



BOARD MEETING AGENDA

June 16, 2023 (9:00am-3:35pm)

Join Zoom Meeting

<https://collegeofdietitians-org.zoom.us/j/86924266566?pwd=SzVtRGYxMi9NM0dKUDIHRUNnQ01FZz09>

Meeting ID: 869 2426 6566

Passcode: 687688

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ITEM & DISCUSSION	DECISION NEEDED	TIME	OWNER	ATTACHMENTS
1.0 Call To Order		9:00 – 9:05 (5 mins)	TBD	
SHARING & LEARNING				
2.0 EDI-B Teaching Learning – 2SLGBTQ+ Pride Month	Discussion	9:05 – 9:20 (15 mins)	MW	2.1 Briefing Note – Pride Month
OVERSIGHT & ACCOUNTABILITY				
3.0 Extension of Accreditation Recognition Date	Approval/ Motion	9:20 – 10:20 (60 mins)	MW	3.1 Briefing Note - Extension of Accreditation Recognition Date
4.0 Board Meeting Evaluation	Information/ Discussion	10:20 – 10:40 (20 mins)	TBD	4.1 Briefing Note - Board Meeting Evaluation Results – March 24, 2023
BREAK 10:40 – 11:00 (20 mins)				
5.0 Management Report	Information/ Discussion	11:00 – 11:15 (15 mins)	MW	5.1 Management Report June 2023 5.2 Statement of Operations Fiscal 2023 as at March 31, 2023
6.0 Risk Monitoring Report (Q1)	Information/ Discussion	11:15 – 11:30 (15 mins)	MW	6.1 Risk Monitoring Report (Q1)
POLICY				
7.0 By-law 2	Approval/ Motion	11:30 – 12:00 (30 mins)	MW	7.1 Briefing Note – By-law 2
8.0 By-law 1	Approval/ Motion	12:00 – 12:30 (30 mins)	LD	8.1 Briefing Note – By-law 1

ITEM & DISCUSSION	DECISION NEEDED	TIME	OWNER	ATTACHMENTS
LUNCH 12:30 – 1:30 (1 hour)				
POLICY				
9.0 Social Media Policy	Approval/ Motion	1:30 – 1:50 (20 mins)	DC	9.1 Briefing Note – Social Media Policy
STRATEGIC				
10.0 Annual Board and Committee Evaluations and Needs Assessments	Information/ Discussion	1:50 – 2:15 (25 mins)	MW	10.1 Briefing Note - Annual Evaluations 10.2 2022 – 2023 Annual Board Performance Evaluation Results 10.3 2022 – 2023 Annual Committee Performance Evaluation Results 10.4 2021 – 2022 Annual Board Performance Evaluation Results (for reference) 10.5 2021 – 2022 Annual Committee Performance Evaluation Results (for reference) 10.6 Briefing Note – EDI-B Needs Assessment Results
11.0 Board Workplan and Training Calendar	Approval/ Motion	2:15 – 2:30 (15 mins)	MW	11.1 Briefing Note – Board Workplan and Training Calendar 2023 – 2024
12.0 Proposed Board Meeting Dates	Approval/ Motion	2:30 – 2:35 (5 mins)	MW	12. 1 Briefing Note – Proposed Board Meeting Dates 2023 – 2024
13.0 Governance Committee Terms of Reference	Approval/ Motion	2:35 – 2:40 (5 mins)	LD	13.1 DRAFT Governance Committee ToR
BREAK 2:40 – 3:00 (20 mins)				
OVERSIGHT & ACCOUNTABILITY				
14.0 In Camera Minutes from December 9, 2022 In Camera session pursuant to s. 7(2)(b) and (d) of the Health Professions Procedural Code, being Schedule 2	Approval/ Motion	3:00 – 3:05 (5 mins)	TBD	

ITEM & DISCUSSION	DECISION NEEDED	TIME	OWNER	ATTACHMENTS
to the Regulated Health Professions Act, 1991				
15.0 In Camera session – personnel matter In Camera session pursuant to s. 7(2)(b) of the Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991	Approval/ Motion	3:05 – 3:35 (30 mins)	MW	
16.0 Adjournment	Approval/ Motion	3:35	TBD	



Board Briefing Note

Topic:	EDI-B Learning: 2SLGBTQI+
Purpose:	For Information and Discussion
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Melanie Woodbeck, Registrar and Executive Director

ISSUE

To engage in Equity, Diversity, Inclusion and Belonging (EDI-B) learning and reflection related to Pride Month, which takes place in June.

PUBLIC INTEREST RATIONALE

Organizational learning around EDI-B is key to driving strategy, building organizational EDI-B capacity, and affecting systemic change. Training assists in ensuring that an EDI-B lens is applied to Board and Committee decision making in the interest of the diverse public served by CDO.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires Board and Committees to engage in EDI-B training that has been informed by self-identified learning needs.

BACKGROUND

A teaching and learning moment is incorporated into each meeting for the Board to discuss relevant examples of how EDI-B can be incorporated into the practical work of CDO.

FOR DISCUSSION

Pride Month History

Pride month is an opportunity for 2SLGBTQI+ communities and allies to reflect on where they have come from, recognize what they have achieved, and to rally together for the ongoing inclusivity. Pride also serves as a reminder of the important collective commitment to human rights and equality.

Pride gatherings emerged from the first large-scale protests for 2SLGBTQI+ rights, which took place in New York City in 1969, following the violent police raid of the Stonewall Inn – a gay club in Greenwich Village.

Canada has its own rich history in the struggle for 2SLGBTQI+ rights, the most well-known being the Toronto raids in 1981, which triggered protests against police persecution of the gay community.

Pride Flag

The original Pride Flag was created by Gilbert Baker, a San Francisco activist in 1978, which had eight stripes which represented diversity of the 2SLGBTQI+ community. This Rainbow Flag became a symbol of hope, unity, and empowerment for those in the 2SLGBTQ+ communities. In 1979, the redesigned six-colour version of the Pride Flag was created, which is known as the Traditional Gay Pride Flag.

Original Pride Flag



Traditional Gay Pride Flag



Since its adoption, the flag has evolved to be inclusive of other communities. In 2017, the city of Philadelphia added two stripes – black and brown – to the top of the flag which represent the struggles and prejudices faced by queer people of colour.



In 2018, this flag was further updated by designer and activist Daniel Quasar, which combined the black and brown stripes with the Transgender flag to further inclusion and progress. This updated flag, known as the Pride Progress Flag, added white, pink, light-blue, brown, and black chevron to the six-stripe flag, representing marginalized 2SLGBTQI+ communities of colour, those living with and who have been lost from HIV/AIDS, and trans and non-binary individuals.

The Progress Pride Flag



In 2021, Valentino Vecchiotti of Intersex Equality Rights UK incorporated the intersex flag with the Pride Progress Flag, creating the Intersex Inclusive Progress Pride Flag.

The Intersex Progress Pride Flag



Allyship

Allyship refers to individuals or groups actively supporting and advocating for marginalized communities. Allies do not typically identify as members of the marginalized communities, but work in solidarity with them to promote equality, inclusivity, and social justice. Allies play a crucial role in challenging and dismantling oppressive systems by advocating for rights and creating more inclusive environments.

How to be an ally to 2SLGBTQI+ communities:

- **Support and advocacy.** Actively support and amplify the voices of 2SLGBTQI+ individuals by standing-up against discrimination, challenging harmful stereotypes, and promoting equal rights and opportunities.
- **Education and awareness.** Engage in self-education to understand the experiences, challenges, and issues faced by the 2SLGBTQI+ community.
- **Safe spaces and inclusivity.** Create safe and inclusive spaces where 2SLGBTQI+ individuals can express their identities without fear of judgment or discrimination.
- **Listen, support, self-reflect, and change.** Prioritize listening to the experiences and needs of 2SLGBTQI+ individuals, allowing them to share their stories and perspectives.
- **Recognize how intersectionality influences experiences.** Understand and acknowledge the diverse experiences within the 2SLGBTQI+ communities and strive to address the unique challenges faced by individuals with multiple marginalized identities.

CDO's Role

As the regulator of dietetic practice in Ontario, CDO promotes equitable and inclusive access to nutrition services and care. This is achieved by developing policies and standards using an Equity, Diversity, Inclusion and Belonging (EDI-B) lens and by eliminating potential barriers to inclusive and equitable delivery of its statutory and regulatory programs.

Dietitians also have an obligation to provide culturally appropriate care to all individuals, including engaging in activities that acknowledge the cultural competencies, knowledge and understanding of the 2SLGBTQI+ communities, and the nutritional concerns within them.



Board Briefing Note

Topic:	Board Meeting Evaluation, March 24, 2023 Meeting
Purpose:	For discussion
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Executive Committee

ISSUE

To review the March 24, 2023 Board meeting evaluations.

PUBLIC INTEREST RATIONALE

Good governance is the foundation for effective regulation and public trust. Best practices in regulation support the ongoing assessment of board meetings with a focus on interactions, behaviours, and decisions, to evaluate the Board's effectiveness at achieving its mandate. This transparent and reflective performance review demonstrates the Board's commitment to continuous improvement and good governance.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires the Board to regularly assess its effectiveness.

BACKGROUND

At its May meeting, the Executive Committee reviewed the Board's feedback from the March 24 meeting evaluation. The Committee noted the following challenges arising during the meeting based on common themes from the feedback:

- Adherence to meeting norms, speaking order and decorum
- Meeting management and focussed discussion on agenda items
- Meeting preparation and participation

CONSIDERATIONS

The CMPF requires Boards to conduct regular self-evaluations and create workplans to address any areas of learning or growth.

Based on the feedback from the December 2022 and March 2023 meetings, the Executive Committee recommended training for the Board on the topics of public interest and meeting facilitation. This training will take place on June 15, 2023. Additional meeting facilitation training was also recommended for the Chair of the Board.

The Executive Committee also discussed some additional initiatives that could be considered at a later date:

- Appointing a presiding officer in accordance [7.8 of the by-law](#). The presiding officer would act as board meeting chair. The presiding officers is not a member of the Board or CDO, and it is a non-voting role.
- Conducting an external third-party meeting evaluation to assess the Board's meetings.

RECOMMENDATION



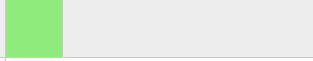
For information and discussion.

Board Meeting Evaluation Results- March 24, 2023

13 Board Members 12 Attended 1 Absent 11 Completed - 92%

1) All Directors had an opportunity to express their opinions.

Respondents: 11

Choice	Percentage	Count	
All of the time	72.73%	8	
Most of the Time	9.09%	1	
Some of the Time	18.18%	2	
None of the Time	0.00%	0	
Total	100%	11	

Please add a comment if you selected Most of the Time, Some of the Time or None of the Time.

1 A couple of directors had strong opinions and dominated some parts of the conversation. Chair did a good job in soliciting feedback from others when appropriate.

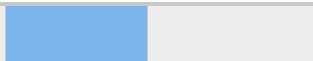

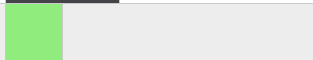
2 A few directors speak out of turn

3 There were a number of members whom we did not hear from, I am sorry that since I am fairly new, I do not remember their names.

4 a few director keep interacting with each other , out of their turns.

2) All Directors were prepared and actively participated in the decision-making process.

Respondents: 11

Choice	Percentage	Count	
All of the Time	45.45%	5	
Most of the Time	36.36%	4	
Some of the Time	18.18%	2	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

1 Some appeared to be not reading meeting materials and past meeting minutes adequately to support discussion and voting for certain agenda items.

2 Those that commented and participated appeared to be informed.

As discussed at the meeting, it's impossible to know what others do. Based on the questions/comments voiced, NOT all Directors read the material, or did not read it well enough.

3 Questions asked need to relate to the specific issue brought to the Board, they must be relevant and not tangential as continues to happen. This is essential especially when a decision is sought from the Board. It interrupts thinking, discussion and basically wastes time.

4 Based on some questions or discussion, not sure if there are misunderstandings of topics being discussed. E.g. bylaw 1 and having the same process to disqualifying public and professional members Did not always hear from all directors

5 it is difficult to tell how much other directors are prepared. it is subjective & Guess work. do not understand the purpose of this question?

6 It was evident several times during the meeting that people had not read the materials.

3) The meeting climate was respectful and exemplified a culture of equity, diversity, inclusion, and belonging.

Respondents: 11

Choice	Percentage	Count	
All of the Time	27.27%	3	
Most of the Time	36.36%	4	
Some of the Time	36.36%	4	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

1 some board members were raising their voice

2 Some directors were not calm and composed when making their points.

3 Some tempers flared

4 The meeting on Friday was challenging in my opinion. I feel we spent a lot of time on items that were not necessary. Some board members got very rude and overruled the chair.

I was startled by the fact that a minority of people took up the majority of air time during the meeting. Two members in particular would interrupt and speak over other members. Aside from not allowing for a fulsome discussion by the whole board, I found their behaviour aggressive and self indulgent, and at the very least rude. At one point a member was rolling her eyes, making faces, holding her hands over her mouth in exasperation, and admitted the she is "the most impatient person ever". I found her behaviour was unprofessional and unkind. Another male member shouted a lot. Between the two, there was very little decorum. My husband is a long standing legal chair with the Consent and Capacity Board (and former member with the ORB)and could hear the members shouting from two floors away. He was shocked at the lack of control by the members and their disregard for procedure, protocol and decorum. He had to remove himself and close the door to our bedroom.




To raise one's voice at a meeting, to raise it at a Chair particularly, to interrupt and talk over a Chair, not just once but repeatedly and to tell a Chair what they should be doing is totally unacceptable. It is incompatible with the College's Values, By Laws and Policies. It upsets, insults and disrespects every person at the meeting, which in this case included Staff and Guests,. What impressions, especially the latter, did they take away with them! The behaviour witnessed contravenes the Rules of Order and of Conduct agreed to prior to accepting a position with the College officially. There was no need for this, we have these Rules to ensure that people's questions are dealt with appropriately.

Mostly respectful except for interruptions at discussion about honoraria policy Suggest at start of meeting, establishing not only speaking order, but also how to interject with additional comments that a director may not need to wait until end of speaking order to bring up.

The tone of the meeting at times was not okay. If people had read the materials, especially the excellent briefing notes, this could have been avoided.

4) Discussions were constructive and focused.

Respondents: 11

Choice	Percentage	Count	
All of the Time	18.18%	2	
Most of the Time	27.27%	3	
Some of the Time	54.55%	6	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

1 Some discussions went off topic and extended the meeting time

2 Some Directors repeatedly shared incorrect information and went way off track on the discussion of certain agenda items. This behaviour did not only waste meeting time, but also suggested the lack of "fitness" to participate in discussion with characteristics described in the new competency inventory document for a skill-based Board at CDO.

3 Sometimes not focused when individuals spoke too long

4 At the meeting March 24 I feel we had a lot of discussion that was not constructive or focused. I feel we did not stay on task and many comments and issues were brought up that were separate from the specific agenda items. I feel some members are not respectful of the chair.

5 As per earlier comments; I found that since two members controlled the meeting, got caught up in their personal views, that the discussions were often off side. We did get most of the agenda cleared, but not all. We should have easily managed the agenda as set.

6 Irrelevant questions and comments in any discussions never adds to focus.

7 Getting off topic when discussing honoraria policy and bylaw 1

8 Directors' comments are not always to current subject. every one has a right of opinion should but should stick to the matter under discussion.

9 The tone of the meeting, at times, took us off track and may have deterred some people from participating.

5) Time was efficiently managed during the meeting.

Respondents: 11



Choice	Percentage	Count	
All of the Time	9.09%	1	
Most of the Time	36.36%	4	
Some of the Time	45.45%	5	
None of the Time	9.09%	1	
Total	100%	11	

Additional Comments:

- 1 I believe we had too much on the agenda as some of these topics required lengthy discussion. A two day meeting for have been better to cover everything.
- 2 Too much to cover in the allotted time.
- 3 Some discussion went beyond what was necessary to support decision making.
- 4 Important agenda items were missed. Chair allowed important discussions to go on but the agenda was too packed with heavy items. Should have been 1 1/2 day meeting
- 5 specifically for this meeting time was not managed efficiently in my option.
- 6 I'm afraid that time became a problem because of the two members constantly taking air time.
- 7 Agenda Break times were not followed, because of ongoing discussion etc.
- 8 Think off-topic discussions could have ended earlier to not go over time
- 9 it may not be possible to stay in the time allotted for each item for discussion.
- 10 no comment

6) Decisions made were summarized after each agenda item.

Respondents: 11


Choice	Percentage	Count	
All of the Time	90.91%	10	
Most of the Time	0.00%	0	
Some of the Time	9.09%	1	
None of the Time	0.00%	0	
Total	100%	11	


Additional Comments:

- 1 Can't comment other than I do not recall summaries being made,

7) All decisions were made in the public interest.

Respondents: 11

Choice	Percentage	Count	
All of the Time	81.82%	9	


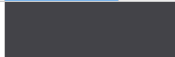

Most of the Time	18.18%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

- 1 Na
- 2 Not all the time - that is my opinion.

8) The Board considered all perspectives and made decisions on consensus.

Respondents: 11

Choice	Percentage	Count	
All of the Time	36.36%	4	
Most of the Time	54.55%	6	
Some of the Time	9.09%	1	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

- 1 Consensus was attempted, but not always possible.
- 2 Good effort was made to achieve consensus. And recorded where not possible.
- 3 Consensus was being strived for whenever possible at this meeting.
- 4 Again - i feel there were too many opinions and discussions that fell outside of the specific agenda items - muddying the items for discussion or consensus.
- 5 Not all in attendance participated. I am not sure if they felt overwhelmed and didn't want to voice their opinion or that they didn't have anything to add...in which case that is unfortunate.
- 6 All perspectives considered but because went to vote, can't say consensus achieved.
- 7 not possible for all the director to agree on all the matters

9) The Board had all the information it needed to make the best decision possible.

Respondents: 11

Choice	Percentage	Count	
All of the Time	81.82%	9	
Most of the Time	18.18%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

- 1 Some more info required on some topics, which made sense to defer decisions.
- 2 Directors did ask for more information a few items

10) The Board's focus remained on strategy, oversight, governance, and a risk-based approach to regulation.

Respondents: 11

Choice	Percentage	Count	
All of the Time	54.55%	6	
Most of the Time	36.36%	4	
Some of the Time	9.09%	1	
None of the Time	0.00%	0	
Total	100%	11	

Additional Comments:

- 1 A few discussion slightly dug into the College's operation.
- 2 Same comment as before - board got off topic.
- 3 I am sorry to repeat myself, but because of the hijacking of the meeting, the focus was lost some of the time...ie. talking about interpretation of remuneration.
- 4 Because of the interruption that occurred, "All of the Time" can't be checked.. Staff have always been so thorough in preparing background material, providing needed context and responding to a Board request for further information etc, they make it very easy for strategy, oversight,

governance and a risk-based approach to be the Board's prime focus, always in the Public Interest.

- 5 There were several times that board members needed to be reminded that our role is not operational.

11) Additional comments or feedback:

Respondents: 6

11) Additional comments or feedback:

- 1 1) A specific Board member disrupted the order at the meeting on multiple occasions. Behaviours included speaking over the Chair, raising the voice when expressing opinion, disrespecting opinions shared by other Board members. These unruly behaviours should not be tolerated. 2) The virtual hand function did not work at this meeting as expected. Board members were not acknowledged of their virtual hands and there was technical issues for the Chair to identify speaking order automatically.

- 2 This is the first board meeting that I did not enjoy and found very uncomfortable. My uncomforte came from some of the outbursts from board members and not from topics identified on agenda.

- 3 I really enjoy this work so far! However,I would like the panel to discuss further financial policy as it pertains to investments. I firmly believe that the CDO should receive the same standard of care with their portfolio as any private individual. In my view the service provider should be more engaged with the council, and exhibit greater agility in managing the work. For example,"safe" investing in the bond market should have been changed before their value tanked. Our advisor moved us.

- 4 Unfortunately virtual hands proved inadequate. (no reliable context of timing or confirmation order and ambiguous, often left up. Disabling CHAT took away a valuable tool. Directors have comfortably adapted to the request to use Q and C (Question/Comment) and not abusing Chat. Times are posted, available to every person at any time. This allays anxiety about being overlooked. Periodic listing of Order names is very helpful.

- 5 For #7, I clicked "all of the time" so could not leave this comment there. I believe decisions were made in interest of public but through discussion (e.g. bylaw 2 registrant fees), apparent there are different opinions of making decisions in interest of the public. Don't think that this is right or wrong, but different.

- 6 This meeting was an exhausting and disappointing experience.



Board Briefing Note

Topic:	Quarterly Risk Management Monitoring Report
Purpose:	Monitoring Report
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Risk-Based and Right-Touch Regulation
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

To review the Q1 Risk Monitoring Report.

PUBLIC INTEREST RATIONALE

In the public's interest, an essential aspect of College's governance and management is to ensure that organizational and risks to the public are identified, assessed and managed efficiently and effectively.

BACKGROUND

CDO's updated Risk Monitoring Policy was approved by the Board at its March 25, 2022 meeting. The policy sets out Board's role around risk management, how the Board will ensure and cultivate a risk management culture and the Registrar's accountability to the Board through quarterly reporting and the establishment of operational procedures.

The Registrar will also report to the Board on any urgent, rapidly developing and critical risks should they arise between Board meetings. Low and frequently monitored risks will be recorded and managed.

The procedures will include staff involvement at all levels to ensure that emerging risks can be identified quickly, and that a strong risk management culture is cultivated throughout the organization.

CONSIDERATIONS

The June 2023 (Q1) Risk Monitoring Report is before the Board for its consideration

(Appendix 1) with updates on the status and progress towards treatment of the various risks identified. Updates on progress with mitigation efforts are provided for *each risk*.

Updates to the Risk report include:

New risks identified:

- None

Areas where risk and/or mitigation plans have been reassessed as situation evolves:

- Accreditation Provider Transition
- Public Member Appointments and Succession Planning
- Regulatory and Governance Changes
- Succession Planning and Staff Turnover/Retention

Risk downgraded

- None

RECOMMENDATION/NEXT STEPS

For the Board to provide feedback on the current risk assessment and mitigation efforts.

ATTACHMENTS

- Appendix 1: June 2023 (Q1) Risk Monitoring Report

**Q1 Risk Monitoring Report
June 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of June 5, 2023
Program	Accreditation Provider Transition (risk assessment updated)	<ul style="list-style-type: none"> National education accreditation provider withdrew effective March 31, 2022. EQual approved as new 3rd party accreditation service provider. CDO and other Canadian regulators approved recognition of previous PDEP awards until August 31, 2023. If programs cannot register by the deadline or chose not to register with EQual, CDO would be required to conduct individualized, labour-intensive equivalency assessments for graduates. 	<ul style="list-style-type: none"> Alliance to work with partners on ongoing collaboration CDO communication with the MOH and OFC on the transition. EQual to conduct info sessions and 1.5-day orientation workshops for programs (at no cost to participants) to provide more information Alliance has negotiated accreditation fees for two years to facilitate educational program budgeting. Alliance now part of EQual Council, which is a governance board that oversees and approves EQual strategic direction and policies. Continue to monitor the ability of programs to transition by the award extension date approved by all 10 dietetic regulators. 	<ul style="list-style-type: none"> All programs have attended info sessions and most have attended orientation workshops. Most programs have submitted on-boarding forms to EQual, and contracts are being issued for program review. The Alliance continues to meet with EQual to facilitate the transition. At the June 16, 2023, meeting, the board will review at the whether to grant an extension for recognition of PDEP awards beyond August 31.
Public Protection	Potential Risk of Harm to Clients/Public	<ul style="list-style-type: none"> Potential risk to the public due to unethical, incompetent, or unprofessional care. An increase in the number and complexity of complaints and reports also has an impact on College resources and how they are utilized. 	<ul style="list-style-type: none"> Refresh risk in dietetic practise research. Monitor ICRC data to identify patterns of concern and develop and update member education, standards of practice, guidelines, and other initiatives accordingly. Professional Practice Program will develop and implement a continuous monitoring and evaluation plan to assess currency and revisions to policy/standards of practice. Update College programs and tools with a risk-based approach to prevent harm. 	<ul style="list-style-type: none"> Risk tools created for ICRC assessments and registrar referrals to ICRC to ensure consistency and appropriate outcomes based on risk ICRC data collection chart updated to capture risk categories, shared with professional practice dept Risk in dietetic practice research completed and is being incorporated into QA program

**Q1 Risk Monitoring Report
June 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of June 5, 2023
Governance	Public Member Appointments and Board Succession Planning (risk assessment updated)	<ul style="list-style-type: none"> • CDO remains fully, but minimally constituted, at 5 public members. • Heavy board and committee workloads for public members can affect the ability of the CDO to remain constituted, achieve quorum, meet legislative deadlines/internal service-standards, and ensure the critical public voice in decision-making. • At risk are: CDO's governance modernization goals and the general satisfaction and wellbeing of CDO public members. • Limitations on PAS honoraria and expenses may also affect engagement. 	<ul style="list-style-type: none"> • Communicate risks with Public Appointments Secretariat (PAS). • Examine committee TORs and by-laws around composition requirements. • Focus on succession planning to ensure knowledge translation. 	<ul style="list-style-type: none"> • Ongoing communication with PAS • Registrar on HPRO working group of Colleges discussing ways to address this issue
Governance	Regulatory and Governance Changes (risk assessment updated)	<ul style="list-style-type: none"> • Legislative changes may have significant financial and human resource implications for the College. • It is unclear when governance modernization legislation will be introduced. Current legislative focus remains on addressing health care system capacity and registration of international graduates. 	<ul style="list-style-type: none"> • Proceed with CDO's strategic goal of governance modernization and begin preparing for legislative changes. • Through regulatory collaboration and networking, stay informed of potential changes. • Continue to work towards fully meeting CPMF measures. 	<ul style="list-style-type: none"> • Governance workplan is progressing, with items on June Board agenda for consideration. • Bill 60, which enables "as of right legislation" has been proclaimed. CDO not included in the professions effected.
Operational	Cybersecurity Breach	<ul style="list-style-type: none"> • Potential risks include: privacy breaches, organizational/staff downtime, reputation, and financial costs. 	<ul style="list-style-type: none"> • The College has a cyber security response plan, credit card incident response plan, and an emergency disaster recovery plan that are reviewed on an annual basis. • The College maintains insurance which covers IT and cybersecurity. 	<ul style="list-style-type: none"> • Software for conducting internal phishing campaigns and customized training being launched in fiscal 2023. • Secure password management software being launched in fiscal 2023.

**Q1 Risk Monitoring Report
June 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of June 5, 2023
			<ul style="list-style-type: none"> • A security audit was completed in September 2021 and minor gaps were identified and addressed. • Post security audits will take place to ensure compliance with audit recommendations. • Staff regularly engage in awareness dialogue regarding phishing scams. • Additional formal training for Council and Staff on cybersecurity will be explored. • New staff data governance working group to identify and mitigate risks in this area through its project work. • CDO staff attends regular Cyber security community of practice meetings to stay abreast of developments and best practices. 	
Operational	Succession Planning/Staff Turnover and Retention (risk response updated)	<ul style="list-style-type: none"> • Risks around business continuity, retention of institutional knowledge through retirement, leave of absence, or resignation. 	<ul style="list-style-type: none"> • Review of staffing model by third party HR completed in fall 2021. • Review College HR processes and procedures. • Conduct process documentation for key College activities to further decentralize knowledge of processes and procedures and ensure continuity. • Develop a records management policy to ensure documentation, continuity and accessibility of institutional knowledge. • Conduct a review of the finance department processes, procedures and internal controls and ensure complete documentation. • Ongoing review and implementation of supportive technology to streamline and automate. 	<ul style="list-style-type: none"> • Implementation of staffing model review complete. • HR policy review in progress. • Additional resources added to Finance and Corporate Services during staff transition and process review. Process review continues and internal controls will be reviewed and documented. • Project to begin documenting internal and operational procedures and processes across the organization will begin in fiscal 2023.

**Q1 Risk Monitoring Report
June 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of June 5, 2023
			<ul style="list-style-type: none"> Increased focus on collaboration, training and team culture. 	
Financial	Increasing Costs of Regulation	<ul style="list-style-type: none"> Increased resources required to keep pace with complex and evolving regulatory requirements. Economic inflation outpacing membership fee increases, which have been static since 2019. 	<ul style="list-style-type: none"> Prudent financial habits are in place at the College. For example, zero-based budgeting; assessing vendor contracts to ensure the best value for the College (quality balanced with price) and Board and Management regularly monitor expenditures against the approved budget. Internal controls are in place for the highest risk areas, including on College purchases, and the audit Committee and Management review these internal controls annually. Review By-law 2 and annual fees. Other resource efficiencies will continue to be explored. 	<ul style="list-style-type: none"> Inflation rates have increased (CPI at ~4.3% at March 2023), are having an impact on price of goods and services CDO relies on. Board to consider a fee increase for 2023 at June meeting, plus an amendment to by-law 2, which will allow for gradual, modest increases over time. HUB601 will result in realizing operational efficiencies for the College.
Financial	Investment Returns	<ul style="list-style-type: none"> Market downturn and potential recession is presenting a risk to the College’s investment portfolio. 	<ul style="list-style-type: none"> Monitor situation with investment advisor. To diffuse the risk, move funds to stable GICs. The College’s investment policy requires book value of investments in equities to not exceed 40% of the entire book value of the portfolio to limit market risk while allowing for a reasonable growth of the portfolio. 	<ul style="list-style-type: none"> Investment policy approved by Council in June 2022. Portfolio risk reduced.



Board Briefing Note

Topic:	By-law 2 Consultation Feedback
Purpose:	For Decision
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Executive Committee

ISSUE

To review the consultation feedback and approve the proposed amendments to by-law 2.

PUBLIC INTEREST RATIONALE

As a regulatory college, CDO is mandated to protect the public interest through the delivery of programs and services. To ensure CDO's long-term sustainability and effectiveness at fulfilling its regulatory mandate, adequate resources are needed to fund its operations.

BACKGROUND

Given the rising costs of regulatory operations, and the freeze on registrant fees since 2019, at its March 24 meeting, the Board approved draft by-law 2 amendments in principle, for the purpose of public consultation.

The proposed amendments to by-law 2 were circulated to registrants and other system partners for feedback for the required 60 days. The consultation closed on June 2, 2023.

The Executive Committee reviewed the available consultation feedback at its May meeting.

FOR CONSIDERATION

The consultation feedback (*Attachment 1*) is generally unsupportive of the proposed fee increases. There were three general themes to the feedback:

1. Purpose and rationale for the fee increase

Some of the feedback questioned the purpose of the fee increase and the justification for doing so. Comments suggested that CDO did not provide enough of an explanation as to why a fee increase is required, how an increase in fees will be used to maintain adequate resources for the College, and what adequate resources means. Branching from this were questions about how registrants directly benefit from CDO. There were also several requests for a breakdown of how registrant fees are used.

2. Financial burden

Many respondents expressed concerns about the financial burden that the additional fees would place on them, particularly in light of the ongoing economic challenges caused by the COVID-19 pandemic and the wage freezes they are experiencing. There was also some misconception about CDO's fees being higher than the fees at most health colleges. CDO's annual renewal fees are considered mid-range in comparison to other regulators and are in line with other regulators with a similar number of registrants (see Appendix 2).

3. Increase efficiencies and reduce operating costs

It was strongly recommended by many respondents that CDO work to increase efficiencies and reduce its operating costs so a fee increase would not be required.

Mitigation of Concerns and Potential Unintended Consequences

If the proposed amendments to by-law 2 are approved, CDO will clearly communicate the change and rationale. This may include highlighting how registrant fees are used (which is already available on the website), a comparison between CDO fees and the fees of other health regulators, and clarification on the role of a professional regulator.

The College will continue to make considerable efforts to limit costs, maximize operational resources and create efficiencies. Some recent examples of these efforts include the efficiencies realized by continuing with virtual Board and committee meetings and relocating to a shared regulatory office hub. While helpful, these efforts alone are not enough to address the impact of rising inflation and increased operating costs. Modest revenue increases over time will be required to cover planned expenses, strategic projects and to ensure the ongoing fiscal sustainability of the College.

RECOMMENDATION

To approve the amendments to by-law 2 as recommended by the Executive Committee.

ATTACHMENTS

- Appendix 1: By-law 2 Consultation Feedback
- Appendix 2: Fees Ontario Health Regulators
- Appendix 3: Summary 3- Column Chart with Proposed Amendments to By-law 2
- Appendix 4: By-law 2 with tracked changes

By-law 2 Consultation Feedback

1. I do not agree with the proposed increase to fees, as the fees that CDO registrants pay are already higher than many other professionals. We want to encourage healthcare professionals to stay in their respective fields, rather than discourage them by increasing barriers (which include increasing fees). In a time when many healthcare settings are experiencing staffing concerns (retention AND job dissatisfaction), this would not be a smart move.
2. In reality, I don't have a problem with the proposed changes. I do strongly encourage the College to consider finding a new home for the office. Please consider saving some of your member's well earned dollars and finding less expensive real estate. Other regulatory colleges have moved into space sharing arrangements.
3. Strongly disagree. Reason for increase is very vague - no details on why this year it would be more to maintain resources? Would highly encourage working within current budget/fee schedule to provide services/resources. Support from CDO has not been overly helpful to me in my professional role so to have to pay even a small 2% more would not sit well with me.
4. CDO already charges one of the higher annual college fees compared to other regulated health professionals. Public sector RDs are still constrained by annual 1% wage increase from Bill 124. Perhaps the college could consider the staff to member ratio for future savings
5. I am not in support of a general/other fees increase. With the opportunity to use teams/zoom to avoid travel, downsizing office space with a hybrid work from home environment, a decrease in board members so there is less board member cost, with the amount of funds in your reserves and the burden on Ontario Dietitians, I can not support this. I would suggest you do some internal process improvement work to decrease the cost of programs.
6. I do not support the proposed amendments to By-Law 2. I recommend deferring these amendments to the following year due to the financial pressures created by the pandemic and unprecedented inflation.
7. I disagree with the increase in fees for if we already compare with other health professional, we do have almost triple the fees which I already find high. That is the reason why I think it shouldn't be increased, maybe on the contrary should be decreased from the previous years.
8. I do not agree with proposing an increase in fees for annual renewal fees. Many RD's are public sector workers and our salaries have been capped by 1% increases under Bill 124 for several years now despite the significant increase in cost of living within the same time period. RD's are already not making acceptable incomes based on cost of living and being a predominantly female oriented career - increasing college fees is not acceptable.

9. In comparison to the work CDO puts out which compared to other regulatory colleges (pharmacy notably), there does not seem to be a value add here in providing CDO with more money. I am against this increase.
10. These rate increases are exceeding wage increases. It's insensitive to consider increasing fees at a time when people are struggling to pay their own bills. RDs remain as one of the highest fee related professional group. Consider down sizing or cost cutting which is the same as every other business and house hold is expected to do. This is outrageous. You provide the same minimal service to registrants but expect us to pay more.
11. Fees are already ridiculously high. CDO works to protect the public and does not support RDs. I would be okay with the fees if CDO were advocating on behalf of RDs. I feel I need to volunteer and join working groups to get my moneys worth
12. I disagree with the increase in registration fee and for the late fee. Registered Dietitians have not had any pay increases despite inflation. Our registration fee has increased 30% since I have been a member of CDO and our pay has certainly not increased that much. CDO is providing the same service and asking members to pay more for the same service we have been receiving for years.
13. I do not support an increase in fees by 2% for the year 2023. Rationale: High inflationary costs coupled with the exit of many professionals from the field of health care post-pandemic already do not serve to encourage dietitians and future dietitians to remain in this field. Year-over-year fee increases do not make it any easier. Our American dietitians counterparts pay a fraction of the fees we do. Please don't make things harder for us.
14. There are already so many barriers/obstacles to becoming an RD. The increase in fees will only deter those most vulnerable RDs to be, such as those of low income. This low income population is also comprised more of BIPOC groups, and those with disabilities. Increasing fees will only create further barriers for these groups and reduce the diversity of Dietitians who serve such a diverse client group in Canada. We need equity in fees!
15. I believe that in increase in our already astronomical fees is quite unfair to dietitians. Our wages are already capped and at a time when finances are difficult in the world, we cannot get a raise and our fees are proposed to be increased. In the US, they have a 75\$ yearly registration fee, yet ours is over \$600.
16. I would find it valuable if CDO provided a fee justification breakdown for our annual fees. The fees are a significant value, and I feel little value is provided back to us as RDs from CDO. I think transparency of how these fees are calculated and justified is important. Requirement of the fee as one lump sum payment is also a significant financial barrier to those in the field, especially with the current cost of living and inflation.
17. I do not agree with a fee increase, cost of living in Ontario is too high

18. What justification is there for the fee increase? My understanding is that the overhead fees have been reduced with a shared office space. Most staff can work from home.
19. Given the current cost of living and that dietitians working in primary care in Ontario have not received raises for over 2 years, I do not support any increases to our fees this year.
20. The CDO fees are already much higher than many other allied health professionals. In addition, very little is being done to protect the public from unqualified nutritionists etc. It is becoming more and more financially difficult to maintain our license and registration. The fees should not be increasing.
21. I know we are a small workforce, but the constant rising cost of fees seems unfair and inequitable. Can positions and costs be trimmed at the college?
22. I don't think the fees should be increased 1) heavy burden on RDs, no increase in pay in a lot of RD sectors - with any increase stress - risk of even taking more RDs out of efficient, effective work - leading to more stress leaves, leaving the profession, and increased risk to public perhaps when they have to work more to try and make ends meet 2) overhead at CDO should be more efficient as it's moved and many working off-site
23. I STRONGLY OBJECT to changing the annual fee/certificate of authorization fees. The proposed 2% increase since 2019 is also a time when inflation/other costs to the general public have gone up significantly, and are ongoing. I STRONGLY SUPPORT the fee for Emergency Class registration; anyone who falls under the purview of the CDO and benefits from this should be required to pay fees equivalent to what regular members are paying.
24. I do not agree with any fee increases. It is difficult to swallow any increases with the current economy and lack of wage increases. It is difficult to understand why we keep needing to pay more when there isn't a lot we see that is being done for the RD's directly.
25. I don't agree with the annual fee increases, mainly because I have no idea what I am paying for, and why it is so expensive. Also, any time that I have sought information or support from CDO, it has not been overly helpful. I would appreciate some kind of information to help me understand where my money is going and why. I assume that the number of RDs registered with the college continues to increase, so why are the fees still so high?
26. I do not believe that now is the time to raise fees. Many RDs have been legislated to a 1% pay increase in the face of inflation that is currently at 6%. This is effectively a 5% pay decrease. Add to this, the fact that RDs did not get the pandemic pay that most other frontline healthcare professionals received, and you have a group of people already under financial pressure. It may seem small, but additional financial pressure is not beneficial.
27. I disagree with increasing the annual member fee. With inflation everywhere but most people's paycheque the current fee is already difficult to afford.

28. Of course, I don't like that the rates are increasing as it feels so high already. However, capping the increase at 2% makes it feel more reasonable.
29. I am not happy with the increase in membership fees. Is there an increase in value?
30. I disagree with the fee increase. Wfh model should all for cost savings from the college. Thanks
31. I am opposed to increasing late fees. I was late once by a day and was dinged with paying 2 late fees. We already pay so much for our licences and there is no reduced rate for those of us who work part time.
32. Please do not raise fees for renewal as dietitians already pay an exorbitant amount in college fees compared to other professions. When compared to typical incomes, our fees are among the highest. I oppose the raise in fees.
33. I believe CDO needs to find efficiencies in the work they do, annual fees are already excessive. I do not support any increase or any plans for annual increases ongoing.
34. We already pay a very high fee so to have it increased seems wrong to me and I would need a lot of rationale as to why and as to where the money is going to.
35. Disapprove. Our fee is one of the highest among practitioners in Ontario yet our income is lower than most. How about restructuring within CDO other than volunteer positions? How about providing networking opportunities within Ontario? It is disappointing to see a fee increase during such high inflationary period within Canada and Ontario. What does CDO do to support our needed salary increase? To expand our right to practice across Canada?
36. RDs already have the highest annual fees of Allied HPs, including RNs. how is it possible that are still increasing?! Trying to maintain license with other certifications is becoming ludicrous. If anything, fees should be reducing.
37. Opposed. In what way does an increase benefit either practicing dietitians or the public? Does a 2% increase correspond to a 2% increase in service from CDO? Our fees are already some of the highest among health care, why are we making it worse?
38. I would like a breakdown of what exactly these fee's are going to and why we pay significantly more than other allied health and healthcare professionals. I think this is not fair given that Dietitian profession hasn't had a raise since I can remember, and there is no wage equity amongst RD's in different roles. I'd be more willing to pay the increased amount if the college advocated for us and our pay.
39. With prices going up, I think it is not acceptable for the fees to go up, even if it's by \$13. While I understand that costs may have gone up, for the benefit RDs get from CDO, it is not acceptable for the fees to go up by \$13.

40. Strongly oppose an increase in annual fee. In support of a fee to cover administrative costs associated with emergency certificates.
41. I understand the need to increase fees, though do feel like registration fees are getting close to being prohibitive for some dietitians.
42. Dietitians are not guaranteed increment in their hourly wage or monthly salary every year. So I am finding it hard to accept that membership fees may increase by 2% each year. I know it's not a lot, but I think it should reflect how much RDs get paid as increment.
43. I am not in agreement with an annual increase, the fees are high enough!
44. I understand that the fees have not increased since 2019– however, Ontario fees are already high compared to many other provinces college fees and compared to fees for many other health disciplines to be registered with their colleges. I would love to know what the CDO plans to do with the additional approx. \$55,000 annually as in 2021 there was a \$582,011 surplus from revenues after expenses according to the most recent annual report.
45. I do not agree with the proposed fee increase regardless whether or not the fees have not increased since 2019. This box also doesn't not allow adequate space for feedback. Fees for Ontario are already high compared to other provinces and compared to other professional organizations - engineers, nurses. In the 2020-2021 annual report there was a \$582,011 surplus from revenues after expenses - what does the CDO plan to do with the extra \$55,000?
46. Fine.
47. 2% increase to member fees on an annual basis seems unreasonable. I would like to receive a breakdown of where this extra money is going towards as “resources” is very vague.
48. I do not like the idea of fees increasing. It is already incredibly expensive to maintain registration, between registration and insurance. Increasing the fees will make dietetics even more out of reach for individuals who come from low income and/or working class backgrounds, and those who have been traditionally disadvantaged. If anything, the fees should be reduced to make dietetics more attractive for more diverse potential dietitians.
49. The rationale for the increase to registration fees in 2023 is weak. The only explanation for the fee increase is that there hasn't been an increase since 2019. So what? This doesn't explain why the CDO is increasing fees for registrants or how this will benefit the public or registrants.
50. Would prefer if college fees did not increase. I work part-time, and it feels unfair to pay the same fee as someone who is full-time. I'm wondering if there has ever been a discussion about having different fee levels depending on a person's work status. I would also like to understand exactly how much extra money this generates and why the need for more income for the College.

51. I do not support an increase to annual member fees.
52. I do not support late fees for individual dietitians.
53. I disagree with the proposed fee increases. RD's are paid the lowest salary of all clinical health professionals and yet we pay among the highest fees. No to the increase in fees.
54. As a new dietitian to the college I feel that the regulatory fees are quite extensive, even in consideration of the fact that as a college with a smaller group as opposed to registered nurses and the like. Nonetheless, I feel that the cost incurred to both become a dietitian and participate in registration is significant. Especially in the context of the past year where the cost of living has increased rapidly
55. Some dietitians (in Family Healthy Teams) have not seen a wage increase in years while the cost of living has increased drastically. We are bringing less money home while workloads and responsibilities increase. Increasing the fees we have to pay just to do more work for less money is completely unacceptable. I appreciate that the College needs to balance it's budget but it shouldn't be on the backs of dietitians.
56. This fee has increased more than 30% since I first registered with CDO. My salary has been frozen for years. This will further deter prospective RDs from joining the profession. It does not to promote diversity when it is clear that you must be very privileged to even consider the profession. Shame on CDO.
57. We have one of the highest registration fees within health care professionals; I think it is unacceptable that our fees have continued to increase for the same service being provided.
58. Save money (in potential staffing) by being more selective in who you audit within your membership. Your role is to protect the public. What is the relative risk posed by an RD in clinical practice versus public health. I would like to see the evidence on that.
59. Dietitians in Ontario do not even have 2% wage increases each year. It is frustrating to have to continue to pay such high fees.
60. I disagreed that the CDO would increase the proposed amendments fee.
61. Disagree with increase in fee.
62. NO. this is ridiculous. Cost of living us outrageous and now penalizing dietitians by raising the fees of their license? Abhorrent.
63. I Am not in favour of increase to annual fees. I am in favour of increased late fees for the sdl tool. I would rather see the college increase revenue this way instead of through annual dues.

64. Increasing fees is not warranted considering the global economic climate. Inflation is at an all-time high and increasing College membership fees will be a deterrent for anyone considering the field of dietetics. These fees are already among the highest in allied health professional fields. I also believe if the fees are increased, rates of resignation will increase especially due to difficulty attaining permanent employment as an RD.
65. Can you please provide a breakdown of how the fees are being used and how we as members benefit from this. It seems like quite a bit of money with no need for it to be increased.
66. I do not support the fee increase for 2023. To my knowledge, we pay the highest fee for registration of all allied health members. While I understand our high fees are related to our relatively low registration numbers, I still do not believe we should be paying even more. As a female-dominated position, increasing fees will only make it more difficult for woman to remain in/join the workforce.
67. I disagree with fee increase given the fact our profession pays more than other allied health members. In addition, with our profession being underpaid as is and increase in cost of living, I don't feel the membership fee increase would be appropriate.
68. I understand the hanging times and the need to increase fees however if we compare our fees to some other professions that earn subrationally more money then the proportion we pay is already astronomical and already challenging for some of us.
69. I am not in agreement with the increase in fees. The fee is already expensive enough especially for new grads who aren't able to find a job right after graduation. The increase in fees will create an additional barrier to registration in Ontario.
70. I do not agree with the annual fee increase. My salary has remained unchanged since 2019 and this annual fee is a significant amount of money to pay. The annual fee is due at the end of the year and with Christmas expenses, it is excessive. Our annual fees are huge compared to other colleges and I don't understand why it is so much. Where exactly does all our fees go to? I don't see the value in this large amount.
71. The fees for this college compared to others continue to be unreasonably high and the surplus funds being held to deal with potential risks is excessive. The risk of liability and legal issues for this organization is minimal and therefore we do not need so much money held in trust. The surplus funds in the organization need to be reduced by reducing fees by at least 50%.
72. I am not agreeable with these proposed changes. Our fees are already outrageously high in comparison to other registered professionals. In addition, aside from the ability to practice using the title of an RD, I'm not sure what CDO provides to its members? If we were to see further benefit from our money I would be more agreeable.

73. I DO NOT agree with the proposed amendments and the rationale to increase annual fees to \$654. I would very much support keeping it at \$641, which is already very very high.
74. How is the fee increase justified? You moved to a hybrid model for work and are now sharing an office so overhead should be much lower. Also, despite covid we all still had to pay our fees so what \$\$ was lost during that time?
75. I have concerns with the increased fee structure as the annual regulatory fees for CDO are already alarmingly high compared to other regulated professions and for many RDs these are not covered by employers. This is a significant personal cost and potential deterrent to maintaining a current practice license.
76. The increase is unreasonable as our wages do not reflect a 2% increase.
77. I decline the increase as the reasons for increase are unclear. Dietitians salaries are not increasing to compensate for this unexplained increase.
78. Dietitians who work in public health care have had their wage increases limited to 1% by the current government. Any increase in registration cost above that level is inconsiderate.
79. Our fees are already extremely high when you consider what other professionals pay (e.g. Nurses, physio, dental hygienists to name a few). NO increase! The cost of living has increased in the last 2 years at levels not seen since the early 1980's and Canada is seeing an affordability crisis. Do not add to this!
80. We are one of the highest paying colleges in Ontario, I don't think the fee raise is fair and the services received justify this fair. If ever it should be lowered to make it more accessible.
81. Do not support an increase in the annual renewal fee. Non-unionized RD's have not had a pay increase close to 2% over the last few years. Additionally, when comparing to other college fees in Ontario (RN, RPN, PT, etc.) our fees are one of the highest. When compared to other provinces, Ontario fees are also higher (ex. \$570 Alberta and BC \$630).
82. Although I am not in favour of raising the fees as described, I understand that this may be needed.
83. Many if not most RDs have not seen a raise in wages that correlates with inflation. Therefore most of us have taken a relative pay cut over the last years. While I understand that costs have gone up for the college as well, the idea that this would not put undue stress on members fails to account for every "small" percentage increase in every element of the cost of living and doing our jobs.
84. Not in support. How does this benefit RDs, it's already an expensive fee to pay yearly on top in liability insurance.

85. I have reviewed and am in agreement with the proposed amendments.
86. I understand there is a 2% increase in the bylaws, however health care workers have been held to a 1% pay increase, I feel these should align.
87. I disagree with yet another fee increase. The amount RDs pay annually is absolutely ludicrous. Especially with the current inflation costs and recognizing that RDs wages are not keeping up with this rate. I know it is only a 2% increase but I do not support it. Many RDs do not have employer coverage for this, and that is a significant amount of money.
88. This is not the time to increase RD fees.
89. Please consider adding a separate, lower annual fee for non-practicing RDs. Many other colleges have this in place, and it is long overdue that CDO implements this too. Thanks for your consideration.
90. I do not agree with a fee increase for the annual fee. As dietitians, we pay one of the highest fees for health care professionals, yet we are no where near the level of responsibility as some of the other professions. IT is not clear to Ontario RDs what we are paying such a high fee for.
91. I disagree with the increase. The fee is already so expensive.
92. I do not agree with the fee increase. Compared with all other HCP college fees dietitians are paying far more than others and an increase even a small one feels unnecessary. Should fees increase, I feel that a budget of what these increased fees are being used for should be provided and even currently what are fees are supporting for full transparency.
93. Propose a reduced fee for members working part-time - as does Dietitians Canada \$130.00 is a pretty steep increase from \$70.00 for late SDL. Seriously. what % of renewal are late with the SDL?
94. Agree.
95. It's time to start looking into merging with another allied health college to help members more easily afford these college fees and share resources. Transparency around allocation of fees has already been done (thank you), but it doesn't seem effective in the long run to be burdened by operating costs off the fees collected from one allied health group alone.
96. I do not support the change to increase fees. We have some of the highest fees of any allied health profession including those who make more money than us and those who have greater scope and responsibility than us. In addition to this we still have insurance and other fees just to be allowed to work to support ourselves/families. We don't get pay raises with the ministry and you haven't advocated for us to get one.

97. There is very little information provided regarding how the fees are allocated within the college and any efforts to find efficiencies. I would feel better about paying any increases if I had a better understanding of how the money was spent and confidence that CDO was doing their very best to find efficiencies.
98. I did not have any increase in my salary working as a dietitian in the community in the last five years. I know the cost of living is rising, and the CDO must have an increase in their expenses, but I disagreed with paying a higher fee of 20% annually when my salary as a dietitian has been the same for the last five years. I think the College of Dietitians of Ontario should advocate reducing operation costs as the Dietitians of Canada did.
99. I question the need to increase late fees for the SDL tool submission. The fees for membership currently pay for full time employment of CDO staff. I appreciate that late SDL tools require staff time, but from my understanding this should fit within the full time employment that CDO currently has and does not need additional staff time. To frame this as a "cost recover" initiative feels misleading.
100. Disagree with increase in fee.
101. Strongly oppose increases in annual fees and late SDL fees. Cost of living has increased significantly over the past three years making it challenging for individuals and their families. An increase in fees is unnecessary at this time and would not benefit members.
102. RDs have one of the most expensive college fees in the province in relation to our wages. I heard the college changed to mostly working from home and was able to now share office space. If rent costs are down I would have expected our fee to stay the same at the very least. Our wages haven't increased for 2yrs and unsure if they will even go up by 2% this year.
103. Any workers in healthcare should not have an increase to their profession dues. Cost of living always increases faster (even more so in the last few years) than any staff receive a fair increase to their wages.
104. We are already paying one of the highest membership fees among many health care providers. For many years we did not receive any salary increase and cost of living increased significantly. In my opinion, our fees should not be increased. Thank you,
105. Absolutely not. Expressed what I needed to above.
106. Costs increase and fiscal responsibility requires this action. In agreement.
107. No concerns.
108. Registered Dietitians in Ontario already have the highest rates for registration. Why does the college not put a pay freeze in place like the public sector has done.

109. I do not support a membership fee increase until dietitians also receive changes to compensation that includes a pay increase. There has been a freeze to Primary care RD compensation during this time aswell and currently there is advocacy work being done. Thank you for considering this feedback.

Regulator	Fee (2022)	# of Registrants
Dental Surgeons	\$2,995	10,822
Midwives	\$2,703	1,063
Chiropodists	\$1,940	828
Naturopaths	\$1,904	1,780
Dental Technologists	\$1,869	
Physicians and Surgeons	\$1,725	45,183
Denturists	\$1,395	770
Homeopaths	\$1,335	416
Traditional Chinese Medicine Practitioners and Acupuncturists	\$1,300	2850
Chiropractors	\$1,100	
Optometrists	\$945	2804
Opticians	\$944	2,903
Massage Therapists	\$897	15,291
Pharmacists	\$842	23 549
Psychologists	\$795	4,861
	\$780	4,766
Audiologists and Speech-Language Pathologists		
Occupational Therapists	\$743	6605
Kinesiologists	\$650	2,939
Respiratory Therapists	\$650	3,945
Dietitians	\$641	4,473
Physiotherapists	\$635	11,297
Psychotherapists	\$589	
Medical Radiation and Imaging Technologists	\$470	11,378
Dental Hygienists	\$415	14,888
Medical Laboratory Technologists	\$384	6667
Nurses	\$270	203,575

Current	Proposed Change	Rationale
<p>3. ANNUAL FEE</p> <p>3.1 Subject to the provisions of this by-law, every registrant holding either a General or Provisional Certificate of Registration shall pay an annual fee of \$590.00 plus the increases in the annual fee set out in Article 3.3.</p> <p>3.2 The annual fee shall be applicable to the year commencing on November 1 and ending on October 31 and shall be payable on or before the 31st day of October, immediately preceding that year.</p> <p>3.3 Effective for the annual fee payable for the year commencing November 1, 2015, the annual fee (payable by virtue of Article 3.1 by registrants holding a General Certificate of Registration 2 and by virtue of Article 3.4 by registrants first issued a General Certificate of Registration) shall be increased each and every year from the year commencing November 1, 2015 to the year commencing November 1, 2019 by the lesser of</p> <p>(a) two percent of the annual fee payable for the previous year, rounded up to the nearest dollar; and</p>	<p>3. ANNUAL FEE</p> <p>3.1 Subject to the provisions of this by-law, every registrant holding either a General or Provisional Certificate of Registration shall pay an annual fee of \$590.00 <u>plus the increases in the annual fee set out in Article 3.3-654.00 for 2023, and in subsequent years the Board shall annually review the fees and where the Board deems it appropriate, the annual fee may be increased by not more than 2% each year, rounded up to the nearest dollar.</u></p> <p>3.2 The annual fee shall be applicable to the year commencing on November 1 and ending on October 31 and shall be payable on or before the 31st day of October, immediately preceding that year.</p> <p>3.3 Effective for the annual fee payable for the year commencing November 1, 2015, the annual fee (payable by virtue of Article 3.1 by registrants holding a General Certificate of Registration 2 and by virtue of Article 3.4 by registrants first issued a General Certificate of Registration) shall be increased each and every year from the year commencing November 1, 2015 to the year commencing November 1, 2019 by the lesser of</p>	<p>The current annual fee is \$641 and has not been increased since 2019. The proposed fee of \$654 is a 2% (\$13) increase from the current fee.</p> <p>Increases to the annual renewal fee will be determined by the Board each year depending on the resource requirements of the College. The fee will not automatically increase on a yearly basis. Any increase will not be greater than 2%.</p>

Current	Proposed Change	Rationale
<p>(b) a percentage of the annual fee payable for the previous year equal to the increase, if any, of the Canadian Consumer Price Index for the Province of Ontario for the previous 12 months ending in April, rounded up to the nearest dollar.</p> <p>3.4 The annual fee to be paid by every registrant for the year in which the person is issued a General Certificate of Registration shall be the amount determined by multiplying the annual fee otherwise payable under Article 3.1 by a fraction, the numerator of which is the number of calendar months from the issuance of that Certificate to the end of the year for which the annual fee is being paid, including the month in which the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.</p>	<p>(a) two percent of the annual fee payable for the previous year, rounded up to the nearest dollar; and</p> <p>(b) a percentage of the annual fee payable for the previous year equal to the increase, if any, of the Canadian Consumer Price Index for the Province of Ontario for the previous 12 months ending in April, rounded up to the nearest dollar.</p> <p>3.4-3 The annual fee to be paid by every registrant for the year in which the person is issued a General Certificate of Registration shall be the amount determined by multiplying the annual fee otherwise payable under Article 3.1 by a fraction, the numerator of which is the number of calendar months from the issuance of that Certificate to the end of the year for which the annual fee is being paid, including the month in which the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.</p>	
<p>4.3 The College may charge a registrant a late fee of \$70 if the registrant fails to provide to the College by the specified due date any information that the College is required or authorized to request and receive from the registrant.</p>	<p>4.3 The College may charge a registrant a late fee of \$70 if the registrant fails to provide to the College by the specified due date any information that the College is required or authorized to request and receive from the registrant.</p>	

Current	Proposed Change	Rationale
<p>5. QUALITY ASSURANCE FEE</p> <p>5.1 If a registrant fails to provide within 60 days of the date of a written request by the Quality Assurance Committee, a record, survey or other document which the registrant is required by the Regulation governing quality assurance to submit to the Committee, the registrant shall pay a fee of \$70.00.</p>	<p>5. QUALITY ASSURANCE FEE</p> <p>5.1 If a registrant fails to provide within 60 days of the date of a written request by the Quality Assurance Committee, a record, survey or other document which the registrant is required by the Regulation governing quality assurance to submit to the Committee, the registrant shall pay a fee of \$70.00 <u>20% of the annual fee.</u></p>	<p>The proposed change provides better cost recovery for CDO and aligns with the late fee for annual renewal.</p>
<p>7. TEMPORARY CERTIFICATES</p> <p>7.1 The fee for the issuance of a Temporary Certificate of Registration is \$120.00, which fee is non-refundable.</p> <p>7.2 No fee for the issuance of a Temporary Certificate of Registration shall be payable under Article 7.1 where the person held a Provisional Certificate of Registration immediately prior to the issuance of a Temporary Certificate of Registration to that registrant.</p> <p>7.3 The fee for any extension of a Temporary Certificate of Registration is the amount determined by multiplying the annual fee otherwise payable under Article 2.1 the numerator of which is the number of calendar months from the issuance of that Certificate until 10 weeks after the examination, including the month in which the Certificate is to be issued, and the</p>	<p>7. TEMPORARY <u>AND EMERGENCY</u> CERTIFICATES</p> <p>7.1 The fee for the issuance of a Temporary <u>or Emergency</u> Certificate of Registration is \$120.00, which fee is non-refundable.</p> <p>7.2 No fee for the issuance of a Temporary Certificate of Registration shall be payable under Article 7.1 where the person held a Provisional Certificate of Registration immediately prior to the issuance of a Temporary Certificate of Registration to that registrant.</p> <p>7.3 The fee for any extension of a Temporary Certificate of Registration is the amount determined by multiplying the annual fee otherwise payable under Article 2.1 the numerator of which is the number of calendar months from the issuance of that Certificate until 10 weeks after the examination, including the month in which</p>	<p>The proposed changes are included in preparation for the draft new Emergency Class of Registration, which has an anticipated approval date of August 2023.</p> <p>The fee will be applicable if or when the Emergency Class is opened by the Board or the Minister of Health.</p> <p>As set out in 12.1 of By-law 2, the Registrar may in <i>exceptional circumstances</i>, waive or reduce a fee, except for the annual or temporary certificate fee.</p>

Current	Proposed Change	Rationale
<p>denominator of which is 12, rounded up to the nearest dollar.</p>	<p>the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.</p> <p><u>7.4 The fee for the renewal of an Emergency Certificate of Registration is \$120.00, which fee is non-refundable.</u></p>	
<p>9.3 The fee for the issuance of a certificate of authorization, whether initial or revised, and the fee for each annual renewal thereof is \$500.00, if in relation to the year commencing November 1, 2015 and \$608.00 if in relation to the year commencing November 1, 2016.</p> <p>9.4 Effective for the year commencing November 1, 2017, the fee for the issuance of a certificate of authorization, whether initial or revised, and the fee for each annual renewal thereof, namely \$608.00 (as set out in Article 9.3 in relation to the year commencing November 1, 2016) shall be increased each and every year from the year commencing November 1, 2017 to the year commencing November 1, 2019 by the lesser of</p> <p>(a) two percent of the fee payable for the previous year, rounded up to the nearest dollar; and</p> <p>(b) a percentage of the fee payable for the previous year equal to the increase, if any, of</p>	<p>9.3 The fee for the issuance of a certificate of authorization, whether initial or revised, and the fee for each annual renewal thereof is \$500.00, if in relation to the year commencing November 1, 2015 and \$608.00 if in relation to the year commencing November 1, 2016. <u>654.00 for 2023, and in subsequent years the Board shall annually review the fees and where the Board deems it appropriate, the fees for issuance and annual renewal of a certificate of authorization, whether initial or revised, may be increased by not more than 2% each year, rounded up to the nearest dollar.</u></p> <p>9.4 Effective for the year commencing November 1, 2017, the fee for the issuance of a certificate of authorization, whether initial or revised, and the fee for each annual renewal thereof, namely \$608.00 (as set out in Article 9.3 in relation to the year commencing November 1, 2016) shall be increased each and every year from the year commencing November 1, 2017 to the year commencing November 1, 2019 by the lesser of</p>	<p>The current certificate of authorization (incorporation) fee is \$641 and has not been increased since 2019. The proposed fee of \$654 is a 2% increase to the current fee (\$13).</p> <p>Increases to the certificate of authorization fee will be determined by the Board each year depending on the resource requirements of the College. The fee will not automatically increase on a yearly basis. Any fee increase will not be greater than 2%.</p> <p>The addition of 9.4 allows for a reduced fee depending on the number of months for which the certificate of authorization is being requested.</p> <p>The proposed late fee for renewals of certificates of authorization provides better cost recovery and aligns with the late fee for annual renewal.</p>

Current	Proposed Change	Rationale
<p>the Canadian Consumer Price Index for the Province of Ontario for the previous 12 months ending in April, rounded up to the nearest dollar.</p> <p>9.5 A dietetic professional corporation or a registrant listed in the College's records as a shareholder of a dietetic professional corporation shall pay an administrative fee of \$70.00 for each notice sent by the Registrar to the corporation or registrant for failure of the corporation to renew its certificate of authorization on time, which fee is due within 30 days of the notice being sent.</p>	<p>(a) two percent of the fee payable for the previous year, rounded up to the nearest dollar; and</p> <p>(b) a percentage of the fee payable for the previous year equal to the increase, if any, of the Canadian Consumer Price Index for the Province of Ontario for the previous 12 months ending in April, rounded up to the nearest dollar.</p> <p><u>9.4 The fee for issuance of a certificate of authorization shall be the amount determined by multiplying the annual fee otherwise payable under Article 9.3 by a fraction, the numerator of which is the number of calendar months from the issuance of that Certificate to the end of the year for which the annual fee is being paid, including the month in which the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.</u></p> <p>9.5 A dietetic professional corporation or a registrant listed in the College's records as a shareholder of a dietetic professional corporation shall pay an administrative fee, of \$70.00 <u>which is 20% of the annual fee,</u> for each notice sent by the Registrar to the corporation or registrant for failure of the corporation to renew its certificate of</p>	

Current	Proposed Change	Rationale
	authorization on time, which fee is due within 30 days of the notice being sent.	
<p>10.2 A fee or monies payable to the College shall be considered paid</p> <p>(a) if payment is made by VISA, MasterCard or other credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;</p> <p>(b) if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; or</p> <p>(c) if payment is made by money order, on the date upon which the money order is actually received at the offices of the College.</p> <p>10.3 Payment by any other means other than those specified in Article 10.2 above is not to be considered payment under this by-law.</p> <p>10.4 A fee of \$35.00 shall be payable by a registrant where the registrant purports to make payment to VISA, MasterCard or other credit card accepted by the College and payment is refused by the credit card provider on first submission by the College.</p>	<p>10.2 A fee or monies payable to the College shall be considered paid</p> <p>(a) if payment is made by VISA, MasterCard or other credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;</p> <p>(b) if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; or</p> <p>(c) if payment is made by money order, on the date upon which the money order is actually received at the offices of the College.</p> <p><u>(b) if payment is made by debit card, electronic bill payment, electronic funds transfer or other electronic means approved by the Registrar, the date upon which the funds are actually received by the College.</u></p> <p>10.3 Payment by any other means other than those specified in Article 10.2 above is not to be considered payment under this by-law.</p>	<p>The proposed changes reflect CDO's currently accepted methods of online payment and builds in flexibility and adaptability as technologies evolve.</p>

Current	Proposed Change	Rationale
<p>10.5 A fee of \$55.00 shall be payable by a registrant where payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.</p>	<p>10.4 A fee of \$35.00 shall be payable by a registrant where the registrant purports to make payment to VISA, MasterCard or other credit card accepted by the College and payment is refused by the credit card provider on first submission by the College.</p> <p>10.5 A fee of \$55.00 shall be payable by a registrant where payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.</p>	
<p>11. REFUNDS</p> <p>11.1 If a registrant having paid the annual fee resigns or dies prior to May 1 of the year for which the annual fee was paid, the Registrar shall, if a request in writing is received prior to November 1 of the year for which the annual fee was paid, issue a refund to the former registrant or his or her estate, the amount of which shall be determined by multiplying the annual fee paid for that year by a fraction, the numerator of which is the number of calendar months from the date of the registrant's resignation or death until and including the following October, but excluding the month in which the registrant resigned or died, and the denominator of which is 12, rounded up to the nearest dollar.</p> <p>11.2 The Registrar shall not exercise her authority under Article 12.1 for a former</p>	<p>11. REFUNDS</p> <p>11.1 If a registrant having paid the annual fee resigns or dies prior to May 1 of the year for which the annual fee was paid, the Registrar shall, if a request in writing is received prior to November 1 of the year for which the annual fee was paid, issue a refund to the former registrant or his or her estate, the amount of which shall be determined by multiplying the annual fee paid for that year by a fraction, the numerator of which is the number of calendar months from the date of the registrant's resignation or death until and including the following October, but excluding the month in which the registrant resigned or died, and the denominator of which is 12, rounded up to the nearest dollar.</p> <p>11.2 The Registrar shall not exercise <u>thei</u>r authority under Article 12.1 for a former</p>	<p>Refunds for certificates of authorization are currently non-refundable and are included in the draft for transparency.</p>

Current	Proposed Change	Rationale
<p>registrant who ceased to be a registrant as a result of a decision or order of a committee or a panel of a committee of the College or in circumstances where the Registrar reasonably believes that the person ceased to be a registrant to avoid the imposition of such decision or order.</p>	<p>registrant who ceased to be a registrant as a result of a decision or order of a committee or a panel of a committee of the College or in circumstances where the Registrar reasonably believes that the person ceased to be a registrant to avoid the imposition of such decision or order.</p> <p><u>11.3 Fees relating to professional corporations are non-refundable.</u></p>	



BY-LAW 2: FEES

June 2021

APPENDIX 2

1. DEFINITIONS

1.1 In this By-Law,

"College's Registration Regulation" means the current Regulation under the Act which sets out the requirements for the issuance of a certificate of registration by the College (currently Part III.1 of Ontario Regulation 593/94, as amended to O.Reg. 374/12).

2. APPLICATION FEE

- 2.1 The application fee for a certificate of registration shall be calculated by adding the fee set out in Article 2.2 to any applicable assessment fee in Articles 2.3 through 2.5.
- 2.2 Subject to the additional fees in Articles 2.3 through 2.5, the fee for each application for a certificate of registration is \$185.00, which fee is non-refundable.
- 2.3 An additional fee of \$425.00 shall be payable where the application requires an assessment to determine whether the requirements of sub-subparagraph 1i B or C of subsection 6(1) of the College's Registration Regulation have been met.
- 2.4 An additional fee of \$425.00 shall be payable where the application requires an assessment to determine whether the requirements of under sub-subparagraph 1ii A, B or D of subsection 6(1) of the College's Registration Regulation have been met.
- 2.5 An additional fee of \$425.00 shall be payable where the applicant is required to satisfy the requirements of clause (a) of subsection 6(2) of the College's Registration Regulation.

3. ANNUAL FEE

- 3.1 Subject to the provisions of this by-law, every registrant holding either a General or Provisional Certificate of Registration shall pay an annual fee of ~~\$590.00~~\$654.00 for 2023, and in subsequent years the Board shall annually review the fees and where the Board deems it appropriate, the annual fee may be increased by not more than 2% each year, rounded up to the nearest dollar.~~plus the increases in the annual fee set out in Article 3.3.~~
- 3.2 The annual fee shall be applicable to the year commencing on November 1 and ending on October 31 and shall be payable on or before the 31st day of October, immediately preceding that year.

~~3.3~~ Effective for the annual fee payable for the year commencing November 1, 2015, the annual fee (payable by virtue of Article 3.1 by registrants holding a General Certificate of Registration and by virtue of Article 3.4 by registrants first issued a General Certificate of Registration) shall be increased each and every year from the year commencing November 1, 2015 to the year commencing November 1, 2019 by the lesser of

~~(a)~~ two percent of the annual fee payable for the previous year, rounded up to the nearest dollar; and

~~(b)~~(a) a percentage of the annual fee payable for the previous year equal to the increase, if any, of the Canadian Consumer Price Index for the Province of Ontario for the previous 12 months ending in April, rounded up to the nearest dollar.

3.43.3 The annual fee to be paid by every registrant for the year in which the person is issued a General Certificate of Registration shall be the amount determined by multiplying the annual fee otherwise payable under Article 3.1 by a fraction, the numerator of which is the number of calendar months from the issuance of that Certificate to the end of the year for which the annual fee is being paid, including the month in which the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.

4. LATE FEES

4.1 No later than 60 days before the date the annual fee is due, the Registrar shall notify the registrant of the amount of the fee and the date on which the fee is due.

4.2 If a registrant fails to pay an annual fee, on or before the date the annual fee is due, the registrant shall pay a late payment fee of 20% of the annual fee.

4.3 The College may charge a registrant a late fee of \$70 if the registrant fails to provide to the College by the specified due date any information that the College is required or authorized to request ~~and receive~~ from the registrant.

5. QUALITY ASSURANCE FEE

5.1 If a registrant fails to provide within 60 days of the date of a written request by the Quality Assurance Committee, a record, survey or other document which the registrant is required by the Regulation governing quality assurance to submit to the Committee, the registrant shall pay a fee of ~~\$70.00~~20% of the annual fee.

6. FEE TO LIFT SUSPENSION AND FOR REINSTATEMENT

6.1 A person who is otherwise entitled to the lifting of a suspension relating to the failure to pay a fee or to provide information to the College or Registrar must pay all outstanding fees and an additional fee of \$70 payable at the time the person requests the lifting of the suspension.

6.2 A person who is otherwise entitled to reinstatement of his or her certificate of registration must pay all outstanding fees and a reinstatement fee of \$185 payable at the time the person requests reinstatement.

7. TEMPORARY AND EMERGENCY CERTIFICATES

- 7.1 The fee for the issuance of a Temporary or Emergency Certificate of Registration is \$120.00, which fee is non-refundable.
- 7.2 No fee for the issuance of a Temporary Certificate of Registration shall be payable under Article 7.1 where the person held a Provisional Certificate of Registration immediately prior to the issuance of a Temporary Certificate of Registration to that registrant.
- 7.3 The fee for any extension of a Temporary Certificate of Registration is the amount determined by multiplying the annual fee otherwise payable under Article 2.1 the numerator of which is the number of calendar months from the issuance of that Certificate until 10 weeks after the examination, including the month in which the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.

~~7.37.4~~ The fee for the renewal of an Emergency Certificate of Registration is \$120.00, which fee is non-refundable.

8. FEES IN RELATION TO PRIOR LEARNING ASSESSMENTS

- 8.1 Where a person applies to be eligible to undergo a prior learning assessment, as referred to in paragraph 2 of subsection 6(1) of the College's Registration Regulation, the person shall pay a fee of \$185.00, which fee is non-refundable.
- 8.2 A person who is eligible for and wishes to undergo a Performance Based Assessment (which may be done as part of a prior learning assessment), shall pay a fee of \$2300 payable to the College prior to the College arranging for that assessment.
- 8.3 Where a person wishes to appeal a decision in relation to the person's eligibility to undergo a prior learning assessment or in relation to the disqualification from or the results of any component of a -prior learning assessment, the applicant shall pay a fee of \$75.00, which fee shall be payable prior to the consideration of the appeal.

9. CERTIFICATES OF AUTHORIZATION-HEALTH PROFESSIONAL CORPORATIONS

- 9.1 The fee for the application for a certificate of authorization for a dietetic professional corporation, including on any application for reinstatement of a certificate of authorization, is \$185.00, which fee is non-refundable.
- 9.2 The fee for the annual renewal of a certificate of authorization shall be applicable to the year commencing on November 1 and ending on October 31 and shall be payable on or before the 31st day of October, immediately preceding that year.
- 9.3 The fee for the issuance of a certificate of authorization, whether initial or revised, and the fee for each annual renewal thereof is ~~\$500~~ 654.00, ~~if in relation to the year commencing November 1, 2015 and \$608.00 if in relation to the year commencing November 1, 2016~~ for 2023, and in subsequent years the Board shall annually review the fees and where the Board deems it appropriate, the fees for issuance and annual renewal of a certificate of authorization, whether initial or revised, may be increased by not more than 2% each year, rounded up to the nearest dollar.

9.4 The fee for issuance of a certificate of authorization shall be the amount determined by multiplying the annual fee otherwise payable under Article 9.3 by a fraction, the numerator of which is the number of calendar months from the issuance of that Certificate to the end of the year for which the annual fee is being paid, including the month in which the Certificate is to be issued, and the denominator of which is 12, rounded up to the nearest dollar.

~~9.4 — Effective for the year commencing November 1, 2017, the fee for the issuance of a certificate of authorization, whether initial or revised, and the fee for each annual renewal thereof, namely \$608.00 (as set out in Article 9.3 in relation to the year commencing November 1, 2016) shall be increased each and every year from the year commencing November 1, 2017 to the year commencing November 1, 2019 by the lesser of~~

~~(a) — two percent of the fee payable for the previous year, rounded up to the nearest dollar; and~~

~~(b) — a percentage of the fee payable for the previous year equal to the increase, if any, of the Canadian Consumer Price Index for the Province of Ontario for the previous 12 months ending in April, rounded up to the nearest dollar.~~

9.5 A dietetic professional corporation or a registrant listed in the College's records as a shareholder of a dietetic professional corporation shall pay an administrative fee, which is of 20% of the annual fee, ~~\$70.00~~ for each notice sent by the Registrar to the corporation or registrant for failure of the corporation to renew its certificate of authorization on time, which fee is due within 30 days of the notice being sent.

9.6 The fee for the issuing of a document or certificate respecting a dietetic professional corporation, other than the first certificate of authorization or one annual renewal of that certificate of authorization is \$50.00.

10. OTHER FEES/RULES RESPECTING PAYMENTS

10.1 If a person requests the Registrar to do anything that the Registrar is required or authorized to do by statute, by Regulation or by by-law, the person shall pay the fee required by the applicable by-law or if there is no fee provided by the by-law, the fee set by the Registrar for doing so.

10.2 A fee or monies payable to the College shall be considered paid

(a) if payment is made by ~~VISA, MasterCard or other~~ credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;

~~(b) — if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; or~~

~~— if payment is made by money order, on the date upon which the money order is actually received at the offices of the College, or.~~

~~(e)(b)~~ if payment is made by debit card, electronic bill payment, electronic funds transfer or other electronic means approved by the Registrar, the date upon which the funds are actually received by the College.

10.3 Payment by any other means other than those specified in Article 10.2 above is not to be considered payment under this by-law.

~~10.4 A fee of \$35.00 shall be payable by a registrant where the registrant purports to make payment to by VISA, MasterCard or other credit card acceptable by the College and payment is refused by the credit card provider on first submission by the College.~~

~~10.5 A fee of \$55.00 shall be payable by a registrant where payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.~~

11. REFUNDS

11.1 If a registrant having paid the annual fee resigns or dies prior to May 1 of the year for which the annual fee was paid, the Registrar shall, if a request in writing is received prior to November 1 of the year for which the annual fee was paid, issue a refund to the former registrant or his or her estate, the amount of which shall be determined by multiplying the annual fee paid for that year by a fraction, the numerator of which is the number of calendar months from the date of the registrant's resignation or death until and including the following October, but excluding the month in which the registrant resigned or died, and the denominator of which is 12, rounded up to the nearest dollar.

11.2 The Registrar shall not exercise her authority under Article 12.1 for a former registrant who ceased to be a registrant as a result of a decision or order of a committee or a panel of a committee of the College or in circumstances where the Registrar reasonably believes that the person ceased to be a registrant to avoid the imposition of such decision or order.

~~11.211.3~~ Fees relating to professional corporations are non-refundable.

12. WAIVER/REDUCTION OF FEES

12.1 The Registrar may in exceptional circumstances waive or reduce any fee referred to in this by-law, other than the annual fee or the fee for the issuance of a Temporary Certificate of Registration, provided the waiver or reduction is not based on the individual's ability to pay the fee.

13. PAYMENT BY CASH

13.1 Payment by cash shall not be accepted by the College.



Board Briefing Note

Topic:	By-law 1 Consultation Feedback
Purpose:	For Decision
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Governance Committee

ISSUE

To review the consultation feedback and approve the proposed amendments to by-law 1.

PUBLIC INTEREST RATIONALE

Good governance is at the heart of effective professional regulation and decision-making in the public interest. The proposed by-law changes are reflective of modern governance practices intended to strengthen public trust in the regulatory framework and reduce any misconceptions about the role of professional Board directors.

BACKGROUND

At its March 24 meeting, the Board approved draft by-law 1 amendments in principle, for the purpose of public consultation.

The proposed amendments to by-law 1 were circulated to registrants and other system partners for feedback for the required 60 days. The consultation closed on June 2, 2023.

The Governance Committee reviewed the available consultation feedback at its May meeting.

FOR CONSIDERATION

Feedback Received

The consultation feedback (*Attachment 1*) is generally supportive of the proposed governance changes. There were three general themes to the feedback:

1. Eliminating electoral districts

There was concern raised about eliminating electoral districts and the impact it would have on Board diversity. Some respondents commented that with the move to a single electoral district, there would be less representation from the Northern regions. Echoing this were concerns about the Board being disproportionately represented by high populated areas, such as Toronto. Equal representation from all areas of Ontario was identified as a priority to some respondents due to the different client needs found across the province. There were recommendations to decrease the number of electoral districts to preserve the geographical diversity.

2. High standards for Board directors

The feedback signaled support for establishing high standards and a rigorous selection process for Board directors. Respondents were also in favour of moving towards a competency and attribute-based Board.

3. Diversity

Diversity on the Board was identified as a priority. While geographical diversity was highlighted, so too were other types of diversity, including professional background and experience with different socio-economic populations.

Mitigation of Concerns and Potential Unintended Consequences

With a single electoral district, it would not be possible to ensure geographical diversity in an elections-based system, and there would be a possibility of a disproportionate number of Board directors from Toronto and the GTA. This possibility was previously considered by the Governance Committee and the Board.

With the Competency and Attribute Framework now in place, geographical diversity will be taken into account in the Board director election screening process. Additionally, a specific focus on geographical diversity in Committee appointments can also be applied as needed. Communications efforts regarding elections and committee appointments can be modified to target RDs working in the Northern regions. The College will continue to review any barriers to participation.

Further, the elimination of the 6-nominators requirement will remove a significant barrier to becoming eligible to run for election, especially for those in rural areas who do not necessarily have access to a sufficient network of dietitians to meet the nomination requirement.

RECOMMENDATION

To approve the amendments to by-law 1 as recommended by the Governance Committee.

ATTACHMENTS

- Appendix 1: By-law 1 Consultation Feedback
- Appendix 2: Summary 3-Column Chart with Proposed Amendments to By-law 1
- Appendix 3: By-law 1 with tracked changes

By-law 1 Consultation Feedback

1. I have no concerns with the proposed changes.
2. Agree with not needing nominations for candidates, appreciate the inclusive terminology. I understand the single electoral district, I think it would be important to still outline a need for diversity in the board members - whether geographically, professional background work setting, etc.
3. I appreciate and value a change to a skills based selection of RD representatives on the board. Decreasing the size of the board is also appropriate as per best practice and to equalize RD vs Public members. Thank you for moving this forward.
4. I support these proposed amendments to By-Law 1.
5. No opposition
6. Dietetics as a profession already skews extremely female, white, and often in more rural areas. This proposal does nothing to address the fact that this is similarly reflected in the governance structure and if anything re-enforces existing thinking.
7. There should be equal representation for all areas in Ontario. Working in the north is much different than more populous areas and thus RDs have different needs in regards to support from CDO.
8. No feedback for by law 1. Feedback continued for By-Law 2: We have one of the highest registration fees within health care professionals; I think it is unacceptable that our fees have continued to increase for the same service being provided.
9. None
10. As a Northern Ontario RD, I worry that removing the geographical districts will decrease our representation within CDO Board.
11. I am concerned that there will no longer be representation of public throughout Ontario if the geographical structure is eliminated. Remote areas of the province have unique issues including but not limited to access to medical services, including Dietitians and use of virtual treatment more often due to distance to services. I am concerned that elections will result in only directors from highly populated areas, neglecting issues of remote areas.
12. I think maybe decrease, but not eliminate the electoral districts - that may be more efficient but at the same time ensure that all over the province, it's represented.
13. No concerns.

14. I would be interested to view the competency and attribute framework as this could potentially reduce my hesitancy regarding the changes. Being in Northwestern Ontario, I worry that by eliminating the electoral districts, the board will be filled solely with people who live in southern Ontario. There are several issues in dietetic practice that are unique to practicing in rural and remote communities and I wouldn't want to see these be overlooked.
15. I do not agree with the governance being elected from all of Ontario. I think it is important to have representation for different areas. For example, the needs of Northern Ontario are different from the needs of Southern Ontario.
16. None
17. I don't feel it's necessary to change gender pronouns.
18. Approve
19. Overall seems ok.
20. In support of streamlining the current governance structure to improve efficiency and reduce costs. Any money recovered from these changes should be applied directly to the reduction of annual fees which far surpass those of other healthcare professionals.
21. I am in favour of reducing the number of registrant directors, but would like to see some geographic representation remain.
22. I think it looks good.
23. n/a
24. No feedback
25. Keeping people representative of different areas seems more appropriate than the proposed structure.
26. Good idea to eliminate geographical representation.
27. I would like to keep the number of elected members at 8 to ensure the representation of diversity in socio-demographics and areas of practice.
28. I like the proposed amendments. I think they make sense.
29. The proposed amendments to Bylaw 1 are adequate.
30. reviewed and agree.

31. I agree with the proposed amendments to the By Law 1- Governance Structure though one thought is to have rural/remote dietitians/populations supported in some way.
32. I support the removal of geographical districts as well as the adoption of inclusive language.
33. The proposed amendments should include a structure where a national governance is provided, not a provincial one, where RD's can work and provide services across Canada.
34. I agree that eliminating multiple, geography-based districts from the elections process for the board makes sense, as CDO does not represent the entire country. I also agree that electoral candidates should not require nominations from six dietitians - perhaps this can be reduced to three dietitians and ensuring a rigorous selection process to choose the best candidates, including a competency and attribute framework.
35. I have no issues with this proposal.
36. I think the proposed amendments make sense and I like the modernization and focus on inclusivity, as well as the emphasis on skills needed. I do worry that getting rid of the electoral districts may mean some more remote and less populated areas will not have representatives step forward. Important that needs of ALL Ontario RDs and clients are considered, not just GTA/Golden Horseshoe, the most populated areas.
37. I am in agreement with the changes proposed.
38. New amendments appear appropriate for By-Law 1.
39. I am in agreement with the proposed changes.
40. I have reviewed and am in agreement with the proposed amendments.
41. I worry about RDs in the northern parts of Ontario being represented through this process. If this were to move forward, it means RDs participating on the board could all be from southern ON (specifically GTA). Northern RDs face different issues I think representation here matters. I disagree with the 3 year cooling off period. That seems very long. A one year cooling off period would be more reasonable and better align with norms around this.
42. These are fine.
43. Think there should be a NORTH & a SOUTH district designation as issues in remote areas are different & more challenging than in more populated areas. Propose the registrants be nominated by THREE versus six people. Concur with proposal of a framework outlining knowledge, skills, experience, and attributes as an eligibility requirement for prospective Board directors. Concur with reducing Board from 8-6 members.

44. Agree.
45. I support the change to have one geographical area can 7.
46. The amendment states “ Eliminating multiple ... will avoid the perception that professional members of the Board represent the profession.” but this is very unclear. HOW does this avoid that perception? You also write “CDO proposes the adoption of a framework which outlines the knowledge, skills, experience, and attributes as an eligibility requirement for prospective Board directors.” What do you mean by “attributes”? this is not defined.
47. It is difficult to provide endorsement/feedback for a structure that has not been clearly defined. There could be major implications to moving to a single electoral district, mainly the lack of inclusion from Northern Ontario. I also question of the financial costs associated with creating a steering committee to 'screen' candidates. It feels like the diversity on council will suffer with increased costs to the membership. More info is needed.
48. That’s ok.
49. Appear fair, inclusive and forward thinking. In agreement.
50. Please consider including at least 1 director from a rural location to ensure that the needs of rural population are supported.
51. I have reviewed the recent request for consultation on By-Law 1 regarding governance structure and the suggested direction to move from a multi-district model to using an Ontario-wide electoral district. It is my understanding that this direction has come from the provincial government. I was wondering if the current consultation is asking for feedback on whether or not the College moves in the direction of a single electoral district or is the plan to move in that direction and provide feedback on what that would look like. I have concerns on ensuring representation from the north, which the current model allows.

Summary of Proposed Changes to By-law 1

Existing Clause	Proposed New Clause	Rationale for Change
<p>1.1 Definitions</p> <p>In this by-law and in any other by-law of the College, unless otherwise defined or required by the context of the specific provision,</p> <p>[...]</p> <p>“committee appointee” means a member of the College who is not a councillor (as defined below) and who is appointed to a committee of the College;</p>	<p>1.1 Definitions</p> <p>In this by-law and in any other by-law of the College, unless otherwise defined or required by the context of the specific provision,</p> <p>[...]</p> <p>“Board” or “Board of Directors” <u>means the board of directors or Council of the College;</u></p> <p>“Chair of the Board” <u>means the Chair of the Board of Directors, referred to in the <i>Regulated Health Professions Act, 1991</i> and previously referred to in these by-laws as the “President”, and does not include a committee chair or a person appointed as the chair or presiding officer of a Board meeting pursuant to section 7.8 of these by-laws;</u></p> <p>“committee appointee” means a member-registrant of the College who is not a councillor-director (as defined below) and who is appointed to a committee of the College;</p>	<p>The revised definitions reflect changes to CDO’s terminology, which have been amended throughout the document.</p> <p>The title of “Council” has been replaced with “Board of Directors” or “Board.”</p> <p>The title of “Chair of the Board” has been added to the definitions for clarity and will replace the term “President.”</p> <p>The title of “Councillor” has been replaced by “Director.”</p> <p>The title of “Member” has been replaced by “Registrant.”</p> <p>The title of “Vice-Chair of the Board” has been added to the definitions for clarity and will replace the term “Vice-President.”</p>

<p>“committee member” means a member of a committee of the College;</p> <p>“Council” means the Council of the College;</p> <p>“councillor” means a member of Council and includes public and elected councillors;</p> <p>“elected councillor” means a member of the Council described in clause 5(1)(a) of the Act and includes a member elected or appointed to fill a vacancy;</p> <p>“member” means a member of the College as that term is used in the <i>Regulated Health Professions Act, 1991</i> and the Act;</p> <p>“public councillor” means a councillor who is appointed to Council by the Lieutenant Governor in Council;</p>	<p>“committee member” means a member of a committee of the College;</p> <p>“Council” means the Council of the College;</p> <p>“councillor director” means a member of Council the <u>Board of Directors</u> and includes public and elected councillors <u>directors</u>, <u>previously known as public and elected “councillors” in these by-laws</u>;</p> <p>“elected councillor director” means a member of the <u>Council Board of Directors</u> described in clause 5(1)(a) of the Act and includes a member elected or appointed to fill a vacancy;</p> <p>“member” means a member of the College as that term is used in the <i>Regulated Health Professions Act, 1991</i> and the Act;</p> <p>“public councillor director” means a councillor <u>director</u> who is appointed to Council by the Lieutenant Governor in Council;</p> <p>“registrant” means a member of the College as that term is used in the <i>Regulated Health Professions Act</i>,</p>	
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	<p><u>1991 and the Act and as previously used in these by-laws;</u></p> <p><u>“Vice-Chair of the Board” means the Vice-Chair of the Board of Directors, referred to in the Regulated Health Professions Act, 1991 and previously referred to in these by-laws as the “Vice-President” and does not include a committee vice-chair;</u></p>	
<p>2.19 Remuneration and Expenses</p> <p>Council officers, elected councillors and committee appointees shall be paid a stipend and shall be reimbursed by the College for travelling and other expenses reasonably incurred in relation to the performance of their duties in accordance with policies approved from time to time by Council.</p>	<p>2.19 Remuneration and Expenses</p> <p><u>Council officers, elected councillors, directors, and committee appointees, and officers who are not public directors</u> shall be paid a stipend and shall be reimbursed by the College for travelling and other expenses reasonably incurred in relation to the performance of their duties in accordance with policies approved from time to time by Council.</p>	<p>Although the definition of officers of the Board has not changed, this section has been amended to specify that remuneration by the College does not apply to public directors (formerly public councillors). This is the current practice as per legislation and has been added for transparency and clarity.</p>
<p>3.1 Electoral Districts</p> <p>The following are the electoral districts for the purpose of the election of members to Council (with necessary modifications by the Registrar to ensure that the entire province is covered and that there is no overlap of districts):</p> <p>(a) Electoral district 1, the south-western area, composed of the counties of Elgin, Essex, Kent, Lambton,</p>	<p>3.1 Electoral Districts</p> <p><u>(a) For all Board of Directors elections up to and including the Board of Directors election in 2023, and for any by-elections prior to the Board of Directors election in 2024,</u></p> <p>The following are the electoral districts for the purpose of the election of members to Council (with necessary modifications by the Registrar to ensure that the entire province is</p>	<p>Elections will no longer be based on 7 electoral districts beginning in 2024. Elections will be based on a single electoral district, encompassing all of Ontario.</p> <p>Any by-elections before the 2024 election will occur within the existing 7 electoral districts.</p>

<p>Middlesex, Oxford, Bruce, Grey, Perth and Huron.</p>	<p>covered and that there is no overlap of districts):</p>	
<p>(b) Electoral district 2, the central-western area, composed of the counties of Brant, Dufferin and Wellington and the Regional Municipalities of Haldimand, Norfolk, Halton, Hamilton Wentworth, Niagara and Waterloo.</p>	<p>(a)i. Electoral district 1, the south-western area, composed of the counties of Elgin, Essex, Kent, Lambton, Middlesex, Oxford, Bruce, Grey, Perth and Huron.</p> <p>(b)ii. Electoral district 2, the central-western area, composed of the counties of Brant, Dufferin and Wellington and the Regional Municipalities of Haldimand, Norfolk, Halton, Hamilton Wentworth, Niagara and Waterloo.</p>	
<p>(c) Electoral district 3, the central area, composed of the Municipality of Metropolitan Toronto, and the Regional Municipality of York.</p>	<p>(c)iii. Electoral district 3, the central area, composed of the Municipality of Metropolitan Toronto, and the Regional Municipality of York.</p>	
<p>(d) Electoral district 4, the eastern area, composed of the counties of Frontenac, Hastings, Lanark, Prince Edward and Renfrew, and the united counties of Leeds and Grenville, Lennox and Addington, Prescott and Russell, Stormont, Dundas and Glengarry and The Regional Municipality of Ottawa, Carleton.</p>	<p>(d)iv. Electoral district 4, the eastern area, composed of the counties of Frontenac, Hastings, Lanark, Prince Edward and Renfrew, and the united counties of Leeds and Grenville, Lennox and Addington, Prescott and Russell, Stormont, Dundas and Glengarry and The Regional Municipality of Ottawa, Carleton.</p>	
<p>(e) Electoral district 5, the north-eastern area, composed of the territorial districts of Algoma, Cochrane, Manitoulin, Nipissing, Parry Sound, Sudbury, Timiskaming and The District Municipality of Muskoka.</p>	<p>(e)v. Electoral district 5, the north-eastern area, composed of the territorial districts of Algoma, Cochrane,</p>	
<p>(f) Electoral district 6, the north-western area, composed of the territorial</p>		

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<p>districts of Kenora, Rainy River and Thunder Bay.</p> <p>(g) Electoral district 7, the central-eastern area, composed of the counties of Haliburton, Northumberland, Peterborough, City of Kawartha Lakes, Simcoe, and the Regional Municipalities of Peel and Durham.</p>	<p>Manitoulin, Nipissing, Parry Sound, Sudbury, Timiskaming and The District Municipality of Muskoka.</p> <p>(f)vii. Electoral district 6, the north-western area, composed of the territorial districts of Kenora, Rainy River and Thunder Bay.</p> <p>(g)vii. Electoral district 7, the central-eastern area, composed of the counties of Haliburton, Northumberland, Peterborough, City of Kawartha Lakes, Simcoe, and the Regional Municipalities of Peel and Durham.</p> <p><u>(b) Beginning with the Board of Directors election in 2024 and for all elections thereafter, there will be one single electoral district that encompasses all of Ontario, and all elected directors will be elected in this electoral district.</u></p> <p><u>(c) As of the date upon which the directors elected in the 2024 Board of Directors election take office, all directors then serving on the Board of Directors who were elected in one of the former seven electoral districts will be deemed to have been elected in the single electoral district of Ontario. The terms of office of these directors on the Board of Directors and on any committees will be otherwise unaffected and all references in</u></p>	
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	<u>these by-laws to elected directors will apply equally to these directors.</u>	
<p>3.2 Number of Elected Councillors</p> <p>Eight members of the College shall be elected to the Council as elected councillors.</p>	<p>3.2 Number of Elected CouncillorsDirectors</p> <p>Eight members of the College shall be elected to the Council as elected councillors.<u>In the years 2024 and 2025, the number of elected directors shall be reduced from eight to six members, according to the following schedule and the election timeline set out in section 3.8 of these by-laws:</u></p> <p><u>(a) As of the date upon which the directors elected in the 2024 Board of Directors election take office, there will be seven elected directors on the Board of Directors.</u></p> <p>(a)<u>(b) As of the date upon which the directors elected in the 2025 Board of Directors election take office, there will be six elected directors on the Board of Directors.</u></p>	<p>The Board will be comprised of six of elected directors. The reduction in directors will take place over a two-year period (2024-2025).</p> <p>In this gradual approach, 2 director seats will be eliminated as terms expire over two years, beginning in 2024.</p> <p>In 2024, one director seat will be eliminated, creating a Board consisting of 7 elected directors.</p> <p>In 2025, a second director seat will be eliminated, creating a Board consisting of 6 elected directors.</p>
<p>3.3 Elected Councillors from Each District</p> <p>The number of members elected in an electoral district is,</p> <p>(a) one for each of electoral districts 1, 2, 4, 5, 6 and 7; and</p> <p>(b) two for electoral district 3.</p>	<p>3.3 Elected CouncillorsDirectors from Each District</p> <p><u>For Board of Directors elections and by-elections prior to April 2024, the number of members-registrants elected in an electoral district is,</u></p>	<p>In 2024, terms will end in the current districts 5, 6 and 7. At this time, the number of Board directors will be reduced by one, leaving two director seats open for the 2024 election.</p> <p>In 2025, the terms of the three directors in the current districts 1 and 3 will expire and as in the previous year, the number of Board directors will be reduced by one. This will</p>

	<p>(i) one for each of electoral districts 1, 2, 4, 5, 6 and 7; and</p> <p>(ii) two for electoral district 3.</p>	result in a Board comprised of six professional directors by June 2025.
<p>3.4 Eligibility to Vote in an Electoral District</p> <p>A member is eligible to vote in an election being held for an electoral district if on the thirty-fifth day before the date fixed for the election, the member principally practises in that electoral district, or if the member is not engaged in the practice of dietetics, the member principally resides in the electoral district.</p>	<p>3.4 Eligibility to Vote in an Electoral DistrictElection</p> <p><u>(a) For Board of Directors by-elections held in an electoral district prior to April 2024, a member-registrant is eligible to vote in an election being held for an electoral district if on the thirty-fifth day before the date fixed for the election, the member principally practises in that electoral district, or if the member is not engaged in the practice of dietetics, the member principally resides in the electoral district.</u></p> <p><u>(b) For Board of Directors elections and by-elections held in and after April 2024, a registrant is eligible to vote if on the thirty-fifth day before the date fixed for the election, the registrant principally practises in Ontario, or if the registrant is not engaged in the practice of dietetics, the registrant principally resides in Ontario.</u></p>	
<p>3.8 Timing of Elections</p> <p>Elections for elected councillors shall be held simultaneously as follows:</p>	<p>3.8 Timing of Elections</p> <p><u>(a) Until the year 2023, elections for elected councillors directors shall be held simultaneously as follows:</u></p>	This affirms that current rules are to remain for the 2023 election (i.e. no reduction in board size), and beginning in 2024, two directors will be elected annually.

<p>in April of the year 2004 and in April of every third year thereafter for electoral districts 1 and 3;</p> <p>in April of the year 2002 and in April of every third year thereafter for electoral districts 2 and 4;</p> <p>in April of the year 2003 and in April of every third year thereafter for electoral districts 5, 6 and 7.</p>	<p>in April of the year 2004 and in April of every third year thereafter for electoral districts 1 and 3;</p> <p>in April of the year 2002 and in April of every third year thereafter for electoral districts 2 and 4;</p> <p>in April of the year 2003 and in April of every third year thereafter for electoral districts 5, 6 and 7.</p> <p><u>(b) Beginning in April of the year 2024, two directors shall be elected each year in April who will serve in the single electoral district of Ontario.</u></p> <p><u>(c) In the event that an election cannot be held in April of a given year, the election shall be held as soon as possible thereafter, and all references in these by-laws to the Board of Directors elections in April will apply equally to the delayed election.</u></p>	<p>This provision will work together with section 3.2 (board reduction from 8 – 6 elected directors over two years).</p> <p>Provision (c) has also been added to account for the possibility that an election cannot be held in April.</p>
<p>3.10 Eligibility for Election to Council</p> <p>A member is eligible for election in an electoral district if, on the date of election or acclamation:</p> <p>(a) the member is engaged in the practice of dietetics in the electoral district for which he or she is nominated or, if the member is not engaged in the practise of dietetics,</p>	<p>3.10 Eligibility for Election to CouncilBoard of Directors</p> <p>A member-registrant is eligible for election in an electoral district to the Board of Directors if, on the date of election or acclamation, whichever is later:</p> <p>(a) the member-registrant is engaged in the practice of dietetics in the electoral district for which he or she</p>	<p><u>This affirms that a single, Ontario-wide electoral district will be used for elections 3.10(a).</u></p> <p><u>Clarification was made to how the cooling-off period is calculated to avoid misinterpretation in determining eligibility 3.10(r)(s).</u></p> <p>The eligibility criteria for Board elections has been expanded to include competency and</p>

<p>principally resides in the electoral district for which he or she is nominated;</p> <p>[...]</p>	<p>is nominated Ontario or, if the member-registrant is not engaged in the practise of dietetics, principally resides in the electoral district for which he or she is nominated Ontario, or in the case of a by-election prior to April 2024, in the electoral district for which he or she is nominated;</p> <p>[...]</p> <p>(r) the member-registrant is not an employee of the College and has not been an employee of the College during within the previous two (2) years;</p> <p>(s) the member-registrant is not an applicant for employment at the College and has not applied for employment at the College during within the previous year;</p> <p><u>(t.1) the registrant meets the competency and attribute framework requirements as set out in the applicable College policy approved by the Board of Directors and demonstrates this by fulfilling the requirements of the competency and attribute screening process approved by the Board of Directors and set out in the applicable College policy;</u></p>	<p>attribute requirements and a screening process approved by the Board <u>3.10(t.1)</u>.</p> <p><u>The cooling-off period for registrants with a prior leadership, employment or contractual role with an association or other organization that advances the interests of dietitians has been extended from one-year to three-years. This is to reduce the likelihood of oncoming Board directors having competing fiduciary duties and that their previous advocacy role does not compromise CDO's mandate to protect the public interest 3.10(x.1).</u></p>
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	<p>(x) the registrant does not hold a position that would cause the registrant, if elected as a Board director, to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization;</p> <p>(x.1) including but not limited to having or had duringthe registrant does not, and did not within the previous <u>three (3) years</u>, <u>hold</u> a leadership, employment or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians, or oversees the regulation of dietitians;</p>	
<p>3.13 Notification of Election</p> <p>No later than 90 days before the date of an election, the Registrar shall notify every member eligible to vote of the date, time and electoral district of the election and of the nomination procedure.</p>	<p>3.13 Notification of Election</p> <p>No later than 90 days before the date of an election, the Registrar shall notify every member-registrant eligible to vote of the date, time and electoral district of the election and of the nomination-application procedure.</p>	<p>Nominations will be replaced by applications to align with the new competency and attribute-based election and screening process.</p>
<p>3.14 Nominations</p> <p>The nomination of a candidate for election as a member of Council shall be in writing and</p>	<p>3.14 NominationsApplications</p> <p>The nomination ofA registrant who seeks to <u>be</u> a candidate for election as a member of</p>	<p>Candidates for Board elections will be required to submit an application.</p>

<p>shall be given to the Registrar at least 60 days before the date of the election (the “nomination deadline”). The nomination must be signed by the candidate and by at least six members who support the nomination and who are eligible to vote in the electoral district in which the election is to be held.</p>	<p>Council director shall be apply in writing and shall be given submit the application to the Registrar at least 60 days before the date of the election (the “nomination application deadline”). The nomination must be signed by the candidate and by at least six members who support the nomination and who are eligible to vote in the electoral district in which the election is to be held.</p>	<p>The requirement for electoral candidates to have their nomination form signed by six dietitians eligible to vote in the electoral district in which the election is being held, has been removed. Registrants will not be required to be nominated by dietitians to be eligible to run in an election.</p>
<p>3.15 Acclamation</p> <p>If the number of candidates nominated for an electoral district is less than or equal to the number of members to be elected in that electoral district, the Registrar shall declare the candidates or candidates elected by acclamation.</p>	<p>3.15 Acclamation</p> <p><u>(a) For elections and by-elections prior to April 2024, if the number of candidates nominated who have applied for and are eligible for election to the Board of Directors</u> for an electoral district is less than or equal to the number of members-registrants to be elected in that electoral district, the Registrar shall declare the candidates or candidates elected by acclamation.</p> <p><u>(b) For elections and by-elections in and after April 2024, if the number of candidates who have applied for and are eligible for election to the Board of Directors is less than or equal to the number of registrants to be elected in that election, the Registrar shall declare the candidate or candidates elected by acclamation. If the number of candidates elected by acclamation is less than the number of registrants that were to be elected in that election, the Registrar shall, as soon as</u></p>	<p>Amended to clarify acclamation process until 2024 (where there are 7 electoral districts).</p> <p>Amended to reflect a single, Ontario-wide electoral district for elections after 2024 where candidates are acclaimed.</p>

	<u>possible, call a by-election for the remaining seat or seats.</u>	
<p>3.16 No Candidates for Election</p> <p>If there are no candidates who are eligible for election, the Registrar shall, as soon as possible, call a by-election.</p>	<p>3.16 No Candidates for Election</p> <p>If there are no candidates who <u>have applied for and</u> are eligible for election, the Registrar shall, as soon as possible, call a by-election.</p>	Amended to reflect the new application process for Board elections.
<p>3.17 Information about Candidates</p> <p>A candidate shall provide to the Registrar by the nomination deadline or such later date as the Registrar permits, biographical information in a manner acceptable to the Registrar for the purpose of distribution to members eligible to vote in the election.</p>	<p>3.17 Information about Candidates</p> <p>A candidate shall provide to the Registrar by the nomination application deadline or such later date as the Registrar permits, biographical information in a manner acceptable to the Registrar for the purpose of distribution to members-registrants eligible to vote in the election.</p>	Amended to reflect the new application process for Board elections.
<p>3.18 Administering and Supervising Elections</p> <p>The Registrar will supervise and administer the election process and may for the purpose of carrying out that duty and subject to the by-laws:</p> <p>[...]</p> <p>(e) if there has been a non-compliance with an application or election requirement, determine whether the non-compliance should be waived in circumstances where</p>	<p>3.18 Administering and Supervising Elections</p> <p>The Registrar will supervise and administer the election process and may for the purpose of carrying out that duty and subject to the by-laws:</p> <p>[...]</p> <p>(e) if there has been a non-compliance with a nomination an <u>application</u> or election requirement, determine whether the non-compliance should be waived in circumstances where the fairness or</p>	Amended to reflect the new application process for Board elections.

<p>the fairness or integrity of the election will not be affected;</p> <p>[...]</p>	<p>integrity of the election will not be affected;</p> <p>[...]</p>	
<p>3.19 Voting Package</p> <p>No later than thirty days before the date of an election the Registrar shall send by electronic or other means a voting package to every registrant eligible to vote. The package will include a list of candidates and a ballot or electronic access to a ballot and an explanation of the voting procedure.</p>	<p>3.19 Voting Package</p> <p>No later than thirty days before the date of an election the Registrar shall send by electronic or other means a voting package to every member-registrant eligible to vote in the districtelection, and in the case of elections held prior to April 2024, eligible to vote in the district. The package will include a list of candidates in the electoral district and a ballot or electronic access to a ballot and an explanation of the voting procedure.</p>	<p>Amended to reflect a single, Ontario-wide electoral district as of 2024.</p>
<p>3.20 Voting</p> <p>A member eligible to vote may cast as many votes on a ballot as there are members to be elected from that electoral district. A member shall not cast more than one vote for any one eligible candidate.</p>	<p>3.20 Voting</p> <p>A member-registrant eligible to vote may cast as many votes on a ballot as there are members-registrants to be elected from that electoral district in that election. A member-registrant shall not cast more than one vote for any one eligible candidate.</p>	<p>Amended to reflect terminology changes.</p>
<p>4.4 Disqualification and Removal of Public Councillor</p> <p>The following procedure applies to the disqualification and removal of a Public Councillor:</p>	<p>4.4 Disqualification- and Removal of Public CouncillorDirector</p> <p>The following procedure applies to the disqualification and removal of a pPublic Councillordirector:</p>	<p>Public directors will be required to meet the same competency and attribute requirements as elected directors.</p>

<p>(a) If a councillor believes that a public councillor does not meet one of the criteria set out in clauses (d), (f), (g), (i), (q), (r), (s), (u), (v), (w), (x) and (y) of section 3.10, or clauses 4.1 (c) through (f), he or she shall advise the Registrar and Executive Committee in writing.</p> <p>(b) If the Registrar receives information suggesting that a public councillor does not meet one or more of the criteria in clauses (d), (f), (g), (i), (q), (r), (s), (u), (v), (w), (x) and (y) of section 3.10, or clauses 4.1 (c) through (f), the Registrar shall advise the Executive Committee in writing.</p> <p>(c) The procedure in section 4.3 clauses (c) through (e) shall govern the disqualification of a Public Councillor with necessary modifications.</p>	<p>(a) If a councillor director believes that a public councillor director does not meet one of the criteria set out in clauses (d), (f), (g), (i), (q), (r), (s), (t.1), (u), (v), (w), (x) and (y) of section 3.10, or clauses 4.1 (c) through (f), he or she shall advise the Registrar and Executive Committee in writing.</p> <p>(b) If the Registrar receives information suggesting that a public councillor director does not meet one or more of the criteria in clauses (d), (f), (g), (i), (q), (r), (s), (t.1), (u), (v), (w), (x) and (y) of section 3.10, or clauses 4.1 (c) through (f), the Registrar shall advise the Executive Committee in writing.</p> <p>(c) The procedure in section 4.3 clauses (c) through (e) shall govern the disqualification of a pPublic Councillor director with necessary modifications.</p>	
<p>5.2 Filling Vacancy – Less than One Year</p> <p>If the seat of an elected councillor becomes vacant in an electoral district less than one year before the next election in that electoral district, the Council may:</p> <p>(a) leave the seat vacant;</p>	<p>5.2 Filling Vacancy – Less than One Year</p> <p>(a) If prior to the 2024 Board of Directors election, the seat of an elected councillor director becomes vacant in an electoral district less than one year before the next election in that electoral district expiry of the director's term of office, the Council Board of Directors may:</p>	<p>Amended to clarify the process for handling vacancies of less than one year prior to and after 2024.</p>

<p>(b) appoint as an elected councillor the eligible candidate who had the most votes of all of the unsuccessful candidates for that position in that electoral district in the last election; or</p> <p>(c) direct the Registrar to hold a by-election for that electoral district.</p>	<p>(a)i. _____ leave the seat vacant;</p> <p>i.ii. _____ appoint as an elected councillor <u>director</u> the eligible candidate who had the most votes of all of the unsuccessful candidates for that position in that the director's electoral district in the last election; or</p> <p>ii.iii. _____ direct the Registrar to hold a by-election for that electoral district.</p> <p><u>(b) If following the 2024 Board of Directors election the seat of an elected director becomes vacant less than one year before the expiry of the director's term of office, the Board of Directors may:</u></p> <p>i. _____ <u>leave the seat vacant;</u></p> <p>ii. _____ <u>appoint as an elected director the eligible candidate who had the most votes of all of the unsuccessful candidates in the last election; or</u></p> <p>(a)iii. _____ <u>direct the Registrar to hold a by-election.</u></p>	
<p>5.3 Filling Vacancy – More than One Year</p> <p>If the seat of an elected councillor becomes vacant more than one year before the expiry of the member's term of office, the Registrar</p>	<p>5.3 Filling Vacancy – More than One Year</p> <p><u>(a) If prior to the 2024 Board of Directors election</u> the seat of an elected councillor <u>director</u> becomes vacant more than one year before the expiry of the member's <u>director's</u></p>	<p>Amended to clarify the by-election process for vacancies of more than one year prior to and after 2024.</p>

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<p>will hold a by-election for that electoral district.</p>	<p>term of office, the Registrar will hold a by-election for that electoral district.</p> <p><u>(b) If following the 2024 Board of Directors election the seat of an elected director becomes vacant more than one year before the expiry of the director’s term of office, the Registrar will hold a by-election for that seat.</u></p>	
<p>8.4 Eligibility for Committee Appointment</p> <p>Council may appoint a member who is not a councillor to serve on a committee if,</p> <p>[...]</p>	<p>8.4 Eligibility for Committee Appointment</p> <p>Council<u>The Board of Directors</u> may appoint a member-registrant who is not a councillor <u>director</u> to serve on a committee if,</p> <p>[...]</p> <p><u>(u.1) the registrant meets the competency and attribute framework requirements set out in the applicable College policy as approved by the Board of Directors and demonstrates this by fulfilling the requirements of the competency and attribute screening process approved by the Board of Directors and set out in the applicable College policy;</u></p> <p>[...]</p>	<p>The eligibility criteria for committee appointments has been expanded to include competency and attribute requirements and a screening process approved by the Board. This aligns with the eligibility requirements for elected directors.</p>



BY -LAW NO. 1: GENERAL

January 2023 ~~2~~ DRAFT

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1. INTERPRETATION

1.1 Definitions

In this by-law and in any other by-law of the College, unless otherwise defined or required by the context of the specific provision,

“Act” means the *Dietetics Act, 1991*;

“Board” or “Board of Directors” means the board of directors or Council of the College;

“Chair of the Board” means the Chair of the Board of Directors, referred to in the *Regulated Health Professions Act, 1991* and previously referred to in these by-laws as the “President”, and does not include a committee chair or a person appointed as the chair or presiding officer of a Board meeting pursuant to section 7.8 of these by-laws;

“Code” means the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*;

“College” means the College of Dietitians of Ontario;

“committee” means a statutory, non-statutory or ad hoc committee of the College;

“committee appointee” means a ~~member-registrant~~ of the College who is not a ~~councillor-director~~ (as defined below) and who is appointed to a committee of the College;

“committee member” means a member of a committee of the College;

~~“Council” means the Council of the College;~~

~~“councillor-director” means a member of Council-the Board of Directors and includes public and elected councillors-directors, previously known as public and elected “councillors” in these by-laws;~~

~~“elected councillor-director” means a member of the Council-Board of Directors described in clause 5(1)(a) of the Act and includes a member elected or appointed to fill a vacancy;~~

~~“member” means a member of the College as that term is used in the *Regulated Health Professions Act, 1991* and the Act;~~

~~“public councillor-director” means a councillor-director who is appointed to Council by the Lieutenant Governor in Council;~~

~~“registrant” means a member of the College as that term is used in the *Regulated Health Professions Act, 1991* and the Act and as previously used in these by-laws;~~

“Registrar” means the Registrar of the College;

“Regulation” means a regulation to the Act or the RHPA; and

“RHPA” means the *Regulated Health Professions Act, 1991*.

“Vice-Chair of the Board” means the Vice-Chair of the Board of Directors, referred to in the *Regulated Health Professions Act, 1991* and previously referred to in these by-laws as the “Vice-President” and does not include a committee vice-chair;

1.2 Calculating Time

In College by-laws, a reference to the number of days between two events means calendar days and excludes the day on which the first event happens and includes the day on which the second event happens.

1.3 Holidays

In College by-laws, a time limit that would otherwise expire on a holiday or a weekend is extended to include the next day that is not a holiday or a weekend. Holidays are as identified in the *Legislation Act, 2006*.

2. BUSINESS PRACTICES

2.1 Head Office

The head office of the College is in the City of Toronto or at such other place as the Council may determine from time to time.

2.2 Seal

An impression of the College’s seal is in Appendix A.

2.3 Affixing Seal

Any person authorized to sign a document on behalf of the College may affix the College’s seal to it if required.

2.4 Banking

~~Council~~The Board of Directors shall appoint from time to time one or more banks chartered under the *Bank Act* (Canada) for the use of the College. All money belonging to the College shall be deposited in the name of the College at one or more banks, but the Registrar may approve a reasonable amount of cash to be on hand at the College offices to cover incidental day-to-day expenses.

2.5 Bank Signing Authority

The Registrar or another person authorized by ~~Council~~the Board of Directors may endorse any negotiable instrument for collection on account of the College through the bank or for deposit to the credit of the College with the bank. The College's stamp, if any, may be used for the endorsement.

2.6 Expenditures

The College may purchase or lease goods or acquire services if it is authorized by:

- (a) the Registrar if the expenditure is set out in the College's budget as approved by ~~Council~~the Board of Directors;
- (b) the Registrar, if the expenditure does not exceed \$10,000 and the Registrar is satisfied that the expenditure will not result in the budget being exceeded for the fiscal year; or
- (c) a resolution of ~~Council~~the Board of Directors or the Executive Committee.

2.7 Signing Authority

Signing authority for cheques and payments on behalf of the College is as follows:

- (a) the Registrar, ~~President~~Chair of the Board or Vice-~~President~~Chair of the Board for amounts not exceeding \$25,000, or such other amount as ~~Council~~the Board of Directors determines from time to time; and
- (b) any two of the Registrar, ~~President~~Chair of the Board or Vice-~~President~~Chair of the Board for amounts in excess of \$25,000, or such other amount as ~~Council~~the Board of Directors determines from time to time.

2.8 Execution of Documents

Except as required by section 2.7 and subject to section 2.9, the Registrar will sign contracts, agreements, instructions and other documents on behalf of the College.

2.9 Execution of Documents –~~Council~~the Board of Directors may Appoint

~~Council~~The Board of Directors may appoint, from time to time, any one or more officers or persons to sign contracts, documents and instruments in writing on behalf of the College either generally or in relation to specific contracts, documents or instruments in writing.

2.10 Investments

The Registrar may authorize the investment of money on behalf of the College in compliance with applicable College policy as approved by ~~Council~~the Board of Directors from time to time. All share certificates, bonds and other records of investments shall be issued in the name of the College.

2.11 Borrowing

~~Council~~The Board of Directors may from time to time by resolution,

- (a) borrow money upon the credit of the College;
- (b) limit or increase the amount or amounts which may be borrowed; and
- (c) secure any present or future borrowing or any debt, obligation or liability of the College by charging, mortgaging, hypothecating or pledging all or any real or personal property of the College, whether present or future.

2.12 Fiscal Year

The fiscal year of the College is from April 1 to March 31 of the following year.

2.13 Financial Audit

~~Council~~The Board of Directors shall appoint an auditor licensed under the *Public Accounting Act* to audit the accounts of the College and to hold office for a term determined by ~~Council~~the Board of Directors.

2.14 Financial Statements

Financial statements for the College shall be prepared promptly at the close of each fiscal year and audited financial statements shall be presented annually to the ~~Council~~Board of Directors.

2.15 Auditors Right of Access

The auditors shall have a right of access at all reasonable times to all records, documents, books, accounts and vouchers of the College and are entitled to require from the ~~councillors~~directors, officers and employees such information as is necessary in their opinion to enable them to report as required by law or under this by-law.

2.16 Attendance at ~~Council~~Board of Directors Meeting

The auditor is entitled to attend the meeting at which the audited financial statements are presented to ~~Council~~the Board of Directors.

2.17 Grants

~~Council~~The Board of Directors may by a vote of at least two-thirds of the ~~councillors~~directors present at a meeting duly called for that purpose make grants to third parties for one or both of the following:

- (a) to advance the scientific knowledge or the education of persons wishing to practise the profession; and

- (b) to maintain or improve the standards of practice of the profession.

2.18 Membership in National Organizations

~~Council~~The Board of Directors may authorize the College to obtain membership in a national organization of a body whose objects are not inconsistent with those of the College and may authorize the payment of such annual fees and costs for representation at meetings of the organization.

2.19 Remuneration and Expenses

~~Board of Directors Council officers, e~~Elected ~~councillors-directors, and~~committee appointees, ~~and officers who are not public directors~~ shall be paid a stipend and shall be reimbursed by the College for travelling and other expenses reasonably incurred in relation to the performance of their duties in accordance with policies approved from time to time by ~~Council~~the Board of Directors.

2.20 Indemnity

Every ~~councillor~~director, or committee member ~~or officer~~ and ~~his or her~~their heirs, executors, administrators and estate shall at all times be indemnified and saved harmless by College from and against:

- (a) all costs, charges and expenses whatsoever that such person sustains or incurs in respect of any action, suit or proceeding that is proposed, brought, commenced or prosecuted against him or her for or in respect of anything done or permitted by the person in respect of the execution of the duties of ~~his or her~~their office; and
- (b) subject to any policies and procedures of the College, all other costs and expenses that ~~he or she~~they sustains or incurs in respect in respect of the affairs of the College,

except any costs, charges or expenses resulting from ~~his or her~~their wilful neglect or default or failure to act honestly and in good faith with a view to the best interests of the College. The College shall obtain appropriate insurance coverage in connection with this indemnity.

2.21 Protection for Employees

If an employee (including a lawyer who is an employee) of the College is named in a civil suit or, in the case of a lawyer, in a law society proceeding, and the subject matter relates to the person's employment by the College, the College will pay for the employee's legal representation in the proceedings and any appeal, and will pay any sum of money the employee or the employee's estate becomes liable to pay in connection with the matter unless the court finds that the employee has been deliberately dishonest or has committed a criminal offence.

3. ELECTION OF ~~COUNCIL MEMBERS~~DIRECTORS

3.1 Electoral Districts

(a) For all Board of Directors elections up to and including the Board of Directors election in 2023, and for any by-elections prior to the Board of Directors election in 2024, the following are the electoral districts for the purpose of the election of ~~members to Council~~Board directors (with necessary modifications by the Registrar to ensure that the entire province is covered and that there is no overlap of districts):

~~(b)~~i. Electoral district 1, the south-western area, composed of the counties of Elgin, Essex, Kent, Lambton, Middlesex, Oxford, Bruce, Grey, Perth and Huron.

~~(c)~~ii. Electoral district 2, the central-western area, composed of the counties of Brant, Dufferin and Wellington and the Regional Municipalities of Haldimand, Norfolk, Halton, Hamilton Wentworth, Niagara and Waterloo.

~~(d)~~iii. Electoral district 3, the central area, composed of the Municipality of Metropolitan Toronto, and the Regional Municipality of York.

~~(e)~~iv. Electoral district 4, the eastern area, composed of the counties of Frontenac, Hastings, Lanark, Prince Edward and Renfrew, and the united counties of Leeds and Grenville, Lennox and Addington, Prescott and Russell, Stormont, Dundas and Glengarry and The Regional Municipality of Ottawa, Carleton.

~~(f)~~v. Electoral district 5, the north-eastern area, composed of the territorial districts of Algoma, Cochrane, Manitoulin, Nipissing, Parry Sound, Sudbury, Timiskaming and The District Municipality of Muskoka.

~~(g)~~vi. Electoral district 6, the north-western area, composed of the territorial districts of Kenora, Rainy River and Thunder Bay.

~~(h)~~vii. Electoral district 7, the central-eastern area, composed of the counties of Haliburton, Northumberland, Peterborough, City of Kawartha Lakes, Simcoe, and the Regional Municipalities of Peel and Durham.

~~(h)~~(b) Beginning with the Board of Directors election in 2024 and for all elections thereafter, there will be one single electoral district that encompasses all of Ontario, and all elected directors will be elected in this electoral district.

~~(i)~~(c) As of the date upon which the directors elected in the 2024 Board of Directors election take office, all directors then serving on the Board of Directors who were elected in one of the former seven electoral districts will be deemed to have been elected in the single electoral district of Ontario. The terms of office of these directors on the Board of Directors and on any committees will be otherwise unaffected and all references in these by-laws to elected directors will apply equally to these directors.

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3.2 Number of Elected ~~Councillors~~Directors

~~Eight members of the College shall be elected to the Council as elected councillors. In the years 2024 and 2025, the number of elected directors shall be reduced from eight to six members, according to the following schedule and the election timeline set out in section 3.8 of these by-laws:~~

- ~~(a)~~ As of the date upon which the directors elected in the 2024 Board of Directors election take office, there will be seven elected directors on the Board of Directors.
- ~~(a)~~(b) As of the date upon which the directors elected in the 2025 Board of Directors election take office, there will be six elected directors on the Board of Directors.

3.3 Elected ~~Councillors~~Directors from Each District

~~For Board of Directors elections and by-elections prior to April 2024, the number of members-registrants elected in an electoral district is,~~

- ~~(a)~~ one for each of electoral districts 1, 2, 4, 5, 6 and 7; and
- ~~(b)~~ two for electoral district 3.

3.4 Eligibility to Vote in an ~~Electoral District~~Election

- ~~(a)~~ For Board of Directors by-elections held in an electoral district prior to April 2024, a ~~member registrant~~ is eligible to vote ~~in an election being held for an electoral district~~ if on the thirty-fifth day before the date fixed for the election, the member principally practises in that electoral district, or if the member is not engaged in the practice of dietetics, the member principally resides in the electoral district.
- ~~(a)~~(b) For Board of Directors elections and by-elections held in and after April 2024, a registrant is eligible to vote if on the thirty-fifth day before the date fixed for the election, the registrant principally practises in Ontario, or if the registrant is not engaged in the practice of dietetics, the registrant principally resides in Ontario.

3.5 Term of Office

The term of an elected ~~councillor-director~~ is approximately three (3) years starting at the first ~~Council Board of Directors~~ meeting after the election of ~~councillors-directors~~ and the ~~councillor-director~~ will continue in office until ~~his or her~~their successor takes office in accordance with the by-laws.

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3.6 Maximum Term or Service as Committee Member

Subject to section 3.7, a ~~councillor-director~~ or ~~member-registrant~~ who has served nine consecutive years on ~~Council~~ the Board of Directors or as a committee appointee, or in any combination of the two offices, is ineligible for election to ~~Council~~ the Board of Directors until the third calendar year after the year in which the ~~member-registrant~~ last served as an elected ~~councillor-director~~ or committee appointee.

3.7 Term of Office for ~~Councillors-Directors~~ Filling Vacancies

The term of an elected ~~councillor-director~~ elected in a by-election or appointed under these by-laws expires when the former elected ~~councillor's-director's~~ term would have expired. Time spent as an elected ~~councillor-director~~ as a result of a by-election or an appointment by ~~Council~~ the Board of Directors to fill a vacancy is not included for the purpose of determining the maximum term under section 3.6.

3.8 Timing of Elections

~~(a) Until the year 2023, E~~elections for elected ~~councillors-directors~~ shall be held simultaneously as follows:

i. ~~(a)~~ in April of the year 2004 and in April of every third year thereafter for electoral districts 1 and 3;

ii. ~~(b)~~ in April of the year 2002 and in April of every third year thereafter for electoral districts 2 and 4;

iii. ~~(c)~~ in April of the year 2003 and in April of every third year thereafter for electoral districts 5, 6 and 7.

~~(b) Beginning in April of the year 2024, two directors shall be elected each year who will serve in the single electoral district of Ontario.~~

~~(c) In the event that an election cannot be held in April of a given year, the election shall be held as soon as possible thereafter, and all references in these by-laws to the Board of Directors election in April will apply equally to the delayed election.~~

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3.9 Date of Election

Unless otherwise approved by ~~Council~~ the Board of Directors,

- (a) the date for each election is the third Wednesday of April; and
- (b) the deadline for the receipt of ballots is 5:00 p.m. on the date for each election.

3.10 Eligibility for Election to ~~Council~~Board of Directors

A member-registrant is eligible for election ~~in an electoral district to the Board of Directors~~ if, on the date of election or acclamation:

- (a) the member-registrant is engaged in the practice of dietetics in ~~the electoral district for which he or she is nominated~~Ontario or, if the member-registrant is not engaged in the practise of dietetics, principally resides in ~~the electoral district for which he or she is nominated~~Ontario, or in the case of a by-election prior to April 2024, in the electoral district for which he or she is they are nominated;
- (b) the member-registrant is the holder of a general class of certificate of registration and the certificate is not subject to a term, condition or limitation other than one applicable to all members-registrants of the class;
- (c) the member-registrant is not in default of the payment of any fee payable to the College;
- (d) the member-registrant is not the subject of any disciplinary or incapacity proceeding in Ontario or any similar proceeding in any other jurisdiction relating to dietetics or any other profession;
- (e) the member's-registrant's certificate of registration has not been revoked or suspended in the six years preceding the date of the election for any reason other than non-payment of fees;
- (f) the member-registrant has not been found to have committed professional misconduct by the Discipline Committee or by any discipline committee in any jurisdiction relating to dietetics or any other profession;
- (g) the member-registrant has not been disqualified by the ~~Council~~Board of Directors in the three years preceding the date of the election as a result of a breach of a code of conduct or policy on conduct approved by ~~Council~~the Board of Directors or a breach of the conflict of interest provisions of this by-law;
- (h) the member-registrant does not have a notation on the College register of a finding of professional negligence or malpractice made against the member-registrant;
- (i) the member-registrant is not the subject of a charge under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (j) the member-registrant does not have a notation on the College register of a charge in relation to any offence;

- (k) the member-registrant does not have a criminal finding of guilt as an adult under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (l) the member-registrant does not have a notation on the College register of a finding of guilt made by a court with respect to any offence;
- (m) the member-registrant does not have a notation on the College register of an undertaking provided to the College with respect to a matter involving the Inquiries, Complaints and Reports Committee or the Discipline Committee;
- (n) The member-registrant is not currently the subject of an undertaking provided to the College with respect to a fitness to practise issue;
- (o) the member-registrant is not currently the subject of an interim order made by a panel of the Inquiries, Complaints and Reports Committee;
- (p) the member-registrant has not been ordered to attend to receive a caution from a panel of the Inquiries, Complaints and Reports Committee or been required to complete a specified continuing -education or remediation program by a panel of the Inquiries, Complaints and Reports Committee in the preceding six (6) years;
- (q) the member-registrant is not a member of the Board of Directors or council of any other RHPA college;
- (r) the member-registrant is not an employee of the College and has not been an employee of the College during-within the previous two (2) years;
- (s) the member-registrant is not an applicant for employment at the College and has not applied for employment at the College during-within the previous year;
- (t) the member-registrant is not in default of completing and submitting any information or form required under the regulations of the RHPA or Act, or the by-laws of the College;
 - (t.1) the registrant meets the competency and attribute framework requirements as set out in the Board Competency and Attribute policy set out in the applicable College policy approved by the Board of Directors from time to time and demonstrates this by fulfilling the requirements of the competency and attribute screening process approved by the Board of Directors and set out in the Board Competency and Attribute policy and set out in the applicable College policy;
- (u) the member-registrant has successfully completed the College's current training program relating to the duties, obligations and expectations of Council Board of Directors and committee members;

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- (v) the ~~member-registrant~~ is not party to a legal proceeding against the College;
- (w) the ~~member-registrant~~ has completed and filed with the Registrar a conflict of interest declaration by the deadline and in the form approved by the Registrar, and the ~~member-registrant~~ does not have a conflict of interest to serve as a ~~member of Council~~~~director~~;
- (x) the ~~member-registrant~~ does not hold a position that would cause the ~~member-registrant~~, if elected as a ~~councillor~~~~director~~, to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization

~~(x.1) including but not limited to having or had during the registrant does not, and did not within the previous three (3) years, hold a leadership, employment or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians, or oversees the regulation of dietitians;~~
- (y) the ~~member-registrant~~ has served nine consecutive years as a ~~councillor~~~~director~~ or committee appointee, or in any combination of the two offices, and at least three calendar years have passed after the year in which the ~~member-registrant~~ last served as a ~~councillor~~~~director~~ or committee appointee; or
- (z) the ~~member-registrant~~ is not ineligible because of section 3.6.

3.11 Withdrawal of Candidate

A candidate may withdraw from an election by giving notice in writing to the Registrar. If the notice in writing is received at least five (5) days before the date that the Registrar sends the voting package to ~~members-registrants~~ eligible to vote, the name of the person shall not be included on the ballot. In all other cases the Registrar shall make reasonable efforts to remove the name from the ballot or to notify the ~~members-registrants~~ eligible to vote that the candidate has withdrawn from the election.

3.12 Eligibility and Election Disputes

Disputes as to whether a ~~member-registrant~~ is eligible for election or to vote in an election will be determined by the Elections Committee. Disputes relating to the election of an elected ~~councillor~~~~director~~ shall be dealt with by the Elections Committee which shall investigate the facts and report its findings and recommendations to ~~Council~~ the Board of Directors for such decision as ~~Council~~ the Board of Directors considers appropriate.

3.13 Notification of Election

No later than 90 days before the date of an election, the Registrar shall notify every ~~member-registrant~~ eligible to vote of the date, time and electoral district of the election and of the ~~nomination~~ application procedure.

Commented [A1]: Optional change; see discussion below. - MK

3.14 ~~Nominations~~Applications

~~The nomination of~~ A registrant who seeks to be a candidate for election as a member of Council director shall ~~be apply~~ in writing and shall ~~be given submit the application~~ to the Registrar at least 60 days before the date of the election (the "~~nomination application~~ deadline"). ~~The nomination must be signed by the candidate and by at least six members who support the nomination and who are eligible to vote in the electoral district in which the election is to be held.~~

3.15 Acclamation

- (a) ~~For elections and by-elections prior to April 2024, if~~ the number of candidates ~~nominated who have applied for and are eligible for election to the Board of Directors~~ for an electoral district is less than or equal to the number of ~~members-registrants~~ to be elected in that electoral district, the Registrar shall declare the candidates or candidates elected by acclamation.
- (b) ~~For elections and by-elections in and after April 2024, if the number of candidates who have applied for and are eligible for election to the Board of Directors is less than or equal to the number of registrants to be elected in that election, the Registrar shall declare the candidate or candidates elected by acclamation. If the number of candidates elected by acclamation is less than the number of registrants that were to be elected in that election, the Registrar shall, as soon as possible, call a by-election for the remaining seat or seats.~~

3.16 No Candidates for Election

If there are no candidates who ~~have applied for and~~ are eligible for election, the Registrar shall, as soon as possible, call a by-election.

3.17 Information about Candidates

A candidate shall provide to the Registrar by the ~~nomination application~~ deadline or such later date as the Registrar permits, biographical information in a manner acceptable to the Registrar for the purpose of distribution to ~~members-registrants~~ eligible to vote in the election.

3.18 Administering and Supervising Elections

The Registrar will supervise and administer the election process and may for the purpose of carrying out that duty and subject to the by-laws:

- (a) appoint returning officers and scrutineers;
- (b) establish procedures and deadlines for the receiving and sending of elections materials, including establishing a deadline for the receiving of ballots and procedures for opening, counting and verifying ballots;

Commented [A2]: This language change from "nominations" to "applications" was made by the College of Pharmacists. A benefit is that it is a step closer to a true application process rather than an election process and so it minimizes the changes that will be needed if elections are eliminated. However, the concept of "applying" for "election" may be confusing. Accordingly, it is also reasonable to continue to call it a nomination process in which candidates nominate themselves. In this case, here is proposed wording for this bylaw change:

The nomination of a candidate for election as a member-of-Council director shall be in writing and shall be given to the Registrar at least 60 days before the date of the election (the "nomination deadline"). The nomination must be signed by the candidate and by at least six members who support the nomination and who are eligible to vote in the electoral district in which the election is to be held.
- MK

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- (c) establish reliable and secure voting processes;
- (d) provide for the notification of all candidates and ~~members-registrants~~ of the results of the election;
- (e) if there has been a non-compliance with ~~a nomination an application~~ or election requirement, determine whether the non-compliance should be waived in circumstances where the fairness or integrity of the election will not be affected;
- (f) establish deadlines for any recounts and provide for the destruction of voting information following an election; and
- (g) do anything else that ~~he or she~~they deems necessary and appropriate to ensure that the election is fair and effective.

3.19 Voting Package

No later than thirty days before the date of an election the Registrar shall send by electronic or other means a voting package to every ~~member-registrant~~ eligible to vote in the ~~district election, and in the case of elections held prior to April 2024, eligible to vote in the district~~. The package will include a list of candidates ~~in the electoral district~~ and a ballot or electronic access to a ballot and an explanation of the voting procedure.

3.20 Voting

A ~~member-registrant~~ eligible to vote may cast as many votes on a ballot as there are ~~members registrants~~ to be elected from that electoral district ~~in that election~~. A ~~member-registrant~~ shall not cast more than one vote for any one eligible candidate.

3.21 Tie Vote

If there is a tie in an election of ~~members-registrants~~ to the ~~Council~~Board of Directors, the Registrar shall break the tie by lot.

3.22 Modifying Time Periods

In exceptional circumstances, the Registrar may modify any time period respecting elections as the Registrar considers necessary to compensate for such circumstances.

3.23 By-Elections

A by-election is held in the same manner and is subject to the same criteria and processes as a regular election, subject to any necessary modifications.

4. DISQUALIFICATION AND REMOVAL OF ~~COUNCIL MEMBERS~~DIRECTORS

4.1 Disqualification

An elected ~~councillor~~director is disqualified from sitting on ~~Council~~the Board of Directors if the ~~member~~registrant meets one or more of the following criteria:

- (a) ~~Council~~the Board of Directors determines that the ~~member~~registrant had not met one or more of the eligibility requirements in section 3.10;
- (b) the ~~member~~registrant ceases to meet one or more of the eligibility requirements in section 3.10;
- (c) the ~~member~~registrant fails, without reasonable cause, to attend two consecutive meetings of the ~~Council~~Board of Directors;
- (d) the ~~member~~registrant fails, without reasonable cause, to attend three consecutive meetings of a committee of which ~~he or she is~~they are a member;
- (e) the ~~member~~registrant fails, without reasonable cause, to attend a hearing or proceeding of a panel for which ~~he or she~~they have ~~has~~ been selected; or
- (f) the ~~member~~registrant fails, in the opinion of ~~Council~~the Board of Directors, to discharge ~~his or her~~their duties to the College, including without limitation having acted in a conflict of interest or otherwise in breach of a College by-law or policy, or the *Regulated Health Professions Act, 1991*.

4.2 Temporary Exclusion

An elected ~~councillor~~director who becomes the subject of any disciplinary or incapacity proceeding at the College, a Registrar's investigation under the RHPA, or an interim order under the RHPA will not be disqualified under section 4.1 during the proceeding but shall not serve on ~~council~~the Board of Directors or on any committee until the proceeding is finally completed.

4.3 Removal of Elected ~~Councillor~~Director

The following procedure applies to the disqualification and removal of an elected ~~councillor~~director:

- (a) If another ~~councillor~~director believes that an elected ~~councillor~~director meets one or more of the criteria for disqualification in section 4.10, ~~he or she~~they shall advise the Registrar and Executive Committee in writing.
- (b) If the Registrar receives information suggesting that an elected ~~councillor~~director meets one or more of the criteria for disqualification in section 4.1, the Registrar shall advise the Executive Committee in writing.

- (c) If the Executive Committee believes the matter requires ~~Council's~~ the Board of Director's consideration, it shall notify the elected ~~councillor-director~~ about the nature of the concern and provide him or her with a reasonable opportunity to respond before bringing the matter to ~~Council~~ the Board of Directors.
- (d) If after considering the elected ~~councillor's~~ director's response, if any, the Executive Committee decides that the matter warrants ~~Council's~~ the Board of Directors' consideration, it shall place the matter on the agenda for the next meeting of ~~Council~~ the Board of Directors, or the ~~president~~ Chair of the Board shall call a special ~~Council~~ Board of Directors meeting for the purpose of determining whether the ~~member-registrant~~ meets any of the criteria for disqualification under section 4.1. The Registrar shall advise the ~~councillor~~ director who is potentially subject to disqualification of the date of the ~~Council~~ Board of Directors meeting and that the ~~councillor-director~~ may make written or oral submissions to ~~Council~~ the Board of Directors at the meeting.
- (e) Disqualification of an elected ~~councillor-director~~ requires a resolution passed by a majority of not less than two-thirds of the votes cast on the resolution by ~~councillors~~ directors present at the meeting. The elected ~~councillor-director~~ who is the subject of a motion for disqualification shall not be present during the debate following submissions, if any, or during the vote on the motion. ~~Council~~ The Board of Directors shall not consider the ~~member-registrant~~ for the purpose of establishing quorum or counting votes.
- (f) A disqualified ~~councillor-director~~ ceases to be a member of ~~Council~~ the Board of Directors and any of its committees.

4.4 Disqualification- and Removal of Public ~~Councillor~~ Director

The following procedure applies to the disqualification and removal of a ~~p~~Public ~~Councillor~~ director:

- (a) If a ~~councillor-director~~ believes that a public ~~councillor-director~~ does not meet one of the criteria set out in clauses (d), (f), (g), (i), (q), (r), (s), ~~(t.1)~~, (u), (v), (w), (x) and (y) of section 3.10, or clauses 4.1 (c) through (f), ~~he or she~~ they shall advise the Registrar and Executive Committee in writing.
- (b) If the Registrar receives information suggesting that a public ~~councillor-director~~ does not meet one or more of the criteria in clauses (d), (f), (g), (i), (q), (r), (s), ~~(t.1)~~, (u), (v), (w), (x) and (y) of section 3.10, or clauses 4.1 (c) through (f), the Registrar shall advise the Executive Committee in writing.
- (c) The procedure in section 4.3 clauses (c) through (e) shall govern the disqualification of a ~~p~~Public ~~Councillor~~ director with necessary modifications.

4.5 Notice to Minister

Following the disqualification of a public ~~councillor~~director, the ~~Council~~Board of Directors may advise the Minister of Health and Long-Term Care of its determination and request the Minister to ensure the removal of the public ~~councillor~~director from ~~Council~~the Board of Directors.

4.6 Suspension of Public ~~Councillor~~Director

If ~~Council~~the Board of Directors passes a resolution to disqualify ~~the member a public~~director under section 4.3, it may suspend the public ~~councillor~~director from serving on ~~Council~~the Board of Directors or on any of its committees, or both.

5. VACANCIES

5.1 Creation of Vacancy

The office of an elected ~~council member~~director is deemed vacant on the death, resignation or removal of that ~~member~~director.

5.2 Filling Vacancy – Less than One Year

(a) If prior to the 2024 Board of Directors election, the seat of an elected ~~councillor~~director becomes vacant in an electoral district less than one year before the ~~next election in that electoral district~~expiry of the director's term of office, the ~~Council~~Board of Directors may:

- i. leave the seat vacant;
- ii. appoint as an elected ~~councillor~~director the eligible candidate who had the most votes of all of the unsuccessful candidates for that position in ~~that~~the director's electoral district in the last election; or
- iii. direct the Registrar to hold a by-election for that electoral district.

(b) If following the 2024 Board of Directors election the seat of an elected director becomes vacant less than one year before the expiry of the director's term of office, the Board of Directors may:

- i. leave the seat vacant;
- ii. appoint as an elected director the eligible candidate who had the most votes of all of the unsuccessful candidates in the last election; or
- iii. direct the Registrar to hold a by-election.

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5.3 Filling Vacancy – More than One Year

- (a) If ~~prior to the 2024 Board of Directors election~~ the seat of an elected ~~councillor~~ ~~director~~ becomes vacant more than one year before the expiry of the ~~member's~~ ~~director's~~ term of office, the Registrar will hold a by-election for that electoral district.
- (b) ~~If following the 2024 Board of Directors election the seat of an elected director becomes vacant more than one year before the expiry of the director's term of office, the Registrar will hold a by-election for that seat.~~

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6. OFFICERS

6.1 Officers

The officers of the College shall be the ~~President~~ ~~Chair of the Board~~, the Vice-~~President~~ ~~Chair of the Board~~ and the Registrar and such other officers as the ~~Council~~ ~~Board of Directors~~ may determine from time to time. A person must not hold more than one office.

6.2 ~~President~~ ~~Chair of the Board (Chair)~~

The ~~President~~ ~~Chair of the Board~~ shall perform all duties and responsibilities pertaining to ~~his~~ ~~or her~~ ~~their~~ office, which include the responsibilities set by ~~Council~~ ~~Board of Directors~~ policy and such other duties that ~~Council~~ ~~the Board of Directors~~ from time to time assigns.

6.3 ~~Vice~~ ~~President~~ ~~Chair of the Board (Vice-Chair)~~

The Vice-~~President~~ ~~Chair of the Board~~ will act and has all the powers and duties of the ~~President~~ ~~Chair of the Board~~ if the ~~President~~ ~~Chair of the Board~~ is absent or is unable or refuses to act, and will perform the responsibilities set by ~~Council~~ ~~Board of Directors~~ policy and such other duties that ~~Council~~ ~~the Board of Directors~~ from time to time assigns.

6.4 Appointment of Registrar

The Registrar shall be appointed by ~~Council~~ ~~the Board of Directors~~ and shall be the Executive Director of the College. The Executive Committee shall not exercise the authority of the ~~Council~~ ~~Board of Directors~~ with respect to the appointment or removal of the Registrar.

6.5 Registrar Terms of Employment

The terms of employment of the Registrar shall be set out in a written employment contract approved by the Executive Committee and shall be consistent with any College personnel policies in effect at the time such contract is approved. No candidate for the position of Registrar shall be offered a contract of employment until that candidate has been approved by ~~Council~~ ~~the Board of Directors~~.

6.6 Registrar Duties

The Registrar shall perform those duties set out in the RHPA, the Act and the by-laws of the College in addition to such duties and responsibilities as are set by ~~Council~~Board of Directors policy and such other duties that ~~Council~~the Board of Directors from time to time assigns.

6.7 Appointment of Acting Registrar

During extended absences of the Registrar, the ~~Council~~Board of Directors may appoint an Acting Registrar. If a vacancy or prolonged or indefinite absence occurs in the Registrar's office, the Executive Committee or the ~~Council~~Board of Directors shall appoint an Acting Registrar. If the Executive Committee appoints an Acting Registrar, the appointment or approval is subject to ~~Council~~Board of Directors approval at the next meeting of ~~Council~~the Board of Directors.

6.8 Authority of Acting Registrar

A person appointed as Acting Registrar under section 6.7 shall have all the authority, duties and responsibilities of the Registrar.

6.9 Removal of Officers

~~Council~~The Board of Directors may remove an officer of the College by a two-thirds majority vote of the ~~councillors~~directors present at a ~~Council~~Board of Directors meeting duly held for that purpose. The removal from office of an officer who is also an employee of the College shall not of itself constitute termination of employment.

7. MEETINGS OF ~~COUNCIL~~THE BOARD OF DIRECTORS

7.1 ~~Council~~Board of Directors Meetings

~~Council~~The Board of Directors shall have at least four regular meetings during each calendar year, with no more than four months between meetings. ~~Council~~Board of Directors meetings shall be held at the head office of the College or at any other place as may be determined by the Registrar or ~~Council~~the Board of Directors from time to time.

7.2 Reasonable Notice for ~~Council~~Board of Directors Meetings

Written notification of the date, time and place of a ~~Council~~Board of Directors meeting will be delivered to each ~~councillor~~director not less than five days before the date of the meeting. The accidental omission to give notice or the non-receipt of any notice by any ~~councillor~~director will not invalidate a resolution that ~~Council~~the Board of Directors passes at the meeting or any action or proceeding it takes at the meeting.

7.3 Business at Regular Meetings

~~Council~~The Board of Directors may consider at a regular meeting:

- (a) matters contained within the agenda approved by the Executive Committee;
- (b) matters brought by the Executive Committee;
- (c) recommendations and reports by committees;
- (d) motions or matters where notice was given by a ~~councillor-director~~ at a preceding ~~Council Board of Directors~~ meeting;
- (e) such other matters, not included in the agenda, that at least two-thirds of the ~~councillors-directors~~ in attendance determine to be of an urgent nature; and
- (f) routine and procedural matters.

7.4 Special Meetings

A special meeting of ~~Council the Board of Directors~~ may be called by the ~~President Chair of the Board~~ or the majority of ~~Council Members-directors~~ by submitting to the Registrar a written request for the meeting containing the matter or matters for decision at the meeting. The Registrar shall provide notice of the meeting to each ~~councillor-director~~ not less than five days before the date of the special meeting. The notice shall state the date, time and place of the meeting and the general nature of the business to be transacted.

7.5 Business at Special Meetings

Business at a special meeting is limited to the following:

- (a) the matter or matters for decision at the meeting contained in the written request submitted to the Registrar;
- (b) matters brought by the Executive Committee; and
- (c) routine and procedural matters.

7.6 Manner of Holding Meetings

Any meeting of the ~~Council Board of Directors~~ may be conducted by means of teleconference or any other means that permit all persons participating in the meeting to communicate with each other adequately. Persons participating in the meeting by such means are deemed to be present at the meeting. Meetings held in this manner are deemed to be held at the head office of the College, unless ~~Council the Board of Directors~~ determines otherwise.

7.7 ~~President Chair or Vice-President Chair of the Board~~ Presides

In the absence of a presiding officer appointed under section 7.8, the ~~President Chair of the Board~~, or ~~his or her~~their delegate, shall preside over meetings. The ~~Vice-President Chair of the Board~~ shall preside if the ~~President Chair of the Board~~ is absent. In the absence of both the ~~President Chair~~ and the ~~Vice-President Chair of the Board~~, the ~~councillors-directors~~ present shall select from among themselves a ~~councillor-director~~ to chair the meeting.

7.8 Presiding Officer

For the purpose of conducting meetings the Council-Board of Directors may appoint a non-voting presiding officer who is not a member of Council-the Board of Directors or of the College to preside at all meetings or at a meeting. The presiding officer shall continue in ~~his or her~~their role until dismissed by Council-the Board of Directors or the Executive Committee. The presiding officer shall act solely as chair of Council-Board of Directors meeting proceedings in accordance with these by-laws and any rules of order that Council-the Board of Directors approves and shall not take a role in Council-Board of Directors deliberations. Before assuming ~~his or her~~their duties, the presiding officer shall agree to maintain the same standard of confidentiality and conflict of interest applicable to a councillordirector.

7.9 Quorum

A quorum for any meeting of Council-the Board of Directors is as set out in the RHPA. A Council-Board of Directors vacancy is not counted in determining whether a quorum is present.

7.10 Adjournments

Whether or not a quorum is present, the chair or presiding officer may adjourn any Council Board of Directors meeting and reconvene it at any time and any business may be transacted at the adjourned meeting that could have been transacted at the original meeting. No notification shall be required of any such adjournment.

7.11 Voting at Meetings

Unless otherwise required by law or by the by-laws, every motion which properly comes before Council-the Board of Directors shall be decided by a simple majority of the votes cast at the meeting by councillors directors present. In the event of a tie vote, the motion is defeated.

Except where a secret ballot is required or at a meeting held by teleconference, every vote at a Council-Board of Directors meeting shall be by a show of hands but, if any two councillors directors so require, a roll call vote shall be taken.

7.12 Rules of Order

Except where inconsistent with the RHPA, the Act, the Regulations or the by-laws of the College, any questions of procedure at or for any meetings of Council-the Board of Directors shall be determined by the chair or presiding officer of such meeting in accordance with the rules of order that the Council-Board of Directors adopts from time to time.

7.13 Unanimous Resolutions

A resolution or by-law signed by all members of the Council-Board of Directors is as valid and effective as if passed at a meeting of Council-the Board of Directors held for the purpose, and

a ~~councillor's-director's~~ signature may be an identifying mark created or communicated using electronic means.

8. COMMITTEE ESTABLISHMENT AND APPOINTMENTS

8.1 Establishment and Appointees

~~Council-The Board of Directors~~ may from time to time establish non-statutory or ad hoc committees and set the duties and composition and appoint the members of each committee. In appointing members to a non-statutory or ad hoc committee ~~Council-the Board of Directors~~ will give due consideration to the recommendations, if any, of the Executive Committee.

8.2 Appointment to Committees

~~Council-The Board of Directors~~ will at the first regular ~~Council Board of Directors~~ meeting following each scheduled election of ~~councillors-directors~~ appoint the members of each committee and a chair of each committee in a manner prescribed by ~~Council-the Board of Directors~~ from time to time. In appointing members to committees ~~Council-the Board of Directors~~ will give due consideration to the recommendations, if any, of the Executive Committee. ~~Council-The Board of Directors~~ may from time to time vary appointments and remove the chair of any committee.

8.3 Notice and Application

The Registrar shall,

- (a) notify ~~members-registrants~~ of the opportunity to apply for appointment to a committee;
- (b) approve a form of application relating to appointment; and
- (c) set a deadline for the receipt of applications.

8.4 Eligibility for Committee Appointment

~~Council-The Board of Directors~~ may appoint a ~~member-registrant~~ who is not a ~~councillor-director~~ to serve on a committee if,

- (a) the ~~member-registrant~~ has completed and filed with the Registrar an application for appointment in the form approved by the Registrar prior to the deadline for applications established by the Registrar;
- (b) the ~~member-registrant~~ is the holder of a general class of certificate of registration and the certificate is not subject to a term, condition or limitation other than one applicable to all ~~members-registrants~~ of the class;

- (c) the member-registrant is not in default of the payment of any fee payable to the College;
- (d) the member-registrant is not the subject of any disciplinary or incapacity proceeding in Ontario or any similar proceeding in any other jurisdiction relating to dietetics or any other profession;
- (e) the member's-registrant's certificate of registration has not been revoked or suspended in the six years preceding the date of the appointment for any reason other than non-payment of fees;
- (f) the member-registrant has not been found to have committed professional misconduct by the Discipline Committee or by any discipline committee in any jurisdiction relating to dietetics or any other profession;
- (g) the member-registrant has not been disqualified by the Council-Board of Directors in the three years preceding the date of the appointment as a result of a breach of a code of conduct or policy on conduct approved by Council-the Board of Directors or a breach of the conflict of interest provisions of this by-law;
- (h) the member-registrant practises dietetics in Ontario or resides in Ontario;
- (i) the member-registrant does not have a notation on the College register of a finding of professional negligence or malpractice made against the member-registrant;
- (j) the member-registrant is not the subject of a charge under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (k) the member-registrant does not have a notation on the College register of a charge in relation to any offence;
- (l) the member-registrant does not have a criminal finding of guilt as an adult under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (m) the member-registrant does not have a notation on the College register of a finding of guilt made by a court with respect to any offence;
- (n) the member-registrant does not have a notation on the College register of an undertaking provided to the College with respect to a matter involving the Inquiries, Complaints and Reports Committee or the Discipline Committee;
- (o) The member-registrant is not currently the subject of an undertaking provided to the College with respect to a fitness to practise issue;

- (p) the member-registrant is not currently the subject of an interim order made by a panel of the Inquiries, Complaints and Reports Committee;
- (q) the member-registrant has not been ordered to attend to receive a caution from a panel of the Inquiries, Complaints and Reports Committee or been required to complete a specified continuing education or remediation program by a panel of the Inquiries, Complaints and Reports Committee in the preceding three (3) years;
- (r) the member-registrant is not a member of the Board of Directors or council of any other RHPA college;
- (s) the member-registrant is not an employee of the College and has not been an employee of the College during the previous two (2) years;
- (t) the member-registrant is not an applicant for employment at the College and has not applied for employment at the College during the previous year;
- (u) the member-registrant is not in default of completing and submitting any information or form required under the regulations of the RHPA or Act, or the by-laws of the College;
 - (u.1) the registrant meets the competency and attribute framework requirements set out in the Board Competency and Attribute policy set out in the applicable College policy as approved by the Board of Directors from time to time and demonstrates this by fulfilling the requirements of the competency and attribute screening process approved by the Board of Directors and set out in the Board Competency and Attribute policy and set out in the applicable College policy;
- (v) the member-registrant has successfully completed the College's current training program relating to the duties, obligations and expectations of Council Board of Directors and committee members;
- (w) the member-registrant is not party to a legal proceeding against the College;
- (x) the member-registrant has completed and filed with the Registrar a conflict of interest declaration by the deadline and in the form approved by the Registrar, and the member-registrant does not have a conflict of interest to serve as a member of Council the Board of Directors;
- (y) the member-registrant does not hold a position that would cause the member-registrant to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization. including but not limited to having or had during the previous year a leadership, employment or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy

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making responsibilities for dietitians, or oversees the regulation of dietitians;
or

- (z) the ~~member-registrant~~ is not ineligible because of section 8.5.

8.5 Term of Office of Committee Members

The term of office of a committee appointee is approximately three (3) years from the date of appointment or re-appointment to a committee. A committee appointee shall not be a member of the same committee of the College for more than nine (9) consecutive years. A member who has served as a committee appointee for nine (9) consecutive years is not eligible for appointment as a committee appointee until at least one year has passed since the member last served as a committee appointee.

8.6 Continuation of Term of Office

The term of office of committee members shall continue if for any reason ~~Council~~ the Board of Directors fails to appoint a new committee at the time or times set out in the by-laws, provided a quorum exists.

8.7 Committee Vacancies

The Executive Committee may appoint persons to fill any vacancies in the membership or chair of a committee, other than the Executive Committee, and it must make an appointment to fill a vacancy on a committee if it is necessary for the committee to achieve quorum or to comply with the Act or regulations. A member of a committee appointed by the Executive Committee is subject to confirmation by ~~Council~~ the Board of Directors at its next meeting.

8.8 Executive Committee Vacancies

If a vacancy occurs on the Executive Committee, ~~Council~~ the Board of Directors shall fill the vacancy by election.

9. DISQUALIFICATION AND REMOVAL OF COMMITTEE APPOINTEES

9.1 Disqualification Criteria

A committee appointee is disqualified from sitting on a committee if the member meets one or more of the following criteria:

- (a) the Executive Committee determines that the appointee had not met one or more of the eligibility requirements in section 3.10;
- (b) the appointee after being appointed ceases to meet one or more of the eligibility requirements in section 3.10;
- (c) the appointee fails, without reasonable cause, to attend three consecutive meetings of the committee of which ~~he or she is~~ they are a member;

- (d) the appointee fails, without reasonable cause, to attend a hearing or proceeding of a panel for which ~~he or she has~~they have been selected; or
- (e) the appointee fails, in the opinion of ~~Council~~the Board of Directors, to discharge ~~his or her~~their duties to the College, including without limitation having acted in a conflict of interest or otherwise in breach of a College by-law, of the *Regulated Health Professions Act, 1991*, or the College's Governance Policy.

9.2 Temporary Exclusion

A committee member who becomes the subject of any disciplinary or incapacity proceeding at the College, a Registrar's investigation under the RHPA, or an interim order under the RHPA may be subject to disqualification and shall not serve on any committee until the proceeding is finally completed.

9.3 Removal of Committee Appointee

~~Council~~The Board of Directors or the Executive Committee may remove a committee appointee who is a member-registrant of the College by resolution requiring a simple majority. ~~The~~is Board of Directors ~~Council~~ or the Executive Committee has the power to remove a committee appointee whether or not one of the disqualification criteria in section 9.1 applies.

If a ~~councillor~~director or committee appointee believes that a committee appointee meets one or more of the criteria for disqualification in section 9.1, ~~he or she~~they shall advise the Registrar in writing. A disqualified committee appointee ceases to be a member of any ~~Council~~Board of Directors committee.

10. COMMITTEE MEETINGS

10.1 Non-Application to Hearings

This Article 10 does not apply to a proceeding of a committee or a panel of a committee held for the purpose of conducting a hearing.

10.2 Location and Notice

Committee meetings shall be held at the head office of the College or at another place determined by the committee chair or Registrar. No formal notice is required for committee meetings but meeting dates will be set in advance and College will make reasonable efforts notify all of the committee members of every meeting and to arrange meeting dates and times that are convenient to the committee members.

10.3 Manner of Holding Meetings

Committee meetings may be conducted by means of teleconference or any other means that permit all persons participating in the meeting to communicate with each other adequately.

Persons participating in the meeting by such means are deemed to be present at the meeting. Meetings held in this manner are deemed to be held at the head office of the College, unless ~~Council~~the Board of Directors determines otherwise.

10.4 Chair of Meetings

The committee chair or ~~his or her~~their appointee shall preside over meetings of a committee.

10.5 Quorum for Committees

Unless specifically provided for otherwise under the Act, the RHPA, a Regulation or the by-laws, a majority of committee members constitutes a quorum for a meeting of a committee. A committee vacancy is not counted in determining whether a quorum is present.

10.6 Voting

Unless otherwise required by law or by the by-laws, every motion which properly comes before a committee shall be decided by a simple majority of the votes cast at the meeting. In the event of a tie vote, the motion is defeated. Roll call votes shall be taken for teleconference meetings and with respect to committee members attending an in-person meeting by teleconference.

10.7 Meeting Minutes

Committee chairs are responsible for ensuring there is an accurate record taken of committee meetings.

11. STATUTORY COMMITTEES

11.1 Executive Committee Composition

The Executive Committee shall be composed of the ~~President~~Chair of the Board, the Vice-~~President~~Chair of the Board and two other members of the ~~Council~~Board of Directors. At least one member of the Executive Committee must be a public ~~councillor~~director.

11.2 Executive Committee Duties

In addition to the duties provided to the Executive Committee under the RHPA and by-laws of the College, the Executive Committee will act in an advisory capacity to ~~Council~~the Board of Directors on the financial affairs of the College and without limiting the generality of the foregoing shall:

- (a) recommend annual operating and capital budgets to ~~Council~~the Board of Directors;
- (b) make recommendations relating to the financial reserves of the College;
- (c) report at least annually to the ~~Council~~Board of Directors on the financial affairs of the College;

- (d) liaise with and provide support to the Registrar.

11.3 Nomination Procedure for Executive Committee Election

Before the first meeting of the newly elected ~~Council~~ Board of Directors, the Registrar will send an invitation to all ~~councillors-directors~~ requesting written expressions of interest to stand for election to any of the offices of President~~Chair of the Board~~, Vice-~~President~~Chair of the Board and member of the Executive Committee.

11.4 Election of Executive Committee

At the first ~~Council~~ Board of Directors meeting after the election of ~~councillors~~directors, the Registrar shall conduct an election to determine the members of the Executive Committee in the order of President~~Chair of the Board~~, Vice-~~President~~Chair of the Board, and other Executive Committee members. The following provisions apply to the election:

- (a) the Registrar will present the names of candidates who have indicated their interest for the office of President~~Chair of the Board~~;
- (b) ~~Council~~ the Board of Directors may also approve nominations for the office of President~~Chair of the Board~~ at the time of the election (and a ~~councillor~~ director may nominate herself or himself as a candidate);
- (c) before the first vote, each of the nominees will have an opportunity to speak to ~~Council~~ the Board of Directors for up to two minutes about her or his candidacy;
- (d) if there is only one candidate, the Registrar shall declare the candidate elected by acclamation;
- (e) if there is more than one candidate, voting will be through secret ballot;
- (f) if there are more than two candidates in an election, there will be successive ballots until one candidate receives a majority of the votes cast, with the candidate or candidates who receive the fewest votes in a ballot dropped in the next ballot;
- (g) if there is a tie, the Registrar will break tie by lot;
- (h) after ~~Council~~ the Board of Directors elects the President~~Chair of the Board~~, it will elect the Vice-~~President~~Chair of the Board in a similar manner;
- (i) After ~~Council~~ the Board of Directors elects the Vice-~~President~~Chair of the Board it will elect the remaining Executive Committee positions in a similar manner with reference to the composition of the Committee set out in section 11.1.

11.5 Executive Committee Term of Office

Unless otherwise provided in this by-law, the term of office of the President Chair and Vice-President Chair of the Board and other members of the Executive Committee shall start immediately following their election and continue until the completion of the next election for the offices of President Chair and Vice-President Chair of the Board in the following year.

11.6 Composition of Registration Committee

The Registration Committee shall be composed of:

- (a) at least two elected councillorsdirectors;
- (b) at least two public councillorsdirectors; and
- (c) at least one committee appointee.

11.7 Composition of Inquiries, Complaints and Reports Committee

The Inquires, Complaints and Reports Committee shall be composed of:

- (a) at least three elected councillorsdirectors;
- (b) at least three public councillorsdirectors; and
- (c) at least two committee appointees.

11.8 Quorum for the Inquiries, Complaints and Reports Committee and Panels

Three members of the Inquiries, Complaints and Reports Committee, at least one of whom shall be a public councillordirector, constitute a quorum of that committee or a panel of that committee.

11.9 Composition of Discipline Committee

The Discipline Committee shall be composed of:

- (a) at least three elected councillorsdirectors;
- (b) at least two public councillorsdirectors; and
- (c) at least one committee appointee.

11.10 Composition of Fitness to Practise Committee

The Fitness to Practise Committee shall be composed of:

- (a) at least three elected councillorsdirectors;
- (b) at least two public councillorsdirectors; and

- (c) at least one committee appointee.

11.11 Composition of Quality Assurance Committee

The Quality Assurance Committee shall be composed of:

- (a) at least two elected ~~councillors~~directors;
- (b) at least two public ~~councillors~~directors; and
- (c) at least one committee appointee.

11.12 Composition of the Patient Relations Committee

The Patient Relations Committee shall be composed of:

- (a) at least two elected ~~councillors~~directors;
- (b) at least two public ~~councillors~~directors; and
- (c) at least one committee appointee.

12. NON-STATUTORY COMMITTEES

12.1 Composition of Elections Committee

The Elections Committee shall be a non-statutory committee of the College composed of three public ~~councillors~~directors.

12.2 Responsibilities of the Elections Committee

The Elections Committee's responsibilities are as follows:

- (a) dealing with disputes relating to election of elected ~~councillors~~directors;
- (b) dealing with disputes relating to the distribution by the College of election material prepared by a candidate for election;
- (c) studying and making recommendations to ~~Council~~Board of Directors on improving the election process; and
- (d) any other responsibilities as may be assigned by ~~Council~~Board of Directors or the Executive Committee from time to time.

12.3 Composition of Registrar Performance and Compensation Review Committee

The Registrar Performance and Compensation Review Committee shall be a non-statutory committee of the College composed of the members of the Executive Committee and one other ~~councillor~~director.

12.4 Responsibilities of the Registrar Performance and Compensation Review Committee

The Registrar Performance and Compensation Review Committee's responsibilities are as follows:

- (a) annually conduct a performance review of the Registrar and present the results of that review to the ~~Council~~ Board of Directors;
- (b) every three years conduct a compensation review for the Registrar, which must include a market survey, and present the results of the review to ~~Council~~ Board of Directors;
- (c) present recommendations annually to the ~~Council~~ Board of Directors respecting changes to the compensation (including salary and benefits) to be provided to the Registrar; and
- (d) any other responsibilities as may be assigned by ~~Council~~ the Board of Directors or the Executive Committee from time to time.

12.5 Composition of the Audit Committee

The Audit Committee shall be a non-statutory committee of the College composed of two members of the Executive Committee, excluding the ~~President~~ Chair and Vice-~~President~~ Chair of the Board, and two other ~~councillors~~ directors. There must be two elected ~~councillors~~ directors and two publicly appointed ~~councillors~~ directors on the Committee.

The Audit Committee's responsibilities are as follows:

- (a) meet at least once a year with the College's auditors;
- (b) review draft audit reports prepared by the College's auditors;
- (c) receive and oversee the implementation of recommendations made by the College's auditors; and
- (d) any other responsibilities as may be assigned by ~~Council~~ the Board of Directors or the Executive Committee from time to time.

12.6 Composition of the Professional Practice Committee

The Professional Practice Committee shall be composed of:

- (a) at least two elected ~~councillors~~ directors;
- (b) at least two public ~~councillors~~ directors; and
- (c) at least one committee appointee.

12.7 Responsibilities of the Professional Practice Committee

The Professional Practice Committee's responsibilities are as follows:

- (a) anticipate and work on professional practice standards, policies and guidelines.
- (b) make recommendations to ~~Council~~ the Board of Directors regarding professional practice standards, policies, and guidelines to enhance safe, competent, and ethical dietetic practice;
- (c) make recommendations to ~~Council~~ the Board of Directors regarding legislative issues/changes pertaining to the practice of dietetics;
- (d) provide direction to prepare the College submission on legislative initiatives and recommend responses to Health Professions Regulatory Advisory Council (HPRAC) referrals to ~~Council~~ the Board of Directors; and
- (e) any other responsibilities as may be assigned by ~~Council~~ the Board of Directors or the Executive Committee from time to time.

12.8 Composition of the Governance Committee

The Governance Committee shall be composed of at least five members:

- (a) at least one elected ~~councillor~~ director;
- (b) at least one public ~~councillor~~ director; and
- (c) at least one committee appointee.

12.9 Responsibilities of the Governance Committee

The Governance Committee's responsibilities are as follows:

- (a) review and consider the College's existing governance model and recommend changes that are consistent with leading evidence-based practices in governance and are within the College's control;
- (b) oversee the implementation of changes to the governance model that ~~Council~~ the Board of Directors adopts;
- (c) Consider and make recommendations to ~~Council~~ the Board of Directors on College's EDI plan and strategy.
- (d) ongoing appraisal of the College's governance structure, processes, and policies to promote longstanding governance excellence at both the ~~Council~~ Board of Directors -and Committee level; and
- (e) any additional responsibilities as directed by ~~Council~~ the Board of Directors.

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13. REGISTER

13.1 Names in the Register

Subject to paragraph 1 of section 13.2, a ~~member's-registrant's~~ name in the register shall be the ~~member's-registrant's~~ name as provided in the documentary evidence used to support the ~~member's-registrant's~~ initial registration.

13.2 Additional Register Information

In addition to the information required under subsection 23(2) of the Code, the register shall contain the following information with respect to each ~~member-registrant~~:

1. Any change to the ~~member's-registrant's~~ name that has been made in the register of the College from the date of the ~~member's-registrant's~~ initial registration with the College and any names that the ~~member-registrant~~ uses in any place of practice other than as provided in section 13.1, including any common names or abbreviations.
2. Each ~~member's-registrant's~~ certificate of registration number.
3. The classes of certificate of registration held by each ~~member-registrant~~ and the date on which each was issued.
4. A list of the languages in which each ~~member-registrant~~ is capable of practising.
5. The name, address and telephone number of the primary business through which or at which the ~~member-registrant~~ practices dietetics in Ontario and ~~his or her~~their position at that business, and any other business and location at which the ~~member-registrant~~ regularly practices dietetics in Ontario, and ~~his or her~~their position at that business or location.
6. If a ~~member-registrant~~ has resigned, the date upon which the resignation took effect.
7. If the College is aware of an outstanding charge against a ~~member-registrant~~ on or after May 1, 2018 for any offence in any jurisdiction other than an offence under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) and if the Registrar believes the offence is relevant to the ~~member's-registrant's~~ suitability to practice,
 - a) the fact and content of the charge, and
 - b) the date and place of the charge.

The information shall be removed once the charges are no longer outstanding, and the dismissal of the charges is not the subject of an appeal.

8. A summary of any existing restriction that relates to or otherwise impacts a ~~member's-registrant's~~ practice imposed by a court or other lawful authority against the ~~member-registrant~~, of which the College is aware, including the date of and a summary of the restriction imposed.
9. If the College is aware of a finding of guilt against a ~~member-registrant~~ on or after May 1, 2018 for any offence in any jurisdiction other than under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada) and if the Registrar believes the offence is relevant to the ~~member's-registrant's~~ suitability to practice,
 - a) a brief summary of the finding,
 - b) a brief summary of the sentence, and
 - c) if the finding is under appeal, a notation that it is under appeal until the appeal is finally disposed of.

If the conviction is overturned on appeal, the information shall be removed from the register once the appeal is final.

10. If a ~~member-registrant~~ has any terms, conditions or limitations in effect on ~~his or her~~ their certificate of registration, the effective date of those terms, conditions and limitations and where applicable, the Committee responsible for the imposition of those terms, conditions and limitations.
11. If a ~~member-registrant~~ has terms, conditions or limitations on ~~his or her~~ their certificate of registration varied, the effective date of the variance or removal of those terms, conditions and limitations and where applicable, the Committee responsible for the variance of those terms, conditions and limitations.
12. If a ~~member's-registrant's~~ certificate of registration is reinstated, the effective date of the reinstatement and where reinstated by a panel of the Discipline or Fitness to Practise Committee, the name of the Committee responsible for the reinstatement.
13. If a suspension on a ~~member's-registrant's~~ certificate of registration is lifted or otherwise removed, the effective date of the lifting or removal of that suspension and where applicable, the Committee responsible for the lifting or removal of the suspension.
14. If a ~~member's-registrant's~~ certificate of registration is revoked, suspended, cancelled, or otherwise terminated, a notation of that fact and the effective

date and the basis of the revocation, suspension, cancellation, or other termination which shall include but not be limited to circumstances where

- a) a member's-registrant's certificate of registration is subject to an interim order of the Executive Committee or the Inquiries, Complaints and Reports Committee;
 - b) a member's-registrant's certificate of registration is suspended for non-payment of the annual fee or any fee required by the College, or
 - c) a member's-registrant's certificate of registration is suspended for failure to submit to a physical or mental examination as ordered by the Inquiries, Complaints and Reports Committee.
15. If a member's-registrant's temporary or provisional class certificate of registration expires, the effective date of the expiry of that class of certificate.
16. If a decision of a panel of the Inquiries, Complaints and Reports Committee made on or after January 1, 2016 includes a requirement that the member-registrant attend before a panel of that committee to be cautioned as authorized by paragraph 3 of subsection 26(1) of the Code,
- a) a summary of the caution;
 - b) the date of the panel's decision;
 - c) once the member-registrant has received the caution a notation to that effect, and the date the member-registrant received the caution; and
 - d) if applicable, a notation that the panel's decision is subject to a review or appeal and therefore not yet final.

If the panel's decision referred to in this paragraph is overturned on appeal or review, the information shall be removed from the register once the appeal or review is final.

17. If a decision of a panel of the Inquiries, Complaints and Reports Committee made on or after January 1, 2016 includes a requirement that the member-registrant complete a specified continuing education or remediation program as authorized by paragraph 4 of subsection 26(1) and subsection 26(3) of the Code,
- a) a summary of the specified continuing education or remediation program;
 - b) the date of the panel's decision;

- c) once the member-registrant completes the program a notation to that effect, and the date on which the member-registrant completed the program; and
- d) if applicable, a notation that the panel's decision is subject to a review or appeal and therefore not yet final.

If the Panel's decision referred to in this paragraph is overturned on appeal or review, the information shall be removed from the register once the appeal or review is final.

- 18. A summary of any restriction on a member's-registrant's right to practise that has resulted from an undertaking given by the member-registrant to the College or an agreement entered into between the member-registrant and the College.
- 19. If an allegation of professional misconduct or incompetence has been referred to the Discipline Committee in respect of the member-registrant and is outstanding,
 - a) the date of the referral,
 - b) a summary of each specified allegation,
 - c) the status of the hearing , including the date of the hearing, if set; and
 - d) the notice of hearing.
- 20. If the question of the member's-registrant's capacity has been referred to the Fitness to Practise Committee and not yet decided,
 - a) a notation of that fact; and
 - b) the date of the referral.
- 21. If the Registrar has referred an application for reinstatement to the Discipline Committee for reinstatement and it is not finally resolved,
 - a) a notation of the referral, including the date of referral;
 - b) the anticipated date of the hearing, if the hearing date has been set or the next scheduled date for continuation of the hearing if the hearing has commenced;
 - c) if the hearing has been adjourned and no future date has been set, the fact of that adjournment; and

- d) if the hearing of evidence and arguments is completed and the parties are waiting for a decision of the panel of the Discipline Committee, a statement of that fact.
22. If an application for reinstatement has been decided by a panel of the Discipline Committee, the results of the hearing including the date of the decision and any order made.
23. If the result of a disciplinary proceeding is contained in the College's register,
- a) the date on which the panel of the Discipline Committee made its decision,
 - b) the date on which the Discipline Committee ordered any penalty, and
 - c) the decision and reasons.
24. If the College is aware that a restriction on a member-registrant or a member's registrant's practice has been made against a member-registrant registered or licensed to practise a profession inside or outside of Ontario and that finding has not been reversed on appeal,
- a) a notation of that fact;
 - b) the date of the finding and the name of the governing body that made the finding if available;
 - c) the order made if available; and
 - d) information regarding any appeals of the finding or order if available.
25. If the result of an incapacity proceeding is contained in the College's register, the date on which the panel made the finding of incapacity and the effective date of any order made by the panel.
26. If a finding of professional negligence or malpractice is contained in the College's register, the following information:
- a) the notice of and a description of the finding;
 - b) the date the finding was made against the member-registrant;
 - c) the name and location of the court that made the finding against the member-registrant; and
 - d) the status of any appeal respecting the finding made against the member-registrant.

27. Any information the College and a ~~member~~registrant, or health profession corporation, have agreed should be included in the register.
28. The date on which the College issued a certificate of authorization for a health profession corporation, and the effective date of any revocation, suspension, or cancellation of the certificate.

13.3 Public Information

All of the information referred to in section 13.2 is designated as public for the purpose of subsection 23(5) of the Code.

13.4 Registrar's Discretion

All of the information referred to in section 13.2 is information designated to be withheld from the public pursuant to subsection 23(6) of the Code such that the Registrar may refuse to disclose to an individual or post on the College's website any or all of that information if the Registrar has reasonable grounds to believe that disclosure of that information may jeopardize the safety of an individual.

14. INFORMATION FROM ~~MEMBERS-REGISTRANTS~~ AND PROFESSIONAL CORPORATIONS

14.1 ~~Member-Registrant~~ to Provide Particulars on Request

A ~~member-registrant~~ shall, upon written request of the Registrar,

- (a) immediately provide particulars of any information required to be in the College's register pursuant to the by-laws, the RHPA, the Act, or the regulations under the RHPA or the Act;
- (b) within thirty days, provide particulars of any information which was not information required to be in the College's register but was information that the ~~member-registrant~~ was required to provide to the College under the by-laws, the RHPA, the Act or a Regulation; and
- (c) within 10 days, confirm the accuracy of any information previously provided to the College by the member and where that information is no longer accurate, provide accurate information.

14.2 ~~Member-Registrant~~ to Immediately Provide Particulars

Notwithstanding section 14.1, a ~~member-registrant~~ shall immediately provide the particulars of any information required under paragraphs 7, 8 or 9 of section 13.2.

14.3 ~~Member-Registrant~~ to Provide Information on Request

The College may forward to its ~~members-registrants~~ from time to time requests for information in a printed or electronic form approved by the Registrar. Each ~~member~~

registrant shall accurately and fully complete and return such form, electronically or otherwise as specified by the College, by the due date set by the College. A request for member-registrant information may include (but is not limited to) the following:

- (a) the member's-registrant's residential address, telephone and personal e-mail address;
- (b) whether the member-registrant wishes the College to communicate with him or her in French or English;
- (c) information required to be contained in the College's register pursuant to the by-laws, the RHPA, the Act, or Regulation;
- (d) information required to be provided to the College pursuant to the by-laws, the RHPA, the Act, or Regulation;
- (e) information respecting his or her/their participation in the Quality Assurance Program;
- (f) information that relates to the professional characteristics and activities of the member-registrant that may assist the College in carrying out its objects, including but not limited to:
 - a. information about actions taken by other regulatory authorities with respect to the member-registrant;
 - b. information that relates to the member's-registrant's health;
 - c. information relating to civil law suits involving the member-registrant;
 - d. information relating to criminal charges, arrests, bail conditions and other restrictions; and
 - e. information relating to offences;
- (g) information for the purposes of compiling statistical information to assist the College in fulfilling its objects;

14.4 Member-Registrant to Notify Registrar of Changes

If there is a change to the information provided under section 14.3 or any other information provided by the member-registrant, the member-registrant shall notify the Registrar in writing of the change within thirty (30) days of the effective date of the change.

14.5 Suspension for Failure to Provide Information

Regulation 593/94 applies to a failure of a member-registrant to provide information to the College as required under the by-laws and any such failure may result in the suspension of that member-registrant under the Regulation.

14.6 Health Professional Corporation to Provide Information

The College may forward to each professional corporation from time to time requests for information in a printed or electronic form approved by the Registrar. Each professional corporation shall accurately and fully complete and return such form, electronically or otherwise as specified by the College, by the due date set by the College. A request for member-registrant information may include (but is not limited to) the following:

- (a) the information required under the applicable statutes and regulations;
- (b) the title or office held by each director and officer of the corporation;
- (c) the registered office address of the corporation;
- (d) the address and telephone number of locations where the corporation regularly provides dietetic services, other than client or residences; and
- (e) a brief description of the dietetic professional activities of the corporation.

14.7 Health Professional Corporation to Notify Registrar of Changes

If there is any change to the information that a health profession corporation provided to the Registrar under section 14.6 the corporation must notify the College in writing of any change within thirty (30) days of the effective date of the change.

14.8 Changes in Shareholders

Despite section 14.7, a health profession corporation must notify the Registrar within ten (10) days of the effective date of any change in shareholders of the corporation.

15. PROFESSIONAL LIABILITY INSURANCE

15.1 Professional Liability Insurance Coverage Requirements

A member-registrant engaging in the practice of dietetics must maintain professional liability insurance coverage with the following characteristics:

- (a) minimum coverage of no less than \$2,000,000 per occurrence;
- (b) aggregate coverage of no less than \$5,000,000;
- (c) any deductible must be \$1,000 or less;
- (d) if coverage is through a "claims made" policy, an extended reporting period provision of at least two (2) years; and
- (e) any exclusionary conditions and terms must be consistent with standard industry practice with respect to insurance of this type.

16. CONFLICT OF INTEREST

16.1 Definition of Conflict of Interest

A conflict of interest exists if a reasonable person would conclude that a ~~councillor-director~~ or committee member's personal, professional or financial interest or relationship may affect ~~his or her~~their judgement, impartiality or the discharge of ~~his or her~~their duties to the College. A conflict of interest may be real or perceived, actual or potential, or direct or indirect.

16.2 Duty to Avoid and Consult

~~Councillors-Directors~~ and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a ~~councillor-director~~ or committee member is in doubt about whether ~~he or she has~~they have or might have a conflict of interest, the ~~councillor-director~~ or committee member must consult with an appropriate person, for example the ~~President~~Chair of the Board, Registrar or legal counsel (if the conflict arises in a hearing context).

16.3 Process for Resolution of Conflicts

If a ~~councillor-director~~ or committee member believes that ~~he or she~~they may have a conflict of interest in any matter relating to ~~Council~~Board of Directors or committee business the ~~councillor-director~~ or committee member must consult with an appropriate person such as the ~~President~~Chair of the Board, Registrar or legal counsel (if the conflict arises in a hearing context). If there is any doubt as to whether a conflict exists the ~~director or committee~~ member must declare it to ~~Council~~the Board of Directors or the committee and accept the ~~Council's~~Board of Directors' or committee's decision as to whether a conflict exists. For adjudicative matters, a committee member should disclose the conflict at the earliest opportunity and in any case before the committee considers the matter.

A ~~councillor-director~~ or committee member who has a conflict of interest must:

- (a) before any consideration of the matter disclose the fact that ~~he or she has~~they have a conflict of interest;
- (b) not participate in any discussion of the matter;
- (c) not attend any meeting of part of a meeting involving the matter; and
- (d) not vote on the matter, or influence or try to influence the vote.

16.4 Undeclared Conflict

If a ~~councillor-director~~ or committee member believes another ~~councillor-director~~ or committee member has not declared a conflict of interest (despite informal notification or inquiry) the ~~councillor-director~~ or committee member who has that belief must advise an appropriate person such as the ~~President~~Chair of the Board, Registrar, or legal counsel (if the conflict arises in a hearing context). If ~~Council~~the Board of Directors or a committee chair

concludes that a ~~councillor-director~~ or committee member respectively has an undeclared conflict of interest, ~~Council-the Board of Directors~~ or the ~~committee~~ chair may direct the ~~councillor-director~~ or committee member to immediately comply with clauses (b), (c) and (d) of section 16.3.

17. BY-LAWS AND AMENDMENTS

17.1 Making By-laws

By-laws of the College may be enacted, amended, or revoked by a vote of at least two-thirds of the ~~councillors-directors~~ present at a ~~Council-Board of Directors~~ meeting duly called for the purpose of considering such enactment, amendment or revocation.

17.2 Notice

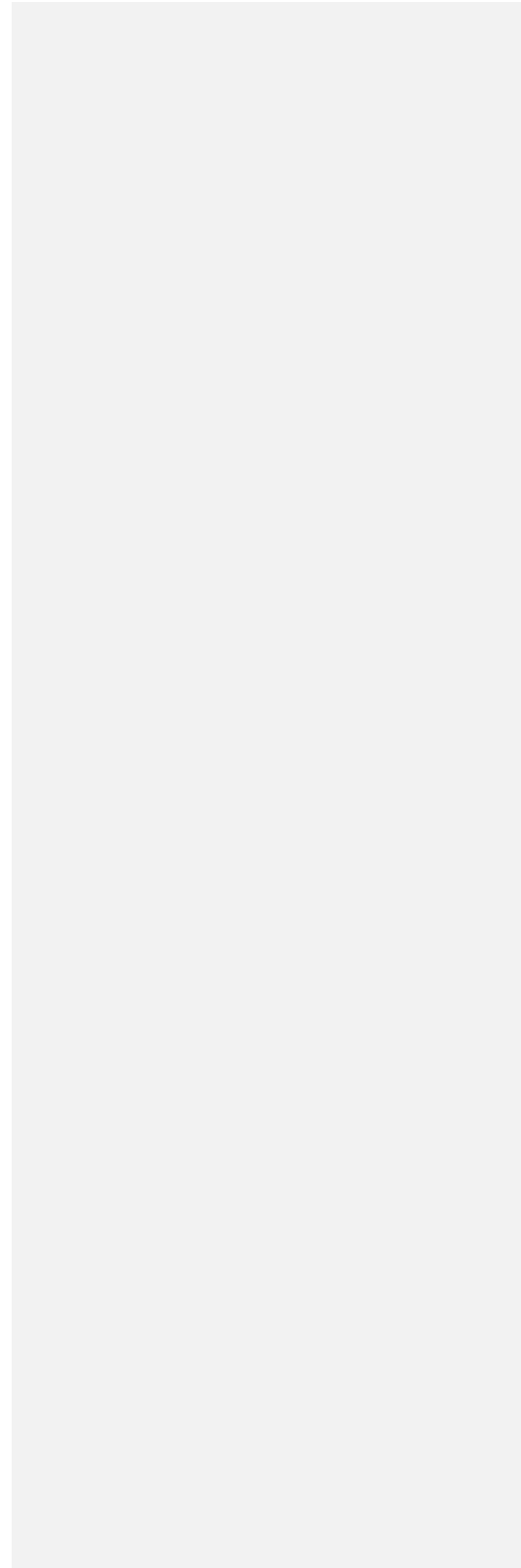
Notice of a motion to enact, amend, or revoke a by-law shall be given to ~~Council-the Board of Directors~~ at least ten days prior to the meeting referred to in section 15.1.

17.3 Record of By-laws

The Registrar shall maintain a consolidated set of College by-laws that reflect any revocation and amendment that ~~Council-the Board of Directors~~ makes to them.

APPENDIX A

Seal of the College





Board Briefing Note

Topic:	Final draft Social Media Standards and Practice Guidelines for Dietitians in Ontario
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Effective and Transparent Communication Risk-Based and Right-Touch Regulation
From:	Professional Practice Program

ISSUE

To review and approve the final draft of the *Social Media Standards and Practice Guidelines for Dietitians in Ontario* for publication and dissemination.

PUBLIC INTEREST RATIONALE

The *Social Media Standards and Guidelines for Dietitians in Ontario* relate to the following:

- a) CDO's regulatory authority to develop Standards of Professional Practice to protect the public interest;¹ and
- b) The Board's commitment to protecting the public by mitigating the risk of harm and ensuring safe, competent, and ethical dietetic practice.

BACKGROUND

In developing the draft, the Professional Practice Program took iterative steps, including environmental scans, engaging system partners, and working with the Professional Practice Committee.

In December 2022, the Board approved the draft Standard and Practice Guidelines, in principle, for consultation.

Background information, including its development before December 2022, can be found in the

¹ College of Dietitians of Ontario (2013). Framework for Standards of Professional Practice. Retrieved from <https://www.collegeofdietitians.org/resources/about-the-college/standards-of-professional-practice-framework.aspx> [June 15 & 16, 2023 Meeting]

Materials from the December 8, 2022, Board Meeting ([Item 9.1](#)).

The draft Standards and Practice Guidelines were circulated to dietitians and system partners for feedback from December 19, 2022-January 31, 2023. Following this consultation, revisions were made based on input from the Inquiries, Complaints and Reports Committee (ICRC) case manager and legal counsel.

CONSIDERATION

One hundred and eight participants completed the survey. Key respondents by identified groupings:

- Dietitians (n=93; 86%)
- Regulators (n=7; 6.5%)
- Public (n=4; 3.7%).

Appendix I provides the final draft of Ontario's Social Media Standards and Practice Guidelines for Dietitians.

EQUITY IMPACT ASSESSMENT

CDO acknowledges its commitment to Equity, Diversity, and Inclusion-Belonging (EDI-B) and promotes learning and inclusive experiences that fulfill its mandate of serving and protecting the public. Specifically, EDI-B was considered through this policy development, registrant, and system partner consultation.

Based on system partner consultation, information was added to provide more guidance on perceived safety and to include accessibility standards for EDI-B.

During the consultative process, system partners were asked if they foresaw any positive or negative potential impacts on equity-deserving groups or populations. Forty-nine participants responded to the survey question.

- Fifty-seven percent of respondents (n=28) indicated they foresee positive (n=14), no or neutral impacts (n=14), and 4% (n=2) indicated they anticipate negative effects.
- Positive impacts were related to acknowledging cultural safety and humility indicators and how principles of EDI-B apply and are integrated and embedded into the Standards. In addition, several respondents indicated they appreciated the clarification of professionalism in the question-and-answer section and how context matters when it comes to professionalism.

- Negative impacts: One respondent indicated foreseeing negative impacts on enforcing the Standard for "*BIPOC dietitians who use social media to advocate for issues related to equity and diversity within the profession.*" Although this CDO Standard and Practice Guideline is not intended to reduce the ability of dietitians to advocate for diversity in the profession, the comments highlight the importance of providing education to dietitians to demystify the Complaints and Reports process and how Standards and Guidelines are applied to complaints on a case-by-case basis. In addition, giving context and linking to the [Determining Members' Suitability to Practise Policy](#) will help clarify the College's mandate to protect the public transparently and fairly.
- Another comment related to the negative impact of a lack of accessibility standards guidance. The draft was edited to address any perceived negative impact on any equity-deserving group to include accessibility suggestions in Practice Guidelines for dietitians.

POLICY IMPLEMENTATION

The Professional Practice Program will assist registrants in the uptake of the new Standards and Practice Guidelines through educational sessions and resources. The educational sessions and resources will also offer practice-based scenarios explaining the Standards and Practice Guidelines, including strategies to mitigate risk in practice. The Professional Practice Program will continue to monitor and evaluate for any negative impacts via a survey of dietitians once the policy has been implemented.

If approved, a communications plan for registrants and other system partners will be developed. The Standards and Practice Guidelines will be incorporated into College Programs and resources like the Jurisprudence Knowledge and Assessment Tool (JKAT) and Peer and Practice Assessment (PPA).

RECOMMENDATION

That the Board approves the final Standards and Practice Guidelines.

ATTACHMENTS

- Appendix I: Social Media Standards and Practice Guidelines for Registered Dietitians in Ontario (Clean Copy)
- Appendix II: Social Media Standards and Practice Guidelines for Registered Dietitians in Ontario (Track Changes).



Social Media Standards and Practice Guidelines for Dietitians in Ontario

Definition

Social media^{1,2}: forms of electronic communication (e.g., websites and applications) through which dietitians may personally and/or professionally create and share information, ideas, messages, and content (text, video, audio and/or images) and/or provide comments and reactions to the social media posts of other users. Social media may include (but are not limited to):

- Blogs, vlogs, wikis, message boards, chat rooms and forums.
- Podcasts, electronic polling, social bookmarking, clouds, social networking (e.g., Instagram), video platforms (e.g., YouTube), and more.

Social media platforms and technology are constantly evolving, and while the platforms and terminology may change (e.g., "sharing" or "liking" a "post" and the ways that people can interact on various platforms), the concepts provided in these Standards and Practice Guidelines apply to all social media use.

Social media³ can be used for several reasons in dietetic practice, including:

- Increasing dietitian capacity to reach the public, clients and their families with timely, high-quality health and nutrition information and resources;
- Answering questions and obtaining feedback from clients, families and the public;
- Raising public awareness of key nutrition issues;
- Promoting and advertising upcoming events, programs, or dietetic services available;
- Providing education to nutrition students and dietetic practicum students;
- Networking with other professionals and sharing educational information;
- Creating common interest groups on nutrition topics; and
- Creating communities of practice to support health professionals and clients.

Purpose

The Standards and Guidelines articulate key principles for social media practice. The fundamental goal of the *Social Media Standard and Guidelines* for Registered Dietitians is to set out expectations for the professional conduct of dietitians while using social media. Standard statements articulate the minimum level of performance expectations for the professional conduct of dietitians while using social media, followed by a list of how the Standard is demonstrated in practice. The practice guidelines articulate best practice suggestions for safe, competent, and ethical dietetic practice. The Social Media Standards and Practice Guidelines are meant to be used with relevant legislation, the [Code of Ethics](#), and other [College Standards and guidelines](#). This document is intended to serve dietitians, the College and its committees when considering dietitian practice or conduct.

Dietitians should also consider their organizational and/or employer social media policies.

Social Media Standards and Guidelines may be used for several purposes, including:

1. To inform the public, employers, other health care providers and dietitians about the expectations dietitians should meet when using social media in their dietetic practice.
2. To help guide the College's decision-making in matters related to the professional conduct of dietitians in diverse practice settings.
3. To support compliance with dietitians' required standards and performance expectations surrounding professional behaviours when communicating using social media.
4. To fulfill the College's regulatory mandate of public protection.

Social media can be a valuable tool for health professionals to communicate, collaborate and share information. However, there are also risks. Following a principled approach to [risk reduction](#) and [public protection](#), principles are provided, and the Standard statements define the minimum practice expectations. The practice guideline statements provide practice suggestions.

Dietitians can refer to the Social Media Standard and Guidelines – Practice Scenarios for guiding questions, highlighting risks and challenges that dietitians may face while using social media. The scenarios illustrate, through practical examples, an application of the principles and how dietitians can apply the Standards and Guidelines personally and professionally in relation to social media use²

Principle 1: Personal and Professional Use of Social Media

Generally, the College's interest lies in regulating actions performed within the scope of practice. There are times, however, when a dietitian's personal life can have potential implications for public protection and may be within the purview of the College for its public protection mandate. This could apply where a dietitian's actions impact professional ethics or public safety, whereby the College would have a [legitimate public protection interest in regulating the behaviour](#). This commitment to public protection requires dietitians to be mindful of their professional practice at work, at home, and in public.

The Supreme Court of Canada has ruled that off-duty conduct can be considered in investigations and discipline, where a sufficiently negative impact on the profession and the public's interest can be demonstrated⁴. Dietitians are responsible for balancing their responsibilities as regulated health professionals with their right to freedom of expression in their private lives^{5,6}. While personal accounts can provide limited access through strong privacy settings, dietitians should consider that even private posts, or content and comments made in "private/closed" groups or via direct message may have the potential to be public and accessible to all and potentially subject to regulatory investigation and discipline.

Standard 1

Dietitians must identify themselves in a transparent manner that is identifiable to the public when [practising dietetics](#) via social media as per the [Professional Misconduct Regulation](#).

A registered dietitian demonstrates the Standard by:

- I. Using the same name that appears in their profile on the College's Public Register and professional designation, including either Registered Dietitian, RD or French equivalents when [practising dietetics](#) via social media.

Practice Guidelines

Dietitians are encouraged to:

- I. Consider maintaining separate personal and professional accounts. It is important to remember that professional and personal accounts are only sometimes distinguishable. When posting personally, one's registration as a dietitian may be known, and/or dietitians may share personal details on their professional accounts. Dietitians should consider overall conduct and communication that maintains the profession's reputation, upholds a culture of respect and trust with the public and does not harm the public or negatively impact client care^{6,7}.

- II. Consider providing a transparent statement to the public when representing personal views, particularly unrelated to the profession or views that could affect the public's trust in the profession. For example, *"The posts on this site are my own opinions and do not necessarily represent the position, opinions and behaviour of other dietitians or the profession in general."*⁶

Principle 2: Professionalism and Social Media Conduct

Practising dietetics requires upholding the [Code of Ethics](#), including beneficence (to do good), non-maleficence (do no harm), respect for persons/justice and respect for autonomy, all of which guide evidence-informed dietetic practice. Dietitians' interactions with clients and colleagues demonstrate values such as honesty, reliability, and compassion. Dietitians gain the trust of their clients, practising with cultural humility and providing culturally safe care. The same principles of professionalism used by dietitians in face-to-face communications apply to social media, including professional judgment and critical thinking.

Standard 2

Dietitians must demonstrate professionalism, constructive dialogue, and civility in all professional communications, including social media.

A registered dietitian demonstrates the Standard by:

- I. Conducting themselves respectfully and in a professional manner that does not impact the delivery of quality dietetic services, or the safety or perceived safety of others while using social media⁷. Others include but are not limited to the public, clients, colleagues, supervisors, employers, educators, professors, mentors, students or a regulatory body⁵. Dietitians are accountable to the public they serve, their colleagues in the profession and the College.

Standard 3

Dietitians must consider their social media conduct and how it affects their own reputation and the reputation of the profession, including how it impacts the public trust⁷. While disagreements or conflicts can arise in professional practice, dietitians must act respectfully while using social media.

A registered dietitian demonstrates the Standard by:

- I. Avoiding unprofessional, disgraceful, or dishonourable behaviour that could impact the profession or the public interest.
Examples of unprofessional, disgraceful, or dishonourable behaviour⁷ may include, but are not limited to:
 - i. using profanity towards others or about others, using language that is disrespectful, insulting, intimidating, humiliating, or abusive.
 - ii. bullying, attacking, harassing, and making comments that may be, or perceived to be disparaging to others, unsubstantiated and/or defamatory¹, hate speech (related to race, ethnicity, religion, gender, sexual orientation, age, social class, economic status, disability, weight, or level of education), or discriminatory (e.g., racism, transphobia, sexism).
 - iii. Posting images, videos and/or text that would reasonably, having regard to all the circumstances, be regarded as disgraceful, dishonourable or unprofessional (e.g., impairment by any substance while practising)⁵.

- II. Recognizing their professional obligation to report to the College and others as relevant (e.g., employer) incidents of unsafe or unethical conduct of dietitians that may cause harm to the public as per the [Professional Misconduct Regulation](#). Examples may include but are not limited to discriminatory language, sharing client personal health information without informed consent, and sharing misleading or deceptive information.

Standard 4

Dietitians must know and comply with all applicable legislation, Standards and ethical expectations when using social media.

A registered dietitian demonstrates the Standard by:

- I. Understanding how the law applies to professional practice for social media and complying with legal responsibilities. For example, [Canada's Anti-Spam Legislation](#) (CASL) may affect dietitians using electronic channels to promote or market services, organizations, or products. In addition, defamation⁸, copyright, and plagiarism laws also apply to social media and social sharing. Dietitians must consider professional conduct and always provide attributions and links to original sources when sharing information, including content across different platforms (i.e., citing the original source).

Practice Guidelines**Dietitians are encouraged to:**

- I. Consider clear, professional, audience-appropriate inclusive language, representation, design, and accessibility standards when using social media (e.g. use of alternative image text, captions, etc.). Social media that is inclusive and accessible demonstrates respect for all people.
- II. Consider the implications of liking, reposting, and reacting to comments, including how they may be interpreted and the possible consequences of these actions. For example, abbreviations, acronyms, dietetics and/or health-related terminology, or emojis can be misinterpreted or confusing. Posting short and incomplete sentences can add to this confusion. In addition, not all clients and social media users know online language culture and trends.

For the purposes of this Standard and Practice Guideline, "liking" can be considered communicating a (positive) reaction to and "sharing" can be regarded as "reposting" information or forwarding information to users. Reactions may include emojis that can be interpreted as "positive" and/or "negative".

Practice Guidelines**Dietitians are encouraged to:**

- I. Take responsibility for all information and content posted on their social media accounts, including monitoring and managing comments. Dietitians should take all reasonable steps to comment and/or remove content posted by others that is within their own control that may be seen as unprofessional (e.g., insults, inaccurate, misleading, or deceptive information). This means removing comments that do not comply with overall social media community guidelines to protect people from harmful content. This may include having a system for monitoring and/or limiting comments, as needed. While dietitians are not responsible for comments outside of their control (e.g., unsolicited reviews via public forums developed by members of the public), dietitians should take reasonable steps (e.g., contact the website administrator) to request corrections or deletions where information is inaccurate, misleading, fraudulent, or defamatory.
- II. Consider how responding to or "liking" a comment/post or image on someone else's profile/page/app may be interpreted as agreeing with or supporting the comments.
- III. Use appropriate organizational communication channels to discuss, report and resolve workplace and/or other issues involving regulated health professionals.

- IV. Consider developing their own social media policies and/or protocols/procedures for their practice, especially if they are employers, have employees, or manage a private practice. Topics may include the purpose of use, approved platforms, content expectations and guidelines, who can post and comment, guidelines for personal profiles, and consequences of not meeting policy obligations⁵.
- V. Consider developing strategies on how to respond to clients if contacted through their personal account, including how to decline invitations and preserve the client-RD relationship.
- VI. Have a strategy for approaching inappropriate (i.e., excessive or offensive) messages or negative client reviews without breaching client confidentiality. It may be helpful to evaluate the situation, the quality of care provided to the client, and assess any issues the client has described in their review. The dietitian may consider responding directly to the client if they are known, or a general response for the public. Comments should be consistent with principles in this Standard and Guideline and the Code of Ethics.

Standard 5

Dietitians must communicate any food, nutrition, and/or health-related information through social media in an evidence-informed and culturally safe manner.

A registered dietitian demonstrates the Standard by:

- I. Avoiding posting information that is misleading, deceptive, inappropriate, or harmful. Information must be supported by the best available evidence⁷ and be consistent with the principles of equity, diversity, inclusion and belonging (EDI-B).

Standard 6

Dietitians must be aware of and transparent about the limits of their knowledge and skill, and not misrepresent their qualifications when sharing content related to food and nutrition⁷.

A registered dietitian demonstrates the Standard by:

- I. Ensuring the [professional misconduct regulation](#) is met, which prohibits the inappropriate [use of a term, title or designation](#) in respect of a dietitian's practice. Inappropriate use may include:
 - Modifying the legislated title, and/or using a false or misleading term such as Medical Dietitian when the person is not a physician; or
 - Implying specialization or certification such as Paediatric Dietitian since there are no recognized and certified specialties in dietetics. Dietitians should avoid the use of the word “specialist” in title and in self-description.
 - Dietetic Students are reminded that using the title dietitian in Ontario is prohibited under the [Dietetics Act, 1991](#), unless a person is a registrant of the College of Dietitians of Ontario.

Practice Guideline**Dietitians are encouraged to:**

- I. Take reasonable steps to ensure all information is current, accurate and reliable. Dietitians may state that information is valid as of the date of publication; including the date that a post is published⁵.
- II. Follow organizational policies and consider what information, if any, requires documentation or archival (e.g., what information provides evidence of actions, events, facts, thought processes, and/or decisions within dietetic practice) in relation to social media and their dietetic practice.
- III. Consider identifying their practice area or health condition focus (e.g., public health, diabetes, etc.) on their social media accounts or platforms to assist the public in finding their services. It is also generally acceptable to indicate that a practice is focused on a particular group, such as children. As social media handles and/or hashtags can be considered use of the RD title (e.g., equivalent to an advertisement or business card), dietitians should describe any focused area of practice after the RD title when using social media to prevent modifying the legislated title or implying specialization. Consider whether separate hashtags can accomplish this (e.g., #RD #pediatric_care).

Principle 3: Evidence-Informed Practice on Social Media

Employers, clients, and the public rely on a dietitian's expertise to provide accurate and timely nutrition information.

Principle 4: Informed Consent, Confidentiality and Privacy on Social Media

Dietitians have an ethical and legal obligation to maintain client confidentiality and privacy² and obtain informed consent from clients when providing services and interacting with clients using social media⁵. In many cases, consent may be implied when clients choose to engage in communication via social media⁵.

Dietitians follow the [Professional Practice Standard for the Consent to Treatment and for the Collection, Use and Disclosure of Personal Health Information](#). Dietitians exercise professional judgment to determine when informed consent can be expressed (oral or written) or implied.

Most social networking sites do not provide a secure platform for sharing confidential client information, such as personal health information.

Standard 7

Dietitians must obtain client consent prior to collecting and using client personal health information that is available online for the purposes of nutrition assessment and/or treatment⁷, unless absolutely necessary for providing dietetic care or for safety concerns. The [Personal Health Information Protection Act, 2004 \(PHIPA\)](#) does permit indirect collection without consent in limited circumstances (i.e., appropriate rationale related to safety concerns).

A registered dietitian demonstrates the Standard by:

- I. Following the [Professional Practice Standard for the Collection, Use and Disclosure of Personal Health Information](#), if collecting, using and disclosing personal health information via social media. Dietitians comply with the legislative requirements of (PHIPA) and the [Health Care Consent Act, 1996](#).

Standard 8

Dietitians must de-identify client personal health information and/or obtain and document express informed consent from the client or their substitute decision maker (SDM) for disclosure and publication of client personal health information via social media⁷. (e.g., if posting client case studies for learning and/or collaboration with other dietitians and/or health care providers).

A registered dietitian demonstrates the Standard by:

- I. Ensuring clients are not able to identify themselves as the subject of the post. Dietitians must remove any information/circumstances that the personal health information could be used, either alone or with other information to identify the individual. If it is in doubt that anonymity can be maintained (e.g., smaller communities where clients are identifiable with little information such as location or medical condition), informed consent must be obtained from clients or their SDM and documented.
- II. Following the [Professional Practice Standard – Consent to Treatment and for the Collection, Use and Disclosure of Personal Health Information if posting a client’s identifiable personal health information on social media](#), to ensure knowledgeable consent is obtained and documented, as well as, requirements to obtain express informed consent from clients or their SDM - see iii and iv below.
- III. Obtaining express informed consent from clients or their SDM to collect, use and disclose personal health information on social media. Dietitians must show the client the content to be posted on social media, inform them that consent can be withdrawn at any time, inform them of any risks of the content (e.g., once posted, it may be challenging to have it completely removed), and provide information such as

- the purpose, where it will be posted, and any other relevant information used (e.g., client education materials)⁷.
- IV. Taking reasonable steps to mitigate power imbalances inherent in client-RD relationships. Clients may be vulnerable and feel pressured to consent. Dietitians must take reasonable steps to prevent potential effects (e.g., inform clients that if they do not consent, it will not affect their care.).
 - V. Complying with any CDO requirements and limitations regarding the use of client testimonials.

Principle 5: Professional Boundaries and Social Media

Dietitians share food, nutrition and health information related to the dietetic scope of practice for educational or informational purposes. When using their professional designation or providing health-related info, dietitians are acting in a professional capacity.

Standard 9

Dietitians must follow their [obligations for handling privacy breaches](#) if unauthorized use, disclosure, loss or theft of personal health information occurs via social media.

A registered dietitian demonstrates the Standard by:

- I. Ensuring compliance with the legislative requirements in *PHIPA*.

Practice Guideline

Dietitians are encouraged to:

- I. Consider and apply privacy settings to determine who can view their posts. It may be helpful to routinely review privacy settings and policies of the platforms used, as they may change. Dietitians should be aware that others can copy, screenshot, and share information without their knowledge or permission.

Standard 10

Dietitians must apply their professional judgment and carefully consider risks of providing any client-specific, individualized advice via social media (i.e. the advice provided creates a reasonable perception that a dietitian-client relationship exists).

In the event that client-specific individualized advice must be provided over social media, dietitians must be able and willing to meet professional obligations in a client-dietitian relationship as noted in the [Virtual Care Standards and Guidelines](#), including fulfilling privacy obligations as per *PHIPA*. Providing dietetic assessment and/or treatment/intervention via remote technology is considered providing dietetic virtual care. Dietitians are expected to comply with all their existing professional expectations including those set out in relevant legislation, the Code of Ethics, and College Standards.

A registered dietitian demonstrates the Standard by:

- I. Understanding the limits to what can be communicated safely and how social media may make meaningful, client-RD communication more difficult. When interactions with clients become more complex and individualized, dietitians should consider providing communication options off social media. When general information is being provided, it should be clearly stated that the information posted is not intended to replace individualized dietetic advice⁵.

Standard 11

Dietitians must maintain professional boundaries when interacting with clients with whom a client-RD relationship exists, persons associated with these clients, and dietetic learners via social media.

A registered dietitian demonstrates the Standard by:

- I. Considering the risks of dual relationships (e.g., compromised professional judgment and/or unrealistic client expectations) and the impact. Dietitians must not exploit power imbalances in the dietitian-client relationship or persons closely associated with them, and any relationship with dietetic learners (mentoring, teaching, supervising, or evaluating student learners)⁷.

Practice Guideline**Dietitians are encouraged to:**

- I. Consider context regarding professional boundaries. In smaller communities, dietitians may be in the same social media networks as clients, or friends and family. Consider the type and length of care, and vulnerability of the client. The [Boundary Guidelines](#) provide guidance to dietitians when interacting on social media, advising dietitians to be mindful of sharing personal information and considering separating personal and professional communications.

Principle 6: Conflict of Interest and Social Media

Dietitians always use professional judgment to keep clients, colleagues, the public and the professions' obligations a priority². A dietitian is in a conflict of interest when they consider their own (or someone else's) interests ahead of or instead of the interests of their client⁹. Given the casual nature of social media and the opportunities to market and advertise services and products, be aware of behaviours and actions that may lead to conflicts of interest. For more information on conflict of interest, refer to the [Standards and Guidelines for Professional Practice: Conflict of Interest](#).

Principle 7: Advertising and Promoting Dietetic Services on Social Media

Social media provides opportunities for dietitians to promote their dietetic services. A group or an individual dietitian can create sites for various purposes such as describing nutrition services, sharing nutrition education and resources, summarizing recent nutrition research, and professional opinions. The College encourages professional advertising of dietetic services. When advertising, keep in mind the public's best interest and apply safeguards to avoid conflict of interest.

Standard 12

Dietitians must avoid an actual or perceived conflict of interest that are not manageable by safeguards when using social media.

A registered dietitian demonstrates the Standard by:

- I. Complying with any applicable advertising laws, standards, and guidelines, including the [Standards and Guidelines for Professional Practice – Conflict of Interest](#) when advertising and promoting dietetic services on social media.

Practice Guideline

Dietitians are encouraged to:

- I. Be aware of potential conflicts of interest that could arise when a dietitian promotes products or services that are unrelated to dietetics through a social media account that identifies them as a dietitian. In addition, dietitians should carefully consider the endorsement of a specific brand or product. Principles of transparency, honesty, evidence-informed practice, professional judgment, and ethics should be considered.

Questions & Answers

The questions and answers provide information on how the expectations in the *Social Media Standards and Guidelines* can be met.

1. Can you describe what “professionalism,” and “reputation of the profession” means? How does the College determine this?

A recent systematic review¹⁰ sought to define professionalism in the dietetics profession for the purpose of teaching nutrition and dietetics. As noted by Dart et al. (2019), professionalism is central to safe and ethical dietetic care and crucial to maintaining trust from the public in healthcare providers. As such, trust is an important part of professionalism. Conduct on social media that undermines the public’s trust and confidence in the profession may impact client access to dietetic care and client care itself.

Generally, College Standards and resources, including the Code of Ethics and other professional resources such as the [Integrated Competencies for Dietetic Education and Practice](#) (ICDEP)¹¹ inform what is considered professional.

Professionalism is contextual. Concepts of equity, diversity, inclusion and belonging (EDI-B) are relevant to how professionalism has been defined and conceptualized, historically related to the cultural norms of dominant groups¹². The College is committed to informed EDI-B action to minimize systemic barriers and build a more inclusive and equitable health system for all, including Indigenous peoples, immigrants, refugees, people who are racialized, people with disabilities and the 2SLGBTQIA communities.

To evaluate alleged dietitian unprofessional conduct or communication on social media and the impact on professional reputation, the College ensures that the complaints and reports process is fair, consistent, and unbiased. An EDI-B lens is applied to concepts of professionalism, including declaration of bias. Each complaint or report is handled on a case-by-case basis through a neutral, objective fact-finding process. For example, if a complaint arose about a dietitian’s alleged unprofessional conduct on social media, the complaint would be investigated based on the facts and circumstances of the case, including the performance expectations in the Social Media Standard & Guidelines using an evidence-informed approach. In addition, being a professional means practising while considering the following abilities¹³:

- a. Being reflective and committed to safe, competent, ethical practice
- b. Practising integrity, cultural humility, honesty, diligence, respect and treating others fairly and equitably.

- c. Valuing dignity and worth of all persons regardless of age, race, culture, creed, sexual orientation, gender identity and expression, body weight, ableness and/or health status
- d. Complying with legal requirements and professional obligations
- e. Applying the principles of sensitive practice and functioning in a client-centred manner
- f. Working within areas of personal knowledge and skills
- g. Maintaining a safe work environment
- h. Maintaining personal wellness consistent with the needs of the practice
- i. Using an evidence-informed approach to your work
- j. Acting ethically, respecting autonomy, beneficence, non-maleficence, and respect for justice.

2. What does practising dietetics on social media mean?

Dietitians should exercise reasonable professional judgement to determine if they are [practising dietetics](#) on social media based on individual circumstances related to their specific role and practice setting. The definition of practising dietetics is quite broad and can include various practice areas and workplace settings.

As noted in the College's definition of practising, dietetic practice can be in a paid or unpaid capacity (e.g., volunteer work) for which registrants use food and nutrition-specific knowledge, skills and judgment while engaging in:

- the assessment of nutrition related to health status and conditions for individuals, groups and populations;
- the management and delivery of nutrition therapy to treat disease;
- the management of food services systems; building the capacity of individuals and populations to promote, maintain or restore health and prevent disease through nutrition and related means; and
- the management, education or leadership that contributes to the enhancement and quality of dietetic and health services.

For greater clarity, dietetic practice includes the following activities:

- Assessing, promoting, protecting, and enhancing health and the prevention of nutrition-related diseases in populations using population health and health promotion approaches, as well as strategies focusing on the interactions among the determinants of health, food security and overall health.
- Conducting dietetic, health and evaluation research, product development, product marketing, and consumer education to develop, promote and market food and nutritional products and pharmaceuticals related to nutrition disorders or nutritional health.
- Developing or advocating for food and nutrition policy.

- Communicating food & nutrition information in any print, radio, television, video, Internet, or multi-media format.

NB: This is an excerpt from the Definition of Practising Dietetics. Please see the [link](#) for complete details.

[Professional liability insurance](#) is mandatory for all College members who practise dietetics as defined in the College's definition. Dietitians engaging in the practice of dietetics are responsible for confirming they have coverage that meets Section 15.1, [College By-Law No. 1: General](#).

- 3. Can you elaborate on (Principle 2, Standard 2 i) "Dietitians must conduct themselves respectfully and in a professional manner that does not impact the delivery of quality dietetic services, the safety or perceived safety of others while using social media⁷." What is meant by safety or perceived safety?**

Someone might feel or perceive that they are unsafe (e.g., at danger, risk, or harm) by viewing photos, videos, posts or comments that contain disrespectful, insulting, intimidating, humiliating, or abusive language and/or content. Examples may include bullying, attacking, harassing, and making comments that may be, or are perceived to be, disparaging to others, unsubstantiated and/or defamatory³, hate speech (related to race, ethnicity, religion, gender, sexual orientation, age, social class, economic status, disability, weight, or level of education), or discriminatory (e.g., racism, transphobia, sexism). Dietitians should consider various population groups they interact with, and how social media can impact initiatives relating to mental health, anti-racism, health equity, etc.

An example may include posting disparaging comments about a person who follows a specific diet (whether it is evidence-informed or not). Disparaging statements (made in jest or not) could subject a person to potential risk or harm. Dietitians have an obligation to maintain a professional presence when posting and providing advice as a dietitian, as it reflects on them and the profession.

Dietitians may consider developing strategies on how to respond to followers/clients' comments and reflect on how their communications represent the profession and its credibility.

4. **Principle 3, Standard 5 i. speaks to avoiding posting information that is “misleading, deceptive, inappropriate or harmful. Information must be supported by best available evidence⁷ and be consistent with the principles of equity, diversity, inclusion and belonging (EDI-B).” Can you elaborate?**

It may be helpful to explain this with an example. Consider how dietitians respond to client comments on social media with cultural humility*. Clients may approach their own health and wellness, food and nutrition in various ways. Dietitians may need to learn and unlearn to honour and respect client knowledge and ways of knowing.

Cultural or Indigenous ways of knowing refers to how cultures develop diverse worldviews over time. There is no single way of “knowing,” and different cultures may approach knowledge in different ways¹⁵. There is much complexity and diversity in people’s experiences and lived realities.

By embedding EDI-B and client-centred care in practise, dietitians seek to understand, honour and recognize client approaches to their own health and wellness as legitimate and integral, particularly in the context of Indigenous clients. In responding to any social media posts, dietitians consider this complexity.

Evidence-informed practice, as noted in the ICDEP¹¹, “brings together the best available research evidence and the dietitian’s experiential knowledge, along with the client’s preferences, context, and available resources.” Evidence-informed practice places emphasis on the client – their contributions, preferences, experiences, culture and traditions, and more. It is beyond the scope of this Standard to provide detailed guidance on how dietitians implement evidence-informed practice while addressing the complex needs of their clients, however, dietitians should consider the limitations of evidence-informed practice, which may not always consider the context, traditions and ways of knowing from less dominant groups. Dietitians acknowledge systems and worldviews (e.g., Positivism, Western worldview) through which they approach their practice, recognizing the importance of all forms of knowledge, which includes cultural perspectives, and Indigenous/traditional knowledge (e.g., ways of life, healing and/or educational experiences) for client practices and an awareness of the complexity and diversity of the experiences and lived realities of clients.

Dietitians may consider the following as they work towards the process of reconciliation – naming the knowledge system (s) from which they are working when appropriate, not immediately prioritizing or privileging Western knowledge systems or worldviews and not giving feedback on practices or approaches in a way that is biased or centered only on dominant views¹⁶.

*Cultural humility: “a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience.” (First Nations Health Authority (n.d.). Retrieved from:

<https://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/cultural-safety-and-humility>).

5. Can you clarify what is meant by cultural safety and cultural humility (Principle 2) via social media use?

Dietitians can embed EDI-B through social media use by committing to practising in a manner that promotes cultural humility and cultural safety.

Although definitions may vary in the literature, for this document, practising cultural humility involves self-reflection, curiosity and adopting a learner’s mindset to understand the experiences of another person^{12,13}. Cultural humility includes empathy and respect, practicing in a client-centred manner and being open to the experiences, preferences and worldviews of clients and colleagues. It also means being aware of one’s position and privilege¹³.

Culturally safe care, as defined in the ICDEP¹¹ is an outcome based on respectful engagement when power imbalances are recognized and addressed in the provision of dietetic care. Free of racism and other discrimination, clients, colleagues, and students should feel safe receiving and/or working with and accessing care from dietitians and dietitians should be safe and respected providing care^{12, 13}.

Dietitians should be aware that conduct on social media (which may include liking, sharing, and/or commenting on content) and unprofessional comments and/or behaviour can impact safety and trust for clients and the public, potentially impacting willingness to access care and/or create harm.

6. How might dietitians approach potential or actual clients who are contacting a dietitian inappropriately (repeatedly or offensively) on social media?

Dietitians may consider developing their own code of conduct and/or social media policy and/or protocols/procedures for their practice⁵. Standard 3, i., may help guide expectations. Dietitians may develop a strategy for how to respond to a client/potential client and what steps may occur based on the communication or behaviour (i.e., notification, blocking, etc.). A code of conduct, policy, protocol, or procedure may include how to deal with public relations issues and how negative comments will be responded to⁵.

Social Media Practice Scenarios

Please review the Social Media Standard and Practice Guidelines prior to reviewing the Social Media Practice Scenarios.

There are no simple answers to these scenarios.

The scenarios provide accompanying guiding questions, applying the principles from the Standard and Guidelines. This provides an example of how dietitians can apply the Standards and Guidelines personally and professionally in relation to social media use.

Scenario 1: Tik Tok Trouble

Together with colleagues, some dietitians have used Tik Tok at their local hospital to post collaborative team dances of healthcare providers in their uniforms during the pandemic. However, one dietitian has created their own videos using the tag name “Dietitian Dilemmas.” The dietitian has been complaining about a staff member on TikTok video reels and has frequently complained that the staff member is “ignorant” and that they do not have a good relationship with them. There are also posts about clients who are “difficult,” albeit anonymously. The dietitian has also commented negatively about their employer on TikTok video reels.

Considering the principle of professionalism and social media conduct and apply the following guiding questions:

1. Is the dietitian practicing dietetics?
2. Is this a professional account? If so, is the dietitian identifiable (via name and designation)? For example, even if using a separate tag name, does the dietitian’s professional designation and same name appear somewhere on their profile?
3. How can this dietitian’s social media presence impact the public’s perception of the dietitian and the profession, including diminishing the dietitian’s credibility and the public’s trust and confidence in the profession?
4. Could any content/comments be perceived as offensive, discriminatory, or disrespectful? Is the post true? Is it helpful?
5. Has the dietitian used appropriate organizational/communication channels to discuss, report and resolve workplace or other professional issues?
6. While disagreements or conflicts can arise in professional practice, is the dietitian acting respectfully towards her colleagues and clients?

Scenario 2: Tricky Tweets

A dietitian uses their name and designation on Twitter and provides advice on all sorts of topics (often not dietetic related). One post covers the topic of essential oils for healing, and the next is about antioxidants to boost immunity and “prevent infections.” Tags include “Immunologist RD.” Links to other materials provided appear inaccurate and unreliable.

Consider the principles of evidence-informed practice and apply the following guiding questions:

1. Is the information shared evidence-informed (i.e., accurate, current, appropriate) and not misleading, deceptive, inappropriate, or harmful?
2. What are the limits of the dietitian’s knowledge and skill?
3. Does the dietitian misrepresent their qualifications when sharing content related to food and nutrition?
4. Is there an inappropriate use of a term, title or designation in respect of a dietitian’s practice (i.e. using a term or implying specialization or certification)?
5. Are links to other information and resources in posts current, accurate and reliable?

Scenario 3: Oversharing on FB?

A dietitian shares a client case through a private Facebook group open only to other dietitians and dietetic students. The case is complex, and the dietitian appreciates gathering insights on the client’s clinical management from other dietitians. Through several posts, the dietitian provides details, including the personal health information of the client (e.g., medical diagnosis, lab results, and health history). However, they do not share any demographic info, nor the client’s name. The dietitian practices in a small community and in a less common area of dietetic practice. A dietetic student in the group recognizes the content and believes the case is about their aunt.

Consider the principles of informed consent, confidentiality and privacy and apply the following guiding questions:

1. Has the dietitian de-identified information or obtained client express informed consent for disclosure and publication via social media?
2. If obtaining express informed consent from clients or their substitute decision-maker (SDM) to collect, use and disclose personal health information on social media, has the dietitian showed the client the content to be posted on social media, including informing the client that consent can be withdrawn at any time? Have any risks of the content and information such as the purpose, where it will be posted, and any other relevant information used be provided?
3. Although the content and comments are made in a “private/closed” group, do the posts have the potential to be public and accessible to all?

Scenario 4: Negative Reviews

A client posts a negative review of a dietitian's service via an online review website and writes comments about the dietitian, some of which are untrue. The dietitian is upset and feels somewhat vulnerable. The dietitian is ready to type up their post, then pauses and reflects.

Consider the principles of the Social Media Standard and Practice Guidelines and apply the following guiding questions:

1. Has the dietitian evaluated the situation? Consider the quality of the care provided to the client and assess any issues the client describes in the review.
2. Is there any content posted by the client that may be insulting, inaccurate or misleading? How can the dietitian's response be consistent with the Code of Ethics, Standards of Practice, principles of equity, diversity, inclusion and belonging (EDI-B)? How can the dietitian's response provide accurate information that is evidence-informed?
3. Would contacting legal counsel for advice be warranted in this situation?
4. Can the dietitian contact the website to request a correction or deletion?
5. Would responding to the post be helpful? If posting a response, does the response ensure confidentiality (i.e., responding either directly to the client if they are known, or by providing a general response for public viewing, carefully considering what should be included (e.g., what care you strive to provide, how you deal with client concerns generally, etc.)?
6. In what ways can the dietitian's entire professional profile help to build a positive online presence?
7. In what ways, if any, can the client's experience be improved? How does the dietitian foster client feedback and act on suggestions?

Scenario 5: "Liking" the wrong post?

A dietitian who is passionate about plant-based diets and animal rights gets into a highly debated online discussion with a PhD who cites research about animal foods. One participant in the thread makes a defamatory comment toward the professor. The dietitian "likes" the post.

Consider the principles of the Social Media Standard and Practice Guidelines and apply the following guiding questions:

1. Is the dietitian practicing dietetics?
2. Is this a professional account? If so, is the dietitian identifiable (via name and designation)? For example, even if using a separate tag name, does the dietitian's professional designation and the same name that appear somewhere on their profile?
3. If using a professional account, could a "like," "follow," "thumbs-up," or reaction be perceived as an endorsement of the post?

4. If this is not a professional account, could this conduct sufficiently have a negative impact on the profession and the public's interest?
5. How can this dietitian's social media presence impact the public's perception of the dietitian and the profession, including diminishing the dietitian's credibility and the public's trust and confidence in the profession?
6. Could any content be perceived as offensive, discriminatory, or disrespectful?
7. Is the dietitian acting respectfully?

Scenario 6: Hanging out on Messenger

A dietitian supervises practicum students and sends messages to them on Facebook Messenger and Instagram Direct Message.

Consider the principles of professional boundaries and apply the following guiding questions:

1. Is this a professional or personal account?
2. Is professional language used?
3. Has the preceptor maintained professional boundaries (consideration of power imbalances in the dietitian-student relationship)?
4. When interacting with clients/students, is the dietitian using electronic communication and social media to enhance the student's learning or for personal reasons?

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College of
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Appendix 2

Draft Social Media Standards and Practice Guidelines for Dietitians in Ontario

Introduction Definition

Social media^{1,2} : ~~is a broad term used to define~~ forms of electronic communication, ~~including~~ (e.g., websites ~~and/or~~ applications) ~~for social networking and blogging~~ through which dietitians may personally and/or professionally create and share information, ideas, messages, and content (e.g., text, video, audio and/or images) and/or provide comments and reactions to the social media posts of other users. Social media may include (but are not limited to):

- ~~B~~logs, vlogs, wikis, message boards, chat rooms ~~and~~, forums;~~;~~
- ~~podcasts~~Podcasts, electronic polling, social bookmarking, clouds, social networking (e.g., ~~Facebook, Instagram, Twitter, LinkedIn~~), ~~and~~ video platforms (e.g., ~~TikTok~~, YouTube),~~;~~ and more.

Commented [DC1]: Feedback was provided to limit examples to avoid dating the Standard.

Social media platforms and technology are constantly evolving, and while the platforms and terminology may change (e.g., "sharing" or "liking" a "post" and the ways that people can interact on various platforms), the concepts provided in these Standards and Practice Guidelines apply to all social media use.

Social media³ can be used for several reasons in dietetic practice, including:

- Increasing dietitian capacity to reach the public, clients and their families with timely, high-quality health and nutrition information and resources;
- Answering questions and obtaining feedback from clients, families and the public;
- Raising public awareness of key nutrition issues;
- Promoting and advertising upcoming events, programs, or dietetic services available;
- Providing education to nutrition students and dietetic practicum students;
- Networking with other professionals and sharing educational information;
- Creating common interest groups on nutrition topics; and
- Creating communities of practice to support health professionals and clients.

Purpose

The Standards and Guidelines articulate key principles for social media practice. The fundamental goal of the *Social Media Standard and Guidelines* for Registered Dietitians is to set out expectations for the professional conduct of dietitians while using social media. Standard statements articulate the minimum level of performance expectations for the professional conduct of dietitians while using social media, followed by a list of how the Standard is demonstrated in practice. The practice guidelines articulate best practice suggestions for safe, competent, and ethical dietetic practice. The Social Media Standards and Practice Guidelines are meant to be used with relevant legislation, the Code of Ethics, and other College Standards as guidelines. This document is intended to serve dietitians, the College and its committees when considering dietitian practice or conduct.

Dietitians should also consider their organizational and/or employer social media policies.

Social Media Standards and Guidelines may be used for several purposes, including:

1. To inform the public, employers, other health care providers and dietitians about the expectations dietitians should meet when using social media in their dietetic practice.
2. To help guide the College's decision-making in matters related to the professional conduct of dietitians in diverse practice settings.
3. To support compliance with dietitians' required standards and performance expectations surrounding professional behaviours when communicating using social media.
4. To fulfill the College's regulatory mandate of public protection.

Social media can be a valuable tool for health professionals to communicate, collaborate and share information. However, there are also risks. Following a principled approach ~~for-to risk~~ reduction and public protection, ~~Standard statements~~ principles are provided, and the Standard statements define the minimum practice expectations. The practice guideline statements provide best practice suggestions.

Dietitians can refer to the Social Media Standard and Guidelines – Practice Scenarios for ~~accompanying guidance~~ guiding questions, highlighting risks and challenges that dietitians may face while using social media. The scenarios illustrate, through practical examples, an application of the principles and how dietitians can apply the Standards and Guidelines personally and professionally in relation to social media use².

Commented [DC2]: Feedback was provided to clarify that the scenarios provide guiding questions.

Principle 1: Personal and Professional Use of Social Media

Generally, the College's interest lies in regulating actions performed within the scope of practice. There are times, however, when a dietitian's personal life can have potential implications for public protection and may be within the purview of the College for its public protection mandate. This could apply where a dietitian's actions impact professional ethics or public safety, whereby the College would have a [legitimate public protection interest in regulating the behaviour](#). This commitment to public protection requires dietitians to be mindful of their professional practice at work, at home, and in public.

~~While the Standards and Guidelines focus on a dietitian's professional use of social media, there may be extreme cases where it may also apply to personal use. As regulated health professionals, dietitians are responsible for abiding by the [Code of Ethics and Professional Practice Standards](#).~~

The Supreme Court of Canada has ruled that off-duty conduct can be considered in investigations and discipline, where a sufficiently negative impact on the profession and the public's interest can be demonstrated⁴. Dietitians are responsible for balancing their responsibilities as regulated health professionals with their right to freedom of expression in their private lives^{5,6}. While personal accounts can provide limited access through strong privacy settings, dietitians should consider that even private posts, or content and comments made in "private/closed" groups or via direct message may have the potential to be public and accessible to all and potentially subject to regulatory investigation and discipline.

Standard 1

Dietitians must identify themselves in a transparent manner that is identifiable to the public when [practising dietetics](#) via social media as per the [Professional Misconduct Regulation](#).

A registered dietitian demonstrates the Standard by:

- ✚ Using the same name that appears in their profile on the College's [Public Register of Dietitians](#) and ~~their~~ professional designation, including either Registered Dietitian, RD or ~~the~~ French equivalents when [practising dietetics](#) via social media.

Practice Guidelines

Dietitians are encouraged to:

- I. **Consider maintaining** separate personal and professional accounts. It is important to be ~~mindful-remember~~ that professional and personal accounts are only sometimes distinguishable. When posting personally, one's registration as a dietitian may be known, and/or dietitians may share personal details on their professional accounts. Dietitians should consider overall conduct and communication that maintains the profession's reputation, upholds a culture of respect and trust with the public and does not harm the public or negatively impact client care^{6,7}
- II. Consider providing a ~~disclaimer~~ **transparent statement to the public** when representing personal views, particularly unrelated to the profession or views that could affect the public's trust in the profession. For example, *"The posts on this site are my own opinions and do not necessarily represent the position, opinions and behaviour of other dietitians or the profession in general."*⁶

Commented [DC3]: Feedback was provided to consider the use of the word "disclaimer". Edited to transparent statement.

Principle 2: Professionalism and Social Media Conduct

Practising dietetics requires upholding the [Code of Ethics](#), including beneficence (to do good), non-maleficence (do no harm), respect for persons/justice and respect for autonomy, all of which guide evidence-informed dietetic practice. Dietitians' interactions with clients and colleagues demonstrate values such as honesty, reliability, and compassion. Dietitians gain the trust of their clients, practicing with cultural humility and providing culturally safe care. The same principles of professionalism used by dietitians in face-to-face communications apply to social media, including professional judgment and critical thinking.

Standard 2

Dietitians must demonstrate professionalism, constructive dialogue, and civility in all professional communications, including ~~when using~~ social media.

A registered dietitian demonstrates the Standard by:

- I. Conducting themselves respectfully and in a professional manner that does not impact the delivery of quality dietetic services, or the safety or perceived safety of others while using social media⁷. Others include but are not limited to the public, clients, colleagues, supervisors, employers, educators, professors, mentors, students or a regulatory body⁵. Dietitians are accountable to the public they serve, their colleagues in the profession and the College.

Commented [DC4]: Question received to elaborate on safety/perceived safety. Question and Answer was added (p.15).

Standard 3

Dietitians must consider their social media conduct and how it affects their own reputation, and the reputation of the profession, including how it impacts the public trust⁷. While disagreements or conflicts can arise in professional practice, dietitians must act respectfully while using social media ~~for advocacy~~.

A registered dietitian demonstrates the Standard by:

- I. Avoiding unprofessional, disgraceful, or dishonourable behaviour that could impact the profession or the public interest. Examples of unprofessional, disgraceful, or dishonourable behaviour⁷ may include, but are not limited to:
 - i. ~~language towards others that includes using profanity towards others or about others, using language that is profanity, is~~ disrespectful, insulting, intimidating, humiliating, or abusive.
 - ii. bullying, attacking, harassing, and making comments that may be, or perceived to be disparaging to others, unsubstantiated and/or defamatory¹, hate speech (related to race, ethnicity, religion, gender, sexual orientation, age, social class, economic status, disability, weight, or level of education), or discriminatory (e.g., racism, transphobia, sexism).
 - iii. Posting ~~inappropriate photos, reels, stories, and comments~~ images, videos and/or text that would reasonably, having regard to all the circumstances, be regarded as disgraceful, dishonourable or unprofessional (e.g., alcohol and drug impairment while practising)⁵.
- II. Recognizing their professional obligation to report to the College and others as relevant (e.g., employer), incidents of unsafe or unethical conduct of dietitians that may cause harm to the public as per the [Professional Misconduct Regulation](#). Examples may include

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but are not limited to discriminatory language, sharing client personal health information without informed consent, and sharing misleading or deceptive information.

Standard 4

Dietitians must **know and comply with all applicable legislation, Standards and ethical expectations when using social media.**

A registered dietitian demonstrates the Standard by:

- I. Understanding how the law applies to professional practice for social media and complying with legal responsibilities. For example, [Canada's Anti-Spam Legislation](#) (CASL) may affect dietitians ~~if they use~~ using electronic channels to promote or market services, organizations, or products. In addition, defamation⁸, copyright, and plagiarism laws also apply to social media and social sharing. Dietitians must consider professional conduct and always provide attributions and links to original sources when sharing information, including content across different platforms (i.e., citing the original source).

Practice Guidelines

Dietitians are encouraged to:

- I. Consider clear, professional, ~~and~~ audience-appropriate ~~language~~ [inclusive language, representation, design and accessibility standards](#) when using social media [\(e.g. use of alternative image text, captions, etc.\)](#). [Social media that is inclusive and accessible demonstrates respect for all people.](#)
- II. [Consider the implications of liking, reposting, and reacting to comments, including how they may be interpreted and the possible consequences of these actions. For example, abbreviations, acronyms, dietetics and/or health-related terminology, or emojis can be misinterpreted or confusing. Posting short and incomplete sentences can add to this confusion. In addition, not all clients and social media users know online language culture and trends.](#)

~~Dietitians should consider the implications of liking, reposting, and reacting to comments, including how they may be interpreted and the possible implications of these actions. For example, abbreviations, acronyms, dietetics and/or health-related terminology, or emojis can be misinterpreted or confusing and hard to understand for the public. Posting short and incomplete sentences can add to this confusion. In addition, not all clients and social media users are aware of online language culture and trends (e.g., short forms for LOL, BRB, etc.). "Using emojis and texting in shorthand can clarify meaning and tone but also lends informality. Dietitians should balance clarity with professionalism. Consider that reacting with an emoji to~~

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~~any post or comment on a post can be easily misconstrued, causing complications and confusion¹⁵.~~

For the purposes of this Standard and Practice Guideline, "liking" can be considered communicating a (positive) reaction to and "sharing" can be regarded as "reposting" information or forwarding information to users. Reactions may include emojis that can be interpreted as "positive" and/or "negative".

Practice Guidelines

Dietitians are encouraged to:

- I. Take responsibility for all information and content posted on ~~any their~~ social media accounts, that is their own, including monitoring and managing comments. Dietitians should take all reasonable steps to comment and/or remove content posted by others that is within the locus of their own control that may be seen as unprofessional (e.g., insults, inaccurate, misleading, or deceptive information). This means removing comments that do not comply with overall social media community guidelines to protect people from harmful content. This may include having a system for monitoring and/or limiting comments, as needed. While dietitians are not responsible for comments outside of ~~the locus of their own~~ control (e.g., unsolicited comments), ~~dietitians should strive to be aware of comments posted about their practice. dietitians should take reasonable steps~~ Unsolicited reviews via public forums, which are developed by members of the public and link to a dietitian's social media platform, are not prohibited. Still, where information is inaccurate, misleading, fraudulent, or defamatory, dietitians should take reasonable steps (e.g., contact the website administrator) to request corrections or deletions where information is inaccurate, misleading, fraudulent, or defamatory.
- II. Consider how responding to or "liking" a comment/post or image on someone else's profile/page/app may be interpreted as agreeing with or supporting the comments.
- III. Use appropriate organizational communication channels to discuss, report and resolve workplace and/or other issues involving regulated health professionals.

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- IV. Consider developing their own social media policies and/or protocols/procedures for their practice, especially if they are employers, have employees, or manage a private practice. Topics may include the purpose of use, approved platforms, content expectations and guidelines, who can post and comment, guidelines for personal profiles, and consequences of not meeting policy obligations⁵.
- V. Consider developing strategies on how to respond to clients if contacted through their personal account, including how to decline invitations and preserve the client-RD relationship.
- VI. Have a strategy for approaching inappropriate (i.e., excessive or offensive) messages or negative client reviews without breaching client confidentiality. It may be helpful to evaluate the situation, the quality of care provided to the client, and assess any issues the client has described in their review. The dietitian may consider responding directly to the client if they are known, or a general response for the public. Comments should be consistent with principles in this Standard and Guideline and the Code of Ethics.

Standard 5

Dietitians must communicate any food, nutrition, and/or health-related information through social media in an evidence-informed and culturally safe manner.

A registered dietitian demonstrates the Standard by:

- I. Avoiding posting information that is misleading, deceptive, inappropriate, or harmful. Information must be supported by the best available evidence⁷ and support be consistent with the principles of equity, diversity, inclusion and belonging (EDI-B), including Indigenous and cultural ways of knowing where relevant.

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Standard 6

Dietitians must be aware of and transparent about the limits of their knowledge and skill, and not misrepresent their qualifications when sharing content related to food and nutrition⁷.

A registered dietitian demonstrates the Standard by:

- I. Ensuring the professional misconduct regulation is met, which prohibits the inappropriate use of a term, title or designation in respect of a dietitian's practice. ~~An~~ inappropriate use may include:
 - Modifying the legislated title, and/or using a false or misleading term such as Medical Dietitian when the person is not a physician; or
 - ~~Implying~~ Implying specialization or certification such as Paediatric Dietitian since there are no recognized and certified specialties in dietetics. Dietitians should avoid the use of the word "specialist" in title and in self-description.

- Dietetic Students are reminded that using the title dietitian in Ontario is prohibited under the [Dietetics Act, 1991](#), unless a person is a registrant of the College of Dietitians of Ontario.

Practice Guideline

Dietitians are encouraged to:

- I. Take reasonable steps to ensure all information is current, accurate and reliable. Dietitians may state that information is valid as of the date of publication; including the date that a post is published⁵.
- II. Follow organizational policies and consider what information, if any, requires documentation or archival (e.g., what information provides evidence of actions, events, facts, thought processes, and/or decisions within dietetic practice) in relation to social media and their dietetic practice.
- III. Consider identifying their practice area or health condition focus (e.g., public health, diabetes, etc.) on their social media accounts or platforms to assist the public in finding their services. It is also generally acceptable to indicate that a practice is focused ~~to-on~~ a particular group, such as children. As social media handles and/or hashtags can be considered use of the RD title (e.g., equivalent to an advertisement, or business card), dietitians should describe any focused area of practice after the RD title when using social media to prevent modifying the legislated title or implying specialization. [Consider whether](#) separate hashtags can accomplish this (e.g., #RD #pediatric_care).

Principle 3: Evidence-Informed Practice on Social Media

Employers, clients, and the public rely on a dietitian's expertise to provide accurate and timely nutrition information.

Principle 4: Informed Consent, Confidentiality and Privacy on Social Media

Dietitians have an ethical and legal obligation to maintain client confidentiality and privacy² and obtain informed consent from clients when providing services and interacting with clients using social media⁵. In many cases, consent may be implied when clients choose to engage in communication via social media⁵.

Dietitians follow the [Professional Practice Standard for the Consent to Treatment and for the Collection, Use and Disclosure of Personal Health Information](#). Dietitians exercise professional judgment to determine when informed consent can be expressed (oral or written) or implied.

Most social networking sites do not provide a secure platform for sharing confidential client information, such as personal health information.

Standard 7

Dietitians must **obtain client consent prior to collecting and using client personal health information that is available online for the purposes of nutrition assessment and/or treatment without client consent⁷, unless absolutely necessary for providing dietetic care or for safety concerns.** The [Personal Health Information Protection Act, 2004 \(PHIPA\)](#) does permit indirect collection without consent in limited circumstances (i.e., appropriate rationale related to safety concerns).

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A registered dietitian demonstrates the Standard by:

- i. Following the [Professional Practice Standard for the Collection, Use and Disclosure of Personal Health Information](#), if collecting, using and disclosing personal health information via social media. Dietitians comply with the legislative requirements ~~of~~ [\(PHIPA\)](#) and the [Health Care Consent Act, 1996](#).

Standard 8

Dietitians must de-identify client personal health information and/or obtain and document express informed consent from the client or their substitute decision maker (SDM) for disclosure and publication of client personal health information via social media⁷.

(e.g., if posting client case studies for learning and/or collaboration with other dietitians and/or health care providers).

A registered dietitian demonstrates the Standard by:

- i. Ensuring clients ~~must not be~~ not able to identify themselves as the subject of the post. Dietitians must remove any information/circumstances that the personal health information could be used, either alone or with other information to identify the individual. If it is in ~~is~~ a doubt that anonymity can be maintained (e.g., smaller communities where clients ~~be~~ are ~~identified~~ identifiable with little information such as location or medical condition), informed consent must be obtained from clients or their SDM and documented.
- ii. Following the Professional Practice Standard – Consent to Treatment and for the Collection, Use and Disclosure of Personal Health Information if posting a client’s identifiable personal health information on social media, to ensure knowledgeable consent is obtained and documented, as well as, requirements to obtain express informed consent from clients or their SDM - see iii and iv below.
- iii. ~~when~~ Obtaining express informed consent from clients or their SDM to collect, use and disclose personal health information on social media. Dietitians must show the client the content to be posted on social media, inform them that consent can be withdrawn at any time, inform them of any risks of the content (e.g. once posted, it may be challenging to have it completely removed), and provide information such as the purpose, where it will be posted, and any other relevant information used (e.g. client education materials)⁷.
- iv. Taking reasonable steps to mitigate power imbalances inherent in client-RD relationships. Clients may be vulnerable and feel pressured to consent. Dietitians must take reasonable steps to prevent potential effects (e.g., inform clients that if they do not consent, it will not affect their care.)
- iv-v. Complying with any CDO requirements and limitations regarding the use of testimonials.

Standard 9

Dietitians must follow their [obligations for handling privacy breaches](#) if unauthorized use, disclosure, loss or theft of personal health information occurs via social media.

A registered dietitian demonstrates the Standard by:

- I. [Ensuring](#) compliance with the legislative requirements in *PHIPA*.

Practice Guideline

Dietitians are encouraged to:

- II. Consider and apply privacy settings to determine who can view their posts. It may be helpful to routinely review privacy settings and policies of the platforms used, as they may change. Dietitians should be aware that others can copy, screenshot, and share information without their knowledge or permission.

Standard 10:

Dietitians must apply their professional judgment and carefully consider risks of providing any client-specific, individualized advice via social media (i.e. the advice provided creates a reasonable perception that a dietitian-client relationship exists).

In the event that client-specific individualized advice must be provided over social media, dietitians must be able and willing to meet professional obligations in a client-dietitian relationship as noted in the [Virtual Care Standards and Guidelines](#), including fulfilling privacy obligations as per *PHIPA*. Providing dietetic assessment and/or treatment/intervention via remote technology is considered providing dietetic virtual care. Dietitians are expected to comply with all their existing professional expectations including those set out in relevant legislation, the Code of Ethics, and College Standards.

Commented [DC12]: Link to Virtual Care Standards & Guidelines

A registered dietitian demonstrates the Standard by:

- I. Understanding the limits to what can be communicated safely and how social media may make meaningful, client-RD communication more difficult. When interactions with clients become more complex and individualized, dietitians should consider providing communication options off social media. When general information is being provided, it should be clearly stated that the information posted is not intended to replace individualized dietetic advice⁵.

Principle 5: Professional Boundaries and Social Media

Dietitians share food, nutrition and health information related to the dietetic scope of practice for educational or informational purposes. When using their professional designation or providing health-related info, dietitians are acting in a professional capacity.

Standard 11

Dietitians must maintain professional boundaries when interacting with clients with whom a client-RD relationship exists, persons associated with these clients, and dietetic learners via social media.

A registered dietitian demonstrates the Standard by:

- i. ~~they must~~ Considering the risks of dual relationships (e.g., compromised professional judgment and/or unrealistic client expectations) ~~as well as~~ and the impact. Dietitians must not exploit power imbalances in the dietitian-client relationship or persons closely associated with them, and any relationship with dietetic learners (mentoring, teaching, supervising, or evaluating student learners)⁷.

Practice Guideline

Dietitians are encouraged to:

- 4. Consider ~~that maintaining boundaries depends on~~ context regarding professional boundaries. In smaller communities, dietitians may be in the same social media networks as clients, or friends and family. Consider the type and length of care, and vulnerability of the client. The [Boundary Guidelines](#) provide guidance to dietitians when interacting on social media, advising dietitians to be mindful of sharing personal information and considering separating personal and professional communications.

Principle 6: Conflict of Interest and Social Media

Dietitians always use professional judgment to keep clients, colleagues, the public and the professions' obligations a priority². A dietitian is in a conflict of interest when they consider their own (or someone else's) interests ahead of or instead of the interests of their client⁹. Given the casual nature of social media and the opportunities to market and advertise services and products, be aware of behaviours and actions that may lead to conflicts of interest. For more information on conflict of interest, refer to the [Standards and Guidelines for Professional Practice: Conflict of Interest](#).

Principle 7: Advertising and Promoting Dietetic Services on Social Media

Social media provides opportunities for dietitians to promote their dietetic services. A group or an individual dietitian can create sites for various purposes such as describing nutrition services, sharing nutrition education and resources, summarizing recent nutrition research, and professional opinions. The College encourages professional advertising of dietetic services. When advertising, keep in mind the public's best interest ~~and ensure full disclosure and transparency and~~ apply safeguards to avoid conflict of interest.

Standard 12

Dietitians must avoid, ~~or recognize and manage to avoid,~~ an actual or perceived conflict of interest that are not manageable by safeguards when using social media.

A registered dietitian demonstrates the Standard by:

- I. Complying with any applicable advertising laws, standards, and guidelines, including the [Standards and Guidelines for Professional Practice – Conflict of Interest](#) when advertising and promoting dietetic services on social media.

Practice Guideline

Dietitians are encouraged to:

- I. Be aware of potential conflicts of interest that could arise when a dietitian promotes products or services that are unrelated to dietetics through a social media account that identifies them as a dietitian. In addition, dietitians should carefully consider the endorsement of a specific brand or product. Principles of transparency, honesty, evidence-informed practice, professional judgment, and ethics should be considered.

Frequently Asked Questions (FAQs) Questions & Answers

The [FAQs questions and answers](#) provide information on how the expectations in the *Social Media Standards and Guidelines* can be met.

1. Can you describe what “professionalism,” and “reputation of the profession” means? How does the College determine this?

A recent systematic review¹⁰ sought to define professionalism ~~for~~in the dietetics profession for the purpose of teaching nutrition and dietetics. As noted by Dart et al. (2019), professionalism is central to safe and ethical dietetic care and crucial to maintaining trust from the public in healthcare providers. As such, trust is an important part of professionalism. Conduct on social media that undermines the public’s trust and confidence ~~of~~in the profession may impact client access to dietetic care and client care itself.

Generally, College Standards and resources, including the Code of Ethics and other professional resources such as the [Integrated Competencies for Dietetic Education and Practice](#) (ICDEP)¹¹ inform what is considered professional.

Professionalism is contextual. Concepts of equity, diversity and inclusion and belonging (EDI-B) are relevant to how professionalism has been defined and conceptualized, historically related to the cultural norms of dominant groups¹². The College is committed to informed equity, diversity, inclusion and belonging (EDI-B) action to minimize systemic barriers and build a more inclusive and equitable health system for all, including Indigenous peoples, immigrants, refugees, people who are racialized, people with disabilities and the 2SLGBTQIA communities.

To evaluate alleged dietitian unprofessional conduct or communication on social media and the impact ~~to~~on professional reputation, the College ensures that the complaints and reports process is fair, consistent, and unbiased. An EDI-B lens is applied to concepts of professionalism, including declaration of bias. Each complaint or report is handled on a case-by-case basis through a neutral, objective fact-finding process. For example, if a complaint arose about a dietitian’s alleged unprofessional conduct on social media, the complaint would be investigated based on the facts and circumstances of the case, including the performance expectations in the Social Media Standard & Guidelines using an evidence-informed approach. In addition, being a professional means practising while considering the following abilities¹³:

- Being reflective and committed to safe, competent, ethical practice
- Practising with-integrity, cultural humility, honesty, diligence, respect and treating others fairly and equitably.
- Valuing dignity and worth of all persons regardless of age, race, culture, creed, sexual orientation, gender identity and expression, body weight, ableness and/or health status

- Complying with legal requirements and professional obligations
- Applying the principles of sensitive practice and functioning in a client-centred manner
- Working within areas of personal knowledge and skills
- Maintaining a safe work environment
- Maintaining personal wellness consistent with the needs of the practice
- Using an evidence-informed approach to your work
- Acting ethically, respecting autonomy, beneficence, non-maleficence, and respect for justice.

2. What does practising dietetics on social media mean?

Dietitians should exercise reasonable professional judgement to determine if they are [practising dietetics](#) on social media based on ~~the~~ individual circumstances related to their specific role and practice setting. The definition of practising dietetics is quite broad and can include various practice areas and workplace settings.

As noted in the College's definition of practising, dietetic practice can be in a paid or unpaid capacity (e.g., volunteer work) for which registrants use food and nutrition-specific knowledge, skills and judgment while engaging in:

- the assessment of nutrition related to health status and conditions for individuals, groups and populations;
- the management and delivery of nutrition therapy to treat disease;
- the management of food services systems; building the capacity of individuals and populations to promote, maintain or restore health and prevent disease through nutrition and related means; and
- the management, education or leadership that contributes to the enhancement and quality of dietetic and health services.

For greater clarity, dietetic practice includes the following activities:

- Assessing, promoting, protecting, and enhancing health and the prevention of nutrition-related diseases in populations using population health and health promotion approaches, as well as strategies focusing on the interactions among the determinants of health, food security and overall health.
- Conducting dietetic, health and evaluation research, product development, product marketing, and consumer education to develop, promote and market food and nutritional products and pharmaceuticals related to nutrition disorders or nutritional health.
- Developing or advocating for food and nutrition policy.

- Communicating food & nutrition information in any print, radio, television, video, Internet, or multi-media format

NB: This is an excerpt of the from the Definition of Practising Dietetics. Please see [link](#) for full-complete details.

[Professional liability insurance](#) is mandatory for all College members who practise dietetics as defined in the College's definition. Dietitians engaging in the practice of dietetics are responsible to for confirming they have coverage that meets Section 15.1, [College By-Law No. 1: General](#).

3. **Can you elaborate on (Principle 2, Standard 2 i) "Dietitians must conduct themselves respectfully and in a professional manner that does not impact the delivery of quality dietetic services, the safety or perceived safety of others while using social media".**
What is meant by safety or perceived safety?

Someone might feel or perceive that they are unsafe (e.g., at danger, risk, or harm) by viewing photos, videos, posts or comments that contain disrespectful, insulting, intimidating, humiliating, or abusive language and/or content. Examples may include bullying, attacking, harassing, and making comments that may be, or are perceived to be, disparaging to others, unsubstantiated and/or defamatory³, hate speech (related to race, ethnicity, religion, gender, sexual orientation, age, social class, economic status, disability, weight, or level of education), or discriminatory (e.g., racism, transphobia, sexism). Dietitians should consider various population groups they interact with, and how social media can impact initiatives relating to mental health, anti-racism, health equity, etc.

An example may include posting disparaging comments about a person who follows a specific diet (whether it is evidence-informed or not). Disparaging statements (made in jest, or not) could subject a person to potential risk or harm. Dietitians have an obligation to maintain a professional presence when posting and providing advice as a dietitian, as it reflects on them and the profession.

Dietitians may consider developing strategies on how to respond to followers/clients' comments and reflect on how their communications represent the profession and its credibility.

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4. Principle 3, Standard 5 i. speaks to avoiding posting information that is “misleading, deceptive, inappropriate or harmful. Information must be supported by best available evidence⁷ and be consistent with the principles of equity, diversity, inclusion and belonging (EDI-B).” Can you elaborate?

It may be helpful to explain this with an example. Consider how dietitians respond to client comments on social media with cultural humility*. Clients may approach their own health and wellness, food and nutrition in various ways. Dietitians may need to learn and unlearn to honour and respect client knowledge and ways of knowing.

Cultural or Indigenous ways of knowing refer to a term used to describe the complexity and diversity of ways of learning. It relates to how cultures develop diverse different worldviews of topics over time. ,for example, Indigenous and Western worldviews of knowing and being. There is no single way of “knowing,” and different cultures may approach knowledge in different ways¹⁵. There is much complexity and diversity in people’s experiences and lived realities.

Practising byBy embedding EDI-B and client centered care in practise, dietitians seek to understand, honour and recognize client approaches to their own health and wellness as legitimate and integral, particularly in the context of Indigenous clients. In responding to any social media posts, dietitians consider this complexity.

Evidence-informed practice, as noted in the ICDEP¹¹, “brings together the best available research evidence and the dietitian’s experiential knowledge, along with the client’s preferences, context, and available resources.” Evidence-informed practice places emphasis on the client – their contributions, preferences, experiences, culture and traditions, and more. It is beyond the scope of this Standard to provide detailed guidance on how dietitians implement evidence-informed practice while addressing the complex needs of their clients, however, dietitians should consider the limitations of evidence-informed practice, which may not always consider the context, traditions and ways of knowing from less dominant groups. Dietitians acknowledge systems and worldviews (e.g., Positivism, Western worldview) through which they approach their practice, recognizing the importance of all forms of knowledge, which includes cultural perspectives, and Indigenous/traditional knowledge (e.g., ways of life, healing and/or educational experiences) for client practices and an awareness of the complexity and diversity of the experiences and lived realities of clients.

Dietitians may consider the following as they work towards the process of reconciliation – naming the knowledge system (s) from which they are working when appropriate, not immediately prioritizing or privileging Western knowledge systems or worldviews and

not giving feedback on practices or approaches in a way that is biased or centered only on dominant views¹⁶.

*Cultural humility: “a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience.” (First Nations Health Authority (n.d.). Retrieved from: <https://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/cultural-safety-and-humility>).

Cultural ways of knowing refers to a term used to describe how cultures develop different views of topics over time, for example, Indigenous and Western worldviews of knowing and being. There is no single way of “knowing” and different cultures may approach knowledge in different ways¹⁵. Evidence informed practice, as noted in the ICDEP¹¹, “brings together the best available research evidence and the dietitian’s experiential knowledge, along with the client’s preferences, context, and available resources.” Evidence informed practice places emphasis on the client – their contributions, preferences, experiences, culture and traditions, and more. It is beyond the scope of this Standard to provide detailed guidance on how dietitians implement evidence informed practice while addressing the complex needs of their clients.

Dietitians consider the limitations of evidence informed practice which may not always consider the context, traditions and ways of knowing from less dominant groups. Dietitians acknowledge systems and worldviews (e.g., Positivism, Western worldview) through which they approach their practice, recognizing the importance of all forms of knowledge which includes cultural perspectives, and Indigenous/traditional knowledge (e.g. ways of life, healing and/or educational experiences) for client practices.

Dietitians honour and recognize how a client approaches their own health and wellness as legitimate and integral and may consider the following as they work towards the process of reconciliation – naming the knowledge system (s) from which they are working when appropriate, not immediately prioritizing or privileging Western knowledge systems or worldviews and not giving feedback on practices or approaches in a way that is biased or centered only on dominant views¹⁶.

3.5. _____ Can you describe what is meant by cultural safety and cultural humility via social media use?

Dietitians can embed support equity, diversity, inclusion and belonging EDI-B through social media use by committing to practicing in a manner that promotes cultural humility and cultural safety.

Although definitions may vary in the literature, for ~~the purposes of~~ this document, practicing cultural humility involves self-reflection, curiosity and adopting a learner's mindset to understand ~~ing~~ the experiences of another person^{12,13}. Cultural humility includes empathy and respect, practicing in a client-centred manner and being open to the experiences, preferences and worldviews of clients and colleagues. It also means being aware of one's position and privilege¹³.

Culturally safe care, as noted in the ICDEP¹¹ is an outcome based on respectful engagement when power imbalances are recognized and addressed in the provision of dietetic care. Free of racism and other discrimination, clients, colleagues, and students should feel safe receiving and/or working with and accessing care from dietitians and dietitians should be safe and respected providing care^{12, 13}.

Dietitians should be aware that conduct on social media (which may include liking, sharing, and/or commenting on content) and unprofessional comments and/or behaviour can impact safety and trust for clients and the public, potentially impacting willingness to access care, and/or create harm.

4-6. How might dietitians approach potential or actual clients who are contacting a dietitian inappropriately (repeatedly or offensively) on social media?

Dietitians may consider developing their own code of conduct and/or social media policy and/or protocols/procedures for their practice⁵. Standard 3, i., may help guide expectations. Dietitians may develop a strategy for how to respond to a client/potential client and what steps may occur based on the communication or behaviour (i.e., notification, blocking, etc.). ~~The A~~ code of conduct, ~~or~~ policy, protocol or procedure may include how to deal with public relations issues and how negative comments will be responded to⁵.

Appendix H

Draft Social Media Practice Scenarios

Please review the ~~Draft~~ Social Media Standard and Practice Guidelines prior to reviewing the ~~Draft~~ Social Media Practice Scenarios.

There are no simple answers to these scenarios.

The scenarios provide accompanying guiding questions, applying the principles from the Standard and Guidelines. This provides an example of how dietitians can apply the Standards and Guidelines personally and professionally in relation to social media use.

Scenario 1: Tik Tok Trouble

Together with colleagues, some dietitians have used Tik Tok at their local hospital to post collaborative team dances of healthcare providers in their uniforms during the pandemic. However, one dietitian has created their own videos using the tag name "Dietitian Dilemmas." The dietitian has been complaining about a staff member on TikTok video reels and has frequently complained that the staff member is "ignorant" and that they do not have a good relationship with them. There are also posts about clients who are "difficult," albeit anonymously. The dietitian has also commented negatively about their employer on TikTok video reels.

Considering the principle of professionalism and social media conduct and apply the following guiding questions:

1. Is the dietitian practicing dietetics?
2. Is this a professional account? If so, is the dietitian identifiable (via name and designation)? For example, even if using a separate tag name, does the dietitian's professional designation and same name ~~that~~ appear somewhere on their profile?
3. How can this dietitian's social media presence impact the public's perception of the dietitian and the profession, including diminishing the dietitian's credibility and the public's trust and confidence in the profession?
4. Could any content/comments be perceived as offensive, discriminatory, or disrespectful? Is the post true? ~~Is it kind?~~ Is it helpful?
5. Has the dietitian used appropriate organizational/communication channels to discuss, report and resolve workplace or other professional issues?
6. While disagreements or conflicts can arise in professional practice, is the dietitian acting respectfully towards her colleagues and clients?

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Scenario 2: Tricky Tweets

A dietitian uses their name and designation on Twitter and provides advice on all sorts of topics (often not dietetic related). One post covers the topic of essential oils for healing, and the next is about antioxidants to boost immunity and “prevent infections.” Tags include “Immunologist RD.” Links to other materials provided appear inaccurate and unreliable.

Consider the principles of evidence-informed practice and apply the following guiding questions:

1. Is the information shared evidence-informed (i.e., accurate, current, appropriate) and not misleading, deceptive, inappropriate, or harmful?
2. What are the limits of the dietitian’s knowledge and skill?
3. Does the dietitian misrepresent their qualifications when sharing content related to food and nutrition?
4. Is there an inappropriate use of a term, title or designation in respect of a dietitian's practice (i.e. using a term or implying specialization or certification)?
5. Are links to other information and resources in posts current, accurate and reliable?

Scenario 3: Oversharing on FB?

A dietitian shares a client case through a private Facebook group open only to other dietitians and dietetic students. The case is complex, and the dietitian appreciates gathering insights on the client’s clinical management from other dietitians. Through several posts, the dietitian provides details, including the personal health information of the client (e.g., medical diagnosis, age, lab results, and health history and occupation). However, they do not share any demographic info, nor the client’s name. The dietitian practices in a small community and in a less common area of dietetic practice. A dietetic student in the group recognizes the content and believes the case is about their aunt.

Commented [DC16]: Removed age and occupation - could be demographic info.

Consider the principles of informed consent, confidentiality and privacy and apply the following guiding questions:

1. Has the dietitian de-identified information and/or obtained client express informed consent for disclosure and publication via social media?
2. If obtaining express informed consent from clients or their substitute decision-maker (SDM) to collect, use and disclose personal health information on social media, has the dietitian showed the client the content to be posted on social media, including informing the client that consent can be withdrawn at any time? Have any risks of the content and information such as the purpose, where it will be posted, and any other relevant information used be provided?
3. Although the content and comments are made in a “private/closed” group, do the posts have the potential to be public and accessible to all?

Commented [DC17]: Clarity.

Scenario 4: Negative Reviews

A client posts a negative review of a dietitian's service via an online review website and writes comments about the dietitian, some of which are untrue. The dietitian is upset and feels somewhat vulnerable. The dietitian is ready to type up their post, then pauses and reflects.

Consider the principles of the Social Media Standard and Practice Guidelines and apply the following guiding questions:

1. Has the dietitian evaluated the situation? Consider the quality of the care provided to the client and assess any issues the client describes in the review.
2. Is there any content posted by the client that may be insulting, inaccurate or misleading? How can the dietitian's response be consistent with the Code of Ethics, Standards of Practice, principles of equity, diversity, inclusion and belonging (EDI-B)? How can the dietitian's response provide accurate information that is evidence-informed?
3. Would contacting legal counsel for advice be warranted in this situation?
4. Can the dietitian contact the website to request a correction or deletion?
5. Would responding to the post be helpful? ~~If so, dietitians should avoid responding in haste or anger.~~ If posting a response, does the response ensure confidentiality (i.e., responding either directly to the client if they are known, or by providing a general response for public viewing, carefully considering what should be included (e.g., what care you strive to provide, how you deal with client concerns generally, etc.)?
- ~~6. Are the dietitian's comments consistent with the Code of Ethics and with the Standards of Practice?~~
- ~~7-6.~~ In what ways can the dietitian's entire professional profile help to build a positive online presence?
- ~~8-7.~~ In what ways, if any, can the client's experience be improved? How does the dietitian foster client feedback and act on suggestions?

Scenario 5: "Liking" the wrong post?

A dietitian who is passionate about plant-based diets and animal rights gets into a highly debated online discussion with a PhD who cites research about animal foods. One participant in the thread makes a defamatory comment towards the professor. The dietitian "likes" the post.

Consider the principles of the Social Media Standard and Practice Guidelines and apply the following guiding questions:

1. Is the dietitian practicing dietetics?

2. Is this a professional account? If so, is the dietitian identifiable (via name and designation)? For example, even if using a separate tag name, does the dietitian's professional designation and the same name that appear somewhere on their profile?
3. If using a professional account, could a "like," "follow," "thumbs-up," or reaction be perceived as an endorsement of the post?
4. If this is not a professional account, could this conduct sufficiently have a negative impact on the profession and the public's interest?
5. How can this dietitian's social media presence impact the public's perception of the dietitian and the profession, including diminishing the dietitian's credibility and the public's trust and confidence in the profession?
6. Could any content be perceived as offensive, discriminatory, or disrespectful?
7. Is the dietitian acting respectfully?

Scenario 56: Hanging out on Messenger

A dietitian is supervising practicum students and sends ~~posts on~~ messages to them on Facebook Messenger and Instagram Direct Message.

Consider the principles of professional boundaries and apply the following guiding questions:

1. Is this a professional or personal account?
2. Is professional language used?
3. Has the preceptor maintained professional boundaries (consideration of power imbalances in the dietitian-student relationship)?
4. When interacting with clients/students, is the dietitian using electronic communication and social media to enhance the student's learning or for personal reasons?

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Board Briefing Note

Topic:	Annual Board and Committee Evaluations
Purpose:	Decision Required
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Executive Committee

ISSUE

To review the annual board and committee evaluations.

PUBLIC INTEREST RATIONALE

Good governance is the foundation for effective regulation and public trust. Best practices in regulation support the ongoing assessment of the Board and committees with a focus on interactions, behaviours, and decisions, to their effectiveness at achieving their mandate. This transparent and reflective performance review demonstrates CDO's commitment to continuous improvement and good governance.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires the Board to regularly assess its effectiveness.

BACKGROUND

Evaluation increases the Board's understanding of its own governance and deepens its commitment to good governance and adhering to its governance values and policies.

Each year, Board directors and committee members complete anonymous annual performance evaluations. The results of these evaluations are reviewed and discussed by the Board at the June meeting to identify learning opportunities, strengths, and challenges. Committees also review their results at the beginning of the term.

The Executive Committee reviewed the annual Board and committee evaluations at its meeting

on May 16 and did not make any recommendations to the Board.

CONSIDERATIONS

In line with the Board's governance modernization plan, the Governance Committee will review the governance evaluation framework with the intention of developing new evaluations that better reflect the purpose and priorities of the tool. It is anticipated that this new evaluation framework will be in place by the end of 2023.

RECOMMENDATION

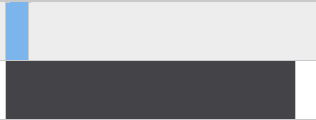
For information and discussion.

2023 Annual Board Performance Evaluation

13 Board members 14 Completed

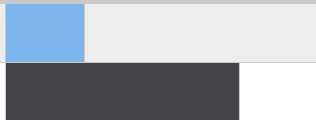
1) This is my first year on the Board (If yes, answer Question 2 and 3, if no, proceed to question #4).

Respondents: 14

Choice	Percentage	Count	
Yes	7.14%	1	
No	92.86%	13	
Total	100%	14	

2) After the orientation process, I felt prepared to exercise my role on the Board.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	25.00%	1	
Agree	75.00%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

3) What I found most useful to help me understand my role on the Board was:

Respondents: 3

3) What I found most useful to help me understand my role on the Board was:

- 1 The orientation. The verbal instruction was underscored by onscreen notes. The only area that I am not totally comfortable with making my way around is Box. I do not find it intuitive to use, I feel like I am hopping back and forth, and worry I miss documents.
- 2 Material provided was comprehensive.
- 3 Understanding that the role of the CDO is to protect the public. Becoming more comfortable with the group to be able to ask questions and share.



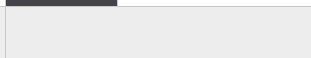

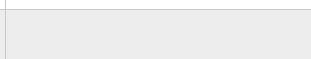
4) At Board meetings, the strategic oversight and public protection mandate of the Board were clearly articulated in:

Respondents: 14

	All of the time	Most of the time	Some of the time	None of the time	NA	Total
Structure of the meeting agenda	71.43% (10)	21.43% (3)	0.00% (0)	0.00% (0)	7.14% (1)	100% (14)
Council discussion	71.43% (10)	28.57% (4)	0.00% (0)	0.00% (0)	0.00% (0)	100% (14)
Council decision making	78.57% (11)	21.43% (3)	0.00% (0)	0.00% (0)	0.00% (0)	100% (14)





5) The Board has the information needed to oversee how the College is meeting its goals and objectives.

Respondents: 14

Choice	Percentage	Count	
All of the time	64.29%	9	
Most of the Time	35.71%	5	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	



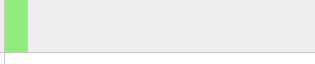
6) The Board has the right information needed to monitor the finances of the College.

Respondents: 14

Choice	Percentage	Count	
Strongly agree	42.86%	6	
Agree	50.00%	7	
Disagree	7.14%	1	
Strongly disagree	0.00%	0	
Total	100%	14	

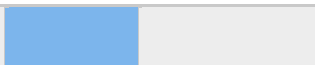

7) Questions and discussions at Board meetings added value beyond the information provided in writing to support effective decision making.

Respondents: 14

Choice	Percentage	Count	
All of the Time	42.86%	6	
Most of the Time	50.00%	7	
Some of the Time	7.14%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	



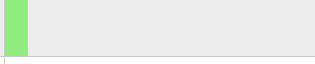
8) Board discussion focused on policy and outcomes rather than management and administrative processes.

Respondents: 14

Choice	Percentage	Count	
All of the Time	42.86%	6	
Most of the Time	57.14%	8	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	

9) From my perspective, decisions were based on evidence and information rather than opinion.

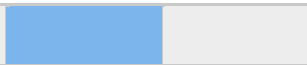

Respondents: 14

Choice	Percentage	Count	
All of the Time	64.29%	9	
Most of the Time	28.57%	4	
Some of the Time	7.14%	1	
None of the Time	0.00%	0	

NA	0.00%	0	
Total	100%	14	



10) Reports and documents were sufficient to support informed discussions and effective decision-making.

Respondents: 14

Choice	Percentage	Count	
All of the Time	50.00%	7	
Most of the Time	50.00%	7	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	



11) Discussions and decision-making favoured the public interest.

Respondents: 14

Choice	Percentage	Count	
All of the Time	71.43%	10	
Most of the Time	28.57%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	

12) I am encouraged to express my views fully in all matters discussed at Board meetings.

Respondents: 14

Choice	Percentage	Count	
All of the Time	85.71%	12	
Most of the Time	14.29%	2	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	

13) There is an atmosphere of respect and trust among Board members, staff and the Registrar & ED.

Respondents: 14

Choice	Percentage	Count	
Strongly agree	57.14%	8	
Agree	35.71%	5	
Disagree	7.14%	1	
Strongly disagree	0.00%	0	
Total	100%	14	

14) I trust the information I received at and for Board meetings.

Respondents: 14

Choice	Percentage	Count	
All of the Time	78.57%	11	
Most of the Time	21.43%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	

15) Board meetings are chaired effectively to build consensus among Board members and manage conflict constructively.

Respondents: 14

Choice	Percentage	Count	
All of the Time	35.71%	5	
Most of the Time	50.00%	7	

Some of the Time	14.29%	2	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	

16) Both the decision-making role of the Board and the decision-support role of the Registrar are respected.

Respondents: 14

Choice	Percentage	Count	
All of the Time	71.43%	10	
Most of the Time	28.57%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	14	

17) Overall, I felt that the quality and effectiveness of Board governance was:

Respondents: 14

Choice	Percentage	Count	
Excellent	64.29%	9	
Very Good	35.71%	5	
Good	0.00%	0	
Poor	0.00%	0	
Total	100%	14	

18) I look forward to Board Meetings.



Respondents: 14

Choice	Percentage	Count	
Strongly agree	57.14%	8	
Agree	42.86%	6	

Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	14	

19) I felt that my role as a Board Member was valuable.

Respondents: 14

Choice	Percentage	Count	
Strongly agree	78.57%	11	
Agree	21.43%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	14	

20) What would have made Board work more valuable to you?

Respondents: 14

20) What would have made Board work more valuable to you?

1 Happy that in-person meeting have started again.

Keeping to the allotted time on the schedule. Redirecting and keeping discussions from going out of topic. Smaller board size with more diversity to accommodate unique perspectives and quicker resolution.

2 I am enjoying the Board immensely. My only issue was that some of the meetings got a little out of control, and a couple of people were given too much rein. As a result, we were unable to complete items on the agenda.

3 Elimination of the Executive Committee. Discuss all matters related to the management of the college in the presence of the entire board.

4 Greater knowledge (of all directors) regarding the basics of meeting protocols/conduct. (minimum basics rules of order e.g, of making motions, seconding, discussion order, number of times speaking etc, to allow for efficient use of time, and exclusion of questions/discussions not relevant to an issue.

5 -

- All the members should be compensated equally for equal work, Financial, disparity among
- 7 public members and professional members make the public members feel as second class / less valuable members.
 - 8 Live meetings so relationships could form so more team cohesiveness
 - 9 2 day meetings so not rushed
 - 10 I can't think of anything to suggest.
 - 11 Collaboration with other health professional boards directly and not through the registrar
 - 12 Less focus on non-College items
 - 13 It is obvious at the meetings that some board members do not read the materials in advance which slows progress and holds up meetings.
 - 14 The remuneration gap between public and elected members creates a second rated position for public members.

2023 Annual Audit Committee Performance Evaluation

3 Completed 4 Members

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count	
Yes	33.33%	1	
No	66.67%	2	
Total	100%	3	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.


Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	1	
Strongly disagree	0.00%	0	
Total	100%	1	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.




Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	0.00%	0	

Strongly disagree	100.00%	1	
Total	100%	1	


4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	33.33%	1	
Total	100%	3	



5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	100.00%	3	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	3	

6) The meeting agenda was clear about the purpose of committee meetings.



Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	33.33%	1	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	3	
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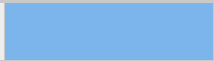

7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	33.33%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	



8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	33.33%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	33.33%	1	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	33.33%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	

Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

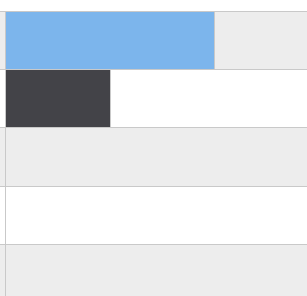
Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

15) I am satisfied with the support received from Staff to accomplish committee work.

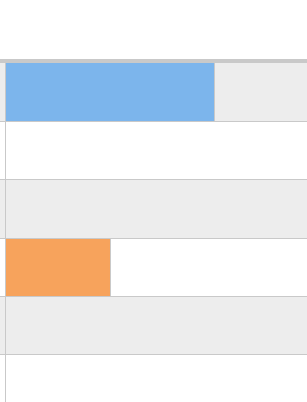
Respondents: 3

Choice	Percentage	Count	
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Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

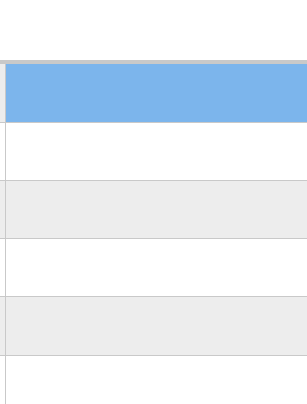
16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	33.33%	1	
NA	0.00%	0	
Total	100%	3	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

18) I felt that my contributions were respected.

Respondents: 3

Choice	Percentage	Count	
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All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	33.33%	1	
Total	100%	3	

21) What was accomplished that was most valuable to you and why?

Respondents: 3

Respondent 21) What was accomplished that was most valuable to you and why?

1	6	Efficiency ruled
2	8	Talking to auditors
3	10	Budget reviews

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	6	nothing identified
2	8	Preparation
3	10	Remuneration gaps for public members

23) Other Comments

Respondents: 0

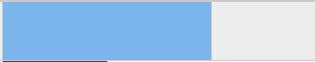
#	23) Other Comments
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2023 Annual Executive Committee Performance Evaluation

3 Completed 4 Members

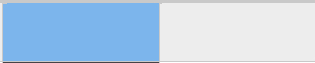
1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count	
Yes	66.67%	2	
No	33.33%	1	
Total	100%	3	

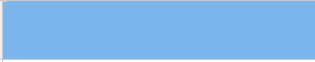
2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.


Respondents: 1

Choice	Percentage	Count	
Strongly agree	100.00%	1	
Agree	0.00%	0	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	1	

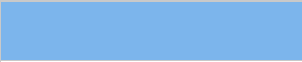
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

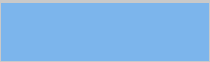

5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	100.00%	3	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	3	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	3	
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7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

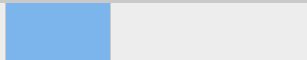
Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

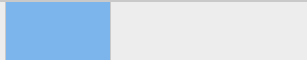
10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	


11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	

Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

14) The follow-up actions were clearly identified and assigned to committee members or staff.


Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

15) I am satisfied with the support received from Staff to accomplish committee work.



Respondents: 3

Choice	Percentage	Count	
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Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	


16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

17) I was respectfully encouraged to participate in discussions and to state my opinions.


Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

18) I felt that my contributions were respected.


Respondents: 3

Choice	Percentage	Count	
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All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	


19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

21) What was accomplished that was most valuable to you and why?

Respondents: 3

Respondent 21) What was accomplished that was most valuable to you and why?

1	5	The opportunity expresses my viewpoint based on my experience as member of the minority.
2	10	New accreditation provider
3	11	nothing to add here

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	5	The principle of equal pay for equal work should be respected. The public members should not be paid less than the professional members.
2	10	Nothing
3	11	nothing to add here

23) Other Comments

Respondents: 1

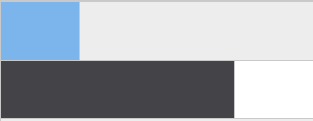
#	Respondent	23) Other Comments
1	5	The minutes should be more detailed and different views expressed should be recorded not only the vote count and decisions made. There should be more focus on diverse viewpoints discussed in the meetings and less on consensus.

2023 Annual Governance Committee Performance Evaluation

4 Completed 6 Members


1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 4

Choice	Percentage	Count	
Yes	25.00%	1	
No	75.00%	3	
Total	100%	4	


2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	100.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	1	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.



Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	100.00%	1	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	1	


4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	


5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 4

Choice	Percentage	Count	
Yes	100.00%	4	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	4	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	4	
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7) Decision issues were clearly identified on the agenda.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

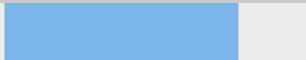
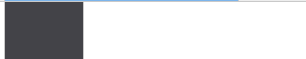
Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	


10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	


11) Committee members worked at achieving consensus in their decision-making.



Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

12) From my perspective, decisions made by the committee were based on information rather than opinion.


Respondents: 4

Choice	Percentage	Count	
All of the Time	50.00%	2	

Most of the Time	25.00%	1	
Some of the Time	25.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	


13) Decisions made by the committee favoured the interest of the public.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

14) The follow-up actions were clearly identified and assigned to committee members or staff.


Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

15) I am satisfied with the support received from Staff to accomplish committee work.


Respondents: 4

Choice	Percentage	Count	
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Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	



16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

18) I felt that my contributions were respected.

Respondents: 4

Choice	Percentage	Count	
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All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

19) I listened to and considered the input of others.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

20) I found committee work worthwhile.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

21) What was accomplished that was most valuable to you and why?

Respondents: 4

Respondent 21) What was accomplished that was most valuable to you and why?

1	4	Update to the Governance structure
2	5	We have successfully achieved good governance in the committees' activities.
3	8	making good progress with governance modernization
4	9	getting the College ready for a new governance structure in alignment with anticipated changes

22) What would have made this work more valuable to you?

Respondents: 4

#	Respondent	22) What would have made this work more valuable to you?
1	4	The opportunity to contribute to the updated Governance structure
2	5	Make sure that the public voice is heard.
3	8	no comment
4	9	can't think of anything

23) Other Comments

Respondents: 2

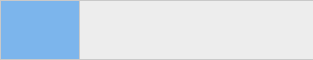
#	Respondent	23) Other Comments
1	4	Very well organized and run committee that made participation a joy
2	5	N/A

2023 Annual ICRC Performance Evaluation

8 Completed 10 Members


1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 8

Choice	Percentage	Count	
Yes	25.00%	2	
No	75.00%	6	
Total	100%	8	

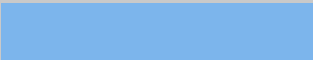
2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	



3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	


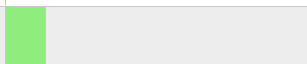
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	87.50%	7	
Agree	12.50%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	


5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 8

Choice	Percentage	Count	
Yes	87.50%	7	
No	0.00%	0	
I don't know	12.50%	1	
Total	100%	8	



6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

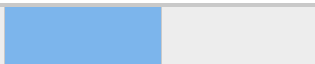

7) Decision issues were clearly identified on the agenda.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	



8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

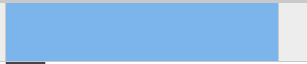

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	8	
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10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	



11) Committee members worked at achieving consensus in their decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	75.00%	6	
Most of the Time	25.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 8

Choice	Percentage	Count	
All of the Time	62.50%	5	
Most of the Time	37.50%	3	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 8

Choice	Percentage	Count	
All of the Time	75.00%	6	
Most of the Time	25.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

15) I am satisfied with the support received from Staff to accomplish committee work.

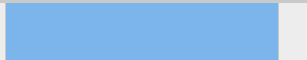
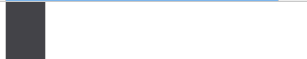
Respondents: 8

Choice	Percentage	Count	
Strongly agree	100.00%	8	
Agree	0.00%	0	

Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	



16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	


17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

18) I felt that my contributions were respected.


Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	

Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

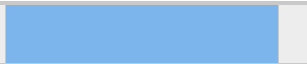
19) I listened to and considered the input of others.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

20) I found committee work worthwhile.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	87.50%	7	
Agree	12.50%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

21) What was accomplished that was most valuable to you and why?

Respondents: 8

- | | | |
|---|------------|--|
| # | Respondent | 21) What was accomplished that was most valuable to you and why? |
| 1 | 3 | The collective deliberation in a small group setting to achieve consensus, where we were all heard and worked with the public and member development in mind was fulfilling. |

2	4	As a new member, I was playing catch up; however, I enjoyed the depth and scope of the issues and the intention to be very clear in our roles to protect the public.
3	5	the opportunity to express my viewpoints.
4	6	Decisions completed
5	9	Explaining the role/limitations of a dietitian in long-term care to the public members. I felt that working in long-term care is very unique compared with other workplaces and the public members may not be familiar with the responsibilities and challenges they face. The public members were appreciative of the information and had a better understanding of the RD's role when making decisions regarding the information in the file.
6	10	New risk template and navigating challenging complaints
7	12	This committee is such an incredible learning opportunity for me. It take a great deal of time to prepare for meetings but it is such important and valuable work. I very much enjoy being a part of this committee. j
8	13	effective processing of cases and the thoughtful decision-making process with the panel - I can tell that all members have carefully considered the implications of the decisions and how to ensure the public is protected

22) What would have made this work more valuable to you?

Respondents: 8

#	Respondent	22) What would have made this work more valuable to you?
1	3	Fewer cases per session to go more in depth.
2	4	I value the role as it is.
3	5	none
4	6	Meetings with both panels together
5	9	I can't think of anything at the moment. I find the work of the ICRC very interesting and important. I find I learn something new with every file we discuss.
6	10	I still think the risk assessment tool needs tweaking to be more practical. There are also items on the tool that are not applicable to the practice of dietitians
7	12	It is already very valuable.
8	13	can't think of anything

23) Other Comments

Respondents: 4

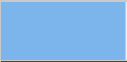

#	Respondent	23) Other Comments
1	3	Having Sarah as a wealth of knowledge, especially in complicated cases was very helpful.
2	4	Simply that the chair take control of the meetings when getting side tracked. Aside from that, I look forward to getting more comfortable working on the Board.
3	5	none
4	12	Sarah is incredible!

2023 Annual Professional Practice Performance Evaluation

5 Completed 7 Members

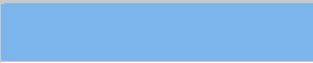
1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 5

Choice	Percentage	Count	
Yes	40.00%	2	
No	60.00%	3	
Total	100%	5	

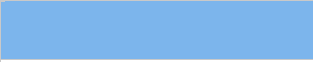
2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	100.00%	2	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	100.00%	2	
Agree	0.00%	0	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	2	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 5

Choice	Percentage	Count	
Yes	100.00%	5	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	5	

6) The meeting agenda was clear about the purpose of committee meetings.


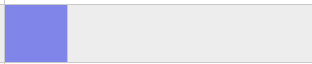
Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	5	
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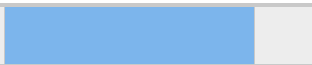

7) Decision issues were clearly identified on the agenda.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	20.00%	1	
Total	100%	5	


8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

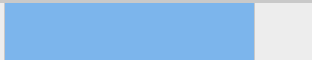
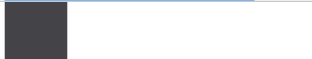
Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	


10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	


11) Committee members worked at achieving consensus in their decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	

Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	20.00%	1	
Total	100%	5	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 5

Choice	Percentage	Count	
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Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

18) I felt that my contributions were respected.

Respondents: 5

Choice	Percentage	Count	
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All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

19) I listened to and considered the input of others.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

20) I found committee work worthwhile.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

21) What was accomplished that was most valuable to you and why?

Respondents: 5

Respondent 21) What was accomplished that was most valuable to you and why?

1	4	New risk rankings for PPA
2	7	Social media policy update
3	9	-
4	10	Having being selected to complete the PPA process in the past as a working RD, it was valuable to contribute in the re-development of the PPA, so that RDs are evaluated effectively.
5	12	social media work

22) What would have made this work more valuable to you?

Respondents: 5

#	Respondent	22) What would have made this work more valuable to you?
1	4	When the PPA comes into place!
2	7	Not sure other than perhaps another policy update to work through
3	9	-
4	10	Nothing that I can think of at this time.
5	12	no comment

23) Other Comments

Respondents: 3

#	Respondent	23) Other Comments
1	7	Committee very well supported by staff and committee members contributed consistently at all meetings
2	9	-
3	10	I appreciate being a part of the committee this year, as I got to experience and contribute to the behind the scenes work of the College.

2023 Annual Quality Assurance Performance Evaluation

6 Completed 7 Members

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 6

Choice	Percentage	Count	
Yes	33.33%	2	
No	66.67%	4	
Total	100%	6	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

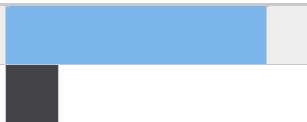
Respondents: 4

Choice	Percentage	Count	
Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	4	


4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	83.33%	5	
Agree	16.67%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

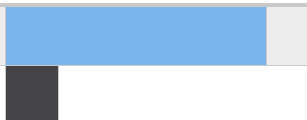
5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 6

Choice	Percentage	Count	
Yes	100.00%	6	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	6	

6) The meeting agenda was clear about the purpose of committee meetings.


Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	6	
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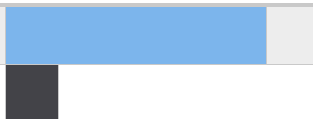
7) Decision issues were clearly identified on the agenda.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	33.33%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

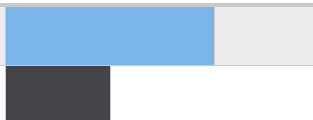
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

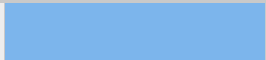

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	33.33%	2	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

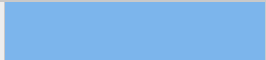

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	


11) Committee members worked at achieving consensus in their decision-making.


Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

12) From my perspective, decisions made by the committee were based on information rather than opinion.



Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	

Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	



13) Decisions made by the committee favoured the interest of the public.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 6

Choice	Percentage	Count	
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Strongly agree	100.00%	6	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

17) I was respectfully encouraged to participate in discussions and to state my opinions.


Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

18) I felt that my contributions were respected.


Respondents: 6

Choice	Percentage	Count	
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All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	



19) I listened to and considered the input of others.

Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

20) I found committee work worthwhile.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	66.67%	4	
Agree	33.33%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

21) What was accomplished that was most valuable to you and why?

Respondents: 6

Respondent 21) What was accomplished that was most valuable to you and why?

1	4	Going through all the SDL tools
2	7	Kash was extremely efficient and provided great direction and counsel as the chair. Made the process and end result valuable.
3	10	We have improved the quality of performances of registered dietitians in Ontario by implementing various quality improvement programs and training.
4	13	This was my first year working on this committee, and I felt that I gained a strong knowledge and working understanding on the purpose and operations of the quality assurance committee and how the work fit in to the College's goals and mandates. I felt that our panel worked very well together, we had enough time to prepare for the panel reviews, we had fun evaluating the learning diaries, and Karine did a fantastic job leading our panel.
5	14	taks completed
6	18	-

22) What would have made this work more valuable to you?

Respondents: 6

#	Respondent	22) What would have made this work more valuable to you?
1	4	Already valuable.
2	7	Keeping to the allotted time where possible. More public member representation.
3	10	It has improved the quality of public service by the RDs.
4	13	It would be great if all the individuals who had to resubmit their learning diaries followed our recommendations in their resubmissions. Wondering if an evaluation of the resubmission process/accountability for resubmissions could be looked into, as some individuals simply resubmitted carbon copies of their unaccepted diaries.
5	14	nothing identified
6	18	-

23) Other Comments

Respondents: 5

#	Respondent	23) Other Comments
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- 1 7 Would be easier to spread meetings across the year rather than having many together in the first few months of the year.
- 2 10 N/A
- 3 13 Thank you to the CDO team for a great Board year! I also found that having majority of the panel meetings be virtual allowed me to fit the meetings seamlessly into my work day.
- 4 14 We cannot know how well prepared others are.
- 5 18 -

2023 Annual Registration Committee Performance Evaluation

5 Completed 7 Members


1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 5

Choice	Percentage	Count	
Yes	60.00%	3	
No	40.00%	2	
Total	100%	5	


2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	3	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to the Board, either through the Management Report or staff presentations.

Respondents: 5

Choice	Percentage	Count	
Yes	100.00%	5	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	5	

6) The meeting agenda was clear about the purpose of committee meetings.


Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	

Total	100%	5	
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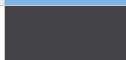
7) Decision issues were clearly identified on the agenda.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	


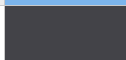
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

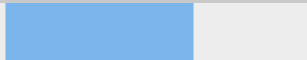
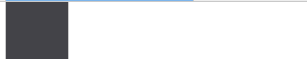
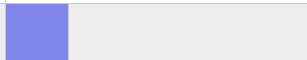
Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	

None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

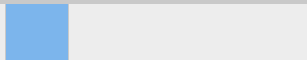

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	20.00%	1	
Total	100%	5	


11) Committee members worked at achieving consensus in their decision-making.


Respondents: 5

Choice	Percentage	Count	
All of the Time	20.00%	1	
Most of the Time	80.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

12) From my perspective, decisions made by the committee were based on information rather than opinion.



Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	

Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	


13) Decisions made by the committee favoured the interest of the public.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

14) The follow-up actions were clearly identified and assigned to committee members or staff.


Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

15) I am satisfied with the support received from Staff to accomplish committee work.



Respondents: 5

Choice	Percentage	Count	
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Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	


16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

18) I felt that my contributions were respected.

Respondents: 5

Choice	Percentage	Count	
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All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

19) I listened to and considered the input of others.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

20) I found committee work worthwhile.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

21) What was accomplished that was most valuable to you and why?

Respondents: 5

Respondent 21) What was accomplished that was most valuable to you and why?

1	4	Finding the balance between public protection and fairness for members
2	5	Briefing notes could not be better. All Committees should follow this kind of information packaging, relevant, clear, concise, enhancing efficiency of Committee work.
3	7	The opportunity to express my viewpoints based on my experience as a member of minority.
4	9	The discussions that happen at the meetings are most valuable to me. I appreciate that everyone comes to the table prepared and ready to discuss.
5	12	Review of Emergency Class Registration because it will help address integration issues for people who have licenses from other provinces and address gaps in staffing needs especially in periods where there are emergency like the one caused by COVID.

22) What would have made this work more valuable to you?

Respondents: 5

#	Respondent	22) What would have made this work more valuable to you?
1	4	Not sure
2	5	keeping questions/discussions relevant to issues presented.
3	7	n/a
4	9	I can not think of anything.
5	12	Remuneration gap for public members resolution

23) Other Comments



Respondents: 2

#	Respondent	23) Other Comments
1	7	The discussion should be less structured and more open. The professional member should be less defensive and more open to diverse views.
2	9	Deborah is always so well organized and prepared.

2022 Annual Council Performance Evaluation Results

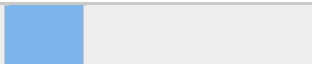

1) This is my first year on Council (If yes, answer Question 2 and 3, if no, proceed to question #4).

Respondents: 8

Choice	Percentage	Count	
Yes	37.50%	3	
No	62.50%	5	
Total	100%	8	

2) After the orientation process, I felt prepared to exercise my role on Council.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	25.00%	1	
Agree	75.00%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

3) What I found most useful to help me understand my role on Council was:

Respondents: 4

- # 3) What I found most useful to help me understand my role on Council was:
- 1 reviews
- 2 Governance manual and other documents on Box
- 3 Taking the orientation and then touching base with other members regarding various questions or aspects.

- 4 The governance manual and talking with other members during/after the first few meetings

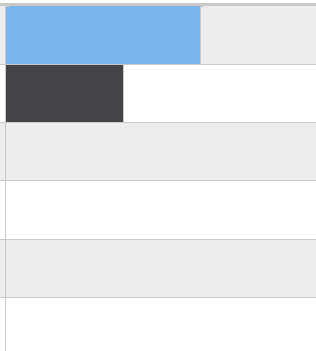
4) At Council meetings, the strategic oversight and public protection mandate of Council were clearly articulated in:

Respondents: 8

	All of the time	Most of the time	Some of the time	None of the time	NA	Total
Structure of the meeting agenda	62.50% (5)	37.50% (3)	0.00% (0)	0.00% (0)	0.00% (0)	100% (8)
Council discussion	87.50% (7)	12.50% (1)	0.00% (0)	0.00% (0)	0.00% (0)	100% (8)
Council decision making	87.50% (7)	12.50% (1)	0.00% (0)	0.00% (0)	0.00% (0)	100% (8)

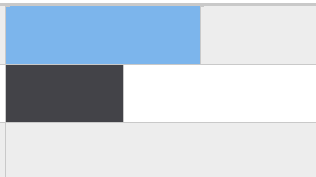
5) Council has the information needed to oversee how the College is meeting its goals and objectives.

Respondents: 8

Choice	Percentage	Count	
All of the time	62.50%	5	
Most of the Time	37.50%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

6) Council has the right information needed to monitor the finances of the College.



Respondents: 8

Choice	Percentage	Count	
Strongly agree	62.50%	5	
Agree	37.50%	3	
Disagree	0.00%	0	

Strongly disagree	0.00%	0	
Total	100%	8	


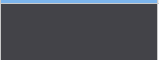
7) Questions and discussions at Council meetings added value beyond the information provided in writing to support effective decision making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	


8) Council discussion focused on policy and outcomes rather than management and administrative processes.


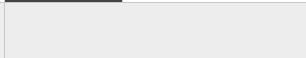

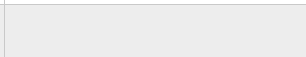
Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

9) From my perspective, decisions were based on evidence and information rather than opinion.


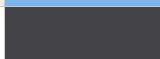

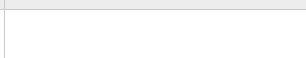
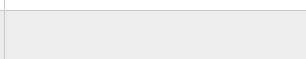
Respondents: 8

Choice	Percentage	Count	
All of the Time	62.50%	5	

Most of the Time	37.50%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	



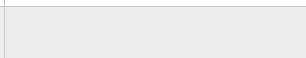
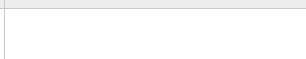
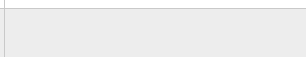
10) Reports and documents were sufficient to support informed discussions and effective decision-making.

Respondents: 8

Choice	Percentage	Count	
All of the Time	50.00%	4	
Most of the Time	50.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	


11) Discussions and decision-making favoured the public interest.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

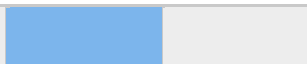
12) I am encouraged to express my views fully in all matters discussed at Council.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	12.50%	1	
Total	100%	8	


13) There is an atmosphere of respect and trust among Council members, staff and the Registrar & ED.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	50.00%	4	
Agree	50.00%	4	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

14) I trust the information I received at and for Council meetings.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

15) Council meetings are chaired effectively to build consensus among Council members and manage conflict constructively.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

16) Both the decision-making role of Council and the decision-support role of the Registrar & ED are respected.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	8	

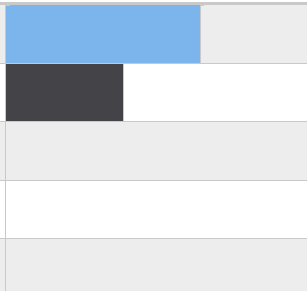
17) Overall, I felt that the quality and effectiveness of Council governance was:

Respondents: 8

Choice	Percentage	Count	
Excellent	62.50%	5	
Very Good	37.50%	3	
Good	0.00%	0	
Poor	0.00%	0	
Total	100%	8	

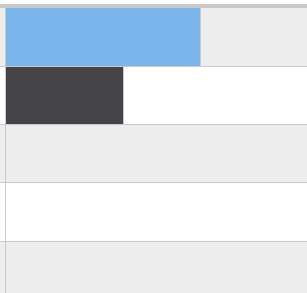
18) I look forward to Council Meetings.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	62.50%	5	
Agree	37.50%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

19) I felt that my role as a Council Member was valuable.

Respondents: 8

Choice	Percentage	Count	
Strongly agree	62.50%	5	
Agree	37.50%	3	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	8	

20) What would have made Council work more valuable to you?

Respondents: 8

20) What would have made Council work more valuable to you?

1 -

2 Risk lens on all work done

3 I see nothing that is needed.

4 Less disruptions/interruptions from councillors

5 I can't think of anything.

6 more information on investment. More opportunities to collaborate directly with other college councils. It was beneficial to have the EDI support group with presidents from other colleges present.

7 At this point, I feel comfortable with the preparation and information provided. I strongly believe that being able to meet other council members in person will make council work

a bit more valuable. Knowing the members only virtually is not as supportive to my work as council member.

8 not sure

2022 Annual Audit Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 2

Choice	Percentage	Count	
Yes	100.00%	2	
No	0.00%	0	
Total	100%	2	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	2	
Strongly disagree	0.00%	0	
Total	100%	2	



3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	2	
Strongly disagree	0.00%	0	
Total	100%	2	

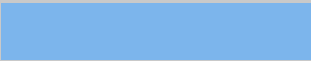
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

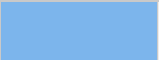

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 2

Choice	Percentage	Count	
Yes	100.00%	2	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	2	



6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	


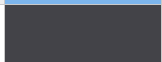
7) Decision issues were clearly identified on the agenda.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	



8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

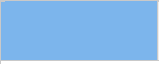

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

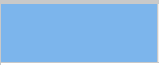

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

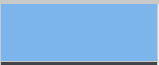

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	


12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

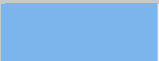

13) Decisions made by the committee favoured the interest of the public.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	



14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	50.00%	1	
Total	100%	2	

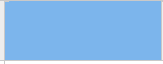

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	



16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

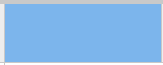

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 2

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	50.00%	1	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	


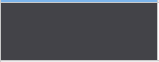
18) I felt that my contributions were respected.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	0.00%	0	
Some of the Time	50.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	



19) I listened to and considered the input of others.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

20) I found committee work worthwhile.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	50.00%	1	
Disagree	50.00%	1	
Strongly disagree	0.00%	0	
Total	100%	2	

21) What was accomplished that was most valuable to you and why?

Respondents: 2

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	5	Audit
2	6	Review of the Audit Report

22) What would have made this work more valuable to you?

Respondents: 2

#	Respondent	22) What would have made this work more valuable to you?
1	5	Orientation to issues
2	6	orientation

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	6	all comments based on 1 meeting only

2022 Annual Executive Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 2

Choice	Percentage	Count	
Yes	0.00%	0	
No	100.00%	2	
Total	100%	2	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	
Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	



3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	
Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

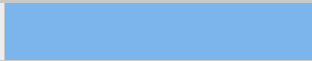
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	


5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 2

Choice	Percentage	Count	
Yes	100.00%	2	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	2	


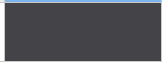
6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	100.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	


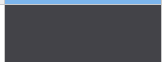
7) Decision issues were clearly identified on the agenda.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	


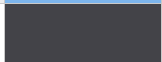
8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 2

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	100.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 2

Choice	Percentage	Count	
All of the Time	50.00%	1	
Most of the Time	50.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

18) I felt that my contributions were respected.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

19) I listened to and considered the input of others.

Respondents: 2

Choice	Percentage	Count	
All of the Time	100.00%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	2	

20) I found committee work worthwhile.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	50.00%	1	
Agree	50.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

21) What was accomplished that was most valuable to you and why?

Respondents: 2

- | # | Respondent | 21) What was accomplished that was most valuable to you and why? |
|---|------------|---|
| 1 | 3 | New governance discussions |
| 2 | 4 | thorough review of the budget, decisions around the governance committee and finding a home for EDI owrk. In addition, we had a vry constructive discussion around the proposed governance changes. |

22) What would have made this work more valuable to you?

Respondents: 2

#	Respondent	22) What would have made this work more valuable to you?
1	3	Input to agenda
2	4	nothing

23) Other Comments


Respondents: 0

23) Other Comments

2022 Annual Governance Committee Performance Evaluation Results



1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count	
Yes	100.00%	3	
No	0.00%	0	
Total	100%	3	



2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

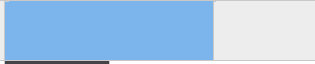

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	



4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

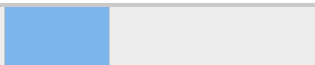

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	66.67%	2	
No	0.00%	0	
I don't know	33.33%	1	
Total	100%	3	


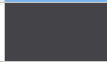

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	


7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	33.33%	1	
Some of the Time	33.33%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	



8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	100.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

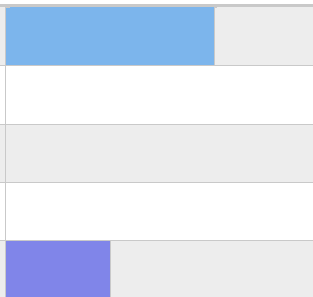
12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	33.33%	1	
Most of the Time	66.67%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	


13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	33.33%	1	
Total	100%	3	


14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	


15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	66.67%	2	
Agree	33.33%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

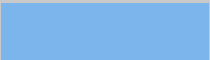
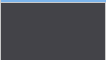
16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	


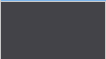
17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

18) I felt that my contributions were respected.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

21) What was accomplished that was most valuable to you and why?

Respondents: 3

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	3	Orientation and education
2	4	To start drafting a new governance model with anticipated legislative changes coming up
3	6	Working on the governance modernization

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	3	Just getting started so will see
2	4	More time for discussion as a committee, especially with the Apr 11th meeting
3	6	still in progress

23) Other Comments

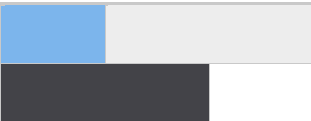
Respondents: 0

23) Other Comments

2022 Annual Inquiries, Complaints and Reports Committee Performance Evaluation Results


1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 6

Choice	Percentage	Count	
Yes	33.33%	2	
No	66.67%	4	
Total	100%	6	


2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	



3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	33.33%	1	
Agree	66.67%	2	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	




4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	83.33%	5	
Agree	16.67%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	



5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 6

Choice	Percentage	Count	
Yes	66.67%	4	
No	16.67%	1	
I don't know	16.67%	1	
Total	100%	6	



6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	16.67%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

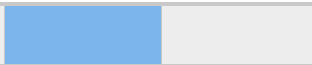

7) Decision issues were clearly identified on the agenda.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

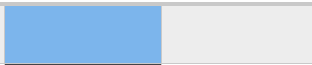

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 6

Choice	Percentage	Count	
All of the Time	50.00%	3	
Most of the Time	50.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	50.00%	3	
Most of the Time	50.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	33.33%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	


12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 6

Choice	Percentage	Count	
All of the Time	66.67%	4	
Most of the Time	33.33%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	



13) Decisions made by the committee favoured the interest of the public.

Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	


14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	


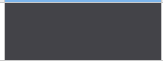
15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	100.00%	6	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

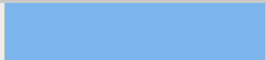

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 6

Choice	Percentage	Count	
All of the Time	50.00%	3	
Most of the Time	50.00%	3	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	



17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	16.67%	1	
Total	100%	6	

18) I felt that my contributions were respected.

Respondents: 6

Choice	Percentage	Count	
All of the Time	83.33%	5	
Most of the Time	16.67%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

19) I listened to and considered the input of others.

Respondents: 6

Choice	Percentage	Count	
All of the Time	100.00%	6	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	6	

20) I found committee work worthwhile.

Respondents: 6

Choice	Percentage	Count	
Strongly agree	100.00%	6	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	6	

21) What was accomplished that was most valuable to you and why?

Respondents: 6

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	Decisions made
2	4	We were able to close/resolve several very complex/complicated files. The discussions that the committee has about each and every case is beyond valuable. When reviewing all of the information and working through the decision sheet - it is so helpful to share thoughts, facts and others perspective are.
3	6	
4	7	I am very proud of Panel B. Through all the years I have spent on this committee, this has been the most prepared panel which facilitates the

		discussion. I feel most accomplished about one of the cases we reviewed that was very complex. I like the new risk assessment tool
5	8	public protection through processing the case in a timely way.
6	10	Completing decisions in a timely manner so the public feels they were adequately served

22) What would have made this work more valuable to you?

Respondents: 6

#	Respondent	22) What would have made this work more valuable to you?
1	2	Earlier orientation, more full cte meetings
2	4	I value the all committee member's opinions and perspectives, however the workings of other professions do not necessarily apply to the files we are working on. It's important to hear everyone's input, but we shouldn't be going down "rabbit holes" that have no impact on the issue(s) we're discussing. Time management during meetings is important and going "off topic" can only confuse the situation.
3	6	To meet in person as a group at some point to connect even more.
4	7	nothing. Sarah does a phenomenal job at providing supporting documents to allow us to make the best decisions with public protection at the forefront.
5	8	To have a sense of benchmarking and knowing if my panel is "doing well" in our work. (ie. are ICRCs evaluated based on case processing time? thoroughness of decision making? Unsure what benchmarks exists).
6	10	N/A

23) Other Comments

Respondents: 1

#	Respondent	23) Other Comments
1	4	We deal with complaints of RDs from a variety of practice areas and committee members should realize that not all practice areas are alike. There are some very unique areas that, if a committee member is not familiar with, may be difficult for some that do not work in that area to understand, putting the member at an unfair disadvantage. Best practice for one area may not be transferable to another area.

2022 Annual Professional Practice Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 3

Choice	Percentage	Count
Yes	33.33%	1
No	66.67%	2
Total	100%	3

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 1

Choice	Percentage	Count
Strongly agree	0.00%	0
Agree	100.00%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	1

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 1

Choice	Percentage	Count
Strongly agree	0.00%	0
Agree	100.00%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	1

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 3

Choice	Percentage	Count	
Yes	100.00%	3	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	3	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

7) Decision issues were clearly identified on the agenda.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	66.67%	2	
Most of the Time	33.33%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

18) I felt that my contributions were respected.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

19) I listened to and considered the input of others.

Respondents: 3

Choice	Percentage	Count	
All of the Time	100.00%	3	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	3	

20) I found committee work worthwhile.

Respondents: 3

Choice	Percentage	Count	
Strongly agree	100.00%	3	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	3	

21) What was accomplished that was most valuable to you and why?

Respondents: 3

- | # | Respondent | 21) What was accomplished that was most valuable to you and why? |
|---|------------|--|
| 1 | 2 | Insulin guidance document |
| 2 | 3 | The policy decisions that were made. |
| 3 | 5 | Insulin adjusting medical directive - Good for public and RD's |

22) What would have made this work more valuable to you?

Respondents: 3

#	Respondent	22) What would have made this work more valuable to you?
1	2	Reception or uptake from end-users of insulin document once published
2	3	The preparation, discussion and learning were all valuable to me. I have nothing further to suggest.
3	5	nothing

23) Other Comments


Respondents: 1

#	Respondent	23) Other Comments
1	3	A very enjoyable and value added experience

2022 Annual Quality Assurance Committee Performance Evaluation Results


1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 4

Choice	Percentage	Count	
Yes	25.00%	1	
No	75.00%	3	
Total	100%	4	


2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	100.00%	2	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 2

Choice	Percentage	Count	
Strongly agree	100.00%	2	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	2	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 4

Choice	Percentage	Count	
Yes	100.00%	4	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	4	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

7) Decision issues were clearly identified on the agenda.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 4

Choice	Percentage	Count	
All of the Time	50.00%	2	
Most of the Time	50.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

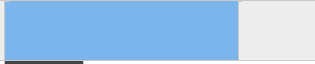

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

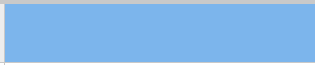
10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

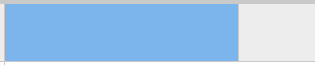

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	


12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	0.00%	0	
Some of the Time	25.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

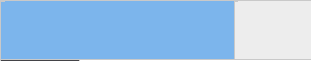

13) Decisions made by the committee favoured the interest of the public.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

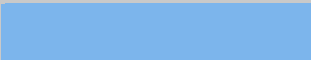
14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 4

Choice	Percentage	Count	
All of the Time	75.00%	3	
Most of the Time	25.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	100.00%	4	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

18) I felt that my contributions were respected.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

19) I listened to and considered the input of others.

Respondents: 4

Choice	Percentage	Count	
All of the Time	100.00%	4	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	4	

20) I found committee work worthwhile.

Respondents: 4

Choice	Percentage	Count	
Strongly agree	75.00%	3	
Agree	25.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	4	

21) What was accomplished that was most valuable to you and why?

Respondents: 4

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	4	-
2	6	Policy updates
3	7	Full discussion and consideration of different points of view in assessing SDL Tools.
4	9	Reviewing policies such as the insulin management policy

22) What would have made this work more valuable to you?

Respondents: 4

#	Respondent	22) What would have made this work more valuable to you?
1	4	-
2	6	Will see what review of program brings out
3	7	I is fine the way it is.
4	9	Being in person. I know this will come eventually.

23) Other Comments

Respondents: 0

23) Other Comments

2022 Annual Registrar Performance & Compensation Review Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 1

Choice	Percentage	Count	
Yes	0.00%	0	
No	100.00%	1	
Total	100%	1	

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	
Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 0

Choice	Percentage	Count	
Strongly agree	100%	0	
Agree	100%	0	

Disagree	100%	0	
Strongly disagree	100%	0	
Total	100%	0	

4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	0.00%	0	
Disagree	100.00%	1	
Strongly disagree	0.00%	0	
Total	100%	1	

5) The Committee's significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 1

Choice	Percentage	Count	
Yes	0.00%	0	
No	0.00%	0	
I don't know	100.00%	1	
Total	100%	1	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	

NA	0.00%	0	
Total	100%	1	

7) Decision issues were clearly identified on the agenda.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	

Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

11) Committee members worked at achieving consensus in their decision-making.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	100.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	1	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 1

Choice	Percentage	Count	
All of the Time	0.00%	0	
Most of the Time	0.00%	0	
Some of the Time	100.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

18) I felt that my contributions were respected.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

19) I listened to and considered the input of others.

Respondents: 1

Choice	Percentage	Count	
All of the Time	100.00%	1	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	1	

20) I found committee work worthwhile.

Respondents: 1

Choice	Percentage	Count	
Strongly agree	0.00%	0	
Agree	100.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	1	

21) What was accomplished that was most valuable to you and why?

Respondents: 1

#	Respondent	21) What was accomplished that was most valuable to you and why?
1	2	n/a

22) What would have made this work more valuable to you?

Respondents: 1

#	Respondent	22) What would have made this work more valuable to you?
1	2	n/a

23) Other Comments

Respondents: 0

#	23) Other Comments
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2022 Annual Registration Committee Performance Evaluation Results

1) This was the first year I worked on this committee. If yes to 1, answer questions 2 and 3, if no, proceed to question #4.

Respondents: 5

Choice	Percentage	Count
Yes	40.00%	2
No	60.00%	3
Total	100%	5

2) After the orientation, I understood the role of the committee with regard to the public protection mandate of the College.

Respondents: 3

Choice	Percentage	Count
Strongly agree	100.00%	3
Agree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3


3) The orientation to this committee clearly explained my role and what would be expected of me as a committee member.

Respondents: 3

Choice	Percentage	Count
Strongly agree	33.33%	1
Agree	66.67%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Total	100%	3

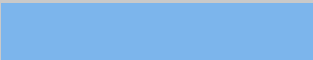
4) I clearly understood the purpose of the committee work and how the work was linked to the College's goals, objectives and legal obligations.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	



5) The Committee’s significant policy decisions and activities, as appropriate, were reported to Council, either through the Management Report or staff presentations.

Respondents: 5

Choice	Percentage	Count	
Yes	100.00%	5	
No	0.00%	0	
I don't know	0.00%	0	
Total	100%	5	

6) The meeting agenda was clear about the purpose of committee meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

7) Decision issues were clearly identified on the agenda.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

8) The length of time scheduled for meetings was appropriate to the amount of work that had to be done.

Respondents: 5

Choice	Percentage	Count	
All of the Time	20.00%	1	
Most of the Time	80.00%	4	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	




9) The documentation available at meetings was sufficient to support effective discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	40.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	


10) The Chair and Committee members were prepared for meetings by having read the required material before meetings.

Respondents: 5

Choice	Percentage	Count	
All of the Time	60.00%	3	
Most of the Time	20.00%	1	
Some of the Time	20.00%	1	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	



11) Committee members worked at achieving consensus in their decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

12) From my perspective, decisions made by the committee were based on information rather than opinion.

Respondents: 5

Choice	Percentage	Count	
All of the Time	80.00%	4	
Most of the Time	20.00%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

13) Decisions made by the committee favoured the interest of the public.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

14) The follow-up actions were clearly identified and assigned to committee members or staff.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

15) I am satisfied with the support received from Staff to accomplish committee work.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	100.00%	5	
Agree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

16) I was given sufficient time to be prepared to contribute to meeting discussions and decision-making.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

17) I was respectfully encouraged to participate in discussions and to state my opinions.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	


18) I felt that my contributions were respected.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	



19) I listened to and considered the input of others.

Respondents: 5

Choice	Percentage	Count	
All of the Time	100.00%	5	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
NA	0.00%	0	
Total	100%	5	

20) I found committee work worthwhile.

Respondents: 5

Choice	Percentage	Count	
Strongly agree	80.00%	4	
Agree	20.00%	1	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Total	100%	5	

21) What was accomplished that was most valuable to you and why?

Respondents: 5

- | # | Respondent | 21) What was accomplished that was most valuable to you and why? |
|---|------------|---|
| 1 | 2 | Policy updates |
| 2 | 3 | Full discussions are always helpful. |
| 3 | 4 | Review of international applicants |
| 4 | 6 | Having the opportunity to observe the first panel before doing it. |
| 5 | 7 | All the work done by the committee has been significant and valuable. Objective insights /inputs from staff and committee members have added value to the committee work. |

22) What would have made this work more valuable to you?

Respondents: 5

#	Respondent	22) What would have made this work more valuable to you?
1	2	N/a
2	3	Nothing more is needed here.
3	4	Can't think of anything more
4	6	I can't think of anything - it is valuable.
5	7	NA

23) Other Comments

Respondents: 0

23) Other Comments



Board Briefing Note

Topic:	Board Needs Assessment
Purpose:	For discussion
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Governance Modernization and Enhancing Public Trust
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

To review the Board and Committee Equity, Diversity, Inclusion and Belonging (EDI-B) Needs Assessment results (assessment data included as Appendix 1) and to confirm future EDI training needs.

PUBLIC INTEREST RATIONALE

Organizational learning around EDI-B is key to driving strategy, building organizational EDI-B capacity, and affecting systemic change. Training ensures that an EDI-B lens is applied to Board and Committee decision making in the interest of the diverse public served by the CDO.

The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires that Board and Committees engage in training that has been informed by self-identified learning needs.

BACKGROUND

As part of the CDO's work on advancing Equity, Diversity, Inclusion and Belonging (EDI-B), an educational needs assessment was developed and circulated to Board and Committee

members to assess current EDI-B competencies. The results will be used to identify and design future training and to continue to embed EDI-B into the Board and Committees' work. The assessment focused on competencies within self, within team, and within the organization at large.

CONSIDERATIONS

Results and Analysis

Assessment results:

- The small sample size makes interpretation of the competencies limited
- The Board identified recognizing and managing bias as their top area of interest, followed by recognizing and addressing prejudice in the workplace and intentional inclusion as their third option.
- The most preferred mode of learning was training embedded within Board/Committee, followed by self-directed learning and instructor-led training.
- The Board identified that they could perform most competencies confidently, however, policy work and conflict management were performed more tentatively. Strengths were noted in the areas of collaboration and monitoring.

RECOMMENDATION/NEXT STEPS

- Consider bringing in external speakers and/or recorded talks on recognizing and managing bias and addressing prejudice in the workplace to complement existing training.
- Areas of potential focus for the board should include other focused competencies, specifically: (1) Policy work – “I can review policy from a critical perspective and suggest improvements to advance EDI-B” (2) Conflict – “I can engage with others and resolve conflict related to identity-based differences when it arises”; and (3) Advocacy – “I am able to take action in a constructive way when I encounter or notice prejudice or discrimination within the Board.”

ATTACHMENTS

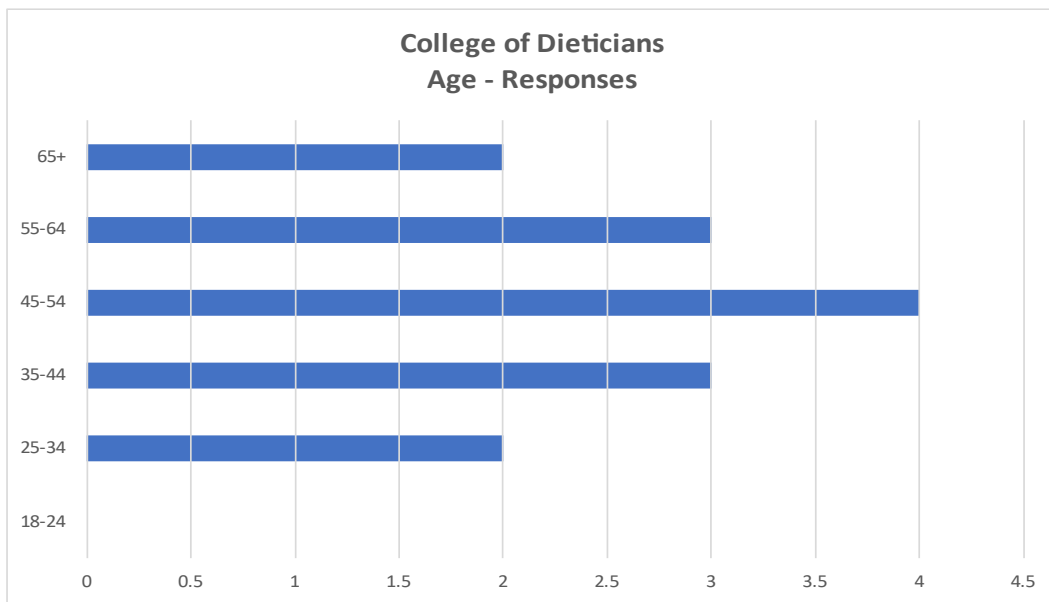
- Appendix 1: Board Needs Assessment Results

APPENDIX 1

CDO Board Needs Assessment – Raw Data May 25, 2023

Demographics

There were a total of 14 survey participants. The demographics of the board and committee participants were as follows:



Gender Data	Ethnicity Data
Female: 11 Male: 3	East Asian or Pacific Islander: 3 South Asian: 3 Middle Eastern: 2 White: 6

Board Competencies (Self)

	Extremely/ Very Important	Moderately Important	Under- stand	Perform Tentatively	Transform organization /Role Model	N/A Slightly Important
Feedback Seeking	13	1				
Bias recognition and management	12			2		
Awareness and Understanding of Others	12			2		
Adaptability	13			1		
Modeling	11			2	1	
Critical Reflection						

Board Competencies (Other)

	Extremely/ Very Important	Moderately Important	Under- stand	Perform Tentatively	Transform organization	N/A Slightly Important
Conflict	8	1	1	4		
Encouraging Others	9		1	4		
Monitoring	9		2	3		
Advocacy	8		2	4		
Collaboration	12		1	1		
Policy	7		1	6		
Training	11		1	2		

Topics

Recognizing and Managing Bias (6.71). Recognizing and Addressing Prejudice in the Workplace (5.50). Understanding Allyship and Bystander Intervention (5.00). One member suggested training on how to proactively intervene in a professional way when noticing bias driving discussion and decision making in college work.

Delivery Formats

Embedded with Board/Committee meetings (71.43%). Self-directed learning (69.23%). Instructor led (50%). Facilitated group discussion (28.57%).



Board Briefing Note

Topic:	Board Workplan and Training Calendar
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement
From:	Executive Committee

ISSUE

To review and approve the Board Workplan and Training Calendar for 2023 – 2024 term.

PUBLIC INTEREST RATIONALE

Board training and development helps improve the governance of an organization by enhancing the knowledge, skills, and abilities of Board directors. An informed Board can make better decisions, provide effective oversight, and ensure the College is achieving its public protection mandate.

By adopting an annual workplan, the Board can prioritize the activities and initiatives that are most aligned with the College's strategic plan. This helps ensure that the Board's efforts are focused on advancing the College's goals in a way that benefits the public.

BACKGROUND

Each year at its June meeting, the Board reviews the Board Workplan and Training Calendar. It should comprise key activities required to meet the College's [Strategic Plan 2020-2025](#) and the various regulatory and oversight duties performed by the Board. Training activities should be relevant and support the performance of the Board directors and should be tied to the Board and Committee learning goals and changing public expectations.

The workplan is part of the package of recommendations coming out of the Governance Committee's governance modernization review and is intended to give the Board a picture of its expected work over the coming year. It is a general outline of the proposed work, and actual Board agendas may evolve or fluctuate over the year.

The Executive Committee reviewed the proposed workplan and training calendar at its May meeting and is recommending it for the Board's approval.

RECOMMENDATION

To approve the 2023 – 2024 Board Workplan and Training Calendar.

ATTACHMENTS

- Appendix 1 – Board Workplan and Training Calendar 2023 – 2024

APPENDIX 1

JUNE BOARD WORKPLAN 2023		
Council Operations and Monitoring Reports	Policy, By-Law and Regulation	Environmental Scanning and Training
Minutes, March 2023 with Action	By-law 1: Governance Updates (post-circulation)	The Public Interest
Executive Committee Report	By-law 2: Fee Updates (post-circulation)	Facilitation Training
Review of Board Meeting and Annual Evaluations	Final Social Media Standards and Practice Guidelines for Dietitians in Ontario (post-circulation)	
Review of Board Annual Workplan and Training Calendar	Governance Committee ToR	
Management Report		
Risk Monitoring Report (Q1)		
Approval of Committee Appointments and Committee Slate		
Executive Committee Election		
Learning and Teaching Moment		

SEPTEMBER BOARD WORKPLAN 2023		
Council Operations and Monitoring Reports	Policy, By-Law and Regulation	Environmental Scanning and Training
Minutes, June 2023 with Action	Recognition of US accreditation programs policy	As needed
Executive Committee Report	Mutual recognition agreement with Dietitians Australia policy	
Review of Board Meeting Evaluations		
Management Report		
Risk Monitoring Report (Q2)		
Strategic Plan Update		
Audit of Register		
Presentation of Audit and Approval of Auditor		
Learning and Teaching Moment		

DECEMBER BOARD WORKPLAN 2023		
Council Operations and Monitoring Reports	Policy, By-Law and Regulation	Environmental Scanning and Training
Minutes, September 2023 with Action	ICRC Policy – Employer Information Sharing	EDI-B Training (based on needs assessment)
Executive Committee Report	Peer and Practice Assessment Updates (pre-circulation)	Regulatory Trends
Review of Council Meeting Evaluations	Code of Ethics Updates (Pre-circulation)	
Management Report	Governance Evaluation Framework Presentation	
Risk Monitoring Report (Q3)	Executive Committee ToR	
Learning and Teaching Moment		

MARCH BOARD WORKPLAN 2024		
Council Operations and Monitoring Reports	Policy, By-Law and Regulation	Environmental Scanning and Training
Minutes, December 2023 with Action	Peer and Practice Assessment Updates (post-circulation)	Budgeting
Executive Committee Report	Code of Ethics Updates (post circulation)	Financial & Fiduciary Duty
Review of Council Meeting Evaluations		
Management Report		
2023 – 2024 Budget and Strategic Workplan		
Risk Monitoring Report (Q4)		
CPMF Report		
Learning and Teaching Moment		



Board Briefing Note

Topic:	Proposed Board Meeting Dates – 2023-2024
Purpose:	Decision Required
Strategic Plan Relevance:	Risk-Based and Right-Touch Regulation
From:	Executive Committee

ISSUE

To consider the proposed calendar of Board meeting dates for 2023 – 2024.

PUBLIC INTEREST RATIONALE

Regular Board meetings that are open to the public allow for transparency and accountability in the governance of CDO. When the Board meets, it can effectively make governance, strategic and oversight decisions to carry out the College’s public protection mandate. Board meetings ensure that CDO is governed in a responsible manner, and that its work promotes the long-term success and sustainability.

BACKGROUND

Each year at its June meeting, the Board determines its meeting dates for the upcoming term. The Board meets quarterly, typically in June, September/October, November/December, and March. Each Board meeting is scheduled for one to two days. The board has previously determined that it would meet in-person for two-day meetings, and virtually for one-day meetings.

CONSIDERATIONS

When determining the dates for the term, the Board will consider the Board workplan, the [June 15 & 16, 2023 Meeting]

Board training calendar, holidays and other conferences typically attended by staff, the Board, and committee members.

The following are proposed dates for Board meetings in the 2023-2024 term:

- Friday, September 29, 2023 (virtual)
- Thursday, December 14 & Friday, December 15, 2023 (in-person/hybrid)
- Friday, March 22, 2024 (virtual)
- Thursday, June 20 & Friday, June 21, 2024 (in-person/hybrid)

RECOMMENDATION

To approve (or approve with amendments) the proposed Board meeting dates for the 2023 – 2024 term.



Board Briefing Note

Topic:	Amendment to the Governance Committee Terms of Reference
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Governance Modernization and Enhancing Public Trust
From:	Governance Committee

ISSUE

To approve the addition of screening applicants for Board elections to the Governance Committee Terms of Reference.

PUBLIC INTEREST RATIONALE

Good governance is the foundation for effective regulation and public trust. Emerging best practices in regulation support the adoption of a framework which outlines the knowledge, skills, experience, and attributes required for the Board to effectively serve its mandate. With this framework, Board directors will collectively possess a range of governance competencies and attributes to make evidence-informed decisions in the public interest.

BACKGROUND

At its September 2022 meeting, the Board approved in principle that the Governance Committee would be charged with the additional responsibility of conducting election nominations screening. To facilitate this change, the board agreed that the Governance Committee terms of reference would be amended once the proposed changes to the elections process in By-Law 1 are approved by the Board. The purpose of expanding the role of the Governance Committee is to operationalize the competency and attribute framework.

At its May 3, 2023 meeting, the Governance Committee considered an amended draft terms of reference (see Appendix 1) and made recommendation to the Board for approval.

CONSIDERATIONS

The competency and attribute framework supports a potential future state where Board elections are no longer required by the legislation and College Boards select and appoint

registrants to serve as board directors. Until such time that the legislation is amended, the board can begin to incorporate the competencies into its governance as a screening eligibility requirement to stand for election via by-law change. The board will consider this by-law change in agenda item 8.0.

If by-law 1 is approved, the next steps will be to develop a transparent assessment process. To support this work, the Governance Committee Terms of Reference have been expanded to include the role of election nominations screening. It is anticipated that the Committee will screen election applications, may conduct interviews, and determine which candidates meet the competency/attribute profile. Individuals who meet the eligibility and competency/attribute criteria will be an approved Board nominee.

RECOMMENDATION

To approve the amended Governance Committee Terms of Reference to include responsibilities related to application screening for elections.

ATTACHMENTS

- Appendix 1: Governance Committee Terms of Reference



College of
Dietitians
of Ontario

The College of Dietitians of Ontario regulates dietitians for public protection.
We deliver regulatory excellence to contribute to the health of Ontarians.

DRAFT Governance Committee Terms of Reference

PURPOSE

The Governance Committee is ~~an ad-hoc~~ non-statutory committee established by ~~Council~~ the Board to support the effective governance of the College. The Governance Committee evaluates, recommends, and implements initiatives that promote governance excellence and align with the College's mandate and strategic plan. This committee will also support the College's strategic decision making related to Equity, Diversity, Inclusion, and Belonging (EDI-B) in alignment with the strategic plan.

The Governance Committee is accountable to the ~~Council~~ Board for fulfilling any duties and responsibilities set out in the by-laws, these Terms of References, or as otherwise assigned by ~~Council~~ the Board.

RESPONSIBILITIES

1. Review and consider the College's existing governance model and recommend changes that are consistent with leading evidence-based practices in governance and are within the College's control.
2. Oversee the implementation of changes to the governance model that ~~Council~~ the Board adopts.
3. Consider and make recommendations to ~~Council~~ the Board on the College's EDI-B plan and strategy.
4. Ongoing appraisal of the College's governance structure, processes, and policies to promote longstanding governance excellence at both the ~~Council~~ Board and Committee level.
5. Administer the process for screening applicants to be qualified as candidates for Board elections.
- 4-6. Any additional responsibilities as directed by ~~Council~~ the Board.

COMPOSITION OF COMMITTEE

The Governance Committee shall be composed of at least five members:

1. At least one Elected Councillor
2. At least one Public Councillor
3. At least one Committee Appointee

CRITERIA FOR COMMITTEE SELECTION

~~Council~~ The Board appoints individuals to committees in accordance with Article 8 of ~~the~~ by-law 1s.

COMMITTEE STAFF SUPPORT

[~~DEC-2021~~ April 2023]

Supported by Registrar & Executive Director, ~~Manager Governance & Operations~~Director of Governance and Regulatory Policy, and other CDO staff. Staff administrative support includes minute taking, scheduling of meetings, and preparation of meeting materials.

A

Topic:	Extension of PDEP Accreditation Recognition beyond August 31, 2023
Purpose:	For Decision
Strategic Plan Relevance:	Risk-Based and Right-Touch Regulation
From:	Melanie Woodbeck, Registrar and Executive Director

ISSUE

To consider a request from Ontario Dietetic Educational Programs for an extension to the accreditation transition deadline of August 31, 2023.

PUBLIC INTEREST RATIONALE

Educational Program Accreditation ensures that Canadian educational programs provide nutrition education in alignment with the national Canadian Integrated Competencies for Dietetic Education and Practice ([ICDEPs](#)) and meet ongoing Quality Assurance and Improvement standards. Registering graduates from accredited Canadian educational programs provides assurance to the College and the public that Canadian dietetic graduates have the requisite knowledge, skill and judgment to provide safe, ethical and competent care to the public.

BACKGROUND

At its meeting on July 5, 2022, the Board passed a motion to accept EQual/Accreditation Canada as the approved national accreditation agency following the withdrawal of the former service provider under the Partnership for Dietetic Education and Practice (PDEP). The withdrawal was announced on September 28, 2021, with an effective date of March 31, 2022.

The Board passed a further motion to continue to recognize PDEP Accreditation awards until August 31, 2023, for the purposes of registration, regardless of the programs' last accreditation and expiry dates.¹

The date of August 31, 2023 allowed one year for the transition and aligns with the date that the new ICDEP are due to be fully incorporated into dietetic education programs. The Canadian Dietetic Registration Examination (CDRE) will be based on the new ICDEP starting in May 2024.

¹ For further information, refer to July 5, 2022 [board materials](#) and [minutes](#).

FOR CONSIDERATION

In a letter dated June 9, 2023, Ontario Dietetic Educational Programs request an extension to the August 31, 2023 deadline, until August 31, 2024, to allow programs to sign on to the new accreditation framework and to have previous PDEP accreditation awards continue to be recognized. **(Appendix 1)**

Given some of the challenges described, in addition to the constraints and pressures programs are facing, in the interest of fairness, the request should be considered by the Board.

The request must be balanced with other considerations:

1. *The College's legislative authority and obligations regarding accreditation of educational programs and labour mobility*

The College is required to develop, establish and maintain standards of qualification for applicants to be issued certificates of registration.² In doing so, the College recognizes the eligibility of applicants from educational programs that are accredited by an agency approved by the College.³

The College also has an obligation to facilitate labour mobility and to ensure registrants in other provinces can seamlessly obtain licensure in Ontario (and vice versa). This includes taking steps to “reconcile differences between the occupational standards” in Ontario with those in other provinces and ensure that any new occupational standards developed are consistent with those in other provinces.⁴

Given the significant shift in the accreditation provider, a fair and transparent transition is necessary and appropriate in the circumstances. However, the previous accreditation provider has not been available to provide typical accreditation services since September 2021 and a protracted delay in the transition creates risk for the College and the public. Completion of accredited dietetic education provides assurance to the College and the public that applicants have met the educational requirements to practise safely as a dietitian in Canada. Accreditation also expedites the process for CDO to issue certificates of registration, as further assessment of an applicant's education is not required.

If dietetic programs are unable or unwilling to become registered with EQual before the current deadline, graduates of those programs who convocate after August 31, 2023 will be required to complete an *individualized* credential or PLAR assessment before gaining eligibility to write the national exam. Engaging in this process can be time consuming and costly, and if any

² See RHPA. 3(1) 2. of the [Health Professions Procedural Code](#)

³ See 6.(1) 1. of O. Reg. 593/94 under [the Dietetics Act](#)

⁴ See 22.20 (1) of *the Code*

gaps are identified in the individualized assessment; the applicant may be required to undergo additional training or experience. It should also be noted that a significant and sudden increase in the number of applicants requiring individual assessment would challenge current College resources.

Alliance perspective and recommendation

The Alliance of Canadian Dietetic Regulatory Bodies (the Alliance), which is made up of the 10 dietetic regulators across Canada, collaborates to achieve consensus on regulatory issues of national interest, including examinations, entry-to-practice standards, competencies and accreditation. A streamlined national process for accreditation ensures that applicants and registered dietitians can easily move from one province to another without having to undergo further assessment of their education and training.

The Alliance recognizes that Canadian Dietetic Educational Programs are committed to providing ongoing high-quality education to dietetic learners. However, there has been a gap in accreditation activities since September 2021, and many programs have not had the opportunity to have their programs assessed within the usual seven-year cycle. For example, five of the 33 Canadian dietetic programs received accreditation awards eight to ten years ago, and seven programs will be at the seven-year benchmark in 2023. This is also a critical time in which programs are incorporating the ICDEPs, with no current mechanism to report on any potentially significant changes that have occurred since their last assessment, until such time that the new accreditation framework is in place.

The Alliance also acknowledges that there have been challenges with the accreditation transition and is in regular contact with EQual in order to facilitate the transition. In the circumstances, these challenges need to be balanced with the risks to Canadian regulators and the public of not having a fully implemented accreditation framework. Accordingly, the Alliance recommends that the deadline for registration with EQual be extended until December 31, 2023. Dietetic regulatory boards across Canada will be concurrently considering this recommendation this June.

EQual perspective and recommendation

As the first step to initiate with EQual, educational programs are required to submit an onboarding form relating to the program and their previous accreditation. As part of the transition plan, EQual delivered 30-minute information sessions and 1.5-day workshops to provide information about the process. All programs attended the information sessions and most programs have now attended the workshops. As of June 6, 2023, all but seven programs have submitted onboarding forms to EQual.

All programs who have submitted onboarding forms have now received draft contract agreements for legal review and approval. Agreements were issued between March and June. To-date, the University of Manitoba BSc and Master programs have fully completed the

[registration process with EQual](#). Once a program becomes registered with EQual, their previous accreditation awards will be recognized and they will be formally scheduled for accreditation review in line with their last review date.

EQual will respect and work with any decision made by regulators on extension of the deadline, but notes that any protracted extension may result in additional delays in the assessment schedule.

EQual is available to meet with programs administrative and legal representatives and welcomes discussion of the agreement contracts to avoid any misinformation.

OPTIONS

1. **Refuse to grant an extension past the August 31, 2023** deadline for recognition of previous PDEP accreditation awards for the purpose of registration in Ontario.
2. **Approve an extension to August 31, 2024**, for recognition of previous PDEP accreditation awards for the purpose of registration in Ontario as recommended by Ontario Educational Programs. The decision is conditional upon individual educational programs submitting to the College, within 45 days of the date of this decision, proof of having given all required onboarding forms to Equal and submitting to the College, within the deadlines set out by the Registrar, written assurances that the program is currently negotiating a contract with Equal.
3. **Approve an extension to December 31, 2023**, for recognition of previous PDEP accreditation awards for the purpose of registration in Ontario as recommended by the Alliance. The decision is conditional on individual educational programs submitting to the College, within 45 days of the date of this decision, proof of having given all required onboarding forms to Equal and submitting to the College, within the deadlines set out by the Registrar, written assurances that the program is currently negotiating a contract with Equal.

RECOMMENDATION

That the Board continue to recognize PDEP accreditation and awards until December 31, 2023, for the purposes of the College's registration process, regardless of the date of the programs' last accreditation and expiry date. The decision extends only to programs which can demonstrate that they are proceeding with EQual registration in good faith in a timely manner.

ATTACHMENTS

- Appendix 1: Letter dated June 9, 2023

To: College of Dietitians of Ontario Council

From: Dietetic Education Programs in Ontario

Re: August 31, 2023 Deadline for educational programs to sign on with EQual to maintain accreditation status

Date: June 9, 2023

Concern:

Lack of feasibility of August 31st 2023 deadline to 'sign on' with EQual in order to maintain current accreditation status and a lack of clarity in terms of what 'sign on' means.

Context:

Through no fault of educational programs, delays in getting the material in the hands of education programs required to be able to have signed contracts with EQual (including but not limited to access to onboarding forms, workshops and receipt of draft contract for review by educational institutions) means meeting the current deadline is unlikely if not impossible. The onboarding process has been plagued by delays, communication issues and a lack of responsiveness on the part of the accreditation provider (described more fully in the letter below).

The amount of time legal reviews take by educational organizations will vary between organizations and are largely beyond the control of individual educators. In our collective experience with affiliation agreements for example, negotiations can take up to 18 months.

Recommendations:

- That the College of Dietitians of Ontario Council explicitly describe what is expected by the deadline, in order for programs to maintain their accreditation status through to the next scheduled accreditation visit. In other words specify what is meant by "signing on" with EQual
- That the College of Dietitians of Ontario Council agree to a deadline extension of a minimum of 12-months (i.e. deadline becomes August 31, 2024) if "signing on" is defined as completing contract negotiations and payment of initial fees.

Dear College of Dietitians of Ontario Council Members,

We, the leaders of the dietetic education programs in Ontario, are writing to you today to request an extension to the August 31st 2023 deadline for "signing on" with EQual to maintain our accreditation status, and further we would like a clear definition of what is expected of us by this date. We want to ensure you are aware of how the onboarding process with EQual is progressing from our perspective as Ontario educators and help you to understand our concerns regarding the feasibility of this deadline.

At this point in time, some Ontario programs have received draft client agreements from EQual and others have not yet received them. The programs with draft agreements are in the process of getting legal reviews of the agreements. Following a legal review, negotiations will take place before the agreement can be signed. It is important to note that legal reviews and contract negotiations in the university context can be time consuming. We have extensive experience with negotiating contracts as our dietetic training programs require the establishment of contracts with hospitals and other external

organizations. In our experience, contract negotiations usually take months. It is not unusual for negotiations for such a contract to take 1 year to 18 months. Colleagues from other provinces that have completed an initial legal review of the EQual client agreements have agreed that the draft agreements will require extensive negotiations before they will be acceptable to our peer institutions. Issues such as use of intellectual property by EQual, lack of information about fee structures and the self-renewing nature of the proposed agreements have been flagged by our peer institutions' legal departments as problematic. Given that none of the Ontario programs have started the contract negotiation process, it seems unlikely that any of the programs will have a signed contract by August 31st. This poses a significant problem to both the College of Dietitians of Ontario (CDO) and to our programs.

The main reason that the August 31st deadline is no longer feasible for programs to complete all initial paperwork, sign contracts and pay initial fees (if that is what is intended by the expression "sign on") is because the process of signing on with EQual has been progressing much more slowly than expected, due largely to difficulties with EQual communications. We have met with EQual to voice concerns about suboptimal communication, with which they acknowledge their organization has been struggling over the last year. To provide a typical example, the University of Guelph attended a 1-hour information session on September 29th 2022 where we were promised that onboarding forms would be sent shortly. We received onboarding forms almost 2 months later, on November 23rd. We completed the onboarding forms and submitted them on January 20th. More than 2 months later, on April 3rd, we received a draft Client Agreement Form. We have requested an expedited review from our institution's legal team, but still expect the negotiation process to take several months.

Other Ontario programs have had similar experiences. Colleagues from NODIP reported that they completed their onboarding forms in September 2022 yet did not receive their draft contract until April 2023 despite being a priority program to review. Fortunately, NODIP's accreditation status was extended to December 31, 2023, however, this is a tight timeline in which to negotiate a contract with EQual and complete an accreditation assessment. The University of Ottawa submitted their onboarding forms to EQual in December 2022 and only received the Client Agreement Form for signature on June 2, 2023. As you can see, each step of the onboarding process with EQual has been more time-consuming than originally estimated and we therefore expect that both the continued slow movement from EQual and the typical timeframe for contract negotiations within our institutions will contribute to the missing of the August 31st 2023 deadline.

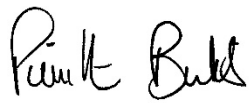
We received communications from the Alliance noting that the August 31st deadline for signing on with EQual is non-negotiable, however we have also had verbal reassurances that individual College Councils may permit greater flexibility. We understand that CDO has a mandate to protect the public and that being without an accreditation provider is problematic for regulators, as it is for education programs, who also place a high degree of importance on public safety. However, based on the patterns of our interactions with EQual, we feel it is unlikely that Ontario programs will have signed contracts with EQual by the August 31st despite our best efforts. We would like to propose an extension that is long enough to ensure that all programs are able to negotiate a fair contract with EQual. With EQual's assurance that they are working to overcome any past delays, we are hopeful that a 1-year extension of the August 31st deadline would provide enough time to ensure that this negotiation can be completed for all Ontario programs. As educators, we are committed to maintaining our high-quality training programs and would be happy to work with you to identify relevant proof of our continuing efforts to maintain our high standards of education over the next year.

Thank you for your consideration.

Sincerely,



Laura Forbes, PhD, RD
Associate Professor, Applied Human Nutrition Curriculum Chair, CAPPN Chair
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Pierrette Buklis, MHSc, RD, FDC
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Alexia Prescod, Master of Applied Nutrition Program Coordinator, University of Guelph



Isabelle Giroux, PhD, DtP, BÉd, ÉFI, FDC, Professeure titulaire et directrice, École des sciences de la nutrition, Faculté des sciences de la santé, Université d'Ottawa

MANAGEMENT REPORT – June 15 & 16, 2023

SECTION 1 OVERSIGHT/METRICS

CORPORATE SERVICES

Effective April 1, 2023, staff have begun working in HUB601 for all team days and on an as-needed basis for meetings and collaborations. Staff continue to operate effectively remotely outside of HUB days.

FINANCIAL (see attachment 5.2-Stmt of Operations Fiscal 2023)

Investments

Investment decisions are made with the advice of the College's investment advisor at RBC Dominion and internal consultation.

The College's investment policy limits investments in equities to 40% of the book fund value of the total portfolio; this is based on an assumption of a low-moderate risk tolerance level.

Due to the unpredictable nature of the market, gains and losses on sales of investments and the appreciation or depreciation of unsold investments cannot be budgeted for. Dividend income was also earned during the period.

In March, the College used cash on hand and dividend income to purchase common shares of Loblaws Co. for \$2,734.55.

The fair market value of the portfolio at March 31 was \$4,959,578. At March, the portfolio was made up of 59% fixed income (GICs), 35.5% bonds (preferred shares), 5% equities (common shares), and .5% cash.

HUMAN RESOURCES

Aneita Chang has moved into a new role as Director, Corporate Services with oversight of HR, Operations/Hub Liaison, EDI-B and Finance. With the increased focus set out in the CPMF around stewardship of human resources, success and sustainability of operations, succession planning, EDI supported by operational initiatives, the Corporate Services role has been expanded to reflect these responsibilities.

Josna Aykkara, Finance and Accounting Analyst, will report to Aneita, with expanded responsibilities that strengthen the role.

EQUITY, DIVERSITY, INCLUSION AND BELONGING

The staff Equity, Diversity, Inclusion and Belonging Working Group (EDI-B WG) continues to meet regularly. Over the last quarter, activities included:

- Discussing and finalizing the EDI-B WG operational workplan for 2023/2024.
- Reviewing and providing feedback on the Code of Ethics for Registrants policy to ensure that the document captures the principles of EDI-B to support registrants in delivering safe and competent dietetic practice.
- New updates and resources were added to the EDI-B webpages.

Needs Assessment Survey

In April, Board/Committee members and staff completed an EDI-B Needs Assessment survey to identify equity, diversity, inclusion and belonging learning needs. The information will help assess competencies while planning for future staff and Board education and training. The Board survey results are included in the June materials for consideration.

Equity Impact Assessment (EIA)

HPRO continues to work on development of the EIA tool and an Unconscious Bias training workshop took place to pilot the draft EIA tools.

EDI-B Training

In the last quarter, CDO employees completed various types of EDI-B training and workshops based on their roles and own self-identified learning goals:

- Unconscious Bias
- Overcoming 5 Common Pitfalls in DEI Training
- Inclusive Engagement, Mobilizing Action and Dismantling Systems of Oppression, Inequality, and Inequity (Session 1)
- Inclusive Care, Mobilizing Action and Dismantling Systems of Oppression, Inequality, and Inequity (Session 2)
- Inclusion, Diversity, Equity and Access (IDEA) Fundamentals
- Equity in Promotions – Not everyone who should be promoted is
- History by the Numbers – The Great Migration

SECTION 2 PROGRAM ADMINISTRATION

COMMUNICATIONS PROGRAM

In alignment with Goal Two (*Communicate effectively to support the public's understanding of the College's mandate, services and resources*) of the CDO Strategic Plan 2020-24, the Communications Program actively supported CDO programs and initiatives during fiscal Q2, in addition to leading the following initiatives:

CDO to leverage Canadian Press stylebook for consistency

An external relational communications audit conducted in 2022 recommended more consistency in terms of spelling and style in CDO written communications. To address this issue, the Canadian Press (CP) stylebook has been selected as CDO's baseline style standard, creating a foundation for a CDO stylebook. Canadian Press writing and editing guidelines are used by journalists and communicators across Canada. CP Style sets the written standard most often read online by Canadians.

Governance Manual translation supports CDO commitment to French language services

The audit of French language gaps in online content is complete and translations are being prioritized. As part of this initiative, the 49-page CDO Governance Manual has been translated to French, a first in the College's history. The translation of this major document supports the College's commitment to French language services and aligns with the Government of Ontario's French Language Services Strategy, which was launched in November 2021.

BEST PRACTICES

Communications launches new email template, letter head

Based on feedback from registrants, the relational audit also recommended that CDO contemporize the look of its emails to enhance readability and make them visually consistent with the website.

Communications worked closely with graphic designers to create a branded email template that is engaging and can be adapted to different circumstances (college updates, renewal season, elections, etc.). The new email template combines an English and French section to align with CDO's commitment to French language services.

It was first used in April 2023 to promote interest College committee appointments and generated an 80.3% open rate and a 15.6% click rate — almost double the click rate of the same email the previous year.

In addition, all CDO letterhead was refreshed to include the College's new address and reinforce the College's branding.



PUBLIC AWARENESS CAMPAIGN

Campaign closes fiscal year in strong position

In Q4 of Fiscal 2023, more than 72,000 users visited the CDO website, an increase of more than 18,000 users (33%) over the same period last year. During this period, the Public Register was the page most often viewed by users (36,000 pageviews), which can be directly attributed to the public awareness campaign.

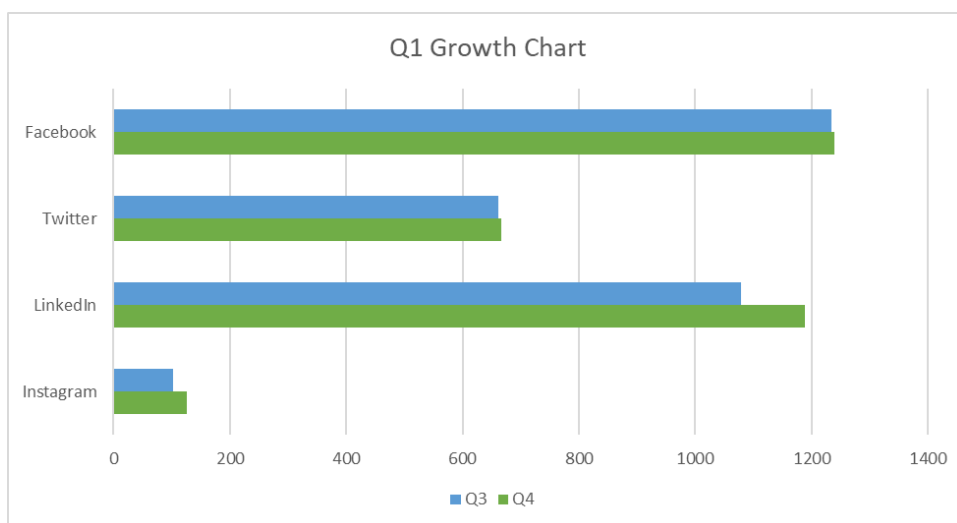
The public awareness campaign leverages digital ads on Google, Facebook, and Instagram to drive traffic to the Protecting the Public webpage and the Public Register. The campaign also generated 10,121 page views of the Protecting the Public webpage.

Google Analytics is currently transitioning to a new platform called Google Analytics 4, which collects event-based data from both websites and apps. CDO is working with its developers to transition our web properties to the new platform so we can continue to track and analyze the metrics that measure the success of the public awareness campaign.

SOCIAL MEDIA

Growth continues across all social media channels

This quarter's social media growth continued to track with previous years' success. LinkedIn continues to grow steadily, showing over 100 new followers in this quarter alone. This trend is closely followed by Instagram. As our new social channel, it continues to grow in audience. As with past quarters, Facebook continues to be the leading channel in followship, engagement, and reach.



Top social media posts emphasize regulatory role and EDI-B

The best performing posts during Fiscal 2023 Q4 with the most engagement continue to be celebratory international days such as Dietitians Day. CDO posted 248 times over this quarter through its five social media channels. This resulted in 4.4M impressions and 50 clicks, directing

followers to our website for more information. We continue to post to all social media channels in both official languages with a new post every two days on average.



PROFESSIONAL PRACTICE PROGRAM – PRACTICE ADVISORY - *Designed to engage RDs in understanding professional obligations, learning and continuous improvements through the following:*

PRACTICE ADVISORY SERVICE (PAS)

- 187 inquiries were received in Q4
- Top areas of inquiry for Q4: College Requirements & Processes, Scope of Practice, Ethical Issues, Authority Mechanisms, Private Practice and the *Personal Health Information Protection Act*

Q4 PAS Satisfaction Survey

The Q4 PAS feedback survey was disseminated to 116 dietitians in April 2023. The survey is now available in both English and French.

Feedback from respondents (n=10, 9%) shows:

- 100% felt the information received was relevant and valuable to their dietetic practice.
- 100% felt their issue/question was sufficiently addressed.
- 100% were satisfied or very satisfied with the response they received from the PAS.
- 40% reported changing their dietetic practice (40% reported not applicable), and 100% said that the PAS confirmed their understanding of the laws, standards, and ethics.
- Since using the PAS, 80% have accessed the CDO website as a resource.
- 100% would use the PAS again, and 100% would recommend the Service to their colleagues.

Several respondents commended the practice advisory service for cultivating open and safe conversations. One respondent indicated that they used the service to create course content for students.

ANNUAL PROFESSIONAL PRACTICE PROGRAM HIGHLIGHTS

There were 876 inquiries in the PAS in 2022 – 2023. Users of the service include:

Dietitians	692
Dietetic Students	9
Public	136
Employers	28
Health care Professionals	11

Educational initiatives are offered by the professional practice program throughout the year:

- 21 presentations, including four workshops, 5 Jurisprudence Education Sessions and 7 Regulatory Talks Webinars
- 19 Dietetic Student Sessions; 21 Sessions with Dietitians; 5 Other Sessions
- Total participants: 1,536. RDs: 1315, Dietetic Students: 176, Other: 45

Q4/Q1 PPP PRESENTATIONS DEVELOPMENT AND FACILITATION:

- **Jurisprudence Education**
 - A total of four sessions were provided with 109 dietetic students from both the Toronto Metropolitan University and Brescia University.
- **Coaching Webinars: Writing Professional Learning Goals – Coaching Webinar**
 - Two one-hour regulatory Reg Talks webinars will be held in May and June.
- **Quality Improvement and Professional Practice Education**
 - Brescia Diploma in Dietetic Education and Practical Training (BDDEPT) students on Enhancement of Safe, Competent, Ethical Practice (June 2023)
- **Regulatory Talks Member Education (Reg Talks) Webinars: Writing Professional Learning Goals for Professional Development Webinar**
 - Two one-hour regulatory Reg Talks webinars (July and August)

COLLABORATIONS:

- **Other Committees and Working Groups PPP participated in:**
 - Cross-Canada Dietetic Practice Advisor Group
 - Interprofessional Practice Advisors Group
 - Quality Assurance Working Group (Director of Professional Practice is co-chair)
 - Quality Assurance Peer & Practice Assessment Learning Group

Policies: Professional Practice Committee (PPC) Support

CDO's Professional Practice Program reviews standards, policies, and practice procedures considering legislative changes, trends in inquiries, complaints/reports, and consultation with partner groups. Policy work includes:

- **Social Media Standards and Guidelines:**
 - Staff analyzed the consultation feedback received between December 19, 2022 and January 31, 2023 and 'revised the standards and guidelines based on the feedback.
 - The Board will review the final draft for approval in June 2023.
- **Code of Ethics:**
 - The Code of Ethics articulates the application of four healthcare ethical principles to guide dietetic practice: beneficence (to do good), non-maleficence (not harm), respect for persons/justice, and respect for autonomy..
 - In 2023, work began to review the Code of Ethics to determine if changes are required to incorporate principles of EDI-B. Revisions will be made collaboratively with system partners, including feedback from the EDI-B working group and PPC.
 - In April 2023, the EDI-B Working Group reviewed the Code of Ethics and recommended revisions to capture EDI-B principles, e.g. respect and dignity, culturally sensitive care, health equity and inclusive communication.
 - In May 2023, the PPC reviewed and provided recommendations to revise the Code of Ethics.

PROFESSIONAL PRACTICE PROGRAM - QUALITY ASSURANCE - *Designed to assure RDs' professional development and continuous improvements through the following components:*

Jurisprudence Knowledge & Assessment Tool (JKAT)

- The JKAT is an online knowledge acquisition and assessment tool designed to improve registered dietitians' knowledge and application of laws, standards, guidelines, and ethics relevant to Ontario's dietetics profession.
- The 2023 JKAT is underway. Registrants have until July 7, 2023 to complete and achieve a score of 90%. There will be 1,694 registrants participating in the 2023 JKAT.
- As of May 25, 2023, 625 registrants (37% of participants), completed the JKAT.

JKAT 2023	TOTAL
Eligible Registrants	1757
Exempted (out of province/country)	9
Deferred	54
Total Participants	1694

Peer and Practice Assessments

The Peer and Practice Assessment (PPA) is a learning opportunity to assess registrants' knowledge, skill and judgment based on the Integrated Competencies for Dietetic Education and Practice (ICDEP) and other College Standards. CDO is engaged in a multi-year project to bring the PPA to a virtual format and upgrade the process to align with right-touch regulation, the new dietetic competencies, reflect the College's 2020 – 2025 strategic goals and EDI-B.

PPA Project Update:

- In November 2022, the QAC approved in principle, the following recommendations:
 - A 'Working' Purpose Statement for the QA program:
The CDO QA program aims to foster and support all dietitians' continuing competence and quality improvement through education and assessment. We will prioritize new areas of dietetic knowledge and practice areas posing the highest risk to the public.
- November 2022: the Professional Practice staff began working with a psychometrician to guide the project and develop a work plan.
- February - May 2023: Completed Scoping and Blueprinting Competencies. Working with the Psychometrician, the Professional Practice Committee (PPC) and PPA Assessors, the scoping and Blueprint of the ICDEP for content development.
- June 2023-Nov 2023 – Work will continue to support the proposed design and development. Project activities include:
 - External and internal consultation on the blueprint
 - Develop questionnaires and scoring rubrics: commence content development by recruiting subject matter expert item writers, create scoring rubrics, editorial content, bias and language review
 - Refine the draft Blueprint with the PPC, Psychometrician and QAC
 - Run field test with a smaller cohort of dietitian registrants and selected system partners and refine the process
 - Finalize the assessor interview manual and other documentation, assessor training and linking to the BBI
 - Revision of QA policies
 - Present completed Step 1 and Final Blueprint for approval to the QAC
 - Creating a Communication and Education Plan for registrants
 - Piloting with RD registrants to set the first questionnaire cut score

The PPA revisions as recommended by the QAC will be presented to the board at a future meeting.

Policies: Quality Assurance Committee (QAC) Support

The Professional Practice Program, through Quality Assurance, assures the Ontario public of dietitians' commitment to ongoing learning and continually improving their practice. Policy revisions were revised to ensure processes enable learning and assessment of dietitians' competency, professionalism, ethical practice, and quality of care. Such as:

- Returning to practice/ reinstated registrants, where it has been at least five years since they completed the JKAT, must complete with the year of the return or the following year based on the date of application.
- Updated the Acknowledgement and Undertaking Form used by the Professional Practice program when a dietitian wishes to continue to use an RD title but is not in active practice clarifying, not practicing in Ontario or with Ontario clients.
- Included inclusive supporting language, e.g., from Mandatory Webinar to Coaching webinar, clarified objectives of helping registrants to write annual learning goals and updating to align with the new dietetic competencies (ICDEP).

STANDARDS AND COMPLIANCE PROGRAM

Inquiries, Complaints and Reports Committee (ICRC) Quarterly Stats for March 1, 2023 to May 31, 2023 (as of May 24, 2023)

4 new matters received by the College of Dietitians of Ontario

- 1 Complaints
- 3 Reports
- 0 Referrals from the Quality Assurance Committee
- 0 Inquiries

0 matters closed by the Registrar at the preliminary review stage

3 matters closed by the Inquiries, Complaints and Reports Committee

- 0 Complaints
- 2 Reports: 1 Specified Continuing Education and Remediation Program (SCERP); 1 SCERP + Written Reminder
- 0 Referrals from the Quality Assurance Committee
- 1 Inquiry: No further action
- Outcomes grouped by risk: 1 No or Minimal Risk; 0 Low Risk; 2 Moderate Risk; 0 High Risk
 - *Average time for disposal: 322.7 calendar days for all matters*
 - *Note: In accordance with the CPMF specifications, time for disposal is now calculated using the date received for Complaints and date the ICRC appointed an investigator for Reports and QA Referrals; Reports and QA Referrals where the ICRC does not appoint an investigator are omitted.*

15 matters currently open

- 2 Complaints:
 - 1 Complaint still in the initial exchange of correspondence
 - 1 Investigator appointed and investigation ongoing
- 8 Reports:
 - 2 Reports at the preliminary inquiry stage
 - 1 Report being held in abeyance through voluntary undertaking

- 2 Investigators appointed and investigations ongoing
- 2 Reports returning following investigations for final decisions
- 1 Decision reached in principle with further direction from the panel
- 5 Referrals from the Quality Assurance Committee:
 - 4 Decisions reached in principle and need to be finalized
 - 1 Decision reached in principle with further direction from the panel
- 0 Inquiries
 - *Average time matters have been open (as of May 24, 2023): 160.1 calendar days for all matters; 97.5 calendar days for complaints only*
 - *Note: In accordance with the CPMF specifications, length of time a matter has been open is now based on date received for Complaints and date the ICRC appointed an investigator for Reports and QA Referrals; Reports and QA Referrals that are still under preliminary review are omitted.*

0 complaint decisions reviewed or under review by the Health Professions Appeal and Review Board

7 registrants currently being monitored for compliance

- 2 registrants entered undertakings with the College
- 3 registrants completing Specified Continuing Education and Remediation Programs (SCERP)
- 2 registrants directed to complete SCERP that are currently on hold

REGISTRATION PROGRAM

Canadian Dietetic Registration Examination (CDRE)

- A total of 113 candidates took the May 18th and 19th, 2023 administration of the CDRE via an online remote-proctored format with Meazure Learning.
- Eight accommodation requests were granted by the national CDRE Accommodations Committee, consisting of additional writing time and/or extra break time.
- Results will be disseminated to candidates when available in early July 2023.

Prior Learning Assessment and Recognition (PLAR) Process

Knowledge and Competency Assessment Tool (KCAT):

- A total of 52 candidates attempted the KCAT on February 22, 2023, via a remotely proctored process with the Touchstone Institute.
- Results:
 - 13 obtained a Level I result (sufficient knowledge competence) and may attempt the Performance Based Assessment or apply to an accredited practical training program
 - 12 Level I for PLAR
 - 1 Level I for demonstrating currency for return to practise after 10+ years
 - 29 Level II (partial knowledge and competence)
 - 26 Level II for PLAR (4 candidates' second attempts)

- 3 Level II for demonstrating academic currency after completing an accredited academic program greater than 3 years ago (1 candidate's second attempt)
- These candidates are all eligible to reattempt the KCAT
- 10 Level III (did not demonstrate sufficient knowledge and competence)
 - 9 candidates are eligible to retake KCAT (1 candidate's second attempt)
 - 1 is ineligible to retake the KCAT due to 3rd and final attempt
- The next administration of the KCAT will take place on September 27, 2023.
- The work to re-blueprint the KCAT to the 2020 Integrated Competencies for Dietetic Education and Practice (ICDEP) is near completion. A field test study with graduates of accredited academic programs who have not yet begun their practical training will take place on June 27, 2023.

Performance Based Assessment (PBA):

- A total of 20 candidates are registered to attempt the next administration of the PBA on June 21, 2023.
- 16 candidates have opted to write via an online remote-proctored process and four will be writing on-site at the CDO office.
- Except for providing a computer and a quiet private space, a similar process for the in-person PBA will be applied in comparison to those who take it remotely.

Office of the Fairness Commissioner (OFC)

- CDO's 2022 OFC Fair Registration Practices Report will be submitted by the due date of August 4, 2023.
- CDO maintains a continued low-risk rating under the OFC's Risk Informed Compliance Framework.

Emergency Class of Registration and Additional Proposed Registration Regulation Amendments

- In compliance with the [Registration Requirements Regulation](#) under the Regulated Health Professions Act, 1991, CDO's proposed Emergency Class of Registration was submitted to the Ministry of Health on May 1, 2023.
- The 2019 proposed amendments to the Registration Regulation were also submitted.
- The ministry has informed regulatory Colleges that it will be proceeding with emergency class regulations to meet its August 31, 2023 deadline, and that additional registration regulations submitted will be brought forward beginning this fall.

Registration Committee Meeting Policy Revisions

Recognition of United States Accredited Programs: A comparison of the 2020 ICDEP to the entry level competencies of the United States (US) Accreditation Council for Education in Nutrition and Dietetics (ACEND) was conducted. Findings showed that only ACEND's Future Education Model (FEM) Program was substantial equivalent to the ICDEP. The Registration Committee is in the process of making a

recommendation on policy revisions to the board at an upcoming meeting. In preparation for this, consultation will commence with ACEND, the Ministry of Health, and the OFC.

Professional Corporation Late Fee: The Registration Committee approved, in principle for approval by the Board for circulation, revisions to By-Law No. 2: Fees to incorporate an administrative fee of 20% of the annual fee for managing late renewals of professional corporations in alignment with other late fees.

Revisions to Policy 4-20: Applicants from ACEND Accredited Programs were approved to recognize verification statements of equivalency from ACEND accredited academic programs as equivalent to Canadian academic standards.

INFORMATION TECHNOLOGY

Additional layers of security have been implemented to CDO's BOX and staff's VPN connection. Staff password manager software will be launched at the end of June. A revision of the password policy is underway.

The Cybersecurity Incident Response Plan is under review, as part of the regular annual review of the policy.

SECTION 2 ISSUES TRACKING AND ENVIRONMENTAL SCANNING

GOVERNANCE

Board Elections

Navita Viviky was acclaimed as the district 4 Board director and will begin her term at the June 2023 meeting.

Following the resignation of Karine Dupuis Pominville, Dt.P (RD), a by-election was held for district 5. Teresa Taillefer, RD was acclaimed for a one-year term.

Board Composition Changes

Israel Ogbechie, public member, resigned from the Board effective May 26, 2023.

LEGISLATIVE

Bill 60, Your Health Act, 2023 receives royal assent

The Bill, which enables the “As of Right” proposal, lays the ground work for individuals to practise the following professions without registering with the relevant Ontario College: medical laboratory

technologists, physicians, nurses, and respiratory therapists. Details on the parameters and criteria of the legislation are not included in the Bill.

REGULATORY ENVIRONMENTAL SCANNING

Health Profession Regulators of Ontario (HPRO) Highlights

HPRO has published its [annual report of activities](#) over the year.

Health Professions Discipline Tribunal Pilot

The Ontario Physicians and Surgeons Discipline Tribunal ([OPSDT](#)) has launched a Health Professions Discipline Tribunal Pilot, which is a collaboration between four health profession regulators: the Colleges of Physicians and Surgeons, Massage Therapists, Pyschotherapists and Audiologists and Speech-Language Pathologists. The pilot aims to share the expertise of the experienced adjudicators and the Tribunal Chair, particularly their familiarity with the health regulatory framework, administrative justice, case and hearing management. The OPSDT Chair is appointed as chair of the participants' discipline committees and experienced adjudicators are cross-appointed.

The board received a presentation from David Wright, Tribunal Chair, on the work of the OPSDT at its December 2022 meeting.

SECTION 3 OTHER INFORMATION ITEMS

5.1 Management Report June 2023

5.2 Statement of Operations Fiscal 2023 as at March 31, 2023

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at March 31, 2023
FISCAL YEAR ENDED MARCH 31, 2023

	12 Months Ended			Comparative	
	Actuals Mar 31 2023	Total Annual Budget Mar 31 2023	Actual vs Budget % Variance	12 Month Actuals Mar 31 2022	March 2023 vs March 2022 % Variance
REVENUE					
Membership & Other Fees (1)	\$ 2,897,381	\$ 2,954,924	-2%	\$ 2,920,497	-1%
Interest & Dividends (2)	223,361	186,000	20%	193,286	16%
TOTAL REVENUE	3,120,742	3,140,924	-9%	3,210,632	-11%
EXPENSES (Operating)					
General & Administrative (4)	2,531,268	2,546,358	1%	2,353,836	8%
Registration Program (5)	161,691	199,714	19%	147,003	10%
Quality Assurance Program (6)	59,394	154,901	62%	47,697	25%
Practice Advisory Program (7)	14,059	40,864	66%	11,494	22%
Patient Relations Program (8)	-	1,125	100%	-	-
Standards & Compliance Program (9)	187,057	263,825	29%	238,353	-22%
TOTAL EXPENSES BEFORE AMTZN	2,953,468	3,206,787	8%	2,798,383	-6%
EXCESS REVENUE OVER EXPENSES (EXPENSES OVER REVENUE)	167,274			412,248	-122%
<u>Less: Non-cash expenses:</u>					
Capital Asset Fund - Amortization (10)	(73,826)	(70,000)	-5%	(68,138)	
Realized Gain/(Loss) on Sale of Investments (3)	(257,554)	-		96,849	-
Unrealized FV appreciation (depreciation) of Investments (3)	(242,463)	-		(175,457)	
SURPLUS/(DEFICIT)	(406,569)	(70,000)		168,653	
FUND BALANCES - beginning of year	3,683,681	3,683,681		3,728,079	
FUND BALANCES - March 31, 2023	\$ 3,277,112	\$ 3,613,681	\$ 3,277,111	\$ 3,896,732	

NOTES and HIGHLIGHTS:**REVENUE**

- (1) Revenues from members in all categories have generated \$ 2,897,381 following annual renewal. This amount is within a 2% variance to budget and within a 1% Membership fees are being reported on an accrual basis to recognize revenues paid in Fiscal 2022, but earned from April 1 to March 31, 2022.
- (2) **Investment income (interest & dividends)** is \$223,361 over the year from investments held at RBC Dominion Securities and from an operating bank account with Scotiabank.

EXPENSES

- (4) Overall, **General & Administrative** expenses were **in line with the budget (within 1%)**:

Council (i.e. Board) costs were 24% **less than budget** since some in-person meetings were budgeted for (including travel, accommodation and food) but only the 2022 meetings was in person. Training for the Board on conflict of interest, governance, cultural safety and humility completed. A third-party governance assessment. Legal fees were over budget, and \$21,519 were spent for work done on governance modernization, CDO bylaws, conflict of interest matters, in-camera policy, accreditation. This was offset by cost savings in training and consulting.

Executive and Governance Committees all held meetings virtually as planned, but were underspent by 80% and 45% respectively because some in-person meetings were cancelled.

General & Administrative Expenses such as **Salaries & Benefits** was overall **underbudget by 1%** due to staff turnover. \$30,465 was spent on **contracted services**, including bookkeeping and training, due to unplanned staffing transition (\$12,400 was budgeted).

General & Administrative Expenses such as **Communications, Membership Dues, Insurance, Staff Travel** were in line with the budget.

Computer expenses were 10% higher than budget due to an unplanned change of the credit card payments processor company. **Legal Fees** for general matters were **higher than budget** for legal advice received on elections, HR policies and new vendor contracts. **Bank Charges exceeded the budget** since the payroll is now being outsourced to an external vendor. **Postage was overbudget** due to the purchase of mass-email credits which will be used in fiscal 2023. **Phone/internet was overbudget** due to some unplanned but necessary activities that reduced risk, including, moving to moneris, costs of hosting a server during database transition, security improvements in light of geopolitical situation, costs of staff transitions.

Office expenses were overbudget (\$20,500 was budgeted and \$36,783 was spent) due to the office move, including the cost of winding down the office in compliance with the Health Protection Act. This was offset in **rent expenses**, which were underbudget by \$18,731 due to operating remotely in March and a property rebate. The College will also receive its **Professional Fees/Consultants** were over budget by \$8,715 due to two unbudgeted projects: a finance project review and a special accounting analysis on EHT.

Underspending occurred in **Annual Report, Staff Development, Translation**.

- (5) The **Registration Program** expenses were 12% less than budget. The cost of credit card fees, which comprise a large portion of administrative costs, occurred

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at March 31, 2023
FISCAL YEAR ENDED MARCH 31, 2023

October 2022 as members renew their licenses online. The move to a new vendor has slightly increased fees (8% over budget), but has reduced overall risk for Computer expenses related to the Registration area of the database upgrade and changing the credit card payments processing company resulted in higher cost

\$53,650 is the annual budget for administration and maintenance costs of the Performance Based Assessment (PBA) and the Knowledge and Competence and Tool (KCAT). \$40,361 has been spent. Spending on Honoraria and Expenses for KCAT subject matter experts less than budgeted.

The CDO will defer an Orientation & Self-Assessment Tool (OSAT) project following updating of the CDO website. Consulting funds will be used to remap the KC

Registration Committee expenses were 54% less than budget because meetings were all virtual (some were budgeted for in-person) and underspending on leg

- (6) The **Quality Assurance Program** expenses were 63% less than budget since the Peer & Practice Assessment (PPA) remained on hold. Significant work is ongoing to revise and upgrade the PPA processes to align with Right Touch processes and move the assessment to a virtual, paperless platform. Phase 2 of this project was completed in Fiscal 2022, and work on Phase 3 started with a Psychometrician as an advisor. Modifications to the JKAT are deferred until work around recent professional practice standards and code of ethics are complete.

QA Committee expenses were 55% less than budget since the meetings held were virtual (some were budgeted for in-person).

- (7) The **Practice Advisory Program** expenses were 69% less than budget since the fall workshops did not utilize a consultant. Based on trending practice advisory data, the topic was changed to Consent with an EDI-B lens. In-person workshops/townhalls were deferred. Legal fees were also underbudget.

Professional Practice Committee were underbudget by 59%. The Committee met virtually although in-person meetings were planned.

- (8) The **Patient Relations Program** incurred no expenses. This program now consists of **PR Committee** meetings alone. All program administration expenses are : for in General Administration - Communication Initiatives. **The Committee** was underspent because it held no meetings. Minimal expenses were budgeted this year a planned review and revision of the Committee's terms of reference.

- (9) Overall, **Standards & Compliance Program** expenses were **29% less than budget** due to timing and fewer meetings and matters than previous years. \$74,000 is the annual budget for external Investigations of members (actuals - \$71,057) and \$76,000 for external Case Management (actuals - \$89,061). It is difficult to predict and budget for the total costs of investigations from year to year. The number of QA referrals have decreased from 2021, and there were slightly less complaints than last year, although number of employer reports are similar to

The **Discipline Committee** was underspent because it held no meetings; **ICRC** was underspent since it was underbudget on legal fees and other consultants. \$70,500 is the annual budget for hearings and the Hearings Reserve Fund has \$200,000 for restricted use. \$5,900 was spent on legal and other court fees for a held for a member on June 30, 2022

- (10) **Amortization expense** represents the cost of the decline in value of capital asset purchases over time.