

EXECUTIVE COMMITTEE REPORT

September 2026 Executive Committee
Report to the Board of Directors

2026 Committee Members:

Kevin Cloutier, RO, Chair, Board Professional Member
Derick Summers, RO, Vice-Chair, Board Professional Member
Omar Farouk, Board Public Member
Stephen Kinsella, Board Public Member
Paul Imola, RO, Board Professional Member

Number of meetings since the June Board Meeting:

- One on September 14, 2026.

Report:

1. General Business

The Executive Committee heard the Registrar's Report and reviewed the September Board Meeting Agenda.

Committee assignment for the new public member

The Executive Committee reviewed the current committee slate and will bring a recommendation to the Board for committee assignments for Rose Cavaliere to the September meeting.

2. Exercise of Board Powers in Between Meetings

Under section 12 of the Health Professions Procedural Code, the Executive Committee has all of the powers of the Board for any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend, or revoke a regulation or by-law. Where the Executive Committee exercises this power, it must report on its actions to the Board at its next meeting.

The Executive Committee has not exercised its powers to act as the Board since the last meeting.

3. Finance Committee

Financial Statements

The Executive reviewed the financial variance reports to June 30, 2026.

Annual Auditor Assessment

The Executive Committee completed the Annual Auditor Assessment tool for 2025 and will bring a recommendation to reappoint the auditor to the September Board Meeting.

Update on Finance Automation Projects

The Executive Committee received an update on the finance automation projects, which are intended to strengthen financial oversight, reduce organizational risk, improve the timeliness and reliability of financial information, and support better management of College resources. The projects include: Bank Reconciliation Automation, Audit Readiness, Accounts Payable Automation & Board expense foundation; CRA and tax reporting; Revenue Recognition & Reconciliation, Board expense and honoraria processes Improvement.

Submitted by:

Kevin Cloutier, RO, Chair, Elected Member

REGISTRATION COMMITTEE REPORT

September 2026 Report to Board of Directors

Committee Members:

Derick Summers, RO (Chair), Board Professional Member
Parneet Dhillon, RO (Vice Chair), Professional Appointed Member
Alicia Munian, Board Public Member
Robert Quinn, RO, Professional Appointed Member
Maximilian Savorani, RO, Professional Appointed Member

Number of meetings since March Board Meeting:

- July 13, 2026
- September 3, 2026

Report:

Policy Reviews

The Registration Committee reviewed four policies outside of the regular review schedule this quarter for a variety of reasons: updates to reflect the Registration Regulation change, stakeholder feedback, a check-in with registrants on a new regulation requirement and its policy, and reviewing a new policy to provide transparency to the assessment of a registration requirement. The four policies reviewed were:

- Internationally Educated Applicant Policy
- Currency of Practice Policy
- Recent Practice Experience Policy
- Practicum Policy

Policy Review: Internationally Educated Applicant Policy

The Registration Committee recommended that the Internationally Educated Applicant Policy be rescinded and replaced with a new PLAR Policy to accurately reflect two changes:

- Changes to the [Registration Regulation](#), which made PLAR expressly available to all unaccredited applicants, as opposed to only those who were educated outside Canada; and
- Delegation of the administration of the Prior Learning Assessment and Recognition (PLAR) process to the National Alliance of Canadian Optician Regulators (NACOR) in 2025.

The new proposed PLAR Policy now focuses on how the Committee exercises their authority under the Registration Regulation, including its approval of NACOR's PLAR process, its criteria for determining program similarity and expectations for successful completion of PLAR. The proposed policy supports more transparent and defensible framework for decision-making.

The Committee recommended that the Board rescind the Internationally Educated Applicants Policy and approve the proposed PLAR Policy.

Scheduled Policy Review: Currency of Practice Policy

With changes to the Registration Regulation, Registered Opticians (RO) must have 500 practice hours over a rolling 3-year period in order to be considered current to practice. ROs are now in their second year of reporting currency requirements. Before the end of this first currency reporting period, the Registration Committee wanted to check in with registrants to determine whether any changes needed to be made to the Currency of Practice Policy.

After reviewing stakeholder feedback, a few changes are proposed to the policy:

- Two new activity categories added to the list of approved professional activities;
- Clarifying language on retaining supporting documents;
- Clarifying language on the deadline to complete the Refresher Program if a registrant does not anticipate achieving 500 hours; and
- Adding language if a registrant fails to meet currency by a specified deadline.

The inclusion of two new activity categories to the list of approved professional activities reflect the changing nature of an optician's practice. The other proposed changes provides clarity and transparency to registrants and the public as to how currency needs to be met and what is required for a Registered Optician to continue practicing.

The Committee recommended that the Board approve the proposed changes at its next meeting.

Policy Review: Recent Practice Experience Policy

A new Recent Practice Experience Policy was created to provide a transparent process to consistently assess recent practice experience for initial registration as a Registered Optician if the applicant's education and/or national examinations results are older than 18 months. The proposed policy lays out what information the applicant needs to provide so that their recent practice experience can be assessed. The proposed policy provides consistency and transparency to the applicant and the public as to what is considered for an initial Registered Optician application based on the above circumstance.

The Committee recommended that the Board approve the policy at its next meeting.

Scheduled Policy Review: Practicum Policy

The Registration Committee reviewed a proposed version of the Practicum Policy along with research and the results of stakeholder consultations. The Committee concluded that the policy required additional work before moving forward.

File Review

The Committee reviewed the following files:

- Upgrading proposals: 2
- Extension requests to complete bridging: 1
- Extension request to complete upgrading proposal: 1
- PLAR review: 1

Submitted by:

Derick Summers, Chair, RO

Stephanie Jung, Director of Registration

REGISTRATION COMMITTEE

Q3 Report

Registrant Numbers (as of September 10, 2026)

3,569 Registered Opticians

↑ 2%
From Q2

128 Intern Opticians

↓ 5%
From Q2

241 Inactive Opticians

↓ 3%
From Q2

- Registration numbers fluctuate throughout the year depending on factors such as the timing of National Examinations & graduation dates. The rise in the number of Registered Opticians is because of the release of the results of NACOR exams and class changes from the Inactive class. Registration in the Intern class will rise as graduates plan to take the October NACOR exams.

New registrations in each category (YTD)

223

Registered
Opticians



7%

From same
period last year

154

Registered
Interns



44%

From same
period last year

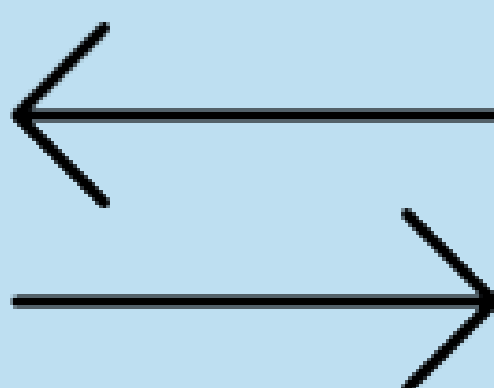
Average application processing time*: **1 days**

*Refers to the average calendar days from completed application to registration, as reported to the Ministry of Health in its most recent report.

National Mobility (YTD)

Left Ontario for
another province

20



Registered in
Ontario from
another province

3

GOVERNANCE COMMITTEE REPORT

September 2026 Committee Report to the Board of Directors

Committee Members:

Carlo Sicoli, Board (Public) Member, Chair
Lindsay Beriault (RO), Professional Appointee, Vice-Chair
Rebecca Forte, Community Appointee
Elyse Jackson, Community Appointee
Carlos Pacheco, (RO), Board (Professional) Member
Johanna Whalen (RO), Board (Professional) Member

Number of Meetings since June 2026:

- August 19, 2026

Report:

Following the recent resignation of a committee member, the Executive Committee appointed two new members to ensure the Governance Committee remains fully constituted for the remainder of the year.

Governance By-laws and Policies

The committee reviewed the following policies as per the Policy Review Schedule set out in the Governance Manual:

1. Registrar, CEO Expectations and Job Products Policy 3-05
2. Posting of Board Materials Policy 4-23
3. Board Effectiveness Evaluation Policy 4-26

Updates will be proposed to these policies at the upcoming Board meeting.

Board Meeting Process Policy 4-22

The committee reviewed proposed amendments to formalize the Board's existing hybrid meeting model of two in-person and two virtual meetings each year. Introduced in 2023 to balance the benefits of both formats, the model was reviewed by the Finance Committee in May 2026 and discussed during the reflection period at the Board's June meeting. The Board confirmed its preference to continue with the current approach and referred the matter to the Governance Committee to incorporate the meeting model into policy. Rather than creating a new standalone policy, the proposed amendments would incorporate the meeting model into the existing Board Meeting Process Policy.

The committee agreed to recommend that the Board approve the proposed amendments and retain the existing three-year review cycle. This approach would allow the Board to periodically reassess its meeting format while supporting continuity, predictability and effective planning.

The proposed amendments will be presented for consideration at the upcoming Board meeting.

Submitted by:

Carlo Sicoli, Board (Public) Member, Chair
Sarah Scott, Director, Policy and Governance

PATIENT RELATIONS COMMITTEE REPORT

September 2026 Committee Report to the Board of Directors

Committee Members:

David Milne, Community Appointee, Chair
Paul Imola (RO), Board (Professional) Member, Vice-Chair
Patrick Mott, Community Appointee
Golta Mohammadi (RO), Board (Professional) Member
Patricia Raymond (RO), Professional Appointee
Maximilian Savorani (RO), Professional Appointee

Number of Meetings since June 2026:

- July 28, 2026

Report:

Demographic Data Collection Project

The College is developing a voluntary demographic survey to better understand the backgrounds and experiences of registrants and to identify opportunities to strengthen representation and inclusion within the profession. This initiative supports the College's Strategic Plan and its focus on strengthening representation of Indigenous and other equity-deserving groups at the Board and committee level.

In May, the committee approved proceeding with a stakeholder consultation on the proposed demographic data questions and engagement with key communities and organizations, including the College's registrant base. An online survey was conducted from June 22 to July 22 and received 94 responses, representing 2.7% of the College's registrant base. The proposed demographic data questions were also shared with key organizations for feedback.

Citizens with Disabilities Ontario provided feedback on disability-related questions to support alignment with current disability definitions and inclusive data collection practices. The Ontario Anti-Racism Directorate reviewed questions related to Indigeneity, ethnicity and race, and The 519 reviewed questions related to gender identity and sexual orientation, with both organizations providing feedback on inclusive language and best practices. Feedback from these consultations informed revisions to the proposed survey questions.

The committee reviewed and discussed the survey feedback and the proposed revisions to the demographic data questions. Following its discussion, the committee agreed to recommend the revised questions to the Board for approval. The questions, together with a summary of the consultation feedback, will be presented to the Board at its upcoming meeting.

Submitted by:

David Milne, Community Appointee, Chair
Sarah Scott, Director, Policy and Governance

DISCIPLINE COMMITTEE REPORT

September 2026 Discipline Committee Report to the Board of Directors

2026 Discipline Committee Members:

Committee Members:

Elected Members

Kevin Cloutier, RO
Derick Summers, RO
Paul Imola, RO
Carlos Pacheco, RO
Parminder Kalsi, RO
John Battaglia, RO
Johanna Whalen, RO

Public Members

Omar Farouk
Stephen Kinsella
Alicia Munian
Carlo Sicoli
Mark Priddle
Greg Chitilian

Appointed Members

Stephanie Kelly, Chair, RO
Jay Bhatt, RO
Robert Quinn, RO
Parneet Dhillon, RO
Elisabeth Roche, RO
Lindsay Beriault, RO
Melissa Campbell, RO
Maximilian Savorini, RO
Audric Beauschene, RO
Patricia Raymond, RO
Elliot Borins, Non-RO
Panos Petrides, Non-RO
Patrick Mott, Non-RO
David Milne, Vice Chair, Non-RO
Elyse Jackson, Non-RO
Rebecca Forte, Non-RO

Number of meetings since last Board Meeting: n/a

Report:

The Committee anticipates sending three committee members to complete the Discipline Orientation Workshop in Fall 2026.

No new matters were referred to the Discipline Committee since the last meeting.

A decision was issued in the following matter and is available on the College's website:

College of Opticians v. Gopal Puri

The Discipline Committee withdrew the allegations in the following matter, and the decision is available on the College's website:

College of Opticians v. David Gallo

Submitted by:

Stephanie Kelly, RO, Chair

Tertia van Jaarsveld, Interim Director, Professional Conduct

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

September 2026 Committee Report to the Board of Directors

Committee Members:

When reviewing cases, the ICRC sits as two independent panels. When necessary, the Chair of the ICRC strikes additional special panels to review appropriate cases.

Panel 1	Panel 2
Rebecca Forte, Chair, Appointed Member	Elizabeth Roche, RO, Vice-Chair
Alicia Munian, Public Member	Stephen Kinsella, Public Member
Jay Bhatt, RO, Appointed Member	Mark Priddle, Public Member
Audric Beauchesne, RO, Appointed Member	Melissa Campbell, RO, Appointed Member
John Battaglia, RO, Elected Member	Kevin Cloutier, RO, Elected Member

Number of meetings since June 2026 Board Meeting:

The ICRC holds full committee meetings for the purpose of orientation and training, as well as to discuss committee policies and other issues of common concern. The balance of ICRC meetings are held as panel meetings to review and dispose of cases.

Number of Meetings in 2026	
Full Committee Meeting	1
Panel Meetings	9

Number of Meetings Since Last Board Meeting in June 2026	
Full Committee Meeting	0
Panel Meetings	4

Report:

The Committee met in their respective Panels to review completed investigations. Panel 1 met on September 4, 2026, and reviewed five completed investigations.

Panel 2 met on July 7, 2026, to review one investigation. The Panel also requested the approval of an investigator in five matters. On July 31, 2026, Panel 2 reconvened to re-review two completed

investigations that had previously been considered on April 13, 2026. Most recently, Panel 2 met on September 3, 2026, and reviewed five completed investigations.

Since the last Board meeting, 12 decisions have been provided to parties, with the remaining 16 currently being finalized.

The College also received a court order in relation to one unauthorized practice matter. There are currently two unauthorized practice matters in which the College is seeking injunctions.

Submitted by:

Rebecca Forte, Chair, Appointed Member

Tertia van Jaarsveld, Interim Director, Professional Conduct

INQUIRES, COMPLAINTS & REPORTS COMMITTEE

Q3 Report

Complaints

of Complaints Received (2026 YTD): **13**
of Complaints Open (TOTAL): **28**
of Complaints Closed (2026 YTD): **16**
of Complaints Awaiting Decisions*: **15**

*Committee has reviewed and decided on files

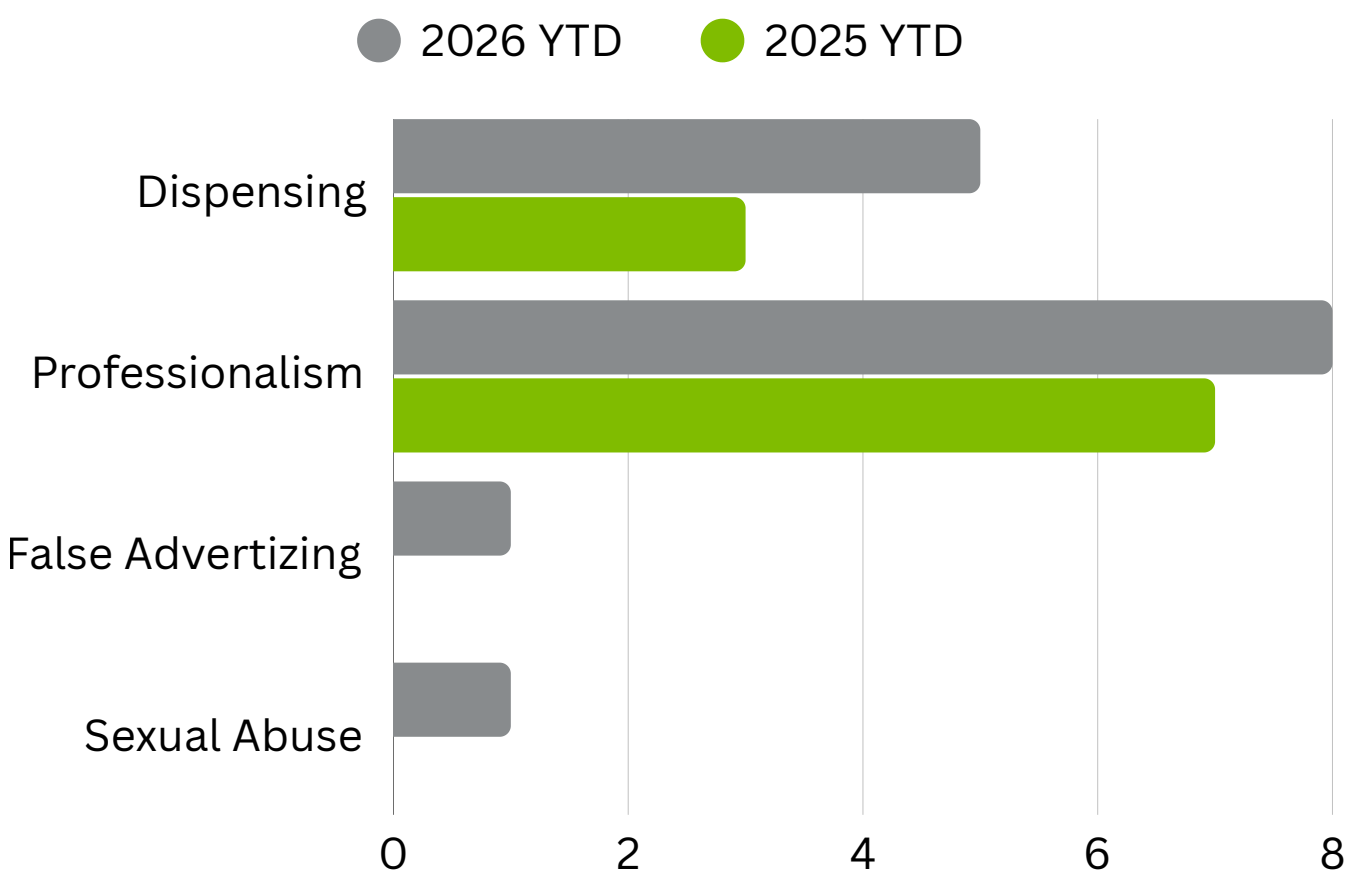
Processing Times

Avg. Days 2023: **336**
Avg. Days 2024: **277**
Avg. Days 2025: **297**

Complaint Themes

The themes in Q3 2026 are generally consistent with the themes observed in Q3 2025. Professionalism continue to be the area of most concern.

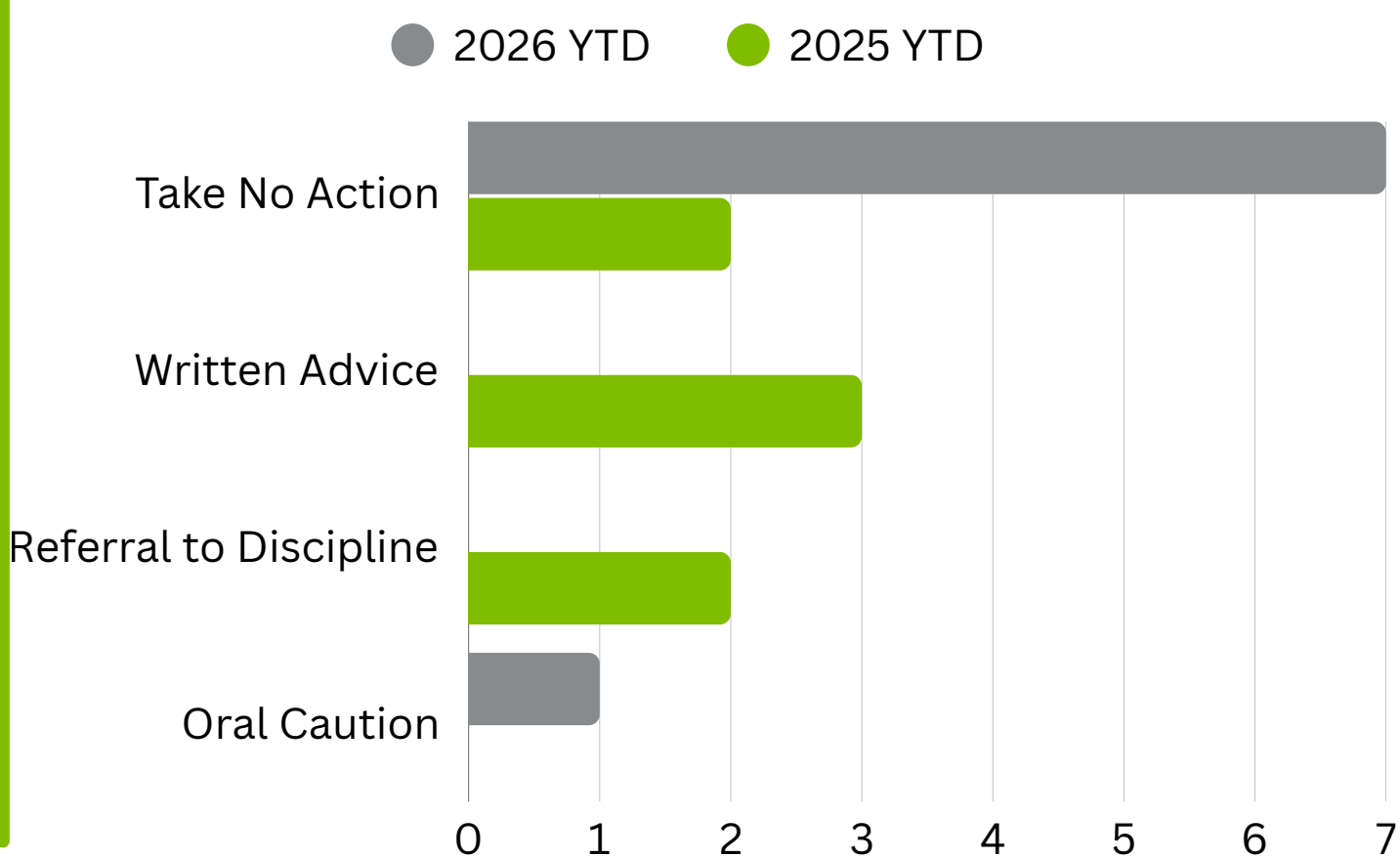
*More than one area of concern may be identified within a complaint.



Complaint Outcomes

The disposition themes shifted in Q3 2026, with take no action becoming the predominant disposition, compared to written advice in Q3 2025.

*A complaint may have more than one disposition/outcome



Reports

of Reports Received (2026 YTD): **7**
of Reports Open (TOTAL): **47**

Unauthorized Practice (UAP)

of UAP Reports Opened (2026 YTD): **28**
of UAP Reports Closed (2026 YTD): **17**

2 reports are in the court injunction phase
1 report received a court order

Total Open Matters

Number of Open Complaints & Reports

2026 YTD	2025 YTD
75	48

QUALITY ASSURANCE COMMITTEE REPORT

September 2026 Committee Report to the Board of Directors

Committee Members:

Stephanie Kelly, RO, Professional Appointee, Chair
Parminder Kalsi, RO, Board Professional Member, Vice-Chair
Golta Mohammadi, RO, Board Professional Member (as of February 17, 2026)
Greg Chitlian, Board Public Member
Omar Farouk, Board Public Member
Patricia Raymond, RO, Professional Appointee

Accreditation Panel Members

John Battaglia, RO, Board Professional Member
Audric Beauchesne, RO, Professional Appointee
Lindsay Beriault, RO, Professional Appointee
Melissa Campbell, RO, Professional Appointee
Elisabeth Roche, RO, Professional Appointee
Derick Summers, RO, Board Professional Member
David Milne, Community Appointee

Number of meetings since June 2026: 3

- July 16
- August 12
- August 31

Report:

Outsourcing Continuing Education Accreditation

The Committee reviewed a proposal from NACOR to outsource the accreditation of continuing education (CE) activities. This would mean NACOR would review and accredit CE activities on behalf of the College. The Committee considered the benefits and risks associated with this. The committee agreed outsourcing the accreditation of CE activities would:

- help separate the College from individual accreditation decisions, particularly where concerns or complaints arise about a specific activity
- increase Committee members capacity allowing them to support other committees and/or be redistributed with the QA Committee to support accreditation oversight, monitor accreditation trends, and review exceptions or concerns

- create capacity within the QA team that would be redirected to activities that require College specific judgement and oversight, supporting registrants through the portfolio process and addressing higher risk matters that require staff analysis or escalation

At the September Board meeting, the Committee will recommend that the Board approve outsourcing accrediting continuing education activities with appropriate College oversight in place.

2026 Competency Review and Evaluation Process

All professional portfolios have been assessed, and registrants have been notified of their results. To date, the majority of incomplete portfolio concerns have been resolved. The Committee will be reviewing outstanding portfolio deficiencies at an upcoming meeting.

Peer and Practice Assessments

Peer and Practice Assessments are well underway, with 20 of 41 planned assessments completed, 15 in progress and 6 assessments outstanding. In addition, 3 assessments from 2025 have been completed.

As of August 31, 2026, the Committee has reviewed 27 Peer and Practice Assessment reports. Record keeping has been identified as an area of opportunity.

Submitted by:

Stephanie Kelly, RO, Chair, Professional Appointee
Peggy Dreyer, Director, Professional Practice & Quality Assurance

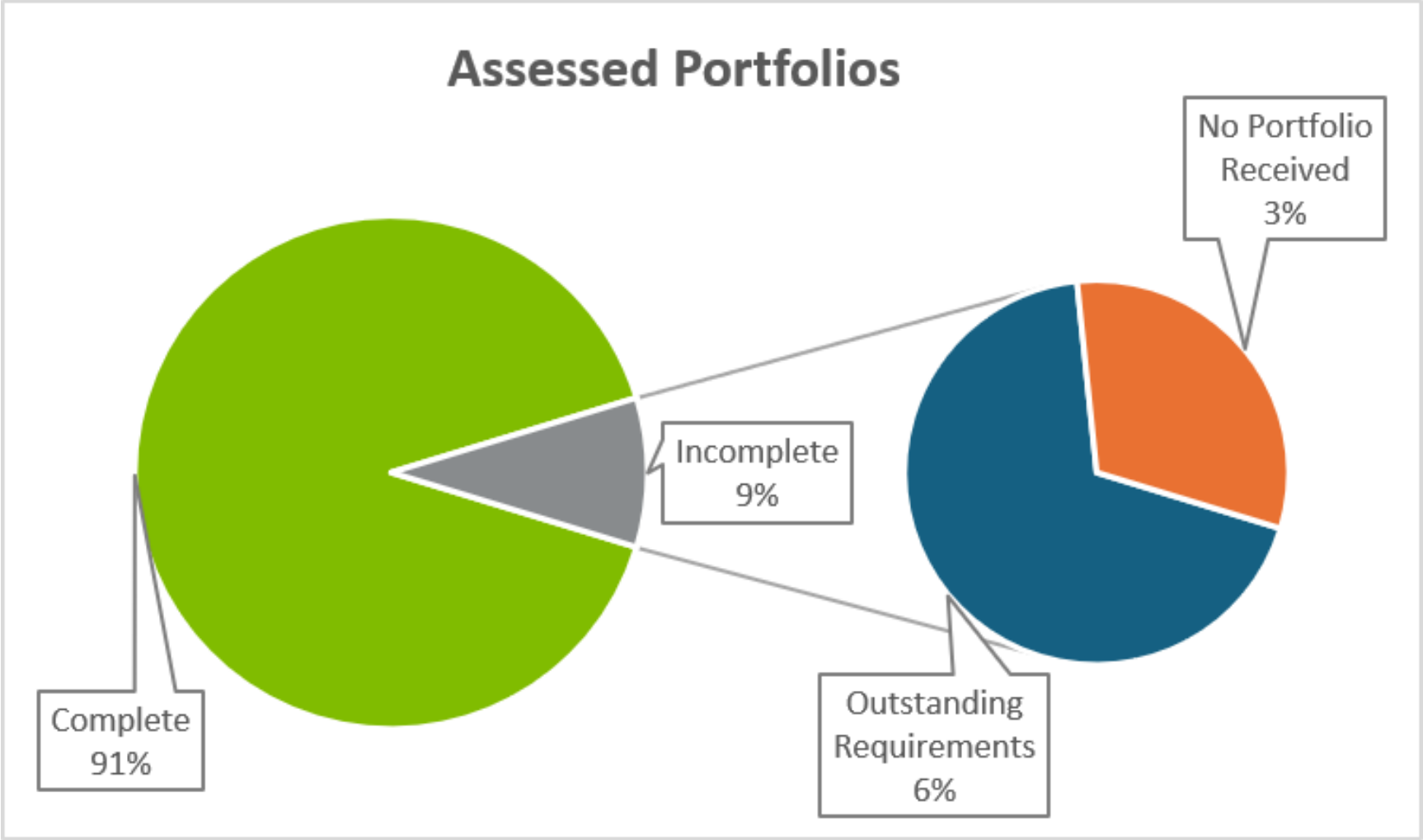
QUALITY ASSURANCE COMMITTEE

Q3 Report

2026 Competency Review & Evaluation (CRE) Process

Notable Points:

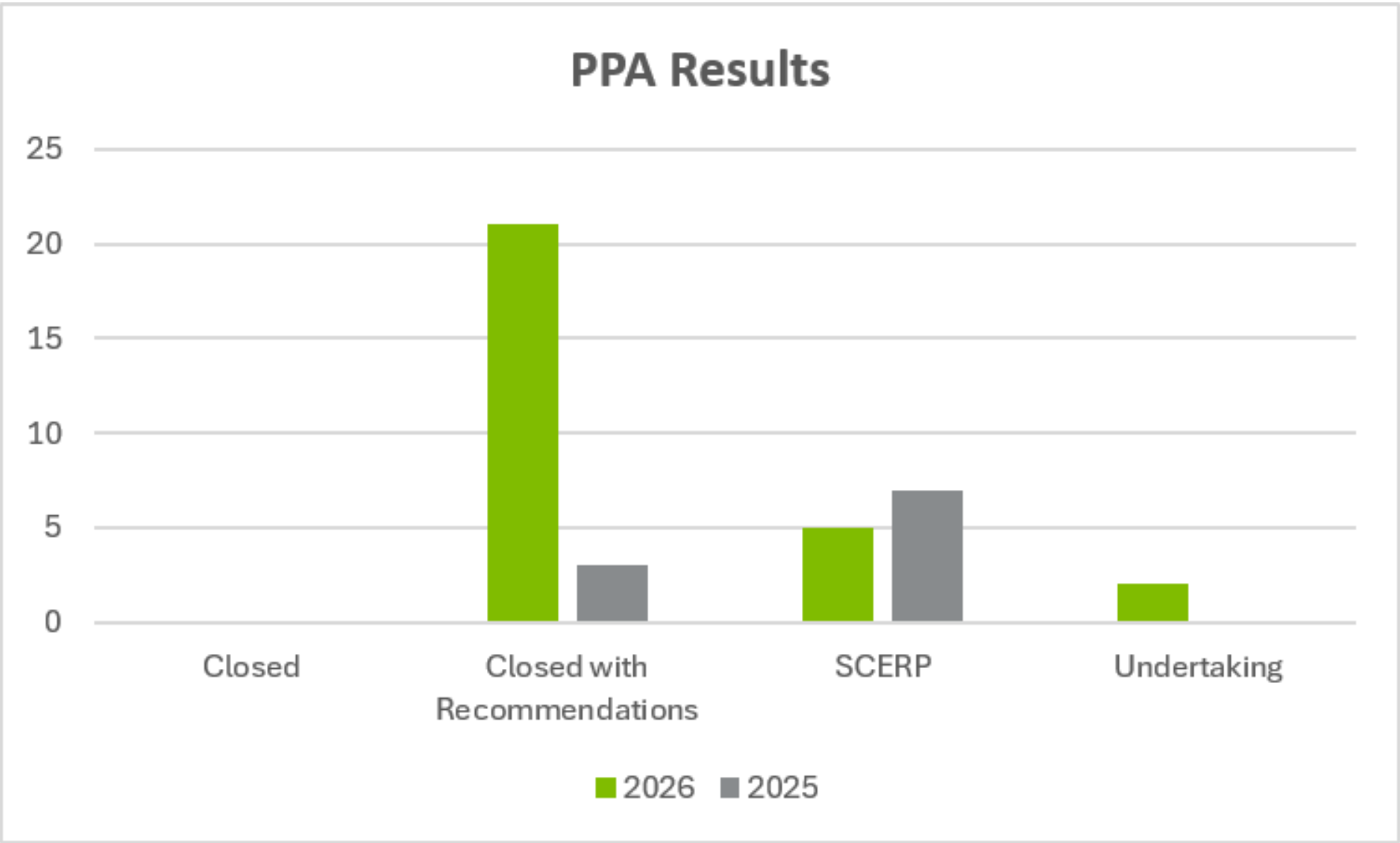
- a total of 712 portfolios were assessed
- 74% of incomplete portfolios have been resolved



Peer and Practice Assessments

Notable Points:

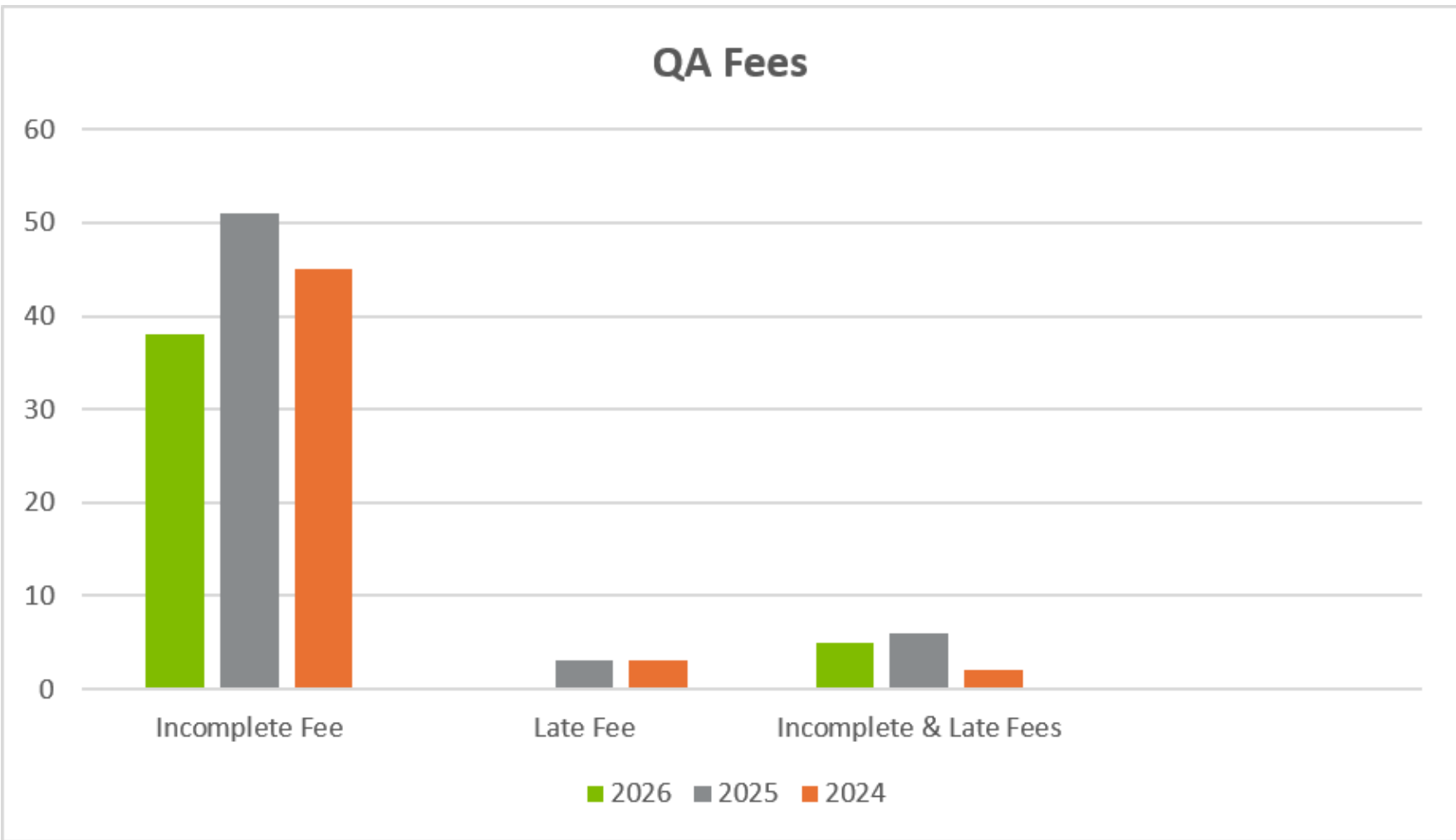
- Record Keeping continues to be identified as an area of opportunity
- 27 PPA reports have been reviewed to date in 2026 versus 10 during the same period in 2025



QA Fees

Notable Points:

- To date, incomplete fees appear to be trending lower than average

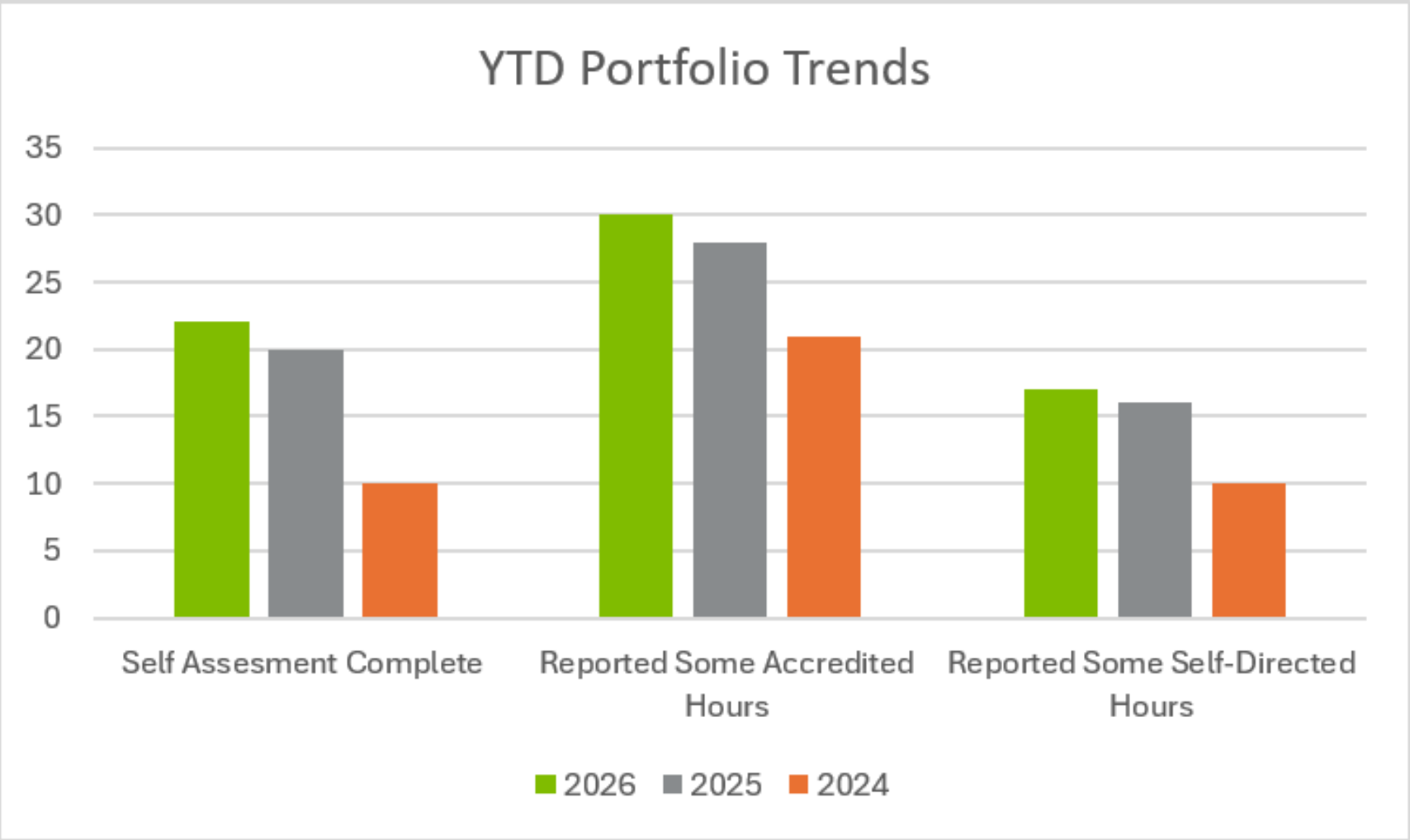


Professional Portfolio Trends

Notable Points

- Uploads by registrants appear to be slightly higher than previous years

*Reported in percentage of registrants who have completed at least some of their professional portfolio requirements.



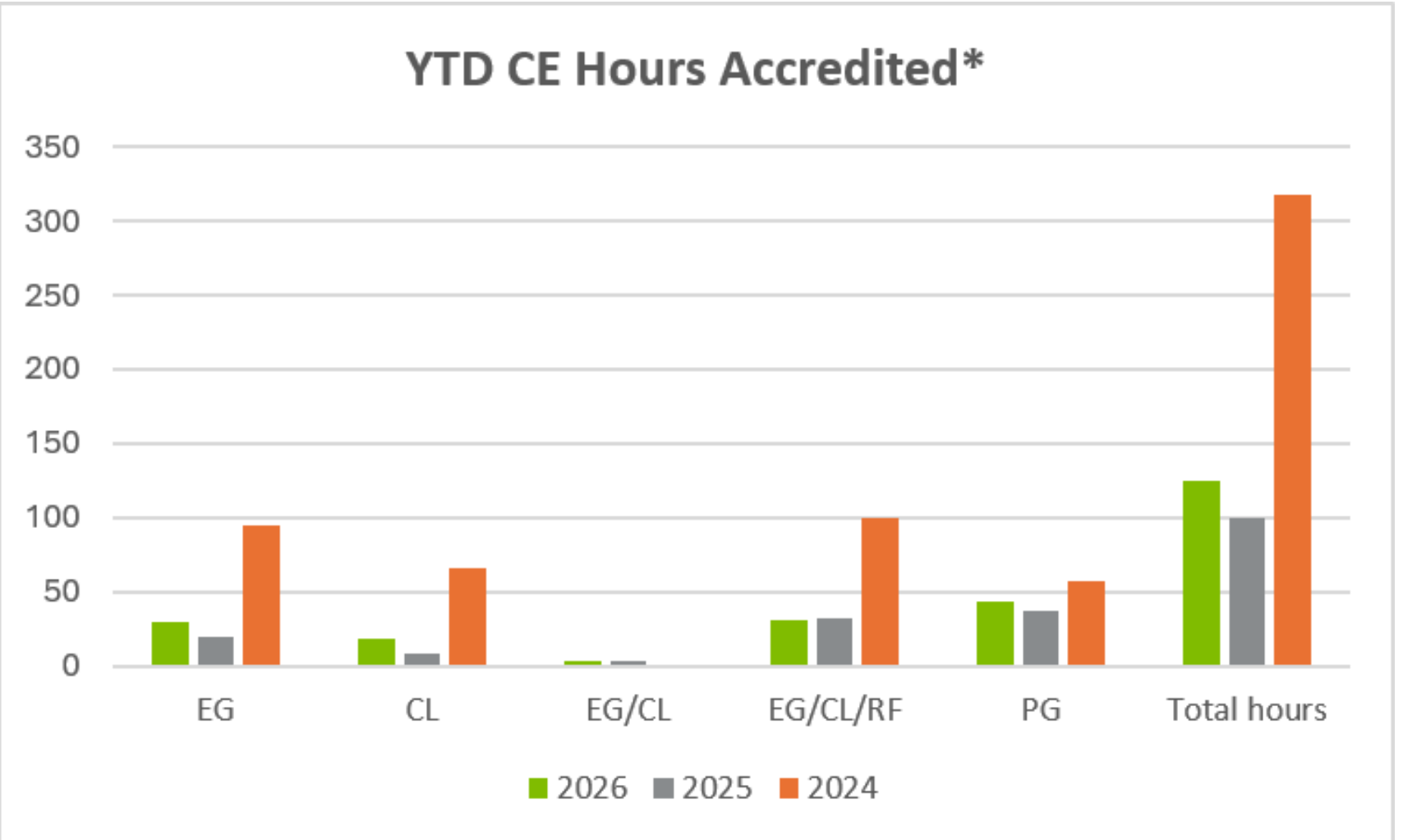
Accreditation Requests

Notable Points:

- 140 requests have been submitted for review versus 153 during the same period last year. This represents a decrease of 7%

Legend
Eyeglass Hours - EG
Contact Lens Hours - CL
Eyeglass/Contact Lens Hours - EG/CL
Eyeglass/Contact Lens/Refracting Hours -EG/CL/RF
Professional Growth Hours - PG

*Reported in hours



CLINICAL PRACTICE COMMITTEE REPORT

September 2026 Committee Report to the Board of Directors

Committee Members:

Stephanie Kelly, RO, Chair, Professional Appointee
Parneet Dhillon, RO, Vice-Chair, Professional Appointee
Robert Quinn, RO, Professional Appointee
Johanna Whalen, RO, Professional Appointee
Elliot Borins, Community Appointee

Number of meetings since the June Board Meeting: 1

- September 8, 2026

Report:

Patient Record Keeping Obligations in a Collaborative Practice Environment

The Committee reviewed a proposed guideline for inclusion under Standard 5: Record Keeping in the Standards of Practice. The guideline addresses recurring registrant questions about record keeping in collaborative practice environments and clarifies expectations for opticians.

The proposed guideline will be presented to the Board of Directors for approval at the September meeting. If approved, the Committee will also be recommending the rescission of the Joint Record Keeping Policy, which would be superseded by the new guideline.

Submitted by:

Stephanie Kelly, RO, Chair, Professional Appointee
Peggy Dreyer, Director, Professional Practice and Quality Assurance