (e) Where the Council Member is running for national or provincial public office and where the Council or Committee Member has not taken a leave of absence from all Council and committee positions at the College;
  - (f) Where the Council Member agrees to give or gives a presentation on an issue related to the College’s role or activities without prior College approval;
  - (g) Where the Council Member agrees to participate or participates in a committee, working group, task force or other group related to the College’s role or activities without prior College approval;
  - (h) Where the Council Member, who is not the official spokesperson for the College, is in communication with government officials, politicians or the media on any matter related to the College without prior College approval;
  - (i) Where the Council Member publishes, including a posting on social media, a statement that could impair the public’s confidence in the College or compromise the policy or public image of the College or the Council Member’s ability to make transparent, objective, impartial and fair decisions that are in the public interest;
  - (j) Where the Council Member appears to give preferential access to a person or entity that advances the interests of dental hygienists or that has policy-making responsibilities for dental hygienists or that oversees the regulation of dental hygienists without prior College approval;

- (k) Where the Council Member advises or assists anyone in their dealings with the College, including acting as a peer mentor unless the Council Member has prior College approval;
- (l) Where the Council Member demonstrates a closed mind on an issue that is coming up, or is likely to come up, before the College;
- (m) Where the Council Member is the subject of an inquiry or investigation by the College, the police or another authority that impairs the ability of the Council Member to participate in a decision or to continue to serve in his or her position or has the potential to jeopardize public trust in the member, the Council, the Committee or the College;
- (n) Where the Council Member applies for employment with the College without first resigning all Council and committee positions;
- (o) Where the Council Member has a connection with a person or issue to be determined that would reasonably be seen by those who know all of the circumstances as incompatible with his or her responsibilities as an impartial decision-maker; and
- (p) Where the Council Member or their close relative or friend or affiliated entity uses materials developed for the College for commercial purposes without prior College approval.

***Preventing and Addressing Conflicts of Interest***

- (22) Council Members shall avoid, where feasible, situations where they would have conflicting duties of confidentiality and disclosure between their role with the College and with another person or entity.
- (23) Where a Council Member is in doubt as to whether he or she has a conflict of interest, the Council Member shall consult with an appropriate person such as the Chair of the affected committee, the President, the Registrar, or independent legal counsel in a hearing.
- (24) If a Council Member believes that he or she has a conflict of interest in a particular matter, he or she shall,
  - (a) prior to any consideration of the matter, declare to the Council or the committee that he or she has a conflict of interest that prevents him or her from participating;
  - (b) not take part in the discussion of or vote on any question in respect of the matter;
  - (c) leave the room for the portion of the meeting relating to the matter even where the meeting is open to the public; and
  - (d) not attempt in any way to influence the voting or do anything which might be reasonably perceived as an attempt to influence other Council or Committee Members or the decision relating to that matter.
- (25) Where a Council Member declares a conflict of interest, that fact shall be recorded in the minutes of that meeting of Council or the committee.

- (26) Where a Council Member believes that another Council Member has a conflict of interest that has not been declared despite any appropriate informal communications with the other Council Member, the first Council Member shall advise an appropriate person such as the Chair of the affected committee, the President, the Registrar, or independent legal counsel in hearing matters. The person who is suggested as having a conflict of interest is entitled to address the matter before any decision is made regarding the issue under paragraph 28 of this Article.
- (27) Where a Council Member believes that another Council or Committee Member has already acted in a conflict of interest or is in an ongoing conflict of interest, he or she shall advise in writing an appropriate person such as the Chair of the affected committee, the President, the Registrar or independent legal counsel in hearing matters. The person who is suggested as having a conflict of interest is entitled to make submissions about the matter before any decision is made regarding the issue under paragraph 28 of this Article.
- (28) Where the Council or a Committee concludes that one of its members has a conflict of interest that has not been declared, it can, after allowing the affected member to make submissions regarding the issue, direct that the Council or Committee Member not participate in the discussion or decision, leave the room for that portion of the meeting and not try to or otherwise exert influence in the matter.

#### **Declaration of Conflict of Interest by Council and Non-Council Members**

- (29) Every Council Member shall declare, verbally, and where the Council deems it appropriate, in writing, if he or she has an actual or perceived conflict of interest pertaining to his or her duties as a Council or Committee Member. This declaration will take place at the first Council or Committee meeting at which he or she becomes aware of an actual or perceived conflict of interest and subsequently at the first Council meeting of each year.

#### **Confidentiality**

- (30) The purpose of this part of the bylaw is to provide helpful explanations as how to comply with the confidentiality provisions of the Code of Conduct. These provisions in no way limit the full extent of the duties set out in the Code of Conduct.
- (31) Council Members shall treat all information learned in the course of their duties, whether or not the information is related to an individual, as confidential and shall not disclose it unless a clearly identified exception applies.
- (32) Council Members shall review at least annually and when there are changes, the provisions in the *Regulated Health Professions Act* (especially section 36) and the Health Professions Procedural Code (especially sections 83 and 83.1), relating to confidentiality.
- (33) Council Members shall generally leave to College staff the disclosure of information under the legal exceptions to the duty of confidentiality. However, in appropriate circumstances, Council Members may disclose information directly when performing their duties, such as in rendering a decision and reasons on behalf of a committee, when appropriately discussing information that is public under the legislation and when consulting with their own legal counsel.

- (34) Even for communications within the College, Council Members shall only obtain or disclose information on a need-to-know basis.
- (35) Council Members will not share or post information on social media that compromises the organization or the Council's policy or public image.
- (36) Council Members shall take reasonable measures to safeguard College information including the safe management of paper documents and portable electronic devices and avoiding the use of unsecure electronic forms of communication or the use of social media for such communications.
- (37) Where a Council Member believes that there has been a breach of confidentiality by a Council or Committee Member, whether intentional or unintentional, he or she shall immediately advise the Registrar in writing providing all of the details. The Registrar shall notify the President as soon as possible of any breach of confidentiality by a Council or Committee Member.
- (38) Council Members will sign annually their agreement to abide by the Code of Conduct in its entirety.

### **3.8 Disqualification of Council and Non-Council Members**

- (1) The Council shall disqualify a Registrant from sitting on Council or a Committee or serving as a Non-Council Member if the Registrant:
  - (a) is found by a panel of the Discipline Committee to have committed an act of professional misconduct or to be incompetent;
  - (b) is found by a panel of the Fitness to Practise Committee to be incapacitated;
  - (c) subject to the discretion of Council to excuse the absence, fails, without reasonable cause, to attend two consecutive meetings of the Council or fails, for any reason, to attend three consecutive meetings of the Council;
  - (d) subject to the discretion of Council to excuse the absence, fails to attend two consecutive meetings of a Committee without reasonable cause or fails, for any reason, to attend three consecutive meetings of a Committee of which she or he is a member;
  - (e) fails, without reasonable cause, to attend a hearing of a panel for which he or she has been selected;
  - (f) in the case of an Elected Member, ceases to qualify for election in the electoral district for which the Elected Member was Elected;
  - (g) in the case of an Academic Member, ceases to be Faculty;
  - (h) breaches section 36 of the Act which, in the opinion of Council, is of such a nature that warrants disqualification;
  - (i) ceases to be a Registrant;
  - (j) fails, in the opinion of the Council, to discharge properly or honestly any office to which he or she has been Elected, Selected or Appointed;

- (k) has breached the Code of Conduct or conflict of interest provisions of this bylaw which, in the opinion of the Conduct Committee or its delegate, is of such a nature that warrants disqualification;
  - (l) becomes a member of a Council of any other College regulated under the Act;
  - (m) is found guilty of a criminal offence which, in the opinion of Council, is of such a nature that warrants disqualification;
  - (n) has not complied, within 30 days, or as otherwise specified, of being given notice of the failure, the College's requirements to pay fees, or the College's requirements for the provision of information;
  - (o) has a term, limit or condition imposed by the Quality Assurance Committee, the Discipline Committee or the Fitness to Practise Committee on his or her certificate of registration;
  - (p) is or becomes an officer, director or employee of a Professional Advocacy Association (however, a Council Member shall not be disqualified by reason of serving on an association or organization to which he or she has been appointed by the Council as a representative of the College);
  - (q) initiates, joins, continues or materially contributes to a legal proceeding against the College of any Committee or representatives of the College;
  - (r) has been directed by the Inquiries, Complaints and Reports Committee to complete a specified continuing education or remediation program and/or to appear before a panel of the Committee to be cautioned in the six years prior to the term of such Member, or during the term of such Member; or
  - (s) has given an undertaking to the College in response to a request by a panel of the Inquiries, Complaints and Reports Committee related to a complaint or for a matter in which an investigator is appointed under clause 75(1)(a) or clause 75(1)(b) of the Code, in the six years prior to the term of such Member, or during the term of such Member.
- (2) Jurisdiction for disqualifying a Public Member falls to the Lieutenant Governor in Council. The President on behalf of Council shall report to the Public Appointments Secretariat if a Public Member:
- (a) subject to the discretion of Council to excuse the absence, fails, without reasonable cause, to attend two consecutive regular meetings of the Council or fails, for any reason, to attend three consecutive meetings of the Council;
  - (b) subject to the discretion of Council to excuse the absence, fails, without reasonable cause, to attend two consecutive regular meetings of a Committee of which she or he is a member or fails, for any reason, to attend three consecutive meetings of a Committee of which she or he is a member;
  - (c) fails, without reasonable cause, to attend a hearing of a panel for which she or he has been selected;

- (d) breaches section 36 of the Act which, in the opinion of Council, is of such a nature that warrants disqualification;
  - (e) has breached the Code of Conduct or conflict of interest provisions of this bylaw which, in the opinion of the Conduct Committee or its delegate, is of such a nature that warrants disqualification;
  - (f) ceases to be a resident of Ontario;
  - (g) fails, in the opinion of the Council, to discharge properly or honestly any office to which he or she has been appointed;
  - (h) becomes a member of a Council of any other College regulated under the Act;
  - (i) is found guilty of a criminal offence which, in the opinion of Council, is of such a nature that warrants disqualification;
  - (j) is or becomes an officer, director or employee of a Professional Advocacy Association (however, a Public Member shall not be reported to the Public Appointments Secretariat by reason of serving on an association or organization to which he or she has been appointed by the Council as a representative of the College); or
  - (k) initiates, joins, continues or materially contributes to a legal proceeding against the College or any Committee or representatives of the College.
- (3) A person who has served as a Council or Non-Council Member may not become an employee of the College until one year has passed following the expiration of their term of office.
- (4) A Council Member who has been disqualified from sitting on the Council ceases to be a member of the Council and ceases to be a member of any Committees, including any panel, to which he or she had been Appointed.

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Michelle Atkinson on Friday, 1/21/2022

**1. Please type your full name:**

Michelle Atkinson

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have potential conflicts of interest in my role as member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Full time faculty member - Algonquin College

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Loree Beniuk on Wednesday, 1/26/2022

**1. Please type your full name:**

Loree Beniuk

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**



## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Erin Betts on Friday, 1/21/2022

**1. Please type your full name:**

erin betts

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Maheen Cassim on Wednesday, 2/16/2022

**1. Please type your full name:**

Maheen Cassim

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Part time faculty member at Confederation College, Thunder Bay.

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Anne-Marie Conaghan on Sunday, 1/23/2022

**1. Please type your full name:**

Anne-Marie Conaghan

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have potential conflicts of interest in my role as member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Program Coordinator, Georgian College. Item-writer, National Dental Hygiene Certification Board. Site-surveyor, Commission on Dental Accreditation of Canada.

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Jennifer Cooper on Sunday, 1/23/2022

**1. Please type your full name:**

Jennifer Cooper

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have potential conflicts of interest in my role as member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Faculty at Fanshawe College, CDAC Surveyor (Dental Assisting Programs - Out of Province)

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Pella Giabanis on Tuesday, 1/25/2022

**1. Please type your full name:**

Pella Giabanis

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Carla Grbac on Sunday, 1/23/2022

**1. Please type your full name:**

Carla Grbac

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Alessandro Greco on Friday, 2/4/2022

**1. Please type your full name:**

Alex Greco

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Farzana Hussain on Sunday, 1/23/2022

**1. Please type your full name:**

Farzana Hussain

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**



## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Ehizele Martin Iyamabo on Saturday, 1/22/2022

**1. Please type your full name:**

Martin Iyamabo

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Meghan Leuprecht on Sunday, 1/30/2022

**1. Please type your full name:**

Meghan Leuprecht

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have potential conflicts of interest in my role as member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Member of OCSWSSW

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Caroline Lotz on Friday, 1/21/2022

1. Please type your full name:

Caroline Lotz

2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.

Yes

3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.

Yes

4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.

Yes

5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:

that I currently have no conflicts of interest in my role as a member of Council.

6. I am declaring the following potential conflicts of interest in my role as a member of Council.

Educator - Faculty of DH Program - Fanshawe College

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Angelica Palantzas on Monday, 1/31/2022

**1. Please type your full name:**

Angelica Palantzas

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

N/A

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Vanessa Pereira on Friday, 1/21/2022

**1. Please type your full name:**

Vanessa Pereira

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Council Member Declaration

I Upneet Singh Sidhu (please print name):

- ☒ Have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.
- ☒ I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.
- ☒ I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.
- ☒ Having reviewed the examples of conflict of interest [sec. 3.7(21)], I am declaring that I currently have no conflicts of interest in my role as a member of Council.

OR

- ☐ I am declaring the following potential conflicts of interest in my role as a member of Council.

Organization, Associate, Vendor, Business, Person(s)	Description of Relationship, Role or Involvement

U. Singh  
Signature

3 / 15 / 2022  
Date

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Terri Strawn on Friday, 1/21/2022

**1. Please type your full name:**

Terri Strawn

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have potential conflicts of interest in my role as member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Durham College - partial load faculty, Algonquin College - Part time faculty (depending on the semester), CDAC - periodic site surveyor, NDHCB - item writer, exam committee member

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Margaret Wade on Saturday, 1/22/2022

**1. Please type your full name:**

Margaret Wade

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**



## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Jacqueline White on Saturday, 1/22/2022

**1. Please type your full name:**

Jacqueline White

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have no conflicts of interest in my role as a member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

## Conflict of Interest Declaration 2022

### Annual Conflict of Interest Declaration

Mary Yeomans on Tuesday, 2/8/2022

**1. Please type your full name:**

Mary Yeomans

**2. I have read sections 3.7 to 3.9 of the CDHO Bylaw 5 and I understand that I am accountable as a member of Council to conduct myself in compliance with these bylaws.**

Yes

**3. I understand that I am obligated to declare a conflict of interest with my Council responsibilities, if and when one arises.**

Yes

**4. I also understand that I am obligated to report instances of another Council member's conflict of interest with Council responsibilities of which I become aware.**

Yes

**5. Having reviewed the examples of conflict of interest [sec 3.7(21), I am declaring:**

that I currently have potential conflicts of interest in my role as member of Council.

**6. I am declaring the following potential conflicts of interest in my role as a member of Council.**

Cambrian College educator - items/students in relation to Cambrian College will be a conflict

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## COUNCIL MEETING MINUTES

Virtual Zoom Meeting

Livestreamed to the CDHO YouTube Channel

**Friday, June 10, 2022**

9:00 a.m. – 4:00 p.m.

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### COUNCIL MEMBERS PRESENT:

Terri Strawn, Professional Member, President  
Michelle Atkinson, Professional Member  
Erin Betts, Public Member (9:00 a.m.–12:00 p.m.)  
Maheen Cassim, Professional Member  
Anne-Marie Conaghan, Academic Member  
Jennifer Cooper, Academic Member  
Pella Giabanis, Public Member  
Carla Grbac, Professional Member  
Alessandro Greco, Public Member (9:00 a.m.–12:00 p.m.)  
Farzana Hussain, Professional Member  
Ehizele Martin Iyamabo, Public Member  
Meghan Leuprecht, Public Member  
Caroline Lotz, Professional Member  
Angelica Palantzas, Public Member (9:00 a.m.–12:00 p.m.)  
Vanessa Pereira, Professional Member, Vice-President  
Sasha Sidhu, Public Member  
Margaret Wade, Public Member (9:00 a.m.–12:00 p.m.)  
Jacqueline White, Professional Member  
Mary Yeomans, Professional Member

### REGRETS:

Loree Beniuk, Public Member

### ADMINISTRATION:

Dr. Glenn Pettifer, Registrar and CEO  
Veronica Douglas, Executive Administrator

### GUESTS:

Julie Maciura, SML, CDHO Legal Counsel  
Blair MacKenzie, Hilborn LLP, (10:45 a.m.–  
11:30 p.m.)  
Deanna Williams, Dundee Consulting Group  
Ltd. (1:30 p.m.–3:20 p.m.)

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## 1.0 CALL TO ORDER

### 1.1 Roll Call

The Chair, Terri Strawn, called the meeting to order at 9:04 a.m.

### 1.2 Opening Remarks

Terri Strawn welcomed Council and guests to the June Council meeting. It was acknowledged that the CDHO office is located on the traditional territory of many

nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat people and is now home to many diverse First Nations, Inuit and Métis people. It was also acknowledged that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

The President advised that Council attended a workshop on June 9, 2022, that focused on inclusive policy development and reconciliation and indigenous inclusion within health care regulatory bodies.

### **1.3 Council Policy Manual Update**

The Chair reported that there have been no policy updates to the Policy Manual.

### **1.4 Council Code of Conduct**

Council was reminded of the Code of Conduct.

## **2.0 APPROVAL OF AGENDA**

### **2.1 Review and Approval of Agenda**

Items 7.1–7.3 were moved to 10:45 a.m. Items 5.1–5.3.2 are for information only.

**MOTION:**      **THAT** Council moves to approve the June 10, 2022 Council meeting agenda as amended.

Moved:            Carla Grbac  
Seconded:        Michelle Atkinson  
VOTE:

**CARRIED**

## **3.0 DECLARATIONS OF POTENTIAL CONFLICTS OF INTEREST**

### **3.1 Declarations of Conflict of Interest**

Terri Strawn declared a conflict with Item 7.4 President's Compensation.

## **4.0 CONSENT AGENDA (4.1-4.1.1)**

**MOTION:**      **THAT** Council moves to approve the consent agenda.

Moved:            Anne-Marie Conaghan  
Seconded:        Maheen Cassim  
VOTE:

**CARRIED**

## 5.0 OWNERSHIP LINKAGE

## 5.1 Status of Ownership Linkage Activities

Carla Grbac updated Council on the Ownership Linkage Committee activities. The Ownership Linkage Committee has not met since the last Council meeting.

## 6.0 ENDS ITEMS FOR DECISION

There were no agenda items for this meeting.

## 7.0 GOVERNANCE PROCESS ITEMS FOR DECISION

## 7.1 2021 Draft Audited Financial Statements

Blair MacKenzie from Hilborn LLP presented the 2021 draft audited financial statements to Council.

**MOTION:** **THAT** Council moves to accept the 2021 draft audited financial statements as presented by Hilborn LLP.

Moved: Carla Grbac  
Seconded: Maheen Cassim  
VOTE:

**CARRIED**

## 7.2 Recommendations from Hilborn LLP

Blair Mackenzie from Hilborn LLP provided recommendations for Council to consider regarding their financial statements.

### 7.3 Appointment of Auditor for 2022

**MOTION:** **WHEREAS** Council has never completed a comprehensive assessment of the external auditor;

**WHEREAS** the firm of Hillborn, LPP has been appointed the auditor for the last 7 years;

**THEREFORE BE IT RESOLVED** that a comprehensive assessment of the external auditor be completed in 2023 for the 2022 audit.

Moved: Carla Grbac  
Seconded: Anne-Marie Conaghan  
VOTE:

**CARRIED**

## 7.4 President's Compensation

Terri Strawn declared a conflict of interest and was not present for the discussion or the vote.

**MOTION:** **THAT** Council direct staff to draft changes to GP 7 Council and Committee Stipend and Expenses policy to include remuneration of informal meetings at an hourly rate of \$72 for the President, to be adopted at the September Council meeting, and reviewed next in December 2023.

Moved: Jacqueline White

Seconded: Carla Grbac

VOTE:

**CARRIED**

## 7.5 CPMF Committee Update

Michelle Atkinson provided a verbal update to Council that the CPMF Committee had successfully carried out its responsibilities in accordance with Governance Process Policy 6.6, including completion of the CPMF report for 2021 and advised that a motion would be brought forward to dissolve the CPMF Committee. The committee will be replaced with a Governance Committee that will be tasked with the CPMF report and other governance work as needed.

## 7.6 Dissolution of the CPMF Committee

**MOTION:** **WHEREAS** Council formed a CPMF Committee on December 4, 2020, to support Council in its determining and assembling data for the CPMF report required by the Ontario Ministry of Health;

**WHEREAS** Council appointed Michelle Atkinson (professional member), Pauline Leroux (professional member), and Joshua Hollenberg (public member) to serve as the CPMF Committee;

**WHEREAS** Angelica Palantzas replaced Joshua Hollenberg when his appointment as a public member ended, and Terri Strawn replaced Pauline Leroux when her appointment as professional member ended;

**WHEREAS** the Committee carried out its responsibilities in accordance with Governance Process Policy 6.6, including completion of the CPMF report for years 2020 and 2021;

**WHEREAS** the Committee will be replaced by a Governance Committee;

**THEREFORE, BE IT RESOLVED THAT** the CPMF Committee be dissolved with the appreciation of Council to committee members for their work.

Moved: Caroline Lotz  
Seconded: Meghan Leuprecht  
VOTE:

**CARRIED**

**7.7 Policy Amendment: Governance Committee Terms of Reference**

**MOTION:** **THAT** the Council approve Governance Process Policy 6.6 Governance Committee Terms of Reference as presented in Appendix A.

Moved: Vanessa Pereira  
Seconded: Jacqueline White  
VOTE:

**CARRIED**

**7.8 Appointment of Governance Committee**

**MOTION:** **WHEREAS** the Council of the College of Dental Hygienists of Ontario agreed to the formation of a Governance Committee at the June 10, 2022 Council meeting; and

**WHEREAS** the composition of the Governance Committee will be two Council Members who are Professional Members and one Council Member who is a Public Member;

**THEREFORE, BE IT RESOLVED THAT**

1. Michelle Atkinson;
2. Terri Strawn; and
3. Angelica Palantzas

be appointed as members of the Governance Committee.

Moved: Carla Grbac  
Seconded: Mary Yeomans  
VOTE:

**CARRIED**

**7.9 Bylaw 5 Revision Proposal: Stakeholder Feedback**

**MOTION:** **WHEREAS** the Health Professions Procedural Code of the *Regulated Health Professions Act* provides Council with the authority to make Bylaws relating to the administrative affairs

of the College and, in matters regarding Registrant registration fees, also requires that any proposed amendments be circulated to all Registrants and stakeholders for a consultation period of not less than 60 days; and

**WHEREAS** Council has received the information it requires to make a decision regarding the proposed amendments to the College's Registration fee amounts and operational matters related to the deadline date for Registration renewal; and

**WHEREAS** Council values stakeholder input and has given due consideration to the feedback on the proposed amendments that was submitted by stakeholders during the requisite 60-day consultation period;

**THEREFORE, BE IT RESOLVED THAT** the proposed amendment to Bylaw No. 5 Article 16.2 (1) and (2) be approved.

Moved: Mary Yeomans

Seconded: Michelle Atkinson

VOTE:

**CARRIED**

**7.10 Bylaw 5 Revision Proposal: Members of the Public Appointments Working Groups**

**MOTION:** **WHEREAS** the Health Professions Procedural Code of the *Regulated Health Professions Act* provides Council with the authority to make Bylaws relating to the administrative affairs of the College; and

**WHEREAS** Council has received the information it requires to make a decision regarding the proposed amendments to the College's Bylaw No. 5 concerning the discretionary appointment of members of the public to College Committees or Working Groups;

**THEREFORE, BE IT RESOLVED THAT** the proposed amendments to Bylaw No. 5 be approved.

Moved: Margaret Wade

Seconded: Meghan Leuprecht

VOTE:

**CARRIED**



### **7.11 Policy Content Review: GP 6.2 Ownership Linkage Committee Terms of Reference**

The Council reviewed the Governance Process policy 6.2 Ownership Linkage Committee Terms of Reference and made minor changes.

**MOTION:** **THAT** Council approve the modifications to the GP 6.2 Ownership Linkage Committee Terms of Reference as discussed.

Moved: Carla Grbac  
Seconded: Meghan Leuprecht  
VOTE:

**CARRIED**

## 7.12 Policy Content Review: GP 11 Council Linkage with Ownership

The Council reviewed the Governance Process policy 11 Council Linkage with Ownership and made minor changes.

**MOTION:** **THAT** Council approve the modifications to the GP 11 Council Linkage with Ownership as discussed.

Moved: Michelle Atkinson  
Seconded: Carla Grbac  
VOTE:

**CARRIED**

## 8.0 ENDS ITEMS FOR CONSIDERATION

### **8.1 Policy Content Review: Global End, E (1-4)**

The Council reviewed all of the Global Ends policies together and made changes to the format of the policy by removing bullet points.

**MOTION:** **THAT** Council approve the modifications to the Global End Policy as discussed.

Moved: Carla Grbac  
Seconded: Maheen Cassim  
VOTE:

**CARRIED**

## 9.0 COUNCIL REGISTRAR DELEGATION ITEMS FOR CONSIDERATION

There were no agenda items for this meeting.

## 10.0 EXECUTIVE LIMITATIONS ITEMS FOR CONSIDERATION

There were no agenda items for this meeting.

## 11.0 REQUIRED APPROVALS AGENDA

There were no agenda items for this meeting.

## 12.0 MONITORING BOARD PERFORMANCE

## 12.1 GP 6.2 Ownership Linkage Committee Terms of Reference

**MOTION :** **THAT** Council has assessed the monitoring report for Governance Process 6.2 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

Moved: Jacqueline White

Seconded: Pella Giabanis

VOTE: **CARRIED**

Abstained: Sasha Sidhu

## 12.2 GP 11 Council Linkage with Ownership

**MOTION :** **THAT** Council has assessed the monitoring report for Governance Process 6.11 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

Moved: Mary Yeomans

Seconded: Jennifer Cooper

VOTE: **CARRIED**

Abstained: Sasha Sidhu

## 13.0 BOARD EDUCATION

### 13.1 Third-Party Assessment

Deanna Williams presented to Council and facilitated a discussion on assessing Council effectiveness. She discussed accountable and effective regulatory governance models, why evaluating performance is important and how to do it, and best practices.

### 13.2 Governance Effectiveness Proposal

The CPMF requires the College to have developed and implemented a framework to evaluate the effectiveness of Council and that the framework include a third-party assessment of Council at a minimum of every three years. The Council decided to hire Deanna Williams as Council's third-party assessor.

**MOTION:**     **THAT** Council contract Deanna Williams to be the third-party assessor.

Moved:       Carla Grbac  
Seconded:   Pella Giabanis  
VOTE:

**CARRIED**

### **13.3   CDHO Council Coaching Advisory**

The President reviewed the Coaching Advisory provided to Council by Council's Governance Coach, Rose Mercier.

## **14.0   MONITORING CEO PERFORMANCE**

### **MOTION TO MOVE IN CAMERA**

**MOTION:**     **THAT** Council move in Camera as per RHPA, *Schedule 2, Section 7(2)(d)* at 3:31 p.m., for agenda item 14.1.

Moved:       Maheen Cassim  
Seconded:   Michelle Atkinson  
VOTE:

**CARRIED**

### **14.1   EL 6**

**MOTION:**     **THAT** Council has assessed the monitoring report for Executive Limitations Policy 6 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

Moved:       Meghan Leuprecht  
Seconded:   Carla Grbac  
VOTE:

**CARRIED**

### **MOTION TO MOVE OUT OF CAMERA**

**MOTION:**     **THAT** Council move out of Camera as per RHPA, *Schedule 2, Section 7(2)(d)* at 3:32 p.m.

Moved:       Carla Grbac  
Seconded:   Anne-Marie Conaghan  
VOTE:

**CARRIED**

## 14.0 SELF-EVALUATION OF GOVERNANCE PROCESS

### 14.1 Council Meeting Evaluation

The Council Feedback Survey was sent to Council members to be completed electronically. Council reviewed the results in the meeting.

## 15.0 NEXT MEETING DATE

The next Council meeting is September 16, 2022.

## 16.0 ADJOURNMENT

**MOTION:**      **THAT** the Council meeting be adjourned at 4:04 p.m.

Moved:            Michelle Atkinson

Seconded:       Carla Grbac

VOTE:

**CARRIED**

**Approved by:**

---

**Signature of Chair, Terri Strawn**

---

**Date**

## EXECUTIVE COMMITTEE REPORT

September 16, 2022

### COMMITTEE MEMBERS

#### Professional Members

Terri Strawn, President

Vanessa Pereira, Vice-President

Michelle Atkinson

#### Public Members

Alex Greco

Margaret Wade

**Mandate of the Committee:** Except as provided by the Act, the Executive Committee may exercise all the powers and duties of the Council with respect to any matter that, in the opinion of the Executive Committee, requires attention between meetings of the Council.

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### INTRODUCTION

Since its last report to Council, the Executive Committee met through videoconference on August 19, 2022. Approved Executive Committee meeting minutes are available to Council via Board Effect in the 'Library'.

### ITEMS FOR INFORMATION

#### CDHO Governance

The Executive planned the agendas for the September 9 Council workshop and the September 16 Council meeting.

The Executive Committee reviewed the CDHO's Q2 Financial Report and no issues were raised.

### **Public Member Appointments**

New Member Orientation for Sasha Sidhu took place on June 2, 2022.

### **Non-Council Member Appointments**

A call out for Non-Council members is planned in the near future.

### **Competency Profile Committee**

Council approved an implementation plan to screen applicants to Council and committees prior to their election or appointment and directed the Competency Profile Committee to further develop and implement the plan. Changes in Council policy GP Governance Succession Planning are being brought to Council in September and if approved, would apply to the 2022 Council elections and would ensure the CDHO is compliant with the CPMF.

### **Governance Committee**

The Governance Committee met with Deanna Williams on July 12, 2022, to discuss the annual third-party Council evaluation. Ms. Williams is currently developing the evaluation tool. There are two components to this evaluation:

1. Deanna will observe the September and potentially December Council meetings
2. All Council members and some members of staff will be interviewed

Due to this being a Council evaluation, Council members have and will continue to have an opportunity to provide input that is valuable to evaluate with respect to Council performance and effectiveness. The evaluation report will be completed and provided prior to the next CPMF submission.

## **DISCIPLINE COMMITTEE REPORT**

**September 16, 2022**

### **COMMITTEE MEMBERS**

**Chair:** Jacqueline White, Professional Member

**Vice-Chair:** Carla Grbac, Professional Member

#### **Professional Members (Council)**

Michelle Atkinson  
Maheen Cassim  
Anne-Marie Conaghan  
Jennifer Cooper  
Farzana Hussain  
Caroline Lotz  
Vanessa Pereira  
Terri Strawn  
Mary Yeomans

#### **Public Members (Council)**

Loree Beniuk  
Erin Betts  
Pella Giabanis  
Alessandro Greco  
Ehizele Martin Iyamabo  
Meghan Leuprecht  
Angelica Palantzas  
Upneet (Sasha) Sidhu  
Margaret Wade

#### **Professional Members (Non-Council)**

Gillian Dunn  
Paula Malcomson

**Mandate of the Committee:** To hear and decide on allegations of professional misconduct and/or incompetence made against registrants of the CDHO.

### **INTRODUCTION**

Since its last report to Council in June 2022, the Discipline Committee has not held a plenary meeting.

### **ITEMS FOR INFORMATION – Related to Mandate**

- *CDHO v. Cynthia DeMarco* was heard by a panel on April 29, 2022. The matter proceeded as a contested hearing in absentia (i.e., the Registrant was not in attendance at the hearing). The Registrant was found to have engaged in professional misconduct. After the hearing, the Registrant advised the College that she intended to participate in the penalty hearing. The penalty hearing is being scheduled following a request for an adjournment by the Registrant.

- *CDHO v. Kelly Miranda Lourenco* was heard by a panel on June 16, 2022. The matter proceeded as an uncontested hearing. The panel found the Registrant to have engaged in professional misconduct in accordance with an agreed statement of facts and accepted a joint submission on penalty. The panel's reasons for decision were released on July 7, 2022.

There are no other pending matters before the Discipline Committee at this time.

## **CONCLUSION**

The Discipline Committee is continuing to ensure that all matters referred to it are dealt with in a fair, consistent, and timely manner.



## FITNESS TO PRACTISE COMMITTEE REPORT

September 16, 2022

### COMMITTEE MEMBERS

**Chair:** Vacant

#### **Professional Members (Council)**

Michelle Atkinson  
Maheen Cassim  
Anne-Marie Conaghan  
Jennifer Cooper  
Carla Grbac  
Farzana Hussain  
Caroline Lotz  
Vanessa Pereira  
Terri Strawn  
Jacqueline White  
Mary Yeomans

#### **Public Members (Council)**

Loree Beniuk  
Erin Betts  
Pella Giabanis  
Alessandro Greco  
Ehizele Martin Iyamabo  
Meghan Leuprecht  
Angelica Palantzas  
Margaret Wade  
Upneet (Sasha) Sidhu

**Mandate of the Committee:** To hear and determine allegations of incapacity made against registrants of the CDHO.

### INTRODUCTION

The Fitness to Practise Committee conducts hearings to determine whether a Registrant is suffering from a health condition or disorder that is affecting or may affect their ability to practise safely and effectively. Given the personal health information that is often at issue in such hearings, they are closed to the public; however, any finding by the Fitness to Practise Committee will be summarized on the College's Public Register. In addition, the College's bylaws permit information about any allegations of incapacity at issue in a hearing to be published. Further, when a finding of the Fitness to Practise Committee is under appeal, it will be noted on the Public Register.

### ITEMS FOR INFORMATION – Related to Mandate

The Fitness to Practise Committee has not met and panels of the Committee have conducted no hearings since the last report to Council in June 2022.

## INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

September 16, 2022

### COMMITTEE MEMBERS

#### Panel A

**Chair:** Michelle Atkinson, Professional Member

#### Professional Members (Council)

Michelle Atkinson – Chair of Panel A  
Jennifer Cooper

#### Public Members (Council)

Loree Beniuk  
Erin Betts

#### Professional Members (Non-Council)

Larissa Voytek  
Kim McNamara

#### Panel B

**Chair:** Caroline Lotz, Professional Member

#### Professional Members (Council)

Caroline Lotz – Chair of Panel B  
Mary Yeomans

#### Public Members (Council)

Meghan Leuprecht  
Margaret Wade

#### Professional Members (Non-Council)

Julie Farmer  
Tonia Peachman-Faust

**Mandate of the Committee:** The ICRC is a statutory Committee created under the *Regulated Health Professions Act, 1991*. Its mandate is to review all complaints, reports and inquiries in a fair and consistent manner to determine what action, if any, is appropriate in each case.

### INTRODUCTION

The Inquiries, Complaints and Reports Committee (ICRC) is divided into two main Panels (A and B) and a third supplementary Panel (C) may be established to accommodate the number of ongoing investigations, to avoid any potential conflicts of interest and to be able to select members, should the need arise, for a discipline hearing.

Since the last Report to Council, the ICRC as a whole met once on August 26, 2022, for a plenary training session. The panels of the ICRC met on the following dates by video conference since the last Report to Council of June 10, 2022.

Panel A	Panel B
July 15, 2022	June 17, 2022 August 26, 2022

**ITEMS FOR INFORMATION – Related to Mandate**

The following tables detail, in summary form, the activities of the ICRC since the last Report to Council (which reported information up to May 17, 2022).

Number of investigations carried over from previous period(s) <sup>1</sup>			
	Complaints	Reports	QA Referrals
Investigations commenced before May 18, 2022	17	17	2

Intake of new investigations			
	Complaints	Registrar's Reports	QA Referrals
May 18, 2022, to August 29, 2022	9	2	0

Decisions made and finalized by ICRC			
	Complaints Outcomes	Reports and Incapacity Outcomes	QAC Outcomes
May 18, 2022, to August 29, 2022	No Further Action: 6  Frivolous, vexatious, made in bad faith, moot, or otherwise and abuse of process: 1  Advice and Recommendations: 6  Withdrawn: 1	No Further Action: 1  Advice and Recommendations: 4  Specified Continuing Education or Remediation Program (SCERP): 2	Advice and Recommendations: 1  Oral Caution: 1

<sup>1</sup> Carryover (carried over) refers to investigations that began before the last Council meeting which are still being investigated or have been completed.

Health Professions Appeal and Review Board Matters			
	Matters in progress	Matters heard, Decision pending	Decision(s)
May 18, 2022 to August 29, 2022	4	3	1

The ICRC Decision with Reasons was upheld in the HPARB decision that was issued.

### Incapacity

The ICRC continues to deal with one incapacity matter since the last Report to Council.

### Timelines

The *Regulated Health Professions Act, 1991* states that complaints shall be disposed of within 150 days. However, if a complaint is not disposed of within 150 days, the ICRC does not lose jurisdiction to continue the investigation. A notice, however, must be provided to the complainant at 150 days and to all parties and the Health Professions Appeal and Review Board at 210 days. At 240 days and every thirty days thereafter, the College provides notice to the parties setting out the reason for the delay. Although these timelines only apply to complaints, the ICRC aims to dispose of all investigations using the same benchmarks of 150, 210 and 240 days. Reasons for a delay may be due to the complexity of the matter.

Numbers of days to disposition on completed matters from May 18, 2022, to August 29, 2022 (time of writing) were as follows:

Timeline	Complaints	Registrar's Reports	QA Referrals
150 days or less	8	5	1
151 days to 210 days	5	1	1
211 days to 240 days	1	---	---
More than 240 days	---	1	---

### CONCLUSION

The ICRC continues to review all complaints and reports in a fair and consistent manner.

## PATIENT RELATIONS COMMITTEE REPORT

September 16, 2022

### Professional Members (Council)

Maheen Cassim

Farzana Hussain

### Professional Members (Non-Council)

Paula Malcomson

### Public Members (Council)

Alessandro Greco

Ehizele Martin Iyamabo

Meghan Leuprecht

**Mandate of the Committee:** As a statutory committee under the *RHPA*, the mandate of the Patient Relations Committee is to develop and implement a program that includes two distinct components: 1) measures for preventing or dealing with sexual abuse of patients; and 2) to inform the public about the importance of oral health and dental hygienists' responsibilities within health care.

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### INTRODUCTION

The Patient Relations Committee did not meet since the last Council meeting on June 10, 2022.

### ITEMS FOR INFORMATION — Related to Mandate

No further information to report.

## QUALITY ASSURANCE COMMITTEE REPORT

September 16, 2022

**Committee Members:** Terri Strawn, Professional Member (Chair)  
Anne-Marie Conaghan, Professional Member  
Farzana Hussain, Professional Member  
Angelica Palantzas, Public Member  
Margaret Wade, Public Member  
Julie Farmer, Non-Council Member  
Tonia Peachman-Faust, Non-Council Member

**Mandate of the Committee:** To fulfill the CDHO's legislative obligation to the public of Ontario and the Ministry of Health and Long-Term Care by facilitating dental hygienists as they monitor and improve their level of competence in their dental hygiene practice and environment, for consistency with CDHO Standards of Practice, bylaws and regulations.

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### INTRODUCTION

The Quality Assurance Committee met twice since the last Report to Council. Panel A, comprised of Terri Strawn, Angelica Palantzas, and Julie Farmer, met by video conference on June 13, 2022. Panel B met by video conference on June 16, 2022, and included Anne-Marie Conaghan, Margaret Wade, and Tonia Peachman-Faust.

The Committee is scheduled to meet next on September 2, 2022.

### ITEMS FOR INFORMATION – Related to Mandate

#### Welcome Emails

'Welcome to the Profession' notices were sent out by email in July to 134 registrants who were registered between April 1 and June 30, 2022. The notice is designed to promote quality practice and to increase awareness of the CDHO resources available, such as the CDHO Knowledge Network, the practice advisors, and the Quality Assurance Program Self-Assessment and educational tools. This notice is sent by email to all new registrants quarterly.

## **Quality Assurance Records Peer Review Statistics (as of August 29, 2022)**

### **2022 Peer Assessment**

Of the 2501<sup>1</sup> quality assurance records requested

2429 have met the assessment guidelines<sup>2</sup>

28 are in the assessment process<sup>4</sup>

44 are participating in directed learning/remediation

### **2022 Practice Reviews**

Of the 19<sup>3</sup> on-site practice assessments requested

7 have met the assessment guidelines<sup>2</sup>

12 are in the assessment process

0 are participating in directed learning/remediation

### **2021 Peer Assessment**

Of the 2559<sup>1</sup> quality assurance records requested

2542 have met the assessment guidelines<sup>2</sup>

4 are in the assessment process<sup>4</sup>

11 are participating in directed learning/remediation

### **2021 Practice Reviews**

Of the 50<sup>3</sup> on-site practice assessments requested

38 have met the assessment guidelines<sup>2</sup>

1 is in the assessment process

11 are participating in directed learning/remediation

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<sup>1</sup> Includes Registrants who were selected by the Committee from referrals, for not completing the Annual Self-Assessment and/or have been carried forward from a previous assessment period.

<sup>2</sup> Includes Registrants who have resigned, were exempted, or deferred to another assessment period and those referred to the ICRC for non-compliance.

<sup>3</sup> Includes Registrants who were carried forward from a previous assessment period and those placed into Path 3 for failure to submit QA records.

<sup>4</sup> Includes Registrants who were granted an extension to submit, those awaiting Committee decision, and those required to participate in an onsite practice review as part of their assessment.

## **Quality Assurance Program Evaluation**

The final draft of the Program Evaluation Report from Harry Cummings and Associates was received in May. Recommendations outlined in the report are presently under review.

## REGISTRATION COMMITTEE REPORT

September 16, 2022

**Committee Members:** Caroline Lotz, Professional Member  
Jacqueline White, Professional Member  
Maheen Cassim, Professional Member  
Pella Giabanis, Public Member  
Loree Beniuk, Public Member  
Vacant, Non-Council Member

**Mandate of the Committee:** The Registration Committee is a statutory Committee under the *RHPA*. It assesses an applicant's educational qualifications and suitability to practise dental hygiene in Ontario in an equitable and consistent manner. The Committee ensures that registrants meet the requirements as set out in the registration regulations.

### INTRODUCTION

The Registration Committee has not met since the last report to Council on June 10, 2022.

### ITEMS FOR INFORMATION – Related to Mandate

#### Registration Statistics

Since last reported to Council:

	May 17, 2022	August 24, 2022
General Certificate of Registration	12,750	13,081
Specialty Certificate of Registration	605	629
Inactive Certificate of Registration	895	846
Total Registrants	14,250	14,556
Authorized to Self-Initiate	6,471	6,548



### **Applications for Registration**

Since the last Report to Council, the College received 344 new applications for registration. 1 application required detailed review by the Registrar due to concerns of academic misconduct during completion of the CDHO-approved refresher training course. The applicant was approved for a Certificate of Registration by the Registrar.

### **Changes to the Register**

Since last reported to Council on May 17, 2022:

- 298 applicants were registered to practise
- 22 previous Registrants of the College were re-registered
- 2 Registrants were reinstated (from suspended)
- 1 Registrant was suspended
- 0 Registrants were revoked for non-payment of fees
- 15 Registrants resigned
- 77 Registrants were authorized to self-initiate

## EXAMINATIONS COMMITTEE REPORT

September 16, 2022

### COMMITTEE MEMBERS

**Chair:** Larissa Voytek, Non-Council Member

**Professional Members (Non-Council)**

Fatimah Datoo

Tonia Peachman-Faust

**Mandate of the Committee:** The Examinations Committee is responsible for overseeing the College-administered written examination and clinical competency evaluations, and addressing appeals related to the examination results.

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### INTRODUCTION

The Examinations Committee has not met since the last Council meeting on June 10, 2022.

### CONCLUSION

The Examinations Committee continues to fulfill its mandate.

# President's Report to Council

**September 16, 2022**

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## **President's Activities**

June 2, 2022 – New Member orientation for Sasha Sidhu

June 16–June 18, 2022 – Virtual attendance Govern for Impact Conference

July 28, 2022 – Meeting Registrar – Operational update

August 11, 2022 – Meeting C. Grbac – Ownership Linkage

August 17, 2022 – Meeting M. Atkinson – Monitoring GP 3

August 19, 2022 – Executive Committee Meeting

September 1, 2022 – Meeting with Registrar – Operational update, Council meeting discussion

September 1, 2022 – Teleconference with VP – Council meeting discussion

## **Govern for Impact Conference Attendance**

The conference this year was offered in a hybrid format. The President attended virtually, however, due to extreme technical difficulties, full participation was not possible as it had been in the past in person. The CDHO is currently still awaiting publishing of recordings from the conference of sessions scheduled to attend but unable due to the difficulties.

## **Expense Policy Exceptions**

Subject to pre-approval by the President and under special circumstances, the President may use her discretion to approve costs for accommodation outside the policy allocation. In doing so, Council has requested that when discretion has been used, the President is to report to Council with the rationale for the decision.

There were no expenses approved outside the policy allocation.

## **Council Monitoring**

In an effort to increase the transparency of Council, the attendance record of Council members at meetings is included in this report. [[Appendix 1](#)]

## **Cost of Good Governance**

In an effort to increase the transparency of Council, the breakdown of honorariums and expenses per Council member has been provided. [[Appendix 2](#)]

## Appendix 1

### Council Workshop/Meeting Attendance 2022

Name	Jan. 14 Workshop New Member Orientation	Jan. 21 Meeting	Feb. 25 Workshop	Mar. 4 Meeting	June 9 Workshop	June10 Meeting
<b>Professional Members</b>						
Atkinson, Michelle	✗	✓	✓	✓	✓	✓
Cassim, Maheen	✓	✓	✓	✓	✓	✓
Conaghan, Anne-Marie (A)	✗	✓	✓	✓	✓	✓
Cooper, Jennifer (A)	✗	✓	✗	✓	✓	✓
Grbac, Carla	✗	✓	✓	✓	✓	✓
Hussain, Farzana	✓	✓	✓	✓	✓	✓
Lotz, Caroline	✓	✓	✗	✓	✓	✓
Pereira, Vanessa (Vice-President)	✗	✓	✓	✓	✓	✓
Strawn, Terri (President)	✗	✓	✓	✓	✓	✓
White, Jacqueline	✗	✓	✓	✓	✓	✓
Yeomans, Mary	✓	✓	✓	✓	✓	✓
<b>Public Members</b>						
Beniuk, Loree	✗	✓	✓	✓	✗	✗
Betts, Erin	✗	✓	✓	✓	✓	✓
Giabanis, Pella	✗	✓	✗	✗	✗	✓
Greco, Alex	✗	✓	✗	✗	✗	✓
Iyamabo, Ehizele Martin	✗	✗	✓	✗	✗	✓
Leuprecht, Meghan	✗	✓	✗	✓	✓	✓
Palantzas, Angelica	✓	✓	✓	✓	✓	✓
Sidhu, Upneet (Sasha)	N/A	N/A	N/A	N/A	✓	✓
Wade, Margaret	✗	✓	✓	✓	✓	✓

## Appendix 2

### Professional Council Members Honorarium and Expense Claim Submissions - Quarterly

For the Year ending December 31, 2022

	Q1 HONORARIUM	Q1 EXPENSES	Q2 HONORARIUM	Q2 EXPENSES	Q3 HONORARIUM	Q3 EXPENSES	Q4 HONORARIUM	Q4 EXPENSES	TOTAL
Terri Strawn (president)	3,372.30	0.00	2,928.25	0.00		0.00		0.00	6,300.55
Vanessa Pereira (vice-president)	2,419.50	0.00	2,146.20	0.00		0.00		0.00	4,565.70
Michelle Atkinson	3,249.00	0.00	2,431.00	0.00		0.00		0.00	5,680.00
Caroline Lotz	1,690.00	0.00	1,276.00	0.00		0.00		0.00	2,966.00
Ann-Marie Conaghan	1,407.00	0.00	1,969.00	0.00		0.00		0.00	3,376.00
Jennifer Cooper	1,840.00	0.00	1,842.00	0.00		0.00		0.00	3,682.00
Carla Grbac	1,049.00	0.00	1,665.00	0.00		0.00		0.00	2,714.00
Jacqueline White	1,049.00	0.00	1,357.00	0.00		0.00		0.00	2,406.00
Maheen Cassim	1,203.00	0.00	945.00	0.00		0.00		0.00	2,148.00
Farzana Hussain	1,561.00	0.00	1,099.00	0.00		0.00		0.00	2,660.00
Mary Yoemans	2,277.00	0.00	1,611.00	0.00		0.00		0.00	3,888.00
Ilga St. Onge	512.00	0.00	0.00	0.00		0.00		0.00	512.00
Non-Council Professional Members (combined)	2,531.00	0.00	1,890.00	0.00					4,421.00
								TOTAL	45,319.25

Includes claims for:

- council workshops/meetings
- committee meetings
- discipline hearings
- ad-hoc committee work

## Registrar's Report

**Public Interest Rationale** – The Registrar is responsible for working collaboratively with the CDHO Council to effectively position the College to achieve its mandate of holding the public interest at the forefront of its deliberations, decisions, and initiatives. This mandate includes ensuring that people who access care from Registered Dental Hygienists in Ontario receive safe, ethical, competent care and that the statutory obligations articulated in the [Regulated Health Professions Act, 1991](#), the [Dental Hygiene Act, 1991](#) and other applicable legislation are met.

This report provides Council with a summary update on work that was done in between Council meetings and represents a report of this work since Council's last meeting on June 10, 2022.

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### Operations

Staff continue to work largely remotely with individuals attending the office when the work process requires or meetings are required. A hybrid model of work location has been implemented. This is the preferred model for almost the entire CDHO staff complement.

The CDHO continues to be in conversation with some other Health Profession regulators regarding the potential for sharing the CDHO office space. There is a continued examination of the existing IT infrastructure through the lens of risks to the organization, efficiency, security, and future capacity.

The College has contracted a service provider that will develop the next version of the CDHO website. This is a large endeavour that not only requires a review and redesign of the website framework/sitemap but, more importantly, a review and grooming of all of the material that currently exists on the website.

Staff are preparing for upcoming elections in Districts 1, 5, and 6. This preparation includes drafting and distribution of notices as well as providing an orientation to all nominees prior to the election. Such an orientation will assist nominees in determining whether they are able to offer the commitment required to be a contributing, effective member of Council, as referenced in the College Performance Measurement Framework.

**Communications Survey.** The College has just received the results of the Ipsos Communications survey that was sent to Registered Dental Hygienists to establish prevailing appetites for both how the CDHO communicates with RDH's as well as the content of those communications. This report contains a wealth of information, and the Communications team and Senior staff are reviewing the report with a view to establishing an immediate and long-term Communications strategy.

**Human Resources.** Ms. Keisha Simpson, Manager, Registration, Ms. Emily Liang, Coordinator, Registration and Mr. Jon Oliva, Manager, IT Initiatives and Infrastructure have all become permanent CDHO team members following their initial probationary periods.

**Financial.** The College remains in a strong financial position. At the end of the Q2, total expenses as a percentage of the budgeted expenses for the fiscal year was 43%, below the anticipated expenditure level for this point in the fiscal year.

## Registrant Engagement

### Practice Advisory Service

Since the last report to Council, the Practice Advisory Service responded to 869 enquiries.

	Calls	Emails	Total Enquiries	Top Topics
June 2022	227	114	341	<b>Masks</b> <b>Screening</b> <b>General Scope of Practice</b> <b>Self-Initiation</b> <b>Billing</b>
July 2022	109	105	214	
August 2022	180	134	314	

### Communications

*Website updates and registrant communications* – Since Council last met, several communications have been posted to the website and forwarded to Registered Dental Hygienists. The Communications team has increased the presence of the CDHO on some of the social media platforms.

These included:

- June 10, 2022 – Registrant Communication regarding changes to Provincial Masking Requirements
- June 16, 2022 – CDHO E-Brief, Volume 12, Issue 6
- June 29, 2022 - Registrant Communication regarding Revised COVID-19 IPAC Guidance
- July 21, 2022 – CDHO E-Brief, Volume 12, Issue 7
- August 3, 2022 – Registrant Communication regarding further Revisions to COVID-19 Guidance

### Program Elements

#### Registration:

The CDHO currently has 14,587 active registrants. The registration renewal period has been moved up (October 15 – December 1). IT department is working diligently to create a seamless transition to this new registration renewal period. Reminder messaging is being sent to all registrants.

#### Professional Conduct:

Alternative dispute resolution process is in place. Currently working with Pivotal Research to extract data from our complaint files. This aggregate data will be examined for trends in complaints characteristics. This information can then be used to direct the development of resources that are designed to assist Registered Dental Hygienists in ongoing quality assurance and continuing competence endeavours. Pivotal Research has also been contracted to develop a feedback survey that will be used to evaluate the experience of individuals who submit complaints to the CDHO throughout the complaint

process. The College is also undertaking a review of the complaints data reported by other Health Profession Regulators with a view to characterizing the broader, comparative complaints context.

### **Quality Assurance:**

The College has contracted a Quality Assurance expert to lead the development of a Strategic Plan for the QA program. This process involves surveying Key Informants (stakeholders); members of the Profession; reviewing the CDHO Quality Assurance regulatory framework (Standards; Conduct; Registration); and a SOAR analysis (Strengths, Opportunities, Aspirations, Results) of all of this data that will be used to develop a QA Strategic Plan that will guide program evolution and development for 5-7 years. The strategic plan process will take 6-9 months.

### **System Partner Representation**

#### [Federation of Dental Hygiene Regulators of Canada](#)

The Registrar represented the CDHO at several meetings of the FDHRC. The FDHRC is currently developing its next strategic plan. I sit on the Appeals Committee of the FDHRC which, following amalgamation with the National Dental Hygiene Certification Board (NDHCB), administers the national certification exam.

#### [Ontario Oral Health Professions Registrars](#)

This group of Registrars from the four oral health profession regulatory colleges (CDHO, CDO, RCDSO, CDTO) meets monthly to discuss areas of common interest. The most recent discussion and initiative was the revision of the COVID-19 IPAC Guidance on August 3, 2022. We monitored evidence that became available to us in the published literature and from data provided to us by our Oral Health colleagues in other jurisdictions. The CDHO joined with our Oral Health Profession regulatory partners (RCDSO, CDO, CDTO), infectious disease experts, Oral Health subject matter experts, and academic program administrators to examine our existing COVID-19 IPAC guidance through the lens of evolving, evidence-informed best practices that support the safety of patients/clients and Oral Health Professionals. As a result of these discussions and the information we had before us, the common IPAC guidance was updated.

#### [Health Profession Regulators of Ontario](#)

HPRO supports information sharing and some collaborative initiatives among Ontario's Health Profession Regulators in Ontario. The group is comprised of the Registrars from each of Ontario's 26 health regulatory colleges that regulate 29 distinct health professions. HPRO supports collaborative initiatives to assist colleges in fulfilling their regulatory roles.





# ANNUAL REPORT 2021



College of **Dental Hygienists** of Ontario  
L'Ordre des **hygiénistes dentaires** de l'Ontario  
*Protecting your health and your smile / Nous protégeons votre santé et votre sourire*

[www.cdho.org](http://www.cdho.org)



# MISSION STATEMENT

The mission of the College of Dental Hygienists of Ontario is to regulate the practice of dental hygiene in the interest of the overall health and safety of the public of Ontario.

La mission de l'Ordre des hygiénistes dentaires de l'Ontario consiste à réglementer l'exercice de la profession d'hygiène dentaire de sorte à favoriser l'état de santé global et la sécurité du public ontarien.

## THE COLLEGE

The College of Dental Hygienists of Ontario is the regulatory body for over 14,000 Registered Dental Hygienists in Ontario. The CDHO regulates the dental hygiene profession by setting the requirements to be registered as a Dental Hygienist and establishing practice standards for safe, ethical care for all Ontarians through: rigorous certification; ongoing knowledge building; quality assurance activities; articulating and promoting practice standards; establishing requirements for entry-to-practice; and enforcing practice standards and professional conduct.

**Registrar/CEO: Dr. Glenn Pettifer**



### **College of Dental Hygienists of Ontario**

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# PRESIDENT'S MESSAGE

**CAROLINE LOTZ** BA, RDH, MSc

On behalf of Council, I am pleased to share the 2021 Annual Report with our stakeholders.

This report serves to encapsulate all of the excellent work in governance the staff, Registrar and Council did to ensure that our regulatory responsibilities and public interest mandate were met.

While the ongoing pandemic posed ongoing challenges for the profession of Dental Hygiene, the CDHO, working closely with our oral health regulatory partners, ensured that the profession received timely and current guidelines that promoted optimal safety for the public of Ontario who access the services of our Registrants – the cornerstone of our mission statement.

In addition, Council commends our Registrar and staff for their ongoing efforts in implementing technological advancements and processes that optimized efficiency in our organizational operations during this unprecedented time of working remotely.

As Council looks to the future, we are actively learning, exploring and identifying ways to incorporate competency frameworks and diversity and inclusivity policies that will ensure our organization is truly representative of the views and needs of the public we serve.

Council would like to thank our Registrar/CEO and College staff for their support of Council and its committees.

Warm regards.



# MESSAGE DE LA PRÉSIDENTE

**CAROLINE LOTZ** B.A., H.D.A., M. Sc.

Au nom du conseil, j'ai le plaisir de partager le rapport annuel 2021 avec nos parties prenantes. Ce rapport sert à résumer l'excellent travail de gouvernance que le personnel, le registraire et le conseil ont accompli pour s'assurer que nos responsabilités réglementaires et notre mandat d'intérêt public soient respectés.

Bien que la pandémie en cours ait posé des défis constants à la profession d'hygiéniste dentaire, l'OHDO, en étroite collaboration avec ses partenaires de réglementation de la santé bucco-dentaire, a veillé à ce que la profession reçoive des lignes directrices opportunes et actuelles favorisant une sécurité optimale pour le public de l'Ontario qui a recours aux services de nos membres inscrits — la pierre angulaire de notre énoncé de mission.

En outre, le conseil félicite le registraire et le personnel de l'OHDO pour leurs efforts continus dans la mise en œuvre des avancées technologiques et des processus qui ont optimisé l'efficacité de nos opérations organisationnelles pendant cette période sans précédent de travail à distance.

Alors que le conseil se tourne vers l'avenir, nous apprenons, explorons et identifions activement les moyens d'intégrer des cadres de compétences et des politiques de diversité et d'inclusion qui garantiront que notre organisation est réellement représentative des opinions et des besoins du public que nous servons.

Le conseil tient à remercier notre registraire/directeur général et le personnel de l'Ordre pour leur soutien au conseil et à ses comités.

Sincères salutations.





# COLLEGE ACTIVITIES

## CDHO ACHIEVEMENTS FOR THE YEAR

Despite the many challenges encountered in 2021, including those of the ongoing COVID-19 Pandemic, the CDHO embarked on many new initiatives and was able to achieve a substantial amount this past year. Here are a few of our accomplishments:

- We reported on the work of the CDHO in the 2021 [College Performance Measurement Framework \(CPMF\) Reporting Tool](#). This report covers a wide variety of topics, like how we performed as an organization, registered applicants, measured practice improvement of Registered Dental Hygienists and processed complaints. Performance measurement reporting is a public commitment to accountability and to meeting quality improvement goals.
- We joined together and collaborated with the other Oral Health Colleges to release aligned guidance provided to our respective professions as a response to changing evidence related to COVID-19.
- The Registration department registered **810 new Dental Hygienists**.
- The Quality Assurance department completed close to **2,400 Peer Assessments**.
- The Professional Conduct department responded to **100% of inquiries** within five business days.
- CDHO staff and Council embarked on developing a framework for **Diversity, Equity, and Inclusion initiatives** at the College.

The CDHO acknowledges that its achievements would not be possible without its highly capable and dedicated **Council** who continues to meet virtually to fulfil its mandate in ensuring the public receives safe, competent, and ethical Dental Hygiene care, as well as **College staff** who continues to juggle demands of work and family while working from home to carry out the core functions of the College.

We would also like to acknowledge the dedication and commitment of **Registered Dental Hygienists** who continue to provide safe, competent, and ethical Dental Hygiene care to the public of Ontario.





A close-up photograph of a woman with dark, curly hair, laughing heartily. Her eyes are closed, and her mouth is wide open, showing her teeth. She has her hands clasped together near her chest. She is wearing a white, short-sleeved top with a lace-like pattern. The background is a blurred green field with trees in the distance.

# COMMITTEE REPORTS

## **STATUTORY COMMITTEES**

Executive Committee

Registration Committee  
(Registration by Numbers)

Inquiries, Complaints and  
Reports Committee

Quality Assurance Committee

Discipline Committee

Patient Relations Committee

Fitness to Practise Committee



# COMMITTEE COMPOSITIONS

## EXECUTIVE COMMITTEE

Caroline Lotz (Professional) — **President**  
Pauline Leroux (Professional) — **Vice-President**  
Terri Strawn (Professional)  
Joshua Hollenberg (Public) — until Sept. 23, 2021  
Ehizele Martin Iyamabo (Public)

## REGISTRATION COMMITTEE

### Professional Members

Michelle Atkinson — **Chair**  
Jenny Gibson  
Caroline Lotz

### Public Members

Loree Beniuk  
Margaret Wade

### Non-Council Member

Mary Yeomans

## QUALITY ASSURANCE COMMITTEE

### Professional Members

Terri Strawn — **Chair**  
Vanessa Pereira  
Ilga St. Onge

### Public Members

Ehizele Martin Iyamabo  
Margaret Wade

### Non-Council Members

Jaspreet Kaur Singh  
Tonia Peachman-Faust

## INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

### Professional Members

Michelle Atkinson — **Chair of Panel A**  
Anne-Marie Conaghan — **Chair of Panels B and C**  
Jennifer Cooper  
Pauline Leroux

### Public Members

Loree Beniuk  
Meghan Leuprecht

Amit Vig  
Margaret Wade

### Non-Council Members

Linda Douglas  
Dorothy Dziunikowski  
Julie Farmer  
Kim McNamara

## DISCIPLINE COMMITTEE

Erin Betts (Professional) — **Chair**

### Professional Members

All professional members of Council

### Public Members

All public members of Council

### Non-Council Members

Tracy Burke  
Gillian Dunn  
Lisa Kelly  
Paula Malcomson  
Mary Yeomans

## PATIENT RELATIONS COMMITTEE

### Professional Members

Jacqueline White — **Chair**  
Vanessa Pereira

### Public Members

Erin Betts  
Alessandro Greco — until Sept. 23, 2021  
Meghan Leuprecht

### Non-Council Member

Elaine Yang

## FITNESS TO PRACTISE COMMITTEE

### Professional Members

All professional members of Council

### Public Members

All public members of Council



# EXECUTIVE COMMITTEE

In 2021, the Council's Executive Committee was comprised of:

## PROFESSIONAL MEMBERS



**CAROLINE LOTZ**  
*President/Chair*



**PAULINE LEROUX**  
*Vice-President*



**TERRI STRAWN**

The Executive Committee is charged with the responsibility of planning Council workshops and meetings and acting on behalf of Council between Council meetings.

## PUBLIC MEMBERS



**EHIZELE MARTIN  
IYAMABO**



**JOSHUA HOLLENBERG**  
*until end of term  
September 23, 2021*



**ALESSANDRO GRECO**  
*appointed  
August 19, 2021*

The election of the Executive took place on January 22, 2021. Ms. Caroline Lotz was acclaimed to the position of President.

Joshua Hollenberg's term ended September 23, 2021. Alessandro Greco, Public Member, was appointed at the August 19<sup>th</sup> Executive Committee meeting to serve the remainder of Joshua Hollenberg's term on the Executive Committee.

The Executive Committee met 8 times in 2021. All meetings were held virtually.

# REGISTRATION BY NUMBERS

## REGISTRATION OVERVIEW AS OF DECEMBER 31, 2021



# 569

Total Applications  
Received

**567** Domestic Applications  
**2** International Applications

### APPLICATIONS REQUIRING REVIEW FROM REGISTRAR

REASON	OUTCOME
2 Former Registrants of the CDHO resigned while undergoing a Quality Assurance Committee audit	2 Granted a Certificate of Registration
2 Positive results on criminal record checks	2 Granted a Certificate of Registration
1 Applicant resigned while under investigation with another Health Regulator	Referred to the Registration Committee
1 Failed to pass CPEDH Exam	Referred to the Registration Committee
1 Applicant had a conduct declaration of academic misconduct	Referred to the Registration Committee

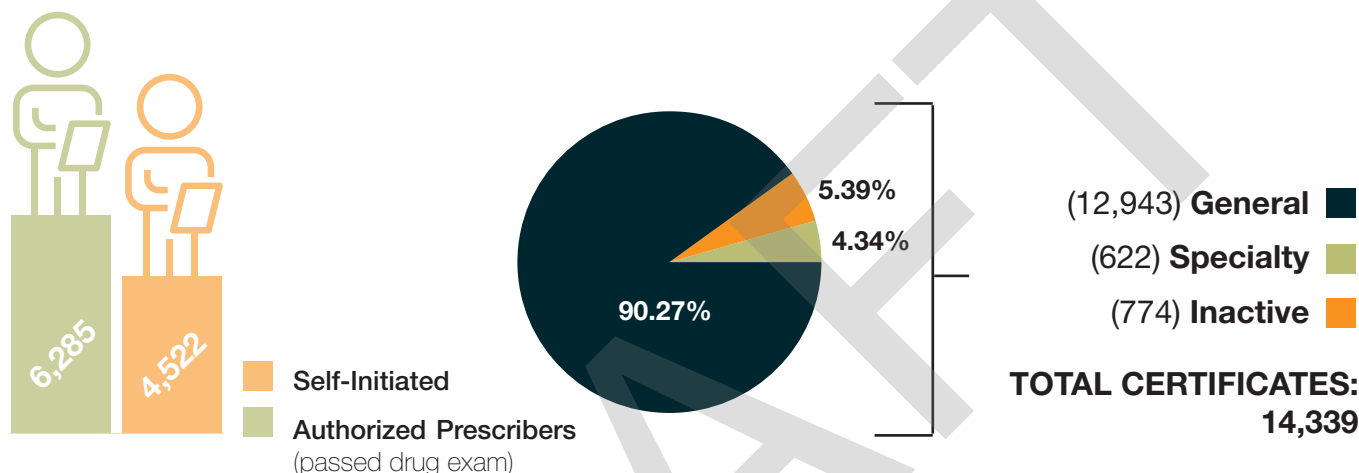
### REFERRALS TO THE REGISTRATION COMMITTEE

In addition to the applications mentioned above, one more application was referred directly to the Registration Committee due to an **accommodation request for the Clinical Competency Examination**.

# REGISTRATION BY NUMBERS

## CONT'D

CDHO CERTIFICATE STATISTICS AS OF DECEMBER 31, 2021



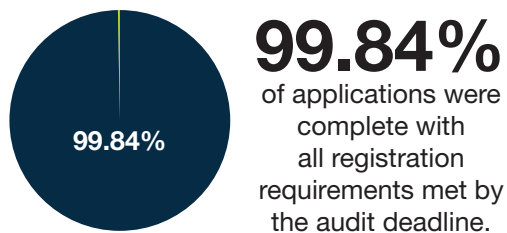
### AUDIT OF REGISTRATION APPLICATIONS

**100%** of applications were complete with all registration requirements met within the posted timeline of 10 business days.

**What Is the Audit of Registration Applications?** A quarterly random audit of 10% of new Registrant files is conducted to ensure that every application met the requirements for registration, that all data is accurately entered into the Registrant database, and that all applications were processed during the posted timeline of 10 business days. The target for the audit is 100% accuracy on all audited files.

### ANNUAL INSURANCE AUDIT

The College selected **5%** of the General and Specialty Registrants (**637 Registrants**) at random to participate in the annual insurance audit.



**99.84%**  
of applications were complete with all registration requirements met by the audit deadline.

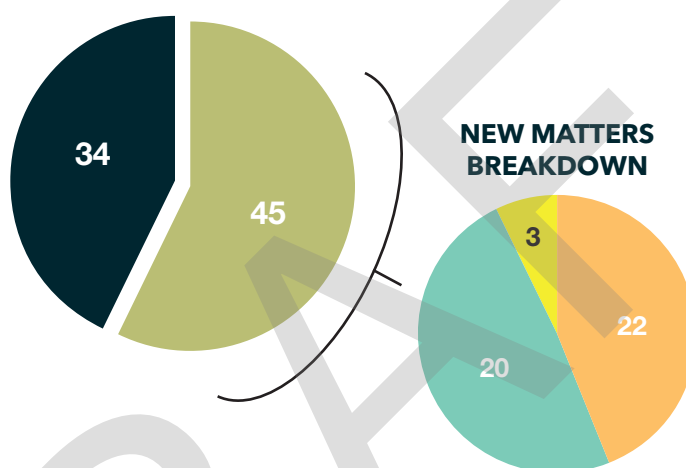
**What Is the Annual Insurance Audit?** The audit contributes to public protection by ensuring our Registrants have suitable Professional Liability Insurance, as stated in the College Bylaws. Those selected were required to submit a copy of their insurance policy.



# INQUIRIES, COMPLAINTS AND REPORTS

Reviewing cases **expeditiously, but fairly**, meets the mission of the College to regulate the practice of Dental Hygiene in the interest of the overall health and safety of the public of Ontario.

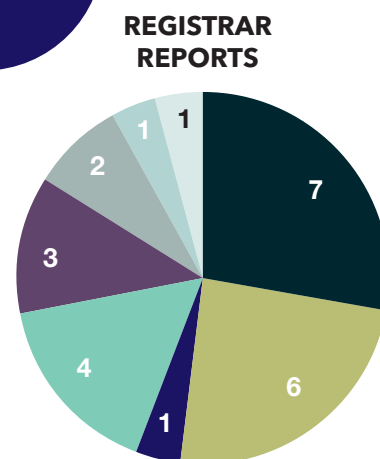
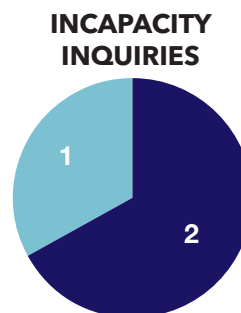
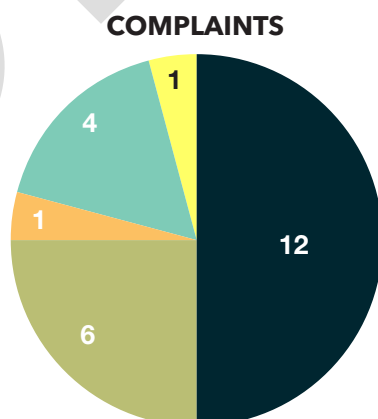
- New Matters
- Carried Forward from Last Year
- Formal Complaints
- Registrar Reports
- Incapacity Inquiries



In 2021, the ICRC reviewed a total of **79 matters** and completed its investigation into **52 matters** (24 Complaints, 25 Registrar Reports and 3 Incapacity Inquiries). **27 cases** will be carried into 2022.

## DECISIONS AND OUTCOMES OF COMPLETED MATTERS

- No Further Action
- Guidance/Recommendation
- No Further Action following Undertaking being signed
- Specified Continuing Education or Remediation Program (SCERP)
- Registrant signed Undertaking
- SCERP & Oral Caution
- Referred for Incapacity Inquiries
- Referred Specified Allegations to Discipline Committee
- Registrant Resigned
- Discontinued
- Withdrawn



# INQUIRIES, COMPLAINTS AND REPORTS CONT'D

## REASONS

### Examples of Reasons for Registrar Reports

- Recordkeeping
- Competence/Patient Care
- Professional Conduct and behaviour
- Sexual abuse (includes treatment of someone with whom the Registrant was involved in a sexual relationship)
- Intent to mislead including fraud
- Unauthorized Practice
- Billing and Fees

### Examples of Reasons for Complaints

- Communication
- Competence/Patient Care
- Billing and Fees
- Unauthorized Practice
- Sexual abuse (includes treatment of someone with whom the registrant was involved in a sexual relationship)

## TIMELINES

	NUMBER OF MATTERS	COMPLETED IN LESS THAN 150 DAYS	COMPLETED IN MORE THAN 150 DAYS, BUT LESS THAN 210 DAYS	COMPLETED IN MORE THAN 210 DAYS
Complaints	24	13	5	6
Registrar Reports	25	5	7	13
Incapacity Inquiries	3	2	-	1

The Code requires that the College dispose of a complaint within 150 days, but the jurisdiction to continue an investigation is not lost if the investigation exceeds 150 days. At 150 days, a letter is sent to both parties explaining that the ICRC will not meet the deadline. At 210 days, the College is required to notify the parties and the Health Professions Appeal and Review Board (HPARB) of the delay, as well as the reasons for the delay. After 210 days, either party can apply to HPARB seeking relief for the delay. In the interest of fairness and safety, the College aims to complete matters within 150 days.

## HPARB REVIEWS

HPARB can also review decisions made by the ICRC if the matter arose from a formal complaint. Both the person who made the complaint to the College and the Registered Dental Hygienist who was the subject of the complaint may request a review by HPARB. Decisions to refer a matter to the Discipline Committee for professional misconduct and/or incompetence, or referrals for incapacity proceedings cannot be appealed to HPARB.

In 2021, **two** (2) matters were appealed to HPARB and the decisions are pending. The College received **three** (3) decisions for matters appealed before 2021 and all three decisions were confirmed by HPARB.

# QUALITY ASSURANCE

By identifying and correcting deficiencies, the QA Committee ensures that the public of Ontario is receiving **safe, high quality and evidence-based Dental Hygiene care.**

## QUALITY ASSURANCE OVERVIEW AS OF DECEMBER 31, 2021

Number of QA records assessed	2,347
Number of on-site practices reviewed	63
Number of those who participated in remediation programs following an on-site	34

### ANNUAL REVIEW OF QA RECORDS

In 2021, **2,598 Registrants** were selected to submit their QA records for assessment.

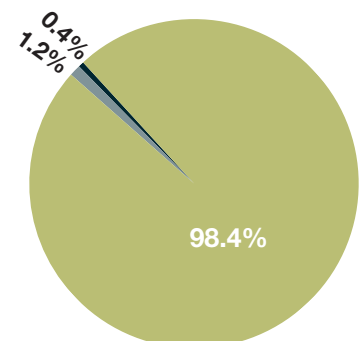
When selected for assessment, Registrants must choose one of three possible paths. Each path has a component that allows for verification of knowledge and a component that allows for verification of skills and judgment.

Assessment Option	Assessment of Knowledge	Assessment of Skills and Judgment	Number of Registrants that Selected Each Path
Path 1	Completion of a Learning Portfolio	Completion of a Practice Profile	1,203
Path 2	Completion of the QA Written Assessment (QA Test)	Completion of a Practice Profile	1,133
Path 3	Completion of the QA Written Assessment (QA Test)	Completion of an On-site Practice Assessment	6*
Resigned			219
Other: May include Registrants who are currently suspended, revoked, referred to ICRC, currently under investigation, deferred to another assessment period or deceased.			37
*Including those assigned to Path 3 by the Quality Assurance Committee			

Met Assessment Guidelines (2,556)

Still in Progress (31)

Participating in Remediation (11)



As of December 31, 2021, **98.4%** of the 2,598 QA records requested had **met the assessment guidelines.**



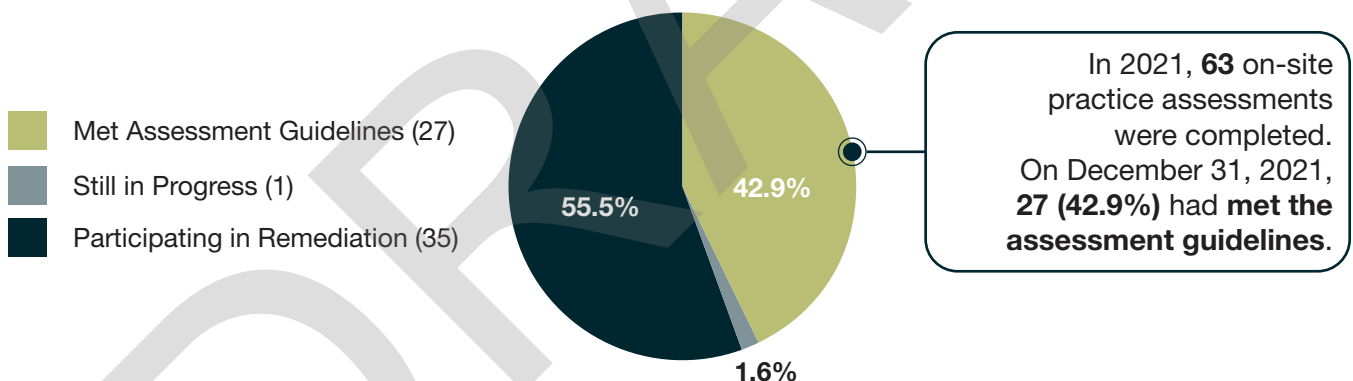
# QUALITY ASSURANCE

## CONT'D

### ON-SITE PRACTICE ASSESSMENTS

On-site practice assessments can occur for a number of reasons in the QA program. The following are two of the most common:

- If, in the review of a Registrant's QA records, an assessor determines that the Registrant's Dental Hygiene practice may not be consistent with the *CDHO Dental Hygiene Standards of Practice*, a different assessor may then be directed by the Committee to conduct an on-site practice review. If, as a result of the assessment, the practice is found to be below CDHO standards, the Registrant is advised of the deficiencies. There may be a direction to further education and/or peer mentorship if the Committee feels that the Registrant requires help in meeting the standards. A follow-up on-site assessment is normally completed to ensure that the appropriate changes have been made to the Dental Hygiene practice.
- A Registrant either voluntarily selects Path 3 or is placed into Path 3 by the QA Committee for not submitting their QA records when requested.



### PRESCRIBED LEARNING PROGRAMS

If gaps in learning or practice are found, the QA Committee will order practice enhancement/remediation activities for Registered Dental Hygienists (RDHs) found deficient in their knowledge, skills, attitudes, and judgment as identified through their assessment. Required courses or remedial activities are identified by the QA Committee to correct the deficiencies and/or enhance RDHs' practices. Successful completion of these activities is required in order for RDHs' Quality Assurance assessment to be considered complete.

Of the 63 Registrants who participated in an on-site practice assessment in 2021, **35** were directed to complete a Specified Continuing Education or Remediation Program (SCERP). As of December 31, 2021, of those directed to complete a SCERP, **zero (0)** had met the assessment guidelines. Normally, more Registrants would have completed remediation by the end of December, but on-site visits were delayed until the fall in 2021 due to ongoing COVID-19 measures.

# DISCIPLINE

## MANDATE

The Discipline Committee hears and determines allegations of professional misconduct or incompetence against Registrants of the College.

A panel appointed by the Chair of the Discipline Committee conducts the hearing. The possible penalties that the panel can impose on a Registrant who is found to have engaged in professional misconduct or to be incompetent are defined in the *Regulated Health Professions Act, 1991*.

The panel can also require the Registrant to pay all or part of the College's legal and/or investigation costs, as well as costs incurred in conducting the hearing. If the professional misconduct relates to sexual abuse of a client, the panel can require the Registrant to reimburse the College for funding provided to that client for therapy or counselling.

Either the Registrant or the College may appeal the decision of the panel to the Divisional Court of Ontario.





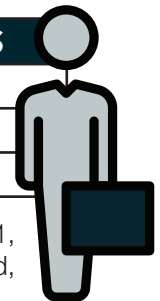
# DISCIPLINE

## CONT'D

### PANEL BUSINESS

As of December 31, 2021, panels of the Discipline Committee engaged in the following business:

MATTERS DISPOSED OF*	NUMBER OF MATTERS
Decisions and reasons issued	3
Hearing commenced, but still in progress	3
Hearing completed, but reasons under reserve	1



\*This report covers matters disposed of by panels of the Discipline Committee in the period from January 1, 2021, to December 31, 2021. A matter is disposed of on the date the reasons for decision are released, including both liability and penalty decisions, where applicable.



### TIMELINES

90 <sup>TH</sup> PERCENTILE DISPOSAL OF	NUMBER OF WORKING DAYS
An uncontested* discipline hearing	637~
A contested** discipline hearing	376

\* **An uncontested discipline hearing** is one where the Registrant admits to misconduct; the College and Registrant come to an agreement on the facts and make a joint submission on the penalty, or the Registrant does not contest the facts or penalty.

\*\* **A contested discipline hearing** is one where the College and Registrant disagree on some or all of the allegations, penalty, or costs.

~One discipline matter was adjourned on consent for an extended period to await the decision of the Ontario Court of Appeal in *CDHO v. Tanase*; if this case was excluded, the 90<sup>th</sup> percentile disposal of an uncontested hearing would be 183 days.

# DISCIPLINE

## CONT'D

FINDINGS BY TYPE	
Type	Number of Cases
Conduct Unbecoming	2
Falsifying Records	1
Failing to Maintain Standards	1
Sexual Abuse	1
Dishonourable, Disgraceful, or Unprofessional Conduct	3

A discipline case may include **multiple findings**, such that the total number of findings may not equal the total number of cases disposed of during the period.

PENALTY ORDERS BY TYPE	
Type	Number of Cases
Revocation	1
Reprimand	3
Suspension	2
Terms, Conditions and Limitations	2

A discipline case may include **multiple penalties**, such that the total number of penalties may not equal the total number of cases disposed of during the period.

## COSTS

COSTS OF HEARINGS DISPOSED OF:	\$182,003.77
COSTS AWARDED TO THE COLLEGE:	\$85,900.00
COSTS RECOVERED:	\$8,000.00



# DISCIPLINE (CONT'D)

## HEARING SUMMARIES

All decisions of the Discipline Committee are available on the website of the [Canadian Legal Information Institute](#) and on the College's website — [College of Dental Hygienists of Ontario: Discipline Matters](#).

The reasons in the following matters were released in 2021.

### CDHO V. CHIRAG SARAIYA

On March 16, 2021, a panel of the Discipline Committee held a public hearing to decide whether Mr. Chirag Saraiya had engaged in professional misconduct. The College alleged that Mr. Saraiya had

- permitted operation of a website that
  - referred to Mr. Saraiya both as a dentist and dental hygienist, including by use of the abbreviation of the title “doctor”, even though he was not authorized to practise dentistry in Ontario
  - contained information that was false or misleading, and
  - contained testimonials
- failed to maintain the standards of practice of the profession with respect to infection prevention and control
- failed to meet the standards of practice of the profession with respect to recordkeeping
- altered an equipment invoice and submitted photographs to make it appear to the College's investigator that Mr. Saraiya had the equipment at the time of the investigator's attendance at his clinic, which was not true.







# HEARING SUMMARIES

## CONT'D

Mr. Saraiya admitted the conduct through an agreed statement of facts. The panel found that Mr. Saraiya had engaged in professional misconduct and issued a penalty order based on a joint submission by the parties.

Mr. Saraiya was required to appear before the panel immediately following the hearing to be reprimanded, with a notation and summary of the reprimand to appear on the College's Public Register. The Registrar was directed to suspend Mr. Saraiya's Certificate of Registration for a period of three months. The Registrar was also directed to impose terms, conditions, and limitations on Mr. Saraiya's Certificate of Registration requiring him to successfully complete the following within six months of his return to practice: a course in record keeping; an individualized course in professional ethics; and a practice audit, including a review of his infection prevention and control practices and policies.

Mr. Saraiya was ordered to pay costs to the College of \$5,000.

The panel released its reasons for decision on April 12, 2021.

### **CDHO V. SHERRY LYNN MACDONALD**

A panel of the Discipline Committee held a public hearing on the following dates to determine whether Ms. Sherry Lynn MacDonald had engaged in professional misconduct: July 23, July 24, September 4, October 5, and October 20, 2020.

The College alleged that Ms. MacDonald had engaged in professional misconduct by entering into a sexual relationship with an adult male client, which amounted to sexual abuse within the meaning of the *Health Professions Procedural Code*. Ms. MacDonald denied all allegations.

In reasons released on December 30, 2020, the panel found that Ms. MacDonald had engaged in professional misconduct as alleged.

The panel conducted a penalty hearing on February 16, 2021 and issued its order on penalty on February 17, 2021. The panel ordered as follows:

- Ms. MacDonald is required to appear, on a date to be determined, before a panel of the Discipline Committee to be reprimanded, with a notation and summary of the reprimand to appear on the College's Public Register.
- The Registrar was directed to revoke Ms. MacDonald's Certificate of Registration, effective immediately.
- Ms. MacDonald is required to reimburse the College for any funding provided to the client for therapy or counselling, up to a maximum of \$17,370.
- Ms. MacDonald is required to pay costs to the College of \$77,900, to be paid over ten years.

The panel released its reasons for penalty and costs on April 15, 2021.

Ms. MacDonald appealed the finding and order of the Discipline Committee to the Divisional Court of Ontario. In reasons released on January 31, 2022, the Divisional Court upheld the decision of the Discipline Committee.



# HEARING SUMMARIES

## CONT'D

### **CDHO V. KRISTIN CHANT**

On May 21, 2021, a panel of the Discipline Committee of the College of Dental Hygienists of Ontario held a public hearing to decide whether Ms. Kristin Diane Chant had engaged in professional misconduct.

The College alleged that Ms. Chant had failed to comply with the requirements of the College's Quality Assurance Program, including by failing to complete her annual self-assessments and failing to respond to communications from the College by the required deadlines. The College alleged that this constituted the following acts of professional misconduct:

1. Failing to cooperate with the Quality Assurance Committee
2. Failing to reply appropriately and responsively within the time specified by the request to a written inquiry made by the College
3. Failing to comply with an order or direction of a Committee of the College
4. Engaging in conduct that would be regarded by members of the profession as disgraceful, dishonourable, or unprofessional.

Ms. Chant admitted the conduct through an agreed statement of facts. The panel found that Ms. Chant had engaged in professional misconduct as set out above. It accepted a joint submission from the parties on penalty and ordered as follows:

- Ms. Chant was required to appear before the panel immediately following the hearing to be reprimanded, with a notation and summary of the reprimand to appear on the College's Public Register.
- The Registrar was directed to suspend Ms. Chant's Certificate of Registration for a period of six (6) weeks, commencing on the date of the order.
- The Registrar was directed to impose the following terms, conditions, and limitations on Ms. Chant's Certificate of Registration.
  - Ms. Chant is required to successfully complete all outstanding Quality Assurance Program requirements within six (6) months.
  - Ms. Chant is required to successfully complete the College's Jurisprudence Education Module within six (6) months.
  - Ms. Chant is required to respond within fifteen (15) days to all communications from the College that require a response, or such earlier time as specified in the communication.
- Ms. Chant was ordered to pay costs to the College of \$3,000 within ten (10) months.

The panel released its reasons for decision on August 6, 2021.





# PATIENT RELATIONS

The *Regulated Health Professions Act, 1991*, mandates that the College have a Patient Relations program. This program must include measures to help prevent and deal with sexual abuse of patients/clients. As such, the College and the Patient Relations Committee has put the following components of the CDHO's Sexual Abuse Prevention Plan (SAPP) in place.

## PANEL BUSINESS

1. A policy and clear process to provide funding and counselling for clients who allege they have been sexually abused by their Dental Hygienist or who have been sexually abused by their Dental Hygienist;
2. Education for Dental Hygienists and students regarding sexual abuse and boundary issues;
3. Guidelines for Dental Hygienists aimed at preventing and dealing with sexual abuse including *Prevention of Sexual Abuse of Clients* and *Professional Boundaries for Dental Hygienists in Ontario*;
4. Training for College staff;
5. Education and information regarding sexual abuse and boundaries aimed at the public in the "For the Public" section of the College's website at [cdho.org](http://cdho.org); and
6. Regular evaluation of the SAPP.

### As a part of this mandate, the Patient Relations program exists:

- to help the health professionals regulated by the College enhance relations with their clients, and by extension, the public;
- to help the public achieve greater understanding of the range and quality of the professional services offered by Registrants of the College;
- to help patients/clients be fully informed of their rights in dealing with members of the profession and the College, including that they will be treated in an ethical, competent, sensitive and respectful manner; and
- to help the public have a greater knowledge of the role of the regulatory College and how to participate in College processes and/or programs.



# PATIENT RELATIONS

## CONT'D

The members of the Patient Relations Committee met for orientation and policy review on October 26, 2021. The College takes the responsibility for the prevention of sexual abuse very seriously. Policies are in place to review and evaluate the plan on an annual basis and make updates when required.

### FUNDING FOR THERAPY AND COUNSELLING

On May 1, 2018, new sections of the *Protecting Patients Act, 2017* (Bill 87), which amended the *Regulated Health Professions Act, 1991* (RHPA), came into effect. Prior to this amendment, patients/clients were eligible for funding for therapy and counselling only after the Discipline Committee made a finding that they were sexually abused by a health professional while that person was a patient. The changes to the RHPA now allows colleges to provide such support to patients earlier when an allegation of sexual abuse by a Registrant is first received, which will allow members of the public to seek therapy or counselling at any time after the alleged abuse.

As a result of this change, the Patient Relations Committee approved amended policies and procedures related to funding for therapy and counselling and updated all application forms to ensure the efficient and timely access to funds.

To date, the College has not received any requests for funding.

### SPOUSAL EXCEPTION REGULATION

In 2015, the CDHO submitted a Spousal Exception Regulation to the government, which would permit Dental Hygienists to treat their spouses without it constituting sexual abuse as long as the Dental Hygienist was not engaged in the practice of the profession when the sexual conduct occurred. **The regulation was passed by the Ontario government on October 8, 2020.**

The Spousal Exception-related documents were updated (English and French versions)

- Prevention of Sexual Abuse and Maintenance of Professional Boundaries (May 2021)
- Instructors Guide: Prevention of Sexual Abuse of Clients



# FITNESS TO PRACTISE

The Fitness to Practise Committee conducts hearings and makes decisions about allegations of incapacity against registrants of the College. Fitness to Practise hearings are closed to the public.

There were no referrals to the Fitness to Practise Committee in 2021, therefore, the Committee did not meet.





# STAKEHOLDER ENGAGEMENT (SOCIAL MEDIA)

**5,700+**  
Facebook Followers

**750+**  
Twitter Followers

**1,800+**  
YouTube Subscribers

**1,400+**  
LinkedIn Followers

**17,100+**  
interactions  
*and*  
**345,000+**  
impressions  
on Facebook  
posts

**Interactions:**  
clicks, likes & shares

**Impressions:**  
number of times  
a post was viewed

**196**  
Subscribers  
Gained  
**515,220**  
Views  
**25,000+**  
Watch Time  
(Hours)

## TOP POSTS IN 2021

1. National Dental Hygienists Week / Oral Health Month: **39,475 Reach, 2022 Reactions, 261 Comments, 265 Shares**
2. Announcement on Second Provincial Emergency Declaration: **10,376 Reach, 125 Reactions, 143 Comments, 49 Shares**
3. Announcement of New Registrar/CEO Deborah Adams: **4,211 Reach, 58 Reactions, 29 Comments, 5 Shares**

WWW

**1,590** Visitors  
(**69% new**)

**3,600+**  
Page Views

## TOP VIDEO CONTENT

1. Setting the Record Straight Infection Prevention and Control (IPAC) Webinar (Published June 21, 2018): **7,200+ views**
2. Coronavirus (COVID-19) and Your Oral Health (Published: May 5, 2020): **7,000+ views**
3. CDHO Seven-Step Oral Cancer Self-Exam (2 mins) (Published: April 22, 2016): **4,200+ views**



# FINANCIAL STATEMENTS

## **COLLEGE OF DENTAL HYGIENISTS OF ONTARIO** **SUMMARY FINANCIAL STATEMENTS** DECEMBER 31, 2021

**HILBORN**<sub>LLP</sub>

## Report of the Independent Auditor on the Summary Financial Statements

To the Council of the College of Dental Hygienists of Ontario

### Opinion

The summary financial statements, which comprise the summary statement of financial position as at December 31, 2021, and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Dental Hygienists of Ontario (the "College") for the year ended December 31, 2021.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria described in the note to the summary financial statements.

### Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of the College and the auditor's report thereon.

### The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 10, 2022.

### Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria described in the note to the summary financial statements.

### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.



Toronto, Ontario  
June 10, 2022

Chartered Professional Accountants  
Licensed Public Accountants

**COLLEGE OF DENTAL HYGIENISTS OF ONTARIO****Summary Statement of Financial Position**

December 31	2021 \$	2020 \$
<b>ASSETS</b>		
Current assets		
Cash	6,205,648	5,789,467
Investments	1,708,521	1,690,263
Prepaid expenses	15,874	41,154
	<u>7,930,043</u>	<u>7,520,884</u>
Discipline cost recoverable	128,000	128,000
Investments	8,476,406	7,281,539
Capital assets	1,644,459	1,898,856
Intangible assets	191,834	349,708
	<u>10,440,699</u>	<u>9,658,103</u>
	<u>18,370,742</u>	<u>17,178,987</u>
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	272,328	489,408
Deferred registration fees	5,382,085	5,309,040
	<u>5,654,413</u>	<u>5,798,448</u>
Deferred lease incentives	159,975	182,297
	<u>5,814,388</u>	<u>5,980,745</u>
<b>NET ASSETS</b>		
Invested in capital and intangible assets	1,676,318	2,066,267
Internally restricted for complaints and discipline	2,000,000	2,000,000
Unrestricted	8,880,036	7,131,975
	<u>12,556,354</u>	<u>11,198,242</u>
	<u>18,370,742</u>	<u>17,178,987</u>

## COLLEGE OF DENTAL HYGIENISTS OF ONTARIO

### Summary Statement of Operations

Year ended December 31	2021 \$	2020 \$
Revenues		
Registration fees	5,846,055	5,872,670
Examination Fees	262,600	227,150
Investment income	196,309	210,046
	<b>6,304,964</b>	<b>6,309,866</b>
Expenses		
Salaries and benefits	2,520,796	2,655,810
Complaints and discipline	141,243	293,463
Public education	98,255	138,302
Consulting	43,101	56,125
Premises rent	402,781	423,830
Stationery, postage and printing	16,208	22,868
Examinations	67,306	26,476
Council fees and expenses	371,188	388,980
General and administrative	75,517	61,083
Merchant bank charges	131,996	126,444
Commission on dental accreditation	75,515	124,386
Quality assurance	206,830	280,196
Professional fees	67,776	89,654
Special project - clinical exam agreement	—	55,731
Information Technology	254,852	241,518
Telephone, website and internet	51,333	62,282
Amortization - capital assets	254,397	259,112
Amortization - intangible assets	157,874	163,053
	<b>4,936,968</b>	<b>5,469,313</b>
Excess of revenues over expenses before other expense	<b>1,367,996</b>	<b>840,553</b>
Other expense		
COVID-19 related	<b>9,884</b>	<b>59,535</b>
Excess of revenues over expenses for year	<b>1,358,112</b>	<b>781,018</b>

**COLLEGE OF DENTAL HYGIENISTS OF ONTARIO****Note to Summary Financial Statements**

December 31, 2021

**1. Basis of presentation**

These summary financial statements are derived from the audited financial statements of the College of Dental Hygienists of Ontario (the "College") for the year ended December 31, 2021, which were prepared in accordance with Canadian accounting standards for not-for-profit organizations.

Management prepared these summary financial statements using the following criteria:

- (a) the summary financial statements include a statement for each statement included in the audited financial statements, except for the statements of changes in net assets and cash flows;
- (b) information in the summary financial statements agrees with the related information in the audited financial statements; and
- (c) major subtotals, totals and comparative information from the audited financial statements are included.

The audited financial statements of the College are available to members upon request from the College.





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## BRIEFING NOTE WITH MOTION

**To:** Council  
**From:** Executive Committee  
**Date:** September 16, 2022  
**Topic:** Proposed Council Meeting Schedule 2023

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**Recommended Motion:**

**THAT** Council approves the proposed 2023 meeting dates.

	DATE	MEETING
1	Thursday, January 19, 2023	New Member Orientation
2	Friday, January 20, 2023	January Council Meeting
3	Thursday, March 30, 2023	Workshop
4	Friday, March 31, 2023	March Council Meeting
5	Thursday June 1, 2023, <b>or</b> Thursday June 8, 2023	Workshop
6	Friday, June 2, 2023, <b>or</b> Friday, June 9, 2023	June Council Meeting
7	Thursday, September 14, 2023, <b>or</b> Thursday, September 21, 2023	Workshop
8	Friday, September 15, 2023, <b>or</b> Friday, September 22, 2023	September Council Meeting
9	Thursday November 30, 2023, <b>or</b> Thursday December 7, 2023	Workshop
10	Friday, December 1, 2023, <b>or</b> Friday, December 8, 2023	December Council Meeting

**MOVED:**

**SECONDED:**

**CARRIED:**

**DEFEATED:**



## Council BRIEFING NOTE

<b>Meeting date:</b>	September 16, 2022
<b>Agenda item:</b>	President's Compensation
<b>Appendices</b>	DRAFT Revised policy of GP 7 (4) Council and Committee Stipend and Expenses
<b>Owner:</b>	Executive Committee
<b>Staff support:</b>	G. Pettifer

**Public protection rationale:** The College must demonstrate responsible stewardship of its financial and human resources in achieving its statutory and regulatory mandate. Effective and transparent policies to govern Council member remuneration support trust in the College's work to protect the public.

**Issue:** Remuneration for the Council member in the role of President does not consider work done outside formal meetings or in short increments. A fair, efficient, and transparent mechanism to compensate the President for this work is needed while ensuring that the College manages its financial resources to carry out its mandate.

**Source of Authority:** The College is required to regulate the profession in accordance with the [Health Professions Procedural Code](#) (the Code), which is Schedule 2 to the [Regulated Health Professions Act, 1991, S.O. 1991, c. 18](#).

The Code sets out the following related to remuneration of Council members:

### ***Remuneration and expenses***

**8** Council members appointed by the Lieutenant Governor in Council shall be paid, by the Minister, the expenses and remuneration the Lieutenant Governor in Council determines. 1991, c. 18, Sched. 2, s. 8; 2006, c. 19, Sched. L, s. 10 (1).

### ***By-laws***

**94 (1)** The Council may make by-laws relating to the administrative and internal affairs of the College and, without limiting the generality of the foregoing, the Council may make by-laws,

(h) providing for the remuneration of the members of the Council and committees other than persons appointed by the Lieutenant Governor in Council and for the payment of the expenses of the Council and committees in the conduct of their business;

Article 7.1 of CDHO's bylaws [Remuneration of Council Members](#) directs the following regarding Council member remuneration:

*(1) Any remuneration of Elected and Academic Members shall be set and reviewed at least once every three years by the Council.*

**Background:** At the June 10, 2022, Council meeting, Council directed staff to draft changes to GP 7 Council and Committee Stipend and Expenses policy to include remuneration of informal (or ad hoc) meetings at an hourly rate of \$72 for the President, to be adopted at the September Council meeting and reviewed next in December 2023.

**Proposed Changes to President Remuneration:**

That the President receive honoraria for ad hoc meetings with the CEO, Council members, and other stakeholders, at an hourly rate of \$72.

**Next steps:** Council is being asked to approve the changes to the Policy Manual as attached in Appendix A.

**Decision:**

**MOTION:**     **THAT** Council approve changes to the GP 7 Council and Committee Stipend and Expenses policy as attached in Appendix A.

Moved:

Seconded:

VOTE:

**Available Options:**

1. Pass the motion
2. Defeat the motion
3. Other

## Appendix A

### GP-7 Council and Committee Stipend and Expenses

Council members shall be paid an honorarium and reimbursed for reasonable expenses incurred in the conduct of Council-authorized College business.

1. All remunerations for public members on CDHO's Council will be governed by the guidelines issued by the Health Board Secretariat and are not covered in this policy.
  - 1.1. The President or Committee Chairs must identify work that may be required of public members outside properly constituted meetings. The Chair is responsible for advising staff of the expected frequency and duration of this work so that they can seek approval from the Secretariat prior to any claims being made by public members.
2. The stipulations that follow apply to those persons who are: (a) Dental Hygienists duly elected to Council by the registrants of the College, and (b) Dental Hygienists selected to serve on Council according to the bylaws.
  - 2.1. Remunerations for persons not covered above, or whose remuneration is to be calculated differently, will either have their remuneration outlined in the enabling motion passed by Council or through decision by the Executive Committee or at the discretion of the Registrar.
3. A per diem is an honorarium in recognition of the contribution to CDHO and its registrants. This per diem is not a salary nor is it to be considered salary replacement. A T4A is issued for taxation purposes.
4. Daily per diem rates are reviewed annually and adjusted to reflect the appropriate Cost of Living index. Per diem rates are set for 2020 as follows:
  - Member of Council or Committee (basic) - \$308.00
  - Chair of Committee – Member + 25%
  - President of Council – Member + 40%
  - Vice-President of Council – Member + 25%
  - 4.1. The maximum claim for any one calendar day is one day's per diem.
  - 4.2. The supplemented rate for the Committee Chair can only be claimed when the individual is assuming the role of Chair at a committee meeting; it cannot be claimed when attending a meeting as a member of another committee or attending a Council meeting.
  - 4.3. The supplemented rate for the Chair and Vice Chair roles is recognition for the extra responsibilities inherent in these roles including preparing the agenda, chairing the meeting, writing reports to Council and preparing information for the Annual Report. The President and Vice-President are reimbursed at the supplemented rate for Council and Executive Meetings and any other occasion when they act as an official representative of the College.
  - 4.4. For meetings outside of Council and Executive Committee meetings scheduled for or lasting less than three hours, the President will be reimbursed at an hourly rate of \$72, rounded up to the hour. If more than one meeting is held on the same day, the

President will be reimbursed on an hourly basis or receive a half-day per diem plus additional hours at the hourly rate – whichever is less.

5. Per Diem is paid for attendance at any face-to-face meeting to conduct Council or Committee business. It is also paid for participating in properly constituted telephone or electronic meetings. With prior notice to staff, per diem can also be paid for working sessions that may not take place as preparation for or within a properly constituted meeting. For the purpose of calculating Per Diem, a meeting scheduled for or lasting up to three hours will be deemed to be a half-day and a meeting scheduled for or lasting more than three hours will be deemed to be a full day. Extenuating circumstances will be referred to the President for resolution.
  - 5.1. A “day” means within a calendar date (12:01 a.m. – midnight).
  - 5.2. The minutes of any meeting wherein a per diem may be claimed must record those in attendance and the times of Call to Order and Adjournment. These records will be the official base for per diem claims.
  - 5.3. When a scheduled meeting is cancelled within five (5) business days of the meeting, a claim for one day’s per diem may be allowed at the discretion of the President.
6. When a member is so authorized by Council or pre-approved by the President to represent the College, the regular per diem and expense stipulation will apply. Any additional honorarium, if offered, must be declined or endorsed over to CDHO; small non-monetary tokens of appreciation are exempted.
7. An honorarium for approved preparation time, when approved, shall be paid on the following basis: ¼ day = \$25.00; ½ day = \$50.00; 1 day = \$100.00
  - 7.1. Committee Chairs must poll Committee members as to the time spent preparing for their meeting and come to a consensus. Following the meeting, the Chair must request approval from the President for preparation time. The Chair is responsible to advise Committee members of the approved amount of preparation time that may be claimed.
    - 7.1.1. Preparation time is paid at the discretion of the President. The President will inform the Registrar and Director of Corporate Services of any amounts approved at the time of approval.
8. Travel time of \$200.00 will be paid per meeting for a round-trip to conduct Council business, when a Council member must travel more than two (2) hours, one-way, regardless of when the travel is undertaken.
9. Travel expenses eligible to be reimbursed:
  - Air: Economy class round trip by the most direct route or most feasible under the circumstances, including ground transportation from home or office to and from the airport.
  - Train: VIA 1 class round trip by the most direct route including ground transportation from home or office, to and from the railway station.
  - Mileage: Mileage will be paid at the current provincial government rate as long as the total mileage to be claimed does not exceed the cost of Air or Train travel as described in the preceding two bulleted statements, without prior approval of the President.
  - Parking and taxi expenses are reimbursed as per receipt. Receipt for taxi can include gratuity.

- Public Transportation will be reimbursed as per standard fare. Receipts must include documentation showing route and cost associated with it.
10. Expenses for hotel accommodation will be reimbursed when the distance from the home residence to the meeting location exceeds 45 km. Council members are expected to make their own reservations and secure the best rate possible. Reimbursement is based on single room rate to \$250.00 per night (excluding taxes) maximum.
    - 10.1. The President may authorize reimbursement of hotel expense in the event of consecutive days of required meeting attendance regardless of the distance to the meeting from home residence.
    - 10.2. Hotel accommodation will not be reimbursed for the night before an afternoon meeting unless pre-authorized by the President.
    - 10.3. The President may pre-approve reimbursement of hotel accommodation in excess of the \$250 per night maximum in the event accommodation is unavailable at less than the maximum, or in the event of special circumstances, e.g., meetings held in cities where hotel rates exceed those in Toronto.
  11. Expenses for meals will be reimbursed at the actual cost to a daily maximum of \$90 where the maximum total amount for breakfast and lunch is \$40.00, and the maximum amount for dinner is \$50.00. Receipts inclusive of tax and tip must be submitted with the expense claim form. Expenses for alcoholic beverages will not be reimbursed.
  12. Expenses incurred for gratuities will be reimbursed to a maximum of \$10.00 per day for expenses other than gratuities included in receipts for meals and taxis. Examples for gratuities are hotel room, valet parking, bell person gratuities.
  13. Incidental receipted expenses for telephone, fax, postage, photocopying, courier, etc. and costs for related College business are eligible for reimbursement.
  14. Non-refundable expenses incurred in advance of a cancelled meeting may be claimed for reimbursement but must be accompanied by receipts and a detailed explanation.
  15. Individually purchased travel insurance is not eligible to be reimbursed. The College carries travel insurance that covers those traveling on CDHO official business including loss of life and disability insurance.
  16. Expenses being reimbursed by another source shall not be eligible for reimbursement by the College.
  17. Receipts are required in support of all expense claims. Claimants are expected to be cost conscious at all times.
  18. Claims are to be submitted within 30 days following the dates of the events upon which the claims are based. All claims for a fiscal year must be received for processing within 15 days of the close of that fiscal year, i.e., December 15<sup>th</sup>.
  19. Claims will be processed within 30 days; same day payment is not to be expected. Direct deposit is available if Individuals submit a voided cheque.
  20. A member may apply to the Registrar for consideration of early reimbursement or an advance of funds to be used towards travel. Per diems will not be paid in advance. The Registrar's decision will be at her/his discretion.

## BRIEFING NOTE WITH MOTION

<b>Meeting date:</b>	September 16, 2022
<b>Agenda item:</b>	7.3 Policy Content Review: GP 7 Council and Committee Stipend and Expenses
<b>Appendices:</b>	DRAFT Revised policy of GP 7 Council and Committee Stipend and Expenses
<b>References</b>	Statistics Canada (2022). <i>Consumer Price Indexes</i> <a href="https://www.statcan.gc.ca/en/subjects-start/prices-and-price-indexes/consumer-price-indexes">https://www.statcan.gc.ca/en/subjects-start/prices-and-price-indexes/consumer-price-indexes</a>
<b>Owner:</b>	Executive

**Issue:** GP-7 (4) Council and Committee Stipend and Expenses states that Council honorarium will be reviewed annually and adjusted to reflect the appropriate cost of living index. This section has not been reviewed since 2020.

**Public protection rationale:** The College must demonstrate responsible stewardship of its financial and human resources in achieving its statutory objectives and regulatory mandate. Effective and transparent policies to govern Council member remuneration support trust in the College's work to protect the public.

**Source of Authority:** The College is required to regulate the profession in accordance with the [Health Professions Procedural Code](#) (the Code), which is Schedule 2 to the [Regulated Health Professions Act, 1991, S.O. 1991, c. 18](#).

The Code sets out the following related to remuneration of Council members:

### **Remuneration and expenses**

8 Council members appointed by the Lieutenant Governor in Council shall be paid, by the Minister, the expenses and remuneration the Lieutenant Governor in Council determines. 1991, c. 18, Sched. 2, s. 8; 2006, c. 19, Sched. L, s. 10 (1).

### **By-laws**

94 (1) The Council may make by-laws relating to the administrative and internal affairs of the College and, without limiting the generality of the foregoing, the Council may make by-laws.

Article 7.1 of [CDHO's bylaws Remuneration of Council Members](#) directs the following with regards to Council member remuneration:

(1) Any remuneration of Elected and Academic Members shall be set and reviewed at least once every three years by the Council.

(2) Any remuneration of Non-Council Committee Members and others shall be set by the Registrar.

(3) The information in Article 7.1(1)(2) shall be posted on the College's website.

Article 4.0 [Meetings of Council](#) and Article 5.9 [Procedures for Meetings of Committees](#) outlines meeting requirements including the need for notice, quorum and meetings.

**Background:** Council policy GP-7 (4) indicates that professional member honorarium will be reviewed annually and adjusted to reflect the appropriate cost of living index. The CDHO uses the Consumer Price Index as published by Statistics Canada. According to Statistics Canada the "Consumer Price Index is one of the most widely used measures of inflation". This index can be used to calculate the price change between any 2 periods, the most commonly used calculation being the 12-month % change. This is used because the CPI represents changes in prices as experienced by Canadian consumers. It measures price change by comparing, through time, the cost of a fixed basket of goods and services.

Statistics Canada published that as of July 2022 the CPI increased by 7.6% in the last 12 months.

4.3 The changes clarify terminology i.e. President and Vice President to maintain consistent within the policy. In addition, the President and Vice President of Council are reimbursed with a supplemental rate due to additional responsibilities required for council meetings and workshops, this however, does not apply to committee work. Therefore, it would be inappropriate to claim the chair or vice chair rate when they were not the chair or vice chair for that committee. This has been clarified in the proposed changes.

20. Funds used for reimbursement for travel are allocated for in the governance budget. With this being a governance item, it is appropriate for the Council member to apply to the President of Council with their request who would then, if approved, forward it to the Registrar for approval of disbursement of funds. In addition, with an inclusion focus, policies ought to be modified to ensure appropriate gender terms are referenced throughout.

**Next steps:** Council is being asked to vote on the proposed revisions to policy GP-7 Council and Committee Stipend and Expenses (attached as Appendix A).

**Decision:**

**MOTION: THAT** Council approve the revised GP-7 Council and Committee Stipend and Expenses policy as presented in Appendix A.

Moved:

Seconded:

VOTE:

**Available Options:**

1. Pass the motion
2. Defeat the motion
3. Other



## GP-7 Council and Committee Stipend and Expenses

Council members shall be paid an honorarium and reimbursed for reasonable expenses incurred in the conduct of Council-authorized College business.

1. All remunerations for public members on CDHO's Council will be governed by the guidelines issued by the Health Board Secretariat and are not covered in this policy.
  - 1.1. The President or Committee Chairs must identify work that may be required of public members outside properly constituted meetings. The Chair is responsible for advising staff of the expected frequency and duration of this work so that they can seek approval from the Secretariat prior to any claims being made by public members.
2. The stipulations that follow apply to those persons who are: (a) Dental Hygienists duly elected to Council by the registrants of the College, and (b) Dental Hygienists selected to serve on Council according to the bylaws.
  - 2.1. Remunerations for persons not covered above, or whose remuneration is to be calculated differently, will either have their remuneration outlined in the enabling motion passed by Council or through decision by the Executive Committee or at the discretion of the Registrar.
3. A per diem is an honorarium in recognition of the contribution to CDHO and its registrants. This per diem is not a salary nor is it to be considered salary replacement. A T4A is issued for taxation purposes.
4. Daily per diem rates are reviewed annually and adjusted to reflect the appropriate Cost of Living index. Per diem rates are set for 2020/23 as follows:
  - Member of Council or Committee (basic) - ~~\$308.00~~ 329.56
  - Chair of Committee – Member + 25%
  - President of Council – Member + 40%
  - Vice-President of Council – Member + 25%
  - 4.1. The maximum claim for any one calendar day is one day's per diem.
  - 4.2. The supplemented rate for the Committee Chair can only be claimed when the individual is assuming the role of Chair at a committee meeting; it cannot be claimed when attending a meeting as a member of another committee or attending a Council meeting.
  - 4.3. The supplemented rate for the ~~Chair~~ President and Vice ~~Chair~~ President roles is recognition for the extra responsibilities inherent in these roles including preparing the agenda, chairing the meeting, writing reports to Council and preparing information for the Annual Report. The President and Vice-President are reimbursed at the supplemented rate for Council and Executive Meetings and any other occasion when they act as an official representative of the College; **it cannot be claimed when attending a meeting as a member of another committee.**
5. Per Diem is paid for attendance at any face-to-face meeting to conduct Council or Committee business. It is also paid for participating in properly constituted telephone or electronic meetings. With prior notice to staff, per diem can also be paid for working sessions that may not take place as preparation for or within a properly constituted meeting. For the purpose of calculating Per Diem, a meeting scheduled for or lasting up to three hours will be deemed to be a half-day and a meeting scheduled for or lasting more than three hours will be deemed to be a full day. Extenuating circumstances will be referred to the President for resolution.

- 5.1. A “day” means within a calendar date (12:01 a.m. – midnight).
- 5.2. The minutes of any meeting wherein a per diem may be claimed must record those in attendance and the times of Call to Order and Adjournment. These records will be the official base for per diem claims.
- 5.3. When a scheduled meeting is cancelled within five (5) business days of the meeting, a claim for one day’s per diem may be allowed at the discretion of the President.
6. When a member is so authorized by Council or pre-approved by the President to represent the College, the regular per diem and expense stipulation will apply. Any additional honorarium, if offered, must be declined or endorsed over to CDHO; small non-monetary tokens of appreciation are exempted.
7. An honorarium for approved preparation time, when approved, shall be paid on the follow basis: ¼ day = \$25.00; ½ day = \$50.00; 1 day = \$100.00
  - 7.1. Committee Chairs must poll Committee members as to the time spent preparing for their meeting and come to a consensus. Following the meeting, the Chair must request approval from the President for preparation time. The Chair is responsible to advise Committee members of the approved amount of preparation time that may be claimed.
    - 7.1.1. Preparation time is paid at the discretion of the President. The President will inform the Registrar and Director of Corporate Services of any amounts approved at the time of approval.
8. Travel time of \$200.00 will be paid per meeting for a round-trip to conduct Council business, when a Council member must travel more than two (2) hours, one-way, regardless of when the travel is undertaken.
9. Travel expenses eligible to be reimbursed:
  - Air: Economy class round trip by the most direct route or most feasible under the circumstances, including ground transportation from home or office to and from the airport.
  - Train: VIA 1 class round trip by the most direct route including ground transportation from home or office, to and from the railway station.
  - Mileage: Mileage will be paid at the current provincial government rate as long as the total mileage to be claimed does not exceed the cost of Air or Train travel as described in the preceding two bulleted statements, without prior approval of the President.
  - Parking and taxi expenses are reimbursed as per receipt. Receipt for taxi can include gratuity.
  - Public Transportation will be reimbursed as per standard fare. Receipts must include documentation showing route and cost associated with it.
10. Expenses for hotel accommodation will be reimbursed when the distance from the home residence to the meeting location exceeds 45 km. Council members are expected to make their own reservations and secure the best rate possible. Reimbursement is based on single room rate to \$250.00 per night (excluding taxes) maximum.
  - 10.1. The President may authorize reimbursement of hotel expense in the event of consecutive days of required meeting attendance regardless of the distance to the meeting from home residence.
  - 10.2. Hotel accommodation will not be reimbursed for the night before an afternoon meeting unless pre-authorized by the President.

- 10.3. The President may pre-approve reimbursement of hotel accommodation in excess of the \$250 per night maximum in the event accommodation is unavailable at less than the maximum, or in the event of special circumstances, e.g., meetings held in cities where hotel rates exceed those in Toronto.
11. Expenses for meals will be reimbursed at the actual cost to a daily maximum of \$90 where the maximum total amount for breakfast and lunch is \$40.00, and the maximum amount for dinner is \$50.00. Receipts inclusive of tax and tip must be submitted with the expense claim form. Expenses for alcoholic beverages will not be reimbursed.
12. Expenses incurred for gratuities will be reimbursed to a maximum of \$10.00 per day for expenses other than gratuities included in receipts for meals and taxis. Examples for gratuities are hotel room, valet parking, bell person gratuities.
13. Incidental receipted expenses for telephone, fax, postage, photocopying, courier, etc. and costs for related College business are eligible for reimbursement.
14. Non-refundable expenses incurred in advance of a cancelled meeting may be claimed for reimbursement but must be accompanied by receipts and a detailed explanation.
15. Individually purchased travel insurance is not eligible to be reimbursed. The College carries travel insurance that covers those traveling on CDHO official business including loss of life and disability insurance.
16. Expenses being reimbursed by another source shall not be eligible for reimbursement by the College.
17. Receipts are required in support of all expense claims. Claimants are expected to be cost conscious at all times.
18. Claims are to be submitted within 30 days following the dates of the events upon which the claims are based. All claims for a fiscal year must be received for processing within 15 days of the close of that fiscal year, i.e., December 15<sup>th</sup>.
19. Claims will be processed within 30 days; same day payment is not to be expected. Direct deposit is available if Individuals submit a voided cheque.
20. A member may apply to the ~~Registrar~~ **President** for consideration of early reimbursement or an advance of funds to be used towards travel. Per diems will not be paid in advance. The ~~Registrar~~ **President**'s decision will be at her/his/**their** discretion.

## Council BRIEFING NOTE

<b>Meeting date:</b>	September 16, 2022
<b>Agenda item:</b>	Amendment to GP Governance Succession Planning
<b>References:</b>	Appendix A (GP 10 Governance Succession Planning) Appendix B (Prospective and Newly Elected Council Members and the CDHO Competency Profile)
<b>Owner:</b>	Executive Committee
<b>Staff support:</b>	G. Pettifer

**Issue:** In 2021, Council adopted a competency framework for Council and Committee members. Council also discussed approaches for onboarding of Council and Committee members. Council directed further development and implementation of these plans by staff and the Competency Profile Committee. Changes to the Council Policy Manual are needed to implement the plan.

**Public protection rationale:** As the regulatory body charged with ensuring that Ontario's Registered Dental Hygienists provide safe, ethical, and competent dental hygiene care to Ontarians, the CDHO has the responsibility to establish a framework that assists in ensuring that Council and committee members possess the knowledge, skills and experience to execute their responsibilities. The articulation of a competency framework that speaks to individual and organizational competencies is a necessary component in this framework. In addition to the articulation of the framework, the particulars of its implementation also contribute to supporting an active competency profile for Council and committee members across all CDHO statutory and governance activities.

**Source of Authority:** The **College Performance Management Framework (CPMF)** includes the following standard:

1. *Council and Statutory Committee members have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College.*

The measures related to this standard require that Council and Statutory Committee members demonstrate that they have the knowledge, skills and commitment prior to becoming a member. Evidence related to this measure include:

- a. *Professional members are eligible to stand for election to Council only after:*
  - i. *meeting pre-defined competency / suitability criteria*

*b. Statutory Committee candidates have:*

- i. met pre-defined competency / suitability criteria, and attended an orientation training about the mandate of the Committee and expectations pertaining to a member's role and responsibilities.*

**Background:**

At the December 3, 2021, Council meeting, Council approved an implementation plan to screen applicants to Council and committees prior to their election or appointment and directed the Competency Profile Committee to further develop and implement the plan.

The changes in Appendix A, if approved, would apply to the 2022 Council elections and would ensure the CDHO is compliant with the CPMF.

**Next steps:** Council is being asked to approve the changes to the GP 10 policy.

**Decision:**

**MOTION:**     **THAT** Council approve changes to the GP 10 Governance Succession Planning policy as attached in Appendix A.

Moved:

Seconded:

VOTE:

**Available Options:**

1. Pass the motion
2. Defeat the motion
3. Other

## Appendix A

### GP-10 GOVERNANCE SUCCESSION PLANNING

The Council shall make known to those who are considering being a candidate or nominating a candidate for positions on Council, or those appointing Council members, the characteristics, expertise, and commitment that are consistent with the Council's commitment to excellence in governance.

1. The Council shall promote its interest in candidates or public appointees who have the following characteristics that will enable them to govern, not to manage:
  - Commitment to linking with the ownership. Understanding that they stand in for an ownership of diverse people; willing to actively seek to access and understand that diversity.
  - Ability to think in terms of systems and context — to see the big picture.
  - Interest in and capability to discuss the values underlying the actions taken in the organization, and to govern through the broader formulations of these values.
  - Willingness to delegate the operational detail to others.
  - Ability and willingness to deal with vision and the long term, rather than day- to-day details.
  - Ability and willingness to participate assertively in deliberation, while respecting the opinions of others.
  - Willingness and commitment to honour Council decisions.
  - Commitment not to make judgments in the absence of previously stated criteria
2. The Council shall promote its interest in candidates with professional expertise in one or more of the following areas:
  - Dental hygiene
  - Health care sector
  - Business: small business, entrepreneurship, corporate
  - Academia, research, or education
  - Communication, finance, human resources, information technology, law, marketing, public relations
  - Non-profit leadership: executive or governance
3. The Council shall emphasize the importance of having candidates who believe in the value of protecting the public interest through regulation of health professionals and understand the role of the CDHO.
4. Eligible members of the profession considering standing for election as a Professional or Academic Member of Council, are required to attend an orientation session prior to election. This session will outline the College's regulatory structure and mandate, governance structure, Council Member competency profile and expectations regarding commitment to participation as an active Member of Council.



## Appendix B

### Prospective and Newly Elected Council Members and the CDHO Competency Profile

**Background.** Primarily in response to Domain 1: Standard 1 (Governance: Demonstration of Knowledge, Skills and Commitment) outlined in the College Performance Measurement Framework, the CDHO developed and adopted (June 11, 2021) a Council and Committee member competency profile.

**Messaging.** The broader categories of Knowledge, Skills and Commitment included in the Competency Profile will be articulated in the call for Nominations for members of the Profession to stand for election to Council. These broad categories include: Governance; Diversity, Equity, Inclusion, and Accessibility; Financial Literacy; Strategic Management; Risk Management; Public Interest; Health Profession Regulatory Framework; Provincial Health Care Delivery Systems. The call for nominations will ensure an inclusive rather than exclusive approach to injecting the Competency Profile into the Council member selection and training process.

**Post-Nomination/Appointment.** Candidates for election to Council as members of the Profession are assisted in determining their commitment to the work of this position by attending an Orientation session for individuals who have been nominated to stand for the current election(s). All nominees are required to attend a 2–3-hour orientation plus question-and-answer session presented by the Registrar and the current President. This presentation will include information about the College mandate, regulatory framework, organizational framework, statutory responsibilities, review of the Dental Hygiene profession, current CDHO initiatives, Code of Conduct, and commitment expectations for elected members of Council. This presentation will be offered prior to the election so that individuals who are unable to commit to the anticipated work required by the position can withdraw their candidacy.

A similar presentation is made to members of the public who are appointed to the CDHO Council by the Lieutenant Governor in Council closely following the appointment.

**Self-Assessment.** Once an individual has been appointed by the Lieutenant Governor in Council or elected or acclaimed in a Council member election, they will be asked to complete the Self Assessment survey that reviews Knowledge, Skills and Commitment based on the Council-approved Competency Framework. [It may be a reasonable approach at the beginning of the New Year to ask every member of Council to complete the Self-Assessment Survey so that the aggregate information can be used to plan for Council member education and training in the immediate and intermediate terms.]

**Post-appointment/election Boot Camp.** Once an election has been completed, the newly elected members of Council and any newly appointed public members of Council will attend an 8-hour “boot camp” that will cover the following topics:



- A. Governance Process:** review of CDHO's governance process, consideration of servant leadership, one voice, strategy development and monitoring
- B. Health Care (Oral and General) Delivery System in Ontario, the Regulatory Context, and the Public Interest**
- C. Financial Oversight:** financial oversight, the audit process
- D. Risk Management:** effective risk management, risk identification and mitigation strategies
- E. IDEA (Inclusivity, Diversity, Equity and Accessibility) and Human Rights in the Regulatory Context**
- F. Council Member Up-Skill:** technological competence, self-assessment of skills, opportunities for continuing education/training, communication skills, expectations of Council members (presence, preparedness); Mentor program details
- G. Critical Thinking:** how to analyze and interpret data and research reports
- H. Conflicts of Interest:** identifying and managing conflicts of interest; bias
- I. The Ideal Regulator and Right Touch Regulation:** a consideration of the characteristics of regulatory best practices: proportionate, accountable, transparent, consistent, targeted, agile
- J. Dental Hygiene 101.** A review of the dental hygiene practice sectors and associated activities to familiarize newly appointed public members of Council with the profession.

This curriculum will serve as the foundation of the Council training that is designed to support knowledge, skills, and commitment in the areas articulated in the Competency Profile.

**Further Training.** Results from the Self-Assessment profile will serve to inform the topics for additional Council training activities.

It may be a useful activity to have Council members repeat the Self-Assessment survey at the end of the Council year (December) to assess whether the training provided during the year has impacted the self-assessment measures.

## BRIEFING NOTE

**To:** Council

**From:** Chair

**Date:** September 16, 2022

**Topic:** Policy Content Review: GP-3 Council Planning and Cycle Agenda Review

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The following changes are being proposed:

2 – We do not have a Council meeting in January/February that would include policy content review on the agenda. The January meeting is for the election of the Executive Committee and the first full meeting is in March. This modification clarifies that Council should review their agendas to allow for the inclusion and consideration of items additional to those outlined in the multi-year schedule.

2.4.1 – This statement is out of date as we had revoked this policy statement previously.

2.5 – When the policy manual was renumbered when moving to BoardEffect, this number was not changed. GP-9 is the accurate policy number it is referencing.

**MOTION:** **THAT** Council approve the changes to the GP-3 Council Planning and Cycle Agenda Review policy as attached in Appendix 1 to eliminate duplication.

**Moved:**

**Seconded:**

**VOTE:**

## Appendix 1

### GP-3 Council Planning Cycle and Agenda Control

To accomplish its job products with a governance style consistent with Council policies, the Council will follow an annual agenda which (a) completes a re- exploration of Ends policies annually and (b) continually improves Council performance through Council education and enriched input and deliberation.

1. The Council will convene a minimum of four meetings annually and will normally meet on a quarterly basis. The annual planning cycle is January 1 to December 31.
2. The Council shall maintain control of its own agenda by developing a multi- year cycle and an annual schedule that includes all elements of the Council's work. Annually ~~at its January/February meeting,~~ the Council will ~~plan review~~ its ~~one-year goals annual schedule~~ and related meeting agendas ~~and modify as required to accommodate any additional projects or priorities.~~ [See multi-year cycle at the end of this policy.]
  - 2.1. Review of the Ends in a timely fashion which allows the Registrar/CEO to build a budget based on accomplishing a one-year segment of the Council's most recent statement of long-term ends.
  - 2.2. Linkage with the ownership to gain a representative mix of owner values, perceptions and expectations, prior to the above review.
  - 2.3. Education related to Ends determination (for example, presentations relating to the external environment, demographic information, exploration of future perspectives which may have implications, presentations by advocacy groups and staff).
  - 2.4. Content review of selected Executive Limitations, Governance Process and Council – Registrar Delegation policies, consistent with a multi-year schedule that includes all policies.
    - ~~2.4.1. Every three years, beginning in 2018, review of its policy on continuing benefits to retired employees.~~
  - 2.5. Self-evaluation of the Council's own compliance with selected Governance Process and Council – Registrar Delegation policies, consistent with the schedule in the policy, GP ~~4.13-9~~ (Investment in Governance).
  - 2.6. Documentation of monitoring compliance by the Registrar with Executive Limitations and Ends policies. Monitoring reports will be read in advance of the Council meeting, and discussion will occur only if Council members assess interpretations as unreasonable, identify non-compliance, or identify potential need for policy amendments.
  - 2.7. Education about the process of governance.
3. Based on the annual schedule and specific Council-confirmed goals for the year ahead, the Council delegates to the Chair the authority to fill in the details of the meeting content. Potential agenda items shall be carefully screened. Screening questions shall include:
  - Clarification as to whether the issue clearly belongs to the Council or the Registrar.
  - Identification of what category an issue relates to – Ends, Executive Limitations, Governance Process, Council-Registrar Delegation.
  - Review of what the Council has already said in this category, and how the current issue is related.
- 3.1. The Council delegates the Chair the authority to confirm the agenda and meeting material for Council's public meeting prior to their publication.

4. Throughout the year, the Council will attend to Required Approvals Agenda items as expeditiously as possible. When an item is brought to the Council via the Required Approvals Agenda, provided that compliance with all of the criteria in Executive Limitations has been demonstrated, the Council will not discuss the item prior to approval.

MULTI-YEAR CYCLE SCHEDULE						
Policy No.	Policy Content Review	Year 4 (2020)	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)
	Overall Public Benefit Ends Policy	Jun.	Jun.	Jun.	Jun.	Jun.
E 1	Safe High Quality Professional Practice	Jun.	Jun.	Jun.	Jun.	Jun.
E 2	Engagement with Other Professionals	Jun.	Jun.	Jun.	Jun.	Jun.
E 3	Health System and Public Policy Influence	Jun.	Jun.	Jun.	Jun.	Jun.
E 4	Public Awareness and Access to Benefits	Jun.	Jun.	Jun.	Jun.	Jun.
	General Executive Constraint		Mar.	Mar.	Mar.	Mar.
EL 1	Treatment of the Public and Registrants		Dec.	Dec.	Dec.	Dec.
EL 2	Treatment of Staff	Sep.	Sep.	Sep.	Sep.	Sep.
EL 3	Planning	Sep.	Mar./Sep.	Mar./Sep.	Mar./Sep.	Mar./Sep.
EL 4	Financial Conditions and Activities	Sep.	Sep.	Sep.	Sep.	Sep.
EL 5	Protection of Assets	Dec.	Dec.	Dec.	Dec.	Dec.
EL 6	Investment	Sep.	Sep.	Sep.	Sep.	Sep.
EL 7	Compensation and Benefits		Mar.	Mar.	Mar.	Mar.
EL 8	Communication and Support to Council		Mar.	Mar.	Mar.	Mar.
EL 9	Ethical Behaviour	Sep.	Sep.	Sep.	Sep.	Sep.
EL 10	Development of Standards Governing Practice	Dec.	Dec.	Dec.	Dec.	Dec.
EL 11	Amendments to the Act or Bylaws	Dec.	Dec.	Dec.	Dec.	Dec.
	Global Council-Registrar/CEO Delegation		Dec. 2021			
CRD 1	Unity of Control	Jun. 2020				Jun. 2024
CRD 2	Accountability of the Registrar/CEO				Dec. 2023	
CRD 3	Delegation to the Registrar/CEO				Dec. 2023	
CRD 4	Monitoring Registrar/CEO Performance		Sep. 2021		Sep. 2023	
CRD 5	Registrar/CEO Compensation		Sep. 2021		Sep. 2023	
CRD 6	Registrar/CEO Succession		Jun. 2021			
CRD 7	Registrar/CEO Termination		Jun. 2021			
	Global Governance Process	Dec. 2020				Dec. 2024
GP 1	Governing Style	Jun. 2020				Jun. 2024
GP 2	Council Job Contributions				Mar. 2023	
GP 3	Council Planning Cycle and Agenda Control			Sept. 2022		
GP 4	President's Role		Mar. 2021			
GP 5	Vice-President's Role		Mar. 2021			
GP 6	Council Committee Principles	Sep. 2020				Sep. 2024
GP 6.1	Executive Committee Terms of Reference		Mar. 2021		Mar. 2023	
GP 6.2	Ownership Linkage Committee Terms of Reference			Jun. 2022		

MULTI-YEAR CYCLE SCHEDULE						
Policy No.	Policy Content Review	Year 4 (2020)	Year 1 (2021)	Year 2 (2022)	Year 3 (2023)	Year 4 (2024)
GP 6.3	Registrar/CEO Transition Committee Terms of Reference	Sep. 2020				Sep. 2024
GP 6.4	Conduct Committee Terms of Reference			Sep. 2022		Sep. 2024
GP 7	Council and Committee Stipend and Expenses		Dec. 2021		Dec. 2023	
GP 8	Council Code of Conduct		Dec. 2021		Dec. 2023	
GP 9	Investment in Governance	Mar. 2020				Mar. 2024
GP 10	Governance Succession Planning	Mar. 2020				Mar. 2024
GP 11	Council Linkage with Ownership			Jun. 2022		
GP 12	Special Rules of Order				Sep. 2023	
GP 13	In-Camera Sessions	Dec. 2020				Dec. 2024
Council Education		Quarterly	Quarterly	Quarterly	Quarterly	Quarterly
CEO Compensation Decision		Jun. 2020	Jun. 2021	Jun. 2022	Jun. 2023	Jun. 2024
Selection of Auditor		Jun. 2020	Jun. 2021	Jun. 2022	Jun. 2023	Jun. 2024
New Council Member Orientation		Jan. 2020	Jan. 2021	Jan. 2022	Jan. 2023	Jan. 2024

## **BRIEFING NOTE**

**To:** Council

**From:** Chair

**Date:** September 16, 2022

**Topic:** Policy Content Review: GP 6.4 Conduct Committee Terms of Reference

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No changes proposed. Council will review and discuss if any changes should be made to the GP 6.4 Conduct Committee Terms of Reference policy.

## GP-6.4 Conduct Committee Terms of Reference

The Conduct Committee will assist the Council in enforcing upon itself the self-discipline needed to govern with excellence by considering and determining complaints made about Council or Committee members pursuant to the Council Code of Conduct as specified in the CDHO bylaws, articles 3.7 through 3.9.

1. Determinations with regard to Code of Conduct complaints when it has not been possible to resolve the complaint through informal means.
  - 1.1. Upon conclusion that a formal resolution is not warranted, a report to the Executive Committee at its immediate next meeting documenting the Conduct Committee's investigation process and rationale for its conclusion.
  - 1.2. Upon conclusion that a formal resolution is warranted, a report to the Executive Committee at its immediate next meeting documenting the Conduct Committee's investigation process and formal determination.
2. The committee's authority enables it to assist the Council in its work, while not interfering with Council holism.
  - 2.1. The committee must carry out its mandate in conformance to articles 3.7 through 3.9 and article 5.8 of the CDHO bylaws.
    - 2.1.1. A quorum of the committee shall be three persons, at least one of whom is a public member.
  - 2.2. The committee has no authority to contravene or change Council policies.
  - 2.3. The committee has the authority to spend funds as required in accordance with its Council-approved budget for meetings and other activities.
  - 2.4. The committee will meet as required after a complaint has been filed with it. Meetings can be face to face or teleconference.
  - 2.5. The committee has authority to use the Registrar/CEO and or staff designated by the Registrar/CEO for administrative support of its activities.
  - 2.6. The committee may use staff resource time consistent with the Registrar's interpretation of a reasonable amount for administrative support to assist with investigation and determination of any complaints made about Council or committee members pursuant to the Council Code of Conduct.
  - 2.7. The committee has the authority to delegate preparatory work for any of its product to one or more of its members. Whenever the committee delegates to two or more of its members, at least one member shall be a public member.
  - 2.8. The committee has the authority to meet without the Registrar/CEO.
  - 2.9. The committee does not have the authority to instruct the Registrar/CEO or any other staff member, other than to request support required in the conduct of its duties.
3. The committee shall comprise three to five persons who are members of the Councils of Ontario regulatory colleges other than the CDHO, at least one of whom is a public member. All members shall be appointed annually by Council at the beginning of the year.
  - 3.1. The committee chair shall be elected by the committee at its first meeting from among its members.



## **BRIEFING NOTE**

**To:** Council

**From:** Chair

**Date:** September 16, 2022

**Topic:** Policy Content Review: EL 3

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**MOTION:** **THAT** Council approve the changes to the EL 3 Planning policy as attached in Appendix 1 to eliminate duplication.

**Moved:**

**Seconded:**

**VOTE:**

## Appendix 1

### EL-3 Planning

The Registrar/CEO shall not permit planning that allocates resources in a way that deviates materially from Council-stated Ends priorities, risks fiscal jeopardy, or does not enable the longer-term ability of the College to achieve Ends.

Further, without limiting the scope of the above statement by the following list, the Registrar/CEO shall not:

1. Operate without a documented, multi-year strategy that can be expected to achieve a reasonable interpretation of the Ends.
  - 1.1. Permit planning that does not explain and justify assumptions, and identify relevant environmental factors.
2. Permit budgeting for any fiscal period or the remaining part of any fiscal period that is not derived from the multi-year plan.
3. Permit budgeting that does not provide for the incremental cost of implementing the multi-year strategy.
  - 3.1. Project revenue from fees on any basis other than current Council- authorized fees.
- ~~4. Permit budgeting that does not provide for the incremental cost of implementing the multi-year strategy.~~
4. Permit budgeting that does not maintain, or provide for an amount to increase, reserves to the Council-approved target level.
5. Permit budgeting that projects a year-end operating deficit.
6. Permit financial planning that risks incurring any situation or condition described as unacceptable in the “Financial Condition and Activities” policy.
7. Permit financial planning that does not provide the amount determined annually by the Council for the Council’s direct use during the year, such as costs of fiscal audit, Council development, Council and Council committee meetings, Council legal fees, and ownership linkage.
8. Permit planning that endangers the fiscal soundness of future years or ignores the building of organizational capability sufficient to achieve Ends in future years.
  - 8.1. Operate without succession plans to facilitate smooth operations during key personnel transitions and ensure competent operation of the organization over the long term.
  - 8.2. Permit the organization to be without sufficient organizational capacity and current information about Registrar/CEO and Board issues and processes for the competent operation of the organization to continue in the event of sudden loss of Registrar/CEO services.

## **BRIEFING NOTE**

**To:** Council

**From:** Chair

**Date:** September 16, 2022

**Topic:** Policy Content Review: Executive Limitations Policies

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No changes proposed. Council will review and discuss if any changes should be made to Executive Limitations policies EL 2, EL 4, EL 6, and EL 9.

## EL-2 Treatment of Staff

The Registrar/CEO shall not cause or allow a workplace environment that is unfair, disrespectful, unsafe, or disorganized.

1. Allow staff to be without current, enforced, documentation that clarifies expectations and working conditions, provides for effective handling of grievances, and protects against wrongful conditions.
  - 1.1. Permit staff to be without adequate protection from harassment and discrimination.
    - 1.1.1. Discriminate unfairly against hiring persons living with exceptionalities which do not prevent fulfillment of job requirements.
    - 1.1.2. Permit a workplace which is insufficient to accommodate staff living with exceptionalities.
  - 1.2. Permit staff to be uninformed of the performance standards by which they will be assessed.
    - 1.2.1. Neglect to undertake annual performance reviews that are based on performance standards.
2. Discriminate against any staff member for non-disruptive expression of dissent.
3. Allow staff to be unprepared to deal with emergency situations.
4. Permit staff to be without an appropriate orientation and reasonable opportunity for professional growth and development.
5. Allow staff to be unacquainted with the Registrar/CEO's interpretation of their protections under this policy.
  - 5.1. Prohibit a staff member with a complaint against the Registrar/CEO from appealing to Council.

## EL-4 Financial Conditions and Activities

With respect to the actual, ongoing financial conditions and activities, the Registrar/CEO shall not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Council priorities established in Ends policies.

Further, without limiting the scope of the above statement by the following list, the Registrar/CEO shall not:

1. Expend more funds than have been received in the fiscal year to date unless the debt guideline below is met.
  - 1.1. Allow debt to be incurred for anything other than trade payables or reasonable liabilities incurred in the ordinary course of operations.
2. Borrow funds from any financial institution.
3. Loan CDHO funds.
4. Use any long-term reserves.
5. Allow cash accounts to drop below a safety reserve equal in value to nine months' operating expenses invested in liquid assets.
6. Allow the untimely payment of payroll and debts.
7. Write off receivables without having first aggressively pursued payment after a reasonable grace period.
8. Allow tax payments or other government ordered payments or reports to be overdue or inaccurately filed.
9. Acquire, encumber or dispose of land or buildings.

## EL-6 Investment

The Registrar/CEO shall not permit investments to be managed in a way that is inconsistent with the objectives of reasonable growth and capital preservation.

Further, without limiting the scope of the above statement, the Registrar/CEO shall not:

- 1 Permit investments to be managed without the active involvement of a well- qualified Investment Professional who is independent of any investment fund.
  - 1.1 Permit the Investment Professional to take title to any assets.
  - 1.2 Permit the Investment Professional to withdraw any funds from the accounts except to cover payment of previously agreed fees, or at the CDHO's specific direction.
  - 1.3 Neglect the regular review of Investment Professional's performance.
- 2 Permit investments which are exposed to greater than a low level of risk and insufficiently diversified and staged to maximize return while protecting the principal.
  - 2.1 Permit investments outside the Fixed Income Investment categories defined in Article 8.3(2) of the CDHO bylaws, more specifically defined below:
    - Bonds, debentures or other evidences of indebtedness, a) of or guaranteed by the government of Canada, b) of or guaranteed by the government of any province/territory of Canada.
    - Bank commercial paper and Bankers' Acceptances of Schedule 1 Banks..
    - Corporate Commercial Paper with an R1 rating or equivalent by the Dominion Bond Rating Service at the time of purchase.
    - Guaranteed Investment Certificates of any trust corporation registered under the *Loan and Trust Corporations Act* of a province of Canada or the government of Canada and trust corporation CDIC insured term deposits.
    - Corporate Debt instruments with a credit rating at the time of purchase of not less than BBB as determined by Dominion Bond Rating Service.
    - High rate savings account.
  - 2.2 Allow the maturity of any individual security to exceed 12 years.
- 3 Permit investments that are inconsistent with the liquidity requirements of the College.

## EL-9 Ethical Behaviour

The Registrar/CEO shall not permit an organizational culture that lacks a high degree of integrity at all levels of the organization.

Further, without limiting the scope of the above by the following list, the Registrar/CEO shall not:

1. Permit the organization to be without an enforced internal Code of Conduct, of which all employees, consultants, contract workers and volunteers are made aware, that clearly outlines the organization's ethical expectations of them.
  - 1.1. Permit employees, consultants, contract workers and volunteers to be unaware of the level of confidentiality required to protect organizational integrity.
  - 1.2. Permit employees, consultants, contract workers and volunteers to be without guidelines for avoiding actual or potential conflicts of interest.
2. Permit employees and others to be without a mechanism for anonymous and confidential reporting of alleged or suspected improper activities and without fear of retaliation.