

Protecting the Public









# **ABOUT THE COLLEGE**

he College of Opticians of Ontario (COO) regulates the profession of Opticianry in Ontario. The COO is dedicated to supporting Opticians in their delivery of high quality, safe and ethical care to the public of Ontario. One of the ways the COO ensures high standards of care is by establishing standards and guidelines for opticians. It monitors and maintains standards of practice through peer assessment and remediation, investigates complaints against opticians on behalf of the public, and disciplines opticians who may have committed an act of professional misconduct or incompetence.

# **College Mission**

In carrying out its objects, the College has a duty to serve and protect the public interest through effective regulation of the practice of Opticianry.

# **College Vision**

To be recognized and valued as a progressive, accessible organization that ensures the public's right to quality vision care while providing accountable leadership in the self regulation of opticians.

# **College Values**

We strongly believe in and are committed to:

- Transparency
- Accountability
- Integrity
- Efficiency

# **About Opticians**

### Scope of Practice

The Opticianry Act,1991 is a distinct statute that deals specifically with issues pertaining to the regulation of Opticians. The practice of opticianry is the provision, fitting and adjustment of subnormal vision devices, contact lenses or eyeglasses. A member shall not dispense subnormal vision devices, contact lenses or eye glasses ... except upon the prescription of an Optometrist or a Physician.

# COUNCIL OF THE COLLEGE OF OPTICIANS OF ONTARIO 2016

# **Elected Members**

Balbir Dhillon, RO
Jeff Frenandes, RO
Ingrid Koeing, RO (President)
Neda Mohammadzadeh, RO
Bryan Todd, RO
Thomas Mike Smart, RO
Ed Viveiros, RO
Rob Verzina, RO

### **Public Members**

Susan Carlyle
Omar Farouk
Evelyn Hoch
David Milne (Vice-President)
Trudy Mauth
Joseph Richards
Gordon White

# **Appointed Non-Council Members**

John Battaglia, RO
Tai-Ming (Alain) Chow, RO
Peggy Dreyer, RO
Natalie Dalcourt, RO
Dorina Reiz, RO
Karen Maynard, RO







# COUNCIL OF THE COLLEGE OF OPTICIANS OF ONTARIO 2016



Ingrid Koenig, RO
President

# **President's Message**

aving served as College President in 2016, I have the privilege of presenting this review of our last year.

I would like to thank you for your support over the last 2 years. You helped make 2015 & 2016 memorable. I had the opportunity to work with a productive council and staff, which enabled us to accomplish many important projects.

In keeping with the Ministry of Health and Long term care (MOHLTC) commitment to Ontarians to make information on health care practitioners more easily attainable, Council agreed to by-law changes to the public register. Ontarians will now be able to easily access and understand information on all opticians in Ontario.

Included in this is the registration status of all opticians. Members of the public will now easily be able to find opticians that who are entitled to practice the profession and those who are not.

Phase 2 of the Advisory Group for Regulatory Excellence (AGRE) initiatives to improve transparency was introduced and considered. Following the completion of Phase 1, the next phase was imminent. Changes include the decisions that Incidents, Complaints, and

Reports committee (ICRC) make. A members criminal findings relevant to practice, licenses in other jurisdictions and remediation programs implemented are among some of the changes.

As part of the College's ongoing goal to ease of access and transparency, council meeting materials continued to be offered prior to meetings for those interested. Following each meeting ratified minutes and meeting summary notes are available. Webinars of all council meetings were also available to members, stakeholders and the public.

A self-evaluation was built and implemented at the end of 2016. The need to measure the effectiveness and efficiency of council as a governing body was identified in our strategic plan. This project was tasked and completed by the Governance committee. Their work on this project is commended.

I look forward to continuing our efforts to keep Ontarians at the forefront of our decision making and trust we ensure the highest standards of practice and professionalism when serving them.



# **Executive Committee**

### Strategic Plan

In January of 2015 Council approved a comprehensive 3-year Strategic Plan built upon the College's values of transparency, integrity, accountability and efficiency. The Strategic Plan contains deliverables around (5) core strategies: Transparency and Effective Communication, Illegal Dispensing, Member Relations, Collaboration and Operations. Each section includes a set of deliverables to ensure that overall key performance indicates are coupled with measures of success. To date, there are multiple initiatives that are on-going in each of 5 core strategic plan areas that are including but not limited to: the Development and publishing of guidelines regarding discretionary disclosure of information, continuous improvement of the online member renewal portal, attendance of specified networking opportunities and events; especially those engaging the public and continuing to educate members on the Colleges Quality Assurance Program.

## **Transparency Initiatives**

The Executive discussed participation in the Opticians Council of Canada (OCC), the Eye Health Council of Ontario, and in upcoming trade shows. The Committee also discussed the next phase of implementation of by-law amendments recommended by the Advisory Group for Regulatory Excellence (AGRE).\*

Council adopted AGRE's 8 transparency principles as a guide to future decision making on what information to make public. One of the key transparenc y principles is that there must be consistency between the colleges about the information that they share about their members.

AGRE has developed a 2 phase approach to providing more information on the public registers of health colleges. Phase 1 covers information pertaining to Date of referral to discipline committee, full notice of hearing and non-members practicing illegally. It is important to note that a majority of colleges have at least by-law approval for phase 1 initiatives, with most being fully implemented.

Phase 2 initiatives primary occur at the College level. Discipline and the posting of hearings was a large area of discussion for Phase 2.

The committee received an update on the abovementioned AGRE by-law amendments and also reviewed committee composition in light of recent changes in a member's time availability.\*

## **Interprofessional Collaboration**

The College of Opticians continues engaged in a collaboration with The College Optometrists. Both Colleges continue to work collaboratively on a variety of issues. This includes the development of a joint common guideline regarding records retention custody where optometry and opticinry are working in a joint practice environment.



Ingrid Koenig, RO President

Ingrid Koeing, RO Elected Member (Chair)

David Milne Vice Chair

Omar Farouk Public Member

Thomas (Mike) Smart, RO Elected Member

Bryon Todd, RO Elected Member



# INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

#### **Committee Mandate**

The Inquiries, Complaints and Reports Committee (ICRC) investigates all written/recorded complaints regarding the conduct or actions of a member of the College of Opticians of Ontario. The Committee endeavours to conduct thorough investigations in a fair and efficient manner and makes reasonable and fair decisions. The ICRC also investigates and, where evidence gathered warrants it, recommends prosecution in matters involving unauthorized practice.

#### **Committee Activities**

In 2016, the Committee, as a group, met 4 times; Panel 1 held three in-person meetings and one teleconference; Panel 2 held four in-person meetings; and, Panel 3 held one in-person meeting.

# Nature of Formal Complaints Filed in 2016

- 17 Quality of eyeglasses and/or contact lenses
- 17 Unprofessional behavior /conduct
  - 1 Insurance fraud
  - 1 Delegating a controlled act in contravention of the regulations
  - 1 Holding out as an optometrist and performing eye examinations
  - Breaching the Refraction Standard of Practice
  - 1 Failing to satisfactorily complete the College's quality assurance requirements

# Nature of Registrar's Reports Initiated in 2016

- 19 Failing to satisfactorily complete the College's quality assurance requirements
  - 1 Using the doctor title, performing eye examinations and dispensing prescription eyewear based upon the results of those examinations, and contravening the College's Standards of Practice



Bryan Todd, RO Elected Member (Chair)

Omar Farouk Public Member (Vice-President)

Ingrid Koeing, RO Elected Member

Neda Mohammadzadeh, RO Elected Member

Ed Viveiros, RO Elected Member

Thomas (Mike) Smart, RO Elected Member

Evelyn Hoch Public Member

Joseph Richards Public Member

Dorina Reiz, RO Appointed Member

# **Committee Highlights**

As part of the College's ongoing commitment to transparency, proposed changes to the College by-laws were brought forward by the ICRC to Council and were approved. As of January 1, 2017, all decision and reasons completed by the ICRC that require a member to receive an oral caution and/or SCERP will have a summary of the disposition posted to the College's public register.

The ICRC strives to be transparent, consistent and objective in its decisions. For that reason, in 2016, a Risk Assessment Tool was developed as a resource to assist panels of the ICR Committee in the decision making process. The outcomes of these decisions are detailed below.

#### 2016 Statistics



# **Complaint and Report Issues**



# **2016 ICRC Case Dispositions**Resolved Complaints and Reports

19	Take No Action
1	Advice Recommendation
1	Written Caution
13	Oral Caution & SCERP
4	Oral Caution
1	Referred to Discipline

# Referrals from the Quality Assurance Committee (QAC)

In 2016 the ICRC received 21 referrals from the QAC. The referrals related to members who failed to respond or comply with a direction of the QAC and/or complete their professional portfolios. The ICRC ordered 13 SCERPs and oral cautions as well as two prosecutorial viability assessments.

#### **Unauthorized Practice**

On occasion, the College receives information about individuals who are not registered with the College but who refer to themselves as Opticians who are entitled to practice in Ontario.

While there is no authority to investigate these persons under the *Regulated Health Professions Act*, the College firmly believes that it has an obligation to do so in order to protect the public. The College will continue to prosecute individuals and corporations that permit or encourage unauthorized practice. In 2016 the College investigated 19 cases of unauthorized practice. Eight have gone to prosecution and the remaining cases were either concluded without evidence or the investigations are ongoing.

#### **Unauthorized Practice**

19	Files investigated
9	Files Closed (No further action)
8	Files gone for Prosecution

# The Health Professions Appeal and Review Board (HPARB)

The Health Professions Appeal and Review Board (HPARB) is an agency of the government, independent of the College that is responsible for reviewing the decisions of the Inquiries, Complaints and Reports Committee regarding complaints. Both the person who made the complaint and the registered optician who is the subject of the complaint may request a review by HPARB. In 2016, HPARB confirmed all three decisions of the ICRC panel put before it.

# Health Professional Appeals & Inquiries Board (HPARB)



# **QUALITY ASSURANCE COMMITTEE**



Omar Farouk Public Member (Vice-President)

Bryan Todd, RO Elected Member (Vice-Chair)

Omar Faouk, RO Public Member

Dorina Reiz, RO Appointed Member

Ingrid Koeing, RO Elected Member

David Milne, RO Public Member he Quality Assurance (QA) Committee is responsible for developing and maintaining a Quality Assurance

Program to ensure the provision of optimal care to the public, and to promote continuing education and quality improvement among its members. The Regulated Health Professions Act, 1991, requires that the QA program include a self, peer and practice assessment. The Act further requires that the College monitor member participation and compliance with the OA program.

Under the College's Quality Assurance Program, all members are required to maintain a Professional Portfolio each year to document and reflect on their ongoing learning and professional development.

# 2016 Competency Review and Evaluation (CRE) Process

The Competency Review and Evaluation (CRE) is one component of the College's Quality Assurance Program. The CRE is designed to assess member knowledge, skill and judgement, and to provide feedback to opticians in order to encourage practice improvements. The CRE involves submission of a Professional Portfolio, and participation in the Multi-Source Feedback (MSF) process. The MSF requires that a members' patients and colleagues to complete of practice surveys about the member's performance. Following submission of the Portfolio and MSF,

some opticians may require a more in-depth, focused, practice assessment.

In February, 480 members received notice that they had been randomly selected for the Competency Review and Evaluation (CRE) Process. Of these, 240 members were randomly chosen to participate in Stream One and 240 members were randomly chosen to participate in Stream Two:

### **Stream One**

Members were required to submit their 2015 Professional Portfolio to the College by March 31.

### **Stream Two**

Members were required to submit their 2015 Professional Portfolio to the College by March 31 and participate in the Multi-Source Feedback (MSF) by April 25.

Of the members who participated, 203 successfully completed the portfolio. 69 members completed the accredited continuing education requirements, but submitted incomplete portfolio forms. 187 members submitted portfolios which were deficient in terms of completion of accredited continuing education activities.



#### **Portfolio Form Revisions**

Taking into consideration the feedback the College received from members about the Professional Portfolio forms and the Committee's experience with reviewing the portfolios in 2015, a number of improvements were made to two of the Professional Portfolio forms which require members to record their accredited and unaccredited learning activities. The forms are now also electronically fillable.

#### **Pro-rated Continuing Education**

At its meeting on May 17, 2016, the QA Committee clarified its policy on the CE that all new members are required to complete upon registration. The Committee policy states that new registrants must complete the QA requirements within 12 months of registration with the College. The Committee created a table to help guide new registrants about how to go about completing the requirements. Starting on July 1, 2016, new registrants will complete a requisite number of accredited and unaccredited CE depending on when in the year the member is registered. Following this rubric, each new member will have completed 16 hours of CE within 12 months of registration in accordance with the current policy.

### **Jurisprudence and Sexual Abuse Module**

As part of the QA program, all members are required to complete the Jurisprudence and Sexual Abuse module every three years. The tool is designed to support opticians in understanding their obligations around professional boundaries, and to help members develop ways to prevent the crossing of professional boundaries, including those related to sexual abuse. The Jurisprudence

handbook and bank of test questions, developed by the Patient Relations Committee, was provided to the Quality Assurance Committee for administration.

The Jurisprudence Module was launched on the College's website in March 2016. Members were advised by email; and updates and instructions about the module were shared at the spring continuing education events. An article was also published in the fall electronic newsletter.

#### **Peer and Practice Assessments**

The onsite practice assessment includes a behavioural-based interview, a chart review, and an inspection of the dispensary. The practice assessment is a tool used by the QA Committee where other steps in the QA process have not adequately demonstrated the competence of a member. Seven practice assessments were conducted this year.

## **Continuing Education (CE) Accreditation Policy**

The Quality Assurance Committee, in consideration of several recent trends in CE provider accreditation, decided to make further amendments to its Accreditation Policy. The amended policy was approved by Council at the September 28, 2016, meeting.

#### Accreditations

The QA Committee continues to work via email, utilizing the COO Virtual Boardroom in order to review accreditation requests generated by providers of continuing education courses. In 2016, The Quality Assurance Committee has accredited 66 continuing education courses.

# **GOVERNANCE COMMITTEE**



Evelyn Hoch Public Member (Council Chair

Natalie Dalcourt Appointed Member (Vice-Chair)

Neda Mohammadzadeh, RO Elected Member

David Milne Public Member

Omar Farouk Public Member

Dorina Reiz, RO Appointed Member The Governance Committee assists the Council to govern the College effectively. The Committee ensures that council fulfills its legal, ethical and functional responsibilities through adequate policy development, Council development strategies, training programs, the monitoring of Council activities and evaluation of Council and Committee performance.

#### **Committee Work**

In 2016, the Committee put forward a range of proposed amendments to the College By-laws to Council for their review. The Committee, with the help of administration, addressed sections of the By-laws that required revisions. The Committee worked diligently to ensure that any sections of the By-laws that required revision were addressed. Some of the By-law amendment discussions revolved around issues pertaining to Elected Council Members, Committee Composition, Committee Appointments and Remunerations. All By-law changes proposed by the Committee were given

to the membership and stakeholders for feedback prior to a final amended draft being submitted to Council for approval. The Committee reviewed and discussed all feedback received. The By-laws and the creation of Council Self-Evaluation assessments were produced and implemented in 2016. Some of the areas explored in the assessment evaluated Council to Registrar communication streams and efficiencies as they relate to deliverables and feedback and how to evaluate potential risk areas so mitigation strategies and programming can be accurately implemented.

The Committee in conjunction with a Governance Consultant had developed a Council self-assessment survey, as required by the College Strategic Plan1. The surveys were launched at the December 5th 2016 Council meeting. The Committee will continue to address amendments to the By-laws and any other governance related matters in the upcoming year.





# **DISCIPLINE COMMITTEE**



Robert Vezina, RO Public Member (Chair)

Natalie Dalcourt, RO Appointed Member (Vice-Chair)

Balbir Dhillon, RO Elected Member

Jeff Fernandes, RO Elected Member

Neda Mohammadzadeh, RO Elected Member

Ingrid Koeing, RO Elected Member

Thomas (Mike) Smart, RO Elected Member

Bryan Todd, RO Elected Member

Ed Viveiros, RO Elected Member

Susan Carlyle Public Member

Evelyn Hoch Public Member Omar Farouk Public Member

Trudy Mauth Public Member

David Milne Public Member

Joseph Richards Public Member

Gordon White Public Member

John Battaglia, RO Appointment Member

Tai-Ming (Alain) Chow, RO Appointed Member

Peggy Dreyer, RO Appointed Member

Dorina Reiz, RO Appointed Member

he Discipline Committee is responsible for hearing and determining allegations of professional misconduct or incompetence referred to it by the Inquiries, Complaints and Reports Committee. The Discipline Committee protects the public by determining whether opticians have committed professional misconduct or are incompetent, and, if so, determining the action that will best protect the public. Depending on the matter, the panel's action can be a range of penalties, including fines, a reprimand, suspension or revocation of a member's certificate of registration. If a Discipline panel believes the commencement of the proceedings is unwarranted, it may make an order requiring the College to pay all or part of the member's legal costs. In appropriate cases, and where there is a finding of professional misconduct or incompetence, a panel may make an order requiring the member to pay all or part of the College's costs and expenses.

In 2016, the Discipline committee held two discipline hearings into allegations of professional misconduct. The Decision and Reasons for John Eikeland and Ramy Marco are posted on the College's website.

No prehearing conferences were held in 2016.

### **Hearings and Prehearing Conferences**

There were two discipline hearings held in 2016. All hearings resulted in findings of professional misconduct against the members. The Decision and Reasons for one of the findings are posted on the College's website along with an Order of the Discipline Committee for the other.

No prehearing conferences were held in 2016.

### **Committee Training**

Two Discipline Committee members attended discipline training through FHRCO in the spring of 2016. Five Discipline Committee members attended discipline training through FHRCO in the fall of 2016. New Discipline Committee members will attend discipline training at the next session in 2017.

# PATIENT RELATIONS COMMITTEE

he Patient Relations Committee develops programs and engages in other activities as assigned by the Council to enhance the relationship between members and patients. The Committee also advises Council on measures for preventing and dealing with sexual abuse of patients in accordance with applicable legislation and established rules and procedures.

#### **Committee Work**

In 2015 the Committee worked in collaboration with Richard Steinecke to develop the first chapter in what will be a comprehensive Jurisprudence Handbook to serve as a framework to guide optician members in ethical decision making. As an extension of this work in 2016, the Committee in conjunction with Richard Steinecke of Steinecke Macuira LeBlanc developed a module entitled "Record Keeping, Privacy and Confidentiality." The module contains relevant scenarios and key information for our members to build on the ethical guidelines, responsibilities, professional boundaries and decision making abilities within a practitioner space. The finalized handbook and accompanying test questions will be provided to the Quality Assurance Committee who will administer the test if requested.

In recent years, the Ministry of Health and Long-Term Care has placed significant focus on the prevention of and response to cases of sexual abuse of patients. On May 30, 2017, Bill 87, or the Protecting Patients Act, 2017 (S.O 2017 C.11)

(the "PPA") received royal assent. The PPA was designed to strengthen the Ministry's stated zero tolerance policy on patient sexual abuse by any member of a regulated health profession. Keeping in line with the Ministry's commitment to preventing and responding to cases of sexual abuse of patients, the Committee collaborated with Richard Steinecke to develop literature around sexual harassment entitled "Sexual Harassment in the Workplace." This literature was accompanied by test questions that will be added to the Jurisprudence and Sexual Abuse Handbook and will be provided to the Quality Assurance Committee who will oversee the implementation of the books contents. The College mandated that the Sexual Abuse Handbook be a permanent part of continued Education for Opticians in addition to solidifying it as a fixture of Quality Assurance programming.

The College collaborated with the College of Opticians of British Columbia (COBC) and the College of Opticians of Alberta (COA) to become more relational in our mission to regulate opticianry and protect the public. The Patient Relations Committee reviewed research conducted by Outsidein Communications and determined that the re-implementation of a members' needs assessment every three years was necessary to maintain the regulatory standards identified in the Outsidein report. Multiple initiatives were brought forward and are being evaluated for their effectiveness and necessity for the 2016/2017 year.



Peggy Dreyer, RO Appointed Member (Chair)

David Milne Public Member (Vice-Chair)

Jeff Frenandes, RO Elected Member

Tai-Ming (Alain) Chow, RO Appointed Member

Susan Carlyle Public Member

# **REGISTRATION COMMITTEE**



Robert Vezina, RO Elected Member (Chair)

Tai-Ming (Alain) Chow, RO Elected Member (Vice-Chair)

Jeff Fernandes, RO Elected Member

Balbir Dhillon, RO Elected Member

Evelyn Hoch Public Member

David Milne Public Member

Joseph Richards Public Member

Natalie Dalcourt, RO Appointed Member

John Battaglia, RO Appointed Member he Registration Committee is responsible for reviewing and assessing all applications that do not meet the requirements for registration or that are referred to it by the Registrar. The Committee may require that applicants undergo additional education, assessment or examination requirements, or it may impose terms, conditions and limitations on a certificate of registration. The Committee also recommends proposals to Council for changes to registration-related regulations, by-laws, policies and the programs that support the registration processes.

#### **Committee Work**

In 2016, the Registration Committee had three in-person meetings and four teleconferences. Eight PLAR interview days were also conducted. The Registration Appeal Panel (RAP) did not meet.

# Registration Regulation

The Registration Regulation sets out all the requirements for obtaining and maintaining a certificate of registration for all classes of licensure with the College of Opticians of Ontario.

The Registration Committee continued its work on a revised draft of the Registration Regulation.

A first draft of the regulation was circulated for 60-day stakeholder feedback in the fall 2015. Following a review of the feedback, the Registration Committee decided to make a number of changes to the proposed draft. A second draft of the regulation was approved by Council its meeting on May 30, 2016 and was circulated a second time for a 90-day stakeholder consultation which ended on November 9, 2016. The Registration Committee has considered the results of the feedback and at its meeting on December 13, 2016, and has agreed to a final draft of the regulation.

As requested by Council at its meeting on December 6, 2016, the Registration Committee also considered whether to include a section in the Registration Regulation which would allow suspension of membership at annual renewal on the basis of quality assurance noncompliance. The Committee considered this issue and obtained legal advice that such a provision was unlikely to be supported by the Ministry of Health and Long-Term Care. Accordingly, the Committee did not propose an amendment to the Regulation in this regard.

The Committee will seek Council approval of the final draft regulation at its meeting on January 30, 2017.



# Policy Dealing with Convictions, Findings and Ongoing Proceedings

The Policy Dealing with Convictions, Findings and Ongoing Proceedings provides guidance to applicants on how a "yes" response to the declaration of conduct questions in the registration application forms will affect the applicant's request for registration. Following a by-law change approved by Council as part of the College's transparency initiative, the Registration Committee amended this policy to ensure that the process is transparent to applicants. The by-law change specified that certain information relating to convictions, bail conditions and findings of professional misconduct, incompetence and incapacity disclosed by registration applicants may be published on the Register. The amended policy was approved by council at its meeting on September 28, 2016.

# Prior Learning Assessment and Recognition (PLAR) Process Review

All applicants from non-accredited programs (Canadian or internationally educated applicants) must undergo the prior learning assessment and recognition (PLAR) process as a route to registration. The PLAR process includes completion of a Competency Gap Analysis (CGA), which is an online tool designed to assess the applicant's achieved learning outcomes against the National entry to-practice competencies, and an in-person, Behaviour-Based Interview (BBI) which assesses an applicant's practical knowledge.

With the assistance of NACOR and a psychometric consultant, the College has completed work on a scorecard designed to assist Committees in understanding the relative weight of interview scores and CGA scores and how these assessment components should be taken together and interpreted for the purpose of the Registration Committee assigning educational bridging programs.

The College is in the last phase of the project which involves developing, pilot testing and validating a second test CGA form to increase our bank of questions. Pilot testing of the questions will take place in January and validation by the National Exams Committee (NEC) will occur in February 2017. The project will be complete by March 31, 2017.

### Bylaw Recommendation - Registration Transparency Initiatives

On May 2, 2016, as part of the AGRE transparency initiative, the Registration Committee made a recommendation that Council amend the by-laws to allow the College to post on the public register 1) criminal findings of guilt relevant to practice, and 2) information about a member's registration or license to practice in a profession in another jurisdiction. Council agreed to circulate the proposed by-law changes to stakeholders. At its meeting on November 16, 2016, the Registration Committee considered the stakeholder feedback relating to these two proposed by-law changes and has made recommendation to Council to approve the by-law changes. These by-law amendments were approved by Council at its December 5, 2016, meeting.

# **REGISTRATION COMMITTEE, (Cont'd)**

#### **Bylaw Recommendation – Fees for registration**

The Registration Committee regularly reviews its internal processes to ensure ongoing fairness and transparency. To this end, the Committee considered the fees associated with Registration Committee review and competency assessments. The Registration Committee made two recommendations for amendment regarding fees for suspended members who wish to reinstate after a period of three years. These recommendations are being brought forward for Council consideration at its meeting on May 30, 2016. Following a stakeholder consultation, these by-law amendments were approved by Council at its December 5, 2016, meeting.

#### **Non-Practising Status and Resignation Policies**

At its meeting on May 2, 2016, the Registration Committee approved two policies relating to member registration statuses with the College, which are meant to improve clarity and transparency for the public. The Non-Practising Status Policy will allow members who are not in practice and who sign an undertaking to that effect to maintain a certificate of registration as a registered optician with an exemption to the professional liability insurance requirement. The Resignation Policy provides guidance to members who are no longer practicing as an optician in Ontario and who would like to retire or resign their certificate of registration. The policies were approved by Council at its meeting on May 30, 2016.

#### **NACOR Accreditations**

One of NACOR's main objects is to develop quality benchmarks for accreditation standards, and develop, coordinate and manage a national accreditation process for opticianry programs across Canada. In accordance with the Registration Regulation, the Registration Committee has agreed to accept the recent NACOR opticianry program accreditation recommendations and approves the following opticianry programs as equivalent programs at its meeting on August 5, 2016: Georgian College, Seneca College, Northern Alberta Institute of Technology, Douglas College (until December 31, 2021) and Oulton College, College Communautaire de Nouveau Brunswick (until May 31, 2019).

At its meeting on December 13, 2016, the Committee approved the following opticianry programs as equivalent programs: Steinberg College (until November 30, 2019), and Northern Alberta Institute of Technology Eyeglass Program – French (until November 30, 2019).

Graduates of these programs are considered eligible for registration with the COO as Registered Opticians and Intern Opticians, provided that they meet all other requirements for the class of registration.

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Graduates of these programs are considered eligible for registration with the COO as Registered Opticians and Intern Opticians, provided that they meet all other requirements for the class of registration.

#### **Registration Timelines Policy**

In response to some of the changes that have occurred in the Registration department over the last several years, the Committee amended its Registration Timelines Policy to ensure that it the timelines for registration are more accurate and transparent for applicants. This policy was approved by Council at its September 28, 2016, meeting.

### **Contact Lens Fitting Policy**

It is a regulatory requirement that applicants complete a number of contact lens fits prior to registration as a registered optician. Following a consultation with accredited educator stakeholders, the Registration Committee approved a policy at its December 13, 2016 meeting to clarify how contact lens fittings are completed by students as they work towards the requirements of becoming registered as Registered Opticians (RO) with the College of Opticians. This policy will be provided to Council for its consideration and approval at its January 30, 2017, meeting.

#### **Contact Lens Mentor Policy**

The Contact Lens Mentor Policy sets out the requirements for registered opticians who wish to supervise student contact lens fits and sign the student/intern logbook. Given the proposed Contact Lens Fitting Policy, at its December 13, 2016, meeting, the Registration Committee decided to make amendments to the Mentor Policy, which will be provided to Council for its consideration and approval at its January 30, 2017 meeting.

# **2016 STATISTICAL REPORT**

# **PLAR Applications**

24	Initial Inquiries Received in 2016
20	Internationally educated applicants
4	Applicants from non-accredited Canadian programs
0	No formal education
12	Applications Received in 2016
3	Internationally educated applicants
7	Applicants from non-accredited Canadian programs
2	Applicants with international and non-accredited Canadian education
0	No formal education
2	Applications from 2016 withdrawn, abandoned or on hold
	(i.e. no action taken on application in 6 months)
8	Applications Completed in 2016 (Decision and Reasons Issued)
7	Applicants required to complete bridging
	Applicants permitted to write the National Examination
0	Applicants refused
9	Applications in Process
	Applicants approved for PLAR, must write CGA
	CGA completed, Interviews pending
	Applications pending initial Committee review
0	Applications pending final Committee review
6	Applications with pending D&Rs
	Applications for reinstatement of suspended members (3+ years)
8	New applications received in 2016
2	Applications approved, pending completion of additional education
5	Applicants required to undergo competency assessment
0	Applications approved to reinstate
1	Applications in process
0	Requests for extension of Committee decision
	Applications for Supplemental Examination Attempt
2	New requests considered by Committee
2	Previously approved upgrading programs completed, additional attempt granted
0	Internal registration appeals
0	HPARB Appeals







#### **INDEPENDENT AUDITOR'S REPORT**

# To the Council of the College of Opticians of Ontario

We have audited the accompanying financial statements of the College of Opticians of Ontario which comprise the statement of financial position as at December 31, 2016 and the statements of revenue and expenditures, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

# Executive Committee's Responsibility for the Financial Statements

Executive Committee is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not for profit organizations, and for such internal control as council determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

#### **Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Opinion**

In our opinion, the financial statements present fairly, in all material respects, the financial position of College of Opticians of Ontario as at December 31, 2016, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for Not-for-Profit Organizations.

Toronto, Ontario May 29, 2017

Licensed Public Accountants Chartered Accountants

Sevett & Associates



# STATEMENT OF FINANCIAL POSITION

As at December 31, 2016

,	2016	2015 \$
ASSETS	\$	<b>→</b>
CURRENT		
Bank	2,352,979	2,240,412
Short-term investments (Note 3) Interest receivable	3,140,393	2,511,282
Prepaids	32,296	16,183
	15,648	16,189
	5,541,316	4,784,066
CAPITAL ASSETS (Note 4)	38,452	59,582
	5,579,768	4,835,607
LIABILITIES		
CURRENT		
Payables and accrued liabilities	116,046	55,631
Ontario Bridge funding payable	13,216	49,227
Harmonized sales tax payable	243,263	245,003
Deferred registration fees	2,071,410	1,450,744
	2,112,650	2,421,271
NET ASSETS (Note 2)		
Restricted		
Reserve for Funding of Therapy or Counselling	45,000	22,320
Unrestricted		
Invested in capital assets	38,452	51,541
Operating contingency	942,000	941,324
Unauthorized Practice contingency	700,000	400,000
Relocation contingency	85,582	500,000
General reserve	719,141	499,151
	3,094,593	2,414,336
	5,579,768	4,835,607



# **STATEMENT OF REVENUE AND EXPENDITURES**

For the Year Ended December 31, 2016

of the real Ended December 31, 2010	2016 \$	<b>2015</b> \$
REVENUE		
Opticians registration fees	2,436,231	2,305,165
Intern and student registration fees	35,516	32,532
Examination fees	132,311	121,800
Miscellaneous income	35,775	57,615
Interest income	45,573	32,108
	2,685,406	2,542,220
EXPENDITURES		
Amortization	18,068	21,683
Audit	12,500	12,250
Committee expenses	4,930	1,749
Communications	26,684	38,817
Computer maintenance, website and database hosting	66,792	60,010
Consulting	166,636	104,948
Council and committee - See schedule	120,064	136,086
Database	35,543	5,125
Education and development	3,605	3,919
Equipment rental and maintenance	16,411	16,973
External personnel	58,817	49,407
External relations	44,612	46,813
Extraneous legal expenditures	1,517	3,383
General office	150,139	126,068
Insurance	5,099	4,838
Investigator	14,553	17,324
Legal	112,054	139,348
Premises rent	158,263	162,424
Printing and postage	45,035	43,538
Quality assurance portfolio	36,905	47,571
Salaries and benefits	868,362	829,258
Seat fees and advertising	22,713	19,475
Telephone and fax	15,847	13,323
	2,005,149	1,904330
EXCESS OF REVENUE OVER EXPENDITURES	680,257	644,890

The accompanying notes form an integral part of these financial statements



# STATEMENT OF CHANGES IN NET ASSETS

For the Year Ended December 31, 2016

2016 201	5
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Res	Internally stricted Funds \$ \$	Invested in capital assets	Unrestricted Funds \$	Total	Total \$
Beginning of year	22,320	51,541	2,340,475	2,414,336	1,769,446
Excess of revenue over expenditure	22,680	(18,068)	675,645	680,257	644,890
Investments in capital assets	-4,979	(4,979)	-		-
End of year	45,000	38,452	3,011,141	3,094,593	2,414,336

### STATEMENT OF CASH FLOWS

For the Year Ended December 31, 2016

NET INFLOW (OUTFLOW) OF CASH RELATED	2016 \$	2015 \$
TO THE FOLLOWING ACTIVITIES		·
Operating		
Excess of revenue over expenditures	680,257	644,890
Amortization of capital assets	18,068	21,683
	698,325	666,573
Changes in non-cash operating working capital		
Interest receivable		(4,001)
Prepaids		(1,680)
Payables and accruals		(46,379)
Harmonized sales tax payable		81,089
Deferred registration fees	41,240	620,666
	746,657	1,316,268
Investing		
Purchase of capital assets	(4,979)	(13,642)
Purchase of short-term investments	(629,111)	(827,638)
	(634,090)	(841,280)
INCREASE IN CASH DURING THE YEAR	112,567	474,988
CASH, beginning of year	2,240,412	1,765,424
CASH, end of year	2,352,979	2,240,412

The accompanying notes form an integral part of these financial statements



### **NOTES TO FINANCIAL STATEMENTS**

December 31, 2016

#### **ORGANIZATION**

The College of Opticians of Ontario was incorporated without share capital as a not-for-profit organization under the laws of Ontario for the purpose of assuring public protection in the practice of opticianry and is responsible for administering and enforcing the *Regulated Health Professions Act* and the *Opticianry Act*. Accordingly, it is not required to pay income taxes.

#### 1. SIGNIFICANT ACCOUNTING PRINCIPLES

These financial statements have been prepared in accordance with Canadian accounting standards for not-for profit organizations and include the following significant accounting policies:

#### **Revenue Recognition**

The College follows the deferral method of accounting for registration fees. The College primarily receives revenue from annual registration fees from its members and is recognized as revenue in the calendar year as the current licensing fee. Deferred registration fees are represented by amounts received before year end for licensing in the next year. In addition revenue from examination fees are recognized in the year they are earned.

#### **Financial Instruments**

The College measures its financial assets and financial liabilities at fair value adjusted by, in the case of a financial instrument that will not be measured subsequently at fair value, the amount of transaction costs directly attributable to the instrument.

The College subsequently measures all its financial assets and financial liabilities at amortized cost.

Financial assets measured at amortized cost include cash, interest receivable and fixed income investments. Financial liabilities measured at amortized cost include payables and accrued liabilities and deferred registration fees.

### **Capital Assets**

The costs of capital assets are capitalized upon meeting criteria for recognition as a capital asset, otherwise costs are expensed as incurred. The cost of a capital asset comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Capital assets are stated at cost less accumulated amortization. Capital assets are amortized over their estimated useful lives at the following rates:

Furniture and fixtures	20% declining balance
Computer equipment	30% declining balance
Leasehold improvements	5 years straight line



December 31, 2016

#### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### **Measurement Uncertainty**

The preparation of the financial statements is in conformity with Canadian generally accepted accounting principles. This requires management to make estimates and assumptions that effect the reported amount of assets and liabilities and contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reported year. These estimates include the useful life of capital assets and accrued liabilities.

#### **Impairment of Long Lived Assets**

Long-lived assets are tested for impairment whenever events or changes in circumstances indicate that the carry amount of the assets may not be recoverable. An impairment loss is recognized when the carrying amount of the long-lived asset exceeds the sum of the undiscounted future cash flows resulting from its use and eventual disposition. The impairment loss is measured as the amount by which the carrying amount ofthe long-lived asset exceeds its fair value.



December 31, 2016

#### 2. NET ASSETS

The financial statements have been prepared in a manner which segregates net assets balances and have been allocated by Executive Council as follows:

RESTRICTED	<b>2016</b> \$	2015 \$
Reserve for Funding of Therapy or Counselling	45,000	22,320

Reserve for Funding of Therapy or Counselling represents amounts that have been allocated from general operations in order to comply with provincial regulations relating to financing of therapy or counselling sessions which may be required in cases of sexual abuse of patients by members.

UNRESTRICTED	2016 \$	<b>2015</b> \$
Invested in capital assets	38,452	51,541
Operating contingency	942,000	941,324
Unauthorized Practice contingency	700,000	400,000
Relocation contingency	650,000	500,000
General reserve	719,141	429,151
	3,049,593	2,392.016

Invested in capital assets represents the College's net investment in property which is comprised of the amount of its capital assets purchased with unrestricted funds.

All other allocations for specific contingencies were approved by the Executive Council.

#### 3. INVESTMENTS

The investments are held in an investment account with BMO Nesbitt Bums and comprise of eight separate Guaranteed Investment Certificates, each with maturity dates of one year from date of acquisition, which when combined total \$2,622,585 plus the remaining balance in a high interest savings account.

The financial statements include all accrued interest earned to December 31, 2016.



December 31, 2016

#### 4. CAPITAL ASSETS

		Accumulated	Net Bo	ok Value	
	Cost \$	Depreciation \$	2016 \$	2015 \$	
Furniture and fixtures	233,962	213,462	20,500	25,625	
Computer equipment	223,043	205,091	17,952	19,600	
Leasehold improvements	228,720	228,720		6,316	
	685,725	647,273	38,452	51,541	

#### 5. BANK INDEBTEDNESS

As at December 31, 2016 the College has an unused unsecured credit facility of a \$100,000 Operating Line of Credit at prime plus 1%.

#### 6. FINANCIAL INSTRUMENTS

The College is exposed to various financial risks through transactions in financial instruments. There is exposure to the following risks:

#### **Credit Risk**

Credit risk arises from the possibility that third parties may experience financial difficulty and be unable to fulfill their commitments. The College's maximum exposure to credit risk is represented by the carrying value of investments, bank and receivables.

All of the College's cash and investments are held with reputable Canadian financial institutions from which management believes loss through risk exposure to be minimal.

#### **Liquidity Risk**

Liquidity risk is the risk that the College many not be able to fund its obligations as they come due. The College manages its liquidity risk by monitoring its operational requirements to ensure financial resources are available.

#### **Interest Rate Risk**

Interest rate risk is the risk that the future cash flows of financial instruments will fluctuate because of changes in market interest rates. The College is exposed to interest rate risk on its investments.



December 31, 2016

#### 7. COMMITMENTS

The College has entered into agreements to lease its premises and office equipment for various periods. Subsequent to year end, a new premises lease was signed at a new location to commence on July 1, 2017 for a ten year period.

The annual rent of premises consists of a minimum base rent plus operating expenses, realty taxes and hydro charges for that period. Minimum base rent payable for premises and equipment in aggregate is as follows:

	Premises \$	Equipment \$	Total \$
2017	52,855	15,840	67,895
2018	105,710	11,280	116,990
2019	105,710	-	105,710
2020	105,710	-	105,710
2021	105,710		105,710
2022	112,918		112,918
2023	120,125		120,125
2024	120,125		120,125
2025	120,125		120,125
2026	120,125		120,125
2027	60,062		60,062
1,129,175		26,320	1,155,495

#### 8. CONTINGENT LIABILITY

The College is listed as a co-defendant in a Statement of Claim against it in the sum of \$1,500,000. This is being vigourously defended by the College and in the opinion of Management even should there be any potential liability that might be awarded at the resolution of the claim, there is sufficient insurance coverage to fully cover it.



# SCHEDULE OF COUNCIL AND COMMITTEE EXPENDITURES

For the Year Ended December 31, 2016

			2016	2015
	Honoraria	Expenses	Total	Total
Statutory / By-Law Comm	ittees			
Council	77,375	42,689	120.064	136.086
Discipline	4,975	8,375	13,350	14,884
Executive	4,650	1,454	6,104	10,072
Governance	3,044	262	3,306	2,066
ICRC / Complaints	10,567	6,250	16,817	10,471
Patient Relations	1,575	213	1,788	2,538
Quality Assurance	10,550	2,321	12,871	16,301
Registration	14,298	10,125	24,423	21,506
Ad-Hoc Committees				
Miscellaneous Ad hoc	974	974		9,955
	77,375	42,689	120,064	136,086



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