

Council Meeting Agenda

Date & Time: Monday, September 16, 2019 9:30 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	9:30 a.m.
2	Introductions: Staff and Council Members	J. Pereira	Verbal	Information	9:35 a.m.
3	Conflict of Interest Refresh	E. Bruce	Document	Information	9:55 a.m.
4	Conflict of Interest Declarations	J. Pereira	Verbal	Decision	10:15 a.m.
5	Approval of Agenda	J. Pereira	Document	Decision	10:20 a.m.
6	Approval of Minutes: April 15 and June 24, 2019	J. Pereira	Document	Decision	10:25 a.m.
7	<p style="text-align: center;">Action Items from the June 24 Meeting</p> <p>i. Registrar to provide a re-draft of the Minutes of April 15th - COMPLETED</p> <p>ii. The College to investigate practices of other College 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</p> <p>iii. College to return to Council with revised Draft Complementary/Alternative Therapies Guideline. WAITING FOR REVISED GUIDELINES FROM CPSO</p> <p>iv. A letter is to be sent to the WSIB focusing on public protection through access to regulated health professionals. COMPLETED</p> <p>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> <p style="text-align: center;">Items Carried Over</p> <ul style="list-style-type: none"> • Strategic Dashboard development. COMPLETED • 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 				10:35 a.m.

REPORTS:					
8	Committee Reports – questions only <ul style="list-style-type: none"> • Registration • Quality Assurance • ICRC • Q4 Finance Report 	Committee Chairs	Document	Information	11:00 a.m.
9	Committee on Specialities Update	M.P. Moore	Verbal	Information	11:15 a.m.
10	Registrar Update <ul style="list-style-type: none"> • Meeting with Ontario and the Canadian Athletic Therapist Associations • FHRCO Governance Project 	B. Kritzer	Verbal	Information	11:35 a.m.
LUNCH					
NEW BUSINESS:					
11	Rules for Meeting Procedures	B. Kritzer	Document	Decision	1:00 p.m.
12	Rules Concerning the Minutes of Meetings – Proposed Policy	B. Kritzer	Document	Decision	1:45 p.m.
13	Proposed Budget & Plan 2019/2020	B. Kritzer	Document	Decision	2:15 p.m.
14	Election of Officers <ul style="list-style-type: none"> • Appointment of Elections Officer • Election of Executive Committee 	J. Pereira Elections Officer	Verbal	Decision	2:45 p.m.
15	Approval of Committee Membership	President	Document	Decision	3:15 p.m.
16	2019/2020 Communications Plan	R. Pestana	Document	Information	3:35 p.m.
ADJOURNMENT					4:00 p.m.

COLLEGE OF
KINESIOLOGISTS
OF ONTARIO



Conflicts of Interest in a Nutshell Council

September 16, 2019

Conflicts of Interest



“Try this – I just bough a hundred shares.”

What is a Conflict of Interest?

- Where a personal, financial, or other competing interest may impact the exercise of a decision-maker's judgement
 - Familial, personal, social connection
 - Business, financial, professional connection
 - Other close association, affiliation
- Interest can be direct or indirect

When is there a Conflict?

- Where a reasonable person, knowing all of the circumstances, would believe that the individual's judgement would be influenced by the competing consideration
- Conflicts can be real, potential, or apparent/perceived
 - Does not depend on actual subjective bias!

Reasonable Apprehension of Bias

- Applies in the administrative decision making context (e.g. ICRC, Discipline, etc.)
- Does the decision-maker have an “open mind” with respect to the decision
 - Similar to conflict of interest
 - Can be shown by words/actions suggesting pre-judgement of the issue

Dealing with Conflicts

- 1. RECOGNIZE** the actual or potential conflict
 - Be aware of the potential for conflicts caused by subject matter, relationships, and situation
 - Ideally self-identified
 - If not, incumbent upon other Council/Committee members to raise the issue
 - Not a reflection on character/wrongdoing

Dealing with Conflicts

2. DECLARE / DISCLOSE the conflict appropriately

- Ideally self-declared
 - If not, incumbent upon other Council/Committee members to raise the issue
- To identified person (e.g. Chair; Registrar; Staff)
- Using the established process for the setting (e.g. Council vs. Committee)

Dealing with Conflicts

3. MANAGE the conflict appropriately

- Where there is doubt, the Council/Committee will decide whether there is a conflict
- Leave the portion of the meeting where there is a conflict
- Do not discuss or attempt to influence the deliberation
- Do not vote on the issue

What if a conflict is not declared?

- Can result in **disqualification**
- Could **discredit** the College / **undermine** the decision being made
- Could be a **breach** of the fiduciary duty
- Could lead to **liability** for the College and/or the person involved (it is bad faith not to disclose)

Remember that...

- Conflicts are **inevitable!**
- Disclosing a conflict is **not declaring wrongdoing** or a **reflection on character** (it's actually just the opposite!)
- Conflicts can arise at **any time!**
- If in doubt, **disclose!**

Scenario #1

- The College is looking to install a new audio-visual teleconferencing system in the boardroom. Your neighbour runs a technology consulting company.
 - Are you in a conflict?
 - How could you propose your neighbour's involvement in a way...
 - That WOULD create a problem?
 - That WOULD NOT create a problem?

Scenario #2

- You are a member of a panel of the ICR Committee reviewing a complaint.
- The complainant's son attends the same school as your daughter.
- Do you need to declare a conflict?

Scenario #3

- The Council is debating implementing a new component of the Quality Assurance Program that would require members to submit self-reflective essays.
- Are you in a conflict...
 - As a public member of Council?
 - As a professional member of Council?

Scenario #4

- At a Council meeting, you express concern that the timelines for Registering new applicants are too lengthy.
- Five years ago, you published an article on your blog asserting that the College's entry to practice requirements were too strict and that it should "open the floodgates."
- Are you in a conflict of interest?

Questions?





Resolution- Approval of Agenda – September 16, 2019

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

Moved by:

Seconded by:

Date: September 16, 2019

	College of Kinesiologists of Ontario Council Meeting DRAFT Minutes
Date/time of meeting	Monday, April 15, 2019 at 9:00 a.m.
Chair	Ken Alger
Note Taker	Danae Theakston
Present	Derek DeBono, Mary Pat Moore, Michelle Meghie, Stefanie Moser, Michelle Young (Teleconference), Elwin Lau, Ryan Wight, Ken Alger, Chad McCleave, Jenn Bushell, Kalen Johnson, Graydon Raymer, Nelson Amaral, Nicole DiFilippo
Regrets	Jennifer Pereira, Lori-Anne Beckford, Marilyn Bartlett
Staff/guests in Attendance	Staff: Brenda Kritzer, Nancy Leris, Danae Theakston, Eric Bruce, Tracey Scott, Sue Behari, Keisha Simpson Guests: Samia Shaheen (MOHLTC), Don Gracey (OATA), Stuart Moulton (OKA) (Teleconference), Tyler Quennell (CATA), Sandy Jespersen (CATA)
Conflict of Interest	<p>President Ken Alger provided an overview on the importance of declaring conflicts of interest and how Council's role is to make decisions in the public interest. He called for declaration or disclosure of conflict of interest on agenda items excluding item 13. He noted that Rebecca Durcan, legal counsel for the College would assist Council on the matter of conflict of interest relating to the selection of a committee to review a proposal on specialties submitted by the Ontario Athletic Therapist Association.</p> <p>No conflicts of interest were declared for items 6 through 12 on the agenda.</p>
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.
Approval of Agenda	<p>President Ken Alger, asked to amend item 13 on the agenda, to divide the matter into four separate but related discussion items as follows:</p> <p>Specialties Proposal – Ontario Athletic Therapist Association</p> <ol style="list-style-type: none"> i) Conflict of Interest Conversation and Discussion with Rebecca Durcan ii) Process for Selection of Committee on Specialties iii) Declarations of Conflict of Interest iv) Appointment of Committee <p>UPON A MOTION duly made by Nelson Amaral and seconded by Graydon Raymer, it was resolved that the agenda be approved as amended. Carried.</p>
Approval of	UPON A MOTION duly made by Nelson Amaral and seconded by Jennifer

<p>Minutes</p>	<p>Bushell, it was resolved that the Minutes of December 3-4, 2018 be approved. Carried.</p>
	<p style="text-align: center;">Action Items Review</p> <ul style="list-style-type: none"> • Add to the College’s website a description of how the fees paid by members are applied to different program areas /deliverables. Perhaps place the information in the members’ portal, – in progress • Add information to the website regarding the benefits of being a regulated health professional – in progress • Schedule a facilitated discussion regarding Core Competencies – following elections and appointment of public members • Addition of specific areas to the Renewal Form to better target collection of data for the College and members – in progress
	<p style="text-align: center;">Committee Reports Discussion</p> <p>Written reports were provided by the ICRC, Quality Assurance, Registration and Planning and Finance Chairs regarding their Committees, which highlighted committee meetings, activities, changes and discussions that took place since the December Council meeting. The reports were posted with the Council package.</p> <p>Chad McCleave, Chair of Finance and Planning Committee brought to Council’s attention, two important cost savings initiatives. Specifically, the College has moved to a new service provider for the provision of the employee health benefits and is participating in a buying group comprised of a number of health professions regulators from across Canada, in order to achieve savings in the administration of the plan.</p> <p>Chad also noted that the College has joined a separate buying group for fees processing and expects to realize substantial savings in transactions.</p>
	<p style="text-align: center;">Competency Development and Implementation – Phase 1</p> <p>Danae Theakston, Communications Officer, presented on a proposed phased approach for appointing non-Council members to statutory committees based on competencies. The approach involves combining the current considerations that are used to select members with core governance competencies to ensure a broad range of diversity, knowledge, skills and background could be brought to the table.</p>
	<p style="text-align: center;">2019 Election Dates</p> <p>A schedule for the 2019 elections to Council was presented for approval. The proposed elections are scheduled to occur in districts 1, 4, 5 and 7.</p> <p>Upon a motion duly made by Nicole DiFilippo and seconded by Michelle Meghie, it was resolved that Council approve the proposed election dates of July 9-16, 2019 and publish immediately as the election dates for districts 1, 4, 5 and 7. Carried.</p>

	<p style="text-align: center;">Complementary/Alternative Therapies Guideline</p> <p>Eric Bruce, Director of Professional Conduct, presented a proposed new guideline to address the provision of complementary/alternative therapies by registrants. The draft guideline sets out general principles applicable to both conventional and complementary/alternative therapies, as well as specific requirements for members who intend to offer such therapies or who deal with patients who request or receive such therapies from another source.</p> <p>Members of Council noted that kinesiologists who do not have the necessary competencies/certifications to offer complementary therapies should respond to patients' requests by making appropriate referrals or advising patients where they can get information about practitioners. Amendments were made to the draft Guideline to reflect the recommendations of Council.</p> <p>Upon a motion duly made by Kalen Johnson and seconded by Stefanie Moser, it was resolved that Council approve in principle the draft Practice Guideline on Complementary and Alternative Therapies as amended, and directs staff to circulate the draft Practice Guideline to the membership and to the public for comment for a period of at least sixty (60) days. Carried.</p>
	<p style="text-align: center;">Strategic Planning Review</p> <p>Christine Forsyth, the consultant hired by the College to facilitate strategic planning, provided an overview of materials which will form the basis of the Strategic Plan for the College for 2019-2022. The materials provided reflect discussions and decisions at Council's two-day planning workshop, March 25-26.</p> <p>Council members were provided the opportunity to ask questions and provide further input to the Draft Summary Report.</p> <p>In response to a question by the President and Council, the Registrar indicated that the material provided was sufficient to develop an operational plan as well as a concise strategic plan to direct the College's efforts for the next three year period.</p> <p>Upon a motion duly made by Graydon Raymer and seconded by Michelle Meghie, it was resolved that Council approve the Summary Report and direct staff to prepare a summary Strategic Plan for posting on the website and communication to registrants. Carried.</p>
	<p style="text-align: center;">Funding for Therapy Policy</p> <p>As per the Health Professions Procedural Code, the College is required to establish a program to provide funding for therapy and counselling for persons alleging sexual abuse by a member, while they were a patient. The College established such a fund in 2013, administered by the Patient Relations Committee.</p> <p>Eric Bruce, Director of Professional Conduct, spoke to the proposed policy</p>

	<p>governing the administration of the fund, and the supporting documents which would assist a patient to apply for funding, including an Application Form, Counsellor/Therapist Information Form and Frequently Asked Questions sheet. (materials provided in Council package)</p> <p>The policy approved by the Patient Relations Committee, expands on the provisions in the Health Professions Procedural Code to provide more details regarding the requirements for accessing the fund. In addition, the policy and administration documents will facilitate patients in making a request for funding and provide transparency regarding the process that the College will follow.</p> <p>Upon a motion duly made by Nicole DiFilippo and seconded by Stefanie Moser, it was resolved that the Council approve the Policy for Funding for Therapy and Counselling and supporting program documents (Application Form, Counsellor/Therapist Information Form, Frequently Asked Questions) as presented. Carried.</p>
	<p style="text-align: center;">Council Report re: Special Meeting on CNO Submission to Ministry</p> <p>On February 22, 2019 the Council held a special meeting (open to the public) to review and discuss the College of Nurses of Ontario (CNO) submission to the Ministry of Health and Long-Term Care regarding <i>Vision 2020</i>. Council reviewed the CNO's submission and determined which areas of the report they could support. Ken Alger presented a draft letter reflecting the discussion and decisions of Council at the February 22nd meeting.</p> <p>Following review of the letter, Council requested that the following additions/amendments be made to the letter prior to sending to the Ministry.</p> <ul style="list-style-type: none"> - While the Council does not support the recommendation that public appointees be remunerated by each College, the Council would be in support of public appointees and professional members being paid the same per diem, with Colleges continuing to pay the professional per diems and the Ministry paying the public appointees per diem. <p>The amendments to the letter will be made by Brenda Kritzer and circulated to Council, then sent to the Ministry of Health and Long-Term Care.</p>
	<p>Specialties Proposal Framework and Striking of Committee on Specialties</p> <p>The following guests attended for this discussion item on the agenda: Don Gracey (OATA), Sandy Jespersen, Executive Director of CATA, Tyler Quennell, Board of Directors for CATA, Rebecca Durcan, Counsel for the College, Steinecke Maciura LeBlanc.</p> <p>i) Conflict of Interest (COI) Discussion</p> <p>Rebecca Durcan of Steinecke, Maciura, LeBlanc law firm, joined Council to provide a presentation and facilitate discussion regarding Conflict of Interest. She reminded Council that conflict of interest may be real or perceived as discussed in Bylaw 16. If a conflict of interest is not disclosed or declared, it can</p>

undermine public trust in the final decision that is made. She also noted that conflict of interest may not exist at the beginning of a project but may arise as more information is learned and as decisions are brought forward to Council or a Committee. Conflict of interest must be disclosed or declared at any point in the deliberations.

- ii) It was noted with importance that declaring a conflict of interest is part of Council members' fiduciary duties. All business must be carried out with integrity placing the interests of the College (its mandate and legislated role) ahead of any other interests. **Process for Selection of Committee on Specialties**

Discussion opened concerning the process for determining the Committee on Specialties.

A document had been provided by the College to assist Council in appointing a Committee, *Decision Note: Appointment of a Special Committee to Review Specialty Framework Submissions, under the Policy: Framework for Assessment of Specialties*.

After considerable discussion Council agreed that the Decision Note should be altered to form an addendum to the Framework for Assessment of Specialties Policy, addressing implementation. Edits were proposed remove the specifics relating to the current proposal before Council and to provide direction on composition of Committees formed to review proposals from the membership on specialties. (Revised Document attached to Draft Minutes)

Upon a motion duly made by Stefanie Moser and seconded by Michelle Meghie it was resolved that:

- Council adopt the edited Decision Note (edits included removal of all references to the specific proposal from OATA) as an adjunct to the Policy *Framework for Assessment of Specialties*; and
- Council approve that the composition of a Committee on Specialties be 5 members made up of 3 public members and 2 professional members; and
- Committee members be appointed by Council.

Carried.

iii) Declaration of a Conflict of Interest

The President called for declarations of conflict of interest concerning review of the Proposal on Specialties submitted by the Ontario Athletic Therapist Association (OATA).

Disclosures of potential for perceived conflict of interest due to membership in the Ontario Athletic Therapist Association

- Elwin Lau
- Nelson Amaral
- Jennifer Bushell
- Stefanie Moser

- Derek DeBono
- Nicole DiFilippo
- Michelle Young.

It was further disclosed that the following professional members had been involved on the board of directors of the OATA and that these members had not sat on the board for a minimum period of two years prior to election to Council, in compliance with the College bylaw 10.09(v):

- Stefanie Moser – Chair
- Jennifer Bushell- Secretary
- Nelson Amaral- advertising

Upon a motion duly made by Ryan Wight and seconded by Chad McCleave Council determined that Stefanie Moser is in a perceived conflict of interest in relation to the proposal submitted by the Ontario Athletic Therapist Association and is thus not eligible for appointment to the Committee on Specialties to review the proposal from OATA. **Carried.**

Stephanie Moser excused herself from the remainder of the meeting which would be focused on Committee selection.

Motion duly made by Graydon Raymer and seconded by Chad McCleave that Nelson Amaral has a perceived conflict of interest and should not sit on the Committee on Specialties to review the Framework submission brought forward by the Ontario Athletic Therapist Association. **Motion defeated.**

The President called for any further motions concerning the disclosures by other Council members. No motions were made.

Appointment of Committee to Review the Proposal received from the Ontario Athletic Therapist Association

The President called for public appointees to indicate their interest in and willingness to serve on the Committee on Specialties to review the proposal from OATA. Public members Mary Pat Moore, and Kalen Johnson agreed to serve on the Committee. Ken Alger offered to ask Lori-Ann Beckford whether she would be able to serve on the Committee and indicated that he would fill the remaining public member position on the Committee if Lori-Ann is unable to serve. (As Lori Ann declined based on time constraints, Ken assumed the third position).

The President called for professional members of Council to serve on the Committee. Professional members Ryan Wight and Graydon Raymer agreed to serve on the Committee to evaluate the proposal from OATA.

Upon a motion duly made by Graydon Raymer and seconded by Nelson Amaral, Council approved the formation of the Committee on Specialties to review the OATA Speciality Submission comprised of Ryan Wight, Graydon Raymer, Kalen Johnson, Mary Pat Moore and Ken Alger. **Carried.**

Review of Action Items

	<ul style="list-style-type: none"> - Development of the competencies to be used for recruiting of members to the Item Writing Committee. - Development of a strategic dashboard relating to operational commitments. - Summary of the Strategic Plan to be shared and circulated with the membership and public. - Amendment to the letter regarding the CNO submission to the Ministry to be circulated to Council, forwarded to the Minister, and posted on website. - Add the fee breakdown to the College's website, perhaps under the membership portal – in progress - Add information to the website regarding the benefits of being a regulated health professional – in progress - Schedule a facilitated discussion regarding Core Competencies - Addition of specific areas to the Renewal Form to better target collection of data for the College and members – in progress
	<p style="text-align: center;">Motion for Adjournment</p> <p>Moved by Mary Pat Moore and seconded by Michelle Meghie at 4:40 p.m. Carried.</p>

DRAFT



College of Kinesiologists of Ontario Council Meeting Minutes - Draft	
Date/time of meeting	Monday, June 24, 2019 at 9:30 a.m.
Chair	Jennifer Pereira
Note Taker	Sue Behari-McGinty
1. Present	Ryan Wight, Jenn Bushell, Marilyn Bartlett, Elwin Lau, Stefanie Moser, Nelson Amaral, Mary Pat Moore, Jennifer Pereira, Michelle Young
Teleconference	Graydon Raymer, Nicole DiFilippo, Michelle Meghie,
Regrets	Kalen Johnson, Chad McCleave, Ken Alger, Derek DeBono
Staff/guests in Attendance	Staff: Brenda Kritzer, Sue Behari- McGinty, Keisha Simpson, Eric Bruce, Nancy Leris and Magda Reder Guests: Sandy Jespersen (CATA) in attendance in the afternoon
2. Conflict of Interest	Chair Jennifer Pereira, asked if any Council member present wished to declare a conflict of interest. Stefanie Moser asked for Council's opinion on whether she would be in a conflict of interest concerning item #10 – Correspondence. (response to a member of the public). It was noted that this was an information item only and no conflict existed. Jennifer Pereira disclosed that for item #10 (Member's correspondence) she did download the RFP. She and her company plan to take no action on the item in relation to the item.
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.
3. Approval of Agenda	Approval of the Agenda: UPON A MOTION duly made by Nelson Amaral and seconded by Jennifer Bushell, it was resolved that the agenda as distributed electronically and posted on the website be approved. Carried.
4. Approval of Minutes for April 15, 2019	Numerous errors and omissions were identified in the Draft Minutes which had been posted to the website. The Registrar agreed that the draft Minutes were unsatisfactory and did not achieve the objectives of transparency and provision of a straightforward and reasonable record of the proceedings. She agreed to have a revised draft record prepared for Council's consideration and approval. Motion #1: Upon a motion duly made by Jennifer Bushell and seconded by Nelson Amaral, it was resolved that the Registrar revise the section of the minutes

	<p>of April 15, 2019 dealing with Conflict of interest. Carried.</p> <p>In further discussion, while there was concern that the time lapse until the Draft April Minutes could be revised and approved might be troublesome, members decided that it would not be effective to approve the Minutes of a meeting in sections only (in reference to draft Minutes of April 15, 2019).</p> <p>Motion #2: Upon a motion duly made by Mary Pat Moore and seconded by Lori Ann Beckford, it was resolved that the remaining topics of the Minutes of April 15, other than the section pertaining to conflict of interest, be approved. Defeated.</p> <p>Council discussed the posting of draft Minutes and noted concern that draft Minutes may contain errors and omissions. The Registrar noted that the complete Council package is posted in compliance with the RHPA, Procedural Code which allows only minimal exceptions. Council agreed that the College should explore with other health professions regulators whether minutes posted in draft format or posted only after approved.</p> <p>Council members felt that it would be good align our practices similar to other Colleges. Council members asked if minutes could be sent to them before the meeting package is posted, for review and input.</p> <p>Motion #3: Upon a motion duly made by Elwin Lau and seconded by Nelson Amaral, it was resolved that Council discuss at a future meeting how we post minutes. Carried.</p>
<p>4 a. New Item: Meeting Procedures</p>	<p style="text-align: center;">Meeting Procedures</p> <p>Arising from the discussion of Draft Minutes, Council discussed the need for procedural consistency in dealing with decision items, - specifically relating to the order of motions, amendments to motions, discussion and voting. It was noted that Council has used a simplified or modified approach to applying Roberts Rules of Order.</p> <p>Motion #4: Upon a motion duly made by Stefanie Moser and seconded by Elwin Lau, it was resolved that the College review the process and policy by which Minutes are recorded and posted on the College’s website.</p> <p>A friendly Amendment was proposed by Mary Pat Moore:</p> <p>Motion as amended by Mary Pat Moore and seconded by Ryan Wright, that staff specify applicable section of Robert’s Rules for taking/recording minutes. Carried</p>
<p>5. Action Items</p>	<p style="text-align: center;">Action Items Review</p>

<p>arising from Previous meetings</p>	<ul style="list-style-type: none"> • Development of a strategic dashboard which helps Council visualize the operational plan of the College – work has been underway to determine a low cost approach to development of a dashboard. The College intends to create a dashboard which tracks operational activities against the strategic goals set by Council. The Performance Report: September- November 2018, presented at the December 2018 meeting was a first step in this direction. More work will be completed over the summer. Ongoing • Summary of the Strategic Plan to be shared and circulated with the membership and public – Ongoing • Amendment to the letter regarding the CNO submission to the Ministry to be circulated to Council, forwarded to the Minister, and posted on website –Changes circulated to Council and approved. Letter submitted to the Minister. Completed • Add the fee breakdown to the College’s website, perhaps under the membership portal – This is being prepared for posting to the website. Ongoing • Add information to the website regarding the benefits of being a regulated health professional. – This work stems from the Strategic Plan developed and approved by Council. Work is underway and will continue in the coming months as the College updates the website materials and enhances the focus on public protection in materials posted. Ongoing. • Addition of specific questions to the Renewal Form to improve information gathering – In progress for targeted launch at beginning of August.
<p>6. Committee Reports</p>	<p style="text-align: center;">Committee Reports Discussion</p> <p>Reports were provided by the ICRC, Quality Assurance, Finance and Planning, and Registration Chairs regarding their Committees, which highlighted committee meetings, activities, changes and discussions that took place since the April Council meeting. The reports were posted with the Council package.</p> <p>Council member posed the following questions/comments regarding Committee Reports.</p> <ul style="list-style-type: none"> • Re: ICRC report – Were any of the cases related to sexual abuse? Eric Bruce reported that none were such. • Re: Registration Report – Meeting date needs to be corrected. • QA Report – Based on questions posed, QA Chair clarified that changes to the Peer and Practice Assessment component of the QA Program are still in progress. QA staff present at the meeting clarified selection criteria and process for the PPA.
<p>7. Appointment of Item Writing Committee</p>	<p style="text-align: center;">Item Writing Committee Slate</p> <p>Magda Reder, Registration and Examinations Coordinator, provided an overview of the history and process of selecting and appointing Item Writing Committee members. Following a review of applications by</p>

	<p>Executive Committee a slate was presented, of qualified, competent kinesiologists for Council to approve as the new Item Writing Committee.</p> <p>Questions posed by Council included clarification that staff consult the register to ensure that those selected are members in good standing. One member on this committee is currently an inactive member with past experience on ICRC.</p> <p>Upon a motion duly made by Jennifer Bushell and seconded by Michelle Young, it was resolved that Council approve the proposed Item Writing Committee Slate. Carried.</p>
<p>8. Draft Guideline</p>	<p style="text-align: center;">Complementary/Alternative Therapies Guideline</p> <p>Eric Bruce, Director of Professional Conduct, provided an update on the Complementary/Alternative Therapies Guideline following the 60-day public circulation for comment. At the April 15 meeting, Council approved the Draft Practice Guideline in principle and directed that the Guideline be circulated to the membership and stakeholders for comment for a period of sixty days.</p> <p>In summary, there were 72 comments, two formal responses from two associations one of which was the OKA. Other Colleges were consulted informally and verbal comments were received. The number of comments received indicates that this topic requires attention. Comments were polarized from “no we should not” to “yes, tell me more”, and everything in between. Most of the comments can be addressed by providing some clarification in the next iteration.</p> <p>In light of the breadth and nature of the feedback received from members and stakeholders, further policy work is required and it is recommended that the College report back to Council in the Fall. The College is aware that the CPSO will be updating their guideline. Our guideline was adapted from this guideline (with CPSO permission). Feedback may also indicate that a guideline to address this topic may not be the best approach and perhaps more guidance for members is appropriate.</p> <p>Council concluded that the proposed approach going forward is reasonable.</p>
<p>9. Academic Assessment Form</p>	<p style="text-align: center;">Academic Assessment Form (Registration)</p> <p>Keisha Simpson, Manager, Registration Services provided an overview of the new Academic Assessment Form that was approved by Registration Committee. The form combines information and data gathering from three separate documents now merged to make it easier for applicants to complete. The document now includes the Academic Assessment table, points scoring system and the template course descriptions. The modified form increases transparency in the registration process.</p> <p>The form has been updated on our website. Council members commended</p>

	staff on the new form.
<p>10. Correspondence</p>	<p style="text-align: center;">Correspondence</p> <p>Brenda Kritzer, Registrar, provided an update on three correspondence matters that took place at the College.</p> <ul style="list-style-type: none"> i. Brenda spoke to the Letter to the Honourable Christine Elliott – Support for the College of Nurses of Ontario Vision 2020. Council had approved the letter with some edits, to be sent to the Minister at the April 15, 2019 meeting. The letter was sent to the Minister on April 30, 2019 following final edits requested by Council. The letter included in Council’s June package is the final approved letter and is included for information and transparency. ii. The second item of correspondence was an email sent to a member of the public who had attended the April meeting of Council and had contacted the Registrar by phone to express personal views. The email correspondence re-affirmed Council’s and the College’s commitment to transparency and to meetings of Council being open to the public. iii. The third item of correspondence, a letter from registrant from Conny Glenn, informed the College that a public agency had issued a public document which restricts Registered Kinesiologists from work which falls within the scope of practice. Ms. Glenn was writing to seek support in helping the WSIB to understand the scope of practice of the regulated profession of Kinesiology. It was noted that if Council wishes to take action by writing to the WSIB, the purpose of our correspondence should be to clarify the scope of practice and competencies of the regulated profession, and to encourage the agency to ensure access by their clients to the services of regulated professionals, in the interest of public protection. <p>Council agreed that such a letter should be sent to the WSIB focusing on public protection through access to regulated health professionals.</p>
<p>11. Committee on Specialties (a sub-Committee of Council)</p>	<p style="text-align: center;">Committee on Specialties Update</p> <p>Mary Pat Moore, a member of the Committee on Specialties, provided a summary of the Committee’s work to date:</p> <p>Members of the Committee- Ken Alger, Kalen Johnson, Mary Pat Moore, Graydon Raymer and Ryan Wight</p> <p>Critical Question to be addressed by the Committee: Is the risk of harm to the public sufficient to require additional or specific regulation/governance?</p>

Meetings

May 8, 2019, June 5, 2019 and June 6, 2019. Work is underway to schedule additional meetings.

Documents Reviewed by the Committee

- Assessment Framework for Specialities (CKO)
- Assessment Tool: Specialities Application for authorizing of a speciality (CKO)
- Correspondence from Ontario Athletic Therapist Association (OATA).
- Submission to the College of Kinesiologists of Ontario “Proposal to Recognize and Athletic Therapist Specialization/Class of Members” October 2013
- Role Delineation Study for Athletic Therapists: the CATA created an examination blueprint 9/24/15
- The OATA President’s comments on Role Delineation Document. Spring 2019
- Managing Concussions in Clinical Practice-May 3, 2017 (OATA)
- The CATA Program Accreditation Manual-evaluation of A.T. programs, evaluation of applications by post-secondary institutions, and maintenance of accreditation policies.
- The CATA Code of Ethics
- Review of Draft Specialties Assessment Framework and Proposal from the OATA on Specialties by Dr. N. McCartney, March, 2017
- Risk of Harm Submission from the OATA Oct 2018 and follow-up (from Dr. Frances Flint on behalf of the OATA) Feb 2019
- Submission to the Sub-Committee on Sports-related Concussions in Canada by OATA May 2019
- Tri-Council Policy Statement on Special Conduct for Research Involving Humans: Inter-Agency Panel on Research Ethics 2017-10-12. (provided by G. Raymer)
- Public Standards Authority U.K. “Right Touch Methodology”

Presentations

June 5, 2019

- Jeanette Quach R. Kin. Athletic Therapist, CAT(C), RMT
- Devon Blackburn, R. Kin

June 6, 2019

- Drew Laskowski R.Kin., A. T., CAT (C), President of OATA
- Dr. Sanje Beca, Associate Dean, School of Applied Health, Sheridan College
 - Presentation on typical baccalaureate degree qualifying a graduate for certification as an A.T.
- Dr. Steve Fisher, R.Kin. Professor- University of Waterloo
 - Presentation re: typical honours degree at an Ontario

	<p>University. He spoke to competencies of assessment, exercise prescription, and provision of services (therapeutic treatment).</p> <p>In its deliberations the Committee is also considering the following questions which would have to be addressed in any submissions to the Ministry, concerning a specialty or a class:</p> <ul style="list-style-type: none"> • Is the risk of harm to the public sufficient to require additional regulation/governance? • Do the education and training required to qualify for certification as an A.T. meet the requirements laid out in the Specialties Assessment Framework policy? • What would be the impact of separate recognition requirements for the proposed speciality on the practice of kinesiology? • What options other than regulation should be explored which would address the risk of harm? • Would authorization of a speciality increase costs to practitioners? To the College? To the public? <p>Discussion:</p> <p>Clarification was provided concerning the academic member of Council. Specifically, the academic member of Council is elected from among the members of the profession in District 7 (the entire province - only members who are eligible to run in this District may vote). It was confirmed that all members of the Committee were appointed by Council and that the Committee may call upon external advisors and experts in their deliberations. It was further noted that the Registrar and other staff support the work of the Committee on Specialties by providing materials, etc., but take no part in the decision-making processes.</p> <p>Council members acknowledged the hard work of the Committee and re-affirmed the importance of the deliberations and the recommendations which will come forward to Council.</p> <p>Members of Council affirmed their commitment to ensuring transparency and integrity in all decisions by Council and recommendations from Committees and task forces appointed by Council.</p>
<p>12. Draft Policy Review of Specialty Proposal (Committee Selection)</p>	<p style="text-align: center;">Draft Policy re: Review of Specialty Proposal</p> <p>At the April meeting of Council, a Decision Note was presented concerning appointments to a Committee on Specialties. At that time, Council made a number of suggestions and requested that the content of the Note be developed into an addendum to the current policy, <i>Specialties: Authorizing a Specialty of the Profession</i>.</p> <p>The Registrar presented the Draft addendum to the above noted policy, noting the amendments that had been suggested by Council.</p> <p>Council members noted that it would be important for organizations making submissions in the future to have this policy beforehand.</p>

	<p>Some concerns were raised about the cost to the College (including time and staff resources), expertise and experience of the College in dealing with such submissions. The issues of cost and the ability of an organization to make resubmissions if not successful were also discussed.</p> <p>It was acknowledged that the policy development concerning specialties has been an iterative process. The experience of the College and of Council in addressing the first submission under the policy will inform future policy refinements. Organizations making submissions will be made aware of this.</p> <p>It was noted that unlike legislation and regulation, the nature of policy is intended to allow organizations to evolve in their “rules and procedures” in response to changing needs and different experiences. Committee members noted that it is through the application of a policy, that gaps or inconsistencies may be identified. Through this process the Committee on Specialties will be able to inform the College and Council of “lessons learned”.</p> <p>Members of the Specialties Committee noted that the current Policy was of great help in addressing the current submission.</p> <p>Council members asked if the College knows what the cost for the current submission has been so far and noted that costs would include costs incurred by the committee for meetings, etc., staff time to develop the framework, cost of circulation to the members and others and the cost for experts to review to name a few places where extra costs can be incurred.</p> <p>It was noted by some Council members that some other Colleges have specialties, for instance Dentistry and their experience may help to inform our processes.</p> <p>The Registrar thanked the Council members for their comments and committed that the College will ensure the availability of a comprehensive package for those registrants in the College and their representatives interested in making a submission in the future under the Specialties Assessment Framework policy.</p> <p>Motion: Upon a motion duly made by Elwin Lau and seconded by Michelle Young it was resolved that the College be requested to prepare a more fulsome application package for members of the profession wishing to make a submission. Carried.</p>
<p>13 Registrar- Performance Review Template</p>	<p style="text-align: center;">Performance Review Template</p> <p>Jennifer Pereira, Vice President, provided an update regarding revisions made to the Registrar Evaluation Guide and approved by Executive Committee on June 17, 2019. Revisions were made to respond to feedback from Council members on the complexity, repetition, and areas in</p>

	<p>which they feel they are unable to respond. Revisions include a simplified scoring system and deletion of redundant performance indicators.</p>
<p>14 Registrar's Update</p>	<p>i. Staffing update</p> <ul style="list-style-type: none"> - Danae Theakston has left the staff of the College and returned to the hospital sector. - Tracy Scott has left the staff of the College to take a position with the Professional Engineers of Ontario. - Ryan Pestana will be returning to the College in the capacity of Manager of Communications as of July 15, 2019. <p>Council members commented on the recent staff turnovers. The Registrar explained that turnover has been most frequent in administrative positions which are primarily entry-level positions where turnover is common in most organizations. She noted that staff in senior positions, for the most part, have stayed about five years which in today's hiring market, is a significant achievement for the College, and should not be considered typical. She also noted that the College recently received the final report on the Compensation Survey commissioned by the CKO and five other Colleges. The results of that survey are being reviewed and will inform the salary range decisions for several positions in the College. The intent is to improve our competitive position in the recruitment market.</p> <p>Council members asked whether 360's had ever been considered and whether exit interviews were conducted. The Registrar reported that a 360-survey had been conducted upon occasion in the past and that exit interviews are conducted with staff leaving the college and the record added to HR files. The College has not used an external consultant to conduct staff interviews.</p> <p>ii. Election Update</p> <p>Brenda reminded Council members that elections for Districts 1, 4, 5 and 7 (academic) will take place from July 9-16, 2019. It was noted that Michelle Young and Nicole DiFilippo will not be seeking re-election to Council. They were thanked for their contributions to the work of Council and Committees and their strong commitment to public protection through governance of the profession of kinesiology.</p>
<p>15. Budget</p>	<p>i. Budget 2019/2020</p> <p>Jennifer Pereira, spoke on behalf of the Finance and Planning Committee regarding the proposed 2019/2020 budget. Updates were provided on the budget with regard to proposed allocations for Council & Committees, Communications & Media, Office and General, Staff Salaries, Benefits and Statutory Remittances, Registration Costs, Quality Assurance Costs and Professional Conduct.</p> <p>Motion</p> <p>Upon a motion duly made by Mary Pat Moore and seconded by Nelson Amaral it was resolved that Council approve the 2019/2020 budget as</p>

	<p>circulated. Carried.</p> <p>ii. Reserve Fund Allocation</p> <p>Council discussed a recommendation from the Finance and Planning Committee to approve a deposit of \$30,000 to the reserve fund for Investigations and Hearings, as budgeted. No decision was made at this time.</p>
	<p style="text-align: center;">Review of Action Items</p> <p>i. Registrar to provide a re-draft of the Minutes of April 15th</p> <p>ii. The College to investigate practices of other College 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.</p> <p>iii. College to return to Council with revised Draft Complementary/Alternative Therapies Guideline</p> <p>iv. A letter is to be sent to the WSIB focusing on public protection through access to regulated health professionals.</p> <p>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.</p> <p style="text-align: center;">Items Carried Over</p> <ul style="list-style-type: none"> • Strategic Dashboard development. Ongoing • Circulation and Posting of Summary of the Strategic Plan– Ongoing • Fee breakdown posted on College website, • 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. Targeted for release in August.
14- Motion to Move in-camera to discuss specific matters relating to human resources	<p style="text-align: center;">In-Camera Session</p> <p>Upon a motion duly made by Mary Pat Moore and seconded by Nelson Amaral, it was resolved that Council would continue the meeting in-camera to discuss the results of the compensation survey and to set the new salary range for the position of Registrar. Carried.</p>
15 Open Public Meeting Resumed	Public Meeting resumed.
	Motion for Adjournment by the Chair 4:30 pm



Resolution- Approval of Minutes – April 15 and June 24, 2019

Be it resolved that the Council of the College of Kinesiologists of Ontario approves the April 15, 2019 meeting minutes as presented [amended].

Moved by:

Seconded by:

Date: September 16, 2019

Be it resolved that the Council of the College of Kinesiologists of Ontario approves the June 24, 2019 meeting minutes as presented [amended].

Moved by:

Seconded by:

Date: September 16, 2019

Registration Report

Committee: Registration Committee
Prepared for: Council
Date: September 16, 2019

- **Registration Committee meetings**

The Registrar has made several referrals to the Registration Committee since the June meeting. A number of files have been dealt with and a future meeting is scheduled for review of the outstanding application files, by a Panel of the Registration Committee. Matters addressed by Panels include education equivalency, reinstatement into the general class, remediation submission for third attempt at the entry-to-practice examination, registration after one year following successful completion of the examination and exceptional circumstances relevant to examination timelines. The annual Registration Committee meeting for the purposes of providing training to Committee members has been tentatively scheduled for October 16, 2019.

- **Examination Appeals Committee meeting**

There were no appeals made to the Examination Appeals Committee.

- **Fall Examination**

The fall sitting of the College's entry-to-practice examination will occur on Saturday, September 7, 2019. There are 316 candidates registered for the exam. There are 10 applicants who requested testing accommodations and one applicant has requested the exam in French. Here is a breakdown of where those candidates will write the exam:

Toronto	194
London	52
Ottawa	32
Sudbury	14
Windsor	14
Thunder Bay	10

The 316 candidates registered to write the exam represent an increase of 100 candidates or 46.3% increase from this year's spring exam.

- **Item Writing Committee**

The newly formed Item Writing Committee met in late August for a combined total of four meetings.

The committee was successful in developing a total of one hundred and seventy new questions, of which one hundred and fifty were approved for the item bank.

- **Membership Renewal**

Renewal started on August 1, 2019; the renewal deadline was extended to September 16, 2019 to accommodate changes to the online member portal. The College has made extensive improvements to the portal to provide members with a quick, efficient and seamless renewal experience.

On September 16, 2019 the College will send out *Notices of Intention to Suspend* to those members who have not yet renewed. Section 16 (1) of the General Regulation allows the Registrar to suspend a member if they fail to renew within 30 days after the notice was given. Failure of members to renew and pay their fee by October 16, 2019 will result in suspension for non-payment of fees.

The member's certificate will be revoked if the member does not comply with the renewal requirement within 3 years of the suspension. When a member is suspended they are prohibited from practising as a kinesiologist and from using the title "kinesiologist". The College will inform the member's last employer on record that the member has been suspended and is no longer in good standing with the College. Finally, the fact that a member is suspended remains indefinitely on the College's public registry.

As of August 1, 2019 there were 2931 members due for renewal of which 2523 were registered in the general class and 408 in the inactive class.

A breakdown of the renewal statistics including total number of registered members in the general class and inactive class will be provided for the December Council meeting.

Committee Report

Committee: Quality Assurance Committee
Prepared for: Council
Date: September 16, 2019

A panel of the Quality Assurance Committee (the Committee) met once since the last report made on June 24, 2019. Six Committee members attended. The Committee made a total of 11 decisions regarding peer and practice assessments. Below is a summary of the decisions and discussion of this meeting.

Peer and Practice Assessment (PPA)

The Spring 2019 PPA Cycle focused on members who were deferred from previous cycles as well as members who self-declared at annual renewal that they had less than the requisite 1500 practice hours in the preceding three years as per the Quality Assurance Regulation. Nineteen members participated in the cycle, and 11 cases were brought before the Committee in July (see table below).

Peer and practice assessment (PPA) decisions made on July 16, 2019:

PPA Cycle	Number of PPA Case Files Reviewed	Decisions
Fall 2018	1 File	1 – No Further Action
Spring 2019	10 Files	10 – No Further Action

The eight remaining Spring 2019 PPA Cycle cases will be brought before the Committee at the next scheduled meeting for initial review, as well as one Spring 2018 case and one Fall 2018 case.

Notices to participate in the Fall 2019 PPA Cycle have been sent to members.

PPA Tool Revision

College staff are exploring ways to reduce the time it takes for members to prepare for and participate in the PPA. Staff have considered feedback from PPA participants to inform review of and revisions to the tool and process. Staff reviewed all assessor reports to date to identify competencies and performance indicators likely to be scored “no” by an assessor based on the members’ responses at the time of the assessment, and feedback from Council and Committee members and assessors regarding the relevance and importance of core questions and performance indicators. A

detailed review of patient/client record reviews from the Fall 2018 PPA Cycle identified areas where members are likely to have issues. At this point, Committee has not yet identified questions assessing the record keeping performance indicators, which could or should be removed from the tools.

The Committee made several recommendations based on the information presented. Tools have been further modified and peer assessors will receive additional training regarding behaviour-based interviewing and report writing in the fall and a more fulsome spring training session will be held in the spring.

Future participants will be alerted to common issues identified in past PPAs (e.g. Record-keeping, Consent, etc.) and will be advised on how to better incorporate PPA results into their self-assessments and learning plans. Staff will maintain a record of the tool and process revisions and monitor the impact on PPA cycle outcomes moving forward.

Self-Assessment

Committee considered the issue of members' non-compliance with the annual self-assessment.

For the 2018 Self-Assessment, all active General Class members were required to complete the online self-assessment by March 1, 2019. Due to some technical issues with the self-assessment portal platform and iMIS database compatibility, members were provided with an extra month to complete the tool. By end of May, there were still 253 outstanding members who had yet to complete their self-assessment. Notices of selection to undergo peer and practice assessment have been sent to non-compliant members. Compliance with this program requirement is a common issue among health regulatory colleges. The Committee reviewed comparator colleges' practices around non-compliance, which included: fines of \$30-\$100, written submissions by members, and referrals to undergo peer and practice assessment, and inability to renew until it is completed..

This fall, the Committee will be considering several amendments pertaining to the Self-Assessment: General Requirements Policy including provisions around non-compliance, frequency, and provisions pertaining to members in the Inactive Class. In addition, the College will be looking to further streamline the tool to reduce the length of time required to complete it.

Continuing Professional Development Prescribed e-Learning Modules

Approximately 275 members were required to complete the Ethics and Professionalism and Prevention of Sexual Abuse e-Learning Modules this year. All General Class members are required to complete the modules once within a 90-day timeframe. The modules are designed to introduce a general practice issue/topic, help members understand fundamental concepts, and guide them in integrating the new knowledge into their practice to protect the public. The modules provide a series of practice scenarios based on case studies, and a quiz that tests members' knowledge and ability to analyze the relevant issues. Members are expected to use their results to identify areas for improvement in their individual learning plans. Aggregate results are used to help the College identify areas where members may benefit from additional educational resources. Prescribed learning activity is considered acceptable continuing professional development activity for the purposes of

the QA Program. Non-compliant notices were sent to members in early September 2019. Members who fail to comply by the extended deadline will be eligible to be selected to undergo peer and practice assessment.

Committee Report

Committee: Inquiries, Complaints and Reports Committee
Prepared for: Council
Date: September 16, 2019

During the 2018/2019 Council Term [September 1, 2018 – August 31, 2019], panels of the Inquiries, Complaints and Reports (ICR) Committee met on fourteen (14) occasions. In summary, the panels conducted the following business:

- Reviewed and issued decisions on four (4) reports of Registrar’s investigations into a member’s conduct;
- Reviewed and issued decisions on seven (7) complaints submitted to the College;
- Requested or approved the appointment of an investigator by the Registrar in thirteen (13) matters.

The eleven (11) decisions issued by panels of the ICR Committee during this period had the following dispositions:

- No action was taken due to the complaint being found to be frivolous, vexatious, moot, or otherwise an abuse of process in two (2) matters;
- No action was taken in three (3) matters;
- A member was provided with practice advice and recommendations in two (2) matters;
- A member was ordered to undergo a specified continuing education and remediation program in one (1) matter;
- A member was ordered to appear to be cautioned in one (1) matter (caution date to be scheduled);
- Specified allegations of professional misconduct against a member were referred to the Discipline Committee for a hearing in two (2) matters.

Two (2) complaint matters were withdrawn at the request of the complainant prior to disposition by a panel of the ICR Committee; these withdrawals were approved by the Registrar.

Three (3) decisions by panels of the ICR Committee have been appealed to the Health Professions Appeal and Review Board, including one decision from the 2017/2018 Council term. In the case from the 2017/2018 Council Term, the decision of the panel to accept the Member’s undertaking to resign his membership with the College and to not seek to reapply for a period of at least five years

was upheld by the Board in March 2019. The remaining two decisions remain under consideration by the Board with reviews to be scheduled in late 2019 or early 2020.

At the current time, there are three (3) complaint matters and two (2) Registrar's report matters under investigation by the ICR Committee.

2018/2019 Performance Report

Overall highlights:

282 new registrants  431 people wrote the exam  50 PPAs conducted  16 investigations  Overall decrease in corporate costs 

Operational highlights

Focus	Deliverables	Status	Comments and Impacts
<i>Corporate</i>	Implement a new fiscal year	Green	New year is September 1- August 31
	Develop a new strategic plan	Green	Consultant retained and plan developed from February- April 2019
	Undertake a salaries and benefits survey	Green	Partnered with five other colleges to complete the survey
	Review employee benefits package	Green	New provider retained and increased savings realized on family class benefits
	Reduce credit card processing fees	Green	Partnered with FMRAC to reduce fees. Will result in savings in the long run.
<i>Communications</i>	Develop video on consent	Green	Video published in April
	Refresh the College's website	Red	Work deferred to Q2 fiscal 2019/2020 due to work on other database refinements
	Enhance the College's e-newsletter	Yellow	Improvements made and first issue to be distributed Q1 2019/2020

Focus	Deliverables	Status	Comments and Impacts
	Develop a communications strategic plan		Plan to be developed by the end of Q1 2019/2020
<i>Registration</i>	Make appointments to the Examination and Item Writing committees		Appointments made to the Item Writing Committee
	Engage a new vendor to manage the College's iMIS member database system		Bursting Silver retained
	Complete digitization of member registration files		Completed March 2019
	Review of University of Ottawa submission to have their program deemed substantially equivalent		
	Create a Specialties Committee to review submission for specialty status from the athletic therapists		Work is still under way following four days of meetings, numerous presentations and much discussion
<i>Quality Assurance</i>	Increase the number of PPAs undertaken		39% increase in PPAs conducted over the previous year
	Ensure peer assessors are trained and competent to carry out their duties		Refresher training conducted for all 25 peer assessors in September 2018
<i>Professional Conduct</i>	Develop a policy on funding for victims of sexual abuse		Completed and approved in June 2019
	Develop a guideline on complementary and alternative therapies		Draft guideline developed and consulted on. Currently being revised following feedback received.
	Develop an enquiry tracking system		Introduced to track all questions coming in to the College
	Update risk management plan and provide training to Council on risk management		Council reviewed and approved in 2018



REVENUES

COLLEGE OF KINESIOLOGISTS OF ONTARIO - REVENUE PROJECTIONS TO YEAR END
FOR THE FISCAL YEAR 2018/2019
(as of Sept 1 - Aug 31, 2019)

	1	2	3	5
CATEGORY	APPROVED REVENUE FORECAST 2018/2019	ACTUAL REVENUES RECEIVED (Sept. - Aug 31 2019)	VARIANCE TO YEAR END	
	\$	\$	\$	
Revenue:				
Jurisprudence Fee (\$48.25)	21,713	25,475	3,762	
Application Fee (\$100)	45,000	53,000	8,000	
Examination Fee (\$400)	170,000	207,550	37,550	
Registration Fees*	1,652,150	728,214	- 923,936	
Interest Income	8,000	30,033	22,033	
TOTAL	1,896,863	1,044,272	- 852,592	
*	Approved Forecast	Actual Revenue Q1 - Q4 (Sept 1 to Aug 31)	Variance to year end	
	\$	\$		
New Registrants				
- Sept - Nov (\$650)	65,000	84,150	19,150	
- Dec - Feb (\$487.50)	29,250	27,325	- 1,925	
- Mar - May (\$325)	10,400	16,900	6,500	
- Jun - Aug (\$162.50)	13,000	8,126	- 4,874	
<i>Subtotal (new Registrants)</i>	<i>117,650</i>	<i>136,501</i>		
Renewal (\$650 & Installments)	1,450,500	545,563	- 904,937	
Inactive (\$200 & Installments)	74,000	35,900	- 38,100	
Inactive Late (\$50)	2,500	2,850	350	
Registration Late Fee (\$100)	6,000	5,200	- 800	
Re-instatement Fee (\$325)	300	1,200	900	
Professional Corp Reg Fee	1,200	800	- 400	
Professional Corp Late Fee	-	200	200	
Total	1,652,150	728,214	- 923,936	

Notes

Revenue categories for Jurisprudence, Application, Examination and Interest Income exceeded projections by end of Q4. Forecast for renewal revenues came lower than expected. This resulted

from renewal deadline extending to Sept 15, 2019. Usually renewal starts in July. Renewal revenues will be collected in the new fiscal year. By end of Q4, 288 new members joined the College compared to initial projections of 272. Income revenue also increased as a result of change in banking service provider. Initial projections were only on income from laddered GICs however, interest income includes interest on funds in operating account.

EXPENDITURES

COLLEGE OF KINESIOLOGISTS OF ONTARIO - EXPENDITURE FORECAST TO YEAR END 2018/2019

(as of Sept 1 - Aug. 31, 2019)

update 04/09/2019

	2	3	5	
CATEGORY	APPROVED BUDGET 2018/2019	ACTUAL EXPENDITURE (Sept 1 to Aug 31 2019)	REVISED PROJECTIONS Q1 TO Q4 (Sept 1 2018 to Aug 31, 2019)	VARIANCE TO YEAR END
	\$	\$		\$
Expenditure:				
Council & Committees	86,800	87,175	101,854	-15,054
Professional Fees	85,132	62,868	75,589	9,543
Communications & Media	109,500	43,536	43,536	65,964
Rent & Facility Costs	236,342	220,368	222,368	13,974
Office & General	123,760	103,192	104,196	19,564
Salaries & Wages	945,772	968,804	978,460	-32,688
Registration	161,170	211,485	220,485	-59,315
Quality Assurance	66,080	38,365	40,340	25,740
Professional Conduct	7,500	27,331	27,331	-19,831
	1,822,056	1,763,124	1,814,159	7,897
TOTAL				
Reserve fund contribution	30,000			
Excess/deficiency of revenue over expenses				

Notes:

Council & Committees including AGM

Payment of expenses for Quality Assurance, Registration, ICRC, Patient Relations, University Liaison,

Executive, Finance and Planning, two- day strategic planning meetings, strategic planning focus groups Council Orientation, Council and Committee to define "Specialty" and Elections. Projections by end of Q4 for Item Writing committee, Council, Council Orientation, Executive, Registration, Finance & Planning and Committee for "Specialty". Shortfall by end of Q4 as a result of focus groups and specialty committee meetings including other Committee meetings such as QA, Registration and Executive meeting more than projected. We also had more in-person meetings. Savings from Professional fees, Rent & Facility costs to cover shortfall.

Professional Fees

Payment for bookkeeping services, shared costs for salary survey, strategic planning and general legal fees. Projections by end of Q4 for Audit and general legal fees. Savings resulted from competitive bidding for strategic planning and shared cost for salary survey. Savings to be used for "Council & Committee" Budget line.

Communications & Media

Payment for IT support, translations, design and layout of annual report, lanyards, banners, development of video on "Consent" . We planned regional town hall meetings and website upgrade which was postponed. Savings to be used for the "Registration" budget line for database maintenance.

Rent and Facility Costs

Payments reflect a 1% rent increase and an upgrade to IT equipment by end of the fiscal year We originally budgeted for a 2% rent increase. Savings to be used for "Council & Committee" budget line.

Salaries & Wages

Projections by end of Q4 include salary increases & benefits for staff resulting from the salary survey. Shortfall by end of Q4 as a result of salary adjustments for staff. This amount does not include the Registrar's salary adjustment from the compensation survey. Savings from QA and Office & General budget line to cover shortfall.

Registration

Payments for September 2018 Exam, database maintenance, hosting of database, and printing of certificates of registration, extraction of HPDB and OFC reports, payment for April 2019 Exam Projections by end of Q4 for outstanding invoices for database maintenance for renewal. Savings from communications & media budget line to be used for the database maintenance as approved by Council.

Quality Assurance

Payment for self assessment portal annual license and peer and practice assessments. Projections by end of Q4 for members who have not submitted their expenses for PPA. Savings resulted from issues with member selection for the Spring cycle. Less members were selected. Savings also from system revisions for integration of IMIS with the self assessment portal and prevention of sexual abuse online modules postponed.

Professional Conduct

Expenditures for complex investigations exceeded overall budget. This has resulted in drawing down on the reserve fund allocation for investigations in this fiscal year. Expenses for investigations are

demand driven.



Resolution for Appointment of Interim Signing Officers

Whereas the College is required, as per the By-laws, to have a minimum of two signing officers in addition to the Registrar empowered to sign cheques and approve direct deposit payments; and

Whereas the financial checks and balances put in place by the College require two signatures on cheques and to release online payments; and

Whereas the term of office for the current College signatory will expire in October 2019; and

Whereas the College requires the appointment of one person as signing officer for the College's banking matters.

Therefore, be it resolved that Council approve Jennifer Periera as signatory for the College's bank account.

Moved by:

Seconded by:

Date:



Committee on Specialties

Report to Council

September 16, 2019

Background

- Developed a Specialties Assessment Framework and Policy to Authorize a Specialty Title
 - Extensive consultation with the profession, other regulators and professional associations
 - Framework approved in 2018
- Specialties Committee created in 2019 to review OATA's submission

The Specialties Committee

- Public appointees: Ken Alger, Kalen Johnson, Mary Pat Moore
- Professional members: Graydon Raymer, Ryan Wight
- Four days of deliberations and presentations resulted in feedback and further questions to the OATA.

Critical question

- Critical question that the Committee must address:

Is the risk of harm to the public sufficient to require additional or specific regulation/governance?

Related questions

- Is there an education program related to the specialty/class?
- What would be the impact on the practice of kinesiology of separate recognition requirements for the proposed speciality?
- What options other than regulation have been explored which would address the risk of harm?
- Would authorization of a speciality increase costs to practitioners? To the College? To the public?
- Is the practice of athletic therapy sufficiently differentiated from the general practice of kinesiology?

Next steps

- OATA to respond to questions. Summary of comments for consideration and response to OATA:
 - Risk of harm
 - Qualifications to practise across scope of practice of kinesiology
 - Implementation
- Committee will make its recommendations to Council
 - Council must decide
- In the meantime...continuing our work and analysis

Committee on Specialties: Report to Council, Sept. 16, 2019

Summary to Council based on Update Report to the Ontario Athletic Therapist Association

Committee Composition:

Council appointed the following members of Council to review the submissions of the OATA made under the Policy - Assessment of Specialties Framework:

- Public Appointees to Council: Ken Alger, Kalen Johnson, Mary Pat Moore,
- Members of the profession elected to Council: Graydon Raymer and Ryan Wight

Critical Question to be addressed by the Committee:

“Is the risk of harm to the public sufficient to require additional or specific regulation/governance? “

Ancillary and Related Questions

The Committee understands that any regulatory submission from a health professions regulator to the Ministry would require responses to the following questions in addition to the overarching question stated above:

- Do the education and training required to qualify for certification as an A.T. meet the requirements laid out in the Specialties Assessment Framework policy for a specialty?
- What would be the impact of separate recognition requirements for the proposed speciality on the practice of kinesiology?
- What options other than regulation have been explored which would address the risk of harm?
- Would authorization of a speciality increase costs to practitioners? To the College? To the public?
- Is the practice of athletic therapy sufficiently differentiated from the general practice of kinesiology, and the risk of harm sufficiently differentiated and of a level that regulation, entry to practice and registration requirements should be different from that of those applying for the General Class?

Meetings

May 8, June 5 - 6, August 20. Work is underway to schedule additional meetings.

SUMMARY COMMENTS FOR CONSIDERATION AND RESPONSE TO OATA

- **RISK OF HARM**
- **QUALIFICATIONS TO PRACTISE ACROSS SCOPE OF PRACTICE OF KINESIOLOGY**
- **IMPLEMENTATION**

Key Requests for the OATA

1. Can the OATA please provide information which expands upon and provides documented evidence regarding the risk of harm to athletes participating in sports (where athletic therapists would typically be part of the medical support team)? For example, can OATA provide documentation or research evidence concerning the incidence and severity of injuries in different sports, among different age groups participating in sports, etc.? The Committee understands that such research exists and while it may be more plentiful in relation to the American experience, the Committee believes that this evidence is crucial to making the case concerning risk of harm.

Please explain if the Canadian experience is likely to differ significantly from the American experience and why. The Committee is concerned that much of what has been provided in the OATA submissions is anecdotal. A strong business case for either class or specialty must be based upon risk of harm. This requires supporting statistics. To the extent that the types and levels of injuries to children, youth, and athletes are documented in research, this should be provided to the Committee as evidence of the risk of harm and the necessity that persons attending to such injuries should be athletic therapists.

2. Can the OATA provide evidence in the form of public reports, research, etc. that practitioners who have not been certified as an AT have been involved in:
 - a. Incidents where additional harm has been caused to a patient/athlete
 - b. An uncertified practitioner has been found to have committed a sexual offence against a vulnerable person (child, athlete, etc.)
 - c. Can the OATA provide evidence concerning unprofessional behaviours by certified ATs, causing injury to patients/athletes or other health care practitioners? In these instances, would regulation, training provided by the regulator including jurisprudence training, have deterred such offences?
3. Are the members of the OATA aware that if a specialty or class is created and those not qualified as kinesiologist are admitted to the College into the specialty /class, they will have a restricted practice?
4. Are the members of the OATA aware that if the College creates as Speciality/Class that this may impact certified athletic therapists who are members of other Colleges?
5. Are the members of the OATA aware that it is the College that will define the scope of practice and the entry requirements and as such, qualified practitioners who are not CATA certified may also be admitted to the specialty/class?
6. Given that a significant number of the certified athletic therapists who qualify for entry to the College of Kinesiologists have not registered, or have registered and then resigned, can the OATA provide evidence that athletic therapists are willing to be governed by the College of Kinesiologists of Ontario? Can the OATA address the willingness to be governed, of those who would qualify under specific requirements for registration in a class or specialty, but who do not qualify to become kinesiologists?
7. Can the OATA address the willingness of those who would qualify for registration both as a kinesiologist and as an athletic therapist, to register in both? Otherwise would such practitioners understand that they must accept a limited scope of practice?

8. Are members of the OATA aware that it is the ministry that will make the final decision and that if the College submits a draft regulation to amend the General Regulation to create a specialty or class that it may take more than a year and possibly may not ever be approved by the Committee of the Legislature?
9. The Committee is concerned about the current copyright on the title Certified Athletic Therapist, held by the CATA. If the College were to submit a regulation concerning either a specialty or a class, it would override the current copyright protection of the title Certified Athletic Therapist. The Committee would like more information concerning the CATA awareness of this and of other potential impacts on their current roles in relation to Certified Athletic Therapists in Ontario.
 1. In addition the Committee asks that the OATA address risk of harm by athletic therapists outside of the field-of-play area of practice. As many athletic therapists and those uncertified practitioners maintain a clinical practice, the Committee would like the OATA to discuss the risk of harm in these clinical settings. In responding to this question, if certified athletic therapists who do not qualify as kinesiologists were admitted to the College through a Class of specialty provision in the General Regulation, what would be the risk of harm posed by their clinical practice?

Please provide an indication of when the OATA might be able to respond to the questions outlined above so that a meeting of the Committee can be organized.

**COLLEGE OF
KINESIOLOGISTS
OF ONTARIO**



SPECIALTIES

Authorizing a specialty of the profession

Contents

SECTION A:	1
Definition	1
SECTION B:	1
Requirements for Recognition of Kinesiology Specialties	1
ACCREDITATION OF A SPECIALTY TRAINING PROGRAM	3
SECTION A:	3
Validation of the Sector Recognized Certification Program	3
SECTION B:	3
Submission of an Application	3
SECTION C:	4
Application Requirements	4
SECTION D:	5
Application Review and Approval Process	5

Appendix 1

ACCREDITATION STANDARDS	i
Standards for Accreditation of Certificate and Diploma Programs Relating to Specialty Areas of Practice Authorized by the College of Kinesiologists of Ontario	i
ACCREDITATION STANDARD 1: ADMINISTRATIVE STRUCTURE	i
ACCREDITATION STANDARD 2: RESOURCES	ii
ACCREDITATION STANDARD 3: EDUCATIONAL PROGRAM	iii
ACCREDITATION STANDARD 4: COMPETENCY-BASED ASSESSMENT OF TRAINEE PERFORMANCE	iii

REVIEW AND APPROVAL FRAMEWORK FOR AUTHORIZATION OF A SPECIALTY

SECTION A: Definition

Definition –To be authorized as such by the College, a specialty must be a discrete and well-defined focus of practice which requires in-depth knowledge and skills beyond those commonly possessed by registered kinesiologists (defined by the registration and renewal requirements of the College of Kinesiologists of Ontario). A specialty builds on the knowledge within the discipline and strengthens and enriches evidence-based practice of kinesiology. A specialty responds to defined needs of members of the public.

Practitioners of an authorized specialty within the field of kinesiology will have gained advanced competency within the specified area of practice, through study and supervised practice as a trainee. This study and supervised practice will have been conducted by a program or programs accredited by the College of Kinesiologists of Ontario or its delegate to provide certification, a diploma or a degree that is recognized by the College.

SECTION B: Requirements for Recognition of Kinesiology Specialties

1. Defined scope

The scope of the proposed specialty requires advanced knowledge and skills that: (a) are recognized as part of a kinesiology special area of practice, or combination of recognized kinesiology special areas of practice; and (b) cannot be adequately represented to the public and to members of other healthcare professions solely through the use of the R. Kin title plus addition of the designation used by those qualified in the special area of practice.

- Builds upon the defined essential competencies of the profession in a distinct area by adding increased depth of knowledge, and by increasing the skills of the practitioner within the area of specialty;
- Adheres to the Standards of Practice and defined Essential Competencies Profile
- Demonstrates the competencies required to provide advanced and specialized kinesiology services.
- Responds to a recurrent set of well-defined situations/problems/needs related to a defined population
- Typically, specialists practise in the area exclusively.

2. Evidence of need

The specialty applicant must document scientifically, by valid and reliable statistical evidence/studies, that the applicant: (a) actively contributes to new knowledge in the field; (b) actively contributes to professional education; (c) actively contributes to research needs of the

Authorization of Specialties

profession; and (d) provides kinesiology services for the public; all of which are currently not being met by general practitioners or another authorized specialty of kinesiology.

3. Impact on existing practice of kinesiology

The recognition of specialties within a profession acknowledges and leads to advancements in practice, research, and technology. Improvements within the field serve the public interest by enabling more informed decision-making and enable members of the profession to make necessary referrals within the profession to respond to particular patient/client needs.

Specialties are authorized only in those areas identified and accepted by the profession where advanced knowledge and skills are essential to maintain or restore health or to provide the required support to the development of the profession.

- Authorization of the speciality enhances and strengthens the public's access to necessary and effective kinesiology services.
- The profession has demonstrated that authorization of the specialty is consistent with the goal of protecting the public, that it nurtures the practice and science of kinesiology, and that it improves the quality and accessibility of care.
- The specialty demonstrates unique integration of care with other areas of kinesiology and/or other areas of health service.

4. Advanced Education and Training

Formal advanced education and training programs pertaining to a specialty must be verifiable by the College. The Program must provide education and training beyond what is attained in the four or five-year kinesiology degree from a recognized Ontario university or equivalent degree program. The purpose of the Program and the design of the curriculum must be to provide the special knowledge and skills required for practise of the proposed specialty.

5. General Characteristics

- Specified knowledge and skills within kinesiology
- Specialized constellation of competencies that build on essential competencies
- Structured program of study and/or training which is not part of a baccalaureate degree, typically requiring a minimum of 1000 curriculum hours and 800 supervised practise/practicum hours.
- Certification requires an exam by a sector-recognized certifying body
- Continual evaluation of specialty skills at adequate intervals by the accepted certifying body.

A program which is desirous of providing a certificate or diploma to qualify members to practise as a specialist within an authorized specialty of kinesiology, must be accredited by the College or an organization to which the College has delegated the authority to accredit for the purpose of providing training in a specialty of kinesiology.

ACCREDITATION OF A SPECIALTY TRAINING PROGRAM

SECTION A:

Validation of the Sector Recognized Certification Program

The application for authorization to use a specialty title requires submission of documentation relating to the education and certification process undertaken by the member to achieve the required level of competence to practise as a specialist in the specialty area. The education and training must be provided by a program which is recognized by the sector and the profession and which has been accredited by the College or its delegate.

SECTION B: Submission of an Application

A program which meets the following criteria may submit an application for accreditation:

- i) A dean/program director/program administrator, as applicable, has been employed at the time the application is submitted and at least six (6) months prior to a projected site visit.
- ii) The program meets the accreditation requirements attached to this document and can be demonstrated, at the time of the application.
- iii) A strategic plan/outcomes assessment process, which will regularly evaluate the extent to which the program's stated goals and objectives are being met, is developed and available for review.
- iv) The long and short-term financial commitment of the institution to the program is documented and demonstrates viability of the program.
- v) Contractual agreements are drafted and signed providing assurance that any program dependent upon the resources of a variety of institutions and/or extramural clinics and/or other entities has adequate support.
- vi) A defined admission process and due process procedures exist to verify that applicants for admission to the program meet entry requirements.
- vii) Due process procedures including examinations are in place to ensure that trainees achieve the required competencies to practise at an advanced level within a specific area of the field of kinesiology.
- viii) Qualifications, assignments and appointment dates of faculty are provided.
- ix) An explanation is included of how the curriculum was developed including who developed the curriculum and the philosophy underlying the curriculum. If curriculum materials are based on or are from an established education program, there must be documentation that permission was granted to use these materials.
- x) The curriculum with general course and specific instructional objectives, learning activities, evaluation instruments (including, as applicable, laboratory evaluation forms, sample tests, quizzes, and grading criteria) is provided.
- xi) Class schedule(s) noting how each class will utilize the facility are developed.

Authorization of Specialties

As there is no accrediting body currently in place that is able to assure the College of the qualifications of an applicant for provision of training in a specialty within the practice of kinesiology, such applications must be made to the College with payment of required fees.

SECTION C:

Application Requirements

1. General Information

- i) What is the name of the proposed specialty?
- ii) Describe the relationship between the specialty and general kinesiology practice
- iii) Is there a national organization which provides certification or regulates through a legislative framework, the proposed specialty?
- iv) Are there any other national or provincial organizations with similar scopes? If yes, what is the relationship between the organizations?

2. Specific Information

- i) Describe (in detail) the unique nature of the proposed specialty. Provide information on the following:
 - (a) A list of well-established and validated Standards of Practice or Core Competencies, the methodology used to develop and validate the standards and competencies. Every standard or competency should relate to the uniqueness of the proposed specialty area.
 - (b) A statement of values and beliefs reflected in the practice of this specialty area, which must be reflected throughout the proposal.
 - (c) A description of the recurrent situations/problems/needs which the specialty area addresses.
 - (d) A description of key phenomena that relate to practice, such as, technologies, physical set-up, practice setting, and any other external influencing factors that relate to the uniqueness of the specialty area.
 - (e) A written role description for practitioners within the specialty.
 - (f) A list of well recognized and current journals, publications, research studies which support the speciality.
 - (g) A list of healthcare practitioners or other individuals who have acknowledged, relevant knowledge or expertise who support the creation of the specialty and provide reasons for their support.
- ii) Describe the client population which this specialty primarily serves and how it benefits from this specialty practice.
- iii) Is this specialty recognized by another jurisdiction, if yes, for how long?
 - (a) For each jurisdiction, describe how the specialty is structured.
- iv) For each jurisdiction, describe how it is recognized (e.g. examination?)
- v) Describe the requirements for recognition of practitioners in this area.
- vi) How are practitioners in this area assessed/confirmed?

Authorization of Specialties

- vii) What are the continuing competency requirements for practitioners to maintain their specialty certification?
- viii) How will the recognition of this proposed specialty affect general practitioners and any other related specialties? (please include both positive and negative implications)
- ix) Would any component of the specialty training be taken as part of the training for general practice? (E.g. streamed university programs). (Please describe how this would be handled by the training program in the specialty area)
- x) How would recognition of this specialty area affect the following:
 - (a) Delivery of general kinesiology services?
 - (b) Meeting health care needs?
- xi) Estimate how many practitioners are currently practising in the proposed specialty area
- xii) Outline future projected work force needs for those practising in this area (5-10 years)
- xiii) Why is authorization by the CKO essential for the proposed specialty? How public protection is improved or how is the practice of kinesiology enhanced?
- xiv) Identify any organizations and stakeholders (within Canada) who should be consulted including other professions where holders of the specialty certification or education may practise.
- xv) Outline the implementation process for the proposed specialty.

SECTION D:

Application Review and Approval Process

Stage 1 – Internal Review

- i) Receipt of submission
- ii) Preliminary review by College to ensure completeness
- iii) Council establishes a special-purpose Committee on Specialties
- iv) Submission sent to COS co-Chairs (Committee on Specialties) and reviewed

Stage 2 – COS Review

- i) Review of application
- ii) Provide direction to staff regarding verification of claims, commitments made in the proposal, current practice focus and structure for those most likely to be impacted within the membership of the College
- iii) Decision –COS decides whether to accept the proposal and to begin the consultation process potentially leading to authorization of specialty.
- iv) Key Decision Criteria
 - (a) Does the proposed specialty make the case that it is necessary for improved public protection?
 - (b) Does the proposed specialty demonstrate strength of certification/education program?
 - (c) Is the proposed specialty broadly understood and accepted within the profession?

Authorization of Specialties

Proposals passing this stage will be reviewed according to the Standards for Accreditation described in Appendix 1.

Stage 3 – Stakeholders Consultation

- i) Consultation with the proponents to discuss the application, the consultation process, and outcomes from stakeholder consultations
- ii) Consultation by the College with the MOHLTC and with health profession regulators regarding proposal of profession for authorization of specialty. The College will consult with the public, with the Ministry of Health and Long-Term Care, with its members, with all other regulated health professions, and with stakeholders, to verify need and claims of enhanced public protection.
- iii) The period of consultation shall be ninety days unless it is determined that there is urgency to the matter in which case the period of consultation shall be sixty days.
- iv) Upon review of comments submitted during the consultation, if substantial concern is raised, then a further consultation of sixty days will be undertaken.
- v) Feedback to specialty group representatives to address any proposal shortcomings or issues
- vi) Further consultation with membership and key stakeholders as deemed necessary by COS
- vii) Consultation submissions reviewed by COS
- viii) COS directed meetings with individual stakeholders as necessary.
- ix) COS decision – requires further clarification; decision to recommend approval; decision to recommend against approval. Rationale provided to support recommendation.
- x) COS considers and drafts implementation plan if recommendation is to proceed with specialty.

Stage 4 – Ratification

- i) Review by Executive Committee
- ii) Executive Committee receives the recommendation of the Committee on Specialties. Considerations of Executive Committee include cost implications for the College, communications requirements, impacts if any on regulation, impacts on membership, and feedback received through consultation process.
- iii) Executive Committee comments– specialty designation is (is not) required to enhance public protection; implementation plan is (not) feasible.
- iv) Review by Council
- v) Council receives the recommendation of the Committee on Specialties and comments from Executive Committee.
- vi) Decision on whether to authorize a specialty designation and implementation plan.
- vii) Implementation (addressed in application)

APPENDIX 1

ACCREDITATION STANDARDS

Standards for Accreditation of Certificate and Diploma Programs Relating to Specialty Areas of Practice Authorized by the College of Kinesiologists of Ontario¹

The preceding is a process for authorizing a specialty. Individuals or organizations submitting a proposal to provide a program which trains candidates in an authorized specialty will be assessed to ensure they meet accreditation standards at the end of Stage 2 in the College's Review and Approval Process described above.

ACCREDITATION STANDARD 1: ADMINISTRATIVE STRUCTURE

There must be an appropriate administrative structure.

Interpretation

- i) There must be a program director who has authority and accountability for the operation of the certification or diploma program.
 - (a) The program director must have demonstrated specialty expertise gained through advanced education, training and experience in the area of focused competence.
 - (b) The program director is accountable to a board of directors capable of such oversight. There must be coordination between the board of directors, and the professional associations for kinesiology and the area of specialty practice and universities in Ontario offering degrees in kinesiology to ensure the certification or diploma program does not negatively impact on the quality of education provided in these programs and offers learning experience at a level which is advanced beyond the bachelor degree level for Ontario universities.
 - (c) The program director must be assured of sufficient time and support to administer the program.
- ii) If more than one type or level of advanced training certification is offered by the corporation, there must be a program committee for each certification program, to assist the program director in the planning, organization, and supervision of the program.
 - (a) The members of this committee must include at least one trainee chosen by the trainees in the program.

¹ Adapted from *The Royal College of Physicians and Surgeons of Canada*. General Standards for Areas of Focused Competence (AFC) Programs 'C' Standards

Authorization of Specialties

- iii) The program director, assisted by the program committee, must administer and maintain an educational environment conducive to educating experienced kinesiology practitioners in the area of focused competence.
- iv) The program director and committee must:
 - (a) Oversee and ensure the quality of didactic and practical education in all sites that participate in the certification or diploma program.
 - (b) Approve the selection and teaching assignments of program faculty as appropriate.
 - (c) Select candidates for admission to the program.
 - (d) Develop and monitor an evaluation process that provides documented, regular feedback for trainees and includes an appeal mechanism.
 - (e) Ensure compliance with relevant college (CAAT) or university policies where the program is offered by a college or university.
 - (f) Evaluate, on a regular basis, the overall educational environment of the program, and each of its components.
 - (g) Assess, on a regular basis, the teachers participating in the program.
- v) There must be an environment of inquiry and scholarship, including an active research component, in the organization sponsoring the certification or diploma program.

ACCREDITATION STANDARD 2: RESOURCES

There must be sufficient resources including teaching faculty, the number and variety of practical assignments, physical and technical resources, as well as the supporting facilities and services necessary to provide the opportunity for all trainees in the certification or diploma program to achieve the educational objectives and receive full training as defined by the certification requirements.

Interpretation

- i) There must be a sufficient number of qualified staff to teach, supervise and assess the trainees.
- ii) There must be a sufficient number and variety of appropriate practical assignments to meet the educational needs of the trainees.
- iii) Practical assignments and other resources used for teaching and learning must be organized to achieve their educational objectives.
 - (a) Learning environments must include experiences that facilitate the acquisition of the advanced competencies required to achieve certification or be granted a diploma.
- iv) The physical and technical resources available to the program must be adequate to meet the needs of the program as outlined in the Training Requirements.

Authorization of Specialties

1. Supporting facilities and services must be available to allow each trainee opportunity to meet the certificate/diploma requirements.

ACCREDITATION STANDARD 3: EDUCATIONAL PROGRAM

There must be a defined educational program that includes practical training, academic and scholarly content relevant to kinesiology and specific to the area of specialty practice. The program must be designed to ensure that each trainee is able to achieve all the competencies necessary to practise at an advanced level, safely and competently without endangering the public.

Interpretation

- i) The goals and objectives of the overall certification or diploma program must be written using the Essential Competencies of Kinesiologists framework.
- ii) There must be specific educational objectives for each educational experience based on the relevant Essential Competencies of Kinesiologists.
 - (a) The educational objectives must be designed to permit attainment of competence and be reflected in the planning and organization of the educational experience.
 - (b) At the beginning of each educational experience, individual learning strategies to meet the objectives must be jointly developed by the trainee and the supervising faculty.
- iii) There must be an academic program that provides educational opportunity to demonstrate application of the Kinesiologist Essential Competencies relevant to the area of focused competence. This must be sufficient to permit each trainee to acquire the appropriate expertise and skills to function as a kinesiologist practising at an advanced level in the area of focused competence.
- iv) The certification/diploma program must be organized such that trainees are both appropriately supervised and given appropriate responsibility according to their level of training, ability/competence, and experience.
- v) Teaching and learning must take place in environments which promote trainee safety and freedom from intimidation, harassment and abuse.
- vi) Service demands must not interfere with ability of the trainee to follow the academic program.

ACCREDITATION STANDARD 4: COMPETENCY-BASED ASSESSMENT OF TRAINEE PERFORMANCE

There must be mechanisms in place to ensure the systematic collection and Interpretation of assessment data on each trainee enrolled in the program.

Interpretation

Authorization of Specialties

- i. The in-training assessment system must be based on the goals and objectives of the program and must clearly specify the methods by which trainees will be assessed and the level of performance expected of trainees at each stage in the achievement of these objectives.
 - (a) There must be regular, timely, documented feedback on the progress of the trainee.
 - (b) Feedback sessions to trainees must include face-to-face meetings as an essential part of evaluation.
- ii. Assessment must collect evidence of achievement of competencies as set out in the Competency Training Requirements approved by the College and the Competency Portfolio for the certification or diploma.



Setting the rules of procedure

An overview of options for meeting procedures

September 13, 2019

Why set rules?

- Rules are necessary to help facilitate the smooth functioning of an assembly and provide a firm basis for resolving questions of procedure
- Parliamentary procedure is the body of rules, ethics, and customs governing meetings and operations of clubs, organizations, legislative bodies and other deliberative assemblies

Why set rules?

- Parliamentary procedure is based on the principles of allowing the majority to make decisions effectively and efficiently (majority rule), while ensuring fairness towards the minority and giving each member or delegate the right to voice an opinion
 - Voting determines the will of the assembly
- Organizations may set their own rules
 - They will generally supplement with a standard Rulebook like Robert's Rules

History of Robert's Rules of Order

- British Parliamentary Procedures
 - Birthplace for Robert's Rules of Order
- Came to North America with the British
- 1801: Thomas Jefferson
 - Drafted The Manual of Parliamentary Practice
 - Uniform system of rules
 - Prevent needless haggling over government procedures
 - Evolved to assist government decision making
- 1876: General Henry Robert
 - Wrote a standard form of rules
 - “Based...upon the rules and practices of Congress”



General Henry Robert

Robert's Rules of Order

- Meetings the use Robert's Rules of Order:
 - Run in the same manner no matter where the meeting is held

Purpose of Robert's Rules

- Based on common sense and logic
- The rules protect the rights of:
 - a. the majority to decide
 - b. the minority to be heard
 - c. individual members
 - d. absentees

Robert's Rules terms and definitions

- **Point of Order-** A matter raised during consideration of a motion concerning the rules of Parliamentary Procedure
- **Point of Information-** Allows an opposing team member to offer a brief point during the current speech

Robert's Rules terms and definitions

- **Questions of Privilege-** Questions relating to the rights and privileges of the assembly, or to any of its members, take precedence of all other motions except the three preceding relating to adjournment and recess, to which they yield
- **Objection to the Consideration of a Question-** An objection may be made to the consideration of any original main motion, and to no others, provided it is made before there is any debate or before any subsidiary motion is stated

The 10 basic rules of the standard version

1. The rights of the organization supersede the rights of the individual members

2. All members are equal and their rights are equal

- Those rights are...
 - To attend meeting
 - To make motions and speak
 - In debate...
 - To nominate
 - To vote
 - To hold office

The 10 basic rules of the standard version

3. A quorum must be present to do business

- Quorum= 50% of the members of Council

4. The majority rules

“All questions at any legally convened Council meeting shall be decided by simple majority of the votes cast, unless stipulated otherwise in the bylaws and governing legislation and regulations.”

5. Silence means consent

“Those members that do NOT vote, AGREE to go along with the decision of the majority by their silence.”

The 10 basic rules of the standard version

6. Two-thirds vote rule

“A 2/3rds vote is necessary whenever limiting or taking away the rights of members or changing a previous decision.”

7. One question at a time and one speaker at a time

“Motions must be related to matters under consideration”

“Once a member has been ‘recognized’ this individual has been granted ‘the floor’ and may not be interrupted by another member”

8. Motions must receive full debate

“The meeting chair may not put a motion to vote as long as members wish to debate it”

“The debate can only be cut short by a 2/3rds vote”

The 10 basic rules of the standard version

9. Once a decision made, an identical motion must not be brought forward at the same meeting

- Such a motion shall be ruled out of order by the meeting chair

10. Personal remarks in a debate are ALWAYS out of order

- Debate motions, not motives
- Debate must be directed to principles and not personalities

Motions and voting

- Keep it simple
- Any voting member may make a motion
- Another voting member must “second” the motion
- Discussion may then take place
- Following discussion, the meeting chair must call for a vote
 - Those in favor
 - Those opposed
 - Those abstaining

The practical version

- The purpose of Council meetings is to share the responsibility to make decisions, set policy, solve problems, to plan and to evaluate
- Opportunity to share important information in a manner which supports accountability

Shared decision-making

- Overall goals are to achieve good decisions, to achieve them together, and to do so at a comfortable pace (not too fast, nor too slowly)
- Substantively, a collective decision should be:
 - Proactive (advancing the mission, vision and strategic plan)
 - Balanced, fair and objective (balancing legitimate needs and interests)
 - Informed (taking into account professional expertise and member input)
 - Realistic and affordable
 - Legal and enforceable
 - Smart and creative

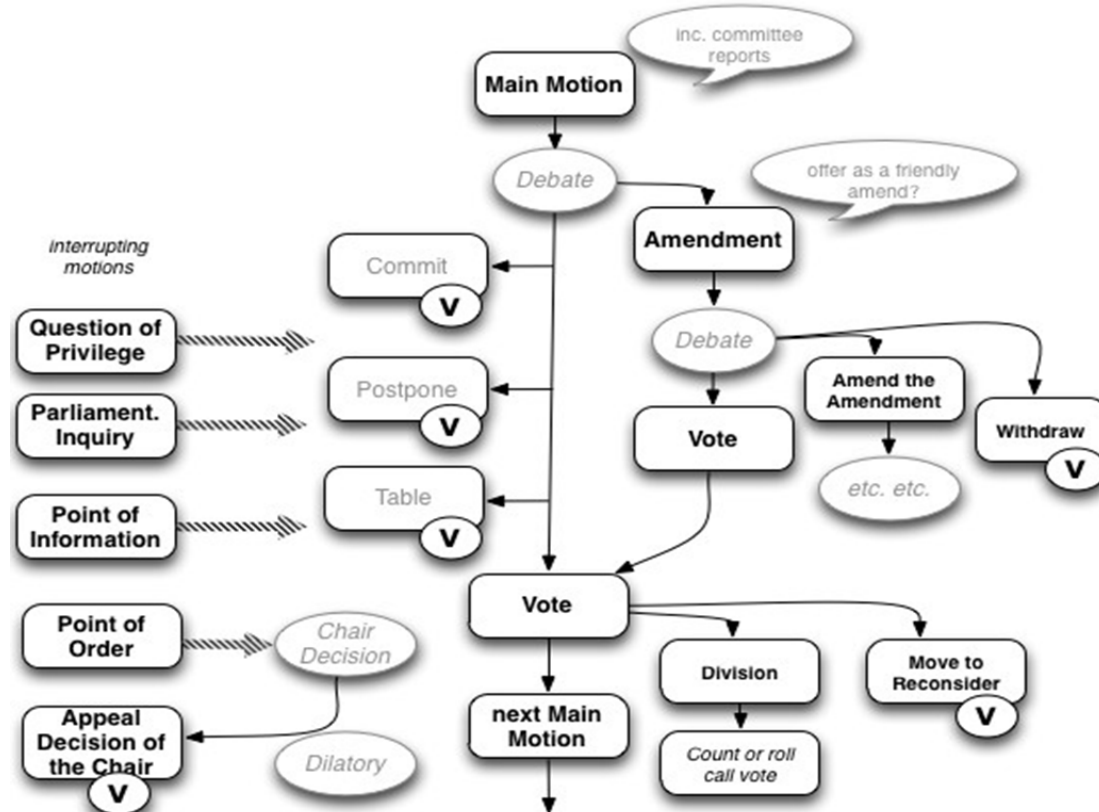
Shared decision-making

- A shared decision-making process should be:
 - **Measured and gradual:** Sufficient time is allocated to scrutinizing proposals
 - **Efficient:** The decision is reached within a reasonable amount of time
 - **Transparent:** The factors considered by Council in making the decision are apparent

Choosing the rule book

- Do parliamentary procedures really work for Council?
 - E.g. *Robert's Rules* says that each member of a group can speak two times, and up to 10 minutes per time on each motion (17members= ~3 hours per item!)
 - E.g. Order of the agenda- New business at the bottom of the agenda.
- Council may set special rules which meet its needs
 - These special rules must be transparent, well-reasoned
 - They are the means by which Council makes Parliamentary Procedures work

Robert's Rules, diagrammed



Modified rules used by many small non-profits

- Many small not-for-profit boards use a simplified version of Robert's Rules of Order when conducting a meeting.
- Almost all not-for-profits will discuss a topic for a while before anyone actually makes a motion on it, as opposed to making the motion and then discussing it

Choosing your own rules

- Council has identified the need to define the rules which will govern discussion of a decision item and the main motion
- A special rule may be adopted by Council or it may adhere to a standard Parliamentary Rulebook

Robert's Rules of Order

1. Item for decision is presented (by staff, Committee Chair/member or Vice-President)
2. Chair calls for a motion
3. Motion is made by Committee Chair, Vice-President or member of Council
4. Motion is seconded by a member of Council. Secunder does not have to support the decision contained in the motion.
5. Chair opens the discussion

Robert's Rules of Order

6. Any friendly amendment may be made (see Procedures elsewhere)
7. Noting that discussion seems to be complete, Chair asks if the Council is ready to vote
8. Chair reads the final motion which now includes any friendly amendments
9. Once Chair reads the motion, no further changes may be made and the motion cannot be withdrawn
10. Vote taken

Procedural choices in Robert's Rules

If during discussion, a different approach seems favoured than what was contained in the main motion (including any friendly amendments which have been made during discussion):

Option 1

- The mover may withdraw the motion
- Another member of Council, or the mover, may put forward a new motion

Option2

- The vote is taken on the main motion. The motion is defeated.
- A new motion is put forward on the item

Procedural Option 2- Special rule of order

1. Item for decision is presented (by staff, Committee Chair/member or Vice-President)
2. Chair calls for discussion of item, clarification, and questions
3. Noting that discussion seems to be complete, Chair asks if the Council is ready to vote
4. Chair calls for a motion
5. Motion is made by Committee Chair, Vice-President or member of Council

Procedural Option 2- Special rule of order

6. Motion is seconded by a member of Council. Secunder does not have to support the decision contained in the motion
7. Chair asks if there are any amendments to the main motion
8. Any friendly amendment may be made (see Procedures elsewhere)
9. Chair reads the revised motion
10. Vote is taken

Helpful concepts when using Robert's Rules

- **Point of information**- If a motion is on the table one can ask for clarification on what is at stake and what a “yes” or a “no” vote means by simply saying “Point of Information” and then asking the question.
- **Call for the question**- If a debate is going on and on and on, one can “call for the question.” This forces the Council to decide whether to continue debating. If two-thirds of the Council votes that they are ready to vote (on the motion at hand), the voting takes place immediately.

Helpful concepts when using Robert's Rules

- **Friendly amendments**- This allows someone in favor of the motion to suggest something that would improve the original motion, or make it more palatable to someone who is not currently in support. This is a workable shorthand for amending a motion. If there have been any amendments (friendly or otherwise) to a motion, the board president should always reaffirm the final text of the motion being voted upon before calling for the vote.



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.



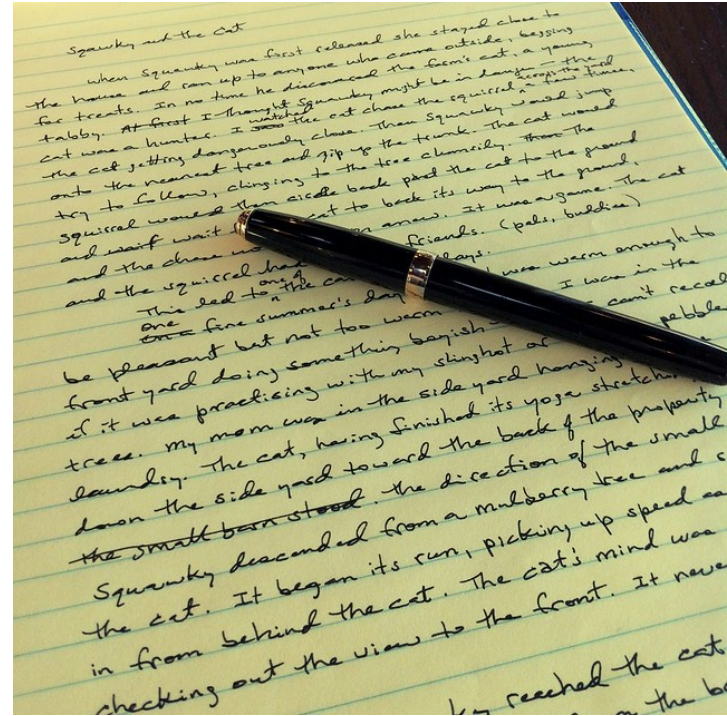
Council Meeting Minutes

An overview of the College's proposed policy

September 13, 2019

Keeping minutes

- Minutes are the written record of the meeting
- Minutes are the permanent and legal record of the meeting
- They should be written as concisely as possible
- Secretary's duty



What should be in the minutes?

- Date and time of meeting
- List of attendance
- Brief description of discussions
- Record of all motions that includes:
 - Name of the motion
 - Who made the motion
 - Who seconded motion
 - Results of the vote
- Time of adjournment

Ensuring accuracy

- Within **5 days of Council meeting**: Draft minutes will be circulated by email
- Within **10 days of first circulation**: Comments and corrections returned to College with copy to all
- Within **30 days of the meeting**: Proposed final draft minutes circulated to Council members
- Within **5 days of final circulation** : Any final comments or corrections returned to the College
- Draft minutes, as corrected, will be presented at the next regular meeting of Council for final review and approval

Approval of minutes

- At each meeting, Council reviews minutes from the previous meeting
- Allow for corrections
- Reminder to Council members of previous decisions and discussions

Posting minutes

Posting of Council Minutes on the College Website

- The RHPA requires that all Council materials be posted on the public website (with specific exceptions).
- Section 7 Posting of meeting information:

(1.1) The College shall post on its website information regarding upcoming meetings of the Council, including the dates of those meetings, matters to be discussed at those meetings, and information and documentation that will be provided to members of the Council for the purpose of those meetings. 2017, c. 11, Sched. 5, s. 8.

The Minutes Book

- The College maintains a book of all Council minutes
 - The retained record is of approved minutes only
- Approved minutes are substituted for draft minutes in electronic folders
- Accountability- Director, Finance and Operations and Executive Assistant
- The Minutes Book is available to any member of the public, the auditors selected by Council, the Minister and Council

College of Kinesiologists Policies and Procedures Manual	
DEPARTMENT: Council	
POLICY: RULES Concerning Treatment of Minutes of Council	
DATE OF APPROVAL: Sept 2019	POLICY REVISION DATES:

Policy Statement

The College shall maintain consistent practices concerning the preparation, correction, approval and public posting of Minutes of Council meetings

A) Contents of the Minutes (Robert's Rules of Order S48)

As the official record of what happens in each meeting, the Minutes are a crucial resource in the decision-making process. The Minutes of a meeting should be clear and easy to understand. The format of Minutes which has been adopted by the College adheres to the structure and format described in Robert's Rules of Order, for the most part. Where the College has varied its practice from the described formula, in the interests of transparency and accountability, it is marked with an asterisk*.

Every set of Council meeting Minutes should include the same details, to give the reader a general understanding of the purpose of the meeting and what transpired at the meeting.

At the beginning the Minutes shall record:

- The kind of meeting, whether regular, special, annual, adjourned regular or otherwise.
- The date, time and location of the meeting.
- The name of the organization that is meeting
- Confirmation that the organization's presiding officer and secretary are present in the meeting. If they're not, the Minutes will state the names of the individuals substituting for each of them
- Statement of whether the previous meeting's minutes were distributed for reading and approved as distributed or corrected. If the previous meeting wasn't a regular meeting, add the date of that meeting.
- All those present including Council members, staff, guests and observers.*
- Guest speakers will be named in the Minutes, usually at the beginning of the Minutes along with the topic that they will be presenting.*

The Body of the Minutes

The Minutes will include all the official discussion points in the meeting as follows:

- Each major item raised and discussed in a meeting will be recorded in a separate paragraph in the Minutes.
- Motions bringing a question before the Council with the exception of those that are withdrawn.
 - The name of the person making the Motion. The name of the Secunder is entered as a common practice by the College.
 - The final wording and disposition of all motions as stated by the Chair.
 - The disposition of the motion including any primary and secondary amendments
 - A brief summary or explanation of the matter or question presented or debated.
 - A notation of whether the matter was debated or amended before disposition.
- Whether the Council went into an in-camera session and the purpose of the in-camera session.*
- All points of order and appeals, along with their disposition, plus any reasons that were given by the chair for each ruling.
- The complete substance of oral committee reports.
- All other official discussions held in the room.
- All points of order and appeals whether sustained or lost together with the reasons given by the Chair for his/her ruling.

Information about the Vote

- Most voting will be by a show of hands. The Minutes should record the outcome as Motion Carried or Motion Defeated.*
- When the vote is by roll call, the names of those voting and whether they have voted in favour or against the motion. Those not voting for a position should answer and be recorded as “present”. The total number of votes on each side is to be recorded.
- When voting on a regulation, the vote shall be taken by roll call and recorded as such.*
- When voting on election to Executive Committee the vote shall be by secret ballot and the names of winning candidates recorded but not the vote count.*

End of the Meeting

- The final paragraph of the Minutes will include any closing remarks made by the chair
- The time the meeting is officially adjourned.

Other

- ***Notices of motions.*** Certain motions require advance notice – either to be adopted by a specific vote threshold or to be made at all. You can't amend bylaws, for example, or make a motion to rescind an earlier action – *without notice*. These are the key words here.
- if a member *gives notice* of intent to make these motions at the next meeting, that notice must be recorded in the minutes as proof that it was properly given and in a timely manner

B) Approval of Minutes

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 a copy to all Council members.

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.

C) Posting of Council Minutes on the College Website

The *Regulated Health Professions Act, 1991*, Procedural Code, as amended in 2017 requires that all Council materials be posted on the public website (with specific exceptions).

Section 7 Posting of meeting information

(1.1) The College shall post on its website information regarding upcoming meetings of the Council, including the dates of those meetings, matters to be discussed at those meetings, and information and documentation that will be provided to members of the Council for the purpose of those meetings. 2017, c. 11, Sched. 5, s. 8.

The College will post Draft Minutes which have been reviewed and corrected through the process described in section B) above, as part of the Council package on its website.

Final approved Minutes will be retained by the College and may be accessed at any time by members of Council, registrants or the public.

Final approved Minutes will be maintained in the Minutes Book and reviewed annually as part of the audit process.



Resolution- Rules Concerning Council Minutes

Whereas Council raised a number of questions at its June 2019 meeting concerning the posting of Draft Minutes on the website and requested that the College review practices of other health professions regulators; and

Whereas the findings of the College indicated that all Colleges responding post draft Minutes a part of the Council package, and

Whereas the College has identified mechanisms which will allow for corrections and additions to draft Minutes by Council prior to posting; and

Whereas the College wishes to ensure a consistent approach that allows for timely review of draft Minutes by Council, and offering of corrections; and posting of draft Minutes in compliance with its understanding of the requirements in the **Regulated Health Professions Act, 1991**, and has prepared a policy for consideration of Council which addresses the process of approval and posting of Minutes, and

Whereas the Executive Committee has reviewed and discussed the proposed Policy and recommends it to Council;

Therefore be it resolved that the Council of the College of Kinesiologists of Ontario accept the *Policy- Rules Concerning Treatment of Minutes of Council* as presented (amended).

Moved by:

Seconded by:

Date: September 16, 2019

College of Kinesiologists of Ontario - Revenue Projections & Operating Cost Estimation - 2019/2020 - 2021/2023						
	Approved Revenue Forecast	Actual Revenues Received	Revenue Forecast	Revenue Forecast	Revenue Forecast	Revenue Forecast
	2018/2019	Sept 2018 to Aug 2019	2019/2020	2020/2021	2021/2022	2022/2023
Revenues	(\$)	(\$)	(\$)	(\$)	(\$)	(\$)
Jurisprudence Fee	21,713	25,475	24,125	24,487	24,854	25,227
Application Fee	45,000	53,000	47,500	48,213	48,936	49,670
Examination Fee	170,000	207,550	190,000	192,850	195,743	198,679
Registration Fees	1,652,150	728,214	2,589,499	1,690,546	1,715,904	1,741,643
Interest At Bank	8,000	30,033	25,000	25,000	25,000	25,000
Total Revenue Projections	1,896,863	1,044,272	2,876,124	1,981,096	2,010,437	2,040,219
Operating Expenses	Approved Budget 2018/2019	Revised Expenditure Forecast Sept 2018 to Aug 2019 \$	Expenditure Forecast 2019/2020 \$	Expenditure Forecast 2020/2021 \$	Expenditure Forecast 2021/2022 \$	Expenditure Forecast 2022/2023 \$
Council and Committees*	86,800	101,854	87,800	87,800	87,800	87,800
Professional Services	85,132	75,589	56,132	56,132	56,132	56,132
Communications/Media**	109,500	43,536	104,000	91,500	75,500	75,500
Rent and Facilities Costs	236,342	222,368	223,450	225,664	227,900	230,160
Office and General	123,760	104,196	114,450	114,654	114,862	115,074
Staff Salaries/Benefits & Stat Remittances	945,772	978,460	1,083,728	1,137,914	1,194,810	1,254,551
Registration Costs***	161,170	215,485	166,500	147,119	157,763	148,405
Quality Assurance Costs**	66,080	40,340	56,340	48,740	49,140	41,556
Professional Conduct	7,500	27,331	30,000	21,500	21,500	21,500
TOTAL OPERATING COSTS	1,822,056	1,809,159	1,922,400	1,931,023	1,985,407	2,030,678
SURPLUS (DEFICIT)	74,807	(764,887)	953,724	50,073	25,030	9,541
Reserve Fund Contribution	30,000		30,000	20,000	15,000	-

Strategic Goal 1*

The College of Kinesiologists of Ontario delivers public interest focused, competency-based governance to enhance oversight processes that improve patient safety and protection from risk of harm.

Training will be provided to Council & Committee members through attendance at conferences and other forums to encourage and facilitate effective and efficient discharge of governance responsibilities for public protection.

Strategic Goal 2**

CKO promotes safe, competent and ethical patient-centred kinesiology practice and effective, respectful interprofessional collaboration to reduce risk of harm and enhance patient care.

- a. We will be undertaking a major revamp of our website to ensure that it is user friendly and that up to date standards and practices are posted. The website will be patient/public focused to help with risk reduction and avoidance.

- b. Refocused Peer and Practice Assessments to risk reduction
- c. Interprofessional collaboration and patient centered practice will be promoted in areas of item writing for the exams to ensure that Kins have the required competencies for practice.

Strategic Goal 3***

CKO uses an effective performance measurement and reporting system in the interest of improving governance and enhancing accountability for patient safety and care.

We will continue to build performance measurement criteria based on decisions on how patient risk may be reduced and quality of care enhanced. These performance measurements will focus on registration, compliance and quality assurance.

This will provide members with better choices about improving patient care and help inform the public's decision in assessing health choices. Some of these costs will be covered under database support in Registration.

Performance Report: September 1, 2019 – August 31, 2020

Communications

Focus: Communications to the public addresses the value of regulating the health profession;
Communications to the membership advances their understanding of reduction in risk of harm

Impact:

- R.Kins and the public receive information on risk of harm in the context of kinesiology and ways to minimize risk of harm (e-newsletter open rates)
- The public, employers and other regulated health professionals understand the practice of kinesiology and the obligations of registered kinesiologists (brochure pick-ups,)
- Patients/clients are visiting the College's website and viewing content intended to inform them of the value of regulation and governance

Activity Highlights

- Develop articles directed at the profession for the website and e-newsletter that describe harm reduction tactics and methodologies
- Continuously promote articles to ensure greater reach through channels such as social media
- Overhaul website to facilitate searches for practice standards, guidelines and other resources
- Review and revise the employer brochure
- Implement campaign to promote the brochure to employers by contacting major employers
- Leverage membership on the Citizens Advisory Group to disseminate information
- Review and revise current patient/client resources developing a focus on value, accountability and reduction of harm

Key Deliverables for the fiscal year:

1. Re-launch website with clear messaging on the College's role and easy navigation
2. Engage the Citizens Advisory Group for input

Corporate

Focus: Enhanced Performance reporting

Impact:

- Demonstration of public value
- Demonstration of efficiency and effectiveness
- Enhanced accountability
- Increased transparency

Activity Highlights

- Implementation of performance indicators from the Ministry of Health and Long-Term Care
- Implementation of a competency profile for Council and Committee members
- Completion of the 2018/2019 Audit
- Completion of the 2018/2019 Annual Report with increased focus on risk of harm
- Risk Management Plan updated to focus on risk to the public in the practice of kinesiology

Key Deliverables for the fiscal year

1. Implementation of strategic plan
2. Development of dashboard for reporting to Council
3. Implementation of training initiatives for Council

Registration

Focus: policy development and educational equivalency

Impact:

- Reduction in number of follow-up calls from applicants
- Registrants have good understanding of requirements for registration with the College
- Automated processes increase operational efficiencies

Activity Highlights

- Update case reviews to committee members to include risk of harm
- Reports to teaching institutions in Ontario and Quality Assurance department on exam outcomes in competency areas
- Review Kinesiology Core Competency Profile and submit to council for approval.
- Review Examination Blue-Print and update as required
- Review and update Jurisprudence E-Learning Module
- Ensure By-law requirements for public Register are enforced by collection of appropriate data
- Policy development on: Registration after resignation or revocation, Examination accommodations; eligibility requirements for applicants seeking third attempt of the entry-to-practice examination; what happens after third failure
- Develop mentorship application process
- Review membership enquiry log and track trends to address deficiencies, response time, feedback, and gaps in information
- Evaluating and responding to risk of harm relating to areas of practice by Speciality Committee

Key Deliverables for the fiscal year

1. Updated Core Competency profile for entry level practice
2. Examination blue print updated
3. Update of Jurisprudence e-learning module
4. Policy development
5. Performance indicators developed from enquiries
6. Decision of Specialty Committee on risk of harm

Quality Assurance

Focus: Reviewing the PPA tools and Expansion of PPA and training of assessors

Impact:

- Improving the PPA tools to ensure that those selected complete the PPA.
- Ensuring benefits of PPA are clear and well understood
- Information to education sector and professional associations regarding the learning needs of members

Activity Highlights

- Onboarding and training of assessors- focus on risk of harm
- Review of reports from members

- Panel meetings to review PPAs and identify issues
- Revisions to the Self-Assessment tool

Key Deliverables for the fiscal year

1. Achieve 90 % compliance on Self-assessment by members
2. Revamp assessment tools and orientation of assessors
3. Panels to focus on practice issues

Professional Conduct

Impact:

- **Competencies Council members**
- **College performance measurement framework for sound decision making**

Activity Highlights

- Establish an educational program for prospective Council members covering the role and responsibilities of Council.
- Gain Council approval of implementation plan.
- Gain Council approval for a focused approach to governance enhancement
- Establish a Committee Member selection process incorporating the approved competency profile
- Establish a Committee Member evaluation framework
- Enhance the Council self-evaluation framework to include Council member's individual development plan
- Response to member practice question, public enquiries
- Policy assistance to Registration

Key Deliverables for the fiscal year:

1. Development of qualifications for selection of Council members
2. Development of Training mechanisms for Council members
3. Increase transparency and demonstration of competency in selection of council & committee members
4. Implementation of College's performance measurement framework as outlined by Ministry of Health.



Resolution: Approval of Budget & Operational Plan for new fiscal year 2019-2020

Whereas Council and the Planning and Finance Committee met and approved the 2019/2020 Budget presented by the College at the June 2019 Council meeting; and

Whereas the 2019/2020 budget when presented to Council excluded salary revisions which were pending following the results of a compensation survey commissioned by the College with five partner colleges, and

Whereas the College has proposed revisions to the salaries budget to ensure that it is able to compete in the recruitment market for staff qualified to address our requirements; and

Whereas the College has proposed a revised 2019/2020 budget and operational plan for the period including adjustments to the compensation envelope and revisions to forecasted revenues and other expenditures; and

Whereas the Council and Finance and Planning committee have had the opportunity to review the entire revised budget and operational plan, raise questions and to gain a full understanding of the risks faced by the College, the medium term financial outlook for the College and detailed proposed expenditures; and

Whereas, the Registrar is asking for a vote from Council to approve the proposed revised Budget and operational plan as presented.

Therefore, be it resolved that Council approves the budget and operational plan for the new fiscal year 2019-2020, beginning September 1, 2019.

Moved by:

Seconded by:

Date:



Resolution: Appointment of Officers and the Executive Committee members

Whereas the term of office for the president, vice-president and remaining members of the Executive Committee is one year; and

Whereas Council members were invited to submit their intent to stand for the Executive Committee on August 28, 2019 and for president and vice-president on September 16, 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;

Therefore, be it resolved that:

be appointed President;

be appointed Vice-President;

be appointed as a member of the Executive Committee;

be appointed as a member of the Executive Committee; and

be appointed as a member of the Executive Committee.

Moved by

Seconded by

September 16, 2019

Proposed Committee Composition

Red= Committee chair or vice-chair

Committee	Professional members	Public members	Member(s)-at-large
Executive	Full Committee to be elected September 16		N/A
Finance	Stefanie Moser Jennifer Pereira Katie St Denis	Kalen Johnson Chad McCleave	N/A
Registration	Ryan Wight- Vice-Chair Elwin Lau Stefanie Moser Graydon Raymer Katie St Denis	Lori-Anne Beckford- Chair Teresa Bendo Michelle Meghie (Until October 1, 2019) 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	Lori-Anne Beckford Leslee Brown Kalen Johnson 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 Lori-Anne Beckford Teresa Bendo Leslee Brown Sandra Weeks	Alex Burnaru Douglas Freer Susan Garfat Francesca McKenize Leanne Smith Michelle Young
Patient Relations	Derek DeBono Ben Matthie Stefanie Moser Graydon Raymer Ryan Wight	Teresa Bendo Kalen Johnson Mary Pat Moore	Alisha Gleiser Leanna Smith
Examination Appeals	Stefanie Moser Derek DeBono	Chad McCleave Victoria Nicholson	
Discipline	All	Mary Pat Moore All	Denis Beaulac Pamela Paquette Richard Wotherspoon Michelle Young
Fitness to Practise	All	Jennifer Pereira All	



Resolution- Committee slate for 2019/2020

Whereas the bylaws specify that Council shall appoint members to Committees; and

Whereas the Council is also required to appoint members at-large to Committees in compliance with the bylaws; and

Whereas the terms of appointment are generally for one year and such Committee appointment terms of Council members have expired; and

Whereas Council members, including two newly elected and three newly appointed, were canvassed for their interest regarding which committees they wished to serve on for the coming year; and

Whereas the College invited kinesiologists to submit their applications to serve as non-Council committee members; and

Whereas per By-law 13, the Executive Committee reviewed applications for appointment as members-at-large, the preferences of Council members where indicated, and also considered the needs of the Committees and is now recommending a proposed 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 slate developed and recommended by the out-going Executive Committee.

Moved by:

Seconded by:

Date: September 16, 2019



Communications update

Overview of the College's 2019/2020 communications plan

September 16, 2019

Restoring our foundation



The role of communications

- Develop messaging to engage key audiences
 - Who we are and how we work to protect the public
 - Why regulation matters
 - How prospective R.Kins can register
 - The professional obligations of R.Kins

The role of communications

- Develop strategies to engage key audiences
 - The public
 - Government
 - R.Kins
 - Prospective R.Kins
 - Academic institutions
 - Employers
 - Professional associations

The role of communications

- Maintain channels to engage key audiences
 - Website
 - Newsletters and information emails
 - Social media
 - Brochures
 - Event attendance

Priority 1- Regular and timely communications

- Re-introduce e-newsletter
 - Use existing data to inform content development
- Annual tour of universities/colleges
 - Renewed focus on the benefits of being regulated
- Leveraging social media to reach a broader audience

Priority 2- New public website

- Complete overhaul of look, navigation
- Review all content and better communicate how the College's work protects the public
- Refine information for applicants, R.Kins

Priority 3- New communications strategic plan

- Develop a communications strategic plan that aligns with the College's new strategic plan
 - Identify target audiences, how we'll communicate with them, key messages, success metrics
- Plan will guide communications work for 2019-2022

