

Council Meeting Agenda

Date: Monday, December 2, 2019

Time: 10:30 a.m. – 4:00 p.m.

Location: 160 Bloor Street East, Suite 1402, Toronto

Teleconference Details: 1 (866) 261- 6767 (from outside the GTA); (416) 850 -2050 (from Toronto)
 Access Code: 67893747#

1	Call to Order, Roll Call, Welcome	J. Pereira	Verbal	Information	10:30-10:35 (5 min)
2	Reappointments	J. Pereira	Verbal	Information	10:35-10:40 (5 min)
3	Conflict of Interest Declarations	J. Pereira	Verbal	Decision	10:40-10:45 (5 min)
4	Approval of Agenda	J. Pereira	Document	Decision	10:45-10:50 (5 min)
5	Approval of Minutes: September 16, 2019	J. Pereira	Document	Decision	10:50-10:55 (5 min)
6	Action Items from the September 16 Meeting				
	<ul style="list-style-type: none"> ▪ Lori-Anne Beckford to be noted as present at the June 24 Council meeting. COMPLETED ▪ The proposed rules concerning treatment of minutes to be revised. “Working” days to be replaced with “business” days. The policy should also be revised to state that when sending revisions to staff, Council members do not reply “all”. COMPLETED ▪ Ryan Pestana to notify non-Council members that they have been appointed. COMPLETED 				10:55-11:00 (5 min)
7	<ul style="list-style-type: none"> ▪ Role of Council vs Role of Staff ▪ Fiduciary Duty ▪ Confidentiality ▪ Public Protection ▪ Risk ▪ “nose in, fingers out” method of council operation ▪ Transparency ▪ Conflict of Interest 	R. Durcan	Verbal	Information	11:00-12:00 (60 min)
8	By-Laws: 15.01 Duties of Council & Committee Members: Expectations and Duties 16.05 Conflict of Interest Declaration Form 17.04 Confidentiality Agreement Schedule 2: Rules of Order of the Council Schedule 3: Code of Conduct	J. Pereira	Documents	Review	12:00-12:10 (10 min)

LUNCH

REPORTS:					
9	Committee Reports – questions only <ul style="list-style-type: none"> ▪ Registration ▪ Quality Assurance ▪ ICRC ▪ Discipline ▪ Patient Relations ▪ Q1 Finance Report/Status Report 	Committee Chairs	Documents	Information	1:10-1:20 (10 min)
10	Draft Audit Financial Statements	C. McCleave	Document	Decision	1:20-1:35 (15 min)
11	Draft Annual Report	R. Pestana	Document	Decision	1:35-1:40 (5 min)
12	President's Report <ul style="list-style-type: none"> ▪ University Liaison Committee ▪ CNAR ▪ Chair Training 	J. Pereira	Verbal	Information	1:40-1:45 (5 min)
13	Performance Indicators	MOHLTC	Verbal	Information	1:45-2:45 (60 min)
NEW BUSINESS:					
14	Issue/Decision Note on Self-Assessment: General Requirements Policy amendment	L. Thacker	Document	Ratification	2:45-2:50 (5 min)
15	Issue/Decision Note on Continuing Professional Development: Prescribed Learning Modules Policy amendment	L. Thacker	Document	Decision	2:50-2:55 (5 min)
16	Issue/ Decision Note on Patient/Client-Centred Care/Service Guideline	L. Thacker	Document	Decision	2:55-3:05 (10 min)
17	Review Cycle for Standards & Guidelines	E. Bruce	Verbal	Update	3:05-3:10 (5 min)
COUNCIL/COMMITTEE BUSINESS					
18	Election of Executive Committee Members (2 Public Members)	J. Pereira	Verbal	Decision	3:10-3:15 (5 min)
19	Election of Vice President	J. Pereira	Verbal	Decision	3:15-3:20 (5 min)
20	Approval of Revised Committee Membership	J. Pereira	Document	Decision	3:20-3:25 (5 min)
21	Specialities Committee Appointments (Reappointment of Mary Pat Moore, Ken Alger, and an additional Public Member)	J. Pereira	Verbal	Decision	3:25-3:30 (5 min)
22	Fire Drill Training	R. Pestana	Verbal	Information	3:30-3:45 (15 min)
ADJOURNMENT					4:00



Resolution- Approval of Agenda – December 2, 2019

Be it resolved that the Council of the College of Kinesiologists of Ontario approves the December 2, 2019 meeting agenda as presented [amended].

Moved by:

Seconded by:

Date: December 2, 2019



College of Kinesiologists of Ontario Council Meeting Minutes - Draft	
Date/time of meeting	Monday, September 16, 2019 at 9:30 a.m.
Chair	Jennifer Pereira
Note Taker	Vivian Fragale
1. Present	Jennifer Pereira, Lori-Anne Beckford, Ryan Wight, Mary Pat Moore, Elwin Lau, Katie St. Denis, Leslee Brown, Victoria Nicholson, Derek DeBono, Michelle Meghie, Nelson Amaral, Teresa Bendo
Teleconference	Graydon Raymer, Chad McCleave
Regrets	Kalen Johnson, Stefanie Moser, Jennifer Bushell
Staff/guests in Attendance	Staff: Brenda Kritzer, Vivian Fragale, Eric Bruce, Nancy Leris, Lara Thacker, Ryan Pestana Guests: Samia Shaheen (MOHLTC), Don Gracey (OATA), Stuart Moulton (OKA), Sandra Weeks, Conny Glenn
2. Introductions: Staff and Council Members	Jennifer Pereira noted that elections to Council were held in July. Four districts had elections. Elwin Lau and Graydon Raymer were re-elected in their Districts for an additional three years. Jennifer also welcomed Benjamin Matthie and Katie St Denis, who were both elected for three year terms. Four new Councillors were recently appointed by the Ontario Government: Teresa Bendo, Leslee Brown, Victoria Nicholson and Sandra Weeks. Sandra's term begins in October. Sandra participated as an observer. Council members and staff introduced themselves.
3. Conflict of Interest Refresh	Eric Bruce, Director, Professional Conduct, provided a brief Conflict of Interest presentation. He covered areas such as what constitutes a conflict, reasonable apprehension of bias, dealing with conflicts, and what would happen if a conflict is not declared. Eric provided various scenarios for discussion and responded to questions.
4. Conflict of Interest Declarations	Jennifer Pereira asked if any Council members present wished to declare a conflict of interest. There were no declarations.
Constitution of the Meeting	As a 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.
5. Approval of Agenda	UPON A MOTION duly made by Nelson Amaral and seconded by Derek DeBono, it was resolved that the agenda as distributed electronically and posted on the website be approved. Carried.

<p>6. Approval of Minutes:</p> <p>April 15, 2019 June 24, 2019</p>	<p>Lori-Anne Beckford noted that she was present at the June 24 Council meeting. The June 24 minutes were amended to reflect this.</p> <p>UPON A MOTION duly made by Ryan Wight and seconded by Ben Matthie, it was resolved that the April 15 and June 24, 2019 minutes be approved as amended. Carried</p>
<p>7. Action Items arising from Previous meetings</p>	<p style="text-align: center;">Action Items Review</p> <ul style="list-style-type: none"> i. Registrar to provide a re-draft of the Minutes of April 15th - COMPLETED ii. The College to investigate practices of other Colleges concerning recording and posting of draft Minutes, and to recommend consistent practice for the CKO. In this pursuit, the College is to identify the applicable sections in Robert’s Rules of Order for taking/recording Minutes. Council to discuss further at an upcoming meeting of Council, the posting of draft Minutes, following investigation and report on other practices. – COMPLETED. Brenda Kritzer noted that all colleges are posting draft minutes; however, practices vary from college to college. iii. College to return to Council with revised Draft Complementary/Alternative Therapies Guideline. WAITING FOR REVISED GUIDELINES FROM CPSO iv. A letter is to be sent to the WSIB focusing on public protection through access to regulated health professionals. COMPLETED v. The College is to prepare a comprehensive application package which may be used by members of the profession and their representatives, wishing to make a submission under the Specialties Assessment policy. IN PROCESS <p style="text-align: center;">Items Carried Over</p> <ul style="list-style-type: none"> ▪ Strategic Dashboard development. COMPLETED. This was reviewed by the Finance & Planning Committee and is available on the website. ▪ Circulation and Posting of Summary of the Strategic Plan– ONGOING ▪ Fee breakdown posted on College website. COMPLETED ▪ Information to be added to the website regarding the benefits of being a regulated health professional. ONGOING ▪ Revisions to Renewal Form to better target collection of data for the College and members. COMPLETED. Due to a technical issue with the College’s renewal processing system, renewals closed later this year on September 15. Members received a suspension notice, which will be resolved as soon as possible.
<p>8. Committee Reports</p>	<p style="text-align: center;">Committee Reports Discussion</p> <p>Reports were provided in the Council package for the ICRC, Quality Assurance, Registration, and Finance & Planning Committees. These highlighted committee meetings, activities, changes and discussions that took place since the June Council meeting.</p>

	<p>Chad McCleave informed the Committee that the Finance & Planning Committee reviewed the Audit Plan from the Auditors, which was similar to previous years. He also noted that he sent a letter to the Auditors, on behalf the Committee, confirming no known instances of fraud. Council members agreed that they weren't aware of any fraud.</p> <p>General clarifying questions regarding the Committee reports were answered by the Committee Chair or staff support person.</p>
<p>9. Committee on Specialities Update</p>	<p style="text-align: center;">Committee on Specialities Update</p> <p>Mary Pat provided an update on the work of the Specialties Committee, which had been appointed by Council from among its members to review the submissions of the OATA in relation to recognizing athletic therapy as a specialty of the profession. Members of the Specialties Committee included herself, Ken Alger (past-President), Graydon Raymer, Ryan Wight, and Kalen Johnson.</p> <p>She noted that the critical question to be addressed by the Committee is whether the risk of harm to the public is sufficient to require additional or specific regulation/governance. A document was submitted to OATA requesting additional evidence of risk of harm especially to vulnerable populations. Mary Pat highlighted the need for clear and cogent evidence upon which to make its recommendation to Council regarding the proposal.</p> <p>Mary Pat proceeded to respond to general questions about the work of the Committee.</p>
<p>10. Registrar Update</p>	<p style="text-align: center;">Registrar Update</p> <p>The Registrar provided an update on governance initiatives by FHRCO. The College is part of a FHRCO working group looking into developing a competency profile for Council members. The Ministry is looking very closely at the current regulatory model and seeking improvements, especially as it relates to competencies of Council members. The Ministry would like to see greater consistency between and transparency across Colleges. The Ministry will be implementing a performance measurement and reporting system requiring Colleges to report against performance indicators. This will be implemented in a phased approach starting in 2020.</p> <p>Brenda reported on her meeting with the Canadian Athletic Therapists Association (CATA) and the Ontario Athletic Therapists Association (OATA). She noted that CATA requested the meeting to gain a better understanding of the regulatory process. OATA had questions about the Specialty framework. Brenda also met separately with OATA to review the document submitted to them by the Specialties Committee. They are making headway and will report back to the College.</p> <p>Brenda also informed Council that the Item Writing Committee met on two</p>

	<p>occasions to develop new questions for the entry to practice examination.</p> <p>An orientation session for new Council members was scheduled on August 26th for three new members. Mary Pat Moore attended the session to provide assistance and expertise. Another session will be scheduled over the coming weeks for the three newly appointed Public members.</p> <p>On August 23rd the College hosted a Chinese delegation from Chengdu Sport University. Seventeen professors from the university attended to learn more about the regulation of kinesiology in Ontario. They expressed interest in the area of quality assurance.</p> <p>Brenda responded to questions posed by members of Council. She noted that the College is considering the question of developing a specialty/class because it was raised by the College’s membership, and because it is the College’s responsibility to address the issue of risk of harm.</p> <p>Brenda also noted that a number of colleges are moving towards a competencies model.</p>
<p>11. Rules for Meeting Procedures</p>	<p style="text-align: center;">Rules for Meeting Procedures</p> <p>At the June meeting, Council asked for clarity around rules of procedure and asked that Brenda Kritzer provide more information on Robert’s Rules of Order. Currently, Council follows a modified version of these rules.</p> <p>Brenda presented “<i>Setting the Rules of Procedure: An overview of options for meeting procedures</i>”. The PowerPoint presentation was included in the meeting package, along with Schedule 2 to the By-laws. The general question posed to Council members was whether Robert’s Rules work for Council.</p> <p>Brenda asked members of Council whether there is a need for a special rule, or if they wish to continue following the modified rules. The general consensus was that Council is comfortable proceeding with the modified rules.</p>
<p>12. Rules Concerning the Minutes of Meetings – Proposed Policy</p>	<p style="text-align: center;">Rules Concerning the Minutes of Meetings – Proposed Policy</p> <p>At the June meeting, Council discussed the need for rules around posting draft Council meeting minutes. Brenda Kritzer contacted other colleges to learn about their process and developed a proposed policy for consideration by Council, which was included in the meeting package.</p> <p>Brenda proposed the following treatment of minutes:</p> <ul style="list-style-type: none"> ▪ Following a meeting of Council, Draft Minutes from the meeting will be circulated by email to all Council members within 5 working days. ▪ Council members shall return comments and corrections concerning the Draft Minutes by email within 10 working days with

	<p>a copy to all Council members.</p> <ul style="list-style-type: none"> ▪ The proposed final Draft Minutes will be circulated to Council members by email within 30 working days of the meeting. Any final comments or corrections proposed by Council members must be returned to the College within 5 working days. ▪ Draft Minutes, as corrected will be presented at the next regular meeting of Council for final review and approval. ▪ Final approved Minutes will be maintained as the record with draft Minutes deleted from the records of Council. <p>After a fulsome discussion, members of Council requested two revisions. “Working” days should be revised to “business” days. Also, they did not see the need in copying “all” when emailing their revisions to staff.</p> <p>UPON A MOTION duly made by Lori-Anne Beckford and seconded by Nelson Amaral, it was resolved that the Council of the College of Kinesiologists of Ontario accept the <i>Policy- Rules Concerning Treatment of Minutes of Council</i> as amended. Carried.</p>
<p>13. Proposed Budget & Plan 2019/2020</p>	<p style="text-align: center;">Proposed Budget & Plan 2019/2020</p> <p>Nancy Leris presented the proposed budget and business plan for 2019/2020. At the last Finance and Planning Committee Meeting, it was requested that staff revise the budget to ensure that it is balanced. It was noted that the original budget included a number of items under the Quality Assurance and Communications budget lines. These commitments were scaled back slightly.</p> <p>Nancy noted that the budget supports the three strategic goals approved by Council. She indicated that training will be provided to Council and Committee members through attendance at conferences and other forums; the website will be revamped to ensure that it is user friendly; a refocus on Peer and Practice Assessments to achieve risk reduction; and performance measurement criteria will be developed based on decisions on how patient risk may be reduced and quality of care enhanced.</p> <p>Council also received a Performance Plan for fiscal year 2019-2020, which included areas such as communications, corporate, registration, quality assurance, and professional conduct. Impact, activity highlights, and key deliverables for the fiscal year were included.</p> <p>UPON A MOTION duly made by Chad McCleave and seconded by Michelle Meghie, it was resolved that the Council of Kinesiologists of Ontario approves the budget and operational plan for the new fiscal year 2019-2020, beginning September 1, 2019. Carried.</p> <p>Council was then asked to appoint a College signatory on the College’s bank account. Kalen Johnson was originally appointed College signatory due to Michelle Meghie’s term on Council ending in October. Due to a busy work schedule, Kalen has not been responsive to emails, therefore, the College suggested that a new signatory be appointed.</p>

	<p>UPON A MOTION duly made by Chad McCleave and seconded by Nelson Amaral, it was resolved that Council approve Jennifer Pereira as signatory for the College’s bank account. Carried.</p>
<p>14. Election of Officers</p> <ul style="list-style-type: none"> • Appointment of Elections Officer • Election of Executive Committee 	<p style="text-align: center;">Election of Officers</p> <p>Council members were given the opportunity to complete a form indicating their interest in serving as President, Vice-president or Executive Committee member. Jennifer Pereira presented a resolution to turn the chair of the meeting over to Brenda Kritzer for the election of Officers portion of the meeting.</p> <p>UPON A MOTION duly made by Teresa Bendo and seconded by Michelle Meghie, it was resolved that the Registrar assume the chair for the portion of the meeting relating to election of officers. Carried.</p> <p>Brenda noted that one nomination was received for Jennifer Pereira (professional member) for President. Jennifer’s nomination was supported by Nelson Amaral and Mary Pat Moore.</p> <p>UPON A MOTION duly made by Mary Pat Moore and seconded by Michelle Meghie, it was resolved to close the nominations for President. Carried.</p> <p>One nomination was received for Kalen Johnson (Public Appointee) for Vice President. Kalen’s nomination was supported by Jennifer Pereira and Mary Pat Moore.</p> <p>UPON A MOTION duly made by Derek DeBono and seconded by Nelson Amaral, it was resolved to close the nominations for Vice President. Carried.</p> <p>Brenda noted that two seats were available to Professional Members for members of the Executive Committee. Nominations were received for Ben Matthie and Jennifer Bushell. Jennifer Pereira and Ryan Wight supported Ben’s nomination. Nelson Amaral and Ryan Wight supported Jennifer’s nomination.</p> <p>UPON A MOTION duly made by Derek DeBono and seconded by Victoria Nicholson, it was resolved to close the nominations for Professional Members to the Executive Committee. Carried.</p> <p>One seat was available on the Executive Committee for a publicly appointed member. A nomination was received for Mary Pat Moore, which was supported by Derek DeBono and Lori-Anne Beckford.</p> <p>UPON A MOTION duly made by Leslee Brown and seconded by Katie St. Denis, it was resolved to close the nominations for a publicly appointed</p>

	<p>member to the Executive Committee. Carried.</p> <p>UPON A MOTION duly made by Nelson Amaral and seconded by Mary Pat Moore, it was resolved to return the chairing of the meeting to Jennifer Pereira. Carried.</p> <p>UPON A MOTION duly made by Ryan Wight and seconded by Ben Matthie, it was resolved that Jennifer Pereira be appointed President; Kalen Johnson be appointed Vice-President; Mary Pat Moore, Ben Matthie, and Jennifer Bushell, be appointed as a members of the Executive Committee. Carried.</p>
<p>15. Approval of Committee Membership</p>	<p style="text-align: center;">Approval of Committee Membership</p> <p>Jennifer Pereira noted that the Executive Committee met in early September to consider committee composition for 2019/2020. All Council members were asked for their committee preferences. The College also invited the general membership to submit their interest to sit as non-Council members on committees. A proposed slate for each of the Committees and proposed chairs has been provided to Council. Executive Committee considered Council members’ preferences, applications received from the general membership, the workloads of each committee and geographic factors to form the proposed slate.</p> <p>UPON A MOTION duly made by Nelson Amaral and seconded by Ben Matthie, it was resolved that the Council of the College of Kinesiologists of Ontario appoints the committee members and chairs as per the attached slate developed and recommended by the out-going Executive Committee. Carried.</p>
<p>16. 2019/2020 Communications Plan</p>	<p style="text-align: center;">2019/2020 Communications Plan</p> <p>Ryan Pestana, Communications Manager, presented an overview of the 2019/2020 Communications Plan, which was included in the Council meeting package. The presentation highlighted the role of communications and provided an overview of the three communications priorities for the fiscal year. These include regular and timely communications, a new public website, and a new communications strategy plan.</p>
	<p style="text-align: center;">Review of Action Items</p> <ul style="list-style-type: none"> ▪ Lori-Anne Beckford to be noted as present at the June 24 Council meeting. ▪ The proposed rules concerning treatment of minutes to be revised. “Working” days to be replaced with “business” days. The policy should also be revised to state that when sending revisions to staff, Council members do not reply “all”. ▪ Ryan Pestana to notify non-Council members that they have been appointed.

Closing Comments/Motion for Adjournment

In closing, Jennifer welcomed all new members and wished the very best to those members who may be leaving Council. Jennifer thanked Michelle Meghie for her nine years of service and wished her the best.

It was moved by Nelson Amaral to adjourn the meeting at 4:00pm.

DRAFT



Resolution- Approval of Minutes – September 16, 2019

Be it resolved that the Council of the College of Kinesiologists of Ontario approves the September 16, 2019 meeting minutes as presented [amended].

Moved by:

Seconded by:

Date: December 2, 2019

By-Laws & Schedules

15. DUTIES OF COUNCIL AND COMMITTEE MEMBERS

15.01 Expectations and Duties

Every member of Council and every Committee member shall, in the performance of his or her duties:

- i. familiarize himself or herself with the Act, the RHPA, the by-laws and any policies of the College;
- ii. familiarize himself or herself with any other records, documents and guidelines that may be necessary for the performance of his or her duties;
- iii. comply with the provisions of the Act, the RHPA, the by-laws, any policies of the College and rules that are adopted by Council, from time to time;
- iv. make reasonable efforts to attend all meetings of Council and Committees of which he or she is a member, and to do so in person, save in exceptional circumstances with the approval of the Chair of Council or the Committee;
- v. attend meetings on time and participate constructively in discussions;
- vi. 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;
- vii. conduct himself or herself in an appropriate manner with College staff, other members of Council or members of the committees, members and members of the public;
- viii. comply with the College's Code of Conduct, which is attached as Schedule 3 to the by-laws and forms part of these by-laws;
- ix. avoid, or where that is not possible, declare all conflicts of interest in the manner set out in the by-law; and
- x. 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.

16.05 Declaration Forms

Upon appointment or election, and annually thereafter if requested, every Council and Committee member and every member of a working group shall fully complete and deliver to the Registrar a form, available from the Registrar, declaring his or her current and recent affiliations with professional associations and other organizations to facilitate compliance with the above provisions.

17.04 Confidentiality Agreement

Council and Committee members, staff and persons retained or appointed by the College are required to sign, annually, the confidentiality or fiduciary agreement approved by Council.

SCHEDULE 2 TO THE BY-LAWS Rules of Order of the Council

1. In this Schedule, "member" means a member of the Council.
2. Each agenda topic will be introduced briefly by the person or committee representative raising it. Members may ask questions of clarification, then the person introducing the matter shall make a motion and another member must second the motion before it can be debated.
3. When any member wishes to speak, he or she shall so indicate by raising his or her hand and shall address the presiding officer and confine his or herself to the matter under discussion.
4. Staff persons and consultants with expertise in a matter may be permitted by the presiding officer to answer specific questions about the matter.
5. Observers at a Council meeting are not allowed to speak to a matter that is under debate.
6. A member may not speak again on the debate of a matter until every other member who wishes to speak to it has been given an opportunity to do so. The only exception is that the person introducing the matter or a staff person may answer questions about the matter. Members will not speak to a matter more than twice without the permission of the presiding officer.
7. No member may speak longer than five (5) minutes on any motion except with the permission of Council.
8. When a motion is under debate, no other motion can be made except to amend it, to postpone it, to put the motion to a vote, to adjourn the debate or the Council meeting or to refer the motion to a committee.
9. A motion to amend the motion then under debate shall be disposed of first. Only one motion to amend the motion under debate can be made at a time.
10. When it appears to the presiding officer that the debate on a matter has concluded, or when Council has passed a motion to vote on the motion or when the time allocated to the debate on the matter has concluded, the presiding officer shall put the motion to a vote.
11. When a matter is being voted on, no member shall enter or leave the Council room, and no further debate is permitted.
12. No member is entitled to vote upon any motion in which he or she has a conflict of interest, and the vote of any member so interested will be disallowed.
13. Any motion decided by the Council shall not be re-introduced during the same meeting except by a two-thirds vote of the members then present.
14. Whenever the presiding officer is of the opinion that a motion offered to the Council is contrary to these rules or the by-laws, he or she shall rule the motion out of order and give his or her reasons for doing so.
15. The presiding officer shall preserve order and decorum, and shall decide questions of order, subject to an appeal to the Council without debate.
16. The above rules may be relaxed by the presiding officer if it appears that greater informality is beneficial in the particular circumstances, unless the Council requires strict adherence.

17. Members are not permitted to discuss a matter with observers while it is being debated.
18. Members shall turn off cell phones during Council meetings and, except during a break in the meeting, shall not use a cell phone, Blackberry or other electronic device. Laptops shall only be used during Council meetings to review materials related to the matter under debate (e.g., electronic copies of background documents) and to make personal notes of the debate.
19. Members are to be silent while others are speaking.
20. In all cases not provided for in these rules or by other rules of Council, the current edition of "Robert's Rules of Order" shall be followed so far as they may be applicable.
21. These Rules shall apply, with necessary modifications, to meetings conducted by teleconference or any other electronic means permitted by the by-laws, including audio or video conferencing.

SCHEDULE 3 TO THE BY-LAWS Code of Conduct

1. This Schedule applies to members of Council and members of all committees of the College.
2. Council and committee members must, at all times, maintain high standards of integrity, honesty and loyalty when discharging their College duties. They must act in the best interest of the College. They shall:
 - i. be familiar and comply with the provisions of the *Regulated Health Professions Act, 1991* and its regulations, the Health Professions Procedural Code, the *Kinesiology Act, 2007* and its regulations, and the by-laws and policies of the College;
 - ii. Be prepared to participate in Council meetings and committee work, including reading background materials and briefing documents;
 - iii. Diligently take part in committee work and actively serve on committees as appointed by the Council;
 - iv. Regularly attend meetings on time (including not missing two (2) or more consecutive meetings without reasonable cause) and participate constructively in discussions;
 - v. Offer opinions and express views on matters before the College, Council and committee, when appropriate;
 - vi. Participate in all deliberations in a respectful and courteous manner, recognizing the diverse background, skills and experience of Council and committee members;
 - vii. uphold the decisions made by a majority of Council and committees, regardless of prior individual disagreement;
 - viii. place the interests of the College, Council and committee above all other interests;
 - ix. avoid and, where that is not possible, declare any appearance of or actual conflicts of interest;
 - x. refrain from including or referencing Council or committee titles or positions held at the College in any personal or business promotional materials, advertisements and business cards (although referencing one's titles or positions held at the College in one's curriculum vitae is acceptable so long as the curriculum vitae is not overtly used in a promotional manner);
 - xi. preserve confidentiality of all information before Council or committee unless disclosure has been authorized by Council or is otherwise exempted under s. 36(1) of the RHPA;
 - xii. refrain from attempting to influence a statutory decision unless one is a member of the panel or, where there is no panel, of the committee dealing with the matter;
 - xiii. respect the boundaries of staff whose role is not to report to or work for individual Council or committee members including not contacting staff members directly, except on matters where the staff member has been assigned to provide administrative support to that committee or the Council or where otherwise appropriate; and

- xiv. be respectful of others and not engage in behaviour that might reasonably be perceived as verbal, physical or sexual abuse or harassment.

By-Law: Professional Affiliations Declaration

Date ___/___/____

I, _____ do confirm that I do not hold a responsible position such as director, owner, board member or office in, or am an employee of, any Professional Association or other regulatory College. I understand that such position would be perceived as conflict of interest.

As a member of a Standing Committee of Council, I declare that I am not engaged in any activities or in decision-making concerning any matters where I have a direct or indirect personal or financial interest.

Below I do hereby declare my current and recent affiliations with Professional Associations and other organizations:

Professional Association/Organization:	Position:	Dates:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name and Signature

Date

By-Law: Confidentiality and Non-Disclosure Agreement

This Confidentiality and Non-Disclosure Agreement is given to members of the College of Kinesiologists of Ontario (CKO), Committee members and staff in consideration of their direct relationship with the College of Kinesiologists of Ontario.

I acknowledge that as part of my relationship with or employment with the **College of Kinesiologists of Ontario**, I will be given access to information that is of a personal, confidential and/or proprietary nature, for example: personal information* related to staff, Council and members, such as names, email addresses, salaries, academic and employment information, and/or trade secrets, research data, and credit card or other financial information (“Confidential Information”), for the purpose of fulfilling membership or employment obligations.

I therefore agree:

1. To hold all confidential information in trust and strict confidence and agree that it shall be used only for the purposes required to fulfill employment obligations, and shall not be used for any other purpose, or disclosed to any third party.
2. To keep any Confidential Information in my control or possession in a physically secure location to which only I and other persons who have signed a confidentiality agreement with the **College of Kinesiologists** of Ontario have access.
3. To not remove any Confidential Information from the **College of Kinesiologists of Ontario** unless and to the extent that, I obtain the Registrar’s written pre-authorization. Whenever I am so pre-authorized, I agree to take all necessary steps to keep such Confidential Information secure** and to protect such Confidential Information from unauthorized use, reproduction or disclosure.
4. To maintain the absolute confidentiality of personal, confidential and proprietary information in recognition of the privacy and proprietary rights of others at all times, and in both professional and social situations.
5. To comply with all privacy laws and regulations, which apply to the collection, use and disclosure of personal information***.
6. At the conclusion of any discussions, or upon demand by management, to return all confidential information, including prototypes, code, written notes, photographs, sketches, models, memoranda or notes taken, to the Registrar or Council.
7. To not disclose confidential, personal and/or proprietary information to any employee, consultant or third party unless they agree to execute and be bound by the terms of this agreement and have been approved by the College in an official, legal capacity.

***Personal Information** is any information about an “identifiable individual”.

Confidential Information is any information which is designated by the College of Kinesiologists of Ontario (CKO) as confidential.

Proprietary Information is any information which is designated by the CKO as proprietary, like trade secrets and research data (also considered Confidential).

** For protection guidelines, please read the College By-Laws and HR Policies.

*** For privacy and access, please read the College By-Laws and HR Policies

I understand that a breach of confidentiality or misuse of information could result in disciplinary action up to and including termination of relationship or employment.

I understand that this undertaking survives the termination of my relationship or employment with the College of Kinesiologists of Ontario.

The laws of Ontario, Canada, shall govern this Agreement and its validity, construction and effect. I fully understand and accept responsibilities set above relating to personal, confidential and/or proprietary information.

Name: _____

Signature: _____ *Date:* _____

Witness Name: _____

Witness Signature: _____ *Date:* _____

Registration Report

Committee: Registration
Prepared for: Council
Date: December 2, 2019

Registration Committee meetings

The Registration Committee has not met since the last report to Council on September 16, 2019.

On November 7, 2019, an orientation was held for new and existing members of the Registration Committee.

Fall Examination

The fall sitting of the College's entry-to-practice examination was administered on Saturday, September 7, 2019. There were 315 candidates registered for the fall exam with 10 candidates requesting testing accommodations. As we approached closer to the exam date we had applicants withdraw from writing and 286 candidates wrote the exam.

In 2019, a total of 477 candidates wrote the exam. The number increased by 5.8% compared to the previous year but it was similar to previous years.

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

Membership Renewal

Renewal notices were sent to all eligible members on July 15, 2019. Members had until September 15, 2019 to complete their renewal. Below is a breakdown of the membership composition as of the date of suspension, October 18, 2019:

Renewed total	2675
Renewed in the general class	2280
Renewed in the inactive class	395
Suspended for non-payment of fees	153
Deceased	0
Resigned	129

A total of 282 members or 10.54% of membership have either resigned or been suspended for non-payment of fees.

- **Membership Update**

During the period September 1, 2019 to November 15, 2019 the College registered 24 new members. This number is low due mainly to the results of the September 7, 2019 entry-to-practice examination being released in late October. The College anticipates a significant increase in the amount of new members by the end of the first quarter.

The total membership stands at 2705 members, with 2310, in the general class and 395 in the inactive class. The numbers below includes members who renewed and newly registered members.

Registration Numbers as of November 15, 2019

Years	General Class	Inactive Class
2014	1280	29
2015	1419	123
2016	1731	215
2017	2149	305
2018	2158	287
2019	2310	395

Committee Report

Committee: Quality Assurance Committee
Prepared for: Council
Date: December 2, 2019

Three panels of the Quality Assurance Committee (the Committee) met once since the last report made on September 16, 2019.

Committee Orientation and Training

The twelve members who were appointed to the Committee at the September Council meeting have completed orientation and training. One member newly appointed in October will receive training at a future date. Training covered the legislative framework; Committee mandate and powers; program components and policies; governance, conflict of interest and confidentiality; the process for reviewing peer and practice assessment cases and rendering decisions and reasons; and criteria for referrals to the Inquiries, Complaints and Reports Committee.

Peer and Practice Assessment

Case Reviews

A panel of the Committee rendered 10 decisions regarding peer and practice assessments (PPA): eight cases from the Spring 2019 Cycle, one from the Spring 2018 Cycle, and one from the Fall 2018 Cycle. These kinesiologists were selected for PPA due to random selection, deferrals from previous cycles, and insufficient currency (less than 1500 practice hours in the preceding three years). Below is a summary of the decisions.

PPA Cycle	PPA Case Files Reviewed	Decisions
Spring 2018	1 file	1 - No further action
Fall 2018	1 file	1 - No further action
Spring 2019	8 files	7 - No further action 1- Notice of Intent to direct competency enhancement (demonstrated change report)

Fall 2019 Cycle

Notices to participate in the Fall 2019 PPA Cycle have been sent to 23 kinesiologists, who were randomly selected and deferred from a previous cycle. Assessments are scheduled to take place from November to January.

PPA Tool Revision

Committee discussed and adopted proposed revisions to the PPA tools. The tools and process were reviewed and modified based on feedback from stakeholders in an effort to reduce redundancies, and reduce the time it takes for kinesiologists to prepare for and participate in the assessment. Committee will monitor assessors' reports, assessor and kinesiologist feedback for the next two cycles, and then reassess to determine whether further amendments are necessary.

Self-Assessment: General Requirements Policy amendments

Committee considered and approved several proposed amendments to the Self-Assessment: General Requirements Policy regarding the move to a biennial submission frequency, firmer compliance provisions, and a recommendation to the Registration Committee that kinesiologists who apply for reinstatement and who are referred to Registration Committee complete a self-assessment to help demonstrate currency. The Executive Committee approved the policy amendments in principle for ratification by Council at the December meeting.

Continuing Professional Development Prescribed e-Learning Modules Policy amendments

Committee reviewed and approved a motion to adopt an amendment to the Continuing Professional Development: Prescribed Learning Modules Policy to strengthen compliance provisions. Kinesiologists who neglect to complete prescribed learning modules within the prescribed timeline will be selected to undergo peer and practice assessment. The issue / decision note is being presented to Council for review and approval at the December meeting.

Patient/Client-Centred Care/Service Guideline

Committee approved a decision to develop a Patient/Client-Centred Care/Service Guideline that will define patient/client-centred care/service in the context of kinesiology practice, provide a sound understanding of the application of patient-centred care principles to various practice roles and settings, and include day-to-day practice illustrations. The issue / decision note is being presented to Council for review and approval at the December meeting.

Committee Report

Committee: Inquiries, Complaints and Reports Committee
Prepared for: Council
Date: December 2, 2019

New Appointments and Panel Structure

Appointments to the Inquires, Complaints and Reports Committee for the 2019-2020 Council term were approved at the meeting of Council in September 2019.

In an effort to improve efficiency and reduce the administrative burden in scheduling panel meetings, members of the Committee were appointed to one of three standing panels. Each panel is scheduled to meet four times over the course of the year (once every three months), with one panel meeting each month in rotation. Ad hoc panels will be struck as required to consider any urgent matters. Where no business is ready for consideration by a panel in a given month, the scheduled panel meeting will be cancelled in advance.

Orientation

New this year, staff produced an online orientation video presentation for members of the Committee covering such topics as: the legal framework, mandate and powers of the Committee; confidentiality; conflicts of interest; Committee procedures; deliberations and decisions; and the role of staff. Committee members were asked to review the video at their convenience and to send confirmation to staff when completed. To supplement this online orientation, new members of the Committee participated in a mock complaint exercise held on October 31, 2019, in which they reviewed a sample complaint file and engaged in a facilitated deliberation.

Meetings and Decisions

Between September 2019 and the date of preparation of this report¹, panels of the Committee have met on three occasions (October 7, 24; November 8) and conducted the following business:

- Referred specified allegations of professional misconduct to the Discipline Committee for a hearing in respect of one complaint matter.

At the current time, there is one report matter under active investigation; and one complaint matter and one report matter remain under consideration by a panel of the Committee. Two complaint

¹ November 15, 2019

matters from prior terms remain under consideration at the Health Professions Appeal and Review Board.

Committee Report

Committee: Discipline Committee
Prepared for: Council
Date: December 2, 2019

New Appointments

Appointments to the Discipline Committee for the 2019-2020 Council term were approved at the meeting of Council in September 2019.

Orientation

New this year, staff produced an online orientation video presentation for members of the Committee covering such topics as: jurisdiction; key principles; roles of hearing participants; pre-hearing procedures; hearing process; decisions, findings, orders and reasons; and appeals. Committee members were asked to review the video at their convenience and to send confirmation to staff when completed.

To supplement this online orientation, select members of the Committee participated in full day training and orientation sessions organized by Health Professions Regulators Ontario (formerly the Federation of Health Regulatory Colleges of Ontario) held on October 24, 2019 (basic session) and October 25, 2019 (advanced session.) The members of the Committee who participated were as follows:

- Basic Session
 - Derek DeBono, R. Kin.
 - Victoria Nicholson, Public Member
 - Pamela Paquette, R. Kin. (non-Council Committee member)
- Advanced Session
 - Mary Pat Moore, Chair, Public Member

Participants in the training sessions provided positive reviews and strongly recommended the sessions for future Committee training needs.

Matters Referred

At the current time, specified allegations of professional misconduct have been referred to the Committee for a hearing in respect of three separate matters. Dates for these hearings will be set by the Chair as required in consultation with legal counsel for the parties.

Committee Report

Committee: Patient Relations Committee
Prepared for: Council
Date: December 2, 2019

New Appointments

Appointments to the Patient Relations Committee for the 2019-2020 Council term were approved at the meeting of Council in September 2019.

Orientation

New this year, staff produced an online orientation video presentation for members of the Committee covering such topics as: the legal framework, mandate and powers of the Committee; defining patient sexual abuse; the College's patient relations program; funding for therapy and counselling for patients alleging sexual abuse by a kinesiologist; and administrative procedures for the Committee. Committee members were asked to review the video at their convenience and to send confirmation to staff when completed.

An inaugural meeting of the Committee will be scheduled in the coming months.



2019/2020 Performance Report

Overall highlights:



30 new registrants



286 sept exam stats



23 fall PPAs



4 ongoing investigations

Operational highlights (Q1: Sept 1 to Nov 30, 2019)

Focus	Deliverables	Status	Comments and Impacts
<i>Corporate</i>	Completion of 2018/2019 Audit	Green	Draft Financial Statements for Council approval
	Implementation of an Employee Assistance Program	Green	Service provider hired for Employee Assistance Program
	Review of College Policies	Yellow	<ul style="list-style-type: none"> Legal counsel to review HR Policies Schedule developed for review of College policies
	Completion of Council orientation and Chairs training	Green	Rigours training provided to new Council on Nov. 5 and to Committee Chairs on Nov. 25
<i>Communications</i>	Development of 2018/2019 Annual Report	Yellow	<ul style="list-style-type: none"> Graphic designer engaged Content drafted and statistics gathered On track for presentation at December Council meeting
	Regular and timely communication to R.Kins	Yellow	<ul style="list-style-type: none"> Three editions of @CKO distributed in September, October and November Work plans and content calendar for remainder of 2019 developed Articles promoted on social media
	University outreach	Yellow	<ul style="list-style-type: none"> 12 schools visited; more visits scheduled
	Develop communications strategy the corresponds to 2019-2022 Strategic Plan	Yellow	
	Engage Citizens Advisory Group	Green	<ul style="list-style-type: none"> Communications Manager attended November 2 meeting to observe proceedings and how the group interacts
<i>Registration</i>	Conduct Registration Committee Orientation and Training Meeting. Incorporating content on risk reduction.	Yellow	Registration Committee training completed. Two new members pending training.
	Include content on risk reduction in case reviews documents.	Yellow	Updating case review documents to include content specific to risk reduction.

Focus	Deliverables	Status	Comments and Impacts
	Research and documentation of required changes for the Kinesiology Core Competency Profile		In the review phase. Findings to be reported to registration committee for further discussion.
	Preparing exam results to present to Universities on their students' performance on the Entry to Practice Examination		Results to be presented to the Universities on December 9, 2019 at the University Liaison Meeting.
	Mapping of correlation of exam results in key competency areas and university performance		Identifying linkages between exam performance in key competencies areas and the individual performance of universities.
	Update to Jurisprudence e-learning module		Small changes made to the module; further updates to be completed
	Registration policy creation and updating		Reviewing existing registration policies and developing new policies as required.
	Mapping of Public Register needs / outstanding requirements.		Identifying gaps in information to address the changes required to our data management system and online public register.
Quality Assurance	QA Committee members orientated and trained.		Twelve QAC members trained to carry out Committee mandate.
	Facilitated debrief training webinars with peer assessors		Reviewed Spring 2019 Cycle Reports. Assessors apprised of tool revisions and program direction. Fall 2019 PPA Cycle in progress.
	Peer and practice assessment tools revised		QAC approved tool revisions with provision to reassess after two cycles
	Patient-Centred Care Guideline development approved		QAC approved development. Next step: issue call for expressions of interest
	Self-Assessment: General Requirements Policy amendments approved by QA Committee		Next steps: notify stakeholders, and begin content development
	Continuing Professional Development: Prescribed Learning Modules Policy amendments approved by QA Committee.		Next steps: develop communications plan, notify stakeholders
Professional Conduct	Provide training and orientation to the committees in the Professional conduct portfolio		Online training modules created for ICRC, Patient Relations, and Discipline. Staff to follow-up with committee members to confirm completion of training. All new ICRC members have confirmed completion; lower completion rates for other committees. Mock complaint exercise held for new ICRC members October 31/19. HPRO disciplinary hearing training completed by four committee members October 24, 25/19.
	Prepare for upcoming hearings of the Discipline Committee		Four matters referred to the Discipline Committee for hearings; they will be scheduled over the coming months in conjunction with legal counsel
	Updates to Standards and Guidelines		Draft Guideline on Complementary and Alternative Therapies on hold pending release of an updated guideline on the same subject by the College of Physicians and Surgeons of Ontario; estimated completion in mid-2020. New plan for rolling review of standards and guidelines being developed in coordination with Director of Quality Assurance; to be spoken to at December Council meeting.

Legend: Completed



Ongoing



Incomplete



REVENUES

COLLEGE OF KINESIOLOGISTS OF ONTARIO - REVENUE REPORT FOR QTR 1
(SEPT - NOV 26, 2019 Interim) FOR THE FISCAL YEAR 2019/2020

updated 28/11/2019

	1	3	4	5	6
CATEGORY	APPROVED REVENUE FORECAST (Sept 1 2019 to Aug 31, 2020)	PROJECTIONS QTR 1 SEPT 1 - NOV 30, 2019	REVENUES RECEIVED QTR 1 SEPT 1 - NOV 26, 2019 (INTERIM)	VARIANCE QTR 1	
	\$	\$	\$	\$	
Revenue:					
Jurisprudence Fee (\$48.25)	24,125	2,027	2,509	483	
Application Fee (\$100)	47,500	2,000	2,300	300	
Examination Fee (\$400)	190,000	0	400	400	
Registration Fees*	2,589,499	1,099,036	1,157,863	58,827	
Interest Income	25,000	6,250	7,650	1,400	
TOTAL REVENUE	2,876,124	1,109,313	1,170,722	61,409	
*Registration Fees made-up of:	Approved Forecast	Projections Q1 (Sept-Nov)	Interim Actual (Sept-Nov)	Variance Q1	
	\$	\$	\$	\$	
New Registrants					
- Sept - Nov (\$650)	84,500	84,500	34,450	-50,050	
- Dec - Feb (\$487.50)	24,863			0	
- Mar - May (\$325)	15,600			0	
- Jun - Aug (\$162.50)	7,800			0	
Renewal (\$650)	2,364,736	923,936	1,023,213	99,277	
Change in Status (members back)	0		7,650	7,650	
Professional Corporation	1,200	0	400	400	
Professional Corporation Late fee	200	0	0	0	
Inactive Renewal (\$200)	82,000	82,000	69,250	-12,750	
Inactive Renewal Late Fee(\$50)	3,000	3,000	3,500	500	
Renewal Late Fee (\$100)	5,000	5,000	17,900	12,900	
Re-instatement Fee (\$325)	600	600	1,500	900	
Total	2,589,499	1,099,036	1,157,863	58,827	

Notes

We are expecting to meet and exceed projections under some categories by end of Q1.

Registration Fees details

New Registration Sept to Nov variance: applicants from April 2019 exam applied in previous quarters. Sept 2019 exam applicants will apply by end of Q1 & in Q2. Expected increase in new applicants in Q2 to cover shortfall in Q1.

Inactive Renewal variance: shortfall due to more people renewing in general class than inactive class this year and
increase in suspensions: 2018: 61 vs 2019: 153

Renewal late Fee: members renewing late increased compared to previous years.

EXPENDITURES

COLLEGE OF KINESIOLOGISTS OF ONTARIO - EXPENDITURE FORECAST FOR QTR 1 (SEPT-NOV 26,2019 Interim) FOR THE FISCAL YEAR 2019/2020					
	1	3	4	5	6
CATEGORY	APPROVED BUDGET Sept 1 2019 to Aug. 31, 2020	PROJECTIONS QTR 1 SEPT - NOV 30, 2019	ACTUAL EXPENSES QTR 1 SEPT - NOV 26, 2019 (INTERIM)	VARIANCE QTR 1	
	\$	\$	\$	\$	\$
Expenditure:					
Council & Committees	87,800	12,663	12,028	635	
Professional Fees	56,132	88,699	62,962	25,737	
Communications & Media	104,000	12,774	11,509	1,265	
Rent & Facility Costs	223,450	58,609	58,609	0	
Office & General	114,450	31,167	30,873	294	
Salaries & Wages	1,083,728	244,041	240,914	3,127	
Registration	166,500	16,850	15,933	917	
Quality Assurance	56,340	1,200	1,089	111	
Professional Conduct	30,000	7,847	7,347	500	
TOTAL EXPENDITURE	1,922,400	473,850	441,264	32,586	

Major Highlights:

Council and Committee

Payment of expenses for Council and Committees and orientation/training of new members in Q1.

Professional Fees

Expenses for legal fees in Q1. Shortfall to be covered under Quality Assurance and Communications.

Total savings under QA & Communications to cover legal fees:\$51,000

Payment for the 2018/2019 financial audit and to legal counsel for general legal advice to the College .

Communications & Media

Revised quotes sought for full revamp of the College website and member communications to be developed in-house. Savings to cover legal costs under 'Professional Fees'.

Payment for IT support, design and printing of student brochures and other materials in Q1.

Office & General

Payment for bank charges, telephone/fax, equipment rental, office supplies and postage and courier in Q1.

Registration

Payment for database maintenance, annual licensing and Jurisprudence hosting in Q1.

Quality Assurance

Expenses for PPA fall cycle to be paid by end of Q1 and beginning Q2. Reduction in QA budget reallocated to legal cost under "Professional Fees". Suspend PPA spring 2020 cycle and assessor training, postpone development of IMIS link to skillsure until next fiscal and e-learning modules annual maintenance fee prorated for three month duration. Move to biennial self assessment and replacement of record keeping e-learning module development with webinars (s).

Professional Conduct

Expenditures for investigations and legal advice in Q1. These expenditures are demand driven and can occur at any time.



Resolution: Acceptance of Audited Financial Statements for fiscal 2018/2019

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

Whereas the firm of Crowe Soberman was appointed to carry out this audit and did so during
the month of **October 2019**; 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 accept
and approve for circulation, and submission to the Minister of Health and Long-Term Care,
the audited financial statements for 2018/2019.**

Moved by:

Seconded by:

Date: Monday, December 2, 2019



IN MOTION

A RENEWED COMMITMENT TO PUBLIC PROTECTION

2018/2019 ANNUAL REPORT

COLLEGE OF
KINESIOLOGISTS
OF ONTARIO





NEW PLAN. RENEWED COMMITMENT.

2018/2019 ANNUAL REPORT

For the period September 1, 2018 to August 31, 2019

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PRESIDENT'S MESSAGE

A NEW APPROACH TO GOVERNANCE



MODERNIZING
HOW WE OPERATE



Every day, over 2800 kinesiologists across Ontario are working in the public's interest. How do they do this? They have met strict standards to be able to practise their profession. They are practising according to standards and guidelines, and they follow a code of ethics. They are participating in a program to help ensure their knowledge and skills are up-to-date. They are accountable and responsible to a regulatory body for their conduct and practice.

As the regulatory body for kinesiologists in Ontario, the College sets and enforces these standards and requirements. Our commitment to ensuring that patients and clients receive safe, competent and ethical kinesiology services is one we take seriously.

That's why in 2018/2019 we supported and committed to a new way of governing health professions. We were pleased to submit a letter to the Minister of Health and Long-Term Care, stating our support for the College of Nurses of Ontario's Vision 2020. Vision 2020 is a bold, new proposal for modernizing how regulatory colleges govern themselves.

The College of Kinesiologists supports, among other measures, reducing the size of our Council, or board of directors; increasing the number of public

appointees on Council; and appointing Council members based on defined qualifications and expertise, rather than by election. In the coming months, staff and Council will work to make these commitments a reality. As we change our processes, we will seek your feedback and update you on our progress.

It has been an honour to serve the public and advance the College's important commitments.

Ken Alger,
President

REGISTRAR'S MESSAGE

A NEW PLAN FOR PUBLIC PROTECTION



STRATEGIC PLAN
FOR 2019-2022
DEVELOPED



As the College makes decisions, we thoroughly consider how our work affects the patients and clients of kinesiologists. We understand that everything we do, from the requirements we set to be eligible to practise, to the way we handle complaints and discipline, has a direct impact on the many Ontarians who seek the services of registered kinesiologists. In all of our decision-making, our guiding principle is whether these decisions serve the public interest.

This commitment to public protection is clear in the College's new strategic plan for 2019-2022. Over the last year, we spent time developing a plan that we believe will improve the way we carry out our duties and reduce harm to patients and clients. The plan details our goals and priorities over the next three years, and how we will achieve those goals. With so many different individuals impacted by our work – patients and clients of kinesiologists; kinesiologists and prospective kinesiologists; employers; universities and colleges; and professional associations – we must be transparent about what we do and how we will do it.

Over the next three years, we will develop a profile of qualifications and expertise to use in the selection of Council and committee members. We will also provide further training to Council and committee members on decision-making that is in the public interest. We have committed to developing a definition of patient/client-centred care in kinesiology, and providing resources to kinesiologists on applying patient/client-centred care in practice.

These are just some of several commitments that will guide our work. You can read more about our strategic plan in the pages that follow. I would like to thank everyone who provided input into the development of this plan. Your feedback was invaluable and helped us develop a roadmap that will build on our successes.

The regulatory landscape is continuously evolving, and the College is ready and able to adapt. I am energized by the work that lies ahead and by how we can better serve and protect the public.

Brenda Kritzer,
Registrar and CEO

ABOUT THE COLLEGE

The College is the organization that regulates kinesiologists working in the province of Ontario. The College exists to protect the public 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 all complaints received about kinesiologists and disciplining when necessary.

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

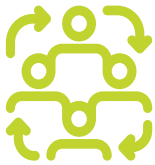
The College of Kinesiologists of Ontario holds honesty and integrity as its guiding principles. The College is committed to operating in a fair and open manner and treating its staff, members, the public and stakeholders with respect and dignity.

HIGHLIGHTS



A NEW PLAN FOR PUBLIC PROTECTION

Council approved a new strategic plan for the period 2019-2022 that describes how the College will improve the way it protects the public and reduce risk of harm to patients and clients. You can read the full plan in the pages that follow.



ENGAGING PATIENTS AND CLIENTS

The College joined the [Citizen Advisory Group \(CAG\)](#), a group made up of 40-50 members of the public who represent different patient/client demographics. The College of Physiotherapists of Ontario created the group in 2015 and it now includes 18 partner colleges. The CAG acts as an informed focus group and provides colleges with feedback on various matters. The College will start engaging the CAG in 2020 to gather the public's perspective on certain topics.



ADDRESSING SPECIALTIES

Council created the Specialties Committee to consider requests to create specialties within the profession. The Committee's decision-making is guided by one critical question: Is the risk of harm to the public sufficient to require additional or specific regulation? The Committee is considering a request from the Ontario Athletic Therapist Association to designate athletic therapy a specialty within kinesiology. Before making any decisions, Council will seek feedback from the public, kinesiologists, academic institutions, professional associations, health professions regulators, government and others potentially affected by these decisions.



RESOURCES FOR VICTIMS OF SEXUAL ABUSE

Council approved a policy that describes how the College will review applications for funding for therapy for persons sexually abused by kinesiologists, and what information they must submit to apply for funding. Staff also developed an application form and resources explaining how patients/clients can access this funding.



INCREASING TRANSPARENCY

Council approved the posting of more information about kinesiologists. The following information must be posted on the Public Register of Kinesiologists:

- A summary of information relating to findings of guilt against a kinesiologist under the Criminal Code and the *Controlled Drugs and Substances Act*, unless the conviction was subject to a record suspension, pardon or successful appeal.
- Any conditions of release related to a charge or finding of guilt under the Criminal Code and the *Controlled Drugs and Substances Act*, and any variations to those conditions.
- Information about any outstanding charges for an offence under the Criminal Code and the *Controlled Drugs and Substances Act*.
- Information about disciplinary, professional misconduct or incompetence findings by another regulatory or licensing authority in any jurisdiction.
- Information about a kinesiologist's licensure or registration to practice another profession in Ontario or another jurisdiction.

2019-2022 STRATEGIC PLAN



How we'll do this:

- Develop a profile of qualifications and expertise to use in the selection of Council and committee members that seeks the following skill sets: technical, leadership, decision-making and interpersonal. We will also focus on equity, diversity and inclusion.
- Develop training mechanisms for Council and committees that focus on the public interest and reducing risk of harm to patients/clients.
- Increase openness around our processes to select Council and committee members.

How we'll do this:

- Develop a definition of patient/client-centred care in the context of kinesiology practice and resources for how to apply patient/client-centred care in practice.
- Increase communication to kinesiologists on recommended practices to reduce risk of harm.
- Increase communication to various groups on the importance of working with registered kinesiologists and other regulated health professionals.
- Increase resources to patients/clients of kinesiologists to empower them in the management of their care.

How we'll do this:

- Publicly report on progress towards achieving the goals in the College's strategic plan and how the public interest is served by these goals.
- Continually improve business and regulatory processes to enhance public protection.

REGISTRANT STATISTICS

While the College's renewal deadline is August 31, in 2019, the deadline was extended to September 15. To ensure a fulsome report of registrant statistics, the following data is as of October 1, 2019 unless otherwise indicated.

REGISTRATION STATUS



GENERAL
2,419
INACTIVE
474

GENDER



MALE
28%

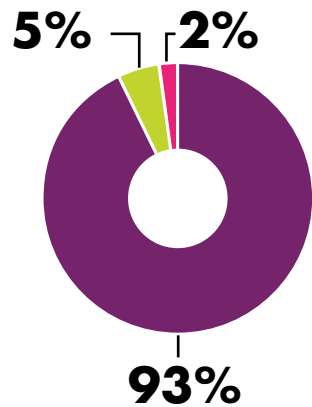


FEMALE
54%



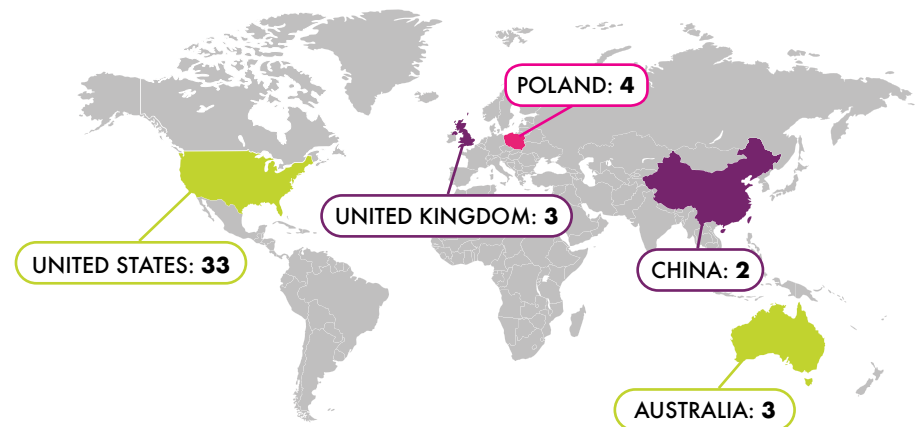
UNDEFINED
18%

PLACE OF EDUCATION

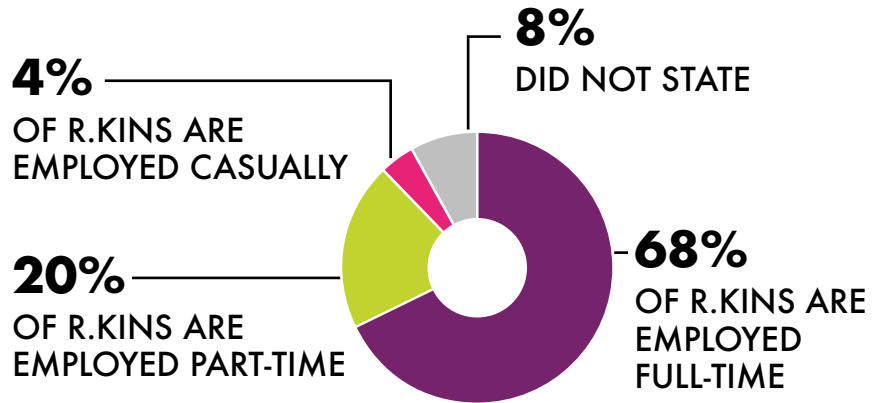


- INTERNATIONALLY EDUCATED
- CANADIAN EDUCATED (EXCLUDING ONTARIO)
- ONTARIO EDUCATED

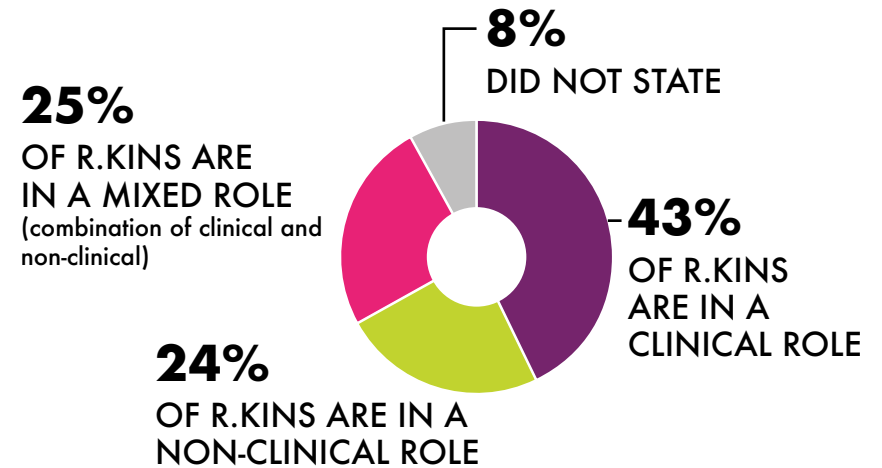
TOP 5 COUNTRIES OF EDUCATION



EMPLOYMENT STATUS



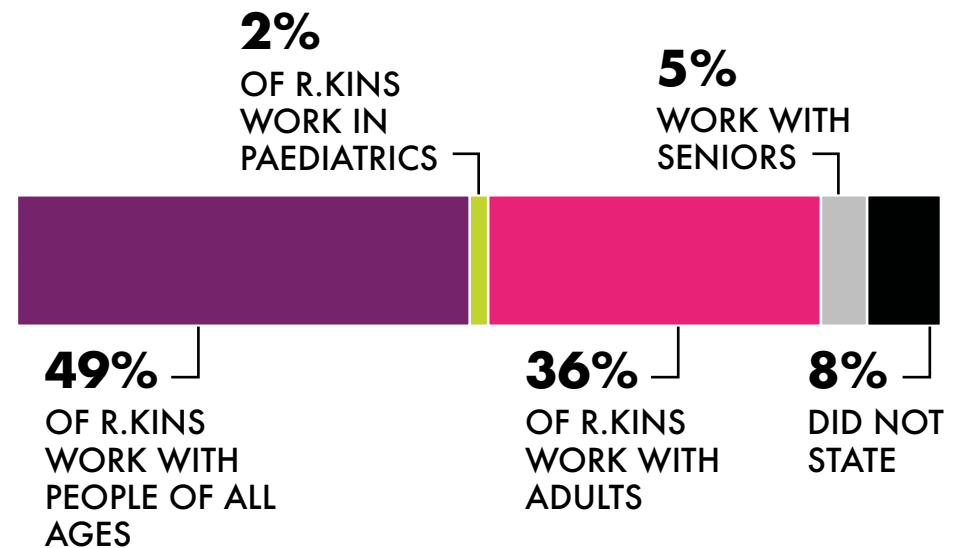
NATURE OF PRACTICE



TOP PRACTICE SETTINGS



AGE OF CLIENTS



TOP PRACTICE ROLES



*The reported data only includes general class members who renewed their registration as of October 1, 2019.

EXAM

431 applicants wrote the entry-to-practice exam between September 1, 2018 and August 31, 2019. Each year, the College is seeing a slight increase in the number of individuals writing the exam.

	Registered	Wrote	Passed	% Passing
September 2018	259	240	180	75
April 2019	214	191	133	70

The College acts as a trusted source of information regarding the practice and profession of kinesiology. From September 1, 2018 to August 31, 2019, the College responded to over 2050 enquiries from kinesiologists and the public. All data below is as of August 31, 2019.

TOP PRACTICE ADVISORY QUESTIONS RECEIVED



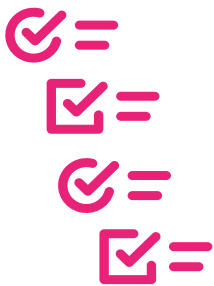
Scope of practice, controlled acts, delegation	32.1%
Fees and billing	12.5%
Consent and capacity	7.1%
Record keeping	6.3%
Advertising; social media	4.5%
Privacy and confidentiality	4.5%
Titles and designations	2.7%
Insurance issues	2.7%
Employment issues	2.7%
Other	17.9%

WHO ASKED



Applicant	52.6%
Kinesiologist	42.5%
Public	1.1%
Employer	0.9%
Insurance company	0.5%
Health professional	0.4%
Student	0.4%
University/college	0.4%
Association	0.2%
Other	1.0%

TOPICS



Applications	33.9%
Registration (e.g. renewal)	26.9%
Quality assurance	16.7%
Examinations	14.2%
Practice advisory	5.5%
General	2.0%
Professional conduct	0.5%
Administration	0.3%

SOURCE



EMAIL
67.5%



PHONE
31.8%



OTHER (E.G. FAX)
0.7%

REGISTRATION COMMITTEE

The Registration Committee is responsible for developing and implementing transparent, objective, impartial, and fair registration practices that adhere to the policies approved by Council and the requirements for registration. The Committee's work protects the public by ensuring that only qualified individuals are admitted 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;
- is of the opinion that terms, conditions or limitations should be imposed on a certificate of registration; or
- proposes to refuse the application.

From September 1, 2018 to August 31, 2019, the Registration Committee reviewed and decided on the following:

TYPE OF CASE	NUMBER OF CASES	DECISION
Non-exemptible educational requirement	10	<ul style="list-style-type: none"> • 1 application was approved • 6 applications were refused • 3 decisions were postponed pending further information or additional training prior to approval
Reinstatement to the General Class after two years in the Inactive Class	2	<ul style="list-style-type: none"> • 1 reinstatement into the General Class was granted • 1 decision was postponed pending further information prior to approval
Expiration of one-year period for registration following notification of eligibility	4	<ul style="list-style-type: none"> • 4 applications were approved and granted a certificate of registration
Exemption from writing the entry-to-practice examination	1	<ul style="list-style-type: none"> • 1 application was granted exemption
Proposal for upgrading/ remediation	5	<ul style="list-style-type: none"> • 3 remediation plans were approved • 2 remediation plans were refused
Review decision of the Health Professions Appeal and Review Board (HPARB)	1	<ul style="list-style-type: none"> • HPARB's decision was upheld and the applicant was granted a certificate of registration

Applicants who are not satisfied with the decision of the Registration Committee may appeal the decision to the [Health Professions Appeal and Review Board \(HPARB\)](#). There were no appeals submitted to HPARB from September 1, 2018 to August 31, 2019.

In addition to reviewing applications referred by the Registrar, the Committee carried out numerous other responsibilities, including:

- Submission of the annual [Fair Registration Practices Report](#) to the Office of the Fairness Commissioner of Ontario.
- Submission of the [Health Professions Database Report](#) to the Ministry of Health and Long-Term Care of Ontario.
- Review of submission for substantial equivalency of a non-kinesiology program to a four-year kinesiology undergraduate program from an Ontario university.
- Orientation and training of new Committee members.

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 September 1, 2018 to August 31, 2019.

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 Committee met twice from September 1, 2018 to August 31, 2019.

The College 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

The Quality Assurance (QA) Committee protects the public by administering programs that help kinesiologists keep their knowledge and skills up-to-date.

The Quality Assurance Program includes:

- self-assessment and continuing professional development;
- peer and practice assessment; and
- mechanisms for the College to monitor kinesiologists' participation in and compliance with the Program.

The QA Program is intended to be educational and supportive in nature. All kinesiologists registered in the General Class must participate in the Program and demonstrate commitment to continuous improvement and ongoing learning.

From September 1, 2018 to August 31, 2019, the QA Committee:

- administered the sixth annual self-assessment;
- increased the number of peer and practice assessments by 36% to a total of 49 (from September 1, 2018 to August 31, 2019);
- conducted the second administration of the Prevention of Sexual Abuse e-Learning Module for newly registered kinesiologists; and
- conducted the third administration of the Ethics and Professionalism e-Learning Module for newly registered kinesiologists.

SELF-ASSESSMENT

Self-assessment is the foundation on which kinesiologists plan their professional development throughout the year. Self-assessment helps guide kinesiologists in reflecting on their practice in relation to the practice standards and essential competencies, and helps them to identify areas of knowledge, skill and judgement to strengthen.

TOP FIVE PRACTICE STANDARD-RELATED LEARNING GOALS IDENTIFIED BY KINESIOLOGISTS:

- 1 Record keeping
- 2 Advertising (same frequency as #1)
- 3 Professional collaboration
- 4 Fees and billing
- 5 Dual health care (meaning a kinesiologist also practices in another health care profession)

PEER AND PRACTICE ASSESSMENT

The peer and practice assessment (PPA) is an individualized educational opportunity designed to assess kinesiologists' knowledge, skills and judgement, and to help them identify areas of strength and opportunities for improvement within their practice.

PPAS CONDUCTED TO AUGUST 31, 2019 (REPORTED BY CALENDAR YEAR)

TOTAL PPAs CONDUCTED TO DATE	2015	2016	2017	2018	2019 (SPRING CYCLE ONLY)
134	11: all random selection	16: all random selection	36: <ul style="list-style-type: none"> • 2 insufficient currency (<1500 practice hours within last 3 years) • 34 random selection 	55: <ul style="list-style-type: none"> • 2 volunteers • 4 non-compliant with other QA program requirements • 4 insufficient currency • 45 random selection 	16: <ul style="list-style-type: none"> • 1 random selection • 15 insufficient currency

TOP AREAS FOR IMPROVEMENT IDENTIFIED THROUGH THE PPA

Using a systematic approach to record keeping and obtaining informed consent continue to be identified as the top two areas for improvement, particularly for those working in multi-disciplinary teams where responsibility for clinical files may be diffused. The College has developed a webinar, video, infographic and newsletter articles on record keeping, and will develop further resources to address this risk area in the coming year. Consent resources include a webinar and articles, and the College will release additional practice

supports on this topic. The third most common area for improvement is adherence to confidentiality and privacy legislation. The College will refresh the Jurisprudence e-Learning Module and circulate newsletter articles to address this gap.

FINAL PPA DECISIONS BY THE QA COMMITTEE (UP TO AUGUST 31, 2019)

DECISION	2015	2016	2017	2018	2019 (SPRING CYCLE ONLY)
No further action	8	16	34	51	9
Competency Enhancement – Demonstrated Change Report	2	0	2	0	
Competency Enhancement – Mentorship Program	1	0	0	1	
To be determined				3	7
Total (134)	11	16	36	55	16

REFERRALS FOR PROFESSIONAL MISCONDUCT

The Quality Assurance Committee referred three kinesiologists to the Inquiries, Complaints and Reports Committee (ICRC), requesting the Registrar to conduct an investigation for neglecting to complete mandatory QA Program requirements (e.g. peer and practice assessment). Two resulted in referrals to the Discipline Committee and one resulted in the ICRC directing the kinesiologist to appear for an oral caution.

COMPLAINTS AND DISCIPLINE

The Inquiries, Complaints and Reports Committee (ICRC) protects the public by reviewing concerns about kinesiologists related to potential professional misconduct, incompetence or incapacity. Concerns are brought to the College's attention through formal complaints by patients/clients, mandatory reports by employers and other health care professionals, and other information provided to the Registrar. The ICRC conducts a thorough investigation, evaluates the risk to the public and takes appropriate action to address any potential concerns.

Following its review of a formal complaint or Registrar's report, the Inquiries, Complaints and Reports Committee may do any one or more of the following to address concerns:

- refer specified allegations of professional misconduct or incompetence about a kinesiologist to the Discipline Committee for a hearing;
- investigate a kinesiologist's capacity and/or refer the matter to the Fitness to Practise Committee;
- require a kinesiologist to appear before a panel of the ICRC to be cautioned;
- take other appropriate action, which may include:
 - o requiring a kinesiologist to complete a specified continuing education or remediation program;
 - o asking the kinesiologist to voluntarily restrict their practice, or to pursue a mentoring or monitoring program; or
 - o providing a kinesiologist with advice and/or recommendations;
- take no action, where no concerns have been identified.

If the ICRC is of the opinion that a kinesiologist's conduct is likely to put patients/clients at risk of harm, the ICRC may suspend or impose terms, conditions, or limitations on their certificate of registration.

COMMITTEE ACTIVITY

From September 1, 2018 to August 31, 2019, panels of the ICRC met 14 times. In total, the panels conducted the following business:

Report matters reviewed

1

Complaint matters reviewed

7

Appointments of investigator approved or requested

13

Three complaints and two Registrar's Reports remained under investigation as of August 31, 2019.

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)

5

Advice/recommendations

2

Specified Continuing Education or Remediation Program (SCERP)

1

Caution in person

1

Referral of specified allegations to the Discipline Committee

2

Appeals

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

A matter decided by a panel of the ICRC in July 2018 was appealed to HPARB. In March 2019, HPARB confirmed the Committee’s decision.

Two additional matters were appealed to HPARB from September 1, 2018, to August 31, 2019. Reviews of both of these matters are pending.

DISCIPLINE COMMITTEE

The Discipline Committee conducts formal hearings to review allegations of professional misconduct or incompetence on the part of a kinesiologist. The Committee determines appropriate penalties where the allegations are proven to discipline the kinesiologist and protect the public from future risk of harm. Matters are referred to the Discipline Committee by the ICRC.

COMMITTEE ACTIVITY

The Discipline Committee did not meet from September 1, 2018 to August 31, 2019.

FITNESS TO PRACTISE COMMITTEE

The Fitness to Practise Committee reviews matters where a kinesiologist is alleged to be incapacitated, and, if so, determines how best to deal with the kinesiologist to protect the public. “Incapacitated” means that the

kinesiologist is suffering from a physical or mental condition or disorder that makes it desirable in the interest of the public that their certificate of registration be subject to terms, conditions or limitations, or that they no longer be permitted to practise.

COMMITTEE ACTIVITY

The Fitness to Practise Committee did not meet from September 1, 2018 to August 31, 2019.

PATIENT RELATIONS COMMITTEE

The Patient Relations Committee oversees the Patient Relations Program, which is designed to enhance professional relations between kinesiologists and patients/clients. The Patient Relations Program must incorporate measures for preventing and dealing with sexual abuse of patients/clients, including:

- educational requirements for kinesiologists;
- guidelines for the conduct of kinesiologists with their patients/clients;
- training for the College’s staff; and
- providing information to the public.

The Patient Relations Committee also oversees the program to provide funding for therapy and counselling for persons alleging sexual abuse by a kinesiologist.

COMMITTEE ACTIVITY

The Committee met twice from September 1, 2018 to August 31, 2019.

The Committee developed a new policy and supporting materials, including application forms and a frequently asked questions document, for patients/clients seeking access to funding for therapy and counselling for alleged sexual abuse by a kinesiologist. The policy and supporting documents provide a clear explanation for patients/clients on how to access this funding and what to expect as part of the application process. The materials were presented to and approved by Council in April 2019.

FINANCE AND PLANNING COMMITTEE

The Planning and Finance Committee provides guidance and advice on financial matters and oversees planning activities that help the College achieve its strategic goals. The Committee met four times and highlights from their work include:

- Partnering with the Federation of Medical Regulatory Authorities of Canada (FMRAC) to contract with TD Merchant Service to provide credit card processing services. FMRAC members receive group rates on credit card processing fees and the collaboration will reduce the College's credit card processing fees significantly.
- Moving the College to a new bank to secure better rates and reduced fees. The switch resulted in a significant increase in interest revenue for the year.

COLLEGE COUNCIL AND STAFF

A Council, similar to a board of directors, guides the College's work and ensures that the College is working in the public's interest. Council is made up of kinesiologists elected by their peers and individuals appointed by the Ontario Government.

COUNCIL MEMBERS:



Ken Alger
College President



Jennifer Pereira, R.Kin
College Vice-President



Nelson Amaral, R.Kin



Marilyn Bartlett



Lori-Anne Beckford



Jennifer Bushell, R.Kin



Nicole DiFilippo, R.Kin



Kalen Johnson



Elwin Lau, R.Kin



Chad McCleave



Michelle Meghie



Mary Pat Moore



Stefanie Moser, R.Kin



Graydon Raymer, R.Kin



Ryan Wight, R.Kin



Michelle Young, R.Kin

Not Pictured

Derek DeBono, R.Kin

Each year, Council appoints kinesiologists to sit on committees as non-Council committee members.

NON-COUNCIL COMMITTEE MEMBERS:

Denis Beaulac
Jaclyn Benn
Alex Burnaru
Rosario Colomba
Faith Delos-Reyes
Mardy Frazer

Susan Garfat
Alisha Gleiser
Jessica Johnson
Jonathan Kwok
Nicole Last
Steven Lidstone

Benjamin Matthie
Renee Raymond
Andrea Scrivener
Chris Serran
Richard Wotherspoon

COLLEGE STAFF



Brenda Kritzer,
Registrar and CEO



Nancy Leris, Director
of Operations and
Financial Services



Magda Reder,
Registration and Examinations
Coordinator



Colleen Foster,
Administrative Assistant –
Registration



Lara Thacker, Director
of Quality Assurance



Eric Bruce, Director of
Professional Conduct



Ryan Pestana,
Communications Manager
(since July 2019)

Not Pictured

Tracey Scott, Executive Assistant
(until May 2019)

Vivian Fragale, Executive Assistant
(since August 2019)

Lily Seto, Administrative Assistant

Ugie Ifesi, Manager of Registration Services
(until October 2018)

Keisha Simpson, Manager of Registration Services
(since December 2018)

Sue Behari-Mc McGinty, Interim Director of Quality
Assurance (maternity leave replacement)

Danae Theakston, Communications Officer
(until June 2019)

Resolution: Approval of 2018-2019 Annual Report

Whereas Council is required to prepare and submit an annual report to the Ministry of Health and Long-Term Care and post the report to the College website; and

Whereas the report as presented fairly represents the College's achievements throughout 2018-2019;

Resolution

Therefore, be it resolved that the Council of the College of Kinesiologists of Ontario accept and approve for circulation the draft annual report for 2018-2019.

Moved by:

Seconded by:

Date: Monday, December 2, 2019

Issue or Decision Note

Issue or Decision: Self-Assessment: General Requirements Policy proposed amendments re submission frequency, non-compliance, inactive class kinesiologists and content revision

Prepared for: Council

Date: December 2, 2019

Background:

The College is required under the *Regulated Health Professions Act, 1991* to have in place a Quality Assurance (QA) Program to help the College achieve its mandate of ensuring that the public receives competent, safe and ethical kinesiology services. Self-Assessment is a legislated component of all QA Programs. Regulators are mandated to monitor registrants' participation and compliance with Self-Assessment.

The QA Program regulation states:

“Every member shall participate in self-assessment, continuing education and professional development activities annually, or where a longer period has been specified by the Committee, during that period, in order to maintain the knowledge, skills and judgment required to practise the profession in accordance with the standards of practice and ethics set by the College.”

The Self-Assessment: General Requirements Policy sets out both what kinesiologists must do to ensure they comply with this program requirement and the role of the College in supporting the program mandate. Currently, all General Class kinesiologists are required to complete the Self-Assessment annually within a 90-day period, which begins December 1st and ends on March 1st of the next calendar year. The Policy Statement indicates:

“All members registered in the General Class before the start of the Self-Assessment Period will participate in Self-Assessment. Members who are registered after the start date will be exempt from that year’s Self-Assessment.”

Self-Assessment guides kinesiologists in reflecting on their practice in relation to the *Essential Competencies of Practice for Kinesiologists in Ontario* and the practice standards and guidelines, and helps them identify areas of knowledge, skill and judgment that they want to strengthen. As part of the completion of the Self-Assessment, kinesiologists are required to identify a minimum of three learning goals; develop an Individual Learning Plan (ILP) for the year ahead, including one activity per learning goal; and provide a brief personal assessment of the effectiveness of Continuing Professional Development (CPD) activities undertaken in the previous year towards achieving their learning goals.

Self-Assessment is a reflective process that is part of the kinesiologist's mandatory professional obligation as a regulated health professional, and kinesiologists are encouraged to take the time required to be thoughtful. Completion should take a minimum of one to two hours. Kinesiologists are required to provide context with regard to their service setting, current role and experience, and reflect on their professional experiences in the past year as well as anticipated future directions. In addition, they are required to evaluate their current level of understanding of the professional practice standards and guidelines; foundational knowledge; competence with respect to providing services through the continuum of care for patients/clients; and level of performance with respect to professionalism and ethics, communication, collaboration and advocacy, and professional development.

The College uses the aggregate data to inform the development of programs and tools to further support kinesiologists' practice and professional development. Self-Assessment data is published in the annual report and presented along with analysis and recommendations to stakeholders such as the professional associations and academic institutions that have undergraduate Kinesiology programs.

Issues for Consideration:

Content Revision

Self-Assessment is integral to the advancement of professionalism and reduction of risk of harm. It is incumbent upon the College to ensure that program components are revised periodically to align with key priorities and to be responsive to stakeholder feedback.

The Self-Assessment Portal has been running in its current form for six years (2013-2019). When the *Essential Competencies of Practice for Kinesiologists in Ontario* were released in 2014, the portal content underwent an update to reflect the new essential competencies.

Sections of the Self-Assessment Portal content would benefit from further streamlining in order to reduce the length of time required to complete the tool and make it more user-friendly.

Submission Frequency

It is a prudent time to consider adopting a less onerous submission frequency for kinesiologists. The College is making efforts to engage in more systematic forms of risk-based governance approaches, launching two prescribed e-learning modules (Ethics and Professionalism and Prevention of Sexual Abuse) in the last few years. These modules are designed to introduce general practice issues/topics, help kinesiologists understand the fundamental concepts, and guide them in integrating the new knowledge into their practice. Embedded quizzes measure kinesiologists' ability to apply the new knowledge and enable the College to extract aggregate data to drive programming. In addition, the scale of operations of the peer and practice assessment has increased, providing a more objective and rigorous assessment of kinesiologists' practice and overall competence.

While the Self-Assessment Portal is revamped to streamline content, the College would move to a biennial submission frequency, thus making the next Self-Assessment period December 1, 2020 to March 1, 2021.

There is no standard among comparator regulatory colleges with respect to submission frequency for this QA Program requirement:

Ontario College	Frequency of Submission
Chiropractors	Once every two years

Audiologists and Speech Language Pathologists	Annual
Medical Laboratory Technologists	Annual
Midwives	Declaration of completion every 3 yrs. Doesn't require submission to College
Occupational Therapists	Once every two years
Physiotherapists	Annual
Pharmacists	Members are selected for Self-Assessment every 5 years
Dietitians	Annual

A reduced frequency submission for the Self-Assessment would provide more time for kinesiologists to plan continuing professional development opportunities, and complete their previous learning commitments.

Non-Compliance

For the first six years, the Quality Assurance Committee has been lenient with non-compliant kinesiologists, providing an additional 90-day extended deadline following the original March 1st deadline. The rationale was that this was a newly regulated profession and a fairly new QA Program requirement and that kinesiologists needed time to become accustomed to their professional obligations. Frequently the extended deadlines were prolonged and additional phone calls made as the volume of non-compliant kinesiologists was too large to direct them to undergo peer and practice assessment (i.e. insufficient resources to assess them). Several email notices, general e-newsletter notices, numerous targeted email reminders were sent to kinesiologists, as well as telephone calls made concerning the outstanding requirement. Follow up with a growing membership is becoming administratively cumbersome and resources could be better used for policy and programming development.

In addition, the Ministry of Health and Long-Term Care is looking to strengthen accountability and oversight of Ontario's health regulatory colleges that will require colleges to provide information on their performance in serving the public's interest. Council has adopted a new strategic plan for the next three years, and one of the goals includes using effective performance measurement and reporting to improve accountability. Demonstrating that the College monitors kinesiologists' compliance with this QA program requirement and takes appropriate action with respect to non-compliance will become increasingly important.

The provision for an extended deadline should be eliminated, and the paragraph regarding the Quality Assurance Committee granting deferrals for extenuating circumstances should be amended to only include the following reasons: serious illness and death of a family member.

Inactive Class Members

The Self-Assessment: General Requirements Policy indicates that only General Class members must complete the self-assessment, which is not consistent with the regulation, which states that *"Every member who holds an inactive certificate of registration shall participate in and fulfil the requirements of the self-assessment, continuing education and professional development activities component of the program, as set out in sections 5 and 6. O. Reg. 29/13, s. 4(2)."* The Quality Assurance Committee of the Transitional Council of the College of Kinesiologists of Ontario was of the view that although the regulation stated that every member shall participate in self-assessment, and continuing education and professional development activities", it would be excessive to require kinesiologists in the

Inactive Class to complete these same requirements. The purpose of the Inactive Class of registration is to accommodate kinesiologists who do not intend to practise for a period of time due to parental leave, sick leave, or educational leave, or who are practising in another non-kinesiology related profession and still wish to maintain their membership with the College.

In order to address the inconsistency with the regulation, the Inactive Certificate of Registration and Reinstatement to the General Class Policy was adopted. It states:

“A member who holds a certificate in the Inactive Class may apply for reinstatement to the General Class if the member:

- i) completes the Application for Reinstatement form;*
- ii) pays any fee, penalty or other amount owed to the College;*
- iii) provides the College with any information that it has required of the member; and*
- iv) satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practise of the profession that would be expected of a member holding a Certificate of Registration in the General Class.”*

Kinesiologists who have been registered in the Inactive Class for more than two years are referred by the Registrar to a Panel of the Registration Committee for consideration. The kinesiologists are required to complete the Application for Reinstatement as well as additional information questions which include information regarding quality and quantity of efforts to maintain currency while not practising in Ontario.

It would be prudent to make a recommendation to the Registration Committee to close this loophole by requiring kinesiologists who are referred by the Registrar to a Panel of the Registration Committee for consideration to complete a paper-based version of the Self-Assessment as part of their submission in order to identify areas of strength and opportunities for improvement, and demonstrate currency.

Cost:

Moving to a biennial submission frequency would result in some upfront costs with respect to developer work making structural changes. The developer has indicated that we would be able to credit most of these revisions with this year’s annual technical support/ licensing/ maintenance fee. The outstanding amount would be \$3390 plus HST. Moving forward, the move will result in long term savings with respect to the annual technical support, licensing and maintenance fee for the in between years.

Risk Analysis:

Kinesiologist engagement is essential to developing and maintaining kinesiologists’ ongoing competence. Many kinesiologists have expressed concern regarding the amount of time consumed in meeting their various regulatory obligations. Research has shown that there is a direct correlation between competency drift and the impact of regulatory policies and assessment systems that inadvertently contribute to disengagement.¹ Failure to consider a change to the Self-Assessment submission frequency and kinesiologists’ feedback regarding the length of time to complete the online tool may lead to kinesiologists’ detachment, and consequently risk of harm to the public.

¹ Austin, Zubin & A.M. Gregory, Paul. (2018). The role of disengagement in the psychology of competence drift. *Research in Social and Administrative Pharmacy*. 15. 10.1016/j.sapharm.2018.02.011.

Failure to be responsive to kinesiologists' feedback may further exacerbate compliance issues as membership numbers continue to grow. This could negatively impact the College's performance indicator reporting to the Ministry of Health and Long-Term Care.

With respect to compliance, while kinesiologists require an adjustment period to familiarize themselves with the goals, objectives and requirements of the program, extending the deadline sends the message that administration does not adhere to timelines, and undermines the viability of the program, the authority of the College, and the confidence of the public. Kinesiologists who have been diligent in completing their self-assessment on time may deem the additional extensions, emails and phone calls to be unfair, excessive and underserved – ungovernable kinesiologists monopolizing resources that could be better used elsewhere.

Recommendation:

Staff recommends the following next steps:

- a. Amend the Self-Assessment: General Requirements Policy to indicate that the tool be completed biennially rather than annually
- b. Amend the Self-Assessment: General Requirements Policy to state that kinesiologists in the Inactive Class will complete the Self-Assessment in the year in which they return to the General Class (paper-based in the in between years), and in subsequent years the same as the rest of the kinesiologists of the General Class (which may mean completing the Self-Assessment two consecutive years)
- c. Revise paragraphs 10 and 11 to read:

~~“Kinesiologists who fail to complete their Self-Assessment by the March 1st deadline will be contacted by the College in writing with a request to complete the Self Assessment within 90 days.~~

~~11) Members who fail to comply by the extended deadline are eligible to be selected for a Peer and Practice Assessment and may be referred to the Inquiries, Complaints and Reports Committee for non-compliance.”~~

- d. Revise paragraph 12 to read:

12) The Quality Assurance Committee will consider extenuating circumstances for kinesiologists who anticipate that they will be unable to meet the deadline for completion of the Self-Assessment. Deferrals may be granted for the following reasons: serious illness, and death of a family member ~~sudden and unanticipated changes in personal circumstances such as work-related travel, job relocation or not currently in practice~~. The Quality Assurance Committee has the authority to determine additional reasons for granting deferrals as situations arise.

- e. Present recommendation to the Registration Committee to amend Inactive Registration and Reinstatement to the General Class Policy to state that kinesiologists referred by the Registrar to a Panel of the Registration Committee for consideration, who are required to complete the Application for Reinstatement into the General Class and complete the Additional Information Questions, also be required to complete a paper-based version of the Self-Assessment in order to demonstrate competence.

- f. Notify stakeholders of the policy changes and that the self-assessment will resume in December 2020.
- g. Begin work on Self-Assessment Portal content and programming modifications.
- h. Complete testing in time for launch in December 2020.

Policy

Type:	Quality Assurance		
Number:	2.1		
Name:	Self-Assessment: General Requirements Policy		
Status:	Final	Version:	<u>3</u>
Date Approved:	September 22, 2014	Date Revised:	March 1, 2018 <u>December 2, 2019</u>

Policy Statement: All ~~members-kinesiologists~~ registered in the General Class before the start of the Self-Assessment Period will participate in Self-Assessment. ~~Kinesiologists~~~~Members~~ who are registered after the start date will be exempt from that year's Self-Assessment.

Procedure:

- 1) ~~Members-Kinesiologists~~ complete the Self-Assessment biennially during the 90-day Self-Assessment period: December 1st to March 1st of the next calendar year.
- 2) ~~Members-Kinesiologists~~ will be notified in writing of the requirement to complete the Self-Assessment approximately two weeks prior to the start of the Self-Assessment Period.
- 3) Notice of the start of the Self-Assessment period will be posted on the College's website approximately two weeks prior to the start date of the Self-Assessment period.
- 4) ~~Members-Kinesiologists~~ are required to complete the Self-Assessment in full on the online Self-Assessment Portal made available by the College.
- 5) ~~Members-Kinesiologists~~ are required to provide the College with confirmation of their completion of the Self-Assessment by clicking the "Submit" button within the Self-Assessment Portal.
- 6) As part of the completion of the Self-Assessment, eligible ~~members-kinesiologists~~ are required to:
 - a. Identify a minimum of three learning goals;
 - b. Develop their Individual Learning Plan (ILP) for the two years ahead, including one activity per learning goal;
 - c. Provide a brief personal assessment of the effectiveness of Continuing Professional Development (CPD) activities undertaken in the previous years towards achieving their learning goals; and

d. Complete and retain the ILP in the form and manner specified in the Portfolio Contents and Format Policy.

- 7) ~~Members-Kinesiologists~~ are to retain ~~a copies copy~~ of the ~~two~~ most recently completed Self-Assessments, including the ILP, in the ~~kinesiologist's member's~~ Portfolio.
- 8) Any changes to the timing of the Self-Assessment Period will generally be communicated to ~~members-kinesiologists~~ via email and the College website at least 12 months in advance of the revised start date of the Self-Assessment Period.
- 9) ~~Members-Kinesiologists~~ are not normally required to submit their completed Self-Assessment and ILP to the College unless requested to do so by the Quality Assurance Committee, an assessor or a College employee.
- 10) ~~Members-Kinesiologists~~ who fail to complete their Self-Assessment by the March 1st deadline will be ~~contacted by the College in writing with a request to complete the Self Assessment within 90 days.~~
- ~~11) Members who fail to comply by the extended deadline are eligible to be~~ selected for a Peer and Practice Assessment and may be referred to the Inquiries, Complaints and Reports Committee for non-compliance.
- ~~12) 11) The Quality Assurance Committee will consider extenuating circumstances for members kinesiologists~~ who anticipate that they will be unable to meet the deadline for completion of the Self-Assessment. Deferrals may be granted for the following reasons: serious illness, ~~and death of a family member sudden and unanticipated changes in personal circumstances such as work-related travel, job relocation or not currently in practice.~~ The Quality Assurance Committee has the authority to determine additional reasons for granting deferrals as situations arise.
- ~~13) 12) Aggregate data will be used by the College to inform the development of programs and tools to support members' kinesiologists' practice and professional development.~~
- ~~14) 13) Members-Kinesiologists~~ selected for Peer and Practice Assessments may have their Portfolio reviewed by staff or an assessor to confirm completion and retention of Self-Assessments and ILPs.
- ~~15) 14) Any time period imposed on the College in this policy may be extended or condensed when deemed necessary by the College and does not affect the validity of the College's actions or the member's kinesiologist's~~ duty to comply with the quality assurance program.

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Resolution– Self-Assessment: General Requirements Policy amendments

Whereas, self-assessment is a legislated component of the College’s quality assurance program, and

Whereas, it is incumbent upon the College to ensure that program components are revised periodically to align with key priorities and be responsive to stakeholder feedback, and

Whereas, a biennial submission frequency would provide more time for kinesiologists to plan continuing professional development opportunities and complete previous learning commitments, and

Whereas, it is important to demonstrate the College takes appropriate action with respect to kinesiologists’ non-compliance with program requirements, and

Whereas, a recommendation to the Registration Committee to require Inactive Class kinesiologists applying for reinstatement and who are referred to a panel of the Registration Committee to complete a self-assessment will help identify areas of strength and opportunities for improvement and demonstrate currency,

Therefore, be it resolved that Council accepts the Self-Assessment: General Requirements Policy amendments as presented therein.

Moved by: _____

Seconded by: _____

Date: December 2, 2019

Issue or Decision Note

Issue or Decision: Proposed amendment to Continuing Professional Development - Prescribed Learning Modules Policy regarding compliance provision

Prepared for: Council

Date: December 2, 2019

Background:

The College is required under the *Regulated Health Professions Act, 1991* to have in place a Quality Assurance (QA) Program to help the College achieve its mandate of ensuring that the public receives competent, safe and ethical kinesiology services. Continuing professional development (CPD) is a legislated component of all QA Programs, and regulators are mandated to monitor kinesiologists' participation and compliance with this requirement.

The Quality Assurance Program regulation states:

“Every member shall participate in self-assessment, continuing education and professional development activities annually, or where a longer period has been specified by the Committee, during that period, in order to maintain the knowledge, skills and judgment required to practise the profession in accordance with the standards of practice and ethics set by the College.”

Kinesiologists are required to participate in CPD activity to keep their knowledge and skills up-to-date; they are required to identify a minimum of three learning goals, including one activity per learning goal, and reflect on the effectiveness of their CPD activities undertaken in the previous year towards achieving their learning goals. The College does not require that they accumulate a certain number of CPD hours or credits per year, and CPD activity does not need to be pre-approved by the College. Rather, learning is to be self-directed.

Kinesiologists are encouraged to select learning activities based on their own needs and goals, and to reflect on how learning impacts their practice.

In 2017, Council adopted the Continuing Professional Development: Prescribed Learning Modules Policy. The Policy Statement indicates:

“All members of the College registered in the General Class will complete the College’s prescribed learning modules. They are designed to introduce a general practice issue/topic, help members understand the fundamental concepts, guide them in integrating the new knowledge into their practice, and enable them to protect the public and themselves. The modules are not meant to be exhaustive, cover every dilemma or confirm members’ competence.”

Prescribed learning modules are integral to the advancement of professionalism and reduction of risk of harm. The modules provide a series of practice scenarios based on case studies, and a quiz that tests kinesiologists' knowledge and ability to analyze the relevant issues. Kinesiologists are expected to use their results to identify areas for improvement in their individual learning plans.

Prescribed learning activity is considered acceptable continuing professional development activity for the purposes of the QA Program towards a kinesiologist's three learning goals.

The learning modules are implemented as a mandatory program requirement for all kinesiologists in the General Class, and must be completed once within a prescribed timeline (e.g. two or three months of the start date).

With respect to compliance, the Policy states:

"5) Members are required to complete the learning module through the use of the Self-Assessment Portal. The format of the module allows members to complete the module at their own pace, individually or with a group, and monitors each member's completion to confirm compliance with the QA Program requirements.

6) Members are not normally required to submit evidence of completion of the prescribed learning modules to the College unless requested to do so by a College employee. Members who fail to submit evidence of completion or other information regarding the prescribed learning module in response to a request by the College will be notified that they are eligible for Peer and Practice Assessment and may be referred to the Inquiries, Complaints and Reports Committee for non-compliance."

Aggregate results are used to help the College identify areas where kinesiologists may benefit from additional educational resources. Data can be parsed by educational institution and graduation year and performance reports regarding respective graduates' success on quiz items are distributed to representatives from Ontario universities offering degree programs in kinesiology at the annual CKO-Universities Liaison Committee meeting in an effort to engage in discussions to further the development of kinesiology education in Ontario. Data is presented along with analysis and recommendations to stakeholders such as the professional associations in an effort to improve the practice of the profession.

Issues for Consideration:

The Ethics and Professionalism e-learning module has been running in its current form for three years (2016-2019). The Prevention of Sexual Abuse e-Learning Module has been running in its current form for two years (2017-2019).

To date, the College has adopted a lenient approach toward non-compliance, extending the prescribed deadline and providing numerous targeted email reminders and telephone calls to kinesiologists regarding the outstanding requirement(s). The rationale was that this was a newly regulated profession, the prescribed modules a fairly new QA Program requirement and kinesiologists needed time to become accustomed to this new professional obligation. In addition, the volume of non-compliant kinesiologists was too large to direct to undergo peer and practice assessment (i.e. insufficient financial resources and peer assessor capacity).

It is now time to consider stricter adherence to the policy compliance provision. Follow up with a growing membership is becoming increasingly administratively cumbersome and resources could be better used toward preventative programming and policy development.

It is recommended that moving forward the College adopt a strict enactment of the compliance provision, directing all non-compliant kinesiologists to undergo peer and practice assessment, and that the policy be amended to clarify this practice.

More importantly, the Ministry of Health and Long-Term Care is looking to further strengthen accountability and oversight of Ontario's health regulatory colleges that will require colleges to provide information on their performance in serving the public's interest. One of Council's new strategic plan goals includes using effective performance measurement and reporting to improve accountability. To that end, demonstrating that the College monitors kinesiologists' compliance with QA program requirements, such as prescribed e-learning modules, and taking appropriate action with respect to kinesiologists' non-compliance and non-responsiveness will become imperative.

Cost:

In an effort to realize cost savings, College staff has requested that the e-learning module vendor consider offering a reduction in the annual hosting/maintenance/license fees for the Ethics and Professionalism e-Learning Module and Prevention of Sexual Abuse e-Learning Module, prorating the annual fees to a three-month timeframe. The vendor has agreed to lower the annual fee for each, clarifying that there will be no grace period for kinesiologists. Kinesiologists who are unable to complete the modules due to extenuating circumstances will complete the modules the following year.

Risk Analysis:

While new kinesiologists require an adjustment period to familiarize themselves with the goals, objectives and requirements of the QA program, as regulated professionals, they need to demonstrate accountability to their regulatory body and to the public by demonstrating an understanding of high-risk areas and practice standards deemed important by Council, and by complying with prescribed deadlines. Non-responsiveness to College correspondence and non-compliance with QA professional obligations are indicators of larger issues concerning a kinesiologist's governability.

Extending the deadline sends the message to kinesiologists, the Ministry and the public that administration does not adhere to timelines, which undermines the viability of the program, the College's authority, and the confidence of the public. Kinesiologists who have been diligent in completing their self-assessment on time may deem the additional extensions, emails and phone calls to be unfair, excessive and underserved.

Recommendation:

Staff recommends the following next steps:

- a. Revise Continuing Professional Development: Prescribed Learning Modules Policy paragraph 6 to read:

6) Kinesiologists are not normally required to submit evidence of completion of the prescribed learning modules to the College unless requested to do so by a College employee. Kinesiologists who fail to submit evidence of completion or other information regarding the prescribed learning module in response to a request by the College will be notified that they are eligible have been selected to undergo for Peer and Practice Assessment and may be referred to the Inquiries, Complaints and Reports Committee for non-compliance."

- b. Develop strategic communications plan.
- c. Notify stakeholders of the policy implementation changes, which will take effect immediately.

Policy

Type:	Quality Assurance		
Number:	2.4		
Name:	Continuing Professional Development: Prescribed Learning Module Policy		
Status:	Final	Version:	1 2
Date Approved:	March 27, 2017	Date Revised:	<u>December 2, 2019</u>

Policy Statement: All ~~members-kinesiologists~~ of the College registered in the General Class will complete the College's prescribed learning modules. They are designed to introduce a general practice issue/topic, help ~~kinesiologistsmembers~~ understand the fundamental concepts, guide them in integrating the new knowledge into their practice, and enable them to protect the public and themselves. The modules are not meant to be exhaustive, cover every dilemma or confirm ~~members'~~ kinesiologists' competence.

Procedure:

- 1) The modules provide a series of practice scenarios based on case studies, and a quiz that tests ~~members'-kinesiologists'~~ knowledge and ability to analyze the relevant issues. KinesiologistsMembers are expected to use their results to identify areas for improvement in their individual learning plans.
- 2) Aggregate results will be used to help the College identify areas where ~~members-kinesiologists~~ may benefit from additional educational resources.
- 3) Prescribed learning activity will be considered acceptable continuing professional development activity for the purposes of the QA Program.
- 4) The learning modules will be implemented as a mandatory program requirement for all ~~members kinesiologists~~ in the General Class, and must be completed within a prescribed timeline (e.g. two or three months ~~of the start date~~).
- 5) ~~Members-Kinesiologists~~ are required to complete the learning module through the use of the Self-Assessment Portal. The format of the module allows ~~members-kinesiologists~~ to complete the module at their own pace, individually or with a group, and monitors each ~~member's~~ kinesiologist's completion to confirm compliance with the QA Program requirements.

- | 6) ~~Members-Kinesiologists~~ are not normally required to submit evidence of completion of the prescribed learning modules to the College unless requested to do so by a College employee. ~~KinesiologistsMembers~~ who fail to submit evidence of completion or other information regarding the prescribed learning module in response to a request by the College will be ~~notified that they are eligible~~ selected to undergo for Peer and Practice Assessment and may be referred to the Inquiries, Complaints and Reports Committee for non-compliance.

- | 7) ~~Members-Kinesiologists~~ selected for Peer and Practice Assessments or referred to the Inquiries, Complaints and Reports Committee for non-compliance will have their prescribed learning module status reviewed by College staff to confirm completion of the requisite module(s).

Resolution– Continuing Professional Development: Prescribed Learning Modules Policy amendments

Whereas, continuing professional development is a legislated component of the College’s quality assurance program, and

Whereas, stricter adherence to compliance provisions is important to demonstrate strengthened accountability and oversight,

Therefore, be it resolved that Council accepts the Continuing Professional Development: Prescribed Learning Modules Policy amendments as presented therein.

Moved by: _____

Seconded by: _____

Date: December 2, 2019

Issue or Decision Note

Issue or Decision: Patient/Client-Centred Care/Service Guideline
Prepared for: Council
Date: December 2, 2019

Background:

The College of Kinesiologists of Ontario is the regulatory body for the kinesiology profession in Ontario. The College is required under the *Regulated Health Professions Act, 1991*, to develop and implement practice standards and guidelines for the profession, and to communicate these standards to the public. Registered kinesiologists have a legislated obligation to meet the standards and guidelines and demonstrate ongoing competence.

Essential Competencies

To that end, the College adopted *The Essential Competencies of Practice for Kinesiologists in Ontario*, which defines the knowledge, skill and judgement requirements of kinesiologists in the province to practice safely and in the public interest. Kinesiologists use the essential competencies to understand practice expectations, plan continuing professional development, ensure they meet the profession's minimum expectations, communicate their role and standards of practice to other health care professionals, employers, government agencies, accreditation bodies and the public. The College uses the essential competencies to communicate the expectations and standards of practice for kinesiologists to members, employers, government officials and the public, measure the competence of kinesiologists, and hold kinesiologists accountable to the stated expectations.

The competencies provide the basis for and validity to the College's practice standards and guidelines, which describe the College's minimum expectations in areas such as consent, fees and billing and record keeping, and against which public complaints and mandatory reports can be investigated.

Patient/Client-Centred Care/Service

The Ministry of Health and Long-Term Care is looking to strengthen accountability and oversight of Ontario's health regulatory colleges. The College is expected to ensure standards of practice and practice guidelines reflect the current practice environment, new public expectations, and prioritize patient-centred care. Furthermore, the College is expected to support kinesiologists in applying practice standards and guidelines to their practice.

Council's new strategic plan priorities include promoting patient-centred care, and using effective performance measurement and reporting to improve accountability. One of the goals and operational projects planned for this year is the development of a Patient/Client Centred Care/Service Guideline.

Issues for Consideration:

Although the College has adopted several patient/client-centred care/service essential competencies and performance indicators, the College has yet to implement a Patient/Client-Centred Care/Service Guideline.

The following organizations have developed comprehensive patient-centred care resources:

Organization	Patient-Centred Care Practice Standards and Resources
College of Dietitians of Ontario	Interprofessional Client Centred Care
College of Physicians and Surgeons of Ontario	You and Your Doctor (what to expect from your doctor and what your rights are)
Royal College of Dental Surgeons of Ontario	Patient Centred Care – Professional Liability Program
Registered Nurses Association of Ontario	Person and Family-Centred Care – Clinical Best Practice Guidelines, International Affairs and Best Practice Guidelines, May 2015
Ontario Medical Association	Patient Centred Care Policy Paper
Cancer Care Ontario	Person Centred Care Guideline
Ontario College of Family Physicians	<ul style="list-style-type: none">• Best Advice Guide: Patient-Centred Care in a Patient’s Medical Home• Change Concepts: Patient-Centered Interactions• Quality Improvement: Quality Improvement in Primary Care–Primary Care Patient Experience Survey• Best Advice Guide: Health Literacy in the Patient’s Medical Home• 1 hour 25-minute Video Webinar: Care Coordination and the Patient’s Role in Shared Decision Making and Team Communication• Videos: What Is Shared Decision Making• Best Advice Guide: Social Determinants of Health• Poverty: A Clinical Tool for Primary Care Providers (ON)
Providence Health Care	Patient and Family Centred Care
Patient Safety Institute Canada	The Patient Safety Education Program Canada Module 7a) Patients as Partners, Engaging Patients and Families, Patient and Family Centred Care

It would be prudent for the College to develop and implement a Patient/Client-Centred Care/Service Guideline, which would define patient-centred care/service in the context of kinesiology, clarify the accountabilities of a registered kinesiologist in various employment settings and job roles, provide detailed recommendations on how to comply with the relevant essential competencies, and provide day-to-day practice illustrations.

Project Requirements - Deliverables:

The Director, QA will facilitate focus group webinars to develop content for a Patient/Client Centred Care/Service Guideline for kinesiologists (a potential resource for Kinesiology program students) that provides a sound understanding of the application of patient-centred care principles to various practice roles and settings. Focus groups may consist of kinesiologists, faculty members, students, employers, professional associations and other health care professionals.

Guideline content may include:

- Definition of patient/client-centred care/service
- Fiduciary duty
- Benefits (e.g. empowerment in decision making, communication, access, client satisfaction, improved health outcomes, etc.)
- Principles for kinesiologists (e.g. respect and dignity, shared decision-making, consent and capacity, communication and health literacy, advocacy for patient/client, access to information, interprofessional collaboration, empathy, patient/client engagement and participation in continuous quality improvement, etc.)
- Barriers to patient-centred care
- Hypothetical scenarios applying patient/client-centred care/service principles
- Ethical decision-making framework and scenarios (e.g. R.Kin treating varsity athlete at sideline when coach intervenes – how to manage, report and advocate for patient safety).
- Quiz, correct answers and rationale
- References and key resources

The Quality Assurance Committee will review, amend and approve the draft guideline for presentation to Council.

Upon approval of draft guideline by Council, the College will circulate among stakeholders (e.g. kinesiologists, associations, the public) as per College bylaws.

The College will develop a strategic communications plan and present final approved policy to stakeholders (e.g. e-newsletter article, webinar, social media). A French version will be made available.

The College will solicit kinesiologist feedback on whether they have received appropriate support in implementing the guideline effectively.

Risk Analysis:

The need to have standards and guidelines that prioritize patient-centred care has been identified as a priority by the Ministry, and in light of this, the development of a guideline has been identified as a goal in the College's strategic plan and operational plan for the current fiscal year. Reneging on this commitment would undermine stakeholder confidence in the College's ability to deliver on its mandate and strategic priorities. The Ministry may expect the College to report on efforts to promote patient-centred care in the near future.

Recommendation:

Staff recommends the following next steps:

- a. Issue call for expressions of interest to participate in focus groups on development of Patient/Client-Centred Care/Service Guideline. Solicit feedback from patients/clients/the public.
- b. Bring to QA Committee and Council for discussion and approval.
- c. Circulate draft guideline for 60 days as per bylaws. Amend in line with feedback.
- d. Draft strategic communications plan. Notify stakeholders of policy implementation.
- e. Solicit feedback from kinesiologists on value of support in implementing new guideline.

Resolution– Patient/Client-Centred Care/Service Guideline

Whereas, the College has a legislated obligation to develop and implement practice standards and guidelines for the profession, and to communicate those standards to the public, and

Whereas, the College is expected to ensure standards and guidelines prioritize patient-centred care, and one of the College’s new strategic plan priorities includes promoting competent, safe and ethical kinesiology practice that is patient-centred, and

Whereas, the College has adopted several patient/client-centred care essential competencies and performance indicators, but has yet to develop a patient/client-centred care/service guidelines, and

Whereas, a goal for this year’s operational plan entails developing a definition of patient/client-centred care in the context of kinesiology practice,

Therefore, be it resolved that Council accepts the development of a Patient/Client-Centred Care/Service Guideline as presented therein.

Moved by: _____

Seconded by: _____

Date: December 2, 2019

Resolution: Appointment of Executive Committee members

Whereas the election of the Executive Committee and officers was conducted at the September 16, 2019 Council meeting; and

Whereas appointment terms of some publically- appointed Council members expired after September 16, 2019 and were re-appointed throughout the fall; and

Whereas some of these publically-appointed members were on the Executive Committee, resulting in vacancies on the Executive Committee; and

Whereas all publically-appointed members were invited to submit their intent to stand for the Executive Committee on December 2, 2019; and

Whereas all members of the Executive Committee were invited to submit their intent to stand for Vice-President on December 2, 2019; and

Whereas Council conducted elections and all Council members were provided the opportunity to vote by secret ballot; and

Whereas the members below were elected by a majority of Council members present and voting OR ELECTED BY ACCLAMATION;

Therefore, be it resolved that:

be appointed Vice-President;

be appointed as a public member of the Executive Committee; and

be appointed as a public member of the Executive Committee.

Moved by

Seconded by

December 2, 2019

Proposed Committee Composition

Red= Committee chair or vice-chair

Highlighted in yellow = proposed new appointments

Committee	Professional members	Public members	Member(s)-at-large
Executive	Jennifer Pereira, Chair Ben Matthie Jennifer Bushell	Vice Chair, TBD Mary Pat Moore	N/A
Finance	Stefanie Moser Jennifer Pereira Katie St Denis	Chad McCleave, Chair	N/A
Registration	Ryan Wight- Vice-Chair Elwin Lau Graydon Raymer Katie St Denis	Ken Alger, Chair Teresa Bendo Victoria Nicholson Sandra Weeks	Jaclyn Benn Faith Delos-Reyes Alyssa King Richard Wotherspoon Holly Wykes
Quality Assurance	Jennifer Bushell- Chair Graydon Raymer- Vice-Chair Nelson Amaral Derek DeBono Jennifer Pereira	Ken Alger Victoria Nicholson	Denis Beaulac Mardy Frazer Danielle Froats Alicia Oliveira Andrea Scrivener Shindujan Yogaratnam
ICRC	Elwin Lau- Chair Nelson Amaral Ben Matthie Ryan Wight	Chad McCleave- Vice-Chair Teresa Bendo Leslee Brown Sandra Weeks Ken Alger	Alex Burnaru Douglas Freer Susan Garfat Francesca McKenzie Leanne Smith Michelle Young
Patient Relations	Derek DeBono Ben Matthie Stefanie Moser Graydon Raymer Ryan Wight	Teresa Bendo	Alisha Gleiser Leanne Smith
Examination Appeals	Stefanie Moser Derek DeBono	Chad McCleave Victoria Nicholson	
Discipline	All	Mary Pat Moore, Chair All	Denis Beaulac Pamela Paquette Richard Wotherspoon Michelle Young
Fitness to Practise	All	Jennifer Pereira All	



Resolution- Revised Committee slate for 2019/2020

Whereas Council approved the proposed Committee slate as presented at the September 16, 2019 Council meeting; and

Whereas appointment terms of some publically-appointed Council members expired after September 16, 2019 and they re-appointed throughout the fall; and

Whereas per By-law 13, the Executive Committee is recommending a revised slate for committee membership based on the needs of each committee and the interests and skills of Council members and kinesiologists;

Therefore, be it resolved that the Council of the College of Kinesiologists of Ontario appoints the committee members and chairs as per the attached revised slate developed and recommended by the Executive Committee.

Moved by:

Seconded by:

Date: December 2, 2019



Resolution- Committee on Specialties Re-Appointments

Whereas on April 15, 2019 Council created the Specialties Committee to review submissions under the Specialties Assessment Framework; and

Whereas Council approved that the composition of the Specialties Committee be five members made up of three public members and two professional members; and

Whereas the appointments of some publically-appointed Council members expired and were re-appointed throughout the fall; and

Whereas on December 2, 2019, the President called for public appointees to indicate their interest in and willingness to serve on the Committee on Specialties; and

Whereas Ken Alger, Mary Pat Moore and XXXXXX indicated interest in serving on the Committee; and

Therefore, be it resolved that the Council of the College of Kinesiologists of Ontario appoints Ken Alger, Mary Pat Moore, and XXXXXXXXX to the Specialties Committees.

Moved by:

Seconded by:

Date: December 2, 2019