CDHO

COLLEGE OF DENTAL
HYGIENISTS OF ONTARIO

Policy Manual

TABLE OF CONTENTS

ENDS POLICIES 3

GLOBAL END 3

EXECUTIVE LIMITATIONS POLICIES 4

GENERAL EXECUTIVE CONSTRAINT 4

EL-1 TREATMENT OF PUBLIC AND REGISTRANTS 5

EL-2 TREATMENT OF STAFF 6

EL-3 PLANNING 7

EL-4 FINANCIAL CONDITIONS AND ACTIVITIES 8

EL-5 PROTECTION OF ASSETS 9

EL-6 INVESTMENT 11

EL-7 COMPENSATION AND BENEFITS 12

EL-8 COMMUNICATION AND SUPPORT TO COUNCIL 13

EL-9 ETHICAL BEHAVIOUR 14

EL-10 DEVELOPMENT OF STANDARDS GOVERNING PRACTICE 15

EL-11 AMENDMENTS TO ACT OR BYLAWS 16

COUNCIL-REGISTRAR/CEO DELEGATION 17

CRD-1 UNITY OF CONTROL 17

CRD-2 ACCOUNTABILITY OF THE REGISTRAR/CEO 17

CRD-3 DELEGATION TO THE REGISTRAR/CEO 17

CRD-4 MONITORING REGISTRAR/CEO PERFORMANCE 18

CRD-5 REGISTRAR/CEO COMPENSATION 21

CRD-6 REGISTRAR/CEO SUCCESSION 21

CRD-7 REGISTRAR/CEO TERMINATION 23

GLOBAL GOVERNANCE PROCESS 24

GP-1 GOVERNING STYLE 25

GP-2 COUNCIL JOB CONTRIBUTIONS 26

GP-3 COUNCIL PLANNING CYCLE AND AGENDA CONTROL 27

GP-4 COUNCIL CHAIR'S ROLE 29

GP-5 VICE-CHAIR'S ROLE 30

GP-6 COUNCIL COMMITTEE PRINCIPLES 30

GP-6.1 EXECUTIVE COMMITTEE TERMS OF REFERENCE 31

GP-6.2 REGISTRAR/CEO TRANSITION COMMITTEE TERMS OF REFERENCE 33

GP-6.3 CONDUCT COMMITTEE TERMS OF REFERENCE 35

GP-6.4 GOVERNANCE COMMITTEE TERMS OF REFERENCE 36

GP-7 COUNCIL AND COMMITTEE STIPEND AND EXPENSES 38

GP-8 CODE OF CONDUCT 41

GP-9 INVESTMENT IN GOVERNANCE 41
GP-10 GOVERNANCE SUCCESSION PLANNING 44
GP-11 COUNCIL LINKAGE WITH OWNERS 45
GP-12 SPECIAL RULES OF ORDER 46
GP-13 IN-CAMERA SESSIONS 47
GP-14 REQUESTS FOR DEPUTATIONS TO COUNCIL 48

ENDS POLICIES

GLOBAL END

The College of Dental Hygienists of Ontario (CDHO) exists so that people who access dental hygienists in Ontario receive safe, ethical, quality dental hygiene services where the worth of results justifies expenditure of available resources.

1. Dental hygienists provide safe, effective care consistent with current standards of practice.
    1.1. Dental hygiene practice reflects the evolving needs of the public and supports access to care.
    1.2. Registered dental hygienists actively participate in continuous quality improvement that aligns with the current scope of practice.
    1.3. Registered dental hygienists demonstrate professional judgment in their practice.
    1.4. Dental hygienists engage with their clients for optimal oral health outcomes and client-centered care.
2. Dental hygienists engage other professionals to achieve optimal health outcomes for Ontarians.
3. Decision makers have evidence-informed and actionable information, particularly in the areas of dental hygiene practice, regulating the practice of dental hygiene and access to essential oral health services in Ontario.
4. The public has access to information about the benefits of regulated dental hygiene practice, the role of the CDHO, and the CDHO's regulatory processes.

EXECUTIVE LIMITATIONS POLICIES

GENERAL EXECUTIVE CONSTRAINT

The Registrar/CEO shall not cause or allow any organizational practice, activity, decision or circumstance which is either unlawful, imprudent, or in violation of commonly accepted business and professional ethics.

EL-1 TREATMENT OF PUBLIC AND REGISTRANTS

The Registrar/CEO shall not cause or allow conditions, procedures or decisions related to the public, registrants, or those applying to be registrants, that are unsafe, disrespectful, or unnecessarily intrusive, or that are inconsistent with enforcement and application of the *Regulated Health Professions Act* and Code, the *Dental Hygiene Act*, Regulations under the Act, and any further Council interpretation of the Act in its Bylaws or Policies.

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

1. Permit the public and registrants to be without easy access to clear information about the requirements and responsibilities of registrants.
2. Permit violation of public or registrant confidentiality and privacy, except where specific disclosure is required by legislation.
    2.1. Use forms or procedures that elicit information for which there is no clear necessity.
    2.2. Use methods of collecting, reviewing, storing or transmitting applicant, public or registrant information that inadequately protect against improper access to the information elicited.
3. Permit unfair, inconsistent, disrespectful, or untimely response to individual or group comments or complaints.
4. Allow registrants to be without easily accessible, understandable information regarding what may be expected and what may not be expected from the services, standards and guidelines offered.
5. Allow the organization to be without all Statutory Committees required in legislation or permit those Committees to operate inconsistently with requirements of the legislation and the organization's bylaws.
6. Apply the legislation in a manner inconsistent with due process and the duty of procedural fairness.
7. Allow registrants to be without a process for effectively handling appeals.
    7.1. Allow registrants to be unaware of the process for registering an appeal.

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-3 PLANNING

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

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

1. Operate without a documented, multi-year strategy.

    1.1. Permit planning that does not explain and justify assumptions and identify relevant environmental factors.

2. Permit budgeting for any fiscal period or part of any fiscal period that is not derived from the multi-year strategy.

3. Permit budgeting that does not provide for the incremental cost of implementing the multi-year strategy.

    3.1. Project revenue from fees on any basis other than current Council- authorized fees.

4. Permit budgeting that does not maintain, or provide for an amount to increase, reserves to the Council-approved target level unless approved by the Council.

5. Permit budgeting that projects a year-end operating deficit unless approved by the Council.

6. Permit financial planning that risks incurring any situation or condition described as unacceptable in the "Financial Condition and Activities" policy.

7. Permit financial planning that does not provide the amount determined annually by the Council for the Council's direct use during the year, such as costs of fiscal audit, Council development, Council and Council committee meetings, Council legal fees, and ownership linkage.

8. Permit planning that endangers the fiscal soundness of future years or ignores the building of organizational capability sufficient to achieve strategic priorities in future years.

    8.1. Operate without succession plans to facilitate smooth operations during key personnel transitions and ensure competent operation of the organization over the long term.

    8.2. Permit the organization to be without sufficient organizational capacity and current information about Registrar/CEO and Council issues and processes for the competent operation of the organization to continue in the event of sudden loss of Registrar/CEO services.

EL-4 FINANCIAL CONDITIONS AND ACTIVITIES

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

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

1. Expend more funds than have been received in the fiscal year to date unless the debt guideline below is met.

    1.1. Allow debt to be incurred for anything other than trade payables or reasonable liabilities incurred in the ordinary course of operations.

2. Borrow funds from any financial institution.

3. Loan CDHO funds.

4. Use any long-term reserves.

5. Allow cash accounts to drop below a safety reserve equal in value to nine months' operating expenses invested in liquid assets.

6. Allow the untimely payment of payroll and debts.

7. Write off receivables without having first aggressively pursued payment after a reasonable grace period.

8. Allow tax payments or other government ordered payments or reports to be overdue or inaccurately filed.

9. Acquire, encumber or dispose of land or buildings.

EL-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. Purchases must not be divided into smaller amounts or separate transactions to avoid meeting the financial thresholds outlined in this policy.
        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.

11. Endanger the College's public image, credibility, or its ability to accomplish Ends.

    11.1. 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.

        11.1.1. Allow relationships with system partners that are inconsistent with the productive cooperation necessary to the achievement of Council's Ends.

    11.2. Permit inconsistent, disrespectful or untimely response to system partner concerns.

        11.2.1. 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-6 INVESTMENT

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

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

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

EL-7 COMPENSATION AND BENEFITS

With respect to employment, compensation and benefits to employees, consultants, contract workers and volunteers, the Registrar/CEO shall not cause or allow jeopardy to fiscal integrity or public image.

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

1. Change their own compensation and benefits, except as their benefits are consistent with a package for all other employees.
2. Promise or imply guaranteed employment.
3. Create obligations over a longer term than revenues can be safely projected.
4. Allow hiring or advancement practices that result in a real or perceived conflict of interest in any reporting relationship.
5. Develop pay structures and reward programs that do not equitably compensate employees for the value of work provided or that are unresponsive to market conditions.
6. Allow retirement or pension benefit plans that are inconsistent with industry standards in similar organizations.
    - 6.1. Provide a benefit plan without requiring a defined level of employee contribution.
    - 6.2. Make changes to current benefits without reasonable notice to employees.
7. Permit employees to lose benefits accrued under previous CDHO plans.
    - 7.1. Remove existing benefits to retired employees.

EL-8 COMMUNICATION AND SUPPORT TO COUNCIL

The Registrar/CEO shall not permit the Council to be uninformed or unsupported in its work.

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

1. Withhold, impede, or confound information relevant to the Council's informed accomplishment of its job.
    - 1.1. Allow the Council to be without timely decision information to support informed Council choices, including environmental scanning data and trends, a representative range of staff and external points of view, significant issues and risks, and alternative choices with their respective implications.
    - 1.2. Neglect to submit timely monitoring data including interpretations of Council policies that provide the observable metrics or conditions that would demonstrate compliance, rationale for why the interpretations are reasonable, and evidence of compliance.
    - 1.3. Let the Council be unaware of any actual or anticipated non-compliance with any Ends or Executive Limitations policy, regardless of the Council's monitoring schedule.
    - 1.4. Let the Council be unaware of any incidental information it requires, including anticipated media coverage, actual or anticipated legal actions, and material or publicly visible internal changes or events, including changes in CDHO staff.
        - 1.4.1. Quarterly financial statement.
        - 1.4.2. Reports provided to key system partners' meetings.
        - 1.4.3. Regular progress reports on developmental and regulatory issues.
    - 1.5. Allow the Council to be unaware that, in the Registrar/CEO's opinion, the Council is not in compliance with its own policies on Governance Process and Council-Registrar Relationship, particularly in the case of Council behaviour which is detrimental to the work relationship between the Council and the Registrar/CEO.
    - 1.6. Present information in unnecessarily complex or lengthy form, or in a form that does not clearly differentiate among monitoring, decision preparation, and general incidental or other information.
2. Allow the Council to be without reasonable administrative support for Council activities.
    - 2.1. Allow the Council to be without a workable, user-friendly mechanism for official Council, officer, or Council committee communications.
3. Impede the Council's holism, misrepresent its processes and role, or impede its lawful obligations.
    - 3.1. Interact with the Council in a way that favours or privileges certain Council members over others, except when (a) fulfilling individual requests for information or (b) responding to committees duly charged by the Council.
    - 3.2. Neglect to supply for the Required Approvals agenda all items delegated to the Registrar/CEO, yet required by law, regulation or contract to be Council-approved, along with the applicable monitoring information.
    - 3.3. Allow Council agendas and background material to be posted prior to Executive Council review or Chair confirmation.

EL-9 ETHICAL BEHAVIOUR

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

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

1. Permit the organization to be without an enforced internal Code of Conduct, of which all employees, consultants, contract workers and volunteers are made aware, that clearly outlines the organization's ethical expectations of them.

    1.1. Permit employees, consultants, contract workers and volunteers to be unaware of the level of confidentiality required to protect organizational integrity.

    1.2. Permit employees, consultants, contract workers and volunteers to be without guidelines for avoiding actual or potential conflicts of interest.

2. Permit employees and others to be without a mechanism for anonymous and confidential reporting of alleged or suspected improper activities and without fear of retaliation.

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 system partner 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 system partner 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.

COUNCIL-REGISTRAR/CEO DELEGATION

Council's sole official connection to the operational organization, its organization, its achievements and conduct will be through a chief executive officer, titled Registrar and CEO.

CRD-1 UNITY OF CONTROL

Only officially passed motions of the Council are binding on the Registrar/CEO:

1. Decisions or instructions of individual Council members, officers, or committees are not binding on the Registrar/CEO except in rare instances when the Council has specifically authorized such exercise of authority.

2. In the case of Council members or committees requesting information or assistance without Council authorization, the Registrar/CEO can refuse such requests that require, in the Registrar/CEO's opinion, a material amount of staff time or funds or are disruptive.

3. Only the Council acting as a whole can employ, terminate, discipline, or change the conditions of employment of the Registrar/CEO.

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.

1. The Council will develop Ends policies instructing the Registrar/CEO to achieve specified results, for specified recipients at a specified worth.

    1.1. Policies that do not address the subjects of results, recipients or worth will not be included in Ends, as they relate to means.

    1.2. Specifically, documents such as strategic plans and budgets will not be considered Ends, as they relate to operational means of achieving the Ends.

2. The Council will develop Executive Limitations policies which limit the latitude the Registrar/CEO may exercise in choosing the organizational means.

    2.1. 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.

    2.2. The Council will never prescribe organizational means delegated to the Registrar/CEO.

3. All policies will be developed systematically from the broadest, most general level to more defined levels.

4. 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.

5. 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.

CRD-4 MONITORING REGISTRAR/CEO PERFORMANCE

Registrar/CEO job performance will be measured solely by systematic and rigorous monitoring of Registrar/CEO job performance in comparison to the Council's required job outputs: organizational accomplishment of a reasonable interpretation of the Ends and organizational operation within the boundaries established in Executive Limitations reasonably interpreted:

1. Organization performance will be only that performance revealed by the monitoring system to be directly related to criteria given by the Council in policy.

2. The purpose of monitoring is simply to determine the degree to which Council policies are being fulfilled. Only information that does this will be considered to be monitoring.

3. A given policy may be monitored in one or more of three ways:

    3.1. Internal report: Disclosure of compliance information by the Registrar/CEO, along with their explicit interpretation of Council policy, and justification for the reasonableness of interpretation.

    3.2. External report: Discovery of compliance information by an impartial, external auditor, inspector or judge who is selected by and reports directly to the Council. The external party will first be provided with the Registrar/CEO's explicit interpretation of the policy and justification for the reasonableness of interpretation. The report must assess the reasonableness of the interpretation of Council policy, and compliance with it. The basis for assessment is not the standards of the external party, unless the Council has previously indicated that party's opinion to be the standard.

3.3. Direct Council Inspection: Discovery of compliance information by a designated Council member, a committee or the Council as a whole. This is a Council inspection of documents, activities or circumstances directed by the Council that assesses compliance with policy, with access to the Registrar/CEO's justification for the reasonableness of their interpretation. Such an inspection is only undertaken at the instruction of the Council.

4. In every case, the standard for compliance shall be any reasonable Registrar/CEO interpretation of the Council policy being monitored. The Council is the final arbiter of reasonableness, but will always judge with a "reasonable person" test rather than interpretations favoured by Council members or even the Council as a whole.

5. Upon the choice of the Council, any policy can be monitored by any of the above methods at any time. For regular monitoring, however, each Ends and Executive Limitations policy will be classified by the Council according to frequency and method.

ANNUAL SCHEDULE OF MONITORING OF ENDS AND EXECUTIVE LIMITATIONS

Policy no.	Policy	Method	Frequency	Date
	GLOBAL END	Internal Report	Annually	Mar.
E-1	Safe, High Quality, Professional Practice	Internal Report	Annually	Mar.
E-2	Engagement with Other Professionals	Internal Report	Annually	Mar.
E-3	Health System and Public Policy Influence	Internal Report	Annually	Mar.
E-4	Public Awareness and Access to Benefits	Internal Report	Annually	Mar.
	GENERAL EXECUTIVE CONSTRAINT	Internal Report	Annually	Dec.
EL-1	Treatment of Public and Registrants	Internal Report	Annually	Sep.
EL-1	Treatment of Public and Registrants	External Report	Every 3 years	Sep. 2027
EL-2	Treatment of Staff	Internal Report	Annually	Dec.
EL-2	Treatment of Staff	External Report	Every 3 years	Jun. 2026
EL-3	Planning 3(3)-3(8)	Direct Inspection	Annually	Dec.
	Planning (3, 3.1)	Internal Report	Annually	Jun.
EL-4	Financial Conditions and Activities	Internal Report	Annually	Jun.

EL-4(1)	Fund management standards	Internal report	Quarterly	Mar., May, Sept., Dec.
EL-5	Protection of Assets	Internal Report	Annually	Sep.
EL-6	Investment	Internal Report	Annually	Jun.
EL-7	Compensation and Benefits	Internal Report	Annually	March
EL-7(1)	Limits to Power (Registrar Expense Claims)	Direct Inspection	Annually	Jun.
EL-8	Communication and Support to Council	Internal Report	Annually	Dec.
EL-9	Ethical Behaviour	Internal Report	Annually	Jun.
EL-10	Development of Standards Governing Practice	Internal Report	Annually	Sep.
EL-11	Amendments to the Act or Bylaws	Internal Report	Annually	Sep.

6. A formal evaluation of the Registrar/CEO by the Council will occur annually, based on the achievement of a reasonable interpretation of the Council's Ends Policies and non-violation of its Executive Limitations policies, reasonably interpreted. This formal evaluation will be conducted by cumulating the regular monitoring data provided during the year and the Council's recorded acceptance or non-acceptance of the reports, and identifying performance trends evidenced by that data.

    6.1. In December of each year, the Registrar/CEO will identify for the Council the Registrar/ CEO's reasonable interpretation (measurable conditions supported by a rationale) of a one-year segment of progress towards achievement of the Council's Ends policies.

    6.2. Formal evaluation of the Registrar/CEO is concluded in June at the time of its June Council meeting.

        6.2.1. In March following the submission of the Ends monitoring report, the Executive Committee will compile a summary of the results of the Council's assessment of regular monitoring data received during the year, along with any additional necessary monitoring data. The Executive Committee will identify evident performance trends.

        6.2.2. The Executive Committee will circulate their summary of Registrar performance to Council members for review and feedback.

        6.2.3. The Executive Committee will review the Council members' feedback and prepare a final Registrar Performance Summary which will be reported in-camera to the Council. The Executive Committee will also propose to Council a recommendation for Registrar/CEO compensation. (Ref. CRD-5: Registrar/CEO Compensation).

        6.2.4. Only after the final Registrar Performance Summary is reported to the Council will the Executive Committee meet with the Registrar/CEO. The performance review meeting will normally be held in June at the time of the Council meeting.

CRD-5 REGISTRAR/CEO COMPENSATION

The Registrar/CEO's compensation will be decided by the Council as a whole and based on organization performance and executive market conditions.

1. Total compensation is to be competitive with the executive market. The executive marketplace to be considered is Ontario regulatory colleges of comparable scope, size (budget and staff complement), challenges and complexity. Total compensation includes salary, benefits, pension, perquisites and incentives.

    1.1. Every three years the Council will commission a formal review of compensation to ensure total compensation is aligned with the market. In each of the intervening two years, the base salary is adjusted by a percentage equivalent to a cost-of-living increase.

2. Annually in December, the Council will approve, with due consideration of the organization's financial capacity, a budget for the salary and benefits package for the coming fiscal year, including provision for any incentive pay to be made available.

    2.1. The Executive Committee may gather information and provide options and their implications to the full Council for its decision.

3. The Registrar/CEO's base salary is adjusted annually. Council will decide on compensation at its June meeting. Any adjustment will be effective retroactively to January 1st. A lump sum payment representing the difference in prior year and current year compensation will be made on June 30th.

4. Compensation may include an Ends-related performance-based incentive.

5. The Chair will confirm the Council's decision about compensation to the Registrar/CEO in a letter after the Executive Committee has presented to Council the results of its annual performance review meeting with the Registrar/CEO and Council has approved the compensation adjustment.

CRD-6 REGISTRAR/CEO SUCCESSION

In its role of assuring organizational performance, the Council shall take action in the event the Registrar/CEO is unable to perform their duties to ensure consistent leadership for the management of the organization and, when necessary, to ensure an orderly transition in Registrar/CEO succession.

1. Temporary Planned or Unplanned Absences (not vacation): When the Chair is made aware by Registrar/CEO, or management designate, of a planned or unplanned absence, the Chair will immediately inform the Council. A temporary planned or unplanned absence is a period of 30 days or less.

2. The Executive Committee will review the Registrar/CEO's most recent reasonable interpretation for Executive Limitation EL-3 (8.2) ("Permit the organization to be without sufficient organizational capacity and current information about Registrar/CEO and Council issues and processes for the competent operation of the organization to continue in the event of sudden loss of Registrar/CEO services.") and enact the provisions detailed in the interpretation. The Executive Committee will provide the Council an opinion on the period of time for which it is prudent to continue with these provisions. The Council will approve the plan.

3. If the Registrar/CEO has not yet provided a reasonable interpretation for EL-3 (8.2), the Chair will convene a meeting of the Executive Committee to which it may invite senior directors. The Executive Committee will determine how interim Registrar/CEO services are to be provided and identify the individual(s) who shall serve as Acting Registrar/CEO for the period of the temporary absence. The Executive Committee will circulate the plan to the Council for approval. The Acting Registrar/CEO shall be accountable to the Council as a whole for the management of the organization consistent with the Council's policies.

4. A short-term absence is a period of between 31 and 90 days. The Council will follow the same procedure as described in #2 and #3.

5. The Council will determine if it wishes to increase the frequency of monitoring for any policy or any part of any policy for the period of the short-term absence.

6. The Council will decide the amount, if any, of the agreed-upon end-of-absence bonus or salary adjustment to be enacted for the period of the absence.

7. The Council will agree upon a communication plan that addresses the information that will be shared about the appointment and which stakeholders will receive the information.

8. A long-term absence is a period in excess of 90 days. The Council will follow the same procedures described in CRD-6 (#2 to #7).

9. In addition to monitoring Acting Registrar/CEO performance through the normal cycle of monitoring reports, the Council will provide a summative performance assessment of the Acting Registrar/CEO at agreed upon intervals and in a manner consistent with CRD-4

10. The Council will determine the period of time that it is prudent to continue with these provisions.

11. A permanent absence occurs when the Registrar/CEO does not return from a planned or unplanned absence of any duration, resigns, is terminated, or retires.

12. The Council will form a Transition Committee to carry out the recruitment, selection and orientation of a new permanent Registrar/CEO. The terms of reference for the Transition Committee are documented in GP- 6.3 Registrar/CEO Transition Committee.

13. The Council will approve the plan and budget for recruitment, selection and orientation.

14. Following the Council's approval of its preferred candidate, an offer of employment shall be negotiated on behalf of the Council through the Transition Committee or its contracted recruitment firm. The Chair shall execute the offer of employment.

15. An employment contract will be drafted by legal counsel for approval of the Council and signed by both parties prior to the commencement of employment. The Chair will be the authorized signatory of the contract.

16. The Transition Committee will ensure that an orientation program is in place prior to the new Registrar/CEO's start date. The program would cover the first 12 months and should aim to ensure a successful transition to the Registrar/CEO position. Key elements of the plan to include:

- Briefing from the outgoing Registrar/CEO, if possible, to ensure appropriate file transfer and communication of organizational issues requiring immediate attention.
- Inclusion of professional development activities as required to ensure effective transition.
- Time with Council members to facilitate development of a strong relationship and understanding of the Council's policies, priorities, process and expectations.

17. The Council may choose to arrange for a coaching plan for this first year and, if so, will authorize an appropriate budget.

CRD-7 REGISTRAR/CEO TERMINATION

Registrar/CEO termination is an authority retained by the Council, not delegated to any officer or committee.

1. The decision process will be informed by performance data drawn from the monitoring system, which is itself directly related to Registrar/CEO performance on criteria the Council has stated in policy.

2. The Council may choose to terminate for other reasons but must then negotiate the terms of that termination or follow whatever provisions have been made by contract.

3. A committee process may be used to gather information and to provide options and their implications to the full Council.

GLOBAL GOVERNANCE PROCESS

The government of Ontario has granted the dental hygiene profession the privilege of self-regulation to protect the public interest. Accordingly, the College of Dental Hygienists of Ontario (CDHO) recognizes its dual accountability: legally to the government and morally to all Ontarians, including those who currently access or may face barriers to accessing dental hygiene services. While the CDHO does not influence the cost of dental hygiene care in Ontario, it is committed to addressing factors within its regulatory scope that impact public access and confidence, such as the quality and performance of dental hygiene care.

The purpose of the Council, on behalf of those to whom it is morally and legally accountable, is to see to it that the College of Dental Hygienists of Ontario achieves appropriate results for the appropriate people at an appropriate cost as defined in the Council's Ends, while avoiding unacceptable actions and situations as defined in Council's Executive Limitation policies.

GP-1 GOVERNING STYLE

The Council will exemplify excellence and integrity by governing with an emphasis on outward vision, commitment to obtaining ownership input, encouragement of diversity in viewpoints, strategic leadership, clear distinction of Council and staff roles, collective decisions, and a proactive, future focus. This means the Council will not be preoccupied with the present or past, or with internal, administrative detail.

1. The Council will cultivate a sense of group responsibility. The Council, not the staff, will be responsible for excellence in governing. The Council will initiate policy, not merely react to staff initiatives. The Council will use the expertise of individual members to enhance the ability of the Council as a body to make policy, rather than to substitute their individual judgements for the group's values.

2. The Council will direct, control and inspire the organization through the careful establishment of broad written policies reflecting the owners' values and perspectives. The Council's major policy focus will be on the intended long- term results to be produced for beneficiaries outside the operating organization, not on the administrative means of attaining those results.

3. The Council will enforce upon itself whatever self-discipline is needed to govern with excellence. Self-discipline will apply to matters such as its code of conduct, policy-making principles, respect of roles, regular self-evaluation, and ensuring the continuity of governance capability. Although the Council can change its governance process policies at any time, it will scrupulously observe those currently in force.

4. The Council will not allow any member or committee of the Council to hinder or be an excuse for not fulfilling Council obligations.

GP-2 COUNCIL JOB CONTRIBUTIONS

As an informed agent of the ownership, the Council's specific job products are those that ensure appropriate organizational performance.

Accordingly, the Council has direct responsibility to create:

1. The link between the owners and the operational organization.
2. Written governing policies that address the broadest levels of all organizational decisions and situations.
    - 2.1. **Ends:** what good or benefit the organization is to achieve, for which people, at what worth.
    - 2.2. **Executive Limitations:** Constraints on executive authority that establish the boundaries of prudence and ethics within which all executive activity and decisions must take place.
    - 2.3. **Governance Process:** Specification of how the Council conceptualizes, carries out and monitors its own task.
    - 2.4. **Council-Registrar Delegation:** How power is delegated and its proper use monitored, including the Registrar/CEO role, authority, and accountability.
3. Assurance of organizational performance through structured monitoring on Ends and Executive Limitations.
    - 3.1. Continuity of the Registrar function.
    - 3.2. Structured monitoring of the Registrar as outlined in Council-Registrar/CEO Delegation policies.
4. Operational decisions that the Council has prohibited the Registrar/CEO from making by its Executive Limitations policies.
    - 4.1. Decisions regarding borrowing from financial institutions. [EL-4 #3]
    - 4.2. Decisions regarding loans of CDHO funds. [EL-4 #4]
    - 4.3. Decisions regarding use of long-term reserves. [EL-4 #5]
    - 4.4. Decisions regarding acquisition, encumbering or disposal of land or buildings. [EL-4 #9]
    - 4.5. Decisions regarding change of organizational name or corporate identity. [EL-5 #12]
    - 4.6. Decisions regarding submission of proposed amendments to the Act, Regulations or Bylaws. [EL-11 #6]
5. Council decisions required by bylaw articles 3.7 through 3.9.
    - 5.1. Approval of the list of investigators and approved commissioners. [Bylaw article 3.9(5)]
    - 5.2. Action as the appeal body in the final appeal by a Council member or Non-Council member of a sanction of disqualification imposed by Council's Conduct Committee. [Bylaw article 3.9(13)]
    - 5.3. Decisions in the matter of reimbursement of legal costs to the subject of a complaint when no breach of Code of Conduct is found.

GP-3 COUNCIL PLANNING CYCLE AND AGENDA CONTROL

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

1. The Council will convene a minimum of four meetings annually and will normally meet on a quarterly basis. The annual planning cycle is January 1 to December 31.

2. The Council shall maintain control of its own agenda by developing a multi- year cycle and an annual schedule that includes all elements of the Council's work. Annually the Council will review its annual schedule and related meeting agendas and modify as required to accommodate any additional projects or priorities. [See multi-year cycle at the end of this policy.]

    2.1. Review of the Ends in a timely fashion which allows the Registrar/CEO to build a budget based on accomplishing a one-year segment of the Council's most recent statement of long-term ends.

    2.2. Linkage with the ownership to gain a representative mix of owner values, perceptions and expectations, prior to the above review.

    2.3. Education related to Ends determination (for example, presentations relating to the external environment, demographic information, exploration of future perspectives which may have implications, presentations by advocacy groups and staff).

    2.4. Content review of selected Executive Limitations, Governance Process and Council – Registrar Delegation policies, consistent with a multi-year schedule that includes all policies.

    2.5. Self-evaluation of the Council's own compliance with selected Governance Process and Council – Registrar Delegation policies, consistent with the schedule in the policy, GP 9 (Investment in Governance).

    2.6. Documentation of monitoring compliance by the Registrar with Executive Limitations and Ends policies. Monitoring reports will be read in advance of the Council meeting, and discussion will occur only if Council members assess interpretations as unreasonable, identify non-compliance, or identify potential need for policy amendments.

    2.7. Education about the process of governance.

3. Based on the annual schedule and specific Council-confirmed goals for the year ahead, the Council delegates to the Chair the authority to fill in the details of the meeting content. Potential agenda items shall be carefully screened. Screening questions shall include:

    - Clarification as to whether the issue clearly belongs to the Council or the Registrar.
    - Identification of what category an issue relates to – Ends, Executive Limitations, Governance Process, Council-Registrar Delegation.
    - Review of what the Council has already said in this category, and how the current issue is related.

    3.1. The Council delegates to the Chair the authority to confirm the agenda and meeting material for Council's public meeting prior to their publication.

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

MULTI-YEAR CYCLE SCHEDULE

Policy No.	Policy Content Review	Year 4 (2024)	Year 1 (2025)	Year 2 (2026)	Year 3 (2027)	Year 4 (2028)
	Overall Public Benefit Ends Policy	Jun.	Jun.	Jun.	Jun.	Jun.
E 1	Safe High Quality Professional Practice	Jun.	Jun.	Jun.	Jun.	Jun.
E 2	Engagement with Other Professionals	Jun.	Jun.	Jun.	Jun.	Jun.
E 3	Health System and Public Policy Influence	Jun.	Jun.	Jun.	Jun.	Jun.
E 4	Public Awareness and Access to Benefits	Jun.	Jun.	Jun.	Jun.	Jun.
	General Executive Constraint	Mar.	Mar.	Mar.	Mar.	Mar.
EL 1	Treatment of the Public and Registrants	Dec.	Dec.	Dec.	Dec.	Dec.
EL 2	Treatment of Staff	Sep.	Sep.	Sep.	Sep.	Sep.
EL 3	Planning	Sep.	Mar./Sep.	Mar./Sep.	Mar./Sep.	Mar./Sep.
EL 4	Financial Conditions and Activities	Sep.	Sep.	Sep.	Sep.	Sep.
EL 5	Protection of Assets	Dec.	Dec.	Dec.	Dec.	Dec.
EL 6	Investment	Sep.	Sep.	Sep.	Sep.	Sep.
EL 7	Compensation and Benefits	Mar.	Mar.	Mar.	Mar.	Mar.
EL 8	Communication and Support to Council	Mar.	Mar.	Mar.	Mar.	Mar.
EL 9	Ethical Behaviour	Sep.	Sep.	Sep.	Sep.	Sep.
EL 10	Development of Standards Governing Practice	Dec.	Dec.	Dec.	Dec.	Dec.
EL 11	Amendments to the Act or Bylaws	Dec.	Dec.	Dec.	Dec.	Dec.

GP-4 COUNCIL CHAIR'S ROLE

Council Chair (Chief Governance Officer), a specially empowered member of the Council, assures the integrity of the Council's process.

1. The assigned result of the Council Chair's job is that the Council behaves consistently with its own rules and those legitimately imposed upon it from outside the organization.
    1.1. Meeting discussion content will include only those issues that, according to Council policy, clearly belong to the Council to decide or monitor.
    1.2. Information that is neither for monitoring performance nor for Council decisions will be minimized and always noted as such.
    1.3. Deliberation will be timely, fair, orderly and thorough, but also efficient and kept to the point.
2. The authority of the Chair consists in making decisions that fall within topics covered by Council policies on Governance Process and Council– Registrar Delegation, with the exception of (a) employment or termination of a Registrar and (b) instances where the Council specifically delegates portions of this authority to others. The Chair is authorized to use any reasonable interpretation of the provisions in these policies.
    2.1. The Chair is empowered to chair Council meetings with all the commonly accepted power of that position (e.g., ruling, recognizing).
        2.1.1. The Chair has the authority to name an alternate chair to preside at the meeting
    2.2. The Chair has no authority to make decisions about policies created by the Council within Ends and Executive Limitations policy areas. Therefore, the Chair has no authority to supervise or direct the Registrar.
    2.3. The Chair may represent the Council to outside parties in announcing Council-stated positions and in stating Chair's interpretations within the area delegated to the Chair (consistent with policies in Governance Process and Council-Registrar Delegation areas).
    2.4. The Chair ensures that the minutes of Executive Committee in- camera meetings that are not maintained by the College administration are saved, along with a back-up copy on an independent device, and ensures the physical transfer of that data device to the incoming Chair.
    2.5. The Chair may delegate this authority, but remains accountable.

GP-5 VICE-CHAIR'S ROLE

The Vice-Chair shall, in the absence of the Council Chair, preside at all meetings of the Council and have such other duties and powers as the Council may specify.

1. The assigned result of the Vice-Chair's job is that of being knowledgeable of the role and duties of the position of Council Chair.

2. The authority of the Vice-Chair consists in making decisions within assignments delegated by the Chair including those which are to facilitate effective Council process.

GP-6 COUNCIL COMMITTEE PRINCIPLES

Council committees, when used, will be assigned so as to reinforce the wholeness of the Council's job and so as never to interfere with delegation from Council to Registrar.

1. Council committees are to help the Council do its job, never to help or advise the staff. Committees ordinarily will assist the Council by preparing policy alternatives and implications for Council deliberation.

2. Council committees may not speak or act for the Council except when formally given such authority for specific and/or time-limited purposes. Expectations and authority will be carefully stated in order not to conflict with authority delegated to the Registrar.

3. Council committees cannot exercise authority over staff. Because the Registrar/CEO works for the full Council, he or she will not be required to obtain approval of a Council Committee before an executive action.

4. This policy applies to any group that is formed by Council action, whether or not it is called a committee, and whether or not it includes Council members. It does not apply to committees formed under the authority of the Registrar/CEO.

5. All committee members shall abide by the same Code of Conduct as governs the Council.

6. Except as defined in written Terms of Reference, no Committee has authority to commit the funds or resources of the CDHO.

GP-6.1 EXECUTIVE COMMITTEE TERMS OF REFERENCE

The Executive Committee will assist the Council in its responsibilities to govern lawfully, effectively and efficiently.

The committee products are to support the Council's job, never to decide for the Council unless explicitly stated below.

1. As provided for in the *Regulated Health Professions Act* and CDHO Bylaws, decisions on behalf of the Council, only in urgent situations when it is not feasible to convene a quorum of the Council.
    1.1. A report to the Council at its immediate next meeting of any decision made on behalf of the Council.
2. Alternatives and options for the Council's consideration on any matter referred to the Committee by the Council.
    2.1. Every other year in September, circulation for Council's consideration at its December meeting, of possible changes in the Governance Process policy on Council and Committee Stipend and Expenses. [GP-7]
    2.2. Annually by December, a Governance Budget, developed in accordance with GP-9: Investment in Governance policy item 3.1 and projects on the Council Annual Work Plan.
    2.3. Annually in January, a committee slate for the make-up of statutory and Council committees, including non-Council members.
    2.4. By December, a Council Education Plan developed from Council's annual self-evaluation and ongoing governance process monitoring, and other needs identified by the Council related to Ends or Executive Limitations policy content reviews in accordance with GP-9: Investment in Governance.
3. Advice to the Chair on agenda development.
    3.1. Prior to their publication, assessment of background material accompanying meeting agenda items using the following criteria:
        - Clarity;
        - Comprehensiveness;
        - Sufficiency;
        - Accuracy.
4. Annually by June 30, conduct Registrar/CEO performance evaluation in accordance with CRD-4 Monitoring Registrar/CEO Performance.
5. Annually following the report to Council of the Registrar Performance Summary, recommendation for Registrar compensation, in accordance with CRD-5 Registrar/CEO Compensation.
6. Within the first three months of appointment or election, assurance of the orientation of new Council Member consistent with GP-9 (2.1) (2.1.1) and (2.1.2) and GP-9 (2.2).
    6.1. Assignment of Council Mentor to new Council Member.

7. In the event of temporary short-term or long-term Registrar/CEO absence, a proposal for the Council on the period of time to continue temporary provision of operational management [CRD-3 (#2); CRD-3 (#10]

    7.1. In the event of a temporary Registrar/CEO absence exceeding thirty (30) days, a proposal for the Council's consideration on options for compensation of any staff assuming an interim Registrar/CEO role. [CRD-3 (#6)]

    7.2. In the event that the role of Registrar/CEO is filled on an interim basis, a proposal for the Council on a communication plan for informing stakeholders. [CRD-3(#7)]

    7.3. As required, suggestions for the make-up of the Registrar/CEO Transition Committee.

    7.4. As required by Bylaw article 3.9(8), a decision as to whether to accept a report submitted by the Conduct Committee concluding that formal resolution of a Code of Conduct complaint is not warranted and to proceed to resolve the matter informally, or to refer the matter back to the Conduct Committee for additional investigation or other action.

8. For use by future Executive Committees, a record of committee meeting minutes, and a package of current guidelines/tools/templates.

    8.1. The committee will circulate to the Council the minutes of any committee meeting held in the interim between Council meetings.

    8.2. The minutes from confidential in-camera meetings, along with any working documents used by the Executive Committee, not maintained by the College administration, are stored by the Chair. The Chair will maintain a back-up copy of in-camera meeting minutes. Availability for use by future Executive Committees shall be accomplished through the transfer of data to the incoming Chair.

9. The committee's authority enables it to assist the Council in its work, while not interfering with Council holism.

    9.1. The committee has no authority to contravene or change Council policies, unless as specified in GP-6.1 (#1) there is an urgent to do so and it is not possible to convene a quorum of the Council.

    9.2. The Committee has the authority to review and approve requests to make a deputation and further, to refuse a request for any of the following reasons:

    - Irrelevant to the business of Council
    - Not in the public interest
    - Inappropriate subject for Council deliberation
    - Repetitive
    - Inflammatory

    9.3. The committee has authority to spend funds as required, in accordance with its Council approved budget, for meetings and other activities related to its deliverables.

        9.3.1. The committee will meet four (4) times per year and may hold additional meetings as required. Meetings can be face-to-face or teleconference.

    9.4. The committee has authority to use the Registrar/CEO and Executive Assistant to the Registrar/CEO for administrative support of its activities.

9.5. The committee has authority to use staff resource time normal for administrative support to assist with production of the Governance budget, production and circulation of meeting agenda and materials, and to document the budget assumptions as required for the committee to monitor the Governance budget.

9.6. The committee has the authority to delegate preparatory work for any of its product to one or more of its members. Whenever the committee delegates to two or more of its members, at least one member shall be a public member.

9.7. The committee has the authority to hold an executive session, i.e. to meet without the Registrar/CEO.

9.8. The committee does not have the authority to instruct the Registrar/CEO or any other staff member, other than to request support required in the conduct of its duties.

9.9. The committee shall comprise the Chair, the Vice-Chair and three (3) additional members. All members are elected annually by Council members from among themselves. Of the five, three (3) will be professional members and two (2) will be public members.

9.10. The Council Chair shall serve as Committee Chair.

GP-6.2 REGISTRAR/CEO TRANSITION COMMITTEE TERMS OF REFERENCE

The Registrar Transition Committee will assist the Council in fulfilling its responsibilities regarding continuity of the Registrar/CEO function.

1. The committee products are to support the Council's job, never to decide for the Council unless explicitly stated below.

   1.1. Upon appointment, for itself, a review of the Council's policies.

   1.2. Within the time-frame determined by the Council, for the Council's review and approval, a profile of the desirable candidate, a description of the Registrar/CEO's key roles, and timeframe for the hiring process including milestones for advertising, short-listing, interviewing and reference checks.

   1.3. An opinion for the Council on engaging outside firms specialized in non-profit management or executive recruitment, including firms' proposed roles and the cost of engagement.

   1.4. An opinion on the suitability of the current list of required qualifications for the Registrar/CEO:
   - Bachelor or post-graduate degree related to Dental Hygiene and/or relevant field
   - Four to seven years of related experience
   - Knowledge and experience with the health care and regulatory sectors
   - Strategic focus, proven leadership and management competencies and experience
   - Demonstrated ability to recruit, inspire, empower and retain competent staff and a commitment to professional development
   - Integrity, openness, and an ability to engender trust
   - Excellent communication and interpersonal skills
   - Bilingualism is considered an asset
   - Knowledge of Dental Hygiene profession is considered an asset

2. Within the time-frame determined by the Council, for the Council's approval, a budget for the Registrar/CEO hiring process including costs for advertising, travel, outside search firms, legal and other direct expenses for search.

3. Throughout the search process, as the committee determines is appropriate, solicitation of input from key stakeholders including professional members and CDHO Staff.

4. Conduct or oversee the following search activities:
   - Selection and engagement of outside consultant(s) or firm(s).
   - Oversight of contracted consultant(s) or firm(s) supporting the Registrar/CEO search process.
   - Receipt and acknowledgement of applications.
   - Development of advertising including description of Registrar/CEO's key roles.
   - Development of criteria to be used in short-listing candidates.
   - Development of interview format, questions and other selection techniques.
   - Scheduling and conduct of preliminary interviews with short-listed candidates.

5. For review and priority ranking by the Council, a list of not more than three (3) candidates along with supporting rationale and resumes.

6. Scheduling and conduct of interviews with preferred candidates, including if required by the Council, organization of presentations by the preferred candidates.
   - Reference checks for preferred candidate.
   - For the consideration of and approval by the Council, recommended candidate with rationale for choice along with results of reference checks.
   - Follow-up with unsuccessful candidates.

7. Upon achievement of milestones identified in executive search and transition plan, a written or oral update for the Council on the status and progress of the search.

8. For use by future Registrar/CEO Search Committees, record of search process, committee decisions and package of job profile, job posting, and criteria for short-listing, interview questions, and selection criteria.

9. The committee's authority enables it to assist the Council in its work, while not interfering with Council holism.

   9.1. The committee cannot change or contravene Council policies, or instruct the incumbent Registrar/CEO or any staff member, other than to request information required in the conduct of its duties

   9.2. The committee may use staff resource time normal for administrative support around meetings, as well as administrative support identified in the committee's executive search plan.

   9.3. The committee has authority to spend funds to accomplish its work, as approved by the Council. It has no authority to spend or commit organization funds in excess of those specifically allocated by the Council.

   9.4. The Registrar/CEO Transition Committee does not have the authority to make any formal or informal announcements about the selection of the successful candidate.

10. The committee's composition shall comprise a minimum of four current Council members, of which at least two shall be public members.

11. The chair of the committee shall be selected at the committee's first meeting by the committee members from among themselves.

12. The committee tenure will end with Council's appointment of a Registrar.

GP-6.3 CONDUCT COMMITTEE TERMS OF REFERENCE

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

1. Determinations with regard to Code of Conduct complaints when it has not been possible to resolve the complaint through informal means.

    1.1. Upon conclusion that a formal resolution is not warranted, a report to the Executive Committee at its immediate next meeting documenting the Conduct Committee's investigation process and rationale for its conclusion.

    1.2. Upon conclusion that a formal resolution is warranted, a report to the Executive Committee at its immediate next meeting documenting the Conduct Committee's investigation process and formal determination.

2. The committee's authority enables it to assist the Council in its work, while not interfering with Council holism.

    2.1. The committee must carry out its mandate in conformance to articles 3.7 through 3.9 and article 5.8 of the CDHO bylaws.

        2.1.1. A quorum of the committee shall be three persons, at least one of whom is a public member.

    2.2. The committee has no authority to contravene or change Council policies.

    2.3. The committee has the authority to spend funds as required in accordance with its Council-approved budget for meetings and other activities.

    2.4. The committee will meet as required after a complaint has been filed with it. Meetings can be face to face or teleconference.

    2.5. The committee has authority to use the Registrar/CEO and or staff designated by the Registrar/CEO for administrative support of its activities.

    2.6. The committee may use staff resource time consistent with the Registrar's interpretation of a reasonable amount for administrative support to assist with investigation and determination of any complaints made about Council or committee members pursuant to the Council Code of Conduct.

    2.7. The committee has the authority to delegate preparatory work for any of its product to one or more of its members. Whenever the committee delegates to two or more of its members, at least one member shall be a public member.

2.8. The committee has the authority to meet without the Registrar/CEO.

2.9. The committee does not have the authority to instruct the Registrar/CEO or any other staff member, other than to request support required in the conduct of its duties.

3. The committee shall comprise three to five persons who are members of the Councils of Ontario regulatory colleges other than the CDHO, at least one of whom is a public member. All members shall be appointed annually by Council at the beginning of the year.

3.1. The committee chair shall be elected by the committee at its first meeting from among its members.

GP-6.4 GOVERNANCE COMMITTEE TERMS OF REFERENCE

The Governance Committee is responsible for advising Council on elements of the effective governance of the organization and function of the Council. The Committee supports the work of Council, as directed, through:

1. Developing and reviewing the governance framework according to the schedule set by Council;
2. Making recommendations to Council regarding processes for evaluating the effectiveness of Council (including a third-party review), Council meetings, Council committees, the Council President, and individual Council members;
3. Regularly reviewing the performance of the Council as a whole and evaluating the contribution of individual Council and Committee members;
4. Assisting Council with timely collection and collation of relevant governance data for inclusion in the CPMF report.
5. Overseeing the implementation and modifications of the competency framework as needed.

1. Responsibilities of the Committee

1.1. Preparation of a draft submission of Domain 1: Governance of the CPMF Report for Council's consideration at or before its March meeting.

1.2. Preparation of draft submissions prior to the March Council meeting on Measures or Required Evidence of other Standards in other Domains where Council has responsibility.

1.3. Preparation of a review of the completed CPMF submission for Council's consideration by the end of March. Such a review will be conducted with a view to assessing elements of the CPMF report that are consistent with Council's governance responsibility.

1.4. Draft an evaluation framework for Council that integrates the policy governance framework and the performance measurement framework of the CPMF. For Council's consideration, a draft framework for an integrated evaluation as required by the CPMF.

Committee Authority

2. The committee's authority enables it to assist the Council in its work, while not interfering with Council holism.

2.1. Authority for policy creation, amendment or deletion remains, as always, with Council.

2.2. The committee has authority to spend funds as required to accomplish its work in accordance with its Council-approved budget for meetings and other activities related to its deliverables. Other than to Council, the Committee does not have the authority to report on its work.

2.3. The committee has authority to use staff resource time consistent with the Registrar's interpretation of a reasonable amount of administrative support for meetings. The committee does not have the authority to instruct the Registrar/CEO or any other staff member, other than to request support required in the conduct of its duties.

Committee Membership

3. The committee shall comprise of two Council Members who are Professional Members and one Council Member who is a Public Member. The tenure of the committee members shall be determined by the Council as required.

3.1. The committee chair shall be elected by the committee at its first meeting from among its members.

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 Chair of Council 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 have their remuneration outlined in the enabling motion passed by Council.

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 March 8, 2024, per diem rates are set as follows:
    - Member of Council or Committee $320.00
    - Chair of Committee + 25%
    - Chair of Council + 40%
    - Vice-Chair 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 Chair and Vice-Chair roles is recognition for the extra responsibilities inherent in these roles including preparing the agenda, chairing the meeting, writing reports to Council and preparing information for the Annual Report. The Chair and Vice-Chair 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 system partners, the Chair or their designate will receive honoraria at an hourly rate of $72, rounded up to the hour. If more than one meeting is held on the same day, the Chair 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 Chair 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 Chair.

6. When a member is so authorized by Council or pre-approved by the Chair to represent the College, the regular per diem and expense stipulation will apply. Any additional honorarium, if offered, must be declined or endorsed over to CDHO; small non-monetary tokens of appreciation are exempted.

7. An honorarium for approved preparation time, when approved, shall be paid on the following basis: ¼ day = $25.00; ½ day = $50.00; 1 day = $100.00

    7.1. Committee Chairs must poll Committee members as to the time spent preparing for their meeting and come to a consensus. Following the meeting, the Chair must request approval from the Chair of Council 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 Chair of Council. The Chair of Council will inform the Director of Corporate Services of any amounts approved at the time of approval.

8. Travel time of $200.00 will be paid per meeting for a round-trip to conduct Council business, when a Council member must travel more than two (2) hours, one-way, regardless of when the travel is undertaken.

9. Travel expenses eligible to be reimbursed:

    - Air: Economy class round trip by the most direct route or most feasible under the circumstances, including ground transportation from home or office to and from the airport.
    - Train: VIA 1 class round trip by the most direct route including ground transportation from home or office, to and from the railway station.
    - Mileage: Mileage will be paid at the current provincial government rate as long as the total mileage to be claimed does not exceed the cost of Air or Train travel as described in the preceding two bulleted statements, without prior approval of the Chair.
    - 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 $350.00 per night (excluding taxes) maximum.

    10.1. The Chair 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 Chair.

    10.3. The Chair may pre-approve reimbursement of hotel accommodation in excess of the $350 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.

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 Chair for consideration of early reimbursement or an advance of funds to be used towards travel. Per diems will not be paid in advance. The Chair's decision will be at her/his/their discretion.

GP-8 CODE OF CONDUCT

Council Members shall conduct themselves in accordance with the bylaws.

GP-9 INVESTMENT IN GOVERNANCE

Consistent with its commitment to excellence in governance, the Council will invest in its governance capacity.

1. Candidates for Council membership shall be provided with information that clearly outlines the role of the Council, the necessary qualifications and the Council's expectations of Council members. The Ontario government's Public Appointments Officer will be provided with information that clearly outlines the Council's approach to governance and desirable characteristics of Council Members.

2. Council skills, methods and supports will be sufficient to assure governing with excellence.

    2.1. Prior to their first Council meeting, new Council members will receive a thorough orientation to ensure familiarity with the Council's process of governance, the organization's issues and structure.

        2.1.1. The orientation will familiarize new Council members with the Registrar performance evaluation process as well as the Registrar's reasonable interpretation (measurable conditions supported by a rationale) of a one-year segment of progress towards achievement of the Council's Ends policies as presented in December.

        2.1.2. An assigned Council Mentor will support an ongoing orientation of a new Council Member. Upon assignment, the Mentor will make an initial introductory contact with the new Council Member; meet with the new Member following the first new Council Member orientation; meet in person prior to the new Member's first Council meeting; and meet electronically or by telephone between the first and second Council meeting. The goal of the mentoring is to ensure new Member familiarity with Council policies, processes and ensure new Members are able to easily get their questions answered.

    2.2. New Council members shall receive an orientation to the operational organization including CDHO history, office facilities, staff and volunteer structure, regulatory processes, programs and services, Council communication tools and web site access.

    2.3. Council members shall have ongoing opportunity for continued training and education to enhance their governance capabilities.

    2.4. Outreach mechanisms will be used as needed to ensure that the Council's ability to listen to owner viewpoints.

    2.5. Outside monitoring assistance will be arranged so that the Council can exercise sufficient control over organizational performance. This includes, but is not limited to fiscal audit.

3. Costs will be prudently incurred, though not at the expense of endangering the development and maintenance of superior governance capability.

3.1. The Council will establish annually prior to the budget cycle and be accountable for an annual budget for its own governance functions, which shall include funds for Council and Council committee meeting costs, Council education, Council member attendance at conferences and conventions, orientation, costs of fiscal audit and any other outside monitoring assistance required, and costs of methods such as focus groups, surveys and opinion analyses to ensure the Council's ability to listen to owner viewpoints and values.

4. The Council will establish governance means policies that will serve as measurable standards against which the Council's performance can be evaluated.

4.1. The Council will evaluate and discuss the Council's process and performance at each meeting.

4.2. Under the leadership of the Chair, at least annually the Council will conduct a self-evaluation. As a result of this evaluation, the Council will establish a governance action plan for improvement of identified areas

4.3. The Council will monitor its adherence to its own Governance Process and Council-Registrar Delegation policies regularly. Upon the choice of the Council, any policy can be monitored at any time. However, at minimum, the Council will monitor its own adherence to them, according to the attached schedule.

Policy No.	Schedule of Internal Monitoring and Policy Content Review	Year 4 (2024)	Year 1 (2025)	Year 2 (2026)	Year 3 (2027)	Year 4 (2028)
	Global Council-Registrar/CEO Delegation		Dec. 2025			
CRD 1	Unity of Control	Jun. 2024				Jun. 2028
CRD 2	Accountability of the Registrar/CEO				Dec. 2027	
CRD 3	Delegation to the Registrar/CEO				Dec. 2027	
CRD 4	Monitoring Registrar/CEO Performance		Sep. 2025		Sep. 2027	
CRD 5	Registrar/CEO Compensation		Sep. 2025		Sep. 2027	
CRD 6	Registrar/CEO Succession		Jun. 2025			
CRD 7	Registrar/CEO Termination		Jun. 2025			
	Global Governance Process	Dec. 2024				Dec. 2028
GP 1	Governing Style	Jun. 2024				Jun. 2028
GP 2	Council Job Contributions				Mar. 2027	
GP 3	Council Planning Cycle and Agenda Control			Sep. 2026		
GP 4	President's Role		Mar. 2025			

GP 5	Vice-President's Role		Mar. 2025			
GP 6	Council Committee Principles	Sep. 2024				Sep. 2028
GP 6.1	Executive Committee Terms of Reference		Mar. 2025		Mar. 2027	
GP 6.2	Registrar/CEO Transition Committee Terms of Reference	Sep. 2024				Sep. 2028
GP 6.3	Conduct Committee Terms of Reference			Sep. 2026		Sep. 2028
GP 7	Council and Committee Stipend and Expenses		Dec. 2025		Dec. 2027	
GP 8	Code of Conduct		Dec. 2025		Dec. 2027	
GP 9	Investment in Governance	Mar. 2024				Mar. 2028
GP 10	Governance Succession Planning	Mar. 2024				Mar. 2028
GP 11	Council Linkage with Ownership			Jun. 2026		
GP 12	Special Rules of Order				Sep. 2027	
GP 13	In-Camera Sessions	Dec. 2024				Dec. 2028
Council Education		**Quarterly**	**Quarterly**	**Quarterly**	**Quarterly**	**Quarterly**
CEO Compensation Decision		Jun. 2024	Jun. 2025	Jun. 2026	Jun. 2027	Jun. 2028
Selection of Auditor		Jun. 2024	Jun. 2025	Jun. 2026	Jun. 2027	Jun. 2028
New Council Member Orientation		Jan. 2024	Jan. 2025	Jan. 2026	Jan. 2027	Jan. 2028

5. The Council will annually monitor its adherence to items relating to Council members' fiduciary duties as defined in Bylaw 5, articles 3.7(2) to 3.7(15) and adherence to items relating to confidentiality as defined in Bylaw 5, articles 3.7(31) to 3.7(38).

GP-10 GOVERNANCE SUCCESSION PLANNING

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

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

GP-11 COUNCIL LINKAGE WITH OWNERS

The "moral owners" of the College of Dental Hygienists of Ontario (CDHO) are defined as the public of Ontario.

The Council shall be accountable for the CDHO to its owners as a whole. The Council shall act on behalf of the owners as a whole, rather than being advocates for specific geographic areas or interest groups.

The privilege of self-governance has been granted to College of Dental Hygienists of Ontario (CDHO) by the *Regulated Health Professions Act, 1991*, S.O. 1991 C. 18. This legislation requires the CDHO to carry out its activities and govern registered Dental Hygienists in a manner that protects and serves the public interest. As the representative of the owners, the Council is obligated to identify and know what the owners want and need.

1. When making governance decisions, Council Members shall maintain a distinction between their personal interest as "customers" of the College and their obligation to speak for others as a representative of the "owners" as a whole.

2. The Council shall gather data in a way that reflects the diversity of the ownership. It shall meet with, gather input from, and otherwise interact with owners in order to understand the diversity of their perspectives.

    2.1. The Council recognizes that in order to exercise the authority to self- govern the profession of Dental Hygiene that it must maintain a relationship with registrants as one sub-set of the overall moral ownership. Council shall, in obtaining perspectives from registrants, emphasize areas of public interest and avoid areas reflecting the profession's self-interest. It shall take these perspectives into account when making decisions, provided always that the interests of the public are protected.

3. The Council may develop a policy permitting the College to act as an advocate for the profession provided such action is consistent with the public interest.

4. The Council will establish and maintain a three-year ownership linkage plan, in order to ensure that the Council has intentional and constructive dialogue and deliberation with the owners, primarily around the organization's Ends. The plan will include selection of representative owners for dialogue, methods to be used, and questions to be asked of the owners. The information obtained from this dialogue with owners will be used to inform the Council's policy deliberations.

    4.1. All Council members are accountable to the Council for participating in the linkage with owners as identified in the plan.

5. The Council will consider its ownership linkage successful if, to a continually increasing degree:

    - When developing or revising Ends, the Council has access to diverse viewpoints that are representative of the ownership regarding what benefits this organization should provide, for whom, and the relative priority of those benefits.
    - The owners are aware that the Council is interested in their perspective.
    - If asked, the owners would say that they have had opportunity to let the Council know their views.
    - The owners are aware of how the Council has used the information they provided.

GP-12 SPECIAL RULES OF ORDER

Council meetings will be conducted in an orderly, effective process, led and defined by the chair.

1. All by-law obligations respecting Council meetings must be satisfied.
2. Council meetings shall be called to order at the time specified in the notice of meeting and upon satisfaction of quorum.
3. Meeting order and decorum shall be maintained, and all members treated with dignity, respect, courtesy, and fairness during discussion and debate and in all other respects.
    3.1. When Council meetings are held virtually, Council members will treat others with respect and courtesy by mitigating potential sources of distraction in their personal workspace created by background, lighting, external sound, interruption, or appearance.
4. Council members must keep their comments relevant to the issue under consideration.
5. Council meetings will be conducted at a level of informality considered appropriate by the chair, including that discussion of a matter may not occur prior to a proposal that action be taken on any given subject.
6. Proposals that the Council take action, or decide a particular matter, shall (unless otherwise agreed to by unanimous consent) be made by main motion of a Council member, discussed, and then voted on. Motions require a second to proceed to discussion and subsequent vote.
    6.1. The chair of the Council may not to the same extent as any Council member, make motions, engage in debate, except to offer brief comments at the close of the debate, or vote on any matter to be decided, except in the case of a tie.
    6.2. A motion to amend a main motion may be amended but third level amendments are out of order.
    6.3. A motion to refer to a committee, postpone, or table, may be made with respect to a pending main motion, and if carried shall set the main motion (the initial proposal) aside accordingly.
7. Council members may speak to a pending motion on as many occasions, and at such length, as the chair may reasonably allow.
8. A vote on a motion shall be taken when discussion ends but any Council member may, during the course of debate, move for an immediate vote (close debate) which, if carried, shall end discussion and the vote on the main motion shall then be taken.
9. A majority vote will decide all motions before the Council excepting those matters in the by-laws which oblige a higher level of approval.
10. A motion to adjourn a Council meeting may be offered by any Council member or, on the conclusion of all business, adjournment of the meeting may be declared by the chair.
11. A Council member may request to have their vote on the record.
    11.1. When further rules of order are to be developed by the Council, the Council will consider the [Robert's Rules of Order Newly Revised or Standard code of Parliamentary Procedure or other authority] as a resource guide.

GP-13 IN-CAMERA SESSIONS

In compliance with *Regulated Health Professions Act, 1991* Schedule 2, Article 7 (2), the Council may exclude the public from a meeting if it considers it necessary to protect the interests of the public or a person and the desirability of avoiding disclosure outweighs the desirability of public disclosure of the information. Council members shall maintain confidentiality respecting all discussions undertaken by the Council in-camera.

1. Items discussed in-camera are items of a confidential nature, disclosure of which could reasonably be expected to be harmful to:
    - Personal privacy of staff or clients, including human resource issues;
    - Individual or public safety;
    - Business interests of a third party;
    - Financial or economic interest of the Council and its affiliates, including local public body confidences;
    - The integrity and security of computer systems;
    - The integrity and protection of security systems.
2. Also, to be considered in-camera are:
    - Policy advice as provided in the [name of legislation relating to freedom of information and protection of privacy];
    - Litigation matters and solicitors' legal advice;
    - Property acquisitions or disposals.
3. The Council determines attendance at in-camera sessions.
    - 3.1. All Council members with the exception of those who are deemed to be in conflict of interest as defined in Bylaw sec. 3.7, items 16 to 21 shall be included.
    - 3.2. The Registrar/CEO shall attend all in-camera meetings, except where issues of his/her/their performance or compensation are being discussed, at which time he/she/they may be excluded from the proceedings at the direction of the Chair.
    - 3.3. Senior staff will be included in in-camera discussions at the discretion of the Registrar/CEO, only with the permission of the Chair. They will normally be excluded only when issues of performance or remuneration of the Registrar/CEO are under discussion.
4. Except where prohibited by the privacy provisions of legislation, the Council shall rise and report in-camera resolutions to an open meeting of the Council.
5. Council committee meetings will be held in-camera.

GP-14 REQUESTS FOR DEPUTATIONS TO COUNCIL

The Council will consider requests for deputations at a Council meeting by persons who are not Council members on topic(s) relevant to the affairs of the Council.

1. Requests to make a deputation shall be considered under specific conditions.
    1.1. Persons who are not Council members may request to make a deputation to a Council meeting.
    1.2. The Council as a whole, any individual Council member, or any Committee of Council may request the scheduling of a deputation to be presented by persons who are not Council members to Council meetings.
    1.3. Requests to make deputations must be submitted to the attention of the President no less than 15 calendar days prior to the published date of the Council meeting, and shall state the purpose of the deputation and the action being requested of Council. The request to make a deputation must be accompanied by a written copy of the presentation and copy of any supporting material.
    1.4. Requests to make a deputation shall be reviewed by the Executive Committee. If determined to be relevant and appropriate to Council business, the Executive Committee shall schedule the deputation(s) for a Council meeting.
    1.5. In the interests of effective and timely decision making, the Council retains the right to limit the number of deputations by the same person(s), and the total number of deputations, which will be heard on a given topic.
    1.6. The Council retains the right to determine if the subject of the requested deputation is relevant to Council business, or whether it would be more appropriately addressed by management.
    1.7. A deputation shall be limited to two speakers and the presentation shall not exceed ten minutes in total.
    1.8. The chair may grant additional time and/or permit additional speakers if appropriate to the matter under consideration.
    1.9. At the end of the presentation, the chair may accept questions from Council members but only for purposes of clarification of matters arising from the matters addressed in the deputation. The presenter(s) may respond to the question but neither the presenter(s) nor the Council member(s) shall engage in debate or direct/indirect exchanges with each other or with any other persons present except for the purpose of posing, or responding to questions of clarification.
    1.10. Deputations shall be considered by Council in the context of its responsibility to act on behalf of the public as a whole.
    1.11. Unless the deputation requires immediate action by the Council, no action shall be taken by Council at the meeting at which the deputation is made. Council will provide a timely response to deputations.

Published: February 5, 2020
Dates Revised: May 29, 2020; Jun. 26, 2020; Sep. 18, 2020; Oct. 30, 2020; Nov. 6, 2020; Dec. 7, 2020; Mar. 5, 2021; Jun. 11, 2021; Aug. 10, 2021; Sep. 24, 2021; Jun. 10, 2022; Sep. 16, 2022, Dec. 2, 2022; Mar. 31, 2023; Sep. 22, 2023; Mar. 8, 2024; Dec. 6, 2024; Mar. 28, 2025; Jun. 20, 2025; Sep. 26, 2025; Dec. 12, 2025