



Board Meeting Agenda

November 28, 2025 | 9 a.m. – 4 p.m.

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Item	Time	Topic	Action	Presenter	Materials
1	9 – 9:05 (5 mins)	Call to Order and Land Acknowledgement	-	Chair	
2	9:05	Approval of Agenda	Decision (motion)	Chair	2 Draft Agenda – November 28, 2025
3	9:05	Declaration of Conflict of Interest and Bias	-	Chair	
4	9:05	Consent Agenda 4-1 Draft Board Meeting Minutes – September 5, 2025 4-2 Executive Committee Report – November 2025	Decision (motion)	Chair	4-1 Draft Board Meeting Minutes – September 5, 2025 4-2 Executive Committee Report – November 2025
5	9:05 – 9:35 (30 mins)	Management Report	Information	M. Woodbeck	5-1 Management Report 5-2 Statement of Operations as at September 30, 2025 5-3 Capital Asset Report as at September 30, 2025 5-4 Risk Monitoring Report (Q3) 5-5 Briefing Note – KPI Dashboard
6	9:35 – 9:50 (15 mins)	Board Workplan and Training Calendar	Information	M. Woodbeck	6 Briefing Note – Board Workplan and Training Calendar
7	9:50 – 10 (10 mins)	Safe Disclosure Policy	Decision (motion)	L. Dalicandro	7 Briefing Note – Safe Disclosure Policy
8	10 – 10:10 (10 mins)	Election Voting Clarification	Decision (motion)	L. Dalicandro	8 Briefing Note – Election Voting
	10:10–10:30 (20 mins)		Break		
9	10:30 – 12 (90 mins)	Governance review	Discussion	B. O’Riordan M. MacNiven	9 Briefing Note – Governance Review Report
	12 – 1 (60 mins)		Lunch		



9	10:30 – 12 (90 mins)	Governance review	Discussion	B. O'Riordan M. MacNiven	9 Briefing Note – Governance Review Report
	12 – 1 (60 mins)		Lunch		
10	1 – 1:20 (20 mins)	Health Professions Discipline Tribunal • Bylaw revisions • Committee appointments • Rules of Procedure (information)	Decision (motion)	M. Woodbeck	10-1 Briefing Note – HPDT Bylaw Updates 10-2 Briefing Note – HPDT Committee Appointments 10-3 Briefing Note – Rules of Procedure
11	1:20 – 1:50 (30 mins)	Toronto Metropolitan University Bridging Program	Decision (motion)	E. Lew	11 Briefing Note – TMU Bridging Program
12	1:50 – 2:05 (15 mins)	Revisions to registration policy 2-25: Suitability to Practise for Applicants	Decision (motion)	E. Lew	12 Briefing Note – Revisions to Registration Policy 2-25
13	2:05 – 2:20 (15 mins)	Revisions to registration policy 2-80: Authorization to Work in Canada	Decision (motion)	E. Lew	13 Briefing Note – Revisions to Registration Policy 2-80
14	2:20 – 2:35 (15 mins)	Revisions to registration policy 4-25: Recognition of “Dietitians Australia” Accredited Practising Dietitians	Decision (motion)	E. Lew	14 Briefing Note – Revisions to Registration Policy 4-25
15	2:35	Adjournment	Decision (motion)	Chair	

[0.0 Reference - Land Acknowledgement](#)

[0.0 Board Action List as of November 14, 2025](#)

[0.0 CDO Acronyms](#)

[0.0 Reference - 2025-2029 Strategic Plan - One Pager](#)

[0.0 Reference Doc CDO Board Voting Practices](#)



Board Meeting Minutes

September 5, 2025 | 9 a.m. – 2:30 p.m.

Board Members Present

Denis Tsang RD
Ann Watt RD
Deion Weir RD
Dawn van Engelen RD
Galina Semikhnenko, Public Member
Ray D'Sa, Public Member
Santhikumar Chandrasekharan, Public Member
Teresa Taillefer RD
Susan Bodner, Public Member
Cheryl Lake, Public Member
Zaw Thiha Tun, Public Member

Regrets

Navita Viveky RD

Staff

Melanie Woodbeck
Lisa Dalicandro
Jada Pierre-Malcolm
Sarah Golden-Yu

Guests

Michael Rooke
Greg Kroeplin
Maureen Boon
Sean Adderley
Brian O'Riordan
Maia MacNiven

1. Call to Order and Land Acknowledgement

D. Tsang opened the meeting with a Land Acknowledgement.

The meeting was called to order at 9:12 a.m. by D. Tsang, Chair of the Board.

2. Approval of the Agenda

MOTION to approve the agenda as circulated.

Moved by: D. Weir

Seconded by: T. Taillefer

Carried



3. Declaration of Conflict of Interest and Bias

No conflict of interest or bias was declared.

4. Consent Agenda

Board Meeting Minutes

June 19, 2025

Board Meeting Minutes

June 20, 2025

Executive Committee Report

August 2025

Committee Appointments

Committee revisions

MOTION to approve the Consent Agenda.

Moved by: T. Taillefer

Seconded by: D. Weir

Carried

5. Audited Financial Statement Presentation

The Statement of Investment Policies and Procedures (SIPP) establishes guidelines for the College's investment holdings, which the auditors found that CDO was in non-compliance during the March 31, 2025 audit. CDO has already begun the process of transitioning investment management to a new advisor, Foyston, Gordon & Payne, which will include rebalancing to align with the SIPP. The Finance and Audit Committee recommended that the Board pass a motion to approve a temporary exception to the SIPP until the transition to the new investment advisor, Foyston, Gordon & Payne, is complete.



MOTION to approve a temporary exception to the Statement of Investment Policies and Procedures to permit the current concentration in Royal Bank of Canada and Brookfield Corporation securities until the transition to the new investment advisor is complete.

Moved by: T. Taillefer

Seconded by: D. Weir

Carried

Public interest rationale: Approving a temporary exception to the investment policy ensures transparent, accountable fund management during the transition to new advisors, balancing prudent oversight with continuity to safeguard resources and protect the public.

College Auditors, M. Rooke and G. Kroeplin, Tinkham LLP, presented the audited financial statements for the year ended March 31, 2025. The results of the audit concluded that the financial statements fairly present the financial position of the College as at March 31, 2025. No misstatements or unadjusted items were found and there were no recommendations to improve the internal control processes.

MOTION to approve the audited financial statements for the year ended March 31, 2025 as presented.

Moved by: S. Chandrasekharan

Seconded by: D. van Engelen

Carried

Public interest rationale: The review of the College's financial statements will ensure its long-term sustainability and effectiveness at fulfilling its regulatory mandate.

6. Interfund Transfer

The Board considered a recommendation by the Finance and Audit Committee to create a new, internally restricted, IT Reserve Fund to support investments in

infrastructure, digital modernization, cybersecurity, and significant IT initiatives beyond the annual operating budget.

It was recommended that the initial funding amount for the IT Reserve Fund be \$529,252 sourced from the 2025 year-end surplus. The transfer was calculated by transferring \$529,252 from the General Reserve Fund to the new IT Reserve Fund, effective April 1, 2025, and then transferring \$529,252 from the Operating Fund to the General Reserve Fund effective March 31, 2025. These proposed transfers comply with the Reserve Fund Policy and reflect disciplined and transparent fund management. The Board did not have any concerns with Committee's recommendation, however it was noted that should any significant IT changes occur, the College's insurers would need to be involved in the discussion.

MOTION to approve the creation of a new information Technology (IT) Reserve Fund.

Moved by: D. van Engelen

Seconded by: S. Chandrasekharan

Carried

MOTION to approve the transfer of \$529,252 from the Operating Fund to the General Reserve Fund, based on the draft audited financial statements for the fiscal year ending March 31, 2025.

Moved by: D. van Engelen

Seconded by: T. Taillefer

Carried

MOTION to approve the transfer of \$529,252 from the General Reserve Fund to a newly established Information Technology (IT) Reserve Fund, effective April 1, 2025.

Moved by: D. Weir

Seconded by: T. Taillefer

Carried

Public interest rationale: Establishing a new IT Reserve Fund will support the College's long-term sustainability and regulatory mandate by dedicating resources for



technology, digital modernization, and cybersecurity, strengthening its operational resilience and public protection.

7. Appointment of the Auditors

The Finance and Audit Committee recommended the reappointment of Tinkham LLP as auditors for the 2025-2026 fiscal year. To reduce the risk of familiarity, it was emphasized that there would be a change in the partners in charge of overseeing the audit process.

MOTION to approve the reappointment of Tinkham LLP as the External Auditors for the period April 1, 2025 to March 31, 2026, as recommended by the Finance and Audit Committee.

Moved by: D. Weir

Seconded by: T. Taillefer

Carried

Public interest rationale: The Board has a fiduciary duty to provide oversight of the College's financial management and risk practices. Reviewing and reappointing the External Auditor annually supports the public interest by ensuring the Finance and Audit Committee and the Board maintain strong governance and oversight of financial matters.

8. Management Report

M. Woodbeck provided an overview of the management report, including:

Operations and Communications

- CDO's investment advisor transition to Foyston Gordon Payne is nearly complete, with no investments having to be sold.
- Completed the launch of the Board and Committee Sharepoint site and have fully transitioned to using CDO emails for board and committee work.
- The launch of the staff Sharepoint site is currently underway.

- The upcoming annual staff training day will focus on plain language initiatives, which support CDO's strategic objectives and the KPI focusing on reading level for communications.

Professional Practice

- CDO is launching two focus groups in September to obtain feedback from RDs about the College's proposal to expand the dietetic scope of practice to include lab ordering and prescribing
- The 2025 workshop for RD's will focus on cultural humility and include a pilot for a new workshop format, with two complementary 1-hour workshops offered over the lunch hour aimed at increasing engagement.
- Completed the draft updated billing standards.

Registration

- CDO is working to update processes to align with new registration regulation updates that require those with temporary licenses who pass the exam to transition to a general certificate of registration within 30 days of receiving results.
- Discussions with Toronto Metropolitan University regarding a bridging program to close any gaps in knowledge or skill for internationally trained applicants who undergo the PLAR as a route to registration is underway.
- The annual renewal was successfully launched on September 1, following a refresh of the applicant portal and all the templates to align with the updated branding and logo.

Governance and Strategy

- CDO now has a balanced board, with 6 public and 6 professional members, following the appointment of Cheryl Lake and Zaw Thiha Tun.
- Completed chair training for all current CDO chairs, and committees will now be using the pulse check technique adopted by the board after each meeting.
- Developing a registrant survey for a fall launch aimed at strengthening engagement and gathering direct input from RDS to inform upcoming work and achievement of the strategic plan.

Risk Oversight and Regulatory

- HPRO held its annual meeting in late June, where M. Woodbeck shared CDO's governance modernization work. M Woodbeck was reappointed to the HPRO management committee for a second 1-year term.
- The ministry of health will be creating a working group to continue the discussion on feedback provided by HPRO colleges on the College performance measurement framework.
- The 'As of right' Labour Mobility proposal will proceed and require an update to the Dietetics Act, allowing dietitians in other Canadian jurisdictions to begin practicing in Ontario as soon as they submit an application (give that they also complete an attestation, meet the criteria, and hold insurance) and must complete their applications within 6 months.

Action items:

- Determine how back meeting minutes should be stored on SharePoint or consider another method to ensure committees can access case precedents.

Public interest rationale: The Board has a fiduciary duty to CDO, which includes providing assurance that the College's operations facilitate its public protection mandate.

9. Health Professions Discipline Tribunal

Maureen Boon, Registrar of the College of Massage Therapists (CMTO), and Sean Adderley, Chair of CMTO's board, presented their experience as participants of the Health Professions Discipline Tribunal (HPDT).

The Board considered the feedback from CMTO, including the benefit of having an experienced adjudicator, which would replace the need to have independent legal counsel. The Board agreed that it would be beneficial to participate in a one-year pilot, and that it would be funded through the operational budget, and if need be, the discipline hearing fund.

The Board agreed that the results of the tribunal participation would be reviewed in one year and next steps would be determined.



MOTION to approve CDO's participation in the HPDT, in principle, for the purpose of bylaw revisions.

Moved by: D. Weir

Seconded by: D. van Engelen

Carried

Action items:

- Update Bylaw 1 to reflect CDO as part of the HPDT
- Review participation after one year

Public interest rationale: Joining a 3rd party, independent, administrative tribunal to adjudicate allegations of professional misconduct or incompetence strengthens public protection by ensuring disciplinary processes are fair, consistent, transparent and independent. Sound disciplinary processes are central to effective regulation in the public interest.

10. Billing Standards

The Board considered the final Professional Billing Standards and Practice Guidelines, which were informed by environmental scans, consultations with registrants and system partners, legal counsel, and a survey with the Citizen Advisory Group (CAG).

The consultations revealed that 91% of participants agreed that the draft Billing Standards and FAQs were clear and comprehensive, and 94% agreed the performance expectations for dietitians were reasonable. Feedback also revealed that the draft Billing Standards required some plain language revisions and linking the Standards and FAQs clearly, which were subsequently implemented. The Board accepted the final Professional Billing Standards and Practice Guidelines and agreed that they would support dietitians in setting reasonable fees.

MOTION to approve the final Billing Standards for publication and communication to the public and registrants.

Moved by: S. Chandrasekharan

Seconded by: D. van Engelen

Carried

Public interest rationale: Billing Standards support the College's mandate to protect the public and promote professional accountability, transparency and equity.

11. Overview of the Standards and Guidelines Policy Cycle

C. Chatalalsingh provided the Board with a high-level overview of the College's Standards and Guidelines Policy Cycle, and how the new Equity Policy Development Tool (EPDT) supports equity-informed policy development and review. The Board was provided with an overview of the policy cycle and how the process adapts to new data, regulatory changes, and system partner input. The presentation also explained how the EPDT, a practical checklist that helps identify potential barriers, considers accommodations, and increases transparency in decision-making, works to integrate equity considerations at each stage of the cycle.

Public interest rationale: Understanding the policy cycle strengthens the Board's ability to provide effective oversight, ensure standards remain relevant, and uphold the College's public protection mandate. The EPDT ensures equity, diversity, inclusion, belonging (EDI-B), and accessibility are embedded at every stage.

12. Registration Policy Revisions

Policy 2-30: Competency Standards and Accrediting Bodies

In May 2025, changes to the registration section of the Dietetics Act were approved, which require applicants to have either: completed an accredited Canadian program in dietetics and accredited practical training; or successfully complete the prior learning assessment. These updates require revisions to be made to a number of CDO registration policies.

Accordingly, revisions were made to *Policy 2-30: Competency Standards and Accrediting Bodies* that removes the recognition of Accreditation Council for Education in Nutrition and Dietetics (ACEND) as an accepted accreditation body. The Board accepted these revisions.

MOTION to approve the revisions to Policy 2-30: Competency Standards and Accrediting Bodies

Moved by: D. van Engelen

Seconded by: T. Taillefer

Carried

Policy 4-20: Applicants from Accreditation Council for Education in Nutrition and Dietetics (ACEND) Accredited Programs

In 2023, a review between the 2020 Integrated Competencies for Dietetic Education and Practice (ICDEP) and ACEND's program competencies was conducted, which found evidence of substantial equivalence between the 2020 ICDEPs and the ACEND Future Education Model (FEM) programs, but a lack of evidence of substantial equivalence between the 2020 ICDEPs and *other* ACEND accredited credentials (DPD, DI, CP and FDE),

Policy 4-20: Applicants from Accreditation Council for Education in Nutrition and Dietetics (ACEND) Accredited Programs provides a pathway to registration for applicants who have completed specified training in the U.S. The policy was amended to recognize applicants who are licensed and educated in the U.S. to have completed the PLAR process. It also revised the requirement of Commission on Dietetic Registration (CDR) licensure in combination with specific ACEND credentials:

- ACEND accredited degrees and practical training obtained prior to August 31, 2025 will continue to be recognized
- Degrees obtained after August 31, 2025, only ACEND accredited Future Education Model (FEM) degrees will be recognized

The Board accepted these revisions.

MOTION to approve the revisions to Policy 4-20: Applicants from Accreditation Council for Education in Nutrition and Dietetics (ACEND) Accredited Programs

Moved by: D. van Engelen

Seconded by: S. Chandrasekharan

Carried

Policy 4-25: Applicants Currently Registered with full Accredited Practising Dietitians status with Dietitians Australia

At the August 16, 2023, meeting, the Registration Committee approved the continued recognition of Dietitian Australia's Accredited Practising Dietitians (APD) status as equivalent to meeting the standards for entry-level practice in Canada following a review that demonstrated substantial equivalence between the Canadian and Australian entry-level competencies.

Policy 4-25 Recognition of "Dietitians Australia" Accredited Practising Dietitians (APD) was amended to recognize applicants who are registered with Dietitians Australia and hold full Accredited Practising Dietitians (APDs) status to have completed the PLAR process. The Board accepted these revisions.

MOTION to approve the revisions to Policy 4-25: Applicants Currently Registered with full Accredited Practising Dietitians status with Dietitians Australia

Moved by: D. van Engelen

Seconded by: G. Semikhnenko

Carried

Policy 6-10: Prior Learning Assessment and Recognition (PLAR)

The new regulations require applicants to have completed an accredited Canadian program in dietetics and accredited program of practical training or successfully complete the prior learning assessment.

Policy 6-10: Eligibility for Prior Learning Assessment and Recognition (PLAR) sets out the criteria for the prior learning assessment and the different routes on how an applicant will be found to have successfully completed the (PLAR) process. The revised policy refers to the specific policies on how U.S dietitians (policy 4-20) and how Australian dietitians (policy 4-25) may be deemed to have completed the PLAR process. The Board accepted these revisions.



MOTION to approve the revisions to Policy 6-10: Prior Learning Assessment and Recognition (PLAR)

Moved by: S. Chandrasekharan

Seconded by: D. van Engelen

Carried

Public interest rationale: Ensuring that the College's Registration policies appropriately assess entry to practice competencies helps guarantee that only applicants capable of providing safe, ethical, and competent care are registered with the CDO.

13. Governance Review Introduction

In August 2025, TBG MacNiven was retained to conduct CDO's governance review as per the Board's evaluation and education policy that requires a third-party consultant to evaluate the Board's governance every three years. The scope of the review, which was presented to the Board at its March meeting, is to evaluate the effectiveness of CDO's ability to meet its public interest mandate.

B. O'Riordan and M. MacNiven of TBG MacNiven provided an overview of the planned approach for the governance review, including the upcoming interviews with Board members and the plan to present the final report to the Board in November.

Board members requested to receive the interview questions in advance to allow for better preparation.

Public interest rationale: Good governance supports sound decision-making and assures the public that CDO operates fairly, transparently, and accountably. A targeted review will objectively assess current practices and identify opportunities to strengthen CDO's effectiveness in serving the public interest.

14. Adjournment

MOTION to adjourn at 1:31 p.m.



Moved by: D. Weir
Carried

DRAFT



Executive Committee Report

Date: November 2025

Board Members Present

Denis Tsang, RD (Chair)
Ann Watt, RD
Teresa Taillefer, RD
Galina Semikhnenko, Public Member

Staff

Melanie Woodbeck (Registrar & ED)
Lisa Dalicandro
Sarah Robinson-Yu

Regrets

Executive Committee met on the following date(s)	Rationale for the Meeting
November 5-7, 2025 (via email)	Email circulation and approval of board agenda

Summary of Discussions and Decisions	Decision to be Ratified by Board?
Approved the Draft Board Agenda for the November Board Meeting	Yes

Respectfully Submitted,
Denis Tsang, RD
Board Chair

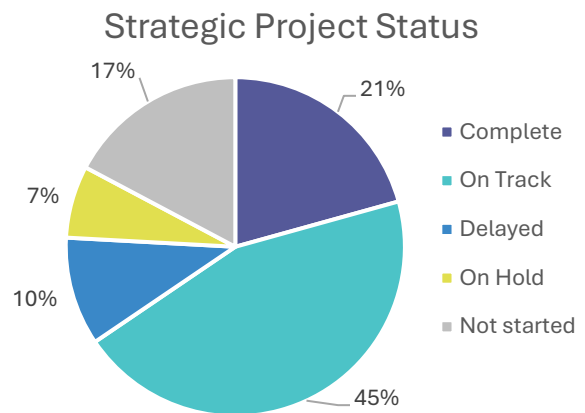
Management Report

August 9, 2025 – October 31, 2025

Strategic Projects

Highlights

- The development of the staff SharePoint site is underway but delayed due other strategic projects being prioritized. The new launch date is scheduled for Q4 2026.
- Operationalizing the emergency class of registration on the public register is on hold until a new database solution is identified.
- The 2025 governance review is complete. The final report will be presented to the board in November.
- Proposed changes to the RD scope of practice have been identified that, if approved, will improve healthcare access and reduce pressures on the system. A proposal to expand the RD scope of practice to include prescribing and lab ordering authority has been submitted to the Ministry.



Updates and Upcoming Work

- A safe disclosure policy (whistleblower policy) has been approved by the Governance Committee and will be presented to the board in November.
- RD focus groups were conducted in September to validate the proposed scope expansion's impact on practice and patients, and to highlight safeguards that may be required. The information from the focus groups will be used to strengthen the scope of practice expansion submission.
- A survey was launched from October 16 – November 10 to collect feedback on registrants' perspectives of CDO's effectiveness as a regulator and gather feedback on the proposed scope of practice expansion. An analysis of feedback is underway.
- A committee management guide is under development, which will standardize committee practices and materials. The guide is expected to launch in Q4 2026.
- Database options are being considered and it is anticipated that a decision will be made in Q4 2026.

- Planning for the 2026 board elections is underway, with the first call for applications opening on January 15, 2026.

Status	Project	Goal
Complete	Operationalize new investment policy and review options for investment management.	1
On track	Create policy review cycle/mapping for governance and corporate services policies	1
Not started	Initiate procedure documentation for succession planning.	1
On track	Develop a whistleblower policy	1
On track	Standardize committee management practices across all committees	1
Complete	Conduct a third-party governance review	1
On track	Pursue nutritionist title protection	1
Not started	Review EDI-B approach	1
Not started	Develop a new suite of CDO educational videos for use on social media	1
On track	Pursue RD scope expansion	2
On hold	Identify a process to collect registrant demographic data collection	2
On track	Revise registration policies to reflect changes to the registration regulation	2
On hold	Operationalize emergency class of registration to public register	2
Not started	Initiate wholesale review of the PLAR process	2
On track	Review and revise the OSAT for alignment with 2020 ICDEPS	2
On track	Initiate the development of a new JKAT blueprint	3
On track	Identify a new platform to host the JKAT	3
Complete	Relaunch Peer and Practice Assessments (PPA)	3
On track	Refine the SLD Tool review process to align with new risk-based QA tools	3
On track	Develop a priority-based review cycle for professional practice articles and policies, including monitoring, evaluation, and EDI-B assessment	3
Delayed	Finalize file map and records retention policies	Enabler
Delayed	Migrate to SharePoint	Enabler
Not started	Develop user policies for Microsoft Teams	Enabler
On track	Identify database solution	Enabler
Complete	Update registrant portal with new branding	Enabler
Complete	Deliver the annual workshop	Enabler

Delayed	Launch new CDO corporate stylebook	Enabler
Complete	Develop new social media strategy	Enabler
On track	Optimize website	Enabler

Corporate Services

Human Resources, EDI-B, Information Technology & Finance

Highlights

- Hannah Park joined the College as the Quality and Practice Program Administrator on September 22.
- A staff education day was held on September 25. The training focused on writing in plain language writing, supporting CDO's commitment to transparency by developing internal communication skills and aligning with the upcoming CDO corporate stylebook.
- Some CDO staff participated in a 2-day plain language decision writing workshop with other health regulatory professionals across several Colleges.
- CDO continues to strengthen its work in Equity, Diversity, Inclusion, and Belonging (EDI-B). The [EDI-B webpage](#) was updated to highlight the recent work in this area. Through ongoing learning, updated policies, and the inclusion of EDI-B principles in the 2025–2029 Strategic Plan, CDO is improving how it serves and protects the public while supporting registrants to provide culturally safe and fair care.
- CDO has started working with its new investment advisor, Foyston, Gordon and Payne (FGP). A new investment account was set up on October 10. One investment, a guaranteed investment certificate valued at \$629,469.54, will stay with RBC Securities until it matures on December 29, 2025, with an interest rate of 4.45 percent.
- With the transition to FGP, CDO's investments will now follow the parameters set out in the Investment Policy. This change supports CDO's goal of strong financial management and making sure investments match its long-term goals and level of risk.
- Revenue from the 2025 renewal season is on track. This steady progress supports our financial stability heading into the next fiscal year.

Updates and Upcoming Work

- An internal policy on the responsible use of AI is under development. The policy will provide guidelines for staff on the responsible, ethical, and secure use of AI within CDO.



Finance Updates

- RBC Securities: The total market value of the investment portfolio as at September 30, 2025, was \$4,985,930.60.
 - Cash: \$19,394.09 (.39%)
 - Fixed Income: \$3,612,320.51 (72.45%)
 - Preferred Shares: \$1,354,216.00 (27.16%)
- Financial results (Year ended September 30, 2025):
 - Surplus: \$319,523
 - Operating income: \$306,501
 - Investment Gains/Losses:
 - Realized loss: (\$7575)
 - Unrealized gain (Fair Value): \$29,922
 - Note: Investment results reflect a net decrease due to market volatility during Q2 (March to September 2025).
- Membership fees are 1% above budget and up 3% the same period last year (September 30, 2024).
- Interest and dividend income is 49% above budget, but 93% above the same period last year (September 30, 2024).
- Total operating expenses are 11% below budget and 1% above the same period last year (September 30, 2024).

Statement of Operations attached.

Audit Committee

- Nothing to report.

Communications

Highlights

- A Social Media policy was finalized that provides a framework for changes to CDO social media channels. The policy includes a framework to transition from platforms that do not align with CDO's values, and the introduction of new functions (such as video).
- New email signatures have been implemented as another stage in the evolution of CDO branding and style of written communications.

Updates and Upcoming Work

- Work on the CDO corporate stylebook continues, which will be launched in Q3.
- The annual report will be published in Q4.

Engagement

- 174 social media messages were posted in both English and French, averaging one post every two days, across all five social media channels.
- The total number of followers/fans is 5,641 (up by 109 new followers since last quarter) most of which were for our LinkedIn page.
- Our best performing post was that of International Day of Awareness of Food Loss and Waste, followed by a post honouring National Day for Truth and Reconciliation.

Professional Practice Program

Practice Advisory & Quality Assurance

#150	+ 27	Themes
Practice Advisory Service	from last reporting	1. College Requirements & Processes
Inquiries	period	2. Authority Mechanisms
		3. Scope of Practice and Privacy

Highlights

- The Peer and Practice Assessment (PPA) was relaunched and updated to enhance clarity, relevance, and participant experience.
 - 20 RDs selected via proportional stratified sampling
 - 17 RDs completed the assessment
 - 1 RD requested an extension
 - 2 RDs resigned
 - 1 RD deferred the assessment
- Presented PPP and College updates at the in-person annual meeting for the Clinical Nutrition Leaders Action Group, hosted by the CDO at HUB601. The group is comprised of clinical nutrition practice leaders and managers across Ontario. The meeting provided an opportunity for RD leaders to engage with CDO, educators, and each other, and to discuss clinical and leadership topics.
- 2025 Annual Workshop & Panel Series – Truth & Reconciliation:
 - ~1,200 dietitians and dietetic students participated across five provinces.
 - Part 1 (Oct 3): Truth – The Coin Model of Privilege and Critical Allyship (339 attended). Speakers: Drs. Stephanie Nixon and Ed/Tecumseh Connors

- Part 2 (Oct 23): Reconciliation Panel – Indigenous teachings, storytelling, and culturally responsive care (256 attended). Speakers: Dr. Ed/Tecumseh Connors and Kelly Gordon, RD.
- Delivered in collaboration with regulatory partners in Saskatchewan, Nova Scotia, New Brunswick, and Newfoundland & Labrador.
- Attendees found the speakers engaging and appreciated how they were able to communicate the information in a way that resonated with everyone's level of understanding.
- Registrants completed the Self-Directed Learning (SDL) tool from September 1 – October 31, as part of the annual renewal process.
 - 93 RDs signed VUTs
 - 97 RDs were exempt
 - 4,343 RDs (94%) completed the tool

Updates and Upcoming Work

- An infographic to help communicate the Equity Policy Development Tool and how it is used to shape CDO policy, standards and guidelines, is under development.
- The Practice Improvement Assessment (PIA) and Risk Practice Reflection Questionnaire (RRQ) will be implemented in the IT platform.
- The billing standards will be published on CDO's website in November, and registrant communications created.
- Presentation to the ICRC on the new billing standards.

Quality Assurance Committee

- The Committee met on October 9 to:
 - Approve changes to the JKAT Eligibility and Completion Process Policy, to align with the Registration Committee's new Prior Learning Assessment and Recognition (PLAR) policy. The policy now reflects that applicants are no longer required to complete the JKAT prior to becoming registered. The PLAR policy was approved by the board in June 2025
 - Approve process updates to the SDL tool, including revised review criteria and refining processes to improve usability and relevance.
 - Reviewed PPA reports and provided feedback.
- The Committee will meet on December 5 to determine the competence of the RDs who declared practicing fewer than 500 hours over the past three years.

Professional Practice Committee

- Nothing to report.

Registration Program

Highlights

- The Canadian Dietetic Registration Exam was administered on November 6 and 7.
- Annual meeting with OFC occurred on October 29, 2025. The College continues to maintain the low-risk rating as the OFC updates their Risk-informed Compliance Framework (RICF).
- The 2025 annual renewal period closed on October 31. As of November 20, 2025, 96.41% registrants have renewed and 3% has resigned/retired.
- The 2025 Performance Based Assessment (PBA) results were released on November 5.
- On November 3, 2025, Bill 56 received Royal Assent, which paves the way for “As of Right” provisions. Under “As of Right,” Dietitians registered with a general certificate in another province may submit an application form and attestation to the College and begin to practice in Ontario for up to 6 months, prior to a certificate being issued. To facilitate “As of Right,” the [Dietetics Act](#) has been updated to allow for these applicants to be exempt from the title protection and holding out provisions. The legislation also makes provision for additional regulations to be made by the Minister.

Updates and Upcoming Work

- The Knowledge Competency Assessment Tool (KCAT) was administered on September 10 with results expected to be released mid-November. The next KCAT is scheduled to be administered on February 4, 2026
- Create an attestation form and develop public communications on “As of Right” provisions.

Registration Committee

- The Committee met on October 28 to consider policy revisions and the proposed Internationally Educated Professionals in Nutrition program. The Committee will be recommending the following to the Board at its November meeting:
 - Policy revisions to Policy 2-25: Suitability to Practise for Applicants
 - Policy revisions to Policy 2-80: Authorization to Work in Canada
 - Policy revisions to Policy 4-25: Recognition of Dietitians Australia Accredited Practising Dietitians
 - Approval and recognition of the Internationally Educated Professionals in Nutrition program as an approved bridging program

Standards & Compliance Program

Highlights

- CDO's external investigator roster was expanded to improve timelines around investigations.

Inquiries, Complaints & Reports Committee

2 New matters received (- 2 from last reporting period) 0 Complaints 1 Reports 0 QAC referrals 1 Inquiries	2 Matters closed at preliminary review stage	
5 Matters closed by ICRC 2 Complaints 2 Reports 1 QAC Referrals 0 Inquiries	ICRC dispositions 2 No further action 2 SCERPs 1 Written reminder	
11 Matters open 1 Complaints 9 Reports 0 QAC referrals	6 Decisions reviewed by HPARB 5 Files at the initial case conference stage	237 days Average time for disposal (all matters)

1 Inquiry	1 File awaiting decision	274 days Average time for disposal (complaints)
3 Registrants monitored for compliance 1 Registrant entered an undertaking with CDO 2 Registrants are completing SCERP		

Discipline Committee

- Nothing to report.

Fitness to Practice Committee

- Nothing to report.

Patient Relations Committee

- Nothing to report.

Governance

Highlights

- Nothing to report.

Updates and Upcoming Work

- The 2025 governance review is complete, and the final report with recommendations will be presented to the board in November.
- The 2026 board election cycle will begin January 15, 2026, with the first call for applications. The voting period will close April 15, 2026.

Governance Committee

- The Governance Committee will be meeting on November 4 to:
 - Receive the annual orientation and workplan overview

- Review the draft governance review report
 - Consider draft bylaw amendments to clarify election voting practices, for recommendation to the board
 - Consider a draft safe disclosure policy, for recommendation to the board
- The Governance Committee will meet in February to screen applications for election to determine eligibility.

Sector News

Regulatory, Government & Dietetics

Highlights

Legislative Update – Bill 56

Bill 56, which amends several health regulation statutes, received Royal Assent on November 3, 2025. Most of the provisions related to health regulation take effect on January 1, 2026, including those that support the implementation of an “As of Right” approach to becoming licensed in Ontario, which will allow practice and use of title in Ontario for up to six months, if the RD is registered in good standing in another Canadian province. If the applicant is subject to terms, conditions, and limitations in their home jurisdiction, the Registrar can impose similar terms, conditions, and limitations. If the applicant provides incomplete (or false) information about their conduct, the Registrar can impose an interim suspension or terms, conditions, and limitations, subject to a review by the Registration Committee. The Bill does not specifically address remote practice by out-of-province individuals.

The Bill also includes other provisions relating to professional health regulatory bodies, including:

- Enabling regulations that would authorize chiropractors, dental hygienists, midwives, and optometrists administering (or possibly even prescribing) certain drugs.
- Enabling regulations that would allow members of additional professions to prescribe radiographs (denturists, dental hygienists, speech-language pathologists, physiotherapists, chiropractors, chiropractors)
- Enabling regulations that would allow other persons to use the titles of “psychologist” or “psychological associate.”

CPMF Working Group

The Ministry of Health has struck a working group of experts, college representatives (including CDO’s registrar) and ministry staff to refine the CPMF. At the first meeting, which

took place in October 2025, the working group discussed the principles to guide the review. Due to the ongoing review, reporting for the 2025 cycle will be put on hold and will resume in 2026. CPMF reporting in 2026 will cover both years.

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at Sept 30, 2025
FISCAL YEAR ENDING MARCH 31, 2026

	6 Months Ended					Comparative	
	Actual vs Sept 30, 2025	Total Annual Budget Sept 30, 2025	Actual vs Budget (Favourable/ Unfavourable)	Actual vs Budget % Variance	Total Annual Budget Mar 31, 2025	6 Months Actuals Sept 30, 2024	Sept 2025 vs Sept 2024 % Variance
REVENUE							
Membership & Other Fees (1)	\$ 1,608,465	\$ 1,589,959	18,507	1%	\$ 3,179,917	\$ 1,567,826	3%
Interest & Dividends (2)	89,951	113,200	23,249	49%	227,000	87,933	93%
TOTAL REVENUE	1,777,416	1,703,159	74,258	4%	3,406,917	1,655,759	7%
EXPENSES (Over/under)							
General & Administrative (4)	1,272,922	1,413,835	140,713	10%	2,827,269	1,254,578	1%
Registration Program (5)	64,734	59,451	5,283	30%	154,853	55,935	6%
Quality Assurance Program (6)	7,054	55,953	47,899	86%	111,906	21,367	-63%
Practice Advisory Program (7)	10,834	13,871	2,938	21%	27,143	14,477	100%
Patient Relations Program (8)	-	238	238	100%	475	-	-
Standards & Compliance Program (9)	114,715	85,200	29,515	33%	127,323	109,141	16%
TOTAL EXPENSES BEFORE AMTZN	1,471,319	1,662,469	191,150	11%	3,124,319	1,469,443	-1%
EXCESS REVENUE OVER EXPENSES (EXPENSES OVER REVENUE)	306,097	41,048	265,052		82,098	205,315	49%
Less: Non-cash expenses							
Capital Asset Fund - Amortization (10)	(9,324)	(7,500)	(1,824)	-24%	(15,000)	(10,996)	
Realized Gains/Losses on Sale of Investments (3)	(7,576)	-	-	-	-	(102,875)	-
Unrealized TV appreciation (depreciation) of Investments (3)	29,922	-	-	-	-	214,913	-
SURPLUS/(DEFICIT)	319,523	33,548	285,975		67,098	306,258	
FUND BALANCES - beginning of year	4,563,994	4,563,994	-		4,563,994	4,028,782	
FUND BALANCES - March 31, 2025	\$ 4,883,517	\$ 4,597,542	\$ 4,883,516	\$ 4,631,092	\$ 4,335,045		

NOTES and HIGHLIGHTS:

REVENUE

- (1) Revenues, Membership & Other Fees are slightly over budget at 1%. Membership fees are being recorded on an accrual basis to recognize revenue paid in fiscal year 2024 but earned from April 1 to Sept 30, 2025. Budget and prior year figures have also been adjusted to recognize 6 months of earned revenue. Overall, the favourable variance against the budget, revenues are up slightly by 3% compared to the same quarter last year.
- (2) Investment Income (Interest & Dividends) significantly exceeded budget expectations by \$65,851, indicating the strong performance of investments (dividends and interest income) held at RBC Dominion Securities during this quarter. Despite the favorable variance against the budget, revenues are up by 93% compared to the same quarter last year. This increase is indicative of potential changes in market trends.

EXPENSES

- (4) Total General and Administrative (G&A) expenses were 10% under budget, demonstrating effective cost management during this period. Moreover, G&A expenses increased by only 1% compared to the same period in 2023/2024, which indicates that spending remains in line with the previous year. This reflects the College's continued ability to maintain strong cost control relative to both budget and year-over-year projections. (See details below).
- Board expenses for the period ended Sept 30, 2025, totaled \$83,459, which was \$6,852 under budget, resulting in a favourable variance of 7% from the budgeted amount of \$89,511.
- Executive, Audit and Governance Committee expenses were 74% over than budgeted on average. (See details below).

The Executive Committee incurred expenses of \$7,313 in Q2, which is \$4,670 over the quarterly budget of \$2,644 (a 177% variance). The overage is primarily attributed to consultant fees in May and June to support RPCRC activities.

The Governance Committee expenses were \$5,188 (47% under budget), reflecting that much of its planned work is scheduled for later in the fiscal year. The Committee remains on track with its workplan. The governance review continues and emerging committee activities are scheduled to occur later in the fiscal year.

The Finance and Audit Committee expenses as of September 30, 2025, totaled \$960, slightly below the budget due to timing, as some committee meetings are scheduled to occur later in the fiscal year. The workplan remains on track and, overall spending aligns with program goals and the annual budget.

The Annual Report had no expenses during the period. These expenses are expected later in the fiscal year.

Staff development totaled \$11,523, coming in \$1,275 over the budget of \$10,250, resulting in an unfavorable variance of 12%. This is due to timing of staff training in plain language training.

Staff Travel expenses totaled \$87, which was \$213 under budget, resulting in a 78% favorable variance. These expenses are expected later in the fiscal year.

Membership dues totaled \$19,117, exceeding the budget by \$2,381, resulting in a 14% variance. This is due to invoice timing not unexpected costs.

Insurance expenses totaled \$3,096, coming in \$3,015 below the budget, resulting in a favorable variance of 49%. These expenses are expected later in the fiscal year.

Printing/Postage/Delivery expenses totaled \$777, which is \$1,073 below the budget, resulting in a favorable variance of 72%. The underspending reflects reduced mailing and printing needs during the reporting period.

Translation expenses had no expenses during the period. These expenses are expected later in the fiscal year.

Bank charges exceeded the budget by \$407, resulting in a 12% unfavorable variance. This variance is primarily due to slightly higher-than-expected service fees, reflecting general cost increases and pricing adjustments applied by service providers during the period.

Legal fees for general matters were under budget by \$2,142, resulting in a 39% favorable variance. Legal support for general matters is obtained as needed.

Professional Fees/Consultants totaled \$25,260, which is \$17,490 under than the budgeted amount of \$36,750, resulting in a favorable variance of 51%. These expenses are expected later in the fiscal year.

Office expenses totaled \$15,275, which is in line the budgeted amount of 10,000.

Rent expense reflects a variance of 0%, indicating that actual expenses are in line with the budget.

Telephone and Internet expenses reflect an unfavorable variance of 22%, with actual expenses totaling \$4,876 compared to the budgeted amount of \$4,000. This variance is due to an increase in service costs for subscriptions.

(6) Total Registration Program expenses were 30% under budget. (See details below)

Registration Program expenses in Q2 totaled \$60,018, significantly below the budgeted amount of \$87,289, resulting in a favourable variance of \$27,269 (31%). The main savings came from Bank Charges, Mailing, and Legal Fees, as well as from Temp/Contracted Services and Translation, where budgets were not yet been utilized. Additional expenditures are expected in October, particularly related to membership renewal activities. Some categories, including Staff Development, Other Consultants, and RCAT Honoraria, exceeded their budget allocations due to increased needs in these areas during the quarter. Registration (RCAT & PBA Honorarium and Expenses were over budget due to additional time and training required to support the administration of the PBA exams. Overall, expenses were well controlled, with most of the annual budget still to be spent in future quarters.

Registration Committee expenses for the second quarter totaled \$4,775, coming in \$388 under budget (8% below the allocated \$5,163). Consulting fees totaled \$675 against a budget of \$1,000, resulting in a favourable variance of 33%. With an annual budget of \$10,225 allocated to the Registration Committee, and \$4,775 already utilized. Most committee related expenses are expected to occur later in the year.

(6) Quality Assurance Program expenses were 88% under budget. (See details below)

Quality Assurance Program expenses for the quarter ended Sept 30, 2025 amounted to \$7,054 against a budget of \$45,862, resulting in a substantial favourable variance of \$38,264 (84% under budget). The largest savings are due to the absence of spending in several planned areas, as major program activities are expected to occur later in the fiscal year. Key cost lines such as Temp/Contracted Services, Translation, Assessor/Facilitator Training, PPA-JAAT Expenses, and 500 Hrs Assessor Honorariums were all on budget, reflecting stable and planned spending to date. Overall, expenses remain well controlled, and most of the annual budget is expected to be utilized in subsequent quarters of the fiscal year.

QA Committee expenses, during the second quarter, amounted to \$900, well below the budgeted \$10,000, resulting in a favourable variance of \$9,100 (91% under budget). The only costs incurred were related to per diem for meetings, preparation. Most activities are expected to take place following SDL Tool submission.

(7) Total Practice Advisory Program expenses were 21% under budget. (See details below)

Practice Advisory Program expenses totaled \$6,884, below the budgeted \$8,489, resulting in a favourable variance of \$2,605 (27%) under budget. The most notable unfavorable variance is in Legal Fees, which exceeded the budget by \$4,692 (61%) over budget, due to legal review related to the Billing Standards and CDMs. Other categories are either on budget or show no spending yet, as most activities are expected later in the fiscal year.

The Professional Practice Committee expenses in the second quarter totaled \$4,560, compared to a budget of \$4,383, resulting in a favourable variance of \$177 (4% under budget). Most of the spending was for per diem and the RCAT focus group. Within this total, expenses under PAF Committee: Communication Initiatives – RCATs totaled \$2,725, while only \$2,000 was budgeted for the full year. The spending supports the College's planned engagement activities for the scope of practice consultations.

(8) Patient Relations Program had no expenses.

(9) Total Standards & Compliance Program expenses were 33% over the budget. (See details below)

Standards and Compliance Program expenses totaled \$110,560, exceeding the budgeted \$67,859 by \$42,700 (64% over). The overage is primarily driven by legal fees of \$35,183, which were incurred for complex cases as required by the ICRC. Additionally, investigation costs came in over budget (\$36,094 vs. \$30,000), and case management expenses exceeded the forecast by 3%. ICRC expenses are difficult to predict. ICRC Committee expenses are under budget, totaling \$4,150 versus the allocated \$16,464.

The Disciplinary Committee had no expenses in the first quarter.

The Hearings Reserve Fund had no expenses.

(10) Amortization expense represents the cost of depreciating capital assets over time.

COLLEGE OF DIETITIANS OF ONTARIO
CAPITAL ASSET PURCHASES DRAFT BUDGET
FOR THE FISCAL YEAR ENDED MARCH 31, 2026

			\$	45,930.00	
	Budget 2025/2026		Actual Purchases F2026		DESCRIPTION
<u>I - Computer equipment (hardware) replacements</u>					
One (1) High Performance Laptop for multi-media creations	\$ 3,503.00	\$	3,708.28		1 laptop
		\$	553.82		3 tablets for board meetings (unbudgeted)
Subtotal (Computer Hardware)	\$ 3,503.00	\$	4,262.10		
<u>II - IMIS: Bursting Silver Branding & Programming Costs for Dashboard and Web tools</u>					
Coding and branding costs for registrant site (dashboard and web tools)	\$ 17,797.50	\$	-		Project was allocated to computer expenses in the operational budget
Subtotal (IMIS)	\$ 17,797.50	\$	-		
Capital Assets Purchases Budget F'2025-26	\$ 21,300.50	\$	4,262.10		

Q3 Risk Monitoring Report

November 2025



Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of November 14, 2025
Program	Examination Integrity (CDRE & CDO Assessments)	• Potential risks include concerns around breach, credibility, reputational, accessibility, equity and diversity and cheating. • Exam development, monitoring, and continuous improvement is human and financially resource intensive.	• Work with Alliance, psychometric experts and key partners to identify and monitor trends with exam administration. • Action third party exam review recommendations. • Ensure appropriate succession planning in examination development and administration. • Ensure examination processes and policies are fair, transparent, objective and timely. • Review CDO assessments to ensure security and accessibility.	• Multi-year strategy to update PLAR to be developed, starting with program evaluation. • Final recommendations from third party review being actioned. • Board to approve TMU bridging program at November meeting.
Public Protection	Potential Risk of Harm to Clients/Public	• Potential risk to the public due to unethical, incompetent, or unprofessional care. Risks to the public include physical, emotional, financial harms. • Public trust in the College and the profession may be impacted. • An increase in the number and complexity of complaints and reports may impact College resources suddenly.	• Monitor changes in the practice environment. • Monitor internal data (ICRC, PAS) to identify patterns, develop and update RD education and standards. • Create/use risk-based decision-making tools. • Create frameworks to guide development of new policies and to evaluate their effectiveness. • Focused registrant communications. • Redevelop professional practice programs based on risk research completed.	• Continue to monitor. • Policy development frameworks in progress (prioritization, evaluation). Development of equity tool complete. • QA program redevelopment in progress. • Use of Discipline Tribunal, effective December 2025, pending bylaw approval by the board to ensure efficiency, transparency and objectivity in discipline matters.
Public Protection/ Governance	Artificial Intelligence	• Practice risk for RDs and their clients/patients around consent, professional judgement, appropriateness of AI outputs and privacy.	• Code of Ethics (2024) addresses ethical principles around AI use for RDs. • Provide staff training, develop acceptable case uses and AI governance frameworks.	• Operational actions to be developed, including AI use policy.

Q3 Risk Monitoring Report

November 2025



Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of November 14, 2025
		• Privacy and confidentiality risk to CDO systems and data from misuse. • Risk of not realizing efficiencies of AI use due to system limitations, inconsistent use, or staff readiness.	• Monitor practice inquiries and complaint information. • Strategic investment in systems and tools.	
Governance	Public Member Appointments and Board Succession Planning	• Heavy board and committee workloads may impact CDO ability 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 and the engagement, satisfaction and wellbeing of CDO public members.	• Focus on succession planning to ensure knowledge translation. • Begin to appoint non-OIC public committee members/community appointees for non-statutory committee work.	• Currently at 6 public – 6 professional board members. • New public appointees onboarded and workload redistributed. • Process for recruitment of non-OIC public committee members in development.
Governance	Regulatory and Legislative Changes	• Legislative changes provincially may have significant financial and human resource implications for the College, and unintended impacts for the public and how RDs deliver care. • Potential impact of national legislative changes may affect CDO’s governance, the Alliance, or registration resources.	• Engage in outreach and maintain positive relationships with system partners. • Through regulatory collaboration and networking, stay informed of potential changes. • Collaborate internally and externally to assess changes and possible unintended impacts of legislation on the public. • Respond to government consultations to ensure awareness of CDO’s perspective around impact of legislative changes.	• As of right legislation, effective January 1. • Attended MOH info session. Provide feedback on employer resource. • Attestation and communications to be developed by CDO to ensure clarity. • Information sharing with Alliance partners and clinical nutrition leaders.

Q3 Risk Monitoring Report

November 2025



Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of November 14, 2025
Registrant Relations	Registrant Engagement	Reduced registrant engagement and understanding of regulatory obligations and purpose can impact public safety due to lower levels of registrant awareness and adoption of standards, guidelines and educational resources.	- Monitor survey completion rates and registrant feedback from consultations. - Identify and pursue opportunities to engage with RDs.	- Registrant survey regarding CDO service and effectiveness launched in October. Feedback to be used to inform future workplan activities. - Engaged with the Clinical Nutrition Leaders Action Group at HUB601, which included a CDO update. - Hosted two focus groups (in-person and virtual) related to scope of practice. - Continued to engage with dietetic students (in-person and virtual) for jurisprudence and registration discussions.
Operational	Cybersecurity Breach	Potential risks include: privacy breaches, organizational/staff downtime, reputation, and financial costs.	- Review cyber security response, credit card incident response plan, and an emergency disaster recovery plan on an annual basis. - Maintain insurance for IT and cybersecurity. - Conduct ongoing security audits, vulnerability testing and staff training. - Internal data governance working group to further identify and mitigate risks through project work. - Investment in software and hardware to protect CDO data and information.	- Records management project in progress. SharePoint migration for board complete; staff migration in progress. - Response plans to be tested over the next quarter, with support of external IT vendor. - Board training will be conducted at November meeting.
Operational	Succession Planning/Staff Turnover and Retention	Risks around business continuity, retention of institutional knowledge through retirement, leave of absence, or resignation.	- Conduct process documentation for key College activities for succession planning. - Develop a records management policy to ensure documentation, continuity and accessibility of institutional knowledge.	- Records management project in progress. SharePoint migration for board complete; staff migration in progress. - Review and documentation of Finance processes and procedures in progress.

Q3 Risk Monitoring Report

November 2025



Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of November 14, 2025
			• Ongoing review and implementation of supportive technology to streamline and automate. • Increased focus on collaboration, training and team culture.	• Team days in-office continue.
Financial	Increasing Costs of Regulation	• Increased resources required to keep pace with complex and evolving regulatory requirements. • Inflation rates are having an impact on price of goods and services CDO relies on. • Cost of regulation impacts registrants directly and may impact clients indirectly.	• Prudent financial habits and spending are in place. • Board and Management regularly monitor expenditures against the approved budget. • Internal controls are in place for the highest risk areas and are reviewed annually. • Registrant fee increase decision will occur annually. • Pursue operational efficiencies (i.e. office space, investment in technology, etc.)	• Continue to pursue operational efficiencies. • Needs analysis for registrant database complete. The next phase, selection of a database, will result in efficiencies but be a costly project to operationalize. • Modest increase of 1% to 2025 renewal fee.
Financial	Investment Returns	• Market fluctuations present a risk to the College’s investment portfolio.	• Board completion of risk tolerance in investment approach and approval of new investment policy. • Operationalize investment policy and ensure advisor in place to administer plan in accordance with the board’s direction.	• Transition to new investment firm complete. • Final investment to be transitioned in December, on its maturity date. • Continue to monitor.

Board Briefing Note

Topic:	KPI Dashboard
Purpose:	For Information
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Melanie Woodbeck, Registrar & Executive Director

Issue

To review the tier 1 key performance indicators (KPIs) that will track and measure our performance on achieving the 2025-2029 Strategic Plan.

Public Interest Rationale

The strategic plan directs CDO's operations by prioritizing efforts and creating organizational alignment to achieve our public interest mandate. Clearly reporting on our progress to the plan through KPIs ensures we maintain public trust and demonstrate accountability for our results.

Background

In 2024, the Board engaged in a strategic planning process with the support of an external facilitator. At its December 2024 meeting, the Board approved the 2025-2029 Strategic Plan, which began on April 1.

In March 2025, the Board engaged in a facilitated strategic workshop to provide feedback on a list of draft KPIs they felt would be most impactful to achieving the strategic plan and which should be prioritized.

The board's feedback was used to refine the KPIs so they are either measurable, observable or perceivable.

Considerations

KPIs are metrics used to track an organization's performance and progress on specific goals. Identifying KPIs allows us to determine whether our work is having the desired impact and value for effort. KPIs allow an organization to manage its resources and focus.

In previous years, KPIs have been tied to strategic projects; however, for the 2025-2029 strategic plan, KPIs will be tied to our overall strategic mission, vision, values and goals to ensure alignment and achievement across all the domains.

The approach to achievement of the KPIs will follow *The 4 Disciplines of Execution* (McChesney, Covey & Huling, 2012). Key to this approach is to narrow the focus and selecting a few, critical goals at a time.

Applying the Pareto Principle, which suggests that 20% of KPIs will generate 80% of the results, the most important and urgent strategic KPIs (tier 1 KPIs) will be prioritized in 2025-2026. As each tier 1 KPI is achieved, the action or organizational habit will become integrated into our processes.

The remaining KPIs (tier 2) will be monitored over 2025-2026 but resources will not be assigned to achieving the KPIs unless immediate action is required. Immediate action may be required due to changing regulatory requirements, urgent public health needs or new legislation. As tier 1 KPIs are achieved over a six to 18 month period, the outcomes may improve or achieve the tier 2 KPIs through a ripple effect. Each year, the Board will upgrade approximately 20% of the tier 2 KPIs to tier 1 KPIs and repeat the cycle until the 2025 – 2029 Strategic Plan becomes reality.

Operational KPIs will be developed by staff and will be reported in the management report.

Next Steps

That the Board review the KPIs to monitor CDO progress on the 2025-2029 Strategic Plan.

Attachments

- Appendix 1: KPI dashboard



KPI Dashboard

Mission: Regulate Ontario dietitians for public protection		
RDs view CDO as an effective regulator that supports their practice and enhances public confidence in the profession.		
Detailed KPI	Status	Update
Complete a needs assessment registrant survey and establish a baseline measure.	Complete	CDO surveyed registrants in October and November to gain insight into our effectiveness as a regulator. Results to be used for future planning.
Strategic Priority 1: Enhance trust and demonstrate regulatory value.		
KPI: CDO is responsive to the needs of dietitians and the public by offering clear guidance, being accessible and providing efficient support.		
Detailed KPI	Status	Update
The readability for new and updated CDO documents is at a grade 8-12 level.	On track	- Staff participated in a plain language workshop and coaching this fall. in - Staff involved in decision writing completed additional training. - New content published on the website averages grade 12 reading level.
Each program conducts a quarterly process review to eliminate loopbacks or inventories.	Not started	To begin in Q4
Strategic Priority 2: Expand access and reduce barriers to practice.		
KPI: RDs can practice to the full scope of the profession.		
Detailed KPI	Status	Update
Additions to the RD scope that would best serve the public are identified.	Complete	Additions identified: Independently order lab tests to support nutrition-related assessments and monitor interventions.



		• Prescribe and dispense certain nutrition-related medications and treatments. • Prescribe and apply continuous glucose monitoring (CGM) devices. • Feedback obtained from RDs via survey and focus groups. • Proposal submitted to government.
KPI: The number of RDs and RD retention is sufficient to meet the public's need for access to dietetic services.		
Detailed KPI	Status	Update
Reduce administrative barriers to becoming an RD.	On track	• Identified the need for and supported the reintroduction of a sustainable bridging program (pending board approval). • Transitioning the orientation and self-assessment tool website for internationally trained applicants to CDO's website, which will be remapped to the new competencies.
Identify the administrative barriers of maintaining certificate of registration.	On track	• Analysis of registrant survey data in progress • Redesign of professional practice program in progress.
Strategic Priority 3: Promote quality care and professionalism.		
KPI: RDs provide safe, effective, ethical and evidence-informed care in alignment with CDO's standards and guidelines		
Detailed KPI	Status	Update
3,100 annual visits to the learning hub section of CDO's website by June 1, 2026.	On track	• 1,511 visits to the learning hub (49% of goal) • 24 social media posts promoting learning hub content
Increase attendance at educational sessions by 10%.	On track	• 34% increase in annual workshop attendance.
80% of RDs who attended an educational session either agree or strongly agree that the content was valuable to their practice.	On track	• 100% (n=24) of the RDs who participated in the post-webinar evaluation agreed or strongly agreed that the content was valuable to their practice.



Operational Enabler: Optimize Technology

KPI: We have efficient systems in place and effectively manage data to best inform decision-making.

Detailed KPI	Status	Update
Adhere to file management framework more than 90% of the time.	Below target	• Board and committees using SharePoint for file sharing. • 42% adherence to the file management framework.

Board Briefing Note

Topic:	Board Workplan and Training Calendar
Purpose:	For information
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Melanie Woodbeck, Registrar & ED

Issue

To review the board workplan and training calendar for the remainder of 2025 – 2026 term.

Public Interest Rationale

Adopting an annual workplan calendar allows the Board to ensure that its efforts are focused on initiatives that advance the public interest.

Planning board training allows the board to ensure that it has the requisite mix of knowledge, skills, and abilities to carry out CDO's public interest mandate.

Background

Each year at its June meeting, the board approves its workplan and training calendar. It should comprise key activities required to meet CDO's [2025-2029 Strategic Plan](#) and the various regulatory and oversight duties performed by the board. Training activities should be relevant and support the performance of the board directors, should be tied to insights from evaluations and reflection discussions and consider the expectations of the public and other system partners.

The workplan 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.

Considerations

The board is reviewing its workplan and training calendar (*Appendix 1*) at the mid-year mark as a reminder of planned work to achieve the strategic priorities, learning objectives and regulatory mandate.

The board will approve its workplan and training calendar for the 2026-2027 term in March 2026. While the board usually approves its workplan and training calendar at its June meeting, it will now be approved when the budget is approved and operational workplan is reviewed. This change is to align CDO's operational planning with its governance planning.

Next Steps

To review the workplan and training calendar for the 2025-2026 term.

Attachments

- Appendix 1: Board Workplan and Training Calendar 2025 – 2026

Appendix 1

Board Workplan and Training Calendar

2025 – 2026

November board meeting (hybrid, two-day)		
Board operations and monitoring reports	Policy, bylaw and regulation	Strategy, environmental scanning and training
Minutes, September 2025 with action	Governance review findings and recommendations	Regulatory trends presentation
Executive Committee report	Bylaw update: Election process (withdrawing and ballot counting)	Cybersecurity training
Management report	Bylaw update: HPDT	Government relations presentation
Risk monitoring report (Q3)	Safe disclosure (whistleblower) policy	Registration program overview
Learning and teaching moment		Role of the dietitian
KPI dashboard		Future of regulation presentation



March board meeting (virtual, one-day)		
Board operations and monitoring reports	Policy, bylaw and regulation	Strategy, environmental scanning and training
Minutes, November 2025 with action	Process for managing board and committee code of conduct and conflict of interest issues	Needs based training
Executive Committee report	Financial management policy	Database discussion
Management report	Reserve fund policy	
2026 – 2027 budget, strategic workplan and KPIs	Honoraria and expense policy – updates to meals, catering process	
Risk monitoring report (Q4)	Action items from governance review report – operational roadmap for feedback	
Learning and teaching moment		
Presentation of board workplan		

Board Briefing Note

Topic:	Safe Disclosure Policy
Purpose:	For Decision
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Governance Committee

Issue

To review and approve the draft safe disclosure policy, as recommended by the Governance Committee.

Public Interest Rationale

A safe disclosure policy is a key tool for protecting individuals who report wrongdoing, ensuring that concerns are addressed appropriately, and reinforcing CDO's commitment to ethical conduct, accountability and transparency.

Background

In recent years, CDO has made tremendous strides in governance modernization guided by the 2020-2025 strategic plan and governance modernization roadmap. A whistleblower policy was included in the roadmap as a low priority recommendation approved by the Board. The Governance Committee added this to their workplan for 2025.

The Governance Committee considered the draft safe disclosure policy at its meeting on November 4 and approved the proposed policy for recommendation to the Board.

Considerations

Whistleblower policies promote accountability and encourage internal reporting of actual or suspected fraud, legal violations or unethical conduct. They provide a clear process for

reporting and investigating concerns and ensure individuals who make reports in good faith are protected from retaliation.

Environmental scan

An environmental scan was conducted, which included whistleblower policies used by other health regulators. The environmental scan showed a trend of using the term “safe disclosure” rather than “whistleblower”, including the Colleges of Physicians and Surgeons in Ontario and Nurses in Alberta. Use of the term “safe disclosure” emphasizes protection and support for raising concerns, rather than the stigma that can be implied with the word whistleblower. It was determined that ‘safe disclosure’ aligns with College HR and governance policies.

Legal review

The draft safe disclosure policy was reviewed by legal counsel and the feedback was incorporated.

Policy overview

The draft safe disclosure policy is consistent with the general principles identified in the environmental scan. Key features include:

- Inclusive: applies to CDO employees, contractors, board and committee members.
- Defined reporting channels: concerns are reported to the Registrar or the Chair of the Board if the concern is about the Registrar.
- Investigation requirement: all reported concerns are taken seriously and investigated.
- Protections offered: anyone who reports a concern in good faith is protected against retaliation.
- Fair treatment: anyone involved in an investigation will be treated fairly and with respect.
- Consequences for confirmed concerns: appropriate action will be taken based on the nature of the confirmed concern.
- Co-existence with board and HR policies: the policy was reviewed within the context of other College policies, such as the board’s code of conduct and staff HR policies. The policy leaves room for these policies to work together, without contradicting or duplicating each other.



The proposed policy has a grade eight readability score which meets the KPI target and is written in a supportive, safe and inclusive tone, aligning with CDO's corporate values.

Recommendation/Next steps

It is recommended that the Board approve (or approve with amendments) the proposed safe disclosure policy.

If the Board approves the proposed policy, the safe disclosure policy will be added to the governance manual and included in CDO's onboarding process for staff, board and committee members. The policy will also be shared with current staff and external contractors.

Attachments

- Appendix 1: Draft safe disclosure policy



DRAFT Safe Disclosure Policy

Purpose

The safe disclosure policy ensures trust, transparency and accountability in College operations. The policy sets out the process for reporting concerns about unlawful, unethical, or otherwise improper activities.

Scope

The policy applies to:

- Employees
- Contractors
- Board and committee members.

What You Can Report

Here are examples of what to report:

- Changing or deleting documents or records without permission
- Falsifying financial records or misrepresenting financial information
- Stealing or misusing resources such as money or supplies
- Breaching personnel or governance policies or other College agreements
- Illegal activities
- Sharing confidential information without permission

Reporting Process

Anyone with reason to believe that someone is doing something wrong, or is planning to, should report it.

Who to contact:

- The registrar
- If the concern is about the registrar, the chair of the board

What to include in a report:

- The reporter's name and the preferred method of contact
- The names and titles of anyone involved
- A description of the concern, including dates, places, and witnesses

Investigations

The registrar oversees investigations and may assign an external investigator.

For concerns about the registrar, the chair and vice-chair of the board oversee the investigation, which is conducted by an external investigator.

All reports are taken seriously and are investigated fairly and promptly.

If the investigation confirms the reported concern, the College may respond according to College policies or documents (e.g., employment policies, Board Code of Conduct). This could lead to discipline measures or terminating a contract. The College may also take legal action or notify the police.

Confidentiality and Fair Treatment

The College will take all reasonable steps to protect anyone reporting a concern. Everyone involved in an investigation is treated with fairness and respect.

All reports remain confidential to the extent possible. The College may share the name of the person reporting a concern if:

- They agree
- It is needed to properly investigate or respond to the concern
- It is required by law
- The person being investigated has a legal right to know

The College may not be able to tell the person who made the report what happened. However, the College will tell the person if an investigation is in progress or has ended.

It is not acceptable to retaliate against someone who makes a report in good faith. It is not acceptable to make a false report on purpose. The College will investigate concerns about retaliation or false reporting. If the investigation confirms the concern, the College may respond according to College policies or documents (e.g., employment policies, Board Code of Conduct). This could lead to discipline measures or terminating a contract. The College may also take legal action.



Board Briefing Note

Topic:	Election Voting and Candidate Withdrawals
Purpose:	Decision Required
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Governance Committee

Issue

To consider bylaw revisions clarifying the process for handling votes cast if an electoral candidate withdraws or becomes ineligible after the voting period has opened.

Public Interest Rationale

Clear election procedures ensure fairness, transparency and trust in the College's governance practices. Defining the process for handling votes cast after a candidate withdraws or becomes ineligible for election reduces confusion and helps maintain the integrity and legitimacy of the election.

Background

During the previous three elections, candidates have either withdrawn or considered withdrawing shortly before the voting period opened.

Bylaw 1, section 3.11, specifies the process for handling the withdrawal of a candidate. While the bylaw is clear about the revising the ballot, it does not address the handling of votes cast for candidates in the event they withdraw after the voting period opens:

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 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 registrants eligible to vote that the candidate has withdrawn from the election.

At its November 4 meeting, the Governance Committee reviewed and approved the proposed amendments to bylaw 1 for recommendation to the Board.

Considerations

Proposed amendments to bylaw 1 are summarized in Appendix 1 and have been made to:

- Clarify that any votes cast for a candidate who withdraws from the election will be void
- Add detail to specify that the registrar will make reasonable efforts to remove ineligible candidates' names from the ballot or notify registrants that the individual is no longer a candidate. Since there are administrative logistics to remove individuals from an election ballot after the voting period begins, it may not be possible to remove someone from an active ballot.

The proposed amendments to bylaw 1 (*Appendix 2*) were provided by CDO legal counsel.

Recommendation/Next Steps

To approve the proposed amendments to bylaw 1.

Attachments

- Appendix 1: Proposed amendments chart
- Appendix 2: Bylaw 1 proposed amendments - tracked

Draft Bylaw 1 Changes

Appendix 1

Current	Proposed	Rationale
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 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 registrants eligible to vote that the candidate has withdrawn from the election.	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 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 registrants eligible to vote that the candidate has withdrawn from the election. <u>Where a withdrawn candidate's name cannot be removed from the ballot, any votes cast for the withdrawn candidate will be deemed void and the election will proceed amongst the remaining candidates without affecting the validity of the election. Where the number of remaining candidates is less than or equal to the number of registrants to be elected in that election, section 3.15 (Acclamation) applies.</u>	Clarification added to confirm that, in situations where names cannot be removed from the ballot, any votes cast of a candidate who withdraws from the election will be void. Clarification added to confirm that remaining candidates will be acclaimed, consistent with section 3.15 of the bylaw (acclamation).



3.12. Eligibility and Election Disputes Disputes as to whether a registrant is eligible for election or to vote in an election will be determined by the Governance Committee. Disputes relating to the election of an elected director shall be dealt with by the Governance Committee which shall investigate the facts and report its findings and recommendations to the Board of Directors for such decision as the Board of Directors considers appropriate.	3.12. Eligibility and Election Disputes <u>(a) Disputes as to whether a registrant is eligible for election or to vote in an election will be determined by the Governance Committee. Disputes relating to the election of an elected director shall be dealt with by the Governance Committee which shall investigate the facts and report its findings and recommendations to the Board of Directors for such decision as the Board of Directors considers appropriate.</u> <u>(b) If during an election the Registrar or Governance Committee determines that a candidate is no longer eligible to run for election (or that an error was made and a candidate should not have been deemed eligible), the Registrar will make reasonable efforts to remove the ineligible candidate's name from the ballot or to notify registrants eligible to vote that the person is no longer a candidate. Where an ineligible candidate's name cannot be removed from the ballot, any votes cast for the ineligible candidate will be deemed void and the election will proceed amongst the remaining candidates without affecting the validity of the election. Where the number of remaining candidates is less than or equal to the number of registrants to be elected in that election, section 3.15 (Acclamation) applies.</u>	Detailed added to specify that the registrar will make reasonable efforts to remove ineligible candidates' name from the ballot or notify registrants that the individual is no longer a candidate. Add to recognize the administrative logistics of removing individuals from an election ballot after the voting period begins. In some situations, it may not be possible to remove an individual from an active ballot. Clarification added to confirm that remaining candidates will be acclaimed, consistent with section 3.15 of the bylaw (acclamation).
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Appendix 2

BYLAW 1: GENERAL

JUNE 2025

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1. Interpretation

1.1. Definitions

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

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

“appointed committee member” means either an appointed committee member - Registered Dietitian or an appointed committee member - public (both as defined below);

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

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

“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 bylaws 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 bylaws;

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

“director” means a member of the Board of Directors and includes public and elected directors, previously known as public and elected “councillors” in these bylaws;

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

“public director” means a 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 bylaws;

“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 bylaws as the “Vice-President” and does not include a committee vice-chair;

1.2. Calculating Time

In College bylaws, 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 bylaws, 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

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

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 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

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

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 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 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 directors, officers and employees such information as is necessary in their opinion to enable them to report as required by law or under this bylaw.

2.16. Attendance at Board of Directors Meeting

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

2.17. Grants

The Board of Directors may by a vote of at least two-thirds of the 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

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

Elected directors, appointed committee members, 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 the Board of Directors.

2.20. Indemnity

Every director, or committee member and 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 their office; and
- (b) subject to any policies and procedures of the College, all other costs and expenses that they sustain or incur in respect in respect of the affairs of the College,

except any costs, charges or expenses resulting from 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 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 Board directors (with necessary modifications by the Registrar to ensure that the entire province is covered and that there is no overlap of districts):
- i. Electoral district 1, the south-western area, composed of the counties of Elgin, Essex, Kent, Lambton, Middlesex, Oxford, Bruce, Grey, Perth and Huron.
 - 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.
 - iii. Electoral district 3, the central area, composed of the Municipality of Metropolitan Toronto, and the Regional Municipality of York.
 - 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.
 - 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.
 - vi. Electoral district 6, the north-western area, composed of the territorial districts of Kenora, Rainy River and Thunder Bay.
 - 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.



- (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.
- (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 bylaws to elected directors will apply equally to these directors.

3.2. Number of Elected Directors

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 bylaws:

- (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.
- (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 Directors from Each District

For Board of Directors elections and by-elections prior to April 2024, the number of 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 Election

- (a) For Board of Directors by-elections held in an electoral district prior to April 2024, a registrant is eligible to vote 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.



- (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 director is approximately three (3) years starting on the first day of the first scheduled Board of Directors meeting after the election of directors (excluding any special meetings) and the director will continue in office until the day before their successor takes office in accordance with the bylaws.

3.6. Board Eligibility: Maximum Term as Elected Director and/or Appointed Committee Member - Registered Dietitian

- (a) Subject to section 3.7, for Board of Directors elections held prior to April 2026, a director or registrant who has served nine (9) consecutive years as an elected director on the Board of Directors or as an appointed committee member - Registered Dietitian, or in any combination of the two offices, is ineligible to serve on the Board of Directors for a minimum of three (3) years thereafter. This 36 month period is calculated from the date the director or registrant last served as an elected director or committee member, to the first day of the first scheduled Board of Directors meeting after the election of directors (excluding any special meetings).
- (b) Subject to section 3.7, for Board of Directors elections held in or after April 2026, a director or registrant who has served six (6) consecutive years as an elected director on the Board of Directors or as an appointed committee member – Registered Dietitian, or in any combination of the two offices, is ineligible to serve on the Board of Directors for a minimum of three (3) years thereafter. This 36 month period is calculated from the date the director or registrant last served as an elected director or committee member, to the first day of the first scheduled Board of Directors meeting after the election of directors (excluding any special meetings).



3.7. Term of Office for Directors Filling Vacancies

The term of an elected director elected in a by-election or appointed under these bylaws expires when the former elected director's term would have expired. Time spent as an elected director or committee member as a result of a by-election or an appointment by the Board of Directors or Executive Committee 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, elections for elected directors shall be held simultaneously as follows:
 - i. in April of the year 2004 and in April of every third year thereafter for electoral districts 1 and 3;
 - ii. in April of the year 2002 and in April of every third year thereafter for electoral districts 2 and 4;
 - iii. 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 bylaws to the Board of Directors election in April will apply equally to the delayed election.

3.9. Date of Election

Unless otherwise approved by 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 Board of Directors

A registrant is eligible for election to the Board of Directors if, on the date of election or acclamation, or as of such other date specified below:



- (a) the registrant is engaged in the practice of dietetics in Ontario or, if the registrant is not engaged in the practice of dietetics, principally resides in Ontario, or in the case of a by-election prior to April 2024, in the electoral district for which they are nominated;
- (b) the 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 registrants of the class;
- (c) the registrant is not in default of the payment of any fee payable to the College;
- (d) the 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 registrant's certificate of registration has not been revoked or suspended in the preceding six years for any reason other than nonpayment of fees;
- (f) the 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 registrant has not been disqualified by the Board of Directors in the preceding three (3) years as a result of a breach of a code of conduct or policy on conduct approved by the Board of Directors or a breach of the conflict of interest provisions of this bylaw;
- (h) the registrant does not have a notation on the College register of a finding of professional negligence or malpractice made against the registrant;
- (i) the registrant is not the subject of a charge under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (j) the registrant does not have a notation on the College register of a charge in relation to any offence;
- (k) the 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 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 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 registrant is not currently the subject of an undertaking provided to the College with respect to a fitness to practise issue;
- (o) the registrant is not currently the subject of an interim order made by a panel of the Inquiries, Complaints and Reports Committee;
- (p) the 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 registrant is not a member of the Board of Directors or council of any other RHPA college;
- (r) the registrant is not an employee of the College and has not been an employee of the College within the preceding two (2) years;
- (s) the registrant is not an applicant for employment at the College and has not applied for employment at the College within the preceding year;
- (t) the registrant is not in default of completing and submitting any information or form required under the regulations of the RHPA or Act, or the bylaws of the College;
 - (t.1) the registrant meets the competency and attribute 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) the registrant has successfully completed the College's current training program relating to the duties, obligations and expectations of Board of Directors and committee members;



- (v) the registrant is not party to a legal proceeding against the College;
- (w) the 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 registrant does not have a conflict of interest to serve as a director;
- (x) the registrant does not hold a position that would cause the registrant, if elected as a director, to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization
 - (x.1) the registrant does not, and did not within the preceding 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; or
- (y) on the first day of the first scheduled Board of Directors Meeting after the election of directors (excluding any special meetings), the registrant would not be 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 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 registrants eligible to vote that the candidate has withdrawn from the election. Where a withdrawn candidate's name cannot be removed from the ballot, any votes cast for the withdrawn candidate will be deemed void and the election will proceed amongst the remaining candidates without affecting the validity of the election. Where the number of remaining candidates is less than or equal to the number of registrants to be elected in that election, section 3.15 (Acclamation) applies.

3.12. Eligibility and Election Disputes

- (a) Disputes as to whether a registrant is eligible for election or to vote in an election will be determined by the Governance Committee. Disputes relating to the election



of an elected director shall be dealt with by the Governance Committee which shall investigate the facts and report its findings and recommendations to the Board of Directors for such decision as the Board of Directors considers appropriate.

(b) If during an election the Registrar or Governance Committee determines that a candidate is no longer eligible to run for election (or that an error was made and a candidate should not have been deemed eligible), the Registrar will make reasonable efforts to remove the ineligible candidate's name from the ballot or to notify registrants eligible to vote that the person is no longer a candidate. Where an ineligible candidate's name cannot be removed from the ballot, any votes cast for the ineligible candidate will be deemed void and the election will proceed amongst the remaining candidates without affecting the validity of the election. Where the number of remaining candidates is less than or equal to the number of registrants to be elected in that election, section 3.15 (Acclamation) applies.

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3.13. Notification of Election

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

3.14. Applications

A registrant who seeks to be a candidate for election as a director shall apply in writing and shall submit the application to the Registrar at least 60 days before the date of the election (the "application deadline").

3.15. Acclamation

- (a) For elections and by-elections prior to April 2024, if the number of candidates 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 registrants to be elected in that electoral district, the Registrar shall declare the candidate 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 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 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 bylaws:

- (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;
- (c) establish reliable and secure voting processes;
- (d) provide for the notification of all candidates and registrants of the results of the election;
- (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 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 they deem 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 registrant eligible to vote in the



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 and a ballot or electronic access to a ballot and an explanation of the voting procedure.

3.20. Voting

A registrant eligible to vote may cast as many votes on a ballot as there are registrants to be elected from that electoral district in that election. A 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 registrants to the 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 Directors

4.1. Disqualification

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

- (a) the Board of Directors determines that the registrant had not met one or more of the eligibility requirements in section 3.10;
- (b) the registrant ceases to meet one or more of the eligibility requirements in section 3.10;
- (c) the registrant fails, without reasonable cause, to attend two consecutive meetings of the Board of Directors;



- (d) the registrant fails, without reasonable cause, to attend three consecutive meetings of a committee of which they are a member;
- (e) the registrant fails, without reasonable cause, to attend a hearing or proceeding of a panel for which they have been selected; or
- (f) the registrant fails, in the opinion of the Board of Directors, to discharge their duties to the College, including without limitation having acted in a conflict of interest or otherwise in breach of a College bylaw or policy, or the *Regulated Health Professions Act, 1991*.

4.2. Temporary Exclusion

An elected 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 the Board of Directors or on any committee until the proceeding is finally completed.

4.3. Removal of Elected Director

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

- (a) If another director believes that an elected director meets one or more of the criteria for disqualification in section 4.1, they shall advise the Registrar and Executive Committee in writing.
- (b) If the Registrar receives information suggesting that an elected 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 the Board of Directors' consideration, it shall notify the elected director about the nature of the concern and provide him or her with a reasonable opportunity to respond before bringing the matter to the Board of Directors.
- (d) If after considering the elected director's response, if any, the Executive Committee decides that the matter warrants the Board of Directors' consideration, it shall place the matter on the agenda for the next meeting of the Board of Directors, or the Chair of the Board shall call a special Board of Directors meeting for the purpose of determining whether the registrant meets any of the criteria for disqualification under section 4.1. The Registrar shall advise the director who is potentially subject to disqualification of the



date of the Board of Directors meeting and that the director may make written or oral submissions to the Board of Directors at the meeting.

- (e) Disqualification of an elected director requires a resolution passed by a majority of not less than two-thirds of the votes cast on the resolution by directors present at the meeting. The elected 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. The Board of Directors shall not consider the registrant for the purpose of establishing quorum or counting votes.
- (f) A disqualified director ceases to be a member of the Board of Directors and any of its committees.

4.4. Disqualification and Removal of Public Director

The following procedure applies to the disqualification and removal of a public director:

- (a) If a director believes that a public 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), they shall advise the Registrar and Executive Committee in writing.
- (b) If the Registrar receives information suggesting that a public 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 public director with necessary modifications.

4.5. Notice to Minister

Following the disqualification of a public director, the 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 director from the Board of Directors.



4.6. Suspension of Public Director

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

5. Vacancies

5.1. Creation of Vacancy

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

5.2. Filling Vacancy – Less than One Year

- (a) If prior to the 2024 Board of Directors election, the seat of an elected director becomes vacant in an electoral district 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 for that position in 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.



5.3. Filling Vacancy – More than One Year

- (a) If prior to 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 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.

6. Officers

6.1. Officers

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

6.2. Chair of the Board (Chair)

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

6.3. Vice-Chair of the Board (Vice-Chair)

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

6.4. Appointment of Registrar

The Registrar shall be appointed by the Board of Directors and shall be the Executive Director of the College. The Executive Committee shall not exercise the authority of the 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 the Board of Directors.

6.6. Registrar Duties

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

6.7. Appointment of Acting Registrar

During extended absences of the Registrar, the 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 Board of Directors shall appoint an Acting Registrar. If the Executive Committee appoints an Acting Registrar, the appointment or approval is subject to Board of Directors approval at the next meeting of 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

The Board of Directors may remove an officer of the College by a two-thirds majority vote of the directors present at a 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 the Board of Directors

7.1. Board of Directors Meetings

The Board of Directors shall have at least four regular meetings during each calendar year, with no more than four months between meetings. 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 the Board of Directors from time to time.



7.2. Reasonable Notice for Board of Directors Meetings

Written notification of the date, time and place of a Board of Directors meeting will be delivered to each 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 director will not invalidate a resolution that the Board of Directors passes at the meeting or any action or proceeding it takes at the meeting.

7.3. Business at Regular Meetings

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 director at a preceding Board of Directors meeting;
- (e) such other matters, not included in the agenda, that at least two-thirds of the directors in attendance determine to be of an urgent nature; and
- (f) routine and procedural matters.

7.4. Special Meetings

A special meeting of the Board of Directors may be called by the Chair of the Board or the majority of 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 director not less than three days before the date of the special meeting, unless notice is unanimously waived by the Board of Directors. 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 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 the Board of Directors determines otherwise.

7.7. Chair or Vice-Chair of the Board Presides

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

7.8. Presiding Officer

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

7.9. Quorum

A quorum for any meeting of the Board of Directors is as set out in the RHPA. A 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 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 bylaws, every motion which properly comes before the Board of Directors shall be decided by a simple majority of the votes cast at the meeting by 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 Board of Directors meeting shall be by a show of hands but, if any two 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 bylaws of the College, any questions of procedure at or for any meetings of 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 Board of Directors adopts from time to time.

7.13. Unanimous Resolutions

A resolution or bylaw signed by all members of the Board of Directors is as valid and effective as if passed at a meeting of the Board of Directors held for the purpose, and a director's signature may be an identifying mark created or communicated using electronic means.

8. Committee Establishment and Appointments

8.1. Establishment and Appointees

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 the Board of Directors will give due consideration to the recommendations, if any, of the Governance Committee.



8.2. Appointment to Committees

The Board of Directors will at the first regular Board of Directors meeting following each scheduled election of directors appoint the members of each committee and a chair of each committee in a manner prescribed by the Board of Directors from time to time. In appointing members to committees the Board of Directors will give due consideration to the recommendations, if any, of the Governance Committee. 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 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 as an Appointed Committee Member - Registered Dietitian

The Board of Directors may appoint a registrant who is not a director to serve on a committee if, as of the date of the appointment, or as of such other date specified below,

- (a) the 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 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 registrants of the class;
- (c) the registrant is not in default of the payment of any fee payable to the College;
- (d) the 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 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 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 registrant has not been disqualified by the 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 the Board of Directors or a breach of the conflict of interest provisions of this bylaw;
- (h) the registrant is engaged in the practice of dietetics in Ontario or, if the registrant is not engaged in the practice of dietetics, principally resides in Ontario;
- (i) the registrant does not have a notation on the College register of a finding of professional negligence or malpractice made against the registrant;
- (j) the registrant is not the subject of a charge under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (k) the registrant does not have a notation on the College register of a charge in relation to any offence;
- (l) the 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 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 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 registrant is not currently the subject of an undertaking provided to the College with respect to a fitness to practise issue;
- (p) the registrant is not currently the subject of an interim order made by a panel of the Inquiries, Complaints and Reports Committee;



- (q) the 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 registrant is not a member of the Board of Directors or council of any other RHPA college;
- (s) the registrant is not an employee of the College and has not been an employee of the College during the preceding two (2) years;
- (t) the registrant is not an applicant for employment at the College and has not applied for employment at the College during the preceding year;
- (u) the registrant is not in default of completing and submitting any information or form required under the regulations of the RHPA or Act, or the bylaws of the College;
- (u.1) the registrant meets the competency and attribute 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;
- (v) the registrant has successfully completed the College's current training program relating to the duties, obligations and expectations of Board of Directors and committee members;
- (w) the registrant is not party to a legal proceeding against the College;
- (x) the 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 registrant does not have a conflict of interest to serve as a member of the Board of Directors;
- (y) the registrant does not hold a position that would cause the registrant to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization;



(y.1) the registrant does not, and did not within the preceding 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; or

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

8.5. Eligibility for Committee Appointment as an Appointed Committee Member - Public

The Board of Directors may appoint a member of the public who is not a director to serve on a committee if, as of the date of the appointment, or as of such other date specified below:

- (a) the applicant 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 applicant is not the subject of any disciplinary or incapacity proceeding in Ontario or any similar proceeding in any other jurisdiction relating to any profession;
- (c) the applicant has not had a certificate of registration or similar registration status with any professional regulatory body revoked or suspended in the six years preceding the date of the appointment for any reason other than non-payment of fees;
- (d) the applicant has not been found to have committed professional misconduct by any discipline committee or comparable decision-making body in any jurisdiction relating to any profession;
- (e) the applicant has not been disqualified by the 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 the Board of Directors or a breach of the conflict of interest provisions of this bylaw;



- (f) the applicant is not engaged in the practice of dietetics in any jurisdiction;
- (g) the applicant principally resides in Ontario;
- (h) the applicant has submitted a criminal record check dated within six (6) months of the date the application is filed with the Registrar, in the form required by the College;
- (i) the applicant has not had a finding of professional negligence or malpractice made against them;
- (j) the applicant is not the subject of a charge under the Criminal Code (Canada) or the Controlled Drugs and Substances Act (Canada) that is relevant to their suitability to serve;
- (k) the applicant does not have any charges against them in relation to any offence that is relevant to their suitability to serve;
- (l) the applicant does not have a criminal finding of guilt as an adult under the Criminal Code (Canada) or the Controlled Drugs and Substances Act (Canada) that is relevant to their suitability to serve;
- (m) the applicant has not had a finding of guilt made against them by a court with respect to any offence that is relevant to their suitability to serve;
- (n) the registrant has not entered an undertaking with any professional regulatory body with respect to a matter involving a complaint or disciplinary matter;
- (o) the applicant is not currently the subject of an undertaking provided to any professional regulatory body with respect to a fitness to practise issue;



- (p) the applicant is not currently the subject of an interim order made by a professional regulatory body;
- (q) the applicant has not been ordered to attend to receive a caution from a panel of any Inquiries, Complaints and Reports Committee or from a comparable decision-making body or decision-maker, or been required to complete a specified continuing education or remediation program or comparable program by a panel of any Inquiries, Complaints and Reports Committee or by a comparable decision-making body or decision-maker in the preceding three (3) years;
- (r) the applicant is not a member of the board of directors or council of any RHPA college, and has not resigned from the Board of Directors during the preceding three (3) years;
- (s) the applicant is not a current or former employee of the College;
- (t) the applicant is not an applicant for employment at the College and has not applied for employment at the College during the preceding year;
- (u) the applicant meets the competency and attribute 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;
- (v) the applicant has successfully completed the College's current training program relating to the duties, obligations and expectations of Board of Directors and committee members;
- (w) the applicant is not and has never been a party to a legal proceeding against the College;



- (x) the applicant has completed and filed with the Registrar a conflict of interest declaration by the deadline and in the form approved by the Registrar, and does not have a disqualifying conflict of interest;
- (y) the applicant does not hold a position that would cause the applicant to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization;
- (z) the applicant does not, and did not within the preceding 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; or
- (aa) the applicant is not ineligible because of section 8.5.

8.6. Term of Office of Committee Members

- (a) The term of office of a committee member is approximately three (3) years from the date of appointment or re-appointment to a committee.
- (b) Subject to clause (d), for committee appointments prior to the April 2026 Board of Directors elections, no person may serve as a committee member for more than nine (9) consecutive years. A person who has served as a committee member for nine (9) consecutive years, whether as an appointed committee member or as a director or in any combination of the two offices, is not eligible for appointment as a committee member for at least three (3) years from the date the person last served as a committee member.
- (c) Subject to clause (d), for committee appointments any time after the April 2026 Board of Directors elections, no person may serve as a committee member for more than six (6) consecutive years. A person who has served as a committee member for six (6) consecutive years, whether as an appointed committee member or as a director or in any combination of the two roles, is not eligible for appointment as a committee



member for at least three (3) years from the date the person last served as a committee member.

- (d) Time spent as a committee member as a result of a by-election (in the case of elected directors) or an appointment by the Board of Directors or Executive Committee to fill a vacancy (in the case of elected directors and appointed committee members) is not included for the purposes of determining the maximum term described in clauses (b) and (c).

8.7. Continuation of Term of Office

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

8.8. 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. The Executive Committee may seek the Governance Committee's recommendation when making such an appointment. A member of a committee appointed by the Executive Committee is subject to confirmation by the Board of Directors at its next meeting.

8.9. Executive Committee Vacancies

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

9. Disqualification and Removal of Appointed Committee Members

9.1. Disqualification Criteria

An appointed committee member 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 8.4 or section 8.4.1, as applicable;
- (b) the appointee after being appointed ceases to meet one or more of the eligibility requirements in section 8.4 or section 8.4.1, as applicable;
- (c) the appointed committee member fails, without reasonable cause, to attend three consecutive meetings of the committee of which they are a member;
- (d) the appointed committee member fails, without reasonable cause, to attend a hearing or proceeding of a panel for which they have been selected; or
- (e) the appointed committee member fails, in the opinion of the Board of Directors, to discharge their duties to the College, including without limitation having acted in a conflict of interest or otherwise in breach of a College bylaw, 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 Appointed Committee Member

The Board of Directors or the Executive Committee may remove an appointed committee member by resolution requiring a simple majority. The Board of Directors or the Executive Committee has the power to remove an appointed committee member whether or not one of the disqualification criteria in section 9.1 applies.

If a director or appointed committee member believes that an appointed committee member meets one or more of the criteria for disqualification in section 9.1, they shall advise the Registrar in writing. A disqualified appointed committee member ceases to be a member of any 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 the Board of Directors determines otherwise.

10.4. Chair of Meetings

The committee chair or 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 bylaws, 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 bylaws, 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 Chair of the Board, the Vice-Chair of the Board and two other members of the Board of Directors. At least one member of the Executive Committee must be a public director.

11.2. Executive Committee Duties

In addition to the duties provided to the Executive Committee under the RHPA and bylaws of the College, the Executive Committee will act in an advisory capacity to 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 the Board of Directors;
- (b) make recommendations relating to the financial reserves of the College;
- (c) report at least annually to the 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 Board of Directors, the Registrar will send an invitation to all directors requesting written expressions of interest to stand for election to any of the offices of Chair of the Board, Vice-Chair of the Board and member of the Executive Committee.

11.4. Election of Executive Committee

At the first Board of Directors meeting after the election of directors, the Registrar shall conduct an election to determine the members of the Executive Committee in the order of



Chair of the Board, Vice-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 Chair of the Board;
- (b) the Board of Directors may also approve nominations for the office of Chair of the Board at the time of the election (and a 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 the Board of Directors for up to two minutes about their 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 the Board of Directors elects the Chair of the Board, it will elect the Vice Chair of the Board in a similar manner;
- (i) After the Board of Directors elects the Vice-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 bylaw, the term of office of the Chair and Vice-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 Chair and Vice-Chair of the Board in the following year.

11.6. Composition of Registration Committee

The Registration Committee shall be composed of:



- (a) at least one elected director;
- (b) at least two public directors; and
- (c) at least three and up to five appointed committee members.

11.7. Composition of Inquiries, Complaints and Reports Committee

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

- (a) at least two public directors; and
- (b) at least six and up to eight appointed committee members.

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 director, 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 directors;
- (b) at least two public directors; and
- (c) at least one appointed committee member.

11.10. Composition of Fitness to Practise Committee

The Fitness to Practise Committee shall be composed of:

- (a) at least three elected directors;
- (b) at least two public directors; and
- (c) at least one appointed committee member.



11.11. Composition of Quality Assurance Committee

The Quality Assurance Committee shall be composed of:

- (a) at least one public director; and
- (b) at least four and up to six appointed committee members.

11.12. Composition of the Patient Relations Committee

The Patient Relations Committee shall be composed of:

- (a) the members of the Executive Committee.

12. Non-Statutory Committees

12.1. [REVOKED]

12.2. [REVOKED]

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 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 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 Board of Directors;



- (c) present recommendations annually to the Board of Directors respecting changes to the compensation (including salary and benefits) to be provided to the Registrar; and
- (d) any other responsibilities described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

12.5. Composition of the Finance and Audit Committee

The Finance and Audit Committee shall be a non-statutory committee of the College composed of:

- (a) five directors who may be either elected directors or public directors; and
- (b) at the discretion of the Board of Directors, may additionally include an appointed committee member.

12.6. Responsibilities of the Finance and Audit Committee

The Finance and 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;
- (d) review and approve the annual budgets submitted by the Registrar, for recommendation to the Board of Directors; and
- (e) any other responsibilities relating to financial planning and reporting, external audit, internal controls, or policy review as described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

12.7. Composition of the Professional Practice Committee

The Professional Practice Committee shall be composed of:

- (a) at least one elected director;



- (b) at least one public director; and
- (c) at least four and up to six appointed committee members.

12.8. 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 the Board of Directors regarding professional practice standards, policies, and guidelines to enhance safe, competent, and ethical dietetic practice;
- (c) make recommendations to 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 the Board of Directors; and
- (e) any other responsibilities described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

12.9. Composition of the Governance Committee

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

- (a) at least one elected director;
- (b) at least three public directors; and
- (c) at least one appointed committee member.

12.10. 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 the Board of Directors adopts;
- (c) Consider and make recommendations to the Board of Directors on College's EDI-B plan and strategy.
- (d) ongoing appraisal of the College's governance structure, processes, and policies to promote longstanding governance excellence at both the Board of Directors and Committee level;
- (e) amend committee terms of reference, for recommendation to the Board of Directors;
- (f) identify the competencies and attributes that would best support the work of the Board of Directors and individual committees;
- (g) implement a competency and attribute based framework for establishing the structure of the Board of Directors and committees;
- (h) administer the process for screening applicants to be qualified as candidates for Board elections;
- (i) recommend candidates for committee appointment and reappointment to the Board;
- (j) recommend committees compositions and chair appointments, other than the Executive Committee, to the Board of Directors in June of each year;
- (k) appoint members to committees to fill vacancies, other than the Executive Committee, as needed;
- (l) resolve disputes relating to Board elections; and
- (m) any additional responsibilities described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.



13. Register

13.1. Names in the Register

Subject to paragraph 1 of section 13.2, a registrant's name in the register shall be the registrant's name as provided in the documentary evidence used to support the 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 registrant:

- (a) Any change to the registrant's name that has been made in the register of the College from the date of the registrant's initial registration with the College and any names that the registrant uses in any place of practice other than as provided in section 13.1, including any common names or abbreviations.
- (b) Each registrant's certificate of registration number.
- (c) The classes of certificate of registration held by each registrant and the date on which each was issued.
- (d) A list of the languages in which each registrant is capable of practising.
- (e) The name, address and telephone number of the primary business through which or at which the registrant practices dietetics in Ontario and their position at that business, and any other business and location at which the registrant regularly practices dietetics in Ontario, and their position at that business or location.
- (f) If a registrant has resigned, the date upon which the resignation took effect.
- (g) If the College is aware of an outstanding charge against a 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 registrant's suitability to practice,



- i. the fact and content of the charge, and ii. 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.

- (h) A summary of any existing restriction that relates to or otherwise impacts a registrant's practice imposed by a court or other lawful authority against the registrant, of which the College is aware, including the date of and a summary of the restriction imposed.
- (i) If the College is aware of a finding of guilt against a 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 registrant's suitability to practice,
 - i. a brief summary of the finding, ii. a brief summary of the sentence, and
 - iii. 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.

- (j) If a registrant has any terms, conditions or limitations in effect on 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.
- (k) If a registrant has terms, conditions or limitations on 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.
- (l) If a 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.

- (m) If a suspension on a 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.
- (n) If a 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
 - i. a registrant's certificate of registration is subject to an interim order of the Executive Committee or the Inquiries, Complaints and Reports Committee;
 - ii. a registrant's certificate of registration is suspended for non-payment of the annual fee or any fee required by the College, or
 - iii. a 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.
- (o) If a registrant's temporary or provisional class certificate of registration expires, the effective date of the expiry of that class of certificate.
- (p) 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 registrant attend before a panel of that committee to be cautioned as authorized by paragraph 3 of subsection 26(1) of the Code,
 - i. a summary of the caution; ii. the date of the panel's decision;
 - iii. once the registrant has received the caution a notation to that effect, and the date the registrant received the caution; and
 - iv. 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.

- (q) 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 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,
- i. a summary of the specified continuing education or remediation program; ii. the date of the panel's decision;
 - iii. once the registrant completes the program a notation to that effect, and the date on which the registrant completed the program; and
 - iv. 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.

- (r) A summary of any restriction on a registrant's right to practise that has resulted from an undertaking given by the registrant to the College or an agreement entered into between the registrant and the College.
- (s) If an allegation of professional misconduct or incompetence has been referred to the Discipline Committee in respect of the registrant and is outstanding,
- i. the date of the referral, ii. a summary of each specified allegation,
 - iii. the status of the hearing, including the date of the hearing, if set; and
 - iv. the notice of hearing.
- (t) If the question of the registrant's capacity has been referred to the Fitness to Practise Committee and not yet decided,
- i. a notation of that fact; and



- ii. the date of the referral.
- (u) If the Registrar has referred an application for reinstatement to the Discipline Committee for reinstatement and it is not finally resolved,
 - i. a notation of the referral, including the date of referral;
 - ii. 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;
 - iii. if the hearing has been adjourned and no future date has been set, the fact of that adjournment; and
 - iv. 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.
- (v) 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.
- (w) If the result of a disciplinary proceeding is contained in the College's register,
 - i. the date on which the panel of the Discipline Committee made its decision, ii. the date on which the Discipline Committee ordered any penalty, and iii. the decision and reasons.
- (x) If the College is aware that a restriction on a registrant or a registrant's practice has been made against a registrant registered or licensed to practise a profession inside or outside of Ontario and that finding has not been reversed on appeal, iv. a notation of that fact;
 - v. the date of the finding and the name of the governing body that made the finding if available; vi. the order made if available; and vii. information regarding any appeals of the finding or order if available.



- (y) 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.
- (z) If a finding of professional negligence or malpractice is contained in the College's register, the following information:
 - i. the notice of and a description of the finding; ii.
the date the finding was made against the registrant;
 - iii. the name and location of the court that made the finding against the registrant; and iv. the status of any appeal respecting the finding made against the registrant.
- (aa) Any information the College and a registrant, or health profession corporation, have agreed should be included in the register.
- (bb) 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 Registrants and Professional Corporations



14.1. Registrant to Provide Particulars on Request

A 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 bylaws, 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 registrant was required to provide to the College under the bylaws, 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. Registrant to Immediately Provide Particulars

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

14.3. Registrant to Provide Information on Request

The College may forward to its registrants from time to time requests for information in a printed or electronic form approved by the Registrar. Each 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 registrant information may include (but is not limited to) the following:

- (a) the registrant's residential address, telephone and personal e-mail address;
- (b) whether the 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 bylaws, the RHPA, the Act, or Regulation;
- (d) information required to be provided to the College pursuant to the bylaws, the RHPA, the Act, or Regulation;
- (e) information respecting their participation in the Quality Assurance Program;



- (f) information that relates to the professional characteristics and activities of the registrant that may assist the College in carrying out its objects, including but not limited to:
 - i. information about actions taken by other regulatory authorities with respect to the registrant; ii. information that relates to the registrant's health; iii. information relating to civil law suits involving the registrant;
 - iv. information relating to criminal charges, arrests, bail conditions and other restrictions; and
 - v. information relating to offences;
 - vi. information for the purposes of compiling statistical information to assist the College in fulfilling its objects;

14.4. 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 registrant, the 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 registrant to provide information to the College as required under the bylaws and any such failure may result in the suspension of that 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 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 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 director or committee member's personal, professional or financial interest or relationship may affect their judgement, impartiality or the discharge of 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

Directors and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a director or committee member is in doubt about whether they have or might have a conflict of interest, the director or committee member must consult with an appropriate person, for example the 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 director or committee member believes that they may have a conflict of interest in any matter relating to Board of Directors or committee business the director or committee member must consult with an appropriate person such as the 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 the Board of Directors or the committee and accept the 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 director or committee member who has a conflict of interest must:

- (a) before any consideration of the matter disclose the fact that 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 director or committee member believes another director or committee member has not declared a conflict of interest (despite informal notification or inquiry) the director or committee member who has that belief must advise an appropriate person such as the Chair of the Board, Registrar, or legal counsel (if the conflict arises in a hearing context). If the Board of Directors or a committee chair concludes that a director or committee member respectively has an undeclared conflict of interest, the Board of Directors or the committee chair may direct the director or committee member to immediately comply with clauses (b), (c) and (d) of section 16.3.

17. Bylaws and Amendments

17.1. Making Bylaws

Bylaws of the College may be enacted, amended, or revoked by a vote of at least two-thirds of the directors present at a 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 bylaw shall be given to the Board of Directors at least ten days prior to the meeting referred to in section 17.1.

17.3. Record of Bylaws

The Registrar shall maintain a consolidated set of College bylaws that reflect any revocation and amendment that the Board of Directors makes to them.

Board Briefing Note

Topic:	Governance Review Report
Purpose:	For discussion
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Governance Committee

Issue

To review the findings of the governance review report.

Public Interest Rationale

The governance review will provide an objective evaluation of CDO's governance practices and identify ways to further enhance CDO's effectiveness at achieving its public interest mandate.

Background

Brian O'Riordan and Maia MacNiven of TBG MacNiven were retained to undertake the 2025 governance review between August and November 2025 in a competitive RFP process.

The review was conducted using a consultative and collaborative approach, drawing on input from Board directors, senior staff, system partners and the Governance Committee. As part of their assessment of the Board's governance activities, TBG MacNiven observed the September Board meeting and provided a brief overview of the project plan. Following this, interviews were conducted with Board members and members of the leadership team. On September 22, the Governance Committee shared its reflections and perspectives on CDO's governance structure with TBG MacNiven.

At its meeting on November 4, the Governance Committee was presented with the draft governance review report for feedback before its final presentation to the Board. The committee provided positive feedback but agreed that further context was needed in the recommendation to undertake a review of the role and function of the Executive Committee.

TBG MacNiven agreed to include further background and context regarding the steps already taken to reduce the Executive Committee's responsibilities.

Considerations

The governance review report (*Appendix 1*) highlights areas of strength and leadership, as well as opportunities for improvement. Overall, the findings show that the Board is functioning well and has a very strong focus on upholding its public interest mandate.

The following recommendations were made to strengthen CDO's governance framework:

1. To enhance transparency and accountability, expand on opportunities to engage and formally consult on a more regular basis with the public and with system partners such as Dietitians of Canada and educational institutions.
2. To enhance transparency and accountability, post on the College website biographical information on the members of the Board so that it is clear who is governing the organization.
3. To ensure that all Board members understand the applicability and uses made of the new governance competency and attributes framework with respect to the recruitment of individuals to serve on the Board and its committees, enhance Board education in this area.
4. To enable Board members to better comprehend the content of the decision items which they are approving, ensure that all major resolutions for approval are included in the Board meeting package. In some cases, the College could also consider sharing the resolutions on the screen during Board meetings to facilitate discussion.
5. To improve consistency in decision-making across committees, the College should standardize the formats for committee briefing materials and the support provided to committees.
6. To improve the framework for Committees, undertake a review of the role and function of the Executive Committee.



Next Steps

To discuss the governance review report and the recommendations to pursue and prioritize. Based on the board discussion, an implementation plan will be developed for consideration by the board at a future meeting.

Attachments

- Appendix 1: Governance Review Report

An External Review of the Governance Framework of the College of Dietitians of Ontario (CDO)

Final Report

November 28, 2025

TBG MacNiven and DABOR Consulting

Principals: Maia MacNiven and Brian O’Riordan

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1. Introduction

The College of Dietitians of Ontario¹ (CDO) commissioned an external review of its governance framework, to be undertaken during the period from August 2025 to November 2025. TBG MacNiven and DABOR consulting were retained to undertake this work, following a competitive Request for Proposal process. The backgrounds of the consultants who are conducting this review are available at Appendix A.

There are many definitions of what is meant by "governance". We have chosen the following as our guide. It was developed by the Governance Institute of Australia: "*Governance encompasses the system by which an organization is controlled and operates and the mechanisms by which it, and its people, are held to account. Ethic, risk management compliance and administration are all elements of governance.*"

Therefore, we looked to see if, in general, the individuals serving on the CDO Board had an understanding of their role as regulatory decision makers and were focussed on achieving outcomes which were defensible and ethical and which also mitigated the risks respecting the College's ability to achieve its overall mission of protecting the public.

This review fulfils a requirement set out in the Ministry of Health's College Performance Measurement Framework (CPMF). Specifically, the College is expected to have a governance framework that includes a third-party assessment of the effectiveness of the Board of Directors. The Ministry expects that these assessments will take place, at a minimum, every three years (CPMF Measure 1.2.b)².

The focus of this external review is guided by the overall goal of the CPMF which aims to determine "how well are Colleges executing their mandate to act in the public interest"³.

¹ The College has at present a board of 12, with 6 being elected by the registrants of the College and 6 public members appointed by the government of Ontario. It has an Executive Committee of 4, who are elected annually by the board of directors. The registrar and executive director supervises a staff of 15. In 2023-24, the College had 4,545 registrants, of which 97% were female. 94% were trained in Canada and 23% were over the age of 50. The college has an annual budget of approximately \$4million. A General Registrant of the College must currently pay an annual licensing fee of \$667. Like all the health regulatory colleges in Ontario, the College performs certain core functions: registering applicants for initial licensure; licensing registrants each year only after they have completed the requirements of a Quality Assurance program; and responding to any complaints received. In 2023-24, the College received a total of 17 new complaints, reports or referrals. No matters were sent to discipline in that year. The *Dietitians Act, 1991* describes the scope of practice for the profession as the: "assessment of nutrition and nutrition and nutritional conditions and the treatment and prevention of nutrition related disorders by nutritional means." The College has been in existence since December of 1993.

² <https://collegeofdietitians.org/wp-content/uploads/2025/03/2024-CPMF-Report.pdf>

³ IBID

The CPMF reporting tool sets out seven measurement domains: governance; resources; system partner; information management; regulatory policies; suitability to practice; and measurement, reporting and improvement. It is significant, in our view, that the governance domain is the first area of focus. This makes sense because, in our view, governance is the foundation of organizational wellbeing and performance excellence. **A functional governance framework is essential for a regulatory organization to be successful.**

Our assessment is intended to provide the Board with the opportunity to gauge how effectively it is meeting its public interest mandate. As part of its commitment to transparency, it is our understanding that the College will ensure that this report will be in the public domain.

We have adopted a consultative and collaborative approach in undertaking this review. To inform our recommendations, we have applied a best practice lens, drawing on both Canadian and international regulatory governance examples, as well as documents published by the Professional Standards Authority (PSA-UK). We have also considered reports and findings regarding the governance of other regulatory agencies in Ontario and Canada. From this, we developed a set of leading practices and principles in governance against which we measured CDO's governance framework.

Our report draws on an analysis of key documents, our observations of a Board meeting, and input received from Board and Committee members, College staff and system partners. Our recommendations are made within the parameters of the *Regulated Health Professions Act* (RHPA) legislative framework.

CDO has recently implemented several measures as part of a "governance modernization strategy". This strategy was developed following a 2022 external review of the college's Governance Framework. In addition to the development of a Board Competency and Attribute Framework, the governance modernization strategy resulted in the amalgamation of professional board member electoral districts, so that there is now a single district. As well, the previous requirement to have nominators for electoral district candidates has been eliminated.

These measures underline the college's insight into the role that must be played by members of the board. The organization understands that all members of the board, regardless of where they reside or work, must act in the public interest and must not advocate on behalf of those regulated or any individual system partner.

Within its current legislative requirements for board composition⁴, the college has been able to achieve an equal balance in representation between professional and public members of the board. This balance reflects the overall goal of the *Regulated Health Professions Act* (RHPA) which

⁴ The *Dietitians Act, 1991* states in Article 5(1) that "at least six and no more than nine professional members" can be elected to the board of directors, and that there can be "at least five and no more than eight" public members appointed to the Board by the provincial government. Therefore, there can be, at any one time, a minimum of six professional members and five public members, for a total of 11, or there can be a maximum of nine professional members and eight public members for a maximum of 17.

emphasizes enhanced participation by the public in the self-regulation of the province's health professionals. The achievement of this balance also has had the effect of reducing the overall number of individuals on the board. There are now six professional and six public members. Many leading governance experts believe that the ideal size for a board of directors is ten to twelve members. The college leadership is aware of this thinking and has purposefully taken this into account in determining the size of the board.

The college's governance modernization plan also includes a commitment to the phasing-in of new term limits for members of the board. Board members will now serve a total of two three-year terms (six years). Previously, the limit was a total of nine years. The new upper limit is intended to allow opportunities for more individuals with differing perspectives and backgrounds to participate in the governance of the college.

In our view, it is commendable that in addition to the measures listed above for governance modernization, the college has recently appointed a Director of Governance and Regulatory Policy. This is a senior level staff position and is intended to ensure that the college continues to focus on striving for excellence in governance. One of the Director's central roles is to support the newly established Governance Committee of the board.

Our review is intended to build on the college's modernization strategy and allow it to continue to be a strong leader in governance innovation and excellence.

We would like to thank CDO for its support throughout the review, especially in organizing meetings and interviews. We especially appreciate the time that the Board, College Staff and System Partners took to meet with us and to provide us with valuable insights and feedback. We would like to thank, in particular, Melanie Woodbeck, Lisa Dalicandro and Jada Pierre-Malcolm for their support.

2. Executive Summary

Overall, we find that the Board of the College of Dietitians of Ontario (CDO) is functioning well.

It has a very strong focus on upholding the public interest and is open to innovations and changes which will improve its governance framework on an ongoing basis. We also found that the board understands their role as being one of governance and not day-to-day direction of college operations. This is a board, going forward, that is well-positioned for success. Our recommendations for improvement are hopefully useful, but are relatively minor in nature.

Board members have a strong commitment to the implementation of recent governance modernization measures, including moving to a unified single electoral district for professional members, reducing the size of the board, and re-engineering the structure of the committees. We found that the recently introduced Competency and Attribute Framework is comprehensive and provides the board with a set of skills and attributes which enables the board to function effectively. However, we did find that some board members were not as clear as others on how the Framework is used to assist in the screening and selection process for board and committee members.

We found that the board has the structures and processes in place to function effectively. Some board members did indicate that there could be an improvement in the consistency of supports provided at the committee level. The relationship between the Chair and the Board, and the Chair and the Registrar and Executive Director (the Registrar), were described in very positive terms. Board members were also very positive about the support provided to the board by college staff.

Board members said that they were actively involved in the development of CDO's most recent Strategic Plan. They described the Plan process as being very engaging and interactive. Our review of the process and materials confirm these observations. We note that key performance indicators (KPIs) for tracking progress in implementation of the Plan will soon be finalized by the board.

The board's commitment to Equity, Diversity, Inclusion and Belonging (EDI-B) is evident. The college's corporate values, as approved by the board, include commitments to the furtherance of EDI-B principles and actions. The board has participated in a number of EDI-B education sessions led by recognized experts in the field. The Board and Committee competency matrices also include specific reference to EDI-B.

We measured the performance of the board in accordance with the set of leading governance principles which we have developed. Our findings are that with respect to six of the eight principles, the Board fully meets the principle involved. In two instances, the board partially meets the principle, and some further work is needed. For details on our findings, please see Section 6 of this Report.

As indicated above, our overall findings with respect to the governance of the college are positive in nature. However, in the course of our review we did identify a number of areas where some actions could be taken to strengthen the governance framework. A list of these areas for improvement is provided in Section 7 of our report.

3. The Review Process

Our approach included the following key components:

- We first undertook **an examination of key College documents**: By-laws, staffing arrangements, board and committee meeting mandates, materials and minutes. Other governance documents were also reviewed: the college's Governance Manual, governance policies, rules of order for meetings, board member orientation, training and educational materials, the board member self-evaluation process and the Competency and Attribute Framework. We also reviewed the College's Risk Framework, Equity Diversity Inclusion and Belonging (EDI-B) initiatives and recommendations flowing from the 2022 External College Governance Review. Additionally, we made ourselves familiar with the College's 2021-2025 and 2025-2029 Strategic Plans and processes and recent annual reports.
- We studied Canadian and international **regulatory governance best practices and resource documents**, such as those published by the Professional Standards Authority (PSA-UK). We also considered recent reports and findings regarding the governance of other regulatory agencies in Ontario and Canada.
- We **observed a Board meeting** of the College and a meeting evaluation discussion which took place immediately following the Board meeting.
- **The Governance Committee** was also involved in the review process, including providing an opportunity for us to discuss with them a wide variety of governance-related issues as well as obtaining their perceptions on how well their committee was functioning.
- A total of seventeen **individual interviews** were held. This involved all twelve board members, the Registrar, three senior staff and one system partner. Interviewees were provided with questions to help guide the discussion. Those interviewed were encouraged to share candidly their impressions, experiences and insights, with an understanding that all comments were to be kept confidential and were to be unattributed. A list of interviewees is attached as Appendix B.
- To obtain the perspectives of registrants, we were able to review responses to a CDO **Registrant Survey** which was conducted in late October and early November of 2025. The survey was a multi-purpose survey which included a number of questions relating to the experience of registrants with respect to a wide range of college functions and services. The college shared with us some of the feedback from registrants relating to matters of public protection.

We held several touchpoint meetings with the Registrar and Director of Governance and Regulatory Policy in order to provide them with progress reports relating to the development of our recommendations. A draft report of our findings was presented to the Governance Committee in early November. Our final report was presented to the Board at its meeting on November 28, 2025.

4. Governance Principles Guiding the Review

Our analysis of CDO's Governance Framework was guided in part by our review of key reports in the healthcare and other sectors in Ontario, in other provinces, as well as internationally. The focus on governance has increased exponentially, particularly in regulatory areas, with the publication in 2019 of Harry Cayton's report "An Inquiry into the performance of the College of Dental Surgeons of British Columbia and the Health Professions Act". This report led to sweeping legislative reforms in BC, some of which have been implemented and some of which are coming into force in 2026. The Cayton Report and its implementation was followed by a number of other such reports across Canada, which in some cases have led to legislative reform. These reports identify some common areas of focus foundational to the practice of good governance for regulatory bodies.

As evidence that a board is on the right track with respect to the health of its governance framework many reports mention the following:

- a clear commitment by the board to improving patient safety and public protection
- an understanding of the very distinct organizational roles played by staff and board members
- making improvements in the efficiency and effectiveness of board meetings and the overall regulatory oversight of professionals
- enhancing public and system partner trust in the work of the regulator through introducing substantial levels of organizational consultation, transparency and accountability
- reducing the size of boards to make them more manageable and more balanced in composition as to between public and professional members
- striving for governance which is more representative of the diversity of patient and registrant demographics
- improving the overall effectiveness of regulatory boards and committees by introducing measures that provide a much greater focus on required skills and competencies in board selection processes

In order to facilitate the work involved in our review of CDO's governance, we developed a set of principles against which we have measured the performance of the organization's governance framework. These principles are informed by international regulatory best practices such as the "Standards of Good Regulation" and "Right Touch Regulation" developed by the Professional Standards Authority (PSA-UK), and the "Standards of Good Regulation" developed by the Office of the Superintendent of Professional Governance (OSPG) in British Columbia. We also reviewed many other recent governance performance reports.

Our list of principles is set out in detail in Appendix "C". They provide the basis for our analysis in Section 6 of this report.

5. Overall Findings and Major Themes

Overall, we find that the CDO Board is functioning well. Both new and veteran board members expressed their strong belief that the board is working effectively together, and has a very strong focus on upholding the public interest and being open to innovation and change. We found that the board does understand its main role to be one of protecting the public interest, i.e., ensuring that members of the public receive healthcare from dietitians licenced by the college who, throughout their careers maintain the knowledge, skills and judgment to provide competent and ethical care.

The importance of public protection was noted in many of the Board member interviews that we conducted and during the board meeting that we observed. Some members of the board provided solid definitions of what they consider to be the “public interest”. For example, they mentioned: considering how one would like to be treated by a dietitian; ensuring that care provided is done so in a safe and effective manner; and that the public is protected from registrants who are not providing competent, respectful and effective care. It was also noted by board members that the three major pillars of the College’s work: Registration, Quality Assurance and the handling of complaints were integral to the protection of the public. Board members understand why the college was created and that its major role and function is to provide protection for the public.

Members also understand their role as being one of governance and not day-to-day direction of college operations. Some board members expressed the view that this understanding has evolved in a positive direction particularly over the past three to four years.

It is evident from our interviews that board members have a strong commitment to the introduction of recent CDO governance modernization measures, including: reducing the size of the Board, eliminating regional elections, introducing shorter term limits and making changes to committee structure. The board has recently created two new committees: Governance and Finance and Audit. These two committees have affected the role of the Executive Committee. Board members support the new committee structure but acknowledge that, given that the Executive Committee must remain in place under the current legislative framework, the role and function of the committee needs to be reviewed.

The establishment of an equal number of public and professional members was seen as a positive change. However, some board members raised concerns about ensuring that perspectives from those outside larger urban areas were reflected in the composition of the board. Board members noted that the present composition of the board and committees was generally reflective of the diversity of the province, but some members felt that there was also a need to be mindful of inclusivity with respect to the province’s Francophone and Indigenous populations.

Board members stated strongly that they were satisfied with board meeting packages in terms of content and timeliness in the posting of materials. Materials are posted two weeks in advance of meeting dates. However, members felt that there could be some improvement in the timeliness of the posting of materials for committees of the board. They also indicated that some of the materials could be better organized and presented at committees and that committees could benefit from the introduction of more decision-making tools. College staff acknowledged that there

was some inconsistency in the supports provided at the committee level and that this is something that will be addressed on a priority basis. Board members said that it would be useful to standardize formats used for committee briefing materials in order to achieve better outcomes. There were also questions raised regarding reporting of committees up to the Board.

Overall, board members were pleased with the management of board and committee meetings.

With respect to the relationship between the board and the Registrar, board members expressed that they had high regard for the Registrar and that, in particular, they noted that she was responsive and professional in her interactions with the members of the board. Members also indicated that they believed that the Registrar was well supported by the staff of the college.

The current Chair of the Board was described by his colleagues as being very competent and respectful of all members. Several members indicated that the Chair provided strong leadership and was adept at encouraging participation by everyone.

Regarding the competencies and attributes framework, we found that some board members were more conversant than others with the contents of the framework and how it was being used. We see this as an area where more education sessions could be helpful.

Board members were positive about the training and education they received throughout the year, particularly with regard to training for board and committee chairs, EDI-B, and governance. The board does have an annual workplan which includes provisions for training and education and “teaching and learning moments” at each board meeting.

Board members felt that the strategic planning process was effective. They noted that they were part of at least four planning sessions involving the development of the most recent Strategic Plan. They noted that the Plan was very useful in guiding the work of the college and were satisfied that the main goals of the Plan were resourced in annual budgets.

A majority of board members raised questions about whether college EDI-B initiatives and approaches were being incorporated into the practice of registrants. Members believe that public protection would be enhanced if there were more targeted measurement initiatives in this respect.

Regarding the findings shared with us from the recent College survey of registrants, we found the following relevant to our work. Seventy percent (70%) of survey respondents felt that CDO provides them with a balanced approach to regulatory support for public protection, while still leaving room for dietitians to use their professional judgment in specific patient interactions. Eighty-seven percent (87%) of registrants responding to the survey indicated that CDO was “very effective” or “somewhat effective” in fulfilling its public protection role as a health regulator. In our view, these response rates are positive and demonstrate that registrants have a good understanding of the role of the college and its effective use of right touch approaches to regulation.

6. Assessment of Alignment of Board with Best Practice Governance Principles

The following section of our report provides a detailed review of how the CDO Board is aligned with our best practice governance principles which we mentioned in Section 4 of our report.

- a. *The Board has a solid understanding of its role in protecting the public interest.*

Our finding is that this principle is met.

The CDO Board has a solid understanding of its role respecting the protection of the public through regulation of the registrants of the college. This is evidenced in the responses of the board members provided during the interviews we conducted, which included references to being treated by a dietitian as one would like to be treated oneself, and confirmation that the concept of public interest is top of mind during board and committee meetings.

We also saw evidence of this alignment in the discussions at the board meeting which we observed and in materials reviewed by the board. For example, the board briefing materials contained public interest rationales explaining why the actions to be taken by the board were in the public interest. We note that the board meeting minutes that we reviewed included public interest rationales for key items. As an example, the minutes for the June 20, 2025 Board meeting included a public interest rationale for the development of KPIs and targets that CDO will use to track progress in the implementation of the 2025-2029 Strategic Plan.

The “pulse checks” which immediately follow board and committee meetings include a reflection on the college’s public protection mandate. In that connection, one of the questions that the board considers as part of the “pulse checks” is: “Did we make decisions in alignment with our public protection mandate and role as CDO’s Board?”

- b. *The Board has established measures to ensure that it has the requisite competencies, skills and attributes to enable it to function effectively.*

Our finding is that this principle is met.

The CDO Board has established a Competency and Attribute Framework to ensure it has in place the requisite competencies, skills and attributes needed for it to function effectively. This Competency and Attribute Framework was approved by the Board in December 2022. We understand that, in June 2023, the College By-law 1: General, was amended to allow the use of the Framework to screen candidates for professional member elections. Board members expressed knowledge of the competencies, skills and attributes contained in the Framework. We found the list of competencies and attributes to be comprehensive.

We did hear from members of the Governance Committee that applications are screened as part of a document review by the Committee to assess if candidates meet the requirements of the Framework. However, some board members were not clear on how the Framework informs the work of the board with respect to recruitment activities for membership on the board and committees, as well as guidance respecting future education and training sessions and materials.

We also note that CDO has established specific competencies and attributes for each committee of the board. These are comprehensive and very useful in highlighting the backgrounds and skills required to serve on individual committees. This is particularly commendable from a governance perspective.

We understand that the results of board member self-evaluations, which included assessments of individual board member skills, were considered in the development of training plans for the board. Some board members thought that more personalized training programs and self-learning packages could be helpful in addressing skill gaps. Our review of the Chair training materials found that this segment of training was comprehensive. We heard that training on EDI-B and governance were very helpful. Some board members mentioned that more training on finance and risk concepts would be useful in building competencies.

- c. *The Board has the appropriate governance structures and processes in place in order to enable it to function effectively.*

Our finding is that this principle is met.

Overall, we find that the board has the appropriate governance structures and processes in place to function effectively. The college has a General By-law which covers a wide range of procedures and authorities including the operations of the board, election of officers, meetings, terms of reference and conflict of interest. This By-Law was last amended in June 2025.

The college also has a Governance Manual, which includes a *Code of Conduct* for board members, as well as the College's vision, mission and values statements, key policies regarding conflict of interest, confidentiality and transparency, rules of order, and post-meeting evaluations. The importance of the Code could be underlined for board members by also including it in the College's General By-Law. We recommend this in particular because the Code contains very explicit guidance for board members with respect to the protection of the public in their approaches and deliberations.

We note that the Manual contains a "Purpose" statement which reads as follows: "The purposes of this manual are as follows: (1) To set out expectations for the Board and individual Board members that go beyond legal requirements and the requirements in the College's by-laws. (2) To establish governance practices that reflect best practices in corporate governance; and (3) To assist the Board in fulfilling its governance responsibilities as effectively as possible." We commend the College for setting out clearly the purposes of the manual.

Governance manuals are becoming increasingly popular throughout the regulatory world. These manuals are important in promoting good governance as they assemble in one place the key documents and roles and responsibilities which governors need in order to carry out their duties. Keeping such manuals current is, therefore, highly recommended. Board members across many jurisdictions are increasingly reliant on manuals as they try to keep current with changes in expectations relating to good governance. We note in this regard that the CDO has in place a regular review and edit log with respect to the updating of the Manual. The Manual and the By-Laws are available on the college's website.

The board also has in place a "consent agenda" for the approval of routine items at board meetings. We found the items covered in the consent agenda to be appropriate. These items usually include such documents as minutes and other items that do not require discussion. The use of the consent agenda allows the board to use its meeting time more effectively.

Rather than relying on written responses to meeting evaluation surveys, the board has adopted what is termed a "pulse check". This process entails the board having a guided discussion following each meeting on how well the board functioned, particularly with respect to upholding the public interest. The Chair of the Board manages the discussion and is responsible for taking action on any items of note arising from these post-meeting discussions. We find that this approach is innovative and useful.

We find that there is evidence that board meeting materials are sent well in advance i.e. two weeks in advance of meetings and posted on a secure site. A minority of items may occasionally be posted one week in advance. These are usually "discussion" rather than "decision" items.

Briefing notes that accompany the materials are very helpful in explaining issues and why the board needs to take action. We did note that a minority of board members found that the amount of material provided was "overwhelming" and could be better summarized. The college should consider making improvements in board meeting materials by better explaining why certain materials have been included and by being more strategic about the volume of materials posted. It would improve the meeting experience if resolutions arising from the briefing materials were displayed on the screen during meetings and were set out more explicitly within the meeting materials package. We note that CDO adopted a new meeting minutes template in 2023 that includes providing reasons for board decisions and the public interest rationale involved.

Board members felt that there could be some improvement in the timeliness of the posting of materials for committees of the board. They also said that some of the materials could be better organized and presented at committees and that committees could benefit from the introduction of decision-making tools. Board members stated that it would be useful to standardize formats used for committee briefing materials as much as possible to achieve better outcomes.

There were also comments made regarding the reporting of committees to the board. This area could be improved by the introduction of greater consistency and explanation around the approaches and requirements for committees to report.

Over the last two years, the board has created two new committees: Governance and Finance and Audit. These two committees have affected the role of the Executive Committee. Board members support the new committee structure but acknowledge that the role and function of the Executive Committee needs to be reviewed, given that having such a committee is a legislative requirement.

We have reviewed the orientation training materials provided to new members of the board and committees and find that the materials are useful and thorough with respect to preparing board and committee members to be successful in their role. We support the practice of delivering the orientation training in person, or virtually, as opposed to providing written materials only. It is important for board members that they can interact easily with the college staff involved in the training and can have their questions answered in a timely way.

Recently, in Ontario, and elsewhere, we have seen instances arise of conflict between and among individual board members and between registrars and senior staff and board members. This has resulted in an increased focus on the ability of regulatory boards to resolve conflicts in a fair, equitable, and timely fashion. These conflicts, if not addressed in an orderly and timely fashion, can provoke a paralysis in decision-making, as they often can become the subject of public comment in the media, fractious legal proceedings, the development of cliques among board members, and public and governmental perceptions of institutional dysfunction. It is, therefore, very important that boards have in place procedures that can be followed objectively and expeditiously when such conflicts arise. We note that CDO has provided for the handling of such matters in a section of their General By-Law (4.3 to 4.6). This is an important and commendable element of their By-Law.

- d. *The Board understands that the Chair plays a key role in the success of the governance framework and in ensuring the effectiveness of meetings.*

Our finding is that this principle is met.

We make this finding because it is evident that board members understand that the Chair's level of competence and leadership abilities are key aspects in the successful and effective governance of the college. Concerning the current Chair, board members used terms such as: "effective, engaging, courteous, facilitative and respectful". They indicated that the Chair treated all members of the board equally. Board members thought that the pace of meetings was appropriate. Additionally, we observed that the Chair did not try to unduly steer or dominate the discussion at any time. The Chair is obviously very well prepared for meetings and conducts them in an effective and even-handed way.

- e. *The Board is actively involved in developing the organization's strategic plan and monitoring its implementation and use.*

Our finding is that this principle is partially met.

Board members indicated that they were actively involved in the development of the 2025-2029 Strategic Plan. There were four workshop sessions involving the board which gave members considerable opportunity to participate in the creation of the Plan's major goals. We find that the board has a clear understanding of how the Plan guides the work of the college and assists in its annual budget-making. During the board meeting, which we observed, members mentioned the Plan in relation to specific items under consideration at the meeting. Their comments linked meeting items to implementation of major Plan goals.

The college is in the process of developing KPIs for the Strategic Plan. These KPIs will be used to track progress in implementing the 2025-2029 plan. A KPI dashboard will be reviewed on a regular basis by the board. Given that this measurement tool is still in development, the principle outlined above is only partially met at the present time. We anticipate that this principle will be fully met within the next few months.

- f. *The Board ensures that the College operates in a transparent and accountable way with respect to the public, those it regulates, and the system partners with whom it collaborates.*

Our finding is that this principle is partially met.

The college has a very robust website. It has a dedicated page involving formal consultations relating to changes in regulations, By-Laws, practice standards and other important documents. The board meetings and discipline hearings are held in accordance with the RHPA, i.e., they are open to the public. In addition, the college streams its board meetings live on YouTube, posts meeting materials and minutes on its website, and publicises the dates of board meetings. The Governance Manual and other important documents and processes can be accessed via the website. The board is also kept regularly informed with respect to the college's focus on being transparent and accountable.

We note that with respect to the college's complaint and discipline process, that the college is posting the requisite information to enable the public to access the complaints process and to read about discipline decisions.

The college also consults with the Citizens Advisory Group (CAG) which describes itself as a "patient feedback tool". It works in partnership with all health regulatory colleges in Ontario. Its purpose is to facilitate the involvement of patient and caregiver voices and perspectives concerning matters of health regulation.

CDO has consulted with CAG on several occasions, including the Billing Standard for Dietitians (2025), the Code of Ethics (2023) and the Insulin Dose Adjustment Position Statement (2022).

CDO recognizes also the importance of consulting with, and learning from, other regulatory colleges in Ontario. The Registrar of CDO is a member of the Management Committee of the Health Profession Regulators of Ontario (HPRO). CDO's participation in this provincial network assists it in improving and enhancing its public protection role. CDO's place at the HPRO table also allows the college to provide input with respect to submissions to the Minister of Health on issues of common provincial impact and interest, including possible reforms in governance models.

The college is a member of the Alliance of Canadian Dietetic Regulatory Bodies (the Alliance). CDO is actively involved in the work of the Alliance such as the recent review of the Canadian Dietetic Registration Examination (CDRE). CDO's engagement with this system partner facilitates the ability of the college to consult on a regular basis with other provincial regulators of dietitians and to collaborate on matters of national importance, such as labour mobility, entry to practice standards, and accreditation of university programs.

The board has an understanding of the importance of the college being seen as accountable, transparent, consultative and collaborative. The college does not, however, currently post information on its website about the backgrounds of its board members. Transparency could be enhanced if short biographies were posted, as this would allow the general public, college registrants and system partners to better know who is governing the college.

It would also enhance the college's commitment to transparency and accountability if there was more regular interaction and formal consultation with the public and system partners, including Dietitians of Canada. In fact, some board members mentioned their desire to see more of this kind of formal consultation, particularly as it pertains to the public.

These additional measures with respect to transparency and consultation are recommended so that the principle outlined above can be fully met.

- g. *The Board reviews at least annually a risk register relating to internal and external factors that are impacting, or could impact, the ongoing governance and operation of the College. The Board is able to attest that the organization has established mitigation processes to manage risk and has clearly identified the severity of the risks.*

Our finding is that this principle is met.

The board receives a Risk Report quarterly. These quarterly updates include a risk response, risk ranking and risk mitigation updates. We note that the college gives prominent ranking to potential risk of harm to patients/public. We believe that this ranking is indicative of the organization's commitment to public protection. This is commendable and is something that should be found in the Risk Registers of all regulators.

Board members identified that the Risk Report is thorough and contains appropriate risk mitigation strategies.

The college also has a “Risk Management Policy Statement”, which was approved by the board in March 2022. This document sets out that the board “has a responsibility to ensure that the college identifies and manages risks to its programs and operations”. The Statement describes how the board fulfils this responsibility. This document was scheduled to be reviewed in 2024, but this did not occur. It should be reviewed as soon as possible.

- h. The Board’s culture reflects the College’s commitment to principles of equity, diversity, inclusion and belonging (EDI-B).*

Our finding is that this principle is met.

The board and committees begin each meeting with a land acknowledgement, delivered by the Chair. CDO also has a webpage dedicated to EDI-B, which includes a formal Statement highlighting the college’s commitment in this area and the board’s undertaking to incorporate EDI-B into its governing culture.

Further evidence of this commitment can be found in the Introduction to the College’s “Equity Policy Development Tool” which states: “Embedding Diversity, Equity, Inclusion, and Belonging (EDI-B) principles into policy development is crucial to ensure that regulatory frameworks do not unintentionally perpetuate systemic inequalities.”

The board has participated recently in various education sessions relating to EDI-B including an overview of the College of Physicians and Surgeons work on EDI-B which explored anti-oppression and implicit bias in decision-making in the health regulatory context. There was also a separate training session titled “Indigenous Unsettling and Trauma Informed Practice Workshop”.

CDO is committed to ensuring that in carrying out the mandate of the college that equity, inclusivity and respect for all is fully reflected in internal operations with a view to overcoming systemic barriers. We note that the college has assigned Aneita Chang, Director of Corporate Services, as the College’s EDI-B lead and that there is an internal EDI-B working group which provides advice to the staff and the Governance Committee of the Board.

The college has recently incorporated EDI-B principles within its corporate values and has approved an EDI-B Vision Statement. It also produced its first Status Report on EDI-B in 2023, which outlined how the college is making progress on implementing EDI-B initiatives within its governance framework.

The board and college have also benefitted from presentations provided by recognised experts in the EDI-B field, such as Dr. Saroo Sharda and Dr. Javeed Sukhera.

Board members expressed to us interest in knowing whether registrants are incorporating EDI-B principles in the delivery of patient care and how this could be

measured by the college. This illustrates the board's interest in having the college promote further a culture of EDI-B which will impact positively on all patient populations.

The Board and Committee Competency and Attribute Framework includes an *Equity, Diversity, Inclusion and Belonging* competency which focuses on awareness of structures of power, structural biases and the ability to apply EDI-B knowledge to deliberations and decision-making. The Framework seeks to identify the attributes that will contribute to diversity on the Board. The Governance Committee confirmed to us that the Framework competencies are used during the College's professional election screening process.

In addition, individual board members expressed their belief that the college and board were strongly committed to upholding principles of EDI-B.

7. Summary of Areas for Improvement

Our overall findings with respect to the governance of the college are quite positive. However, in the course of our review, we did identify a number of relatively minor areas where some further actions could be taken to strengthen the governance framework.

In that connection, we have developed the following summary list of areas for improvement:

- 1 To enhance transparency and accountability, expand on opportunities to engage and formally consult on a more regular basis with the public and with system partners such as Dietitians of Canada and educational institutions.
- 2 To enhance transparency and accountability, post on the college website biographical information on the members of the board so that the public can be better informed on the backgrounds of those who govern the organization.
- 3 To ensure that all board members understand the applicability and uses made of the new governance Competency and Attribute Framework with respect to the recruitment of individuals to serve on the board and its committees, enhance board education in this area.
- 4 To enable board members to better comprehend the content of the decision items which they are approving, ensure that all major resolutions for approval are included in the board meeting package. In some cases, the college could also consider sharing the resolutions on the screen during board meetings to facilitate discussion.
- 5 To improve consistency in decision-making, the college should standardize the formats for committee briefing materials and the support provided to committees.
- 6 To improve the framework for committees, and given that the Executive Committee remains a statutory committee at this time, a review of the role and function of the Executive Committee should be undertaken.

8. Concluding Remarks

Overall, we found that in six of eight instances our best practice in governance principles were fully met. We view this as evidence of a board that understands its role in embracing innovation and excellence in governance, with a strong focus on protecting the public.

The college is clearly committed to fully implementing its approaches to governance modernization and to being a leader in governance. We hope that this report will assist in making improvements in the governance of the college.

It has been a pleasure to work with the board members and staff of the college on this external governance review. We hope that our work makes a useful contribution to the growing number of external governance studies regarding regulated health professionals and other regulated professions.

The opinions in this report are those of the authors alone.

Appendix A: About the Reviewers

Brian O’Riordan

Brian has assisted many organizations in developing: strong and relevant Vision and Mission Statements; sound governance principles and approaches; and Strategic Plans for both advocacy associations and regulatory bodies. His skills and abilities have been honed by his lengthy career as a CEO in health regulation and university program accreditation. He has also been a political strategist, government relations consultant and public and media relations expert.

Brian recently completed fifteen years as CEO of the College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO). As well, for four years he was Vice-Chair of the Health Profession Regulators of Ontario (HPRO). He has also chaired national organizations focused on improving interprofessional labour mobility across Canada. He has held senior positions in the university and hospital association sectors. He was a Chief of Staff and political advisor for several provincial government ministers, including Finance, Labour and Citizenship. He served as Executive Coordinator of the Health Professions Regulatory Advisory Council (HPRAC) for five years during which time HPRAC submitted two landmark reports, which led to extensive modernization of the health professional regulatory framework in Ontario, as well as significant changes in scopes of practice for several professions and the creation of five new regulatory colleges.

He is also an accomplished writer and presenter, including co-authoring two books and writing many magazine and newspaper articles. He has twice served as a Senior Transition Manager for two incoming provincial governments, responsible for creating and staffing over a half-dozen ministerial executive offices. Brian has extensive experience serving on, and chairing boards and committees at the University of Toronto, University of St. Michael’s College, the Metro Toronto Reference Library and the Kidney Foundation of Canada.

Maia MacNiven

Maia MacNiven has been president of MC MacNiven Consulting since its founding in 1998. She specializes in providing advice to clients on governance, strategic planning and policy, as well as professional report writing services. Maia brings a valuable combination of government relations experience in the financial services industry along with public sector experience. MC MacNiven Consulting is a Partner in TBG MacNiven. TBG MacNiven provides advice on governance and strategic planning and has supported the successful start-ups of not-for-profit organizations, including Health Workforce Canada, Vector Institute for Artificial Intelligence and Compute Ontario. Maia was involved in the development of the governance frameworks for these organizations including core policies, committee structures and their strategic frameworks.

Maia has assisted not-for-profit (NFP) and healthcare organizations in the development of transfer payment and other funding agreements with government, along with the development of governance manuals and core governance policies. She has worked with NFP organizations and health regulatory colleges in Ontario to develop governance self-assessment frameworks. She has

worked on interprofessional core competencies and assisted with the development of a standards of practice handbook for a regulatory health collage. She has written publications for the Institute of Public Administration of Canada (IPAC) and the Health Professions Regulatory Advisory Council (HPRAC). She has served as a Director of VON Toronto-York Branch and as a Director of Opera in Concert. She has also completed the ICD NFP Governance Essentials Program.

Appendix B: List of Interviews

CDO Board of Directors

Professional Members (Registered Dietitians)

- Denis Tsang (Chair)
- Ann Watt (Vice-Chair)
- Teresa Taillefer
- Dawn Van Engelen
- Navita Viveky
- Deion Weir

Public Members

- Susan Bodner
- Raynold D'Sa
- Santhikumar Chandrasekharan
- Cheryl Lake
- Galina Semikhnenko
- Zaw Thiha Tun

CDO Registrar and Staff

- Melanie Woodbeck, Registrar & Executive Director
- Carole Chatalalsingh, Director of Professional Practice
- Lisa Dalicandro, Director, Governance and Regulatory Policy
- Elaine Lew, Director of Registration

System Partners

- Mary Anne Smith, Senior Director, Professional Practice, Dietitians of Canada

Appendix C: Principles to Guide the Review

The following sets out the overall principles which we applied to our Review of the College's governance, followed in each case by a list of questions that we sought to answer.

a. The Board has a solid understanding of its role in protecting the public interest.

- Do board members understand that acting in the public interest means that the organization has as its primary objective the protection of the public from registrants of the college who are not providing competent, respectful, and effective service?
- Do board members appreciate that the college's main activities, i.e., Registration, Quality Assurance, Professional Practice and Complaints and Discipline are functioning to protect the public interest?
- Does the board clearly understand its role and responsibilities with respect to the governance of the college, and that the senior leadership and staff of the college manage the organization's day-to-day operations?
- Does the board have in place a "Code of Conduct" for its members, along with a process for declaring conflicts of interest and for raising awareness of matters of conscious and unconscious bias in decision making? Does the board have in place a process for dealing with alleged violations of the Code of Conduct?

b. The Board has established measures to ensure that it has the requisite competencies, skills and attributes to enable it to function effectively.

- Does the board have in place a process for orientation and training of new members?
- Does the board have a competencies and attributes framework in place?
- Has the board established education and recruitment tools respecting the election of professional members and the appointment of non-board committee members?

- c. *The Board has appropriate governance structures and processes in place in order to enable it to function effectively.*
- Does the organization have a Governance Manual, which is comprehensive, regularly updated and available to the public?
 - Has the board adopted a uniform set of meeting processes to support meetings?
- d. *The Board understands that the Chair plays a key role in the success of the governance framework and in ensuring the effectiveness of meetings.*
- Is there is positive and healthy working relationship between the Chair and Registrar?
 - Does the Chair possess both overall leadership and meeting protocol skills?
- e. *The Board is actively involved in developing the organization's strategic plan and monitoring its implementation and use.*
- Are the main goals of strategic plans funded by annual budget allocations?
 - Does the board have in place a set of KPIs that assist it in monitoring the implementation of the strategic plan?
- f. *The Board ensures that the College operates in a transparent and accountable way with respect to the public, those it regulates, and the system partners with whom it collaborates.*
- Is it clear for members of the public, registrants and system partners as to who are the members of the board and what backgrounds and experiences they bring to the governance of the college?
 - Are board meetings and materials easily accessed?
 - Does the board ensure that the college has in place access to materials and procedures for registration, quality assurance and the making of complaints?

g. *The Board reviews at least annually a risk register relating to internal and external factors that are impacting, or could impact, the ongoing governance and operation of the College. The Board is able to attest that the organization has established mitigation processes to manage risk and has clearly identified the seriousness of the risks.*

- Does the board have a risk register in place?
- Does the board monitor risk on an ongoing basis?
- Does the risk register include the overall risk to the public if the college does not fulfil its role in protecting the public?

h. *The Board's culture reflects the College's commitment to principles of equity, diversity, inclusion and belonging (EDI-B).*

- Does the board receive regular training with respect to incorporating principles of EDI-B in its decision-making?
- Does the board begin its meetings with a land acknowledgement?
- Does the board's list of core governance competencies and attributes include reference to EDI-B?
- Does the board's recruitment activities for elections and appointments include reference to EDI-B?

Board Briefing Note

Topic:	Health Professions Discipline Tribunal – Bylaw Updates
Purpose:	Decision Required
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Melanie Woodbeck, Registrar & Executive Director Lisa Dalicandro, Director, Governance & Regulatory Policy

Issue

To approve CDO's participation in the Health Professions Discipline Tribunal (HPDT) for a one-year pilot with amendments to Bylaw 1.

Public Interest Rationale

Joining a third party, independent, administrative tribunal to adjudicate allegations of professional misconduct or incompetence strengthens public protection by ensuring disciplinary processes are fair, consistent, transparent and independent. Sound disciplinary processes are central to effective regulation in the public interest.

Background

In June 2025, David Wright, Chair of the HPDT, provided an update on the HPDT pilot project. The Board discussed whether CDO should join the HPDT at this time, given the expertise and independence of the tribunal, increasingly complex CDO complaints and likelihood of future discipline proceedings. The Board agreed additional information was required before a decision could be made.

In September 2025, the Board considered additional analysis identifying the risks and benefits of joining the HPDT. The Board also heard from the Registrar and Chair of the College of Massage Therapists, who discussed their experience participating in the HPDT.

At its meeting, the Board approved CDO's participation in the HPDT, in principle, pending necessary bylaw revisions.

Considerations

Draft amendments have been made to bylaw 1 to reflect the changes necessary to join the HPDT. A chart with the existing sections, the proposed amendments and rationale are included for consideration as *Appendix 1*. The bylaws are very similar to those of other Colleges participating in the tribunal and have been reviewed by CDO legal counsel.

- **Definition for experienced adjudicators:** The definition of Experienced adjudicators, who are members of the HPDT that will sit on the Ontario Dietitians Discipline Tribunal (Discipline Committee), was added.
- **Appointment of experienced adjudicators:** Provisions were added to allow the Board to appoint experienced adjudicators to the Ontario Dietitians Discipline Tribunal (Discipline Committee).
- **Revocation of an experienced adjudicator:** Provisions were added to allow the Board to remove an experienced adjudicator from the Ontario Dietitians Discipline Tribunal (Discipline Committee) for just cause.
- **Ontario Dietitians Discipline Tribunal:** The Discipline Committee was renamed the Ontario Dietitians Discipline Tribunal, as required by the HPDT.
- **Discipline Committee composition:** The Discipline Committee composition was updated to include experienced adjudicators.

Recommendation

That the Board approve amendments to Bylaw 1 to permit CDO's participation in the HPDT for a one-year pilot, effective December 1, 2025.

Attachments

- Appendix 1: Bylaw 1 Amendments Chart
- Appendix 2: Updated Bylaw 1 (tracked changes)



Draft Bylaw 1 Changes

Current	Proposed	Rationale
1.1 Definitions N/A	1.1 Definitions <u>“experienced adjudicators” means the Health Professions Discipline Tribunals Chair and other individuals with experience as adjudicators recommended by the Health Professions Discipline Tribunals Chair for appointment to the Discipline Committee/Ontario Dietitians Discipline Tribunal.</u>	Definition for experienced adjudicators was added. Experienced Adjudicators are members of the HPDT that will sit on the Ontario Dietitians Discipline Tribunal (Discipline Committee).
N/A	8.6 Appointment of Experienced Adjudicators <u>The Board of Directors may appoint experienced adjudicators to the Discipline Committee (Ontario Dietitians Discipline Tribunal) for a term determined by the Board. The term of appointment for experienced adjudicators does not have a limit.</u>	New subsection added to allow the Board to appoint experienced adjudicators to the Discipline Committee (Ontario Dietitians Discipline Tribunal).
N/A	9.4 Revocation of an Experienced Adjudicator <u>The Board of Directors may only revoke the appointment of an experienced adjudicator for just cause. Prior to deciding to revoke the appointment, the Board of Directors must provide the</u>	New subsection added to allow the Board to remove an experienced adjudicator from the Ontario Dietitians Discipline Tribunal for just cause. The process for revoking an experienced adjudicator is also outlined, which is consistent with the



	<u>individual with written reasons for the proposed revocation and an opportunity to make oral and written submissions to the Board. A decision to revoke the appointment of an experienced adjudicator can be made by resolution requiring a simple majority.</u>	terms of the memorandum of agreement between the HPDT and CDO.
N/A	11.9 Discipline Committee <u>The Discipline Committee shall be known as the Ontario Dietitians Discipline Tribunal in English and Tribunal de discipline des diététistes de l'Ontario in French, and each reference to the Ontario Dietitians Discipline Tribunal or Tribunal de discipline des diététistes de l'Ontario, whether orally or in writing, shall be deemed to be a reference to the Discipline Committee of the College as specified in the Code and the Act, and any other legislation or policy where the context requires.</u>	The Discipline Committee has been renamed the Ontario Dietitians Discipline Tribunal/Tribunal de discipline des diététistes de l'Ontario. All colleges participating in the HPDT are required to rename their Discipline Committees as



11.10 Composition of Discipline Committee The Discipline Committee shall be composed of: (a) at least three elected directors; (b) at least two public directors; and (c) at least one appointed committee member.	11.10 Composition of Discipline Committee The Discipline Committee shall be composed of: (a) at least three elected directors; (b) at least two public directors;and <u>(c) at least one appointed committee member; and-</u> <u>(d) at least one experienced adjudicator.</u>	Experienced Adjudicators have been added to the composition of the Discipline Committee/Ontario Dietitians Discipline Tribunal.
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1. Interpretation

1.1. Definitions

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

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

“appointed committee member” means either an appointed committee member - Registered Dietitian or an appointed committee member - public (both as defined below);

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

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

“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 bylaws 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 bylaws;

“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 member” means a member of a committee of the College and does not include experienced adjudicators;

“director” means a member of the Board of Directors and includes public and elected directors, previously known as public and elected “councillors” in these bylaws;

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

“experienced adjudicators” means the [Health Professions Discipline Tribunals Chair and other individuals with experience as adjudicators recommended by the Health Professions Discipline Tribunals Chair for appointment to the Discipline Committee/Ontario Dietitians Discipline Tribunal](#).

“public director” means a 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 bylaws;

“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 bylaws as the “Vice-President” and does not include a committee vice-chair;

1.2. Calculating Time

In College bylaws, 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 bylaws, 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

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

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 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

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

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 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 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 directors, officers and employees such information as is necessary in their opinion to enable them to report as required by law or under this bylaw.

2.16. Attendance at Board of Directors Meeting

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

2.17. Grants

The Board of Directors may by a vote of at least two-thirds of the 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

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

Elected directors, appointed committee members, 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 the Board of Directors.

2.20. Indemnity

Every director, or committee member and 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 their office; and
- (b) subject to any policies and procedures of the College, all other costs and expenses that they sustain or incur in respect in respect of the affairs of the College,

except any costs, charges or expenses resulting from 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 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 Board directors (with necessary modifications by the Registrar to ensure that the entire province is covered and that there is no overlap of districts):
- i. Electoral district 1, the south-western area, composed of the counties of Elgin, Essex, Kent, Lambton, Middlesex, Oxford, Bruce, Grey, Perth and Huron.
 - 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.
 - iii. Electoral district 3, the central area, composed of the Municipality of Metropolitan Toronto, and the Regional Municipality of York.
 - 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.
 - 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.
 - vi. Electoral district 6, the north-western area, composed of the territorial districts of Kenora, Rainy River and Thunder Bay.
 - 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.



- (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.
- (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 bylaws to elected directors will apply equally to these directors.

3.2. Number of Elected Directors

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 bylaws:

- (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.
- (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 Directors from Each District

For Board of Directors elections and by-elections prior to April 2024, the number of 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 Election

- (a) For Board of Directors by-elections held in an electoral district prior to April 2024, a registrant is eligible to vote 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.



- (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 director is approximately three (3) years starting on the first day of the first scheduled Board of Directors meeting after the election of directors (excluding any special meetings) and the director will continue in office until the day before their successor takes office in accordance with the bylaws.

3.6. Board Eligibility: Maximum Term as Elected Director and/or Appointed Committee Member - Registered Dietitian

- (a) Subject to section 3.7, for Board of Directors elections held prior to April 2026, a director or registrant who has served nine (9) consecutive years as an elected director on the Board of Directors or as an appointed committee member - Registered Dietitian, or in any combination of the two offices, is ineligible to serve on the Board of Directors for a minimum of three (3) years thereafter. This 36 month period is calculated from the date the director or registrant last served as an elected director or committee member, to the first day of the first scheduled Board of Directors meeting after the election of directors (excluding any special meetings).
- (b) Subject to section 3.7, for Board of Directors elections held in or after April 2026, a director or registrant who has served six (6) consecutive years as an elected director on the Board of Directors or as an appointed committee member – Registered Dietitian, or in any combination of the two offices, is ineligible to serve on the Board of Directors for a minimum of three (3) years thereafter. This 36 month period is calculated from the date the director or registrant last served as an elected director or committee member, to the first day of the first scheduled Board of Directors meeting after the election of directors (excluding any special meetings).



3.7. Term of Office for Directors Filling Vacancies

The term of an elected director elected in a by-election or appointed under these bylaws expires when the former elected director's term would have expired. Time spent as an elected director or committee member as a result of a by-election or an appointment by the Board of Directors or Executive Committee 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, elections for elected directors shall be held simultaneously as follows:
 - i. in April of the year 2004 and in April of every third year thereafter for electoral districts 1 and 3;
 - ii. in April of the year 2002 and in April of every third year thereafter for electoral districts 2 and 4;
 - iii. 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 bylaws to the Board of Directors election in April will apply equally to the delayed election.

3.9. Date of Election

Unless otherwise approved by 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 Board of Directors

A registrant is eligible for election to the Board of Directors if, on the date of election or acclamation, or as of such other date specified below:



- (a) the registrant is engaged in the practice of dietetics in Ontario or, if the registrant is not engaged in the practice of dietetics, principally resides in Ontario, or in the case of a by-election prior to April 2024, in the electoral district for which they are nominated;
- (b) the 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 registrants of the class;
- (c) the registrant is not in default of the payment of any fee payable to the College;
- (d) the 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 registrant's certificate of registration has not been revoked or suspended in the preceding six years for any reason other than nonpayment of fees;
- (f) the 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 registrant has not been disqualified by the Board of Directors in the preceding three (3) years as a result of a breach of a code of conduct or policy on conduct approved by the Board of Directors or a breach of the conflict of interest provisions of this bylaw;
- (h) the registrant does not have a notation on the College register of a finding of professional negligence or malpractice made against the registrant;
- (i) the registrant is not the subject of a charge under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (j) the registrant does not have a notation on the College register of a charge in relation to any offence;
- (k) the 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 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 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 registrant is not currently the subject of an undertaking provided to the College with respect to a fitness to practise issue;
- (o) the registrant is not currently the subject of an interim order made by a panel of the Inquiries, Complaints and Reports Committee;
- (p) the 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 registrant is not a member of the Board of Directors or council of any other RHPA college;
- (r) the registrant is not an employee of the College and has not been an employee of the College within the preceding two (2) years;
- (s) the registrant is not an applicant for employment at the College and has not applied for employment at the College within the preceding year;
- (t) the registrant is not in default of completing and submitting any information or form required under the regulations of the RHPA or Act, or the bylaws of the College;
 - (t.1) the registrant meets the competency and attribute 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) the registrant has successfully completed the College's current training program relating to the duties, obligations and expectations of Board of Directors and committee members;



- (v) the registrant is not party to a legal proceeding against the College;
- (w) the 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 registrant does not have a conflict of interest to serve as a director;
- (x) the registrant does not hold a position that would cause the registrant, if elected as a director, to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization
 - (x.1) the registrant does not, and did not within the preceding 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; or
- (y) on the first day of the first scheduled Board of Directors Meeting after the election of directors (excluding any special meetings), the registrant would not be 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 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 registrants eligible to vote that the candidate has withdrawn from the election.

3.12. Eligibility and Election Disputes

Disputes as to whether a registrant is eligible for election or to vote in an election will be determined by the Governance Committee. Disputes relating to the election of an elected director shall be dealt with by the Governance Committee which shall investigate the facts and report its findings and recommendations to the Board of Directors for such decision as 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 registrant eligible to vote of the date, time and electoral district of the election and of the application procedure.

3.14. Applications

A registrant who seeks to be a candidate for election as a director shall apply in writing and shall submit the application to the Registrar at least 60 days before the date of the election (the “application deadline”).

3.15. Acclamation

- (a) For elections and by-elections prior to April 2024, if the number of candidates 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 registrants to be elected in that electoral district, the Registrar shall declare the candidate 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 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 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 bylaws:

- (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;
- (c) establish reliable and secure voting processes;
- (d) provide for the notification of all candidates and registrants of the results of the election;
- (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 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 they deem 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 registrant eligible to vote in the 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 and a ballot or electronic access to a ballot and an explanation of the voting procedure.

3.20. Voting

A registrant eligible to vote may cast as many votes on a ballot as there are registrants to be elected from that electoral district in that election. A 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 registrants to the 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 Directors

4.1. Disqualification

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

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



4.2. Temporary Exclusion

An elected 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 the Board of Directors or on any committee until the proceeding is finally completed.

4.3. Removal of Elected Director

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

- (a) If another director believes that an elected director meets one or more of the criteria for disqualification in section 4.1, they shall advise the Registrar and Executive Committee in writing.
- (b) If the Registrar receives information suggesting that an elected 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 the Board of Directors' consideration, it shall notify the elected director about the nature of the concern and provide him or her with a reasonable opportunity to respond before bringing the matter to the Board of Directors.
- (d) If after considering the elected director's response, if any, the Executive Committee decides that the matter warrants the Board of Directors' consideration, it shall place the matter on the agenda for the next meeting of the Board of Directors, or the Chair of the Board shall call a special Board of Directors meeting for the purpose of determining whether the registrant meets any of the criteria for disqualification under section 4.1. The Registrar shall advise the director who is potentially subject to disqualification of the date of the Board of Directors meeting and that the director may make written or oral submissions to the Board of Directors at the meeting.
- (e) Disqualification of an elected director requires a resolution passed by a majority of not less than two-thirds of the votes cast on the resolution by directors present at the meeting. The elected 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. The Board of Directors shall not consider the registrant for the purpose of establishing quorum or counting votes.



- (f) A disqualified director ceases to be a member of the Board of Directors and any of its committees.

4.4. Disqualification and Removal of Public Director

The following procedure applies to the disqualification and removal of a public director:

- (a) If a director believes that a public 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), they shall advise the Registrar and Executive Committee in writing.
- (b) If the Registrar receives information suggesting that a public 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 public director with necessary modifications.

4.5. Notice to Minister

Following the disqualification of a public director, the 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 director from the Board of Directors.

4.6. Suspension of Public Director

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

5. Vacancies

5.1. Creation of Vacancy

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



5.2. Filling Vacancy – Less than One Year

- (a) If prior to the 2024 Board of Directors election, the seat of an elected director becomes vacant in an electoral district 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 for that position in 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.

5.3. Filling Vacancy – More than One Year

- (a) If prior to 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 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.

6. Officers



6.1. Officers

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

6.2. Chair of the Board (Chair)

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

6.3. Vice-Chair of the Board (Vice-Chair)

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

6.4. Appointment of Registrar

The Registrar shall be appointed by the Board of Directors and shall be the Executive Director of the College. The Executive Committee shall not exercise the authority of the 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 the Board of Directors.

6.6. Registrar Duties

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

6.7. Appointment of Acting Registrar

During extended absences of the Registrar, the 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 Board of Directors shall appoint an Acting Registrar. If the Executive Committee appoints an Acting Registrar, the appointment or approval is subject to Board of Directors approval at the next meeting of 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

The Board of Directors may remove an officer of the College by a two-thirds majority vote of the directors present at a 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 the Board of Directors

7.1. Board of Directors Meetings

The Board of Directors shall have at least four regular meetings during each calendar year, with no more than four months between meetings. 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 the Board of Directors from time to time.

7.2. Reasonable Notice for Board of Directors Meetings

Written notification of the date, time and place of a Board of Directors meeting will be delivered to each 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 director will not invalidate a resolution that the Board of Directors passes at the meeting or any action or proceeding it takes at the meeting.

7.3. Business at Regular Meetings

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 director at a preceding Board of Directors meeting;
- (e) such other matters, not included in the agenda, that at least two-thirds of the directors in attendance determine to be of an urgent nature; and
- (f) routine and procedural matters.

7.4. Special Meetings

A special meeting of the Board of Directors may be called by the Chair of the Board or the majority of 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 director not less than three days before the date of the special meeting, unless notice is unanimously waived by the Board of Directors. 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 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 the Board of Directors determines otherwise.



7.7. Chair or Vice-Chair of the Board Presides

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

7.8. Presiding Officer

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

7.9. Quorum

A quorum for any meeting of the Board of Directors is as set out in the RHPA. A 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 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 bylaws, every motion which properly comes before the Board of Directors shall be decided by a simple majority of the votes cast at the meeting by 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 Board of Directors meeting shall be by a show of hands but, if any two 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 bylaws of the College, any questions of procedure at or for any meetings of 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 Board of Directors adopts from time to time.

7.13. Unanimous Resolutions

A resolution or bylaw signed by all members of the Board of Directors is as valid and effective as if passed at a meeting of the Board of Directors held for the purpose, and a director's signature may be an identifying mark created or communicated using electronic means.

8. Committee Establishment and Appointments

8.1. Establishment and Appointees

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 the Board of Directors will give due consideration to the recommendations, if any, of the Governance Committee.

8.2. Appointment to Committees

The Board of Directors will at the first regular Board of Directors meeting following each scheduled election of directors appoint the members of each committee and a chair of each committee in a manner prescribed by the Board of Directors from time to time. In appointing members to committees the Board of Directors will give due consideration to the recommendations, if any, of the Governance Committee. 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 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 as an Appointed Committee Member - Registered Dietitian

The Board of Directors may appoint a registrant who is not a director to serve on a committee if, as of the date of the appointment, or as of such other date specified below,

- (a) the 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 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 registrants of the class;
- (c) the registrant is not in default of the payment of any fee payable to the College;
- (d) the 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 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 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 registrant has not been disqualified by the 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 the Board of Directors or a breach of the conflict of interest provisions of this bylaw;

- (h) the registrant is engaged in the practice of dietetics in Ontario or, if the registrant is not engaged in the practice of dietetics, principally resides in Ontario;
- (i) the registrant does not have a notation on the College register of a finding of professional negligence or malpractice made against the registrant;
- (j) the registrant is not the subject of a charge under the *Criminal Code* (Canada) or the *Controlled Drugs and Substances Act* (Canada);
- (k) the registrant does not have a notation on the College register of a charge in relation to any offence;
- (l) the 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 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 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 registrant is not currently the subject of an undertaking provided to the College with respect to a fitness to practise issue;
- (p) the registrant is not currently the subject of an interim order made by a panel of the Inquiries, Complaints and Reports Committee;
- (q) the 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 registrant is not a member of the Board of Directors or council of any other RHPA college;



- (s) the registrant is not an employee of the College and has not been an employee of the College during the preceding two (2) years;
- (t) the registrant is not an applicant for employment at the College and has not applied for employment at the College during the preceding year;
- (u) the registrant is not in default of completing and submitting any information or form required under the regulations of the RHPA or Act, or the bylaws of the College;
- (u.1) the registrant meets the competency and attribute 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;
- (v) the registrant has successfully completed the College's current training program relating to the duties, obligations and expectations of Board of Directors and committee members;
- (w) the registrant is not party to a legal proceeding against the College;
- (x) the 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 registrant does not have a conflict of interest to serve as a member of the Board of Directors;
- (y) the registrant does not hold a position that would cause the registrant to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization;

(y.1) the registrant does not, and did not within the preceding 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; or
- (z) the registrant is not ineligible because of section 8.5.



8.5. Eligibility for Committee Appointment as an Appointed Committee Member - Public

The Board of Directors may appoint a member of the public who is not a director to serve on a committee if, as of the date of the appointment, or as of such other date specified below:

- (a) the applicant 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 applicant is not the subject of any disciplinary or incapacity proceeding in Ontario or any similar proceeding in any other jurisdiction relating to any profession;
- (c) the applicant has not had a certificate of registration or similar registration status with any professional regulatory body revoked or suspended in the six years preceding the date of the appointment for any reason other than non-payment of fees;
- (d) the applicant has not been found to have committed professional misconduct by any discipline committee or comparable decision-making body in any jurisdiction relating to any profession;
- (e) the applicant has not been disqualified by the 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 the Board of Directors or a breach of the conflict of interest provisions of this bylaw;
- (f) the applicant is not engaged in the practice of dietetics in any jurisdiction;
- (g) the applicant principally resides in Ontario;



- (h) the applicant has submitted a criminal record check dated within six (6) months of the date the application is filed with the Registrar, in the form required by the College;
- (i) the applicant has not had a finding of professional negligence or malpractice made against them;
- (j) the applicant is not the subject of a charge under the Criminal Code (Canada) or the Controlled Drugs and Substances Act (Canada) that is relevant to their suitability to serve;
- (k) the applicant does not have any charges against them in relation to any offence that is relevant to their suitability to serve;
- (l) the applicant does not have a criminal finding of guilt as an adult under the Criminal Code (Canada) or the Controlled Drugs and Substances Act (Canada) that is relevant to their suitability to serve;
- (m) the applicant has not had a finding of guilt made against them by a court with respect to any offence that is relevant to their suitability to serve;
- (n) the registrant has not entered an undertaking with any professional regulatory body with respect to a matter involving a complaint or disciplinary matter;
- (o) the applicant is not currently the subject of an undertaking provided to any professional regulatory body with respect to a fitness to practise issue;
- (p) the applicant is not currently the subject of an interim order made by a professional regulatory body;
- (q) the applicant has not been ordered to attend to receive a caution from a panel of any Inquiries, Complaints and Reports Committee or from a comparable decision-



making body or decision-maker, or been required to complete a specified continuing education or remediation program or comparable program by a panel of any Inquiries, Complaints and Reports Committee or by a comparable decision-making body or decision-maker in the preceding three (3) years;

- (r) the applicant is not a member of the board of directors or council of any RHPA college, and has not resigned from the Board of Directors during the preceding three (3) years;
- (s) the applicant is not a current or former employee of the College;
- (t) the applicant is not an applicant for employment at the College and has not applied for employment at the College during the preceding year;
- (u) the applicant meets the competency and attribute 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;
- (v) the applicant has successfully completed the College's current training program relating to the duties, obligations and expectations of Board of Directors and committee members;
- (w) the applicant is not and has never been a party to a legal proceeding against the College;
- (x) the applicant has completed and filed with the Registrar a conflict of interest declaration by the deadline and in the form approved by the Registrar, and does not have a disqualifying conflict of interest;



- (y) the applicant does not hold a position that would cause the applicant to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization;
- (z) the applicant does not, and did not within the preceding 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; or
- (aa) the applicant is not ineligible because of section 8.5.

8.6. Appointment of Experienced Adjudicators

[The Board of Directors may appoint experienced adjudicators to the Discipline Committee \(Ontario Dietitians Discipline Tribunal\) for a term determined by the Board. The term of appointment for experienced adjudicators does not have a limit.](#)

8.6.8.7. Term of Office of Committee Members

- (a) The term of office of a committee member is approximately three (3) years from the date of appointment or re-appointment to a committee.
- (b) Subject to clause (d), for committee appointments prior to the April 2026 Board of Directors elections, no person may serve as a committee member for more than nine (9) consecutive years. A person who has served as a committee member for nine (9) consecutive years, whether as an appointed committee member or as a director or in any combination of the two offices, is not eligible for appointment as a committee member for at least three (3) years from the date the person last served as a committee member.
- (c) Subject to clause (d), for committee appointments any time after the April 2026 Board of Directors elections, no person may serve as a committee member for more than six (6) consecutive years. A person who has served as a committee member for six (6) consecutive years, whether as an appointed committee member or as a director or in any combination of the two roles, is not eligible for appointment as a committee



member for at least three (3) years from the date the person last served as a committee member.

- (d) Time spent as a committee member as a result of a by-election (in the case of elected directors) or an appointment by the Board of Directors or Executive Committee to fill a vacancy (in the case of elected directors and appointed committee members) is not included for the purposes of determining the maximum term described in clauses (b) and (c).

8.7.8.8. Continuation of Term of Office

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

8.8.8.9. 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. The Executive Committee may seek the Governance Committee's recommendation when making such an appointment. A member of a committee appointed by the Executive Committee is subject to confirmation by the Board of Directors at its next meeting.

8.9.8.10. Executive Committee Vacancies

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

9. Disqualification and Removal of Appointed Committee Members

9.1. Disqualification Criteria

An appointed committee member 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 8.4 or section 8.4.1, as applicable;
- (b) the appointee after being appointed ceases to meet one or more of the eligibility requirements in section 8.4 or section 8.4.1, as applicable;
- (c) the appointed committee member fails, without reasonable cause, to attend three consecutive meetings of the committee of which they are a member;
- (d) the appointed committee member fails, without reasonable cause, to attend a hearing or proceeding of a panel for which they have been selected; or
- (e) the appointed committee member fails, in the opinion of the Board of Directors, to discharge their duties to the College, including without limitation having acted in a conflict of interest or otherwise in breach of a College bylaw, 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 Appointed Committee Member

The Board of Directors or the Executive Committee may remove an appointed committee member by resolution requiring a simple majority. The Board of Directors or the Executive Committee has the power to remove an appointed committee member whether or not one of the disqualification criteria in section 9.1 applies.

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



9.4. Revocation of an Experienced Adjudicator

The Board of Directors may only revoke the appointment of an experienced adjudicator for just cause. Prior to deciding to revoke the appointment, the Board of Directors must provide the individual with written reasons for the proposed revocation and an opportunity to make oral and written submissions to the Board. A decision to revoke the appointment of an experienced adjudicator can be made by resolution requiring a simple majority.

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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 the Board of Directors determines otherwise.

10.4. Chair of Meetings

The committee chair or 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 bylaws, 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 bylaws, 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 Chair of the Board, the Vice-Chair of the Board and two other members of the Board of Directors. At least one member of the Executive Committee must be a public director.

11.2. Executive Committee Duties

In addition to the duties provided to the Executive Committee under the RHPA and bylaws of the College, the Executive Committee will act in an advisory capacity to 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 the Board of Directors;
- (b) make recommendations relating to the financial reserves of the College;



- (c) report at least annually to the 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 Board of Directors, the Registrar will send an invitation to all directors requesting written expressions of interest to stand for election to any of the offices of Chair of the Board, Vice-Chair of the Board and member of the Executive Committee.

11.4. Election of Executive Committee

At the first Board of Directors meeting after the election of directors, the Registrar shall conduct an election to determine the members of the Executive Committee in the order of Chair of the Board, Vice-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 Chair of the Board;
- (b) the Board of Directors may also approve nominations for the office of Chair of the Board at the time of the election (and a 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 the Board of Directors for up to two minutes about their 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 the Board of Directors elects the Chair of the Board, it will elect the Vice Chair of the Board in a similar manner;
- (i) After the Board of Directors elects the Vice-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 bylaw, the term of office of the Chair and Vice-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 Chair and Vice-Chair of the Board in the following year.

11.6. Composition of Registration Committee

The Registration Committee shall be composed of:

- (a) at least one elected director;
- (b) at least two public directors; and
- (c) at least three and up to five appointed committee members.

11.7. Composition of Inquiries, Complaints and Reports Committee

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

- (a) at least two public directors; and
- (b) at least six and up to eight appointed committee members.

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 director, constitute a quorum of that committee or a panel of that committee.



11.9. Discipline Committee

The Discipline Committee shall be known as the Ontario Dietitians Discipline Tribunal in English and Tribunal de discipline des diététistes de l'Ontario in French, and each reference to the Ontario Dietitians Discipline Tribunal or Tribunal de discipline des diététistes de l'Ontario, whether orally or in writing, shall be deemed to be a reference to the Discipline Committee of the College as specified in the Code and the Act, and any other legislation or policy where the context requires.

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11.9.11.10. Composition of Discipline Committee

The Discipline Committee shall be composed of:

- (a) at least three elected directors;
- (b) at least two public directors;
- (c) at least one appointed committee member; and
- ~~(b)~~(d) at least one experienced adjudicator.

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11.10.11.11. Composition of Fitness to Practise Committee

The Fitness to Practise Committee shall be composed of:

- (a) at least three elected directors;
- (b) at least two public directors; and
- (c) at least one appointed committee member.

11.11.11.12. Composition of Quality Assurance Committee

The Quality Assurance Committee shall be composed of:

- (a) at least one public director; and
- (b) at least four and up to six appointed committee members.

11.12.11.13. Composition of the Patient Relations Committee

The Patient Relations Committee shall be composed of:



- (a) the members of the Executive Committee.

12. Non-Statutory Committees

12.1. [REVOKED]

12.2. [REVOKED]

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 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 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 Board of Directors;
- (c) present recommendations annually to the Board of Directors respecting changes to the compensation (including salary and benefits) to be provided to the Registrar; and
- (d) any other responsibilities described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

12.5. Composition of the Finance and Audit Committee

The Finance and Audit Committee shall be a non-statutory committee of the College composed of:



- (a) five directors who may be either elected directors or public directors; and
- (b) at the discretion of the Board of Directors, may additionally include an appointed committee member.

12.6. Responsibilities of the Finance and Audit Committee

The Finance and 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;
- (d) review and approve the annual budgets submitted by the Registrar, for recommendation to the Board of Directors; and
- (e) any other responsibilities relating to financial planning and reporting, external audit, internal controls, or policy review as described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

12.7. Composition of the Professional Practice Committee

The Professional Practice Committee shall be composed of:

- (a) at least one elected director;
- (b) at least one public director; and
- (c) at least four and up to six appointed committee members.

12.8. 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 the Board of Directors regarding professional practice standards, policies, and guidelines to enhance safe, competent, and ethical dietetic practice;
- (c) make recommendations to 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 the Board of Directors; and
- (e) any other responsibilities described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

12.9. Composition of the Governance Committee

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

- (a) at least one elected director;
- (b) at least three public directors; and
- (c) at least one appointed committee member.

12.10. 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 the Board of Directors adopts;
- (c) Consider and make recommendations to the Board of Directors on College's EDI-B plan and strategy.
- (d) ongoing appraisal of the College's governance structure, processes, and policies to promote longstanding governance excellence at both the Board of Directors and Committee level;



- (e) amend committee terms of reference, for recommendation to the Board of Directors;
- (f) identify the competencies and attributes that would best support the work of the Board of Directors and individual committees;
- (g) implement a competency and attribute based framework for establishing the structure of the Board of Directors and committees;
- (h) administer the process for screening applicants to be qualified as candidates for Board elections;
- (i) recommend candidates for committee appointment and reappointment to the Board;
- (j) recommend committees compositions and chair appointments, other than the Executive Committee, to the Board of Directors in June of each year;
- (k) appoint members to committees to fill vacancies, other than the Executive Committee, as needed;
- (l) resolve disputes relating to Board elections; and
- (m) any additional responsibilities described in the committee's Terms of Reference or as may be assigned by the Board of Directors or the Executive Committee from time to time.

13. Register

13.1. Names in the Register

Subject to paragraph 1 of section 13.2, a registrant's name in the register shall be the registrant's name as provided in the documentary evidence used to support the 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 registrant:

- (a) Any change to the registrant's name that has been made in the register of the College from the date of the registrant's initial registration with the College and any names that the registrant uses in any place of practice other than as provided in section 13.1, including any common names or abbreviations.
- (b) Each registrant's certificate of registration number.
- (c) The classes of certificate of registration held by each registrant and the date on which each was issued.
- (d) A list of the languages in which each registrant is capable of practising.
- (e) The name, address and telephone number of the primary business through which or at which the registrant practices dietetics in Ontario and their position at that business, and any other business and location at which the registrant regularly practices dietetics in Ontario, and their position at that business or location.
- (f) If a registrant has resigned, the date upon which the resignation took effect.
- (g) If the College is aware of an outstanding charge against a 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 registrant's suitability to practice,
 - i. the fact and content of the charge, and ii. 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.

- (h) A summary of any existing restriction that relates to or otherwise impacts a registrant's practice imposed by a court or other lawful authority against the



registrant, of which the College is aware, including the date of and a summary of the restriction imposed.

- (i) If the College is aware of a finding of guilt against a 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 registrant's suitability to practice,
 - i. a brief summary of the finding,
 - ii. a brief summary of the sentence, and
 - iii. 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.

- (j) If a registrant has any terms, conditions or limitations in effect on 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.
- (k) If a registrant has terms, conditions or limitations on 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.
- (l) If a 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.
- (m) If a suspension on a 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.
- (n) If a 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

- i. a registrant's certificate of registration is subject to an interim order of the Executive Committee or the Inquiries, Complaints and Reports Committee;
 - ii. a registrant's certificate of registration is suspended for non-payment of the annual fee or any fee required by the College, or
 - iii. a 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.
- (o) If a registrant's temporary or provisional class certificate of registration expires, the effective date of the expiry of that class of certificate.
- (p) 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 registrant attend before a panel of that committee to be cautioned as authorized by paragraph 3 of subsection 26(1) of the Code,
 - i. a summary of the caution;
 - ii. the date of the panel's decision;
 - iii. once the registrant has received the caution a notation to that effect, and the date the registrant received the caution; and
 - iv. 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.

- (q) 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 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,
 - i. a summary of the specified continuing education or remediation program;
 - ii. the date of the panel's decision;



- iii. once the registrant completes the program a notation to that effect, and the date on which the registrant completed the program; and
- iv. 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.

- (r) A summary of any restriction on a registrant's right to practise that has resulted from an undertaking given by the registrant to the College or an agreement entered into between the registrant and the College.
- (s) If an allegation of professional misconduct or incompetence has been referred to the Discipline Committee in respect of the registrant and is outstanding,
 - i. the date of the referral,
 - ii. a summary of each specified allegation,
 - iii. the status of the hearing, including the date of the hearing, if set; and
 - iv. the notice of hearing.
- (t) If the question of the registrant's capacity has been referred to the Fitness to Practise Committee and not yet decided,
 - i. a notation of that fact; and
 - ii. the date of the referral.
- (u) If the Registrar has referred an application for reinstatement to the Discipline Committee for reinstatement and it is not finally resolved,
 - i. a notation of the referral, including the date of referral;
 - ii. 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;
 - iii. if the hearing has been adjourned and no future date has been set, the fact of that adjournment; and
 - iv. 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.



- (v) 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.
- (w) If the result of a disciplinary proceeding is contained in the College's register,
 - i. the date on which the panel of the Discipline Committee made its decision,
 - ii. the date on which the Discipline Committee ordered any penalty, and
 - iii. the decision and reasons.
- (x) If the College is aware that a restriction on a registrant or a registrant's practice has been made against a registrant registered or licensed to practise a profession inside or outside of Ontario and that finding has not been reversed on appeal,
 - i. a notation of that fact;
 - ii. the date of the finding and the name of the governing body that made the finding if available;
 - iii. the order made if available; and
 - iv. information regarding any appeals of the finding or order if available.
- (y) 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.
- (z) If a finding of professional negligence or malpractice is contained in the College's register, the following information:
 - i. the notice of and a description of the finding;
 - ii. the date the finding was made against the registrant;
 - iii. the name and location of the court that made the finding against the registrant; and
 - iv. the status of any appeal respecting the finding made against the registrant.
- (aa) Any information the College and a registrant, or health profession corporation, have agreed should be included in the register.
- (bb) 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 Registrants and Professional Corporations

14.1. Registrant to Provide Particulars on Request

A 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 bylaws, 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 registrant was required to provide to the College under the bylaws, 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. Registrant to Immediately Provide Particulars

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

14.3. Registrant to Provide Information on Request

The College may forward to its registrants from time to time requests for information in a printed or electronic form approved by the Registrar. Each 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 registrant information may include (but is not limited to) the following:

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



14.4. 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 registrant, the 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 registrant to provide information to the College as required under the bylaws and any such failure may result in the suspension of that 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 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 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 director or committee member’s personal, professional or financial interest or relationship may affect their judgement, impartiality or the discharge of 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

Directors and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a director or committee member is in doubt about whether they have or might have a conflict of interest, the director or committee member must consult with an appropriate person, for example the 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 director or committee member believes that they may have a conflict of interest in any matter relating to Board of Directors or committee business the director or committee member must consult with an appropriate person such as the 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 the Board of Directors or the committee and accept the 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 director or committee member who has a conflict of interest must:

- (a) before any consideration of the matter disclose the fact that they have a conflict of interest;
- (b) not participate in any discussion of the matter;
- (c) not attend any meeting or 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 director or committee member believes another director or committee member has not declared a conflict of interest (despite informal notification or inquiry) the director or committee member who has that belief must advise an appropriate person such as the Chair of the Board, Registrar, or legal counsel (if the conflict arises in a hearing context). If the Board of Directors or a committee chair concludes that a director or committee member respectively has an undeclared conflict of interest, the Board of Directors or the committee chair may direct the director or committee member to immediately comply with clauses (b), (c) and (d) of section 16.3.

17. Bylaws and Amendments



17.1. Making Bylaws

Bylaws of the College may be enacted, amended, or revoked by a vote of at least two-thirds of the directors present at a 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 bylaw shall be given to the Board of Directors at least ten days prior to the meeting referred to in section 17.1.

17.3. Record of Bylaws

The Registrar shall maintain a consolidated set of College bylaws that reflect any revocation and amendment that the Board of Directors makes to them.

Board Briefing Note

Topic:	Health Professions Discipline Tribunal – Committee Appointments
Purpose:	Decision Required
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Melanie Woodbeck, Registrar & Executive Director Lisa Dalicandro, Director, Governance & Regulatory Policy

Issue

To appoint experienced adjudicators to the Ontario Dietitians Discipline Tribunal (Discipline Committee).

Public Interest Rationale

Joining the Health Professions Discipline Tribunal (HPDT) and appointing experienced adjudicators to the Discipline Committee enhances fairness and objectivity in the hearings process. Leveraging the legal training of experienced adjudicators ensures hearings are conducted efficiently and allows panel members to focus on the substance of the case.

Background

In September 2025, the Board approved CDO's participation in the HPDT, in principle, pending necessary bylaw revisions. To operationalize CDO's participation in the HPDT, the Board needs to formally appoint the HPDT experienced adjudicators, who include the HPDT Chair and other individuals with experience as adjudicators, to the Discipline Committee.

Considerations

Experienced adjudicators must be appointed to the Discipline Committee for a term equal to the one-year pilot, and the chair of the HPDT must be appointed as chair of the Discipline Committee. The current chair of the Discipline Committee, Barbara Grohmann, will remain on

the Discipline Committee as a co-chair and will be responsible for chairing committee meetings and will recommend panel appointments to the chair as appropriate.

The HPDT/Discipline Committee chair will be responsible for assigning panels to each hearing as set out in the [Health Professions Procedural Code](#). Hearing panels will typically have two registrants (elected board director or committee appointee – registrant), two public board directors and one experienced adjudicator who chairs the panel. One-member panels consisting of only an experienced adjudicator sometimes hear pre-hearing motions on issues like adjournments, evidentiary or procedural issues.

All panel members will equally participate in decision-making, while the panel chair will be responsible for managing the hearing and writing the first draft of the reasons.

Recommendation

1. That the Board appoint the following experienced adjudicators to the Ontario Dietitians Discipline Tribunal (Discipline Committee), effective December 1, 2025 to December 31, 2026:
 - David Wright
 - Raj Anand
 - Sherry Liang
 - Sophie Martel
 - Jennifer Scott
 - Jay Sengupta
2. That the Board appoint David Wright as Chair of the Ontario Dietitians Discipline Tribunal (Discipline Committee), effective December 1, 2025 to December 31, 2026.

Attachments

- Appendix 1: HPDT Adjudicator Biographies

HPDT Adjudicator Biographies

David Wright – Chair, Experienced Adjudicator

David A. Wright leads Ontario's Health Professions Discipline Tribunals (HPDT). Through the HPDT, several Ontario health colleges share a common, innovative model for hearing and deciding allegations of misconduct against health professionals. David has spearheaded the project and is the Chair of each participating tribunal. He has worked in health regulation since becoming Chair of the College of Physicians and Surgeons of Ontario's discipline tribunal in 2020. David has held leadership positions in administrative tribunals since 2009. He was the founding Chair of the Ontario Law Society Tribunal and the Associate Chair of the Human Rights Tribunal of Ontario. As an adjudicator, David has written decisions on issues as diverse as tribunal process, legal and medical ethics, freedom of expression and privacy rights. David has organized and spoken at many legal and adjudicator education programs across Canada, and served as Chair of the Council of Canadian Administrative Tribunals in 2022 and 2023. He was awarded the SOAR medal in 2021 for his contributions to administrative justice in Ontario. David holds degrees in common law and civil law from McGill University and has a master's in law from New York University. He clerked for Madame Justice Claire L'Heureux-Dubé at the Supreme Court of Canada and practised labour, employment and human rights law before becoming a neutral decision maker.

Raj Anand – Experienced Adjudicator

Raj Anand has been a member of the Ontario Physicians and Surgeons Discipline Tribunal since 2021. He began work with his own firm on January 1, 2024, focusing on adjudication, mediation, investigation, and policy development and review. Since his call to the Bar in 1980, his practice has included administrative, human rights, constitutional, regulatory and employment law, and civil litigation, and he taught administrative law at the Masters level for about 20 years. Mr. Anand was elected as Chair of the Board of Governors of the Law Commission of Ontario in 2020, and he previously served as Chief Commissioner of the Ontario Human Rights Commission and founding Chair of the Ontario Human Rights Legal Support Centre. Over the last 30 years he has served as an adjudicator with about ten Ontario or federal tribunals, including the Hearing and Appeal Divisions of the Law Society Tribunal, four health regulatory tribunals, the Discipline Committee of the College of Patent Agents and Trademark Agents, the University of Toronto Tribunal, the Boards of Inquiry under the Police Services Act and the Ontario Human Rights Code, and the Canadian Human Rights Tribunal. In 1997, he was the first recipient of the Advocates' Society Award of Justice. Since then, Mr. Anand has

received several other awards, including the Law Society Medal, the SOAR Medal, and awards for lifetime achievement from the South Asian Bar Association, the Federation of Asian Canadian Lawyers and the Ontario Bar Association.

Sherry Liang – Experienced Adjudicator

Sherry Liang has been a member of the Ontario Physicians and Surgeons Discipline Tribunal and its predecessor since 2021. Before that, she was Assistant Commissioner with the Information and Privacy Commissioner (IPC) of Ontario, overseeing the investigation and resolution of health and public sector privacy complaints and access to information appeals. Ms. Liang's tenure as Assistant Commissioner was marked by greater transparency and significant developments in the IPC's health privacy jurisprudence. She has also contributed to the development of human rights and labour relations law through her appointments as Vice-Chair with the Human Rights Tribunal of Ontario, the Ontario Labour Relations Board and the Ontario Grievance Settlement Board, and served as Co-Chair of the University of Toronto Tribunal. Ms. Liang was one of three Expert Advisors to Professor Harry Arthurs on the Federal Labour Standards Review Commission. She has spoken at conferences on labour, human rights and administrative law, and privacy and access to information rights. Before becoming an adjudicator, she practiced labour law and employment law. Ms. Liang completed a B.A. (Arts) at Queen's University, and a LL.B. and LL.M. (Administrative Law) at the Faculty of Law, University of Toronto.

Sophie Martel – Experienced Adjudicator

Ms. Martel has been a member of the Ontario Physicians and Surgeons Discipline Tribunal and its predecessor since June 2021. She is an adjudicator at the Law Society Tribunal and also previously served as a Vice-Chair at the Workplace Safety and Insurance Appeals Tribunal and the Human Rights Tribunal of Ontario. Fluently bilingual, Ms. Martel hears matters in both French and English. She completed a B. Com. Hons. at the University of Ottawa and her LL.B. at the University of Toronto. Ms. Martel is a frequent contributor to the Certificate in Adjudication for Administrative Agencies, a joint program of Osgoode Professional Development and the Society of Ontario Adjudicators and Regulators.

Jennifer Scott – Experienced Adjudicator

Ms. Jennifer Scott has been a member of the Ontario Physicians and Surgeons Discipline Tribunal and its predecessor since 2021. Previously, Ms. Scott was an adjudicator with Tribunals Ontario, serving as Vice-chair and Associate Chair of the Child and Family Services Review Board, Custody Review Board and the Ontario Special Education Tribunals. While in the role of Associate Chair, she created the Child and Youth Division, a division dedicated to cases involving children and youth. Ms. Scott was a member and Vice-chair of the Human Rights Tribunal of Ontario for many years. Ms. Scott completed her BASc in Family Studies at the University of Guelph and her LL.B at Western University. Prior to becoming an adjudicator, Ms. Scott practised administrative law under the firm name Scott & Oleskiw and before that, was the Director of Litigation with the Women's Legal Education and Action Fund (LEAF). She is a frequent contributor to continuing legal education programs for provincial bar associations, law schools, legal aid clinics, advocacy organizations and professional associations.

Jay Sengupta – Experienced Adjudicator

Jay Sengupta has been a member of the Ontario Physicians and Surgeons Discipline Tribunal since 2024. She is a mediator and adjudicator who has been a neutral for over 15 years. In addition to her private dispute resolution practice, she holds appointments with the Law Society Tribunal, the Public Service Grievance Board (PSGB), the Canada Industrial Relations Board (CIRB external adjudicator roster), the Canadian Human Rights Tribunal (CHRT), the NWT Human Rights Adjudication Panel (HRAP) and the inaugural discipline committee of the College of Patent Agents & Trademark Agents (CPATA). Prior to launching her private mediation and arbitration practice, Jay served as a full-time Vice-chair with the Human Rights Tribunal of Ontario (HRTO) for 10 years, where she was cross appointed to the Child and Family Services Review Board (CFSRB), the Custody Review Board (CRB) and the Special Education Tribunal (OSET). Jay began her career as a lawyer in Ontario's community legal clinic movement, where she represented people living in poverty, trained and mentored law students and contributed to community development and law reform initiatives to increase access to justice for marginalized and impoverished communities.

Board Briefing Note

Topic:	Health Professions Discipline Tribunal – Rules of Procedure
Purpose:	Information
Strategic Plan Relevance:	Enhance Trust and Demonstrate Regulatory Value
From:	Melanie Woodbeck, Registrar & Executive Director Lisa Dalicandro, Director, Governance & Regulatory Policy

Issue

As part of the onboarding process to the Health Professions Discipline Tribunal (HPDT), the College's Discipline Committee is required to adopt the HPDT Rules of Procedure. This is presented to the board for information.

Public Interest Rationale

Adopting the HPDT Rules of Procedure serves the public interest by ensuring that discipline hearings are fair, consistent, transparent, and focused on protecting the public.

Background

The [Statutory Powers and Procedure Act \(SPPA\)](#) sets the minimum standards of procedural fairness applicable to all administrative hearings in Ontario. The SPPA also gives the Discipline Committees the jurisdiction to create Rules of Procedure.

In 2015, the Discipline Committee adopted its current Rules of Procedure.

In September 2025, the Board approved CDO's participation in the Health Professions Discipline Tribunal (HPDT), pending bylaw revisions.

Considerations

To operationalize CDO's participation in the HPDT, CDO will need to approve the adoption of the HPDT Rules of Procedure (*Appendix 1*), which applies to all Health Professions Discipline Tribunals hearings.

The Rules of Procedure govern the Discipline Committee hearing process and set out clear expectations for how cases are managed and decided, ensuring the rights of all parties are protected while promoting timely and efficient decision-making.

The Board does not have the authority to approve the Rules of Procedure under the [Statutory Powers and Procedure Act](#). This authority rests with the Discipline Committee.

Next Steps

If the Board approves the bylaw changes needed for CDO to participate in the HPDT, the Discipline Committee will be asked to rescind the existing Rules of Procedure and adopt the HPDT's Rules of Procedure. The Discipline Committee will vote on this via email immediately following the Board meeting.

Attachments

- Appendix 1: HPDT Rules of Procedure

RULES OF PROCEDURE (revised June 13, 2025)

These Rules of Procedure, made pursuant to the Ontario *Statutory Powers Procedure Act*, apply to the Ontario Audiologists and Speech-Language Pathologists Discipline Tribunal, the Ontario Chiropractors and Podiatrists Discipline Tribunal, the Ontario Massage Therapists Discipline Tribunal, the Ontario Occupational Therapists Discipline Tribunal, the Ontario Physicians and Surgeons Discipline Tribunal and the Ontario Registered Psychotherapists Discipline Tribunal. Each is the Discipline Committee of their respective health college established under the Health Professions Procedural Code and is called the “Tribunal” in these Rules.

Each Tribunal is an independent adjudicative tribunal that decides, in accordance with the public interest, allegations of professional misconduct and incompetence against registrants or former registrants referred to it by the College’s Inquiries, Complaints and Reports Committee. The Tribunal also decides applications for reinstatement brought by former registrants and applications related to its orders and information contained on the public register.

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Rule 1 – Application of the Rules

1.1.1 Tribunal proceedings shall be transparent, fair, efficient, just and timely. The Tribunal will adapt processes to the needs of a matter before it and to allow all participants, including the self-represented, to participate fairly and effectively. Decisions shall be made in the public interest and take particular account of the need to be accessible to all, including disadvantaged and vulnerable individuals and groups.

1.1.2 All orders and directions made under these rules shall be proportionate to the importance and complexity of the issues in dispute.

1.1.3 The Tribunal may waive any rule, change any time limit or due date, or excuse the failure to follow a rule or time limit, unless this is not allowed by the Code or other legislation, or it is clear from the context that a specific rule must always be followed.

1.1.4 The Tribunal may decide the procedure for anything not covered by these rules.

Respectful Communication

1.2.1 All documents filed and all written and oral communications with the Tribunal must be relevant to the proceeding and respectful to all participants and to the Tribunal.

1.2.2 Failure to comply with this rule may be a relevant factor in making a costs award.

Definitions

1.3.1 These are the definitions for terms and expressions used in these rules:

“Act” means the *Regulated Health Professions Act, 1991*; (loi)

“business day” means any day that is not a Saturday, Sunday, Ontario public holiday, or another day on which the Tribunal Office is closed, which includes the National Day for Truth and Reconciliation and the days between Christmas and New Years Day; (jour ouvrable)

“case management chair” means a member of the Tribunal assigned to conduct case management conferences and/or case management in writing; (président de gestion de l’instance)

“Code” means the Health Professions Procedural Code, Schedule 2 to the *Regulated Health Professions Act, 1991*; (Code)

“College” means the College whose Inquiries, Complaints and Reports Committee or Registrar referred the allegations to the Tribunal; (Ordre)

“motion” means a request for an order or direction; (motion)

“panel” means a panel assigned to hear a motion or the merits of a proceeding and includes a Tribunal member sitting alone; (sous-comité)

“party” means the College or the registrant; (partie)

“participant” means a party and any other person with a right to participate in the proceeding or a portion of the proceeding; (participant)

“patient” does not include the registrant; (patient)

“patient health record” means a record in any form kept by a registered health professional in the course of providing services to a patient; (dossier médical du patient)

“personal health information” has the meaning in s. 4 of the *Personal Health Information Protection Act, 2004*; (renseignements personnels sur la santé)

“proceeding” includes all steps in a matter before the Tribunal; (instance)

“registrant” means the member or former member of the College, as set out in the Act and the Code, against whom allegations of misconduct or incompetence have been referred to the Tribunal, or the applicant in a proceeding under rule 13; (inscrit)

“representative” means a person holding an L1 or P1 licence from the Law Society of Ontario or permitted to provide legal services without a licence under Part V of By-Law 4 of the Law Society of Ontario; (représentant)

“remote hearing” means a hearing or part of a hearing held electronically by videoconference, teleconference or in writing; (audience à distance)

“sexual activity” includes any communication made for a sexual purpose or whose content is of a sexual nature; (activité sexuel)

“Tribunal” means the Tribunal to which the allegations were referred; (Tribunal); and

“Tribunal Chair” means the Chair of the Tribunal appointed by the College’s Board or Council (président du Tribunal)

Counting Time

1.4.1 This is how to count time in these rules or in a Tribunal direction or order:

- a. When counting the number of days between two events, the day the first event happens is not counted and the day the second event happens is counted.

- b. When the deadline to do something is less than seven days, only business days are counted.
- c. When the deadline to do something falls on a day that is not a business day, the deadline moves to the next business day.
- d. When a document is delivered or filed after 4 p.m. or on a day that is not a business day, the document is considered delivered or filed on the next business day.

Documents

1.5.1 Documents and communications shall be in electronic format, in accordance with the Practice Direction on Format of Documents.

1.5.2 Documents and communications with the Tribunal shall be delivered to all participants by:

- a. email;
- b. secure file transfer service;
- c. another method directed or permitted by the Tribunal; or
- d. another method agreed to by the recipient.

1.5.3 Documents and communications may be filed with the Tribunal by:

- a. email to tribunal@hpdt.ca;
- b. secure file transfer service; or
- c. another method directed or permitted by the Tribunal.

1.5.4 At the time of filing, delivery must be confirmed by:

- a. sending the Tribunal the electronic communication sent to the other participant; or
- b. filing a confirmation of delivery (Form 1).

1.5.5 This rule does not apply to summonses, which must be served personally on the person summoned in accordance with s. 12 of the *Statutory Powers Procedure Act* and the Tribunal's Practice Direction on Summonses.

Rule 2 – Openness

2.1.1 Tribunal hearings are open to the public. Anyone may access the public record of the proceeding except as set out in this rule.

2.1.2 The public record of the proceeding consists of the following documents, subject to rules 2.2.2 and 2.2.3:

- a. notices of hearing, notices of application, statements of particulars, agreed statements of fact, statement of uncontested facts, notices of motion, motion records, books of authorities, factums and written submissions filed with the Tribunal;

- b. exhibits, including any marked for identification;
- c. case management directions, orders and reasons; and
- d. any other document(s) the Tribunal orders be part of the public record of the proceeding.

2.1.3 Requests for documents in the public record shall be made to the Tribunal Office. Requests for hearing transcripts shall be made to the court reporting service. The requestor is responsible for any associated costs.

2.1.4 The court reporting service shall not provide a copy of the transcript to anyone other than a participant in the proceeding unless it has been redacted by the Tribunal Office to remove personal health information, patient health records, patient names and any information that could identify a patient.

Departing from Openness

2.2.1 Case management conferences are not open to the public.

2.2.2 No one shall publish or broadcast the names of patients or any information that could identify patients or disclose patients' personal health information or health records referred to at a hearing or in any documents filed with the Tribunal, unless the Tribunal orders otherwise.

2.2.3 Patient health records are not part of the public record of the proceeding unless the Tribunal orders otherwise.

2.2.4 Participants shall not include the following information in documents or exhibits filed with the Tribunal other than patient health records, unless necessary to the Tribunal's decision or the Tribunal orders otherwise:

- a. name of, or any information that could identify, a patient;
- b. patients' personal health information, unless the details are important to addressing issues in dispute;
- c. social insurance numbers and employee identification numbers;
- d. OHIP billing numbers, health card numbers, business numbers, or GST/HST account numbers;
- e. date of birth (unless it must be provided, in which case only the year must appear);
- f. name of any person under the age of 18; and
- g. account numbers from banks or other financial institutions.

2.2.5 Where a participant files a document that includes unredacted information set out in rule 2.2.4, it shall not be part of the public record of the proceeding and the participant filing it shall file a second version that does not contain the information and that shall be part of the public record of the proceeding.

2.2.6 The Tribunal may waive rule 2.2.5 on the basis that it would be onerous to redact the information, or on other grounds.

2.2.7 If a motion record or document book includes exhibits containing patient health records, it shall not be part of the public record of the proceeding and the participant filing it shall file a second version of the motion record or document book that shall be part of the public record of the proceeding with those exhibits removed.

2.2.8 The Tribunal may:

- a. restrict access to documents and exhibits;
- b. require parties to redact personal or sensitive information from documents filed with the Tribunal and make the redacted versions part of the public record;
- c. make an order that no one shall publish or broadcast certain information in addition to the restrictions in rule 2.2.2; and
- d. make an order that some or all of the hearing not be open to the public where:
 - i. matters involving public security may be disclosed;
 - ii. financial or personal or other matters may be disclosed that are of such a nature that the harm created by disclosure would outweigh the desirability of adhering to the principle that hearings be open to the public;
 - iii. a person involved in a criminal proceeding or in a civil suit or proceeding may be prejudiced; or
 - iv. the safety of a person may be jeopardized.

2.2.9 Anyone seeking an order under rule 2.2.8 shall provide notice of the request to the media using Form 2A. The completed Form 2A shall be filed with the Tribunal and will be posted on the Tribunal's website.

2.2.10 When making any order restricting openness the Tribunal must be satisfied that:

- a. openness poses a serious risk to an important public interest;
- b. reasonable alternative measures will not address this risk; and
- c. the benefits of the order outweigh its negative effects on openness.

Access to Documents Filed Under Previous Rules

2.3.1 Rule 2.3 applies to requests for documents filed before these Rules took effect at the Tribunal, except for notices of hearing and transcripts of evidence. The effective date for each Tribunal is listed in Appendix A.

2.3.2 The requestor must file a motion using Form 2B. The parties shall have one week to respond to the motion. The motion will be granted unless a party opposing access establishes that the criteria in rule 2.2.10 are met.

2.3.3 The Tribunal will redact the names of patients any information that would identify patients, personal health information and any other information subject to a non-publication order. The Tribunal will not provide the requestor with exhibits or documents that are patient health records.

Rule 3 – Accommodation and Language

3.1.1 Participants in Tribunal proceedings are entitled to accommodation of *Human Rights Code* protected needs. The Tribunal Office must be notified of a need for accommodation as soon as possible.

3.1.2 Written communications with the Tribunal may be in French or English.

3.1.3 A party or witness appearing before the Tribunal may use an interpreter. Interpretation services will be provided by the Tribunal on request to the Tribunal Office.

3.1.4 A party intending to call a witness whose testimony will require interpretation must notify the Tribunal as soon as possible and, in any event, no later than seven days before the day on which the witness will testify.

Language of Proceedings

3.2.1 A proceeding shall be conducted in English, French or both English and French.

3.2.2 The language of the proceeding is the choice of the registrant.

3.2.3 In accordance with s. 86(4) of the Code, a person's right under this rule is subject to the limits that are reasonable in the circumstances.

3.2.4 A registrant who asks to change the language of the proceeding from the language in which it started shall make the request within 60 days of the date of service of the notice of hearing or notice of application.

3.2.5 Documents provided in a language other than English or French shall be accompanied by a translation of the document into the language of the proceeding. The translation must be prepared by a qualified translator who certifies that the translation is true and accurate to the best of the translator's skill and ability. The party or person providing the document is responsible for the cost of its translation.

Rule 4 – Notice of Hearing

4.1.1 After the Inquiries, Complaints and Reports Committee refers allegations to the Tribunal, the College shall file a notice of hearing using Form 4.

4.1.2 Where a participant has been notified of a hearing and does not attend or participate, the Tribunal may proceed in their absence, and they are not entitled to any further notice in the proceeding.

4.1.3 A notice of hearing forms part of the public record from the time it is filed and shall not be read into the record at a hearing.

Rule 5 – Additional Participants

5.1.1 The Tribunal may permit a person to participate in a proceeding under s. 41.1 of the Code.

5.1.2 A request to participate shall be made as a motion using Form 5 setting out the requestor's interest in the proceeding, together with any evidence to support that interest. The request must be made as soon as possible after the person becomes aware of the proceeding or their interest.

5.1.3 The Tribunal will decide the extent of the requestor's participation.

5.1.4 In a motion for production of third-party records, the holder of the records and the individual who is the subject of those records are participants and entitled to notice of the motion.

Rule 6 – Notice of Constitutional Question

6.1.1 A party that intends to raise a question about the constitutional validity or applicability of legislation, a regulation or a by-law made under legislation, or a rule of common law, or that claims a remedy under subsection 24(1) of the *Canadian Charter of Rights and Freedoms* in relation to an action or omission of the Government of Canada or the Government of Ontario, shall complete a notice of constitutional question using Form 6.

6.1.2 The completed notice shall be delivered to the other party and to the Attorneys General of Canada and Ontario as soon as the circumstances requiring notice become known and, in any event, at least 15 days before the question is to be argued. The notice must be filed with the Tribunal Office after delivery.

6.1.3 Where the Attorney General of Canada or the Attorney General of Ontario is entitled to notice under this section, they are entitled to adduce evidence and make submissions to the Tribunal in respect of the constitutional question.

Rule 7 – College Disclosure in Discipline Proceedings

7.1.1 The College shall disclose all potentially relevant documents and things in its possession or control by the date set by the Tribunal in its introduction letter. If the College requests an extension of the deadline it must advise the Tribunal no later than 15 before the deadline and a case management conference will be scheduled.

7.1.2 At the time of disclosure, the College must identify any potentially relevant documents, such as Crown briefs, not yet in its possession but on which it expects to rely.

7.1.3 A registrant seeking further documents from the College shall file a motion no later than 90 days after receiving the College's disclosure. The motion record shall include prior correspondence requesting the documents from the College representative and the College representative's response.

7.1.4 The College shall disclose all further potentially relevant documents as soon as possible after receiving or creating them.

7.1.5 Disclosure shall only be shared or distributed for the purposes of the proceeding or as required by law, unless the Tribunal orders otherwise. The Tribunal may place additional conditions on the use of disclosure documents.

7.1.6 The Tribunal may make an order addressing a breach of rule 7.1.5. An intentional breach of Rule 7.1.5 may constitute unreasonable and bad faith conduct for the purposes of rule 17.1.1.

Rule 8 – Statement of Particulars

8.1.1 The Tribunal may direct a party to file a statement of particulars explaining in detail the facts and the legal basis for the party's position, or providing more details, information or documents, if the Tribunal considers it necessary for a better understanding of the issues in dispute.

Rule 9 – Case Management

Principles

9.1.1 The Tribunal case manages every proceeding so that, among other things:

- a. hearings progress in a fair and timely way, in the public interest;
- b. hearing time is used efficiently and effectively;
- c. procedural and legal issues are identified early; and
- d. adjournments are only necessary in exceptional circumstances.

Case Management Conferences (CMCs)

9.2.1 CMCs are held by videoconference unless the Tribunal directs otherwise.

9.2.2 A CMC is held in every proceeding. The case management chair shall prepare a case management direction after every CMC.

9.2.3 The Tribunal may, at a party's request or on its own initiative, hold additional CMCs at any time during a proceeding.

9.2.4 Unless the parties agree, a case management chair who has been involved in discussions of the strengths and weaknesses of the parties' evidence and arguments, or of possible resolutions, will not sit as a member of the panel for the merits hearing.

Confidentiality

9.3.1 CMC memos, and discussions during the CMC of the strengths and weaknesses of the parties' evidence and arguments and of possible resolutions, are without prejudice and may not be disclosed by anyone unless all parties and the Tribunal agree, or disclosure is required by law.

CMC Memos

9.4.1 Each party shall prepare a CMC memo using Form 9.

9.4.2 The CMC memo must:

- a. briefly describe the party's theory of its case and the legal issues as understood at the time;

- b. estimate the number of hearing days needed for that party's case;
- c. identify whether the party expects to call expert witnesses and on what issues;
- d. where possible, identify the intended witnesses;
- e. identify any intended pre-hearing motions;
- f. provide the party's position on settlement;
- g. identify the party's position on penalty; and
- h. include any other information to assist the CMC process.

9.4.3 The College shall deliver and file its CMC memo no later than 20 days before the first CMC. The registrant shall deliver and file their CMC memo no later than 10 days before the first CMC.

Scope of Case Management

9.5.1 The case management chair may assist parties to:

- a. identify or simplify the issues;
- b. explore agreement on facts or evidence; and
- c. identify potential motions.

9.5.2 The case management chair may make orders and directions to assist in the fair and efficient management of the proceeding, including:

- a. scheduling or adjourning hearing or motion dates;
- b. making orders under rule 2;
- c. directing disclosure;
- d. requiring further or better witness statements;
- e. directing the order of witnesses;
- f. making directions under rule 8;
- g. making directions under rule 14;
- h. permitting or requiring a witness to provide their evidence in chief by affidavit;
- i. permitting the examination of a witness before the hearing;
- j. setting the time for delivery of expert reports and any responding expert witness reports;
- k. resolving objections to a proposed expert;
- l. directing how expert evidence will be called;
- m. directing experts to confer prior to the hearing;
- n. hearing and deciding pre-hearing motions;
- o. setting times for steps in the proceeding and/or delivery of documents;
- p. setting time limits for oral submissions and page limits for written submissions;

- q. directing cross-examinations on affidavits take place with only a court reporter or before the case management chair;
- r. directing the order in which motions will be heard, that motions be heard together or that motions be heard with the merits; and
- s. exploring and applying alternatives to traditional adjudicative or adversarial procedures.

9.5.3 Participants shall request a CMC as soon as they are aware of anything that may affect the timely and efficient conduct of a scheduled motion or hearing.

Case Management in Writing

9.6.1 A case management chair may make a case management direction at any time on their own initiative or following written communications or submissions from participants.

Rule 10 – Adjournments

10.1.1 Once hearing or motion dates are scheduled, parties are expected to be ready to proceed on those dates. Adjournments are only granted where it is necessary for a fair hearing, even when the parties consent.

10.1.2 A request to adjourn must be made in writing as soon as the need for it arises, unless a written request is impossible. The requestor must explain why the adjournment is necessary, identify the exceptional circumstances supporting the request, and include the other party's position and availability for alternate hearing dates or explain why it was impossible to obtain that information from the other party.

10.1.3 The Tribunal may include terms and conditions when granting an adjournment.

10.1.4 The Tribunal may order a party that was granted an adjournment within 10 days of the date on which the hearing was scheduled to begin to pay costs under Rule 17.2.

Rule 11 – Motions

11.1.1 A motion shall be made by notice of motion using Form 11 unless the nature of the motion or circumstances make a notice of motion unnecessary, or the case management chair directs otherwise.

11.1.2 Each participant's oral submissions on a motion shall not exceed one hour, except with the Tribunal's permission.

11.1.3 Where a moving party does not meet a motion deadline or attend the motion, the motion may be deemed withdrawn.

Motion Materials

11.2.1 Evidence on a motion shall be by affidavit. Cross-examination on the affidavit occurs at the hearing of the motion unless the Tribunal directs otherwise.

11.2.2 The moving party shall file a motion record that includes the notice of motion and affidavits in support of the motion. The moving party may also file a factum and book of authorities.

11.2.3 The moving party shall prepare and file a draft order using Form 15.

11.2.4 The responding party may file a responding motion record containing any responding affidavits, and a responding factum and book of authorities.

11.2.5 No factum shall exceed 30 pages except with the Tribunal's permission.

11.2.6 Deadlines for delivering and filing motion materials shall be set at a case management conference.

Motion for Documents from a Third Party

11.3.1 A notice of motion seeking documents from a third party must explain how the documents sought are likely relevant to an issue in the proceeding or to the competence of a witness to testify in the hearing, and why their production is necessary in the interest of justice.

11.3.2 The requestor shall deliver the notice of motion to the third party holding the records, together with a summons requiring their attendance on the motion date and attendance money. The summons must be served at least 21 days before the motion date.

11.3.3 College counsel shall deliver, on behalf of the moving party, the summons and motion materials to the person whose records are the subject of the motion.

11.3.4 Third party records ordered produced shall only be shared or distributed for the purposes of the proceeding or as required by law, unless the Tribunal orders otherwise. The Tribunal may place additional conditions on the use of third party records.

11.3.5 The Tribunal may make an order addressing a breach of rule 11.3.4. An intentional breach of Rule 11.3.4 may constitute unreasonable and bad faith conduct for the purposes of rule 17.1.1.

Rule 12 – Hearing Preparation

Summons

12.1.1 A party may request a summons from the Tribunal Office in accordance with the Practice Direction on Summonses.

12.1.2 Service of the summons on the witness and payment of the necessary attendance money is the responsibility of the party requesting the summons.

Agreed Facts

12.2.1 The Tribunal shall accept and rely on any facts agreed to by the parties without further proof or evidence.

12.2.2 The parties' agreed statement of facts shall be filed with the Tribunal Office as soon as possible after agreement is reached and, in any event, no later than seven days before the merits hearing begins.

12.2.3 An agreed statement of facts forms part of the public record from the time it is filed and shall not be read into the record at a hearing.

Requests to Admit

12.3.1 A party may deliver to the other party a request to admit using Form 12A asking the other party to admit the truth of facts or the authenticity of documents for the purposes of the Tribunal proceeding.

12.3.2 The other party must deliver a completed response to the request to admit using Form 12B no later than 30 days after the date the request to admit was delivered, unless the Tribunal directs otherwise.

12.3.3 A party who fails to respond to the request to admit or whose response fails to specifically deny or refuse to admit the truth of a fact or the authenticity of a document, is deemed, for the purposes of the Tribunal proceeding, to admit the truth of the facts or the authenticity of the documents.

12.3.4 A party who received a request to admit and who does not attend the hearing is deemed to admit, for the purposes of the Tribunal proceeding, the truth of the facts or the authenticity of the documents mentioned in the request to admit, despite having delivered a response.

12.3.5 An admission made in response to a request to admit or a deemed admission may be withdrawn on consent or with the Tribunal's permission.

12.3.6 If a party denies or refuses to admit the truth of a fact or the authenticity of a document after receiving a request to admit, and the fact or document is subsequently proved, the Tribunal shall take the denial or refusal into account in exercising its discretion respecting costs.

12.3.7 A request to admit the truth of facts under this rule may only be delivered where the other party, after receiving notice, has not indicated any intention to participate in the proceeding or the Tribunal has given permission. A request to admit the authenticity of documents may be delivered in any circumstance.

12.3.8 A request to admit may not be delivered less than 30 days before the scheduled date of the hearing.

Documents, Witness Statements and Hearing Brief

12.4.1 No later than 60 days after providing disclosure, the College shall deliver to the registrant a list of all documents it may use in evidence, a list of intended witnesses and a summary of each witness's intended evidence. Summaries may consist of a prior statement.

12.4.2 No later than 120 days after receiving disclosure, the registrant shall deliver to the College a list of all documents they may use in evidence, a copy of any document on the list that has not already been produced, a list of intended witnesses and a summary of each witness's intended evidence. Summaries may consist of a prior statement.

12.4.3 No later than seven days before the hearing, each party shall deliver to the other party and file with the Tribunal a hearing brief containing each document and the witness list.

12.4.4 The Tribunal may refuse to allow a party to rely on anything that was not delivered or filed as required by this rule or a Tribunal order.

12.4.5 A hearing brief is not evidence and does not form part of the public record.

Experts

12.5.1 No later than 60 days following the first case management conference, the College shall deliver to the registrant any expert reports on which it intends to rely.

12.5.2 No later than 90 days after the College confirms it has delivered all expert reports it intends to provide, except for reply reports, the registrant shall deliver to the College any expert reports on which the registrant intends to rely.

12.5.3 A party who wishes to offer a witness as an expert shall ask the witness to complete Form 12C and shall inform the proposed witness of their duty to assist the Tribunal on matters within their expertise and that this duty overrides any obligation to the person from whom they receive instructions or payment.

12.5.4 Any responding expert report shall be delivered to the other party no later than 60 days after receiving the report to which it responds.

12.5.5 An expert report shall contain the witness's signed Form 12C and the:

- a. witness's name, contact information and area of expertise;
- b. witness's qualifications, education and practice experiences in their area of expertise;
- c. instructions provided to the witness in relation to the proceeding;
- d. areas and/or issues on which the Tribunal is asked to qualify the witness as an expert and their opinion is sought; and
- e. witness's opinion on each issue and reasons for their opinion, including:
 - i. a description of the factual assumptions on which the opinion is based;
 - ii. a description of any research conducted by the expert that led them to form the opinion; and
 - iii. a list of every document, if any, reviewed by the expert in forming the opinion.

12.5.6 A party that objects to the admissibility of some or all evidence set out in an expert report, whether based on qualifications, relevance and/or impartiality shall advise the other party and the Tribunal of their objection no later than 60 days after receiving it.

Treating Physicians

12.6.1 A treating physician who testifies only about treatment provided is not required to prepare an expert report.

12.6.2 A party calling a treating physician as a witness shall provide the records and notes to the other party as soon as possible.

Illegible Notes

12.7 A party shall transcribe any illegible notes and records for the other party on request.

Rule 13 – Registrant Applications to the Tribunal

Application for Removal of Information from the Public Register

13.1.1 To make a request under s. 23 (11) of the Code, the registrant must deliver and file an application for removal of information from the public register using Form 13A and an application record containing the documents on which the registrant intends to rely, including a copy of the Tribunal's decision and reasons. The application must:

- a. explain why the registrant believes the information to be removed is no longer relevant to their suitability to practise;
- b. explain why the registrant believes removal of the information outweighs the desirability of public access to the information in the interest of any person affected or the public interest, and
- c. confirm the information to be removed does not relate to disciplinary proceedings concerning sexual abuse as defined in s. 1(3) of the Code.

Application for Reinstatement

13.2.1 The registrant must complete an application form using Form 13B, including supplemental questions required by the College, if applicable, deliver it to the College and file it with the Tribunal Office.

13.2.2 The Tribunal will not process the application for reinstatement and send it to the Registrar for referral unless:

- a. the application is made within the time set out in s. 72(2) or (3) of the Code; and
- b. the registrant has paid the application fee required by s. 1(c) of By-Law 2: Fees and Remuneration.

13.2.3 Within 60 days of filing the completed application form, the registrant must deliver and file a notice of application using Form 13C. The notice of application must:

- a. set out the order sought including any proposed terms, conditions or limitations; and
- b. explain the reasons for the application describing, where applicable:
 - i. any relevant changes in circumstances since the time of revocation or suspension;
 - ii. the registrant's success at rehabilitation, including their degree of insight into past inappropriate conduct, current mental health and future prognosis;

- iii. attempts at restitution, if any;
- iv. current knowledge, skill and judgment; and
- v. present character.

13.2.4 Within 90 days of filing the notice of application, the registrant must deliver and file an application record. The application record must contain:

- a. the application for reinstatement and the notice of application;
- b. CPIC criminal record and judicial matters check - Level 2;
- c. an undertaking to obtain Professional Liability Protection;
- d. a certificate of good standing from every jurisdiction outside Ontario in which they currently hold or held a licence since suspension or revocation;
- e. the record, including the transcript, of the hearing where the registrant's certificate of registration was ordered suspended or revoked;
- f. any previous application for reinstatement including the record, transcripts and the Tribunal's decision; and
- g. any other documents on which the registrant intends to rely.

13.2.5 Where the notice of application is not filed within 120 days of filing the application form, or the application record is not filed within 180 days of filing the notice of application, the application will be deemed withdrawn and the Tribunal will close its file. The registrant will be notified 30 days before the file is closed.

Application to Vary, Suspend or Cancel a Tribunal Order

13.3.1 The Tribunal may vary, suspend or cancel a Tribunal order that continues in effect where:

- a. there are new facts arising or discovered after the order was made or a material change in circumstances has occurred since the order was made; and
- b. the change to the order would be in the public interest.

13.3.2 To apply to vary, suspend or cancel a Tribunal order, the applicant must deliver and file a notice of application using Form 13D, together with an application record containing the documents on which the applicant intends to rely, including a copy of the Tribunal's reasons for the order. The notice of application must set out how the application meets the criteria set out in rule 13.3.1.

13.3.3 An application to vary, suspend or cancel a Tribunal order does not stay that order.

Case Management Conference

13.4.1 Once an application record is filed, the Tribunal will schedule a CMC to determine the next steps in the application, including delivery of responding materials and scheduling of hearing dates.

Rule 14 – Hearings

Hearing Format

14.1.1 A hearing or any part of a Tribunal hearing may be held in person anywhere in Ontario or remotely as the Tribunal directs, in the format that best ensures a proportionate, fair and efficient proceeding.

14.1.2 A remote hearing shall be held by videoconference unless the Tribunal directs otherwise.

14.1.3 Factors relevant to determining hearing format include:

- a. the Tribunal's public interest mandate;
- b. the parties' consent;
- c. the nature, significance and complexity of the issues, including whether credibility is in question;
- d. accessibility by participants and the public; and
- e. facilitating participation by persons who have been historically disadvantaged within the legal and/or medical system, in particular Indigenous peoples and communities and vulnerable witnesses.

Hearing Management

14.2.1 The hearing panel or its chair may:

- a. schedule or adjourn an appearance;
- b. set timelines or deadlines for steps in the hearing;
- c. direct parties to make written submissions;
- d. set time limits for oral submissions and page limits for written submissions; and
- e. give any other procedural directions necessary to ensure the hearing proceeds fairly and effectively.

14.2.2 Hearing management may take place at a hearing management conference (HMC) with the panel or its chair.

14.2.3 The panel or its chair may make a case management direction at any time on their own initiative or following written communications or submissions from participants.

14.2.4 The panel shall not permit cross-examination that is abusive, repetitive or otherwise inappropriate. The panel may limit further examination or cross-examination where satisfied that the examination or cross-examination is sufficient to disclose fully and fairly all matters relevant to the issues in dispute.

Pleas of No Contest

14.3.1 A registrant may plead no contest to one or more allegations. A plea of no contest is not an admission of the facts or an admission that the facts constitute professional misconduct and/or incompetence, for the purpose of the Tribunal proceeding or any other proceeding.

14.3.2 A registrant who pleads no contest agrees that, for the purposes of the Tribunal proceeding and not for the purpose of any other proceeding:

- a. the facts contained in a statement of uncontested facts shall be accepted and relied upon by the panel;
- b. the panel may find that the facts constitute professional misconduct or incompetence or both; and
- c. the panel may make a finding on the allegations without hearing other evidence.

14.3.3 The registrant or their representative shall confirm on the record their agreement with the provisions of Rule 14.3.2.

14.3.4 A registrant who pleads no contest may not provide evidence on the merits but may provide evidence on penalty.

Vulnerable Witnesses

14.4.1 Where it would facilitate a full and candid account of a witness's evidence or otherwise be in the interests of justice, the Tribunal may do one or more of the following:

- a. permit a support person to sit near a witness while the witness testifies. The Tribunal may direct the conduct of the support person during the witness's testimony,
- b. allow a witness to testify by videoconference or from behind a screen or other device that would allow the witness not to see the registrant (when the hearing is conducted in person) or direct the registrant to turn off their video feed or to remain off screen during the witness's testimony (when the hearing is conducted remotely). At all times the Tribunal, registrant and counsel must be able to see the witness,
- c. order that a registrant not personally cross-examine a witness and in such a case, shall appoint counsel to conduct the cross-examination.

14.4.2 In deciding whether to make an order, the Tribunal shall consider:

- a. the age of the witness;
- b. the witness's mental or physical disabilities, if any;
- c. the nature of the allegations;
- d. the nature of any relationship between the witness and the registrant;
- e. whether the order would assist the witness's security or protect them from intimidation or retaliation;

- f. the public interest in encouraging the reporting of professional misconduct and the participation of patients and other witnesses in the disciplinary process; and
- g. any other factors the Tribunal considers relevant.

14.4.3 Where a witness is 18 or under or has difficulty communicating their evidence due to a disability, they shall be accommodated as set out in rule 14.4.1 unless the witness declines.

Evidence of Complainant's Sexual History

14.5.1 In proceedings relating to allegations of sexual abuse or other sexual misconduct, evidence that the complainant has engaged in sexual activity, whether with the registrant or with any other person, is not admissible to support an inference that, by reason of the sexual nature of that activity, the complainant is:

- a. more likely to have consented to the sexual activity that forms the subject matter of the allegations; or
- b. less worthy of belief.

14.5.2 In proceedings relating to allegations of sexual abuse or other sexual misconduct, evidence shall not be adduced by or on behalf of the registrant that the complainant has engaged in sexual activity other than the sexual activity that forms the subject matter of the allegations, either with the registrant or with any other person, unless the Tribunal determines that the evidence:

- a. is not being called for the purpose of supporting an inference described in rule 14.5.1;
- b. is relevant to an issue at the hearing;
- c. is of specific instances of sexual activity; and
- d. has significant probative value that is not substantially outweighed by the danger of prejudice to the proper administration of justice.

14.5.3 In determining whether evidence is admissible under rule 14.5.2, the Tribunal shall consider:

- a. the interests of justice, including the right of the registrant to make full answer and defence;
- b. society's interest in encouraging the reporting of sexual misconduct by registrants;
- c. whether there is a reasonable prospect that the evidence will assist in arriving at a just determination in the case;
- d. the need to remove from the fact-finding process any discriminatory belief or bias;
- e. the risk that the evidence may unduly arouse sentiments of prejudice, sympathy or hostility;
- f. the potential prejudice to the complainant's personal dignity and right of privacy;
- g. the right of the complainant and of every individual to personal security and to the full protection and benefit of the law; and
- h. any other factor that the Tribunal considers relevant.

14.5.4 The Tribunal may direct that a motion under this rule be decided before the merits hearing begins.

Rule 15 – Orders and Reasons

Draft Orders

15.1.1 Any party may prepare a draft order using Form 15. A draft order is treated as a submission and the Tribunal may amend it. A draft order is not part of the public record of the proceeding.

Orders Effective When Made

15.2.1 A Tribunal order becomes effective when it is made on the record, even if a written version has not yet been prepared or signed.

Correction of Errors

15.3.1 The Tribunal Office or a member of the panel may correct typographical errors, errors of calculation or similar minor errors in an order or reasons.

Rule 16 – Reprimands

16.1.1 Where the parties have made a joint submission on penalty which includes a reprimand, the reprimand will be delivered orally at the completion of the hearing.

16.1.2 Delivery of a reprimand does not affect a registrant's right to appeal nor arguments that can be raised on appeal. Where a registrant nevertheless asks that the reprimand await the outcome of the appeal, the registrant shall advise the Tribunal as soon as possible and, in any event, no more than 30 days after receiving the Tribunal's penalty order.

Rule 17 – Costs

17.1.1 In addition to the circumstances set out in s. 53 and s. 53.1 of the Code, the Tribunal may make an order of costs if it finds the conduct or course of conduct of a party has been unreasonable, frivolous or vexatious, or a party has acted in bad faith.

17.1.2 Failure to comply with these rules or the Tribunal's orders or directions may be a factor in assessing costs.

Late Adjournments

17.2.1 Costs may be awarded against a party granted an adjournment within 14 days of the date on which the hearing was scheduled to begin. When deciding whether to award costs for this reason the Tribunal shall consider:

- a. whether the late adjournment could have been avoided;

- b. the number of hearing days lost;
- c. the other party's costs and expenses arising from the late adjournment; and
- d. whether the party's conduct in seeking the adjournment was unreasonable, frivolous or vexatious, or in bad faith.

Requesting Costs

17.3.1 Where the College seeks costs at or below the rate in Tariff A, it is not required to provide a bill of costs.

17.3.2 Where the College seeks costs above the rate in Tariff A or where the Tribunal has no tariff, it must provide a bill of costs including invoices or receipts for any disbursements or out of pocket expenses claimed.

17.3.3 If a registrant requests costs from the College under s. 53 of the Code they shall file a motion no later than 30 days from the date of the Tribunal's final decision or the withdrawal of the allegations. The motion record need not include a bill of costs.

17.3.4 A motion under rule 17.3.3 shall be heard in two stages. In the first stage, the panel will decide whether the College is required to pay costs. In the second stage, if costs have been awarded, the panel will decide on the amount of costs. Prior to the second stage, the registrant must provide a bill of costs including invoices or receipts for any disbursements or out of pocket expenses claimed.

Rule 18 – Appeals and Judicial Reviews

18.1.1 A party that appeals a Tribunal decision shall file a copy of the notice of appeal with the Tribunal Office at the same time it is served on the other party.

18.1.2 A notice of application for judicial review of a Tribunal decision must be served on the Tribunal as required by the *Judicial Review Procedure Act*.

Tariff A: Costs and Expenses for the College to Conduct Hearing

Ontario Audiologists and Speech-Language Pathologists Discipline Tribunal

No Tariff

Ontario Chiropractors and Podiatrists Discipline Tribunal

No Tariff

Ontario Massage Therapists Discipline Tribunal

Costs and expenses of a full-day hearing: \$8,778

Costs and expenses of a half-day hearing: \$5,852

Ontario Occupational Therapists Discipline Tribunal

No Tariff

Ontario Physicians and Surgeons Discipline Tribunal

Costs and expenses of a full-day hearing: \$10,370

Costs and expenses of a half-day hearing: \$6,000

Ontario Registered Psychotherapists Discipline Tribunal

Costs and expenses of a full-day hearing (first): \$7,600

Costs and expenses of a full-day hearing (subsequent day): \$5,800

Costs and expenses of a half-day hearing: \$4,700

Appendix A: Rules that Apply to Individual Tribunals

Ontario Audiologists and Speech-Language Pathologists Discipline Tribunal

1. The effective date of these rules is June 15, 2024.

Ontario Chiropractors and Podiatrists Discipline Tribunal

1. The effective date of these Rules is January 1, 2025.

Ontario Massage Therapists Discipline Tribunal

1. The effective date of these Rules is April 14, 2025.

Ontario Occupational Therapists Discipline Tribunal

1. The effective date of these Rules is March 10, 2025.

Ontario Physicians and Surgeons Discipline Tribunal

1. The effective date of these Rules is January 1, 2023.

Ontario Registered Psychotherapists Discipline Tribunal

1. The effective date of these Rules is May 15, 2024.

Board Briefing Note

Topic:	Proposed Internationally Educated Professionals in Nutrition program (Bridging Program)
Purpose:	Decision Required
Strategic Plan Relevance:	Expand Access and Reduce Barriers to Practice
From:	Registration Committee

Issue

The Board is being asked to review and approve the proposed Internationally Educated Professionals in Nutrition Program (IEPN v2) delivered by the Toronto Metropolitan University (TMU) as an approved bridging program.

Public Interest Rationale

To ensure that the College's Registration policies appropriately assess entry to practice competencies, such that the College only registers applicants that can provide safe, ethical and competent care to the public.

Background

During the COVID pandemic, the Internationally Educated Professionals in Nutrition (IEPN) Program delivered by TMU was discontinued as it was no longer self-sustaining. As a result, candidates who obtained a level 2 result on the Knowledge Competency and Assessment Tool (KCAT) did not have a formal route to bridge knowledge and competency gaps. While candidates were permitted to re-attempt the KCAT up to two times, some candidates required additional support to obtain the level 1 result needed to move on in the process.

On September 9, 2025, TMU submitted a formal proposal for an updated bridging programme IEPN v.2.0 and requested that CDO consider it as an approved bridging program (*Appendix 1 and Appendix 2*).

TMU has provided an academic course map to the Registration Committee to demonstrate the competencies that the courses will cover.

The Registration Committee met on October 28, 2025 and recommends that the Board approve and recognize the IEPN as presented by the TMU as an approved bridging program.

Considerations

The updated bridging program will now consist of ten courses, offered over a two-year period followed by the one year of practical training, the one-year Professional Master's Diploma (PMDip) in dietetics for a total of 3 years.

These ten courses were previously approved in 2017 by the College as equivalent to Knowledge Competency and Assessment Tool Level 1 in the former bridging program. The proposed courses have been mapped against the Knowledge Competency and Assessment Tool blueprint to determine whether they will provide the necessary training to meet the required competencies. These were carefully reviewed by the Registration Committee.

The new proposed program would allow candidates to enrol on an annual basis, with no minimum enrollment requirement. Candidates would take the courses alongside students from the accredited Bachelor of Applied Science in Nutrition and Food (BASc) program.

The PMDip is an accredited practical training program and students enrolled in the bridging program would be admitted to the PMDip program.

Upon completion of the bridging program, candidates will be eligible to write the Canadian Dietetic Registration Examination (CDRE).

Currently, the proposed bridging program does not offer individual courses to meet specific gaps. TMU has recommended using the university's transfer credit process to have previous coursework recognized.



Equity Impact Assessment

The approval of the Internationally Educated Professionals in Nutrition as an approved bridging program will expand access and reduce barriers for internationally trained dietitians. This program will allow internationally trained dietitians to bridge gaps in their knowledge and competence without completing a full Canadian accredited dietetic degree. The Registration Program will monitor the impact of any changes to ensure that there are no unintended consequences for applicants, registrants and other system partners.

Recommendation

That the Board approve and recognize the IEPN as presented by TMU as an approved bridging program.

Attachments

- Appendix 1: Cover Letter from Toronto Metropolitan University
- Appendix 2: Overview of the Proposed IEPN Program

September 9, 2025

Melanie Woodbeck
Registrar & Executive Director
College of Dietitians of Ontario

Dear Ms. Woodbeck,

Thank you for taking the time to review our proposal for an updated Internationally Educated Professionals in Nutrition ("IEPN v2.0") program to be delivered by the School of Nutrition at Toronto Metropolitan University.

We are submitting documentation in support of our request for the CDO Registration Committee approval of ten (10) School of Nutrition undergraduate courses as equivalent to KCAT Level I for internationally educated dietitians (ie who did not complete their education and training at Equal/Accreditation Canada or PDEP Accredited programs) who are proceeding through the PLAR process and seeking registration with the College. Please note these 10 courses were previously approved in 2017 by CDO as equivalent to KCAT 1 in our former IEPN program.

Key Program Components

- **Program Length:** The coursework component of the program is two years in length, followed by one year of practical training delivered through our accredited one-year Professional Master's Diploma (PMDip) in Dietetics (three years total).
- **Comprehensive ICDEP 3.0 Alignment:** All ten courses plus the practical training courses have been mapped to the current [ICDEP 3.0](#) (2020) competencies.
- **Student Support Framework:** The School of Nutrition is committed to developing a financially viable and accessible program that provides comprehensive academic support to program candidates.
- **Curriculum Quality Assurance:** The School maintains academic excellence and curriculum quality through regular curriculum review and ongoing updates to learning objectives and course mapping to dietetic competencies.

This submission includes the following supporting documents:

- Program Overview (including course descriptions, eligibility criteria and admissions information, and possible pathways for internationally educated candidates in the IEPN program going through the PLAR process)
- Detailed course mapping to the ICDEP v3.0 (2020)

We look forward to your review of this proposal and welcome your insights on how this program aligns with CDO's vision for supporting internationally educated professionals in their journey toward dietetic practice registration. We are happy to answer any questions you may have.

Thank you for your consideration and support.

Sincerely,



Fiona Yeudall
Director, School of Nutrition
Toronto Metropolitan University



Sharon Wong
Associate Director, School of Nutrition
Toronto Metropolitan University

cc: Elaine Lew, Director of Registration, College of Dietitians of Ontario

School of Nutrition
Proposed Bridging Education Model 2.0
for Internationally Educated Nutrition Professionals/Dietitians

The School of Nutrition is developing a new bridging program model to enable internationally educated dietitians who are going through the College of Dietitians of Ontario's PLAR process who have achieved a [KCAT](#) Level II assessment to meet eligibility to write the CDRE upon completion of coursework and practical training.

We are seeking approval from the CDO Registration Committee of ten (10) School of Nutrition undergraduate courses, upon successful completion, to be recognized as equivalent to KCAT Level I for internationally educated dietitians who are progressing through the CDO's PLAR process.

1.0 Program Overview

The proposed model has two key components:

1.1 Coursework Component: 10 BASc accredited courses (and 2 additional IEPN specific dietetic seminars) delivered over two years (24 months)¹

Year	Fall	Winter
1	FNX101A (<i>proposed course</i>) Dietetics Seminar I	FNX101B (<i>proposed course</i>) Dietetics Seminar II
	FNS200 Quantity Food Management (<i>FND 100 and FNN 100</i>) FNP100 Introduction to Professional Practice (or S/S prior to year 1)	FNR201 Research Methods and Statistics (<i>FNR 100</i>) FNS400 Food Service Systems Management (<i>ACC100 and FNS 200</i>)
2	FNN301 Intro to Nutrition Management of Human Disease (<i>FNN200 and FNN201</i>) FNN202 Public Health Nutrition (<i>FNN201</i>)	FNP350 Interpersonal Comm/Counselling Nutrition (<i>FNP 100 and FNN201</i>) FNN401 Advanced Nutrition Management of Human Disease (<i>FNN 301 and FNR201</i>)

¹ In 2017, the College of Dietitians of Ontario approved these 10 undergraduate level academic courses offered through the School of Nutrition and the Chang School at Toronto Metropolitan University, as the Certificate in Canadian Dietetic Knowledge Competencies as the first component of the Internationally Educated Professionals in Nutrition program.

	FNP550 Introduction to Dietetics Practice (FNN301)	FNN400 Advanced Nutrition for Health Promotion (FNN202)
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Notes:

- Course pre/co-requisite in brackets. Pre-requisites in italics are not part of the proposed 10 course curriculum but assumed to be addressed in foundational knowledge assessed in KCAT and will be waived for bridging program students.
- FNN301 is a co-requisite to FNP500. The courses will be taken in tandem.
- Course descriptions are included in [Appendix I](#).

1.2 Practicum Component: One year (12 months) accredited [PMDip program](#) for those who successfully complete the coursework component.

2.0 ICDEP mapping

The 10 BASc courses comprising the coursework component (year 1 and 2) and the 4 PMDip courses of the practicum component (year 3) are comprehensively mapped to the ICDEP (v3.0) framework, covering the foundational knowledge assessed through the KCAT. The BASc and PMDip programs have current EQual accreditation status (through Accreditation Canada). Within these programs, detailed mapping of each individual course to its specific learning objectives have been completed to ensure alignment between course content, assessment methods, and learning outcomes.

The mapping of the IEPN 2.0 coursework and practical components to the ICDEP is included in [Appendix II](#).

3.0 Eligibility Criteria

The model aims to specifically target individuals who were educated internationally (outside of Canada) who *have not* completed education and training approved by the College of Dietitians of Ontario (CDO)². These individuals are required to be assessed by the College's [Prior Learning Assessment and Recognition \(PLAR\) process](#), including the first step of the knowledge assessment. The PLAR process uses a knowledge and competency assessment tool -- the KCAT.

The proposed model focuses primarily on individuals obtaining a KCAT Level II assessment outcome:

² Canadian dietetics degrees and practical training are approved by the College if at the time of completion they were accredited by EQual/Accreditation Canada, PDEP from 2015 until March 31, 2024 or Dietitians of Canada prior to 2015. Additional information (including reciprocity with the USA and Australia) can be found [here](#).

KCAT Level II - Internationally educated professionals who pass the KCAT assessment at Level II indicates partial knowledge relative to Canadian standards. This group is considered the best fit for the proposed model and may choose from three pathways:

Pathway A: Complete the IEPN academic coursework (2 years) followed by the TMU Professional Master's Diploma practical training (1 year). Successful completion of the academic component guarantees admission to the IEPN practical training phase.

Pathway B: Complete the IEPN academic coursework (2 years), then apply to an accredited dietetics practical training program at another institution.

Pathway C: Complete the IEPN academic coursework (2 years), then proceed directly to the Performance Based Assessment (PBA) to demonstrate competency for registration.

All three pathways ultimately prepare candidates for the CDRE exam, the final step toward becoming a Registered Dietitian (RD). Candidates can select the most appropriate pathway based on their educational background, KCAT assessment results, and career preferences.

A comprehensive exploration of the potential pathways for KCAT Level II and I assessment are included in [Appendix III](#).

4.0 Year-by-Year Implementation:

- **2025-2026:** Program development, CDO approval, seeking external funding to support program (external funding is necessary for program delivery)
- **2026-2027:** First cohort academic Year 1 15-20 students projected from current KCAT Level II pool)
- **2027-2028:** First cohort academic Year 2 + Second cohort academic Year 1
- **2028-2029:** First cohort PMDip practical training + Second cohort academic Year 2 + Third cohort academic Year 1
- **2029-2030:** Second cohort PMDip + Third cohort academic Year 2 + Program evaluation and sustainability planning (seeking continued external funding)

5.0 Admissions Criteria (DRAFT):

Candidates must meet the following admission requirements:

- A. CDO KCAT Level II or I assessment outcome
- B. Proof of English proficiency at the required level by CDO

Additional application criteria for consideration based on previous program experience include:

- Online application form
- Cover Letter/Letter of Interest
- Current CV/resume

CDO English Language Requirements

A valid (within the past two years) report sent electronically to the College by an approved testing agency, which meets the minimum required score

- Test of English as a Foreign Language – Internet Based Test (TOEFL – iBT) with an overall minimum score of 79.
- International English Language Testing System (IELTS) – General with an overall minimum band score of 6 (One Skill Retake permitted).
- International English Language Testing System (IELTS) – Academic with an overall minimum band score of 6.5 (One Skill Retake permitted).
- Canadian English Language Proficiency Index Program – General (CELPIP – G) with an overall minimum score of 7.
- Pearson Test of English (PTE) – Minimum score of 60 for Listening and Reading, 69 for Writing, and 68 for Speaking.

OR

- Occupational English Test (OET) – Minimum score of 300 for Listening, Writing, and Reading, and 350 for speaking.

OR

- An official letter, sent directly to the College by the school or education institution, confirming that the medium of instruction was English for your secondary or post-secondary education.

APPENDIX I

Course Descriptions

- **FNX101A** - Dietetics Seminar I and **FNX101B** - Dietetics Seminar II (*proposed, DRAFT*)
This two-course series builds familiarity with the expectations and standards of dietetic practice within the Canadian healthcare system, setting the foundation for successful workplace integration and employment. Students will explore dietetic specific professional frameworks, client-centered communication approaches, and evidence-based practices to understand how dietetics is practiced in the Canadian context. The course provides essential preparation for transitioning to dietetic registration and employment by developing an understanding of dietetic practice competencies, professional culture, and regulatory requirements.
- **FNS200** - Quantity Food Management
Food and Nutrition Systems I explores the basic principles and theories of food service systems; menu planning; quantity recipe standardization and costing; procurement and production of quality food; and food service computer applications.
- **FNP100** - Introduction to Professional Practice
This course is the first of the required courses on professional practice designed to encourage both personal and professional growth. Students will explore aspects of professional practice available to food and nutrition program graduates and will examine a number of food, nutrition, and health issues from a variety of analytical frameworks, in order to appreciate the diverse stakeholder interests encountered in professional practice. Specifically the concepts of individual and societal; change, diversity and health will be examined using food at the experiential and metaphoric level. It is intended that this course will provide the impetus for the development of a practice portfolio and eventual philosophy statement.
- **FNR 201** - Research Methods and Statistics
Building on [FNR 100](#), this is the second course in the food and nutrition series which positions the research process as an integral component of practice. Focus will be placed on enhancing students' understanding of research methodologies using examples drawn from health, food, nutrition and family research. Critical appraisal of surveys, experiments, epidemiology and observational studies will be included. Course work will give students experience analyzing published research, writing a conceptual framework and analyzing secondary data.
- **FNS400** - Food Service Systems Management
This is an advanced course in the principles of food service operations and management as applied in health care institutions and other settings. Using the case study approach, the latest trends in menu planning, purchasing, inventory and production management, financial controls, planning and system change, and the use of quality assurance mechanisms are emphasized. The application of management information systems, at both the operational and managerial level are highlighted.
- **FNN301** - Intro to Nutrition Management of Human Disease
The practice of dietetics is examined within an evolving health care context. The role of nutrition and food in the management of chronic disease is critically evaluated. Areas of

focus include current approaches to carbohydrate, lipoprotein, body weight and gastrointestinal disorders. Using an inter-disciplinary framework, client assessment, continuity of care, interpersonal dynamics, ethical considerations and research-based practice issues are explored.

- **FNN202 - Public Health Nutrition**

Chronic disease risk reduction from a population-based perspective is explored. Utilizing a determinants of health framework, strategies for identifying risk and managing disease at a population level will be studied. Cardiovascular disease, diabetes, and cancer will be used to frame this approach to disease risk reduction. Students will move from examining theoretical approaches to chronic disease prevention to examining 'successes' examples of moving theory into practice.

- **FNP550 - Introduction to Dietetics Practice**

This course will examine the policies and legislation, ethical practice standards and emergent issues of the dietetics profession. A self-directed framework will be provided which will allow for competency documentation development. Students will enhance their interpersonal and interprofessional collaboration skills.

- **FNP350 - Interpersonal Comm/Counselling Nutrition**

This course will provide students with the knowledge and skills necessary to conduct a structured interview, including counselling individuals to adopt healthier eating behaviours and food choices. Students will develop and practice effective communication and counselling skills through in-class simulations, group and partner activities. This course will focus on active listening, ways of responding, identifying appropriate interventions and conveying a clear message. Students will deepen their learning through a series of self-reflection exercises.

- **FNN401 - Advanced Nutrition Management of Human Disease**

The nutritional management of both acute and chronic disorders including hepatic, pancreatic and renal disease will be explored with an emphasis on the development of practical nutrition care skills specifically, assessment techniques. Immunodeficiency, surgical, neurologic trauma and critical care conditions will also be addressed. Current nutritional support practices and research initiatives in many of these areas will be critically analyzed.

- **FNN400 - Advanced Nutrition for Health promotion**

Health and its multiple determinants are explored from a theoretic and applied perspective. The role of nutrition and food as determinants of health is critically analyzed. This course examines the basis of health promotion and population health initiatives, the agencies and organizations involved, and the inter-sectoral nature of current strategies. Attention is given to the values and support systems of the community. Assets assessment, facilitative communication, community development, and program evaluation are surveyed.

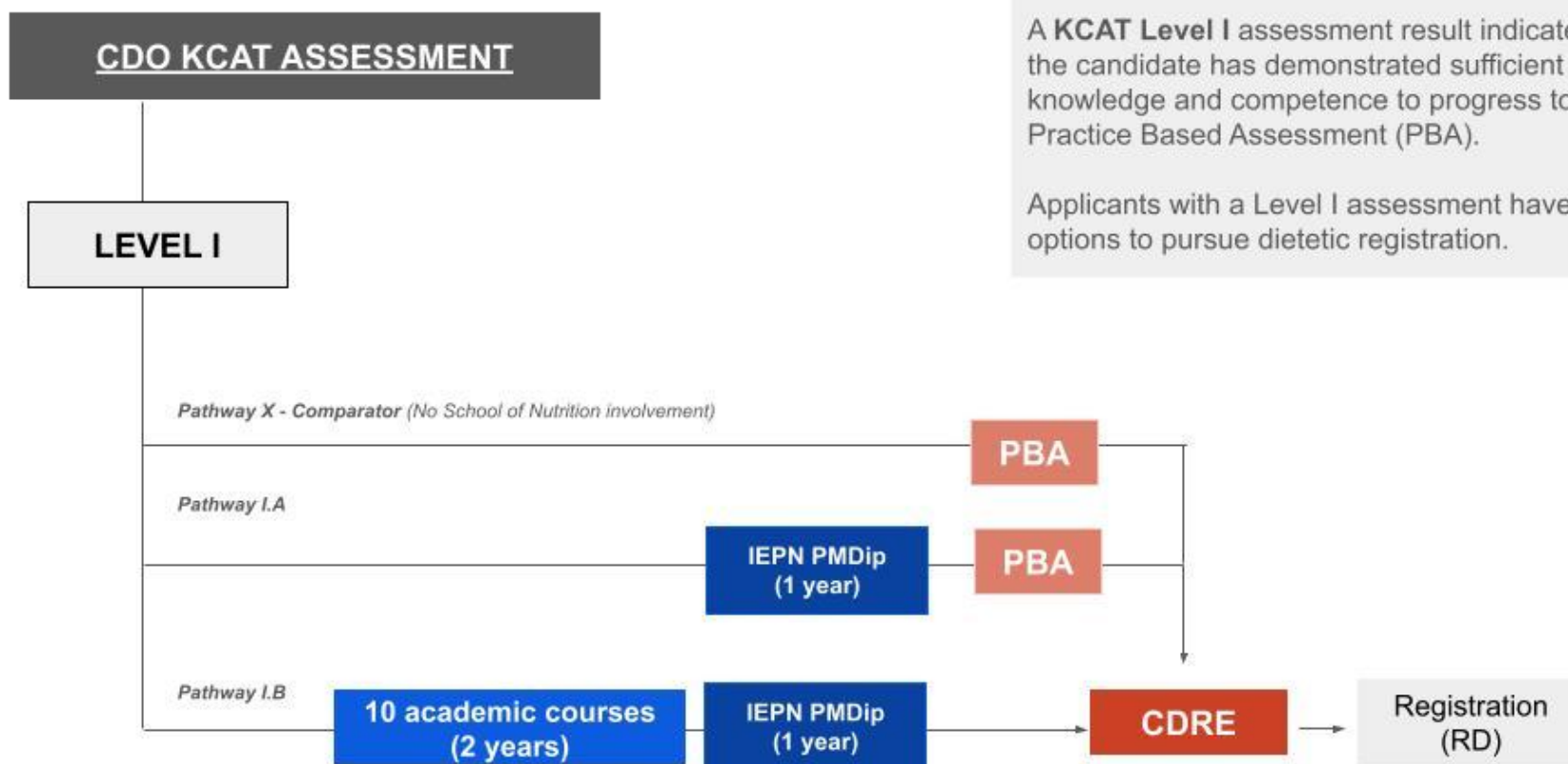
APPENDIX II

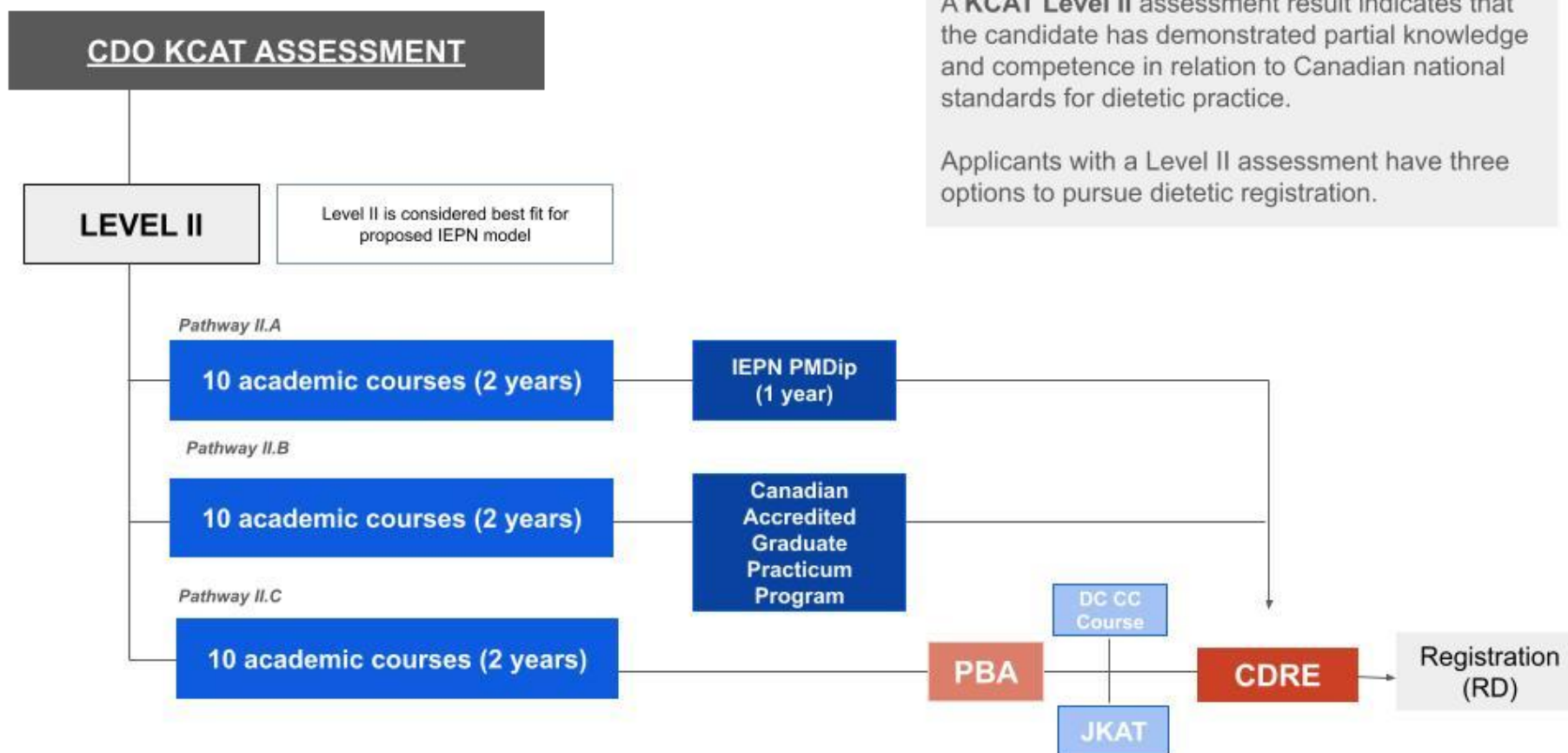
ICDEP Competency Mapping to Proposed IEPN Curriculum (academic and practical training)

IEPN Academic and Practicum Component Overall Map

APPENDIX III

KCAT Assessment Outcome, Level I and II, and possible internationally educated candidate pathway





Board Briefing Note

Topic:	Revisions to Policy 2-25: Suitability to Practise for Applicants
Purpose:	Decision Required
Strategic Plan Relevance:	Expand Access and Reduce Barriers to Practice
From:	Registration Committee

Issue

That, in light of the changes to the [Registration section of the *Dietetics Act*](#), the Board approve revisions to policy 2-25: Suitability to Practise for Applicants (see *Appendix 1*)

Public Interest Rationale

To ensure that the College's Registration policies appropriately assess entry to practice competencies, such that the CDO only registers applicants that can provide safe, ethical and competent care to the public.

Background

The new registration regulation (effective May 20, 2025) formalizes the information an applicant or registrant must provide related to their conduct and suitability to practise.

Considerations

The Registration Committee met on October 28, 2025, to consider the new suitability requirements. The Committee recommends that the Board approve the revisions to Policy 2-25: Suitability to Practise for Applicants (*Appendix 1*), to remove language which was specific to the previous regulations.



The amendments also formalize the requirement for applicants to declare information relating to existing charges and conditions, and not just findings of guilt. The policy revisions have removed the procedures that reflected the specific information required under the previous regulations.

Equity Impact Assessment

The revisions to *Policy 2-25: Suitability to Practise* will provide registrants and applicants greater transparency regarding the registration requirements for registration. The policy amendments include a number of plain language changes to streamline the policy. The Registration Program will monitor the impact of any approved policy revisions to ensure that there are no unintended consequences for applicants, registrants and other system partners.

Recommendation

That the Board approve (or approve with amendments) the revisions to *Policy 2-25: Suitability to Practise*.

Attachments

- Appendix 1: Proposed revisions to Policy 2-25: Suitability to Practise (*draft for approval*)
- Appendix 2: Policy 2-25: Suitability to Practise (*As established on April 4, 2022, and current*)



Proposed Revisions 2-25 Suitability to Practise for Applicants

Established: April 4, 2022

Reviewed:

Revised: November XXX, 2025

Policy Statement

In the interest of public protection, the previous conduct of applicants for registration must afford reasonable grounds for the belief that they will practise dietetics in a safe and ethical manner. As authorized by section 3 of the College's [registration regulation](#), the College collects information about an applicant's prior conduct, including, offences, academic history, previous/current professional licensure, and relevant health conditions.

This policy sets out the criteria for determining an applicant's suitability to practise.

CRITERIA

1. The Registrar (or the Registration Committee) will consider the following factors when determining suitability to practise:
 - a. The nature and seriousness of the conduct;
 - b. The timing and duration of the conduct;
 - c. The motivation for the conduct, if known;
 - d. Whether the matter occurred while practising the dietetic profession, or as a regulated professional in another profession;
 - e. Whether an individual or the public may be put at risk of physical, mental, or other harm;
 - f. Whether there had been any remediation undertaken by the applicant;
 - g. Whether the applicant demonstrated insight, remorse, and accountability;
 - h. Whether there is a pattern of behaviour or an isolated event;
 - i. Whether the matter suggests discrimination, disregard or disrespect for people based on a ground protected by the Human Rights Code (race, colour, ancestry, creed (religion), place of origin, ethnic origin, citizenship, sex (including



pregnancy, gender identity), sexual orientation, age, marital status, family status, disability, receipt of public assistance); and

- j. Any other relevant information.



Current 2-25 Suitability to Practise for Applicants

Established: April 4, 2022

Reviewed:

Revised:

Policy Statement

In the interest of public protection, the College must ensure that all applicants will practise dietetics in accordance with the law, and in a safe, ethical, and competent manner. As required in section 3.(1).1. of the [registration regulation](#), and Schedule 2, the Health Professions Procedural Code, under the [Regulated Health Professions Act, 1991](#), the College collects information about an applicant's prior conduct, including, offences, academic history, previous/current professional licensure, and relevant health conditions.

This policy sets out the process that will be followed and the criteria that will be considered by the College when determining an applicant's suitability to practise: the ability to practise dietetics safely, ethically, and competently.

PROCEDURE

1. All applicants must submit a completed and signed application form, including answers to the declaration questions pertaining to the following:
 - a. Any refusal of registration by a regulatory body (dietetic or otherwise), within or outside of Ontario;
 - b. A prior or current charge or finding of guilt related to criminal offence;
 - c. A prior finding or current proceeding/investigation related to professional misconduct, incompetence, or incapacity by a regulatory body;
 - d. Any allegations of academic misconduct or history of being suspended, expelled, or penalized by a post-secondary institution for misconduct;
 - e. Any physical or mental health conditions, or drug or alcohol dependency that may affect the ability to perform the duties of a dietitian safely; and
 - f. Any other circumstances that may reasonably be of concern.
2. If any 'yes' responses are received for the declaration questions on an application form, the College will seek further details and supporting documentation from the applicant and/or any other relevant organization.



3. Applicants may be required to provide a detailed written account of the matter that was disclosed on their application form. The written submission may include, as applicable:
 - a. The circumstances relating to the matter;
 - b. An explanation of why the matter will not impact the applicant's ability to practise dietetics in the public interest;
 - c. An explanation demonstrating the applicant understands their accountability as a healthcare professional;
 - d. Any relevant court documents;
 - e. Details and evidence of compliance with any court orders;
 - f. Letters of reference from employers, educators, or colleagues who are aware of the facts of the matter;
 - g. Letters from health care professions who are/were engaged in treating the applicant, providing their professional opinion on the applicant's ability to practise dietetics; and/or
 - h. Details and evidence of any remediation or rehabilitation undertaken.
4. Verification of registration/good standing forms are requested and obtained directly from the respective regulatory bodies for the following applicants: *
 - a. Former registrants of the College;
 - b. Former/current registrants of other dietetic regulatory bodies, within and outside of Canada; and
 - c. Former/current registrants of other non-dietetic professional regulatory bodies, within and outside of Ontario.
5. The Registrar (or their delegate) will determine whether the submitted information about an applicant is relevant to their suitability to practise by considering the following factors, as applicable:
 - a. The nature and seriousness of the matter;
 - b. The timing and duration of the matter;
 - c. Whether the matter occurred while practising the dietetic profession; or as a healthcare practitioner in another profession;
 - d. Whether an individual or the public was/is/will be put at risk of physical, mental, or other harm;
 - e. Whether there have been any remedial steps taken by the applicant;
 - f. Whether the applicant demonstrated remorse and accountability;
 - g. Whether there is a pattern of behaviour or an isolated event;



- h. Whether the matter suggests discrimination, disregard or disrespect for people based on a ground protected by the Human Rights Code (race, colour, ancestry, creed (religion), place of origin, ethnic origin, citizenship, sex (including pregnancy, gender identity), sexual orientation, age, marital status, family status, disability, receipt of public assistance); and
 - i. Any other relevant information specific to the matter(s).
- 6. The Registrar will review applications on an individual basis and may decide to:
 - a. Register the applicant;
 - b. Register the applicant with terms, conditions, and limitations, consented to by the applicant; or
 - c. Refer the applicant to a panel of the Registration Committee if they have reasonable doubts as to whether the applicant has met the College's suitability to practise requirements.
- 7. If the application is referred to a panel of the Registration Committee, applicants will have an opportunity to make further submissions for review by the committee within 30 days of being notified of the referral.
- 8. A panel of the Registration Committee will consider each application on an individual basis and will review all the information provided by the applicant as per the criteria outlined in section 6 of this policy to render a decision.
- 9. A panel of the Registration Committee may:
 - a. Direct the Registrar to register the applicant;
 - b. Direct the Registrar to issue a certificate of registration if the applicant successfully completes examinations set or approved by the panel;
 - c. Direct the Registrar to issue a certificate of registration if the applicant successfully completes additional training specified by the panel;
 - d. Direct the Registrar to register the applicant with specified terms, conditions, and limitations; or
 - e. Direct the Registrar to refuse to register the applicant.
- 10. Terms, conditions, and limitations imposed by a panel of the Registration Committee may include, but are not limited to:
 - a. supervision, monitoring, or mentorship;
 - b. assessment and/or counselling;



- c. additional courses or continuing education (e.g., ethics, boundaries); and/or
 - d. restrictions on practise settings, scope of practice, or client populations.
11. Applicants will be issued a decision and reasons letter from the panel of the Registration Committee reviewing their file.
 12. Decisions of a panel of the Registration Committee may be appealed by the applicant to the Health Professions Review and Appeal Board.
 13. In addition to suitability to practise, all other non-exemptible registration requirements must be met before a certificate of registration may be issued to an applicant.
 14. Once an applicant is issued a certificate of registration, they are subject to the College's policy [Transparency: Determining a Registrant's Suitability to Practise \(2016\)](#).
- *Verification forms are valid for 90 days if received from an international regulatory body or 30 days if received from a professional regulatory body within Canada or the United States.

Board Briefing Note

Topic:	Revisions to Policy 2-80: Authorization to Work in Canada
Purpose:	Decision Required
Strategic Plan Relevance:	Expand Access and Reduce Barriers to Practice
From:	Registration Committee

Issue

That, in light of the changes to the [Registration section of the *Dietetics Act*](#), the Board approve revisions to policy 2-80: Authorization to Work in Canada (see *Appendix 1*).

Public Interest Rationale

To ensure that the College's Registration policies appropriately assess entry to practice competencies, such that the CDO only registers applicants that can provide safe, ethical and competent care to the public.

Background

Updated registration regulations came into force on May 20, 2025. The regulations formalize the requirement for registrants to continue to hold authorization to work in Canada.

The Registration Committee met on October 28, 2025 and recommends that the Board approve revisions to registration policy 2-80, to formalize the expiration of certificates of registration when a registrant no longer holds authorization to work in Canada.

Considerations

In light of the amendments to the registration regulations, the Committee recommends to the board revisions to Policy 2-80: Authorization to Work in Canada (*Appendix 1*), to formalize the requirement for registrants to continue to hold valid authorization to work in Canada.

Certificates of Registration will now expire once a registrant no longer holds authorization to work in Canada.

Equity Impact Assessment

The revisions to *Policy 2-80: Authorization to Work in Canada* will provide registrants and applicants greater transparency regarding the registration requirements for registration. The Registration Program will monitor the impact of any approved policy revisions to ensure that there are no unintended consequences for applicants, registrants and other system partners.

Recommendation

That Board approve (or approve with amendments) the revisions to *Policy 2-80: Authorization to Work in Canada*.

Attachments

- Appendix 1: Proposed revisions to Policy 2-80: Authorization to Work in Canada (*draft for approval*)
- Appendix 2: Policy 2-80: Authorization to Work in Canada (*As revised on December 3, 2019, and current*)



Appendix 1

Proposed Revisions 2-80 Authorization to Work in Canada

Established: May 6, 2019

Reviewed:

Revised: December 3, 2019, November XXX, 2025

Policy Statement

As per section 3(1)3 and 4(3)1 of the [Registration Regulation](#):

To obtain and maintain registration with the College, applicants and registrants must provide evidence that they are a Canadian citizen or permanent resident of Canada or hold a valid work or study permit authorizing practice in dietetics.

Evidence of authorization to work in Canada is not required to be eligible to write the Canadian Dietetic Registration Exam.

Certificates of Registration will expire when registrants are no longer authorized to work in Canada.



Current 2-80 Authorization to Work in Canada

Established: May 6, 2019

Reviewed:

Revised: December 3, 2019

Policy Statement

As per section 3(1)3. of the [Registration Regulation](#):

“3. The applicant must be a Canadian citizen or permanent resident of Canada or must hold the appropriate authorization under the Immigration and Refugee Protection Act (Canada) permitting the member to engage in the practice of dietetics in Ontario in the manner permitted by a certificate of registration.”

An applicant may be deemed eligible to write the Canadian Dietetic Registration Exam, if they do not demonstrate 3(1)3. of the [Registration Regulation](#), but must demonstrate that they are authorized to work in Canada to obtain registration with the College.

Procedure

1. A person is authorized to work in Canada if they:
 - Are a Canadian Citizen;
 - Are a permanent resident of Canada; or
 - Possess a valid work permit or study permit which permits them to practice dietetics in Canada.
2. An applicant is required to declare their authorization to work in Canada on their application form.
3. An applicant must submit formal proof of their authorization to work in Canada with their application form.
4. Upon request, an applicant who meets all other registration requirements will be issued a formal letter to confirm that the applicant has met the academic and practical training requirements, but will not be eligible for registration with the College until they provide formal proof authorization to work in Canada.

Board Briefing Note

Topic:	Revisions to Policy 4-25: Applicants Currently Registered with full Accredited Practising Dietitians status with Dietitians Australia
Purpose:	Decision Required
Strategic Plan Relevance:	Expand Access and Reduce Barriers to Practice
From:	Registration Committee

Issue

For the Board to approve revisions to *Policy 4-25: Applicants Currently Registered with full Accredited Practising Dietitians status with Dietitians Australia*, (Appendix 1), to reflect changes to Accredited Practising Dietitians licensure from Australia.

Public Interest Rationale

To ensure that the College's Registration policies appropriately assess entry to practice competencies, such that the CDO only registers applicants that can provide safe, ethical and competent care to the public.

Background

As part of CDO's work to transition to the [2020 Integrated Competencies for Dietetic Education and Practice](#), in 2023, a comparison of the Dietitians Australia and Canadian entry-level competencies was conducted. The College's analysis demonstrated substantial equivalence (89%) between the Canadian and Australian entry-level competencies.

However, the analysis noted that there were gaps in performance indicators which pertained to food and nutrition expertise, food provision, and to a lesser extent, Professionalism and Ethics, and Management and Leadership. No gaps exist in the higher-risk area of Nutrition Care. The Registration Committee noted that the areas where gaps existed would be addressed during the course of the 26-week mentorship over a 12-month continuing education period.

At the August 16, 2023, meeting, the Registration Committee approved the continued recognition of Dietitian Australia's Accredited Practising Dietitians (APD) status as equivalent to meeting the standards for entry-level practice in Canada. The current policy accepts applicants who have completed training and education in Australia, and who hold full status (registration) as an Accredited Practising Dietitian (APD) as having completed the Prior Learning Assessment and Recognition process. These applicants are eligible to write the Canadian Dietetic Registration Examination and receive a temporary certificate if all other registration requirements have been met. (*Refer to the current PLAR policy,*).

Currently, a graduating student in Australia will receive Provisional APD status and must complete a minimum of 26 weeks of supervised mentored practice, and 30 hours of continuous professional development activities over a 12-month period prior to gaining full APD status.

Considerations

The College was informed by Dietitians Australia, the dietetic regulatory body in Australia, that as of January 1, 2026, the Provisional Accredited Practising Dietitian (APD) credential will be removed and the requirement that graduates complete the mandatory mentorship has now been removed. This was considered by the Registration Committee on October 28, 2025.

The accreditation standards in Australia have not changed since the comparison of the Dietitians Australia and Canadian entry-level competencies was conducted. Accredited dietetic programs in Australia continue to all students to complete supervised workplace learning experiences for a minimum of 100 (~750 hours) equivalent working days across the duration of the program. In Canada, it is 1250 hours.

Since this additional training was seen as crucial to ensure full equivalence of the program to the Canadian standard, the Board is being asked to review and amend its policy on accepting Australia's Accredited Practising Dietitians (APD) status without completing a PLAR assessment. Specifically, the Registration Committee recommends that the board approve amendments to the policy to accept only those applicants registered with APD status before January 1, 2026, as equivalent under the Prior Learning Assessment and Recognition process. All candidates registered with APD status after January 1, 2026, will be subject to a complete Prior Learning

Assessment and Recognition assessment. The proposed draft policy underwent legal review. (see Appendix 1)

Equity Impact Assessment

CDO no longer has sufficient evidence that a program is equivalent to Canadian standards, which must be considered within the context of CDO's overarching mandate of public protection. The Registration Program will monitor the impact of any approved policy revisions to ensure that there are no unexpected consequences for applicants, registrants and other system partners.

Recommendation

Given the nature of the gaps in performance indicators between Dietitians Australia's and the 2020 Integrated Competencies for Dietetic Education and Practice entry-level competencies it is recommended that:

- a) The Board approve (or approve with amendments) the revisions to ***Policy 4-25: Recognition of Dietitians Australia Accredited Practising Dietitians*** to continue to recognize Australian APD applicants who were registered with APD status prior to January 1, 2026, as having successfully completed the College's Prior Learning Assessment and Recognition process, as recommended by the Registration Committee.

Attachments

- Appendix 1: Proposed Revisions to *Policy 4-25: Recognition of Dietitians Australia Accredited Practising Dietitians* (for approval)
- Appendix 2: *Policy 4-25: Recognition of Dietitians Australia Accredited Practising Dietitians* - Current



Proposed Revisions Policy: 4-25 Recognition of “Dietitians Australia” Accredited Practising Dietitians

Established: April 3, 2024

Reviewed:

Revised: September 5, 2025, November XXX, 2025

Policy Statement

This policy provides a pathway to registration for applicants who are currently registered with Dietitians Australia and hold full Accredited Practising Dietitians (APDs) status.

Applicants who don't meet the criteria will be required to successfully complete the Prior Learning Assessment and Recognition process assessments.

Applicants who are currently registered with Dietitians Australia and received full Accredited Practising Dietitians (APDs) status prior to January 1, 2026, are deemed to have successfully completed the College's Prior Learning Assessment and Recognition process¹.

¹ As per paragraph 6(1)2 of the [Registration Regulation](#).



Current Policy: 4-25 Recognition of “Dietitians Australia” Accredited Practising Dietitians

Established: April 3, 2024

Reviewed:

Revised: September 5, 2025

Policy Statement

This policy provides a pathway to registration for applicants who are currently registered with Dietitians Australia and hold full Accredited Practising Dietitians (APDs) status. Applicants who don't meet the criteria will be required to successfully complete the PLAR assessments.

Applicants who are currently registered with Dietitians Australia and hold full Accredited Practising Dietitians (APDs) status, are deemed to have successfully completed the College's prior learning assessment and recognition (PLAR) process¹.

¹ As per paragraph 6(1)2 of the [Registration Regulation](#).



Pulse Check Questions

1. What worked well at today's meeting?
2. What was tricky?
3. Did everyone have an adequate opportunity to share their perspectives, and did we allow for diverse opinions?
4. Did we make decisions in alignment with our public protection mandate and role as CDO's Board/Committee?
5. Were the meeting materials and any other provided information clear, comprehensive, and relevant?
6. Is there anything we need to do differently at our next meeting?

We acknowledge that the College of Dietitians of Ontario's office is located on the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples and is now home to many diverse First Nations, Inuit and Métis peoples. We also acknowledge that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

We are acknowledging the traditional keepers of these lands as part of a deeper commitment to Ontario's Indigenous communities. As provincial health regulators, we have a large role to play in reconciliation to meet the broader goal of public protection.

Mission

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

Vision

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

Values

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

Board Action List

Actions as of November 14, 2025

Meeting Date	Agenda Item	Action	Status	Notes
September 5, 2025	5. Audited Financial Statements	Inform auditor of Board's decision to approve temporary exemption in its compliance with the investment policy	Complete	
	6. Interfund Transfer	Complete the proposed transfers	Complete	
		Create the IT reserve fund	Complete	
	7. Appointment of Auditors	Inform auditors of reappointment	Complete	
	8. Management Report	Develop decision making tools for committees	In progress	A committee management guide is in development
	9. HPDT	Draft amendments to bylaw 1 to operationalize HPDT	Complete	Board will review proposed bylaw amendments at its November meeting
	10. Billing Standards	Operationalize	In progress	
	12. Registration policy revisions	Operationalize	Complete	

CDO Acronym List

General Acronyms

ACRONYM	DEFINITION
ACEND	Accreditation Council for Education in Nutrition in Dietetics (United States)
BBI	Behaviour Based Interview
CAG	Citizens Advocacy Group
CDR	Commission on Dietetic Registration (United States)
CDRE	Canadian Dietetic Registration Examination
CLEAR	Council on Licensure, Enforcement and Regulation
CNAR	Canadian Network of Agencies for Regulation
COI	Conflict of Interest
CPMF	College Performance Measurement Framework
DA	Dietitians Australia
DC	Dietitians of Canada
DELFO	Dietetic Education and Leadership Forum of Ontario
EDI-B	Equality, Diversity, Inclusion & Belonging
HIROC	Healthcare Insurance Reciprocal of Canada
HPARB	Health Professions Appeal and Review Board
HPRO	Health Profession Regulators of Ontario
ICDEP	Integrated Competencies for Dietetic Education and Practice
ICRC	Inquiries, Complaints and Reports Committee
IPC	Information and Privacy Commissioner (Ontario)
JKAT	Jurisprudence Knowledge & Assessment Tool
KCAT	Knowledge and Competence Assessment Tool (part of Registration program's PLAR process)
MAID	Medical Assistance in Dying
MOH	Ministry of Health (Ontario)
OFC	Office of the Fairness Commissioner (Ontario)
PAPA	Practice Advisor and Policy Analyst
PBA	Performance Based Assessment
PDEP	Partnership for Dietetic Education and Practice
PHIPA	Personal Health Information Protection Act, 2004
PLAR	Prior Learning Assessment and Recognition process (part of Registration program)
PPA	Peer and Practice Assessment (part of QA)
PPC	Professional Practice Committee
QA	Quality Assurance
QAC	Quality Assurance Committee
RD	Registered Dietitian
RHPA	Regulated Health Professions Act, 1991
SCERP	Specified Continuing Education Remediation Program
SDL	Self-Directed Learning Tool (part of QA program)
SMART	(Goals) specific, measurable, attainable, realistic, timebound
TCL	Term, Condition and Limitation

Health Regulatory Colleges

ACRONYMS	DEFINITION
CASLPO	College of Audiologists and Speech-Language Pathologists of Ontario
CCO	College of Chiropractors of Ontario
CDHO	College of Dental Hygienists of Ontario
CDO	College of Denturists of Ontario
CDO	College of Dietitians of Ontario
CDTO	College of Dental Technologists of Ontario
CMLTO	College of Medical Laboratory Technologists of Ontario
CMO	College of Midwives of Ontario
CMRITO	College of Medical Radiation and Imaging Technologists of Ontario
CMTO	College of Massage Therapists of Ontario
CNO	College of Nurses of Ontario
COCOO	College of Chiropodists of Ontario
COKO	College of Kinesiologists of Ontario
CONO	College of Naturopaths of Ontario
COO	College of Optometrists of Ontario
COO	College of Opticians of Ontario
COTO	College of Occupational Therapists of Ontario
CPO	College of Physiotherapists of Ontario
CPO	College of Psychologists of Ontario
CPSO	College of Physicians and Surgeons of Ontario
CRPO	College of Registered Psychotherapists of Ontario
CRTO	College of Respiratory Therapists of Ontario
CTCMPAO	College of Traditional Chinese Medicine Practitioners & Acupuncturists of Ontario
OCHM	College of Homeopaths of Ontario
OCP	Ontario College of Pharmacists and Pharmacy Technicians
RCDSO	Royal College of Dental Surgeons of Ontario

Universities

ACRONYMS	DEFINITION
NOSM	Northern Ontario School of Medicine (affiliated with NODIP)
TMU	Toronto Metropolitan University
UOFG	University of Guelph
UOFO	University of Ottawa
UOFT	University of Toronto
UWO	University of Western Ontario

Practicum Programs

ACRONYMS	DEFINITION
MAN	Master of Applied Nutrition (UofG)
MHSC	Master of Health Science (TMU)
MPH	Master of Public Health (UofT)
MSCFN	Masters of Science in Food and Nutrition (Brescia, UWO)
NODIP	Northern Ontario Dietetic Internship Program (affiliated with NOSM)
PMDIP	Professional Masteres Diploma in Dietetics (TMU)

Canadian Dietetic Regulators

ACRONYM	DEFINITION
CDBC	College of Dietitians of British Columbia
CDA	College of Dietitians of Alberta
SDA	Saskatchewan Dietitians Association
CDM	College of Dietitians of Manitoba
CDO	College of Dietitians of Ontario
ODNQ	Order of Dietitians and Nutritionists of Quebec
NBAD	New Brunswick Association of Dietitians
NLDC	Newfoundland and Labrador College of Dietitians
NSCDN	Nova Scotia College of Dietitians and Nutritionists
CDPEI	College of Dietitians of Prince Edward Island



2025 – 2029

STRATEGIC PLAN

Mission, Vision & Values

Our Mission

Regulate Ontario dietitians for public protection.

Our Vision

A healthier Ontario through excellence in dietetic regulation.

Our Values

Integrity: Being ethical and honest

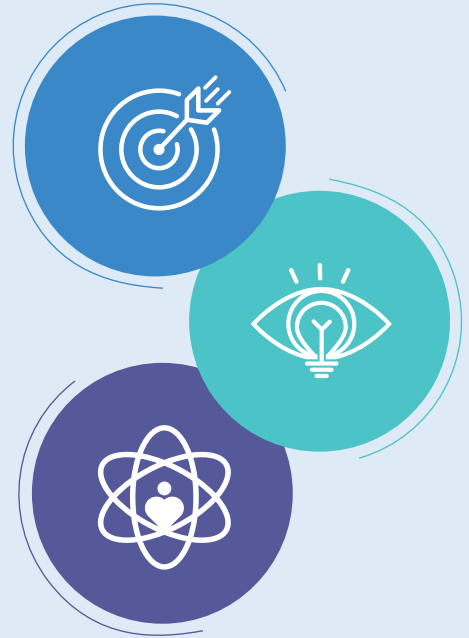
Collaboration: Working together for public protection

Accountability: Being responsible for our actions and decisions

Transparency: Communicating openly and clearly

Innovation: Seeking and embracing newer thinking

EDI-B: Recognizing and valuing all



Strategic Goals

Enhance Trust and Demonstrate Regulatory Value

We uphold high regulatory standards that ensure the College's impact on public safety.

Expand Access and Reduce Barriers to Practice

We support an accessible pathway for dietitians to enter and grow within the profession.

Promote Quality Care and Professionalism

We enable RDs in the delivery of high quality care through right-touch standards and resources.

Operational Enablers



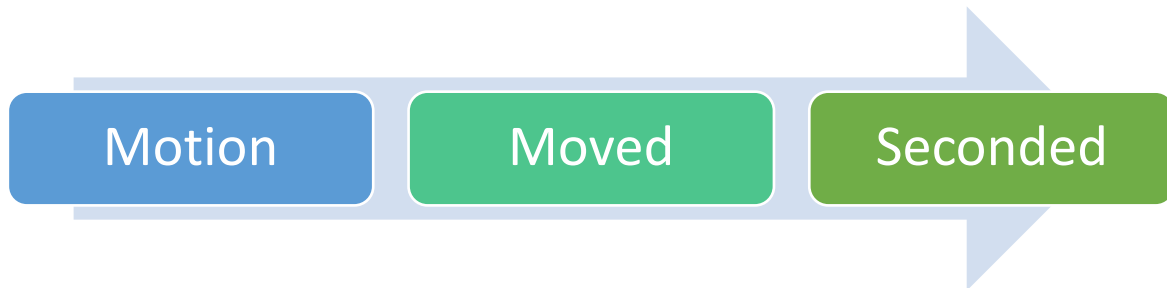
Optimize Technology



Extend External Collaboration

CDO Board Voting Practices

Board directors have a fiduciary duty to the College and are required to act honestly, in good faith and in CDO's best interests. Directors exercise reasonable diligence and accountability and ensure that the public interest is at the forefront of all decision making.



Quorum. The minimum number of individuals required to have a meeting. For Board meetings, it is the majority of directors (50% +1) and does not require a specific composition of professional and public members. Vacancies do not count when determining quorum.

Motion. To introduce a new idea or action which is voted on.

Voting Options



For. You are comfortable moving forward with the proposed motion.



Against. You do not agree that the proposed motion is the best course of action for CDO.



Abstain. Is not a vote for or against.

You do not have enough information to make a decision.

You have a conflict of interest or bias.



Consensus is preferred.



Majority is required.