



## Strategic Plan 2020-2025

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## Introduction

The College of Dietitians of Ontario (the “College”) regulates the dietetic profession in Ontario in the public interest. Under the *Regulated Health Professions Act, 1991* and the *Dietetics Act, 1991*, the College establishes and enforces standards for safe, ethical and competent dietetic practice for approximately 4,000 Registered Dietitians.

In 2019, Shenda Tanchak, of Magnetic North Consulting, was contracted to facilitate the process for developing the College’s 2020-2024 Strategic Plan. The Executive Committee oversaw the project.

As part of the strategic planning process, staff and Council participated in workshops to identify the College’s strengths, weaknesses, needs and opportunities, and stakeholders were interviewed and surveyed to provide their perspectives on the profession, regulation and the College. After completing the necessary background research, Council engaged in facilitated discussions to draft the mission, vision and goals for 2020-2024.

## Updates

The 2020-2024 Strategic Plan was approved by the Board (formerly the Council) on March 27, 2020, only ten days after a state of emergency was declared in Ontario due to the COVID-19 pandemic. Due to the uncertainty created by the pandemic in 2020-2021, the initiation of many strategic projects and the resources required to carry them out, were deferred. Throughout 2021-2022, leadership changes and enhancements to the Strategic Plan further delayed the implementation of strategic projects and expanded the scope of activities needed to achieve the goals. In 2022, the Board agreed to extend the current Strategic Plan by 1 fiscal year until March 2025.

As part of its ongoing work in Equity, Diversity, Inclusion and Belonging (EDI-B), CDO adopted an additional core value to formally recognize the significance of EDI-B in fulfilling its public protection mandate.

## Purpose of Strategic Planning

The purpose of the strategic plan is to clearly define the regulatory priorities of the College and provide a long-term direction for the organization. Revisiting and updating the College’s vision, mission and goals for 2020-2025 builds on the College’s accomplishments in public protection and effective regulation while focusing on new areas of innovation and regulatory excellence. The goals are in addition to the College’s mandate under the *Regulated Health Professions Act, 1991*.

## Mission, Vision and Values

### Mission

A mission is a statement of organizational purpose and describes what the organization does and who/what it does it for.

The College of Dietitians of Ontario regulates dietitians for public protection.
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## Vision

A vision describes the long-term impact of an organization if it achieves its goals.

The College of Dietitians of Ontario delivers regulatory excellence  
to contribute to the health of Ontarians.

## College Values

Integrity | Collaboration | Accountability | Transparency | Innovation | EDI-B

## Goals

### 1. Measure and report its regulatory performance to the public.

Professional regulation must demonstrate its value and effectiveness. By March 2025, the College will have implemented a new framework for measurement and reporting that meets public expectations for clarity, transparency and meaningful measurement.

### 2. Communicate effectively to support the public's understanding of the College's mandate, services and resources.

The College will more ably achieve its mission and vision if all stakeholders, including registered dietitians, understand the role and mandate of the College and have access to resources that will assist them. The College will strive to demonstrably increase understanding of the College's mandate and to continue to deliver resources relevant to public protection. The College will continue to ensure transparency and clarity in its communications with all other stakeholders, especially members of the public.

### 3. Decisions will be made in accordance with a risk (harm reduction) framework.

The College is committed to risk-based regulation. The College will continue to develop the tools that it uses to assess risk and ensure that risk is a primary consideration in all College decision-making by March 2025.

### 4. Update its governance model in accordance with evidence-based practices.

Enhancing public trust in self-regulation demands that the regulator's decision-making structure is effective. Good governance is recognized as an important means to achieve organizational ends. By the end of 2025, the College will have made whatever changes are necessary and within its power to ensure that its governance structure supports the best possible decision-making quality.

## Conclusion

This Strategic Plan defines the direction of the College and its commitment to public protection. The plan reflects the desire of a mature and competent regulator to continue to strive for excellence in an environment of constant evolution and public scrutiny.

Highlighting the College's priorities, the goals take a proactive approach to the changing landscape of professional self-regulation and the expectations of the public. The College is committed to meeting public expectations for transparency and risk management by enhancing the regulatory framework for dietetics in Ontario and promoting safe, competent and ethical professional practice. Recognizing the diverse and modern values of society, this adaptable plan for growth will allow the College to meet the expectations of the public and fulfill its mandate.

## Definitions

**Governance:** The structures, policies and processes in place that allow an organization to make decisions. For the College, this includes the processes in which people are elected or appointed to Council and Committees, Council and Committee composition and the approach to decision-making.

**Harm reduction:** (*Adapted from the UK Professional Standards Authority*) In professional regulation, harm reduction refers to the focus on actual and specific serious harms and how to prevent them. A regulatory "harm reduction" approach involves identifying 'hazards' – factors that can cumulate, contribute and result in harm occurring. In the context of healthcare professional regulation these hazards could include those relating to:

- The competence, health, or wellbeing of individuals involved when such harms occur
- The vulnerability of a patient or patient group
- The state of professional relationships within a team
- The features of the working environment or employing organization

**Professional self-regulation:** A model of regulation where the government has delegated its regulatory functions to those who have the specialized knowledge necessary to do the job – members of the profession. The granting of self-regulation acknowledges a profession's members can govern themselves. As a condition of granting regulatory power, the regulatory body is required to regulate the profession in the public interest. This regulatory model enables the government to have some control over the practice of a profession and the services provided by its members but without having to maintain the special in-depth expertise required to regulate a profession that would be required under direct regulation.

Self-regulation is a privilege granted because the government trusts the professionals to put aside their self-interest in favour of promoting and protecting the public interest. The fundamental principle of professional self-regulation is that it must be done in the public interest. The primary purpose behind all activities should be to protect the public from incompetent or unethical practitioners and to ensure

the effective provision and access to professional services. The purpose of professional self-regulation is not to advance the interest of the profession and its members.

**Public interest:** Minimizing and mitigating the risks to the public stemming from the practice of a profession. The public, not members of the profession, are the intended beneficiaries of professional self-regulation.

**Risk-based regulation:** An approach to regulation in which the regulator focuses on the principles of risk-management as a framework for governance, the organization of regulatory work and resources. It involves focusing on the specific and relevant risks of harm rather than a general commitment to the public interest.

**Right-touch regulation:** *(Adapted from the UK Professional Standards Authority)* The minimum proportionate regulatory force required to achieve the desired result. Right-touch regulation ensures that the level of regulation is proportionate to the level of risk to the public.

The principles of right-touch regulation are:

- Identify the problem before the solution
- Quantify and qualify the risks
- Get as close to the problem as possible
- Focus on the outcome
- Use regulation only when necessary
- Keep it simple
- Check for unintended consequences
- Review and respond to change

## Understanding the Wider Landscape

Environmental Scans were used to provide a current and comprehensive view of the regulatory landscape and dietetic practice in Ontario. The scans analyzed sector trends, member demographics, shifts and challenges in dietetic practice environments and anticipated changes to modernize the oversight of healthcare workers in Ontario.

The following trends that were identified by the environmental scans contributed to the formation of the 2020-24 Strategic Plan:

### **Public skepticism about professional self-regulation such as:**

- The public may not trust regulatory bodies to ensure healthcare professionals provide safe and effective care.
- Lack of meaningful measurement and reporting, including a lack of evidence of health systems outcomes.
- The amount of health regulatory colleges in Ontario is confusing, inefficient and expensive. It can be challenging for the public to know where to go if they have concerns and the inconsistency in processes between the colleges adds to the problem.
- Insufficient public engagement.
- Some healthcare professionals are not being used to their fullest capacity, resulting in a shortage of care providers, higher costs to receive services and increased delays and wait times.
- Not all healthcare providers are regulated, which exposes patients to risk.

### **Challenges to the public healthcare system:**

- Decreased funding to the public healthcare system is affecting the availability of dietetic services and an increasing reliance on non-regulated individuals to deliver services previously provided by dietitians.
- There may be fewer jobs for dietitians in hospitals which may deter those considering studying the profession.
- Some healthcare professionals unaware of how to best use the expertise of dietitians.
- Dietitians are unable to work to the full extent of their skillset because of the restrictions imposed by the regulatory scheme.

### **Population changes and patient needs:**

- Aging baby-boomers.
- Geographic distribution of Canadians.
- Diverse Canadian population requires dietitians to effectively adapt interventions to meet client needs.
- Patients want to choose between healthcare providers.
- Increase in childhood obesity and associated illnesses resulting in a range of obesity-related health conditions in young people, previously only seen in adults.

**Adapting to technology:**

- Increase in digital technology being used to provide healthcare.
- Tele-practice.
- Use and development of electronic records will increase patient access to their own information and encourage data collection.
- Nutrigenomics: a scientific discipline that uses modern genomics technology to study the relationship between genes, nutrition and health.

**Evolving regulatory considerations:**

- Modernization of professional self-regulation.

The Environmental scans and stakeholder feedback were used as the basis of the College's strategic planning sessions and provided contextual elements for decision-making.