

BRIEFING NOTE

TO: Board of Directors

FROM: Fazal Khan, Registrar

DATE: October 6, 2020

SUBJECT: 16.1 Strategic Plan Monitoring Report

☐ For Decision

☐ For Information

☒ Monitoring Report

Purpose:

To provide the board with a monitoring report on the Strategic Outcomes Policy, in accordance with the monitoring report schedule approved by the board.

CEO Interpretation and Evidence:

The Strategic Outcomes Policy (**APPENDIX A**) was passed by Council in October 2019. The information contained in this monitoring report represents compliance with a reasonable interpretation of the policy. This monitoring report covers from January 2020 to September 2020.

The strategic outcomes set out in policy have been combined with Council's 2020 – 2022 strategic plan (**APPENDIX B**). Targets on the Key Performance Indicators (KPIs) have been set to measure progress on the strategic outcomes. Achievements to-date on each strategy are described in appendix B. In some areas, KPI data will not be available until December 31, 2020.

Recommendations/Action Required:

To provide feedback to the Registrar on achievement of the policy as demonstrated by the monitoring report.

POLICY TYPE: STRATEGIC OUTCOMES

1-01 Strategic Outcomes Policy

Strategic Outcomes Policy (Our Vision)

We ensure the highest standard of vision care for all Ontarians.

Further, COO works to achieve the following more specific Strategic Outcomes:

1. **Accountable Professionals**
 - a. Practice standards and guidelines exist which are reflective of technology and changing patient preferences.
2. **Public Trust**
 - a. Public trust exists through an excellent governance framework and effective organizational processes.
 - b. Collaborative relationships with stakeholders exist that demonstrate effectiveness and trustworthiness.

Definition:

For the purposes of this policy 'stakeholders' are defined as including, the public, registrants, COO employees, the government, peer regulators, and others who have an interest in effective health regulation.

COO Strategic Plan 2020 – 2022 Monitoring Report – October 2020

Strategic End – Accountable Professionals: Practice standards and guidelines exist which are reflective of technology and changing patient preferences.					
1.0 Goal Statement: To modernize how the College regulates the dispensing of eyewear in light of changing technology in the practice environment and changing patient preferences.					
Strategy	Key Performance Indicators (KPIs)	2020 Targets	Evidence Data	Achieved	Action Item Achievements/Challenges
1.1 Update the Standards of Practice, which Include Guidelines for Online Dispensing, Emerging Technologies and Telepractice	% of ROs who indicate they know about and adopt the updated standards	60% of RO respondents	Survey conducted on Return to Practice Guidelines, May 29, 2020: <ul style="list-style-type: none"> 677 ROs (96% of respondents) said they familiarized themselves with the Return to Practice Guidelines 298 ROs (49%) were planning to delay services or engage in remote practice. 259 ROs (42%) were planning to do so only in some circumstances 325 ROs (54%) indicated no barriers to remote practice, 196 (32%) unsure, 84 (14%) identified barriers 	✓	<ul style="list-style-type: none"> Standards of Practice Approved by board in December 2019, included a standard on telepractice/remote practice. The COO collaborated with Optometry to ensure consistency between Standards Completed extensive stakeholder feedback, including focus groups with industry, associations and ROs Emergency Practice Guidelines developed (April 24, 2020) and continually updated during pandemic lockdown. Guidelines around remote practice allowed ROs to continue to provide essential services to patients during pandemic lockdown. Return to Practice Guidelines developed (May 13, 2020) when medical directive lifted allowing ROs to practice with certain requirements. Continually updated as the situation unfolds and translated into French. Webinar conducted to introduce the return to practice guidelines, which was attended by 171 ROs. Delegation and refraction Standards of Practice to be considered by the Board at October meeting. Proposals obtained from public polling companies to address additional KPIs in 2021
	% of ROs who are offering remote services/telepractice	n/a (<i>Collect data in 2020 to establish baseline</i>)	N/A	N/A	
	# page views on standards section of website	2000-page views	1053-page views on SOPs, emergency and return to practice guidelines in 5 months (from April 15 – Sept 23)	↑	
	% of patients who are using telepractice for EG and CL	n/a (<i>Commission public poll in 2021</i>)	N/A	N/A	

LEGEND

✓ - Achieved

↑ - Positive trend, not yet achieved

X - Not achieved in timeframe anticipated

NA - Not yet applicable/data not yet available

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1.2 Review and Update the Quality Assurance Program and practice resources for Opticians to ensure they reflect the competencies that opticians need to dispense safely in the changing practice environment	# of hours of new professional CE developed by the COO	4 CE hours	New Accredited Jurisprudence Modules: 3 New Accredited COO Presentations: 3.5	✓	<ul style="list-style-type: none"> Updated Quality Assurance Program approved by board in December 2019. In its redesign of the program, the QAC obtained feedback from ROs on multiple occasions. The new program includes a new category of CE called professional growth (PG) which will allow the College to provide continuing education to ROs on topics that reflect changes in the practice environment and patient needs New jurisprudence modules created this year include: Communications, RHPA, Diversity, Equity and Inclusion New COO presentations delivered this year include: College update, Return to Practice Guideline Presentation/Webinar In addition to new CE, further practice resources include: Standard 7 – Remote Practice and Technology and a blog post on telepractice and professional judgment.
	# of hours of new professional CE developed by the COO undertaken by opticians	1500 total CE hours	N/A - Evidence not available until after CE deadline of December 31, 2020	N/A	
	# of practice resources developed relating to new technologies	1	2	✓	
1.3 Build on risk of harm research to inform risk-based policy and decision making	# of College functions/processes adopting the risk of harm data into decision-making frameworks or policies	1	1	✓	<ul style="list-style-type: none"> Standards of practice were updated having regard to by environmental scan, stakeholder feedback and a consideration of risk of harm/professional judgment when opening up standards to remote practice/technology Additional environmental scans/literatures reviews conducted for the following program/policy amendments: removing gender from register, disclosure of criminal charges, vulnerable sector checks, Canadian experience and registration, CE accreditation
	# of enviro scans, literature reviews, research studies commissioned	3	7 program/departmental scans completed to-date	✓	

LEGEND

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Strategic End – Public Trust

Public trust exists through an excellent governance framework and effective organizational processes.

2.0 Goal Statement

To transform our governance framework and organizational processes to increase efficiency and public trust.

Strategy	Key Performance Indicators (KPIs)	2020 Targets	Evidence Data	Achieved	Action Item Achievements/Challenges
2.1 Create and explore synergies among Ontario health regulators and regulatory functions	# of processes/policies streamlined	n/a (<i>Targets to be set in 2021</i>)	N/A	N/A	<ul style="list-style-type: none"> Two collaboration issues brought to HPRO, one was tasked to a working group (universal governance training) and the COO has been exploring the concept of a website/joint register Staff participated in HPRO governance working group Staff presented to management team at College of Social Workers on our journey with relational service standards The COO has invited the CNO to present to the board on its own governance efforts Collaborated with Optometry on updated standards Board Chair, Vice-Chair and senior staff attended CNAR regulatory conference for second year Registrar presented to CNAR on disruptive technology and its impact on regulation/standards of practice, which was the first ever COO presentation at a regulatory conference. Embarked on two exploratory projects in the area of collaboration. 1) An integration consulting firm has been retained to provide an assessment on the COO's readiness to collaborate with one or more other regulatory Colleges (project to conclude this fall). 2) The College is also involved in a series of back-end/operational collaborative projects with a number of other regulatory Colleges in the domains of shared HR services, shared data collection/methodology and shared procurement
	\$ operational budget savings	n/a (<i>Targets to be set in 2021</i>)	N/A	N/A	

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2.2 Transform and Streamline Board Governance in accordance with Provincial, Canadian and global best practices	# of governance reforms adopted	3	3, with 1 pending at October meeting	✓	<ul style="list-style-type: none"> Environmental scan completed by Governance Committee, continual environmental scanning updates being provided to the board Support letters sent to Ontario and BC Governments, respectively, regarding the CNO and Harry Cayton reports Reform 1 and 2: At February 2020 meeting, board approved by-law change for 3-year cooling off period for association members and changes to terminology for Board and its officers and updated board director code of conduct Reform 3: At July 2020 meeting, board approved a pre-election training module policy which requires board election candidates to complete College training to become eligible for elections (required in 2020 election) Pending reform: In October 2020, board will be considering opening up appointed committee positions to non-ROs The board continues to refresh its governance policies in line with its governance framework Board approved updated Committee terms of reference updated for Executive, Governance and will consider updated terms for ICRC, Discipline and Patient Relations in October 2020. Clinical Practice, Registration and QA terms are in development
	% improvement in public trust on pre- and post-reform survey	n/a (<i>Establish baseline in 2020</i>)	N/A	N/A	

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COO Strategic Plan 2020 – 2022 Monitoring Report – October 2020

Strategic End – Public Trust Collaborative relationships with stakeholders exist that demonstrate effectiveness and trustworthiness.					
3.0 Goal Statement To enhance the College’s effectiveness and trustworthiness through improved stakeholder awareness and engagement.					
Strategy	Key Performance Indicators (KPIs)	2020 Targets	Evidence Data	Achieved	Action Item Achievements/Challenges
3.1 Ensure that College communications are transparent, relational and accessible	Comparison in relational audit results pre and post	Improve relational rating from 2.8 in 2015 to 3.5 in 2020	NA - Relational audit currently in progress	N/A	<ul style="list-style-type: none"> Growing social media presence established, capturing College messaging and program/policy updates Revamped COO website launched in April 2020 Engaging ROs in second relational regulation audit, which will conclude this fall SEO project launched August 2020 Blog posts launched (to-date: 2 directed to ROs, 1 to public, 2 in-progress) Staff training on relational communications completed Internal style guide developed to ensure consistent and relational communications 2019 comparison data not available; 2020 data will be used to establish baseline for 2021
	# of views to College media, social media	Social media likes + shares: 5% increase from 2019	Total social media impressions from Jan – Sept 2020: 46,092 Instagram: 557 followers; 1121 engagements Facebook: 254 followers; 2906 engagements Twitter: 72 followers; 473 engagements *2019 comparison data not available*	↑	
	% of positive feedback received to the communication initiative	n/a (<i>Establish baseline in 2020</i>)	N/A	N/A	
3.2 Increase opportunities to engage the public	# of unique page views on public-facing website section	150 views	10,629 in 5 months (from April 15 – Sept 23)	✓	<ul style="list-style-type: none"> One topic presented to CAG to date (return to practice guidelines). It is anticipated that upcoming draft standards on delegation will be circulated to CAG, along with a request for feedback on the College website. Pop-up survey will be added to gather feedback on functionality of new website Continued investigation for additional avenues for engagement
	Public response rates to consultations	n/a (<i>Establish baseline in 2020</i>)	N/A	N/A	
	Increase in number of complaints	+2 more public complaints than 2019	Complaints from public 2019 – 14 Complaints from public to Sept 23, 2020 – 12 Evidence will be available after December 31, 2020	↑	

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3.3 Enhance College Board and Committee Effectiveness and Trustworthiness	Perception of board effectiveness by stakeholders, compared to board self-evaluation/workplan	n/a (<i>Establish baseline in 2020</i>)	N/A	N/A	<ul style="list-style-type: none"> • Comprehensive training to Board in February 2020, topics include diversity and inclusion, governance, conflict of interest and fiduciary duties, and updates on regulatory trends • Additional board training sessions in 2020 included meeting facilitation training, communications, financial and governance monitoring reports • Pre-elections training module policy approved in July 2020, requiring candidates for election to complete training module in order to be considered eligible • In February 2020, the board approved a bylaw which would disqualify board and Committee members if not in compliance with QA requirements (effective 2021). • Competencies added to board elections and appointed recruitment process • Board workplan and progress available publicly in board materials and on the College's website • Board reviewing its self-evaluation tool in October 2020, the tool proposed will permit comparability with other similar boards • Updated terms of reference for all committees is in progress
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Strategy	Key Performance Indicators (KPIs)	2020 Target	Data Evidence	Achieved	Action Item Achievements/Challenges
3.4 Enhance QA program in order to improve trust and confidence in the College	% of registrants QA Program compliance	66% compliance	For the 2020 CRE (review of 2019 portfolios), 77% were in compliance	✓	<ul style="list-style-type: none"> Database project completed to allow CE upload to registrant portal, all ROs required to upload CE by December 31, 2020 (To-date, 824 registrants have uploaded to the portal) Database project completed allowing ROs to pay QA fees in portal Jurisprudence project in progress to allow test completion in portal
3.5 Improve the College's stakeholder engagement process	Response rates to College consultations	7% average response rate (based on 3083 ROs)	Average 2020 to-date: 9.97% High rate: 22.8% (Return to Practice Guidelines) Low rate: 0.68% (College By-laws)	✓	<ul style="list-style-type: none"> Amended stakeholder policy approved by Board in October 2019 Facilitated focus groups with associations, industry and registrants conducted for standards update Internal stakeholder resource guide in development
	Eblast open rates, number of click-throughs	Eblast open rate: avg 60%	Average eblast open rate: 71.4% Average click through rate: 15.3%	✓	

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