



COLLEGE OF DENTAL
HYGIENISTS OF ONTARIO

Council Meeting Agenda

Friday, December 1, 2023
9:00 a.m. – 4:30 p.m.

Location: Virtual Meeting

Council Meeting Agenda — December 1, 2023

Time: 9:00 a.m. to 4:30 p.m.

Item	Topic and Relevant Council Policy	Action	Lead if not Chair	Verbal Report/ Attachment	Est. Time
1.0	CALL TO ORDER				9:00
1.1	Roll Call	Council Attendance	T. Strawn	TAB 1	9:00
1.2	Opening Remarks	Council Is Addressed	T. Strawn	—	9:05
1.3	Council Recognition Ceremony	Council Is Addressed	T, Strawn	--	9:10
1.4	Council Policy Manual Update	For Information	T. Strawn	TAB 2	9:20
1.5	Council Code of Conduct	For Information	T. Strawn	TAB 3	9:20
2.0	APPROVAL OF AGENDA				9:20
2.1	Review and Approval of Agenda	For Approval	T. Strawn	TAB 4	9:20
3.0	DECLARATIONS OF POTENTIAL CONFLICT OF INTEREST				9:20
3.1	Declarations of Conflict of Interest	Declare Conflicts	T. Strawn	TAB 5	9:20
4.0	CONSENT AGENDA				9:20
	<p>CONSENT AGENDA ITEMS (4.1. – 4.1.1)</p> <p>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:</p> <ol style="list-style-type: none"> 1. Is this item self-explanatory and uncontroversial? Or does it contain an issue that warrants board discussion? 2. Is this item for information only? Or is it needed for another meeting agenda issue? 				
4.1	Council Meeting Minutes				
4.1.1	Meeting Minutes – September 22, 2023	For Information and Approval	T. Strawn	TAB 6	9:20
5.0	INFORMATION REQUESTED BY THE BOARD				

COUNCIL MEETING AGENDA – DECEMBER 1, 2023

5.1	Statutory Committee Reports				
5.1.1	Executive Committee	For Information	T. Strawn	TAB 7	9:20
5.1.2	Discipline Committee	For Information	J. White	TAB 7	9:20
5.1.3	Fitness to Practise Committee	For Information	TBD	TAB 7	9:20
5.1.4	Inquiries, Complaints and Reports Committee	For Information	J. Cooper A. Conaghan	TAB 7	9:20
5.1.5	Patient Relations Committee	For Information	TBD	TAB 7	9:20
5.1.6	Quality Assurance Committee	For Information	T. Strawn	TAB 7	9:20
5.1.7	Registration Committee	For Information	M. Atkinson	TAB 7	9:20
5.2	Incidental Briefing Reports				
5.2.1	Council President's Report	For Information	T. Strawn	TAB 8	9:20
5.2.2	Registrar's Administrative Report	For Information	G. Pettifer	TAB 8	9:20
6.0	OWNERSHIP LINKAGE				9:25
6.1	Status of Ownership Linkage Activities	For Information	C. Grbac	TAB 9	9:25
7.0	BOARD EDUCATION				9:30
7.1	Governance Review: Update	For Information	Harry Cayton and Deanna Williams	--	9:30
8.0	GOVERNANCE PROCESS ITEMS				10:00
8.1	2024 Operations Budget <i>Council will be asked to approve the 2024 operations budget.</i>	For Approval	T. Strawn	TAB 10	10:00
8.2	2024 Governance Budget <i>Council will be asked to approve the 2024 governance budget.</i>	For Approval	T. Strawn	TAB 11	10:15
BREAK					10:30
8.3	Governance Committee Update <i>The Chair will provide an update to Council on the committee's activities.</i>	For Information	M. Atkinson	Tab 12	10:45
8.4	Governance Committee: Mentorship Program	For Approval?	M. Atkinson	--	11:00
8.5	Bylaw 5 <i>Council will be asked to approve the proposed changes to Bylaw 5.</i>	For Approval	T. Strawn	TAB 13	11:15
9.0	MONITORING BOARD PERFORMANCE				11:30

COUNCIL MEETING AGENDA – DECEMBER 1, 2023

9.1	CRD 2 Accountability of the Registrar/CEO	For Approval	T. Strawn	TAB 14	11:30
9.2	CRD 3 Delegation to the Registrar/CEO	For Approval	T. Strawn	TAB 14	11:35
9.3	GP 7 Council and Committee Terms of Reference	For Approval	T. Strawn	TAB 14	11:40
9.4	GP 8 Code of Conduct	For Approval	T. Strawn	TAB 14	11:45
10.0	COUNCIL REGISTRAR DELEGATION ITEMS FOR CONSIDERATION				11:45
10.1	Policy Content Review: CRD 2	For Consideration	T. Strawn	TAB 15	11:45
10.2	Policy Content Review: CRD 3	For Consideration	T. Strawn	TAB 15	11:50
11.0	ENDS ITEMS FOR CONSIDERATION				11:55
	There are no agenda items at this meeting.				
12.0	REQUIRED APPROVALS AGENDA				11:55
	There are no agenda items at this meeting.				
LUNCH					12:00
13.0	BOARD EDUCATION				1:00
13.1	Patient Experiences with Discrimination Report	For Information	Pivotal Research	TAB 16	1:00
13.2	Coaching Advisory	For Information	T. Strawn	TAB 17	2:00
13.3	CNAR and CDHA Summit Reports	For Information	T. Strawn, M. Atkinson, L. Beniuk C. Grbac, M. Iyamabo	--	2:10
BREAK					2:30
14.0	EXECUTIVE LIMITATIONS ITEMS FOR CONSIDERATION				2:45
14.1	Policy Content Review: EL 2 Treatment of Staff	For Consideration	T. Strawn	TAB 18	2:45
14.2	Policy Content Review: EL 5 Protection of Assets	For Consideration	T. Strawn	TAB 18	2:50
14.3	Policy Content Review: EL 10	For Consideration	T. Strawn	TAB 18	2:55
14.4	Policy Content Review: EL 11	For Consideration	T. Strawn	TAB 18	2:55
15.0	GOVERNANCE PROCESS ITEMS (CONTINUED)				3:00
15.1	Policy Content Review: GP 7	For Consideration	T. Strawn	--	3:00
15.2	Policy Content Review: GP 8	For Consideration	T. Strawn	--	3:10

COUNCIL MEETING AGENDA – DECEMBER 1, 2023

—	COUNCIL MOVES IN CAMERA (ITEM 16.1- 16.4) To discuss personnel matters. Monitoring Reports on Ends and Executive Limitations form part of the Registrar's Performance Evaluation				
16.0	MONITORING CEO PERFORMANCE				3:15
16.1	Internal Monitoring: General Executive Constraint	For Approval	G. Pettifer	TAB 19	3:15
16.2	Internal Monitoring: EL-3(3)-3(8)	For Approval	G. Pettifer	TAB 19	3:20
16.3	Internal Monitoring: EL 4(1)	For Approval	G. Pettifer	TAB 19	3:30
16.4	Internal Monitoring: EL 8	For Approval	G. Pettifer	TAB 19	3:40
—	COUNCIL MOVES OUT OF CAMERA				
17.0	SELF-EVALUATION OF GOVERNANCE PROCESS				4:00
17.1	Council Meeting Evaluation	For Evaluation and Discussion	T. Strawn	—	4:00
18.0	NEXT MEETING DATE — January 19, 2024				4:20
19.0	ADJOURNMENT			TAB 20	4:30

Roll Call – Virtual Council Meeting – December 1, 2023

<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"/>	Krista Dufour	Elected
<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"/>	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: December 1, 2023
Topic: Council Policy Manual Update

The following policies were updated at the September 22, 2023 Council meeting:

- CRD-4 Monitoring Registrar/CEO Performance
- CRD-5 Registrar/CEO Compensation
- GP -12 Special Rules of Order

Council Code of Conduct

Excerpt from Policy Manual:

GP-8 CODE OF CONDUCT

Council Members shall conduct themselves in accordance with the bylaws.

Excerpt from Bylaw No. 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

BRIEFING NOTE

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. All Council Members must remain engaged in Council meetings and not allow their personal electronic devices to interfere with their attention or the attention of others.

(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 their 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 they were 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, they 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

BRIEFING NOTE

or to continue to serve in their 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 they have 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 they have a conflict of interest in a particular matter, they shall,

(a) prior to any consideration of the matter, declare to the Council or the committee that they have a conflict of interest that prevents them 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, they shall advise in writing an appropriate person such as the Chair of the affected committee, the President, the Registrar or

BRIEFING NOTE

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 they have an actual or perceived conflict of interest pertaining to their duties as a Council or Committee Member. This declaration will take place at the first Council or Committee meeting at which they become 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, they shall immediately advise the

BRIEFING NOTE

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

Suggested Motion – Friday, December 1, 2023

2.1

ADOPTION OF AGENDA

MOTION: **THAT** Council moves to approve the December 1, 2023 Council meeting agenda as presented.

Moved:

Seconded:

VOTE:

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Michelle Atkinson on Monday, 1/16/2023

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.

Faculty - Algonquin College

First Name	Last Name	Signature	Completed Date
Michelle	Atkinson	MA	1/16/2023 9:30AM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Anne-Marie Conaghan on Monday, 1/16/2023

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.

Dental hygiene program coordinator at Georgian College.

First Name	Last Name	Signature	Completed Date
Anne-Marie	Conaghan	AC	1/16/2023 9:45PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Carla Grbac on Thursday, 1/12/2023

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.

First Name	Last Name	Signature	Completed Date
Carla	Grbac	CG	1/12/2023 10:20PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Erin Betts on Monday, 1/9/2023

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.

First Name	Last Name	Signature	Completed Date
Erin	Betts	eb	1/9/2023 9:14PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Farzana Hussain on Wednesday, 1/11/2023

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.

First Name	Last Name	Signature	Completed Date
Farzana	Hussain	FH	1/11/2023 6:45PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Jennifer Cooper on Wednesday, 1/11/2023

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 - Fanshawe College and Commission on Dental Accreditation of Canada - Dental Assisting Site Surveyor

First Name	Last Name	Signature	Completed Date
Jennifer	Cooper	JC	1/11/2023 9:57PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Jacqueline White on Monday, 1/9/2023

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.

N/A

First Name	Last Name	Signature	Completed Date
Jacqueline	White	JW	1/9/2023 5:50PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Loree Beniuk on Tuesday, 1/17/2023

1.

Please type your full name:

Loree Sue Armstrong 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.

First Name	Last Name	Signature	Completed Date
Loree	Beniuk	LB	1/17/2023 5:45PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Maheen Cassim on Tuesday, 1/10/2023

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 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.

Part time faculty member at Confederation College of Dental Hygiene

First Name	Last Name	Signature	Completed Date
Maheen	Cassim	MC	1/10/2023 10:41PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Ehizele Martin Iyamabo on Sunday, 1/15/2023

1.

Please type your full name:

Ehizele 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.

First Name	Last Name	Signature	Completed Date
Ehizele Martin	Iyamabo	MI	1/15/2023 9:41PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Margaret Wade on Tuesday, 1/10/2023

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.

First Name	Last Name	Signature	Completed Date
Margaret	Wade	M.W.	1/10/2023 10:07AM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Angelica Palantzas on Friday, 1/13/2023

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.

First Name	Last Name	Signature	Completed Date
Angelica	Palantzas	AP	1/13/2023 11:46AM

Signature Page

2023 Conflict of Interest Annual Conflict of Interest Declaration

Terri Strawn on Tuesday, 9/19/2023

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.

Full time faculty, Durham College; Exam Committee member and item writer for the NDHCB/FDHRC; Site Surveyor periodically - CDAC

First Name	Last Name	Signature	Completed Date
Terri	Strawn	TS	9/19/2023 10:08AM

Signature Page

First Name	Last Name	Signature	Completed Date
Mary	Yeomans	MY	1/13/2023 3:48PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Krista Dufour on Tuesday, 1/17/2023

1.

Please type your full name:

Krista Dufour

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.

Clinical Faculty St. Clair College

First Name	Last Name	Signature	Completed Date
Krista	Dufour	KD	1/17/2023 6:33PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Meghan Leuprecht on Friday, 1/20/2023

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 OCSWSSW

First Name	Last Name	Signature	Completed Date
Meghan	Leuprecht	ML	1/20/2023 12:03PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Pella Giabanis on Tuesday, 1/10/2023

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.

First Name	Last Name	Signature	Completed Date
Pella	Giabanis	pg	1/10/2023 9:15PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Vanessa Pereira on Monday, 1/16/2023

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.

First Name	Last Name	Signature	Completed Date
Vanessa	Pereira	VP	1/16/2023 5:19PM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Alessandro Greco on Wednesday, 2/22/2023

1.

Please type your full name:

Alessandro 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.

First Name	Last Name	Signature	Completed Date
Alessandro	Greco	AgAGAg	2/22/2023 11:40AM

Signature Page

2023 Conflict of Interest Declaration

Annual Conflict of Interest Declaration

Mary Yeomans on Thursday, 3/16/2023

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.

As I am a full-time faculty member at Cambrian College, I am declaring a potential conflict of interest in matters involving faculty, staff, students, and graduates from Cambrian College.

First Name	Last Name	Signature	Completed Date
Mary	Yeomans	MY	3/16/2023 6:34AM

Signature Page

Suggested Motion – Friday, December 1, 2023

4.0 CONSENT AGENDA ITEMS (4.1)

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

Moved:

Seconded:

VOTE:

Council Meeting Minutes

Virtual Zoom Meeting – Livestreamed to the CDHO YouTube Channel
Friday, September 22, 2023 – 9:00 a.m. to 4:00 p.m.

COUNCIL MEMBERS PRESENT

Professional Members: Michelle Atkinson, Anne-Marie Conaghan (Academic) 9:00a.m.-11:50a.m., Jennifer Cooper (Academic), Krista Dufour, Carla Grbac, Farzana Hussain, Vanessa Pereira (Vice-President), Terri Strawn (President), Jacqueline White, Mary Yeomans

Public Members: Loree Beniuk, Erin Betts, Pella Giabanis, Alessandro Greco, Ehizele Martin Iyamabo, Meghan Leuprecht, Margaret Wade

Regrets: (Professional Members) Maheen Cassim (Public Members) Angelica Palantzas, Sasha Sidhu

Administration: Dr. Glenn Pettifer (Registrar and CEO), Veronica Douglas (Executive Administrator)

Guests: Julie Maciura (SML, CDHO Legal Counsel) 9:00a.m.-2:00p.m., Jane Keir (Deputy Registrar) 9:00a.m.-10:00a.m., Ryan Pestana (Director of Communications) 9:00a.m.-2:00p.m., Deanna Williams (1:00p.m.-2:00p.m.), Harry Cayton (1:00p.m.-2:00p.m.)

1.0 CALL TO ORDER

1.1 Roll Call

The Chair, Terri Strawn, called the meeting to order at 9:00 a.m.

1.2 Opening Remarks

The Council President, Terri Strawn, welcomed Council and guests to the September Council meeting. The following land acknowledgment was made:

“While we meet today in a virtual environment, I would like to begin by acknowledging the Indigenous peoples and every being of all the lands that we are gathered on here. I acknowledge that there are 46 treaties, other agreements as well as unceded nations that cover the territory now called Ontario, which remains the home of many First Nations, Inuit, and Métis people. I come with respect for this land that I am on today, for the people and all living beings who have and still reside here.

Let’s take a moment to acknowledge the importance of the land which we each call home and express my gratitude to have the privilege to work on this land. We do this to reaffirm our commitment and our responsibility to improve relationships between nations and to improve our own understanding of local Indigenous peoples and their cultures. From coast to coast to coast, I wish to acknowledge the ancestral

COUNCIL MEETING MINUTES

and unceded territory of all the Inuit, Métis, and First Nations people that call this nation home.

Please join me in a moment of reflection to acknowledge the effects of genocide, residential schools, and the ongoing effects of colonialism on Indigenous families and communities. We have the utmost respect for Indigenous peoples and wish to thank them for their continued stewardship of this land. Let's take this time to consider how we can, in our own way, move forward in a spirit of reconciliation and collaboration."

1.3 Council Policy Manual Update

The Chair reported that no policy updates were made at the June 2, 2023 Council meeting.

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

MOTION: **THAT** Council moves to approve the September 22, 2023 Council meeting agenda as presented.

MOVED: Carla Grbac

SECONDED: Anne-Marie Conaghan

VOTE:

CARRIED

3.0 DECLARATIONS OF POTENTIAL CONFLICTS OF INTEREST

3.1 Declarations of Conflict of Interest

No conflicts were declared.

4.0 CONSENT AGENDA (4.1-4.1.1)

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

MOVED: Mary Yeomans

SECONDED: Jennifer Cooper

VOTE:

CARRIED

5.0 INFORMATION REQUESTED BY THE BOARD

Dr. Glenn Pettifer updated Council on the operations of the College.

The Registration Committee report was pulled for an update and it was noted that the Registration Committee met on September 8, 2023.

The Executive Committee report was pulled for an update and it was noted that Public Member Martin Iyamabo will be attending the CDHA Summit in Winnipeg in October.

COUNCIL MEETING MINUTES

The President advised Council that she held additional teleconferences with the Registrar, Vice-President, and other members of the Executive Committee as needed to discuss the Council workshop and meeting on September 1st, 12th, 15th, 19th, 20th, and 21st, 2023.

6.0 OWNERSHIP LINKAGE

6.1 Status of Ownership Linkage Activities

The Ownership Linkage Committee provided Council with a written report. The Chair, Carla Grbac, advised that she will be attending the CDHA Summit in Winnipeg in October. The committee is in the process of reviewing the results from the second Voice of the Patient report by Pivotal Research that focused on the point of view of the patient's experience at the dental office and will bring recommendations to Council in December.

7.0 GOVERNANCE PROCESS ITEMS

7.1 Governance Committee Update

The Chair, Michelle Atkinson, advised Council that the committee met once on July 20th to review the External Assessment of Council Effectiveness report and recommendations from Dundee Consulting. A full progress report was included in the report to Council. The committee is conducting a review of the mentorship program.

7.2 2024 Council Meeting Dates

Council discussed potential dates for its 2024 meetings. Council considered the environment impact of travel as well as Council member preferences and decided on having virtual meetings in January, March and September and holding in-person/hybrid meetings in June and December.

MOTION: **THAT** Council approves the proposed 2024 meeting dates.

Date	Meeting
January: Virtual	
Thursday, January 18, 2024	New Member Orientation for new members
Friday, January 19, 2024	January Council Meeting
March: Virtual	
Friday, March 1, 2024	Workshop
Friday, March 8, 2024	March Council Meeting

COUNCIL MEETING MINUTES

June: In Person	
Thursday, June 6, 2024	Workshop
Friday, June 7, 2024	June Council Meeting
September: Virtual	
Friday, September 20, 2024	Workshop
Friday, September 27, 2024	September Council Meeting
December: In Person	
Thursday, December 5, 2024	Workshop
Friday, December 6, 2024	December Council Meeting

MOVED: Loree Beniuk

SECONDED: Carla Grbac

VOTE:

CARRIED

7.3 Standard for Self-Initiation Briefing Note

Deputy Registrar, Jane Keir, reviewed the briefing note with Council and was available to answer any questions. Council considered the risks associated with rescinding the document entitled *Standard for Authorization to Self-Initiate Profession-Specific Acts* (the "Standard"), especially the risk to the public. This Standard set out the requirements for registrants who wished to perform the controlled act of "scaling and root planing" without an order from a dentist. If the Standard were rescinded, all registrants would be authorized to perform scaling and root planing on their own initiative, subject to the contraindications already set out in the *Contraindications Regulation*¹ (or if the registrant is in doubt as to the status or accuracy of the medical or oral health history of the client).

Council considered that registrants are expected to be able to identify and comply with contraindications to scaling and root planing upon registration with CDHO. They considered other Canadian jurisdictions that permit self-initiation by new registrants. They also considered the existing regulations and discussed if they

¹ O. Reg. 218/94, General, Part III, Prescribed Contraindications to Scaling Teeth and Root Planing, Including Curetting Surrounding Tissue, On Member's Own Initiative

COUNCIL MEETING MINUTES

provided adequate safeguards for the public without the additional requirements of the Standard.

Council considered that the Standard may act as a barrier to access to care and how the public protection is better served by supporting the knowledge and confidence of registrants. They discussed how the risk was mainly one of confidence (not competence) and this would be mitigated since CDHO would continue to support all registrants in understanding the limits on self-initiation and foster confidence in practice through ongoing education and other resources.

Taking into consideration all of the above, Council decided to rescind the Standard in its entirety. There were 15 voting members present for the vote and no one opposed or abstained.

MOTION: **WHEREAS** Council recognizes the value of providing information to inform and guide registrants toward competent practice; and

WHEREAS Council recognizes that removing barriers to the ability of registrants to practice to their full scope will increase access to dental hygiene care; and

WHEREAS the current *Standard for Authorization to Self-Initiate Profession-Specific Acts* is not necessary in order to balance the public's right to access to dental hygiene care and the risk of harm posed by that care; now,

THEREFORE the Council directs that the *Standard for Authorization to Self-Initiate Profession-Specific Acts* be rescinded effective September 22, 2023.

MOVED: Krista Dufour

SECONDED: Michelle Atkinson

VOTE:

CARRIED

7.4 **Governance Committee: Discussion about Mentorship Program**

The Chair of the Governance Committee, Michelle Atkinson, advised that at the September 15, 2023 Council workshop, Council discussed the current Council mentorship program and were asked what they'd like to see in the future. They discussed the importance of consistency, providing training for the mentors, having a check list for both the mentor and a mentee, and having clear expectations. The Governance Committee will be bringing this feedback to a consultant and will bring a new mentorship framework to Council in December.

7.5 **CDHO Website**

Ryan Pestana, CDHO's Director of Communications, provided Council with an overview of the new CDHO branding and website. The new website will have a modern design that is responsive and AODA compliant, streamlined navigation, and all page content will be written with an emphasis on plain language. The website will

launch on September 25th and a formal announcement will be made in October 2023.

8.0 MONITORING BOARD PERFORMANCE

8.1 CRD 4 Monitoring Registrar/CEO Performance

MOTION: **THAT** Council has assessed the monitoring report for CRD-4 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

Moved: Carla Grbac
Seconded: Jacqueline White
VOTE:

CARRIED

8.2 CRD 5 Registrar/CEO Compensation

MOTION: **THAT** Council has assessed the monitoring report for CRD-5 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

Moved: Mary Yeomans
Seconded: Vanessa Pereira
VOTE:

CARRIED

8.3 GP 12 Registrar/CEO Compensation

MOTION: **THAT** Council has assessed the monitoring report for GP-12 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

Moved: Carla Grbac
Seconded: Jennifer Cooper
VOTE:

CARRIED

9.0 BOARD EDUCATION

9.1 Governance Review: Kick-Off

In June 2023, Council appointed Deanna Williams and Harry Cayton to conduct a comprehensive governance review for the CDHO Council. In September they provided an introduction on their process for conducting this review. They will assess the current governance practices against the Standards of Good Governance, will identify opportunities for improvement and will make recommendations to Council to improve performance. The report will take into account the findings of the Report on Council Effectiveness from February 2023 and the requirements set out in the CPMF. Deanna Williams will take the lead on observation and interviews with key members of CDHO Council and staff, whereas

COUNCIL MEETING MINUTES

Harry Cayton will lead on research and analysis regarding the Standards of Good Governance. The final report is scheduled to be presented to Council in March 2024.

9.2 Coaching Advisory

Council reviewed the Coaching Advisory for the June Council meeting from the Governance Coach.

10.0 ENDS ITEMS FOR CONSIDERATION

There were no agenda items at this meeting.

11.0 COUNCIL REGISTRAR DELEGATION ITEMS FOR CONSIDERATION

11.1 Policy Content Review: CRD 4 Monitoring Registrar/CEO Performance and CRD 5 Registrar/CEO Compensation

MOTION: **THAT** Council approve the changes to the CRD 4 Monitoring Registrar/CEO Performance and CRD 5 Registrar/CEO Compensation policies to remove gendered language, correct grammatical error, remove CRD-5(2) and move CRD-5(1) into policy CRD-4.

MOVED: Carla Grbac

SECONDED: Meghan Leuprecht

VOTE:

CARRIED

12.0 EXECUTIVE LIMITATIONS ITEMS FOR CONSIDERATION

12.1 Policy Content Review: EL 3 Planning

Council reviewed the EL 3 policy and no changes were made.

12.2 Policy Content Review: EL 6 Investment

Council reviewed the EL 6 policy and no changes were made.

12.3 Policy Content Review: EL 9 Ethical Behaviour

Council reviewed the EL 9 policy and no changes were made.

13.0 GOVERNANCE PROCESS ITEMS (CONTINUED)

13.1 Policy Content Review: GP 12 Special Rules of Order

MOTION: **THAT** Council approve the changes to policy GP -12 Special Rules of Order to remove gendered language.

MOVED: Loree Beniuk

SECONDED: Meghan Leuprecht

VOTE:

CARRIED

14.0 REQUIRED APPROVALS AGENDA

There were no agenda items at this meeting.

MOTION TO MOVE IN CAMERA

MOTION: **THAT** Council move in Camera as per RHPA, *Schedule 2, Section 7(2)(d)* at 2:31 p.m., for agenda items 15.1–15.5.

MOVED: Carla Grbac

SECONDED: Michelle Atkinson

VOTE:

CARRIED

15.0 MONITORING CEO PERFORMANCE

15.1 Internal Monitoring: EL- 4(1)

MOTION: **THAT** Council has assessed the monitoring report for EL 4(1) and determined there is sufficient, verifiable evidence of a reasonable interpretation.

MOVED: Erin Betts

SECONDED: Carla Grbac

VOTE:

CARRIED

15.2 Internal Monitoring: EL-5

MOTION: **THAT** Council has assessed the monitoring report for EL-5 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

MOVED: Carla Grbac

SECONDED: Mary Yeomans

VOTE:

CARRIED

15.3 Internal Monitoring: EL-10

MOTION: **THAT** Council has assessed the monitoring report for EL-10 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

MOVED: Krista Dufour

SECONDED: Farzana Hussain

VOTE:

CARRIED

15.4 Internal Monitoring: EL-11

MOTION: **THAT** Council has assessed the monitoring report for EL-11 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

COUNCIL MEETING MINUTES

MOVED: Jacqueline White
SECONDED: Krista Dufour
VOTE:

CARRIED

15.5 Internal Monitoring: EL-2

MOTION: **THAT** Council has assessed the monitoring report for EL-2 and determined there is sufficient, verifiable evidence of a reasonable interpretation.

MOVED: Mary Yeomans
SECONDED: Vanessa Pereira
VOTE:

CARRIED

16.0 MOTION TO MOVE OUT OF CAMERA

MOTION: **THAT** Council move out of Camera as per RHPA, *Schedule 2, Section 7(2)(d)* at 3:33 p.m.

MOVED: Jacqueline White
SECONDED: Michelle Atkinson
VOTE:

CARRIED

17.0 SELF-EVALUATION OF GOVERNANCE PROCESS

17.1 Council Meeting Evaluation

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

18.0 NEXT MEETING DATE

The next Council meeting is December 1, 2023.

19.0 ADJOURNMENT

MOTION: **THAT** the Council meeting be adjourned at 3:51 p.m.

MOVED: Carla Grbac
SECONDED: Jennifer Cooper
VOTE:

CARRIED

Approved by:

Signature of Chair, Terri Strawn

Date

Executive Committee Report — December 1, 2023

Committee Mandate: 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.

Professional Members (Council): Terri Strawn, President; Vanessa Pereira, Vice-President; Michelle Atkinson

Public Members (Council): Loree Beniuk, Erin Betts

INTRODUCTION

Since its last report to Council, the Executive Committee met through videoconference on October 23, 2023. The Executive Committee also met with the ODHA Executive Director and officers on September 29, 2023.

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 November 30th Council workshop and the December 1st Council meeting.

The Executive Committee reviewed the CDHO's Q3 Financial Report and no issues were raised.

The Governance budget was finalized and will be presented to Council at the December meeting for approval.

The Canadian Network of Agencies of Regulation's (CNAR) annual conference took place in Vancouver, British Columbia from October 16 – 18th, 2023. This year, the President - Terri Strawn, in lieu of the Vice President - Michelle Atkinson, and Public member of Executive - Loree Beniuk, attended the conference with staff. A sharing of information to Council on what was learned will take place at the December meeting.

The Canadian Dental Hygienists' Association's 2023 Summit was held on October 20 – 21st, 2023 in Winnipeg, Manitoba. The President, the chair of the Ownership Linkage Committee, Carla Grbac, and

EXECUTIVE COMMITTEE REPORT

Public member Martin Iyamabo, attended the conference. A presentation to Council on what was learned will take place at the December meeting.

Discipline Committee Report — December 1, 2023

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

Chair: Jacqueline White

Vice-Chair: Maheen Cassim

Professional Members (Council): Michelle Atkinson, Maheen Cassim, Anne-Marie Conaghan, Jennifer Cooper, Krista Dufour, Carla Grbac, Farzana Hussain, 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): Amanda Acker, Siobhan Brennen, Gillian Dunn, Rowena Javier, Paula Malcomson

INTRODUCTION

Since its last report to Council in September 2023, the Discipline Committee has not held a plenary meeting.

ITEMS FOR INFORMATION – RELATED TO MANDATE

- *Samantha Wehrle v. CDHO* was heard before a panel on October 11, 2023. Ms. Wehrle, who had previously been revoked by order of a panel of the Discipline Committee in 2018, sought reinstatement of her certificate of registration. The panel ordered the Registrar to reinstate Ms. Wehrle's certificate of registration. The panel's written reasons for decision are pending.

As of the date of writing (November 7, 2023), the following matters are currently pending before the Committee:

- *CDHO v. Zoe McIntosh* was referred on October 2, 2023. The matter is currently being scheduled.

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 — December 1, 2023

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

Chair: Vacant

Professional Members (Council): Michelle Atkinson, Maheen Cassim, Anne-Marie Conaghan, Jennifer Cooper, Krista Dufour, Carla Grbac, Farzana Hussain, 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, Upneet (Sasha) Sidhu, Margaret Wade

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 September 2023.

CONCLUSION

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

Inquiries, Complaints and Reports Committee Report — December 1, 2023

Committee Mandate: 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.

Panel A — Chair: Jennifer Cooper

Professional Members (Council): Maheen Cassim, Jennifer Cooper

Public Members (Council): Loree Beniuk, Erin Betts

Professional Members (Non-Council): Tonia Peachman-Faust, Larissa Voytek

Panel B — Chair: Anne-Marie Conaghan

Professional Members (Council): Anne-Marie Conaghan, Mary Yeomans

Public Members (Council): Sasha Sidhu, Margaret Wade

Professional Members (Non-Council): Dorothy Dziunikowski, Julie Farmer

INTRODUCTION

The Inquiries, Complaints and Reports Committee (ICRC) is divided into two main Panels (A and B). A third supplementary panel (Panel C) may be established to accommodate the number of ongoing investigations and to avoid any potential conflicts of interest.

Since the last Report to Council on September 22, 2023, the panels of the ICRC met on the following dates by video conference:

Committee as a Whole	Panel A	Panel B
September 29, 2023	October 2, 2023	September 29, 2023 November 17, 2023

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 August 30, 2023).

Number of investigations carried over from previous period(s) ¹			
	Complaints	Registrar Reports	QA Referrals
Investigations started before August 30, 2023	4	12	1

Intake of new investigations			
	Complaints	Registrar's Reports	QA Referrals
August 30, 2023 to November 7, 2023	5	6	0

Decisions made and finalized by ICRC			
	Complaints Outcomes	Reports Outcomes	QAC Outcomes
August 30, 2023 to November 7, 2023	No Further Action: 2	No Further Action: 3 No Further Action, Undertaking Signed: 2 Specified Continuing Education or Remediation Program (SCERP): 1	Referral to Discipline: 1

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

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

At the time of writing (November 7, 2023), 2 report matters were deliberated by the ICRC, but the Decisions with Reasons have not been finalized. The outcomes and timelines will be reported in the next report to Council.

Health Professions Appeal and Review Board Matters			
	Total Matters in progress (including where Decision pending)	Matters heard, Decision pending	Decision(s) Received
August 30, 2023 to November 7, 2023	1	0	1 - Decision and Reasons upheld by HPARB ²

Incapacity

The ICRC is currently not dealing with any incapacity matters.

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 August 30, 2023, to November 7, 2023 (time of writing) were as follows:

Timeline	Complaints	Registrar's Reports	QA Referrals
150 days or less	2	2	-
151 days to 210 days	-	1	-
211 days to 240 days	-	-	1
More than 240 days	-	3	-

² Appellant seeking judicial review of the HPARB decision

CONCLUSION

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

Patient Relations Committee Report — December 1, 2023

Committee Mandate: 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.

Chair: Meghan Leuprecht

Professional Members (Council): Farzana Hussain, Maheen Cassim

Public Members (Council): Alessandro Greco, Meghan Leuprecht, Upneet (Sasha) Sidhu

Professional Members (Non-Council): Paula Malcomson

INTRODUCTION

The Patient Relations Committee has not met since the last Council meeting on September 22, 2023.

ITEMS FOR INFORMATION – RELATED TO MANDATE

No further information to report.

Quality Assurance Committee Report — December 1, 2023

Committee Mandate: 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, by-laws and regulations.

Chair: Terri Strawn

Professional Members (Council): Farzana Hussain, Vanessa Pereira, Terri Strawn

Public Members (Council): Meghan Leuprecht, Angelica Palantzas

Professional Members (Non-Council): Julie Farmer, Tonia Peachman-Faust

INTRODUCTION

The Quality Assurance Committee met once since the last report to Council. The Committee met by video conference on October 2, 2023.

ITEMS FOR INFORMATION – RELATED TO MANDATE

Welcome Emails

'Welcome to the Profession' notices were sent out by email in October to 292 registrants who were registered between July 1 and September 30, 2023. The notice is designed to promote quality practice and to increase awareness of the available CDHO resources, 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.

Peer Circles

Pilot testing for Peer Circles was completed over three sessions that occurred in late September 2023. The next step will be to bring Peer Circles to more Registrants, both online and in person.

Self-Assessment Working Group

The Self-Assessment Working Group completed a review of the Self-Assessment tool over September and October 2023. The revised tool will be introduced for 2024 Self-Assessment, opening November 15, 2023.

Quality Assurance Records Peer Review Statistics (as of November 7, 2023)

2023 Peer Assessment

Of the 43¹ quality assurance records requested

42 have met the assessment guidelines²

1 is in the assessment process⁴

0 are participating in directed learning/remediation

2023 Practice Reviews

Of the 0³ on-site practice assessments requested

0 have met the assessment guidelines²

0 are in the assessment process

0 are participating in directed learning/remediation

2022 Peer Assessment

Of the 2500¹ quality assurance records requested

2493 have met the assessment guidelines²

3 are in the assessment process⁴

4 are participating in directed learning/remediation

2022 Practice Reviews

Of the 20³ on-site practice assessments requested

14 have met the assessment guidelines²

2 are in the assessment process

4 are participating in directed learning/remediation

-
- 1 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.
 - 2 Includes registrants who have resigned, were exempted, or deferred to another assessment period and those referred to the ICRC for non-compliance.
 - 3 Includes registrants who were carried forward from a previous assessment period and those placed into Path 3 for failure to submit QA records.
 - 4 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.

Registration Committee Report — December 1, 2023

Committee Mandate: 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.

Chair: Michelle Atkinson

Professional Members (Council): Michelle Atkinson, Maheen Cassim, Jacqueline White

Public Members (Council): Pella Giabanis, Margaret Wade

Professional Members (Non-Council): Lisa Frisch

INTRODUCTION

A panel of the Registration Committee met once since the last report to Council on September 22, 2023.

ITEMS FOR INFORMATION – RELATED TO MANDATE

Registration Statistics

Since last reported to Council:

	August 18, 2023	October 24, 2023
General Certificate of Registration	13, 608	13, 713
Specialty Certificate of Registration	639	639
Inactive Certificate of Registration	805	758
Total Registrants	15, 052	15, 110

REGISTRATION COMMITTEE REPORT

Applications for Registration

Since the last report to Council, the College received 62 new applications for registration. 1 application required detailed review by the Registrar and has been referred to the Registration Committee.

Registration Committee Meeting

A panel of the Registration Committee convened via video conference on September 8, 2023, and reviewed two remediation and upgrading plans for a fourth attempt at the National Dental Hygiene Certification Examination. The Committee also reviewed and approved updates to The Jurisprudence Education Module Examination.

A panel of the Registration Committee is scheduled to convene by videoconference on November 9, 2023, to review three application referrals from the Registrar.

Changes to the Register

Since last reported to Council on September 22, 2023:

- 57 applicants were registered to practise
- 21 previous registrants of the College were re-registered.
- 0 registrants reinstated
- 1 registrant was suspended
- 0 registrants were revoked for non-payment of fees
- 20 registrants resigned

President's Report to Council — December 1, 2023

PUBLIC INTEREST RATIONALE

According to our bylaws, the President shall be the chair of the Council, and the chair of the Executive Committee and shall be charged with the general supervision and leadership of the affairs and business of the Council and such other duties as may, from time to time, be assigned to them by the Council. This report provides transparency about the activities the President undertakes between Council meetings, expense approvals and Council member attendance at meetings. Council member attendance is of interest as it is a critical aspect of effective governance, ensuring that the CDHO fulfills its responsibility to the public of Ontario responsibly and transparently.

PRESIDENT'S ACTIVITIES

October 10, 2023 – Pre election orientation meeting - Zoom
October 16 – 18, 2023 – Canadian Network of Agencies for Regulation Conference, Vancouver
October 20 – 21, 2023 – Canadian Dental Hygienists Association Summit, Winnipeg
October 23, 2023 - Executive Committee meeting - Zoom
October 23, 2023 - Teleconference with C. Grbac re: ownership linkage
October 25, 2023 - Governance Committee meeting
November 1, 2023 – Zoom meeting with J. Cooper and A. Conaghan re: monitoring
November 2, 2023 - CDHO council orientation meeting – zoom
November 8, 2023 - Teleconference with M. Atkinson re: mentorship program
November 9, 2023 - Teleconference with M. Atkinson re: mentorship program
November 10, 2023 - Zoom meeting with Registrar re: operations update
November 13, 2023 - Teleconference with C. Grbac re: monitoring and council meeting
November 14, 2023 - Zoom meeting with Registrar re: operations update
November 14, 2023 – Teleconference with M. Atkinson
November 14, 2023 – Zoom meeting with V. Pereira and G. McGinnis
November 15, 2023 - Governance Committee meeting
November 15, 2023 – Zoom meeting with V. Pereira and J. Maciura
November 21, 2023 - Meeting D. Williams re: governance review

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.

The president approved the following expenses with Executive Committee approval to improve equity in professional development opportunities for Public Members of council.

PRESIDENT'S REPORT TO COUNCIL

Loree Beniuk (Executive Committee member) travel, accommodation and expenses to attend the CNAR conference in Vancouver, BC

Martin Iyamabo (Ownership Linkage Committee member) travel, accommodation and expenses to attend the CDHA summit in Winnipeg, AB

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

Name	January 19, 2023 New Member Orientation	January 20, 2023 Meeting	March 30, 2023 Workshop	March 31, 2023 Meeting	May 26, 2023 Workshop	June 2, 2023 Meeting	September 15, 2023 Workshop	September 22, 2023 Meeting	November 30, 2023 Workshop	December 1, 2023 Meeting
Professional Members										
Atkinson, Michelle	N/A	✓	✓	✓	✓	✓	✓	✓		
Cassim, Maheen	N/A	✓	✓	✓	✓	✓	✓	✗		
Conaghan-Anne-Marie	N/A	✓	✓	✓	✓	✓	✓	✓		
Cooper, Jennifer	N/A	✓	✗	✓	✗	✓	✓	✓		
Grbac, Carla	N/A	✓	✓	✓	✓	✓	✓	✓		
Hussain, Farzana	N/A	✓	✗	✗	✗	✗	✗	✓		
Dufour, Krista	✓	✓	✓	✓	✓	✓	✓	✓		
Pereira, Vanessa	✓	✓	✓	✓	✓	✓	✓	✓		
Strawn, Terri	✓	✓	✓	✓	✓	✓	✓	✓		
White, Jacqueline	N/A	✓	✓	✓	✓	✓	✓	✓		
Yeomans, Mary	N/A	✓	✓	✓	✓	✓	✓	✓		
Public Members										
Beniuk, Loree	N/A	✓	✓	✓	✗	✓	✓	✓		
Betts, Erin	N/A	✓	✓	✓	✗	✗	✓	✓		
Giabanis, Pella	N/A	✓	✓	✓	✗	✓	✓	✓		
Greco, Alex	N/A	✓	✗	✗	✗	✓	✗	✓		
Iyamabo, Martin	N/A	✓	✗	✗	✗	✓	✗	✓		
Leuprecht, Meghan	N/A	✓	✗	✓	✓	✓	✗	✓		
Palantzas, Angelica	N/A	✓	✗	✓	✗	✗	✗	✗		
Sidhu, Upneet (Sasha)	N/A	✗	✗	✗	✗	✗	✗	✗		
Wade, Margaret	N/A	✓	✓	✓	✓	✓	✗	✓		

✓ Attended

✗ Did not attend

APPENDIX 2

Professional Council Members Honorarium and Expense Claim Submissions - Quarterly

For the Year ending December 31, 2023

	Q1 HONORARIUM	Q1 EXPENSES	Q2 HONORARIUM	Q2 EXPENSES	Q3 HONORARIUM	Q3 EXPENSES	Q4 HONORARIUM	Q4 EXPENSES	TOTAL
Terri Strawn (president)	2,879.60	0.00	3,404.60	29.50	1,599.50	1,111.54		0.00	9,024.74
Vanessa Pereira (vice-president)	2,583.20	0.00	2,621.50	6.60	1,291.50	0.00		0.00	6,502.80
Michelle Atkinson	1,819.00	0.00	2,411.50	561.28	1,151.00	0.00		0.00	5,942.78
Krista Dufour	1,103.00	0.00	2,073.00	0.00	895.00	0.00		0.00	4,071.00
Anne-Marie Conaghan	1,307.00	0.00	1,749.50	0.00	829.50	0.00		0.00	3,886.00
Jennifer Cooper	1,524.50	0.00	1,351.00	0.00	983.50	0.00		0.00	3,859.00
Carla Grbac	333.00	0.00	2,227.00	0.00	741.00	1,258.07		0.00	4,559.07
Jacqueline White	1,846.00	733.73	1,303.00	0.00	920.00	0.00		0.00	4,802.73
Maheen Cassim	1,461.00	0.00	2,448.00	473.31	716.00	0.00		0.00	5,098.31
Farzana Hussain	537.00	0.00	154.00	0.00	408.00	0.00		0.00	1,099.00
Mary Yeomans	1,678.50	1,521.34	1,890.00	0.00	945.00	0.00		0.00	6,034.84
Non-Council Professional Members (combined)	4,338.00	732.66	2,790.00	718.22	1,882.50	0.00			10,461.38
								TOTAL	65,341.65

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 ongoing work since Council's last meeting on September 22, 2023

Council Election and Appointment Results

Balbir Sohi was elected as Professional Member of Council from District 2. Babir will serve a 3-year term in January 2024. **Juli Kreutner** was elected by acclamation as Professional Member of Council from District 3. Juli will begin a 3-year term in January 2024. **Anne-Marie Conaghan** and **Jennifer Cooper** were selected by acclamation to serve in academic positions on Council for new three-year terms beginning in January 2024.

Congratulations to all!

Operations

Staff continue to work largely remotely with individuals attending the office when the work process requires in-office attendance or meetings are required. We have added a monthly in-office staff meeting to the staff calendar to take advantage of the benefits of in-person, face-to-face meetings. Beginning in 2024, in addition to the monthly full staff in-person meetings, individual departmental teams will be meeting in-person monthly. We continue to look for opportunities to foster engagement of team members and harness the collaborative energy of in-person meetings within the context of our new hybrid work model.

The space-sharing model of utilization of the CDHO-leased office space under the umbrella of the CDHO hosted **HUB601**, with our current partners, the College of Dietitians of Ontario and the College of Denturists of Ontario is proceeding well. Since all **HUB601** partners have a largely remote work model, there is little demand for the CDHO space at any point in time. We are quite far along in discussions with another Health Profession Regulator that would like to join **HUB601**. In total, the financial contributions of our HUB601 partners for 2024 result in approximately 25% of our lease expenses. The **HUB601** continues to be a very successful and welcomed transition where the three participating organizations not only share the space but are also combining resources in the delivery of common (staff team) initiatives. I am very happy to assist in positioning CDHO as a leader in this innovation in the health profession regulatory sector.

We continue with the examination of the existing **IT infrastructure** with attention to security, efficiency, and future capacity. Work has begun with Deloitte Canada on the initial phase of modernizing the College's legacy registrant database and moving the database into a current, contemporary member database software program. At the time of writing, Deloitte and the CDHO IT Staff are completing the discovery (assessment) phase of this project. This phase will provide information on the complexities of the existing framework that will need to be considered during the migration phase.

As you will know, the revision of the CDHO Website is complete and the new version has been published and the old version retired. As anticipated, we continue to receive feedback from our community regarding opportunities for revision of the new website to make it a more comprehensive resource for all. We welcome and encourage that feedback!

Human Resources

There has been little change in the Human Resources profile since September 22, 2023.

Registrant Engagement

Practice Advisory Service

The Practice Advisory Service continues to be an accessible, valuable resource for Registered Dental Hygienists. Since the last report to Council, the Practice Advisory Service responded to 757 enquiries.

	Calls	Emails	Total Enquiries	Top Topics
September 2023	170	116	286	Standards of Practice/IPAC/Myofunctional Therapy Independent Practice Self-Initiation Billing
October 2023	170	123	293	
November 2023	118	60	178	

Program Elements

Communications

Over the last few months, the Communications Department under the direction of Ryan Pestana, our new Director of Communications, has increased the CDHO's presence in the platforms on which it participates. Congratulations to the Communications team for their efforts in this regard.

Work with Pivotal Research on the Voice of the Patient has indicated a lack of awareness/understanding of CDHO and the “services” we offer to the public (i.e., the Public Register, the complaints process). As a response to this lack of awareness of the CDHO and its role, we will be developing a strategy to increase this awareness. We are in the planning stages of this campaign that will be executed in 2024.

In October, we launched the new electronic publication De-Brief. This electronic communication is designed to combine elements of the Milestones publication (content directed toward clinical practice) and the more recent e-brief. For easy access, this combined publication will have a permanent home on the website.

Registration:

As of November 1, 2023, the CDHO has 15, 117 Registrants (13, 727 General, 639 Specialty, and 751 Inactive). The initial portion of the registration applicant **Application Process Experience survey** has been completed. This feedback process was designed to characterize the experience of applicants as they engage with the CDHO during their initial Registration process. This qualitative data will assist us in identifying opportunities for improvement in our application process, an important component of our general principles of accessibility and accountability.

Registration renewal is open until the beginning of December. The renewal process has been proceeding smoothly. Many thanks to the Registration and IT teams for their hard work in this regard. At the time of writing, approximately 11,100 of the approximately 15, 000 registrants have completed renewal.

Professional Conduct

The **Complaint Process Experience feedback survey** is in play. This survey tool will be used to evaluate the experience of individuals who submit complaints to the CDHO and Registrants respondents at touch points along the Complaint management journey.

There are currently 7 open complaint matters and 12 open report matters (that include referrals from the Quality Assurance Committee and matters related to incapacity). There is currently 1 matter before HPARB.

Quality Assurance Program Review / Strategic Planning Process

Dr. Zubin Austin and his team have completed their interviews with the Key Informants, the Quality Assurance Committee, and the Quality Assurance Strategic Planning Steering Committee. They have also incorporated the feedback on QA Strategic Plan elements that were included in the Registrant Engagement Survey that was completed in Q3. From these conversations, the principles, values and direction of the Quality Assurance strategic plan were drafted and elements for addition and/or modification in the existing QA Program are under discussion and investigation.

Quality Assurance Resource Development

A 2-day pilot workshop to pilot test the Peer Circle Discussions was conducted in September. We are currently organizing a series of in-person and on-line Peer Circle Discussion events for Registrants for 2024.

Kyle Fraser, Manager of Quality Assurance Resources, has attended DH program classes to provide an overview of the role of the CDHO in regulation of the DH profession. Kyle is also busy developing the series of online webinar resources.

System Partner Representation

Federation of Dental Hygiene Regulators of Canada

The CDHO is a member of this Federation. The work of the Federation is aimed at understanding and strategizing around areas of common interest for all regulators of the Dental Hygiene profession in Canada. The Federation is also responsible for the administration of the NDHCE and the CPEDH. Currently initiatives involve the implementation of a revised National Competency Profile for the Profession, a revision of the National Code of Ethics/Conduct for the Profession, and a review of the revised Entry to Practice Competencies for Dental Hygiene through an Indigenous Reconciliation lens.

Commission on Dental Accreditation of Canada (CDAC)

CDAC is the accrediting body (along with a reciprocal arrangement with the American Dental Association Commission on Dental Accreditation) identified by the Registration Regulation of the Dental Hygiene Act as the accreditor for Ontario Dental Hygiene programs.

As a member of the Federation of Dental Hygiene Regulators of Canada, I represent the FDHRC on the new CDAC Board that was created when CDAC was cleaved off the Canadian Dental Association. This separation was carried out to remove the conflict of interest of an accrediting body functioning as an arm of a national dental association. The Board is currently considering modifications to the funding model it initially presented to Oral Health Regulators and a stakeholder meeting will be held in Ottawa on December 7, 2023.

Ontario Oral Health Professions Registrars

The Registrars of the CDHO, CDO, RCDSO, and CDTO continue to meet monthly to discuss areas of common interest.

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.

DEI Programming and Initiatives

Since June 2021, the CDHO staff and Council members (some separately, some together) have engaged in numerous activities that were designed to provide opportunities for discussion, education, increased awareness, and the development for future-focused strategies for equity and inclusivity.

Current DEI Initiatives

The College was extremely pleased to provide educational program support for Indigenous students enrolled in Dental Hygiene programs in Ontario. In the first round of funding, CDHO was able to provide funding support to 4 students. This initiative supports the organization's reconciliation journey.

The CDHO has committed to funding an initiative that will provide the entire Registrant pool of Registered Dental Hygienists with access to "the Path – Your Journey Through Indigenous Canada" an online program consisting of 5 modules made up of videos and quizzes that focus on the First Nations, Inuit and Métis peoples of Canada. The program serves as an introduction to the history of Indigenous peoples and their relationship with European settlers, the British Crown and the Dominion of Canada. Access to this program will be provided until the end of 2024.

The College funded an investigative survey by Pivotal Research to gather more in-depth information in patient-described experiences of racism and discrimination in their access to dental hygiene care. Similar information was gathered from Registrants who reported experiencing racism and discrimination in the recently completed Registrant Experience survey. The reports on these investigations will be considered at the Council meeting on December 1, 2023.

In partnership with the Health Profession Regulators of Ontario of which the CDHO is one of 26 member Colleges, we are supporting the development and implementation of an Equity Impact Assessment (EIA) tool that has been drafted by the HPRO Anti-Racism Working Group. This EIA tool will provide Colleges with a tool to assess their DEI activities in the context of measures articulated in the CPMF report. In addition, this EIA tool will provide Health Profession Regulators with the opportunity to standardize characterization and assessment of College DEI Initiatives.

Keisha Simpson, Manager, Registration has been accepted to and will be attending a Certificate course in Evidence for Equity offered by Harvard Kennedy School. This will support the College's DEI activity and the principle of evidence-informed regulation in our work around Equity, Diversity and Inclusivity.

Ownership Linkage Committee Report — December 1, 2023

Committee Mandate: The Ownership Linkage Committee will assist the Council in fulfilling its responsibilities regarding connection with the owners.

Chair: Carla Grbac

Professional Members (Council): Carla Grbac, Krista Dufour

Public Members (Council): Ehizele Martin Iyamabo, Margaret Wade

INTRODUCTION

The Ownership Linkage Committee had two members attend the CDHA Summit in Winnipeg (presentation of what was learned will be provided to Council).

The Ownership Linkage Committee met on November 15, 2023.

ITEMS FOR INFORMATION

The Ownership Linkage Committee met with Doha Melhem from Pivotal Research to hear the results from The Registrant Engagement Report. This report took a deep dive and focused on the point of view of the registrant's experience at the dental office, during and after dental treatment. The Pivotal Research report looks at the positive and negative experiences registrants face and will provide us with suggestions on how we can improve their experience.

2024 CDHO BUDGET

2024 CDHO BUDGET		2023	2024
		ESTIMATED YEAR-END SPEND	BUDGETED
INCOME			
Registration Income	Breakdown		
	Registration and Renewals	6,150,000.00	6,191,625.00
	Incorporation	35,300.00	21,000.00
	SUBTOTAL REGISTRATION		
Non-Registration Income	Breakdown		
	Legal Recovery	73,000.00	7,800.00
	Hub 601 (office leasing)	43,200.00	127,000.00
	Interest - Investments	400,000.00	380,000.00
	SUBTOTAL NON-REGISTRATION INCOME	516,200.00	514,800.00
	TOTAL INCOME	6,701,500.00	6,727,425.00
EXPENSES			
OPERATIONAL			
Account	Notes - 2024		
JURISPRUDENCE		65,000.00	20,000.00
DRUG COURSE AND EXAM		16,500.00	90,000.00
ICRC	Includes process experience survey and investigations	70,000.00	90,000.00
DISCIPLINE	Includes pivotal project (tool)	65,000.00	192,000.00
COMMUNICATIONS	Public and Registrant Engagement/2024 Public Awareness Campaign	275,000.00	500,000.00
QUALITY ASSURANCE		360,000.00	600,000.00
REGISTRATION	(includes applicant process feedback survey/tools)	185,000.00	72,750.00
COMM. ON DENTAL ACCREDITATION (CDAC)		131,400.00	140,000.00
REGISTRANT RESOURCES (knowledge network)	assumed under the QA program budget	included in communications	-
NATIONAL PROJECTS		20,034.14	50,000.00
AMALGAMATION		8,000.00	100,000.00
SCHOLARSHIPS/BURSARIES	Indspire - includes admin fee	89,600.00	90,000.00
FUNDING - counselling and therapy support		1,120.00	34,350.00
SALARIES / BENEFITS		3,350,000.00	3,700,000.00
IT	includes CRM migration project (\$1,250,000)	700,000.00	1,750,000.00
POSTAGE/ STATIONERY/PRINTING		24,000.00	25,000.00
RENT		450,000.00	475,000.00
LEASED EQUIPMENT		15,000.00	12,000.00
TELEPHONE/TELECONFERENCE		25,000.00	30,000.00
MERCHANT SERVICES FEES	previously assumed under Registration expenses	included in Registration	160,000.00
CONFERENCES/PROFESSIONAL DEVELOPMENT		65,000.00	90,000.00
SUBSCRIPTIONS, MEMBERSHIPS AND DUES		38,000.00	48,000.00
OFFICE ADMINISTRATION		56,000.00	80,000.00
HUB 601 EXPENSES		24,000.00	10,000.00
CONSULTING/OPERATIONAL PROJECTS	includes development of Risk Management/Assessment Dashboard	30,000.00	125,000.00
LEGAL - GENERAL		40,000.00	50,000.00
CONTINGENCY FUND		0.00	-
	SUBTOTAL FOR OPERATIONS	6,103,654.14	8,534,100.00
GOVERNANCE			
CONSULTING (Governance)		68,000.00	100,000.00
COUNCIL TRAINING		50,000.00	75,000.00
COUNCIL MEETING HONORARIUM		70,000.00	145,000.00
COUNCIL/COMMITTEE MEETING EXPENSES		200,000.00	270,000.00
OWNERSHIP LINKAGE	Voice of Patient/potential DEI tool	100,000.00	100,000.00
GOVERNANCE REVIEW		60,000.00	150,000.00
AUDIT - FINANCIAL		30,000.00	32,000.00
	SUBTOTAL FOR GOVERNANCE	578,000.00	872,000.00
	TOTAL EXPENSES	6,681,654.14	9,406,100.00
	NET (INCOME - EXPENSES)	19,845.86	*** (2,678,675.00)

***to be funded from the CDHO Reserve Funds

Suggested Motion – Friday, December 1, 2023

8.1 OPERATIONS BUDGET

MOTION: **THAT** Council moves to approve the 2024 Operations Budget as proposed.

Moved:

Seconded:

VOTE:

Suggested Motion – Friday, December 1, 2023

8.2

GOVERNANCE BUDGET

MOTION: **THAT** Council moves to approve the 2024 Governance Budget as proposed.

Moved:

Seconded:

VOTE:

Governance Committee Report — December 1, 2023

Committee Mandate: The Governance Committee is responsible for advising Council on elements of the effective governance of the organization and function of the Council.

Chair: Michelle Atkinson

Professional Members (Council): Michelle Atkinson, Terri Strawn

Public Members (Council): Angelica Palantzas

INTRODUCTION

The Governance Committee met once since the last report to Council on September 22, 2023, via videoconference. The purpose of this meeting was to discuss next steps with the current Mentorship program.

ITEMS FOR INFORMATION

The Governance Committee met with Anthony Marini from Martek Assessments on October 25th to discuss Mentorship. We looked at our current program as well as Council's reflection on Mentorship from the September 15th Workshop. Recommendation 5.3 from the External Assessment of Council Effectiveness from Dundee Consulting was discussed as well as Policy 2.1.2 related to Mentorship.

Next steps:

- Governance Committee to meet with Anthony again before November 30th workshop to finalize details related to the presentation.
- Anthony will present at our workshop on November 30th.
- Mentorship Program Framework will be created and brought to Council at the December 1, 2023, meeting.

Briefing Note

To: Council

From: Glenn Pettifer, Registrar & CEO

Date: December 1, 2023

Topic: Proposed Amendments to College Bylaws

Appendices: Draft bylaw amendments

References: Section 94, [Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991, S.O. 1991, c. 18](#)

Staff Support: Registrar & CEO

Issue:

Council is being asked to approve for circulation to registrants a series of proposed amendments to CDHO's bylaws. In summary, the amendments relate to the following matters:

1. Replacing the terms "President" and "Vice-President" with "Chair" and "Vice-Chair"
2. Strengthening requirements related to past criminal conduct and legal proceedings against the CDHO for candidates for Council and committees
3. Establishing a lifetime maximum term limit for members of Council and committees
4. Removing the requirement that there be more members of Council on a committee than non-Council Committee members
5. Replacing the in-person process for deputations to Council
6. Updating references to fees that have previously been reduced or cancelled
7. Updating provisions to align with the *Health Professions Procedural Code* or current emerging practices
8. Other minor housekeeping amendments

Public protection rationale:

Many of the proposed amendments are of a housekeeping nature and do not substantively change the operation of the bylaws. While the revisions make the bylaws more efficient and accessible, they do not have a direct impact on public protection.

BRIEFING NOTE

Other amendments help to align CDHO with regulatory emerging practices. They help focus CDHO on its public protection mandate by using appropriate terminology and enhancing existing safeguards around Council and committee eligibility.

Source of Authority:

Section 94 of the *Health Professions Procedural Code* authorizes the Council to make bylaws related to the administrative and internal affairs of the College. In addition to this general bylaw-making power, section 94 also lists a set of specific topics on which the Council may make bylaws. Certain bylaws, such as those impacting fees paid by registrants, must be circulated to all registrants at least 60 days prior to being enacted by Council.

All the proposed amendments are authorized by section 94 pursuant to Council's general or specific bylaw making authority. The proposed amendments relating to fees and the contents of the public register must be circulated to registrants for at least 60 days prior to enactment.

Background:

External legal counsel and internal staff reviewed CDHO's existing bylaws and drafted proposed amendments. Details of the proposed amendments are found in the Appendix. The following is an overview of the proposed amendments and their rationales.

1. *Replacing the terms "President" and "Vice-President" with "Chair" and "Vice-Chair"*

The terms "President" and "Vice-President" have long been associated with representative politics. In the context of a regulatory body with a public interest mandate, these terms do not accurately reflect the duties of the offices and may suggest to members of the public that the officers serve the interests of the profession rather than the public. The primary responsibility of the "President" is to set the agenda for and to serve as chair of meetings of Council. The terms "Chair" and "Vice-Chair" more accurately reflect the duties of these offices and do not carry any implication that the positions are politically motivated. Updating this terminology enhances the perception of CDHO by the public and helps to ensure that CDHO is seen to be acting in accordance with a public-focused mandate.

2. *Strengthening requirements related to past criminal conduct and legal proceedings against the CDHO for candidates to Council and committees*

Under the current bylaws, a candidate who is seeking election or appointment to Council or to a committee must not have been found guilty of a criminal offence within the past 3 years, and at least 3 years must have passed since they fully complied with any penalty¹.

It is proposed to increase this requirement from 3 to 10 years since the finding of guilt and from 3 to 8 years since compliance with the penalty. Accordingly, a candidate who wishes to serve on

¹ CDHO Bylaws, section 3.1 (10)

BRIEFING NOTE

Council or a committee must not have been found guilty of a criminal offence within the past 10 years, and at least 8 years must have passed since they fully complied with any penalty.

By strengthening this requirement, CDHO is enhancing public confidence in CDHO by members of the public who may be concerned about Council and committee members with a recent criminal conviction. At the same time, the provision does not prevent those with historical offences from serving on Council and committees, after a reasonable period has elapsed. This recognizes that individuals are capable of rehabilitation.

Similarly, under the current bylaws, a candidate who is seeking election or appointment to Council or to a committee must not have been part of a legal proceeding against CDHO within one year of being nominated². It is proposed to eliminate the time limit on this prohibition. It is a clear conflict of interest to have been both part of a legal proceeding against CDHO and to serve on the governing body of CDHO or one of its committees at any time. This amendment enhances public confidence in the governance of CDHO by prohibiting such conflict. It also aligns with the disqualification provisions of the bylaws, which requires a member of Council or a committee to be disqualified for partaking in a legal proceeding against CDHO³.

3. Establishing a lifetime maximum term limit for members of Council and committees

Under the current bylaws, a registrant may serve a maximum of 9 consecutive years as a member of Council or committees, but they are eligible to serve again after a one-year cooling off period⁴. Similarly, a non-Council Member may serve a maximum of 6 consecutive years, but they are eligible to serve again after a one-year cooling off period⁵. [NB: These term limits do not apply to members of Council or committees appointed by the Government of Ontario.]

It is proposed that a lifetime maximum term limit of 9 years for members of Council and 6 years for non-Council Members be established. This would permit an individual to serve with CDHO for a maximum of 15 years (9 as a member of Council, plus 6 as a non-Council Member), regardless of whether such terms are served consecutively. This amendment closes a loophole that would permit an individual to serve on Council or committees indefinitely, provided that their terms are not consecutive or are separated by a one-year cooling off period.

Part of good regulatory governance is ensuring that the governing board and its committees have appropriate turnover in their membership, to permit new voices and views a place at the table. Establishing a lifetime term limit of 15 years (9 Council, 6 non-Council committee) allows individuals to contribute to CDHO governance over a long period, while also ensuring that new individuals have an opportunity to contribute to the work of CDHO.

4. Removing the requirement that there be more members of Council on a committee than non-Council committee members

² CDHO Bylaws, section 3.1(16)

³ CDHO Bylaws, section 3.8(q)

⁴ CDHO Bylaws, section 3.5

⁵ CDHO Bylaws, section 3.5

BRIEFING NOTE

The bylaws set out the composition of the various statutory committees, such as the Registration, Discipline, and Fitness to Practise Committees. The committees are composed of a set number of professional members of Council, public members of Council, and non-Council Committee members. The bylaws currently stipulate that each of these committees must have more members of Council than non-Council committee members.

It is proposed to remove the limit on the number of non-Council Committee members. In so doing, Council could appoint additional non-Council committee members to meet the operational needs of the committees and ensure that an appropriate roster of committee members is available to serve when needed. This is in line with the trend towards separating the functions of the governing Council from operational committees, while still ensuring that each committee has Council representation.

5. Replacing the in-person process for deputations to Council

Section 4.12 of the bylaws permits external groups or individuals to request an in-person deputation before Council. Deputations often involve a request by the group or individual for the Council to take some action on a given matter. All requests for deputations must be reviewed and approved by the Executive Committee.

This section of the bylaws is superfluous, as Council (through the Executive Committee) may always invite a group or individual to attend and speak at a Council meeting. More commonly, CDHO seeks and accepts written submissions from any concerned interest groups on significant initiatives before Council, such as regulatory and by-law amendments.

It is proposed to remove this section of the bylaws and to leave such matters to the discretion of the Executive Committee.

6. Updating references to fees

It is proposed to amend references to fees that were previously reduced or cancelled.

The CDHO reduced its application fee for new applicants from \$75 to \$50 effective April 1, 2023.

Similarly, CDHO eliminated the fee for applications for self-initiation effective April 1, 2023. Subsequently, Council approved rescinding the standard for self-initiation, making the reference to this fee redundant.

7. Updating provisions to align with the Health Professions Procedural Code or current emerging practices

In some places, substantive amendments have been proposed to bring the bylaws into alignment with the *Health Professions Procedural Code* or to reflect current emerging practices.

Section 14.2 (Providing Information to the College) has been amended to include reference to the information required to be provided to CDHO pursuant to sections 85.6(1) to 85.6(4) of the *Health Professions Procedural Code*. This information is already required to be provided to CDHO.

Section 14.3 (Notification of Changes of Information) has been updated to clarify that a registrant must notify CDHO within 14 days of changes to any information the registrant is required to provide to CDHO (and not merely the information listed in this section.) This would include changes to the

BRIEFING NOTE

registrant's name, contact information, practice address, etc. CDHO already advises registrants that they must notify it of any changes to their information within 14 days.

Section 15.6 (Other Information in the Register) has been updated in three respects:

- Firstly, to reflect changes to the *Health Professions Procedural Code* that require information related to charges, conditions of release, and findings of guilt to be posted to the public register. CDHO is already required to post this information to the public register by operation of the *Code*, and these amendments bring the bylaws into alignment with the *Code*.
- Secondly, to include information related to a registrant's education in dental hygiene (e.g., date of graduation, educational institution) on the public register. This information is already posted by CDHO on the public register; the bylaws are being amended to align with this already established practice.
- Thirdly, to permit the Registrar discretion to include additional information on the public register that they believe to be in the public interest related to: cautions; specified continuing education or remediation programs; undertakings; disciplinary referrals and findings; findings of incapacity; and resignations during an investigation. CDHO currently posts relevant information related to these matters, including a summary, key dates, notations of appeal, etc. The amendments provide the Registrar with discretion to include additional information related to these matters where they are of the view that it is in the interest of the public to do so.

8. *Other housekeeping amendments*

Numerous minor housekeeping amendments are proposed, including the following items.

At various places throughout the bylaws, wording has been updated to improve clarity, to insert updated cross-references, or to use consistent terminology (e.g., using the term "Non-Council Committee Member" throughout the bylaws).

The proposed amendments replace gendered language, such as "he or she", with gender-neutral language, such as "they". This is both more inclusive and simplifies the language of the bylaws.

References to hybrid meetings have been included in certain provisions.

In certain sections, the bylaws have been renumbered.

These amendments have no substantive impact on the bylaws.

Next steps:

If approved by Council in principle, the proposed amendments will be circulated to registrants and key interest groups for comment for a period of at least 60 days. Any comments received will be brought to a future meeting of Council for consideration. Council would then decide whether to enact the amendments, subject to any revisions.

BRIEFING NOTE

Decision:

MOTION: **THAT** Council direct the Registrar to circulate the proposed amendments to the Bylaws, as appended to this motion, to registrants and key interest groups for comment for a period of at least 60 days.

Moved:

Seconded:



College of
Dental Hygienists
of Ontario

Protecting your health and your smile

Bylaws s ~~No.~~ 5

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Preamble to Bylaws

The Council is authorized by the *Regulated Health Professions Act, 1991* (Ontario) to make bylaws relating to the administration and internal affairs of the College. The purpose of these bylaws is to transparently set out how the College will administer itself and to specify certain obligations of Registrants.

Bylaws ~~No. 5~~

BE IT ENACTED that all previous bylaws of the College of Dental Hygienists of Ontario (the “College”) be hereby revoked and ~~the following are~~^{it is} hereby enacted as ~~the~~ bylaws of the College of Dental Hygienists of Ontario ~~as follows~~:

ARTICLE I: DEFINITIONS AND PRINCIPLES OF INTERPRETATION

I.1 Definitions and Other Variations of the Word

In ~~this~~^{these} bylaws, unless otherwise defined or required by the context:

“Academic Member” means a member of Council who has been Selected from among registrants who are Faculty;

“Act” means the *Regulated Health Professions Act, 1991* and its related schedules, the *Dental Hygiene Act*, and the regulations made under them;

“Appointed” means one of the two following processes:

- (a) Whereby a Public Member is chosen to serve on Council through an Order-in-Council by the Government of Ontario.
- (b) Whereby a Council Member or a ~~Non-Council Member~~^{Non-Council Committee Member} is designated to serve on one or more of the College’s Committees;

“Client” means patient as the term is used in the Act;

“Code” means the Health Professions Procedural Code, being Schedule 2 to the *Regulated Health Professions Act, 1991*, S.O. 1991, c. 18;

“College” means the College of Dental Hygienists of Ontario (CDHO);

“Committee” means a Committee of the College, whether Statutory, standing or special Committee;

“Council” means the Council of the College;

“Council Chair” or “Chair” means the Chair of the Council;

“Council Member” means a member of Council duly Elected, Selected or Appointed to serve on Council;

“Elected” means one of the two following processes:

- (a) A Registrant of the College who is democratically chosen to serve on Council; or
 - (b) A member of Council who is democratically chosen to serve on the College’s Executive Committee;
-

“Elected Member” means a Registrant of the College who has been elected to serve on Council from an electoral district;

“Ex-officio” means “by virtue of the office” and, for greater certainty, unless otherwise specifically provided for, an ex-officio member of a Committee has all of the rights, responsibilities and powers of any other member of the Committee, including the right to vote and to be counted as part of quorum;

“Faculty” means registrants engaged in full-time instruction or administration in an accredited educational institution in Ontario that is authorized to grant diplomas or degrees in dental hygiene;

“Federal Offence” means an act that is made illegal by federal legislation including the *Criminal Code*, RSC 1985, c. C-46.

“Fiscal Year” means the fiscal year of the College which shall be the calendar year;

~~“Non-Council Member”~~ “Non-Council Committee Member” means a Registrant of the College or a member of the public who is not a member of the Council and who is appointed by Council to serve on one or more of the College’s Committees;

“Non-Statutory Committee” means any Committee that supports the work of the College but is not required under the Act;

~~**“President”** means the President of the College;~~

“Professional Advocacy Association” means an organization whose principal mandate is to represent the interests of and advocate on behalf of oral health practitioners, including dental hygienists, or a segment of them, including those registered in or practising in Canada;

“Public Member” means an individual who has been Appointed to serve on Council through an

Order-in-Council by the Government of Ontario;

“Registrant” means a member of the College who holds a general, specialty or inactive certificate of registration;

“Registrar” means the Registrar or in the Registrar’s absence, the Deputy Registrar of the College unless the context otherwise specifies or requires;

“Selected” means the process whereby a Registrant of the College has been elected to serve as an Academic Member on Council from among members who are Faculty;

“Statutory Committee” means any of the Committees that are required under section 10 of the Code. The statutory Committees include:

- Inquiries, Complaints and Reports Committee
- Discipline Committee
- Fitness to Practise Committee
- Registration Committee
- Quality Assurance Committee
- Patient Relations Committee
- Executive Committee;

“Vice-~~Chair~~President” means the Vice-~~Chair~~President of the ~~Council~~lege.

1.2 Extended Meanings

Words importing the singular number only are intended to include the plural and vice versa. Words importing a gender are intended to include the other and neuter genders. Words importing persons are intended to include corporations and other unincorporated entities as well as natural persons unless the context otherwise specifies or requires.

1.3 Meaning of Words Used in Act

All words and terms appearing in this bylaw, which are defined in the Act, are intended to have the same meaning in this bylaw unless the context otherwise specifies or requires.

ARTICLE 2: REGISTRATION AND CODE OF ETHICS

2.1 Code of Ethics

Council will, from time to time, adopt a Code of Ethics for Registrants. This Code of Ethics outlines the ~~is to be designed to ensure the dignity and integrity of Registrants and describe the values and~~ principles underlying the obligations and professional duties to be observed by each Registrant. Complying with the Code of Ethics will ensure that Registrants conduct themselves with integrity and dignity. Each Registrant is expected to adhere to the provisions of the Code of Ethics and also to the underlying spirit and precepts thereof. The current Code of Ethics is attached as Schedule I and forms part of this ~~ese~~ bylaws.

2.2 Privacy Policy~~Information Available to Registrants~~

Council shall have a privacy policy to guide the College's collection, use and disclosure of personal information which. ~~This information~~ shall be posted on the College's website.

ARTICLE 3: THE COUNCIL AND ITS OFFICERS

3.1 Eligibility Criteria for Council and ~~Non-Council Member~~Non-Council Committee Members

~~(1)~~ A Registrant is eligible for election as an Elected Member, selection as an Academic Member or appointment as a ~~Non-Council Member~~Non-Council Committee Member if the following criteria are met:

~~(1)~~ ~~(a)~~ The Registrant holds a certificate of registration;

~~(2)~~ ~~(b)~~ For the purposes of election as an Elected Member, the Registrant is principally engaged in the practice of dental hygiene in the electoral district for which ~~theyhe or she~~ has~~ve~~ been nominated or, if the Registrant is not engaged in the practice of dental hygiene, the Registrant principally resides in the electoral district for which ~~theyhe or she~~ has~~ve~~ been nominated;

~~(3)~~ ~~(c)~~ For the purposes of selection as an Academic Member, the Registrant is Faculty;

~~(4)~~ ~~(d)~~ For the purposes of appointment as a ~~Non-Council Member~~Non-Council Committee Member, the Registrant is engaged in the practice of dental hygiene in Ontario or, if the Registrant is not engaged in the practice of dental hygiene, the Registrant resides in Ontario;

~~(5)~~ ~~(e)~~ The Registrant is not in default of any fees ~~payable to the College~~made under the Act or this bylaw;

~~(6)~~ ~~(f)~~ The Registrant is not in default of any requirement to provide information to the College ~~made under the Act or this bylaw~~;

~~(7)~~ ~~(g)~~ The Registrant is not the subject of any current disciplinary or incapacity proceeding;

~~(8)~~ ~~(h)~~ A period of at least six years has elapsed since the Registrant complied with all aspects of an order of the Discipline Committee;

~~(9)~~ ~~(i)~~ The Registrant's certificate of registration is currently not subject to a term, condition or limitation imposed by the Quality Assurance Committee or the Fitness to Practise Committee;

~~(10)~~ ~~(j)~~ The Registrant has not, within the last ~~threeten~~ three years, been found guilty of an offence under the Criminal Code (Canada) or any other criminal offence in any jurisdiction, and a period of at least ~~three~~eight years has elapsed since the Registrant fully complied with any penalty imposed as a result of ~~that~~a finding;

~~(11)~~ ~~(k)~~ A period of at least one year has passed since the Registrant has been an officer,

director or employee of any Professional Advocacy Association; ~~(For greater certainty, but nothing in this Article shall prevent a Registrant who serves on an association or organization to which they he or she has~~ sy been appointed by Council as a representative of the College, from running for election to Council);

~~(+2)~~ (l) The Registrant is not an employee of the College and has not been an employee of the College for at least one year;

~~(+3)~~ (m) Council has not disqualified the Registrant from sitting on Council or serving as a ~~Non-Council Member~~ Non-Council Committee Member during the three years before the date of the election, selection or appointment;

~~(+4)~~ (n) The Registrant is not a member of the Council of any other College created or governed under the Act;

~~(+5)~~ (o) The Registrant is not a candidate for election in another electoral district;

~~(+6)~~ (p) The Registrant has not initiated, joined, continued or materially contributed to a legal proceeding against the College or any Committee or representative of the College ~~within one year from the deadline for the receipt of nominations~~; and

(q) The Registrant does not have a conflict of interest to serve as a member of Council or has agreed to remove any such conflict of interest before taking office.

~~(+7)~~

(2) An individual who is not a Registrant is eligible for appointment as a ~~Non-Council Member~~ Non-Council Committee Member if the following criteria are met:

(a) The individual resides in Ontario;

(b) The individual is not currently the subject of a disciplinary or incapacity proceeding;

~~(b)~~(c) ~~and~~ at least six years have elapsed since the individual complied with all aspects of any disciplinary order, ~~by a regulatory authority to which he or she is subject~~;

~~(c)~~(d) The individual has not, within the last ~~three~~ ten years, been found guilty of an offence under the Criminal Code (Canada) or any other criminal offence in any jurisdiction, and a period of at least ~~three~~ eight years has elapsed since the individual fully complied with any penalty imposed as a result of any such finding;

~~(d)~~(e) A period of at least one year has passed since the individual has been an officer, director or employee of any Professional Advocacy Association but nothing in this Article shall prevent an individual who serves on an organization to which they have been appointed by Council as a representative of the College, from being eligible for appointment;

~~(e)~~(f) The individual is not an employee of the College and has not been an employee of the College for at least one year;

~~(f)~~(g) Council has not disqualified the individual from serving as a ~~Non-Council Member~~ Non-

- Council Committee Member during the three years before the date of the appointment;
- ~~(g)~~(h) The individual is not a member of the Council of any other College created or governed under the Act;
- ~~(h)~~(i) The individual has not initiated, joined, continued or materially contributed to a legal proceeding against the College or any Committee or representative of the College ~~within one year from the date of appointment;~~
- ~~(i)~~(j) The individual does not have a conflict of interest to serve as a ~~Non-Council Member~~Non-Council Committee Member or has agreed to remove any such conflict of interest before taking office.

3.2 Nominations and Voting Procedures for Elected and Academic Members

- (1) The Registrar shall supervise the nomination of candidates.
- (2) No later than 60 days before the date of an election or selection, the Registrar shall notify every Registrant who is eligible to vote in the election or selection, of the date and time of the election or selection and the nomination procedures.
- (3) The nomination of a candidate for election as an Elected Member or selection as an Academic Member shall be in writing and shall be given to the Registrar at least 30 days before the date of the election or selection.
 - (a) The nomination shall be signed by the candidate and by at least five Registrants who support the nomination and who are eligible to vote in the election or selection;
 - (b) A candidate for election or selection shall fully and accurately complete a conflict of interest questionnaire provided by the Registrar;
 - (c) A candidate for election or selection shall be permitted to submit a suitable personal statement that will be circulated by the Registrar along with the ballots;
 - (d) A candidate may withdraw ~~his or her~~their nomination for election or selection by advising the Registrar in writing not less than 24 days before the date of the election or selection;
 - (e) A candidate cannot, at the same time, be nominated for more than one position, whether Elected or Selected or both.
- (4) Registrants who are not in default of paying any required fees or providing any required information to the College ~~made under the Act or this bylaw~~ are eligible to nominate and vote for another eligible Registrant.
- (5) For the purposes of an election, the electoral district in which a Registrant is eligible to vote is the district in which, 30 days before the date of an election, the Registrant principally practises or, if the Registrant is not engaged in the practice of dental hygiene, the Registrant principally resides.

- (6) For the purposes of selection of an Academic Member, a Registrant who is Faculty is eligible to vote in the selection.
- (7) If the number of candidates nominated for election or selection is less than, or equal to, the number of Registrants to be Elected or Selected, the Registrar shall declare the candidates to be Elected or Selected by acclamation.
- (8) No later than 14 days before the date of an election or selection, the Registrar shall send to every Registrant eligible to vote, a list of the candidates, a ballot and an explanation of the voting procedures (or equivalent if ballots are supplied electronically).
- (9) Voting for candidates for election or selection to the Council shall be by secret ballot using the ballot forms supplied by the Registrar (or equivalent if ballots are supplied electronically).
- (10) Where there is an interruption of mail service (or equivalent if ballots are supplied electronically) during a nomination, election or selection, the Registrar may extend the nomination period, or the holding of the election or selection for such a period as the Registrar considers necessary to compensate for the interruption.
- (11) A Registrant who is eligible to vote may cast as many votes on a ballot as there are vacancies. A Registrant shall not cast more than one vote for any one candidate. If there is a tie in an election or selection of candidates to the Council, the Registrar shall break the tie by lot in the presence of at least one member of the Executive Committee.
- (12) A candidate is entitled to request a recount by putting the request in writing to the Registrar no more than 15 days after the date of the election or selection and paying the fee required by Article 16.5 of the [bylaws](#).
- (13) The Registrar shall hold the recount no more than 15 days after receiving the request.
- (14) If no eligible candidate is nominated in an election or selection, a vacancy shall be deemed to exist and the Council shall direct the Registrar to hold a by-election or by-selection in accordance with Article 3.10 of the [bylaws](#).

3.3 **Nomination Procedures for ~~Non-Council Member~~[Non-Council Committee Members](#)**

- (1) The Council may appoint ~~to a Committee~~ a Registrant or a member of the public who is not a Council Member ~~to a Committee~~. These individuals shall be designated as ~~Non-Council Member~~[Non-Council Committee Members](#).
- (2) The Registrar shall solicit applications for ~~Non-Council Member~~[Non-Council Committee Members](#) in accordance with the policy approved by the Council.
- (3) ~~Non-Council Member~~[Non-Council Committee Members](#) may serve on the College's Committees and while they shall have voting rights on such Committees, they may not serve as

chair of a Committee.

- (4) The term of office of a ~~Non-Council Member~~Non-Council Committee Member ~~Appointed~~ by the Council is three years to a maximum term of service of six ~~consecutive~~ years.
 - (a) The term of office commences on January 1 in the calendar year following the appointment of the ~~Non-Council Member~~Non-Council Committee Member unless otherwise specified by the Council.

3.4 Election and Selection Procedures for Elected and Academic Members to the Council

- (1) The Registrar shall supervise and administer the election and selection of candidates and, for the purpose of carrying out that duty, the Registrar may, subject to the ~~these~~ bylaws:
 - (a) appoint returning officers and scrutineers;
 - (b) establish a deadline for the receiving of ballots;
 - (c) establish procedures for the counting of ballots;
 - (d) provide for the notification of all candidates and Registrants of the results of the election or selection; and
 - (e) provide for the destruction of ballots following an election or selection and any recounts.
- (2) For the purposes of election to the Council as an Elected Member, the following electoral districts are established (with necessary modifications by the Registrar to ensure that the entire province is covered and that there is no overlap of districts):
 - (a) Electoral district 1, the southwestern district, composed of the counties of Bruce, Grey, Elgin, Essex, Huron, Kent, Lambton, Middlesex, Oxford and Perth;
 - (b) Electoral district 2, the central western (north) district, composed of the counties of Wellington, Simcoe, Dufferin and the regional municipalities of Halton and Peel;
 - (c) Electoral district 3, the central western (south) district, composed of the county of Brant and the regional municipalities of Haldimand-Norfolk, Hamilton-Wentworth, Niagara and Waterloo;
 - (d) Electoral district 4, the central district, composed of the regional municipalities of York and Metropolitan Toronto;
 - (e) Electoral district 5, the central eastern district, composed of the counties of Frontenac, Peterborough, Hastings, Lanark, Lennox and Addington, Prince Edward, Victoria, Haliburton, Northumberland, and the regional municipality of Durham;
 - (f) Electoral district 6, the eastern district, composed of the counties of Dundas, Glengarry, Leeds and Grenville, Prescott and Russell and United Counties, Renfrew and Stormont and The Regional Municipality of Ottawa-Carleton;

- (g) Electoral district 7, the northeastern district, composed of the territorial districts of Algoma, Cochrane, Manitoulin, Muskoka, Nipissing, Parry Sound, Sudbury and Timiskaming;
 - (h) Electoral district 8, the northwestern district, composed of the territorial districts of Rainy River, Thunder Bay and Kenora.
- (3) The number of Registrants to be Elected in district 4 is two. The number of Registrants to be Elected in districts 1, 2, 3, 5, 6, 7 and 8 is one.
 - (4) For the purposes of selection to the Council as an Academic Member, two Registrants from among members who are Faculty shall be Selected to serve on Council as outlined in section 7(1)(c) of the *Dental Hygiene Act*.
 - (5) Elections and selections shall be held in November in the year before the year in which the term of office of that electoral district's Elected Member(s) or the Academic Member's term of office expires.
 - (a) The election of Elected Members and/or selection of Academic Members shall be held on the third Wednesday in November, unless Council sets a different date.
 - (6) The term of office of a member Elected or Selected to serve on the Council in an election is three years commencing at the beginning of the first Council meeting after the election or selection where the election of the members of the Executive Committee is properly on the agenda. A member may be Elected or Selected for more than one term but no member who is Elected or Selected to serve on Council may be a member of Council for more than nine ~~consecutive~~ years.
 - (a) The Elected Members or Selected Academic Members of the Council shall continue in office until the commencement of their successors' term of office unless disqualified or otherwise removed from office under these bylaws.

3.5 Eligibility for Re-Election, Re-Selection and/or Re-Appointment

A Registrant who has served in any combination as an Elected Member, ~~or~~ Selected Academic Member ~~or Appointed Non-Council Member~~ for nine ~~consecutive~~ years is not eligible for ~~re-election, re-selection or re-appointment to Council or any Committee for a period of one year from the termination of his or her office.~~

An individual who ~~is not a Registrant who~~ has served as a ~~Non-Council Member~~ ~~Non-Council Committee Member~~ for six ~~consecutive~~ years is not eligible for ~~re-appointment as a Non-Council Member~~ ~~Non-Council Committee Member~~ ~~for a period of one year from the termination of his or her office.~~

For greater certainty, an individual may serve for a maximum of six years as a non-Council Committee Member in addition to serving for a maximum of nine years as a Council member.

3.6 Election or Selection Irregularities

If the Council is of the opinion that there is a reasonable ground for doubt or dispute as to the validity of the election or selection of any Council Member, the Council shall hold an inquiry and decide whether the election or selection of the member is valid and, if found to be invalid, the Council shall direct another election or selection to be held. Council shall not declare an election or selection result to be invalid solely on the basis of a minor irregularity regarding the requirements of these bylaws or a procedure established by the Registrar.

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~~ Committee Members. Any reference to Council Members shall be interpreted as also applying to Non-Council ~~Committee~~ 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. All Council Members must remain engaged in Council meetings and not allow their personal electronic devices to interfere with their attention or the attention of others.
- (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 their 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 they were a Council Member or ~~Non-Council Member~~[Non-Council Committee 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, they 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~~Non-Council Committee 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 their 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~~their 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 they have 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 they have a conflict of interest in a particular matter, they shall,
 - (a) prior to any consideration of the matter, declare to the Council or the committee that they have a conflict of interest that prevents them 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, they 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 Member~~Non-Council Committee Members

- (29) Every Council Member shall declare, verbally, and where the Council deems it appropriate, in writing, if they have an actual or perceived conflict of interest pertaining to their duties as a Council or Committee Member. This declaration will take place at the first Council or Committee meeting at which they become 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, they 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 Member~~Non-Council Committee Members

- (l) The Council shall disqualify a Registrant from sitting on Council or a Committee or serving as a ~~Non-Council Member~~Non-Council Committee 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 ~~they are~~she or he is a member;
 - (e) fails, without reasonable cause, to attend a hearing of a panel for which ~~they have~~she or he 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 ~~they have~~she or he 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 ~~their~~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 ~~they have~~~~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 ~~they are~~~~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 ~~they have~~~~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 ~~they have~~~~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 ~~they have 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) The Council shall disqualify an individual who is not a Registrant from serving as a ~~Non-Council Member~~Non-Council Committee Member if the individual:
- (a) is found to have engaged in professional misconduct, to be incompetent, or to be incapacitated by a regulatory authority to which ~~they are he or she is~~ subject;
 - (b) 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 ~~they are she or he is~~ a member;
 - (c) fails, without reasonable cause, to attend a hearing of a panel for which ~~they have he or she 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) fails, in the opinion of the Council, to discharge properly or honestly any office to which ~~they have he or she has~~ been Appointed;
 - (f) 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;
 - (g) ceases to be a resident of Ontario;
 - (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;
 - (k) initiates, joins, continues or materially contributes to a legal proceeding against the College of any Committee or representatives of the College.
- (4) A person who has served as a Council or ~~Non-Council Member~~Non-Council Committee Member may not become an employee of the College until one year has passed following the expiration of their term of office.
- (5) 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 ~~they he or she~~ had been Appointed.

(5)(6) ~~A Non-Council Member~~ Non-Council Committee Member who has been disqualified ceases to be a member of any Committee, including any panel, to which they had been appointed.

3.9 Disqualification Proceedings for Council and ~~Non-Council Member~~Non-Council Committee Members

- (1) This Article does not apply to and shall not be interpreted as in any way limiting the ability of Council or the Executive Committee under Article 3.8 ~~(with the exceptions of clauses 3.8(1)(k), 3.8(2)(e) and 3.8(3)(f))~~ to remove or disqualify a Council or ~~Non-Council Member~~Non-Council Committee Member from a Committee or office. When removing or disqualifying under any provision of Article 3.8 ~~(with the exceptions of clauses 3.8(1)(k), 3.8(2)(e) or 3.8(3)(f))~~ there is no requirement to follow the procedure set out below.
- (2) **Wherever possible, unless it is inappropriate to do so, informal resolution between the person with the concern and the Council or ~~Non-Council Member~~Non-Council Committee Member about whom the person has the concern should be attempted before engaging the formal complaints process.** Nothing in this by-law prevents the informal resolution of Code of Conduct concerns including by providing feedback, guidance, reminders, advice or counselling or by negotiating agreements or undertakings.
- (3) The following procedure shall be followed to address a complaint filed about a Code of Conduct concern **only if it has not been possible to reach an informal resolution before or during the process.**
- (4) A written complaint shall be filed with both the Chair of the Conduct Committee and the Registrar. A complaint may be made by any person, including a member of the public, a Council or Committee Member or the Registrar. If the complaint is made to only one of the named persons then that person shall immediately file a copy of the complaint with the other person referenced in this article.
- (5) If the Conduct Committee as a whole has a conflict of interest with respect to the complaint or if the Conduct Committee is otherwise unable to act on the complaint, it shall appoint an independent investigator from a list approved by the Council to investigate on its behalf under this Article and it shall appoint an independent commissioner from a list approved by the Council to make decisions on its behalf under this Article.
- (6) The Conduct Committee or its delegate shall conduct any investigation it deems appropriate. If material facts are in dispute, the Conduct Committee or its delegate shall adopt a fair and reasonable process to determine those facts which may include the appointment of an independent investigator to investigate and provide a written report respecting those facts.
- (7) After providing the Council or ~~Non-Council Member~~Non-Council Committee Member an opportunity to make written submissions to it, the Conduct Committee or its delegate shall determine whether there has been a breach of the Code of Conduct and, if so, whether the matter should be resolved informally or whether the matter should be resolved formally at a determination meeting pursuant to Article 3.9(10).
- (8) Where the Conduct Committee or its delegate believes that the complaint does not warrant formal resolution, it shall provide a report to the Executive Committee or its delegate about the

investigation and conclusion, with reasons for the conclusion. The Executive Committee or its delegate may accept the report and resolve the matter informally or may return the matter to the Conduct Committee for additional investigation or other action.

- (9) The Conduct Committee or its delegate may make an interim direction at any time to protect the integrity and reputation of the College including directing that the Council or ~~Non-Council Member~~Non-Council Committee Member be suspended from ~~his or her~~their positions or duties until the matter is finally resolved.
- (10) The Conduct Committee, or its delegate, the complainant and the Council or ~~Non-Council Member~~Non-Council Committee Member whose conduct is the subject of concern shall be the parties at the determination meeting. The Council or ~~Non-Council Member~~Non-Council Committee Member whose conduct is the subject of concern shall be given reasonable notice of the complaint, the relevant supporting information gathered in relation to the complaint, and all parties shall be given the opportunity to make written and oral submissions at the determination meeting. The Conduct Committee or its delegate is not required to hold a hearing.
- (11) An appropriate sanction imposed by the Conduct Committee may include one or more of the following:
 - (a) censure of the Council or ~~Non-Council Member~~Non-Council Committee Member verbally or in writing;
 - (b) removal of the Council or ~~Non-Council Member~~Non-Council Committee Member from any committee on which ~~they~~he or she serves;
 - (c) removal of a Council or Non-Council Member as a Chair of any committee on which ~~they~~he or she serves;
 - (d) exclusion of the Council or ~~Non-Council Member~~Non-Council Committee Member from all or part of meetings of the Council or any committees;
 - (e) restricting access to confidential information by the Council or ~~Non-Council Member~~Non-Council Committee Member;
 - (f) disqualification of an elected Council Member;
 - (g) delivery of a report to the Public Appointments Secretariat requesting the removal of a Council Member who has been appointed by the Lieutenant Governor in Council; or
 - (h) any other sanction appropriate to the circumstances.
- (12) Any sanction under Article 3.9 requires a majority vote of the members of the Conduct Committee or its delegate (if more than one), present at the meeting.
- (13) If the sanction imposed by the Conduct Committee was either 3.9(11)(f) or (g), the Council or ~~Non-Council Member~~Non-Council Committee Member who is the subject of the complaint may appeal the decision of the Conduct Committee or its delegate to the Council. The Council is not required to hold a hearing and may establish its own procedures for determining the appeal. A written indication of intention to appeal shall be given within 14 days of the Conduct

Committee decision, unless Council agrees to extend the time for appeal. The Council has all of the powers of the Conduct Committee or its delegate in making the determination. Council will be acting in an appellate capacity, and any decision to overturn a decision of the Conduct Committee requires a two-thirds majority of the votes cast at the meeting by those present. Failure to obtain a two-thirds majority vote of those Council Members in attendance means that the Conduct Committee decision is upheld. The Council or ~~Non-Council Member~~Non-Council Committee Member whose conduct is in issue and the complainant, if a Council Member, shall not be entitled to vote at the Council meeting.

- (14) The procedure set out in this Article is intended to be followed in a timely manner recognizing the risk of possible continuing conduct and that the reputation of individuals and the College is at stake while also recognizing the need to provide a fair process for all concerned.
- (15) No Council Member shall take action, or permit any person to take action, against any person for making a complaint, or cooperating with the investigation of a complaint, under this bylaw.
- (16) Legal costs are only payable by the College to the subject of the complaint if no breach of the Code of Conduct was found and Council votes, on a two-thirds majority, to reimburse some or all of their legal costs.

3.10 Vacancies on Council and ~~Non-Council Member~~Non-Council Committee Member Positions

- (1) The seat of a Council or ~~Non-Council Member~~Non-Council Committee Member shall be deemed to be vacant upon the death, resignation or disqualification of the member.
- (2) If the seat of a Council Member becomes vacant not more than 12 months before the expiry of the member's term of office, the Council may:
 - (a) leave the seat vacant;
 - (b) direct the Registrar to hold an election or selection in accordance with this bylaw;
 - (c) direct the Registrar to appoint an individual who may fill the vacancy for a duration determined by Council, but not to exceed the duration of the term of the vacated position; or
 - (d) request that a Public Member of Council be appointed via the offices of the Public Appointments Secretariat of the Government of Ontario.
- (3) If the seat of a Council Member becomes vacant more than 12 months before the expiry of the Council Member's term of office, the Council shall:
 - (a) direct the Registrar to hold an election or selection, in accordance with this bylaw (and Council may direct the Registrar to appoint an individual who may fill the vacancy until the election is completed where Council would not otherwise be properly constituted); or

- (b) request that a member be Appointed via the offices of the Public Appointments Secretariat of the Government of Ontario.
- (4) If a ~~Non-Council Member~~Non-Council Committee Member's appointment becomes vacant before the expiry of the ~~Non-Council Member~~Non-Council Committee Member's term of office, the Council may:
 - (a) leave the position vacant; or
 - (b) appoint an individual to fill the vacancy for a duration determined by Council, but not to exceed the duration of the term of the vacated seat.

3.11 Election of the ~~Chair~~President

- (1) Any Council Member is eligible to stand for election to the office of ~~Council Chair~~President.
- (2) Each year, at the first Council meeting after the election or selection where the election of the members of the Executive Committee is properly on the agenda, or as soon after that time as possible, the election of the ~~Council Chair~~President shall be conducted by the Registrar or ~~his or her~~their delegate as outlined in Schedule II, which forms part of this bylaw.

3.12 Election of the Vice-~~Chair~~President

- (1) Any Council Member is eligible to stand for election to the office of Vice-~~Chair~~President of ~~Council~~.
- (2) As soon as possible after the election of the ~~Chair~~President, the election of the Vice-~~Chair~~President shall be conducted by the Registrar or ~~his or her~~their delegate as outlined in Schedule II, which forms part of this bylaw.

3.13 Election of the Executive Committee

- (1) Any Council Member is eligible to stand for election to serve on the Executive Committee.
- (2) As soon as possible after the election of the ~~Chair~~President and Vice-~~Chair~~President, the election of the other members of the Executive Committee shall be conducted by the Registrar as outlined in Schedule II, which forms part of this bylaw.

3.14 Duties of the President

- (1) Subject to Article 4.9, the ~~Chair~~President shall be the chair of the Council, and the chair of the Executive Committee and shall be charged with the general supervision and leadership of the affairs and business of the Council and such other duties as may, from time to time, be assigned to him or her by the Council, in accordance with the Act and the bylaws. The ~~Chair~~President shall also facilitate dialogue at meetings in a manner that welcomes all Council Members' perspectives on issues, encourages independent thinking, promotes alignment on decisions that are balanced and demonstrates good judgment for the successful fulfilment of the Council's purpose.
- (2) The ~~Chair~~President shall have the right to attend all Committee meetings of the College as an observer/participant without voting privileges.
- (3) During the absence or inability of the ~~Chair~~President, the President's duties, rights and powers shall be exercised by the Vice-~~Chair~~President.
- (4) During the absence or inability of both the ~~Chair~~President and Vice-~~Chair~~President, the ~~Chair~~President's duties, rights and powers may be exercised by any Council Member as the Council may appoint for such purpose.

3.15 Duties of the Vice-~~Chair~~President

- (1) In addition to the duties set out in Article 3.14(3), the Vice-~~Chair~~President shall have such other powers, rights and duties as may, from time to time be assigned to ~~them~~him or her by the Council.
- (2) The Vice-~~Chair~~President shall also be the ~~y~~Vice-~~c~~Chair of the Council and the ~~y~~Vice-~~c~~Chair of the Executive Committee.

3.16 Terms of Office for ~~Chair~~President and Vice-~~Chair~~President

- (1) The term of office for the ~~Chair~~President and Vice-~~Chair~~President shall be one year, in accordance with the Act.
- (2) The term of office for the ~~Chair~~President and Vice-~~Chair~~President commences immediately following their election and expires upon the election of the new ~~Chair~~President and Vice-~~Chair~~President at the first regular meeting of Council in the following year.
- (3) No Council Member may serve as ~~Chair~~President for more than an aggregate of three years. No Council Member may serve as Vice-~~Chair~~President for more than an aggregate of three years.
- (4) Following the completion of three years of service as ~~Chair~~President, a Council Member is ineligible for re-election as ~~Chair~~President but may be eligible for election as Vice-~~Chair~~President, provided that the Council Member has not already served for three years as Vice-~~Chair~~President.
- (5) Following the completion of three years of service as Vice-~~Chair~~President, a Council Member is ineligible for re-election as Vice-~~Chair~~President but may be eligible for election as ~~Chair~~President, provided that the Council Member has not already served for three years as ~~Chair~~President.

3.17 Removal of the ~~Chair~~President or Vice-~~Chair~~President

The ~~Chair~~President and/or Vice-~~Chair~~President may be removed from office by a resolution adopted by not less than two-thirds of Council Members present and voting subject to the following criteria:

- (1) The ~~Chair~~President and/or Vice-~~Chair~~President has been given advance notice of the resolution consistent with the notice period required for Council meetings;
- (2) The resolution is presented at a Council meeting;
- (3) The Registrar shall preside over the resolution and shall appoint, where possible, the Deputy Registrar as scrutineer for the vote;
- (4) The vote regarding this resolution shall be taken by secret ballot;

- (5) Following the tally of the vote and the report to Council, the Registrar shall ensure that the ballots are destroyed.

3.18 Vacancy of ~~Chair~~Presidential and/or Vice-~~Chair~~Presidential Offices

- (1) Despite Article 3.16(3), if the office of ~~Chair~~President becomes vacant before the expiry of ~~her~~
~~or his~~their term of office, the Vice-~~Chair~~President shall assume the office of ~~Chair~~President for the remainder of the term.
- (2) If the office of Vice-~~Chair~~President becomes vacant before the expiry of ~~her or his~~their term of office, an election for Vice-~~Chair~~President shall occur at the next regular meeting of the Council and the new Vice-~~Chair~~President shall assume the office for the remainder of the term.
- (3) If both the offices of ~~Chair~~President and Vice-~~Chair~~President become vacant concurrently before the expiry of their respective terms of office, the Council shall appoint an interim ~~Chair~~President and Vice-~~Chair~~President from among the remaining members of the Council to fill the positions of ~~Chair~~President and Vice-~~Chair~~President and shall hold an election to fill any resultant vacant seats on Executive Committee in accordance with this bylaw.

ARTICLE 4: MEETINGS OF THE COUNCIL

4.1 Location of Meetings

Meetings of the Council may be held electronically or at the College offices or at any other place in Ontario as may be fixed by the Registrar or as the Council may determine.

4.2 Number of Meetings

The first meeting of the Council shall be held in the first quarter of the calendar year. The Council shall hold in each calendar year at least three Council meetings, called by the Council Chair~~President~~. Notice of the time and place of Council meetings shall be given by the Registrar.

4.3 Additional Meetings

In addition to the Council meetings contemplated in Articles 4.2 and 3.9(7) above, the Chair~~President~~ or the Council may determine to hold additional meetings.

4.4 Special Meetings

In addition to the Council meetings contemplated in Articles 4.2, 4.3 and 3.9(7), ten Council Members can request a meeting by filing a requisition with the Registrar, who shall schedule the meeting as soon as is reasonably feasible. The requisition shall set out the business that is to be transacted at the meeting.

4.5 Business to Be Transacted at Meetings

Except as otherwise provided in the bylaws, the Council may only consider or transact at any Council meeting, other than a special meeting which may only consider the business specified in the requisition;

- (a) matters brought forward by the Executive Committee for education, deliberation or ratification;
- (b) recommendations and reports by Committees;
- (c) matters of which notice was given to the Registrar by a Council Member at the preceding Council meeting or where written notice has been given 21 days in advance of the Council meeting;
- (d) reports by the Registrar and the Council Chair~~President~~; or
- (e) such other matters, not included in the agenda for the Council meeting, as a majority of Council Members in attendance determine to be urgent in nature.

4.6 Agenda

The ~~Chair, in conjunction with the Registrar~~President shall establish, or cause to be established, the agenda for each Council meeting. The agenda for each Council meeting, other than a special meeting which may only consider the business specified in the requisition, shall include a reasonable period during which any Council Member may raise for discussion topics relevant to the affairs of the College, whether or not otherwise part of the business to be transacted at the Council meeting. However, any motions made in respect of those items shall be made in accordance with Article 4.5(e).

4.7 Quorum and Voting

- (1) A majority of Council Members shall constitute a quorum for the transaction of business. Unless otherwise provided for, questions arising at any meeting of the Council shall be decided by a majority of votes of those present and voting. In the event that a vote is tied following deliberation of the question, the question shall be deemed to have been defeated.
- (2) A vote at a Council meeting shall be by a show of hands. Any Council Member may request a roll call vote unless the Council Members have determined to vote by secret ballot or the bylaws require a secret ballot.
- (3) In the event of a roll call vote, the Registrar shall request each Council Member in turn to record ~~their~~her or his vote and such vote shall be recorded in the minutes of the meeting relating to the motion or resolution under consideration.
- (4) Despite Article 4.7(1), a question may be decided by consensus where no Council Member requires a vote.
- (5) Proxy voting is prohibited.
- (6) Voting via conference call or other electronic means is permitted during a Council meeting where a Council Member makes a request of the President for such an accommodation at least three business days in advance of the meeting. Such requests are considered unusual, and it is expected that the majority of Council Members will vote in person at a Council meeting unless the meeting is being held electronically or in a hybrid format.

4.8 Chair of Council

- (1) For the purposes of the conduct of its meetings, unless an alternate chair has been appointed as set out in Article 4.9, the ~~Council Chair~~President shall preside at all meetings. The Vice-~~Chair~~President shall preside at all meetings where the ~~Chair~~President is absent and in the absence of both the ~~Chair~~President and the Vice-~~Chair~~President, the meeting shall be chaired by another Council Member chosen by a majority of the Council Members present and voting at such meeting.
- (2) If the ~~Chair~~President chooses to step down as chair during a Council meeting, the Vice-

~~Chair~~**President** shall assume the chair's role. If the Vice-~~Chair~~**President** is unable to serve as chair, an alternate chair will be chosen from among the Council Members.

4.9 Alternate Chair

For the purposes of the conduct of its meetings, the Council may appoint a non-voting chair who is not a Registrant of the College or a Council Member to preside at any or all meetings. Such a chair shall function solely as an arbiter of procedure in accordance with the procedures adopted in this bylaw. Before assuming ~~their~~**her or his** duties, the appointed chair shall undertake to maintain confidentiality in accordance with the Act.

4.10 Evidence of Meeting Proceedings

- (1) At any meeting, unless a poll is demanded, a declaration by the chair of the meeting that a resolution has been carried or carried unanimously or by a particular majority or lost or not carried by a particular majority shall be conclusive evidence of the fact without proof of the number or proportion of votes recorded in favour of, or against a matter.
- (2) The Council shall cause minutes to be kept of its proceedings and meetings to form a record of all motions and decisions, which shall be kept at the College office unless the Council otherwise decides.

The written record of the proceedings of a Council meeting when confirmed at a subsequent Council meeting, subject to any corrections made at such subsequent meeting, is ~~is~~ proof of the accuracy of the contents of every such record.

4.11 Adjournments

Whether or not a quorum is present, the chair of a meeting may, with the consent of the Council Members present, adjourn the meeting. Notice of the time and place of the adjourned meeting shall be given to the Council Members and to the public. Any business which might have been brought before and dealt with at the original meeting may be brought before and dealt with at any adjourned meeting.

~~4.12 Deputations at Council Meetings by External Groups[†]~~

- ~~(1) Any person who is not a Council Member may request to make a deputation at a meeting of the Council and may be permitted to do so.~~
- ~~(2) Requests for permission to make a deputation must be submitted in accordance with the criteria and schedule for the submissions of such requests, as determined and published by the~~

[†] ~~A deputation is a submission made to the Council by a person who is not a Council Member at the person's request. Normally only Council Members and Council resource people (e.g. staff, College consultants) are permitted to speak at Council meetings. Deputations often involve a request by the person for the Council to do something (e.g. make a regulation or bylaw, change a policy).~~

~~Council from time to time.~~

- ~~(3) No deputation shall be permitted or scheduled prior to review by the Executive Committee and its determination that the deputation is appropriate.~~

4.134.12 Other Meeting Procedures

With respect to procedural matters relating to the conduct of a Council meeting and not otherwise provided for in this bylaw, all questions arising as to any such procedure shall be determined having regard to the procedures adopted by Council.

4.144.13 Meetings Held by Electronic Communication

Meetings of Council may be held in any manner that allows all persons participating to communicate with each other simultaneously and instantaneously.

4.154.14 Written Resolution

A resolution signed by all Council Members is as valid and effective as if passed at a meeting of the Council held for the purpose of the resolution.

ARTICLE 5: COMMITTEES

5.1 Duties of the Executive Committee

- (1) Between the meetings of the Council, the Executive Committee has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or bylaw in accordance with the Act.
- (2) If the Executive Committee exercises a power of the Council under Article 5.1(1), it shall report on its actions to the Council at the Council's next meeting.
- (3) The Executive Committee shall also be constituted as the Nominating Committee.

5.2 Appointment of Council Members and Others to Committees

The Executive Committee in its capacity as the Nominating Committee shall present to Council for approval a slate of candidates to all Committee appointments, including the appointment of ~~Non-Council Member~~ Non-Council Committee Members. Council may propose additional suggestions or alternative Committee assignments.

5.3 Term of Appointment

- (1) Except as otherwise provided in the bylaw, appointments to all Committees, other than Executive, Discipline or Fitness to Practise (the latter two of which all members of Council are members), shall be for a one-year term and Committee Members may be reappointed for a maximum of two more consecutive terms. Subject to the other provisions of the bylaws relating to the Executive, Discipline and Fitness to Practise Committees, under special circumstances that Council identifies at the meeting and documents in the minutes of the meeting, a person may be reappointed to a Committee despite serving on that Committee for three consecutive years.
 - (a) In a manner consistent with Article 3.16, a Council Member may serve on the Executive Committee for more than three consecutive years including as ~~Chair~~President and Vice-~~Chair~~President so long as the aggregate number of years as ~~Chair~~President is not more than three, the aggregate number of years as Vice-~~Chair~~President is not more than three and the aggregate number of years serving as a member of the Executive Committee while not ~~Chair~~President or Vice-~~Chair~~President is not more than three.
- (2) Subject to Article 5.3(1), a Committee Member who has served the maximum term of three consecutive years on any respective Committee, other than the Executive, Discipline and Fitness to Practise Committees, is deemed ineligible for re-appointment to that Committee for a period of at least 12 months following the expiry of ~~their~~her or his final term of office.

5.4 Adding and Removing Members

Council may add or remove members to a Committee as required for the efficient operation of the Committee. Where a Committee member is being removed for cause, however, the procedures in the bylaw on disqualification apply.

5.5 Vacancy

Subject to Article 3.18, where a vacancy occurs in respect of the membership by a Council Member on a Statutory Committee, the Executive Committee shall, if necessary for a Committee to achieve its quorum or if necessary to give effect to the provisions of the Act, appoint Council Members to fill any vacancies. Every Council Member of a Committee so Appointed shall continue to be a member of such Committee until confirmed or replaced, provided that any such appointment shall not extend beyond the then remaining term of the Council Member being replaced. Where a Council Member vacancy has occurred on any Committee, the Council shall, at its next meeting, fill such vacancy from among the remaining Council Members or, if appropriate, confirm the replacement of the Council Member who was installed as a replacement by the Executive Committee as contemplated above.

5.6 Appointment of Committee Chair

At the first meeting of a Committee after the first regular Council meeting in each year, the members of the Committee shall choose a chair from among their number, provided that the chair of each Statutory Committee is a Council Member.

5.7 Limitations on Powers

Where Council delegates to any Committee any power or authority not specifically provided to that Committee under the Act or the bylaw of the College, the exercise of such power or authority by such Committee is subject to review and approval by the Council.

5.8 Conduct Committee and Other Non-Statutory Committees

- (1) There shall be a Conduct Committee- which shall be composed of between three and five Council Members from statutory regulators other than the College, at least one of whom shall be a Public Member. A quorum of the Conduct Committee shall be three members, at least one of whom shall be a Public Member.
- (2) The members of the Conduct Committee shall be appointed by the Council at the first Council meeting of the year.
- (3) A member of the Conduct Committee who ceases to be a Council member of a statutory regulator after a Code of Conduct matter has commenced under the College's Council Code of Conduct shall be deemed for the purpose of dealing with that matter, to remain a member of the Committee until the final disposition of the matter, unless the Executive Committee

determines otherwise.

- (4) The Conduct Committee shall perform the duties assigned to it in this bylaw and any other duties assigned to it by Council in its terms of reference.
- (5) The Council may, from time to time, create other Non-Statutory Committees to complete specific projects or tasks. The creation or dissolution of such a Committee requires a motion from Council.
- (6) In the event of a vacancy on any Non-Statutory Committee, the provisions relating to filling a vacancy on a Statutory Committee shall apply.
- (7) Committees are composed of a minimum of three persons.
- (8) When required, Non-Statutory Committees may be supported by legal and/or technical consultants, and other resource persons as required.
- (9) Non-Statutory Committees shall prepare and/or maintain:
 - (a) agendas and minutes for each meeting; and
 - (b) reports to Council for each Council meeting.

5.9 Procedures for Meetings of Committees

- (1) Subject to the Act and unless otherwise required by law, each Committee shall meet from time to time at the direction of the Council or the Executive Committee or at the direction of the chair or a majority of the members of such Committee on a date and time designated. Meetings may be held by electronic means.
- (2) A College staff person supporting the Committee's activities shall make reasonable efforts to notify all Committee members, via telephone, e-mail, written correspondence or some other mode of communication to arrange the meeting date and time for the convenience of the majority of the Committee members.
- (3) The majority of members (at least one of whom is a Public Member) of any Committee shall constitute a quorum unless the Act provides otherwise.
- (4) Every question that comes before a Committee shall be decided by a majority of those members present and voting. In the event that a vote is tied following deliberation of the question, the question shall be deemed to have been defeated.
- (5) Except for hearings² held pursuant to the Act, each Committee shall cause minutes to be kept of its proceedings and meetings to form a record of all motions and decisions, which shall be kept

² Procedure for hearing panels are dealt with by the Health Professions Procedural Code, *Statutory Powers Procedure Act* and the Committee's rules of procedure.

at the College office unless the Council otherwise decides.

The written record of the proceedings of a Committee meeting when confirmed at a subsequent Committee meeting, subject to any corrections made at such subsequent meeting, is proof of the accuracy of the contents of every such record.

5.10 Committee Reports

The Registrar shall keep a written record of every Committee meeting.

5.11 Composition of Statutory Committees

- (1) The **Executive Committee** shall be composed of:
 - (a) three Council Members who are Registrants; and
 - (b) two Council Members who are Public Members.
- (2) The ~~President Chair~~ and Vice-~~President Chair~~ of the Council shall be Ex-officio members of the Executive Committee.
- (3) The **Registration Committee** shall be composed of at least:
 - (a) three Council Members who are Registrants;
 - (b) two Council Members who are Public Members;
 - (c) one or more ~~Non-Council Member~~Non-Council Committee Members, as needed. ~~The total number of Non-Council Members shall not exceed the total number of Council Members on the Committee.~~
- (4) The **Inquiries, Complaints and Reports Committee** shall be composed of at least:
 - (a) four Council Members who are Registrants;
 - (b) four Council Members who are Public Members; and
 - (c) one or more ~~Non-Council Member~~Non-Council Committee Members, as needed. ~~The total number of Non-Council Members shall not exceed the total number of Council Members on the Committee.~~
- (5) The **Discipline Committee** shall be composed of:
 - (a) every Council Member; and
 - (b) one or more ~~Non-Council Member~~Non-Council Committee Members, as needed. ~~The total number of Non-Council Members shall not exceed the total number of Council Members on the Committee.~~

- (6) The **Fitness to Practise Committee** shall be composed of:
- (a) every Council Member; and
 - (b) one or more ~~Non-Council Member~~Non-Council Committee Members, as needed. ~~The total number of Non-Council Members shall not exceed the total number of Council Members on the Committee.~~
- (7) The **Quality Assurance Committee** shall be composed of at least:
- (a) three Council Members who are Registrants;
 - (b) two Council Members who are Public Members; and
 - (c) one or more ~~Non-Council Member~~Non-Council Committee Members, as needed. ~~The total number of Non-Council Members shall not exceed the total number of Council Members on the Committee.~~
- (8) The **Patient Relations Committee** shall be composed of at least:
- (a) two Council Members who are Registrants;
 - (b) three Council Members who are Public Members; and
 - (c) one or more ~~Non-Council Member~~Non-Council Committee Members, as needed. ~~The total number of Non-Council Members shall not exceed the total number of Council Members on the Committee.~~

5.12 Constitution of a Committee

Despite this Article, a Committee is properly constituted, even with a vacancy, so long as a quorum of the Committee can be formed.

5.13 Composition of Panels

Panels shall be selected by the respective Committee chair and this selection will be documented in writing and filed ~~on-site~~.

ARTICLE 6: APPOINTMENT OF REGISTRAR AND OTHER REPRESENTATIVES

6.1 Registrar

In accordance with the Act, Council shall appoint the Registrar who shall serve as the Chief Executive Officer of the College.

6.2 Deputy Registrar

The Registrar shall appoint a Deputy Registrar who shall be the ~~A~~acting Registrar and have all of the powers and duties of the Registrar should the Registrar be unable to act due to absence from the College or being unavailable or the position of the Registrar becoming vacant.

6.3 Inspectors, Investigators, Evaluators and Assessors

- (1) The Registrar may from time to time appoint persons to act in the capacity of inspector, investigator, evaluator or assessor on behalf of the College. Persons so appointed shall perform such duties as may be determined by the Registrar or a Committee of the College, as the case may be, in accordance with the powers granted under the Act.
- (2) Each inspector, investigator, evaluator or assessor appointed shall make a written report to the Registrar or the appropriate Committee of every inquiry made.

6.4 Removal of the Registrar

Council shall have the authority to remove the Registrar from ~~their~~~~his or her~~ position and/or terminate the Registrar's employment with the College for any lawful reason.

ARTICLE 7: REMUNERATION AND PROTECTION OF COUNCIL MEMBERS, NON-COUNCIL MEMBERS AND OTHERS

7.1 Remuneration of Council Members

- (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.

7.2 Indemnity of Council Members, ~~Non-Council Member~~Non-Council Committee Members and Others

Every Council Member, every other member of a Committee, and any inspector, investigator, evaluator or assessor appointed from time to time by the College and every employee of the College who, in respect of ~~their~~his or her duties has undertaken or is to undertake any liability on behalf of the College, and the heirs, executors, administrators and personal legal representatives shall be indemnified and saved harmless out of the funds of the College from and against all costs, charges and expenses whatsoever that such person sustains or incurs in or about any action, suit or proceeding that is brought, commenced or prosecuted against her or him in or about the execution or intended execution of the duties of ~~their~~her or his office or employment or in respect of any other liabilities, save and except such costs, charges or expenses as are occasioned by her or his own willful neglect or default.

7.3 Liability Insurance of Registrants

A Registrant, other than an Inactive Registrant who has purchased any run-off coverage (sometimes called enduring or tail coverage) contemplated by these bylaws, must carry professional liability insurance with the following characteristics:

- (a) minimum of no less than \$1,000,000 per occurrence;
- (b) annual aggregate coverage of no less than \$5,000,000;
- (c) a deductible of no more than \$4,000 per occurrence;
- (d) run-off coverage (sometimes called enduring or tail coverage) for a minimum of two years;
- (e) provided by an insurer licensed with the Financial Services Commission of Ontario or the office of the Superintendent of Financial Institutions Canada; and

- (f) a sexual abuse therapy and counselling fund endorsement that,
 - (i) provides coverage for therapy and counselling for every person eligible for funding under subsection 85.7(4) of the Code; and
 - (ii) provides coverage, in respect of each such eligible person, for the maximum amount of funding that may be provided for the person under the Act, for therapy and counselling as a result of sexual abuse by the Registrant.

ARTICLE 8: BANKING AND INVESTMENTS

8.1 Banking

- (1) The Council shall appoint a Canadian chartered bank (which shall be a Schedule 1 or Schedule 2 bank under the *Bank Act* (Canada)) for the use of the College. All money received shall be deposited in the account or accounts maintained by the College at such bank, without deduction for any purpose whatsoever. The College shall have a petty cash fund for expenditure items where payment by individual cheque is not practical, any such payment not to exceed \$200 and such petty cash fund to be operated on an “as needed” basis. Except for payments out of the petty cash fund as herein before contemplated, all payments by the College shall be made by cheque drawn on the College’s bank account as contemplated above.
- (2) All cheques or payments issued on behalf of the College in excess of \$100,000.00 excluding salaries, or such other amount as may be determined by the Council from time to time, must be signed by both the [Council Chair](#)~~President~~ and Registrar.
- (3) All cheques or payments issued on behalf of the College not in excess of \$100,000.00 or such other amount as may be determined by the Council from time to time shall be signed by both the Registrar and the Deputy Registrar, the Director of Corporate Services or the [Council Chair](#)~~President~~. However, the person to whom the cheque is made payable shall not sign it.
- (4) The Registrar may not make any payment where amounts or orders have been split to avoid the limit on purchases or where due diligence has not been exercised with respect to potential or actual conflicts of interest.
- (5) The Registrar may endorse any negotiable instrument for collection on account of the College through the College’s bank or for deposit to the credit of the College with the College’s bank. The College’s rubber stamp may be used for such endorsement.

8.2 Fidelity

The College shall, after consulting with an insurance broker regarding the College’s requirements, obtain comprehensive insurance coverage for, among other things, directors’ and officers’ liability, fidelity, property damage and personal injury.

8.3 Investment

- (1) The Registrar may invest or re-invest the funds of the College which are not immediately required for the purposes of the College in such manner as the Council, may from time to time, by resolution direct, and, in order to implement such investment or reinvestment, Council may authorize by resolution an officer or officers of the College to carry out such direction.

- (2) The funds of the College to be invested as referred to above in this section may be invested only in securities issued or guaranteed by:
- (a) the Government of Canada;
 - (b) the government of a province of Canada;
 - (c) a Schedule I Canadian chartered bank; or
 - (d) a corporate bond issued by a corporation with a rating of BBB or higher with the Dominion Bond Rating Service or a rating of four stars or higher with Morningstar Bond Ratings.

8.4 Custody of Securities

All securities owned by the College from time to time shall be lodged, in the name of the College, with a Canadian chartered bank or a Canadian trust company, or in a safety deposit box, or held in accounts with such brokerage houses as may be authorized by the Council. Any such securities and other documents shall be placed in, or removed from, the College's safety deposit box only by two of the following: Registrar or Deputy Registrar and [Council Chair](#)-~~President~~ or Vice-~~President~~[Chair](#).

8.5 Ownership of Securities

All share certificates, bonds, debentures, notes or obligations belonging to the College shall be issued in the name of the College.

ARTICLE 9: BORROWING

9.1 Borrowing and Giving of Security

The Registrar, or any one or more officers or employees of the College as the Council from time to time determines, may, from time to time and with the approval of Council:

- (a) borrow money on the credit of the College;
- (b) limit or increase the amount or amounts to be borrowed;
- (c) issue, sell or pledge for such sums and such prices as may be deemed expedient, securities of the College; and
- (d) charge, mortgage, hypothecate or pledge all or any of the real or personal property of the College, including book debts, rights, powers, franchises and undertakings, to secure any such securities or any money borrowed, or other debt, or any other obligation or liability of the College.

ARTICLE 10: AUDITORS

10.1 Appointment of Auditors

Council shall, in each fiscal year, appoint an accountant or firm of accountants licensed under the *Public Accounting Act* to audit the accounts of the College. If an appointment is not so made, the auditors appointed in the immediate previous fiscal year shall continue, until a successor is appointed.

10.2 Notice to Auditors

The Registrar shall give notice of every appointment and re-appointment of auditors to the auditors in writing promptly after the appointment or re-appointment is made, together with a copy of this bylaw.

10.3 Examinations by Auditors

The auditors shall make such examinations as will enable them to report to the Council as required by law and under this bylaw. Without limiting the generality of the foregoing, the auditors shall report to the Executive Committee at its last meeting before the Council meeting at which the financial statements of the College are to be submitted. The auditors of the College shall report in writing to the Council at the meeting at which the financial statements of the College are to be submitted and shall state in the report whether, in their opinion, the financial statements present fairly the financial position of the College and the results of its operations for the period under review in accordance with Canadian accounting standards for not-for-profit organizations.

10.4 Access

The College's auditors shall be given a right of access at all reasonable times to all records, documents, books, accounts and vouchers of the College and shall be entitled to require from the Council Members and other officers and employees of the College such information as in their opinion, giving due weight to the principle of privacy of personal information, is necessary to enable them to report as required by law and under this bylaw.

10.5 Attendance at Meetings

The College's auditors shall be entitled to attend any meeting of the Council and to be heard at any such meeting at which their representative is in attendance on any part of the business of the meeting that concerns the auditors or the financial statements of the College. The Registrar shall send a notice of every meeting of the Council to the College's auditors in sufficient time so as to allow the College's auditors to arrange for representation at such meeting.

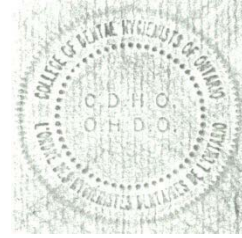
10.6 Limitation of Executive Committee Authority

For greater certainty, notwithstanding the delegation of executive authority to the Executive Committee pursuant to the Act or Article 5.1, the Executive Committee shall not exercise the powers or duties of the Council under Article 10.

ARTICLE 11: SEAL

11.1 Seal

The seal depicted on the right is the seal of the College.



11.2 Custody of Seal

The seal shall be kept in the custody of the Registrar on behalf of the College.

11.3 Logo and Name Mark

The logo and name mark depicted on the College website shall be the logo and name mark of the College as depicted below. The College asserts all intellectual property rights over the logo and name mark.



ARTICLE 12: EXECUTION OF DOCUMENTS, ETC.

12.1 Bank Signing Authorities

Subject to Article 8.1, all contracts, documents, cheques or other instruments in writing pertaining to the College's banking business that require signatures shall be signed by the Registrar.

12.2 Execution of Other Documents

All other contracts, documents or instruments in writing requiring the signature of the College may be signed by the Registrar, or by persons to whom the Registrar has delegated such authority, and all contracts, documents or instruments in writing so signed shall be binding upon the College without any further authorization or formality. The Council is also authorized, from time to time, to appoint any officer or officers or any other person or persons on behalf of the College either to sign contracts, documents or instruments in writing generally or to sign specific contracts, documents or instruments in writing as required.

12.3 Definition of Contracts, etc.

The term "contracts, documents or instruments in writing" as used in this section is intended to include deeds, mortgages, hypothecs, charges, conveyances, transfers and assignments of property, real or personal, movable or immovable, powers of attorney, agreements, releases, receipts and discharges for the payment of money or other obligations, conveyances, transfers and assignments of shares, bonds, debentures or other securities and all paper writings.

12.4 Summonses

Except where otherwise provided by law, the Registrar may sign summonses, notices and orders on behalf of the College or any Committee.

12.5 Affixation of Seal

The seal of the College shall, when required, be affixed to documents by anyone authorized to sign the document.

ARTICLE 13: ENACTMENT, AMENDMENT AND REPEAL OF BYLAWS

13.1 Enactment, Amendment and Repeal

A bylaw of the College may be made, amended and repealed by a vote of at least two-thirds of the Council Members present and voting at any Council meeting.

13.2 Notice of Proposal

Where obligated by the Act, proposed bylaws shall be circulated to every Registrant at least 60 days before Council approves them.

13.3 Numbering and Maintenance

Every bylaw and every amendment and repeal thereof shall be numbered according to the order in which it was passed, certified by the Council Chair~~President~~ or Vice-~~Chair~~~~President~~ and by the Registrar and sealed and maintained in a book in its numerical order.

ARTICLE 14: INFORMATION REQUIRED BY THE COLLEGE

14.1 Timing of Annual Renewal

The Registrar shall, at least 45 days before the deadline for annual renewal of the current certificate of registration, send to every Registrant, at the address to which the Registrant wishes correspondence from the College to be sent shown in the register, a notice respecting the required payment of annual fees and the information that is required to be provided at the time of renewal.

14.2 Providing Information to the College

~~When~~ requested, the Registrant shall immediately provide the College with the following information, in the form requested by the College:

- ~~(a)~~ Information required to be maintained in the register in accordance with subsection 23(2) of the Code, Regulation 261/18 under the RHPA, and Article 15 of this bylaw;
- ~~(a)(b)~~ Information required to be provided to the College pursuant to sections 85.6.1 through 85.6.4 of the Health Professions Procedural Code regarding offences (charges and findings), misconduct findings, membership in other regulatory bodies, and bail conditions, etc.:
- ~~(b)(c)~~ The address and telephone number of the Registrant's primary residence and a current e-mail address to which only the Registrant has access;
- ~~(c)(d)~~ Every business address and business telephone number, and, if available, business facsimile number and business email address;
- ~~(d)(e)~~ Proof of professional liability insurance in accordance with Article 7.3 of this Bylaw;
- ~~(e)(f)~~ The Registrant's areas of practice and categories of Clients seen;
- ~~(f)(g)~~ Information regarding the Registrant's employment including:
 - (i) the Registrant's title and position,
 - (ii) a description of the Registrant's role, duties, and responsibilities, and
 - (iii) the Registrant's employment category and status;
- ~~(g)(h)~~ If there have been any changes to the Registrant's name since the date of the Registrant's initial application for registration, and where requested by the College, documentation supporting the change;
- ~~(h)(i)~~ Any nicknames, short forms of given names, aliases or assumed names that the Registrant uses in any place of practice;
- ~~(i)(j)~~ Information about the Registrant's registration with any other body that governs a profession, whether inside or outside of Ontario, including the name of the governing

body, the Registrant's registration or licence number and the date the Registrant first became registered and the expiry date of that registration or licence number;

~~(j)~~(k) The name of the educational institution where the Registrant obtained a certificate, diploma or degree in dental hygiene, the type of certificate, diploma or degree obtained and the date each was issued;

~~(k)~~(l) Information about any referral to a hearing or finding of professional misconduct or incompetence or similar referral to a hearing or finding that has been made against the Registrant by a body that governs a profession, inside or outside of Ontario, where that finding has not been reversed on appeal, including:

- (i) the referral to a hearing or finding,
- (ii) the name of the governing body that made the referral to a hearing or finding,
- (iii) a brief summary of the facts on which the referral to a hearing or finding was based,
- (iv) the penalty and any other orders made relative to the referral to a hearing or finding,
- (v) the date the referral to a hearing or finding was made,
- (vi) information regarding any appeals of the referral to a hearing or finding, and
- (vii) the notice of hearing if available;

~~(l)~~(m) Information about any finding of incapacity or similar finding that has been made against the Registrant by a body that governs a profession, inside or outside of Ontario, where that finding has not been reversed on appeal, including:

- (i) the finding,
- (ii) the name of the governing body that made the finding,
- (iii) the date the finding was made,
- (iv) a summary of any order made, and
- (v) information regarding any appeals of the finding;

~~(m)~~(n) Information about the Registrant's participation in the Quality Assurance Program;

~~(n)~~(o) Information for the purpose of compiling statistical data;

~~(o)~~(p) Information about any finding by a court made after June 3, 2009 of professional negligence or malpractice against the Registrant; and

~~(p)~~(q) Information required by the Minister of Health and Long-Term Care.

14.3 Notification of Changes of Information

The Registrant shall update their information on the College website or notify the College, in writing, of any changes to the ~~following~~ information required to be provided to the College pursuant to article 14.2 within 14 days of the effective date of the change.:

~~(a)~~—The Registrant's name;

- ~~(b) — The address and telephone number of the Registrant's primary residence and a current e-mail address to which only the Registrant has access;~~
- ~~(c) — Every employment address and employment telephone number, and, if available, every business facsimile number and business email address;~~
- ~~(d) — The Registrant's professional liability insurance as required by Article 7.3 of this Bylaw;~~
- ~~(e) — Details about registration, membership or licensure with any regulatory body inside or outside of Ontario;~~
- ~~(f) — Details about misconduct, incompetence, incapacity or similar proceedings against the Registrant, whether completed or ongoing, by a regulatory body in or outside of Ontario;~~
- ~~(g) — Details about any finding by a court against the Registrant in respect of a federal, provincial or other offence;~~
- ~~(h) — Conditions, terms, orders, directions or agreements relating to the custody or release of the Registrant in respect of federal, provincial or other offence processes; and~~
- ~~(i) — Details about any current charges against a Registrant, in respect of a federal, provincial or other offence.~~

ARTICLE 15: THE REGISTER

15.1 Maintaining the Register

The Registrar shall maintain a register in accordance with section 23 of the Code.

15.2 Name in the Register

~~Unless Article 15.3 applies, a~~ A Registrant's name in the register shall include their ~~be the~~ full legal name indicated on the documents used to support the Registrant's initial registration with the College and may also include an additional name pursuant to article 15.3.

15.3 Change of Name

The Registrar may also enter a name other than the name referred to in Article 15.2, in the register if the Registrar:

- (a) has received a written request from the Registrant;
- (b) is satisfied that the Registrant has legally changed their~~his or her~~ name; and
- (c) is satisfied that the name change is not for any improper purpose.

15.4 Primary Business Address

A Registrant's primary business address in the register shall be the address of the location in Ontario where the Registrant is practicing~~employed or self-employed~~ as a dental hygienist. In the event that the Registrant is practicing~~employed or self-employed~~ as a dental hygienist in more than one location in Ontario, the Registrant's primary business address shall be the location where the Registrant currently works the most hours. All other business addresses will be listed as secondary business addresses in the register. In the event that the Registrant is not practising~~employed or self-employed~~ in Ontario as a dental hygienist, the Registrar shall enter as the Registrant's primary business address the location designated by the Registrant or any other location for the Registrant known by the College.

15.5 Primary Business Telephone Number

A Registrant's primary business telephone number in the register shall be the telephone number of the location in Ontario where the Registrant is practising~~employed or self-employed~~ as a dental hygienist. In the event that the Registrant is employed or self-employed as a dental hygienist in more than one location in Ontario, the Registrant's primary business telephone number shall be the telephone number of the location where the Registrant currently works the most hours. In the event that the Registrant is not employed in Ontario as a dental hygienist, the register shall not contain a business telephone number for the Registrant.

15.6 Other Information in the Register

In addition to the information set out in subsection 23(2) of the Code and Regulation 261/18 under the RHPA, the following is designated as public information:

- (a) ~~Every business address and business telephone number;~~
- (b) The Registrant's registration number;
- (c) The dates on which each class of registration and specialist status that the Registrant holds was obtained and, if applicable, the dates on which each terminated;
- (d) If the Registrant ceased to be a Registrant, a notation specifying the reason for the termination of registration and the date upon which the Registrant ceased to be a Registrant;
- (e) Information relating to the Registrant's education in dental hygiene, including date of graduation and educational institution;
- ~~(d) —~~
- ~~(e)(f)~~ Where, on or after December 31, 2015, for 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, a panel of the Inquiries, Complaints and Reports Committee requires a Registrant to appear before a panel of the Committee to be cautioned a fulsome summary of the caution and such other relevant information that the Registrar believes is in the public interest to include,,
 - ~~(i) a notation of that fact,~~
 - ~~(ii) a summary of the caution,~~
 - ~~(iii) the date of the panel's decision,~~
 - ~~(iv) the date upon which the Registrar is satisfied that the Registrant has appeared before a panel of the Inquiries, Complaints and Reports Committee and received the caution, and~~
- ~~(v) if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review and any reconsideration by the Committee is finally disposed of;~~
- (f)(g) Where, on or after December 31, 2015, for 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, a panel of the Inquiries, Complaints and Reports Committee takes other action requiring a Registrant to complete a specified continuing education or remediation program (SCERP) a fulsome summary of the SCERP and such other relevant information that the Registrar believes is in the public interest to include,;
 - ~~(i) — a notation of that fact,~~
 - ~~(ii) — a summary of the specified continuing education or remediation program,~~

- ~~(iii) — the date of the panel's decision,~~
 - ~~(iv) — the date the specified continuing education or remediation program is successfully completed, and~~
 - ~~(v) — if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review and any reconsideration by the Committee is finally disposed of;~~
- ~~(g)~~ — Where, on or after December 31, 2015, for 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, a panel of the Inquiries, Complaints and Reports Committee obtains an undertaking from the Registrant, a fulsome summary of the undertaking and such other relevant information as the Registrar determines is in the public interest to include;
- ~~(i) — a notation of that fact,~~
 - ~~(ii) — a summary of the terms of the undertaking,~~
 - ~~(iii) — the date of the panel's decision,~~
 - ~~(iv) — the date all of the terms of the undertaking are successfully completed, and~~
 - ~~(v)(h) — if applicable, a notation that the panel's decision is subject to review and therefore is not yet final, which notation shall be removed once the review and any reconsideration by the Committee is finally disposed of;~~
- ~~(h)~~~~(i)~~ — Notwithstanding paragraphs “e”, “f” and “g” where, after a review, the Inquiries, Complaints and Reports Committee has been required to remove or vary the order ~~appearance for a caution, a specified continuing education or remediation program~~ or an undertaking, the notation may be removed once the Committee makes its new decision. Where the original order ~~requirement to appear for a caution, to complete a specified continuing education or remediation program~~ or requirement to complete an undertaking has been varied, the Registrar may enter a summary of the process leading up to and the results of the variation;
- ~~(i)~~~~(j)~~ — Where, for a pending complaint or other type of investigation, the Registrar confirms that the College is investigating a Registrant because there is a compelling public interest in disclosing this information pursuant to clause 36(1)(g) of the Act, the fact that the Registrant is under investigation;
- ~~(j)~~ — ~~(j)~~ Where an allegation of a Registrant's professional misconduct or incompetence has been referred to the Discipline Committee or where the Registrar has referred an application for reinstatement to the Discipline Committee under section 73 of the Code and the matter is outstanding, a fulsome summary of the matter and such other information that the Registrar believes is in the public interest;
- ~~(i) — the date of the referral,~~
 - ~~(ii) — a brief summary of each specified allegation,~~

- ~~(iii)~~ — the notice of hearing;
- ~~(iv)~~ — the anticipated date of the hearing, if the hearing date has been set, or the next scheduled date for the continuation of the hearing if the hearing has commenced;
- ~~(v)~~ — if the hearing is awaiting scheduling, a statement of that fact, and
- ~~(vi)(k)~~ — if the hearing of evidence and arguments is completed and the parties are awaiting a decision of the Discipline Committee, a statement of that fact;
- ~~(k)(l)~~ — Where the results of a disciplinary proceeding are contained in the register, the date on which the panel of the Discipline Committee made the finding of professional misconduct or incompetence and the date on which the panel made an order;
- ~~(h)(m)~~ — After December 31, 2015 a summary of any reprimand given publicly to a Registrant as part of the order of a panel of the Discipline Committee, unless the results of the proceeding before the Discipline Committee are not otherwise available to the public under the Code;
- ~~(m)(n)~~ — A notation, including the date of the referral, for every matter that has been referred by the Inquiries, Complaints and Reports Committee to the Fitness to Practise Committee under section 61 of the Code and has not been finally resolved, until the matter has been resolved;
- ~~(n)(o)~~ — Any information jointly agreed to be placed on the register by the College and the Registrant;
- ~~(o)(p)~~ — Where the Registrant's certificate of registration is subject to an interim order, a notation of that fact, the nature of the order and the date that the order took effect;
- ~~(p)(q)~~ — Where the Registrant's certificate of registration is subject to a suspension for failure to pay a fee, the reason for the suspension and the date of the suspension in addition to the fact of the suspension;
- ~~(q)(r)~~ — Where the College is aware that a Registrant is currently registered or licensed to practise a profession inside or outside of Ontario, a notation of that fact;
- ~~(r)~~ — ~~(r)~~ Where the College is aware that a pending allegation of professional misconduct or incompetence or a similar allegation has been referred to a discipline type of hearing against a Registrant registered or licensed to practise a profession inside or outside of Ontario, a fulsome summary of the matter and such other relevant information that the Registrar believes is in the public interest:
 - ~~(i)~~ — a notation of that fact,
 - ~~(ii)~~ — the date of the referral if available,
 - ~~(iii)~~ — a brief summary of each allegation if available, and
 - ~~(iv)(i)~~ — the notice of hearing if available;
- ~~(s)~~ — ~~(s)~~ Where the College is aware that a finding of professional misconduct or incompetence or a similar finding has been made against a Registrant registered or licensed to practise a profession inside or outside of Ontario and that finding has not

been reversed on appeal, a fulsome summary of the matter and such other relevant information that the Registrar believes is in the public interest;

- ~~(i)~~ — a notation of that fact,
- ~~(ii)~~ — the date of the finding and the name of the governing body that made the finding if available,
- ~~(iii)~~ — a brief summary of the facts on which the finding was based if available,
- ~~(iv)~~ — the order made if available, and
- ~~(v)~~ — information regarding any appeals of the finding or order if available;
- ~~(t)~~ — ~~(t)~~ Where the College is aware that a finding of incapacity or similar finding has been made against a Registrant registered or licensed to practise a profession inside or outside of Ontario, and that finding has not been reversed on appeal, a fulsome summary of the matter and such other relevant information that the Registrar believes is in the public interest;

- ~~(i)~~ — a notation of the finding,
- ~~(ii)~~ — the name of the governing body that made the finding,
- ~~(iii)~~ — the date the finding was made if available,
- ~~(iv)~~ — a summary of any order made if available, and
- ~~(v)~~ ~~(s)~~ — information regarding any appeals of the finding or order if available;

~~(u)~~ ~~(t)~~ Where a decision of a panel of the Discipline Committee has been published by the College with the Registrant's or former Registrant's name included,

- (i) a notation of that fact, and
- (ii) identification of, a link to, or a copy of the specific publication containing that decision;

~~(v)~~ ~~(u)~~ Where, during or as a result of a proceeding under section 25 of the Code a Registrant has resigned, a notation of that fact and such other relevant information that the Registrar believes is in the public interest;

~~(w)~~ ~~(v)~~ A summary of any current charges against a Registrant, of which the College is aware, in respect of a federal, provincial or other offence ~~that the Registrar believes is relevant to the Registrant's suitability to practise;~~

~~(x)~~ ~~(w)~~ A summary of any current conditions, terms, orders, directions or agreements relating to the custody or release of the Registrant in respect of provincial, federal or other offence processes, of which the College is aware, ~~and that the Registrar believes is relevant to the Registrant's suitability to practise;~~

~~(y)~~ ~~(x)~~ A summary of any findings of guilt, of which the College is aware, made by a court after December 31, 2015, against a Registrant in respect of a provincial, federal or other offence ~~that the Registrar believes is relevant to the Registrant's suitability to practise;~~

- ~~(z)~~(y) In addition to the name of every health profession corporation of which the Registrant is a shareholder, the business address, business telephone number, business e-mail address, if there is one, and any operating names of the health profession corporation;
- (aa) Any terms, conditions and limitations imposed on the certificate of registration, as well as a notation when TCLs are successfully completed to the satisfaction of the Registrar and the date of such completion.

15.7 Official Documentation

Upon request, the Registrar shall issue a written document containing such information as requested from the public portion of the register.

15.8 Information Affecting the Safety of an Individual

All of the information in the register is designated, under subsection 23(6) of the Code, as information that may be withheld from the public if the Registrar has reasonable grounds to believe that disclosure may jeopardize the safety of an individual.

ARTICLE 16: FEES

16.1 Application Fees

- (1) A person who submits an application for a general or specialty certificate of registration for consideration by the Registrar pursuant to section 15 of the Code, shall pay an application fee of ~~\$75~~\$50.

~~(2) A person who submits an application for authorization to self initiate for consideration by the Registrar shall pay an application fee of \$75.~~

16.2 Annual Fees

- (1) The annual fee payable by a Registrant is:
 - (a) \$415 for a Registrant who holds a general certificate;
 - (b) \$415 for a Registrant who holds a specialty certificate; and
 - (c) \$215 for a Registrant who holds an inactive certificate.
 - (d) If an applicant graduated from a program in dental hygiene within 12 months of applying for registration, the annual fee upon initial registration is one half of the annual fee payable by a Registrant who holds a general certificate.
- (2) The annual fees are payable by a Registrant upon first becoming a Registrant and, thereafter, on December 1 of each year in the year preceding the year to which the Registration renewal applies.
- (3) The penalty for late payment of a fee set out in Article 16.2 (1)(a)–16.2 (1)(c) is \$100 and is payable on December 2nd.

16.3 Change of Class

A Registrant who applies, after January 1 of any year, for a certificate of registration of a different class than the one already held by the Registrant, shall pay the difference between the annual fee paid by the Registrant on January 1 and the annual fee payable for the certificate for which the Registrant applied if the latter fee is greater.

16.4 Evaluation Fees

- (1) The fee to take the clinical competency evaluation for entry to practice is \$2650.
- (2) The fee to take the provincial written assessment for entry to practice is \$675.
- (3) The fee to re-take the provincial written assessment for entry to practice is \$575.

- (4) The fee to take an entry-to-practice radiology evaluation is \$650.
- (5) The fee to take the professional competency assessment for re-entry to practice is \$3225.
- (6) The fee to take the professional competency assessment for a specialty certificate is \$1500.
- (7) A person who files an appeal with the Registrar shall pay a non-refundable fee of \$350.
- (8) The prior learning assessment fee for an applicant from a non-accredited program is \$800.

16.5 Fees for Election Recount

- (1) A candidate for election as an Elected Member or selection as an Academic Member to the Council shall pay a fee of \$100 for a recount of the election or selection that the Registrar is required to hold in accordance with Article 3.2(14).
- (2) The fee shall be refunded to the candidate if the outcome of the election or selection is changed in ~~their~~his or her favour as a result of the recount.

16.6 Additional Fees

- (1) A person who makes requests of the Registrar to do that which is required or authorized to do by statute or by regulation of the Registrar shall pay:
 - (a) if a fee for doing so is prescribed, the prescribed fee; or
 - (b) if a fee is not prescribed and a fee is set by the Registrar, the fee set by the Registrar.

16.7 Obligations to Pay

- (1) The fee for reinstatement where the Registrant's certificate was suspended or revoked is \$500.
- (2) The fee for a:
 - (a) Replacement wall certificate is \$20
 - ~~(b) Replacement lapel pin is \$10~~
 - ~~(c)~~(b) Replacement of a duplicate receipt is \$10
 - ~~(d)~~(c) Certificate of professional conduct is \$15.
- (3) The obligation to pay the annual registration fee or renewal fee and to submit the annual information return continues, even if the Registrar fails to mail a notice, or the Registrant fails to receive such notice.

16.8 Administrative Fee

After the first notice, a Registrant shall pay an administrative fee of \$50 for each subsequent notice sent by the Registrar to a Registrant for failure of the Registrant to provide information or a form to the College or a Committee of the College within 30 days of being requested or required to do so. The fee is due within 30 days of the subsequent notice being sent, unless ~~they have~~he or she has, in the opinion of the Registrar, a valid explanation for failing to submit the information requested within the 30-day period.

ARTICLE 17: INTENTIONALLY LEFT BLANK

ARTICLE 18: FUNDING FOR THERAPY AND COUNSELLING

18.1 Requirements Under the Program

The Patient Relations Committee may require therapists and counsellors, who are providing therapy or counselling that is funded through the program, to submit credentials attesting to their competency in providing sexual abuse therapy and counselling. Persons who are receiving such therapy or counselling shall provide, to the Patient Relations Committee, a written statement, signed in each case by the therapist or counsellor and by the person, containing details of the therapist's or counsellor's training and experience. Persons who are receiving therapy or counselling shall provide to the Patient Relations Committee a written statement that therapy or counselling is being provided and that the funds are being devoted only to that purpose.

ARTICLE 19: PROFESSIONAL INCORPORATION

19.1 Certificate of Authorization Fee

The fee for the issuance of a certificate of authorization, including any reinstatement of a certificate of authorization, for a professional corporation is \$750.

19.2 Annual Renewal Fee

The fee for the annual renewal of a certificate of authorization is \$100.

19.3 Renewal Date

The annual renewal date for a certificate of authorization is March 1st of each year.

19.4 Failure to Renew

After the first notice, a professional corporation or a Registrant listed in the College's records as a shareholder of a professional corporation shall pay an administrative fee of \$50 for each subsequent notice sent by the Registrar to the corporation and/or Registrants affiliated with the corporation for failure of the corporation to renew its certificate of authorization on time. The fee is due within 30 days of the notice being sent unless they, in the opinion of the Registrar, have a valid explanation for failing to submit the information requested within the 30-day period.

19.5 Additional Certificate

The fee for the issuing of a document or certificate respecting a professional corporation, other than the first certificate of authorization or one annual renewal of a certificate of authorization is \$50.

19.6 Information Required by the College

Every Registrant of the College shall, for every professional corporation of which the Registrant is a shareholder, provide in writing the following information on the application and annual renewal forms for a certificate of authorization, upon the written request of the Registrar within 30 days and upon any change in the information within 30 days of the change:

- (a) the name of the professional corporation as registered with the Ontario Ministry of Government and Consumer Services;
- (b) any practice names used by the professional corporation;
- (c) the name, as set out in the register, and registration number of each shareholder of the professional corporation;

- (d) the name, as set out in the register, of each officer and director of the professional corporation, and the title or office held by each officer and director;
- (e) the principal practice address, telephone number, facsimile number and e-mail address of the professional corporation;
- (f) the address and telephone number of all other locations, other than residences of Clients, at which the professional services offered by the professional corporation are provided; and
- (g) a brief description of the professional activities carried out by the professional corporation.

19.7 Public Information

The information specified in Article 19.6 is designated as public for the purposes of subsection 23(5) of the Code.

ARTICLE 20: DECLARED EMERGENCIES

In the event of the declaration of a state emergency by the Government of Canada or by the government of any province or territory of Canada or for any other reason, the College may waive or extend any deadline under these bylaws or curtail any services of the College for the duration of length of the state of emergency. The College will communicate with Registrants where possible.

SCHEDULE I

CODE OF ETHICS

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.

PRINCIPLE I: BENEFICENCE

- ***Involves caring about and promoting the good of another***
Dental hygienists use their knowledge and skills to assist Clients to achieve and maintain optimal oral health and to promote fair and reasonable access to quality care.

PRINCIPLE II: AUTONOMY

- ***Pertains to the right to make one's own choices***
By communicating relevant information openly and truthfully, dental hygienists assist Clients to make informed choices and to participate actively in achieving and maintaining optimal oral health.

PRINCIPLE III: PRIVACY AND CONFIDENTIALITY

- ***Privacy pertains to a person's right to control the collection, use and disclosure of personal information; the right to access and correct inaccurate information; and the right to expect that the information is kept secure.***
- ***Confidentiality is the duty to hold secret any information acquired in the professional relationship.***
Dental hygienists respect the privacy of Clients and hold in confidence the information disclosed to them, subject to certain narrowly defined exceptions.

PRINCIPLE IV: ACCOUNTABILITY

- ***Pertains to the acceptance of responsibility for one's actions and omissions in light of relevant principles, standards, laws, regulations and the potential to self-evaluate and to be evaluated accordingly.***
Dental hygienists practise competently in conformity with relevant principles, standards, laws, and the regulations under their enabling legislation and accept responsibility for their behaviour and decisions in the professional context.

PRINCIPLE V: PROFESSIONALISM

- ***Is the commitment to use and advance professional knowledge and skills to serve the Client and the public good.***
Dental hygienists express their professional commitment individually in their practice and communally through the College and their participation in the College's Quality Assurance Program.

ETHICAL DECISION-MAKING MODEL

STEP 1	IDENTIFY THE PROBLEM	Identify, in a preliminary way, the nature of the challenge or problem.
STEP 2	GATHER INFORMATION	Become suitably informed and gather relevant information including: factual information; sequence of events; applicable policies, laws, and regulations; and the views of stakeholders.
STEP 3	CLARIFY THE PROBLEM	Clarify and elaborate the problem based on the additional information obtained. Identify the ethical principles at stake.
STEP 4	IDENTIFY OPTIONS	Identify the various options for action.
STEP 5	ASSESS OPTIONS	Assess the various options.
STEP 6	CHOOSE A COURSE OF ACTION	Decide on and justify/defend a course of action.
STEP 7	IMPLEMENT THE ACTION	Implement one's decision as thoughtfully and sensitively as possible.
STEP 8	EVALUATE OUTCOMES	Assess the consequence of your decision and evaluate the outcomes.

SCHEDULE II

ELECTION OF THE EXECUTIVE COMMITTEE

- (1) The elections shall be conducted by the Registrar or ~~their~~his or her delegate.
- (2) No Council Member shall sit at the head table of the meeting until the elections have been finalized.
- (3) Nominations to any position on the Executive Committee may be either by self or from any member of Council.
- (4) The Registrar or ~~their~~his or her delegate shall call for nominations for the position of Council Chair~~President~~.
 - (a) Should only one Council Member be a candidate for the position of Council Chair~~presidency~~, the Registrar or ~~his or her~~their delegate will thereupon declare said candidate Elected by acclamation.
 - (b) Should there be more than one candidate for the position of Council Chair~~President~~, an election by secret ballot shall be conducted.
 - (i) Each candidate shall be entitled to briefly address Council.
 - (ii) The Registrar or ~~their~~his or her delegate shall appoint two scrutineers to count the ballots and the results shall be reported to Council by the Registrar or ~~their~~his or her delegate with the number of votes for each candidate to remain confidential.
- (5) When more than two candidates are nominated, the nominee who received the lowest number of votes in each election shall be deleted from the next ensuing election unless one nominee receives a majority (50% + 1) of the votes cast on the ballot, in which case that person is elected. This procedure shall be followed until one nominee receives a majority of the votes cast.
- (6) In the event of a tie, a second election will take place. Candidates who are tied shall be entitled to briefly address Council. If the results are once again a tie, then a third election will take place, before which. ~~—~~~~C~~andidates who are tied shall be entitled to briefly address Council. If the results are once again a tie, the tie shall be broken by lot in the presence of the two scrutineers unless Council determines by ordinary resolution to proceed in another manner, which may include the holding of a new election.
- (7) The election of the Vice-~~Chair~~President shall be conducted on a basis identical to that of the procedure applicable to the election of the Chair~~President~~.
- (8) The election of the remaining members of the Executive Committee shall be conducted in a similar, but not necessarily identical manner in a democratic fashion.

- (9) The Registrar or ~~their~~his or her delegate shall call for a motion to destroy the ballots immediately following the election.

SCHEDULE III

RULES OF ORDER OF COUNCIL

- (1) In this Schedule, "Member" means a Member of the Council.
- (2) Each agenda topic will be introduced briefly by the person or Committee representative raising it. Members may ask questions of clarification, then the person introducing the matter shall make a motion and another Member must second the motion before it can be debated.
- (3) When any Member wishes to speak, they shall so indicate by raising their hand and shall address the presiding officer and confine themselves to the matter under discussion.
- (4) Staff persons and consultants with expertise in a matter may be permitted by the presiding officer to answer specific questions about the matter.
- (5) Observers at a Council meeting are not allowed to speak to a matter that is under debate.
- (6) A Member may not speak again on the debate of a matter until every other Member who wishes to speak to it has been given an opportunity to do so. The only exception is that the person introducing the matter or a staff person may answer questions about the matter. Members will not speak to a matter more than twice without the permission of the presiding officer.
- (7) A Member may speak up to three (3) minutes upon any motion; additional time may be allotted with the permission of Council.
- (8) When a motion is under debate, no other motion can be made except to amend it, to postpone it, to put the motion to a vote, to adjourn the debate or the Council meeting or to refer the motion to a Committee.
- (9) A motion to amend the motion then under debate shall be disposed of first. Only one motion to amend the motion under debate can be made at a time.
- (10) When it appears to the presiding officer that the debate on a matter has concluded, when Council has passed a motion to vote on the motion, or when the time allocated to the debate on the matter has concluded, the presiding officer shall put the motion to a vote.
- (11) When a matter is being voted on, no Member shall enter or leave the Council room, and no further debate is permitted.
- (12) No Member is entitled to vote upon any motion in which they have a conflict of interest, and the vote of any Member so interested will be disallowed.
- (13) Any motion decided by the Council shall not be re-introduced during the same meeting except by a two-thirds vote of the Members then present.

- (14) Whenever the presiding officer is of the opinion that a motion offered to the Council is contrary to these rules or the bylaws, they shall rule the motion out of order and give their reasons for doing so.
- (15) The presiding officer shall preserve order and decorum, and shall decide questions of order, subject to an appeal to the Council without debate.
- (16) The above rules may be relaxed by the presiding officer if it appears that greater informality is beneficial in the particular circumstances, unless the Council requires strict adherence.
- (17) Members are not permitted to discuss a matter with observers while it is being debated.
- (18) Members must remain engaged in Council meetings and not allow their personal electronic devices to interfere with their attention of the attention of others. ~~Members shall turn off cell phones during Council meetings and, except during a break in the meeting, shall not use a cell phone or other electronic device.~~ Laptops shall only be used during Council meetings to review materials related to Council business (e.g., electronic copies of background documents) and to make personal notes on the issue at hand.
- (19) Members are to be silent while others are speaking.
- (20) In all cases not provided for in these rules or by other rules of Council, the current edition of “Robert's Rules of Order” shall be followed so far as they may be applicable.
- (21) These rules shall apply, with necessary modifications, to meetings conducted by teleconference or any other electronic means permitted by the bylaws, including audio or video conferencing.

Approved by Council September 25, 2015

Article 16.2(1) amended by Council March 4, 2016

Amended by Council June 3, 2016 to include Schedule III

Articles 1.1, 3.2, 3.3, 3.7, 3.9, 4.7, 4.10, 4.12, 4.14, 5.9, 12.1, 12.2, 14.2, 14.3, 15.4–15.6 16.1, 16.2, 16.4, amended by Council March 24, 2017

Articles 3.4(3), 5.8(3), 16.4(1, 2, 3, 5, 7) amended by Council March 22, 2019

Articles 3.7–3.17, 5.8, 19–21 amended by Council June 7, 2019

Articles 3.2(14), 3.15(1), 3.18(1), 4.3, 4.4, 4.12(1, 2, 3), 5.3(1)(a), 5.5, 7.1(1, 2, 3), 19.7 amended by Council September 18, 2020

Articles 1.1, 3.1(17), 3.3(1), 3.5, 3.8(3, 4), 3.9(11), 5.11(3, 4, 5, 6, 7, 8), 16.2(1, 2, 3), amended by Council June 10, 2022

Articles 3.7(13, 17, 19, 20, 21[m] [o], 23, 24, 24[a], 27, 29, 37), and Schedule III (3, 12, 14, 18), amended by Council December 2, 2022.

Suggested Motion – Friday, December 1, 2023

9.0 MONITORING BOARD PERFORMANCE

9.1 CRD 2 Accountability of the Registrar/CEO

MOTION 1: **THAT** Council has assessed the monitoring report for CRD-2 and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for CRD-2 and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for CRD-2 and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:
Seconded:
VOTE:

9.2 CRD 3 Delegation to the Registrar/CEO

MOTION 1: **THAT** Council has assessed the monitoring report for CRD-3 and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for CRD-3 and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for CRD-3 and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:
Seconded:
VOTE:

MOTION

9.3 GP 7 Council and Committee Terms of Reference

MOTION 1: **THAT** Council has assessed the monitoring report for Governance Process policy 7 and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for Governance Process policy 7 and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for Governance Process policy 7 and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:
Seconded:
VOTE:

9.4 GP 8 Code of Conduct

MOTION 1: **THAT** Council has assessed the monitoring report for Governance Process policy 8 and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for Governance Process policy 8 and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for Governance Process policy 8 and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:
Seconded:
VOTE:

Briefing Note

To: Council

From: Chair

Date: December 1, 2023

Topic: Policy Content Review: CRD 2 and CRD 3

No changes proposed. Council will review and discuss if any changes should be made to the CRD-2 and CRD-3 policies.

CRD-2 ACCOUNTABILITY OF THE REGISTRAR/CEO

The Registrar/CEO is the Council's only link to operational achievement and conduct, so that all authority and accountability of staff, as far as the Council is concerned, is considered the authority and accountability of the Registrar/CEO.

1. The Council will never give instructions to persons who report directly or indirectly to the Registrar/CEO.
2. The Council will refrain from evaluating, either formally or informally, any staff other than the Registrar/CEO.
3. The Council will view Registrar/CEO performance as identical to organizational performance, so that organizational accomplishment of Council stated Ends and compliance with Executive Limitations will be viewed as successful Registrar/CEO performance. Therefore, the Registrar/CEO's job contributions shall be accomplishment of the Ends while maintaining compliance with the Executive Limitations.

CRD-3 DELEGATION TO THE REGISTRAR/CEO

The Council will instruct the Registrar/CEO through written policies which prescribe the organizational Ends to be achieved, and describe organizational situations and actions to be avoided, allowing the Registrar/CEO any reasonable interpretation of these policies.

4. The Council will develop Ends policies instructing the Registrar/CEO to achieve specified results, for specified recipients at a specified worth.
 - 4.1. Policies that do not address the subjects of results, recipients or worth will not be included in Ends, as they relate to means.
 - 4.2. Specifically, documents such as strategic plans and budgets will not be considered Ends, as they relate to operational means of achieving the Ends.
5. The Council will develop Executive Limitations policies which limit the latitude the Registrar/CEO may exercise in choosing the organizational means.
 - 5.1. These limiting policies will describe those practices, activities, decisions and circumstances that the Council would find unethical or imprudent, and therefore unacceptable, even if they were to be effective.
 - 5.2. The Council will never prescribe organizational means delegated to the Registrar/CEO.
6. All policies will be developed systematically from the broadest, most general level to more defined levels.
7. As long as the Registrar/CEO uses any reasonable interpretation of the Board's Ends and Executive Limitations policies, the Registrar/CEO is authorized to establish all further policies, make all decisions, take all actions, establish all practices and develop all activities. Such decisions of the Registrar/CEO shall have full force and authority as if decided by the Council.

BRIEFING NOTE

8. The Council may change its Ends and Executive Limitations policies, thereby shifting the boundary between the Council and Registrar/CEO domains. By doing so, the Council changes the latitude of choice given to the Registrar/CEO. But as long as any particular delegation is in place, the Council will respect and support any reasonable Registrar/CEO interpretation of the policies. This does not prevent the Council from obtaining information from the Registrar/CEO about the delegated areas, except for data protected by privacy legislation.

COLLEGE OF DENTAL HYGIENISTS OF ONTARIO: VOICE OF THE PATIENT

Final Report

December 22, 2022

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SUMMARY OF FINDINGS



Dental hygiene patients are highly satisfied with their dental hygienists across all health regions and throughout various demographics. Overall, 77% of dental patient respondents are either satisfied or extremely satisfied.



Consent and transparency are drivers of satisfaction. Information about the costs of treatments and procedures, as well as not feeling pressured to proceed with a treatment or procedure, are attributes that have the greatest impact on the overall dental hygiene care experience.



Satisfaction is positively correlated with age, income, and English language fluency. Age, income, English language proficiency, and belonging to a racially marginalized communities are the main determining factors of satisfaction with dental hygiene care, irrespective of geographic location.



Dental hygiene care is perceived to be expensive and cost-prohibitive to many Ontario residents. Cost and lack of dental insurance coverage are the primary reasons why nearly a quarter of Ontario residents did not visit a dental hygienist in the past 12 months.



Access to dental hygiene care is correlated with socio-economic factors. A large proportion of non-patient respondents are low-income, unemployed, do not possess a post-secondary education, and/or live in rural and remote areas of the province.



Improved dental appearance is the most typical outcome of a dental hygienist visit. Half of respondents (50%) said they commonly feel their dental appearance is improved after visiting a dental hygienist.



Awareness of the regulator is higher among patients and lower among young adults and those belonging to racially marginalized communities. Awareness of a regulatory body or College for dental hygienists in Ontario is nearly double among dental hygiene patients when compared with non-patients and sit low for young adults and racially marginalized communities.



Printed materials in dental offices and dental hygiene clinics as well as public awareness advertising campaigns are the top preferred methods the CDHO should use to communicate with the public.

RESEARCH BACKGROUND AND METHODOLOGY

Background and Research Objectives

The College of Dental Hygienists of Ontario (CDHO or College) is the regulatory body for registered dental hygienists in Ontario.

The CDHO regulates the profession of dental hygiene in the interest of the overall health and safety of the public of Ontario and sets the requirements for registration as a dental hygienist. While the CDHO does not train dental hygienists, it establishes practice standards for safe and ethical care.

The purpose of this research was to ascertain perspectives of the general public in Ontario about dental hygiene care experience and regulation.

Research Methodology

The College contracted Pivotal Research, Inc. to execute the requirements of the research initiative. The research was conducted in two stages:

1

Stage 1 entailed executing a qualitative online bulletin board with 23 participants representing a broad and inclusive range of Ontario residents. Activities included conducting a deep dive into the dental hygiene care journey, validating key journey touchpoints, identifying dental hygiene care pain points and deriving language likely to resonate with the general population for development of a province-wide survey.

2

Stage 2 entailed the development of an online survey in collaboration with College staff, informed by research stage 1 outcomes. The online survey was fielded province-wide to a panel of 2,000 Ontario residents. The sample was representative of Ontario's population according to health regions and demographics (age and gender), with 4% of respondents self-identifying as Indigenous.. Survey research uncovered perspectives on dental care experience and awareness and understanding of dental care regulations.





Stage 1 Qualitative Research



STAGE 1 RESEARCH METHODOLOGY

Overview

Stage 1 of the project entailed the delivery of qualitative research for a deep-dive into patient mindsets before designing a comprehensive quantitative voice of the patient survey instrument.

Specifically, Pivotal Research conducted an online bulletin board discussion over a one-week period with patients across Ontario who accessed dental hygiene care in the last 12 months.

The following were key goals of the research:

- Ascertain patient experience, perceptions, and attitudes towards dental hygiene care in Ontario;
- Validate key dental hygiene patient journey phases from the patients' perspective;
- Identify pain points; and
- Test language associated with the dental hygiene care experience with patients to improve survey design for the second stage of the project.

Sampling Plan and Demographics

Sampling considerations for this stage included geographical representation from across the province, and recruitment of individuals who identified as English Language Learners and those with low digital literacy in order to understand various experiences accessing dental hygiene care services in Ontario.

In total, 23 participants participated in the online bulletin board discussions. Various geographic locations were represented, including 11 individuals from the Toronto area, five from Eastern Ontario, four from Western Ontario, and three from Central Ontario.

The group contained 13 females and 10 males. Seven participants identified as a racial or ethnic minority, and five identified as persons with a disability. One participant identified as Indigenous and one identified as 2SLGBTQIA+.

Data Collection

Participants were asked to log in to an online qualitative platform several times throughout the week to complete activities, participate in group discussions, and respond to follow-up probes.

The content was divided into three main activities (each with several sub-tasks) in addition to two open-ended group discussions. All questions and activities were developed by Pivotal Research in collaboration with stakeholders from the College.

Representatives from the CDHO were given observer login credentials to monitor the study and give feedback to the moderation team.



Satisfaction with Dental Hygiene Visit

Participants are overwhelmingly satisfied with their dental hygiene visits. Factors contributing to feelings of satisfaction included the physical space as well as the competency of the dental hygienist. Participants who were unsatisfied with their dental hygiene visits generally cited pain/soreness during or after the appointment.

Some participants said they have been going to the same dental hygienist for 20 years or more. Many used the words to describe their current dental hygienist: "caring", "friendly", "considerate", and "excellent".

Many participants expressed satisfaction with the distance to their dental office or dental hygiene clinic and with the overall availability and accessibility of dental hygiene services in their community. However, some observed a backlog of patients in their local dental offices or dental hygiene clinic, with most attributing this to COVID-19 and related public health measures.

Images and Feelings Associated with Ideal Visit

Participants were asked to select images, which represent the feelings they associate with visiting their dental hygienist. Most selected photos that reflected positive emotions, including most frequently: a woman relaxing in a pool; a carpet being vacuumed perfectly; and a happy dog.



In terms of the ideal visit to a dental hygienist, participants chose words, such as "respectful", "care", "quick", "clean", "comfortable", "gentle", "stress", and "issues", among other terms noted in the word cloud below.



Top Factors when Choosing Dental Hygienist

Most participants mentioned the importance of proximity to the dental office/dental hygiene clinic, in terms of travel time as a top factor when choosing a dental hygienist.

Recommendations from family/friends as well as online reviews of dental clinics also factored heavily.



Dental Hygienist vs. Other Dental Care Providers

In general, participants said their interactions with dental hygienists are longer than their interactions with other dental care providers, such as dentists and orthodontists.

Participants noted that their communication with their dental hygienist is usually friendlier and more “genuine” than communicating with other dental care providers, which tends to be more technical. Participants said their hygienist gives them undivided attention and gets to know them on a personal level.

Dental Hygiene Care Journey

Pre-Arrival and Arrival Experience

Most participants had visited a dental hygienist within the last six months for a routine cleaning/checkup. However, a few said they visited for another reason, such as an emergency or because they had a specific concern. All participants said that their appointment took place in a dental office/clinic.

In general, the visits had been scheduled at the end of a previous appointment, although several participants booked their visit anywhere between a week to one month in advance of the appointment.

Participants received a phone call, email, or SMS text message reminding them of the appointment anywhere from one month to one day before the appointment. Many participants were required to complete COVID-19 screening questions ahead of their scheduled visit.

Upon arrival, participants are generally asked to observe health protocols, including masking, physical distancing, and temperature guns. Some offices contained air purifiers. Participants waited anywhere from five to 30 minutes to see a hygienist after arriving. Words used to describe the facilities and staff tended to be: "clean," "friendly," "welcoming," and "polite."

Participants' experience getting to the appointment varied, ranging from a 5-minute walk to a 45-minute bus ride. Most participants, however, drove approximately 10-20 minutes to their appointments and parked either in a free or paid parking lot.

Consultation

In general, participants described the dental hygienist's communication regarding recommended treatment(s) and potential risks as "clear" and "very good."

Participants generally did not have questions for their dental hygienist, but most said they were given the opportunity to ask questions. Many noted that pricing options are not typically discussed with the dental hygienist, but instead with the dentist or receptionist. In many cases, participants pointed out that they do not discuss pricing with anyone, since they already know which procedures are covered by their insurance.



Terminology for Self-Initiation

Most participants referred to the term "independent", such as "independent dental hygienist", when asked what term they would use to refer to a dental hygienist who works without being associated with a dental clinic.

Some suggested the word "practitioner" to draw parallels with the term "nurse practitioner".

Treatment & Consent

All participants said the dental hygienist was successful at ensuring comfort and minimizing pain, though the specific details varied. Most participants were offered local anesthetic (AKA freezing/numbing) but some participants declined the option.

Other ways the dental hygienist ensured comfort and minimized pain included:

- Routinely asking if patient is in pain
- Taking frequent breaks
- Ensuring patient knows how to signal pain or to request break
- Speaking in reassuring tone making polite conversation
- Offering patient headphones to watch television
- Offering patient sunglasses to reduce glare from examination light

Dental Hygiene Care Journey

Outcomes & Follow-Up

For most participants, the visit resulted in another six-month routine cleaning being booked. Many were also referred to a specialist or dentist.

Some participants did not schedule another appointment of any kind at the end of their visit, due to a lack of insurance coverage.

Payment Experience

Participants said the cost of the visit is not discussed unless the treatment is out of the ordinary. In that case, the clinic will usually check if the patient's insurance is likely to cover the procedure, or they will ask the patient to check with their insurance provider.

In general, participants are required to pay for the appointment themselves and then submit an insurance claim (participants said this is usually done by the clinic on behalf of the patient).

Most participants pay by credit card, even those who have the option to pay by debit, cash, or cheque.

Virtually all participants said they are given the opportunity to think about a new treatment before making a financial commitment.

Perception of Regulations and CDHO

Most participants had positive feedback regarding both the importance and effectiveness of the College and many believe the CDHO ensures the public is receiving high-quality dental hygiene care.

Participants were asked what they would do if they received services from a dental hygienist that did not meet their expectations. Many said they would address their concerns with the dental hygienist either during the appointment or at the next appointment, if it was something that could easily be resolved.

If the issue could not be brought up with the dental hygienist for some reason, the next step would be to immediately speak with the dentist (if applicable).

If the issue is not resolved, or if the issue is severe enough, participants would seek dental hygiene care elsewhere, either by requesting a different hygienist at the same dental office/clinic, or by finding another dental office/clinic entirely.

Only a few participants said they would contact the CDHO because of such matters, and generally this would be a last resort.



How Dental Hygienists Encourage Oral Health

Dental hygienists encouraged oral health at home in a number of ways.

- Give toothbrushes, toothpaste, and/or dental floss
- Provide instructions on proper brushing and/or flossing techniques
- Suggest what products to purchase, such as electric toothbrush, soft bristle toothbrush, water pick, and/or specialty mouthwashes
- Encourage what patient is already doing



Barriers to Access

The majority of participants said they had not faced racial or ethnic discrimination while receiving dental hygiene care, although one participant said they felt "judged" when the hygienist "assumed that [they] would not be able to communicate well in English."

Many remarked upon the high cost of dental hygiene care as another barrier to access.



Stage 2 Survey Research

STAGE 2 RESEARCH METHODOLOGY

Overview

Overall, 2,000 Ontario residents over the age of 18 completed the online survey. Respondents were asked to provide demographic information, as well as to identify their geographic location, to ensure a comprehensive and valid representation of the Ontario population distribution.

Survey respondents included representation from residents in all six Ontario health regions; however, much of the analysis combines the "Northeast" and "Northwest" regions into a single region (called "North") and combines the "Toronto" region and the "Central" region so it is inclusive of the Greater Toronto Area (called "Central/GTA").

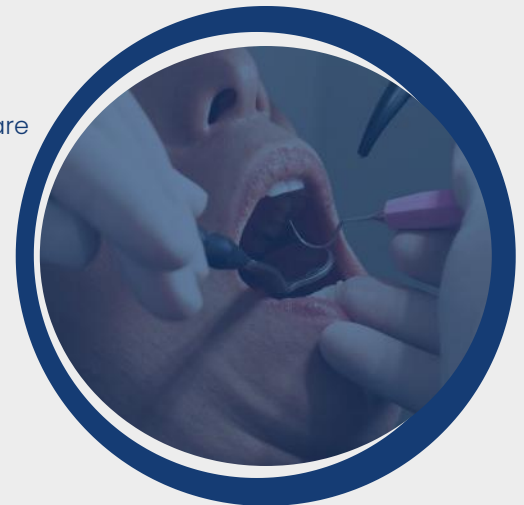
Data Collection

For Stage 2 of the research, data collection took place between November 10 and 25, 2022. Respondents over the age of 18, were randomly selected from an online panel, which covered more than 70,000 residents across all regions in Ontario and were invited to complete a 10-minute online survey (See Appendix for a copy of the survey instrument). To enhance access to the survey research, the online survey was made available in English, French, Mandarin, and Punjabi. The survey is statistically valid with a ± 2.19 margin of error, 19 times out of 20.

Respondents who indicated they are involved in the dental hygiene profession in Ontario were excluded from participating in the survey.

Survey Topics

- | | |
|---|--|
| <p>➤ Visit to dental hygienist in last 12 months</p> | <p>➤ Perceptions of dental hygiene care in Ontario</p> |
| <p>➤ Non-recent patients</p> | <ul style="list-style-type: none"> • Access to dental hygiene care • Costs • Patient agency • Discrimination |
| <p>➤ Dental hygiene patient journey</p> <ul style="list-style-type: none"> • Dental Office • Pre-treatment • Treatment/Procedure • Post-treatment • Interaction/Communication with staff • Payment • Consent | <p>➤ Perceptions of dental hygiene care regulation in Ontario</p> <p>➤ Awareness and perceptions of CDHO</p> <p>➤ CDHO's communication with the public</p> |



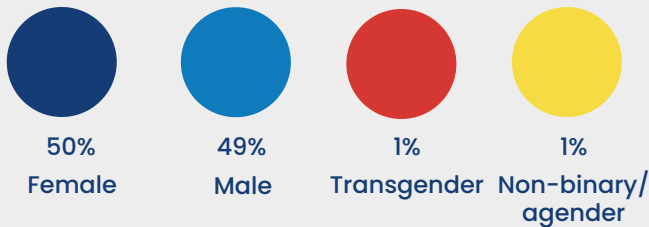
Where applicable, this report identifies statistically significant differences among various demographic groups and health regions.

RESPONDENT PROFILE

Overall, 2,000 respondents over the age of 18 completed the online survey. Respondents were asked to identify key demographics about their gender, age, as well as the first three digits of their postal code to ensure a comprehensive and valid representation of the Ontario population distribution. Results displayed in this report are calculated based on the overall number of valid responses.

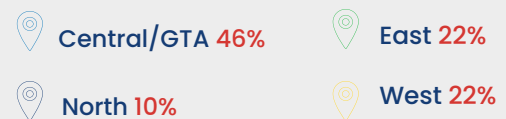
Gender Identity

n=2,000



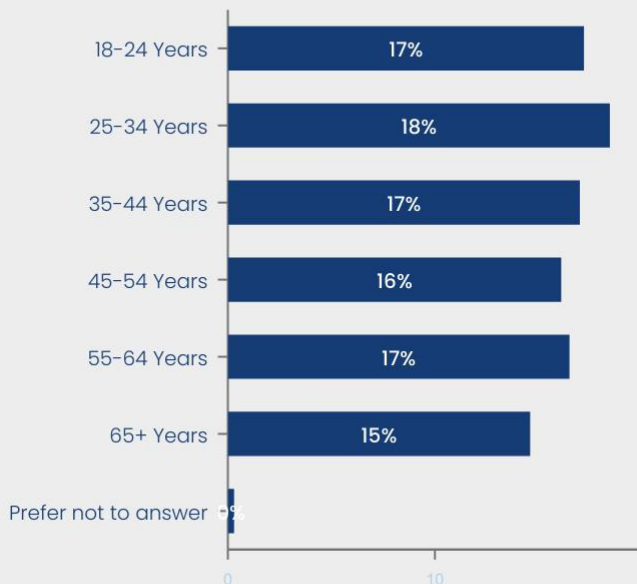
Place of Residence by Health Region

n=2,000



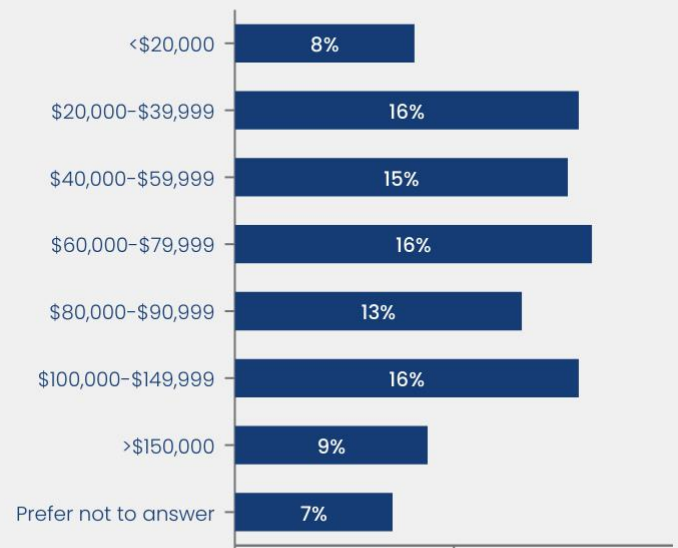
Age

n=2,000



Average Household Income

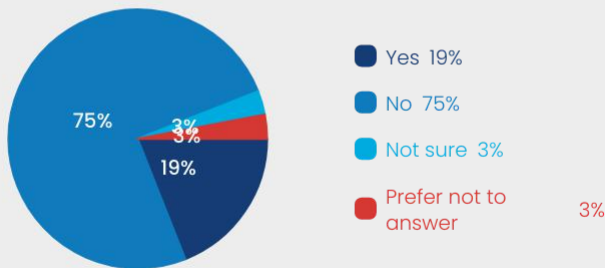
n=2,000



RESPONDENT PROFILE

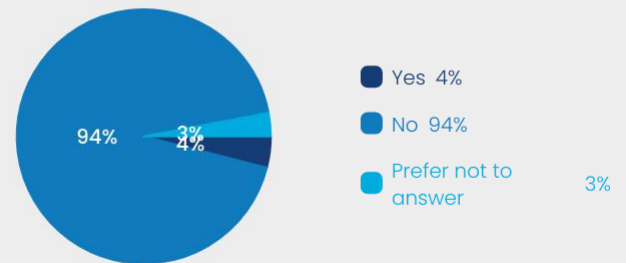
Belonging to Racial or Ethnic Minority

n=2,000



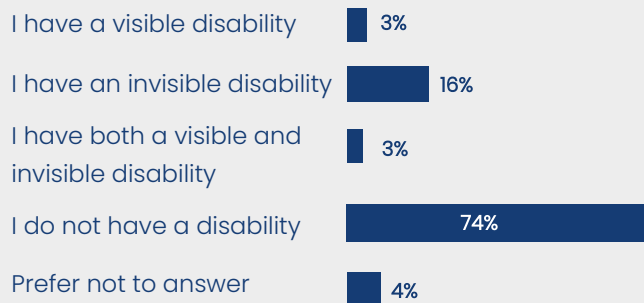
Identify as Indigenous (Inuit/First Nations/Metis)

n=2,000



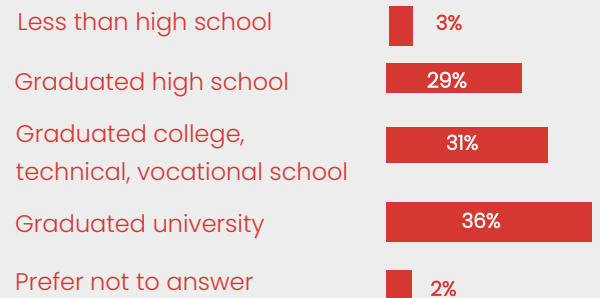
Self-Reported Disability

n=2,000



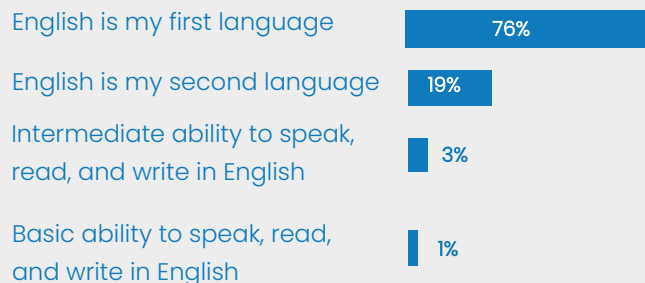
Educational Attainment

n=2,000



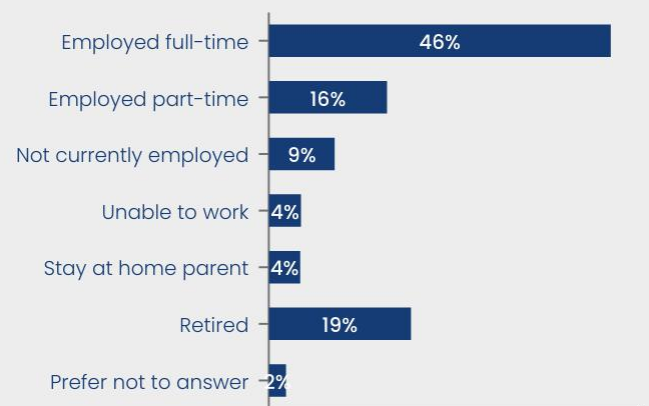
English Language Proficiency

n=2,000



Employment Status

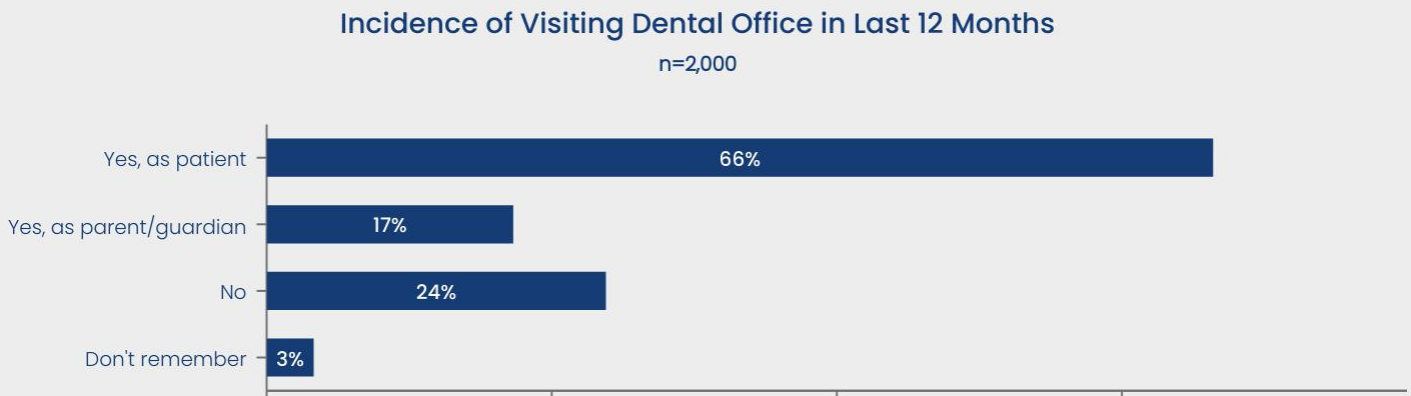
n=2,000



VISIT TO DENTAL HYGIENIST

Visit to Dental Hygienist in Past 12 Months

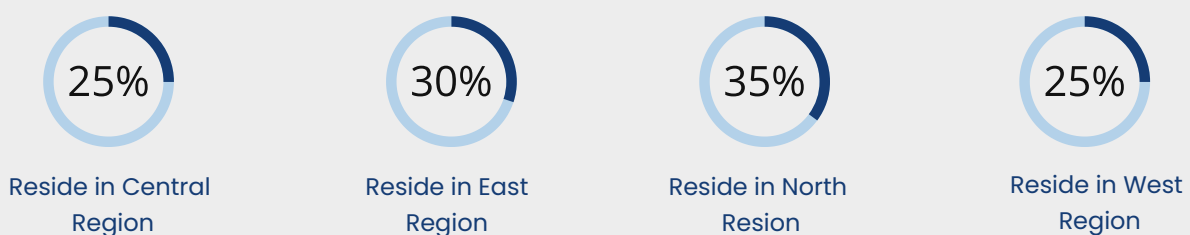
Survey respondents were asked to indicate if they or their dependant(s) had received dental hygiene care services in the last 12 months. Nearly a quarter (24%) of respondents said neither they nor their dependents had visited a dental hygienist.



Key Demographics of Non-Patient Respondents

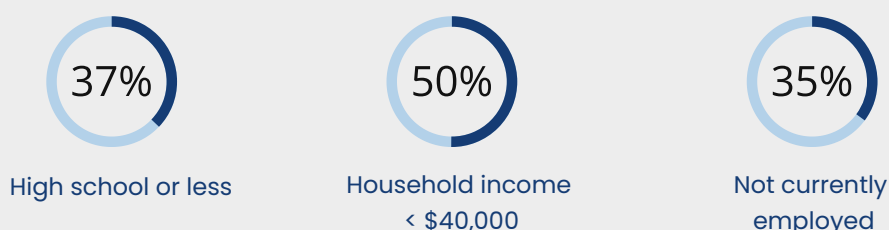
Approximately one third (35%) of residents in the North region and three-in-ten (30%) of residents in the East region indicated they had not visited a dental hygienist in the last 12 months.

Percent of Non-Patient Respondents by Health Region



Additionally, more than a third (37%) of respondents with a high school education or less and half (50%) of those whose household incomes were less than \$40,000 had not visited a dental hygienist in the last 12 months.

Percent of Non-Patient Respondents by Other Demographic Factors



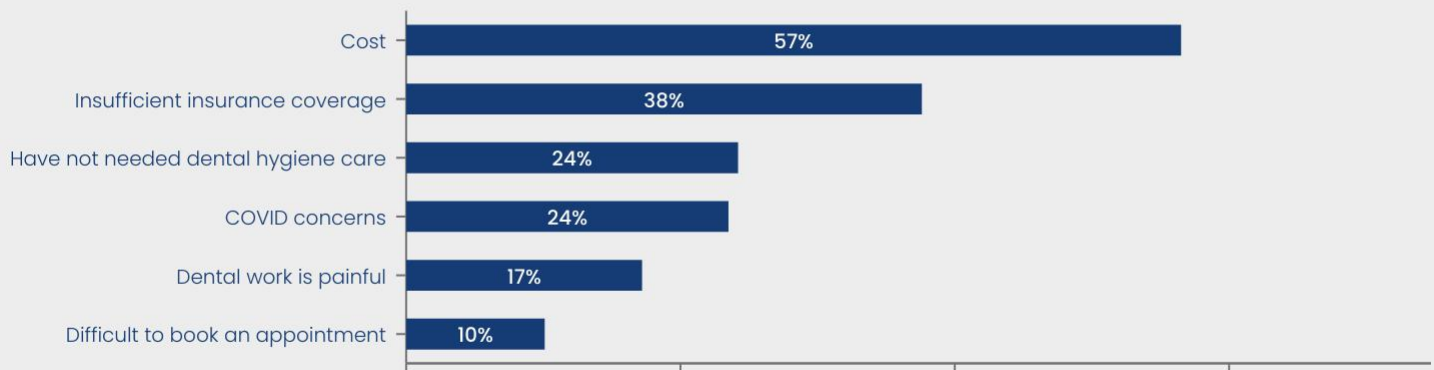
VISIT TO DENTAL HYGIENIST

Reasons for Not Visiting Dental Office/ in Past 12 Months

Respondents who indicated that neither they nor their dependant(s) had received dental hygiene care in the past 12 months cited cost (57%) and insufficient/no dental insurance coverage (38%) as the top two reasons. Other commonly provided reasons were safety concerns related to COVID-19 (24%) and not needing dental hygiene care (24%).

Top Reasons for Not Visiting Dental Office/Dental Hygiene Clinic in Last 12 Months

n=476



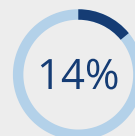
Two-in-five non-patient respondents who indicated that neither they nor their dependant(s) had received dental hygiene care in the past 12 months last visited a dental hygienist in more than five years, while 14% never visited a dental hygienist in Ontario.

Non-Patient Respondents' Last Visit to Dental Hygienist

n=476



Last visited dental hygienist more than five years ago



Never visited dental hygienist in Ontario

VISIT TO DENTAL HYGIENIST

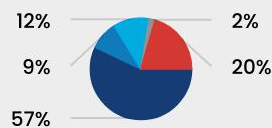
Dental Care Insurance Coverage

Most patient respondents (80%) indicated they have access to dental care insurance, mostly through their employer (57%). A small portion of respondents have dental care insurance coverage which they purchased themselves, through Social Services, or through First Nations health insurance.

One fifth (20%) of respondents said they or their dependant(s) were not covered by dental insurance during their last dental hygienist visit.

Dental Care Insurance Coverage

n=1,458



■ Yes, through employer 57%

■ Yes, purchased myself 9%

■ Yes, through Social Services 12%

■ Yes, through First Nations health insurance 2%

■ No 20%



KEY TAKEAWAYS

1

Some Ontario residents face barriers to accessing the services of a dental hygienist.

2

Ontario residents who are rural, low-income, and/or unemployed are less likely to access dental hygiene care.

3

More than a third (34%) of Ontario residents who have not visited dental hygienist in the last 12 months have either not done so in more than 5 years or never received care.

4

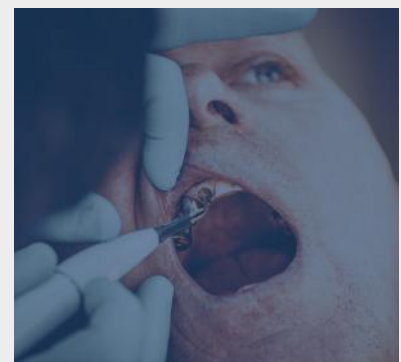
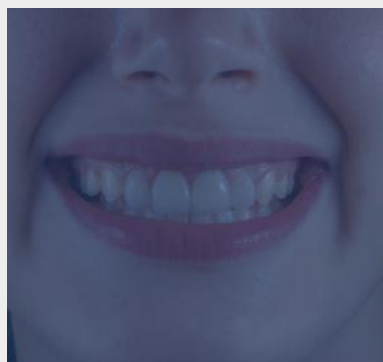
Access to dental care insurance is primarily through employers.

DENTAL HYGIENE PATIENT JOURNEY

Patient respondents were asked to rate a series of statements pertaining to their satisfaction with several aspects of their dental hygiene care journey. Statements shown to respondents covered the following seven areas:

- Dental Office;
- Pre-treatment;
- Treatment/Procedure;
- Post-treatment;
- Interaction/Communication with staff;
- Payment; and
- Consent.

For each statement, respondents were presented with a seven-point scale ranging from extremely satisfied to extremely dissatisfied as shown in the graphic below.



SATISFACTION ALONG THE DENTAL HYGIENE PATIENT JOURNEY

Satisfaction Along the Dental Hygiene Care Journey



Dental Office/Hygiene Clinic

Cleanliness and infection control measures **83%**
 Ability to access dental hygiene care on short notice **62%**



Pre-Treatment

Time taken to explain treatment options and answer questions **77%**
 Information about the risks and benefits of undergoing (or not) a treatment **65%**
 Information about costs of suggested treatments or procedures **63%**



Staff Interaction/Communication

79% Clear and understandable communication (verbal and written)
75% Educating me on how to best take care of my/my dependant's oral health
70% Taking time to build rapport



Post-Treatment

80% Dental hygiene care treatment was delivered as anticipated



Treatment Procedure

80% Feelings of safety and comfort while undergoing treatment
72% Ensuring comfort by providing options for minimizing pain and discomfort (eg, local anesthetic AKA freezing/numbing gel)



Payment

Costs were as estimated or any changes were satisfactorily explained and agreed upon **64%**



Consent

Providing consent when a decision needs to be made **77%**
 Participating in decisions about my/my dependant's dental hygiene care **74%**
 Not feeling pressured to choose a particular option **73%**



Overall Dental Hygiene Care Experience

77% Overall Satisfaction
54% Overall Health
66% Overall Health Importance

DENTAL HYGIENE PATIENT JOURNEY

Satisfaction with Dental Office/Dental Hygiene Clinic

Cleanliness and infection control measures received a satisfaction score of 81%, while the ability to access dental care in case of emergencies received a score of 64%.



Dental Office/Hygiene Clinic



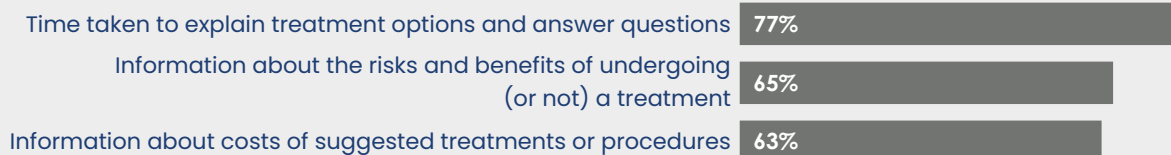
Older respondents were the most satisfied with both cleanliness and infection control measures and with the ability to access dental hygiene care on short notice, while younger respondents were the least satisfied with these attributes. Patients who speak English fluently tend to be more satisfied with the ability to access dental hygiene care on short notice.

Satisfaction with Pre-Treatment

Satisfaction with pre-treatment was assessed along three dimensions. More than three-quarters (77%) of respondents were satisfied or very satisfied with the time their dental hygienist takes to explain treatment options and answer questions. However, satisfaction ratings are lower for information shared about risks and benefits of treatment (65%) and costs of suggested treatments or procedures (63%).



Pre-Treatment



Overall, older respondents were more satisfied than younger respondents along each statements pertaining to pre-treatment. Additionally, respondents fluent in English provided substantially higher satisfaction scores in this category than respondents with intermediate or basic English proficiency.

DENTAL HYGIENE PATIENT JOURNEY

Satisfaction with Treatment/Procedure

Satisfaction with statements pertaining to safety and comfort while undergoing treatment received relatively high satisfaction scores at 80%. Approximately three-quarters (72%) of respondents were satisfied or very satisfied with their dental hygienist ensuring comfort by providing them with options to minimize pain.



Treatment Procedure

Feelings of safety and comfort while undergoing treatment **80%**

Ensuring comfort by providing options for minimizing pain and discomfort (eg, local anesthetic AKA freezing/numbing gel) **72%**

Older respondents tended to be more satisfied than younger respondents when it came to aspects of safety and comfort. Similarly for English language proficiency, as English language proficiency drops, a gradual decline in satisfaction in treatment procedure attributes is observed.

Satisfaction with Post-Treatment

Satisfaction with the delivery of dental hygiene care as anticipated received a score of 77% from patient respondents.



Post-Treatment

Dental hygiene care treatment was delivered as anticipated **80%**

Older respondents and those fluent in English reported statistically significant satisfaction ratings for post-treatment experience compared to their counterparts.

DENTAL HYGIENE PATIENT JOURNEY

Satisfaction with Staff Interaction/Communication

Respondents' interaction and communication with staff was rated along three metrics. Respondents were least satisfied with the time taken to build rapport (70%) and they were most satisfied with the clarity of verbal and written communication (79%).



Staff Interaction/Communication



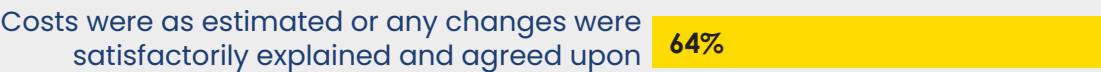
Older respondents tended to be the most satisfied with staff interaction/communication while younger respondents tended to be the least satisfied. Patient respondents who say English is their first language report 81% satisfaction for clear and understandable communication compared to 68% for those with intermediate English language proficiency.

Satisfaction with Payment

Satisfaction with the costs of dental hygiene care being as estimated and agreed upon were relatively lower at 64% across respondents in Ontario.



Payment

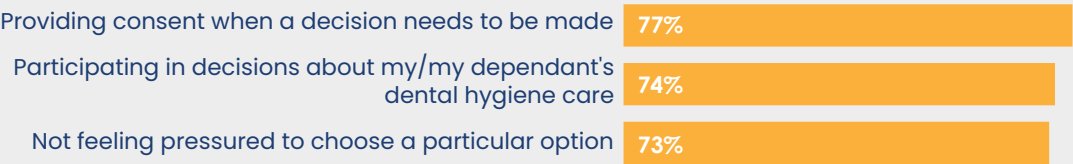


Regionally, respondents residing in the Central/GTA region were the least satisfied (61%) with the payment of services.

DENTAL HYGIENE PATIENT JOURNEY

Satisfaction with Consent

Satisfaction with three statements pertaining to consent hovered around the 75% mark. While a score of 75% is generally acceptable in similar surveys, it is important to note that dental professionals must absolutely adhere to regulations regarding consent, especially when a decision needs to be made regarding a treatment. As such, this presents an area that should be further investigated and understood from a regulatory standpoint and to assess whether consent is consistently obtained by dental hygienists.

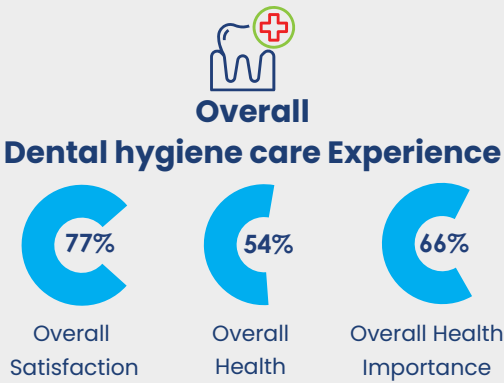


Regionally, satisfaction with informed consent was lowest in the Central/GTA region (74%). Older patient respondents and those who are fluent in English tended to be more satisfied with consent attributes than their counterparts.

Overall Satisfaction with Dental Hygiene Care Experience

Respondents were asked to rate their satisfaction with the overall experience of visiting a dental hygienist. The top-two satisfaction score with dental hygiene care services clocked in at 77%. Satisfaction was highest in the West region (84%) and lowest in the Central/GTA region (75%).

Respondents who are aged 66+ years (87%), fluent in English (80%), do not have a disability (79%), have no dependants (78%), and have an annual household income of \$100,000 or more (82%) tended to be the most satisfied with dental hygiene care overall. Conversely, respondents who are younger, low-income, have a disability, have basic to intermediate English language proficiency, and who have dependants were the least satisfied.



Satisfaction Scores and Overall Health Importance

Region	Overall	Central/GTA	North	East	West
Overall Satisfaction	77%	75%	78%	76%	84%
Overall Health	54%	55%	57%	52%	51%
Overall Health Importance	66%	67%	65%	65%	66%

More than half of respondents (54%) rated their overall health as either "good" or "very good."

Two-thirds of respondents (66%) said oral health is either "important" or "very important" to their overall health and well-being.

DENTAL HYGIENE PATIENT JOURNEY

Drivers of Satisfaction with Dental Providers in Ontario

To further understand the dental hygiene experience in Ontario, an advanced key driver analysis was performed to identify service attributes that have the greatest impact on the overall dental hygiene care experience to inform performance enhancements. Regression analysis was conducted to all 29 service attributes along the dental patient journey. The key driver analysis was followed by ranking all service attributes from high to low based on patient satisfaction.

The model identified three attributes that have a high impact on satisfaction and where the performance of dental hygienists can possibly be further enhanced as shown in the table below.

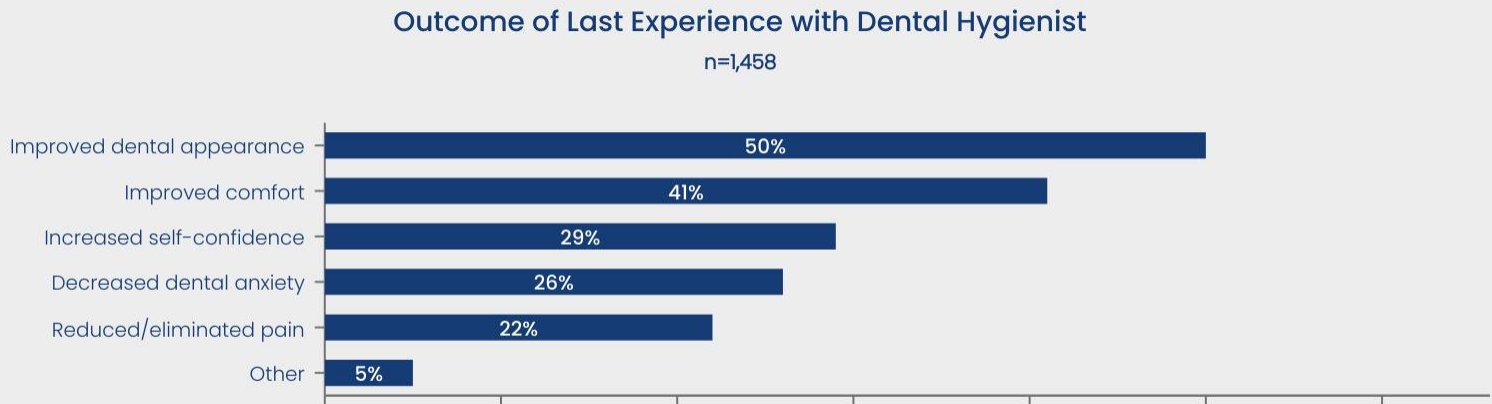
Key Drivers of Satisfaction for Patient Respondents

Attribute	Patient Journey	Satisfaction Score
Information about costs of suggested treatments or procedures	Pre-treatment	63
Information about the risks and benefits of undergoing (or not) a treatment	Pre-treatment	65
Not feeling pressured to choose a particular option	Consent	73

The key driver analysis shows that patients appear to demand more from their dental hygienist regarding transparency around costs for treatments/procedures, and information that helps them to make decisions about their dental hygiene care. They also prefer that their dental hygienist receives consent from them before beginning a treatment/procedure.

DENTAL HYGIENE PATIENT JOURNEY

Outcome of Last Experience with Dental Hygienist



Half of patient respondents (50%) experienced improved dental appearance as an outcome of their most recent visit to a dental hygienist. Four-in-ten (41%) said their comfort was improved as a result of the visit, and nearly a third (29%) felt increased self-confidence.

Approximately a quarter of respondents (26%) said their visit reduced their dental anxiety and slightly more than two-in-ten (22%) said their visit reduced or eliminated pain.

KEY TAKEAWAYS

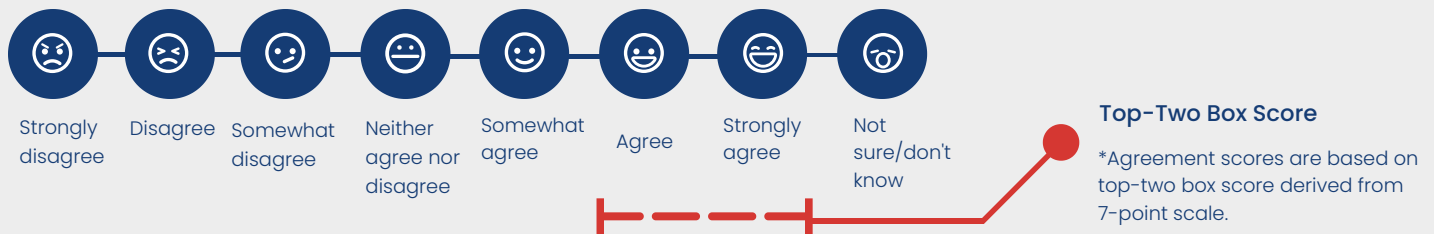
- Overall, slightly more than three quarters of Ontario residents are satisfied or extremely satisfied with the dental hygiene care they and/or their dependant(s) receive.
- Cleanliness and infection control measures, feelings of safety and comfort, and treatments/procedures being delivered as expected were aspects that earned highest satisfaction scores.
- Ontario residents are least satisfied with ability to access dental hygiene care on short notice, information about costs of treatment/procedure, and costs overall.
- Age, income, and English language proficiency are the main determining factors of satisfaction with dental hygiene care, irrespective of geographic location.
- Dental hygiene care culminates in various positive outcomes for patients, including increased self-confidence and improved comfort and appearance.

PERCEPTIONS OF DENTAL HYGIENE CARE IN ONTARIO

Respondents rated their level of agreement with several statements pertaining to their perceptions of dental hygiene care in Ontario across the following categories:

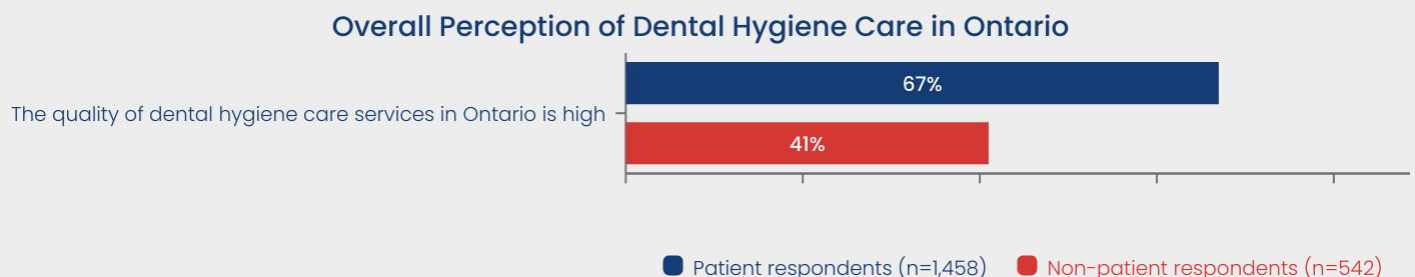
- Overall perceptions;
- Access to dental care services;
- Patient agency;
- Discrimination; and
- Regulation.

For each statement, respondents were presented with a seven-point scale ranging from extremely satisfied to extremely dissatisfied as shown in the graphic below.



Overall Perceptions of Dental Hygiene Care

In general, patient respondents have more favourable perceptions of dental hygiene care in Ontario than non-patients. Two-thirds (67%) of patient respondents either agree or strongly agree that the quality of dental hygiene care in Ontario is high, while only four-in-ten non-patients (41%) feel the same.



PERCEPTIONS OF DENTAL HYGIENE CARE IN ONTARIO

Patient Agency

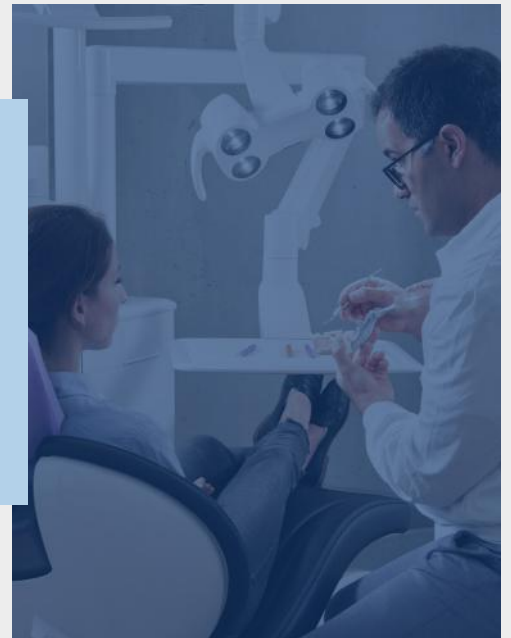
Respondents were asked to rate their level of agreement with a series of statements pertaining to patient agency.



Two-thirds (67%) of patients either agree or strongly agree that they have access to tools and resources to make informed decisions about their treatment; however, a less than half (35%) of non-patients would say the same. Patients are also more comfortable raising concerns than non-patients; they also are more likely to know what to expect from a dental hygienist than non-patients.

Patient Agency by Age and Language Abilities

Perceptions regarding patient agency are correlated with age and English language proficiency, wherein middle-aged and older adults and Ontario residents fluent in English felt more comfortable raising concerns, having access to tools and resources to make informed decisions, and knowing what to expect from their dental hygienist.



PERCEPTIONS OF DENTAL HYGIENE CARE IN ONTARIO

Discrimination

Approximately one-in-seven respondents (14%) either agreed or strongly agreed with the statement “dental hygiene patients in Ontario face discrimination, such as racial discrimination, from their dental hygienist(s).” This number was higher among patient respondents (17%) than non-patient respondents (8%).

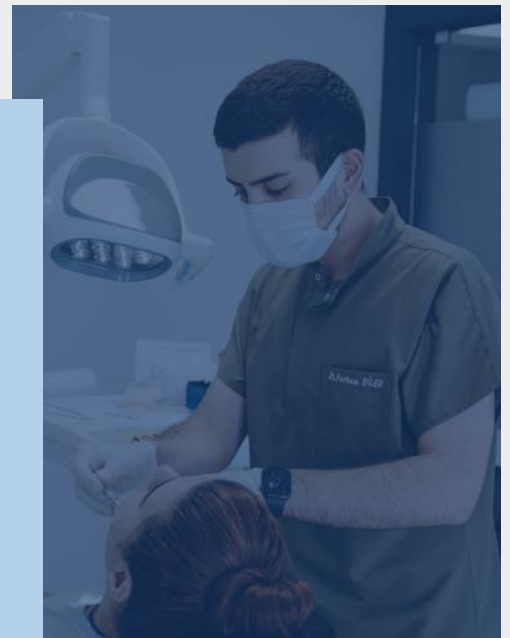


A similar proportion of respondents (14%) either agreed or strongly agreed with the statement “dental hygiene patients in Ontario face discrimination, such as racial discrimination, from their dental office/dental hygiene clinic overall” which again was higher among patient respondents (16%) than non-patient respondents (9%).

Perceptions of Discrimination by Marginalized Groups

One-in-five (20%) Ontario residents who belong to a racially marginalized community agreed or strongly agreed that dental hygiene patients face discrimination from their dental hygienist or their dental office/dental hygiene clinic. This compares to only 13% for the general population.

Feelings of discrimination are also correlated with English language proficiency levels. Fourteen percent (14%) of respondents who speak English well, or indicated that English was their first language, agreed or strongly agreed that patients face discrimination. By contrast, a quarter (25%) of respondents with basic or intermediate English fluency agreed that patients face discrimination.



PERCEPTIONS OF DENTAL HYGIENE CARE IN ONTARIO

Access to Dental Hygiene Care

Patients are more likely than non-patients to either agree or strongly agree with the statement "I am able to find a suitable dental office/dental hygiene clinic in my community." Overall, two-thirds of respondents (66%) agreed with this statement, which represents just over three quarters (76%) of patient respondents and approximately four-in-ten (42%) non-patient respondents.

Access to Dental Hygiene Care in Ontario



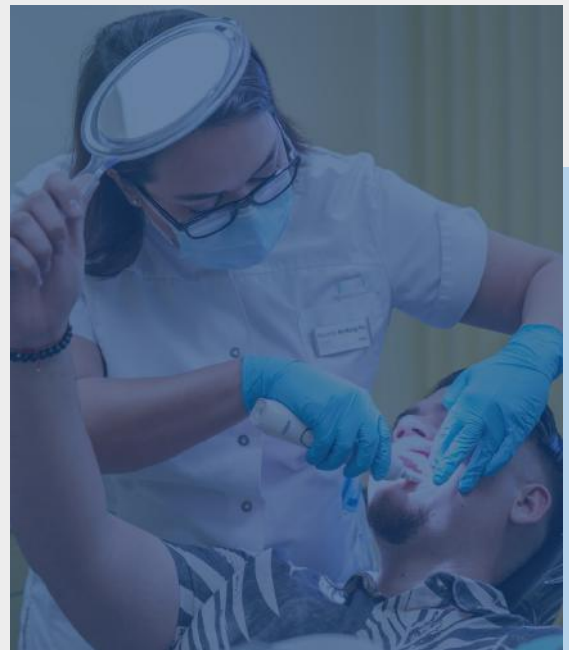
KEY TAKEAWAYS

1

In general, patients have a much more positive view of the dental hygiene profession in Ontario than non-patients.

2

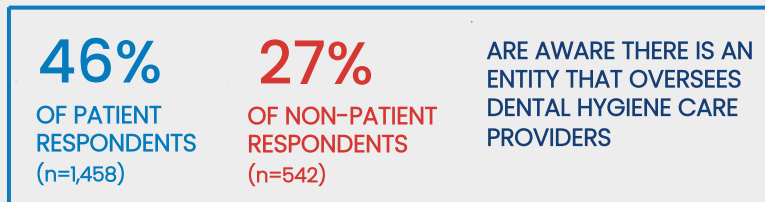
Concerns about discrimination while accessing dental hygiene care are relatively low; however, patients, especially those with low English language proficiency and who belong to racially marginalized communities, are more likely than non-patients to express this concern.



PERCEPTIONS OF REGULATIONS & CDHO'S ROLE

Awareness of Regulator

Patient respondents (46%) are more aware than non-patient respondents (27%) of the presence of a regulatory organization that oversees dental hygienists in Ontario (41% of respondents overall are aware).



Nearly two-thirds of patient respondents (64%) said they trust that a regulatory body for the dental hygienist profession is protecting patients and the public, and the same proportion said they are confident that a regulatory body would take action to protect dental hygiene patients in Ontario, if necessary.

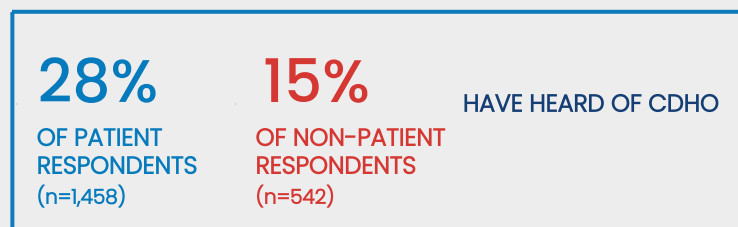
Awareness of Regulator Functions



Awareness of CDHO

All survey respondents were introduced to the CDHO and asked to indicate whether they had ever heard of the College. They were also asked to rate how effective CDHO is in carrying out various aspects of its mandate using a seven-point scale from very effective (7) to not effective at all (1). Respondents rated four components of CDHO's mandate, including:

- Ensuring those who enter the profession are qualified;
- Establishing clinical and ethical standards for practice;
- Ensuring dental professionals maintain competence throughout their career; and
- Investigating and resolving complaints about dental professionals.

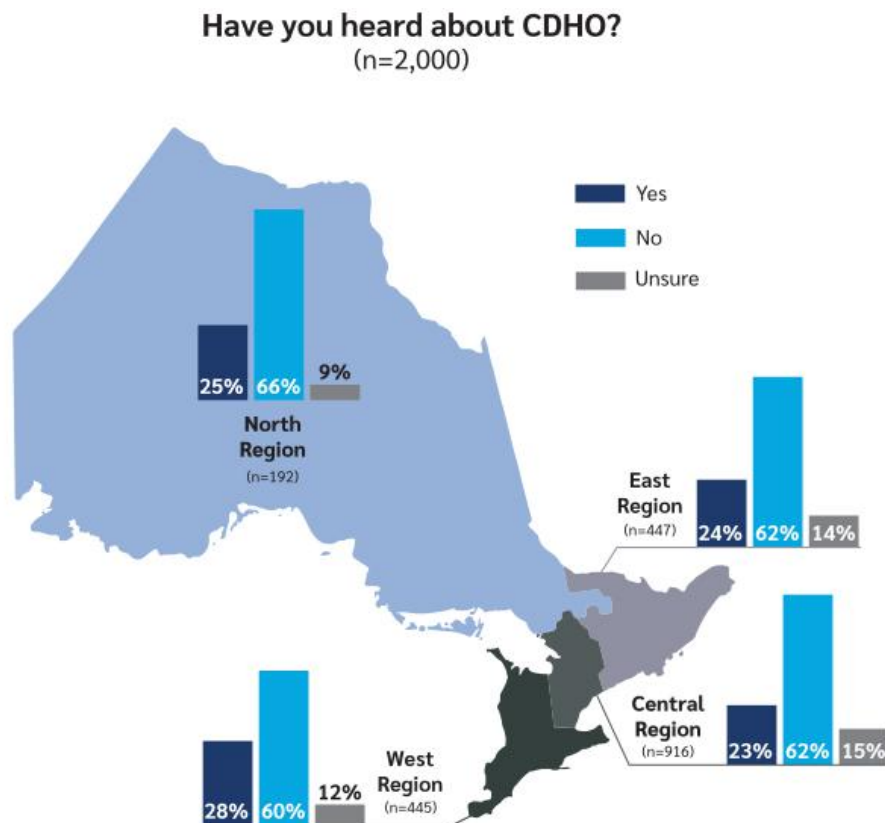


Patient respondents (28%) were slightly more aware than non-patients (15%) of the CDHO.

PERCEPTIONS OF REGULATIONS & CDHO'S ROLE

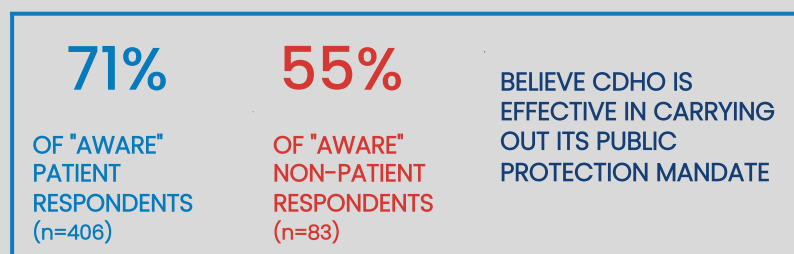
Awareness of CDHO by Geographic Region

Geographically, the highest awareness levels of the CDHO is in the West region at 28%, followed closely by the North region at 25% and East region at 24%. The Central/GTA region has high non-awareness levels of the regulator at 62% with similar trends in the East and North regions.



Perceptions of Effectiveness of CDHO

Overall, approximately seven-in-ten (71%) of patient respondents aware of the CDHO agree that the CDHO is effective in carrying out its public protection mandate, compared to slightly more than half (55%) of non-patients aware of the CDHO.



PERCEPTIONS OF REGULATIONS & CDHO'S ROLE

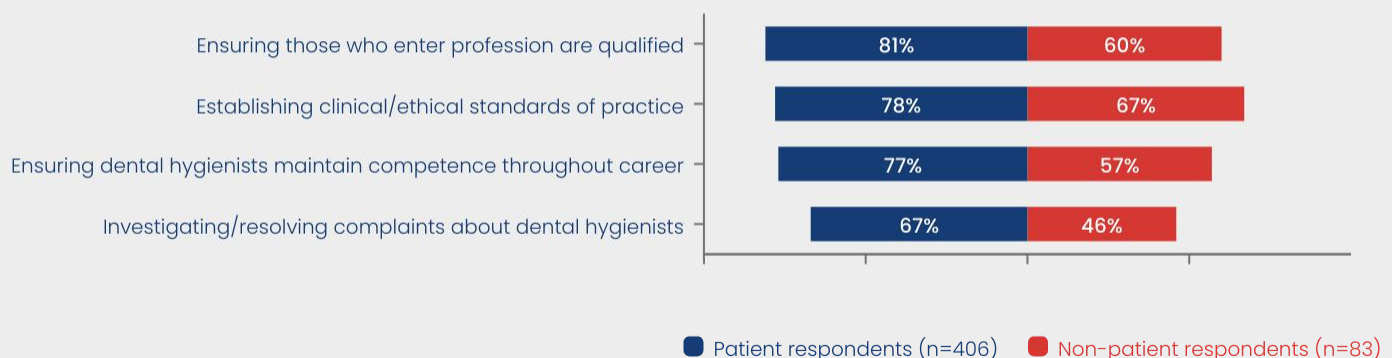
Perceptions of Effectiveness of CDHO

Patient respondents who are aware of the CDHO rated the College higher on the various aspects of performing its public protection mandate with scores ranging from 67% to 81% compared with 46% to 67% for non-patients who are aware of the CDHO.

Overall, "ensuring those who enter the profession are qualified" and "establishing clinical and ethical standards of practice for dental hygienists" received the highest scores, while "investigating/resolving complaints about dental hygienists" received the lowest score.

Perceptions of Effectiveness of CDHO in Carrying out Mandate

Among respondents aware of CDHO



Of the one-quarter respondents who were aware of the CDHO, more than half (56%) said they either learned about the CDHO from a friend/family member (28%) or from a dental professional (28%).

One tenth of respondents (10%) were made aware of the CDHO because they had a direct experience with the College. Of those, one fourth (40%) used the CDHO to look up the qualifications of a dental hygienist and a further one fourth (40%) accessed the CDHO website.

KEY TAKEAWAYS

1

Awareness and perceptions of CDHO and dental care regulation are both higher among patients than non-patients.

2

Although there is a general awareness of a regulatory body, relatively few Ontario residents are aware of CDHO.

3

Perceptions regarding the CDHO's effectiveness in carrying out its mandate were high among patients, relative to non-patients.

4

The College is perceived to be less effective at complaints investigations and resolution.

COMMUNICATION WITH THE PUBLIC

Respondents were asked to select their preferred mode of communication that the College should adopt when engaging with the public. Printed materials in dental offices and dental hygiene clinics (58%) and public awareness advertising campaigns (57%) were the top preferred methods overall.

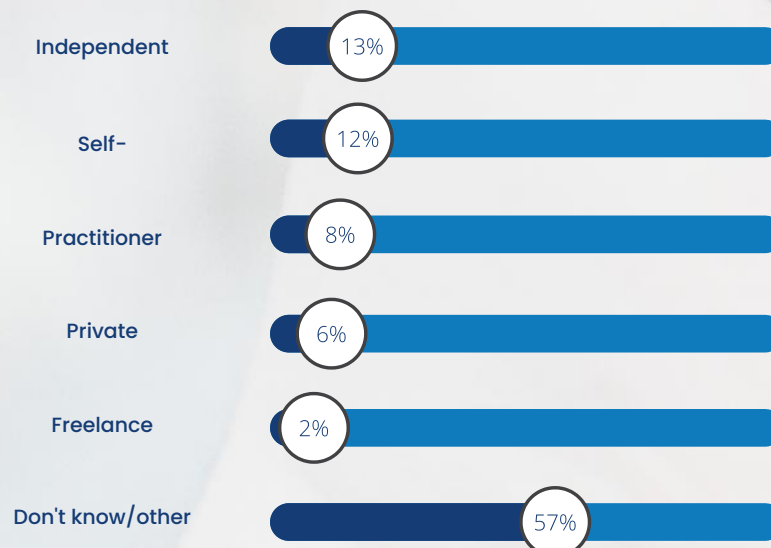
Ontario residents ages 46 years and older are more interested in printed materials, while younger respondents between the ages of 18 and 45 years indicated preference for online advertising.



Terminology for Self-Initiation

Respondents were consulted on terminology they would use to refer to a dental hygienist who acquires a supplementary certificate that allows them to practice dental hygiene in their own dental hygiene facility/clinic, independently from a dentist (currently in Ontario this type of practice is called "self-initiation").

Most respondents said they do not know what words they would use to describe this kind of arrangement. Approximately one in seven respondents (13%) mentioned the word "independent" and a similar proportion of answers contained the prefix "self." About one in ten respondents (8%) suggested "practitioner," similar to nurse practitioners.. The terms "certified," "solo/sole," standalone," unsupervised," and "paradentist" (similar to paralegal) were each mentioned by one percent (1%) of respondents.



KEY CONSIDERATIONS

1

Increase Outreach to Marginalized Demographics

Pivotal Research has identified several considerations for the College to further assess when aiming to enhance public trust and confidence in the dental hygiene profession.

In order to improve public trust and confidence in dental hygiene services, the College may wish to consider increasing outreach to Ontario residents who are currently less likely to access dental hygiene care, such as youth, racial minorities, and Ontario residents with limited English language proficiency, through awareness of the CDHO in a variety of languages.

2

Enhance Transparency & Complaints Process

Transparency and complaints investigation and processing are two areas the College may need to further enhance by spearheading internal initiatives while further engaging with the public to improve its overall perception. Additionally, the CDHO has an opportunity to improve its image regarding its effectiveness in carrying out its public protection mandate.

3

Improve Satisfaction with Informed Consent

There is an opportunity for the College to ensure informed consent protocols are appropriately applied throughout the province. Specific focus areas include enabling patients' active participation in decisions about their dental hygiene care and decreasing the feeling of being pressured to undergo a specific treatment or procedure option.

4

Encourage Transparency with Treatment Costs


The cost of dental hygienist care services are a common concern for most Ontario residents. While cost is outside the purview of the College, charges related to treatments need to be explained and agreed upon, especially because doing so directly increases a key driver of satisfaction with dental hygiene care services. The CDHO may consider opportunities to encourage its registrants to incorporate effective informed consent, communication, and payment transparency measures as part of assessment and treatment.

5

Implement Multi-Channel Communication Campaigns

Should the College consider launching a public education or relations campaign, a multi-channel approach is recommended as respondents indicated their preference for a variety of media, including both printed materials and internet-based communications.

APPENDIX



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Dental Hygiene Patient Experiences with Racism and Discrimination Research

August 14, 2023

Prepared for

College of Dental Hygienists of Ontario



Introduction and Background

The dental hygiene profession plays a vital role in ensuring the oral health and well-being of individuals. However, it is essential to acknowledge and address the issue of discrimination within the context of dental hygiene services.

According to the Voice of the Patient study conducted by Pivotal Research in 2022, approximately one-in-seven respondents (14%) either agreed or strongly agreed with the statement “dental hygiene patients face discrimination, such as racial discrimination, from their dental hygienist(s).”

A similar proportion of respondents (14%) either agreed or strongly agreed with the statement “dental hygiene patients in Ontario face discrimination, such as racial discrimination, from their dental office/dental hygiene clinic overall” which again was higher among patient respondents (16%) than non-patient respondents (9%).

One-in-five (20%) Ontario residents who belong to a racially marginalized community agreed or strongly agreed that dental hygiene patients face discrimination from their dental hygienist or their dental office/dental hygiene clinic. This compares to only 13% for the general population.





Research Objectives

This research project aims to shed further light on the experiences of patients who have faced discrimination and stereotyping, including racial discrimination, while seeking dental hygiene services. By conducting this study, we hope to contribute to a more inclusive and equitable oral healthcare system. Specifically, the research objectives were to:

1.

Explore and understand the lived experiences of patients who have encountered racism, discrimination or stereotyping when receiving dental hygiene care in the last 12 months.

2.

Identify and document specific instances of racism, discrimination, and stereotyping faced by patients including microaggressions, passive aggressiveness, perceived changes in quality of services provided, denial of service, and/or verbal abuse.

3.

Provide actionable recommendations to the CDHO for addressing and mitigating discrimination within the dental hygiene profession.

Sampling and Data Collection

Sampling Frame

All Ontario residents over the age of 18 who received dental hygiene care within the past 12 months and who experienced discrimination during a dental hygienist visit.

Recruitment

Pivotal Research recruited research participants from an online panel community. The recruitment screener was deployed in both English and French.

Data Collection

Between June 19 and July 24, Pivotal Research conducted 21 in-depth interviews with patients who faced racism or discrimination when receiving dental hygiene care. Pivotal Research scheduled 14 interviews in addition to the 21 completed interviews; however, those interviews were cancelled for various reasons.



Respondent Demographics

The sample included representation from across Ontario as well as from the following population groups:

- Women (n=9)
- Members of a racialized group, excluding Indigenous (n=8)
- Indigenous (n=6)
- Persons with disabilities (n=6)
- LGBTQIA2S+ (n=4)
- Newcomers, less than 5 years (n=3)

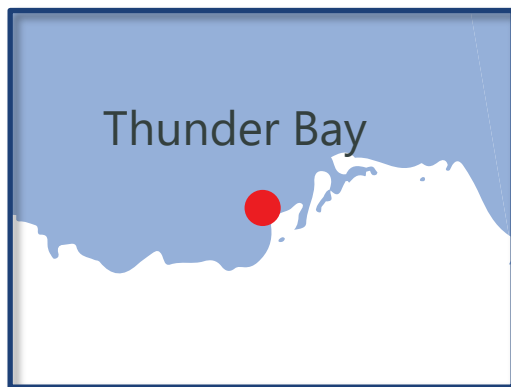




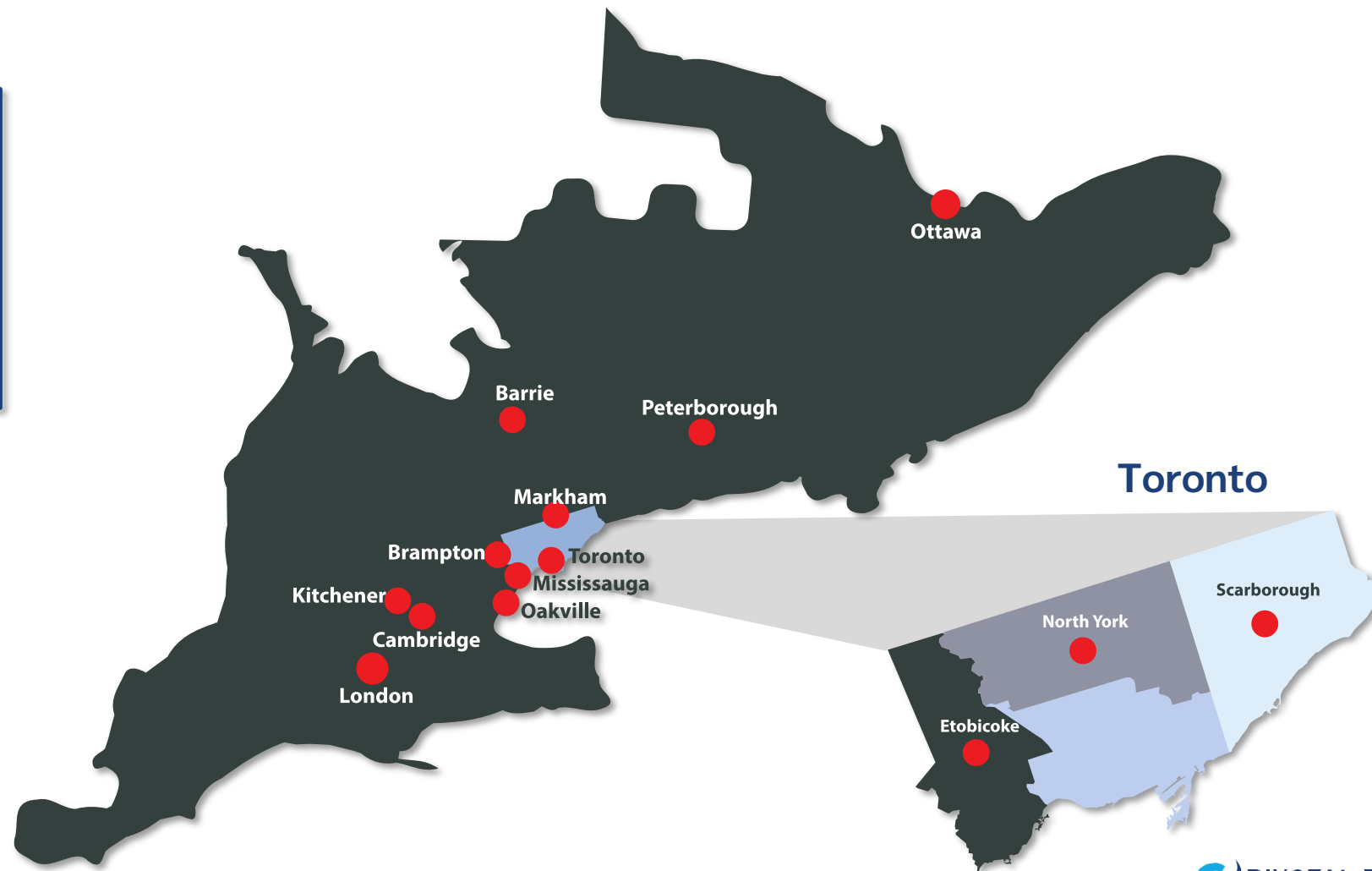
Respondent Demographics

6

North West Ontario



South Central Ontario





Key Findings

7



The top reasons for a positive dental hygiene experience are a **friendly/welcoming attitude** and providing **useful information and advice**



Respondents were most likely to face discrimination from the **dental hygienist** as well as from the **receptionist**



The most common types of discrimination encountered by dental hygiene patients are **racism** and **classism**, ranging from **microaggressions** to **direct and intentional verbal hostility**



The most common action taken by respondents was to **ignore** the discrimination, followed by **finding a different dental clinic**

Top reasons for positive dental hygiene experience

- Roughly half of all respondents said the top reason for a positive dental hygiene experience was that the hygienist was **friendly and welcoming**.
- Four participants said that receiving **useful information and advice** was the top reason.



Friendly/welcoming (n=10)

- “Making smalltalk, catching up with me, asking me about my wellbeing. I enjoy feeling welcome and valued as a patient.”
- “They know your name, know about you, talk to me about my cats. Makes me feel like a person.”



Providing useful information/advice (n=4)

- “Informed me step by step on things that were getting done. Gave me a plan for self-care at home.”
- “My current hygienist looks over my teeth and makes recommendations based on what she sees. She gives me more advice than other dental hygienists. That’s a huge value add.”

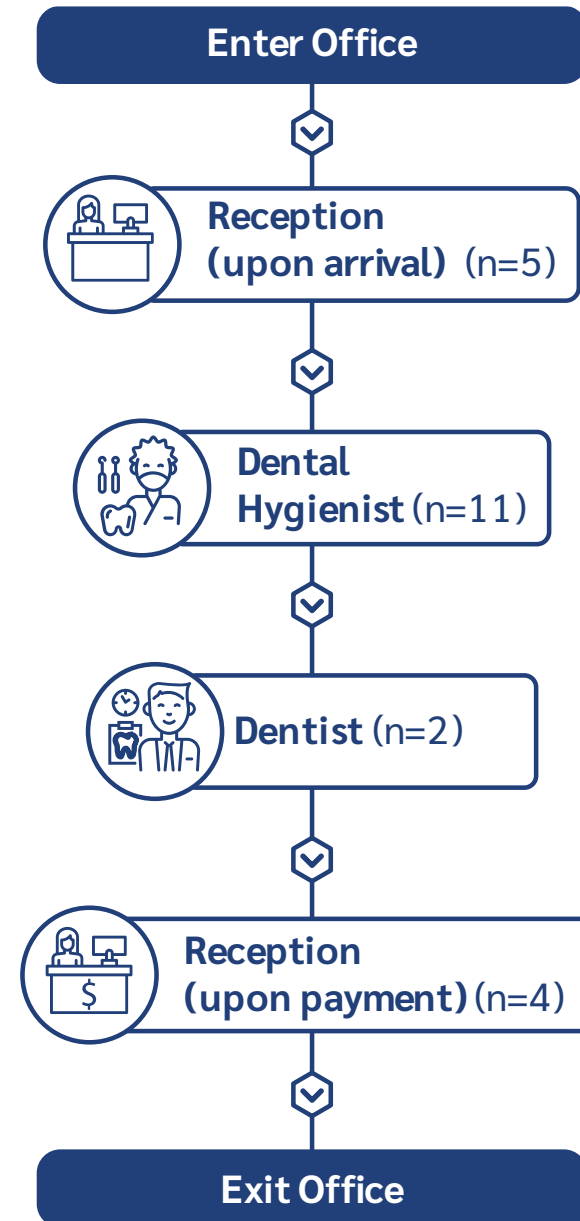


Other reason (n=3)

- “They always pay attention to detail. Never have to repeat myself regarding medications, conditions, etc.”
- “I have sensitive teeth and bleeding in my gums. They put stuff on my gums for the sensitivity that worked.”
- “She gives me a lot more free goodies!”

Location/source of discrimination

- Approximately half of those interviewed said they faced discrimination from the dental hygienist directly.
- Nine respondents said they faced discrimination from the receptionist, either upon arrival or upon payment.
- A small number of participants faced discrimination from their dentist.



Type of discrimination faced

- Most respondents said they faced discrimination based on their **racial background, skin colour, ethnic origin, or nationality**.
- This includes discrimination based on having an **accent** and being a **recent immigrant or citizen of another country**.



Racism/colourism/anti-immigrant prejudice (n=17)

- “They just weren’t welcoming of people who are immigrants. You could just tell. They seemed a little bit impatient with people who weren’t born and raised in the country or educated.”
- “At the most recent dental hygienist visit. Just chit chatting. She mentioned that ‘nobody speaks English anymore,’ ‘what’s the country coming to,’ ‘everybody in hijabs and turbans’”
- “Not necessarily racism or hate, but bias. I understand English fully but I have an accent. The hygienist seemed annoyed by my accent.”
- “I don’t know if it counts as racism. But body language – I noticed the staff was more interested in other clients. It’s like a teacher who has a favorite student. Hygienists have favorite clients.”
- “One time, I overheard that dentist say that ‘he can smell their [patients'] culture.’ The specific experience I had was with the dental team (which includes dental hygienist) talking to one another while I was on the treatment chair. They were talking about Aboriginals: that they are ‘nothing but alcoholics and drug addicts. They don’t serve any purpose.’ I felt the comments were aimed at me, sitting in the chair with my mouth open. I have dark skin tone and I am 100% native and have a status card.”

Type of discrimination faced

- A few participants said they faced discrimination **based on their income**.
- One respondent witnessed **sexism** during a dental hygiene appointment.



Classism (n=3)

- “I’m on a public health plan and I’ve faced discrimination because of that. On several instances. Making comments about ODSP patients. I feel like I’m discriminated against because of my insurance plan.”
- “When I applied to a new dentist clinic they denied me and gave me some questionable looks. They told me that they would put us on a wait list and that they would call back. They never called back. They asked for proof of income and I provided that info. This happened to me three times.”



Sexism (n=1)

- “He was very rude and outspoken. Constantly interrupted me and my wife and asked my wife to be quiet. Asked her to ‘please be quiet, women’s opinions don’t matter.’”



Action(s) taken when facing discrimination

- Most respondents said that they **ignored** the comments or behaviours during their dental hygiene visit.
- Many participants said they **found a different dental clinic or have not returned** to the same dental clinic as a result of the discriminatory remarks or behaviours.



Ignored the behaviour (n=15)

- “In life if someone is rude, I try not to cause a scene. A good friend of mine is a hygienist in Burlington – all dental hygienists make fun of their patients. That’s just a fact.”
- “I usually blame myself and say that I need to work on my English more so I have less of an accent. I try not to blame others and look in the mirror. Am I working hard enough to improve my speech? Put myself in the other person’s shoes. If I was in Korea and someone couldn’t speak Korean I would be frustrated too. Am I being totally unbiased? I don’t want to have a victim mentality.”



Found different dental clinic or didn’t return (n=13)

- “I’ve never been back to that dental office. I would not recommend it to anybody I know and I would not go back.”

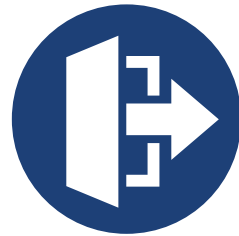
Action(s) taken when facing discrimination

- A few respondents **said something** about the discriminatory comments or behaviours they experienced or witnessed.
- A small number of participants **left the appointment** immediately.



Said something (n=6)

- “I piped up and gave my feelings. I won’t sit back and listen to that without saying anything. Usually they just shut up because they’re just spouting nonsense.”
- “Mentioned it to the receptionist. She said ‘that’s just how it is.’”

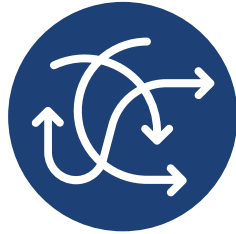


Left the appointment immediately (n=2)

- “I just walked out of the office and went home.”

Reason(s) for not taking action

- Among those who did not act in response to the discriminatory comments or behaviours, the most common reason given was that they **did not want to cause further issues or attract unwanted attention**.
- A few participants said they did not complain because they **did not know that complaining to the CDHO was an option**.
- A similar number said that **filing a complaint seemed too difficult** or that they felt their complaint wouldn't be taken seriously.



Didn't want to cause further issues/attract attention (n=5)

- “Didn't want to ruin a small business or put someone out of work– collateral damage. ‘People are people’ mentality.”
- “If I complain, would their behavior improve? Would it actually result in them being nice to me or would it make them more hostile to me?”
- “I was raised to never complain.”
- “I didn't want to create a scene.”
- “Even if I'm convinced that the behavior is not right, I don't think I would file a complaint. I'm sure they're not doing it intentionally. Everyone can get annoyed and for a multitude of reasons. It's a human thing. I put blame on myself and not others.”



Didn't know it was an option/didn't know about CDHO (n=3)



Seemed too difficult/felt complaint wouldn't be taken seriously (n=3)

Trust in dental hygiene profession

- Most respondents said that their trust in the dental hygiene profession was **negatively impacted** as a result of the discriminatory comments or behaviours they experienced or witnessed.
- A smaller number of participants said the remarks or behaviours **did not impact** their trust.



Trust was negatively impacted (n=13)

- “Makes me wonder if I’m getting the best care. Brings me a lot of anxiety when I go.”
- “Not necessarily the quality of their service, but the idea they might not do their best for me is in the back of my mind. I try not to dwell on it. Deep down, will they give me the same care they give to white Canadians? Will it affect the service I’m getting. I’ve thought about it a few times. I try not to be paranoid.”
- “It gives me an uneasy feeling that the people working in “medical” professions can push aside those who need care because they don’t have enough money.”



Trust was not impacted (n=4)

- “Unfair to make that generalization.”
- “Wasn’t that big of a deal.”

Future actions if/when encountering discrimination

- Of the patients who took no action in response to experiencing or witnessing discrimination, most said that they would **complain if they experience or witness discrimination in the future**.
- A few respondents said they **won't do anything**, and a slightly smaller proportion said they will **find another dental office**.



Will complain (n=7)

- “I spoke with my lawyer about another issue. I told him what happened and he said ‘if that every happens again, call me right away.’ If something like that ever happens again I would probably call my lawyer.”
- “Now that I’m getting older, I would talk to the owner in private and let her know what’s happening. I know the owner personally.”
- “If it becomes a repeat performance I might end up talking to the boss.”
- “If it happens again I will follow-up with a complaint.”
- “Maybe I would confront them. It's hard to say. My thought at the moment was how to get out as fast as possible. It would be nice to stand up and say something.”



Take no action/do nothing (n=3)

- “To be honest, it’s not just in the dental hygiene profession. I find that people are rude generally. I’m just immune/insensitive to it now—it affects me still, but I’ve experienced it so much.”



Will find a different dental clinic (n=2)

- “If it keeps continuing I will need to find a different dental clinic.”

Suggestions for improvement

- Many respondents said that **additional training** is needed for dental hygienists and receptionists.
- However, several participants noted that **explicit anti-bias training cannot necessarily correct a hygienist's implicit biases.**

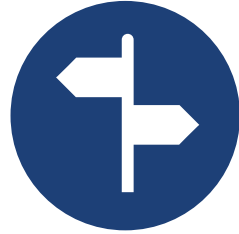


Additional sensitivity training (n=5)

- “The dentist as well as the hygienist need to have the attitude of workers in the hospitals. It’s medical care after all. Need to have compassion regardless of who they are. Separate their own personal opinions from their work and put it aside. Training and awareness.”
- “I don’t know if training is the answer, extra seminars and workshops. I’m sure they do all that stuff already.”
- “My workplace has a new program of anti-racism and anti-discrimination. Seminars that you have to watch with a little test as the end. However, I acknowledge that explicit training can’t necessarily solve implicit bias.”
- “Making it mandatory across Ontario on respect and dignity for others, dealing with differences, this training should be complimentary and required of dental hygienists, dentists, orthodontists, receptionists and others in an oral health setting.”
- “Think there should be some sort of sensitivity training. If you’re going to do a job like that, everybody should be treated the same, there should be the same attitude no matter whom you’re approaching. I personally wouldn’t treat anybody differently. I try to be patient with everybody and understand where they’re coming from.”

Suggestions for improvement

- Several respondents emphasized the need for **additional CDHO signage** in dental offices advertising where patients can go to complain or give feedback.
- A similar number of participants suggested the CDHO periodically audit dental hygienists with **evaluations e.g., mystery shops**.



More CDHO signage in dental offices (n=3)

- “Stickers and information where you can complain or give feedback. Knowing where to go. 90% of the time I don’t know where to go, I’m just Googling ignorantly.”
- “Did not know that one can complain to the College. It's a good idea to advertise about, require every dental office to have a poster in English and other languages for patients to see it.”



Mystery shops/evaluations/reviews (n=3)

- “Review every six months? Listen to feedback from patients. Survey patients. But I’m not sure how feasible that is. Some kind of evaluation or review may help to enforce or remind dental hygienists about how to behave.”
- “I noticed in Canada, especially in Toronto, there are dental clinics all over the place. How do people find which clinic is best? Overwhelmed with choice. We need a ‘Michelin Star’ for dental offices!”

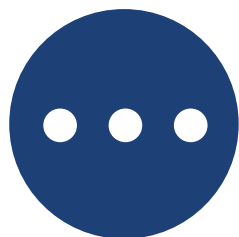
Suggestions for improvement

- Two respondents provided additional suggestions, including **virtual meet-and-greets** with the dental hygienist and clinic staff before making an appointment, as well as more **financial support** for low-income individuals.
- The remaining interview participants did not provide a suggestion for improvement.



Other (n=2)

- “I like the idea of online and virtual appointments to input information you’re not comfortable talking about in person. Ability to schedule an online ‘interview’ with dental hygienist and see if the relationship is going to work, what the office looks like, etc.”
- “The government should have more dental hygiene programs for low-income folks. There is a patchwork of dental programs for people receiving social assistance, but there are gaps. A lot of those programs are based on old age, disability, etc. There are a million Canadians who haven’t seen a dental hygienist in the past year, and I think that’s due to costs.”



No suggestion (n=8)

- “I don’t know if I have a solution. Canadians work harder than anyone else to be fair, when it comes to race.”
- “As far as official regulations, I don’t know what you could do differently. We don’t have a thought police.”
- “A dentist is a business that wants to make money and I understand that.”
- “Every location is different and every person is different. People are who they are. If they’re racist you can’t change that.”



Key Takeaways and Considerations for Future Research



Generally, patients who face discrimination do not complain because they:

- Are not aware of the CDHO and its role
- Do not want to cause further issues or draw attention to themselves
- Justify or downplay the comment(s) or behaviour(s) in order to 'fit in'



The most common suggestion for improvement was **anti-bias training**, followed by more **CDHO signage in dental offices**. Several participants recommended conducting **mystery shops and evaluations** and publishing results.



Strengthen standards and guidelines on professional communication and intercultural competence



Invest in more public education about the CDHO and its mandate

Selected interview summaries – faced discrimination from dental hygienist

“I keep having an issue with a tooth that keeps breaking. They have to fix it again. Sometimes when I go, there are some workers that I don’t like. There are others that I do like. There is one hygienists there I don’t like. Every time I tell him I want my tooth fixed, he says its fine. Complained to the owner but they seemed to not do anything about it. If it keeps continuing I will need to find a different dental clinic. I want them to not disrespect me and be polite and nice to me.”

-Indigenous Woman, Aged 46-55, Etobicoke

“Hygienist said ‘you don’t look disabled’ when she found out I was collecting ODSP. Felt frustrated. Didn’t book another appointment at the end of my visit. Would complain to CDHO if it happens again.”

-Woman with a Disability, Aged 36-45, Barrie

“Hygienist plain asked me about my background. I felt kind of violated and embarrassed. I decided to ignore it but I am not going to come back.”

-Indigenous Woman, Aged 36-45, Ottawa

“Last July, a piece of my tooth broke out. I asked if the tooth was savable and she gave me attitude. My questions seemed to irritate her. Inflection and tone of her voice, etc. I left and never went back. I couldn’t get benefits and just left the tooth the way it was. Last week, the tooth started showing signs of infection again. I have an appointment to go back on Monday to extract the tooth, but I’m not sure I want to go. I was fearful that if I let this person deal with my tooth that they would do a poor job. I felt offended and insulted. The dentist as well as the hygienist need to have the attitude of workers in the hospitals. It’s medical care after all. Need to have compassion regardless of who they are. Separate their own personal opinions from their work and put it aside.”

-Black Man, Aged 46-55, Brampton

Selected interview summaries – faced discrimination from dental clinic

“Filled out some forms and was told to wait. Someone who arrived after me was called before me. There were only two of us. I know they arrived after me. Asked them why I was asked to wait, they apologized but didn’t seem genuine. Let it be because I don’t like confrontation. Never going there again.”

-Black Man, Aged 26-35, Toronto

“Receptionist questioned my identification documents. It made me feel let down and anxious, like I was in trouble or being attacked/accused of being a cheater. I didn't file a complaint, but the experience did affect my trust in the dental profession.”

-Black Man, Aged 18-25, Ottawa

“Receptionist would glance over at me and giggle. I know from past experience of always being targeted to be picked on, that’s what they were doing. I heard some comments like ‘he is native, his teeth are supposed to be like that, that’s just what natives look like.’ It made me feel very awkward and uncomfortable. I felt embarrassed. It was quite upsetting. I wanted to complain, but didn't want to make a scene, or worse.”

-Indigenous Man, Aged 36-45, Kitchener

“I was waiting in line with my son. The receptionist was talking nicely to the clients before me. When I got to the window, the receptionist's face changed and she immediately told us to wait and sit down. After 15-20 minutes of waiting, the receptionist called us up. She was not friendly towards me. She took our information and insurance papers and asked us to wait another 30 minutes. Others who came after us were treated first. The appointment took 1.5 hours, 45 minutes of which were unnecessary because of the receptionist asking for us to sit and wait. I felt we were treated lesser as I did not see the receptionist act that way with white patients. If I experience the same behaviour again, I will probably speak to her supervisor in private.”

-Asian Man, Aged 46-55, Mississauga

“I said good morning to the receptionist, who didn’t reply. I felt ignored and uncomfortable. I should have said something but I didn’t want to create a scene. I never thought about filing a complaint because I don’t know who is in charge of the clinic. If happened again, I would definitely complain. I probably won’t go back, but if I do, I’ll tell her exactly what I feel.”

-Black Woman, Aged 36-45, Scarborough

Thank You!



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Pivotal Research is headquartered on the ancestral land of the Nêhiyawak (Cree), Anishinaabe (Saulteaux), Niitsitapi (Blackfoot), Métis, Dene and Iyāhé Nakoda (Nakoda Sioux) in Treaty 6 Territory and Métis Region 4.

College of Dental Hygienists of Ontario: Registrant Engagement

Final Report

OCT 2023



CDHO

COLLEGE OF DENTAL
HYGIENISTS OF ONTARIO

 **PIVOTAL RESEARCH** Inc.™

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Summary of Findings

Workplace Experience

- A positive work environment for Dental Hygienists includes a respectful relationship with the employer (95%), respect for other members of the team (95%), and patient-centred care (94%).
- Four-in-five (8%) of Registrants have a desire to be part of the delivery of team-based care.
- Two-in-five (42%) of Dental Hygienists feel that they are not seen as a core part of the healthcare team while a quarter (26%) believe that oral health care standards and guidelines are misaligned.
- Dental Hygienists are more likely to report seeing or experiencing discrimination or stereotyping from patients (43%) than from their colleagues (31%). From patients, they are most likely to witness racism (21%), anti-immigrant bias (16%) and bias based on profession (16%). From colleagues, they more frequently witness bias based on profession (15%), ageism (13%) and racism (11%).
- Two-in-five (42%) agree or strongly agree that their workplace offers them the opportunity to integrate innovation into their practice.

Diversity, Equity, Inclusion and Access

- A small percent of Registrants (7%) agree or strongly agree that Indigenous specific racism is widely prevalent in dental hygiene care. Survey data shows, however, that awareness may impact the ability to identify Indigenous-specific racism.
- Top preferred CDHO supports to enable culturally safe, equitable, and respectful care include: presentations/webinars (57%), optional cultural safety and humility training through CE/CC credits (49%), a DEI resource hub (42%), and a unified standard on health equity and cultural safety (37%).
- One-in-five (21%) believe business rules where Dental Hygienists work exclude certain people from accessing dental hygiene care.
- A small percent (13%) of Registrants agree or strongly agree that the profession does not adequately reflect the diverse communities it serves. Those working in public health settings (24%), educational settings (22%) and those who are racialized minorities (24%) agree or strongly agree more with this statement.

Practice Standards Implementation

- Over half (54%) of Registrants do not experience challenges with implementing practice standards however, time constraints (69%), lack of decision-making control (41%), and workplace culture (41%) detract from effective implementation.

Independent Dental Hygiene

- More than a third (37%) agree or strongly agree that independent Dental Hygienists need more support to ensure continuum of care and just under half (45%) of respondents who identified as practising independently agree or strongly agree with this sentiment.

Scope of Practice Considerations

- Four-in-five (84%) Dental Hygienists support legislation mandating oral health care in long-term care settings and a similar proportion (82%) support expanding scope of practice to include prescribing radiographs.
- Fewer (59%) support increasing scope of practice to include administration of local anesthetic by injection, especially Dental Hygienists with more than 25 years of experience (55%).

Registration Renewal Experience

- Only a small percent (4%) of Registrants found renewal to be a difficult process; however, Registrants with less than 5 years of experience (34%) find the process less easy than Registrants with over 20 years of experience (50%).

Information from Voice of Dental Hygiene Patient Program

- From the annual Voice of the Dental Hygiene Patient Program, Registrants are most interested in collecting data on overall patient satisfaction (51%), experiences with the quality of care delivered (50%), and with access to care (47%).

Perception of Effectiveness in Meeting Mandate

- Over half (51%) of Registrants believe that CDHO is effective in carrying out its public protection mandate, less than confidence levels recorded for dental hygiene patients (68%).
- Dental Hygienists have the most confidence in CDHO's ability to establish clinical and ethical standards of practice (71%) , but less so for maintaining competence throughout a Dental Hygienist's career (54%) and investigating complaints (49%).



Background and Methodology

Background and Research Objectives

The College of Dental Hygienists of Ontario (CDHO) is the profession regulator for registered Dental Hygienists in Ontario. CDHO regulates the profession of dental hygiene in the interest of the overall health and safety of the public of Ontario and sets the requirements for registration as a Dental Hygienist.

The purpose of this research is to support moral ownership linkage on behalf of the Board and College by engaging registered Dental Hygienists in Ontario to provide feedback on workplace culture, equity, diversity, and inclusion, scope of practice, and perspectives on the CDHO.

Research Methodology

Pivotal Research implemented a multi-phase concept to execute the research. The project was conducted in two stages:

Stage 1 - Qualitative Research: entailed an online bulletin board assessing the perspectives of 27 Registrants from June 8 to June 15, 2023. Pivotal Research worked alongside CDHO and the Ownership Linkage Committee to recruit participants and provide continuing education credits for participation. Registrants came from a diverse range of backgrounds, both personally and professionally. This online bulletin board consisted of 8 activities and 3 discussion questions. Tasks included answering questions, uploading images and videos and participating in discussions. 23 Registrants completed all activities. **The discussion guide with more detail can be found in the appendix.**

Stage 2 - Survey: entailed the development of an online survey in collaboration with CDHO staff and informed by Stage 1 of the research. The 12-15 minute online survey was distributed to all Registered Dental Hygienists in Ontario (15,084) from September 12 to September 29, 2023. Including partial responses, 2,100 Registrants participated in the survey resulting in a response rate of approximately 14%. The survey was offered in both English and French.

Survey Topics

- Renewal
- Workplace Environment
- Diversity, equity and access to care
- Current state of the profession
- Quality assurance
- Measuring patient experience and perspectives of CDHO
- Demographics

While questions on quality assurance were asked in this survey, data was provided to an external consultant to analyze. Results on quality assurance will not be covered in this report. **The survey with more detail can be found in the appendix.**

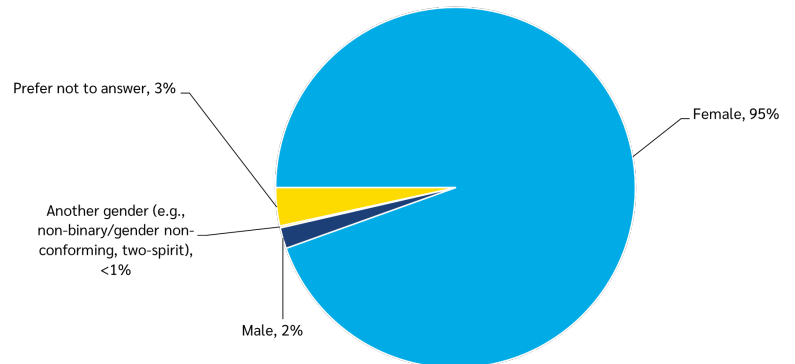
Respondent Profile

Respondents were asked to provide demographic information to ensure adequate representation.

Gender Identity

Females comprise the majority (95%) of respondents. In contrast, male respondents accounted for a minimal 2% of the surveyed population. Less than 1% of respondents identified with another gender category, such as non-binary, gender non-conforming, or two-spirit. A small fraction (3%) of respondents preferred not to answer.

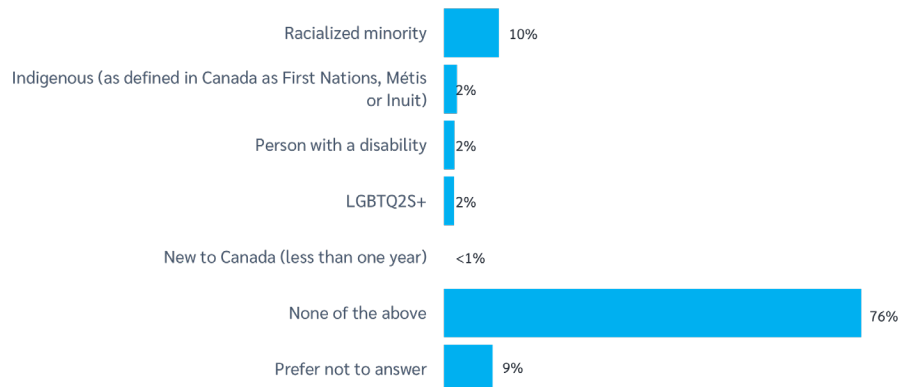
Fig 1. Gender (n=1,756)



Belonging to Marginalized Groups

When asked to self-identify, one-tenth (10%) identified as a racialized minority. Indigenous individuals (defined in Canada as First Nations, Métis, or Inuit), persons with disabilities, and LGBTQ2S+ respondents also each make up 2%. Notably, less than 1% identified as new to Canada. A significant majority, 76%, did not identify with any of the provided options. Additionally, 9% preferred not to disclose their identity.

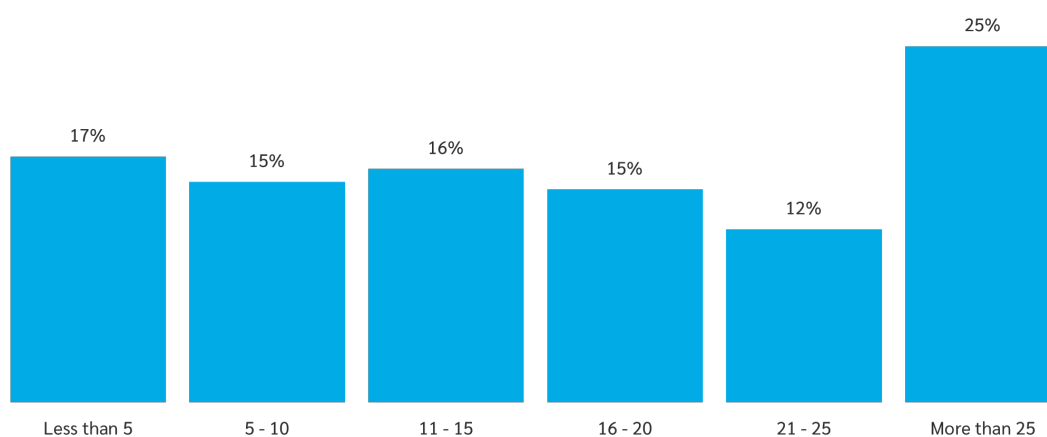
Fig 2. Self-Identification with Marginalized Groups (n=1,736)



Years in Practice

A quarter (25%) of respondents have over 25 years of experience as a Dental Hygienist in Ontario. Just about one-fifth (17%) reported having less than 5 years of experience. Nearly two-thirds (58%) of respondents have been practicing in Ontario between 5 to 25 years.

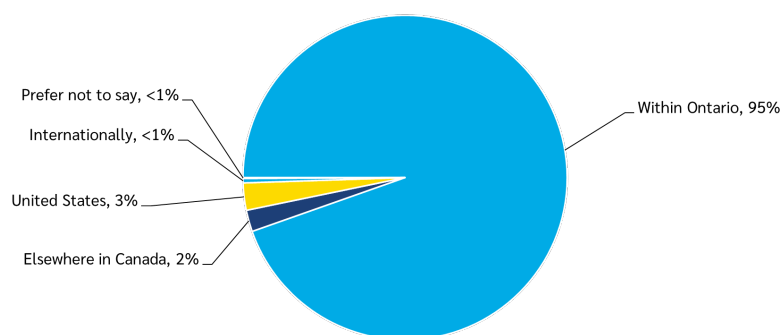
Fig 3. Years in Practice (n=2,100)



Place of Study

Most Registrants are educated in Canada, with 95% of respondents hailing from Ontario and 2% being educated elsewhere in Canada. Only 3% of respondents were educated in the United States while fewer than 1% of Registrants were educated internationally or preferred not to answer.

Fig 4. Location of Credential Attainment (n=2,100)

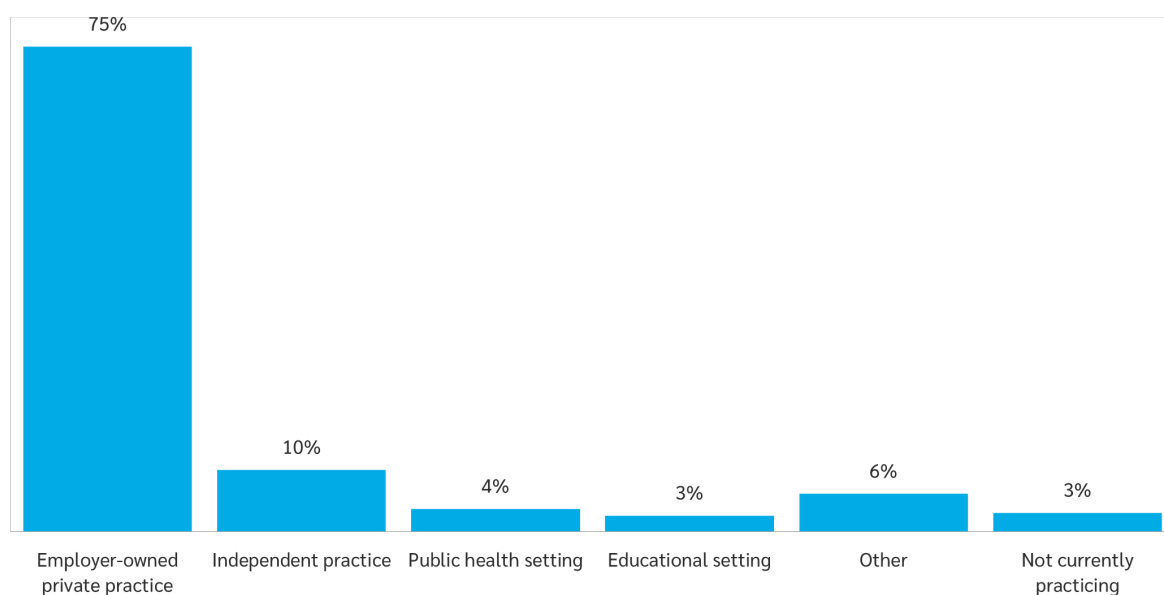


Practice Setting

Dental Hygienists work in various work settings with three-quarters (75%) reporting being employed in an employer-owned private practice. One-tenth (10%) of Dental Hygienists indicated working in an independent practice. A smaller proportion (4%) were situated in public health settings, while 3% were based in educational environments. Another 6% fell under the category of “Other” settings. Notably, 3% of respondents indicated that they were not currently practicing.

Of those who selected other, over half (54%) specified that they work for corporate owned dental offices. Other options selected include other health settings, such as temp agencies, non-practicing roles in dental companies, such as sales, and administration.

Fig 5. Practice Setting (n=2,100)



Current Work Arrangement and Location

Just under two-thirds (60%) reported working full-time, while 36% indicated that they were employed part-time. A smaller proportion (3%) reported having temporary positions.

Fig 6. Current Work Arrangement (n=2,100)

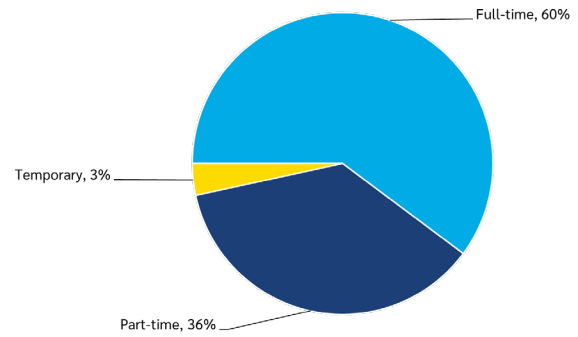
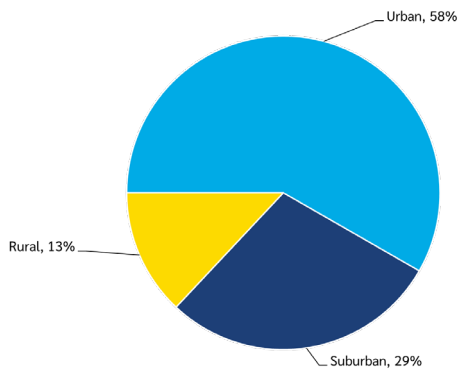


Fig 7. Work Location (n=2,038)



A majority (58%) of respondents, reported working in an urban setting while 29% indicated residing in suburban regions. A smaller proportion, 13%, reported working in a rural setting.



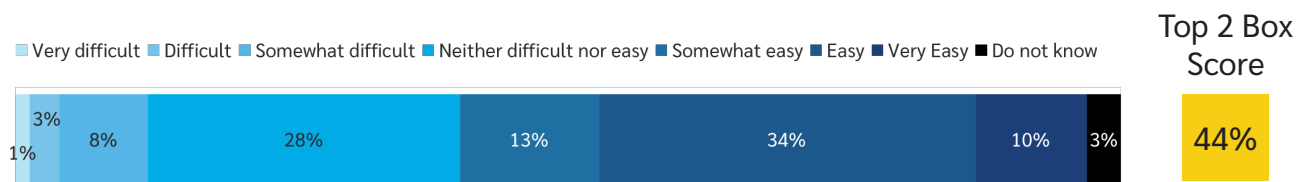
Registration Renewal Experience

Most Registrants do not find renewal to be a difficult process. A small minority (4%) found the process either difficult or very difficult. Just under half (44%) reported finding it easy or very easy indicating there may be room for improvement.

Ease of Renewal and Years of Experience

There is a positive relationship between years of experience and the ease of renewal. Registrants with less than 5 years of experience found the process the most difficult (34%), while Registrants with over 20 years of experience were most likely to find the process easy or very easy (50%).

Fig 8. Experience with Annual Renewal (n=2,100)

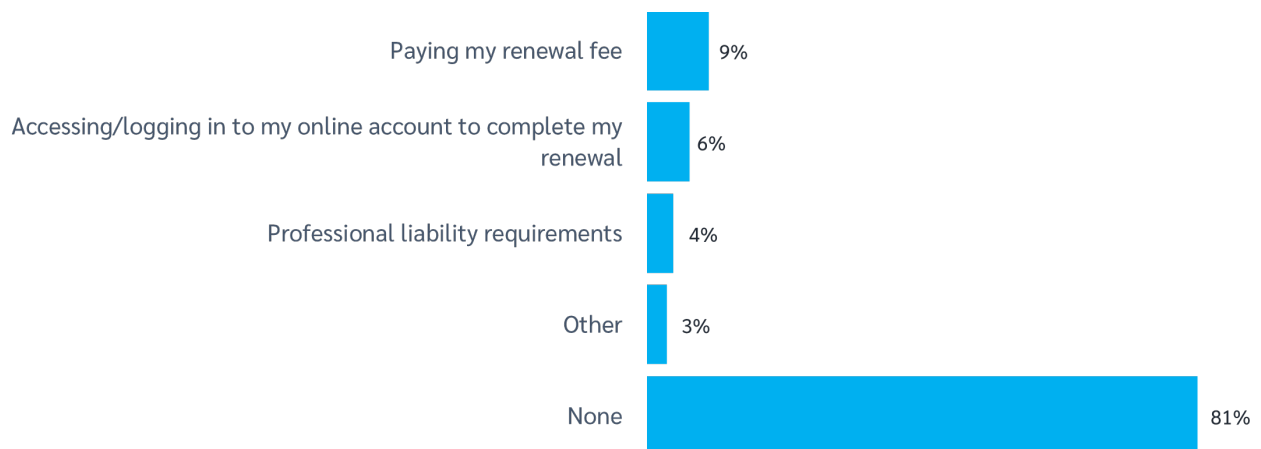


Challenges with Renewal

When asked about their challenges faced during the renewal process, the majority (81%) of respondents, stated that they did not experience any issues. A smaller proportion shared the following challenges:

- Difficulties with paying their renewal fee (9%)
- Accessing or logging into their online accounts for renewal (6%)
- Issues related to professional liability requirements (4%)
- Other issues (3%), including deadlines, cost of renewal, updating personal information, length of time to complete the process

Fig 9. Challenges with Annual Renewal (n=2,078)



Workplace Experience

Dental Hygienists strongly prioritize their relationships with employers, colleagues and patients when thinking about a positive work environment.

Dental Hygienists agreed that the most important elements of a positive work environment include:

- A respectful relationship with the employer (95%)
- Respect for other members of the team (95%)
- Patient-centred care (94%)

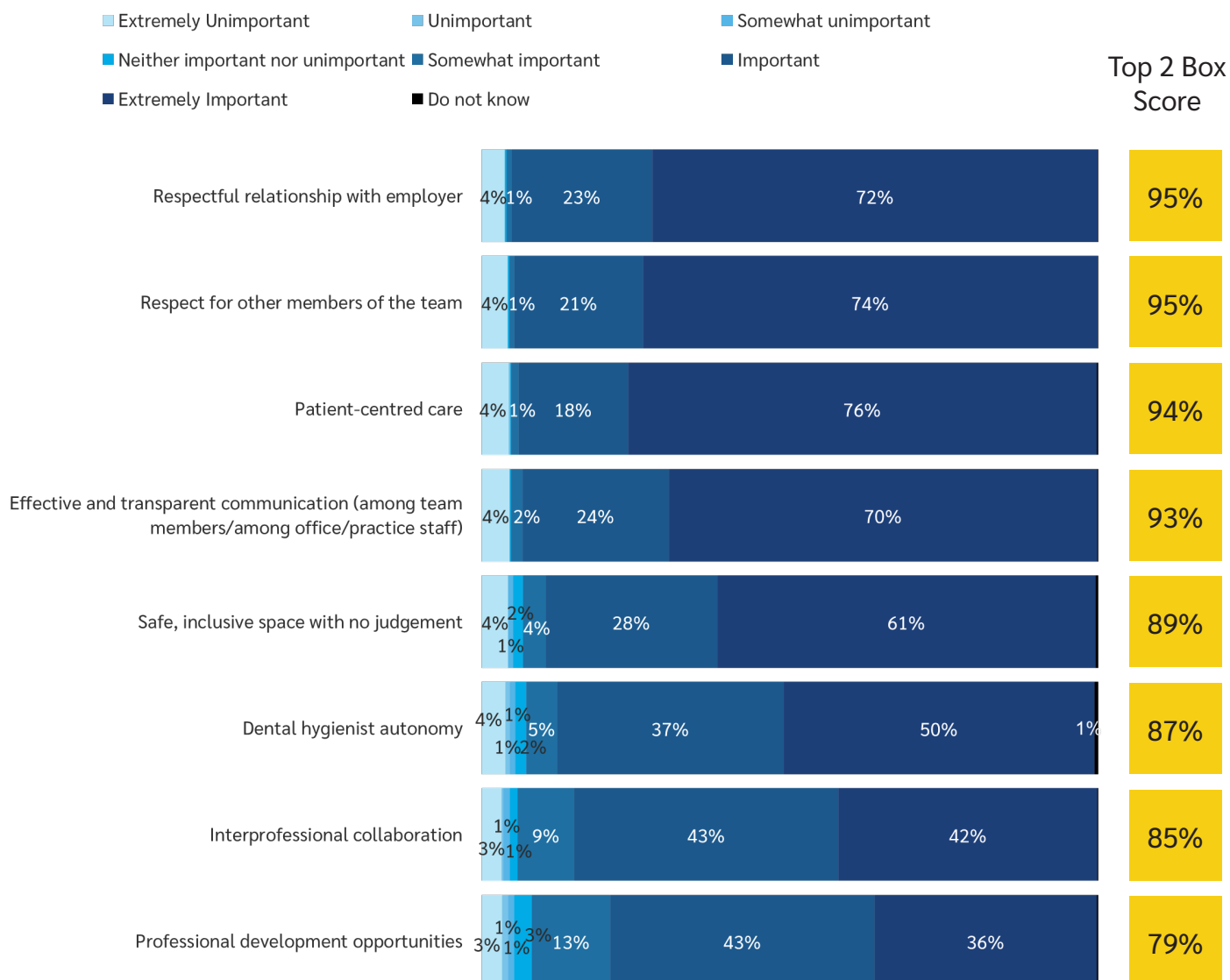
While most (79%) respondents felt that professional development opportunities are important, it was the least important element for a positive work environment.

Insights from the online bulletin board

Dental Hygienists expressed a desire to work in an environment where employers are respectful to their employees, acknowledge power dynamics, and trust the quality of work that they provide.

They also noted that the workplace should centre the needs of the client and provide enough time for patient care. Other ideal workplace environment factors included quality instrumentation, proper cleanliness, teamwork, and effective communication.

Fig 10. Important Elements for a Positive Workplace Environment (n=2,024)



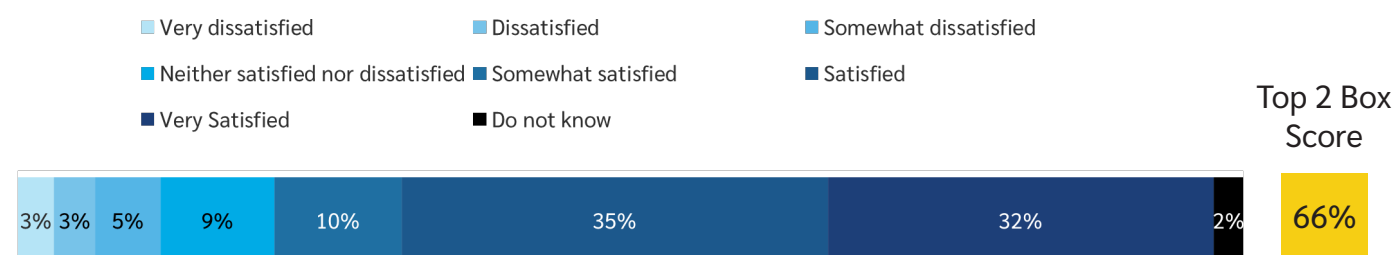
Workplace Harassment Zero-Tolerance Policies

Respondents were asked how satisfied they are with zero-tolerance policies for harassment at their workplace. Two-thirds (66%) were satisfied or extremely satisfied, while only 6% were dissatisfied or very dissatisfied. Respondents who have a disability reported lower satisfaction (50%, n=28) with zero-tolerance policies than their counterparts.

One-in-ten (11%) respondents were somewhat dissatisfied, dissatisfied or very dissatisfied with zero-tolerance policies in their workplace. When asked why they were dissatisfied, respondents most frequently noted that while there were zero-tolerance policies in place, they were not enforced.

Other frequently mentioned reasons include having little protection from harassment from managers or employers, that patient behaviour is not taken seriously, and that employers simply do not care about the zero-tolerance policy. Less frequently mentioned reasons include that employers do not take mental health into consideration, that there was no zero-tolerance policy in place, and that corporate employers did not care about enforcing zero-tolerance policies if it infringed on profits.

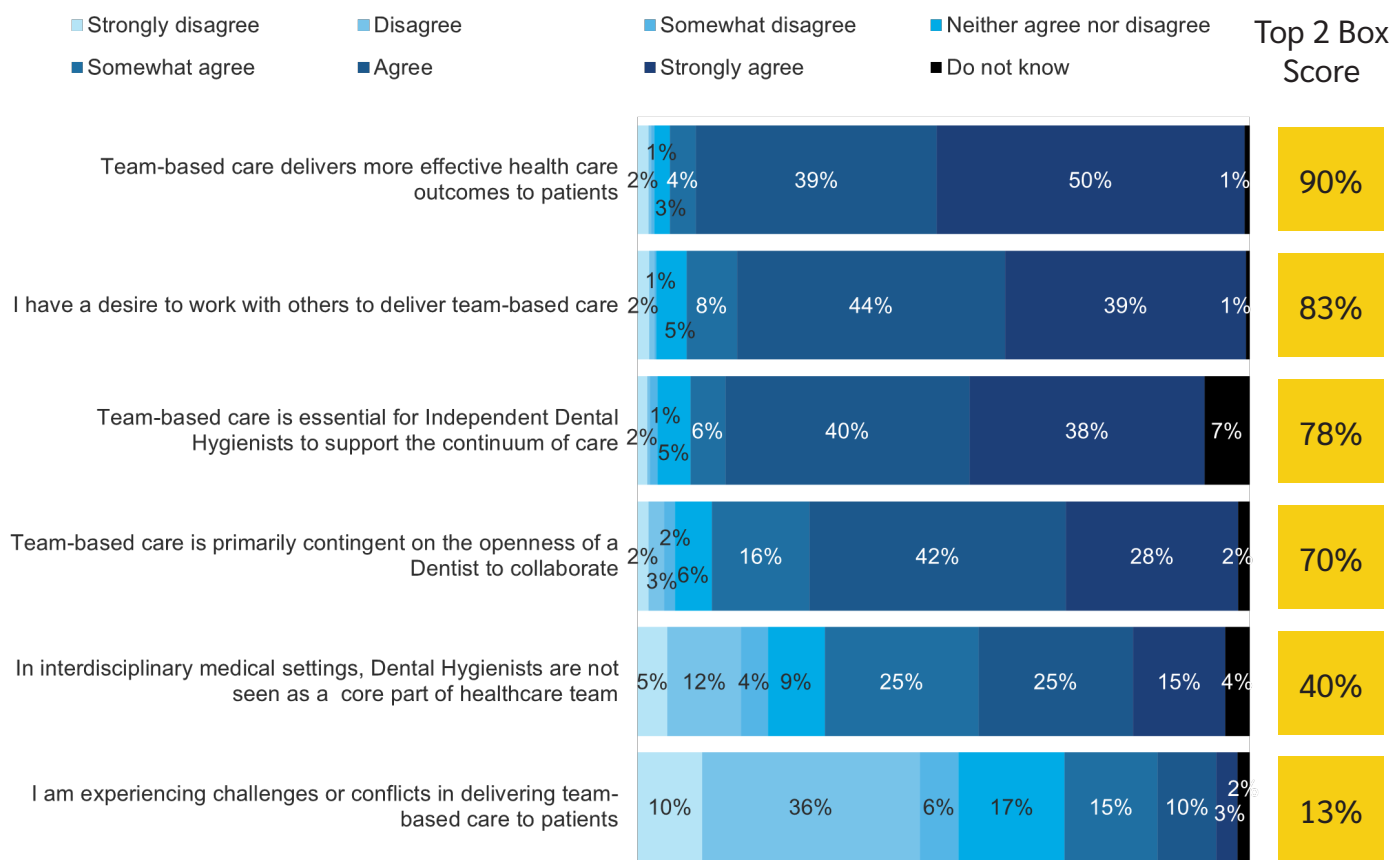
Fig 11. Satisfaction with Zero-Tolerance Policies for Harassment (n=1,863)



Interprofessional Collaboration

Overall, Dental Hygienists feel that team-based care is important and effective. Below are perspectives on interprofessional collaboration from respondents:

- Respondents largely agreed or strongly agreed (90%) that team-based care delivers effective care to patients.
- Over four-in-five (83%) agreed or strongly agreed that they had a desire to deliver team based care.
- Slightly fewer (78%) expressed that team-based care is important for independent Dental Hygienists to support continuum of care.
- Close to three-quarters (70%) perceived the ability to deliver team-based care is contingent on the willingness of a Dentist to collaborate.
- Two-in-five (40%) respondents felt that Dental Hygienists are not seen as a core part of the healthcare team.
- Only 13% of respondents reported experiencing challenges in delivering team-based care.

Fig 12. Experience with Inter-Professional Collaboration (n=1,956)

Diversity, Equity, Inclusion and Access

Perceptions on Indigenous-Specific Racism

Registrants were asked to share their agreement with the following statement: “Indigenous-specific racism is widely prevalent in dental hygiene care.”

A small percent (7%) of respondents agreed or strongly agreed that Indigenous specific racism is widely prevalent.

Over one-quarter (27%) of respondents stated they did not know, while two-fifths (40%) disagreed or strongly disagreed that Indigenous-specific racism was prevalent.

Respondents who identified with a marginalized identity were more likely to agree with the statement.

Insights from the online bulletin board

Those who did not know how to answer this statement often had not witnessed Indigenous racism in dental hygiene care. Those who disagreed thought that this was a problem of the past or the Dental Hygienists they worked with treated everyone the same regardless of ethnicity or race.

Some examples of Indigenous-specific racism offered by participants include stereotyping or assumptions about timeliness, lowered levels of respect, suggesting that Indigenous people “get over it”, comments about their ability to conduct self-care, and restrictive dental plans with the Indigenous Service Canada Non-Insured Health Benefit leading to lower levels of care.



Collective dental trauma...still impacts communities...up north and in south Ontario.

- Online Bulletin Board Participant



Fig 13. Belief that Indigenous-Specific Racism is Widely Prevalent in Dental Hygiene Care (n=1,854)

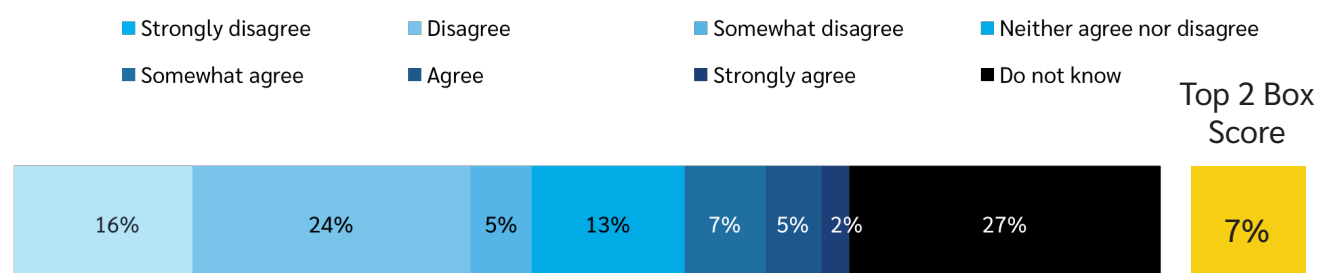


Table 1. Belief that Indigenous-Specific Racism is Widely Prevalent by Marginalized Groups

	Racialized minority	Person with a disability	Indigenous	LGBTQ2S+	None of the above	Prefer not to answer
Top-2 Box	14%	27%	24%	23%	6%	7%

Awareness of History of Indigenous Specific Racism in Ontario

Over half (54%) of respondents stated that they were either aware or very aware of Indigenous-specific racism in Ontario.

Awareness was not statistically different between respondents who practiced in urban, suburban and rural settings. However, individuals who work in public health settings (69%) and educational settings (68%) were more aware of the history of Indigenous-specific racism than those working in other settings.

The level of awareness of the history of Indigenous-specific racism that a respondent had also correlated with whether they agreed that Indigenous-specific racism is widely prevalent as shown in Table 2. This indicates that awareness may impact the ability to identify Indigenous-specific racism.

Insights from the online bulletin board

Participants in the online bulletin board expressed that there were many barriers preventing access to care. These include:

- Dental offices not accepting patients with NIHB, ODSP and Healthy Smiles social programs
- Lack of awareness on how to access social programs that fund dental care or lack of income
- Fear of judgement / feelings of shame / social anxiety regarding their current state of oral health
- Fear of stereotyping / discrimination
- Mobility issues for people with disabilities without family members
- Lack of knowledge of importance of dental care
- Collective historical traumas of Indigenous people causing lack of trust
- Some dentists and Dental Hygienists lack knowledge of certain cultures
- Long term care facilities may not have a care provider

Fig 14. Awareness of the History of Indigenous-Specific Racism in Ontario (n=1,881)

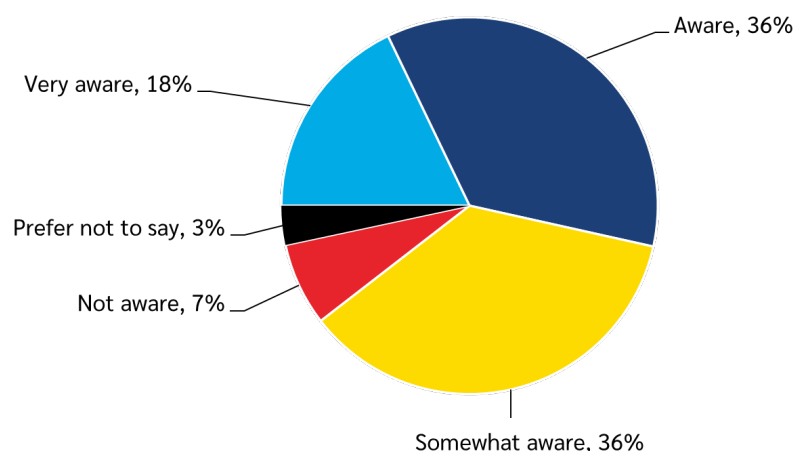


Table 2. Belief that Indigenous-Specific Racism is Widely Prevalent by Awareness of the History of Indigenous-Specific Racism in Ontario

	Very Aware	Aware	Somewhat Aware	Not Aware
Top-2 Box for Belief that Indigenous-Specific Racism is Widely Prevalent in Dental Hygiene Care	16%	7%	5%	2%

CDHO Supports for Culturally Safe Practice

When asked how CDHO could best support Registrants in providing culturally safe, equitable and respectful dental hygiene care, respondents preferred:

- Presentations/webinars (57%)
- Optional cultural safety and humility training through CE/CC credits (49%)
- A resource hub for equity and inclusion (42%)
- A unified standard on health equity and cultural safety (37%)
- A mandatory cultural competency course (14%)
- Another option not listed (3%)

Other needs include encouraging an advocacy strategy to reduce structural barriers for patients, stating that CDHO should not take any action on this topic, and ensuring education is Indigenous led.

Respondents were unaware of the history of Indigenous racism in Ontario were less likely to select multiple methods of support and showed less preference for optional cultural safety and humility training through CE/CC credits, a unified standard on health equity and cultural safety, or a resource hub for equity and inclusion.

Insights from the online bulletin board

Participants offered a variety of suggestions including the ones presented in figure 15. Other suggestions included: features in Milestones or other magazines of different cultures and identities, raising public awareness, allowing Dental Hygienists to treat patients based on patient's preference without penalizing it and administering surveys to marginalized groups.

Fig 15. Preferred Support for Providing Culturally Safe, Equitable and Respectful Dental Hygiene Care (n=1,883)



Experience with Discrimination

Dental Hygienists were less likely to report seeing or experiencing discrimination or stereotyping from their colleagues than from patients.

Over two-thirds (69%) of respondents did not witness discrimination or stereotyping from colleagues, while 57% did not witness discrimination or stereotyping from patients.

From Colleagues

From colleagues, respondents were most likely to report seeing bias based on profession (15%), ageism (13%), and racism (11%).

Other types of discrimination displayed by colleagues or employers include discrimination based on social assistance, socioeconomic status, disability, level of experience, vaccine status, appearance (ie. weight), LGBTQ2S+, religion, parental status, and position within the office.

Respondents who are not part of a marginalized community (racialized, disability, Indigenous, new to Canada, LGBTQ2S+) were less likely to experience or witness instances of discrimination or stereotyping from colleagues.

From Patients

From patients, respondents were most likely to witness racism (21%), anti-immigrant bias (16%) and bias based on profession (16%).

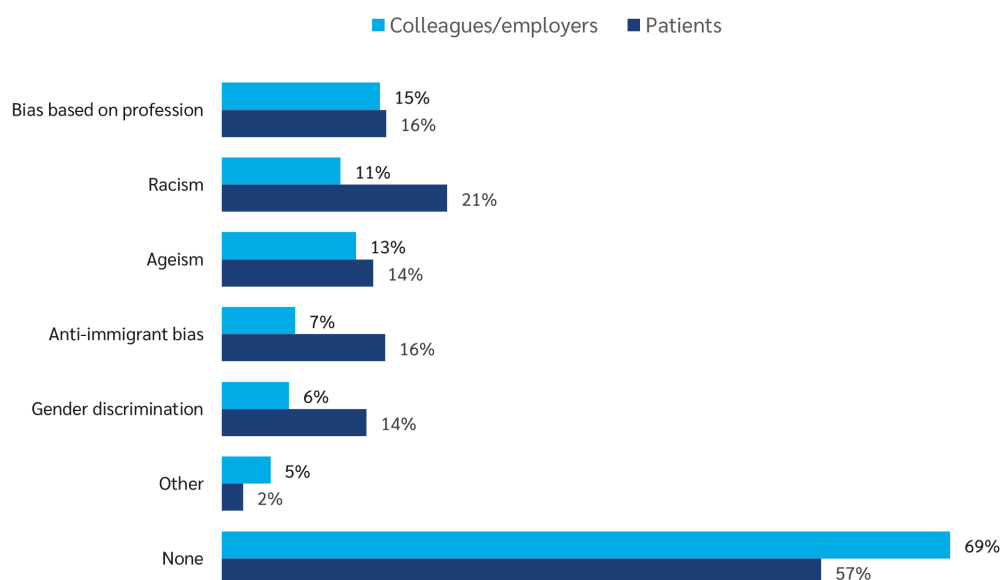
Other types of discrimination displayed by patients include discrimination based on COVID-19 beliefs or vaccination status, race, language, level of experience, LGBTQ2S+ and sexual harassment.

Dental Hygienists who work in rural settings reported higher levels of ageism and bias based on profession from patients.

Insights from the online bulletin board

Participants expressed witnessing or receiving discrimination from both patients and colleagues/employers. Among employers, many Dental Hygienists expressed that due to power imbalances and the fear of being fired, they felt uncomfortable in speaking up when experiencing or witnessing discrimination, stereotyping, or harassment.

Fig 16. Experiences or Observations of Discrimination or Stereotyping in the Past Two Years (n=1,875)



Practice Standards Implementation

Challenging Practice Standards to Implement

While over half (54%) of respondents did not report experiencing challenges with implementing practice standards, they reported the most challenges with Practice Management (17%), Practice Environment (14%), Continuing Competence (12%), and Professional Relationships (11%).

Years of experience has an inverse relationship with the challenges faced in implementing standards. Hygienists with over 25 years of experience were more likely to report not experiencing any challenges (64%). In comparison, Hygienists with less than 10 years of experience faced more challenges with Continuing Competence (21%), Professional Relationships (14%) and Dental Hygiene Services and Programs (10%).

Fig 17. Challenging Practice Standards to Implement (n=1,719)



Challenges with Implementing Standards

When asked why they faced challenges in implementing these practice standards, two-thirds (69%) explained that they faced time constraints. Other explanations include:

- Lack of decision-making control (41%)
- Workplace culture (41%)
- Instrumentation/tools (32%)
- Collaboration with other oral health professionals (26%)
- Transitioning from knowledge to practical implementation (20%)

Fig 18. Reasons Why Practice Standards are Challenging (n=727)



Current Challenges Facing the Profession

Respondents were asked to provide their perspectives on current challenges facing the dental hygiene profession:

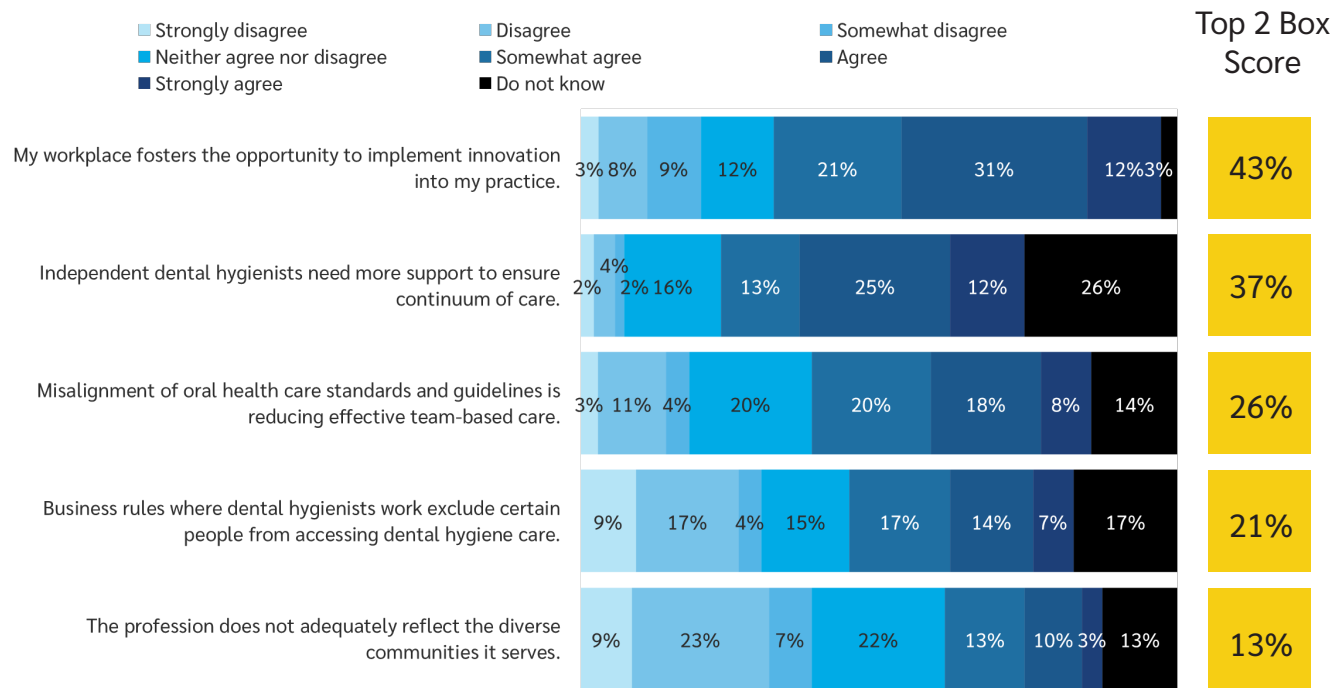
- Two-fifths (42%) of respondents agreed or strongly agreed that their workplace offered them the opportunity to integrate innovation into their practice while, 11% disagreed or strongly disagreed.
- Close to two-in-five (37%) believe that independent Dental Hygienists need more support to ensure continuum of care. Just under half (45%) of independent Dental Hygienists agreed or strongly agreed with this sentiment.
- One-quarter (26%) thought that there is a misalignment of oral health care standards and guidelines which reduces effective team-based care.
- One-fifth (21%) perceive business rules where Dental Hygienists work exclude certain people from accessing dental hygiene care. Dental Hygienists who work in an employer-owned private practice were more likely to agree with this statement (31%).
- Just 13% of respondents strongly agreed that the profession does not adequately reflect the diverse communities it serves. Those working in public health settings (24%), educational settings (22%) and those who are racialized minorities (24%) agreed more with this statement.

Insights from the online bulletin board

Participants in the online bulletin board were very interested in incorporating innovation into their practice. Technologies mentioned by multiple participants included Guided Biofilm Therapy, Digital Scanners, Laser Therapy, Intra Oral Cameras, and Ultrasonic Instrumentation.

Many suggested that innovation would improve Dental Hygienists' technical abilities and improve adherence to Assessment, Diagnosis, Planning, Implementation, and Evaluation (ADPIE).

Fig 19. Challenges Facing the Dental Hygiene Profession (n=1,811)



Scope of Practice Considerations

Over four-fifths (84%) of Dental Hygienists show support for legislation mandating oral health care in long-term care settings. A similar proportion (82%) support expanding scope of practice to include prescribing radiographs.

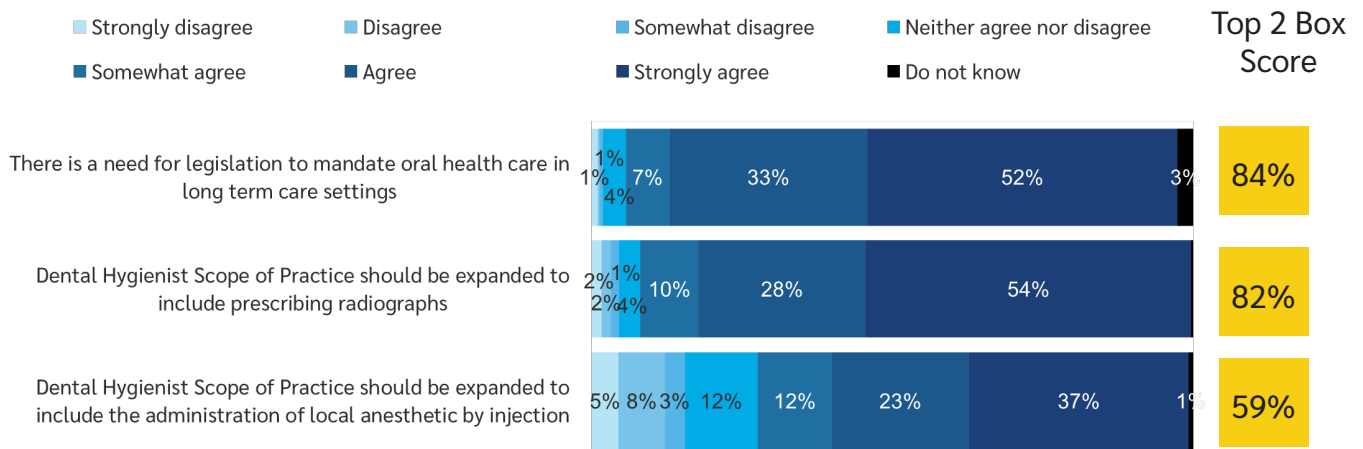
Fewer (59%) show support for increasing scope of practice to include the administration of local anesthesia.

While agreement for all statements was similar among independent Dental Hygienists and those in another setting, Dental Hygienists with more than 25 years of experience were less likely to support expanding scope of practice to include the administration of local anesthetic by injection.

Insights from the online bulletin board

Participants of the online bulletin board overwhelmingly supported the prospect of allowing Dental Hygienists to prescribe radiographs. Many suggested that they already had the knowledge and experience to include this into their scope of practice. Some noted that it would be specifically beneficial to independent Dental Hygienists. Others highlighted the importance of creating guidelines to ensure proper protection for clients.

Fig 20. Issues in Scope of Practice (n=1,771)

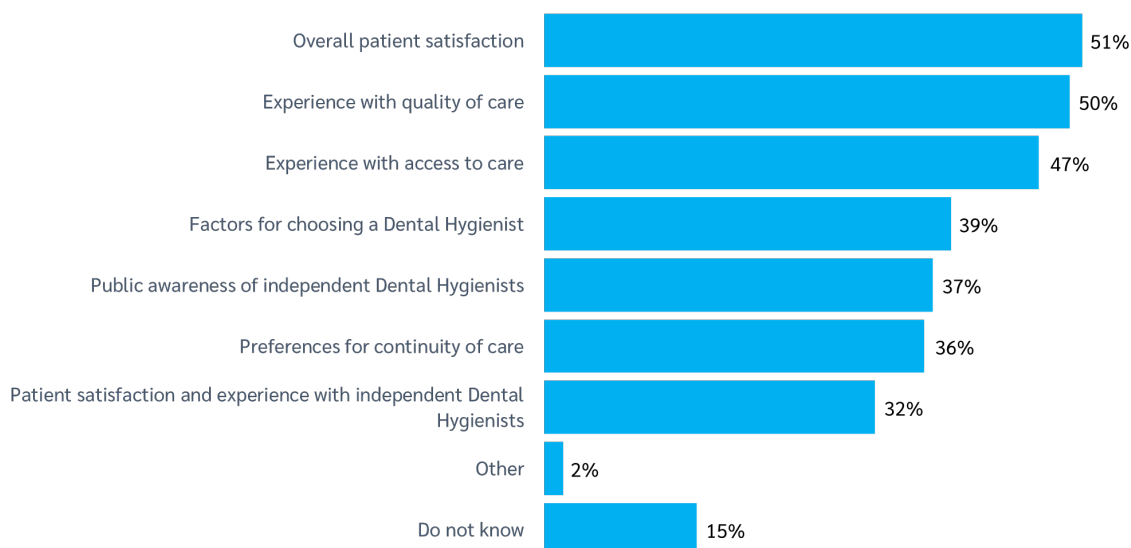


Information from VoP Program

When asked what they would like to learn more about from the CDHO annual Voice of the Dental Hygiene Patient Program, respondents were most interested in overall patient satisfaction (51%), experience with quality of care (50%), and experience with access to care (47%).

Respondents also had some interest in learning more about factors for choosing a Dental Hygienist (39%), public awareness of independent Dental Hygienists (37%), preferences for continuum of care (36%), and patient satisfaction and experience with independent Dental Hygienists.

Fig 21. Information about Patient Care (n=1,763)



Perception of Effectiveness in Meeting Mandate

Overall, over half (51%) of respondents believe that CDHO is effective in carrying out its public protection mandate.

Dental Hygienists have the most confidence in CDHO's ability to establish clinical and ethical standards of practice for Dental Hygienists (71%) and ensuring all who enter the profession are qualified (68%).

Dental Hygienists are less confident in the effectiveness of CDHO to maintain competence throughout a Dental Hygienists career (54%) and investigating complaints (49%). However many were unsure of what level of agreement to provide for investigating complaints as over on-quarter (27%) selected do not know. This is likely due to a lack of experience with the complaint system.

Registrants are less confident in the effectiveness of CDHO than patients. Data from the 2022 VoP survey shows that patients believe that CDHO is more effective in every category with percentage point differences ranging from 6% for ensuring all who enter are qualified to 19% for ensuring Dental Hygienists maintain competence throughout their career.

Fig 22. Confidence in the CDHO (n=1,763)

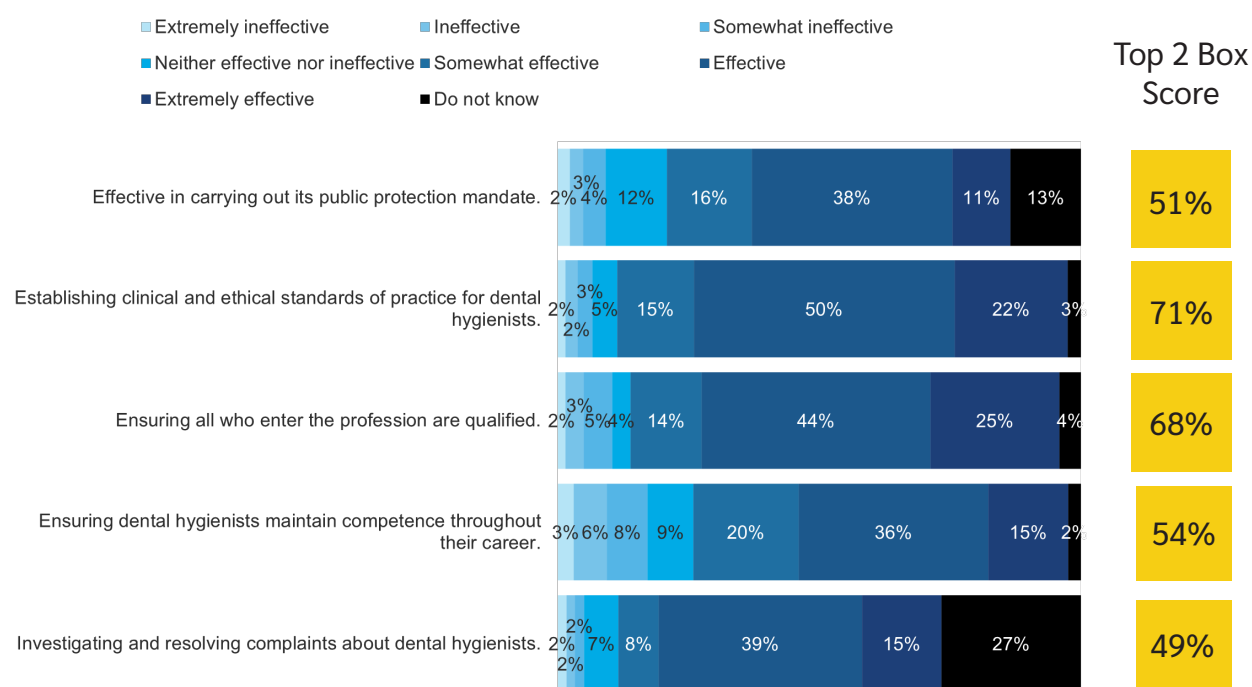


Table 3. Perception of Effectiveness of CDHO by Patients and Registrants

Top-2 Box	Patients	Registrants
Effective in carrying out its public protection mandate	68%	51%
Ensuring all who enter the profession are qualified.	77%	71%
Establishing clinical and ethical stand-ards of practice for Dental Hygienists.	76%	68%
Ensuring Dental Hygienists maintain competence throughout their career.	73%	54%
Investigating and resolving complaints about Dental Hygienists	64%	49%

Key Considerations

Based on evidence gathered from the qualitative and survey research conducted with Registrants, CDHO might want to consider any of the following recommended considerations:



Develop strategies to increase Dental Hygienist confidence in the effectiveness of CDHO to maintain competence throughout an their career and investigating complaints. The plans to reform the quality assurance program and the complaints process feedback program are steps CDHO have already taken to shore up these areas.



Support Registrants through their journey of awareness of Indigenous-specific racism, enabling them to deliver culturally safe, equitable, and respectful care through a mix of preferred supports to include presentations and webinars, optional training, a resource hub and a new practice standard.



Continue to support registered Dental Hygienists in the application of effective team-based care through review of common practice standards and guidelines by oral health professionals to increase their alignment in support of patient-centred care.



Explore opportunities to support Registrants with less than 10 years of experience with the Continuing Competence, Professional Relationships, and Dental Hygiene Services and Programs practice standards.



While experience with the registration renewal process is positive among Registrants, explore the reasons why newer Registrants find the renewal process difficult and address those challenges to shore up overall experience levels.



While the annual VoP survey already collects data that Registrants are most interested in on satisfaction and experiences with access and quality of care, future survey iterations should consider including other desired data including public awareness and patient experience with independent Dental Hygienists, and preferences for continuum of care.



CDHO

COLLEGE OF DENTAL
HYGIENISTS OF ONTARIO

A photograph of a dental clinic. In the foreground, a patient is lying back in a dental chair, wearing a blue protective bib. A dental hygienist, wearing a black mask, safety glasses, and gloves, is adjusting a large white dental operating light. The background shows various dental equipment and a clean, clinical environment.

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THE GOVERNANCE COACH'S ADVISORY

CDHO Council

Coaching Advisory – September 2023

Meeting Date	09/22	12/22	01/23	03/23	06/23	09/23
Ownership	✓	✓	✓	✓	✓	✓
Governance Position	✓	✓	✓	✓	✓	✓
Council Holism	✓	✓	✓	✓	✓	✓
Ends Policies	○	○	○	○	✓	○
Council Means Policies	●	✓	✓	✓	✓	✓
Executive Limitations Policies	○	✓	✓	✓	✓	○
Policy Sizes	✗	○	○	○	○	✓
Delegation to Management	✓	✗	✓	✓	✓	✓
Any Reasonable Interpretation	●	○	○	●	●	●
Monitoring	●	●	○	●	●	●

Key:

- No activity this meeting on which to assess model consistency
- ✓ Model consistent, based on minutes of this meeting
- Not contravening principle, but opportunity for improvement
- ✗ Not consistent with principle

College of Dental Hygienists of Ontario Council September 22, 2023

Ownership

Policy Governance® Principle: The Council governs on behalf of the government to whom it has a legal accountability and the people who access dental hygienists in Ontario – to whom it has moral accountability its “moral owners.” The Council has an obligation to be the informed voice of the owners. The Council provides leadership by first serving, seeking to put the interests of the owners ahead of any personal interests Council Members may have.

The Governance Committee is currently reviewing the data collected by Pivotal Research that focused on “the point of view of the patient’s experience at the dental office”. Important in this review is discerning what is ‘client’ feedback relevant to staff, and ‘owner’ feedback relevant to Council.

Governance Position

Policy Governance® Principle: The Council forms the middle link in a chain of moral authority between the owners and the Registrar. The Council’s role is to set direction for the organization on behalf of the owners, and properly empower the Registrar to manage. The Council is accountable for its own work and how it does that work. The Council is also accountable for what it has delegated to the Registrar. All authority in the staff organization and in Council committees and Officers flows from the Council.

There are no issues with this principle.

Council Holism

Policy Governance® Principle: The Council has authority only as a group. Individual Council Members do not have any authority. Committees do not have any authority other than that specifically authorized by the Council. When the Council speaks with authority it has only one voice.

There continues to be no issues with this principle.

Ends Policies

Policy Governance® Principle: The Council defines in writing policies which describe the outcomes or effects that the organization is to produce, the recipients of those outcomes, and what it is worth to produce them. These are Ends policies. All decisions that are *not* about outcomes, recipients, or worth are means decisions.

There were no agenda items related to Ends policies in the September meeting.

Council Means Policies

Policy Governance® Principle: The Council defines in writing the job results, practices, and discipline that make up its own job. These policies are about the Council’s means. To distinguish them from the means used by the staff, they are called Governance Process policies. The Council

also defines in writing the details of how it will delegate to and hold the Registrar accountable. These means policies are called Council – Registrar Delegation policies.

Council is continuing to be proactive in its work to demonstrate accountability by ensuring that orientation of new Council members enables them to immediately contribute and avoid unnecessary conflict. Enhancing the mentor process will definitely contribute to this. I recall that the mentoring process was somewhat inconsistent in past years, so I applaud Council's efforts in this important work.

Executive Limitations Policies

Policy Governance® Principle: The Council makes decisions about the means of the operational organization. However, rather than prescribing Council-chosen means -- which would enable the Registrar to escape accountability for attaining Ends, these policies define limits on operational means, thereby placing boundaries on the authority granted to the Registrar. These means would be unacceptable because they are unlawful, imprudent, or unethical, even if they worked to achieve Ends. Written policies describing these limits are called Executive Limitations.

You continue to be diligent and proactive in policy content review. Good job!

Policy Sizes

Policy Governance® Principle: Council policies in every category are developed one level at a time, from the broadest, most inclusive level to succeeding levels of detail. Each level of detail added further limits the range of interpretation that is delegated. The policies in Ends, Governance Process, Council – Registrar Delegation, and Executive Limitations categories are comprehensive, and there are no Council policies outside of these four categories. They replace, at the Council level, more traditional documents such as mission statements, strategic plans and budgets.

There are no issues with this principle.

Clarity and Coherence of Delegation

Policy Governance® Principle: The Council delegates operational matters only to the CEO. The Council does not delegate to anyone who reports to the CEO. The Council does not give Council officers or committees jobs that interfere with, duplicate, or obscure the job given to the Registrar. The Registrar is accountable to the Council for everything that happens in the operations of the organization.

There are no issues with this principle.

Any Reasonable Interpretation

Policy Governance® Principle: The Registrar is given the right to make more detailed decisions about Ends and operational means, using any reasonable interpretation of Ends and Executive Limitations policies. (If there is no Registrar, the Council must delegate to two or more individuals, avoiding overlapping expectations or causing confusion about the authority of various managers.) The Council President is given the right to use any reasonable interpretation of Governance Process and Council – Registrar Delegation policies unless the Council has explicitly given that right to another Council member or Council Committee.

There are no issues with this principle.

Monitoring

Policy Governance® Principle: The Council monitors the performance of the organization by fairly, systematically, and thoroughly assessing whether the Registrar has made a reasonable

interpretation of the policies it has delegated to the Registrar (Ends and Executive Limitations) and provided data demonstrating accomplishment of that interpretation. The Registrar's evaluation is simply the cumulative summary of these assessments.

Rigorous monitoring is one of three essential capabilities for a board seeking to ensure its policies are comprehensive and empowering. It requires developing the skills of writing monitoring reports and assessing them.

The other two capabilities necessary to achieving comprehensive and empowering policies are unambiguous expectations (having policies that comprehensively address every aspect of the organization) and optimal delegation (unleashing management creativity and nimbleness by specifying expected results and limits of management authority). If this way of describing board roles seems familiar, it is because Policy Governance is tool that enables a board to develop these capabilities necessary for effective board performance.

External Monitor Report

A small point related to the External Monitoring report on Treatment of Staff prepared by Steineke Macuire LeBlanc Barristers & Solicitors which stated that *"the Registrar/CEO is required to report on compliance with this Policy every three years"*. Actually, the Council's monitoring schedule calls for an external monitoring report every three years and for the Registrar/CEO to submit an internal monitoring report in the intervening two years.

Celebrate Your Progress

Council continues to be disciplined in monitoring its own performance and seeking ways to continue to be more effective.

Monitoring reports also illustrate continuing improvement. Keep up the great work.

Your meeting documents and minutes are a very enjoyable read. (P.S. I love the new visual look.)

Keep Getting Better (One area we recommend you address as soon as possible)

Pay attention to interpretations and ensure that evidence is not simply a further description of the criteria for compliance.

SUMMARY OF SUGGESTIONS FOR FURTHER ACTION

	Action Item	Coaching Report meeting date	Decision re Action	Date Action Completed
	General			
	Linkage			
1	Proceed with planning and implementing ownership linkage activities.	March 2022		
	Council-Management Delegation			
	Ends			
1	Prepare a plan of specific activities intentionally leading to a full review of Ends policies.	March 2022		
	EL Policies			
	Finances			
	GP Policies			
1	Describe the end products of a committee's work rather than its activities. Ensure the committee is acting as servant to the board.			
2	Reconcile the difference between the statement about moral owners in the OLC report and the global Governance Process policy	June 2023		
	Agenda, Minutes and Meetings			
1	Consider separate agenda items for Consent Agenda and Incidental Information	March 2022		
2	Ensure that motions amending policies state precisely the change that the Council has approved.	September 2022		
3	Approve the budget as part of the Required Approvals Agenda with prior assessment of special monitoring of pertinent policy items.			
	Monitoring			
1	Ensure that an interpretation identifies the rationale for both the measure/standard of measurement in the interpretation.	June 2022 March 2023		
2	Minimize narrative content. Limit the monitoring report to the essentials required by an interpretation or evidence.	March 2023 June 2023 September 2023		

	Make “nice to know” information which is not essential to the interpretation or evidence or visually distinct from the monitoring content.	September 2023		
	Completed – to be removed from next list			

Briefing Note

To: Council

From: Chair

Date: December 1, 2023

Topic: Policy Content Review: EL-2, EL-5, EL-10, and EL-11

No changes proposed. Council will review and discuss if any changes should be made to the EL-2, EL-5, EL-10 and EL-11 policies.

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-5 PROTECTION OF ASSETS

The Registrar/CEO shall not allow assets to be unprotected, inadequately maintained or unnecessarily risked.

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

1. Permit the organization to be without adequate insurance against theft and damage losses.
2. Permit the Council members, staff and individuals engaged in activities on behalf of the organization, or the organization itself to be without adequate liability insurance.
3. Unnecessarily expose the organization, its Council members or staff to claims of liability.
4. Allow uninsured personnel or unauthorized persons access to material amounts of funds.
5. Receive, process or disburse funds under controls that are insufficient to meet the Council-appointed auditor's standards.
 - 5.1. Receive, process or disburse the organization's assets under internal controls insufficient to detect, deter and prevent fraud or insufficient to prevent and detect significant deficiencies or material weaknesses.
6. Cause or allow buildings and equipment to be subjected to improper wear and tear or insufficient maintenance.
7. Allow the organization to be without a disaster plan and fire safety policies, which are readily available to all staff, and reviewed at least annually with all staff.
8. Make purchases that do not result in appropriate level of quality, after- purchase service and value for dollar, or do not provide opportunity for fair competition.
 - 8.1. Make any purchase wherein normally prudent protection has not been given against conflict of interest.
 - 8.2. Make a purchase of budgeted services over \$50,000 or purchase of budgeted goods over \$25,000 without a stringent method of assuring the balance of long term quality and cost and protection of confidential and proprietary vendor information. Orders shall not be split to avoid these criteria.
 - 8.2.1. Renew a supply or service contract in place for three consecutive years without first obtaining a comparative review of quality and cost.
9. Compromise the independence of the Council's audit or other external monitoring or advice.
 - 9.1. Engage parties already chosen by the Council as consultants or advisers.
10. Allow intellectual property, information and files to be exposed to loss or significant damage.

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11. Public Image

- 11.1. Endanger the College's public image, credibility, or its ability to accomplish Ends.
- 11.2. Develop or continue collaborative relationships with, or authorize use of the College name or identity by organizations whose principles or practices are incompatible with achievement of the Council's Ends.
 - 11.2.1. Allow relationships with stakeholders that are inconsistent with the productive cooperation necessary to the achievement of Council's Ends.
- 11.3. Permit inconsistent, disrespectful or untimely response to stakeholder concerns.
 - 11.3.1. Publish material or information that endangers the College's credibility or public image.

12. Change the College's name or substantially alter its corporate identity.

EL-10 DEVELOPMENT OF STANDARDS GOVERNING PRACTICE

The Registrar/CEO shall not develop or change standards governing the practice of Dental Hygiene that cannot be adequately defended, or are inconsistent with the legislated mandate of the organization.

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

1. Require a decision of Council without at the same time providing evidence that the proposed change(s) meets the following criteria reasonably interpreted:
 - Develop standards that are inconsistent with evidence-based practices.
 - Develop standards without a broad scope of stakeholder consultation.
 - Develop standards that would interfere with the ability of the profession to work with other professions with which it is important to maintain productive relations, unless it is necessary to protect public interest.
 - Let Council be unaware of issues arising from stakeholder consultation on a proposed change of standards.
2. Release new or amended standards prior to Council's formal approval on the Required Approvals Agenda.

EL-11 AMENDMENTS TO ACT OR BYLAWS

When preparing options for Council's decisions regarding Regulations under the Act regulating Dental Hygiene, or Council Bylaws, the Registrar/CEO shall not interfere with the Council's legislated responsibilities.

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

1. Develop Bylaws, or propose amendments to the Act or Regulations prior to involving Council in an initial discussion of options, nor develop amendments that are inconsistent with the direction indicated by Council.
2. Allow Council to be without appropriate legal advice where required.
3. Develop content inconsistent with any legislated requirement.
4. Let Council be unaware if there are any changes in the assumptions under which the initial position was developed, or if there are legal or governmental obstacles to proceeding with that position.
5. Allow Council to be without a current cumulative record of Council decisions regarding positions during development or amendment of the Act, Regulations, or Bylaws.
6. Submit the final version of proposed amendments to Acts or Regulations to the government, nor proposed amendments to Bylaws to membership, prior to Council approval.

Briefing Note

To: Council

From: Chair

Date: December 1, 2023

Topic: Policy Content Review: GP-7 and GP- 8

No changes proposed. Council will review and discuss if any changes should be made to the GP-7 or GP-8 policies.

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 may be adjusted to reflect significant changes in the Cost of Living index. As per December 2, 2022, per diem rates are set as follows:
 - Member of Council or Committee \$308.00
 - Chair of Committee + 25%
 - President of Council + 40%
 - Vice-President of Council + 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 President and Vice-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.
 - 4.4. For ad hoc meetings with the CEO, Council members, or other stakeholders, the President or their designate will receive honoraria at an hourly rate of \$72, rounded up

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to the hour. If more than one meeting is held on the same day, the President or their designate 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 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

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- 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 15th.

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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 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 President's decision will be at her/his/their discretion.

GP-8 CODE OF CONDUCT

Council Members shall conduct themselves in accordance with the bylaws.

Suggested Motion – Friday, December 1, 2023

16.0 MOTION TO MOVE IN CAMERA

MOTION: **THAT** Council move in Camera as per RHPA, Schedule 2, Section 7(2)(d) at ____:____ p.m., for agenda items 16.1–16.4.

Moved:

Seconded:

VOTE:

Suggested Motion – Friday, December 1, 2023

16.0 MONITORING CEO PERFORMANCE

16.1 General Executive Constraint

MOTION 1: **THAT** Council has assessed the monitoring report for General Executive Constraint and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for General Executive Constraint and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for General Executive Constraint and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:

Seconded:

VOTE:

16.2 EL-3

MOTION 1: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 3 and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 3 and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 3 and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:

Seconded:

VOTE:

16.3 EL- 4(1)

MOTION

MOTION 1: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 4(1) and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 4(1) and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 4(1) and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:

Seconded:

VOTE:

16.4 EL- 8

MOTION 1: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 8 and determined there is sufficient, verifiable evidence of a reasonable interpretation; OR

MOTION 2: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 8 and determined that the interpretation is reasonable but there is insufficient verifiable evidence and has asked for a new monitoring report by [date]; OR

MOTION 3: **THAT** Council has assessed the monitoring report for Executive Limitations Policy 8 and determined that the interpretation is not reasonable and has asked for a new monitoring report by [date].

Moved:

Seconded:

VOTE:

Suggested Motion – Friday, December 1, 2023

16.0 MOTION TO MOVE OUT OF CAMERA

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

Moved:

Seconded:

VOTE:

Suggested Motion – Friday, December 1, 2023

19.0 ADJOURNMENT

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

Moved:

Seconded:

VOTE: