

December 4, 2023 Council Meeting Materials

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Council Meeting Draft Agenda

Date: December 4, 2023

Time: 10:00 a.m.

Location: Zoom

Please join the meeting remotely from your computer, tablet, or smartphone.

Join Zoom Meeting

<https://us02web.zoom.us/j/85891335742?pwd=RDNTNnRoSExMcZQzVFM3TE8xTWlkdz09>

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AGENDA

Time	Discussion Item	Presenter/ Speaker	Document Included	Action
Please complete the online Conflict of Interest Disclosure/Declaration Form prior to the meeting.				
8:30am– 10:00am	Council in-camera session			
1 10:00 am	Call to order, roll call, welcome	B. Matthie	Yes	Information
2 10:02 am	Introductions	B. Matthie	No	Information
3 10:04 am	Conflict of interest declarations	B. Matthie	No	Decision
4 10:06 am	Approval of agenda	B. Matthie	Yes	Decision
5 10:08 am	Approval of minutes – September 26, 2023	B. Matthie	Yes	Decision
6 10:10 am	<p>Action items from the September 26 meeting:</p> <ol style="list-style-type: none"> 1. Pull data regarding resignations to see if they are a result of non-payment of fees - COMPLETED 2. Continue to monitor the increase, if any, of resignations after the fee increase - ONGOING 3. Risk Management Plan – provide a high-level update of matrix; changes to risk variables associated with risk mitigation strategies – ONGOING 4. Present the open rate and click rate data from the September – November e-newsletters at the December Council meeting - COMPLETED 5. CKO staff will review the proposed meeting dates for 2024-2028 to ensure that there are no conflicts with religious or statutory holidays - ONGOING 			



Time	Discussion Item	Presenter / Speaker	Document Included	Action
7 10:15 am	Committee Reports <ul style="list-style-type: none"> • Governance and Nominations • ICRC • Patient Relations • Quality Assurance • Registration • Steering Committee – Strategic Planning • Q1 Finance Report / Dashboard Report 	Committee Chairs	Yes	Information
	○ Signing authority	C. McCleave	Yes	Decision
	○ Investments	C. McCleave	No	Information
	○ CEBA loan repayment	C. McCleave	No	Information
10:25 am	Break – 10 MIN			
8 10:35 am	Draft Audited Financial Statements	Hilborn LLP / M. Olubobokun	Yes	Decision
9 10:55 am	Draft Annual Report	C. Li	Yes	Decision
10 11:15 am	Registrar's Report	N. Leris	No	Information
11 11:20 am	President's Report	B. Matthie	No	Information
12 11:25 am	Update on the emergency class <ul style="list-style-type: none"> • Approval of Policy re: Emergency Class Registration Regulation 	F. Teape	Yes	Decision



	Time	Discussion Item	Presenter/ Speaker	Document Included	Action
13	11:45 am	Approval of Service Provider – Exam Development & Exam Administration	F. Teape	Yes	Decision
14	11:55 am	Annual Membership Report presentation	F. Teape	No	Information
	12:15 pm	Lunch Break – 45 MIN			
15	1:00 pm	Policy: Funding for Sexual Abuse Therapy and Counselling	B. Fehst	Yes	Decision
16	1:10 pm	Revised Budget - 2023-2024 a. Communications & Media <ul style="list-style-type: none"> • Revamp of CKO Website b. Professional Services <ul style="list-style-type: none"> • Registrar’s Performance Evaluation tool and revisions of policies • Bookkeeping Services c. Abuse Therapy Reserve Fund	M. Olubobokun / N. Leris	Yes	Decision
17	1:30 pm	Request For Proposal – Strategic Planning Project – update	F. Teape	No	Information
18	1:40 pm	Terms of Reference <ul style="list-style-type: none"> • Executive Committee • Planning and Finance 	B. Fehst / N. Leris	Yes	Decision



	Time	Discussion Item	Presenter/ Speaker	Document Included	Action
19	1:45 pm	Communications Update <ul style="list-style-type: none"> • Social Media • E-newsletter • University presentations 	C. Li	No	Information
		<ul style="list-style-type: none"> • Five-year Council meeting dates 	C. Li	Yes	Decision
20	2:05 pm	Review of Action Items	B. Matthie	No	Review
	2:10 pm	ADJOURNMENT			

Next Meeting: Monday, March 25, 2024



September Council Meeting Minutes

Date/Time of Meeting:	Tuesday, September 26, 2023, 1:00 p.m.
Council present:	Jennifer Pereira, Teresa Bendo, Matt Daher, Susan Garfat, Sara Gottlieb, Alyssa King, Ben Matthie, Chad McCleave, Pheing Ngo, Victoria Nicholson, Jana Smith, Leanne Smith (had to leave meeting early to teach a class), Jotvinder Sodhi, Heather Westaway, Ryan Wight
Regrets:	Corby Anderson,
Staff members:	Nancy Leris, Brian Fehst, Arifa Gafur, Cecilia Li, Mora Olubobokun, Magdalena Reder, Fiona Teape
Guest presenters:	none
Guests/observers:	Tiffany Mak, Ministry of Health Jessica C, R. Kin

Let it be noted that Council held an in-camera session from 9:00 am – 12:00 pm.

1. Call to order, roll call, welcome

Jennifer Pereira, Chair and Council President, called the meeting to order at 1:00 p.m. and welcomed Council, staff members and guests.

The Chair shared a Land Acknowledgement.

As the notice of the meeting had been duly given in accordance with the by-laws of the College of Kinesiologists of Ontario and a quorum was present, the meeting was duly constituted for the transaction of business.

2. Introductions

The Chair welcomed Tiffany Mak from the Ministry of Health and Jessica who is a R. Kin.

The Chair also introduced the newest member of CKO, Mora Olubobokun, Director of Operations and Financial Services, and asked her to share some information about herself.

The Chair reminded meeting attendees that the College requires cameras to remain on during meetings to support and encourage engagement.



3. Conflict of Interest Declarations

The Chair asked the Registrar whether any Council members wished to declare a Conflict of Interest. The Registrar confirmed that there were no declarations.

The Chair also asked the Council if they knew of anyone who might have a Conflict of Interest. None were raised.

4. Approval of Agenda

UPON A MOTION duly made by Teresa Bendo and seconded by Susan Garfat, it was resolved that the agenda be approved. Carried.

5. Approval of Minutes from the June 2023 Council Meeting

UPON A MOTION duly made by Benjamin Matthie and seconded by Heather Westaway, it was resolved that the minutes be approved. Carried.

6. Action Items from the June 2023 Meeting

1. Track the increase of resignations, if any, after the fee increase is implemented - **completed**

Fiona Teape, Director of Registration, provided a high-level overview of registration numbers, including renewals after the fee increase was implemented and resignations.

- There was a 4% increase in renewals prior to the deadline year over year (2022 vs 2023)
- There has been fluctuation in the resignation number over the past five years
- CKO may not see the actual effect of the fee increase until the next renewal period for 2024-2025

Additional information will be provided at the December meeting, after the suspension deadline on Oct. 1, 2023.

2. Council Effectiveness Review Framework (CERF) – **completed**
3. Discuss next steps for the internal controls audit – **completed**

The Registrar noted that this will be discussed when reviewing the Q4 financial report during item # 7.



4. Add Heather Westaway to the Steering Committee: Strategic Planning – **ongoing**
The Registrar noted that Council will vote to approve this addition when approving the proposed 2023-2024 Committee Slate during item # 14.
5. Changes to the Committee Slate – **completed**
 - Remove Bradley Markis’ name from Planning & Finance, Examination Appeals, Quality Assurance and ICRC;
 - Highlight Victoria Nicholson’s name in green as Chair for the Governance and Nominations Committee; and
 - Planning and Finance – remove the red highlight from Benjamin Matthie’s name and indicate Chad McCleave as the Chair

7. Committee Reports

Reports were provided in the Council package, highlighting committee meetings, activities, changes and discussions that took place since the June Council meeting. Q4 financial report and dashboard were also included.

Chad McCleave, Chair of the Planning and Finance Committee, provided an update at the end of Q4. He noted CKO has a surplus at the end of the year due to projects not being completed caused by a shift in focus, based on Ministry announcements and change in staff.

The Planning and Finance Committee met on Sept. 18 to review the Q4 report and dashboard report.

8. Directors’ and Officers’ Liability Insurance

Chad McCleave, Chair of the Planning and Finance Committee, provided an overview of the liability insurance. It is the fiduciary responsibility of all Council members and includes a duty of care to CKO and a duty of obedience by the Directors and Officers. Council may be liable for its performance or non-performance of its fundamental responsibility. The Liability Insurance protects CKO against any unintentional wrongful acts that may lead to legal action against CKO.

9. Registrar’s Report

Nancy Leris, Registrar/CEO, presented the Registrar’s Report.

Updated five-year Council Meeting Schedule – In December 2022, Council voted and approved to change each September Council meeting to a two-day meeting. Council was presented with a revised five-year meeting schedule to reflect the two-day meetings that would take place every September, one day for training and the other for Council business.



CKO staff did their best to consider religious observations when developing the future dates for the September two-day meetings.

Council was asked to review the proposed five-year schedule and vote to accept the scheduled days. Council highlighted that there are meeting days which need to be reviewed by CKO and to bring back the schedule at the December meeting.

After the discussion, Council agreed to accept most of the dates for 2024 and that the rest of the meeting schedule will be revisited at the December 2023 Council meeting.

Resolution – Approve revised proposed five-year Council meeting schedule

UPON A MOTION duly made by Susan Garfat and seconded by Matthew Daher, it was resolved that Council approves a majority of the 2024 meeting dates and that Council will revisit and review the future years' meeting dates in December 2023. Carried.

Governance

- The Council Effectiveness Evaluation Framework review is complete, and the results were presented to Council.
- The Governance and Nomination Committee met on Sept. 12 to develop a proposed Committee slate for 2023-24. This will be presented to the Council for their approval after the Election of officers.

Strategic Planning Request for Proposal (RFP)

- The Request for Proposal (RFP) for the development of CKO's new strategic plan was approved by Council at the June meeting and was posted on MERX (a vendor bidding platform) for 60 days.
- Several amendments were made to the RFP based on questions received from vendors and proposals were received by Aug. 31. These proposals will be reviewed by the Steering Committee between October and November.

Office Space

The office lease expires in June 2024 and CKO continues to explore options for office relocation and will update the Planning and Finance Committee on our progress in December. CKO has received a quote for space sharing from another College and continues to explore other options. More updates will be provided to Council at the December meeting.

Annual Financial Audit & Annual Report

CKO's Annual Financial Audit will begin in mid-October, and we have also started working on the Annual Report. The draft Audited Financial statements and Annual Report will be presented to Council at the December meeting.



Registration

- As mentioned earlier, Annual renewal took place from July 1 to Aug. 31, 2023. The suspension process will begin on Oct. 1, 2023.
- The fall online Entry-to-Practice Exam was scheduled and completed on Sept. 20, 2023.
- Amendments to the *Kinesiology Act, 2007*, allowing for the Emergency Class officially came into effect on Aug. 31, 2023.
- Staff continue to develop policy and processes to support the administration of the Emergency Class certificate for Council's review at the December meeting.
- The first draft of the updated Kinesiologist Core Competencies Profile was completed by the Steering Committee. It is under review by the editor, and validation survey files are being prepared by the psychometrician for CKO's review. Following that, we will share with registrants for their feedback.

Quality Assurance

- The e-Learning Modules portal is open to members from Sept. 1 to Oct. 31, 2023. Members are required to complete the Professionalism and Ethics and the revised Prevention of Sexual Abuse e-Learning Modules by Oct. 31, 2023.

10. President's Report

Jennifer Pereira reflected on her time as President and noted it as one of the greatest accomplishments of her career. She noted that one Council member stated that "the president is highly skilled and handles situations with talent and grace." Jennifer encouraged the future President and Council members to develop and foster great relationships with each other and to lean on others as well as the Registrar and CKO staff for support.

11. Risk Management Training

Nancy Leris, Registrar and CEO, provided training on Risk Management.

- Risk Management process involves identifying, assessing and responding to risks CKO faces.
- CKO's Business Continuity and Disaster Recovery Plans are the framework used to prepare for emergency situations.
- The Risk Management Plan will be reviewed twice per year, which may include additional updates to the plan when required.
- The Business Continuity Plan provides a framework for operational stability in emergency situations. This framework will be reviewed and updated before, during and after the period of disruption.
- The plan ensures that staff, council, committees and registrants are informed of CKO's efforts to continue to fulfil its mandate.
- The goal is to limit disruption of services to an acceptable level.



- Similarly, the Disaster Recover Plan is a framework that will be reviewed and updated before, during, and after the period of disruption.
- The goal is to promote maximum recovery of process and functions that ceased or were suspended.
- CKO and the Planning and Finance Committee have reviewed and made revisions to the plans. The revisions are as follows:

Proposed changes – Risk Management Plan:

- Promotes integration of CKO’s Risk Management, Business Continuity and Disaster Recovery Plans;
- Ensures accurate identification of individual(s) responsible for specific items; and
- Maintains and enhances readability (including but not limited to minor edits for grammar/formatting).

Proposed changes – Business Continuity Plan:

- Includes a broader spectrum of emergency circumstances in the scope of the plan;
- Clarifies roles, responsibilities and implementation; and
- Maintains and enhances readability.

In addition to these amendments, CKO has also developed and will continue to review and update a series of portfolio-specific Business Continuity Plans, which will be maintained by CKO staff assigned to each portfolio.

Proposed changes – Disaster Recovery Plan

- Emphasizes the high-level focus of the Plan by removing the return-to-work plan that is specific to return to office during the COVID-19 pandemic; and
- Clarifies roles, responsibilities and implementation, including updating the duties and assignments of the members of the Emergency Preparedness Team, staff list, staff titles, number of staff assigned to various portfolios, the listing of service provider/vendor contacts and updating the process for payment approvals.

In addition to these amendments, CKO has also developed and will continue to review and update a series of portfolio-specific Business Continuity Plans, which will be maintained by CKO staff assigned to each portfolio.

Discussion

CKO noted that the COVID-19 pandemic highlighted the fact that there was nothing in place to enable remote working; therefore, a plan was created. As a result, CKO upgraded its IT infrastructure to allow remote working.

The Registrar stated that CKO looks at different risks, sets the priority and level for each, and then implements the strategies. She also mentioned that some strategies are costly and would require Council’s approval before implementation.



Council noted that the risk ratings should change after mitigating controls have been implemented, but there is no change in any of the areas. They also noted that there is no benchmark for each area of risk before and after the implementation of changes.

The Chair stated that inherent risks (the risk present in any scenario where no attempts at mitigation have been made, and no controls or other measures have been applied to reduce the risk from initial level to levels more acceptable to the organization. This includes risks presented by different means – e.g., legislation, outside organizations, etc.) never change unless there is an external change (such as changes to the legislation) and that CKO can only focus on residual risks (the risk remaining after efforts have been made to reduce the inherent risk after mitigating/controls steps have been put into place). She also highlighted the point that the College should try to work on higher inherent risk items rather than focus on the entire document.

When changes are made, they will be reviewed by the Planning and Finance Committee for initial approval and discussion and then presented to Council for final approval. CKO keeps all previous versions of each plan for comparison to older documents and when strategies or changes are implemented.

On a final note, Council would like to have high-level document for each plan, removing the highly sensitive and confidential information. However, CKO should have detailed plans for internal purposes.

Resolution – Approve proposed Risk Management, Business Continuity, and Disaster Recovery Plans as presented

UPON A MOTION duly made by Teresa Bendo and seconded by Victoria Nicholson, it was resolved that Council approves the proposed Risk Management, Business Continuity, and Disaster Recovery Plans as presented. Carried.

12. Workplace Violence and Safety Training

Brian Fehst, Manager, Professional Practice, provided Council with training pertaining to workplace violence and safety.

The relevant legislation is the *Occupational Health and Safety Act*. Every worker has the right to work in an environment free from violence and harassment. Among the responsibilities of an employer is promoting a culture and environment of safety by providing training.

To prevent violence and harassment in the workplace, the employer should:

- Prepare policies with respect to workplace violence and workplace harassment;
- Include measures and procedures for workers to report incidents of workplace violence / harassment;
- Set out how the employer will investigate and deal with incidents or complaints.



CKO has its policy posted in an area visible and accessible to all staff and visitors. When staff encounter workplace violence, they should speak with the Registrar, and Council members should contact the President.

13. Communications Update

Cecilia Li, Senior Communications Officer provided her update.

Elections

Elections were held in Districts 2, 3 and 6. There was only one nominee in District 2 and therefore Pheing Ngo was acclaimed; Alyssa King was elected from District 6, and Susan Garfat was re-elected from District 3.

10th Anniversary

The 10th Anniversary webpage was launched on Aug. 15 and contains a timeline of the CKO's key milestones. The page was visited 262 times during a 35-day period. The page will also contain interviews with two past Presidents and current President.

E-newsletter

CKO's e-newsletter was re-launched in August and it reached 3,047 recipients. The letter had an open rate (the number of people who opened the email) of 76% and a click rate (the number of people who opened the email and clicked on any of the links included) of 18%. These statistics of the September and following issues of the newsletter will continue to be monitored and presented at the December meeting.

Social Media

CKO resumed posting on Facebook, X (formerly Twitter) and LinkedIn in August, and on Instagram in September. LinkedIn had the greatest number of impressions (the number of times the page's posts were displayed on LinkedIn members' screens) within a 30-day period. While the Instagram post was only live for 13 days when the data was collected, it received highest impressions – 221 impressions. CKO re-engaged its use of YouTube and posted a video pertaining to the fall exam webinar, which received 219 views in 12 days.

Discussion

One Council member inquired why YouTube was not being utilized more and noted that the CKO could shift to YouTube Shorts which shows shorter clips, which people are more inclined to view. CKO stated that YouTube was not used as much due to it being a subscription-based service and was not accounted for in the budget. However, this will be included in the strategic planning project.

University Presentations

CKO completed one virtual presentation to U of T's MPK (Master of Professional Kinesiology) Program in August, focused on how to register and become an R. Kin. and the role of CKO for registrants and the public. There are ten more presentations scheduled with various universities, and one scheduled with University Health Network (UHN). CKO has reached out



to other institutions and organizations and will follow up again regarding scheduling presentations.

Discussion

CKO was contacted by UHN to provide a practice-based presentation that's not focused on how to become registered as the attendees would all be R. Kins.

CKO also noted that there may be the possibility of recording the presentations for future use, but this option needs to be explored further.

Annual Report

The College has begun the work for the 2023/24 Annual Report and has the following timeline in place:

- September – November: content collection and production
- Dec. 4: present report and approved financial statements to Council for approval
- Mid-December: document ready to be published and shared

14. Election of Officers/Executive Committee/Approval of Committee Membership

Election of Officers and Executive Committee

Resolution – Approve Registrar to supervise elections of officers

*UPON A MOTION duly made by Susan Garfat and seconded by Benjamin Matthie, it was resolved that that the Registrar be appointed as the Elections Officer and assume the chair for this portion of the meeting for this purpose. **Carried.***

Resolution – Approve the Registrar appointing Brian Fehst and Arifa Gafur as Scrutineers for the election of officers.

*UPON A MOTION duly made by Susan Garfat and seconded by Chad McCleave, it was resolved that Council approves appointing Brian Fehst and Arifa Gafur as Scrutineers for the election of officers. **Carried.***

The Registrar presided over the election of the College's Executive Committee.

Therefore, be it resolved that:

- Benjamin Matthie is elected as President
- Victoria Nicholson is acclaimed as Vice President
- The additional members that were acclaimed to the Executive Committee include Teresa Bendo, Heather Westaway and Ryan Wight

*UPON A MOTION duly made motion by Matthew Daher and seconded by Pheing Ngo, it was resolved that Benjamin Matthie be appointed President; Victoria Nicholson be appointed Vice-President; and Teresa Bendo, Heather Westaway, and Ryan Wight be appointed as members of the Executive Committee. **Carried.***



Approval of Committee Slate

Brian Fehst, Manager of Professional Practice, noted that the Governance and Nominations Committee met to consider committee composition for 2023/2024.

A proposed slate for each of the Committees and proposed chairs, has been provided to Council. The Governance and Nominations Committee considered the preferences of Council members, applications received from the general membership and the workloads of each committee to form the proposed slate.

Discussion

ICRC

- Sara Gottlieb noted that she would like to be removed as Chair. Ryan Wight expressed interest in becoming chair and was approved as Chair.

Planning and Finance

- It was noted that the Chair cannot be a signatory. Chad McCleave, proposed Chair, stated that if he cannot attend a meeting, then he will coordinate with Susan Garfat, to have her chair in his absence.
- It was also brought to the attention of Council that it appeared that most of the Committee Chairs appointed were public members and a pattern seems to emerge. CKO staff clarified that term limits and succession planning were considered when appointing the Chairs.

Therefore, be it resolved that the proposed committee slate be accepted, with one amendment:

*UPON A MOTION duly made motion by Pheing Ngo and seconded by Teresa Bendo, it was resolved that the Council of the College of Kinesiologists of Ontario appoints the committee members and chairs with an amendment to the attached slate developed and recommended by the Governance and Nominations Committee. **Carried.***

15. Review of Action Items

- Pull data regarding resignations to see if they are a result of non-payment of fees
- Continue to monitor the increase, if any, of resignations after the fee increase
- Risk Management Plan – provide a high-level update of matrix; looking to see if risk levels have reduced based on the implementation of / changes to strategies
- The open rate and click rate data from the September – November e-newsletters will be presented at the December Council meeting

Termination

*UPON A MOTION duly made by Matthew Daher, the Council meeting of September 2023 was terminated at 4:14 pm. **Carried.***



Committee Report

Committee: Governance and Nominations Committee
Prepared for: Council
Date: December 4, 2023

Meetings

The Governance and Nominations Committee (“the Committee”) has met once since the last regular Council meeting on September 25-26, 2023.

Completed Council Effectiveness Review Framework (“CERF”)

The Committee met on November 8, 2023 to review the results of the 2023 CERF. The CERF was administered by a third-party consultant engaged by the College. The Committee reviewed and considered the following recommendations:

- Council engagement: Enhanced Council insight into Committee decisions
- Opportunities for Council engagement
- Council learning & development
- Recommendations on steps towards development of:
 - New Registrar's Performance Evaluation Tool
 - Process for Registrar's compensation review
 - Review and update of Registrar's policies

The Committee's consideration of the above recommendations included a consensus that greater Council insight into committee decisions should be focused on governance decisions and discussions rather than adjudicative processes. The Committee also reached a consensus that external/third-party support should be sought for a comprehensive review of the College's policies and procedures pertaining to the Registrar & CEO's Performance Evaluation and Compensation. It was also agreed that a third-party consultant should be assigned to support the Performance Evaluation itself. The College was asked to develop a business case for the recruitment of a third-party consultant to develop a framework for and conduct the Registrar & CEO's Performance Evaluation.

Review of the CERF tool

The Committee was provided with an overview of the consultant's recommendations for possible changes/amendments to the CERF. The Committee determine that the preferred approach would be the recruitment of a third-party consultant to conduct a more comprehensive review of the CERF. Therefore, the Committee asked that the College make revisions to the CERF as recommended by

the consultant who conducted the third-party evaluation of Council. These revisions will be reviewed by the Committee and a determination as to whether additional or more extensive revisions may be required, and to develop a business case for more extensive work if required.

**Committee Report**

Committee: Investigations and Reports
Prepared for: Council
Date: December 4, 2023

The ICRC conducted an orientation and training session for new committee members on November 7, 2023.

An ICRC Panel met on November 7, 2023 to review six (6) cases – three (3) complaints and three (3) reports, which included a joint investigation with the College of Massage Therapists of Ontario (CMTO).

Currently, there are eleven (11) open cases – eight (8) complaints and three (3) reports, which includes a joint investigation with the College of Massage Therapists of Ontario (CMTO).



Committee Report

Committee: Patient Relations Committee
Prepared for: Council
Date: December 4, 2023

Meetings

The Patient Relations Committee (PRC) has met once since the last Council meeting on September 25-26, 2023. A Committee Orientation meeting took place on November 7, 2023.

Policy Review: Funding for Therapy and Counselling for Sexual Abuse

On November 7, 2023, the PRC considered proposed revisions to the Policy: Funding for Therapy and Counselling for Sexual Abuse (“the Policy”). The Policy was reviewed following questions during previous PRC meetings regarding the timing and process by which funding recipients would or may be notified of pending cessation of eligibility. One proposed amendment is that the College may notify funding recipients regarding the status of their funding in a form and manner specified by the College. Additional amendments have been proposed such that recipients would be notified of pending cessation of eligibility on the earlier of the date on which the remaining funding is 20% of the total funding that was available to the recipient or twelve months before the date on which the funding time limit would expire. These amendments were referred to Council for consideration and approval.

Committee Report

Committee: Quality Assurance Committee
Prepared for: Council
Date: December 4, 2023

Meetings

The Quality Assurance Committee (QAC) has met once since the Council meeting on September 25-26, 2023. This meeting, which included a Committee orientation, took place on November 14, 2023. Also during this meeting, decisions were rendered with respect to 8 Peer and Practice Assessments (PPA).

Peer and Practice Assessment

30 registrants were selected to participate in the PPA fall/winter 2022 cycle. Of these:

- One exemption was granted for pending retirement;
- Eight deferrals were granted:
 - One has no patients at this time,
 - Three reported not practising as a kinesiologist,
 - One due to extenuating professional circumstances,
 - One transitioned to the Inactive Class certificate of registration, not practising due to family and health issues, and
 - One does not practice kinesiology in Ontario;
- One deferral was granted outside the typical deferral timeline due to an unanticipated family emergency;
- All PPAs of the 21 remaining registrants have been scheduled and completed; with four taking place outside the standard PPA cycle period (90 days) due to extenuating circumstances. To date, the following decisions have been made regarding PPAs:
 - No Further Action with respect to 18 PPA cases (includes No Further Action with recommendations or requests);
 - Notices of Intent to Direct Competency Enhancement in the form of Demonstrated Change Reports have been issued with respect to 2 PPA cases, with 1 final decision pending; and
 - One registrant has been directed to complete competency enhancement in the form of a Demonstrated Change Report.

32 registrants were selected to participate in the PPA spring/summer 2023 cycle. Of these:

- Four exemptions were granted due to resignation from CKO;

- Ten deferrals have been granted due to the following reasons:
 - one was granted due to the member being on maternity leave,
 - one was granted due to a family emergency,
 - three were granted as the members are not currently practising in Ontario,
 - one was granted due to not having any patients/clients, and
 - four were granted a deferral due to transition to the Inactive Class Certificate of Registration;
- Of the 18 remaining registrants, 12 PPAs have been scheduled and completed, with QAC decisions pending in all cases.
 - Of the 6 remaining registrants, 4 have subsequently transitioned to the Inactive Class, resigned from the College or had their Certificates of Registration suspended or revoked. 2 will be presented to the QA committee for potential referral for non-compliance.



Committee Report

Committee: Registration
Prepared for: Council
Date: December 4, 2023

Registration Committee meetings

Since the last report to Council, Registration Committee Panels met on September 14, October 13, and November 21, 2023 to review the following referrals from the Registrar:

- Education Equivalency Assessments (10)
- Reinstatement to the General class after being inactive for more than two years (5)
- Exemption from one year period of eligibility for registration, following notification of passing the exam (5)
- Course review (3)

A training and orientation meeting was also held on November 3, 2023, for new and existing members of the Registration Committee and registration staff. An additional panel meeting will be held the week of December 18, 2023.

2023 Fall Examination

The CKO 2023 Entry-to-Practice examination was held on September 20, 2023. A total of 283 candidates registered for the exam, and 250 candidates wrote the exam. This includes 4 candidates who requested testing accommodations. All candidates wrote the exam in English. 24 candidates withdrew from the exam or postponed writing the exam before the deferral deadline. An additional 9 applicants postponed or withdrew from the exam after the deadline.

The final Fall 2023 exam results are as follows:

September 2023 - Number of Examination Candidates	
Registered	283
Wrote	250
Passed	156
Failed	94
% Passed	62%

In 2023, a total of 445 candidates wrote the exam.

Number of Candidates	Spring	Fall	Total
2013	100	141	241
2014	141	252	393
2015	174	271	445
2016	207	265	472
2017	226	281	507
2018	211	240	451
2019	191	286	477
2020	Deferred to Fall	375	375
2021	Deferred to Fall	411	411
2022	244	218	462
2023	195	250	445

Examination Appeals

To date, one applicant has requested an appeal to the Examination Appeals Committee following the September 2023. A meeting will be set for December 2024, following the deadline for submissions at the end of November.

Membership renewal

Renewal notices were sent to all eligible registrants on July 1, 2023. Registrants had until August 31, 2023, to complete their renewal. A notice of intention to suspend was sent to registrants on September 1, 2023. Registrants had until October 1, 2023, to renew their certificate to avoid it being placed under administrative suspension.

Below is a breakdown of registrants who were eligible for renewal and their renewal outcome:

Renewal Eligibility and Outcome	
Renewed in the general class - On or before August 31, 2023	2,238
Renewed in the inactive class - On or before August 31, 2023	320
Renewed in the general class - On or after September 1, 2023	180
Renewed in the inactive class - On or after September 1, 2023	73
Suspended for non-payment of fees	117
Deceased	1
Resigned	148

Membership update

During the period September 1, 2023, to November 15, 2023, the College registered 33 new registrants. This number is lower than the previous year's 81.

As of November 15, 2023, the total membership stands at 2,839 registrants, with 2,421 in the General Class and 422 in the Inactive Class. The total number of registrants includes newly registered and reinstated registrants.

With the registration fee increases taking effect September 1, 2023, we continue to carefully monitor new registrants and resignations.

Years	General Class	Inactive Class
2014	1280	29
2015	1419	123
2016	1731	215
2017	2149	305
2018	2158	287
2019	2310	395
2020	2292	424
2021	2328	384
2022*	2438	405
2023**	2417	422

*Registration numbers as of November 18, 2022

**Registration numbers as of November 15, 2023



Committee Report

Committee: Steering Committee – Strategic Planning Process
Prepared for: Council
Date: December 4, 2023

Meetings

The Steering Committee for the Strategic Planning Process (“the Committee”) has met once in the quarter.

Review of Vendor Proposals

The Committee met on November 15, 2023 to review the proposals received in response to the RFP issued by the College. A total of 18 proposals were received and reviewed, with the top five scoring proposals identified for the Committee’s consideration.

The Committee selected the highest-scoring 3 proposals to make presentations to and be interviewed by the Steering Committee on a date to be determined.

The Committee also discussed the format of the presentations/interviews, including discussions regarding the questions that may be asked of all vendors. Committee members agreed to develop questions independently. Proposed questions would be collected by the Registrar, who will circulate all questions to the Committee members for final approval.



REVENUES

COLLEGE OF KINESIOLOGISTS OF ONTARIO - REVENUE REPORT FOR QTR 1 FOR THE FISCAL YEAR 2023/2024					updated Nov 23
	1	2	3	4	5
CATEGORY	APPROVED REVENUE FORECAST (Sept 1 2023 to Aug 31, 2024)	PROJECTIONS QTR 1 SEPT 1 - NOV 30, 2023	REVENUES RECEIVED QTR 1 SEPT 1 - Oct 30, 2023 (INTERIM)	PROJECTED REVENUES QTR 2 Dec 2023. - Feb 2024	VARIANCE QTR 1
	\$	\$	\$		\$
Revenue:					
Earned Registration Revenue*		272,117	272,117	408,175	0
Jurisprudence Fee (\$72.35)	42,325	4,004	3,791	11,000	-214
Application Fee (\$150)	90,000	7,000	3,550	20,100	-3,450
Examination Fee (\$450)	218,250	1,600	100	77,400	-1,500
Registration Fees*	2,030,700	226,000	189,539	51,876	-36,461
Interest Income	25,000	6,250	13,639	6,250	7,389
TOTAL REVENUE	2,406,275	244,854	482,735	574,801	-34,236
*Registration Fees made-up of:	Approved Forecast	Projections Q1 (Sept-Nov)	Interim Actual (Sept- Nov)	Projections Q2 (Dec-Feb)	Variance Q1
	\$	\$	\$		\$
New Registrants					
- Sept - Nov (\$700)	70,000	70,000	19,600		-50,400
- Dec - Feb (\$525)	34,125			44,363	0
- Mar - May (\$350)	12,250				0
- Jun - Aug (\$175)	8,750				0
Renewal (\$700)	1,782,900	119,000	127,017	6,300	8,017
Change in Status (members back to active)	6,375	2,250	4,900	3,163	2,650
Professional Corporation	250	250	0		-250
Professional Corporation Late fee	800	400	800	0	400
Inactive Renewal (\$250)	76,500	20,500	20,200	750	-300
Inactive Renewal Late Fee(\$100)	8,000	4,400	7,300	400	2,900
Renewal Late Fee (\$150)	25,500	25,500	25,500	0	0
Re-instatement Fee (\$350)	5,250	700	1,050	1,400	350
Refunds		-17,000	-16,828	-4,500	172
Total	2,030,700	226,000	189,539	51,876	-36,461

Please note that the revenue and expenditure report is for the period Sept to Oct only. The end of Q1 is in Nov.

Notes

Details:

We are not expecting to meet projections under some categories by end of Q1.

Registration:

New Registration Sept to Nov variance: shortfall in Q1 due to exam results being released at the end of Oct. New registration applications to increase in Q2.
Interest income - The College has investments which generate interest, there are matured GIC's set to be redeemed at specific dates and others that are cashable within 30 days if necessary

EXPENDITURES

COLLEGE OF KINESIOLOGISTS OF ONTARIO - EXPENDITURE FORECAST FOR QTR 1 (SEPT-OCT. 31 2023 Interim) FOR THE FISCAL YEAR 2023/2024 updated Nov 23					
	1	2	3	4	5
CATEGORY	APPROVED BUDGET Sept 1 2023 to Aug. 31, 2024	PROJECTIONS QTR 1 SEPT - NOV 30, 2023	ACTUAL EXPENSES QTR 1 SEPT - Oct 30, 2023 (INTERIM)	PROJECTED EXPENSES QTR 2 Dec 2023. - Feb 2024	VARIANCE QTR 1
	\$	\$	\$	\$	\$
Expenditure:					
Council & Committees	65,575	16,000	12,579	26,100	3,421
Professional Fees	119,000	20,000	22,432	86,000	-2,432
Communications & Media	153,000	11,938	11,938	29,438	0
Rent & Facility Costs	244,200	31,507	31,507	57,750	0
Office & General	130,450	46,483	46,483	26,501	0
Salaries & Wages	1,257,500	245,000	168,547	249,100	76,453
Registration	292,687	47,553	47,553	75,173	0
Quality Assurance	98,395	1,800	900	20,445	900
Professional Conduct	84,500	18,000	20,388	35,000	-2,388
TOTAL EXPENDITURE	2,445,307	438,281	362,326	605,507	75,955

Major Highlights:Council and Committee

Payment of expenses for Council, Executive, Finance and Planning, Registration, Steering Committee: Strategic planning, Quality Assurance, Governance & Nominations, ICRC, Patient relations Committees in Q1. Expenses from prior year paid in Q1

Projections for Q2 - expenses for Special Council, Council, Executive, Finance and Planning, Registration, Quality Assurance Committees, ICRC

Professional Fees

Q1 Expenses for general & human resource, general legal fees, council evaluation and consultantancy. General legal fees from prior year paid in this fiscal year.

Projections for Q2 -Audit and general legal fees, council evaluation review tool, Registrar evaluation consultancy fees, Bookkeeping fees

Communications & Media

Payment for IT Support, in Q1. Projections for Q2 - annual report design and IT support

Projections for Q2 - IT Support and migration to Sharepoint project

Office & General

Payment for bank charges, equipment rental, office supplies, telephone in Q1.

Projections for Q2 - bank charges, equipment rental, office supplies, telephone, membership fees

Salaries & Wages

Payment for salary/benefits in Q1. Projections by end of Q1 for November pay periods.

Registration

Payment for database maintenance, examination, certificates and hosting cost in Q1.

Projections for Q2 - database maintenance, examination, certificates, hosting online exam costs, review of competency profile costs

Quality Assurance

Payment for Peer and Practice Assessments (PPA) in Q1.

Projections for Q2 - PPAs and Annual licensing fees and Peer circles

Professional Conduct

Expenditures for investigation and legal advice in Q1.

Projections for Q2 -There is are several ongoing investigations and a potential discipline case



2023/2024 Performance Report

Overall highlights:



(33 new registrants between Sept 1 and Nov 14, 2023)

Operational highlights (Q1: Sep 1 – Nov 30)

Fall 2023 Exam: 283 registered for Sept Exam.

Focus	Deliverables	Status	Comments and Impacts
Governance	Terms of Reference	Green	All proposed amendments to by-laws were approved by Council on June 26, 2023. Proposed amendments to the Terms of Reference of the Planning and Finance Committee presented to the Planning and Finance Committee on November 20, 2023. A draft Terms of Reference of the Executive Committee will be reviewed by Council on December 4, 2023.
	Council Effectiveness Evaluation Framework review	Green	Consultant engaged, and evaluation begun. Results presented to Council on September 26, 2023 and to the Governance and Nominations Committee on November 8, 2023. Recommendation to Council on Dec 4 th Council meeting.
	Review of 5-year schedule calendar for council meeting dates	Green	Revision of 5-year schedule of council meeting dates for council meeting in December.
	Recruitment of Staff	Green	Onboarding of Director of Operations and Financial Services.
Corporate	Strategic Planning RFP	Yellow	18 Proposals received and reviewed. The Steering Committee met on November 15, 2023 to discuss the RFP for Strategic Planning Shortlist of 5 proposals reviewed by the Committee, 3 proposals selected for next steps. Interviews and Presentations to follow in January 2024 and final selection of service provider for the facilitator of the strategic planning exercise.
	Office Space **	Red	Office lease expires June 2024, the office space is currently on sublease market and CKO has received some interests and showings. CKO continues to explore options for office relocation and will update the Planning and Finance Committee and Council on its progress.
	Annual Financial Audit 2022/2023	Green	College's Annual Financial Audit for 2022/2023 completed and reviewed by the Planning and Finance Committee. Recommendation to Council to approve the Draft audited financial statements at Dec. 4 Council meeting.
	Investment Options	Green	Planning and Finance committee reviewed investment options due to the maturity of the GIC. Reinvestment options provided to Committee and decision to reinvest in laddered GICs.
Communications	Annual Report	Yellow	Engagement of external vendor to finalize the Annual Report design layout in October and proceeded with Annual Report production in November. The draft Annual report to be reviewed and approved at the December 4 th Council meeting for uploading to CKO's website and circulation to the Ministry and other stakeholders.
	University Presentations	Yellow	As part of CKO's outreach, presentations to 7 universities/institutions including University Health Network (UHN).
	Communications in support of CKO programs and activities	Yellow	Other communication tasks that completed in Q1: <ul style="list-style-type: none"> Published three issues of the e-newsletter (@ CKO) and a series of social media posted to engage online audiences;

Focus	Deliverables	Status	Comments and Impacts
			<ul style="list-style-type: none"> Web update on Council meetings, new Council President/Vice-President, 2024 Committee Slate, Internationally educated applicants, CPD Directory and Spring 2024 Exam Initiated a potential website revamp project <ul style="list-style-type: none"> Engaged external vendors to review CKO current website; To draft RFP and share with vendors in the new year Developed a Business Case to Planning and Finance committee for reallocation of funds for this project. Recommendation to Council for approval in a revised budget at the December Council meeting
Registration	Annual Renewal		Annual renewal launched on July 1, 2023. Between July 1 and September 30: 2811 registrants renewed; 117 registrants were suspended for non-payment of the annual fee; 148 registrants resigned. For September, 253 renewed late.
	Emergency Class Registration Policies and Procedures		(1) Emergency Class Policy and (2) amendment to fee bylaws presented to Registration Committee in November 2023. The former was approved to move forward for consideration by Council. The latter was referred back to staff for further development.
	Database Management System		Completing final stages of user-testing for emergency class implementation to database system. Following completion of update, system will shift to update of online forms and automation of registration processes.
	Kinesiologist Core Competency Profile Review		Draft Competencies validation survey released for consultation to registrants on October 26, 2023 with a deadline of November 30, 2023. Results will be reviewed and tabulated by psychometrician and a final draft of Competencies presented to Steering Committee for final review in early 2024.
	Development of Entry to Practice Exam		Statement of work developed with exam administrator for the development of new exam items and exam forms, and the administration of future exam sessions over the next 3 years. Business case to Planning & Finance Committee for approval. Recommendation to Council for approval.
	Registration Committee		2 panel meetings held to review and render decisions on referrals from the Registrar. 1 Registration Committee meeting held for orientation and business items.
Quality Assurance	Peer and Practice Assessments		Fall 2023 selections have been made and assessments are ongoing as of December 4, 2023. 13 PPAs have been scheduled as of November 21, 2023. 6 selected members were subsequently suspended for non-payment of fees. 2 deferrals were granted.
	eLearning modules		e-Learning module portal was open to members Sept. 1 – Oct. 31, 2023. Members completed Professionalism and Ethics and Prevention of Sexual Abuse eLearning modules.
Professional Conduct	ICRC		ICRC orientation and training for new committee members conducted on November 7, 2023. An ICRC Panel met on November 7, 2023, to review six (6) cases – three (3) complaints and three (3) reports, which included a joint investigation with the College of Massage Therapists of Ontario (CMTO). Currently, there are eleven (11) active cases – eight (8) complaints and three (3) reports – which includes a joint investigation with the College of Massage Therapists of Ontario (CMTO).
	Upcoming meetings		Upcoming ICRC panel meeting on Dec. 13, 2023, and also a potential training session (on the same day) for new committee members.
Patient Relations	eLearning module: Prevention of Sexual Abuse		e-Learning module revision has been completed and launched in September 2023.
	Policy: Funding for Therapy and Counselling for Sexual Abuse		Amendments to the Policy: Funding for Therapy and Counselling for Sexual Abuse were presented to the Patient Relations Committee on November 7, 2023. The amended Policy was referred to Council for consideration and approval.

** - In red as it is a priority for the College

Legend:

Completed



Ongoing



Incomplete





Issue / Decision Note

Issue or Decision: Appointment of Signing Officers of the College
Prepared for: Council
Date: December 4, 2023

Issue:

The appointment Signing Officers of the College of Kinesiologists of Ontario (“the College”).

Background

As set out in subsection 94(1)(c) of the *Health Professions Procedural Code*, the Council may make by-laws relating to the administrative and internal affairs of the College, including by-laws respecting banking and finance. The College’s By-law 3. Execution of Contracts and Other Documents identifies (in By-laws 3.01 – General Signing Authority and 3.02 – Other Signing Authority) the individuals who have or may be granted General or Other signing authority. By-law 3.01 assigns General Signing Authority to “the President, Vice-President or other such person as Council may designate”. In addition, By-law 3.02 states that: “Council may appoint from time to time, any one or more officers or other persons to sign contracts, documents and instruments in writing on behalf of the College, whether generally or in relation to specific contracts, documents or instruments.” Individuals with signing authority may sign documents requiring execution by the College, which may include contracts, documents or other instruments. As stated in the by-laws, all documents so signed are binding upon the College without further authorization or formality.

The College’s By-law 4.02 (2) – Expenditure Approval states that “[t]he President, Vice-President and the Registrar may approve purchases or leasing of goods and acquisition of services in accordance with the College’s financial policy on procurement.” By-law 4.02(3) – Cheque Signing Authority clarifies the number and identity of signing authorities who are required to sign cheques of various amounts and for various purposes:

- i. All cheques under \$5000 to be signed by one of the signing authorities;
- ii. All cheques with a value of \$5001 and more must be signed by two signing authorities;
- iii. Cheques issued to the Registrar are to be signed by two signing authorities who are not the Registrar; and
- iv. Cheques for reimbursement of the Registrar’s expenses shall be signed by the President and Vice-President or other such person as Council may designate.

In circumstances where the identity of one or more individuals with Signing Authority may change (such as the election of a new President or Vice-President), The new office holders become General Signing Authorities as set out in the by-laws.

Issue for Consideration

Appointment of the College’s Signing Authorities.

Analysis

The following individuals are the Signing Authorities:

- Victoria Nicholson, Vice-President
- Jennifer Pereira

As Signing Authorities, the President and Vice-President may sign documents requiring execution by the College as set out in By-law 3.01. The President and Vice-President may also approve expenditures and sign cheques as set out in By-laws 4.02(2) and 4.02(3).

The need for an additional individual or individuals to be appointed as Signing Authority(ies) may arise in the following circumstances:

- Real, perceived or potential conflicts of interest or other matters that may preclude one or more of the current Signing Authorities from signing a given contract, document, instrument or cheque;
- Geographical considerations (specifically: whether the College is able to ensure that contracts, documents, instruments and cheques may be signed efficiently and within any required timelines); and
- Unanticipated or expected issues (for example: medical or personal issues) that may affect the ability of one or more of the Signing Authorities from fulfilling their role.

To facilitate the process of signing documents and other instruments in circumstances where the President and Vice-President may not be available, it is proposed that Jennifer Pereira remain as a designated Signing Authority, as permitted in the by-laws (specifically By-law 3.02).

Public Interest Rationale

The appointment of the College's Signing Authorities will serve the Public Interest by:

- Ensuring that the College's system of internal controls is maintained;
- Ensuring that the contracts, documents and other instruments are signed by the College in a manner that is open and transparent; and
- Ensuring that the College conducts its business in accordance with its by-laws, policies and procedures.

Failure to abide by the College's by-laws regarding signing authority could:

- Bring discredit to the College and undermine public confidence in the College's ability to govern the profession in the public interest;
- Result in a governance complaint against the College; and
- Create liability for either the College and/or the person involved.

Decisions for Council:

- Council is asked to appoint the President, Benjamin Matthie, as a Signing Authority.

Resolution for Appointment of Signing Authorities

Whereas the President and Vice-President of the College of Kinesiologists of Ontario (“the College”) are designated in the By-laws as signing authorities in addition to the Registrar empowered to sign documents requiring execution as well as cheques and providing approval of direct deposit payments; and

Whereas the financial checks and balances put in place by the College require two signatures on documents requiring execution by the College; and

Whereas the financial checks and balances put in place by the College require one or more Signing Authorities to approve cheques and expenditures (including the release of online payments); and

Whereas the President of the College is the designated signing authority as per the College By-laws;

Therefore, be it resolved that Council appoints the Benjamin Matthie as a Signing Authority for the College bank account.

Moved by:

Seconded by:

Date: December 4, 2023

COLLEGE OF KINESIOLOGISTS OF ONTARIO

FINANCIAL STATEMENTS

AUGUST 31, 2023

Draft Statement Subject to Revision

Independent Auditor's Report

To the Council of the College of Kinesiologists of Ontario

Opinion

We have audited the financial statements of the College of Kinesiologists of Ontario (the "College"), which comprise the statement of financial position as at August 31, 2023, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at August 31, 2023, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Information

Management is responsible for the other information. The other information comprises the information, other than the financial statements and our auditor's report thereon, in the annual report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

We obtained the annual report prior to the date of our auditor's report. If, based on the work we have performed on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact in our auditor's report. We have nothing to report in this regard.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

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

In preparing the financial statements, management is responsible for assessing the ability of the College to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the financial reporting process of the College.

Independent Auditor's Report (continued)

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal control of the College.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the ability of the College to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

Toronto, Ontario
TBD

Chartered Professional Accountants
Licensed Public Accountants

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Statement of Financial Position

August 31	2023 \$	2022 \$
ASSETS		
Current assets		
Cash and cash equivalents (note 3)	2,742,581	2,595,931
Prepaid expenses	83,412	31,891
Investments (note 4)	234,464	107,658
	3,060,457	2,735,480
Prepaid expenses	-	56,253
Investments (note 4)	307,120	307,120
Capital assets (note 5)	50,557	82,065
	357,677	445,438
	3,418,134	3,180,918
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities (note 6)	247,404	203,118
Deferred revenue	1,632,700	1,542,800
Loan payable (note 7)	40,000	-
	1,920,104	1,745,918
Loan payable (note 7)	-	40,000
Deferred lease incentives (note 8)	16,616	36,555
	16,616	76,555
	1,936,720	1,822,473
NET ASSETS		
Invested in capital assets	50,557	82,065
Internally restricted net assets (note 10)	290,000	290,000
Unrestricted	1,140,857	986,380
	1,481,414	1,358,445
	3,418,134	3,180,918

The accompanying notes are an integral part of these financial statements

Approved on behalf of the Council:

Director

Director

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Statement of Operations

Year ended August 31	2023 \$	2022 \$
Revenue		
Registration fees	1,788,378	1,725,930
Examination fees	165,870	265,340
Application fees	52,600	54,400
Jurisprudence fees	27,645	25,074
Interest income	89,864	18,419
	2,124,357	2,089,163
Expenses		
Salaries and benefits (note 9)	1,016,804	932,050
Rent (note 8)	227,986	192,586
Registration	168,087	88,983
Professional conduct	97,153	39,307
Professional fees	88,048	118,619
Office and general	75,485	47,818
Communications and media	74,841	103,512
Examination	72,638	80,156
Council and committees	64,145	37,703
Merchant banking fees	42,060	41,384
Amortization of capital assets	37,851	37,564
Quality assurance	36,290	20,955
Termination benefits	-	90,841
	2,001,388	1,831,478
Excess of revenues over expenses for year	122,969	257,685

The accompanying notes are an integral part of these financial statements

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Statement of Changes in Net Assets

Year ended August 31

	Invested in capital assets \$	Internally restricted net assets \$	Unrestricted \$	2023 Total \$
Balance, beginning of year	82,065	290,000	986,380	1,358,445
Excess of revenues over expenses (expenses over revenues) for year	-	(3,820)	126,789	122,969
Purchase of capital assets	6,343	-	(6,343)	-
Amortization of capital assets	(37,851)	-	37,851	-
Inter-fund transfer (note 10)	-	3,820	(3,820)	-
Balance, end of year	50,557	290,000	1,140,857	1,481,414

	Invested in capital assets \$	Internally restricted net assets \$	Unrestricted \$	2022 Total \$
Balance, beginning of year	110,850	290,000	699,910	1,100,760
Excess of revenues over expenses for year	-	-	257,685	257,685
Purchase of capital assets	8,779	-	(8,779)	-
Amortization of capital assets	(37,564)	-	37,564	-
Balance, end of year	82,065	290,000	986,380	1,358,445

The accompanying notes are an integral part of these financial statements

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Statement of Cash Flows

Year ended August 31	2023 \$	2022 \$
Cash flows from operating activities		
Excess of revenues over expenses for year	122,969	257,685
Adjustments to determine net cash provided by (used in) operating activities		
Interest received on investments capitalized in prior years	4,098	5,440
Interest capitalized on investments	(8,464)	(4,098)
Amortization of capital assets	37,851	37,564
Amortization of deferred lease incentives	(19,939)	(44,657)
	136,515	251,934
Change in non-cash working capital items		
Decrease in prepaid expenses	4,732	12,927
Increase in accounts payable and accrued liabilities	44,286	22,412
Increase in deferred revenue	89,900	32,090
	275,433	319,363
Cash flows from investing activities		
Purchase of capital assets	(6,343)	(8,779)
Purchase of investments	(226,000)	(100,000)
Proceeds on maturity of investments	103,560	103,560
	(128,783)	(5,219)
Net change in cash and cash equivalents	146,650	314,144
Cash and cash equivalents, beginning of year	2,595,931	2,281,787
Cash and cash equivalents, end of year	2,742,581	2,595,931

The accompanying notes are an integral part of these financial statements

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements

August 31, 2023

Nature and description of the organization

The College of Kinesiologists of Ontario (the "College") was incorporated as a non-share capital corporation under the Regulated Health Professions Act, 1991 ("RHPA").

As the regulator and governing body of the kinesiology profession in Ontario, the major function of the College is to administer the Kinesiology Act, 2007 in the public interest.

The College is a not-for-profit organization, as described in Section 149(1)(l) of the Income Tax Act, and therefore is not subject to income taxes.

1. Significant accounting policies

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

(a) Revenue recognition

Registration fees are recognized as revenue in the fiscal year to which they relate. The registration year of the College coincides with that of the fiscal year of the College, being September 1 to August 31. Registration fees received in advance of the fiscal year to which they relate are recorded as deferred revenue.

Examination fees are recognized as revenue when the examinations are held. Examination fees received in advance of an exam being held are recorded as deferred revenue.

Application fees are recognized as revenue upon assessment of the application.

Jurisprudence fees are recognized as revenue when the services have been provided.

Interest income comprises interest from cash and cash equivalents and investments and is recognized on an accrual basis. Interest on investments is recognized over the terms of the respective investments using the effective interest method.

(b) Cash and cash equivalents

Cash and cash equivalents consists of deposits with banks and investments that are redeemable at the option of the holder, and are not subject to significant risk of change in value.

(c) Investments

Investments consist of fixed income investments with maturity dates greater than twelve months from date of acquisition. Investments that mature within twelve months from the year-end date are classified as current.

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

1. Significant accounting policies (continued)

(d) Capital assets

The costs of capital assets are capitalized upon meeting the criteria for recognition as a capital asset, with the exception of expenditures on internally generated intangible assets during the development phase, which are expensed as incurred. The cost of a capital asset comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Capital assets are measured at cost less accumulated amortization and accumulated impairment losses.

Amortization is provided for, upon commencement of the utilization of the assets, on a straight-line basis at rates designed to amortize the cost of the capital assets over their estimated useful lives. The annual amortization rates are as follows:

Furniture and fixtures	5 years
Computer equipment	3 years
Computer software	3 years
Leasehold improvements	10 years

A capital asset is tested for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. If any potential impairment is identified, the amount of the impairment is quantified by comparing the carrying value of the capital asset to its fair value. Any impairment of the capital asset is recognized in income in the year in which the impairment occurs.

An impairment loss is not reversed if the fair value of the capital asset subsequently increases.

(e) Contributed services

The work of the College is dependent on the voluntary service of many individuals. Since these services are not normally purchased by the College and because of the difficulty of determining their fair value, contributed services are not recognized in the financial statements.

(f) Deferred lease incentives

Lease incentives include reduced rent benefits and tenant inducements received in cash.

Lease incentives received in connection with a lease are amortized to income on a straight-line basis over the term of the lease.

COLLEGE OF KINESIOLOGISTS OF ONTARIO**Notes to Financial Statements (continued)**

August 31, 2023

1. Significant accounting policies (continued)**(g) Financial instruments****Measurement of financial assets and liabilities**

The College initially measures its financial assets and financial liabilities at fair value adjusted by the amount of transaction costs directly attributable to the instrument.

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

Amortized cost is the amount at which a financial asset or financial liability is measured at initial recognition minus principal repayments, plus or minus the cumulative amortization of any difference between that initial amount and the maturity amount, and minus any reduction for impairment.

Financial assets measured at amortized cost include cash and cash equivalents and investments.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities and loan payable.

Impairment

At the end of each year, the College assesses whether there are any indications that a financial asset measured at amortized cost may be impaired. Objective evidence of impairment includes observable data that comes to the attention of the College, including but not limited to the following events: significant financial difficulty of the issuer; a breach of contract, such as a default or delinquency in interest or principal payments; and bankruptcy or other financial reorganization proceedings.

When there is an indication of impairment, the College determines whether a significant adverse change has occurred during the year in the expected timing or amount of future cash flows from the financial asset.

When the College identifies a significant adverse change in the expected timing or amount of future cash flows from a financial asset, it reduces the carrying amount of the financial asset to the greater of the following:

- the present value of the cash flows expected to be generated by holding the financial asset discounted using a current market rate of interest appropriate to the financial asset; and
- the amount that could be realized by selling the financial asset at the statement of financial position date.

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

1. Significant accounting policies (continued)

(g) Financial instruments (continued)

Impairment (continued)

Any impairment of the financial asset is recognized in income in the year in which the impairment occurs.

When the extent of impairment of a previously written-down financial asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss is reversed to the extent of the improvement, but not in excess of the impairment loss. The amount of the reversal is recognized in income in the year the reversal occurs.

(h) Government assistance

Government assistance is recognized as revenue when the related expenses are incurred or when there is reasonable assurance that the College has complied or will comply with all of the conditions of the assistance, and collection is reasonably assured.

(i) Management estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make judgments, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the current year. Actual results may differ from the estimates, the impact of which would be recorded in future years.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the year in which the estimates are revised and in any future years affected.

2. Financial instrument risk management

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure and concentrations.

The financial instruments of the College and the nature of the risks to which those instruments may be subject, are as follows:

Financial instrument	Risks				
	Credit	Liquidity	Market risk		
			Currency	Interest rate	Other price
Cash and cash equivalents	X			X	
Investments	X			X	
Accounts payable and accrued liabilities		X			
Loan payable		X			

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

2. Financial instrument risk management (continued)

Credit risk

The College is exposed to credit risk resulting from the possibility that parties may default on their financial obligations, or if there is a concentration of transactions carried out with the same party, or if there is a concentration of financial obligations which have similar economic characteristics that could be similarly affected by changes in economic conditions, such that the College could incur a financial loss.

The maximum exposure of the College to credit risk is as follows:

	2023	2022
	\$	\$
Cash and cash equivalents	2,742,581	2,595,931
Investments	541,584	414,778
	<u>3,284,165</u>	<u>3,010,709</u>

The College reduces its exposure to the credit risk of cash and investments by maintaining balances with a Canadian financial institution.

The College manages its exposure to the credit risk of investments through an investment policy which restricts the types of eligible investments.

Liquidity risk

Liquidity risk is the risk that the College will not be able to meet a demand for cash or fund its obligations as they come due.

The liquidity of the College is monitored by management to ensure sufficient cash is available to meet its liabilities as they become due.

The College has available to it a banking facility which provides for a maximum operating line of credit of \$125,000. Borrowings under the line of credit bear interest at prime plus 0.5% per annum, and are secured by a general security agreement and assignment of fire and other perils insurance on the College's leased premises. The line of credit remains unused as at August 31, 2023.

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk is comprised of currency risk, interest rate risk and other price risk.

Currency risk

Currency risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in foreign exchange rates.

The College is not exposed to currency risk.

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

2. Financial instrument risk management (continued)

Interest rate risk

Interest rate risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in market interest rates.

Other price risk

Other price risk refers to the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate because of changes in market prices (other than those arising from currency risk or interest rate risk), whether those changes are caused by factors specific to the individual instrument or its issuer or factors affecting all similar instruments traded in the market.

The College is not exposed to other price risk.

Changes in risk

There have been no significant changes in the risk profile of the financial instruments of the College from that of the prior year.

3. Cash and cash equivalents

	2023 \$	2022 \$
Cash	1,704,700	2,595,931
Redeemable guaranteed investment certificate - interest at prime less 2.60%	1,037,881	-
	<u>2,742,581</u>	<u>2,595,931</u>

Subsequent to year end, on September 18, 2023, the redeemable guaranteed investment certificate matured.

4. Investments

	2023 \$	2022 \$
Current	234,464	107,658
Long-term	307,120	307,120
	<u>541,584</u>	<u>414,778</u>

Investments consist of guaranteed investment certificates and principal protected notes with effective interest rates ranging from 2.24% to 4.40% (2022 - 2.24% to 3.00%), and maturity dates ranging from September 2023 to September 2028 (2022 - February 2023 to September 2028).

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

5. Capital assets

	Cost \$	Accumulated Amortization \$	2023 Net \$
Furniture and fixtures	137,186	134,183	3,003
Computer equipment	70,360	60,685	9,675
Computer software	121,863	121,863	-
Leasehold improvements	326,662	288,783	37,879
	<u>656,071</u>	<u>605,514</u>	<u>50,557</u>
	137,186	132,982	4,204
Furniture and fixtures	64,017	56,701	7,316
Computer equipment	121,863	121,863	-
Computer software	326,662	256,117	70,545
Leasehold improvements	<u>649,728</u>	<u>567,663</u>	<u>82,065</u>

6. Accounts payable

	2023 \$	2022 \$
Trade payables and accrued liabilities	207,404	185,044
Accrued liabilities - professional conduct	40,000	18,074
	<u>247,404</u>	<u>203,118</u>

7. Government assistance

During fiscal 2020 and 2021, the College received loans under the Canadian Emergency Benefit Account program, totalling \$60,000, for the payment of non-deferrable expenses. During the initial term ending January 18, 2024, the College is not required to repay any portion of the loan and no interest shall accrue. If the College repays \$40,000 of the loan by January 18, 2024, the remainder of the loan is eligible to be forgiven if certain terms and conditions are met.

The College expects to make repayment on or before January 18, 2024, hence the College has recognized the forgivable portion of the loan as income through the statement of operations in the amount of \$10,000 in each of fiscal 2020 and 2021.

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

8. Deferred lease incentives

Pursuant to the lease agreement for the office premises of the College, tenant inducements in the amount of \$172,596 and a reduced rent benefit in the amount of \$31,781 were received.

	Cost \$	Accumulated Amortization \$	2023 Net \$
Tenant inducements	172,596	158,563	14,033
Reduced rent benefit	31,781	29,198	2,583
	<u>204,377</u>	<u>187,761</u>	<u>16,616</u>
	Cost \$	Accumulated Amortization \$	2022 Net \$
Tenant inducements	172,596	141,725	30,871
Reduced rent benefit	31,781	26,097	5,684
	<u>204,377</u>	<u>167,822</u>	<u>36,555</u>

Amortization of lease incentives in the amount of \$19,939 (2022 - \$44,657) has been credited to rent.

9. Employee benefits

The College maintains a group registered retirement savings plan which, upon eligibility, is mandatory for all employees. The College contributes 7% of employee earnings which amounted to \$57,536 (2022 - \$44,760) and is charged to salaries and benefits.

10. Internally restricted net assets

The College has internally restricted net assets to address unplanned expenses, increases in investigation costs and hearings and to provide support to victims of sexual abuse.

The internally restricted net assets of \$290,000 are allocated for abuse therapy in the amount of \$30,000, investigations and hearings in the amount of \$170,000 and property and technology in the amount of \$90,000.

In the current year, expenses in the amount of \$3,820 were incurred in connection with abuse therapy. The Council approved a transfer of \$3,820 from unrestricted net assets to net assets internally restricted for abuse therapy.

The internal restriction is subject to the direction of the Council upon the recommendation of the Executive Committee.

COLLEGE OF KINESIOLOGISTS OF ONTARIO

Notes to Financial Statements (continued)

August 31, 2023

11. **Commitment**

The College has entered into an agreement to lease its office premises expiring June 30, 2024.

The future lease payment, including an estimate of premises common area expenses, is \$204,979.

Draft Statement Subject to Revision





Resolution: Approval of Audited Financial Statements for fiscal 2022/2023

Whereas Council requires that its operations undergo a financial audit annually,
and

Whereas the firm of Hilborn LLP was appointed to carry out this audit and did so during the
month of October 2023; and

Whereas the auditor has now presented Council with draft financial statements as well as
the auditor's opinion.

Resolution

**Therefore, be it resolved that the Council of the College of Kinesiologists of Ontario approve
for circulation, and submission to the Minister of Health, the audited financial statements for
2022/2023.**

Moved by:

Seconded by:

Date: Monday, December 4, 2023



PROGRESS AHEAD

Modernizing Regulation:
Accountable, Engaged and Diverse

2022/2023 Annual Report

For the period from Sept. 1, 2022
to Aug. 31, 2023

3	President's Message
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21	Financial Statements
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LAND ACKNOWLEDGEMENT

We acknowledge that the office of the College of Kinesiologists of Ontario (CKO) is located in Toronto on land that is the traditional territory of the Haudenosaunee, and, most recently, the territory of the Mississaugas of the New Credit First Nation.

President's Message



2023 marked CKO's 10th year of protecting the public by regulating kinesiologists, and I'm honoured to be part of this amazing journey and the positive impact we have made in Ontario's healthcare system.

Throughout my time as the President, Council invested tremendous effort in improving CKO's governance, which is essential to fulfill our public protection mandate. One significant step has been the constitution of the Governance and Nominations Committee to oversee CKO's elections, committee appointments and Council evaluation. We also focused on supporting new Council members through the Succession Planning Mentorship Program and strengthening Council and committee members' competency and skills through professional development and training.

Enhancing kinesiologists' professional skills and knowledge is another important piece to promote public protection. After years of research and preparation, CKO is about to launch a new Quality Assurance program,

Peer Circles, to help improve kinesiology practice through facilitator-guided peer learning and discussions.

As we completed our three-year strategic plan in 2022, I look forward to developing our next strategic plan with Council and the CKO team, where our focus will continue to be on public protection.

2023 is also a big year for me as I concluded my final term as Council President. I want to thank all the staff at CKO and Council members for their continued support, excellent work and tireless commitment to public protection. Although bittersweet, I'm proud to hand over such a strong, collaborative Council to our new President. Together, we will embrace the challenges in our journey, and I know our next leader will have the support to guide Council's progress in the years ahead.

A handwritten signature in black ink, appearing to read 'Jennifer Pereira'.

Jennifer Pereira
President

Registrar's Message

As we mark 10 years of regulating kinesiology practice/kinesiologists in Ontario, I'd like to thank Council and our staff for their tireless and continued commitment to our public protection mandate. Their dedication allows a growing CKO to meet its ambitious strategic goals.

During the past 10 years, we have seen immense changes in society's expectations of health care, which requires health regulators to respond nimbly, efficiently and effectively to safeguard client-centred care delivery. The health-care landscape will continue to evolve in the next 10 years, and the public will maintain high expectations of the care received from kinesiologists. CKO has focused on addressing and responding to such expectations.

In 2023, we revisited and updated the [Kinesiologist Core Competency Profile](#), which describes the knowledge, skill and judgement of an entry-level kinesiologist. This was the first update since CKO's proclamation. We also reviewed our fee structure for the first time to ensure we have the resources to protect the public by effectively regulating kinesiologists in Ontario. As a result of the review, a fee increase was proposed and approved by Council after a public consultation.

Several barrier-reducing regulatory amendments also took place in 2023. To respond to these changes, we amended CKO's Language Proficiency Policy to include language tests used for immigration to Canada and introduced a new "Emergency Class" certificate of registration to reduce registration barriers during a public emergency. To ensure registrants understand regulatory changes, we revised the Prevention of Sexual Abuse e-Learning Module to clarify the nature of the spousal exception and how it applies to kinesiologists.

CKO is one of 26 health profession regulators in Ontario committed to creating a health-care environment where everyone, regardless of race, ethnic origin, educational and cultural background, is welcomed and treated equally with respect. As Registrar and CEO, I empower our registrants, staff and Council members to work toward the goal of removing systemic barriers within our control and promoting Equity, Diversity and Inclusion (EDI) in our health-care system. To achieve this goal, we intend to allocate additional resources to continue training staff and Council members on EDI and apply lessons learned to make CKO truly equitable, diverse and inclusive.



As CKO enters its next decade, our focus remains public protection. With a strong and competent team, I am confident of our continuing success through ongoing and strengthened member and stakeholder engagement, enhanced communication through patient/client-focused campaigns, and, most importantly, continuing to hold kinesiologists accountable for delivering safe, ethical, high-quality patient/client care.

Nancy Leris

Registrar and Chief Executive Officer

About CKO

The College of Kinesiologists of Ontario (CKO) is the regulator for kinesiology practice in Ontario. The *Regulated Health Professions Act, 1991 (RHPA)* grants kinesiologists in Ontario the privilege of profession-led regulation, which is carried out by CKO.

CKO's legislated mandate is to protect the public by regulating kinesiologists in Ontario and we do this by:

Setting requirements to become a kinesiologist so that only qualified individuals can practise.

Developing rules and guidelines for kinesiologists' practice and conduct.

Requiring kinesiologists to keep their knowledge and skills up-to-date.

Investigating and resolving complaints related to kinesiologists.

VISION

A healthier Ontario through excellent kinesiology practice.

MISSION

To protect the public through governing and ensuring excellent professional practice of kinesiologists in Ontario.

VALUES

The College of Kinesiologists of Ontario holds honesty and integrity as its guiding principles. The College is committed to operating in a fair and open manner and treating its staff, members, the public and stakeholders with respect and dignity.

Year in Review

REGISTRATION

- In the process of reviewing and updating the [Kinesiologist Core Competency Profile](#) to better reflect the knowledge, skills and judgement required for an entry-level kinesiologist.
- Council approved amendments to the General Regulation of the *Kinesiology Act, 1991*, introducing a new “Emergency Class” Certificate to reduce registration barriers during an emergency situation.
- Revised the Language Proficiency Policy to adopt language tests used for Canadian immigration.
- Implemented the first fee increase since CKO’s proclamation in 2013 to ensure we continue to protect the public by effectively regulating kinesiology practice.
- Surpassed 3000 registrants at the end of the fiscal year (August 2023).
- Completed a major upgrade of the database management system to improve the system’s stability, security and functionality for staff, applicants and registrants via the member portal.

QUALITY ASSURANCE (QA)

- Implemented the biennial self-assessment process that requires kinesiologists to complete the self-assessment and develop individual learning plans with continuing professional development goals.
- Reviewed and made final decisions regarding 33 Peer and Practice Assessments (PPA).
- Revised the Prevention of Sexual Abuse e-Learning Module.
- Completed a Professional Liability Insurance (PLI) audit as part of a risk-based approach to Quality Assurance activities.

PROFESSIONAL PRACTICE

- Introduced a new Practice Guideline – Complementary Alternative Therapies
- Updated the following Practice Standards to comply with the *Spousal Exception Regulation in the RHPA, 1991*:
 - Practice Standard – *Record Keeping*
 - Practice Standard – *Discharging a Patient/Client*
 - Practice Standard – *Dual Healthcare*

GOVERNANCE/COUNCIL

- Constituted Governance and Nomination Committee and held its first meeting on April 25, 2023.
- Administered Council Effectiveness Review Framework (CERF) by a third-party consultant.
- Implemented the Mentorship and Succession Planning Policy for Council.
- Participated in the HPRO’s Equity, Diversity, Inclusion and anti-Bias (EDI-B) working group to dismantle systemic racism in health care.

BY-LAW AMENDMENTS

- 6 – Election of officers
- 10 – Election of Council members
- 12 – Committee – General
- 13 – Composition and selection of committees
- 19 – CKO fees

By the Numbers

All data is as of Aug. 31, 2023. Data related to employment is collected at renewal, from R.Kins practising in Ontario, and only focuses on their primary practice profile.



REGISTRANT STATISTICS SEPT. 1, 2022 - AUG. 31, 2023

TOTAL REGISTRANTS

3005

GENDER

Male **36%**

Female **64%**

NEW REGISTRANTS

320

AGE RANGE

20-29 **32%**

30-39 **38%**

40-49 **18%**

50-59 **10%**

60+ **2%**



DID YOU KNOW?

The total number of CKO registrants was

1146

by the end of 2013, the year CKO was proclaimed.

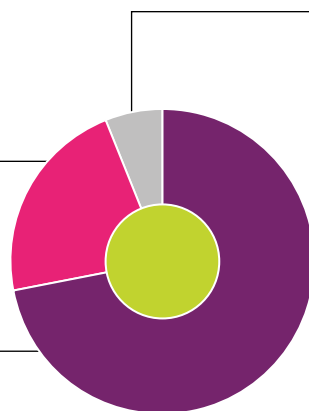


EMPLOYMENT

STATUS

Employed part-time
21%

Employed full-time
74%



Employed casually
5%

AGE OF CLIENTS

48%

of R.Kins work with people of all ages

Work with adults **44%**

Work with seniors **6%**

Work with children (under 18) **2%**

TOP 3 PRACTICE ROLES

- 1.** Service Provider
- 2.** Owner/Operator
- 3.** Instructor/Educator

NATURE OF PRACTICE

Clinical practice **28%**

Non-clinical practice **43%**

Mixed practice **29%**

(combination of clinical and non-clinical)

By the Numbers

(continued)

EDUCATION

PLACE OF EDUCATION

Canadian educated **98%**

Ontario educated **94%**

TOP SOURCE PROVINCES FOR R.KINS EDUCATED OUTSIDE OF ONTARIO (FROM GREATEST TO LEAST)

- | | |
|-------------------|-------------------|
| 1. NS (33) | 6. NB (9) |
| 2. QC (31) | 7. NL (7) |
| 3. BC (27) | 8. SK (7) |
| 4. AB (10) | 9. PEI (1) |
| 5. MB (9) | |

TOP SOURCES COUNTRIES FOR INTERNATIONALLY-EDUCATED R.KINS (FROM GREATEST TO LEAST)

- USA
- South Africa
- Australia, China, Great Britain, Iran, Poland, Ukraine

EXAMINATIONS

413

applicants wrote the Entry-to-Practice Exam between Sept. 1, 2022 and Aug. 31, 2023.

244

applicants registered to write the Entry-to-Practice Exam in September 2022

218

applicants wrote the Entry-to-Practice Exam in September 2022

144

passed or **66%**

223

applicants registered to write the Entry-to-Practice Exam in April 2023

195

applicants wrote the Entry-to-Practice Exam in April 2023

139

passed or **71%**

PRACTICE ENQUIRY DATA SEPT. 1, 2022 - AUG. 31, 2023

METHODS OF CONTACTING

- 163** email enquiries
- 83** phone enquiries
- 2** other sources (e.g., mail, fax, etc.)

PEOPLE WHO CONTACTED US

- | | | |
|----------------------|------------------------------------|-----------------------------------|
| 157 R.Kins | 9 Associations | 2 Educational institutions |
| 21 Public | 4 Employers | 2 Insurance companies |
| 14 Applicants | 23 Healthcare Professionals | |
| 14 Others | 2 Students | |

TOP 3 TOPICS OF ENQUIRIES

- Scope of Practice **42**
- Clinical Practice **24**
- Titles and Designations **23**

Registration Committee

The Registration Committee is responsible for developing and implementing transparent, objective and fair registration practices. The Committee's work protects the public by ensuring that only qualified individuals can be registered to practise kinesiology.

The Committee considers applications for registration that have been referred by the Registrar in situations where the Registrar:

- Has doubts about whether an applicant has met the registration requirements;
- Believes that terms, conditions or limitations should be imposed on a certificate of registration; or
- Proposes to refuse the application.

From Sept. 1, 2022 to Aug. 31, 2023, the Registration Committee reviewed and decided on the following:

TYPE OF CASE	NUMBER OF CASES	DECISION
Non-exemptible educational requirement	32	<ul style="list-style-type: none"> • 11 applications were approved • 2 applications were refused • 19 decisions were postponed pending further information or additional training prior to approval
Reinstatement to the General Class after two years in the Inactive Class	8	<ul style="list-style-type: none"> • 1 reinstatement to the General Class was granted • 6 reinstatements to the General Class were granted with conditions • 1 decision was postponed pending further information
Expiration of one-year period for registration following notification of eligibility	5	<ul style="list-style-type: none"> • 4 requests were approved • 1 request was denied
Exemption request from re-challenging Entry-to-Practice Exam after resignation and re-registration	2	<ul style="list-style-type: none"> • 1 request was granted exemption from re-challenging the Entry-to-Practice Exam • 1 request was denied
Proposal for upgrading/remediation	4	<ul style="list-style-type: none"> • 4 remediation plans were approved
Review decision of the Health Professions Appeal and Review Board (HPARB)	0	N/A

Applicants who are not satisfied with the decision of the Registration Committee may appeal the decision to the [Health Professions Appeal and Review Board \(HPARB\)](#). No requests were submitted to HPARB between Sept. 1, 2022 and Aug. 31, 2023.

Registration Committee *(continued)*

ENTRY-TO-PRACTICE EXAM (2022/2023)

A total of 413 applicants wrote the Entry-to-Practice Exam between Sept. 1, 2022 and Aug. 31, 2023.

	REGISTERED	WROTE	PASSED	% PASSING
September 2022	244	218	144	66%
April 2023	223	195	139	71%

EXAMINATION COMMITTEE

The Examination Committee is comprised of registered kinesiologists and faculty members from kinesiology programs across Ontario. The Committee approves test forms, sets the pass mark for each exam and ensures that the exam reflects the entry-level competencies. The Committee did not meet from Sept. 1, 2022 to Aug. 31, 2023.

ITEM WRITING COMMITTEE

The Item Writing Committee is comprised of registered kinesiologists and faculty members from kinesiology programs across Ontario. Panels of the Committee develop exam questions that correspond to the Examination Blueprint. The Item Writing Committee did not meet from Sept. 1, 2022 to Aug. 31, 2023.

CKO is grateful for the support of those who assisted with the preparation, development and administration of the exam. Their contributions are invaluable.



Quality Assurance Committee



DID YOU KNOW?

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Peer and Practice Assessments were conducted from Sept. 1, 2018 to Aug. 31, 2023

The Quality Assurance (QA) Committee protects the public by administering programs that help kinesiologists keep their knowledge and skills up-to-date. The QA Program is educational and supportive and consists of:

- Self-assessment;
- Mandatory e-learning modules;
- Continuing Professional Development (CPD);
- Peer and Practice Assessment (PPA); and
- Ways for CKO to monitor kinesiologists' participation and compliance with the QA Program.

All kinesiologists registered in the General Class must participate in the QA Program and demonstrate commitment to continuous improvement and ongoing learning.

Committee activities have been included in the Year in Review section on page 6 of this Annual Report.

PPAS CONDUCTED FROM SEPT. 1 – AUG. 31 OF EACH YEAR (REPORTED BY FISCAL YEAR)

2018-2019	2019-2020	2020-2021	2021-2022	2022-2023
48 PPAs: <ul style="list-style-type: none"> • 29 random selection • 15 insufficient currency • 1 had been deferred from a previous cycle • 3 were selected for non-compliance with other QA program requirements 	23 PPAs: <ul style="list-style-type: none"> • 22 random selection • 1 had been deferred from a previous cycle 	24 PPAs: <ul style="list-style-type: none"> • 18 random selection • 1 completed second PPA (ordered by Committee) • 1 insufficient currency • 1 non-compliant with other QA program requirements • 3 volunteers 	43 PPAs: <ul style="list-style-type: none"> • 39 random selection • 1 non-compliant with other QA program requirements • 3 had been deferred from a previous cycle 	35 PPAs: <ul style="list-style-type: none"> • 21 random selection • 2 had been deferred from a previous cycle • 2 insufficient currency • 10 non-compliant with other QA requirements

Quality Assurance Committee (continued)

PEER AND PRACTICE ASSESSMENT

The Peer and Practice Assessment (PPA) program is an individualized educational opportunity designed to assess kinesiologists' knowledge, skills and judgment while helping them identify areas of strength and opportunities for improvement within their practice.

TOP AREAS FOR IMPROVEMENT IDENTIFIED THROUGH PPA

Record keeping, communication and consent were identified as the top three areas for improvement. These areas of professional practice may

require further support and guidance for kinesiologists, particularly those working in multi-disciplinary teams where responsibility for clinical files may be shared amongst other professionals.

CKO will highlight these standards and competencies in the self-assessment and share articles and other supporting documents to address potential risks.

FINAL PPA DECISIONS BY THE QA COMMITTEE (UP TO AUGUST 31, 2023)

DECISION	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023 *
No further action	47	22	22	40	11
Competency Enhancement – Demonstrated Change Report	0	2	2	2	1
Competency Enhancement – Specified Continuing Education and Remediation Program	0	0	0	1	0
Competency Enhancement – Mentorship Program	1	0	0	0	0
Total (134)	48	24	24	43	12

*Some PPAs require review and some decisions require follow-up and further review at upcoming Quality Assurance Committee meetings.

Complaints and Discipline Committee



Ontarians have the right to receive safe, high-quality care. When they have concerns about a kinesiologist's practice or behaviour, they can file a complaint or report about the kinesiologist to CKO.

As a mandatory requirement set out in the [Regulated Health Professions Act \(RHPA\), 1991](#), CKO is responsible for ensuring kinesiologists provide ethical, safe and high-quality care that's within the practice scope and adheres to the [Practice Standards](#). Our Professional Conduct Department works with the [Inquiries, Complaints and Reports Committee \(ICRC\)](#) to review, investigate complaints and reports, and make decisions in the public interest.

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

ICRC is a statutory committee comprised of professional members and public members appointed by the Lieutenant Governor. It protects the public by reviewing concerns about kinesiologists related to potential professional misconduct, incompetence or incapacity. These concerns are brought to CKO through formal complaints made by patients/clients, mandatory reports by employers and other health care professionals, and other information provided to the Registrar.

ICRC also conducts a thorough investigation to evaluate the risk to the public and takes appropriate action to address it. Following its review of a formal complaint or report, ICRC may take one or more of the following measures to address concerns:

- Referring specified allegations of professional misconduct or incompetence about the kinesiologist to the Discipline Committee for a hearing;
- Investigating the kinesiologist's capacity and/or refer the matter to the Fitness to Practise Committee;
- Requiring the kinesiologist to appear before a panel of the ICRC to be cautioned;
- Requiring the kinesiologist to complete a continuing education or remediation program;
- Asking the kinesiologist to voluntarily restrict their practice, or to pursue a mentoring or monitoring program; or
- Providing the kinesiologist with advice and/or recommendations that would help improve their practice.

However, ICRC will take no actions if no concerns or risks have been identified.

Complaints and Discipline Committee *(continued)*

COMMITTEE ACTIVITY

From Sept. 1, 2022 to Aug. 31, 2023, panels of the ICRC met four times.

In total, the panels met to address the following matters:

- Six Registrar's Reports initiated;
- 11 Complaints received;
- Six decisions made; and
- Two matters were closed administratively, one Complaint and one Report.

There were nine active cases as of Aug. 31, 2023. Among those, seven Complaints and two Registrar's Reports remain under investigation.

Dispositions

Panels of the ICRC issued decisions with the following dispositions:

No action (including cases where the matter was found to be frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process)	1
Advice/recommendations	4
Undertaking	1
Caution in person	0
Specified Continuing Education and Remediation Program (SCERP)	0
Referral of specified allegations to the Discipline Committee	0

Appeals

Certain decisions of the ICRC in complaints matters can be appealed to the [Health Professions Appeal and Review Board \(HPARB\)](#) by the complainant or the kinesiologist. HPARB conducts a review of the matter to determine whether ICRC's investigation was adequate and its decision was reasonable.

No matters were appealed to HPARB from Sept. 1, 2022 to Aug. 31, 2023.

DISCIPLINE COMMITTEE

When necessary, ICRC will refer cases to the Discipline Committee to conduct formal hearings to review allegations of a kinesiologist's professional misconduct or incompetence. The Discipline Committee make appropriate decisions that are proven to discipline the kinesiologist and protect the public from future risk of harm.

COMMITTEE ACTIVITY

The Discipline Committee did not meet from Sept. 1, 2022 to Aug. 31, 2023.

FITNESS TO PRACTISE COMMITTEE

Sometimes, a kinesiologist's physical or mental condition could have a negative impact on their ability to practise safely, which could potentially pose a risk of harm to the public. The Fitness to Practise Committee reviews these cases and determines the best action to protect the public.

COMMITTEE ACTIVITY

The Fitness to Practise Committee did not meet from Sept. 1, 2022, to Aug. 31, 2023.

Patient Relations Committee



DID YOU KNOW?

You can learn more about sexual abuse and how CKO can support you [here](#).

The Patient Relations Committee protects the public by overseeing the Patient Relations Program, which is designed to enhance professional relations between kinesiologists and patients/clients. The Patient Relations Program incorporates measures for preventing sexual abuse and working with patients/clients who experienced sexual abuse, including:

- Educational requirements for kinesiologists;
- Guidelines for the conduct of kinesiologists with their patients/clients;
- Training for CKO staff; and
- Providing information to the public to ensure they understand the role of CKO and their rights as patients.

The Patient Relations Committee also administers the therapy funding for sexual abuse victims.

In addition, as part of its expanded mandate, the committee is responsible for educating the public about CKO's role, the obligations of kinesiologists and their rights as a patient. The committee works with CKO's Communications Department to ensure information is available and easily accessible to the public.

COMMITTEE ACTIVITY

From Sept. 1, 2022 to Aug. 31, 2023, the Patient Relations Committee met twice:

- To consider proposed amendments to the Prevention of Sexual Abuse e-Learning Module. The proposed amendments were approved and implemented on Sept. 1, 2023.
- To review a proposed communications strategy regarding the fee increase and relevant by-law amendments.



Practice Advice

Patients, caregivers, kinesiologists, students, employers, insurers and others can contact CKO for confidential advice about kinesiology practice. The purpose of offering practice advice is to help kinesiologists maintain and enhance their practice and help the public better understand their rights as patients/clients.

From Sept. 1, 2022 to Aug. 31, 2023, there were 262 inquiries from kinesiologists, the public and other stakeholders. More than 59 per cent of the inquiries were made by kinesiologists.

The most frequently ask topics were inquiries about:

- Scope of Practice,
- Clinical Practice, and
- Titles and Designations.

2022-2023 PRACTICE ADVICE INQUIRIES

	TOTAL	PHONE	EMAIL
Advertising and social media	8	1	7
Clinical practice	24	10	14
Conflict of Interest/Code of Ethics	4	2	2
Consent/capacity	40	1	3
Discharge	2	0	2
Education/supervision of students	6	1	5
Employment issues	22	10	12
Fees & billing	17	8	9
IPAC	0	0	0
Insurance	5	1	4
Interprofessional collaboration	6	1	5
Other (note: most of these “Other” inquiries pertain to virtual treatment, care and services)	24	2	12
Privacy/confidentiality	5	0	5
Professional boundaries/sexual abuse	4	3	1
Record keeping	20	6	14
Scope of Practice/Controlled Acts/Delegation	41	15	26
Supervision: students and support personnel	8	3	5
Titles & designation	23	8	15
Dual practice	3	3	0

CKO Council

CKO is governed by a Council that consists of elected professional members and public members appointed by Ontario's Lieutenant Governor. Council is responsible for governing CKO and ensuring CKO is fulfilling its legislated mandate of public protection.

As of Aug. 31, 2023, Council members are as follows:

PROFESSIONAL MEMBERS



Jennifer Pereira,
Council President



Benjamin Matthie



Matthew Daher



Corby Anderson



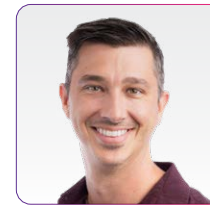
Susan Garfat



Leanne Smith



Heather Westaway



Ryan Wight

PUBLIC MEMBERS



Teresa Bendo



Sara Gottlieb



Chad McCleave



Victoria Nicholson



Jana Smith



Jotvinder Sodhi

Committee and Staff

NON-COUNCIL COMMITTEE MEMBERS

Each year, Council appoints kinesiologists to sit on committees as non-Council committee members, also known as Members-At-Large.

As of Aug. 31, 2023, non-Council committee members are as follows:

Aaron McCullagh	Katelyn Methot
Adeola Giwa	Kristen Hoving
Agnes Coutinho	Logan Strasser
Ariel Zohar	Mehrdad Alizadeh-Meghrazi
Ashley Lowe	Melanie Jones-Drost
Brooke Hamilton	Miriam Fong
Casey Capaz	Nino Baialardo
Claude Balthazard	Sean Sabbatini
Conny Glenn	Sherry Parent
Daniel Crête	Stefano Rulli
Delissa Burke	Tudor Chirila
Jane Gage	William Gittings
Jasmeet Cheema	

CKO STAFF

Nancy Leris, *Registrar and CEO*

Michelle Bianchi, *Director of Operations and Financial Services*
(until July 28, 2023)

Fiona Teape, *Director of Registration*

Magda Reder, *Manager of Examination*

Brian Fehst, *Manager of Professional Practice*

Lynn Butler, *Communications Manager* (until May 19, 2023)

Cecilia Li, *Senior Communications Officer* (from June 12, 2023)

Samuel Hanna, *Professional Practice Coordinator*

Arifa Gafur, *Professional Conduct Coordinator* (from March 6, 2023)

Colleen Foster, *Program Coordinator*

Lisa Groten, *Program Assistant – Registration*

Independent Auditors' Report

COLLEGE OF KINESIOLOGISTS OF ONTARIO
Statement Of Financial Position

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**COLLEGE OF
KINESIOLOGISTS
OF ONTARIO**



College of Kinesiologists of Ontario
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T (416) 961-7000
F (416) 961-7009
E info@coko.ca



Resolution: Approval of 2022/2023 Annual Report

Whereas the College of Kinesiologists of Ontario (CKO) is required to prepare and submit an annual report to the Ministry of Health and post the report to the College website; and

Whereas Council was provided with a draft annual report for 2022/2023; and

Whereas the presented annual report fairly represents CKO's activities and achievements from Sept. 1, 2022 to Aug. 31, 2023;

Resolution

Therefore, be it resolved that Council accept and approve the draft annual report for 2022/2023 for submission to the Ministry of Health and posting to CKO's website.

Moved by:

Seconded by:

Date: Monday, December 4, 2023



DECISION NOTE

TOPIC: Emergency Class Policy
PREPARED FOR: Council
DATE: December 4, 2023

BACKGROUND

In accordance with the Regulated Health Professions Act, 1991 (RHPA), all 26 Ontario health regulatory colleges were required to develop regulations establishing an emergency class of registration.

At a special meeting in April 2023, Council approved proposed amendments to the General Regulation of the Kinesiology Act, 2007 establishing the new emergency class. Following a period of discussion with the Ministry, the amendments were approved by the provincial government and took effect on August 31, 2023.

The emergency class certificate provides a route of entry for applicants who do not yet meet the core registration requirements, and enables them to register with the College under certain safeguards during a proclaimed emergency. The College's entry-to-practice examination, currently held twice a year, presents a realistic delay to immediate registration in an emergency circumstance, and is excluded as a registration requirement for this class. To provide reasonable assurances of competency in lieu of completing the entry-to-practice examination, the regulation includes non-exemptible currency requirements and a requirement to practice under supervision.

The College is in the process of establishing the necessary policies and framework to support the implementation of the emergency class certificate.

Opening the Emergency Class

Under the General Regulation, to open the emergency class:

9.1(1)1. The Minister must have requested that the College initiate registrations under this class based on the Minister's opinion that emergency circumstances call for it or the Council must have determined, after taking into account all of the relevant circumstances that impact the ability of applicants to meet the ordinary registration requirements, that there are emergency circumstances and that it is in the public interest that the College issue emergency certificates of registration.

While “emergency circumstance” is not defined within the Regulation, it is generally understood to include a declared state of emergency such as a pandemic, a natural or made-made disaster, or war.

In a December 14, 2022 memo to all health regulatory colleges, Dr. Karima Velji, Assistant Deputy Minister at the Ministry of Health, specified that an emergency circumstance should also be considered broader than a declared state of emergency made under the Emergency Management and Civil Protection Act, 1990. As an example, the Minister proposed that an emergency circumstance could be a situation where a significant interruption of a registration pathway leads to a lengthy delay in registration for many applicants.

Under the Regulation, Council has discretion independent from the Ministry to further determine an emergency circumstance and when it would be in the public interest to open registration. To help guide Council with decision making in this scenario, as well as to provide greater transparency to the public, applicants and the profession, an emergency class policy is proposed.

CONSIDERATIONS TO DECLARE EMERGENCY CIRCUMSTANCES EXIST

In deciding to issue certificate of registration in the emergency class, it is proposed that Council base their decision on the following five factors:

- (1) Scale and immediacy of the emergency: An emergency is an unforeseen and often sudden event or situation that poses an immediate and significant threat to public safety, public health, or the functioning of essential services for a population or group at-large.
- (2) Impact of the emergency on public health and/or safety: An emergency circumstance is characterized by its potential to cause substantial harm to the public or significant disruption to the healthcare system. The scale of the emergency may vary, from localized incidents to provincial or national crises.
- (3) Duration of the emergency: An emergency may be of varying duration, ranging from short-term, acute crises (e.g. natural disaster) to prolonged or ongoing situations (e.g. pandemics). The duration may be approximated based on the specific nature of the emergency and its impact.
- (4) Proportionality: The decision to open the emergency class certificate should be proportionate to the severity of the emergency. If there are other solutions or remedies available within the legislative framework, they should be considered first. Council should avoid implementing excessive measures.
- (5) Public Interest: Issuing the emergency certificate must be in the best interest of the public. When assessing public interest, Council will weigh the potential benefits of open registration in the emergency class against any legitimate risks or concerns. The benefits include addressing the emergency effectively, ensuring access to necessary services, and safeguarding public safety and health. However, there may also be risks, such as potential compromises in quality or safety due to the expedited registration process.

It is believed that basing a decision on criteria, rather than strict definitions or examples, will allow for greater flexibility and adaptability as emergency situations may take different forms. Such a framework would enable Council to balance multiple factors and variables against the public interest, while also ensuring the intended spirit of the policy is upheld. The emergency class certificate is intended to address broad populations impacted by emergencies, both the patient/client population and applicants as a whole; it is not intended to expedite an application for individual circumstances.

As presented, the policy contemplates that Council would consider each factor and how they apply. For example, “Duration of the Emergency” does not necessarily require that the duration be long or specific, only that it is factored into the decision.

Also, as presented, the policy would guide Council in deciding whether an emergency circumstance exists primarily when there has not been a request from the Ministry. In instances where the Ministry has requested the College initiate registrations under the emergency class based on their opinion that emergency circumstances call for it, Council may wish to lend greater significance to Minister’s request.

Presently, it remains unclear if and when there will be an emergency that will necessitate the College issuing emergency class certificates. However, there may be other localized emergencies, such as a cybersecurity attack to the College’s system or our third-party vendors, that have the potential to significantly delay registration and require opening the emergency class.

To date, only two other health regulators in Ontario have an approved Emergency Class policy. As the College continues to monitor the regulatory landscape, Council may wish to revise the policy to better align with other regulators. Similar, if and when emergency class certificates are issued, it may be determined that revisions are required to provide further clarity.

Public Rationale

The proposed policy will provide transparency around Council’s decision-making process; it will inform both the general public and potential applicants. The public will also be protected by way of the emergency class certificate holder’s supervision requirement appearing as public terms, conditions and limitations on the register. Additional public protection measures are included within the Regulation pertaining to the emergency class and the general requirements for the issuance of a certificate of registration.

DECISION FOR COUNCIL

The following are proposed options:

1. Approve the proposed Emergency Class Policy.
2. Return the draft policy back to the Registration Committee and staff with specific questions for consideration.

Attachments:

- Appendix A: Draft Emergency Class Policy
- Appendix B: Ontario Regulation 401/12: General under Kinesiology Act, 2007.
- Appendix C: Approved Emergency Class Policies

Policy

Type:	Registration		
Number:			
Name:	Emergency Class Policy		
Status:	Draft	Version:	1
Date Approved:	December XX 2023	Date Revised:	

Policy Statement

The emergency class certificate of registration provides a route of entry for applicants who do not meet the core registration requirements and enables them to register with the College under certain safeguards during a proclaimed emergency. As of August 31, 2023, the revised General Regulation of the *Kinesiology Act, 2007* enables the Minister of Health or Council to open the emergency class for registration in an emergency circumstance. In making this determination, Council must consider the relevant factors affecting applicants' ability to meet the ordinary registration requirements and be satisfied it serves the public interest.

Purpose

This policy describes when Council can declare that there are emergency circumstances to warrant the issuance of emergency class certificate.

Applicable Legislation and Regulation

1. Health Professions Procedural Code of the Regulated Health Professions Act, 1991
2. Ontario Regulation 401/12 under the Kinesiology Act, 2007
3. By-laws of the College of Kinesiologists of Ontario

Opening the Emergency Class

Under Section 9.1(1)1 of the General Regulation, the emergency class of registration will become available in one of the following two situations:

1. The Minister of Health has requested that Council initiates registration under the emergency class because in the Minister's opinion, there are emergency circumstances that require this.
2. Council has determined, taking into account all of the relevant circumstances that impact the ability of applicants to meet ordinary registration requirements, that there are emergency circumstances, and it is in the public interest that the CKO issue emergency certificates of registration.

When deciding whether an emergency circumstance exists, Council must consider each of the following criteria:

- (1) **Scale and immediacy of the emergency:** An emergency is an unforeseen and often sudden event or situation that poses an immediate and significant threat to public safety, public health, or the functioning of essential services for a population or group at-large. This includes but is not limited to natural disasters (e.g., earthquakes, floods), public health crises (e.g., pandemics), civil unrest or acts of terrorism.
- (2) **Impact of the emergency on public health and/or safety:** An emergency circumstance is characterized by its potential to cause substantial harm to the public or significant disruption to the healthcare system. The scale of the emergency may vary, from localized incidents to provincial or national crises.
- (3) **Duration of the emergency:** An emergency may be of varying duration, ranging from short-term, acute crises (e.g. natural disaster) to prolonged or ongoing situations (e.g. pandemics). The duration may be approximated based on the specific nature of the emergency and its impact.
- (4) **Proportionality:** The decision to open the emergency class certificate should be proportionate to the severity of the emergency. If there are other solutions or remedies available within the legislative framework, they should be considered first. Council should avoid implementing excessive measures.
- (5) **Public Interest:** Issuing the emergency certificate must be in the best interest of the public. When assessing public interest, Council will weigh the potential benefits of open registration in the emergency class against any legitimate risks or concerns. The benefits include addressing the emergency effectively, ensuring access to necessary services, and safeguarding public safety and health. However, there may also be risks, such as potential compromises in quality or safety due to the expedited registration process.

Provided it has been established that there is an emergency circumstance, either by request from the Minister of Health or by Council through consideration of the above criteria, the College will issue emergency certificates of registration.

Terms, Conditions and Limitations

Pursuant to section 9.1(3)1. of the General Regulation, every registrant in the emergency class must practice under the supervision of a holder of a general class certificate of registration whose certificate is not subject to additional terms, conditions, and limitations and who is in good standing.

Pursuant to section 9.1(3)2 of the General Regulation, every registrant in the emergency class shall, at all times when providing kinesiology services, identify themselves as practising under supervision.

In accordance with College By-law 21.06(1), the above information will be included on the Public Register.

Closing the Emergency Class

Council will monitor and reassess the situation as the emergency evolves. Under the regulation, all emergency certificates of registration will expire 90 days after Council has determined the emergency circumstances have ended.

Furthermore, no emergency certificates of registration will be issued once Council has determined that the emergency circumstances have ended.

DRAFT

Français

Kinesiology Act, 2007**ONTARIO REGULATION 401/12
GENERAL****Consolidation Period:** From August 31, 2023 to the [e-Laws currency date](#).

Last amendment: 284/23.

Legislative History: 718/21, 284/23.

This is the English version of a bilingual regulation.

SPOUSAL EXCEPTION

Spousal exception

0.1 The spousal exception in subsection 1 (5) of the Health Professions Procedural Code applies in respect of the College. O. Reg. 718/21, s. 1.

REGISTRATION

Classes of certificates

1. The following are prescribed as classes of certificates of registration for registered kinesiologists:
 1. General.
 2. Inactive.
 3. Emergency. O. Reg. 401/12, s. 1; O. Reg. 284/23, s. 1.

Application for certificate of registration

2. (1) A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar together with any applicable fees required under the by-laws and any supporting information required by the Registrar. O. Reg. 401/12, s. 2 (1).

(2) An applicant shall be deemed not to have satisfied the registration requirements for a certificate of registration if the applicant makes a false or misleading statement or representation on or in connection with his or her application, and any certificate of registration issued to such an applicant may be revoked by the Registrar. O. Reg. 401/12, s. 2 (2).

Requirements for issuance of certificate of registration, any class

3. An applicant must satisfy the following requirements for the issuance of a certificate of registration of any class:
 1. The applicant must, at the time of application, provide details about any of the following that relate to the applicant and, where any of the following change with respect to the applicant after submitting the application but before the issuance of a certificate, the applicant must immediately provide written details with respect to the change:
 - i. A finding of guilt for any of the following:
 - A. A criminal offence.
 - B. An offence resulting in a fine greater than \$1,000 or any type of incarceration.
 - ii. A finding of professional misconduct, incompetence or incapacity, or any similar finding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iii. A current proceeding for professional misconduct, incompetence or incapacity, or any similar proceeding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iv. A finding of professional negligence or malpractice in any jurisdiction.
 - v. A refusal by any body responsible for the regulation of a health profession in any jurisdiction to register the applicant.
 - vi. Whether the applicant was not in good standing at the time he or she ceased being registered with a body responsible for the regulation of another profession in Ontario or of any regulated profession in another jurisdiction.

Appendix B – General Regulation and Emergency Certificate

- vii. Where the applicant is a member of another regulated profession in Ontario or any regulated profession in another jurisdiction, any failure by the applicant to comply with any obligation to pay fees or provide information to the body responsible for the regulation of the profession, the initiation of any investigations by such body in respect of the applicant or the imposition of sanctions on the applicant by such body.
 - viii. Any other event that would provide reasonable grounds for the belief that the applicant will not practise kinesiology in a safe and professional manner.
2. The applicant's previous conduct must afford reasonable grounds for the belief that he or she will practise kinesiology in a safe and professional manner.
 3. The applicant must possess sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing.
 4. The applicant must not have a physical or mental condition or disorder that would make it desirable in the interest of the public that he or she not be issued a certificate of registration unless, should the applicant be given a certificate of registration, the imposition of a term, limit or condition on that certificate is sufficient to address such concerns.
 5. If the applicant is registered by any body responsible for the regulation of any other profession in Ontario or of any profession in any other jurisdiction, the applicant's registration must be in good standing and must continue to be in good standing until such time as the applicant is issued a certificate of registration.
 6. If the applicant ceased being registered with any body responsible for the regulation of another profession in Ontario or of any profession in any other jurisdiction, the applicant must have been in good standing at the time he or she ceased being registered. O. Reg. 401/12, s. 3.

Terms, conditions and limitations of every certificate

4. Every certificate of registration is subject to the following terms, conditions and limitations:
 1. The member shall provide the College with written details about any of the following that relate to the member no later than 30 days after the member becomes aware of it occurring:
 - i. A finding of professional misconduct, incompetence or incapacity, or any similar finding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - ii. A current proceeding for professional misconduct, incompetence or incapacity, or any similar proceeding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iii. A finding of professional negligence or malpractice in any jurisdiction.
 - iv. A refusal by any body responsible for the regulation of a health profession in any jurisdiction to register the member.
 - v. Whether the member was not in good standing at the time he or she ceased being registered with a body responsible for the regulation of another profession in Ontario or of any regulated profession in another jurisdiction.
 - vi. Any other event that would provide reasonable grounds for the belief that the member will not practise kinesiology in a safe and professional manner.
 2. The member shall provide the College with written details about any finding of guilt relating to any offence as soon as possible after receiving notice of the finding, but not later than 30 days after receiving the notice.
 3. A member who holds a certificate of registration listed in Column 1 of the Table to this section,
 - i. shall only use a title listed in Column 2 opposite the certificate of registration, and
 - ii. shall only use the designation listed in Column 3 opposite the certificate of registration.
 4. Immediately prior to the member's resignation, or to the suspension, revocation or expiry of the member's certificate of registration, the member shall return his or her certificate of registration to the Registrar.
 5. The member shall only practise in the areas of kinesiology in which the member has knowledge, skill and judgment. O. Reg. 401/12, s. 4.

TABLE

Item	Column 1 Certificate of Registration	Column 2 Title	Column 3 Designation
1.	General	Kinesiologist registered in the General Class	R. Kin
2.	Inactive	Kinesiologist registered in the Inactive Class	R. Kin (Inactive)
3.	Emergency	Kinesiologist registered in the Emergency Class	R. Kin (Emerg)

Appendix B – General Regulation and Emergency Certificate

O. Reg. 401/12, s. 4, Table; O. Reg. 284/23, s. 2.

Registration requirements, general class

5. (1) An applicant for the issuance of a general certificate of registration must,

(a) either,

- (i) have graduated from a program in kinesiology that was offered at the bachelor level at an Ontario university and which was at least four years in duration, or
- (ii) have successfully completed a program which a panel of the Registration Committee considers to be substantially equivalent to a program referred to in subclause (i);

(b) have successfully completed the registration examination set by Council pursuant to section 10;

(c) have successfully completed, no earlier than 12 months prior to the date of his or her application, the jurisprudence course that was set or approved by Council; and

(d) provide either,

- (i) proof of professional liability insurance coverage in the amount and in the form as required under the by-laws, or
- (ii) an undertaking to the College that he or she will provide proof of the coverage referred to in subclause (i) within 30 days of being registered. O. Reg. 401/12, s. 5 (1).

(2) The requirement in clause (1) (b) shall not be considered to be met unless the applicant successfully completed that requirement no earlier than 12 months immediately before the date on which the applicant met all of the other requirements for the issuance of a general certificate of registration. O. Reg. 401/12, s. 5 (2).

(3) The requirements in clauses (1) (a), (b) and (c) are non-exemptible. O. Reg. 401/12, s. 5 (3).

Transitional

6. (1) For the first 36 months after the day this Regulation comes into force, clause 5 (1) (b) does not apply in respect of an application for a general certificate of registration where the applicant who made the application had been practising the profession before this Regulation came into force. O. Reg. 401/12, s. 6 (1).

(2) It is an additional requirement for a general certificate of registration that an applicant described in subsection (1),

- (a) have practised the profession in Canada during each of any three years before the coming into force of this Regulation;
- (b) have practised the profession for at least 2,000 hours during the three years mentioned in clause (a); and
- (c) have practised the profession for at least 1,500 hours during the three years immediately prior to the date of the applicant's application. O. Reg. 401/12, s. 6 (2).

Terms, conditions and limitations, general class

7. (1) Every general certificate of registration is subject to the following terms, conditions and limitations:

- 1. The member shall maintain professional liability insurance in the amount and in the form as required under the by-laws and, if the member no longer maintains such insurance, the member shall notify the College in writing within two days, including notice of the date on which the insurance was terminated and the reasons why the insurance was terminated.
- 2. The member must practise the profession for at least 1,500 hours during every three-year period where the first three-year period begins on the first September 1 following the day that the member is issued a general certificate of registration and each subsequent three-year period begins on the first anniversary of the commencement of the previous period. O. Reg. 401/12, s. 7 (1).

(2) If a member fails to meet the term, condition and limitation described in paragraph 2 of subsection (1), the Registrar shall refer the member to the Quality Assurance Committee for a peer and practice review. O. Reg. 401/12, s. 7 (2).

Labour mobility, general class

8. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a general certificate of registration, the applicant is deemed to have met the requirements set out in clauses 5 (1) (a) and (b) and subsection 5 (2) of this Regulation. O. Reg. 401/12, s. 8 (1).

(2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a kinesiologist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 401/12, s. 8 (2).

(3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of kinesiology to the extent that would be permitted by a general

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certificate of registration at any time in the three years immediately before the date of that applicant's application, it is a non-exemptible requirement that the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. O. Reg. 401/12, s. 8 (3).

(4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 3 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 401/12, s. 8 (4).

(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 401/12, s. 8 (5).

Registration requirements, inactive class

9. (1) The following are non-exemptible registration requirements for an inactive certificate of registration:

1. The applicant,
 - i. must be a member holding a general certificate of registration, and
 - ii. must provide an undertaking to the College in a form satisfactory to the Registrar in which the applicant undertakes to comply with the conditions set out in subsection (2).
2. The applicant must not be in default of any fee, penalty or other amount owing to the College.
3. The applicant must have provided the College with any information that it has required of the applicant.
4. The applicant must be in compliance with any outstanding requirements of the College's Quality Assurance Committee or any outstanding orders or requirements of the Council, Executive Committee, Inquiries, Complaints and Reports Committee, Discipline Committee and Fitness to Practise Committee. O. Reg. 401/12, s. 9 (1).

(2) It is a condition of an inactive certificate of registration that the member shall not,

- (a) engage in providing direct patient care;
- (b) use any title or designation other than what is specified for an inactive certificate of registration in the Table to section 4;
- (c) supervise the practice of the profession; or
- (d) make any claim or representation to having any competence in the profession. O. Reg. 401/12, s. 9 (2).

(3) A member who holds an inactive certificate of registration may be reissued a general certificate of registration if the member,

- (a) applies in writing to the Registrar for reinstatement;
- (b) pays any fee, penalty or other amount owed to the College;
- (c) provides the College with any information that it has required of the member; and
- (d) satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding a general certificate of registration. O. Reg. 401/12, s. 9 (3).

Emergency class

9.1 (1) The following are non-exemptible registration requirements for an emergency certificate of registration:

1. The Minister must have requested that the College initiate registrations under this class based on the Minister's opinion that emergency circumstances call for it or the Council must have determined, after taking into account all of the relevant circumstances that impact the ability of applicants to meet the ordinary registration requirements, that there are emergency circumstances and that it is in the public interest that the College issue emergency certificates of registration.
2. The applicant must satisfy the registration requirements set out in clauses 5 (1) (a), (c), and (d).
3. The applicant must have either,
 - i. satisfied the program requirements described in clause 5 (1) (a) no more than two years prior to the date of application for the emergency certificate of registration, or
 - ii. practised the profession of kinesiology for at least 1500 hours during the three years immediately prior to the date of the application for the emergency certificate of registration. O. Reg. 284/23, s. 3.

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(2) An applicant who has failed the registration examination set by Council under section 10 on their third attempt is not eligible for an emergency certificate unless the applicant has successfully completed another program which satisfies the requirements in clause 5 (1) (a). O. Reg. 284/23, s. 3.

(3) Every emergency certificate of registration is subject to the following terms, conditions, and limitations:

1. The member shall practise kinesiology only under the supervision of a holder of a general class certificate of registration whose certificate is not subject to additional terms, conditions and limitations and who is in good standing.
2. The member shall, at all times when providing kinesiology services, identify themselves as practising under supervision.
3. The member must satisfy the professional liability insurance requirements set out in paragraph 1 of subsection 7 (1).
4. The Registrar may revoke the certificate at any time where the Registrar is satisfied that it is in the public interest to do so based on the circumstances of the particular case.
5. Unless another period of less than one year is stated on the certificate, the certificate expires at the end of the registration year under the College by-laws, unless it is renewed.
6. Unless another period of less than one year is stated on the certificate, a renewed emergency certificate of registration expires one year after it is issued, unless it is renewed again.
7. Despite paragraphs 5 and 6, an emergency certificate of registration expires 90 days after the date the Council determines that emergency circumstances no longer exist even where the certificate would otherwise expire before or after that time. O. Reg. 284/23, s. 3.

(4) A member who holds, or who held in the previous six months, an emergency certificate of registration may be issued a general certificate of registration despite not having met the requirements set out in clause 5 (1) (b) and subsection 5 (2), if the member,

- (a) applies for the general certificate of registration;
- (b) satisfies all other requirements for the general certificate of registration;
- (c) satisfies the registration requirement described in subparagraph 3 ii of subsection (1) of this section at the time of applying for the emergency certificate of registration;
- (d) provides satisfactory evidence based on their practice for a period of at least one year under the emergency certificate of registration that the member has the knowledge, skills and judgement to practise kinesiology competently; and
- (e) successfully completes a peer and practice assessment designed to assess the practice competencies of a holder of an emergency certificate of registration. O. Reg. 284/23, s. 3.

(5) The requirements in clauses (4) (b), (c), (d) and (e) are non-exemptible. O. Reg. 284/23, s. 3.

EXAMINATION

Requirement in setting examination

10. In setting the registration examinations to be taken by applicants for a general certificate of registration, Council shall specify the general areas of competency to be examined and shall ensure that the examinations provide a reliable and valid measure of a candidate's knowledge, skill and judgment in the practice of kinesiology in Ontario. O. Reg. 401/12, s. 10.

Frequency

11. The registration examination shall be offered at least once each year. O. Reg. 401/12, s. 11.

Eligibility

12. (1) An applicant is not eligible to take the registration examination on the applicant's first attempt if that examination is to be taken on a date that is later than the date that is one year from the date on which the applicant submitted his or her application, unless a panel of the Registration Committee is satisfied that exceptional circumstances prevented the applicant from taking the registration examination within this period. O. Reg. 401/12, s. 12 (1).

(2) An applicant is not eligible to take the registration examination, regardless as to whether it is on the applicant's first, second or third attempt, if the examination is to be taken on a date that is later than the date that is four years from the date on which the applicant submitted his or her application, unless a panel of the Registration Committee is satisfied that exceptional circumstances prevented the applicant from taking the registration examination within this period. O. Reg. 401/12, s. 12 (2).

(3) Where, pursuant to subsections (1) and (2), a panel of the Registration Committee permits an applicant to take the registration examination despite not having complied with the timelines set out in those subsections, the applicant is required to comply with any additional requirements that may be specified by the panel. O. Reg. 401/12, s. 12 (3).

Same

Appendix B – General Regulation and Emergency Certificate

13. An applicant is not eligible to take the registration examination unless he or she has satisfied the requirements set out in clauses 5 (1) (a) and (c) and is in compliance with the requirements set out in section 3. O. Reg. 401/12, s. 13.

Re-examination

14. (1) Subject to subsections (2) and (3), an applicant who fails the examination may apply for re-examination. O. Reg. 401/12, s. 14 (1).

(2) In every instance where an applicant has failed the examination twice, the applicant is not eligible to apply to take the examination again without first having satisfied a panel of the Registration Committee that they have successfully completed any remediation that may have been required by the panel. O. Reg. 401/12, s. 14 (2).

(3) In every instance where an applicant has failed the examination on their third attempt, the applicant is not eligible to apply to take the examination again until the applicant successfully completes another program which satisfies the requirements in clause 5 (1) (a). O. Reg. 401/12, s. 14 (3).

Appeal

15. (1) An applicant who fails a registration examination may appeal the results of the examination to a person or body set or approved by the Council that has no involvement in the administration of the registration examination. O. Reg. 401/12, s. 15 (1).

(2) On an appeal under subsection (1), the person or body may only consider the following questions:

1. Whether the process followed in administering the registration examination was appropriate.
2. Whether the applicant had an illness or personal emergency that is sufficient to warrant nullifying the results. O. Reg. 401/12, s. 15 (2).

(3) If the person or body hearing the appeal decides that the results of the examination should be nullified, the examination does not count against the applicant for any purpose, including the application of section 14. O. Reg. 401/12, s. 15 (3).

(4) In an appeal under subsection (1), the applicant shall not be given access to any information that would undermine the integrity of the examination process. O. Reg. 401/12, s. 15 (4).

SUSPENSIONS, ETC.**Suspensions, revocations and reinstatements**

16. (1) If a member fails to provide the College with information about the member as required under the by-laws or a completed annual renewal form within the time period set by the College,

- (a) the Registrar may give the member notice of intention to suspend the member's certificate of registration; and
- (b) the Registrar may suspend the member's certificate of registration if the member fails to provide the information within 30 days after the notice is given. O. Reg. 401/12, s. 16 (1).

(2) If the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that,

- (a) the former member has given the required information to the College;
- (b) the former member has paid any fees required under the by-laws for lifting the suspension;
- (c) the former member has paid any other outstanding fees required under the by-laws; and
- (d) the former member will be in compliance with any outstanding orders or requirements of the College's Quality Assurance Committee and Inquiries, Complaints and Reports Committee or any outstanding orders or requirements of the Council, Executive Committee, Discipline Committee and Fitness to Practise Committee as of the anticipated date on which the suspension is to be lifted. O. Reg. 401/12, s. 16 (2).

Suspension, lack of insurance

17. (1) If the Registrar becomes aware that a member no longer maintains professional liability insurance in the amount and in the form as required under the by-laws, the Registrar may immediately suspend the member's certificate of registration. O. Reg. 401/12, s. 17 (1).

(2) If the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the former member,

- (a) has professional liability insurance coverage in the amount and in the form as required under the by-laws;
- (b) has provided any information requested by the College;
- (c) has paid any fees required under the by-laws for lifting the suspension;
- (d) has paid any other outstanding fees required under the by-laws; and

Appendix B – General Regulation and Emergency Certificate

- (e) will be in compliance with any outstanding orders or requirements of the College’s Quality Assurance Committee and Inquiries, Complaints and Reports Committee or any outstanding orders or requirements of the Council, Executive Committee, Discipline Committee and Fitness to Practise Committee as of the anticipated date on which the suspension is to be lifted. O. Reg. 401/12, s. 17 (2).

Lifting of suspension for failure to pay fees, etc.

18. If the Registrar suspends the member’s certificate of registration under section 24 of the Health Professions Procedural Code for failing to pay a fee or penalty, the Registrar shall lift the suspension upon being satisfied that the former member,

- (a) has paid the fee or penalty in question;
- (b) has provided any information requested by the College;
- (c) has paid any fees required under the by-laws for lifting the suspension; and
- (d) will be in compliance with any outstanding orders or requirements of the College’s Quality Assurance Committee and Inquiries, Complaints and Reports Committee or any outstanding orders or requirements of the Council, Executive Committee, Discipline Committee and Fitness to Practise Committee as of the anticipated date on which the suspension is to be lifted. O. Reg. 401/12, s. 18.

Automatic revocation

19. If the Registrar suspends a member’s certificate of registration under section 16, 17 or 18 and the suspension has not been lifted, the certificate is revoked on the day that is three years after the day it was suspended. O. Reg. 401/12, s. 19.

Reinstatement

20. A former member whose certificate of registration was revoked under section 19 shall be reinstated by the Registrar if the former member,

- (a) has satisfied a panel of the Registration Committee that he or she has the knowledge, skill and judgment to practise the profession in a safe and professional manner;
- (b) has paid any fees required under the by-laws for lifting the reinstatement of the certificate of registration which he or she previously held; and
- (c) meets the requirements of subsection 16 (2) or 17 (2) or section 18, as appropriate, with all necessary modification. O. Reg. 401/12, s. 20.

21. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION). O. Reg. 401/12, s. 21.

Français

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College of
Massage
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Opening and Closing Emergency Class Registration

Summary:

The Registration Regulation gives the Minister of Health and CMTO's Council the authority to declare an emergency that requires the issuance and renewal of Emergency Class certificates of registration. This policy describes the types of emergency circumstances that would cause the Council to initiate the issuance of Emergency Class certificates.

Background:

Paragraph 7.2 (1) of the Registration Regulation under the *Massage Therapy Act, 1991* states, in part:

"The following are registration requirements for an emergency certificate of registration:

- 1. The Minister must have requested that the College initiate registrations under this class based on the Minister's opinion that emergency circumstances call for it or the Council must have determined, after taking into account all of the relevant circumstances that impact the ability of applicants to meet the ordinary registration requirements, that there are emergency circumstances, and that it is in the public interest that the College issue emergency certificates."*

Council will only initiate registration in the Emergency Class when emergency circumstances require it in the public interest. In making this determination, the Council may take into account all of the relevant circumstances to meet an identified public interest need.

Policy

Opening Emergency Class Registration

For the Council to initiate registration in the Emergency Class, there must be a current or imminent health human resources or healthcare system emergency for which:

- There are insufficient Registered Massage Therapists (RMTs) to meet an identified public need for Massage Therapy;
- There are insufficient RMTs to provide support to the healthcare system in ways other than the provision of Massage Therapy that are not inconsistent with the scope and competencies of the RMT; or
- In the opinion of Council, there is need for the immediate and rapid registration of Emergency Class registrants to meet an identified public interest need.

Continuous assessment:

Once registration in the Emergency Class registration has been opened, staff will monitor the situation and provide regular updates to Council. An assessment of the emergency circumstances will be made at each Council meeting while the Emergency Class is in effect.

Closing Emergency Class registration:

If the Council determines that the circumstances that led to the opening of Emergency Class registration are no longer in effect, the Council will pass a motion directing the Registrar to cease issuing Emergency Class certificates of registration. In compliance with section 7.4(3) of the Registration Regulation, all Emergency Class certificates will expire three months after the date of this motion.

Approved: September 18, 2023

EMERGENCY CLASS POLICY

Purpose

This policy describes the circumstances when the College can issue Emergency class certificates.

Scope

The Emergency class of Certificates can be ordered by the government or by College Council. The following policy only makes reference to emergency circumstances declared by College Council or the Executive Committee.

Policy Statement

The College has a duty to regulate midwifery in the public interest and to assist with ensuring public safety. The College is one of the key players in safeguarding the supply of registered midwives in the event of emergencies.

Under paragraph 1 of subsection 14.1(1) of the revised Registration Regulation¹, the Government can request that the College begin issuing Emergency certificates of registration.

The Emergency class provision also delegates the same authority to Council. In accordance with section 12(1) of the RHPA, the Executive Committee can also make this determination. In making this determination, the Council or Executive Committee may take into account all of the relevant circumstances including the presence of a significant interruption in the processing of applications for registration to meet an identified public interest need.

Triggering Emergency Class

For the Council or Executive Committee to trigger the Emergency class under the proposed Registration Regulation, it must be satisfied that *all the following criteria* be met:

1. There must be a current or imminent threat to provide supply of qualified midwives to service the needs of the public.
2. The public and/or the healthcare system is negatively impacted by these circumstances.
3. Immediate action is required to remedy the circumstances.

¹ This policy was developed based on the regulatory amendment submitted to the Ministry of Health on May 1, 2023. Legislative references to be finalized once the emergency provisions have been filed.

4. With the guidance of the Registration Committee, the Council or Executive Committee must be satisfied that all possible solutions have been exhausted and issuing certificates under the Emergency class is the best solution under the circumstances.
5. It would be in the public interest to trigger the Emergency class of certificate.

The Council or Executive Committee must be satisfied that these criteria are met before determining that “it is in the public interest to register midwives in the Emergency class to address emergency circumstances” as stipulated in the proposed Registration Regulation.

The College must take appropriate measure to inform the public of the emergency circumstances.

Continuous Assessment

Once the Emergency class is in force, the Registration Committee will monitor the situation and provide regular updates to Council. An assessment of the emergency circumstances will be made at each Council or Executive Committee meeting, whichever event occurs first, while the Emergency class is in effect.

Resolving an Emergency

If it is determined that the criteria set out above can no longer be met, the Registration Committee will recommend that the Council or Executive Committee pass a motion to direct the College to cease issuing Emergency certificates of registration.

Pursuant to clause iv of subsection 14.1(4), all Emergency certificates of registration will be revoked 90 days after Council’s determination that the emergency circumstances have ended.

References (Legislative and Other)

Regulated Health Professions Act, 1991

Ontario Regulation 508/22

Proposed Registration Regulation, as submitted to the Ministry of Health on June 14, 2023

Approved by: Council

Approval date: June 27, 2023

Implementation Date: September 1, 2023 (or when the emergency class comes into effect)

Last reviewed and revised: n/a



Resolution – Emergency Class Policy

Whereas, the General Regulation of the *Kinesiology Act, 2007* was amended in August 2023 to establish a new emergency class, that is contingent on Ministry of Health and/or the College determining there is an emergency circumstance that calls for the opening of class; and

Whereas, the College recognizes the need for a policy outlining the criteria for establishing an emergency circumstance to guide Council in decision-making, particularly when the Ministry of Health has not directly requested the College do so; and

Whereas, the development of such a policy is also necessary for maintaining transparency with the public and profession, including potential applicants; and

Whereas, the College recognizes the situation is new and emerging, and there may be further opportunities to reshape and define the policy; and

Whereas, the Registration Committee has recommended that the draft Emergency Class Policy be forwarded to Council for review and approval;

Therefore, be it resolved that Council approves the Emergency Class Policy.

Moved by: _____

Seconded by: _____

Date: December 4, 2023



Issue Note

Issue: Exam Administration and Development Contract
Prepared for: Council
Date: December 4, 2023

Purpose

Council is being asked to approve the signing of a new contract with the current service provider, Meazure Learning, which will include the entry-to-practice exam administration (i.e. exam sittings) and development of new exam items (i.e., questions) and forms over the next three years. This item is before Council in accordance with the College's Procurement Policy regarding a non-competitive procurement process.

Background

The College ensures that only competent and qualified individuals are registered to practice kinesiology in Ontario through the administration of a robust entry-to-practice program, which includes the entry-to-practice exam. Meazure Learning, the College's exam administrator, is responsible for overseeing and managing the logistics, processes, and execution of the exam. The existing contract for this service will expire in December 2024 and is renewed on a 3-year cycle.

The CKO entry-to-practice exam is based on the [Kinesiologist Core Competency Profile](#), which describes the minimum expectation of kinesiologists at the entry-to-practice level and what an entry level practitioner should know and be able to do on day one of the job. The Core Competency Profile is currently undergoing its first review since being developed in 2012. This review includes an update to the [CKO Exam Blueprint](#), which describes the structure and content categories of the exam. The project is anticipated to end in early March 2024.

With the anticipated changes to the Core Competency Profile and Exam Blueprint, all 1000+ questions in the item bank will need to be reviewed by the Item Writing Committee to determine if and where they fall within the updated Exam Blueprint. New exam items (i.e., questions) and exam forms will also need to be developed by the Item Writing Committee and Examination Committee, respectively.

Of the current forms:

- The newest exam forms developed with Meazure Learning (operating as Yardstick Assessment Strategies) were finalized in 2017;
- Four exam forms developed in 2013 have been retired due to potential outdated information;

- Meazure Learning recently recommended retiring two additional exam forms following a technical assessment;
- The College requires a more robust inventory of French language exam forms, as fewer of these forms were initially developed and there has been a steady request in recent years.

The challenges and delays faced by the COVID-19 pandemic in 2020 and 2021 hindered the College’s ability to allocate necessary resources for developing new exams. However, it also provided an extra window of time to continue using existing exams, as two exam sessions were postponed.

Current Status

The new Meazure Learning contract includes exam development, to commence in May 2024, and exam administration, beginning with the April 2025 session. The total amount over 3 years \$151,105; \$52,340 in 2024, \$70,165 in 2025, and \$28,600 in 2026.

Payment will be due in four equal quarterly installments each year:

- Year 1: Commencing on the Effective Date, four (4) equal quarterly installments of \$13,085.00;
- Year 2: Commencing on the first anniversary of the Effective Date, four (4) equal quarterly installments of \$17,541.25;
- Year 3: Commencing on the second anniversary of the Effective Date, four (4) equal quarterly installments of \$7,150.00.

Funds are already allocated in the budget for exam development to commence during the 2023-2024 fiscal year, and will be incorporated in the budget in future years. As the combined amount of the current contract exceeds \$100,000, it will require Council approval in accordance with the College’s Procurement Policy.

Procurement Approvals

\$100,000 up to but not including \$500,000	Open Competitive or	Registrar and one of President, Vice-President or such other person as Council may designate	Registrar
	Non-Competitive	Council	Registrar
over \$500,000	Open Competitive	Council	Council

A non-competitive procurement approach is being taken as permitted under Section 7.3 of the policy, which states: where a non-competitive procurement process is required, but no allowable exception exists, the College shall seek prior approval from the Registrar and the President.

Reasons to support this approach include continuity, expertise, and risk mitigation. Remaining with Meazure Learning will help maintain continuity as the existing contract draws to an end, ensuring that the entry examination process remains stable and reliable. The vendor also currently leads the

Kinesiology Core Competency Profile revalidation and Exam Blueprint update, which naturally transitions into item writing and exam development.

As the College's longstanding exam administrator, the vendor has a deep understanding of the organization's requirements and specific needs. The lead psychometrician has worked with the College in previous iterations of exam development, and currently oversees the technical evaluation of the existing exam forms and exam item bank. This evaluation includes an annual review of the statistical performance of College exam forms, exam reliability, exam validity, and recommendations for future sittings and exam development.

Overall outcomes with the vendor have been successful. Introducing a new vendor would inherently involve some elements of risk, such as potential service disruptions, quality issues, compatibility challenges and content security.

Recommendation

To approve the signing a new contract with the service provider, Meazure Learning, to continue to administer the CKO entry-to-practice examination and to develop new exam items and forms.

Decision for Council

The following are proposed options:

1. Approve the signing of the new contract with the service provider, Meazure Learning, to continue to administer the CKO entry-to-practice examination and to develop new exam items and forms in 2024, 2025, and 2026.
 2. Return the contract to Staff with specific questions for consideration.
-



Resolution- Approval of Vendor Exam Administration and Development Contract

Whereas, the College has a duty to ensure the secure and stable administration of the entry-to-practice examination, in accordance with its mandate of establishing the standards of competency for the profession; and

Whereas, the current service provider has been identified as the preferred provider for the College's ongoing entry-to-practice exam administration and exam development; and

Whereas, the procurement process for this contract is conducted under the non-competitive procurement process as outlined in the College's Procurement Policy and therefore requires Council approval;

Be it resolved, that Council approves the signing of a new contract with Meazure Learning for the administration of entry-to-practice exams, including exam sittings, and the development of new exam items and forms over the next three years; and

Be it further resolved, that Council authorizes the Registrar to execute the necessary documents and take all actions necessary to finalize and implement the contract with Meazure Learning.

Moved by:

Moved by: _____

Seconded by: _____

Date: December 4, 2023



Issue or Decision Note

Issue or Decision: Policy - Funding for Therapy/Counselling
Prepared for: Council
Date: December 4, 2023

Background:

Subsection 85.7(1) of the *Health Professions Procedural Code* (“the Code”, which is schedule 2 to the *Regulated Health Professions Act, 1991* (“RHPA, 1991”)) requires the College of Kinesiologists of Ontario (“the College”) to establish a program to provide funding for therapy and counselling for persons alleging sexual abuse by a member of the College while they were a patient. This program is administered by the College’s Patient Relations Committee (“the Committee”).

While many of the basic rules regarding funding are set out in the Code, the College has also developed a formal policy framework relating to the receipt and review of applications for funding by the Committee. This framework includes the following policy and supporting materials:

- Policy – Funding for Therapy and Counselling
- Application Form – Funding for Therapy and Counselling
- Counsellor/Therapist Information Form - Funding for Therapy and Counselling
- Frequently Asked Questions (FAQs) about Funding for Therapy and Counselling

These documents provide information to potential applicants for funding and formalize the Committee’s processes. All documents are available through the College’s website and on request.

One consideration that has arisen is how and when a funding recipient may be notified or updated as to when their eligibility would end.

The Code (s. 85.7 (5.2)) and O.Reg 59/94 under the *RHPA, 1991* set out the circumstances under which eligibility for funding ceases. O.Reg 59/94 specifies that the maximum amount of funding provided is the amount paid by the Ontario Health Insurance Plan (“OHIP”) for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist. The specific dollar amount is set as the amount that would be paid by OHIP as of the day the person becomes eligible for funding under subsection 85.7 (4) of the Code. O.Reg. 59/94, s. 1(b) establishes the maximum duration of eligibility, which is described as five years from:

“i) the day on which the person first received therapy or counselling for which funding is provided under subsection 85.7 (10) of the Code, or

ii) if funding is not provided under subsection 85.7 (10) of the Code, the day on which the person becomes eligible for funding under subsection 85.7 (4) of the Code.”

The *Policy – Funding for Therapy and Counselling* (“the Policy”) also describes situations in which the Committee may direct the cessation of eligibility in circumstances other than those set out in the Code s. 85.7 (5.2) and O.Reg. 59/94, including:

- “where the allegations of sexual abuse upon which the application for funding was based are found by a competent authority to be frivolous, vexatious, made in bad faith, or otherwise an abuse of process;
- where the application for funding or resulting payments are determined to have been based on information that is false, misleading, or fraudulent, or in similar circumstances; or
- in circumstances where it is necessary to do so in order to maintain the integrity of the funding program and its underlying purpose and principles.”

The Policy states that the applicant or recipient of funding will be given reasonable opportunity to make written submissions prior to the Committee directing cessation of eligibility. The Policy does not currently establish or prescribe any notification or opportunity for submissions prior to the cessation of eligibility for reasons as set out in s. 85.7 (5.2) of the Code or O.Reg. 59/94.

Issue for Consideration:

Proposed amendments to the Policy to incorporate recipient notification prior to cessation of eligibility for reasons set out in s. 85.7 (5.2) of the Code or O.Reg. 59/94.

Analysis:

The Policy was reviewed through the lens of the College’s Policy and Material Development and Review Framework. Considerations included a survey of other regulatory Colleges to determine best practices regarding notification prior to cessation of eligibility. For this Environmental Scan, areas of focus/comparison are as follows:

- Notification of cessation of eligibility as set out in the RHPA, 1991, the Health Professions Procedural Code and/or any Regulation(s)

Information obtained from the environmental scan is summarized below:

- 15 regulatory colleges/other regulatory bodies reported not having (or appeared to not have) any policy or internal process regarding notification of cessation of eligibility;
- 2 regulatory colleges reported providing annual updates (CPSO, RCDSO);
- 2 regulatory college (College of Physiotherapists, College of Dietitians) reported providing updates on a regular, unspecified basis;
- 3 regulatory colleges (College of Registered Psychotherapists, College of Psychologists, College of Naturopaths) reported providing updates on an as needed basis (for example, when the recipient approaches the time or funding limits set out in legislation or regulation

- 1 regulatory college (College of Optometrists of Ontario) reported providing updates twice per year
- 1 regulatory college (College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario) reported providing annual updates regarding the number of years remaining and quarterly updates regarding the amount of funding.
- 2 regulatory colleges reported providing notification as follows:
 - Ontario College of Pharmacists: notification once the recipient has reached 80% of the funding limit
 - College of Massage Therapists of Ontario: notification once \$2000 or less is remaining, or when 3 months of eligibility are remaining.

In addition to the environmental scan, the College also considered the following:

- Stakeholders (funding recipients, therapy/counselling providers);
- The effectiveness of any proposed amendment(s) to the Policy
- Unintended effects of any proposed amendment(s);
- The equity impact of any proposed amendment(s);
- The cost that may be associated with implementing the proposed amendment(s);
- The feasibility of any proposed amendment(s); and
- The acceptability of any proposed amendment(s).

From this review and consideration of the Policy, the following changes are proposed (underlined red text used to highlight proposed changes):

Proposed Amendment	Rationale
<p>A recipient of funding for therapy/counselling remains eligible for funding until</p> <ul style="list-style-type: none"> • the maximum funding amount is reached, • the maximum time limit for funding has expired, or • the circumstances established by regulation are met . <p><u>The College may provide the Committee and funding recipients with updates regarding the funding program and/or individual funding. Such updates will be made in a form and manner and at intervals specified by the College.</u></p> <p><u>Recipients shall be notified, in a form and manner specified by the College, regarding pending cessation of eligibility on the earlier of:</u></p>	<p>It is proposed that wording be inserted to clearly establish that the Patient Relations Committee and funding recipient(s) may receive updates regarding funding program status or, in the case of recipients, the status of their individual funding.</p> <p>It is also proposed that wording be inserted to specify when recipients shall be given advance notice of cessation of eligibility for reasons set out in the Code and/or O.Reg. 59/94, which are maximum funding or time being reached, or the circumstances established in regulation are met. It is proposed that notification would be triggered on the earlier of 20% of the total funding remaining (which may vary depending on the amount of funds available to the recipient) or 20% of the maximum time limit remaining (12 months before the maximum time limit would expire).</p> <p>The intent of these proposed changes is to promote increased transparency regarding the</p>

<ul style="list-style-type: none"> • <u>the day on which the amount of funding available to the recipient is less than or equal to 20% of the total funding available; or</u> • <u>twelve months before the date on which the maximum time limit for funding would expire.</u> 	<p>funding program and ensure that recipients and the Committee will be informed of any pending cessation(s) of eligibility for funding for reasons set out in the Code and/or O.Reg. 59/94.</p>
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The Patient Relations Committee did not propose additional amendments to the Policy and referred the Policy to Council for consideration and approval.

Public Interest Rationale

Clear criteria for notification of recipients prior to cessation of eligibility for funding for therapy/counselling for a patient who has been or has alleged sexual abuse by a kinesiologist would serve the public interest by:

- Ensuring that funding recipients may have an opportunity to make informed decisions regarding the treatment, care and services they are receiving;
- Maintaining public trust in the College's measures to support patients who have reported sexual abuse by a kinesiologist; and
- Ensuring that the College's funding program for therapy and counselling for sexual abuse is administered in a manner consistent with the College's values, including operating in a fair and open manner.

Decision for Council:

1. Approve the amended Policy – Funding for Therapy/Counselling for Sexual Abuse; or
2. Return the Policy back to staff with specific questions for consideration.

Appendices:

Appendix A: Revised –Policy – Funding for Therapy and Counselling - Tracked Changes

Policy – Funding for Therapy and Counselling

Overview

In accordance with section 85.7 of the Health Professions Procedural Code (“Code”), the College of Kinesiologists of Ontario (“College”) has established a program to provide funding for therapy and counselling for individuals alleging sexual abuse or misconduct by a kinesiologist and for such other purposes as may be prescribed by regulation¹. The funding program is administered by the College’s Patient Relations Committee (“Committee”).

This policy, in conjunction with the Code and regulations, sets out the principles and procedure by which the Committee shall

- receive applications for funding for therapy/counselling from applicants;
- review applications and decide on eligibility for funding; and
- administer the payment of funds by the College to the recipient therapist/counsellor.

This policy is to be construed in accordance with the provisions of the Code governing administration of funding for therapy and counselling and with any applicable regulations.

Principles

The College has adopted a set of principles for dealing with concerns about sexual abuse by a kinesiologist. These principles provide, in part, that the College will

- treat individuals reporting concerns about sexual abuse by a kinesiologist with sensitivity and respect;
- provide such individuals with guidance and support; and
- expedite its processes for dealing with such concerns.

These principles apply equally to and shall guide the process for the review of applications for funding for therapy/counselling by the College and Committee.

Eligibility for Funding

Applicant

An applicant is eligible for funding if it is alleged in a complaint or report that the applicant was sexually abused by a kinesiologist while the applicant was a patient of the kinesiologist². Sexual

¹ As of January 2019, no additional purposes have been prescribed.

² Code, s. 85.7(4)

abuse is a broadly defined term in the Code, and includes a variety of sexual misconduct by a kinesiologist³.

An allegation of sexual abuse does not have to have been proven in a disciplinary proceeding in order for an applicant to be eligible for funding; nor is an applicant required to testify or appear in a proceeding in order to receive funding⁴. An applicant is not required to undergo a psychological assessment prior to receiving funding⁵. Neither is eligibility for funding decided based on the specific nature of the sexual abuse that is alleged by the applicant.

Provided that the applicant has alleged sexual misconduct by a kinesiologist that would constitute sexual abuse, which took place while the applicant was a patient, the applicant is presumptively eligible for funding. It is not the role of the Committee in reviewing an application for funding to conduct an investigation of or make decisions with respect to the underlying allegations of sexual abuse.

Therapist/Counsellor

An applicant is free to select their own therapist/counsellor; however, in order to be eligible for funding, the therapist/counsellor

- must not be a person with whom the applicant has any family relationship;
- must not have been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of similar nature⁶.

The Committee may also consider whether the applicant and therapist/counsellor may be in a dual relationship that could constitute a potential conflict of interest, such as a close personal, financial, or other relationship.

Non-Regulated Practitioners

The College strongly recommends that applicants select a regulated health professional for provision of their therapy/counselling; however, this is not a requirement for funding.

Where an applicant has selected a non-regulated practitioner, the applicant must submit a signed acknowledgement, in the form provided by the College, that the therapist/counsellor is not a regulated professional and therefore not subject to oversight and discipline by a regulatory authority.

Process for Application

Required Information

An applicant for funding must submit to the College a completed and signed application, in the form provided by the College.

³ Code, s. 1(3)

⁴ Code, s. 85.7(13)

⁵ Code, s. 85.7(6)

⁶ Code, s. 85.7(7)

The therapist/counsellor shall submit to the College a completed and signed information form, as provided by the College. This may be provided at the same time as or following receipt of the application from the applicant. The applicant does not have to have selected a therapist/counsellor at the time of application; however, eligibility for funding can only be decided on with respect to a specific therapist/counsellor.

Access to Therapy/Counselling Information

The College and Committee require access to some basic information regarding the provision of therapy/counselling services in order to properly decide on eligibility for and administer payment of funding. This information includes:

- The fees/amounts charged by the therapist/counsellor for services.
- The dates and duration of services.
- Confirmation from the applicant and therapist/counsellor that the funds are being applied solely towards therapy/counselling for the applicant in relation to sexual misconduct by a kinesiologist.

The College and Committee are unable to process requests for funding without this information. The College and Committee do not require any information regarding the specific content of therapy/counselling sessions for the purpose of deciding on eligibility or administering payment.

Timelines

In keeping with the College's principles for dealing with concerns related to sexual abuse, the Committee shall endeavour to complete its review of applications for funding on an expedited basis following receipt of all required information from the applicant and therapist/counsellor.

The Committee endeavours to complete its review and to communicate its decision to applicants within fourteen (14) days of receipt of all required information. Although the Committee may not be able to meet this timeframe in all cases, it shall ensure that all reviews and decisions are made within a reasonable period of time following receipt of the application for funding.

If the Committee is unable to complete its review and render a decision within 14 days, it shall notify the applicant of the reasons for the delay and provide an estimated timeframe for completion.

Decisions Regarding Funding

Upon completing its review, the Committee shall communicate its decision regarding eligibility to the applicant in writing.

Where the Committee decides that the applicant is eligible for funding, the Committee shall communicate any limitations associated with that funding, including the maximum amount and time limits set out by legislation.

Where the Committee decides that an applicant is not eligible for funding, the Committee shall provide written reasons for its decision.

Limitations

Maximum Funding

The maximum amount of funding that may be provided to an applicant in respect of a case of sexual abuse is defined by regulation as:

- the amount that the Ontario Health Insurance Plan would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist on the day the applicant becomes eligible for funding⁷.

As of 2019, the maximum amount of funding available to an applicant is approximately \$16,000.

Time Limit for Funding

The maximum time period in which funding may be provided to an applicant in respect of a case of sexual abuse is defined by regulation as five years from:

- the day on which the applicant first received funding, or
- where funding is not provided, the day on which the person becomes eligible for funding⁸.

Retroactive Funding

Applications for retroactive funding are permitted, provided that

- the therapy/counselling was received after the incidents of sexual misconduct by the kinesiologist specific to the application are alleged to have occurred; and
- the application for funding would otherwise satisfy the criteria for eligibility.

As the College is prohibited from making payment directly to an applicant, retroactive funding can only be provided where the original therapist agrees to reimburse the applicant directly and then receive payment from the College.

Other Funding Sources

College funding cannot be used to pay for services that were already covered by another source of funding. Accordingly, where therapy/counselling services are being paid for by a government or private insurance provider, the funding provided by the College shall be adjusted to reflect these amounts⁹.

Applicants and therapists/counsellors are expected to first submit claims for payment in respect of therapy/counselling services to government programs or private insurance providers prior to submitting any uncovered amounts to the College for reimbursement.

⁷ O. Reg. 59/94, s. 1(a)

⁸ O. Reg. 59/94, s. 1(b)

⁹ Code s.85.7(11)

Reasonable and Customary Fees

The Committee respects the freedom of an applicant to choose their preferred therapist/counsellor; however, therapists/counsellors should not charge increased or excessive fees to an applicant as a result of the presence of funding from the College.

Accordingly, where the Committee concludes that the fees charged by a therapist/counsellor are excessive or fall outside of a reasonable range of fees, the Committee may reduce the amount paid to the therapist/counsellor for a given invoice to reflect the reasonable and customary fees charged by a practitioner with similar qualifications in the same community for similar services.

Cessation of Eligibility

A recipient of funding for therapy/counselling remains eligible for funding until

- the maximum funding amount is reached,
- the maximum time limit for funding has expired, or
- the circumstances established by regulation are met¹⁰.

The College may provide the Committee and funding recipients with updates regarding the funding program and/or individual funding. Such updates will be made in a form and manner and at intervals specified by the College.

Recipients shall be notified, in a manner specified by the College, regarding pending cessation of eligibility on the earlier of:

- the day on which the amount of funding available to the recipient is less than or equal to 20% of the total funding available; or
- twelve months before the date on which the maximum time limit for funding would expire.

Notwithstanding the above, the Committee may review a recipient's ongoing eligibility for funding and may direct the cessation of such eligibility

- where the allegations of sexual abuse upon which the application for funding was based are found by a competent authority to be frivolous, vexatious, made in bad faith, or otherwise an abuse of process;
- where the application for funding or resulting payments are determined to have been based on information that is false, misleading, or fraudulent, or in similar circumstances; or
- in circumstances where it is necessary to do so in order to maintain the integrity of the funding program and its underlying purpose and principles.

The Committee shall provide the applicant with a reasonable opportunity to make written submissions prior to directing the cessation of eligibility and shall provide written reasons for its decision.

Where the Committee directs the cessation of a recipient's eligibility, no further payments shall be made by the College in respect of that application. The College shall not seek reimbursement of

¹⁰ Code, s. 85.7(5.2); As of January 2019, there are no additional circumstances established.

amounts paid through the funding program, save where such payments were made as a result of deliberately misleading, fraudulent, or similarly unlawful activity by the applicant or therapist/counsellor.

Legislative References

1. *Health Professions Procedural Code*, being Schedule II of the *Regulated Health Professions Act, 1991*, S.O. 1991, c. 18, s. 85.7
2. Ontario Regulation 59/94: “Funding for Therapy or Counselling for Patients Sexually Abused by Members”, made under the *Regulated Health Professions Act, 1991*, S.O. 1991, c. 18



Resolution– Policy – Funding for Sexual Abuse Therapy and Counselling

Whereas the College of Kinesiologists of Ontario (“the College”) is required by subsection 85.7(1) of the *Health Professions Procedural Code* (“the Code”) to establish a program to provide funding for therapy and counselling for persons alleging sexual abuse by a member while they were a patient; and

Whereas the program for funding is administered by the Patient Relations Committee (“Committee”) in accordance with the requirements of the Code; and

Whereas it is desirable to have a clearly documented policy that includes clear direction regarding notification of recipients of the status of their funding; and

Whereas amendments have been proposed to the College’s *Policy – Funding for Therapy and Counselling* (“the Policy”) to clarify expectations around notification of status of funding; and

Whereas the Patient Relations Committee has reviewed the proposed amendments to the Policy and has recommended the amended Policy to Council for approval;

Therefore, be it resolved that Council approves the amended *Policy - Funding for Therapy and Counselling*.

Moved by: _____

Seconded by: _____

Date: December 4, 2023

College of Kinesiologists of Ontario - Revenue Projections & Operating Cost Estimation - 2023/2024 - 2026/2027					
108					
	Approved Budget	Revised Budget			
	2023/2024	2023/2024	2024/2025	2025/2026	2026/2027
Revenues			(\$)	(\$)	(\$)
Jurisprudence Fee	42,325	42,325	43,482	44,351	44,929
Application Fee	90,000	90,000	91,500	99,300	100,500
Examination Fee	218,250	218,250	225,450	227,250	229,500
Registration Fees	2,030,700	2,030,700	2,074,363	2,122,350	2,155,675
Interest At Bank	25,000	25,000	15,000	18,000	20,000
Other Income					
Total Revenue Projections	2,406,275	2,406,275	2,449,795	2,511,251	2,550,604
	Proposed	Revised			
Operating Expenses	2023/2024 \$	Budget	2024/2025 \$	2025/2026 \$	2026/2027 \$
		2023/2024			
Council and Committees	65,575	65,575	67,500	71,300	75,100
Professional Services	119,000	161,500	75,000	72,000	74,000
Communications/Media	153,000	153,000	109,100	114,200	119,300
Rent and Facilities Costs	244,200	244,200	123,000	159,000	164,500
Office and General	130,450	130,450	141,800	144,950	148,100
Staff Salaries/Benefits & Stat Remittances	1,257,500	1,231,000	1,320,375	1,386,394	1,455,713
Registration Costs	292,687	292,687	186,325	190,630	196,200
Quality Assurance Costs	98,395	82,395	41,850	35,000	44,700
Professional Conduct	84,500	84,500	80,250	83,000	85,750
TOTAL OPERATING COSTS	2,445,307	2,445,307	2,145,200	2,256,474	2,363,363
SURPLUS (DEFICIT)	(39,032)	(39,032)	304,595	254,777	187,241
Reserve Fund Contribution					
Notes					
Professional Services					
Registrar's Performance Evaluation tool and revision of policies relating to Registrar					
Bookkeeping Services: From Salaries & Benefits Budget to Professional Services Budget					
Communications/Media					
Reallocation of \$50,000 from Public Awareness Campaign line item to Member Communications					

Resolution: Approval of Revised Budget for fiscal year 2023-2024

Whereas the 2023/2024 Budget was presented to Council and duly approved at the June 2023 Council meeting; and

Whereas the College has proposed funds be reallocated from a delayed project in the Quality Assurance budget to the Professional Services budget for the engagement of a consultant to develop policies and tools for the Registrar's Performance Evaluation; and

Whereas the College has proposed funds be reallocated within the Communications/Media budget from the Public Awareness Campaign towards Member Communications for a website revamp project; and

Whereas the College has proposed funds be reallocated from the Staff Salaries/Benefits and Stat Remittances budget towards the Professional Services budget for bookkeeping services; and

Whereas the Planning and Finance Committee have reviewed the entire revised budget, raised questions and gained a full understanding of the risks faced by the College, the medium-term financial outlook for the College and detailed proposed expenditures;

Therefore, be it resolved that Council approves the revised budget for the current fiscal year 2023-2024.

Moved by:

Seconded by:

Date: December 4, 2023



Issue or Decision Note

Issue or Decision: Restricted funds for therapy and counselling for victims of sexual abuse
Prepared for: Council
Date: December 4, 2023

Background:

Subsection 85.7(1) of the *Health Professions Procedural Code* (“the Code”, which is schedule 2 to the *Regulated Health Professions Act, 1991* (“RHPA, 1991”)) requires the College of Kinesiologists of Ontario (“the College”) to establish a program to provide funding for therapy and counselling for persons alleging sexual abuse by a member of the College while they were a patient. This program is administered by the College’s Patient Relations Committee (“the Committee”).

S. 85.7 of the Code sets out the general parameters for these funds (including but not limited to eligibility, timing and payment). The College has developed an operational framework relating to the maintenance of the fund. Funding eligibility may continue until the earlier of 5 years from the date on which the person received therapy or counselling for which funding was provided, or the date the person becomes eligible for funding. The maximum amount payable is the amount that would be covered by the Ontario Health Insurance Plan (OHIP) for 200 half-hour sessions of individual outpatient psychotherapy delivered by a psychiatrist on the date the patient/client became eligible to receive funding.

Money to be used for these purposes is held by the College as a restricted fund. This restricted fund is monitored to ensure the College meets its legislated requirements. Contributions and withdrawals may be made as required with the goal of ensuring that the College’s funding for victims of sexual abuse is sustainable and viable.

Issue for Consideration:

A proposed withdrawal from the reserve fund for therapy and counselling for patients/clients who are victims of sexual abuse by a kinesiologist.

Analysis:

There is currently one open claim, which was approved by the Committee in 2020. Eligibility for funds under this claim will cease on the earlier of August 2024 or the date on which \$16,060 is paid towards this claim.

The most recent motion to Council, at the June 26, 2023 Council meeting, was to withdraw \$11,830 from the reserve fund. This amount represented an accumulation of funding from previous years.

In Fiscal Year 2022/2023, \$3,820.00 has been paid from the restricted fund towards this claim. The Draft Audited Financial Statement can only recognize the amount that was paid for the fiscal year under review and therefore the \$11,830 that was approved by Council on June 26, 2023 should only include the year in review i.e. the amount of \$3,820.

Council is being asked to approve the withdrawal of \$3,820 for the fiscal year 2022/23 and not the entire \$11,830 as part of this amount belongs to prior years.

Public Interest Rationale:

The proposed withdrawal of restricted funds for therapy or counselling for sexual abuse is intended to:

- 1) Mitigate risks to the College's ability to effectively fulfill its mandate to protect the public;
- 2) Ensure that the College is able to provide ongoing, sustainable support to patients/clients who are victims of sexual abuse by their kinesiologist; and
- 3) Demonstrate the College's compliance with best practices and requirements in financial management and reporting.

Decision for Council:

1. Approve the withdrawal of \$3,820 in the fiscal year 2022/2023, of the fund for therapy and counselling for victims of sexual abuse.
-

Resolution: Reserve fund withdrawal - fund for therapy and counselling for patients/clients who have reported sexual abuse by a member of the College

MOTION

Whereas maintaining the internally restricted reserve fund dedicated to therapy and counselling for patients/clients who have reported sexual abuse by a member of the College is required to mitigate the risk of unpredicted increases or expenditures in the future; and

Whereas a contribution of \$11,830 to the fund was approved by Council on June 26, 2023; and

Whereas in Fiscal Year 2022/2023, \$3,820 has been paid from the fund;

Therefore, be it resolved that Council approves the withdrawal of \$3,820 from the reserve fund for therapy and counselling for the fiscal year 2022/23.

Moved by:

Seconded by:

Date: December 4, 2023



Decision Note

Decision: Executive Committee Terms of Reference
Prepared for: Council
Date: December 4, 2023

Background

The Executive Committee (“the Committee”) is a statutory committee under s. 10(1) of the *Health Professions Procedural Code* (“the Code”), which is Schedule 2 to the *Regulated Health Professions Act, 1991* (“RHPA, 1991”). As set out in s.12(1) of the Code, the Committee has the authority to exercise all the powers of the Council, other than the power to make, amend or revoke a regulation or by-law. The Committee may exercise its powers between meetings of Council with respect to matters that require immediate attention. The Code (s.12(2)) requires the Committee to report on its actions under s.12(1) to Council at the Council’s next meeting.

As per s. 10(3) of the Code, the composition of the Committee is set out the College’s By-law 13.01. Committee members are elected as Officers of the College as per By-laws 5 (“Officers – General”) and 7 (“Duties of Officers”) in a manner consistent with By-law 6 (“Election of Officers”) and Schedule 1 to the by-laws (“Process for Election of Officers”).

Proposed governance reforms and modernization initiatives, including those outlined in the College of Nurses of Ontario’s Vision 2020 and proposals made by the Provincial Government, have included elimination of the Executive Committee as a statutory committee. While the College of Kinesiologists of Ontario has expressed broad support for these governance reforms, it has not expressed support for the elimination of the Executive Committee. Of note, the required amendments to the *RHPA, 1991* have not yet been put forward, nor is there a known timeline for such amendments to be made. The College expects that the Executive Committee may remain a statutory Committee at this time. Currently, the College’s Executive Committee has been called upon to address matters of human resources.

On June 29, 2020, Council directed that the College review and revise the Executive Committee Terms of Reference (“TOR”) in the interests of promoting transparency. As it was noted that the TOR had not been previously approved by Council, a draft TOR was presented to Council on September 14, 2020 for consideration. At this time, the draft TOR was referred for further consideration of the following:

- The term of office of Executive Committee members. Council asked that the College review approaches of other regulators.

The results of additional research regarding the draft TOR were presented to Council on December 7, 2020. At the December 7, 2020 meeting, Council provided additional feedback regarding the draft TOR, including:

- That the three (3) year maximum term limit set out in section 8) Term of Office of Committee Members may be overly restrictive and may impede continuity and succession planning;
- That further consideration be given to cooling-off periods; and
- That additional research should be conducted to determine whether the TOR should include a role for the past President of Council.

Issue for consideration

Review of the TOR for the Executive Committee, last presented to Council on December 7, 2020, including consideration of additional research regarding Executive Committee term limits, cooling-off periods and the potential of including a role for the past President of Council.

Analysis

Consideration of the TOR was done in a manner consistent with the College's *Policy and Material Development and Review Framework*. The College conducted an environmental scan of the relevant by-laws and Terms of Reference of 25 other Health Professional Regulatory Colleges. A summary of the results of this environmental scan follows:

Executive Committee/Officer Term Limits:

- 14 Colleges did not appear to have any specific maximum term limit for Executive Committee members
 - 1 College specified that service of the President as Chair of the Executive is an exception to a limit of 3 consecutive years of service as a Committee Chair.
- 4 Colleges were found to have a maximum term limit of 2 consecutive terms
- 5 Colleges were found to have a maximum term limit of 3 consecutive terms
- 1 College was found to have a maximum term limit of 9 consecutive years on any one committee
- 1 College was found to have a maximum term limit of 6 consecutive years
- The College of Kinesiologist's By-law 5.03 establishes the maximum term in one office to be three (3) consecutive full-year terms.

Cooling-Off Periods:

- No Colleges were found to have explicit distinct cooling-off periods in place for the Executive Committee or Officers.
- The CKO by-laws do not currently prescribe a cooling-off period for Officers.

Role of Past President:

- 22 Colleges did not appear to have a specified role for the past President as a member of the Executive Committee
- 2 Colleges were found to have by-laws specifying that the past President may serve on the Executive Committee as a non-voting ex-officio member
- 1 College’s Executive Committee Terms of Reference was found to include a Past President as a member of the Executive Committee. A footnote in these Terms of Reference specified that the Past President role may be filled by a past president other than the most recent Past President. This Terms of Reference footnote also stated that the Past President serving on the Executive Committee is “[...]preferably one who is still on Council.”

As a result of the review, the following is proposed in response to Council’s specific questions regarding the TOR:

Council Discussion Point	Relevant Section of TOR	Rationale
3 consecutive year term limit	<p>8) Term of Office of Committee Members</p> <p>- Currently reads: “The total number of consecutive years where a Council member may serve on Executive shall not exceed three years.”</p> <p>- Proposed: “The maximum term in one office is three (3) consecutive one (1) year terms.”</p>	<p>The TOR as presented to Council on December 7, 2020 appears to prevent a Council member from serving on Executive for more than 3 consecutive years.</p> <p>This may disqualify (or create ambiguity regarding the eligibility of) a Council member who has served on Executive for three years from standing for election as President or Vice-President.</p> <p>It may also disqualify (or create ambiguity regarding the eligibility of) a Council member to stand for election as President after serving as Vice-President.</p> <p>In the interests of balancing continuity and mentorship with succession planning and promoting participation, it is proposed that the wording of the TOR more closely track the wording of By-law 5.03 (a three (3) term limit on holding any one office, which may include President, Vice-President and other Office(s), such as elected member of the Executive Committee).</p>

<p>Cooling-Off Periods</p>	<p>Not included in TOR</p>	<p>The environmental scan did not identify any other health regulators in Ontario with cooling-off periods specific to Officers/Executive Committee.</p> <p>It is proposed that maximum term limits, combined with the College's <i>Mentorship and Succession Planning Policy</i> and efforts to provide ongoing training and development opportunities for Council members (including Officers) will result in a balance between continuity, engagement and renewal such that a formal cooling-off period for the Executive Committee may not be required.</p>
<p>Role of Past President</p>	<p>Not included in TOR</p>	<p>In addition to being described in the TOR, the composition of the Executive Committee is set in the College's by-laws (specifically By-law 13.01).</p> <p>It may be permissible, depending upon the maximum term limit for each Office and for Executive Committee service, for a past President to be elected to the Executive Committee in another capacity (for example, to one of the existing officer-at-large positions).</p> <p>If a formal past President role were to be included in the TORs, one scenario that would warrant consideration would be where the past President (who may or may not be a member of the College) is no longer serving on Council. This may require additional considerations in the by-laws.</p> <p>It is proposed that effective mentorship and succession planning, training and</p>

		<p>development opportunities for Council members and maintenance of a good working relationship with the Registrar & CEO may reduce the need for a formal or <i>ex officio</i> past President role on the Executive Committee.</p> <p>For these reasons, it is proposed that the TORs should not include a formal role for past Presidents.</p>
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Public Interest Rationale:

Due to the legislated powers of the Executive Committee, it is in the public interest that the TOR:

- Are clear;
- Consistent with the College's by-laws and applicable legislation and regulations; and
- Balance the need for continuity with the importance of succession planning.

Unclear or inconsistent TOR could result in decisions or processes that:

- Bring discredit to the College and undermine public confidence in the College's ability to govern the profession in the public interest;
- Result in a governance complaint against the College; and
- Create liability for either the College and/or the person involved.

Recommendation and next steps

Council is requested to review the Executive Committee Terms of Reference as presented and:

- Approve the TOR; or
- Approve the TOR with specific amendments; or
- Refer the TOR for further consideration with specific questions.



Terms of Reference- Executive Committee

1) Purpose

Drawing from the Procedural Code in the *Regulated Health Professions Act, 1991*, the Executive Committee is established under S.10(a).

Consistent with Section 12 of the *Health Professions Procedural Code* (the Code), the Executive Committee (the Committee) is established to act on behalf of Council when immediate action is required:

Executive Committee's exercise of Council's powers

12 (1) Between the meetings of the Council, the Executive Committee has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or by-law.

2) Establishment of Committee

The Executive Committee is established as a statutory Committee of Council with the President of Council serving as Chair of the Committee. The Chair is accountable to report on Committee activities to Council, subject to the confidentiality of information provisions in the *Regulated Health Professions Act, 1991*.

3) Accountability

Section 12 (2) of the Health Professions Procedural Code describes the accountability of Executive Committee as follows:

Report to Council

(2) If the Executive Committee exercises a power of the Council under subsection (1), it shall report on its actions to the Council at the Council's next meeting. 1991, c. 18, Sched. 2, s. 12

The Executive Committee must report to Council at least once annually and must prepare a report for Council's review and approval.

4) Scope of Actions

Council has determined that in interpreting and applying S.12 (1) of the Procedural Code, where a decision is to be made:

- Every reasonable effort must be made by the College to schedule a meeting of Council;

- In calling for a meeting of Council, the agenda must be defined and made clear to all Council members.
- All decisions of Executive Committee must be ratified by Council, either by electronic vote, a vote by mail or a vote in person.
- With the exceptions permitted under the Procedural Code, materials related to all items to be considered by Executive Committee are to be published on the College website in advance of the meeting of the Executive.

5) Composition of Committee

Bylaw 13.01 Executive Committee provides that the Executive Committee shall be composed of the President, the Vice-President and three (3) members of Council. Three (3) members of the Executive Committee must be members of the College and two (2) members of the Executive Committee must be public appointees who are members of Council.

6) Quorum

The quorum of the Executive Committee is three (3) members, at least one of whom must be a member of the Council who was appointed to Council by the Order-in-Council.

The Chair of the Executive Committee will provide to the Registrar or their designate a list of all Council members and guests in attendance at an Executive Committee meeting. Such list will be used to file attendance reports for purposes of verifying travel and per diem costs of Council members and invoices for services by any guests.

7) Rules governing the selection of members, the appointment of the Chair and the functioning of the Executive Committee:

The approved By-laws governing Council and Committee members and Committees and the Schedules to the By-Laws apply to the members of this Committee and to the procedures of this Committee.

8) Term of Office of Committee Members

The term of office of an Executive Committee member commences immediately after the appointment or election and continues for approximately one (1) year. The maximum term in one office is three (3) consecutive one (1) year terms. ~~The total number of consecutive years where a Council member may serve on Executive shall not exceed three years.~~

9) Location and frequency of committee meetings

Executive Committee meetings, wherever possible, will be held at a place and on a date set in advance and will occur at regular intervals and at such frequency as necessary for the Committee to conduct its business.

The Executive Committee will meet as required to accomplish the mandate of the Committee in a timely and effective manner. All Executive Committee members are required to attend an annual executive orientation session.

Notice of meetings will be given at least fourteen (14) days in advance of the meeting.

10) Manner of Executive Committee meeting

Any meeting of an Executive Committee may be conducted by means of teleconference or any other means that permits all persons participating in the meeting to communicate with other members simultaneously and instantaneously (including audio or video conferencing). Persons participating in the meeting by such means are deemed to be present at the meeting.

Executive Committee meetings will generally take place during regular business hours. Executive Committee meetings are not open to the public unless determined by the President.

The agenda for each meeting will be developed jointly between the Chair and the Registrar.

11) Minutes

A summary of each meeting will be prepared by the College and circulated to members of the Executive Committee within 30 days of the meeting. The approved Record shall be maintained by the Director of Operations and Financial Services according to the College knowledge management policies.

Minutes of Executive Committee shall be recorded by the Registrar or their designate.

Minutes or a descriptive summary, with exception of in-camera Minutes, shall be provided to the Registrar for inclusion on the agenda of the next meeting of Council.

Approved Minutes are to be posted on the College website with the exception of in-camera Minutes.

12) In-camera meetings

The Chair of Executive Committee shall determine, based on the terms of reference for the Committee and the following exceptions, whether a meeting of Executive Committee is to be held in-camera:

- Where matters involving public security may be disclosed;
- Where personal or other matters related to an individual may be disclosed of such a nature that the harm created by the disclosure would outweigh the desirability of transparency;
- Where a person involved in a criminal proceeding or civil suit or proceeding may be prejudiced;
- Where personnel matters or property acquisitions will be discussed;
- Where instructions will be given to or opinions received from the solicitors for the College; or

All matters discussed at in-camera sessions shall be disclosed at the next meeting of Council, in an in-camera session as required.

The Chair shall ensure that Minutes are recorded of an in-camera session and that such Minutes are provided in a sealed package to the Director of Operations and Financial Services to be held securely. Such Minutes may be reviewed by the Auditor for the College.

13) Simple majority

Unless specifically provided for otherwise under the Code or the by-laws, every motion which properly comes before a Committee shall be decided by a simple majority of the votes cast at the meeting by the Committee members present.

14) Chair vote

The President who is a member of Council will serve as the Chair of Executive Committee and may vote.

15) Expectations and duties of all Executive Committee members

As per the College By-laws, every Executive Committee member shall, in the performance of his or her duties:

- familiarize himself or herself with the Act, the RHPA, specific regulations, the By-Laws and any policies of the College;
- familiarize himself or herself with any other records, documents and guidelines that may be necessary for the performance of his or her duties;
- comply with the provisions of the Act, the RHPA, specific regulations, the By-Laws, any policies of the College and rules that are adopted by Council, from time to time;
- regularly attend meetings on time and participate constructively in discussions;
- ensure that confidential matters coming to his or her attention as a member of Council or as a member of a Committee or working group are not disclosed by him or her, except as required for the performance of his or her duties or as permitted by the RHPA;
- conduct himself or herself in an appropriate manner with College staff, other members of Council or members of the Committees, members of the College and members of the public;
- comply with the College's Code of Conduct, which is attached as Schedule 3 to the By-Laws and forms part of the By-Laws;
- avoid, or where that is not possible, declare all conflicts of interest in the manner set out in the By-Law; and
- perform the duties associated with his or her position conscientiously and with due care and diligence in a manner that serves and protects the public interest.

16) Duties and responsibilities of the Executive Committee

The duties and responsibilities of the Executive Committee are described in the Procedural Code under (1) in the RHPA. The Executive Committee has the power to act on behalf of Council when a matter requires immediate action and Council is unable to meet in quorum. Executive Committee is not permitted to make, amend or revoke by-laws or a Regulation.

In addition, Executive Committee may, as directed by Council

- recommend to Council, proposals for changes to applicable statutes, regulations, By-

- Laws, College policies and standards of practice;
- receive findings and recommendations concerning a member of Council and make recommendations to Council concerning the member of Council.
- at least annually, review compensation for the Registrar; and
- on the advice of the Finance Committee provide broad policy guidance to senior management on matters related to non-salary compensation and benefit programs for College staff.

17) Conflict of interest

Members of Executive Committee must declare any conflict of interest or perception of bias before deliberating on any matter at a Committee meeting.

Every declaration of a conflict of interest or perception of bias must be recorded in the minutes of the meeting together with a description of the nature of the conflict or perception of bias.

18) Confidentiality

Members of Executive Committee will have access to highly sensitive and confidential information which they must keep in the strictest confidence. Any breach of confidentiality could result in harm to an individual, risk to the public, serious costs to the College and could jeopardize the integrity of the College and Council.

19) Confidence

The College is mandated to protect the public and is therefore accountable to ensure that the requirements for fairness, transparency, and the interests of the public are applied to all decisions and recommendations.

Members of Executive Committee are expected to adhere to these principles and to the Code of Conduct approved by Council.

20) Liability/Immunity

No members of Executive Committee are liable for any act, neglect or default of an act done in good faith in the performance or intended performance of a duty, or in the exercise or the intended exercise of a power under the RHPA or a regulation or a By-Law under the Act.



Resolution – Executive Committee Terms of Reference

Whereas the Executive Committee is a statutory committee of the College of Kinesiologists of Ontario (“the College”) as required by the *Health Professions Procedural Code* (Schedule 2 to the *Regulated Health Professions Act, 1991*); and

Whereas the College has proposed the Terms of Reference for the Executive Committee (“the Terms of Reference”); and

Whereas the Terms of Reference have been reviewed by Council and referred for further consideration; and

Whereas the College has completed additional research and analysis of the Terms of Reference; and

Whereas Council has reviewed and considered the revised Terms of Reference;

Therefore, be it resolved that the Council of the College of Kinesiologists of Ontario approves the Executive Committee Terms of Reference.

Moved by:

Seconded by:

Date: December 4, 2023



Decision Note

Decision: Planning and Finance Committee Terms of Reference
Prepared for: Council
Date: December 4, 2023

Background

As a health profession regulator, the College of Kinesiologists of Ontario (“the College”) is permitted to establish committees other than those statutory committees set out in s. 10(1) of the *Health Professions Procedural Code* (“the Code”), which is Schedule 2 to the *Regulated Health Professions Act, 1991*. Section 94(1)(i) of the Code authorizes Council to make by-laws pertaining to the appointment, powers and duties of non-statutory committees (that is, committees not required by s.10(1) of the Code). The College’s relevant by-laws are By-laws 12: Committees – General and 13: Specific Composition and Selection of Committees. Additional details regarding each non-statutory committee are set out in the Terms of Reference (TOR) for that committee.

During the March 2, 2023 meeting of the Executive Committee, it was requested that the College consider the TOR of the Planning and Finance Committee (“the Committee”) to promote transparency. One recommendation was greater emphasis on the role and/or number of Public appointees to Council on the Committee. The College was also asked to determine whether there may be an opportunity to appoint, as described in By-law 12.03.iii, non-Council members who are not members of the College to the Committee.

In addition, on March 20, 2023 and June 26, 2023, Council approved, after due public consultation, amendments to the College’s By-laws 12 and 13. These amendments directly impact the term length and maximum term limit associated with service on the College’s committees.

As recommended by the Executive Committee, and for consistency with the by-laws regarding the composition of the Committee, the College has undertaken a review of the TOR for the Committee.

Issue for consideration

Review of the TOR for the non-statutory Planning and Finance Committee.

Analysis

This review was conducted in a manner consistent with the College’s *Policy and Material Development and Review Framework*. Considerations included:

- An environmental scan of the 26 health profession regulatory Colleges in Ontario (conducted by review of publicly available materials as well as direct outreach to the relevant staff at the various Colleges). The environmental scan focused on:
 - The composition of the Committee, including the number and identity of members and whether non-Council members who are also not members of the College may serve on the Committee; and
 - The environmental scan was later broadened to identify any trends regarding who may serve as Chair of each College’s Planning and Finance (or analogous) Committee;
- Consideration of the following:
 - The effects (effectiveness, unintended effects and equity impact) associated with the TOR; and
 - The implementation (specifically any costs, feasibility and acceptability considerations).

Following this review, the following proposed amendments to the Committee TOR have emerged:

Proposed Amendments	Rationale
<p>3) Membership</p> <p>The Committee shall be comprised of at least five (5) to seven (7) members, at least three (3) of whom shall be Council members and no more than five members of Council. At least one member of Council appointed to the Committee shall be a public member. The Committee may include one (1) or more members who are not members of the College Council or committee or staff and who have financial and accounting expertise and are free from real or perceived conflicts of interest that may pertain to the profession of kinesiology, the College and/or the duties of the Committee.</p> <p>Appointments to the Committee will be based on the College by-laws (12 and 13) and any corresponding College policies. Committee members will be expected to have a basic an understanding of financial statements and accounting principles and be able to analyze and interpret financial data and statements and relate these to organizational plans.</p>	<p>The environmental scan included consideration of the size of comparable committees at other regulatory Colleges in Ontario.</p> <ul style="list-style-type: none"> • Average committee size: 5 members • Median committee size: 5 members • Most frequent committee size: 6, 7 members (4 Colleges each) <p>The environmental scan identified 6 other health professional regulatory Colleges in Ontario as having or permitting external (non-Council, non-members of the College) members of their Planning and Finance (or similar) Committee:</p> <ul style="list-style-type: none"> • CRTO • CASLPO • CMRITO • COTO • RCDSO • OCP (Pharmacists) <p>It was noted from the results of the environmental scan that no other Colleges required appointment of one or more external members.</p> <p>As suggested by the Executive Committee, it is proposed that the Planning and Finance Committee may include 1-2 external members who meet the following eligibility criteria:</p> <ul style="list-style-type: none"> • No COI

	<ul style="list-style-type: none"> • Financial and accounting expertise. <p>The proposed Planning and Finance Committee composition would be as follows:</p> <ul style="list-style-type: none"> • 5-7 members • At least 3 Council members (1 of whom shall be a Public Appointee to Council) • The Committee may include a maximum of 2 external members <p>Expanding the minimum and maximum size of the Committee may facilitate inclusion of External members while providing opportunities for participation by qualified Professional and Public Council members. This in turn may support mentorship and succession planning.</p> <p>Maintaining the requirement for 1 Public Council member does not preclude additional Public Council members from being appointed. For example the composition of the Committee could be as follows:</p> <ul style="list-style-type: none"> - 3 Professional Council member - 2 Public Council members - 2 External members <p>OR:</p> <ul style="list-style-type: none"> - 2 Professional Council members - 2 Public Council members - 1 External member <p>OR some other combination of Professional Council members, Public Council members and External members resulting in a total Committee size of 5-7 members with at least 3 Council members, at least 1 of whom is a Public Council member.</p> <p>The intent is to avoid creating a TOR that might limit the ability of qualified, competent Council members from serving on the Committee strictly because of their election/appointment status.</p> <p>External members may be sought to provide relevant expertise as deemed necessary.</p> <p>Amending “a basic understanding”, referring to financial statements and concepts is intended</p>
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	to emphasize a competency-based approach to committee appointments.
<p>4) Appointment of Chair of the Planning and Finance Committee</p> <p>Council shall appoint one of the members of the Planning and Finance Committee who is a public appointee to Council, as Chair of the Committee.</p> <p><u>A signatory of the College is not eligible to serve as Chair of the Planning and Finance Committee.</u></p>	<p>Among the findings of the environmental scan:</p> <ul style="list-style-type: none"> • There was no evidence of any other regulatory College in Ontario that requires the Chair to be a Public member of Council. <p>Where a Chair could be identified by the Environmental Scan:</p> <p>5 Colleges had Public Council members as Chair:</p> <ul style="list-style-type: none"> • Dietitians • Optometrists • Chiropodists • Occupational Therapists • Pharmacists <p>5 Colleges had Professional Council members as Chair:</p> <ul style="list-style-type: none"> • CASLPO • CMRITO • Physiotherapists • Psychologists • RCDSO <p>1 College had Professional non-Council member as Chair:</p> <ul style="list-style-type: none"> • CPSO <p>1 College had Public non-Council member as Chair:</p> <ul style="list-style-type: none"> • CRTO <p>1 College specified that the duties of Chair are shared by Vice-Presidents of Council (who are, for that College, Professional members of Council):</p> <ul style="list-style-type: none"> • CNO <p>In consideration of the results of the environmental scan, which revealed no clear pattern or best practice regarding who may serve as Chair of a Planning and Finance or related committee, it is proposed that the terms of reference be amended such that any member of the Committee may be appointed as Chair, provided they meet any other requirements. This may:</p>

	<ul style="list-style-type: none"> • Promote mentorship, succession planning and continuity, particularly where there may not be a suitable Public member of Council who is willing or able to serve as Chair • Clarify that the role of Chair is to conduct the meeting and facilitate discussions. • Maintain and promote a culture of participatory decision-making by all Committee members. <p>It is also proposed that the TOR be amended to explicitly preclude signatories of the College from being appointed as Chair. This may promote effective oversight. Explicitly stating this in the TORs may also facilitate the Committee slate selection and appointment process.</p>
<p>7) Time Commitment</p> <p>The term of office of a Committee member shall commence immediately after the appointment and shall continue for approximately one (1) <u>year three (3) years</u>.</p>	<p>For consistency with By-law 13.</p>

The proposed amendments to the TOR were presented to the Committee for review on November 20, 2023. The following questions emerged from the Committee's consideration of the proposed amendments to the TOR:

- The extent to which expanding the potential size of the Committee may be aligned with the College's work towards adopting governance best practices, and whether to set a limit on the number of External Committee members;
 - Proposed governance reforms appear to be focused on the size of Council and separation of Council and committees.
 - It is noted that expanding the size of the Committee may facilitate meeting scheduling and may decrease workload on individual Council and Committee members.
 - The environmental scan showed that a committee size of 5-7 members would be consistent with the approach taken by other regulatory Colleges with similar committees.
- How cooling-off periods might apply to past Council or Committee members who may seek to serve as External Committee members;
 - The cooling-off periods currently prescribed in the College's by-laws would apply to individuals seeking to serve as External members of the Committee.
 - The intent of cooling-off periods, which are supported by governance reviews and in legal decisions, is to promote a balance between turnover, succession planning and continuity.

- Compensation of External Committee members;
 - External Committee members would be compensated in keeping with the College's existing remuneration Policy. Compensation is aligned with the rates paid by the Public Appointments Secretariat.
- Whether External Committee members may be covered by the College's Directors and Officers Liability Insurance
 - External Committee members would be covered under the College's Directors and Officers Liability Insurance.

Public Interest Rationale:

Due to the role the Planning and Finance committee plays in supporting the College's Mission to protect the public, it is in the public interest that the TOR:

- Are clear; and
- Consistent with the College's by-laws and applicable legislation and regulations;

Unclear or inconsistent committee TOR could result in:

- Risks to the Planning and Finance Committee's ability to effectively fulfil its mandate of oversight of the College's risk and financial management;
- Discredit to the College and undermining of public confidence in the College's ability to govern the profession in the public interest;
- A governance or other complaint against the College; and
- Potential liability for either the College and/or the individual(s) involved.

Recommendation and next steps

Council is asked to review the proposed amendments to the Terms of Reference and:

- Approve the amended TOR; or
- Approve the amended TOR with additional amendments; or
- Refer the TOR for further consideration with specific questions.



Terms of Reference Planning and Finance Committee

Purpose:

In order to be fully accountable to members, the public and the Ministry of Health and Long Term Care as per S. 6 of the *Regulated Health Professions Act, 1991*, the College of Kinesiologists of Ontario (the College) hereby establishes a Planning and Finance Committee (the Committee) as a Non-Statutory Committee of the College. The Committee will work with the Registrar and the Director of Finance and Operations providing guidance and advice to ensure the financial stability of the College and the appropriate allocation of financial resources in order to develop, operate and maintain the College's programs necessary to fulfill its mandate of public protection.

1) Accountability:

The Committee is established effective November, 2016 as a Non-Statutory Committee of Council with a Chair appointed by Council, who is accountable to report on the Committee's activities to Council.

The Committee has authority to meet in-camera with the Auditor for the College to discuss the College's financial policies, procedures, and any concerns or questions of a financial nature which may impact the ongoing operations of the College.

2) Reporting

The Committee shall report to Council at least once annually to recommend audited financial statements for Council's review and approval and for purposes of publication of the annual report. In addition the Committee will report to Council during regular Council meetings and at special and in-camera meetings, on certain financial affairs of the College and to make recommendations on matters such as the appointment of an auditor, approval of operational plans, and annual budgets and on matters of financial concern to the College.

3) Membership

The Committee shall be comprised of at least three (3) five (5) to seven (7) members, at least three (3) of whom shall be Council members and no more than five members of Council. At least one member of Council appointed to the Committee shall be a public member. The Committee may include one (1) or more members who are not members of the College Council or committee or staff and who have financial and/or accounting expertise and are free from real or perceived conflicts of interest that may

Appointments to the Committee will be based on the College by-laws (12 and 13) and any corresponding College policies. Committee members will be expected to have a basic-an understanding of financial statements and accounting principles and be able to analyze and interpret financial data and statements and relate these to organizational plans.

4) Appointment of Chair of the Planning and Finance Committee

Council shall appoint one of the members of the Planning and Finance Committee; ~~who is a public appointee to Council~~, as Chair of the Committee.

A signatory of the College is not eligible to serve as Chair of the Planning and Finance Committee.

5) Conflict of Interest

Members of the Committee must declare any conflict of interest or perception of bias before being appointed to the Committee in which a conflict of interest or perception of bias may arise.

6) Rules Governing the Selection of Members, the Appointment of the Chair and the Functioning of the Committee

The approved By-laws governing Council and Committee members and Committees and the Schedules to the By-laws apply to the members of this Committee and to the procedures of this Committee.

7) Time Commitment

The term of office of a Committee member shall commence immediately after the appointment and shall continue for approximately ~~one (1) year~~three (3) years.

It is expected that the Committee will meet up to six (6) times per year – once to receive training, once to review the proposed Budget and Operational/Business plan put forward by the College, and at least once with the auditor to review the draft year-end audited financial statements, and to discuss financial business practices of the College and potential risks.

8) Duties and Responsibilities of the Finance Committee

In addition to the duties and responsibilities outlined in By-law 15, the Committee is also responsible for the following:

- Reviewing the College's Revenue and Expenditure budget and in-year progress reports
- Reviewing the College's annual Capital Budget

- Reviewing and recommending action to Executive Committee or Council as necessary, proposed expenditures not included in the College's budget that exceed the monetary amount outlined in the by-laws
- Reviewing the performance of the auditor and recommending appointment of the auditor by Council
- Reviewing and approving the College's annual financial statements for publication in the Annual Report of the College
- Analyzing the data in the financial statements and providing feedback to College staff where necessary
- Ensuring the College abides by its financial policies on procurement and any other stipulations regarding finances in the College's by-laws
- Acting as an advisory body to the Council on matters of finance
- Meeting, as necessary with the College's financial advisor or banker to discuss investment strategies
- Reviewing, revising and/or developing, as needed, internal policies or by-laws respecting the financial operations of the College to ensure efficiency, transparency and accountability.

9) Confidentiality

Members of the Committee will have access to highly sensitive and confidential information which they must keep in the strictest confidence. Any breach of confidentiality could jeopardize the operations of the College and its financial security.

10) Confidence

The College is mandated to protect the public and is therefore accountable for fair and reasonable expenditures necessary to protect the public interest. Members of the Committee are expected to adhere to the Code of Conduct approved by Council.

11) Liability/Immunity

No members of the Committee are liable for any act, neglect or default of an act done in good faith in the performance or intended performance of a duty, or in the exercise or the intended exercise of a power under the *Regulated Health Professions Act* or a regulation or a By-law under said Act.



Resolution – Planning and Finance Committee Terms of Reference

Whereas the Planning and Finance Committee is a non-statutory committee of the College of Kinesiologists of Ontario (“the College”); and

Whereas the College has proposed, based on feedback from the Executive Committee and an environmental scan, amendments to the Terms of Reference for the Planning and Finance Committee (“the Terms of Reference”); and

Whereas the amended Terms of Reference have been reviewed by the Planning and Finance Committee and referred to Council for approval; and

Whereas Council has reviewed and considered the amended Terms of Reference;

Therefore, be it resolved that the Council of the College of Kinesiologists of Ontario approves the amended Planning and Finance Committee Terms of Reference.

Moved by:

Seconded by:

Date: December 4, 2023



Decision Note

Decision: Five-Year Schedule for Council Meetings
Prepared for: Council
Date: December 4, 2023

Background

The College of Kinesiologists of Ontario (CKO) is directed by a Council composed of elected Professional Members and Public Members appointed by the Lieutenant Governor. Council guides CKO and ensures it fulfills its legislated mandate by setting CKO's strategic and policy direction and making decisions that protect the public interest.

In general, Council meets four times per fiscal year to discuss issues and make decisions in the public interest. CKO's fiscal year starts on Sept. 1 and ends on Aug. 31 of the following calendar year. Council meetings are typically scheduled in March, June, September and December.

To ensure that each meeting can be conducted properly and a quorum is present, giving each Council member as much notice as possible in advance is essential. To maintain the diversity of Council, each Council member comes from different practices and has diverse backgrounds, which makes meeting date planning exceptionally important. At CKO, we adopt a five-year plan to ensure all meetings are carefully planned and scheduled in advance to ensure optimal attendance and participation.

At the December 2022 Council meeting, Council requested that staff review and recommend how Council meetings should proceed in the future, taking into consideration the following:

- Should meetings be held in person, virtually or hybrid?
- Should the September meeting continue to be in-person with a remote option for those who cannot attend in person?
- Should the September meeting be one or two days since it includes training?

A five-year schedule of meetings was developed and approved by Council with a two-day meeting for September 2023. The five-year schedule was again presented to Council in March and September 2023, with amendments proposed to ensure minimal conflict between Council meetings and statutory and cultural/religious holidays and observances.

Issue for consideration

Council is requested to review and approve the proposed five-year meeting schedule to ensure no conflicts with statutory holidays and cultural/religious observations.

Analysis

At the September 2023 Council meeting, the following potential conflicts were noted by Council:

- Sept 2024 and Sept 2025 – proposed dates may conflict with the beginning of the school/academic year, which would pose a conflict for Council members who work as educators/in academia;
- June 30, 2025 and June 29, 2026 – meeting dates are too close to Canada Day, which might be challenging to have all Council members attend; and
- Sept 21, 2026 - proposed date conflicts with the Jewish observance of Yom Kippur.

Public Interest Rationale:

Minimizing or eliminating conflicts between Council meetings and statutory, religious and cultural observances serves to promote the public interest by:

- Ensuring that Council can make timely decisions regarding issues that arose.
- Promoting Equity, Diversity, Inclusion and anti-racism in all Council activities and decision-making; and
- Boosting observers' attendance (e.g., members of CKO and other stakeholders, including the Ministry of Health) by providing a transparent and inclusive schedule.

A five-year schedule that does not fully consider statutory, religious and cultural observances may be associated with potential risks, such as a specific group of people feeling left alone and not included.

Recommendation and next steps

Council is requested to review the five-year Council meeting schedule as presented and:

- Approve the five-year meeting schedule; or
- Approve the five-year meeting schedule with specific amendments; or
- Refer the five-year meeting schedule for further consideration with specific questions.

Five-year Schedule of Council Meetings

	2023	2024	2025	2026	2027	2028
		March 25	March 31	March 30	March 29	March 27
		June 24	June 23 ³⁰	June 22 ²⁹	June 28	June 26
		September 16 ⁹ and 11 ⁷ 0	September 15 ⁸ and 16 ⁹	September 14 ²¹ and 15 ²²	September 27 and 28	September 25 and 26
	December 4	December 2	December 1	November 30	December 6	December 4

- ~~Sept 2024 and Sept 2025 — too early in the month (some council members are educators and it will conflict with the beginning of the school year)~~
- ~~June 30/25 — day before Canada Day and might be difficult to get ppl to attend (maybe they took time off) — potentially change it to the week before~~
- ~~June 29/26 — 2 days before Canada Day and might be difficult to get ppl to attend (maybe they took time off) — potentially change it to the week before~~
- ~~Sept 21/26 = Yom Kippur~~

Notes:

1. Meetings scheduled for March and December will be held virtually.
2. Meetings scheduled for June and September will most likely be conducted in a hybrid setting.



Resolution – Five-Year Council Meeting Schedule

Whereas the College of Kinesiologists of Ontario (CKO) is directed by a Council that guides CKO and ensures it fulfills its legislated mandate by setting CKO's strategic and policy direction and making decisions that protect the public interest; and

Whereas Council meets four times (March, June, September and December) per fiscal year to discuss issues arose and make decisions in the public interest; and

Whereas CKO adopts a five-year plan to ensure all meetings are carefully planned and scheduled in advance with the EDI-B lens to ensure optimal attendance and participation;

Whereas Council requested that staff review and recommend how Council meetings should proceed in the future at their December 2023 meeting; and

Whereas Council reviewed the proposed Five-Year Council Meeting Schedule and noted some potential conflicts at their September 2023 meeting. CKO staff then did the best to consider all statutory holidays and cultural/religious observations when amending the dates; and

Whereas Council is requested to review and approve the proposed Five-Year Council Meeting Schedule to ensure no conflicts with statutory holidays and cultural/religious observations;

Therefore, be it resolved that Council approves the proposed Five-Year Council Meeting Schedule.

Moved by: _____

Seconded by: _____

Date: December 4, 2023