



COLLEGE OF
PSYCHOLOGISTS AND
BEHAVIOUR ANALYSTS
OF ONTARIO

MEETING OF THE COLLEGE COUNCIL

2025.01

DATE: MARCH 21, 2025

TIME: 9:00AM - 3:00PM

LOCATION: TORONTO, ON

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Toronto, Ontario, Canada M4R 1A3
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COUNCIL MEETING AGENDA

2025.01

MARCH 21, 2025

9:00 AM to 4:00 PM

AGENDA ITEM	TOPIC	ACTION	PAGE #	STRATEGIC DIRECTION *
.00	CALL TO ORDER AND LAND ACKNOWLEDGMENT (I. Nicholson)			
.01	APPROVAL OF AGENDA & MINUTES			
.01A	Review & Approval of Agenda (I. Nicholson)	Decision	2	
.01B	Declarations of Conflicts of Interest (I. Nicholson)	Discussion	--	
.01C	Review & Approval of Minutes - Council Meeting 2024.06 December 13, 2024 (I. Nicholson)	Decision	4	
.01D	Review of Action List (T. DeBono)	Discussion	14	
.01E	Council Meeting 2024.06 Evaluation Review (I. Nicholson)	Discussion	16	
.02	CONSENT AGENDA ITEMS	Information		
.02A	Committee Reports	--	--	--
	(1) Executive Committee Report		18	
	(2) Discipline Committee Report		20	
	(3) Quality Assurance Committee Report		22	
	(4) Client Relations Committee Report		25	
	(5) Fitness to Practice Committee Report		26	
	(6) Finance & Audit Committee Report		27	
	(7) Equity, Diversity, and Inclusion Working Group Report		29	
.02B	Staff Presentations		30	
.03	POLICY ISSUES			
.03A	2024 College Performance Measurement Framework (CPMF) (J. Kitchen)	Decision	31	S3, S4
.03B	Proposed Equity, Diversity, and Inclusion (EDI) Plan (T. DeBono)	Decision	121	S1, S4
.03C	Registration - Approved Programs (T. DeBono)	Decision	127	S3, S4
.03D	Finance Policies for Review: (T. DeBono) <ul style="list-style-type: none">Policy III F-4: Per Diems and Council & Committee CompensationPolicy III F-5: Expense Reimbursement	Decision	131	S2, S3

AGENDA ITEM	TOPIC	ACTION	PAGE #	STRATEGIC DIRECTION *
.04	BUSINESS ISSUES			
.04A	President's Report (I. Nicholson)	Information	140	S1
.04B	Registrar & Executive Director's Report (T. DeBono)	Information	142	S1
.04C	Registration Committee Quarterly Report (L. Mackanyn)	Information	144	S1
.04D	Inquiries, Complaints and Reports Committee Quarterly Report (Z. Yetnikoff)	Information	147	S1
.04E	Proposed Amendments to <i>By-law 18: Fees</i> - Consultation Results (T. DeBono)	Decision	151	S2, S4
.04F	Draft Budget 2025-2026 (T. DeBono)	Decision	161	S4
.04G	Notice: Executive Committee Elections/Council Appointments (T. DeBono)	Information	178	S3
.05	STRATEGIC ISSUES			
.05A	Strategic Direction Implementation: Chart Update (T. DeBono)	Discussion	183	All
.06	OTHER BUSINESS			
.06A	Next Council Meetings: <ul style="list-style-type: none"> June 20, 2025 - Council Meeting (virtual) September 25, 2025 – Training Day (in-person) September 26, 2025 – Council Meeting (in-person) 	Information	--	--
.06B	Registrar's Performance Review: IN CAMERA ¹ (I. Nicholson)	Decision	--	S4
.07	ADJOURNMENT			

Strategic Direction Reflection:

S1 - *Excellence in Care*

S2 - *Membership Engagement*

S3 - *Innovation in Regulation*

S4 - *Continuous Quality Improvement Culture*

¹ Not publicly available- Personnel Matter



COUNCIL MEETING

2024.06

To view the Meeting Materials and Briefing Notes corresponding to these Minutes please click [here](#).

DECEMBER 13, 2024

PRESENT:

Ian Nicholson, Ph.D., C.Psych., President
Peter Bieling, Ph.D., C.Psych., Vice-President
Wanda Towers, Ph.D., C.Psych.
Fred Schmidt, Ph.D., C.Psych.
Jacob Kaiserman, Psy.D., C.Psych.
David Kurzman, Ph.D., C.Psych.
Rachel Wayne, Ph.D., C.Psych.
Glenn Webster, M.Ed., C.Psych. Assoc.
Conrad Leung, M.ADS, R.B.A (Ont.), BCBA
Kay Narula, M.ADS., R.B.A (Ont.), BCBA
Olivia Ng, M.A., R.B.A (Ont.), BCBA
Kendra Thomson, Ph.D., R.B.A (Ont.), BCBA-D
Nadia Mocan, Public Member
Ken Moreau, Public Member
Paul Stopciati, Public Member
Mary Kalantzis, Public Member
Scott Warnock, Public Member

REGRETS:

Esther Vlessing, Public Member
Cenobar Parker, Public Member
Pascale Gonthier, Public Member

STAFF:

Tony Debono, MBA, Ph.D., C.Psych., Registrar & Executive Director
Barry Gang, MBA, Dip.C.S., C.Psych. Assoc., Deputy Registrar & Director, Professional Affairs
Lesia Mackanyn, Director, Registration
Zimra Yetnikoff, Director, Investigations & Hearings
Stephanie Morton, Director, Corporate Services
Odessa Medallon, Assistant to the Registrar, Recorder

2024.06.00 CALL TO ORDER

The President called the meeting to order at 9:00AM. The meeting was held virtually via Zoom and livestreamed on YouTube. The President began the meeting with a land acknowledgement statement in recognition and respect for Indigenous peoples.

2024.06.01 APPROVAL OF THE AGENDA AND MINUTES

.01A APPROVAL OF AGENDA

It was **MOVED** by Scott Warnock

That the Agenda for the Council Meeting be approved as presented.

CARRIED

.01B DECLARATIONS OF CONFLICTS OF INTEREST

The President asked if any members of Council wished to declare a conflict of interest pertaining to the items on the Agenda. It was recognized that items on Policy Items and Item .04G *Proposed Amendments to By-law 18: Fees* poses an unavoidable conflict for all members of the Council who are professional members of the College. With respect to item .03G *EPPP-2 Working Group Recommendations*, the President disclosed his previous involvement with the ASPPB Committee Exam Chairs and appointment to the ASPPB Task Force on the future of the EPPP exam. The Registrar also noted his membership with the ASPPB Finance and Audit Committee.

.01C MINUTES FROM THE COUNCIL MEETING 2024.05 SEPTEMBER 27, 2024

It was **MOVED** by Olivia Ng

That the Minutes of Council Meeting 2024.05 September 27, 2024, be approved.

CARRIED

.01D REVIEW OF ACTION LIST

The Council reviewed the Action List drawn from the Minutes of the previous meeting and noted items that were completed, outstanding or on today's meeting Agenda.

.01E COUNCIL MEETING EVALUATION REVIEW

The Council reviewed the September 27, 2024, Council Meeting Evaluation results.

.01F COUNCIL TRAINING DAY EVALUATION REVIEW

The Council reviewed the September 26, 2024, Council Training Day Evaluation results.

2024.06.02 CONSENT AGENDA

The Consent Agenda was received.

2024.06.03 POLICY ISSUES

.03A MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN ONTARIO AND MANITOBA

The Registrar provided the Council with a Briefing Note and a copy of the proposed amendments to *By-law 18: Fees*, specifically, the Interim Autonomous Practice certificate annual dues and application fees that are to be waived under the expanded Telepsychology MOU with Manitoba. The Winnipeg Health Authority in Manitoba provides hospital care to Northwest Ontarians based on an existing agreement between the two jurisdictions. Following initial healthcare services, many clients and their families could have their needs met virtually instead of commuting several hours to the hospital. The expanded use of the already approved interjurisdictional Telepsychology MOU would permit the provision of services within this limited context with no costs to the psychologists providing this care. Expanding the current Telepsychology MOU would

permit psychologists in good standing with the Psychological Association of Manitoba employed by the provincial health authority (Shared Health) to provide psychological services to residents of a specified region of Northwestern Ontario within the interprofessional care model of the hospital.

Council discussed the need for Manitoba psychologists are part of interprofessional healthcare teams providing care to residents in Northwestern Ontario under a telepsychology MOU. This arrangement addresses inequities, as other team members already deliver virtual care while psychologists require patients to travel to Winnipeg. To ensure accountability and transparency, the psychologists will be registered with Ontario's College, restricted to their specific scope of work, and their limitations will be clearly noted on the College's public register. This avoids broader openings for other groups and ensures these services remain tightly regulated for patient safety.

Manitoba psychologists who are practicing with Ontario clients solely due to this arrangement will have their annual registration and initial application fees waived; as such an amendment to *By-Law 18: Fees*, is required. The proposed *By-law 18* amendments are required to be circulated to the membership for at least 60 days. Feedback received will be provided to Council with a decision to occur at the March 2025 meeting.

It was MOVED by Conrad Leung

That Council approve the expansion of the current Telepsychology Memorandum of Understanding and to send the proposed amendment to By-Law 18: Fees for a 60-day public consultation with the membership.

CARRIED

Professional members in favour: 10

Public members in favour: 4

Professional members opposed: 0

Public members opposed: 0

Abstention: 1

Action Item Office of the Registrar

Circulate the proposed amendment to By-law 18 for a 60-day consultation and present the results at the March 2025 Council Meeting.

.03B AMENDMENT TO COLLEGE BY-LAW 19: APPOINTMENT OF NON-COUNCIL MEMBERS TO COMMITTEES OF THE COLLEGE AND CONDITIONS FOR DISQUALIFICATION – CONSULTATION RESULTS

At the September 27, 2024 meeting, Council passed a motion to circulate to membership the proposed amendments to *By-law 19: Appointment of Non-Council Members to Committees of the College and Conditions for Disqualification*. To reduce real and perceived conflicts of interest that could adversely impact fairness and impartiality, it is recommended that the Council extend the cooling-off period policy¹ set out in the College Performance Measurement Framework (CPMF)

¹ The CPMF provides the following definition of a cooling off period as: Cooling off period refers to the time required before an individual can be elected to Council where an individual holds a position that could create an actual or perceived conflict of interest with respect to his or her role and responsibility at the College.

for Council members and include it as an eligibility requirement when appointing non-Council members to committees.

The request for comments/feedback was circulated on October 1, 2024, following approval from Council to disseminate for a 60-day consultation. A reminder was published in the October 2024 issue of HeadLines and posted on the College's website. Two reminders were also sent via e-mail blast on October 31st and November 25th. The deadline for responses was December 2, 2024. The College received 68 responses. The Council reviewed and discussed the consultation feedback.

It was MOVED by Paul Stopciati

That the proposed amendments to *By-law 19: Appointment of Non-Council Members to Committees of the College and Conditions for Disqualification* be approved as presented.

CARRIED

Professional members in favour: 7

Public members in favour: 5

Professional members opposed: 1

Public members opposed: 0

Abstentions: 2

Action Item Office of the Registrar

Update the College By-laws with amendments to *By-law 19: Appointment of Non-Council Members to Committees of the College and Conditions for Disqualification* reflected.

.03C VULNERABLE SECTOR CHECK (VSC) POLICY – PSYCHOLOGY REGISTRANTS

The Registrar provided the Council with a Briefing Note and proposed amendments to *Policy II – 2(vi): Vulnerable Sector Screening Policy for Behaviour Analysts*, expanding the Criminal Background Check and Vulnerable Sector Screen requirements to include psychology registrants.

The criminal history of a potential psychology applicant could be relevant to the College's decision-making, such as offences against minors, sexual offences, and other violent offences. Psychology applicants do not require a criminal background check or vulnerable sector screen to apply. It was determined that criminal background checks and vulnerable sector screens were required to best protect the Ontario public when the College onboarded Behaviour Analysts to the College. The inconsistency in requirements between the professions was noted at the June 2024 Council meeting, and it was requested that the College conduct benchmarking with other psychology regulators in Canada. The majority of Canadian jurisdictions require a criminal background check.

It was MOVED by Jacob Kaiserman

That the proposed amendments to *By-law 19: Appointment of Non-Council Members to Committees of the College and Conditions for Disqualification* be approved for circulation to the membership as presented.

CARRIED

Action Item Registration Committee

Provide guidelines on how to process VSC with positive check.

.03D PEER ASSISTED REVIEW: CRITERIA FOR EXEMPTION OR DEFERRAL POLICY

The Deputy Registrar provided the Council with a Briefing Note and proposed amendments to *Policy II - 5(ii): Peer Assisted Review: Criteria for Exemption or Deferral* to account for the registration of Behaviour Analysts with the College, such that members who have held a Certificate of Registration Authorizing Autonomous Practice for a total of less than two years would be excluded from the Peer Assisted Review selection process. At the May 2024 meeting of the Quality Assurance Committee, this policy was reviewed and recommended for Council approval that this change should apply to registrants of both professions to ensure that they have established their practices before undergoing a review.

It was MOVED by Rachel Wayne

That the Council approve amendments to *Policy II - 5(ii): Peer Assisted Review: Criteria for Exemption or Deferral* to exclude registrants who have held a Certificate of Registration Authorizing Autonomous Practice for a total of less than two years.

CARRIED

.03E FINANCE AND AUDIT COMMITTEE TERMS OF REFERENCE/ROLE

The Registrar provided Council with a Briefing Note and proposed amendments to *Policy – II – 8(i): Finance and Audit Committee Terms of Reference/Role* to include addition of one (1) College member in the Committee's composition. With the recent proclamation of the *Psychology and Applied Behaviour Analysis Act, 2021*, the College now regulates both psychology and applied behaviour analysis. To better reflect this new College composition and to ensure more balanced representation, an additional College member to the committee is proposed, with a focus on recruiting a Behaviour Analyst. An additional member of the Finance and Audit Committee is also desirable to distribute the corresponding workload more equitably.

It was MOVED by Paul Stopciati

That it be recommended to Council that *Policy – II – 8(i): Finance and Audit Committee Terms of Reference/Role* be amended to include addition of one (1) College member in the Committee's composition.

CARRIED

.03F REGISTRATION COMMITTEE RECOMMENDATIONS

The Director for Registration discussed the College's Registration Guidelines (which are approved by Council) for both psychology and applied behaviour analysis professions specify a limit on how many times (lifetime) a candidate may attempt a registration examination (EPPP, JEE, OEPPABA, Oral Examination). Once a candidate has reached the maximum number of attempts permitted, they are refused registration. This approach is seen as overly punitive and especially affects candidates who are not from accredited programs or who are internationally educated. The OFC has assessed the College to be in the "moderate to high risk" range regarding the fairness of their registration practices.

Employing a "Right Touch Regulation" approach to registration that reduces high-stakes barriers will increase fairness while not impacting the quality of new registrants entering the profession.

A lifetime limit to taking exams results in some applicants experiencing a permanent barrier to registration. This change is also in alignment with the feedback provided by the Office of the Fairness Commissioner (OFC).

ORIGINAL MOTION FOR APPROVAL:

That Council approve the Registration Committee to revise the Registration Guidelines to change the number of attempts permitted to pass registration examinations (psychology and applied behaviour analysis).

The original motion was presented but was not moved or seconded and was not considered for a vote. Therefore,

AMENDED MOTION:

It was MOVED by Scott Warnock

That Council approve the Registration Committee to revise the Registration Guidelines to remove the maximum number of attempts permitted to pass registration examinations (psychology and applied behaviour analysis).

CARRIED

Professional members in favour: 10

Public members in favour: 5

Professional members opposed: 1

Public members opposed: 0

Abstentions: 1

.03G RECOMMENDATIONS FROM EPPP-2 WORKING GROUP

The EPPP-2 Working Group met on four occasions beginning in February 2024 with its last meeting on October 23, 2024. The purpose of the working group was to make recommendation(s) to the College's Council regarding the possible adoption of the EPPP-2 ahead of the January 2026 deadline requiring all jurisdictions to adopt both the EPPP 1 and 2. On October 22, 2024, the Association of State and Provincial Psychology Boards announced that they will be pausing their intention to require adoption of both examinations. Since the ASPPB's January 2026 deadline to adopt the EPPP-2 appears to no longer be in force, the group suggested that Council and College staff uses this time to re-think the College's required examinations with a view towards modernization and a "right touch" regulation approach.

It was MOVED by Fred Schmidt

That the Council receive the EPPP Working Group's recommendations and that a summary of identified issues be provided to the Registration Committee for their review, particularly the utility of the Oral Examination in its current form.

CARRIED

.03H CHANGES TO JEE ADMINISTRATION

The Jurisprudence and Ethics Examination (JEE) Committee, chaired by Dr. Jennifer McTaggart has convened a business meeting on November 12, 2024 to propose and discuss changes to administration of the College's JEE exam. The JEE is a high-stakes exam that candidates must pass within 4 attempts to successfully register with the College in psychology. It has been a

requirement of registration since 2000. Benchmarking across the Canada shows that Ontario is one of the only psychology regulators to have a high-stakes exam related to ethics and jurisprudence. For example, Alberta's exam is pass/fail, Northwest Territories are open book with 50% to pass, and in PEI, it is an oral exam. Of note, ethics is a domain already addressed in the Examination for Professional Practice in Psychology which is a requirement of all psychology candidates.

The OFC has rated the College to be in the "moderate to high risk" range regarding the fairness of its registration practices for psychology. Making this change to the JEE would be consistent with the reduction of barriers to respond to the OFC's feedback.

It was MOVED by Scott Warnock

To approve the recommended changes in the administration of the Jurisprudence and Ethics Examination (JEE), transitioning it to a low-stakes format with the plan for it to become an on-demand, learning module and no-fail examination.

CARRIED

2024.06.04 BUSINESS ISSUES

.04A PRESIDENT'S REPORT

The Council reviewed the President's Report for the second quarter.

.04B REGISTRAR & EXECUTIVE DIRECTOR'S REPORT

The Council reviewed the Registrar's Report for the second quarter.

.04C REGISTRATION COMMITTEE QUARTERLY REPORT

The Council reviewed the report for the second quarter.

.04D INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE QUARTERLY REPORT

The Council reviewed the report for the second quarter.

.04E DIRECTOR OF CLINICAL TRAINING AND INTERNSHIP DIRECTORS MEETING – ORAL REPORT

The Vice-President provided an update on the Director of Clinical Training and Internship Directors Meeting that was held on November 14, 2024. Fifty-one representatives were in attendance, including College staff and Drs. Maggie Toplak and Yael Goldberg who serve as Co-Chairs of the meeting. Topics included:

- Updates from the College and Registration Committee
- New CPA Accreditation Standards for Indigenous interculturalism in academic programs and residencies

.04F PROPOSED AMENDMENTS TO BY-LAW 18: FEES FOR CONSULTATION

The Registrar provided Council with a Briefing Note and copy of proposed amendments to *By-law 18: Fees* for discussion. The Registrar presented a proposal to Council such that annual membership fees for dual certificate holders, regardless of the class of each certificate, should not exceed \$1,200.

Currently, a College registrant who holds a Certificate of Registration as a Behaviour Analyst Authorizing Autonomous Practice will pay \$795 per annum. If the same registrant also holds a Certificate Authorizing Supervised Practice as a Psychologist, they will need to pay a separate annual fee of \$600 for their Supervised Practice certificate. In sum, this registrant will be required to pay \$1,395 in annual membership fees, which exceeds the total membership fee paid by dually registered Autonomous Practice members. Other combinations of certificates of registration can also result in fees in excess of \$1,200, annually.

The request for comments/feedback was circulated on October 1, 2024, following approval from Council to disseminate for a 60-day consultation. A reminder was published in the October 2024 issue of HeadLines and posted on the College's website. Two reminders were also sent via e-mail blast on October 31st and November 25th. The deadline for responses was December 2, 2024. The College received 122 responses. The Council reviewed and discussed the consultation feedback.

It was MOVED by Conrad Leung

That the Council approve the proposed amendment to the College By-law 18 – Fees, as presented.

CARRIED

It was MOVED by Conrad Leung

That the proposed amendment be retroactive to July 1, 2024, and for any applicants who paid combined membership fees in excess of \$1,200.00 to date, a refund of the difference will be applied.

CARRIED

Action Item Office of the Registrar

Update the College By-laws with amendments to *By-law 18: Fees* reflected.

.04G TRANSFER OF RESERVE FUNDS

Within *Policy III-F-2 Reserve Funds*, the College has established a minimum of \$300,000 to be held in the Investigations and Hearings Reserve Fund. According to the policy, after funds are transferred from the Investigations & Hearings Fund to cover overspends for legal costs, for the conduct of inquiries, investigations, discipline hearings, fitness to practice hearings, appeals and payments under the program for Funding for Therapy and Counseling, may be transferred from the Fee Stabilization Fund to cover the deficit. The entire amount of the Fee Stabilization fund was allocated to the operations expense, and this fund will be closed as per the June 2024 Council meeting decision. The remaining \$191,244 (= \$387,075 - \$54,839 - \$100,247) will be covered by the operating account.

It was MOVED by David Kurzman

That Council approve \$54,839 be transferred from the Investigations and Hearings Reserve Fund and the entire remaining amount of \$140,992 be moved from the Fee Stabilization Fund to pay for a portion of last year's operating deficit. The remaining \$191,244 deficit is to be covered by the College's operating account (total deficit = \$387,075).

CARRIED

.04H INTEGRATED RISK MANAGEMENT REPORT

The Council reviewed the annual Integrated Risk Management Report provided by the Registrar. Currently, there are 28 open risks, which include risks carried over from the previous year. For the most part, these are considered “residual” risks and will remain open to ensure continuous monitoring and mitigation. The Risk Management Register review undertaken in 2024 also resulted in the identification of two new risks: social media risk and regulation of a new profession risk.

2024.06.05 STRATEGIC ISSUES

.05A STRATEGIC DIRECTION IMPLEMENTATION UPDATE

The Registrar provided the Council with the updated *Strategic Direction Implementation Table*. This table is used to chart the work undertaken and accomplished in fulfilling the College’s Strategic Direction. Items added since the Council Meeting of September 27, 2024, were shown in **Bold**.

2024.06.06 OTHER BUSINESS

.06A SET ELECTIONS DATE:

The Council confirmed that the date for the elections in District 1 (North), District 2 (Southwest), District 3 (Central), and Psychological Associate - Non-Voting will be on March 31, 2025.

It was MOVED by Wanda Towers

That Elections to Council in District 1 (North), District 2 (Southwest), District 3 (Central), and Psychological Associate – Non-Voting (PA-NV) be held on March 31, 2025.

CARRIED

.06B NEXT COUNCIL MEETINGS:

The next meeting of Council will be held on:

- March 20, 2025 - Council Training Day (in-person)
- March 21, 2025 – Council Meeting (in-person)

.06C PROPOSED COUNCIL MEETING:

The following dates are proposed for the next Council meeting in 2025:

- Friday, June 20, 2025 (virtual)
- Thursday, September 25, 2025 (Training Day; in-person)
- Friday, September 26, 2025 (in-person)

It was MOVED by Ken Moreau

That June 20, 2025, September 25, 2025 (Council Training Day) and September 26, 2025 be approved as Council meeting dates.

CARRIED

2024.06.07 ADJOURNMENT

There being no further business,

**It was MOVED by Glenn Webster
That the Council Meeting be adjourned.**

CARRIED

The Council Meeting was adjourned at 12:06PM.

Ian Nicholson, Ph.D., C.Psych., President

Peter Bieling, Ph.D., C.Psych., Vice-President

Minutes approved at the Council Meeting on March 21, 2025

ACTION LIST - COUNCIL

2025.01.01D

Item:	Responsibility:	Action:	Status:
2019.03.03C	College	<p>To pursue amendments to O.Reg. 74/15 - Registration under the <i>Psychology Act, 1991</i> to discontinue Master's level registration and at that time, grant the title Psychologist to all existing Psychological Associates.</p> <p>Submit the Master's Level Registration Report to the Ministry of Health.</p>	In Process. Research reported to Council, March 2024
2023.04.03B	Registration Committee	Develop a pilot implementation of evaluating CFTA candidates for Autonomous practice	In Process.
2024.02.03A	Office of the Registrar	Examine strategies to increase membership engagement in College consultations.	In Process
2024.04.03D	Office of the Registrar	Confirm with ACPRO if there are psychology regulatory bodies in Canada requiring a VSC at the College level and with ASSPB the list of requirements of US and Canadian regulators.	Completed. <i>VSC Policy for psychology registrants approved by the Council in December 2024.</i>
2024.05.03A	Office of the Registrar	Circulate the proposed amendment to By-law 19 for a 60-day consultation and present the results at the December 2024 Council Meeting.	Completed. Consultation Results presented to the Council in December 2024.
2024.05.04G	Office of the Registrar	Circulate the proposed amendment to By-law 18 for a 60-day consultation and present the results at the December 2024 Council Meeting.	Completed. Consultation Results presented to the Council in December 2024.
2024.06.03A	Office of the Registrar	Circulate the proposed amendment to By-law 18.4(f) for a 60-day consultation and present the results at the March 2025 Council Meeting.	On Agenda

Item:	Responsibility:	Action:	Status:
2024.06.03B	Office of the Registrar	Update the College By-laws with amendments to <i>By-law 19: Appointment of Non-Council Members to Committees of the College and Conditions for Disqualification</i> reflected.	Completed.
2024.06.03C	Registration Committee	Provide guidelines on how to process VSC with positive check.	In Process
2024.06.04F	Office of the Registrar	Update the College By-laws with amendments to <i>By-law 18: Fees</i> reflected.	Completed.

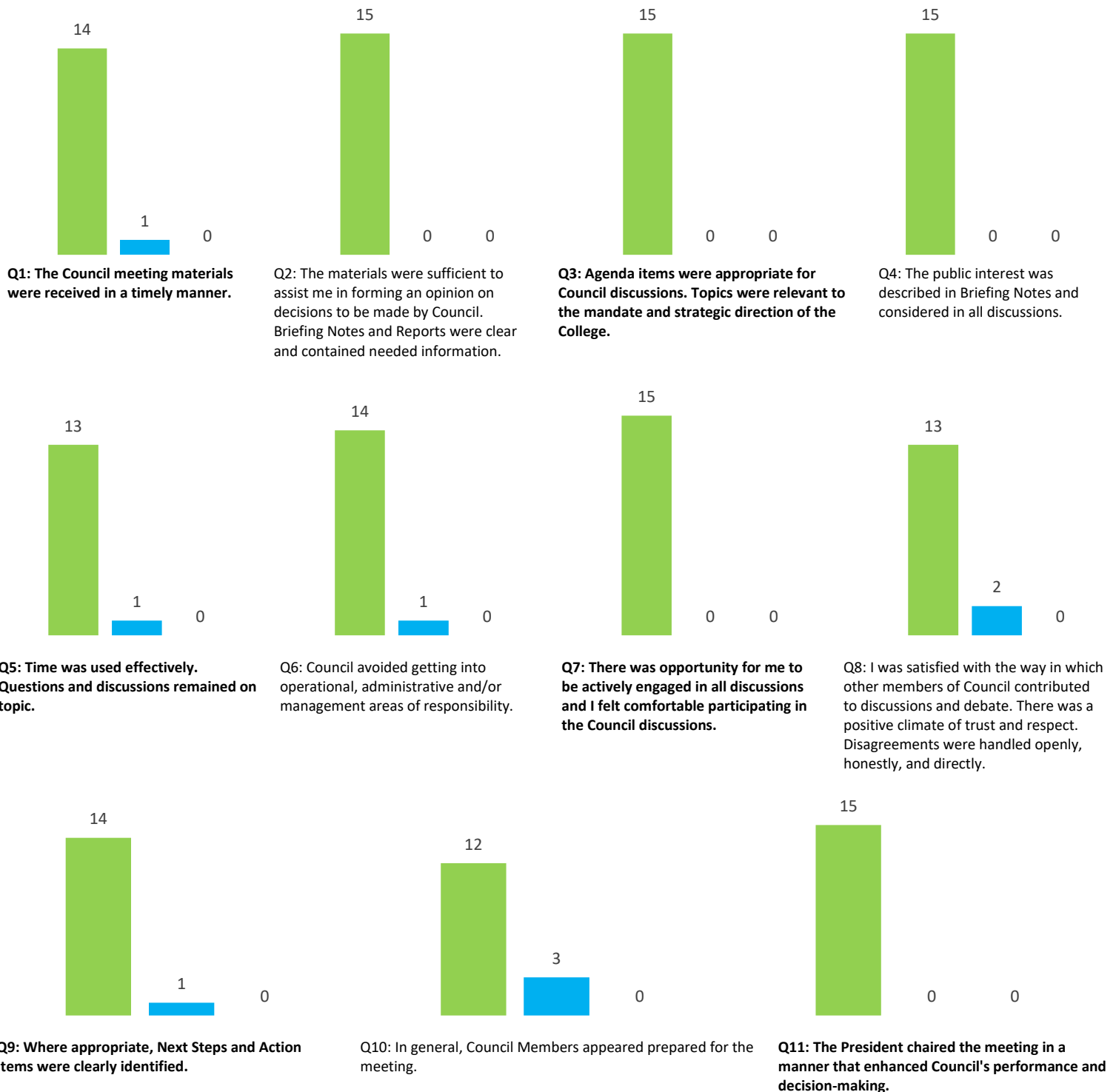
2025.01.01D

COUNCIL MEETING EVALUATION SUMMARY

COUNCIL MEETING DECEMBER 13, 2024

15/18 COUNCIL MEMBERS PRESENT COMPLETED EVALUATION

Very Good/Excellent Good/OK Needs Improvement



ADDITIONAL COMMENTS

Q1	<ul style="list-style-type: none"> • Problem with access • The instructions of how to port to the new online system were very thorough.
Q2	No comments
Q3	<ul style="list-style-type: none"> • Tremendous work done behind the scenes by staff. Thank you. • Appreciate the hard work that staff do behind the scenes.
Q4	No comments
Q5	<ul style="list-style-type: none"> • Would be fine if agendas / meetings were longer - but only if there is sufficient material to be discussed • Chair is doing great job with meeting management
Q6	No comments
Q7	<ul style="list-style-type: none"> • Very respectful environment.
Q8	<ul style="list-style-type: none"> • Very good for zoom • Fulsome conversations with varying perspectives; all were treated with respect and opinions were able to be voiced.
Q9	No comments
Q10	No comments
Q11	No comments
Additional Comments	<ul style="list-style-type: none"> • Great interaction and coordination between chair and registrar. Respectful and efficient

REPORT TO COUNCIL

2025.01.02A(1)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

EXECUTIVE COMMITTEE

COMMITTEE MEMBERS:

Ian Nicholson, Chair	Professional Member of Council
Peter Bieling, Vice-Chair	Professional Member of Council
Olivia Ng	Professional Member of Council
Fred Schmidt	Professional Member of Council
Paul Stopciati	Public Member of Council
Scott Warnock	Public Member of Council
Glenn Webster	Professional Member of Council

STAFF

Tony DeBono, Registrar & Executive Director
 Zimra Yetnikoff, Deputy Registrar and Director, Investigations and Hearings
 Odessa Medallon, Assistant to the Registrar

MEETINGS

The Executive Committee met on:

- February 13, 2025

ITEMS TO COUNCIL FOR DECISION

The Executive Committee discussed the following items which are being brought forward for Council consideration and approval:

- Consultation results on proposed amendments to *By-law 18: Fees* (Interim Autonomous Practice Certificate for Manitoba Registrants via Shared Health/Manitoba Health Authority)
- Amendments to *Policy III F-4: Per Diems and Council & Committee Compensation* and *Policy III F-5: Expense Reimbursement*
- Approved Programs – Psychology Registrants
- The draft 2024 College Performance Measurement Framework Report;
- Proposed budget for 2025-2026; and
- The Registrar's Performance Review

ACTIONS

The Executive Committee took the following actions:

- Reviewed the Variance Report and the Unaudited Financial statements to November 30, 2024. The Committee recommended that these documents be presented to the Council. These are included in the Consent Agenda Reports section of the Council Materials package.
- The Executive Committee appointed Ms. Indira Bains, a recently appointed public member of the College Council, to the Discipline Committee; Inquiries, Complaints, and Reports Committee; and Finance and Audit Committee.

- The Executive Committee approved the creation of a Working Group to undertake the review of applications for Committee appointments and establish a slate to be considered by the 2025-2026 Executive Committee following the first meeting of Council in the new year.

SUBMITTED BY

Ian Nicholson, Ph.D., C. Psych., Chair

REPORT TO COUNCIL

2025.01.02A(2)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

DISCIPLINE COMMITTEE

COMMITTEE MEMBERS

Janice Currie, College Member, Chair
Lyzon Babchishin, College Member
Indira Bains, Public Member (as of Jan 16, 2025)
Peter Bieling, Council Member
Deirdre Boyle, College Member
Alison Eades, College Member
Lynette Eulette, College Member
Robert Gauthier, College Member
David Gold, College Member
Pascale Gonthier, Public Member
Michael Grand, College Member
Anthony Hopley, College Member
Jacob Kaiserman, Council Member
Mary Kalantzis, Public Member
David Kurzman, Council Member
Maggie Mamen, College Member

Michael Minden, College Member
Nadia Mocan, Public Member
Ken Moreau, Public Member
Ian Nicholson, Council Member
Cenobar Parker, Public Member
Fred Schmidt, Council Member
Robert Smith, College Member
Paul Stopciati, Public Member
Maggie Toplak, Council Member
Wanda Towers, Council Member
Esther Vlessing, Public Member
Scott Warnock, Public Member
Rachel Wayne, Council Member
Glenn Webster, Council Member
Pamela Wilansky, College Member

STAFF SUPPORT:

Zimra Yetnikoff, Deputy Registrar & Director, Investigations and Hearings

REFERRALS TO DISCIPLINE

There were three referrals to the Discipline Committee in the 3rd quarter:

1. **Dr. Philip Classen:** https://members.cpbao.ca/public_register/show/20213

A referral was made to the Discipline Committee on December 2, 2024. This matter is currently at the Pre-Hearing Conference stage.

2. **Mr. Christopher Heap (2 matters):** https://members.cpbao.ca/public_register/show/2873

Referrals were made to the Discipline Committee on December 19, 2024 regarding two matters. These matters are currently at the Pre-Hearing Conference stage.

PRE-HEARINGS

The following Pre-Hearing Conference was held in the 3rd quarter:

1. **Dr. Irina Trofimova:** https://members.cpbao.ca/public_register/show/20198

The Pre-Hearing Conference for two related matters took place on December 12, 2024. The Hearing is scheduled for June 26, 2025.

HEARINGS

There were two Hearings in the 3rd quarter:

1. **Dr. Frank Kane:** https://members.cpbao.ca/public_register/show/2892

The Hearing was held on January 6, 2025. The Decision has not yet been received.

2. **Dr. Laura Brown:** https://members.cpbao.ca/public_register/show/20739

The Hearing was held on February 25, 2025. The Decision has not yet been received.

ONGOING MATTERS

1. **Mr. Eldon Bossin:** https://members.cpbao.ca/public_register/show/21448

The Hearing for this matter has not yet been scheduled.

2. **Mr. Christopher Heap:** https://members.cpbao.ca/public_register/show/2873

This matter is currently at the Pre-Hearing Conference stage.

3. **Dr. Vyta Velyvis:** https://members.cpbao.ca/public_register/show/49563

This matter is currently at the Pre-Hearing Conference stage.

4. **Dr. Romeo Vitelli (3 matters):** https://members.cpbao.ca/public_register/show/1461

These matters are currently at the Pre-Hearing Conference stage.

5. **Ms. Tatiana Zdyb (2 matters):** https://members.cpbao.ca/public_register/show/21649

A Pre-Hearing Conference regarding one matter took place on July 30, 2024, with a further Pre-Hearing Conference to be scheduled.

SUBMITTED BY

Janice Currie, Chair

REPORT TO COUNCIL

2025.01.02A(3)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

QUALITY ASSURANCE COMMITTEE

COMMITTEE MEMBERS

David Howard, M.A., C.Psych., Chair	College Member
David Kurzman, Ph.D., C.Psych., Vice Chair	College Member, Council
Bruno Losier, Ph.D., C.Psych.	College Member
Conrad Leung, M.ADS., R.B.A (Ont.), BCBA	Council Member
Glenn Webster, M.Ed., C.Psych.Assoc.	College Member, Council
Kay Narula, M.ADS., R.B.A (Ont.), BCBA	College Member, Council
Lital Rotman, M.ADS., R.B.A (Ont.), BCBA	College Member
Melanie Morrow, M.A., C.Psych.Assoc.	College Member
Nadia Mocan	Public Member, Council
Pascale Gonthier	Public Member, Council
Sabrina Hassan, Ph.D., C.Psych.	College Member
Sandra O'Doherty, Ph.D., R.B.A (Ont.), BCBA-D	College Member
Sonia Levy, Ph.D., R.B.A (Ont.), BCBA	College Member
Tara Ouellette, M.A., R.B.A (Ont.), BCBA	College Member
Wanda Towers, Ph.D., C.Psych.	College Member

STAFF

Jennifer Kitchen, Director, Professional Affairs
David Fierro, Manager, Quality Assurance
Abigail Windle, Administrative Assistant, Quality Assurance

COMMITTEE ACTIVITY

During the third quarter, the Quality Assurance (QA) Committee met on February 10, 2025. The Committee continued its efforts for program modernization, including the development of a QA Portfolio and an updated process for supervised practice registrants to fulfill QA requirements.

REGISTRANT MATTERS

A Panel of the Committee also met on February 5, 2025, to review registrant-specific matters related to participation in, and compliance with, the requirements of the Quality Assurance program.

SELF-ASSESSMENT GUIDE (SAG)

In-process					
SAG Declaration Inquiry (2024)					1
Total Matters Pending at End of Q3					1
Concluded					
SAG Declaration Inquiry (2023) - Take No Further Action			1		1
SAG Review, Failure to Declare Completion (2023) - Resigned	1				1

SAG Declaration Inquiry (2024) - Deceased	1		1		2
SAG Declaration Inquiry (2024) - Refer to ICRC			1		1
SAG Audit, Failure to Declare Completion (2024) - Resigned		1			1
SAG Audit, Failure to Declare Completion (2024) - Take No Further Action		10			10
SAG Audit, Failure to Declare Completion (2024) - Refer for Peer Assisted Review		1			1
SAG Audit, Failure to Declare Completion (2024) - Refer to ICRC		1			2
Total Matters Concluded					19

The Panel reviewed matters regarding compliance with the *Self-Assessment Guide and Continuing Professional Development Plan* (SAG) requirements.

- One (1) *SAG Declaration Inquiry (2023)* was reviewed following an extension; the Panel was satisfied with the registrant's declaration and took no further action.
- In one (1) *SAG Declaration Inquiry (2024)*, the College was advised that the registrant was deceased.
- In one (1) *SAG Declaration Inquiry (2024)*, the registrant failed to provide updated information requested by the Committee regarding their practice status and ability to participate in self-assessment during the 2024 period. The Panel instructed staff to refer the matter to the Inquiries, Complaints and Reports Committee (ICRC) for investigation if the registrant did not respond by the deadline provided.

CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

In-process					
CPD Declaration Inquiry (2024)					1
CPD Audit, Random Selection (2024)					5
Total Matters Pending at End of Q3					6
Concluded	Q1	Q2	Q3	Q4	YTD
CPD Audit, Failure to Declare Completion (2023) - Retired	1				1
CPD Declaration Inquiry (2023) - Take No Further Action			1		1
CPD Declaration Inquiry (2024) - Deceased			1		1
CPD Declaration Inquiry (2024) - Refer to ICRC			1		1
CPD Audit, Failure to Declare Completion (2024) - Take No Further Action		7			7
CPD Audit, Failure to Declare Completion (2024) - Resigned		1			1
CPD Audit, Failure to Declare Completion (2024) - Refer to ICRC		1			1
CPD Audit, Failure to Declare Completion (2024) - Other		1			1
CPD Audit, Random Selection (2023) - Take No Further Action	1				1
CPD Audit, Random Selection (2024) - Take No Further Action		22	12		34
CPD Audit, Random Selection (2024) - Retired			1		1
Total Matters Concluded					50

The Panel reviewed registrant matters to determine compliance with the Continuing Professional Development (CPD) Program.

- One (1) *CPD Declaration Inquiry (2023)* was reviewed following an extension provided for the 2021-2023 cycle; the Panel was satisfied with the registrant's declaration and took no further action.
- In one (1) *CPD Declaration Inquiry (2024)*, the College was advised that the registrant was deceased.

- In one (1) *CPD Declaration Inquiry (2024)*, the registrant failed to respond to the Committee with the requested information regarding their participation in the CPD program during the 2022-2024 cycle; the Panel instructed staff to refer the matter to the ICRC for investigation if the registrant did not respond by the deadline provided.

The Panel also reviewed 13 *CPD Audit, Random Selection (2024)* files to verify fulfillment of the program requirements during the 2022-2024 cycle. In 12 cases, no further action was taken; however, the Panel provided feedback:

- Review the SMART Framework when setting *Professional Development Plan* objectives within the *Self-Assessment Guide*, to ensure goals are specific and facilitate progress monitoring.
- Store all Quality Assurance records in one's personal files to ensure accessibility for the required five-year retention period.
- Include sufficient descriptions describing the content of completed CPD activities, as well as the specific information that was of value to the development of one's professional knowledge, skill and judgment.

In one (1) *CPD Audit, Random Selection (2024)*, the registrant failed to provide a satisfactory submission to demonstrate their fulfillment of the program requirements. The Panel ordered the registrant to meet with an Assessor appointed under section 81 of the *Health Professions Procedural Code* to identify any difficulties related to their knowledge, skill and judgment which may be affecting their ability to fulfill the CPD program requirements. The registrant informed the College of their decision to retire.

In addition to the reported figures, the Panel also considered a submission from a registrant previously referred to the ICRC in the second quarter for concerns of potential non-compliance. The Panel's previous disposition remained; however, the Committee provided the registrant with feedback to support their fulfillment of the CPD requirements in the future.

PEER ASSISTED REVIEWS (PAR)

In-process					
PAR, SAG Referral (2024)					1
PARs, Carried Over from Previous Years					11
Total Matters Pending at End of Q3					12
Concluded					
	Q1	Q2	Q3	Q4	YTD
PARs, Carried Over from Previous Years - Take No Further Action	3	2	2		7
Total Matters Concluded					7

The Panel reviewed two (2) PAR reports submitted by College Assessors.

- The Panel took no further action in both reviews. In response to one (1) of the review reports, the Panel agreed with the Assessor's recommendations and suggested that the registrant revise their supervision contracts and/or consultation agreements to ensure the roles of all professionals involved in such services are clearly outlined.

SUBMITTED BY

David Howard, M.A., C.Psych., Chair

REPORT TO COUNCIL

2025.01.02A(4)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

CLIENT RELATIONS COMMITTEE

COMMITTEE MEMBERS

Claude Balthazard, College Member
Pascale Gonthier, Public Member
Christine Heger, College Member
Jacob Kaiserman, Council Member, Vice Chair
Diana Mandeleew, College Member
Ken Moreau, Public Member
Kimberley Moore, College Member
Olivia Ng, Council Member
Esther Vlessing, Public Member, Chair
Rachel Wayne, Council Member

STAFF

Jennifer Kitchen, Director, Professional Affairs
Julie Hahn, Practice Support and Client Relations Coordinator

COMMITTEE ACTIVITIES

The Committee did not meet during this quarter as there were no items to discuss.

There are currently 9 individuals whose therapy or counselling is being funded by the College.

SUBMITTED BY

Esther Vlessing, Chair

REPORT TO COUNCIL

2025.01.02A(5)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

FITNESS TO PRACTICE COMMITTEE

COMMITTEE MEMBERS:

Ian Nicholson, Chair, Council Member
Sandra Jackson, College Member
Alan Macdonald, College Member
Kendra Thomson, Council Member
Esther Vlessing, Public Member
Aliana Weavers, College Member
Glenn Webster, Council Member

The Fitness to Practice Committee held no meetings during the third quarter.

SUBMITTED BY

Ian Nicholson, Ph.D., C.Psych., Chair

REPORT TO COUNCIL

2025.01.02A(6)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

FINANCE AND AUDIT COMMITTEE

COMMITTEE MEMBERS:

Ian Nicholson, Chair	Professional Member of Council
Duncan Day	Professional College Member
David Kurzman	Professional Member of Council
Cenobar Parker	Public Member of Council
Paul Stopciati	Public Member of Council

STAFF

Tony DeBono, Registrar & Executive Director
 Zimra Yetnikoff, Deputy Registrar & Director, Investigations & Hearings
 Stephanie Morton, Director, Corporate Services
 Odessa Medallon, Assistant to the Registrar

MEETINGS

The Finance and Audit Committee met on:

- February 7, 2025

COMMITTEE ACTIVITIES

The Finance and Audit Committee (FAC) met by videoconference on February 7, 2025. The Committee reviewed the Unaudited Financial Statements and Variance Report to November 30, 2024, the end of the second quarter.

In considering the Statement of Revenue & Expenses, the FAC reviewed the Variance Report which explained items that deviated from the budget by the level of materiality set by Council; items which exceeded the expected budget by \$5,000 or were underspent by \$10,000. The Committee was satisfied with the information presented and voted to receive the reports. Based on the documents reviewed at this meeting, it is the view of the Committee that the College continues to operate on a sound financial basis.

The memorandum confirming the remittances of Taxes to Canada Revenue Agency and the Ontario Employer Health Tax for the period September 1, 2024, to November 30, 2024, was received.

The Committee reviewed *Policy III F-4: Per Diems and Council & Committee Compensation* and *Policy III F-5: Expense Reimbursement* and recommended amendments for Executive Committee and Council approval. A Briefing Note regarding these proposed amendments is provided to Council separately for consideration.

The Committee also reviewed the initial consultation results on proposed amendments to *By-law 18: Fees* and agreed to recommend it to the Executive Committee and Council. An amendment to *By-law 18.4(f)* seeks to waive application fees and annual dues for those psychology professionals working on inter-professional teams of Shared Health/Manitoba Health Authority providing publicly-funded telepsychology services to a specific region of Northwestern Ontario (Interim Autonomous Practice certificate under the Interjurisdictional Telepsychology MOU).

2025-2026 Budget

The FAC reviewed and recommended the proposed budget for 2025-2026 to the Executive Committee and Council, which is provided separately for Council consideration.

ATTACHMENTS

1. Statement of Revenue and Expenses to November 30, 2024
2. Balance Sheet to November 30, 2024 (unaudited)

SUBMITTED BY

Ian Nicholson, Ph.D., C. Psych., Chair

REPORT TO COUNCIL

2025.01.02A(7)

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

EQUITY, DIVERSITY, AND INCLUSION WORKING GROUP

COMMITTEE MEMBERS:

Donna Ferguson, Chair, College Member
Ian Nicholson, Vice-Chair, Council President
Kofi Belfon, College Member
Michael Grand, College Member
Tae Hart, College Member
Chris Mushquash, College Member

STAFF SUPPORT:

Tony DeBono, Registrar & Executive Director
Odessa Medallon, Assistant to the Registrar

MEETINGS

The Equity, Diversity, and Inclusion (EDI) Working Group met on:

- January 17, 2025

FOR INFORMATION

The Working Group worked on the following:

- Reviewed the draft EDI plan based on recently approved equity impact assessment results and grounded in the College's Strategic Direction. A Briefing Note on the proposed EDI Plan is provided to Council separately for consideration.
- Discussed ongoing goals for the EDI Working Group including training for College staff and Council and Committee members.

SUBMITTED BY

Donna Ferguson, Psy.D., C.Psych., Chair



REPORT TO COUNCIL

2025.01.02B

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

STAFF PRESENTATIONS

Tony DeBono, Registrar & Executive Director

- January 24, 2025: TMU Clinical Rounds: *The Business of Psychology: Professional & Ethical Duties*
- January 28, 2025: Guest Speaker at the Professional Engineers of Ontario's Senior Leadership Team Meeting – Applying Chesterton's Fence and Dialectics to Change Management

Zimra Yetnikoff, Deputy Registrar & Director, Investigations and Hearings

- January 29, 2025: Association of Family and Conciliation Courts (AFCC-O): *Navigating Ethical Decision-Making in Intimate Partner Violence (IPV) Contexts*

BRIEFING NOTE

2025.01.03A

MARCH 2025 COUNCIL MEETING

COLLEGE PERFORMANCE MEASUREMENT FRAMEWORK 2024

STRATEGIC DIRECTION REFLECTION

Innovation in Regulation; Continuous Quality Improvement Culture

MOTION FOR CONSIDERATION

That the Council approve the 2024 College Performance Measurement Framework Report, for submission to the Ministry of Health and posting on the College website.

Moved by TBD

PUBLIC INTEREST RATIONALE

To promote the continuous improvement of regulatory performance across all health Colleges and to promote transparency and accountability through the completion of the College Performance Measurement Framework to be publicly posted by each College.

BACKGROUND

In November 2020, the Ministry of Health introduced the College Performance Measurement Framework (CPMF). All health regulatory Colleges are required to prepare performance data in a standard format as detailed in the Framework, for review by the Ministry and posting on the College website by March 31, 2025. This is the College's fifth CPMF covering the period January 1, 2024 – December 31, 2024.

According to the Ministry the CPMF was:

Developed. . . in close collaboration with Ontario's health regulatory Colleges, subject matter experts and the public with the aim of answering the question "how well are Colleges executing their mandate which is to act in the public interest?". This information will:

1. *strengthen accountability and oversight of Ontario's health regulatory Colleges; and*
2. *help Colleges improve their performance.*

The CPMF consists of seven Domains: Governance, Resources, System Partner, Information Management, Regulatory Policies, Suitability to Practice, and Measurement, Reporting and Improvement. Each Domain has Standards for which the College is asked to provide evidence of compliance. Each Standard asks if, "The College fulfills this requirement: Yes, Partially or No." If the answer is "Partially" or "No", the College is asked to indicate if there are plans to improve performance over the next year. In addition, the CPMF asks for a variety of statistics related to Quality Assurance and Complaints and Discipline.

The College Senior Management Team and their staff have collected the necessary information and completed the sections of the CPMF relevant to their areas of responsibility.

Attached is the full CPMF document. The first six pages provide an introduction to the CPMF Model and completion instructions. This is followed by the College-prepared performance assessment.

Over the past year, the College has completed many of the items that were previously marked “No” or “Partially” completed. At this time, there are only four Standards for which the response is either “not complete” or “partially” complete. For ease of reference, the following table shows these outstanding items.

Page #	Standard Reference #	Response	Explanation/Next Steps
12	1.2(b): The framework includes a third- party assessment of Council effectiveness at a minimum every three years.	No	<p>The College has undergone significant governance changes in 2024 with the amendment of the Psychology and Applied Behaviour Analysis Act (2021), which was proclaimed into law on July 1, 2024. The addition of the profession of applied behaviour analysis (ABA) and its respective Council seats represented a substantive change to the Council’s composition. September 2024 was the inaugural Council meeting following the onboarding of ABA.</p> <p>Earlier in the calendar year, the March 2024 Council training day was led by Harry Cayton and Deanna Williams on Right Touch Regulation (RTR), with a particular focus on registration given the Office of the Fairness Commissioner’s (OFC’s) assessment of the College. The OFC and the Ministry of Health provided talks at the September 2024 Council Training Day which stimulated reflection across a number of College Council areas of accountability.</p> <p>The March 2025 Council Training Day will feature a talk on health regulation modernization, with a particular focus on governance composition and best practices for effectiveness. Important changes, including a third-party assessment will be considered by the Council and financial resources will be allocated accordingly.</p> <p>Although there is not a specific plan to undertake a third-party assessment of Council effectiveness at this time, RTR training is expected to provide insights to the Council regarding potential regulatory modernization initiatives for future, such as an external Council evaluation of effectiveness.</p>

20	<p>2.1</p> <p>c. The College has a conflict-of-interest questionnaire that all Council members must complete annually.</p> <p><u>Additionally:</u></p> <ul style="list-style-type: none"> i. the completed questionnaires are included as an appendix to each Council meeting package; ii. questionnaires include definitions of conflict of interest; iii. questionnaires include questions based on areas of risk for conflict of interest identified by Council that are specific to the profession and/or College; and iv. at the beginning of each Council meeting, members must declare any updates to their responses and any conflict of interest <u>specific to the meeting agenda</u>. 	No	<p>The College does not require members to complete a questionnaire at each meeting. Each Council member signs a formal agreement or declaration at the beginning of their term of office as per Policy I-6 Conflict of Interest and Reasonable Perception of Bias which states:</p> <p><i>"The Registrar will require members of Council, Committees, staff, and all individuals providing services on behalf of the College to sign a Declaration, Undertaking and Agreement, before beginning their terms, stating that they have read, understand, and commit to comply with this policy and these procedures as well as any specific procedures that may apply to a particular activity or committee."</i></p> <p>Members of Council verbally declare potential conflicts at the beginning of every meeting based on the agenda items. Any declarations of conflicts are recorded in the Minutes. This was demonstrated in Item .01B Declarations of Conflicts of Interest in the Minutes of the September 2024 Council meeting (pg.3).</p> <p>As noted, members of Council verbally declare potential conflicts at the beginning of every meeting based on the agenda items. Any declarations of conflicts are recorded in the Minutes. This has proven to be adequate and there are no plans to modify the process currently.</p>
26	<p>3.3</p> <p>The DEI plan is reflected in the Council's strategic planning activities and appropriately resourced within the organization to support relevant operational initiatives (e.g., DEI training for staff).</p>	Partially	<p>The Health Equity Impact Assessment was approved at the June 2024 Council Meeting. The EDI Working Group is in the process of developing the EDI plan based on the results of the equity impact assessment and in alignment with the College's strategic plan. The draft EDI plan is scheduled for review at the February 2025 Executive Committee meeting and with the potential to be approved at the March 2025 Council meetings.</p> <p>The Working Group reports to Council each quarter on its activities and the December 2024 report can be viewed on page 31 here and reported to the membership and public via the College's publication, Headlines, on a quarterly basis.</p>
65	<p>14.1</p> <p>Council uses Key Performance Indicators (KPIs) in tracking and reviewing the College's performance and regularly</p>	Partially	<p>At their June 16, 2023 meeting (pgs. 140-144), the Council approved the use of KPIs in order to demonstrate objective data of College performance.</p> <p>Given the significant changes at the College with the</p>

	reviews internal and external risks that could impact the College's performance.		onboarding of ABA, initial KPIs consisted of several deliverables and linked to the Registrar's performance evaluation by the Executive Committee. KPIs will continue to be developed and quantified over the next year for each program area.
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ATTACHMENTS

- Draft Completed 2024 *College Performance Measurement Framework Reporting Tool*

NEXT STEPS

Upon approval by Council, the CPMF will be submitted to the Ministry of Health and posted on College's website on or before March 31, 2025.

CONTACT FOR QUESTIONS

Jennifer Kitchen, MPH
Director of Professional Affairs

College Performance Measurement Framework (CPMF) Reporting Tool

Reporting Year: January 2024 – December 2024

November 2024

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Glossary85

Introduction

The College Performance Measurement Framework (CPMF)

The CPMF has been developed by the Ontario Ministry of Health (the ministry) in close collaboration with Ontario’s health regulatory Colleges (Colleges), subject matter experts and the public with the aim of answering the question “how well are Colleges executing their mandate to act in the public interest?” This information:

- 1. Strengthens accountability and oversight of Ontario’s health regulatory Colleges; and
- 2. Supports Colleges in improving their performance.

Each College reports on seven Domains with the support of six components, as illustrated in Table 1.

Table 1: CPMF Measurement Domains and Components

1	Measurement domains	→ Critical attributes of an excellent health regulator in Ontario that should be measured for the purpose of the CPMF.
2	Standards	→ Performance-based activities that a College is expected to achieve and against which a College will be measured.
3	Measures	→ More specific requirements to demonstrate and enable the assessment of how a College achieves a Standard.
4	Evidence	→ Decisions, activities, processes, or the quantifiable results that are being used to demonstrate and assess a College’s achievement of a standard.
5	Context measures	→ Statistical data Colleges report that will provide helpful context about a College’s performance related to a standard.
6	Planned improvement actions	→ Initiatives a College commits to implement over the next reporting period to improve its performance on one or more standards, where appropriate.

CPMF Model

The seven measurement domains shown in Figure 1 are critical attributes that contribute to a College effectively serving and protecting the public interest. They relate to statutory obligations and organizational processes that enable a College to carry out its functions well. The seven domains are interdependent and together lead to outcomes that a College is expected to achieve as an excellent regulator. The fourteen Standards within the seven measurement domains are listed in Figure 2.

Figure 1: CPMF Model for Measuring Regulatory Excellence

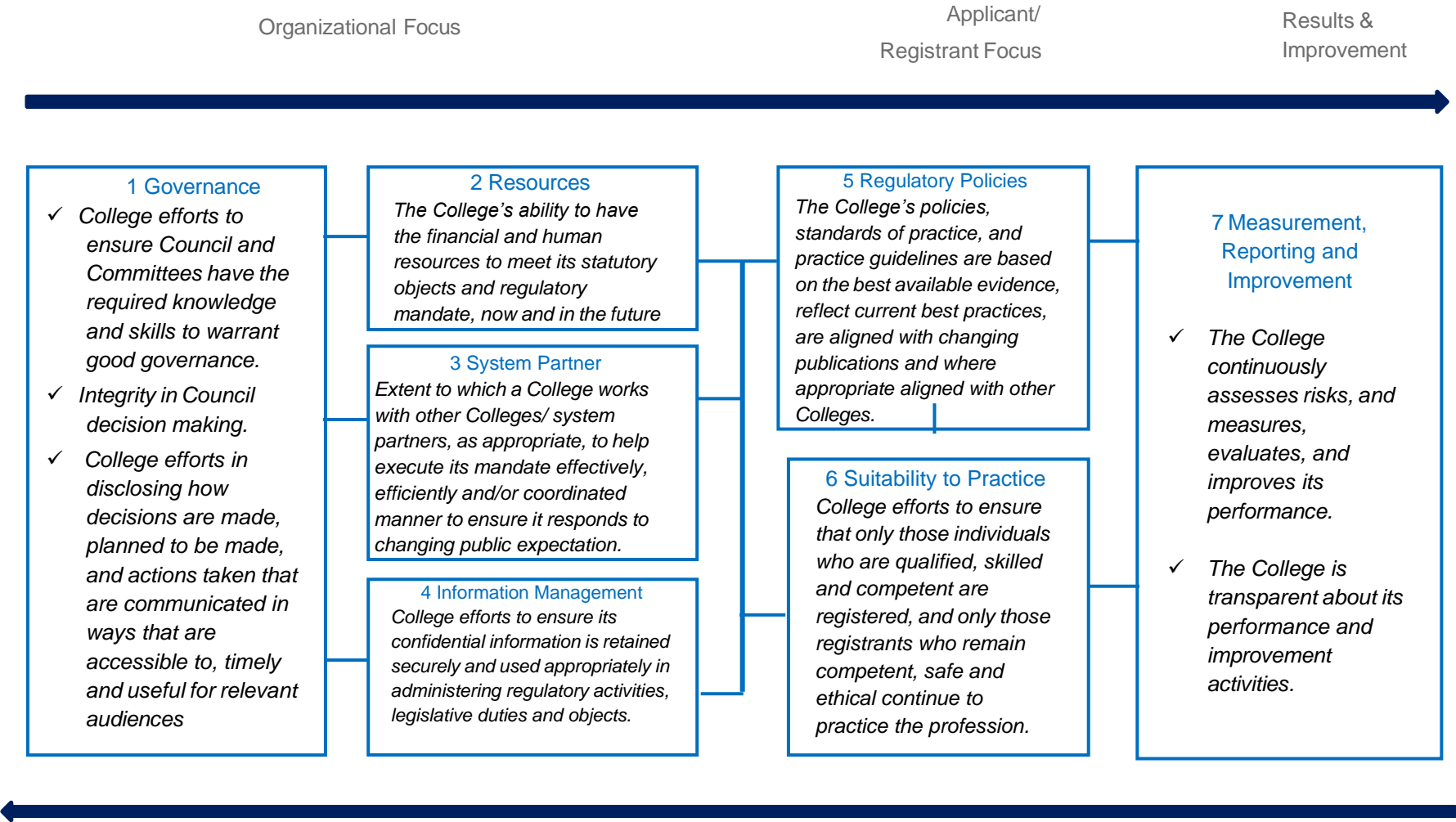


Figure 2: CPMF Domains and Standards

Domains	Standards
Governance	1. Council and statutory committee members have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College.
	2. Council decisions are made in the public interest.
	3. The College acts to foster public trust through transparency about decisions made and actions taken.
Resources	4. The College is a responsible steward of its (financial and human) resources.
System Partner	5. The College actively engages with other health regulatory Colleges and system partners to align oversight of the practice of the profession and support execution of its mandate.
	6. The College maintains cooperative and collaborative relationships responds in a timely and effective manner to changing public expectations.
Information Management	7. Information collected by the College is protected from unauthorized disclosure.
Regulatory Policies	8. Policies, standards of practice, and practice guidelines are based in the best available evidence, reflect current best practices, are aligned with changing public expectations, and where appropriate aligned with other Colleges.
Suitability to Practice	9. The College has processes and procedures in place to assess the competency, safety, and ethics of the people it registers.
	10. The College ensures the continued competence of all active registrants through its Quality Assurance processes. This includes an assessment of their competency, professionalism, ethical practice, and quality of care.
	11. The complaints process is accessible and supportive.
	12. All complaints, reports, and investigations are prioritized based on public risk, and conducted in a timely manner with necessary actions to protect the public.
	13. The College complaints process is coordinated and integrated.
Measurement, Reporting and Improvement	14. The College monitors, reports on, and improves its performance.

The CPMF Reporting Tool

The College Performance Measurement Framework (CPMF) remains a cornerstone of regulatory transparency and excellence in Ontario. Through this fifth iteration, the CPMF will continue to provide the public, the Ministry of Health, and other stakeholders with critical insights into the activities and processes of health regulatory Colleges during 2024.

The information gathered through the CPMF Reporting Tool is intended to spotlight areas for enhancement, prompting closer attention and potential follow-up actions. As in the past, the Ministry will not assess whether Colleges meet or do not meet the Standards in the CPMF. The outcomes of the reporting will continue to facilitate meaningful dialogue on performance improvement among College staff and Council members and between Colleges and their broader communities, including the public, the Ministry, members, and other stakeholders.

Completing the CPMF Reporting Tool

While the CPMF Reporting Tool seeks to clarify the information requested, it is not intended to direct College activities and processes or restrict the way a College fulfills its fiduciary duties. Where a term or concept is not explicitly defined in the CPMF Reporting Tool, the ministry relies on individual Colleges, as subject matter experts, to determine how a term should be appropriately interpreted given the uniqueness of the profession each College oversees.

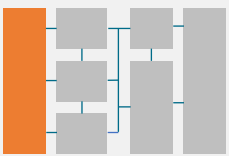
In the spirit of continuous improvement, if the College plans to improve its actions or processes related to a respective Measure or Evidence, it is encouraged to highlight these planned activities and progress made on commitments from previous years.

There are eight pieces of Evidence highlighted within Part 1 of the Reporting Tool as ‘Benchmarked Evidence’. These pieces of evidence were identified as attributes of an excellent regulator, and Colleges should meet, or work towards meeting these benchmarks. If a College does not meet, or partially meets expectations on a benchmark, it is asked to provide an improvement plan that includes the steps it will follow, timelines and any barriers to implementing that benchmark.

Where a College fully met Evidence in 2023 and 2024, the College may opt to respond with ‘Met in 2023 and Continues to Meet in 2024’. In the instances where this is appropriate, this option appears in the dropdown menu. If that option is not there, Colleges are asked to fully respond to the Evidence or Standard. Colleges are also asked to provide additional detail (e.g., page numbers), when linking to or referencing College documents.

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Part 1: Measurement Domains

		Measure: 1.1 Where possible, Council and Statutory Committee members demonstrate that they have the knowledge, skills, and commitment prior to becoming a member of Council or a Statutory Committee.	
DOMAIN 1: GOVERNANCE	STANDARD 1	Required Evidence	College Response
		a. Professional members are eligible to stand for election to Council only after: i. meeting pre-defined competency and suitability criteria; and <u>Benchmarked Evidence</u>	The College fulfills this requirement:
			Yes
			<ul style="list-style-type: none">The competency and suitability criteria are public: Yes <i>If yes, please insert a link and indicate the page number where they can be found; if not, please list criteria.</i> <p>The minimum suitability/competency criteria are found in the publicly available College By-laws, specifically By-Law 20: Election to Council, Qualifications, Terms of Office and Conditions for Disqualification. These are described in section 20.7 for professional members and section 20.8 for Academic members (beginning on page 35).</p> <p>Competency suitability information is further elaborated upon on the Council Elections webpage. This includes statements regarding the need for Council to represent the diversity of the College membership and the public served. The College intends to continue refining competency and suitability criteria, and ongoing consideration of this issue will be discussed by the Council in 2025.</p> <p><i>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</i></p>

		ii. attending an orientation training about the College’s mandate and expectations pertaining to the member’s role and responsibilities.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">Duration of orientation training.Please briefly describe the format of orientation training (e.g. in-person, online, with facilitator, testing knowledge at the end).Please insert a link and indicate the page number if training topics are public OR list orientation training topics. <p>Prior to submitting a nomination form and nomination statement for the election, the member must complete an on-line Orientation Program which discusses the role and governance of the College and the duties, obligations and expectations of Council and Committee members. Upon completing the orientation, members will be required to submit a declaration attesting to the completion of the module.</p> <p>College of Psychologists and Behaviour Analysts of Ontario: <u>Council Training Module</u></p>	
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	Choose an item.
			Additional comments for clarification (optional):	
		b. Statutory Committee candidates have: i. Met pre-defined competency and suitability criteria; and <div><div></div><div>Benchmarked Evidence</div><div></div></div>	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">The competency and suitability criteria are public: YesIf yes, please insert a link and indicate the page number where they can be found; if not, please list criteria. <p>A Call for Interest in Statutory College Committees is published as a <u>News Post</u> on the College website. The College distributes the Call for Interest to all members asking those interested in serving on College Committees to make this known. Members are asked to provide a statement of their interest in a particular Committee, their background and experience, and what they believe they will bring, or can offer, to the work of the Committee. The Call for Interest sets out eligibility criteria. A small working group reviews the expressions of interest and, considering the needs of each Committee, draws up a slate of candidates for the Executive Committee. In doing so, consideration is given to areas of practice, populations served, length of time in profession, and any other area of diversity noted by those interested.</p> <p>Amendments to <u>By-law 5: Selection of Committee Chairs and Committee Members</u>, approved by Council on March 11,2022, requires members to complete an online Orientation Program before they submit their interest in serving on a College Committee. The Orientation discusses the role and governance of the College and the duties, obligations and expectations of Council and Committee members.</p>	

			<i>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</i>	
		ii. attended an orientation training about the mandate of the Committee and expectations pertaining to a member’s role and responsibilities.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Duration of each Statutory Committee orientation training.• Please briefly describe the format of each orientation training (e.g., in-person, online, with facilitator, testing knowledge at the end).• Please insert a link and indicate the page number if training topics are public OR list orientation training topics for Statutory Committee. <p>Duration of orientation training: Interested candidates for College Committee appointments are required to complete the College’s interactive Committee Orientation Module approximately 45 minutes – 1 hour in duration. The module provides the essential information about the College, our mandate and the roles and responsibilities of each Committee member.</p> <p>In addition, the Quality Assurance, Client Relations and Registration Committees each met independently for a ½ day orientation in 2024. These were done virtually and facilitated by the Committee Chair and respective Director.</p> <p>The Inquiries, Complaints and Reports Committee (ICRC) Handbook and Resource Manual is distributed to all new members at the earliest opportunity. The ICRC orientation training is a one-hour session, followed by observation of an ICRC meeting, and discussion of the process observed. New ICRC members will also have a dedicated debriefing session a week or two after the observation. Discipline Committee orientation is a ½ day session conducted by the College's independent legal counsel. In addition, Committee members attend the full-day Health Professions Regulators of Ontario (HPRO) Discipline Training sessions.</p> <p>The topics for orientation to the Quality Assurance and the Client Relations Committee were the same as those from 2023, which included: Statutes, Regulations, Policies and Procedures relevant to Committee work; Code of Conduct, Responsibilities related to Conflict of Interest, Confidentiality; Objects and Duties of the College; Mission, Vision, and Strategies; Right Touch Regulation; Current Projects and Priorities of the Committee. The Client Relations Committee training also addresses eligibility for the Funding for Therapy and Counselling Program for those alleging sexual abuse while receiving services from, or under the supervision of, a member.</p>	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.

			<i>Additional comments for clarification (optional):</i>
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		c. Prior to attending their first meeting, public appointments to Council undertake an orientation training course provided by the College about the College’s mandate and expectations pertaining to the appointee’s role and responsibilities.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">Duration of orientation training.Please briefly describe the format of orientation training (e.g., in-person, online, with facilitator, testing knowledge at the end).Please insert a link and indicate the page number if training topics are public OR list orientation training topics. <p>The duration of the orientation is 2 - 3 hours. The training has been conducted virtually (in real-time) by the College President and the Registrar & Executive Director since the COVID-19 pandemic. Historically, the orientation was held in-person.</p> <p>Topics include:</p> <p>Objects and Duty of the College; Governing Legislation (Regulated Health Professions Act, 1991 (RHPA); RHPA Themes; Prevention of Sexual Abuse; Controlled Acts; The Psychology and Applied Behaviour Analysis Act, 2021); Vision, Mission, Strategy; College Structure and Council Member Role; Expectation of Council Members; Code of Conduct; Committees and College Activities; Current Priorities.</p>	
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	Choose an item.
			Additional comments for clarification (optional):	

Measure: 1.2 Council regularly assesses its effectiveness and addresses identified opportunities for improvement through ongoing education.			
Required Evidence		College Response	
a. Council has developed and implemented a framework to regularly evaluate the effectiveness of: i. Council meetings; and ii. Council.		The College fulfills this requirement:	Yes
		<ul style="list-style-type: none">• Please provide the year when Framework was developed OR last updated.• Please insert a link to Framework OR link to Council meeting materials and indicate the page number where the Framework is found and was approved.• Evaluation and assessment results are discussed at public Council meeting: Yes• <i>If yes, please insert a link to the last Council meeting and indicate the page number where the most recent evaluation results have been presented and discussed.</i> <p>Evaluations are sent to Council members immediately after each Council meeting and results distributed in the subsequent Council Materials package for discussion. The September 27, 2024 meeting evaluation results can be viewed in the December 13, 2024 Council Materials (Pages 13-14). The Council meeting evaluations encompass not only the effectiveness of Council meetings but also of the Council itself.</p>	
		If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	
		Choose an item.	
		Additional comments for clarification (optional)	

		b. The framework includes a third-party assessment of Council effectiveness at a minimum every three years.	The College fulfills this requirement:	No
			<ul style="list-style-type: none">Has a third party been engaged by the College for evaluation of Council effectiveness? No<i>If yes, how often do they occur?</i>Please indicate the year of last third-party evaluation.	
			<p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p>The College has undergone significant governance changes in 2024 with the amendment of the Psychology and Applied Behaviour Analysis Act (2021), which was proclaimed into law on July 1, 2024. The addition of the profession of applied behaviour analysis (ABA) and its respective Council seats represented a substantive change to the Council’s composition. September 2024 was the inaugural Council meeting following the onboarding of ABA.</p> <p>Earlier in the calendar year, the March 2024 Council training day was led by Harry Cayton and Deanna Williams on Right Touch Regulation, with a particular focus on registration given the OFC’s assessment of the College. The OFC and the Ministry of Health provided talks at the September 2024 Council Training Day which stimulated reflection across a number of College Council areas of accountability.</p> <p>The March 2025 Council Training Day will feature a talk on health regulation modernization, with a particular focus on governance composition and best practices for effectiveness. Important changes, including a third-party assessment will be considered by the Council and financial resources will be allocated accordingly.</p>	Yes

			<i>Additional comments for clarification (optional)</i>
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		c. Ongoing training provided to Council and Committee members has been informed by: i. the outcome of relevant evaluation(s); ii. the needs identified by Council and Committee members; and/or	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please insert a link to documents outlining how outcome evaluations have informed Council and Committee training and indicate the page numbers.• Please insert a link to Council meeting materials and indicate the page number where this information is found OR• Please briefly describe how this has been done for the training provided <u>over the last calendar year</u>. <p>Committee training plans are informed by Council and Committee members, Chairs and staff identification of training needs.</p> <p>Council and Executive Committee: The College Executive Committee is responsible for ongoing Council member training. Training Day topics are scheduled based on the suggestions and identified needs of Council members or ideas prompted by timely matters and Council meeting evaluations.</p> <p>The March 2024 Council Training Day focused on Right Touch Regulation by Harry Cayton and Deanna Williams. A follow-up session for further consolidation of topics was held by Mr. Cayton and Ms. Williams in April 2024.</p> <p>The September 2024 Council meeting focused on three strategic issues: the assessment from the Office of the Fairness Commissioner, the Ministry of Health’s workforce strategy, and a potential scope of practice expansion,</p> <ul style="list-style-type: none">• Irwin Glasberg, Fairness Commissioner, Office of the Fairness Commissioner• Allison Henry and Jason Maurier, Ministry of Health, Health Workforce Regulatory Oversight Branch• Dr. David Shearer, PhD, MSCP, Board Certified Medical Psychologist, Chair, WA State Psychological Assn RxP Workgroup <p>The March 2025 Council Training Day is expected to cover: The Program Approval process at the College of Nurses of Ontario, certification of Behaviour Analysts, and Council modernization/effectiveness.</p>	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.

			<i>Additional comments for clarification (optional):</i>
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		<p>iii. evolving public expectations including risk management and Diversity, Equity, and Inclusion.</p> <p><u>Further clarification:</u></p> <p>Colleges are encouraged to define public expectations based on input from the public, their members, and stakeholders.</p> <p>Risk management is essential to effective oversight since internal and external risks may impact the ability of Council to fulfill its mandate.</p>	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please insert a link to documents outlining how evolving public expectations have informed Council and Committee training and indicate the page numbers.• Please insert a link to Council meeting materials and indicate the page number where this information is found OR• Please briefly describe how this has been done for the training provided <u>over the last calendar year</u>. <p>Committee training needs are informed by Council, Committee Chairs and members, as well as senior Program Staff.</p> <p>Evolving public and member input is gathered from the College’s Practice Advice Service. Inquiries are coded and tracked to identify trends that may inform future Council/Committee training topics. In 2024 the Practice Advisory Service responded to a total of 1937 Queries. 1482 (77%) of those were from registrants and 455 (23%) were from the public.</p> <p>CPBAO continued its participation with the Citizen’s Advisory Group to keep apprised of public perspectives regarding topics such as professional rules, standards of practice, policies, strategic priorities, and communications directed at the public. As well, Quality Assurance and Practice Advisory staff attended two semi-annual meetings of the HPRO Working Groups to enable identification of common themes and topics of interest across regulators.</p> <p>Public questions and concerns are shared among senior College staff supporting and training the different Committees. Frequently occurring questions and concerns are addressed in HeadLines, the College’s quarterly publication. This information is also available on the Professional Practice FAQ page of the College’s website.</p> <p>EDI Working Group members were cross appointed to the Working Group tasked with revising the Standards of Professional Conduct. This allowed EDI principles to be integrated with the new standards and ensured alignment between the College’s approach to EDI and expectations set for the profession.</p>	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.
			<i>Additional comments for clarification (optional):</i>	

DOMAIN 1: GOVERNANCE	STANDARD 2	Measure:		
		2.1 All decisions related to a Council’s strategic objectives, regulatory processes, and activities are impartial, evidence-informed, and advance the public interest.		
		Required Evidence	College Response	
		a. The College Council has a Code of Conduct and ‘Conflict of Interest’ policy that is: i. reviewed at least every three years to ensure it reflects current legislation, practices, public expectations, issues, and emerging initiatives (e.g., Diversity, Equity, and Inclusion); and <u>Further clarification:</u> Colleges are best placed to determine the public expectations, issues and emerging initiatives based on input from their members, stakeholders, and the public. While there will be similarities across Colleges such as Diversity, Equity, and Inclusion, this is also an opportunity to reflect additional issues, expectations, and emerging initiatives unique to a College or profession.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please provide the year when the Council Code of Conduct and ‘Conflict of Interest’ Policy was last evaluated/updated.• Please briefly describe any changes made to the Council Code of Conduct and ‘Conflict of Interest Policy’ resulting from the last review. All College policies are reviewed at least every three years. <u>Policy I-2a: Council & Committee Orientation and Training: Code of Conduct for Members of Council and its Committees.</u> At its meeting on June 17, 2022, Council approved amendments to Policy I – 2a: Code of Conduct for Members of Council and its Committees. This amendment included adding a statement to reflect the College’s commitment to Equity, Diversity, and Inclusion. <u>Policy I – 6: Conflict of Interest and Reasonable Perception of Bias</u> was reviewed and amended by the Client Relations Committee at their meeting on May 5, 2022. Through this amendment the Committee added examples of conflicts of interest and bias, to assist members in understanding and identifying such issues.	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	
Choose an item.				
Additional comments for clarification (optional)				

		ii. accessible to the public.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none"> Please insert a link to the Council Code of Conduct and 'Conflict of Interest' Policy OR Council meeting materials where the policy is found and was last discussed and approved and indicate the page number. <p>Policy I-2a Council & Committee Orientation and Training: Code of Conduct for Members of Council and its Committees Policy I-6 Conflict of Interest and Reasonable Perception of Bias</p>	
			If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?	Choose an item.
			Additional comments for clarification (optional)	
		b. The College enforces a minimum time before an individual can be elected to Council after holding a position that could create an actual or perceived conflict of interest with respect their Council duties (i.e., cooling off periods).	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none"> Cooling off period is enforced through: By-law Please provide the year that the cooling off period policy was developed OR last evaluated/updated. Please provide the length of the cooling off period. How does the College define the cooling off period? <ul style="list-style-type: none"> Insert a link to policy / document specifying the cooling off period, including circumstances where it is enforced and indicate the page number; Insert a link to Council meeting where cooling off period has been discussed and decided upon and indicate the page number; OR Where not publicly available, please briefly describe the cooling off policy. <p>The College has a one year cooling off period. The by-law requires that to sit on Council, the member is not and has not been within one year before the date of the election, a director, officer, board, committee, or staff of any professional association involved in the advocacy for the professions. It also requires that the member does not hold, and has not held, within one year before the date of the election, a position which would cause the member, if elected as a member of Council, to have a conflict of interest by virtue of having competing fiduciary obligations to both the College and another organization. By-law 20: Election to Council, Qualifications, Terms of Office, and Conditions for Disqualification, approved by Council December 1999 and last amended March 11, 2022, specifies a one-year cooling off period between a member's participation in the leadership of a professional association and running for a Council seat. All by-laws were amended to include the profession of ABA; however, no material change was made to the cooling-off period for potential Council members.</p>	
		Further clarification: Colleges may provide additional methods not listed here by which they meet the evidence.		

			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	Choose an item.
		Additional comments for clarification (optional)		
		c. The College has a conflict-of-interest questionnaire that all Council members must complete annually. <u>Additionally:</u> i. the completed questionnaires are included as an appendix to each Council meeting package; ii. questionnaires include definitions of conflict of interest; iii. questionnaires include questions based on areas of risk for conflict of interest identified by Council that are specific to the profession and/or College; and iv. at the beginning of each Council meeting, members must declare any updates to their responses and any conflict of interest <u>specific to the meeting agenda</u> .	The College fulfills this requirement:	No
			<ul style="list-style-type: none">• Please provide the year when conflict of interest the questionnaire was implemented OR last evaluated/updated.• Member(s) note whether their questionnaire requires amendments at each Council meeting and whether they have any conflicts of interest based on Council agenda items: No• Please insert a link to the most recent Council meeting materials that includes the questionnaire and indicate the page number. <p>The College does not require members to complete a questionnaire at each meeting. Each Council member signs a formal agreement or declaration at the beginning of their term of office as per Policy I-6 Conflict of Interest and Reasonable Perception of Bias</p> <p><i>“The Registrar will require members of Council, Committees, staff, and all individuals providing services on behalf of the College to sign a Declaration, Undertaking and Agreement, before beginning their terms, stating that they have read, understand, and commit to comply with this policy and these procedures as well as any specific procedures that may apply to a particular activity or committee.”</i></p> <p>Members of Council verbally declare potential conflicts at the beginning of every meeting based on the agenda items. Any declarations of conflicts are recorded in the Minutes. This was demonstrated in Item .01B Declarations of Conflicts of Interest in the Minutes of the September 2024 Council meeting (pg.3).</p>	
		If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	No	
		Additional comments for clarification (optional)		
		As noted, members of Council verbally declare potential conflicts at the beginning of every meeting based on the agenda items. Any declarations of conflicts are recorded in the Minutes. This has proven to be adequate and there are no plans to modify the process at this time.		

		d. Meeting materials for Council enable the public to clearly identify the public interest rationale and the evidence supporting a decision related to the College’s strategic direction or regulatory processes and actions (e.g., the minutes include a link to a publicly available briefing note).	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please briefly describe how the College makes public interest rationale for Council decisions accessible for the public.• Please insert a link to Council meeting materials that include an example of how the College references a public interest rationale and indicate the page number. <p>Council meeting materials are posted on the College website a week in advance of the meeting. Each item brought forward for Council discussion and decision-making is accompanied by a Briefing Note. The Briefing Note has a section entitled Public Interest Rationale which provides a description of how the item relates to public protection or the public interest. The Briefing Note also contains a <i>Strategic Direction Reflection</i> section noting which of the College's Strategic Pillars the item addresses. The meeting agenda notes the Strategic Direction by a letter code with the full set of Strategic Directions list provided, for reference, on each Agenda. This can be seen in the December 2024 Council meeting materials.</p> <p>The approved Minutes of each meeting have a link to the Council meeting materials to which the Minutes relate, so that the Briefing Notes or other Reports may be easily accessed. This can be seen in the September 2024 Council Minutes.</p>	
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	Choose an item.
			Additional comments for clarification (if needed)	

		<p>e. The College has and regularly reviews a formal approach to identify, assess, and manage internal and external risks. This approach is integrated into the College’s strategic planning and operations.</p> <p><u>Further clarification:</u> Formal approach refers to the documented method or which a College undertakes to identify, assess, and manage risk. This method or process should be regularly reviewed as appropriate.</p> <p>Risk management planning activities should be tied to strategic objectives of Council since internal and external risks may impact the ability of Council to fulfill its mandate, especially in the absence of mitigations.</p> <p>Internal risks are related to operations of the College and may impact its ability to meet its strategic objectives. External risks are economic, political and/or natural factors that happen outside of the organization.</p>	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please provide the year that the formal approach was last reviewed.• Please insert a link to the internal and external risks identified by the College OR Council meeting materials where the risks were discussed and integrated into the College’s strategic planning activities and indicate page number. <p>In December 2018, Council approved the introduction of an Integrated Risk Management Plan using the Risk Management Register through the Healthcare Insurance Reciprocal of Canada (HIROC). The risk assessment includes a review of three categories of risk: Risks to Office/Staff, Risks to the College (reputation/self-regulation), and Risks to the Public (from members). Each year the risk register is reviewed to assess the effectiveness of the strategies applied and to identify any new risks that should be included.</p> <p>Integrated Risk Management Report to Council – December 13 2024 Council Meeting (pg.122)</p>	
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	Choose an item.
			<i>Additional comments for clarification (if needed)</i>	

DOMAIN 1: GOVERNANCE	STANDARD 3	Measure:	
		3.1 Council decisions are transparent.	
		Required Evidence	College Response
		a. Council minutes (once approved) and status updates on the implementation of Council decisions to date are accessible on the College’s website, or a process for requesting materials is clearly outlined.	<div>The College fulfills this requirement:</div> <div><div>Yes</div><div><ul style="list-style-type: none">Please insert a link to the webpage where Council minutes are posted.Please insert a link to where the status updates on implementation of Council decisions to date are posted OR where the process for requesting these materials is posted.<p>Council Minutes are posted on the College website on a page noting Upcoming Meetings as well as a list of available Agendas, Minutes and Materials from past meetings. An Action List is prepared following each Council meeting. It is included on the agenda and is in the meeting materials package to be reviewed at the subsequent meeting. The Action List notes the Agenda Item number, who was responsible for the action, what the action was, and its status. Approved minutes and the Council materials can be found here.</p></div></div>
			<div><div>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</div><div>Choose an item.</div></div>
			<div>Additional comments for clarification (optional)</div>

		b. The following information about Executive Committee meetings is clearly posted on the College's website (alternatively the College can post the approved minutes if it includes the following information). <div><div>i. the meeting date;</div><div>ii. the rationale for the meeting;</div><div>iii. a report on discussions and decisions when Executive Committee acts as Council or discusses/deliberates on matters or materials that will be brought forward to or affect Council; and</div><div>iv. if decisions will be ratified by Council.</div></div>	The College fulfills this requirement:	Yes
			<div><div><div>• Please insert a link to the webpage where Executive Committee minutes/meeting information are posted.</div></div><div>A report of Executive Committee meetings is provided to Council at each meeting and is available to the public in the posted Council materials package. This Report includes the date of the meeting(s), a report on the items discussed and actions taken as well as a notation of those items to be brought forward for Council decision or approval. Any decisions which were taken on behalf of Council are presented to the next Council meeting. The December 2024 Executive Report to Council is available on page 18 here.</div></div>	
			If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?	Choose an item.
			Additional comments for clarification (optional)	

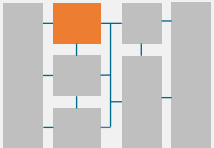
Measure: 3.2 Information provided by the College is accessible and timely.			
Required Evidence		College Response	
a. With respect to Council meetings: i. Notice of Council meeting and relevant materials are posted at least one week in advance; and ii. Council meeting materials remain accessible on the College's website for a minimum of 3 years, or a process for requesting materials is clearly outlined.	The College fulfills this requirement:		Yes
	<ul style="list-style-type: none">Please insert a link to where past Council meeting materials can be accessed OR where the process for requesting these materials is clearly posted. <p>This has been standard practice for the College since June 2016. The College's Council Meeting web page notes upcoming meetings as well as a list of available Agendas, Minutes and Materials from past meetings. This can be found here. Agendas, Minutes and Materials are not removed from the College website and are available indefinitely.</p>		
	If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?		Choose an item.
	Additional comments for clarification (optional)		
b. Notice of Discipline Hearings are posted at least one month in advance and include a link to allegations posted on the public register.	The College fulfills this requirement:		Yes
	<ul style="list-style-type: none">Please insert a link to the College’s Notice of Discipline Hearings. <p>The link to the College’s Notice of Discipline Hearings: https://cpo.on.ca/public/discipline/upcoming-hearing-schedule/. Each listed member name is linked to their public register profile, where the Notice of Hearing is posted. Public links to the hearing are made available on this page as well.</p>		

			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.	
		<i>Additional comments for clarification (optional)</i>			
		Measure:			
		3.3 The College has a Diversity, Equity, and Inclusion (DEI) Plan.			
		Required Evidence	College Response		
		a. The DEI plan is reflected in the Council’s strategic planning activities and appropriately resourced within the organization to support relevant operational initiatives (e.g., DEI training for staff).	The College fulfills this requirement:		Partially
			<ul style="list-style-type: none">• Please insert a link to the College’s DEI plan.• Please insert a link to the Council meeting minutes where DEI was discussed as part of strategic planning and appropriate resources were approved and indicate page number.		
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>		Yes
		The Health Equity Impact Assessment was approved at the June 2024 Council Meeting . The EDI working group is in the process of developing the EDI plan based on the results of the equity impact assessment and in alignment with the College’s strategic plan. The draft EDI plan is scheduled for its second review by the Working Group in January 2025 with the potential to be approved at the February 2025 Executive Committee and March 2025 Council meetings.			
The Working Group reports to Council each quarter on its activities and the December 2024 report can be viewed on page 31 here and reported to the membership and public via the College’s publication, Headlines , on a quarterly basis.					

			<i>Additional comments for clarification (optional)</i>
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		<p>b. The College conducts Equity Impact Assessments to ensure that decisions are fair and that a policy, or program, or process is not discriminatory.</p> <p><u>Further clarification:</u></p> <p>Colleges are best placed to determine how best to report on an Evidence. There are several Equity Impact Assessments from which a College may draw upon. The ministry encourages Colleges to use the tool best suited to its situation based on the profession, stakeholders, and patients it serves.</p>	The College fulfills this requirement:		Yes
			<ul style="list-style-type: none">• Please insert a link to the Equity Impact Assessments conducted by the College and indicate the page number OR please briefly describe how the College conducts Equity Impact Assessments.• If the Equity Impact Assessments are not publicly accessible, please provide examples of the circumstances (e.g., applied to a policy, program, or process) in which Equity Impact Assessments were conducted. <p>The EDI Working Group completed an Equity Impact Assessment which was approved at the June 2024 Council Meeting (pg.76). The assessment has informed the construction of the College’s EDI plan, which is expected to be approved by the Council in 2025.</p>		
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>		Choose an item.
			<i>Additional comments for clarification (optional)</i>		

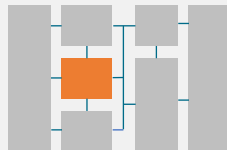
		Measure: 4.1 The College demonstrates responsible stewardship of its financial and human resources in achieving its statutory objectives and regulatory mandate.	
DOMAIN 2: RESOURCES	STANDARD 4	Required Evidence	College Response
		<p>a. The College identifies activities and/or projects that support its strategic plan including how resources have been allocated.</p> <p><u>Further clarification:</u> A College’s strategic plan and budget should be designed to complement and support each other. To that end, budget allocation should depend on the activities or programs a College undertakes or identifies to achieve its goals. To do this, a College should have estimated the costs of each activity or program and the budget should be allocated accordingly.</p>	<div>The College fulfills this requirement:</div> <div>Yes</div>
			<ul style="list-style-type: none">• Please insert a link to Council meeting materials that include discussions about activities or projects to support the strategic plan AND a link to the most recent approved budget and indicate the page number.• Please briefly describe how resources were allocated to activities/projects in support of the strategic plan.
			<p>The College updated its 5-year Strategic Direction (2023-2028) at its June 2023 meeting. Each quarter a report is prepared for Council detailing the activities undertaken to support the Plan. See pages 125-127 of the December 2024 Council meeting here for details on activities supporting the strategic plan.</p> <p>Every year, programs and activities submitted by each College department are reviewed and costed as part of the budget development process. This involves a review of the past five years’ performance and projections for the current year end. Resources considered during budget allocation include human resources, technology (hardware and software), and office space. The outcome of the resource allocation supports the strategic direction. The draft budget is submitted for review to the Finance and Audit Committee then to the Executive Committee for comment before being taken to Council for approval.</p> <p>The most recent budget discussion at Council was in March 2024 and can be viewed on pages 226-234 of the Council Meeting Materials.</p>
			<div><div>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</div><div>Choose an item.</div></div>
		<p><i>Additional comments for clarification (optional)</i></p>	

		<p>b. The College:</p> <p>i. has a “financial reserve policy” that sets out the level of reserves the College needs to build and maintain in order to meet its legislative requirements in case there are unexpected expenses and/or a reduction in revenue and</p> <p>ii. possesses the level of reserve set out in its “financial reserve policy”.</p>	The College fulfills this requirement:		Yes	
			<ul style="list-style-type: none">• Please insert a link to the “financial reserve policy” OR Council meeting materials where financial reserve policy has been discussed and approved and indicate the page number.• Please insert the most recent date when the “financial reserve policy” has been developed OR reviewed/updated.• Has the financial reserve policy been validated by a financial auditor? Yes <p>The College made amendments to the Reserve Funds Policy with the Council deciding to sunset the Fee Stabilization Fund following payment of the previous fiscal year’s deficit. The decision to close the Fee Stabilization Fund occurred at the June 2024 Council meeting here (pgs. 46-48) with the transfer of reserve funds to cover a portion of last year’s operating deficit at the December Council Meeting, here (pgs.119-121).</p> <p>The College now maintains four Reserve Funds: Investigations and Hearings, Website Development, Premises, and Contingency. The Reserve Funds Policy describes the purpose of those established by policy, the minimum and maximum amount to be maintained for each fund, an aggregate total for all funds and the circumstances under which a fund may be accessed. The Policy also describes the procedure for contributing to the fund, withdrawing from the fund and who has authority to recommend and/or approve the transfer. Each year amounts within the reserve funds are reviewed by the Auditor who may make recommendations to Council for transfer of funds. As of February 2024, each Reserve Fund carried an amount within the limit set in policy.</p>			
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?		Choose an item.	
Additional comments for clarification (if needed)						

		<p>c. Council is accountable for the success and sustainability of the organization it governs. This includes:</p> <p>i. regularly reviewing and updating written operational policies to ensure that the organization has the staffing complement it needs to be successful now and, in the future (e.g., processes and procedures for succession planning for Senior Leadership and ensuring an organizational culture that attracts and retains key talent, through elements such as training and engagement).</p> <div><div></div><div>Benchmarked Evidence</div><div></div></div>	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">Please insert a link to the College’s written operational policies which address staffing complement to address current and future needs.Please insert a link to Council meeting materials where the operational policy was last reviewed and indicate the page number. <p>Note: Colleges are encouraged to add examples of written operational policies that they identify as enabling a sustainable human resource complement to ensure organizational success.</p> <p>The College does a comprehensive review of all staff positions and anticipated staffing needs as part of the budget development process. Succession needs as well as any known or expected leaves of absence are considered at this time. The budget, with a description of the human resource considerations, is presented to the Finance and Audit Committee and the Executive Committee prior to being taken to Council for approval. The budget for the fiscal year 2024-2025, beginning in June 2024, was reviewed and approved by the Finance and Audit Committee at their meeting in February 2024, then the Executive Committee later in February 2024, with final review and approval by Council at the March 21, 2024 Council Meeting (Page 226).</p> <p>The College has a Succession Plan Policy for the position of Registrar & Executive Director, Policy I-14: Succession Plan for the Position of Registrar & Executive Director.</p> <p>The Plan is comprised of two parts:</p> <ol style="list-style-type: none">Temporary Leadership PlanPermanent Leadership Plan <p>The College has had a Succession Plan in place since 2012. The Plan remained as a stand-alone document since its development although, as required, it was updated every year following the June Council meeting. Given its importance, it was seen as prudent to move the standalone Succession Plan for the Position of Registrar & Executive Director into an official College policy. Policy I-14: Succession Plan for the Position of Registrar & Executive Director was put into policy format and approved by Council at its meeting on June 17, 2022 (Page 76). It continues to be updated on a yearly basis and was last revised in June 2022.</p>	

			<p><i>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</i></p>

		ii. regularly reviewing and updating the College’s data and technology plan to reflect how it adapts its use of technology to improve College processes in order to meet its mandate (e.g., digitization of processes such as registration, updated cyber security technology, searchable databases).	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">Please insert a link to the College’s data and technology plan which speaks to improving College processes OR please briefly describe the plan. <p>The College has, and regularly updates, its data and technology plan. The current version is up to date through to the end of 2025. A link is not included as it contains information that may compromise IT security plans when this CPMF report is published. The plan covers:</p> <ul style="list-style-type: none">The prescribed decision-making processItemization of the technology in use, including hardware, software and a description of the infrastructure supporting the IT functionsGuidelines regarding data management, digital communication, training and technical supportA list of current technology projects, with implementation plan, timelines and budget <p>The College has engaged the services of an external vendor with a managed IT approach for technology. This allows for greater access to resources and expertise to enable more robust cybersecurity with active monitoring. Servers have been moved to a more secure cloud environment. The College is currently engaged in the development of a new database to allow for greater flexibility in data management. College functions such as applications, complaint submissions, elections to Council and membership renewals have already been moved to an electronic format. The College makes use of cybersecurity training through Know4before, which all staff are required to participate in, to increase awareness of cyber issues and prevent inadvertent security breaches.</p>	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.
			<i>Additional comments for clarification (optional)</i>	

DOMAIN 3: SYSTEM PARTNER		
STANDARD 5 and STANDARD 6		
Measure / Required evidence: N/A	College response	
	<p><i>Colleges are requested to provide a narrative that highlights their organization’s best practices for the following two standards. An exhaustive list of interactions with every system partner that the College engaged with is not required.</i></p> <p><i>Colleges may wish to provide information that includes their key activities and outcomes for each best practice discussed with the ministry, or examples of system partnership that, while not specifically discussed, a College may wish to highlight as a result of dialogue.</i></p>	
The two standards under this domain are not assessed based on measures and evidence like other domains, as there is no ‘best practice’ regarding the execution of these two standards.	Standard 5: The College actively engages with other health regulatory colleges and system partners to align oversight of the practice of the profession and support execution of its mandate.	
Instead, <u>Colleges will report on key activities, outcomes, and next steps that have emerged through a dialogue with the ministry.</u>	Recognizing that a College determines entry to practice for the profession it governs, and that it sets ongoing standards of practice for the profession it regulates and that the profession has multiple layers of oversight (e.g. by employers, different legislation, etc.), Standard 5 captures how the College works with other health regulatory colleges and other system partners to support and strengthen alignment of practice expectations, discipline processes, and quality improvement across all parts of the health system where the profession practices. In particular, a College is asked to report on:	
Beyond discussing what Colleges have done, the dialogue might also identify other potential areas for alignment with other Colleges and system partners.	<ul style="list-style-type: none"><i>How it has engaged other health regulatory Colleges and other system partners to strengthen the execution of its oversight mandate and aligned practice expectations? Please provide details of initiatives undertaken, how engagement has shaped the outcome of the policy/program and identify the specific changes implemented at the College (e.g., joint standards of practice, common expectations in workplace settings, communications, policies, guidance, website, etc.).</i>	
-	<p>Since proclamation of the <i>Psychology and Applied Behaviour Analysis Act, 2021</i> on July 1, 2024, the College has registered over 1,500 Behaviour Analysts. Extensive collaboration with relevant stakeholders ensured that the College heard from service agencies and to assist them in considering the impending regulations in their clinical and operational contexts.</p> <p>The College met with the following ABA stakeholders:</p> <ul style="list-style-type: none">January 10 – Kenora Catholic District School Board - ABA Stakeholder MeetingJanuary 20 – Shining Through Centre - ABA Stakeholder MeetingJanuary 29 – Mackenzie Health - ABA Stakeholder MeetingJanuary 29 - ConnectWell - ABA Stakeholder Meeting	

	<ul style="list-style-type: none">• February 7 – Trillium Health Partners - ABA Stakeholder Meeting• February 9 – Children’s Hospital of Eastern Ontario - ABA Stakeholder Meeting• February 9 – ONTABA Mental Health Special Interest Group - ABA Stakeholder Meeting• February 21 – Surrey Place - ABA Stakeholder Meeting• February 28 – Durham Social Services - ABA Stakeholder Meeting• March 4 – London Health Sciences - ABA Stakeholder Meeting• March 4 – Holland Bloorview Kids Rehabilitation Hospital - ABA Stakeholder Meeting• March 26 – CAMH On-Site Visit – Behaviour Therapy Week - ABA Stakeholder Meeting• March 28 – St. Joseph’s Healthcare London - ABA Stakeholder Meeting• April 4 - ONTABA and College: Q&A Video• April 19 - Registrar Virtual Visit, BrockU, ABA Faculty• April 22 – Holland Bloorview Kids Rehabilitation Hospital - ABA Stakeholder Meeting• May 10 – WesternU ABA Faculty and Students, On-Site Visit• June 4 – Waypoint Centre for Mental Health Care - ABA Stakeholder Meeting• July 8 – The Ottawa Hospital - ABA Stakeholder Meeting• July 18 – Colleges Ontario - ABA Stakeholder Meeting• December 19 - Hamilton Health Sciences - ABA Stakeholder Meeting <p>The College maintained close collaboration with the province's professional association, ONTABA, towards coordinated efforts at knowledge dissemination to the public and prospective registrants. The College also worked closely with the Ministry of Children Community, and Social Services as well as the Ministry of Health to prepare for proclamation of the Act.</p> <p>Leading up to proclamation, the College also hosted an “ABA Training Day” for its staff and staff of other interested Colleges, including CRPO, CASLPO, COTO, ECE and OCSWSSW, and included a US Board already regulating ABA. The training day allowed for the various staff to interact with each other and learn more about the ABA profession.</p> <p>As mentioned above, the College worked with a number of regulators to develop an Interprofessional Collaboration document for ABA FAQs.</p>
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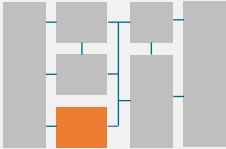
	<p>The College is a member of the Health Profession Regulators of Ontario (HPRO), ensuring that relevant updates are received in a timely manner. College staff attended the HPRO Practice Advisors subgroup meeting which included topics of Artificial Intelligence, Infection Prevention and Control Canada (‘IPAC’) updates, and privacy and recording of patient/client encounters. Another HPRO subgroup comprised of mental health regulators (ie. <i>Ontario College of Social Workers and Social Service Workers, College of Psychotherapists of Ontario and College of Psychologists and Behaviour Analysts of Ontario</i>) occurred for discussions regarding concerns/issues regarding Psychedelic Assisted Psychotherapy, for example.</p> <p>To receive feedback on the new Standards of Professional Conduct, the drafts were disseminated to various regulatory bodies that may have a shared interest and posted online for the general public.</p> <p>In collaboration with the Ontario Psychological Association (OPA) the College responded to requests for information regarding a potential scope of practice expansion for psychologist prescription privileges.</p> <p>The College worked with the psychology regulator in Manitoba to begin the development a specific pathway for Manitoba psychologists working through Shared Health to provide interprofessional hospital care when their patients return to Northwestern Ontario.</p> <p>The registrar was an invited speaker to both 2024 meetings of the Association of State and Provincial Psychology Boards (ASPPB), and he and the President attended both meetings of ACPRO.</p>
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	<p>Standard 6: The College maintains cooperative and collaborative relationships and responds in a timely and effective manner to changing public/societal expectations.</p> <p>The intent of Standard 6 is to demonstrate that a College has formed the necessary relationships with system partners to ensure that it receives and contributes information about relevant changes to public expectations. This could include both relationships where the College is asked to provide information by system partners, or where the College proactively seeks information in a timely manner.</p> <ul style="list-style-type: none">• <i>Please provide examples of key successes and achievements from the reporting year where the College engaged with partners, including patients/public to ensure it can respond to changing public/societal expectations (e.g., COVID-19 Pandemic, mental health, labor mobility etc.). Please also describe the matters that were discussed with each of these partners and how the information that the College obtained/provided was used to ensure the College could respond to a public/societal expectation.</i>• <i>In addition to the partners it regularly interacts with, the College is asked to include information about how it identifies relevant system partners, maintains relationships so that the College is able access relevant information from partners in a timely manner, and leverages the information obtained to respond (specific examples of when and how a College responded is requested in Standard 7).</i> <p>Since the proclamation of the <i>Psychology and Applied Behaviour Analysis Act, 2021</i> on July 1, 2024, the College has registered approximately 1,500 Behaviour Analysts. Extensive collaboration with relevant stakeholders ensured that the College heard varying perspectives/concerns prior to assuming responsibility for ABA regulation in Ontario. This included consultation with the following stakeholders: ABA employers and educational institutions (e.g. Hamilton Health Sciences, Western University, Brock University), professional associations such as Ontario Psychological Association (OPA), the Association of Canadian Psychology Regulatory Organizations (ACPRO) and the Association of State and Provincial Psychology Boards (ASPPB), Special Interest Groups such as Autism Ontario and the Ontario Autism Program, other regulators via Health Professions Regulators of Ontario (HPRO) and the College of Audiologists and Speech Language Pathologist (CASLPO) as a regulator of dual professions.</p> <p><i>College staff also engaged with the following stakeholders regarding ABA during 2024</i></p> <ul style="list-style-type: none">• Ontario Autism Program• Autism Ontario• Access OAP/Accerta• Ontario Association for Behaviour Analysis (ONTABA)• ONTABA Regulation Resource Task Force• Behavior Analyst Certification Board (BACB)• Ontario Ministry of Health/Ministry of Children, Community and Social Services• Ontario Regulators for Access Consortium (ORAC)• Brock University
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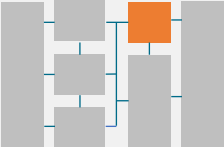
- Western University

Further, CPBAO is a member of the Health Profession Regulators of Ontario (HPRO), ensuring that relevant updates are received in a timely manner. College staff attended the HPRO Practice Advisors subgroup meeting which included topics of Artificial Intelligence, Infection Prevention and Control Canada (‘IPAC’) updates, and privacy and recording of patient/client encounters. Another HPRO subgroup comprised of mental health regulators (ie. *Ontario College of Social Workers and Social Service Workers, College of Psychotherapists of Ontario and College of Psychologists of Ontario*) occurred for discussions regarding concerns/issues regarding Psychedelic Assisted Psychotherapy, for example.

To receive feedback on the new Standards of Professional Conduct, the [drafts were disseminated](#) to various regulatory bodies that may have a shared interest.

		Measure: 7.1 The College demonstrates how it protects against and addresses unauthorized disclosure of information.	
DOMAIN 4: INFORMATION MANAGEMENT	STANDARD 7	Required Evidence	College Response
		a. The College demonstrates how it: i. uses policies and processes to govern the disclosure of, and requests for information;	<div>The College fulfills this requirement:</div> <div>Yes</div> <div><ul style="list-style-type: none">Please insert a link to policies and processes OR please briefly describe the respective policies and processes that addresses disclosure and requests for information.<p><u>Policy III A-3: Privacy</u> describes the voluntary mechanism through which the College can provide appropriate privacy rights to individuals involved in the College's activities while still enabling the College to meet its statutory mandate under the <i>Regulated Health Professions Act, 1991 (RHPA)</i>, the Health Professions Procedural Code and the <i>Psychology and Applied Behaviour Analysis Act, 2021</i>.</p><p>The College's <i>Privacy Policy</i>, with an embedded link to the College's <i>Privacy Code</i> may be found here.</p></div>
			<div>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</div> <div>Choose an item.</div>
			<div>Additional comments for clarification (optional)</div>

		<div>ii. uses cybersecurity measures to protect against unauthorized disclosure of information; and</div> <div>iii. uses policies, practices and processes to address accidental or unauthorized disclosure of information.</div> <div><div></div><div>Benchmarked Evidence</div><div></div></div>	The College fulfills this requirement:	Yes
			<div><div><div>Please insert a link to policies and processes OR please briefly describe the respective policies and processes to address cybersecurity and accidental or unauthorized disclosure of information.</div></div></div> <div>Same as 2023 – The College’s Privacy Policy describes the voluntary mechanism through which the College can provide appropriate privacy rights to individuals involved in the College’s activities while still enabling the College to meet its statutory mandate under the Regulated Health Professions Act, 1991 (RHPA), the Health Professions Procedural Code and the Psychology and Applied Behaviour Analysis Act, 2021.</div> <div>The Privacy Code is reviewed every 5 years and updated as required. It was last reviewed in June 2024.</div> <div>Please find the College’s Privacy Policy, Privacy Statement, Privacy Code and Policy on Confidentiality Obligations and Handling of Confidential Materials below:</div> <div><div><div><div><div></div></div><div>Privacy Policy</div></div><div><div><div></div></div><div>Privacy Statement</div></div><div><div><div></div></div><div>Privacy Code</div></div><div><div><div></div></div><div>Policy on Confidentiality Obligations & Handling of Confidential Materials</div></div></div></div>	
			<div>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</div>	

		Measure: 8.1 All policies, standards of practice, and practice guidelines are up to date and relevant to the current practice environment (e.g., where appropriate, reflective of changing population health needs, public/societal expectations, models of care, clinical evidence, advances in technology).	
DOMAIN 5: REGULATORY POLICIES	STANDARD 8	Required Evidence	College Response
		a. The College regularly evaluates its policies, standards of practice, and practice guidelines to determine whether they are appropriate, or require revisions, or if new direction or guidance is required based on the current practice environment. <hr/> <i>Benchmarked Evidence</i> <hr/>	<div>The College fulfills this requirement:</div> <div>Yes</div> <ul style="list-style-type: none">Please insert a link to document(s) that outline how the College evaluates its policies, standards of practice, and practice guidelines to ensure they are up to date and relevant to the current practice environment and indicate the page number(s) OR please briefly describe the College’s evaluation process (e.g., what triggers an evaluation, how often are evaluations conducted, what steps are being taken, which stakeholders are being engaged in the evaluation and how are they involved). <p>In accordance with Policy I – 1: Policy Development and Maintenance Senior College staff involved in Registration, Complaints and Discipline, and the Quality Assurance Program, together with the respective Committees, monitor and discuss any concerns arising regarding member conduct and relevant expectations of the College. This includes identifying gaps or lack of clarity in the Standards of Professional Conduct, 2024 (Standards) along with suggestions/recommendations as to how these may be addressed. Areas of concern or problems are also informed by the nature of the inquiries to the College's Practice Advice Service which responds to practice questions from members of the College and the public. Such amendments are provided to the Registrar and, when appropriate, taken forward to the Executive Committee and Council.</p> <p>The complete Standards are subject to a full review approximately every five years, with the most recent version approved by Council on May 8, 2024, in preparation for the proclamation of the Psychology and Applied Behaviour Analysis Act, 2021 on July 1, 2024.</p>
			<i>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</i>

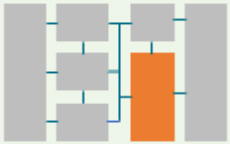
		<p>b. Provide information on how the College takes into account the following components when developing or amending policies, standards and practice guidelines:</p> <p>i. evidence and data;</p> <p>ii. the risk posed to patients / the public;</p> <p>iii. the current practice environment;</p> <p>iv. alignment with other health regulatory Colleges (where appropriate, for example where practice matters overlap);</p> <p>v. expectations of the public; and</p> <p>vi. stakeholder views and feedback.</p> <hr/> <p><i>Benchmarked Evidence</i></p> <hr/>	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">Please insert a link to document(s) that outline how the College develops or amends its policies, standards of practice, and practice guidelines to ensure they address the listed components and indicate the page number(s) OR please briefly describe the College’s development and amendment process. <p>Same as 2023 for policy development and maintenance – <i>Senior College staff involved in Registration, Complaints and Discipline, and the Quality Assurance Program, together with the respective Committees, monitor and discuss any concerns arising regarding member conduct and relevant expectations of the College. This includes identifying gaps or lack of clarity in the Standards of Professional Conduct along with suggestions/recommendations as to how these may be addressed. Areas of concern or problems are also informed by identified trends from the College's Practice Advice Service which responds to practice questions from registrants and the public. Such amendments are suggested to the Registrar and, where appropriate, taken forward to the Executive Committee and Council.</i></p> <p>The Standards of Professional Conduct were revised and approved by Council in May 2024 and launched in July 2024. The Standards were updated to ensure their relevance and applicability to both the practice of psychology and to applied behaviour analysis. This update provides more appropriate guidance to members in relevant areas and aims to mitigate the risk posed to patients and the public. The Standards were restructured and aimed to incorporate plain language where appropriate to enable accessibility. Practical Applications were developed to provide clarity, guidance and examples in some standards. See Council Briefing Note here.</p> <p>The Standards review was conducted by a Working Group appointed by the Executive Committee. The Working Group was comprised of Council and College members representing a diversity of identities (e.g., race and gender) and various practice settings. It also included practitioners of ABA and psychology, as well as a public member of the College. Complaints and Practice Advisory data trends were used to inform the updates.</p> <p>Feedback was sought from a variety of stakeholders including members, the public and other interested parties (ie. other regulators, associations, and the Citizens Advisory Group). Expectations of the public and other stakeholders were gathered from two extensive periods of consultation.</p> <p>The first period sought feedback on current standards to identify gaps where additional clarity/standards might be needed or identify standards that were no longer relevant to the current practice environment. The second consultation period sought feedback on the draft standards. To enable timely feedback, a new email inbox was created (standards@cpbao.ca) from May 15 – July 8, 2024. Other health regulatory Colleges, including other health profession regulators in Ontario and psychology regulators across Canada, were consulted on the drafts where relevant.</p> <p>The revised draft Standards were distributed to members for final consultation prior to Council approval. The Standards of Professional Conduct will be reviewed at least every 5 years and updated as needed.</p>	

			<p><i>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</i></p>
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		c. The College's policies, guidelines, standards and Code of Ethics should promote Diversity, Equity, and Inclusion (DEI) so that these principles and values are reflected in the care provided by the registrants of the College.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please briefly describe how the College reviews its policies, guidelines, standards and Code of Ethics to ensure that they promote Diversity, Equity and Inclusion.• Please highlight some examples of policies, guidelines, standards or the Code of Ethics where Diversity, Equity and Inclusion are reflected. <p>As a Code of Ethics for psychology, the College has adopted the Canadian Psychological Association's Canadian Code of Ethics for Psychologists, as outlined in By-law 16: Codes of Ethics and Practice for Members (Page 24). Several items within Principle I of the Code Respect for the Dignity of Persons and Peoples are related to DEI/EDI.</p> <p>The College has adopted the Behavior Analyst Certification Board. (2020). Ethics code for behavior analysts, for ABA registrants.</p> <p>Members of the EDI working group served on the Standards working group to ensure that themes related to EDI were included. The 2024 version of the Standards now has a section specific to EDI. The Registration Guidelines and the College’s Policy and Procedures Manual have been revised to ensure gender neutral language. A new question related to gender identity in the renewal form is now more inclusive and reflective of the College membership. Further changes are expected based on the data collected from the Equity Impact Assessment.</p> <p>The College’s Quality Assurance Program also requires members to reflect upon their EDI practices and plan to remediate any shortcomings. The specific items addressing this issue can be found beginning on page 14 of the Self-Assessment Guide. This includes an attestation indicating that the member has made best efforts to utilize an objective and structured tool to evaluate and further develop these practices.</p> <p>The College has formal requirements within the mandatory Continuing Professional Development program, including a minimum of five credits that address EDI.</p> <p>(pg.7 of the Standards)</p> <p><i>3.1 Respect and Dignity in Professional Practice</i></p> <p><i>Registrants must demonstrate dignity and respect in their professional conduct towards all individuals, in all aspects of their practice. This includes being culturally responsive and practising consistent with relevant legislation on harassment and discrimination and published practice guidelines.</i></p> <p><i>Practical Application: The main pieces of legislation applicable in Ontario in this regard include the Canadian Charter of Rights and Freedoms,1982, the Ontario Human Rights Code, 1990, and the Criminal Code of Canada, 1985. These statutes require, among other things, consideration of each individual’s experience including, but not limited to, considerations of age, ancestry, colour, culture, race, citizenship, ethnic origin, place of origin, creed, disability, family status, marital status, gender identity, gender expression, receipt of public assistance, record of offences, sexual orientation, and language.</i></p> <p><i>Practical Application: When working with an individual whose cultural background the registrant is not sufficiently familiar with, the registrant is encouraged to seek consultation from knowledgeable colleagues, other professionals, and/or relevant community members including elders and spiritual or religious leaders. Registrants are also encouraged to remain current with evolving literature in this regard, seek relevant professional training and consult clinical practice guidelines.</i></p>	<p>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</p>

			<i>Additional comments for clarification (optional)</i>
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		Measure: 9.1 Applicants meet all College requirements before they are able to practice.	
DOMAIN 6: SUITABILITY TO PRACTICE	STANDARD 9	Required Evidence	College Response
		a. Processes are in place to ensure that those who meet the registration requirements receive a certificate to practice (e.g., how it operationalizes the registration of members, including the review and validation of submitted documentation to detect fraudulent documents, confirmation of information from supervisors, etc.) ¹ .	<div>The College fulfills this requirement:</div> <div>Yes</div> <div><ul style="list-style-type: none">Please insert a link that outlines the policies or processes in place to ensure the documentation provided by candidates meets registration requirements and indicate page number OR please briefly describe in a few words the processes and checks that are carried out.Please insert a link and indicate the page number OR please briefly describe an overview of the process undertaken to review how a College operationalizes its registration processes to ensure documentation provided by candidates meets registration requirements (e.g., communication with other regulators in other jurisdictions to secure records of good conduct, confirmation of information from supervisors, educators, etc.).</div> <div>Documentation requirements for psychology registration and applied behaviour analysis registration are set out in their respective <i>Registration Guidelines</i>. https://cpbao.ca/cpo_resources/psychologist-d-registration-process/ https://cpbao.ca/cpo_resources/supervised-practice-behaviour-analyst-section-d-registration-process/</div> <div>The requirements ensure that documentation in the application process meets the registration requirements. The Application Form requires applicants to provide details of their education and training (undergraduate and graduate level), their language fluency, needed examination accommodation (if any), proposed Ontario supervised practice setting (when applicable), and supervisor details (when applicable). In addition, applicants must indicate any current or past registration/licensure in any regulated profession either in Canada or in another country and complete a Declaration of Good Character as well as an attestation regarding the accuracy of the information in their application form.</div> <div>Academic transcripts and foreign credential evaluations must be submitted to the College directly from the university or credential evaluation service and a Language Fluency score (when applicable) must be submitted to the College directly from the testing agency. Confirmation of current/past registration/licensure must be submitted to the College directly from the licensing agency. Examination accommodation forms must be submitted to the College directly from the applicant and their university or the applicant and their healthcare provider depending upon the nature of accommodation requested. When applicable, proposed supervised practice information must be co-signed by the proposed supervisors and supervisor contact information is required.</div> <div>The College has a policy in place for cases where an applicant is unable to provide a necessary document for reasons beyond their control, this policy is contained in the Registration Guidelines: https://cpbao.ca/cpo_resources/appendix-h-alternative-documentation-policy/</div> <div>The College's policy regarding the <u>Declaration of Good Character</u> sets out the process in place for reviewing cases where an applicant answers “Yes” to any of the conduct questions in their application form.</div>

			<p>Each applicant's degree is reviewed in accordance with the College’s non-exemptible academic requirements to ensure that an applicant has obtained either a doctoral or master's degree from a program that meets the College's requirements.</p> <p>The Registration Guidelines describe in detail the non-exemptible academic requirements for registration as a:</p> <ul style="list-style-type: none">• <u>Psychologist</u>: https://cpbao.ca/cpo_resources/psychologist-e-academic-credentials/• <u>Psychological Associate</u>: https://cpbao.ca/cpo_resources/psychological-associate-section-e-academic-credentials/• <u>Behaviour Analyst</u>: https://cpbao.ca/cpo_resources/supervised-practice-behaviour-analyst-section-g-academic-credentials/
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¹ This measure is intended to demonstrate how a College ensures an applicant meets every registration requirement set out in its registration regulation prior to engaging in the full scope of practice allowed under any certificate of registration, including whether an applicant is eligible to be granted an exemption from a particular requirement.

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			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.
			<i>Additional comments for clarification (optional)</i>	
		b. The College periodically reviews its criteria and processes for determining whether an applicant meets its registration requirements, against best practices (e.g., how a College determines language proficiency, how Colleges detect fraudulent applications or documents including applicant use of third parties, how Colleges confirm registration status in other jurisdictions or professions where relevant etc.).	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please insert a link that outlines the policies or processes in place for identifying best practices to assess whether an applicant meets registration requirements (e.g., how to assess English proficiency, suitability to practice etc.), a link to Council meeting materials where these have been discussed and decided upon and indicate page numbers OR please briefly describe the process and checks that are carried out.• Please provide the date when the criteria to assess registration requirements was last reviewed and updated. <p>The College periodically reviews its criteria and processes for determining that applicants meet the registration requirements. The College's Registration Committee meets in Plenary Session approximately every other month and reviews guidelines and related policies. Creation (and maintenance) of policies and guidelines includes consultation with stakeholders, a review of best practices, and an environmental scan of policies and practices of other regulators.</p> <p>Registration related policies have a review schedule. For example, the Language Fluency Policy was created in 2015 and was last revised by the Registration Committee in January 2023. The Examination Accommodations Policy was created in 2016 and revised in 2024.</p>	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.
			<i>Additional comments for clarification (optional)</i>	

Measure: 9.2 Registrants continuously demonstrate they are competent and practice safely and ethically.		
c. A risk-based approach is used to ensure that currency ² and other competency requirements are monitored and regularly validated (e.g., procedures are in place to verify good character, continuing education, practice hours requirements etc.).	The College fulfills this requirement:	Yes
	<ul style="list-style-type: none">• Please briefly describe the currency and competency requirements registrants are required to meet.• Please briefly describe how the College identified currency and competency requirements.• Please provide the date when currency and competency requirements were last reviewed and updated.• Please briefly describe how the College monitors that registrants meet currency and competency requirements (e.g., self-declaration, audits, random audit etc.) and how frequently this is done. <p>All members, other than those with Retired Certificates of Registration, are required to participate in Self-Assessment, which includes assessment of current competence in their authorized practice. The College's mandatory Continuing Professional Development (CPD) Program then requires that members self-monitor their progress towards goals they have set in self-assessment. These requirements are set by the Quality Assurance Committee and registrant completion is monitored independent of registration processes.</p> <p>Members are required to consider the following in conducting their self-assessments and planning their CPD activities: addressing changes in relevant Legislation, Standards and Guidelines; remedying gaps in knowledge and skills; addressing changes in practice environments; and incorporating standards of practice and advances in technology. These requirements are reviewed on an annual basis, for example in July 2024, by senior staff of the College and the Quality Assurance Committee. Currently, specific CPD requirements are under review to ensure they are attainable and relevant to all registrants across the various practice areas and professions regulated by the College.</p> <p>Self-Assessment Guide: https://cpbao.ca/members/quality-assurance/self-assessment-guide/</p> <p>Continuing Professional Development program: https://cpbao.ca/members/quality-assurance/continuing-professional-development/</p> <p>Members are required to self-declare that they have conducted self-assessment and met the minimum requirements of the CPD program. Member self-assessment and participation in CPD activities are reviewed when members are selected for Peer Assisted Reviews. In addition, any members that do not make a declaration of completion of Self-Assessment and completion of the mandatory requirements for CPD by the due date must provide their completed Self-Assessments and/or CPD documentation, as the case may be, for review by the Quality Assurance Committee. The Committee will also conduct audits of CPD completion at random.</p>	
	If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	
	Choose an item.	

		<i>Additional comments for clarification (optional)</i>
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² A ‘currency requirement’ is a requirement for recent experience that demonstrates that a member’s skills or related work experience is up to date. In the context of this measure, only those currency requirements assessed as part of registration processes are included (e.g., during renewal of a certificate of registration, or at any other time).

Measure:		
9.3 Registration practices are transparent, objective, impartial, and fair.		
	a. The College addressed all recommendations, actions for improvement and next steps from its most recent Audit by the Office of the Fairness Commissioner (OFC).	<div>The College fulfills this requirement:</div> <div><div>Yes</div></div> <div><div><div><div><div></div></div><div>Please insert a link to the most recent assessment report by the OFC OR please provide a summary of outcome assessment report.</div></div><div><div><div></div></div><div>Where an action plan was issued, is it: In Progress</div></div></div></div> <div><div>The last Fair Registration Practices Report by the OFC was in 2023:</div><div>https://cpbao.ca/wp-content/uploads/Fair-Registration-Practices-Report-2023.pdf</div></div> <div><div>The College meets regularly with the OFC to discuss concerns about some aspects of the registration process which may create a barrier for some internationally trained individuals. The College’s Registration Committee and Council have been actively looking at ways in which some aspects of the College’s registration requirements may be modified while still maintaining the College’s commitment to the protection of the public. In 2024 the Council approved changes to some of the examination requirements, such as moving from a high stake to low stakes examination format in some cases (psychology jurisprudence and ethics exam), and removing a maximum limit on the number of attempts per examination.</div></div>

			<i>Additional comments for clarification (if needed)</i>
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DOMAIN 6: SUITABILITY TO PRACTICE	STANDARD 10	Measure: 10.1 The College supports registrants in applying the (new/revised) standards of practice and practice guidelines applicable to their practice.			
		Required Evidence	College Response		
		a. Provide examples of how the College assists registrants in implementing required changes to standards of practice or practice guidelines (beyond communicating the existence of new standard, FAQs, or supporting documents). <u>Further clarification:</u> Colleges are encouraged to support registrants when implementing changes to standards of practice or guidelines. Such activities could include carrying out a follow-up survey on how registrants are adopting updated standards of practice and addressing identifiable gaps.	The College fulfills this requirement:		Met in 2023, continues to meet in 2024
			<ul style="list-style-type: none">Please briefly describe a recent example of how the College has assisted its registrants in the uptake of a new or amended standard:<ul style="list-style-type: none">Name of StandardDuration of period that support was providedActivities undertaken to support registrants% of registrants reached/participated by each activityEvaluation conducted on effectiveness of support providedDoes the College always provide this level of support: Yes <i>If not, please provide a brief explanation:</i> <p>The College’s Practice Advisory Service provides support for members and the public regarding application of the new Standards of Professional Conduct. Following use of the service a survey is sent to evaluate participant satisfaction. 92% of respondents said the advice they received was useful. 100% indicated that the response time was reasonable.</p> <p>After the Standards were approved by Council, A Q&A document was created to assist members with common questions and this was promoted in the July, 2024 Headlines article, the College’s quarterly news publication.</p> <p>Notification of the new Standards was posted on the website for draft consultation. Also, a mass email was sent to all members, reaching 100% of registrants when the Standards went live.</p> <p>Following publication of the revised Standards of Professional Conduct, 2024, the College received many questions from registrants and other stakeholders with an interest in the regulation of psychology and applied behaviour analysis. The College created a specific email account for questions regarding the Standards which were compiled into a single document. Within the document and over the course of 22 pages, answers are provided to questions regarding a variety of Standards. This document was highlighted in the July 2024 edition of HeadLines.</p> <p>With the introduction of ABA regulations, the College continued to meet with employers of Behaviour Analysts for Practice Advice to inform their clinical operations (on an as needed basis).</p>		
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?		Choose an item.

[illegible]

Measure: 10.2 The College effectively administers the assessment component(s) of its QA Program in a manner that is aligned with right touch regulation ³ .		
	a. The College has processes and policies in place outlining: i. how areas of practice that are evaluated in QA assessments are identified in order to ensure the most impact on the quality of a registrant’s practice;	The College fulfills this requirement:
		Met in 2023, continues to meet in 2024
		<ul style="list-style-type: none">• Please list the College’s priority areas of focus for QA assessment and briefly describe how they have been identified OR please insert a link to the website where this information can be found and indicate the page number.• Is the process taken above for identifying priority areas codified in a policy: Choose an item.• <i>If yes, please insert link to the policy.</i> <p>In 2024, the Quality Assurance Committee reviewed feedback provided by the Applied Behaviour Analysis Working Group regarding amendments to the requirements of the Quality Assurance Program.</p> <p>As a result, effective July 2024 there were <u>several changes</u> made to the CPD program requirements, which aim to support engagement in a variety of professional development and continuing education mediums to maintain member competency. The requirements apply to both practices of psychology and applied behaviour analysis. One of the aims of the revision was to minimize disruption for certified behaviour analysts (BACB) and ensure that the new requirements were attainable for this group. Another goal was to make the CPD requirements more applicable to everyone’s practice circumstances. For example, all registrants that provide formal supervision must participate in a minimum of 3 hours per cycle of continuing education or professional development activities which include content pertaining to the maintenance or enhancement of their supervisory practices or skills. Changes to the requirements were shared through the College <u>newsletter</u> and e-mails.</p> <p>In 2025 the College will continue to review the composition of QA tools and requirements and make improvements to maximize their impact on a registrant’s practice quality and incorporate principles of Right-Touch regulation.</p>
		<div>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?<div>Choose an item.</div></div>
		Additional comments for clarification (optional)

³ “Right touch” regulation is an approach to regulatory oversight that applies the minimal amount of regulatory force required to achieve a desired outcome. (Professional Standards Authority Right Touch Regulation. <https://www.professionalstandards.org.uk/publications/right-touch-regulation>).

		ii. details of how the College uses a right touch, evidence informed approach to determine which registrants will undergo an assessment activity (and which type of multiple assessment activities); and	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please insert a link to document(s) outlining details of right touch approach and evidence used (e.g., data, literature, expert panel) to inform assessment approach and indicate page number(s). OR please briefly describe right touch approach and evidence used.• Please provide the year the right touch approach was implemented OR when it was evaluated/updated (if applicable). <i>If evaluated/updated, did the college engage the following stakeholders in the evaluation:</i><ul style="list-style-type: none">– <i>Public</i> No– <i>Employers</i> No– <i>Registrants</i> Yes– <i>other stakeholders</i> No	
			Right-touch regulation forms part of CPBAO’s strategic plan . As such, principles of Right-Touch Regulation are incorporated into all the College’s core duties and processes, including Quality Assurance.	
			In 2024 the QA Committee initiated a review of the current QA format and requirements. The Committee is currently in the process of revising the overall QA requirements for a modernized program that incorporates principles of Right-Touch Regulation. This will include reviewing how registrants are selected to participate in QA activities and which types of activities fulfill standard QA requirements, ensuring the QA program is targeted, proportionate and agile in effort to maximize QA’s impact on a registrant’s practice quality.	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.
		iii. criteria that will inform the remediation activities a registrant must undergo based on the QA assessment, where necessary.	<i>Additional comments for clarification (optional)</i>	
			In 2025, the QA Committee will continue its modernization efforts, updating QA requirements to ensure they are aligned with a Right-touch approach.	
			The College fulfills this requirement:	Met in 2023, continues to meet in 2024
			<ul style="list-style-type: none">• Please insert a link to the document that outlines criteria to inform remediation activities and indicate page number OR list criteria.	
			Same as 2023 - The Quality Assurance Committee may determine that remediation activities are required following its review of information submitted by the Assessor. Remediation may be required when there are concerns related to registrant knowledge, skill, and judgement. The pathways to remediation are reviewed by the Committee during its annual orientation , (slides 14-28). The criteria for recommending remediation are also shared with Peer Assessors as shown in the Peer Assisted Reviewer Training Presentation (slide 7).	
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>	Choose an item.

		Additional comments for clarification (optional)	
		Measure: 10.3 The College effectively remediates and monitors registrants who demonstrate unsatisfactory knowledge, skills, and judgement.	
	a. The College tracks the results of remediation activities a registrant is directed to undertake as part of any College committee and assesses whether the registrant subsequently demonstrates the required knowledge, skill and judgement while practicing.	The College fulfills this requirement:	Yes
		<ul style="list-style-type: none">• Please insert a link to the College’s process for monitoring whether registrant’s complete remediation activities OR please briefly describe the process.• Please insert a link to the College’s process for determining whether a registrant has demonstrated the knowledge, skills and judgement following remediation OR please briefly describe the process. <p>Same as 2023 - The Quality Assurance Committee either requires remediation or seeks voluntary remedial undertakings from members and conducts follow-up when remedial activity is recommended by Assessors in the course of a Peer Assisted Review or when review of documentation indicates such a need. When a remedial activity is required by the Committee, College staff monitor the disposition on a case-by-case basis and discuss progress at regular Quality Assurance staff meetings. The member subject to the requirement, or when a mentor is retained to assist the Committee, the mentor is asked to provide confirmation of successful completion of the requirement and documentation of this is provided to the Committee. If the remediation is not achieved at the level expected by the Quality Assurance Committee, the matter may be referred to by the Committee for investigation by the ICRC. Remedial outcomes for both ICRC and Discipline involve reporting to the Registrar on an interim and/or final basis. The reports will come from members themselves if the remediation is self-directed. Otherwise, the reports will come from a coach or instructor engaged in the remedial activity with the member. This reporting allows the Registrar to determine whether the goals of remediation have been appropriately met.</p>	
		If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	Choose an item.
		Additional comments for clarification (if needed)	

DOMAIN 6: SUITABILITY TO PRACTICE	STANDARD 11	Measure 11.1 The College enables and supports anyone who raises a concern about a registrant.	
		Required Evidence	College Response
		a. The different stages of the complaints process and all relevant supports available to complainants are:	<div>The College fulfills this requirement: Yes</div> <ul style="list-style-type: none"> Please insert a link to the College’s website that clearly describes the College’s complaints process including, options to resolve a complaint, the potential outcomes associated with the respective options and supports available to the complainant. Please insert a link to the policies/procedures for ensuring all relevant information is received during intake OR please briefly describe the policies and procedures if the documents are not publicly accessible. <ul style="list-style-type: none"> Complaints and Reports to the College Facilitated Resolution Process FAQ: What action can the ICRC take? The College's Risk Assessment Framework also indicates what outcomes are possible in relation to risks identified. Funding For Therapy <p>Policies/procedures for ensuring all relevant information is received during intake: Investigations staff reviews all complaints and reports with an internal investigation plan. This assists staff in identifying all allegations, potential witnesses and sources of information. The investigation plan also prompts staff to determine whether third parties ought to be informed (e.g. another regulator, CAS) and prompts thinking about whether a request to appoint an Investigator or to direct that the Registrar make an Interim Order of Suspension might be considered by the ICRC.</p>
		ii. clearly communicated directly to complainants who are engaged in the complaints process, including what a complainant can expect at each stage and the	<div>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period? Choose an item.</div>

		supports available to them (e.g., funding for sexual abuse therapy); and;	<i>Additional comments for clarification (optional)</i>
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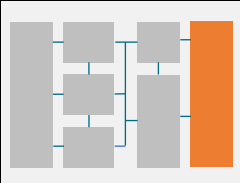
		iii. evaluated by the College to ensure the information provided to complainants is clear and useful.	The College fulfills this requirement:		Yes	
			<ul style="list-style-type: none">Please provide details of how the College evaluates whether the information provided to complainants is clear and useful. <p>ICRC staff evaluates whether public information provided to complainants is clear by ensuring that documents are written at a grade 10 level, as measured by "readable.io", a web-based service measuring readability. The ICRC also has a feedback form available directly on its website which provides an opportunity for complainants to provide information to the College about their experience with the complaints process (temporarily offline due to unsolicited communications). Every complainant has personal contact with a staff case manager and provided with telephone contact information, allowing direct contact, in addition to all the written information available.</p>			
			<i>If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.</i>			
		b. The College responds to 90% of inquiries from the public within 5 business days, with follow-up timelines as necessary.	The College fulfills this requirement:		Yes	
			Please insert rate (see Companion Document: Technical Specifications for Quantitative CPMF Measures).			
			Rate is 206/214 or 96%.			
			<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>		Choose an item.	
			<i>Additional comments for clarification (optional)</i>			

		c. Demonstrate how the College supports the public during the complaints process to ensure that the process is inclusive and transparent (e.g., translation services are available, use of technology, access outside regular business hours, transparency in decision-making to make sure the public understand how the College makes decisions that affect them etc.).	The College fulfills this requirement:		Yes	
			<ul style="list-style-type: none">• Please list supports available for the public during the complaints process.• Please briefly describe at what points during the complaints process that complainants are made aware of supports available. <p>Anyone who alleges sexual abuse by a member, or a supervisee of a member is offered the support of an independent professional retained by the College. This professional offers guidance with respect to College processes and will assist in connecting them to other services. This support is offered as soon as sexual abuse is identified as an allegation in a complaint or report.</p> <p>Where language or communication is identified as a barrier, College staff will offer to arrange interpretation and/or transcription services to assist the complainant in expressing their concerns. In addition, the College will offer to fund legal support to witnesses who are involved in a Disciplinary hearing when a motion has been made to obtain the witness’ confidential health records. It will also fund professional support for witnesses who require it in order to testify at a hearing.</p> <p>Where barriers are identified to making a complaint or report, the College employs strategies to assist members of the public. The College will mail hard copies of its complaint form to those who cannot access the online version, interview people in person should they want to express themselves in that way, and accept complaints left by voice mail, and then follow up in writing or over the phone.</p>			
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?		Choose an item.	
			Additional comments for clarification (optional)			
		Measure: 11.2 All parties to a complaint and discipline process are kept up to date on the progress of their case, and complainants are supported to participate effectively in the process.				
		a. Provide details about how the	The College fulfills this requirement:		Yes	

		<p>College ensures that all parties are regularly updated on the progress of their complaint or discipline case, including how complainants can contact the College for information (e.g., availability and accessibility to relevant information, translation services etc.).</p>	<ul style="list-style-type: none">• Please insert a link to document(s) outlining how complainants can contact the College during the complaints process and indicate the page number(s) OR please provide a brief description.• Please insert a link to document(s) outlining how complainants are supported to participate in the complaints process and indicate the page number(s) OR please provide a brief description. <p>The Complaints and Reports page on the College website has several references to the Investigation department’s contact phone number and email. Complaint and Report forms can be filled out and submitted directly on the website. There is also a feedback form available on the website.</p> <p>College staff provide complainants with updates in a number of ways. Complainants are provided with a copy of the member's response to the complaint. In the unusual event that a complainant will not receive a copy of the response, they are informed of such and of the next steps in the investigation. Complainants are also notified of the progress of the investigation if the case is not disposed of after 150 days, and thereafter at 210 days, 240 days, etc. in accordance with the requirements of the Health Professions Procedural Code, 1991.</p>	
			<p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>	<p>Choose an item.</p>

DOMAIN 6: SUITABILITY TO PRACTICE			Additional comments for clarification (optional)	
	STANDARD 12	Measure: 12.1 The College addresses complaints in a right touch manner.		
		a. The College has accessible, up-to-date, documented guidance setting out the framework for assessing risk and acting on complaints, including the prioritization of investigations, complaints, and reports (e.g., risk matrix, decision matrix/tree, triage protocol).	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">• Please insert a link to guidance document and indicate the page number OR please briefly describe the framework and how it is being applied.• Please provide the year when it was implemented OR evaluated/updated (if applicable). <p>The ICRC uses a risk assessment framework to assess complaints and reports, which is accessible on the College website. This risk assessment framework was implemented in 2017.</p>	
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	
		Additional comments for clarification (optional)		

DOMAIN 6: SUITABILITY TO PRACTICE	STANDARD 13	Measure:			
		13.1 The College demonstrates that it shares concerns about a registrant with other relevant regulators and external system partners (e.g. law enforcement, government, etc.).			
		a. The College’s policy outlining consistent criteria for disclosure and examples of the general circumstances and type of information that has been shared between the College and other relevant system partners, within the legal framework, about concerns with individuals and any results.	The College fulfills this requirement:	Yes	
			<ul style="list-style-type: none">• Please insert a link to the policy and indicate page number OR please briefly describe the policy.• Please provide an overview of whom the College has shared information with over the past year and the purpose of sharing that information (i.e., general sectors of system partner, such as ‘hospital’, or ‘long-term care home’). <p>Where allegations against a member are received by the College and are of a nature that may appear to warrant criminal and/or provincial offence charges the following policy is applicable: <u>Policy II-3(v): Reporting to Police and Other Authorities</u>.</p> <p>Investigations staff also have an internal procedure for reporting information to the CAS where the reporting requirement under the <i>Child, Youth and Family Services Act, 2017</i>, may arise. In addition, the College has a reporting protocol with the CRPO and the OCSWSSW with respect to members of those other Colleges who are providing psychological services under the supervision of a member of the College of Psychologists and Behaviour Analysts of Ontario.</p> <p>Where there is information about another regulated health professional which may indicate incapacity or other concerns, the College will normally, upon consultation with the Registrar, report the information to be reported to the relevant regulator. Where the College learns that a member or former member is registered in another jurisdiction, the College will inform the other regulator(s) about investigations and outcomes of investigations.</p>		
			If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?		Choose an item.
Additional comments for clarification (if needed)					

		Measure: 14.1 Council uses Key Performance Indicators (KPIs) in tracking and reviewing the College’s performance and regularly reviews internal and external risks that could impact the College’s performance.											
DOMAIN 7: MEASUREMENT, REPORTING & IMPROVEMENT	STANDARD 14	Required Evidence	College Response										
		a. Outline the College’s KPIs, including a clear rationale for why each is important.	<table><tr><td>The College fulfills this requirement:</td><td>Partially</td></tr><tr><td colspan="2"><ul style="list-style-type: none">Please insert a link to a document that list College’s KPIs with an explanation for why these KPIs have been selected (including what the results the respective KPIs tells, and how it relates to the College meeting its strategic objectives and is therefore relevant to track), a link to Council meeting materials where this information is included and indicate page number OR list KPIs and rationale for selection.<p>The Council approved a new Strategic Plan at their <u>June 16, 2023 meeting</u> (pgs. 140-144). The Council approved the use of KPIs in order to demonstrate objective data of College performance. Given the significant changes at the College with the onboarding of ABA, initial KPIs consisted of several deliverables and linked to the Registrar’s performance evaluation by the Executive Committee. KPIs will continue to be developed and quantified over the next year.</p><p>KPIs</p><ul style="list-style-type: none">Successfully develop all infrastructure required to regulate Behaviour Analysts – CompletedPresent the Master’s discontinuation white paper to Council and MOH for review and response – Approved at the <u>March 2024 Council meeting</u> (pg 202); discussions with the MOH and OFC are ongoingComplete the Health Equity Impact Assessment - <u>Council approved at June 2024 meeting</u>Develop a plan to shorten ICRC timelines: Additional case manager resources were provided in 2024. The metric being monitored is the proportion of cases less than 150 days, between 150 and 210 days, and beyond 210 daysDevelop plans to respond to the concerns raised by the OFC with regard to Registration practices<ul style="list-style-type: none">Mr. Glasberg presented to Council at their Training Day on September 26, 2024, regarding his assessmentAnti-Racism Training from the Health Equity Office of the CAMH: Confirmed for all members of the registration committee in February 2025Informed Directors of Clinical Training of OFC risk rating – November 14, 2024Modifications to psychology’s Jurisprudence and Ethics Examination were approved at the <u>December 2024 Council meeting</u>: plan to transition to low stakes, unlimited attempts</td></tr><tr><td colspan="2"><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></td></tr><tr><td colspan="2">KPIs will be further developed during the 2025 calendar year.</td></tr><tr><td colspan="2">Yes</td></tr></table>	The College fulfills this requirement:	Partially	<ul style="list-style-type: none">Please insert a link to a document that list College’s KPIs with an explanation for why these KPIs have been selected (including what the results the respective KPIs tells, and how it relates to the College meeting its strategic objectives and is therefore relevant to track), a link to Council meeting materials where this information is included and indicate page number OR list KPIs and rationale for selection. <p>The Council approved a new Strategic Plan at their <u>June 16, 2023 meeting</u> (pgs. 140-144). 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		The College fulfills this requirement:	Partially										
		<ul style="list-style-type: none">Please insert a link to a document that list College’s KPIs with an explanation for why these KPIs have been selected (including what the results the respective KPIs tells, and how it relates to the College meeting its strategic objectives and is therefore relevant to track), a link to Council meeting materials where this information is included and indicate page number OR list KPIs and rationale for selection. <p>The Council approved a new Strategic Plan at their <u>June 16, 2023 meeting</u> (pgs. 140-144). The Council approved the use of KPIs in order to demonstrate objective data of College performance. Given the significant changes at the College with the onboarding of ABA, initial KPIs consisted of several deliverables and linked to the Registrar’s performance evaluation by the Executive Committee. KPIs will continue to be developed and quantified over the next year.</p> <p>KPIs</p> <ul style="list-style-type: none">Successfully develop all infrastructure required to regulate Behaviour Analysts – CompletedPresent the Master’s discontinuation white paper to Council and MOH for review and response – Approved at the <u>March 2024 Council meeting</u> (pg 202); discussions with the MOH and OFC are ongoingComplete the Health Equity Impact Assessment - <u>Council approved at June 2024 meeting</u>Develop a plan to shorten ICRC timelines: Additional case manager resources were provided in 2024. The metric being monitored is the proportion of cases less than 150 days, between 150 and 210 days, and beyond 210 daysDevelop plans to respond to the concerns raised by the OFC with regard to Registration practices<ul style="list-style-type: none">Mr. Glasberg presented to Council at their Training Day on September 26, 2024, regarding his assessmentAnti-Racism Training from the Health Equity Office of the CAMH: Confirmed for all members of the registration committee in February 2025Informed Directors of Clinical Training of OFC risk rating – November 14, 2024Modifications to psychology’s Jurisprudence and Ethics Examination were approved at the <u>December 2024 Council meeting</u>: plan to transition to low stakes, unlimited attempts											
		<i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>											
KPIs will be further developed during the 2025 calendar year.													
Yes													

			Additional comments for clarification (if needed)	
		b. The College regularly reports to Council on its performance and risk review against: i. stated strategic objectives (i.e., the objectives set out in a College's strategic plan); ii. regulatory outcomes (i.e., operational indicators/targets with reference to the goals we are expected to achieve under the RHPA); and iii. its risk management approach.	The College fulfills this requirement:	Yes
			<ul style="list-style-type: none">Please insert a link to Council meeting materials where the College reported to Council on its progress against stated strategic objectives, regulatory outcomes and risks that may impact the College's ability to meet its objectives and the corresponding meeting minutes and indicate the page number. The most recent report is on page 122 of the December 2024 Council Meeting materials package . The College's achievement of its Strategic Directions is reviewed at each Executive Committee and Council meeting as presented on pages 125-127 of the December Council meeting package linked above. The College has an integrated Risk Management Plan which reports on three areas of risk: Risks to Office/Staff; Risks to the College (reputation/self-regulation); and Risks to the Public (from members).	
			If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?	Choose an item.
			Additional comments for clarification (if needed)	

Measure:		
14.2 Council directs action in response to College performance on its KPIs and risk reviews.		
a. Council uses performance and risk review findings to identify where improvement activities are needed. <div><div></div><div>Benchmarked Evidence</div><div></div></div>	The College fulfills this requirement:	Yes
	<ul style="list-style-type: none">Please insert a link to Council meeting materials where the Council used performance and risk review findings to identify where the College needs to implement improvement activities and indicate the page number. <p>The latest risk management report in 2024, which contains this information, can be found beginning on page 122 of the December 2024 Council Meeting materials.</p>	
	If the response is “partially” or “no”, describe the College’s plan to fully implement this measure. Outline the steps (i.e., drafting policies, consulting stakeholders, or reviewing/revising existing policies or procedures, etc.) the College will be taking, expected timelines and any barriers to implementation.	
Measure:		
14.3 The College regularly reports publicly on its performance.		
a. Performance results related to a College’s strategic objectives and regulatory outcomes are made public on the College’s website.	The College fulfills this requirement:	Yes
	<ul style="list-style-type: none">Please insert a link to the College’s dashboard or relevant section of the College’s website. <p>The College monitors performance related to its Strategic Directions routinely at both Executive Committee and Council meetings. In addition, the Council receives reports from the College statutory and non-statutory Committees describing the Committees' work for the quarter under review, be it related to the College's finances, individuals registered, quality assurance reviews and results, ICRC timelines and the nature of complaints and dispositions, and Discipline Committee Hearings. The Committees monitor the College's regulatory processes and bring forward policy recommendations when amendments are noted which would improve these regulatory activities. The Committee reports, as well as any proposed policies, are made public in the Council meeting materials posted on the website in advance of each meeting.</p> <p>CPBAO Annual Reports College Performance Measurement Framework Reports Council Meeting Materials, Agenda, and Minutes Fair Registration Practices Report</p>	
	If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?	
		Choose an item.

			<i>Additional comments for clarification (if needed)</i>
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Part 2: Context Measures

The following tables require Colleges to provide **statistical data** that will provide helpful context about a College’s performance related to the standards. The context measures are non-directional, which means no conclusions can be drawn from the results in terms of whether they are ‘good’ or ‘bad’ without having a more in-depth understanding of what specifically drives those results.

In order to facilitate consistency in reporting, a recommended method to calculate the information is provided in the companion document “Technical Specifications for Quantitative College Performance Measurement Framework Measures.” However, recognizing that at this point in time, the data may not be readily available for each College to calculate the context measure in the recommended manner (e.g., due to differences in definitions), a College can report the information in a manner that is conducive to its data infrastructure and availability.

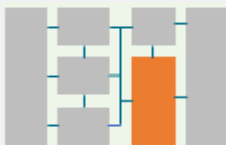
In those instances where a College does not have the data or the ability to calculate the context measure at this point in time it should state: ‘Nil’ and indicate any plans to collect the data in the future.

Where deemed appropriate, Colleges are encouraged to provide additional information to ensure the context measure is properly contextualized to its unique situation. Finally, where a College chooses to report a context measure using a method other than the recommended method outlined in the following Technical Document, the College is asked to provide the method in order to understand how the information provided was calculated.

The ministry has also included hyperlinks of the definitions to a glossary of terms for easier navigation.

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Table 1 – Context Measure 1

DOMAIN 6: SUITABILITY TO PRACTICE			
STANDARD 10			
Statistical data collected in accordance with the recommended method or the College's own method: Choose an item. <i>If a College method is used, please specify the rationale for its use:</i>			
Context Measure (CM)			
CM 1. Type and distribution of QA/QI activities and assessments used in CY 2024*		<p><i>What does this information tell us? Quality assurance (QA) and Quality Improvement (QI) are critical components in ensuring that professionals provide care that is safe, effective, patient-centred and ethical. In addition, health care professionals face a number of ongoing changes that might impact how they practice (e.g., changing roles and responsibilities, changing public expectations, legislative changes).</i></p> <p>The information provided here illustrates the diversity of QA activities the College undertook in assessing the competency of its registrants and the QA and QI activities its registrants undertook to maintain competency in CY 2024. The diversity of QA/QI activities and assessments is reflective of a College’s risk-based approach in executing its QA program, whereby the frequency of assessment and activities to maintain competency are informed by the risk of a registrant not acting competently. Details of how the College determined the appropriateness of its assessment component of its QA program are described or referenced by the College in Measure 10.2(a) of Standard 10.</p>	
Type of QA/QI activity or assessment:	#		
i. Self-Assessment Guide and Continuing Professional Development Plan	2369		
ii. Self-Assessment Guide and Continuing Professional Development Plan Reviews (Failure to submit Declaration of Completion by Deadline)	17		
iii. Continuing Professional Development Program	4486		
iv. Continuing Professional Development Program Audit (Failure to submit Declaration of Completion by Deadline)<Insert QA activity or assessment>	12		
v. Random Continuing Professional Development Program Audit (Random Selection)	39		
vi. Peer Assisted Review	7		
vii. Targeted assessment by a College-appointed assessor	0		
-			
viii. Specified Continuing Education or Remediation Program	0		
ix. Undertaking	NR		

<i>* Registrants may be undergoing multiple QA activities over the course of the reporting period. While future iterations of the CPMF may evolve to capture the different permutations of pathways registrants may undergo as part of a College’s QA Program, the requested statistical information recognizes the current limitations in data availability today and is therefore limited to type and distribution of QA/QI activities or assessments used in the reporting period.</i>	
<p><i>Additional comments for clarification (if needed)</i></p> <p>i. The number of registrants required to complete the Self-Assessment Guide and Continuing Professional Development Plan and submit a Declaration of Completion.</p> <p>ii. The number of Self-Assessment Guide and Continuing Professional Development Plan reviews conducted by the QA Committee to determine compliance following a late or missed Declaration of Completion</p> <p>iii. The number of registrants required to participate in the Continuing Professional Development Program (CPD). Although only one cycle group was required to make their Declarations of Completion in 2024, all registrants except for those with a Retired Certificate must participate in the CPD Program on an ongoing basis.</p> <p>iv. The number of Continuing Professional Development Program audits conducted by the QA Committee to determine compliance following a late or missed Declaration of Completion.</p> <p>v. The number of Continuing Professional Development Program audits conducted by the QA Committee to determine compliance based upon a random selection of registrants from the membership.</p> <p>vi. The number of Peer Assisted Reviews completed under s.4(1) of the General Regulation of the Psychology and Applied Behaviour Analysis Act, 2021.</p> <p>vii. The number of assessments completed under s.81 of the Health Professions Procedural Code in response to QA Committee decision.</p> <p>viii. The number of Specified Continuing Education or Remediation Programs completed in response to QA Committee decision.</p> <p>The number of Undertakings completed in response to a QA Committee decision.</p>	

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Table 2 – Context Measures 2 and 3

DOMAIN 6: SUITABILITY TO PRACTICE			
STANDARD 10			
Statistical data collected in accordance with the recommended method or the College own method: Choose an item.			
If a College method is used, please specify the rationale for its use:			
Context Measure (CM)			
	#	%	What does this information tell us? If a registrant’s knowledge, skills, and judgement to practice safely, effectively, and ethically have been assessed or reassessed and found to be unsatisfactory or a registrant is non-compliant with a College’s QA Program, the College may refer them to the College’s QA Committee.
CM 2. Total number of registrants who participated in the QA Program CY 2024	4481	99.8	
CM 3. Rate of registrants who were referred to the QA Committee as part of the QA Program where the QA Committee directed the registrant to undertake remediation in CY 2024.	NR	NR	The information provided here shows how many registrants who underwent an activity or assessment as part of the QA program where the QA Committee deemed that their practice is unsatisfactory and as a result have been directed to participate in specified continuing education or remediation program as of the start of CY 2024, understanding that some cases may carry over.
NR			
Additional comments for clarification (if needed)			
CM2: Due to data limitations, new Behaviour Analyst members of the College that registered to practice the new regulated profession on or after July 1, 2024 are not reflected in this figure. This data will be reflected in the next iteration of the CPMF Report.			
The percentage of participants excludes the number of individuals that resigned from the College during a QA assessment.			

Table 3 – Context Measure 4

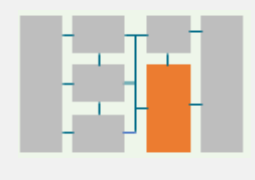
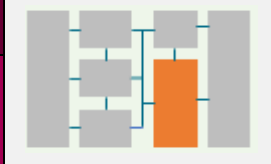
DOMAIN 6: SUITABILITY TO PRACTICE			
STANDARD 10 J			
Statistical data collected in accordance with the recommended method or the College’s own method: Choose an item.			
If a College method is used, please specify the rationale for its use:			
Context Measure (CM)			
CM 4. Outcome of remedial activities as at the end of CY 2024:**	#	%	What does this information tell us? This information provides insight into the outcome of the College’s remedial activities directed by the QA Committee and may help a College evaluate the effectiveness of its “QA remediation activities”. Without additional context no conclusions can be drawn on how successful the QA remediation activities are, as many factors may influence the practice and behaviour registrants (continue to) display.
I. Registrants who demonstrated required knowledge, skills, and judgement following remediation*	NR	NR	
II. Registrants still undertaking remediation (i.e., remediation in progress)	NR	NR	
NR			
* This number may include registrants who were directed to undertake remediation in the previous year and completed reassessment in CY 2024.			
**This measure may include any outcomes from the previous year that were carried over into CY 2024.			
Additional comments for clarification (if needed)			
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Table 4 – Context Measure 5

DOMAIN 6: SUITABILITY TO PRACTICE

STANDARD 12



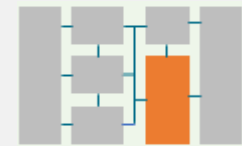
Statistical data is collected in accordance with the recommended method or the College’s own method: Choose an item.
If a College method is used, please specify the rationale for its use:

Context Measure (CM)					
CM 5. Distribution of formal complaints and Registrar’s Investigations by theme in CY 2024	Formal received	Complaints	Registrar initiated	Investigations	<i>What does this information tell us?</i> This information facilitates transparency to the public, registrants and the ministry regarding the most prevalent themes identified in formal complaints received and Registrar’s Investigations undertaken by a College.
Themes:	#	%	#	%	
I. Advertising	NR	NR	NR	NR	
II. Billing and Fees	17	3%	NR	NR	
III. Communication	48	9%	NR	NR	
IV. Competence / Patient Care	143	27%	2	12%	
V. Intent to Mislead including Fraud	23	4%	NR	NR	
VI. Professional Conduct & Behaviour	206	39%	9	53%	
VII. Record keeping	11	2%	NR	NR	
VIII. Sexual Abuse	5	1%	1	6%	
IX. Harassment / Boundary Violations	46	9%	2	12%	
X. Unauthorized Practice	14	3%	1	6%	
XI. Qther <please specify>	17	3%	2	12%	
Total number of formal complaints and Registrar’s Investigations**	533	100%	17	101%	

Formal Complaints NR Registrar’s Investigation <i>**The requested statistical information (number and distribution by theme) recognizes that formal complaints and Registrar’s Investigations may include allegations that fall under multiple themes identified above, therefore when added together the numbers set out per theme may not equal the total number of formal complaints or Registrar’s Investigations.</i>	
<i>Additional comments for clarification (if needed)</i>	

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Table 5 – Context Measures 6, 7, 8 and 9

DOMAIN 6: SUITABILITY TO PRACTICE				
STANDARD 12				
Statistical data collected in accordance with the recommended method or the College’s own method: Choose an item.				
If a College method is used, please specify the rationale for its use:				
Context Measure (CM)				
CM 6.	Total number of formal complaints that were brought forward to the ICRC in CY 2024	147		What does this information tell us? The information helps the public better understand how formal complaints filed with the College and Registrar’s Investigations are disposed of or resolved. Furthermore, it provides transparency on key sources of concern that are being brought forward to the College’s Inquiries, Complaints and Reports Committee.
CM 7.	Total number of ICRC matters brought forward as a result of a Registrar’s Investigation in CY 2024	28		
CM 8.	Total number of requests or notifications for appointment of an investigator through a Registrar’s Investigation brought forward to the ICRC that were approved in CY 2024	8		
CM 9.	Of the formal complaints and Registrar’s Investigations received in CY 2024**:	#	%	
I.	Formal complaints that proceeded to Alternative Dispute Resolution (ADR)	NR	NR	
II.	Formal complaints that were resolved through ADR	NR	NR	
III.	Formal complaints that were disposed of by ICRC	15	10%	
IV.	Formal complaints that proceeded to ICRC and are still pending	126	81%	
V.	Formal complaints withdrawn by Registrar at the request of a complainant	6	4%	
VI.	Formal complaints that are disposed of by the ICRC as frivolous and vexatious	6	4%	

VII. Formal complaints and Registrar’s Investigations that are disposed of by the ICRC as a referral to the Discipline Committee	NR	NR	
<p>ADR Disposal Formal Complaints Formal Complaints withdrawn by Registrar at the request of a complainant NR Registrar’s Investigation</p> <p><i># May relate to Registrar’s Investigations that were brought to the ICRC in the previous year.</i> <i>** The total number of formal complaints received may not equal the numbers from 9(i) to (vi) as complaints that proceed to ADR and are not resolved will be reviewed at the ICRC, and complaints that the ICRC disposes of as frivolous and vexatious and a referral to the Discipline Committee will also be counted in total number of complaints disposed of by the ICRC.</i></p>			
<p><i>Additional comments for clarification (if needed)</i></p>			

Table 6 – Context Measure 10

DOMAIN 6: SUITABILITY TO PRACTICE							
STANDARD 12							
Statistical data collected in accordance with the recommended method or the College’s own method: Choose an item.							
If a College method is used, please specify the rationale for its use:							
Context Measure (CM)							
CM 10. Total number of ICRC decisions in 2024							
Distribution of ICRC decisions by theme in 2024*	# of ICRC Decisions++						
Nature of Decision	Take no action	Proves advice or recommendations	Issues a caution (oral or written)	Orders a specified continuing education or remediation program	Agrees to undertaking	Refers specified allegations to the Discipline Committee	Takes any other action it considers appropriate that is not inconsistent with its governing legislation, regulations, or by-laws.
I. Advertising	0	1	0	0	0	0	0
II. Billing and Fees	12	1	0	0	4	3	0
III. Communication	20	9	0	0	1	0	0
IV. Competence / Patient Care	67	14	0	0	12	12	0
V. Intent to Mislead Including Fraud	14	5	0	0	4	3	0
VI. Professional Conduct & Behaviour	96	20	0	0	13	21	3
VII. Record Keeping	2	2	0	0	1	1	2
VIII. Sexual Abuse	1	0	0	0	1	4	0
IX. Harassment / Boundary Violations	19	3	0	0	4	5	0

X.	Unauthorized Practice	5	3	0	0	4	3	0
XI.	Other <please specify>	5	2	0	0	7	1	0
<p>• Number of decisions are corrected for formal complaints ICRC deemed frivolous and vexatious AND decisions can be regarding formal complaints and registrar’s investigations brought forward prior to 2024.</p> <p>++ The requested statistical information (number and distribution by theme) recognizes that formal complaints and Registrar’s Investigations may include allegations that fall under multiple themes identified above, therefore when added together the numbers set out per theme may not equal the total number of formal complaints or registrar’s investigations, or decisions.</p> <p>NR</p>								
<p>What does this information tell us? This information will help increase transparency on the type of decisions rendered by ICRC for different themes of formal complaints and Registrar’s Investigation and the actions taken to protect the public. In addition, the information may assist in further informing the public regarding what the consequences for a registrant can be associated with a particular theme of complaint or Registrar investigation and could facilitate a dialogue with the public about the appropriateness of an outcome related to a particular formal complaint.</p>								
<p>Additional comments for clarification (if needed)</p>								

Table 7 – Context Measure 11

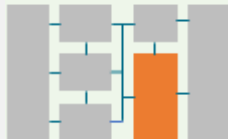
DOMAIN 6: SUITABILITY TO PRACTICE			
STANDARD 12			
Statistical data collected in accordance with the recommended method or the College own method: Choose an item.			
If College method is used, please specify the rationale for its use:			
Context Measure (CM)			
CM 11. 90 th Percentile disposal of:	Days	What does this information tell us? This information illustrates the maximum length of time in which 9 out of 10 formal complaints or Registrar’s investigations are being disposed by the College.	
I. A formal complaint in working days in CY 2024	802.6	The information enhances transparency about the timeliness with which a College disposes of formal complaints or Registrar’s investigations. As such, the information provides the public, ministry, and other stakeholders with information regarding the approximate timelines they can expect for the disposal of a formal complaint filed with, or Registrar’s investigation undertaken by, the College.	
II. A Registrar’s investigation in working days in CY 2024	1919.8		
Disposal			
Additional comments for clarification (if needed)			
-			

Table 8 – Context Measure 12

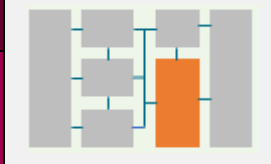
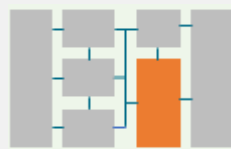
DOMAIN 6: SUITABILITY TO PRACTICE			
STANDARD 12			
Statistical data collected in accordance with the recommended method or the College’s own method: Choose an item.			
If a College method is used, please specify the rationale for its use:			
Context Measure (CM)			
CM 12. 90th Percentile disposal of:	Days	What does this information tell us? This information illustrates the maximum length of time in which 9 out of 10 uncontested discipline hearings and 9 out of 10 contested discipline hearings are being disposed. The information enhances transparency about the timeliness with which a discipline hearing undertaken by a College is concluded. As such, the information provides the public, ministry, and other stakeholders with information regarding the approximate timelines they can expect for the resolution of a discipline proceeding undertaken by the College.	
I. An uncontested discipline hearing in working days in CY 2024	NR		
II. A contested discipline hearing in working days in CY 2024	NR		
Disposal Uncontested Discipline Hearing Contested Discipline Hearing			
Additional comments for clarification (if needed)			
-			

Table 9 – Context Measure 13

DOMAIN 6: SUITABILITY TO PRACTICE

STANDARD 12
Z



Statistical data collected in accordance with the recommended method or the College’s own method: Choose an item.

If College method is used, please specify the rationale for its use:

Context Measure (CM)		
CM 13. Distribution of Discipline finding by type*		<div>What does this information tell us? This information facilitates transparency to the public, registrants and the ministry regarding the most prevalent discipline findings where a formal complaint or Registrar’s Investigation is referred to the Discipline Committee by the ICRC.</div>
Type	#	
I. Sexual abuse		
II. Incompetence		
III. Fail to maintain Standard	1	
IV. Improper use of a controlled act		
V. Conduct unbecoming		
VI. Dishonourable, disgraceful, unprofessional	1	
VII. Offence conviction		
VIII. Contravene certificate restrictions		
IX. Findings in another jurisdiction		
X. Breach of orders and/or undertaking		
XI. Falsifying records		
XII. False or misleading document		
XIII. Contravene relevant Acts		

<p><i>* The requested statistical information recognizes that an individual discipline case may include multiple findings identified above, therefore when added together the number of findings may not equal the total number of discipline cases.</i></p> <p><u>NR</u></p>
<p><i>Additional comments for clarification (if needed)</i></p>

Glossary

Alternative Dispute Resolution (ADR): Means mediation, conciliation, negotiation, or any other means of facilitating the resolution of issues in dispute.

Return to: [Table 5](#)

Contested Discipline Hearing: In a contested hearing, the College and registrant disagree on some or all of the allegations, penalty and/or costs.

Return to: [Table 8](#)

Disposal: The day upon which all relevant decisions were provided to the registrant by the College (i.e., the date the reasons are released and sent to the registrant and complainant, including both liability and penalty decisions, where relevant).

Return to: [Table 5](#), [Table 7](#), [Table 8](#)

Formal Complaint: A statement received by a College in writing or in another acceptable form that contains the information required by the College to initiate an investigation. This excludes complaint inquiries and other interactions with the College that do not result in a formally submitted complaint.

Return to: [Table 4](#), [Table 5](#)

Formal Complaints withdrawn by Registrar at the request of a complainant: Any formal complaint withdrawn by the Registrar prior to any action being taken by a Panel of the ICRC, at the request of the complainant, where the Registrar believed that the withdrawal was in the public interest.

Return to: [Table 5](#)

NR: Non-reportable: Results are not shown due to < 5 cases (for both # and %). This may include 0 reported cases.

Return to: [Table 1](#), [Table 2](#), [Table 3](#), [Table 4](#), [Table 5](#), [Table 6](#), [Table 9](#), [Table 10](#)

Registrar's Investigation: Under s.75(1)(a) of the *Regulated Health Professions Act, 1991*, (RHPA) where a Registrar believes, on reasonable and probable grounds, that a registrant has committed an act of professional misconduct or is incompetent, they can appoint an investigator which must be approved by the Inquiries, Complaints and Reports Committee (ICRC). Section 75(1)(b) of the RHPA, where the ICRC receives information about a member from the Quality Assurance Committee, it may request the Registrar to conduct an investigation. In situations where the Registrar determines that the registrant exposes, or is likely to expose, their patient to harm or injury, the Registrar can appoint an investigator immediately without ICRC approval and must inform the ICRC of the appointment within five days.

Return to: [Table 4](#), [Table 5](#)

Revocation: Of a member or registrant’s Certificate of Registration occurs where the discipline or fitness to practice committee of a health regulatory College makes an order to “revoke” the certificate which terminates the registrant’s registration with the College and therefore their ability to practice the profession.

Return to: [Table 10](#)

Suspension: A suspension of a registrant’s Certificate of Registration occurs for a set period of time during which the registrant is not permitted to:

- Hold themselves out as a person qualified to practice the profession in Ontario, including using restricted titles (e.g., doctor, nurse),
- Practice the profession in Ontario, or
- Perform controlled acts restricted to the profession under the Regulated Health Professions Act, 1991.

Return to: [Table 10](#)

Reprimand: A reprimand is where a registrant is required to attend publicly before a discipline panel of the College to hear the concerns that the panel has with their practice.

Return to: [Table 10](#)

Terms, Conditions and Limitations: On a Certificate of Registration are restrictions placed on a registrant’s practice and are part of the Public Register posted on a health regulatory College’s website.

Return to: [Table 10](#)

Uncontested Discipline Hearing: In an uncontested hearing, the College reads a statement of facts into the record which is either agreed to or uncontested by the Respondent. Subsequently, the College and the respondent may make a joint submission on penalty and costs or the College may make submissions which are uncontested by the Respondent.

Return to: [Table 8](#)

Undertaking: Is a written promise from a registrant that they will carry out certain activities or meet specified conditions requested by the College committee.

Return to: [Table 10](#)

BRIEFING NOTE

2025.01.03B

MARCH 2025 COUNCIL COMMITTEE MEETING

EQUITY, DIVERSITY, AND INCLUSION PLAN

STRATEGIC DIRECTION REFLECTION

Excellence in Care; Continuous Quality Improvement Culture

MOTION FOR CONSIDERATION

That the Council approve the proposed Equity, Diversity, and Inclusion (EDI) Plan.

Moved by TBD

PUBLIC INTEREST RATIONALE

In December 2020, the Ministry of Health released the *College Performance Measurement Framework (CPMF)*. This document sets out expectations and reporting requirements for all health regulatory colleges in Ontario. Within the *CPMF*, it is an expectation that the College has an Equity, Diversity, and Inclusion (EDI) plan and that they conduct Equity Impact Assessments ([completed June 2024](#)) to ensure that decisions are fair, and that policies, programs, or processes are not discriminatory.

BACKGROUND

The Ministry outlined Standards within the *CPMF* considered to be “best practices” of regulatory excellence toward which Colleges are to strive and against which Colleges will be evaluated. The *CPMF* has several measures under each Standard to guide the College in demonstrating its achievement of each Standard. Colleges are asked to provide evidence of decisions, activities, processes, and verifiable results that demonstrate the achievement of relevant Standards. This Briefing Note addresses the highlighted measurement below.

Domain1: Governance Standard 3 Measure:

3.3 The College has a Diversity, Equity, and Inclusion (DEI) Plan.

a. The DEI plan is reflected in the Council’s strategic planning activities and appropriately resourced within the organization to support relevant operational initiatives (e.g., DEI training for staff).

The EDI Working Group completed the EDI Plan over the course of three sessions (July 15 and October 11, 2024; January 17, 2025). The Chair of the Working Group and the Registrar met between sessions to integrate the Working Group’s feedback into the Plan. The entire EDI Working Group provided their analyses, reflections, and feedback.

BUDGETARY IMPLICATIONS

The EDI Plan refers to the creation of a new Committee which will require per diem payments. The EDI plan also refers to data collection efforts as well as experiential visits to Northwestern Ontario for the Registrar and President; costs that have been considered in this upcoming budget.

RISKS

Should the EDI Plan results not be accepted by the Executive and/or Council, then the College will not be in compliance with the Ministry of Health's CPMF requirements.

NEXT STEPS

If approved by Council, the Registrar will work with the Chair of the EDI Working Group on the implementation of the EDI Plan.

ATTACHMENTS

- Draft EDI Plan

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

Draft

College of Psychologists and Behaviour Analysts of Ontario “EDI Plan”

Ethics and Human Rights Plan

Purpose:

The College of Psychologists and Behaviour Analysts of Ontario (“The College”) is committed to continuous quality improvement to meet the needs of *all* residents of Ontario, now and into the future. To achieve this goal, the College has developed a focused plan dedicated to human rights, professionalism, and ethics, which will serve to meet the “Equity, Diversity, and Inclusion (EDI)” plan requirement of the Ministry of Health’s College Performance Measurement Framework (CPMF). Although this plan fulfills the “EDI” requirement of the CPMF, the College’s approach to “EDI” is intended to be unique, reflecting the diverse wisdom within the disciplines of psychology and applied behaviour analysis, as opposed to solely an intersectional/post-modern perspective. The plan will focus on universal human rights and will be apolitical, representing the diversity of the entire Ontario public. The concepts of equity and equality will both be considered in the work and functions of the College, reflecting the balancing between equality of outcome and equality of treatment. Operational definitions will be created to clarify terms such as “diversity” and “inclusion”. The College’s “EDI” plan will serve as an “Ethics and Human Rights” plan, including short and long-term goals along with a proposal to create a non-statutory Committee with advisory and educational duties. This plan will complement the existing College strategy and will be subject to review at the end of the current strategic period in 2028. The plan symbolizes a commitment to human rights and provides direction towards a more respectful and reflective community of psychological and behavioural professionals.

Strategic Priorities:

There are five core priorities of the College that will inform its Ethics and Human Rights work in the next 3 years to fulfill Ministry of Health requirements:

1. Definition and scope development – a charter outlining non-discrimination; balance of equality and equity; inclusion of diverse perspectives; fairness; adherence to Standards and law.
2. Demographic data collection: applicants and registrants.
3. Training/Education for staff, Council, and Committees.
4. Creation of a Committee with education and advisory review functions.
5. Develop structures to ensure that members are equipped to adhere to the relevant standards.

Efforts at Meeting EDI Requirements to Date:

- [Equity, Diversity, and Inclusion: A Picture of Our Membership Survey](#)
- Training of Staff, Council and Committee members
- Consultation to various College committees on EDI initiatives,
 - Registration Committee
 - Oral Exams
 - Quality Assurance, Continuing Professional Development
 - JEE item writing
 - Standards revision in 2024 with “EDI” specifically integrated

- [3. EQUITY, DIVERSITY, AND INCLUSION, 3.1 Respect and Dignity in Professional Practice](#)
 - Supervision Resource Manual
 - [Supervision Fundamentals: 1.d. Equity, Diversity, and Inclusion in Supervision](#)
- Quarterly HeadLines and Council updates
- Health Equity Impact Assessment – [Council Approved at June Meeting, 2024](#)
- Barbara Wand Seminar: [Specialty topics related to EDI](#)

Recommendations for Future Development

Short-Term Goals 0-12 Months

Goals	Strategic Activities	Strategic Priorities
Operational Definition Development	<ul style="list-style-type: none"> EDI Working Group to review the Ontario Health Framework to inform the development of definitions 	Definition and Scope Development
Scope Clarification	<ul style="list-style-type: none"> Consultative and advisory in nature on organizational matters Accountable to Council No purview over individual decisions of Statutory Committees 	
Training for Staff, Council, & Committee Members	<ul style="list-style-type: none"> Immediately for Registration Committee and Staff (February 2025): CAMH Health Equity Office: Anti-Black-Racism Training Explore additional training opportunities for Council, Committees, and Staff <ul style="list-style-type: none"> Frequency Goals & scope Range of “Ethics and Human Rights” topics Internal vs External Costs 	Training/Education
Gathering Data (survey membership)	<ul style="list-style-type: none"> Voluntary: <ul style="list-style-type: none"> At registration At renewal (when relevant) Obtain external support to build survey <ul style="list-style-type: none"> with budgetary request – March 2025 	Demographic Data Collection
Communication	<ul style="list-style-type: none"> Quarterly headlines Regular newsletter “Ethics and Human Rights” entries to membership 	Development of Structures for Members

College Committee Membership	<ul style="list-style-type: none"> • Creation of objective, standard operating procedures for Committee member selection (on behalf of the Executive Committee) • In considering Committee membership, the College will strive to create Committees that reflect the people of Ontario, one of the most diverse populations in the world. <ul style="list-style-type: none"> ○ Diversity of identities: race, Indigenous status, religion, ethnicity, abilities, sexual orientation, gender identity & expression, age, etc. ○ Diversity of expertise: clientele, areas of practice, type of employment, etc. ○ Diversity of geographical regions across Ontario 	Committee with education and advisory review functions
Continue integration of <i>Ethics and Human Rights</i> work across College	<ul style="list-style-type: none"> • Serve as a resource to Council, College Committees, and to the College Directors (on behalf of their departments) 	Development of Structures
Identification and Relations with Systems Partners	<ul style="list-style-type: none"> • Council President and Registrar to establish authentic connections with diverse communities: <ul style="list-style-type: none"> ○ e.g. Registrar and Council President to plan to visit Northwestern Ontario with facilitation from Dr. Christopher Mushquash to: <ul style="list-style-type: none"> ▪ experience Indigenous traditions ▪ establish connection and relationships • Potential to have future visits from College Council and staff 	Definition and Scope Development Training/Education Development of Structures

Long-Term Goals 12-36 Months

Goals	Strategic Activities	Strategic Priorities
Website Presence	<ul style="list-style-type: none"> • Consider best approaches to mitigate risk of appearance of bias if providing “EDI” resources, including formal legal consultation 	Definition and Scope Development

Training for Staff and Membership	<ul style="list-style-type: none"> • Creation of in-house education modules, using the College's existing Learning Management System 	Training/Education
Transition of the EDI Working Group	<ul style="list-style-type: none"> • The EDI working group will transition to a new, non-statutory committee, <i>Ethics and Human Rights</i>. • The Policy and Procedure Manual would require updating to reflect the new committee, including their terms of reference: <ul style="list-style-type: none"> ○ Advisory role for new and updated policies and procedures ○ Educational content development for registrants 	Committee with education and advisory review functions

BRIEFING NOTE

2025.01.03C

MARCH 2025 COUNCIL MEETING

REGISTRATION – APPROVED PROGRAMS

STRATEGIC DIRECTION REFLECTION

Innovation in Regulation; Continuous Quality Improvement Culture

MOTION

That the Council approve the proposed plan to introduce approved programs for both the professions of psychology and ABA.

Moved By TBD

PUBLIC INTEREST RATIONALE

Employing a “Right Touch” approach to improving the efficiency of the registration process will help facilitate the onboarding of new professionals in Ontario.

BACKGROUND

The modernization of registration processes is of paramount importance to the College and is informed by feedback received from the Ministry of Health as well as the Office of the Fairness Commissioner (OFC). The College’s Strategic Plan highlights, *Innovation in Regulation* and *Continuous Quality Improvement* and a commitment to modernizing registration practices to best meet the needs of the people of Ontario would be in alignment with these pillars.

[The Health Professions Procedural Code of the Regulated Health Professions Act \(1991\)](#) defines the duty of all health regulatory Colleges as follows:

2.1 It is the duty of the College to work in consultation with the Minister to ensure, as a matter of public interest, that the people of Ontario have access to adequate numbers of qualified, skilled and competent regulated health professionals. 2008, c. 18, s. 1.

The OFC has identified the following risk factor to the College in their most recent assessment of its registration practices: [addressing labour market shortages \(psychology\)](#). The section of the [registration regulation of the Psychology and Applied Behaviour Analysis Act \(2021\)](#) pertaining to psychologists relies on third-party accreditation of doctoral programs through the Canadian Psychological Association (CPA), reducing the supply of potentially acceptable professional psychology training programs, which in turn, impacts the supply of professionals in the province. An initial re-interpretation of the Act as well as an eventual regulation change would permit the Council to approve programs. With standardized competency criteria, the Council could decide to fast-track approvals of programs accredited by the CPA, the American Psychological Association and/or the Psychological Clinical Science Accreditation System, while also permitting other programs to register. Private psychology training programs, industrial/organizational psychology programs in business schools, and clinical/clinical neuropsychology programs in faculties of health sciences or medicine, could become eligible for approval should they meet standardized criteria. The shift away from reliance on a third party creates more autonomy for the Council

to make decisions in the best interests of the people of Ontario. This change would be in alignment with the [College of Nurses of Ontario](#) and the [College of Registered Psychotherapists of Ontario](#) and would expand the capacity to register professionals. The introduction of approved programs could also create pathways for Master's-level registration, should programs apply for approval and meet standardized requirements. This approach to approving programs would also apply to the profession of ABA.

Amending the regulation to introduce Council-approved programs would also create the regulatory foundation for bridging programs to upskill internationally trained professionals to meet Ontario requirements. The creation of this pathway could facilitate the registration of newcomers to the province who have practiced in their respective countries of origin, but where the profession may not have been regulated and/or there are significant departures from the competency standards from the province of Ontario. As the regulator, the College establishing this registration route would create opportunities for training institutions to meet this demand. An example is the College of Registered Psychotherapists of Ontario, which permits the completion of an [approved international bridging program](#).

The CNO has over 190,000 registrants across the RPN, RN, and RN-EC classes. A regulator the size of the CNO must develop operational efficiencies to meet the scale of the nursing profession. The CNO describes the objectives of their [program approval process](#) as: *to fulfil CNO's legislative duty to approve entry-level nursing education programs, to promote the safe practice of nursing through a standardized nursing education approval process for all categories and classes of nursing education, to grant jurisdictional recognition to nursing education programs, to provide stakeholders with a transparent account of program approval, and to support continuous evaluation and improvement of nursing education programs.*

The CNO has created a [Nursing Education Program Approval Policy](#) which is used to evaluate nursing programs across three standards: structure, curriculum, and outcome. The CNO uses a clearly defined [scoring algorithm](#) to evaluate each program. All programs are ultimately reviewed for approval by the CNO's Council. Program approval status decisions include preliminary approval, approved, approved with conditions, and not approved, based on a clearly defined cut score (Appendix 1).

RISK

Right-touch regulation means to ensure that the level of regulation by a College is proportionate to the level of risk to the public. The College is under scrutiny by the OFC for the reported supply shortage of psychology professionals in Ontario. Failing to adequately consider opportunities to develop more flexible approaches to assess register psychology professionals could result in further compliance orders, up to and including intervention from the Minister of Health as per the *RHPA*.

BUDGETARY IMPLICATIONS

The Council has already approved funds for consulting regarding a potential change in scope of practice for eligible registrants (RxP). To date, no funds have been used, as the Registrar and President have provided preliminary data directly to the Ministry without the assistance of a consultant. These funds can now cover the cost of a consultant should RxP proceed as well as for a consultant to manage the proposed project. Given that this project will extend past the end of the current fiscal year (May 31, 2025), the funding for the consultant will continue to be reflected in next year's budget but no new funds will need to be allocated.

RECOMMENDED PROCEDURE

- Executive Committee approved this Briefing Note on February 13, 2025 for presentation at March 2025 Council Meeting

- The CNO presents on their approved programs process at the March 2025 Training Day
- Briefing Note is presented to Council for potential approval at March 2025 Council Meeting
- Pending approval of the briefing note, the College will contact the OFC and the Ministry of Health with this proposed plan and briefing note for their consideration
- The College will respond to any further request of information from the Ministry of Health or OFC regarding this proposed project
- The College will explore (and make) potential changes that could be made without a regulation change
- Should the College receive approval to proceed with regulatory changes, a consultant will assist in coordinating all relevant procedures to be followed as per the Ministry of Health, the legislation, and the College's By-Laws

ATTACHMENTS

- Appendix 1 – CNO Nursing Education Program Approval Scorecard

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

Appendix 1 – CNO Nursing Education Program Approval Scorecard

Structure standard (total weight 25%)		
Indicator (sub-indicator)		Weight %
1	Nursing program governance	6
1a	Nursing program governance structure	2
1b	Curriculum review structure	2
1c	Annual review of program outcomes	2
2	Client and student safety	13
2a	Orientation of student and faculty to clinical setting	2
2b	Student supervision in all clinical placements	3
2c	Regular evaluation of student performance in clinical setting	3
2d	Processes are in place to manage and learn from safety incidents	5
3	Qualified faculty	6
3a	Faculty who are RN, RPN and NPs have current certificate of registration in Ontario	2
3b	Regular process to evaluate teaching	4
Sub-total — structure indicators		25%
Curriculum standard (total weight 40%)		
4	Curriculum incorporates entry-to-practice competencies and foundational practice standards	25
5	Clinical learning opportunities support learners to attain and demonstrate acquisition of program objectives	10
6	Processes in place to communicate expectations for the student placement to preceptor	5
Sub-Total — Curriculum Indicators		40%
Outcome standard (total weight 35%)		
7	Registration exam scores-1st time pass rates (3-year cumulative total)	17
8	Recent graduates' assessment of their preparation to practice safely, competently, and ethically	8
9	Preceptor assessment of student's readiness to practice	10
Sub-Total — Outcome Indicators		35%
Total of Standards 1,2,3 weight		100%

BRIEFING NOTE

2025.01.03D

MARCH 2025 COUNCIL MEETING

COUNCIL AND COMMITTEE MEMBER PER DIEMS AND EXPENSE REIMBURSEMENT POLICIES

STRATEGIC DIRECTION REFLECTION

Membership Engagement; Innovation in Regulation

MOTION FOR CONSIDERATION

That Council approve the suggested amendments to *Policy III F-4: Per Diems and Council and Committee Compensation* and *Policy III F-5: Expense Reimbursement*.

Moved By TBD

PUBLIC INTEREST RATIONALE

The College relies on professional members¹ to fulfill its fiduciary duty to the public interest. Ensuring that the College appropriately compensates professionals for their time is crucial to this mandate.

BACKGROUND

College policies are regularly reviewed with recommendations or amendments, if any, presented to Council for approval. The following policies fall within the purview of the Finance and Audit Committee (FAC) and the suggested amendments below were approved by the FAC and recommended by the Executive Committee. The attached policies are presented in a two-column format showing the proposed amendments and the rationale for the suggested change. A brief description of the amendments follows:

Policy III F-4: Per Diems and Council and Committee Compensation

The College provides per-diems or honoraria to its members to compensate them for their time and contributions during meetings. The current per diem rate of \$325 for a full day meeting remains unchanged since it was approved in June 2013, having previously been \$295. The current rate also does not reflect varying responsibilities of members in leadership roles, such as Chairs and Vice-Chairs.

The proposed changes being recommended will include the following:

1. **Increasing the standard per diem rate** (section 1) for members from \$325 to \$400 to better reflect the time commitment and is informed by an inflationary correction since the last adjustment in 2013.
2. **Introducing role-based rates** (section 1) ensuring fairness and recognizing increased preparation and leadership responsibilities of members in key roles (e.g., Chairs/Vice-Chairs/Co-Chairs).

¹ The College also relies on members of the Public who commit themselves to the public interest. Unfortunately, however, *Policy III F-4: Per Diems and Council and Committee Compensation* only applies to professional members, as public members are compensated by government.

3. **Simplifying pro-rated per diem structure** (section 2) by removing the $\frac{3}{4}$ day category the policy is clearer and easier to administer. Allowing meetings longer than 4 hours to qualify as a full-day meeting provides fair compensation for members' time and effort.
4. **Increasing the President's Stipend** (section 8) from \$8,500 to \$11,000 as informed by an inflationary correction since its last adjustment in 2013, having previously been \$7,500. It is also meant to reflect the significant leadership role and time commitment required for this position, including ongoing responsibilities outside of regular meetings. This ensures the stipend aligns with the level of work and leadership expected, supporting the President in fulfilling their duties effectively while maintaining fairness within the compensation framework.

Policy III F-5: Expense Reimbursement

In considering the per-diem policy, it is also appropriate to review the College's expense reimbursement policy. The proposed update to the policy enhances clarity and accountability in managing reimbursable expenses.

The proposed changes being recommended will include the following:

1. **Schedule of Rates** (sections 3.a, 5.c, 6 and 9) refers to an appendix to *Policy III F-5: Expense Reimbursement* adopting [Canada Revenue Agency \(CRA\) reasonable rates](#) for meal allowance, mileage reimbursement and incidental rates. The rates are proposed to be reviewed twice a year and adjusted as needed by the Finance and Audit Committee.
2. **Meal Reimbursement** (section 3.b) excludes alcoholic beverages to ensure responsible and appropriate use of College funds.
3. **Accommodation** (section 4) clarifies eligibility for reimbursement based on a 40-kilometre distance and introduces a \$50 per night reimbursement for private accommodation.
4. **Gratuities and Tips** (section 5.d) clarifies transportation gratuities must be included in the total fare and supported by a receipt.

The proposed changes apply only to professional members, as public appointees are subject to the Ministry of Health's 2016 Remuneration Framework, which prohibits supplementary payments or "top-ups" beyond what is authorized for public appointees.

BUDGET IMPLICATIONS

If approved by Council, the proposed amendments to the per diem and expense reimbursement policies, will be reflected in the budget for the 2025-2026 fiscal year 2025-2026.

NEXT STEPS

Should it be approved by the Council, the amendments will be made to the College's Policy and Procedure Manual.

ATTACHMENTS

1. Draft amended *Policy III F-4: Per Diems and Council and Committee Compensation* with tracked changes and rationale
2. Draft amended *Policy III F-5: Expense Reimbursement* with tracked changes and rationale

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

POLICY AND PROCEDURE MANUAL

POLICY	Per Diems and Council and Committee Compensation		
SECTION	Operational – Financial	POLICY #	III F – 4
DATE CREATED	December 2005	DATE LAST REVISED	June 2024 March 2025
NEXT REVIEW DATE	2025/2026 2028/2029	PAGE #	1 of 2

POLICY STATEMENT

The College shall provide **professional** members of the College with a per diem for prescribed work done on behalf of the College. **All remuneration for public appointees by the Lieutenant Governor in Council on the College Council and committees is governed by the guidelines issued by the Health Board Secretariat.**

PROCEDURE

- ~~The per diem or honorarium for members of the College is \$325. Elected and/or appointed Council and committee members are entitled to the remuneration outlined in the chart below:~~

Role	Per Diem or Honorarium
Chair (Council/Committee/Panel)	\$450
Vice-Chair or Co-Chair (Council/Committee/Panel)	\$425
Member-at-Large	\$400

2. Meeting Attendance:

Per diems for attendance at meetings are paid based on the **scheduled** meeting duration as follows:

- ~~Up to 2 hours — ¼ day per diem~~
- ~~More than 2 hours up to 4 hours — ½ day per diem~~
- ~~More than 4 hours up to 6 hours — ¾ day per diem~~
- ~~More than 6 hours — full day per diem~~

Scheduled Meeting Time	Pro-rated per diem
Up to 2 hours	- ¼ day per diem
More than 2 hours up to 4 hours	- ½ day per diem
More than 4 hours	- full day per diem

Provides clarity on the applicability of per diems.

Ensures fairness and recognizing increased preparation and leadership responsibilities of members in key roles (e.g., Chairs/Vice-Chairs/Co-Chairs).

Increasing the rate from \$325 to \$400 for members to better reflect the time commitment and is informed by an inflationary correction since the last adjustment in 2013.

Removing the ¾ day category makes the policy clearer and easier to administer.

Allowing meetings longer than 4 hours to qualify as a full-day meeting provides fair compensation for members' time and effort.

3. Meeting Cancellations

- a. If a meeting scheduled for one or more consecutive calendar days or consecutive business days has commenced and concludes in less than the scheduled time, the full per diem for the consecutive days scheduled will be paid.
- b. If a meeting is cancelled before it has commenced but less than 24 hours before it would have commenced, the per diem to be paid is half what would have been paid had the meeting gone ahead as scheduled.
- c. If a scheduled meeting is cancelled with more than 24 hours' notice, no per diem is paid.

- 4. Decision Writing per diems are payable in ½ day increments to the Chair or other panel member of the Discipline Committee and Fitness to Practice Committee who writes the Decision after a Hearing.

5. Preparation Time

Preparation time is payable only for those meetings for which file reviews are necessary. This is payable in ¼ day increments as follows:

- a. Inquiries, Complaints and Reports Committee preparation time per diems is paid equivalent to the **scheduled** duration of the meeting:
 - i. Up to 2 additional days may be paid for exceptionally complex cases, with the approval of the Committee Chair and the Registrar.
- b. Registration Committee preparation time per diems is paid equivalent to the **scheduled** duration of the meeting:
 - i. Up to an additional half day may be paid for exceptionally numerous or complex cases with the approval of the Committee Chair and the Registrar.
- c. Pre-hearing Conference Chair receives a one-day preparation per diem for each initial conference. Should additional pre-hearing conferences be necessary for the same matter, preparation time, if needed, will be paid up to the **scheduled** duration of subsequent conference.
- d. Discipline Committee preparation per diems are payable in ¼ day increments up to two full days, where Committee members are provided with written documentation to review for motions or hearings. Requests are to be approved by the Committee Chair, and may be made on behalf of multiple members of the Committee.
- e. Quality Assurance Committee preparation per diems is paid equivalent to the **scheduled** duration of the meeting.
- f. Special Projects preparation per diems are payable in ¼ day increments up to one full day for Council members and other College members assigned preparatory reading or writing for a Special Project with the approval of the Chair and the Registrar.
- g. Additional Requests: individual requests for meeting preparation time from members of Committees other than those noted above, will be considered individually by the Executive Committee.

<p>6. <u>Professional Association Conventions/Meetings</u> for attendance as a representative/presenter on behalf of the College are payable as follows:</p> <ul style="list-style-type: none"> a. ASPPB - per diem for each day in attendance b. ACPRO - per diem for each day in attendance c. Barbara Wand Symposium - ½ or full day per diem dependent upon the scheduled length of Symposium d. OPA/OAMHP/ONTABA Convention: per diem for each day in attendance e. CPA Convention: per diem for each day in attendance f. BACB Convention: per diem for each day in attendance <p>7. <u>Travel Time</u> claims must be included with the expense claim and are payable to all members as follows:</p> <ul style="list-style-type: none"> a. travel of more than 40km, one way, for College business, a half day per diem is payable; b. travel outside of Ontario on College business, a per diem for actual travel time is payable in half day increments. <p>8. <u>Stipend for President</u></p> <p>The President's stipend is paid monthly at the annual rate of \$8,500 \$11,000 to the serving President to cover meetings with the Registrar, incidental time for telephone calls, e-mails and other intermittent communication, based on an assumption of an average of half a day per week being devoted to these activities.</p> <p>9. <u>Office Overhead Allowance for Eligible Private Practitioners</u></p> <ul style="list-style-type: none"> a. This section applies to private practitioners who derive more than half of their income from self-employment. b. This allowance is not intended to replace lost income. Rather it is intended to offset additional significant expenses associated with running a practice office; e.g., rent, insurance, property taxes, secretarial support; that is, expenses which are normally claimed against income. c. An office overhead allowance is payable at the rate of \$200 per day in 1/4 day increments parallel to the per diem payment for meeting attendance. 	<p>To reflect the significant leadership role and time commitment required for this position, including ongoing responsibilities outside of regular meetings.</p>
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POLICY AND PROCEDURE MANUAL

POLICY	Expense Reimbursement		
SECTION	Operational – Financial	POLICY #	III F – 5
DATE CREATED	December 2005	DATE LAST REVISED	June 2022 March 2025
NEXT REVIEW DATE	2025/2026 2028/2029	PAGE #	1 of 2

POLICY STATEMENT

The College shall reimburse members of the College and staff for reasonable expenses incurred directly associated with work done on behalf of the College.

PROCEDURE

- All expenses must be submitted within 60 days of the date at which they were incurred. Expenses submitted after 60 days or under exceptional circumstances will go to the Finance and Audit Committee for approval.
- Original receipts or copy of original receipts including digital or scanned copies are required for reimbursement of all expenses over \$10.00 unless otherwise specified in this policy.
- Meal Reimbursement:
 - The daily meal reimbursement for travel associated with work done on behalf of the College is payable at ~~the following~~ rates, (in CAD or USD) ~~as appropriate~~ consistent with the Travel Expense Reimbursement Rates (Appendix 1) as prescribed by Canada Revenue Agency (CRA).

Breakfast	\$30
Lunch	\$22
Dinner	\$45
Total	\$97
 - The meal reimbursement includes the cost of the meal and any applicable taxes such as GST and HST. Receipts for meals over \$10.00 are required. Expenses for alcoholic beverages will not be reimbursed.
 - Business dinners attended by College representatives on behalf of the College will be reimbursed for the full amount, if the cost exceeds the standard meal allowance. A receipt is required.
- Accommodation
Accommodation is provided for members who reside more than 40-kilometre from the meeting location. Members will be accommodated at the hotel(s) selected by the Registrar. If a member

Aligning with CRA rates ensure the College rate is standardized, reasonable and reflective of current economic conditions

Aligns with financial accountability and appropriate use of College funds.

Clarifies eligibility for accommodation reimbursement.

<p>chooses to stay at an alternate hotel, any difference between the rate of the hotel(s) selected by the Registrar and that chosen by the member, will be paid by the member. If a member chooses to stay in private accommodation, a \$50 per night reimbursement will be applied.</p>	<p>Provides an option for private stays with friends or family.</p>
<p>5. <u>Travel</u></p> <p>a. Travel to and from College functions or travel on behalf of the College will be fully reimbursed. Air travel reimbursement will be for economy class and, where possible, members are encouraged to book in advance to take advantage of any available discount fare. Train travel will be Business or equivalent because of the likelihood of a need for meal service. The cost of a roomette will be covered if the travel is overnight and in lieu of a hotel room.</p> <p>b. Normally, air travel will be on direct flights. If stopovers are arranged for reasons other than attendance at College functions, the College will reimburse the cost of the direct flight from the point of origin to the location of the function.</p> <p>c. Travel by car will be reimbursed at the current rate of \$0.42c a rate consistent with the Travel Expense Reimbursement Rates (Appendix 1) as prescribed by Canada Revenue Agency (CRA), up to an amount not exceeding economy air fare between the same points. Parking fees at hotels, bus and train stations, and airports as well as at parking lots for Council and Committee meetings, and others for College-related business, will be reimbursed.</p> <p>d. Reasonable and necessary ground transportation (e.g., airport limousine, taxi, subway) to attend College functions will be reimbursed. Gratuities for transportation (i.e., taxis, Uber/Lyft) should be included in the cost claimed along with the accompanying receipt.</p>	<p>Aligning with CRA rates ensure the College rate is standardized, reasonable and reflective of current economic conditions</p> <p>Clarifies reimbursable tips/gratuities for transportation.</p>
<p>6. <u>Incidentals</u> will be reimbursed at \$17 a rate consistent with the Travel Expense Reimbursement Rates (Appendix 1) as prescribed by Canada Revenue Agency (CRA), per day of overnight travel, CAD or USD, as appropriate. No receipts are required.</p>	<p>Aligning with CRA rates ensure the College rate is standardized, reasonable and reflective of current economic conditions.</p>
<p>7. <u>Professional Association Conventions/Meetings</u> expenses paid when attending as a representative/presenter on behalf of the College.</p>	
<p>8. <u>Other Expenses</u></p> <p>a. Any reasonable travel expenses, such as internet fees, telephone calls, etc., incurred in conducting College business, will be paid on the basis of reasonable documentation of such expenses.</p>	

<p>9. Review of Rates</p> <p>The Finance and Audit Committee shall review the Travel Expense Reimbursement Rates (Appendix 1) twice a year and adjust accordingly.</p>	<p>Allows the FAC to review and adjust the Schedule of Fees (Appendix 1) in response to CRA changes. Changes to the policy itself shall still require approval at Council level.</p>
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APPENDIX 1: TRAVEL EXPENSE REIMBURSEMENT RATES

I. Meal Reimbursement Rates

Reimbursement for meal expenses incurred is subject to a daily maximum as set and published by Canada Revenue Agency (CRA) Meals and Allowance Rates¹ and will require receipts to be submitted. These rates cover taxes and gratuities.

Breakfast	\$27.95
Lunch	\$27.00
Dinner	\$56.85
Meal Allowance Total	\$111.80

II. Vehicle Reimbursement Rates

Reimbursement rates for using a personally owned car are based on the automobile allowance rates published by the Canadian Revenue Agency (CRA) Kilometric Rates².

The current automobile allowance for Ontario is: **\$0.63c per kilometer.**

III. Incidentals

Incidental allowance will be paid to cover a number of miscellaneous expenses not otherwise provided for per the CRA Directive on Travel – Appendix B: Meals and Allowances.

The current incidental allowance rate is: **\$17.50**

¹ <https://www.canada.ca/en/revenue-agency/corporate/about-canada-revenue-agency-cra/travel-directive/appendix-b-meals-allowances-october-2024.html>

² <https://www.canada.ca/en/revenue-agency/corporate/about-canada-revenue-agency-cra/travel-directive/appendix-a-cra-kilometric-rates-january-2025.html>

REPORT TO COUNCIL

2025.01.04A

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

PRESIDENT'S REPORT

Dear Council Members,

It has been a privilege to represent our Council in College activities over the past three months. During this time, I've had the opportunity to witness firsthand the exceptional efforts of our staff, along with the invaluable contributions of our professional and public members. I'd like to take this moment to share some highlights of our recent progress and ongoing initiatives.

OUR COLLEGE STAFF, COMMITTEES, AND WORKING GROUPS

The College continues to operate effectively in fulfilling its mandate of public protection on behalf of both Behaviour Analysis and Psychology professionals. Our dedicated staff, along with the professional and public members of our committees and Council, work collaboratively toward this shared goal.

We remain committed to advancing governance and regulatory policies that respect the uniqueness of these two distinct professions, while recognizing the shared systems that impact both. In consultation with the Minister, our focus remains on ensuring that Ontarians have access to an adequate number of qualified, skilled, and competent practitioners in each profession, as a matter of public interest.

Over the last quarter, our College has made significant progress in addressing concerns raised by the Office of the Fairness Commissioner (OFC). Their mandate is to oversee the registration practices of regulated professions and organizations, ensuring transparency, objectivity, impartiality, and fairness. In their latest report, the OFC highlighted areas for improvement, such as developing more flexible approaches to assessing and registering internationally trained psychologists. Additionally, they recommended a systematic review of Health Professions Appeal and Review Board (HPARB) decisions and our College's responses. In response, we have undertaken a comprehensive review of our registration practices, guided by the principle of "Chesterton's Fence." This ensures that any proposed changes are grounded in a thorough understanding of the original rationale behind current practices. Although this review is ongoing, we remain dedicated to innovation and continuous improvement in collaboration with the OFC.

COLLABORATION WITH EXTERNAL ORGANIZATIONS

As outlined in the Council materials, our College continues to engage with Manitoba leaders in psychology regulation and hospital psychology. Following a series of productive meetings, we are now exploring operational methodologies to implement the proposed telepsychology model. This initiative, currently open for public comment, seeks to provide Northwestern Ontario residents with access to psychological care through Manitoba's hospital-based health care teams. This arrangement would enable psychologists within these teams to offer follow-up care virtually, ensuring continuity of service for patients who have returned to Northwestern Ontario. Without this agreement, patients would need to travel back to Manitoba for psychology-related follow-up care. This proposed partnership exemplifies our commitment to innovative solutions that prioritize patient care and interprofessional collaboration.

LEADERSHIP TRANSITIONS

I'd also like to take a moment to recognize two notable changes within our College's senior leadership team. I would like to welcome Zimra Yetnikoff, previously our Director of Investigations and Hearings, in her appointment as Deputy Registrar. Additionally, Jennifer Kitchen joins us as Director of Professional Affairs, bringing extensive expertise in public health and quality improvement from her tenure at the College of Physicians and Surgeons of Ontario. Both Zimra and Jennifer step into roles previously held by Barry Gang, whose recent retirement marked the conclusion of a remarkable career. We are fortunate to have such skilled leaders to guide us as we navigate the evolving demands of our professions and our College.

As we continue this journey together, I remain confident in our collective ability to adapt and advance in service to our mandate and the public we serve.

SUBMITTED BY

Ian Nicholson, Ph.D., C. Psych.

REPORT TO COUNCIL

2025.01.04B

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

REGISTRAR & EXECUTIVE DIRECTOR'S REPORT

REGISTRAR'S OUTREACH ACTIVITIES

January 2025

- January 7, 2025: Ottawa ABA & Psychology Community Gathering at the *Child Solutions* practice
- January 24, 2025: TMU Visit: Graduate Ethics Class & Clinical Rounds
- January 28, 2025: Guest Speaker at the Professional Engineers of Ontario's Senior Leadership Team Meeting – Applying Chesterton's Fence and Dialectics to Change Management

MODERNIZING REGISTRATION PRACTICES

The College continues its journey of modernizing its registration practices, with a focus on the profession of psychology given the risk rating and feedback from the Office of the Fairness Commissioner (OFC). Within this Council package is a briefing note on approved programs; an approach that would change the College's registration processes. I believe that Council-approved programs will provide the necessary decision-making authority to make registration decisions in the public interest, which may include accepting non-accredited graduate programs who meet standardized criteria. It is important to note that although accreditation provides important quality checks, the absence of accreditation can sometimes occur unrelated to the quality of the program (e.g. for-profit schools cannot become accredited). I also hypothesize that having approved programs will expedite the flow of applications, reducing wait-times for applicants as well as referrals to the Registration Committee. The College of Nurses of Ontario is a leader in health regulation, and two of their senior leaders spoke with the Council at the March 2025 training day (March 20) regarding their approved programs process. In addition to approved programs, I am continuing to explore other opportunities to implement *Right Touch Regulation* thinking, such as the re-visiting of authorized practice areas and client groups and balancing their utility versus their limitations. I am particularly grateful to Lesia Mackanyn, Director of Registration, who has been diligently responding to the OFC's compliance requirements given the moderate to high-risk rating.

REGISTRAR'S OUTREACH INITIATIVES

Following the December holidays, I had the pleasure of engaging in two particularly meaningful outreach activities. In early January, I visited the *Child Solutions* practice in Ottawa where they hosted a gathering of psychology and ABA professionals in their community. It was a wonderful opportunity to observe our two professions, collaborating and socializing together. The public is best served with high quality interprofessional care; relationships between the professions will be key.

Later in the month of January, I visited Toronto Metropolitan University and was hosted by Dr. Andrew Kim. I was invited to Dr. Kim's graduate ethics class for clinical psychology students where I thoroughly enjoyed talking about regulatory fundamentals with our soon-to-be registrants. In the afternoon, I delivered clinical rounds on, *The Business of Psychology: Professional & Ethical Duties*, and was delighted to have both graduate students and faculty in the audience.

INFORMATION TECHNOLOGY UPDATE

Due to unexpected circumstances with the College's IT vendor, the College has pivoted to working solely with our consultant and his team moving forward. The College's Corporate Services Director, Stephanie Morton, and I have allocated financial resources within the budget. This is a much-needed technological investment given the obsolescence of the current system, operational needs of the College and the importance of advanced security technology. I am confident that the path forward will be fruitful in modernizing the College's IT.

GOVERNANCE MODERNIZATION

The College Performance Measurement Framework (CPMF) has been completed for the 2024 calendar year and is on the current agenda. The College is not in compliance with the requirement with 1.2(b): *The framework includes a third-party assessment of Council effectiveness at a minimum every three years.* Mr. Andrew Porter, lawyer, discussed governance modernization at the March 2025 Training Day (March 20) to provide insights. The utility of a comprehensive governance review is something the College will need to contemplate, along with a plan to meet the minimum standard as per the CPMF. It is important to acknowledge that the College underwent a historic transformation in 2024 with the addition of a new profession in ABA, which required significant attention from the Council. Now that proclamation has occurred, the Council might consider a more targeted focus on governance in the coming years. Change will be a process, and one that we will engage in thoughtfully.

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

REPORT TO COUNCIL

2025.01.04C

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

REGISTRATION COMMITTEE

COMMITTEE MEMBERS

Peter Bieling, Ph.D., C.Psych.	Co-Chair, Academic Member of Council
Frederick Schmidt, Ph.D., C.Psych.	Co-Chair, Member of Council
Conrad Leung, M.ADS., R.B.A (Ont.), BCBA	Co-Chair, Member of Council
Kelly An, Ph.D., C.Psych.	Professional Member
Gani Braimoh, Psy.D., C.Psych.	Professional Member
Amardeep Badwall-Brown, M.A., R.B.A. (Ont.)	Professional Member
Nezihe Elik, Ph.D., C.Psych.	Professional Member
Melissa Elliott, M.A., R.B.A. (Ont.)	Professional Member
Kate Guyett, M.A., R.B.A. (Ont.)	Professional Member
Mary Kalantzis	Public Member of Council
Nadia Mocan	Public Member of Council
Ken Moreau	Public Member of Council
Kay Narula, M.ADS, R.B.A. (Ont.)	Member of Council
Adrienne Perry, Ph.D., C.Psych., R.B.A. (Ont.)	Professional Member
Jasmine Peterson, M.A. C.Psych.Assoc.	Professional Member
Morgan Sanchez, M.ADS, R.B.A. (Ont.)	Professional Member
Paul Stopciati	Public Member of Council
Sheila Tervit, Ph.D., C.Psych.	Professional Member
Kendra Thomson, Ph.D., R.B.A. (Ont.)	Academic Member of Council
Maggie Toplak, Ph.D., C.Psych.	Academic Member of Council
Mark Watson, Ph.D., C.Psych.	Professional Member

STAFF

Lesia Mackanyyn	Director: Registration
Myra Veluz	Senior Registration Assistant
Deneika Greco	Registration Assistant
Wahiba Akhtar	Registration Assistant
Anna Miller	Registration Assistant
Shannon Elliott	ABA Coordinator
Emily Sarmento	Registration Coordinator
Nuzhat Ahmed	Registration Assistant
Nanthini Joseph	Registration Assistant
Katherine Bell	Registration Assistant

MEETINGS OF THE REGISTRATION COMMITTEE

January 17, 2025: Plenary Session

The Committee met on January 17th for a Plenary Session; this meeting included all panels. The College's staff provided an update on the Council's December 2024 decision to authorize the Registration

Committee to proceed with revising the Registration Guidelines for psychology and applied behavior analysis, specifically to eliminate the restriction on the number of attempts allowed for the registration examinations. The Committee discussed the possibility of incorporating provisions, such as a mandatory training plan, into the guidelines for candidates who have failed either the EPPP or the OEPPABA a specified number of times.

The College's Quality Assurance Committee (QA) updated the Registration Committee on challenges in ensuring compliance with the Self-Assessment Guide (SAG) and Continuing Professional Development (CPD) Program for supervised practice members. The QA Committee proposed three motions to address these challenges, which include revising the duties and responsibilities of supervisors of supervised practice members to ensure appropriate oversight.

The remainder of the Plenary Session was focussed on review of a recent HPARB review which upheld the Committee's decision to refuse an applicant whose master's degree program did not meet the College's non-exemptible academic requirements for psychological associate.

January 20, 2025: Panel A (Psychology Registration Cases)

The Registrar referred a total of 51 cases to Panel A.

These cases included:

- 3 cases involving academic credential reviews (2 masters);
- 36 cases involving training for supervised practice members or eligible candidates (15 doctoral, 21 masters);
- 11 cases involving requests for change of area of practice;
- 1 cases involving return to autonomous certificate from inactive certificate.

January 17, 2025: Panel B (Psychology Registration Cases)

The Registrar referred a total of 36 cases to Panel B.

These cases included:

- 2 cases involving academic credential reviews (2 masters);
- 24 cases involving training for supervised practice members or eligible candidates (12 doctoral, 16 masters);
- 2 cases involving request for removal of a term, condition, limitation (TCL);
- 8 cases involving requests for change of area of practice.

January 17, 2025: Panel C (Behaviour Analyst Registration Cases)

The Registrar referred a total of 4 cases to Panel C.

These 4 cases involved Transitional Route 2 Entry applications.

SUBMITTED BY

Peter Bieling, Ph.D., C.Psych., Co-Chair

Fred Schmidt, Ph.D., C.Psych., Co-Chair

Conrad Leung, M.ADS., R.B.A (Ont.), BCBA, Co-Chair

REGISTRATION RELATED TERMS

- **Academic Credential Review (psychology registrants):** Cases where after an initial review, the Registrar has referred an application for supervised practice to the Registration Committee for a further review to determine whether the applicant has an acceptable graduate level psychology degree.

- **Training Plan (psychology registrants):** Applies to supervised practice members and eligible candidates. If after an initial review, it appears that a candidate is missing required components in the area for which they have declared competence to practise, the Registrar will refer the candidate's application to the Registration Committee for a review of their education and training. The Committee will determine whether the candidate must augment their knowledge and skills via a training plan.
- **Change of Area of Practice (psychology registrants):** Autonomous practice psychologist or psychological associate members who wish to be authorized to practice psychology in a new area and/or with a new client group.
- **Examination Outcome:** Individual cases that require a review of the outcome of, or an issue with, the Oral Examination, JEE, EPPP, or OEPPABA.
- **Reciprocity Application:** Reviews of cases where an applicant has applied from a jurisdiction in which the College has entered into a written reciprocity agreement.
- **Removal or modification of limitation and/or condition:** Autonomous practice members who wish to have a registration related limitation and/or condition removed (or modified) from their certificate of practice.
- **Return to Autonomous Certificate from Inactive Certificate:** Members who have held an Inactive Certificate of Registration for longer than 2 years and who wish to return to a Certificate of Registration Authorizing Autonomous Practice.
- **Transitional Route Entry Application (behaviour analyst registrants):** Cases where after an initial review, the Registrar has referred an application for transitional route entry to the Registration Committee for a further review to determine whether the applicant has met the minimum criteria.

REPORT TO COUNCIL

2025.01.04D

THIRD QUARTER, DECEMBER 1, 2024 – FEBRUARY 28, 2025

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE

COMMITTEE MEMBERS:

Allyson Harrison, College Member, Chair
 Scott Warnock, Public Member, Vice-chair
 Basmah Alkatranji, College Member
 Indira Bains, Public Member (from February 13)
 Marie-Sjaan Berends-Booth, College Member
 Lixian Bao, College Member
 Kirsten Barr, College Member
 Tanaya Chatterjee, College Member
 Oliver Foese, College Member
 Jacob Kaiserman, Council Member
 Marilyn Keyes, College Member
 Karen MacLeod, College Member
 Denise Milovan, College Member
 Ken Moreau, Public Member

Kay Narula, Council Member
 Nicole Neil, College Member
 Olivia Ng, Council Member
 Mai Tran Nguyen, College Member
 Cenobar Parker, Public Member
 Naomi Sankar-DeLeeuw, College Member
 Kendra Thompson, Council Member
 Esther Vlessing, Public Member
 Darlene Walker, College Member
 Rachel Wayne, Council Member
 Crystal Willett, College Member
 Christie Yao, College Member
 Leah Zalan, College Member

STAFF

Zimra Yetnikoff, Deputy Registrar & Director, Investigations and Hearings

COMMITTEE ACTIVITIES

ICRC Meetings

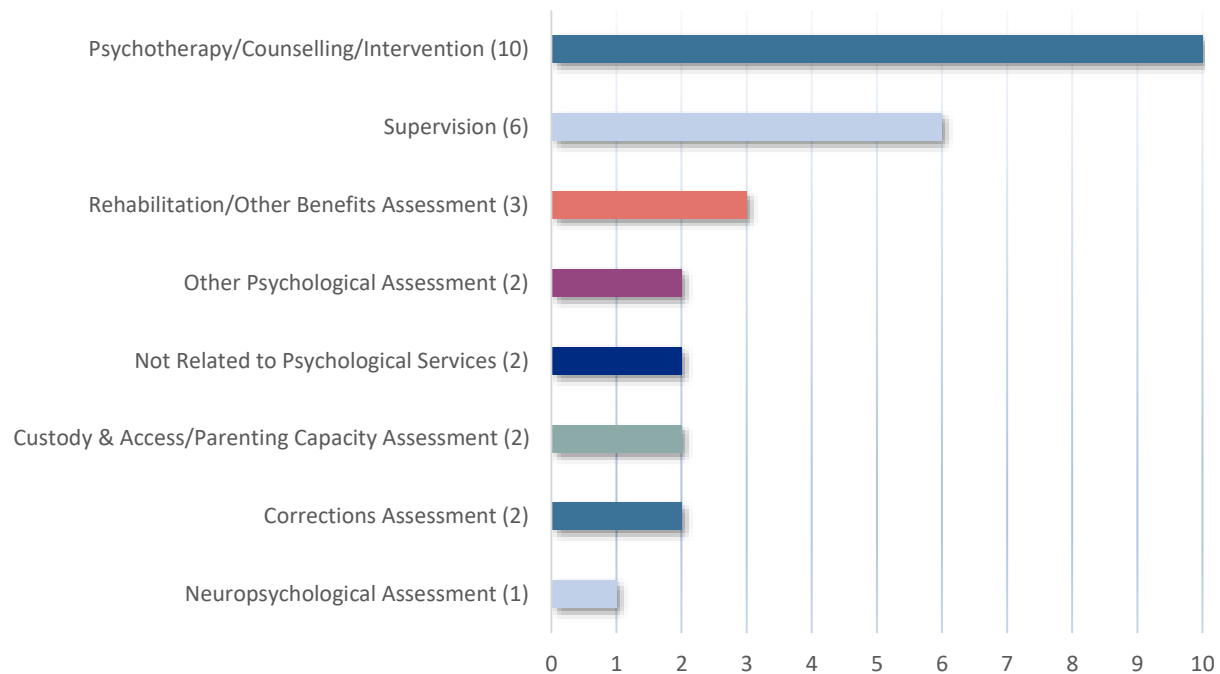
The ICRC met on December 16, 2024, January 9, 2025, and February 6, 2025, to consider a total of 29 cases. In addition, the ICRC held 15 teleconferences to consider 22 cases. The next scheduled ICRC took place on March 3, 2025, with 5 cases on the agenda.

New Complaints and Reports

In the 3rd Quarter, the College received 28 new complaints related to the psychology profession and eight complaints related to the ABA profession.

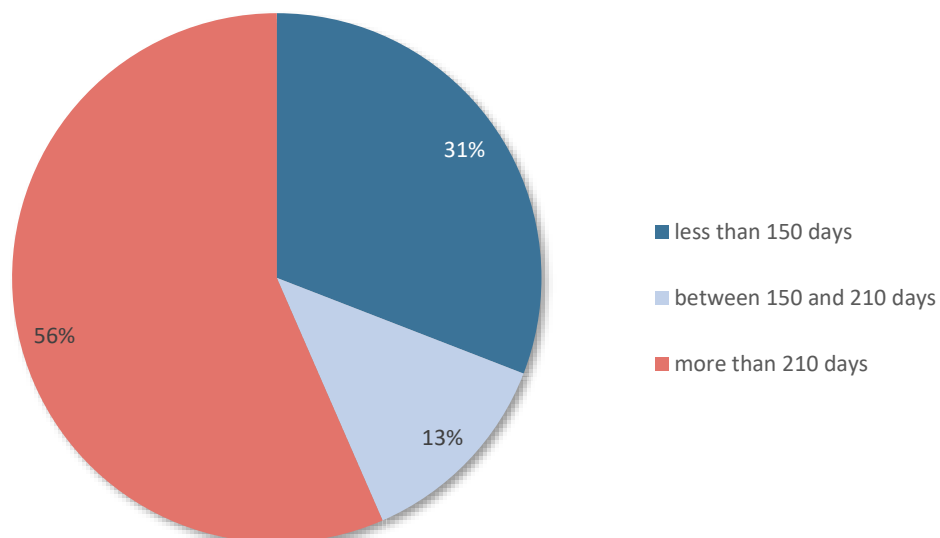
The nature of service for complaints related to the ABA profession are: five regarding supervision, one regarding interventions, and one unrelated to professional services.

The nature of service in relation to psychology matters are:



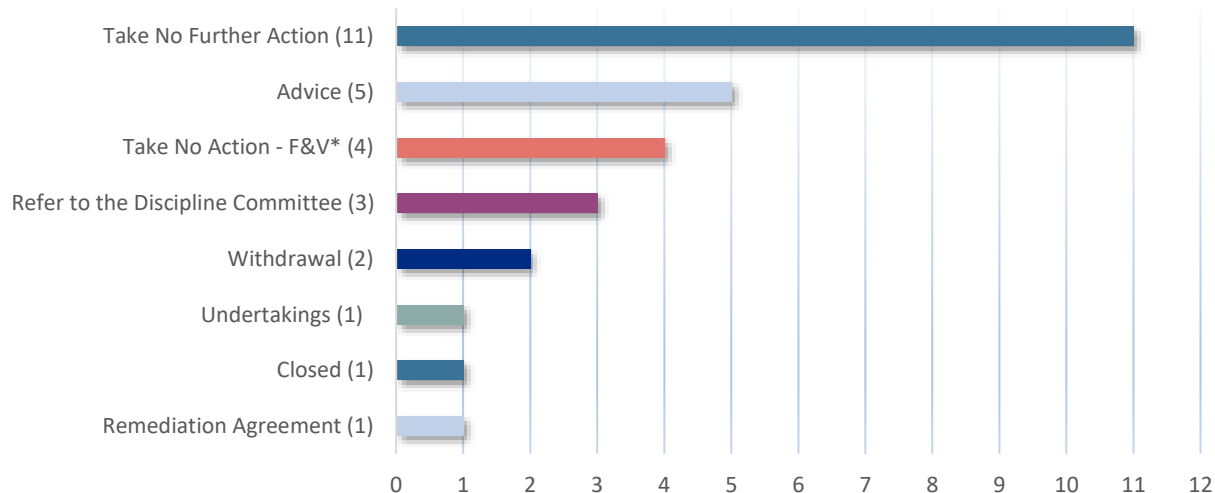
Timeline Snapshot

There are currently 191 open ABA and psychology complaints being actively investigated.



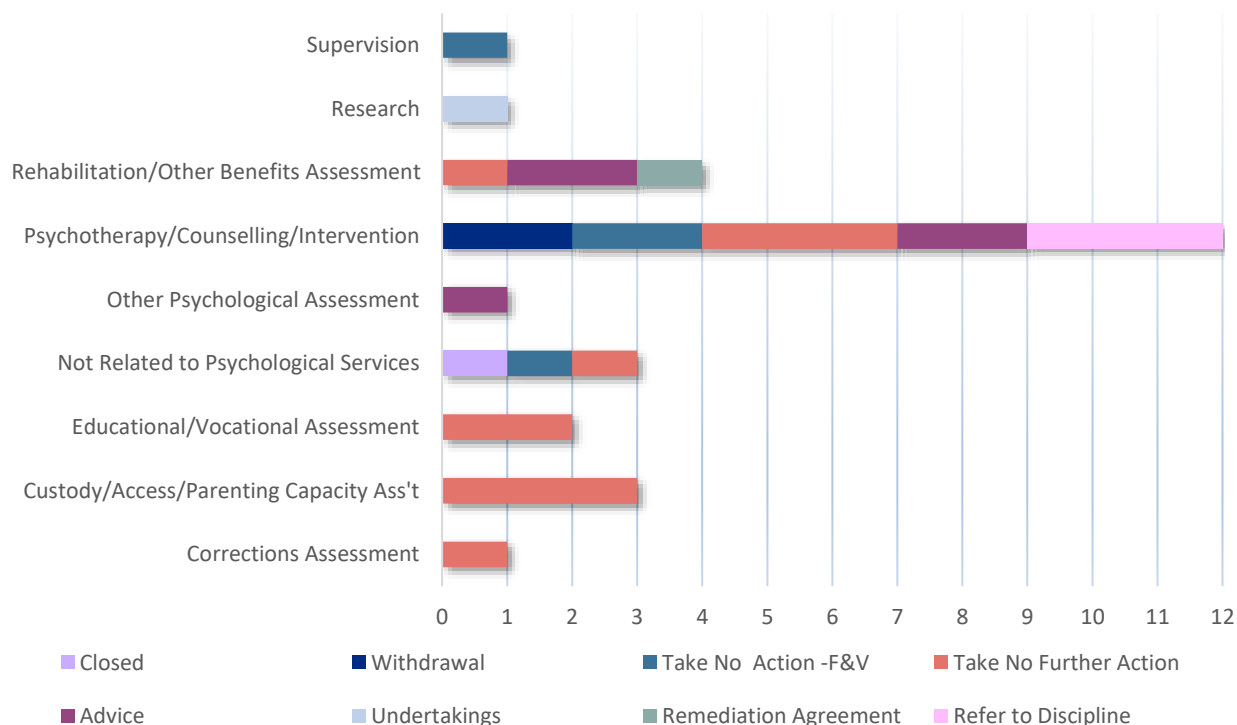
ICRC Dispositions

The ICRC disposed of one ABA case in this quarter and provided the registrant with Advice in that matter. The ICRC disposed of 28 psychology cases during the 3rd Quarter, as illustrated below. The ICRC took some action, which can range from providing advice to a referral to the Discipline Committee, in 10, or 36%, of these cases:



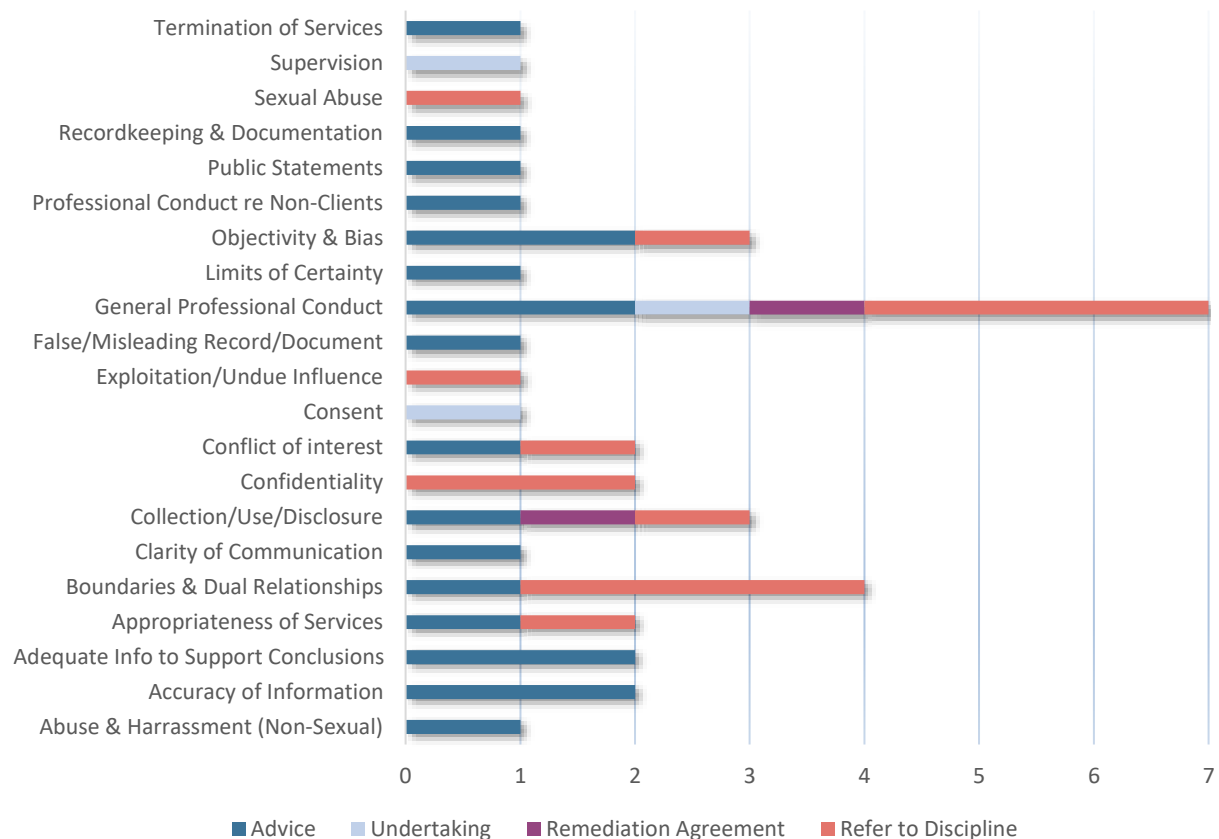
*F&V: Frivolous, vexatious, made in bad faith, moot or otherwise an abuse of process, pursuant to s.26(4) of the Health Professions Procedural Code.

The dispositions of the 28 psychology cases, as they relate to nature of service, are as follows:



Disposition of Allegations

The 28 psychology cases disposed of included the consideration of 124 allegations. The ICRC took some action with respect to 39, or 31%, of these allegations.



Health Professions Appeal and Review Board (HPARB)

In the 3rd Quarter, two HPARB reviews of ICRC decisions were requested. The College received four HPARB decisions. In two of its decisions, the Board confirmed the ICRC decisions. Two requested reviews were withdrawn.

SUBMITTED BY

Allyson Harrison, Ph.D., C.Psych., Chair

BRIEFING NOTE

2025.01.04G

MARCH 2025 COUNCIL MEETING

CONSULTATION RESULTS: PROPOSED AMENDMENTS TO *BY-LAW 18: FEES*

STRATEGIC DIRECTION REFLECTION

Excellence in Care; Innovation in Regulation

MOTION FOR CONSIDERATION

That the proposed amendments to *By-law 18: Fees*, which seeks to waive application fees and annual dues for those psychology professionals working on inter-professional teams of Shared Health or a Manitoba Regional Health Authority, for the provision of public health services to Northwestern Ontario residents, be approved as presented.

Moved by TBD

PUBLIC INTEREST RATIONALE

Shared Health/Manitoba Regional Health Authority in Manitoba provides hospital care to Northwest Ontarians based on an existing agreement between the two jurisdictions. Following initial healthcare services, many clients and their families could have their needs met virtually instead of commuting several hours to the hospital. The expanded use of the already approved interjurisdictional Telepsychology MOU would permit the provision of services within this limited context with no costs to the Manitoba psychologists providing this care.

BACKGROUND

Residents of Northwestern Ontario have limited access to healthcare, including specialty hospital-level care. The province of Manitoba, through their Shared Health/Manitoba Regional Health Authority, provides interprofessional, academic hospital care to this underserved region of Ontario. These communities are located closer to Manitoba than they are to the closest specialty surgical centre within Ontario. For example, it is a six-hour commute from Kenora to the Thunder Bay Regional Health Sciences Centre, but a shorter, two-hour drive to Winnipeg's academic health sciences centre¹. Collaborative healthcare efforts between Manitoba and Ontario are not entirely novel, as both jurisdictions historically participated in a largescale healthcare MOU between Manitoba and Northwestern Ontario which included emergency transport and acute hospital care, given the needs of residents in this region of Ontario.

Expanding the current Telepsychology MOU would permit psychologists in good standing with the Psychological Association of Manitoba employed by Shared Health/Manitoba Regional Health Authority to provide psychological services to residents of a specified region of Northwestern Ontario within the interprofessional care model of the hospital. This would permit psychologists within this model of care to see patients via telepsychology.

¹ <https://www.northernpolicy.ca/healthcarecooperation>

Ontario will add to the current telepsychology MOU, the clinical indication: "*Services, new or ongoing, from a regional public-service setting (e.g., regional referral hospital, Critical Stress Injury Clinic.)*"

Manitoba psychologists who are practicing with Ontario clients **solely** due to this arrangement will have their annual registration and initial application fees waived; as such an amendment to *By-Law 18: Fees*, is required. Specifically, the Interim Autonomous Practice certificate annual dues and application fees under the Telepsychology MOU are to be waived.

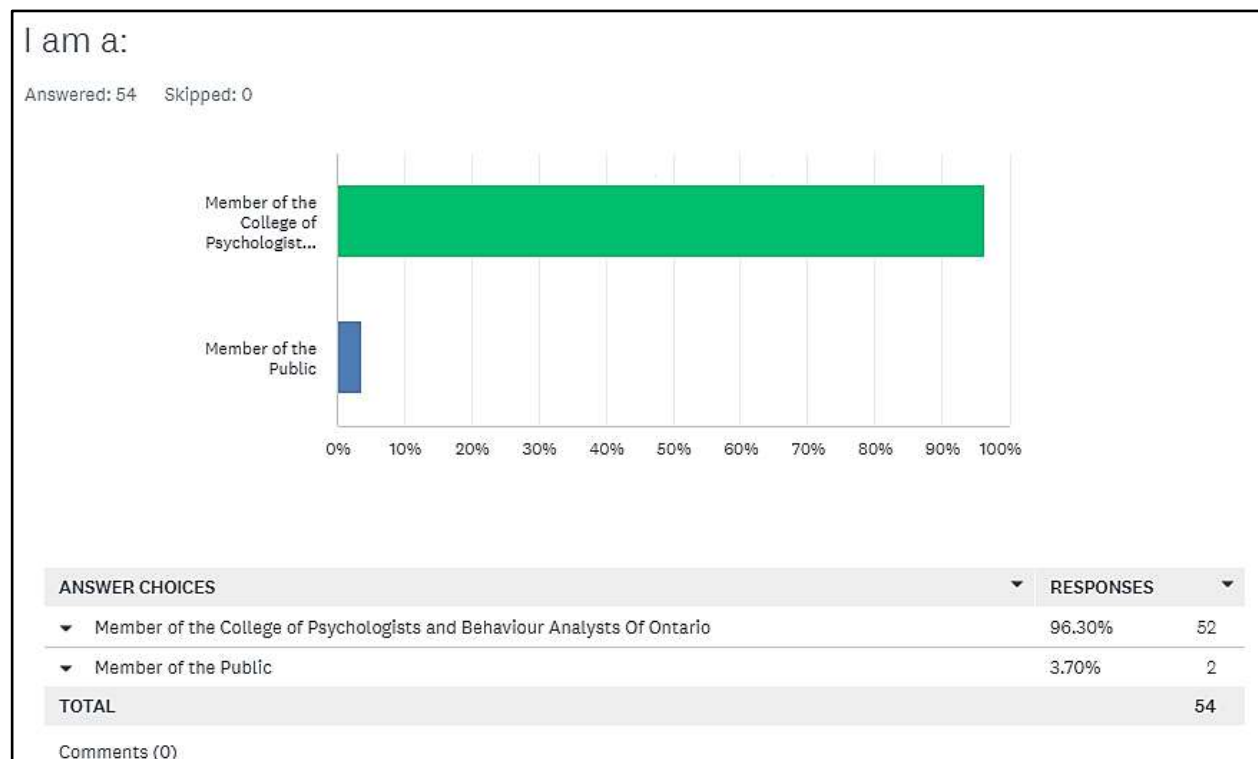
UPDATE

The consultation was distributed to the membership on December 17, 2024, following approval from Council on December 13, 2024, to disseminate for a 60-day consultation. A reminder was published in the [January 2025 issue of HeadLines](#) and posted on the [College's website](#). An additional reminder was also sent via [e-mail blast](#) on January 20, 2025.

The deadline for responses was February 17, 2025. Consultation results and a sample of the feedback received is provided below.

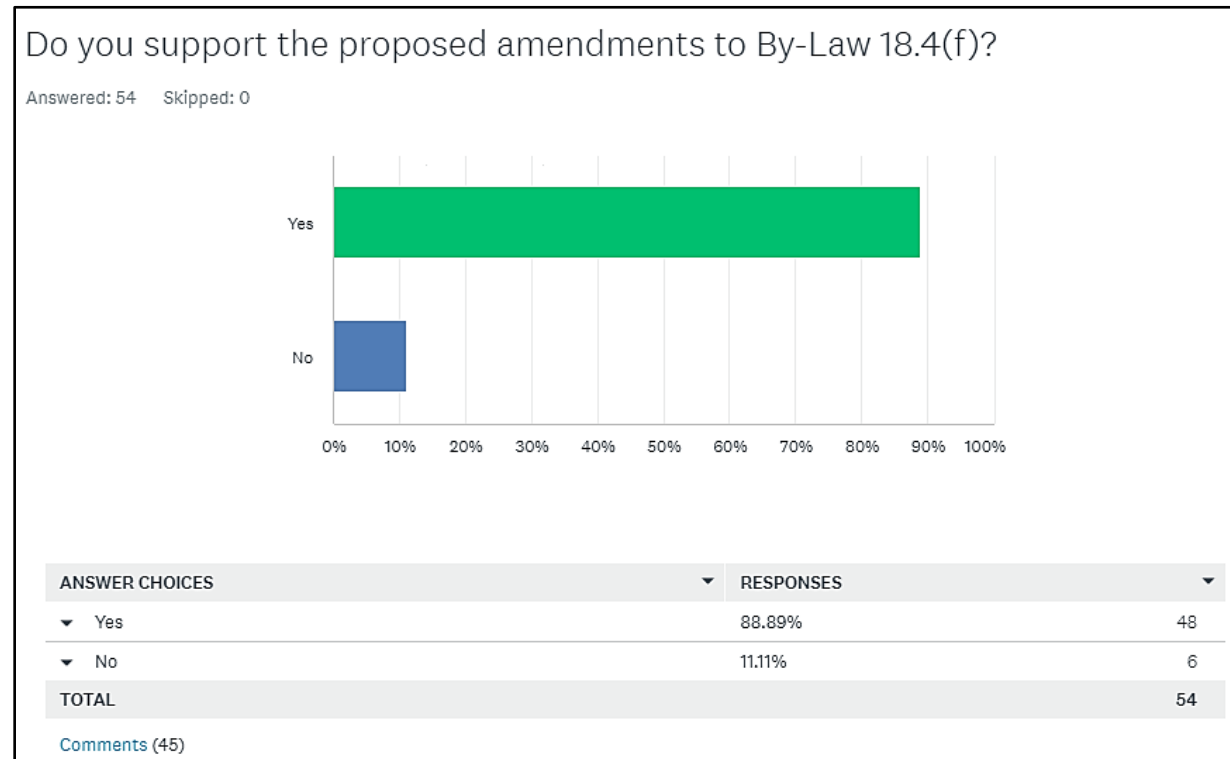
CONSULTATION RESULTS

- Total number of recipients: **6,464**
- Total Responses Received: **54**
 - Member of the College of Psychologists of Ontario: **52**
 - Members of the Public: **2**



Do you support the proposed amendments to *By-law 18: Fees*:

- Yes: **48 (89% of respondents)**
- No: **6**



Sample of Comments Received:

- I am a psychologist in Toronto who grew up in Northwestern Ontario and still has family there. As a result, I am very familiar with the lack of psychological services in the region, as well as the frequent need to travel long distances to receive health care. Increasing access to virtual psychology services has the potential to increase access to care, and to decrease service user burden and health care costs.
- Costs are significant enough and paying twice to confirm that you are eligible to provide services penalizes the professional as well as the people need serves. There are too few well trained regulated professionals.
- I think we need to do all we can to provide services to underserved remote areas; these are clinicians who can practice autonomously so the risk should be minimal.
- I rarely see any thoughts or opinions reflected in amendments being made to the College's regulations. But finally these changes I can completely support because of my extensive life long experience working in isolated and remote northern communities, particularly First Nations communities. I believe these updated regulations regarding fees will help preserve and expand services to these vulnerable communities by removing any financial burdens to providing these services.
- I don't believe a \$300 annual fee is unreasonable and this fee would help to defer administrative costs for the CPBAO to register these psychology professionals. One assumes that they are being

paid competitive wages (with benefits) by the Winnipeg Health Authority, i.e., they are not volunteering their services.

- I lived in Kenora, driving and flying to underserved northern communities. There is significant need for culturally competent providers.
- We have a lack of psychologists in the rural and northern communities. Increasing access would be beneficial.
- I expect registered psychologists in Manitoba are already paying their own college fees and it is unreasonable for them to be doubly charged for providing a necessary service that is more convenient and accessible to residents in that part of Ontario.
- It is consistent with practice in, for example, Nova Scotia, where registrants from other Provinces may conduct telepsychology without becoming registered in Nova Scotia. The caveat is that they be (1) registered in another province and (2) carry liability insurance that covers their tele psychology services in cross-provincial jurisdictions. Please see the following link for specifics: https://www.nsbep.org/downloads/Cross-jurisdictional_telepsychology_services.pdf
- To increase access to mental health supports to an area that is underserved. Increase access and minimize barriers.
- Waiving the application fee removes a barrier to providing services for professionals supporting Ontario.
- Seems like a worthy program to assist with care delivery to an in-need area.
- The need is great. The easier we can make it for people to get appropriate help, the better.
- I'm guided by three values and principles: 1- Special measures for provincial border communities. 2- Equity: Once application fees and annual dues are paid in Manitoba, then that provincial association should provide the oversight.
- The request to further increase the personal profitability of select psychologists outside Ontario should be declined. The proposal would not appear to be consistent with the mandate of the CPBAO. The request does not ensure public protection or ensure improved access to adequate numbers of qualified, skilled, and competent regulated health professionals, as mandated by the RHPA in Ontario. According to the Public Consultation published in June 2023, the CPO substantially increased dues to \$1200 to “maintain adequate financial resources for the College to fulfill its public protection mandate”. The long-term waiver of fees for Shared Health psychologists, the total number of which could be significant, would result in significant costs to CPBAO members, including fee waivers, time spent by CPBAO representatives and staff, and other resulting operational costs. The fees cited here (\$300) are already substantially reduced. The Manitobans could arguably reallocate their budget, in lieu of asking the CPBAO, its staff, and its members to support and fund their activities, and to increase the profitability of select individuals. Geographic location should no longer pose a significant barrier to telepsychology services per se to Ontario residents, which could be provided by Ontario providers. What is the public protection rationale for permitting the initiation of new long-term services on a routine basis in Ontario, without the full regular application for registration with the CPBAO, as implied here? Why should Shared Health psychologists be exempt from regular application, which would be required of other psychologists? Out of fairness and transparency, additional information should be provided to CPBAO members prior to implementing or asking them to support such changes. For example, what are the anticipated costs to CPBAO members (including fee waivers, time spent by CPBAO representatives and staff and other operational costs)? Overall, this would not appear to represent a fair or appropriate proposal, consistent with the mandate of the College.
- Removes/prevents a barrier in providing services to a hard-to-reach and chronically under-served population.
- Reduces problems with continuity of care and deals with the realities that many clients and students are more fluid in location while working.

- Ensuring access to services in an underserved population is essential.
- Support providing services to underserved, as well as not adding the burden of fees to those doing the work through Manitoba
- Provides increase accessibility to services for individuals in Northern Ontario.
- Having grown up in MB, I understand the difficulties in access to healthcare and mental health support that those living in NW Ontario face. I am pleased that our college is supporting this initiative to improve access to those living in low-access communities. Improved access improves our society as a whole.
- I support all initiatives to increase access to psychological care for all Canadians.
- Increased access to care for individuals living in Northern Ontario is a priority and can be enhanced by this amendment.
- This action is most certainly in the public interest for individuals living in Northwestern Ontario
- I have worked in northern Ontario and I understand it's unique needs. I think this amendment is a welcome change.
- This facilitates interprovincial collaboration and provides much needed care
- It's oddly specific to one specific service, and I do not see any evidence that there's a reciprocal benefit to Ontario psychologists. Many services may present the same moral arguments with respect to underserved populations and the need for services. I'd rather see the fees waived for all, or at least reduced for all, rather than have one particular service cherry-picked from among the many that are equally deserving.
- The right thing to do.
- Remote areas of Ontario need the services being provided. This will encourage professionals to continue to provide them.
- Options for psychological services in Northern Ontario are limited and I support being able to remove any barriers that make it harder to access services. This option also helps limit the dual relationships that are more common in small communities.
- Flexibility is required to support underserved rural, remote, northern and Indigenous communities in Ontario.
- It will make psychological health care easier to access for Ontarians with little or no threat to Ontario psychologists.
- The proposed amendments make reference to "(Interim Autonomous Practice certificate under the Interjurisdictional Telepsychology MOU)." when the ACPRO MOU contains no reference to "Interim Autonomous Practice". The Consultation is not available in French. This agreement appears to avoid / ignore the fact that there are a number of residents of Northern Ontario who have French as their first language. If the Winnipeg Health Authority has not raised the issue of French services then the proposed amendments are too narrowly focused and should include similar provisions to waive application and annual fees for qualified professionals from other jurisdictions (e.g., Quebec) that are able to provide telepsychology services...
- I am somewhat okay with having northern Ontario residents accessing services by Manitoba registered psychologists but they should be paying application fees and annual dues; if not the individual then by the authority that employs them. The College is in dire straights financially; we should be looking for any opportunity to generate revenue.
- Provides much needed support
- It makes sense.
- Northern Ontario needs these services.
- Access to services in Northern Ontario is significantly limited. Finding creative ways to meet the need for service providers is critical - particularly in light of the number of indigenous communities

and calls for action under the TRC. Minimizing duplication of fees is a small cost to increase access to services for a vulnerable population.

- All practitioners that are registered in Ontario should pay the same fees. Waiving fees for certain practitioners violates the value/ethic of fairness.
- I believe this is a fantastic idea and a commendable initiative. Kudos to the CPBAO for demonstrating openness and a commitment to increasing access to services in rural communities. That said, my only hesitation concerns the level of training of the practitioners involved and its potential long-term impact. While I am not certain how feasible this would be, I believe this opportunity should be limited to clinicians with doctoral-level training. My concern is that offering this pathway more broadly could inadvertently create challenges, such as requests for recognition from master's-level practitioners in the future.

RISK

The risks to the Ontario public are not expected to materially change from that of typical service provision. Providing services through the MOU, psychologists will remain accountable to Ontario and to their provincial regulator, should there be a complaint. The risks of not establishing this practice pathway are missed opportunities for the Ontario public to access high quality psychological care in a region of the province with limited resources.

NEXT STEPS

Upon approval of Council, amendments will be reflected in the By-laws and the College staff will work with the Psychology Leadership of Shared Health for an estimated launch of June 1, 2025.

ATTACHMENTS

1. Tracked Changes of Proposed amendments to *College By-law 18.5.2*.

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

BY-LAW 18: FEES

[Approved by Council December 1999; last amended on September 22, 2023]

This By-law is made under the authority of the *Regulated Health Professions Act, 1991* as amended, and the *Psychology and Applied Behaviour Analysis Act, 2021* as amended.

Note: The requirements for each certificate of registration are set out in the Registration Regulation.

Membership

- 18.1 Every member shall pay an annual membership fee in accordance with this By-law for each membership year.
- 18.2 A membership year begins on June 1 in one year and ends on May 31 of the following year.
- 18.3
 - a. The annual fee for membership must be paid on or before June 1 in the membership year.
 - b. Notwithstanding subsection (a), the annual fee for a member holding a Certificate of Registration Authorizing Supervised Practice is payable in two equal instalments on or before June 1 and December 1 in the membership year.
- 18.4 The annual fee for membership to practise as a Psychologist or Psychological Associate is,
 - a. \$1200 for members who hold
 1. a Certificate of Registration Authorizing Autonomous Practice,
 2. a Certificate of Registration Authorizing Interim Autonomous Practice, or
 - b. \$600 for members who hold a Certificate of Registration Authorizing Supervised Practice;
 - c. \$298 for members who hold an Inactive Certificate of Registration;
 - d. \$62.50 for members who hold a Retired Certificate of Registration; and
 - e. \$600 for members who hold an Academic Certificate of Registration.
 - f. \$300 for members who hold a Certificate of Registration Authorizing Interim Autonomous Practice for temporary, limited practice and who have entered into an *Undertaking and Agreement* with the College, except for Manitoba registrants employed by Shared Health or a Manitoba Regional Health Authority for the provision of public health services to Northwestern Ontario residents. For these registrants, the application fee and annual fee are waived.
 - g. \$300 for members who hold a Temporary Emergency Class Certificate of Registration
- 18.5 The annual fee for membership to practise as a Behaviour Analyst is,
 - a. \$795 for members who hold a Certificate of Registration Authorizing Autonomous Practice,
 - b. \$550 for members who hold a Certificate of Registration Authorizing Supervised Practice;
 - c. \$238.50 for members who hold an Inactive Certificate of Registration;
 - d. \$50 for members who hold a Retired Certificate of Registration; and
 - e. \$397.50 for members who hold an Academic Certificate of Registration.
 - f. \$300 for members who hold a Temporary Emergency Class Certificate of Registration
- 18.5.1 Members Registered in Psychology and Applied Behaviour Analysis (Dual-Registration): The total annual membership fee for members who hold a Certificate of Registration for a Psychologist or Psychological Associate Authorizing Autonomous Practice, and who also hold

a Certificate of Registration for a Behaviour Analyst Authorizing Autonomous Practice, is \$1200. **This fee will be in effect until June 30, 2026, and is subject to Council review prior to that date.**

18.5.2 Annual membership fees for all other certificates of registration are assessed in accordance with Sections 18.4 and 18.5 of the by-laws to a maximum total annual membership fee of \$1200. **The maximum annual fee for two certificates of registration will be in effect until June 30, 2026, and is subject to Council review prior to that date.**

18.6 No later than 30 days before an annual fee is due, the Registrar shall notify the member of the amount of the fee and the day on which the fee is due.

18.7 A member who fails to pay an annual fee on or before the day on which it is due shall pay a penalty of 20 per cent of the annual fee, in addition to the annual fee.

18.8 Membership fees will be reviewed annually.

Examinations-Psychology

18.9 The fee for the Examination for Professional Practice in Psychology is the fee set by the Association of State and Provincial Psychology Boards and its contractors.

18.10 The fee for the Jurisprudence and Ethics Examination is \$200.

18.11 The fee for the oral examination is \$550.

Examinations-Applied Behaviour Analysis

18.12 The fee for the Ontario Examination for Professional Practice in Applied Behaviour Analysis is \$400.

18.13 The fee for the Jurisprudence and Ethics Course and Assessment in Applied Behaviour Analysis is \$200

Interviews

18.14 The fee for an interview is \$500.

Applications

18.15 a. The fee for an application for a Certificate of Registration Authorizing Supervised Practice as a Psychologist or Psychological Associate is \$230.

b. Notwithstanding subsection (a), the fee for an application for a Certificate of Registration Authorizing Supervised Practice is \$100, if the applicant holds a Certificate of Registration Authorizing Autonomous Practice as a Psychological Associate.

c. The fee for an application for a Certificate of Registration Authorizing Supervised Practice as

a Behaviour Analyst is \$230.

- d. The fee for an application for a Certificate of Registration Authorizing Autonomous Practice as a Behaviour Analyst under Transitional Registration provisions is \$230.

- 18.16 a. The fee for an application for a Certificate of Registration Authorizing Interim Autonomous Practice is \$100.
 - b. Where section 22.18 of the Code applies, the fee for an application for a Certificate of Registration Authorizing Autonomous Practice is \$100.
 - c. The fee for an application for a Temporary Emergency Class Certificate of Registration is \$100.
 - e. Notwithstanding section (b), the fee for an application for a Certificate of Registration Authorizing Autonomous Practice is waived if the applicant holds a Temporary Emergency Certificate of Registration or held a Temporary Emergency Certificate of Registration within the six months prior to applying.
- 18.17 a. The fee for an application for each of the following certificates is \$100:
 - 1. Academic Certificate of Registration;
 - 2. Inactive Certificate of Registration;
 - 3. Retired Certificate of Registration;
 - b. Where an applicant for a Certificate of Registration Authorizing Autonomous Practice holds one of the certificates listed in subsection (a), the fee for the application is \$100.

Professional Corporations

- 18.18 The fee for the application for, and issuance of, a certificate of authorization, including any reinstatement of a certificate of authorization, for a professional corporation is \$350.
- 18.19 The fee for the annual renewal of a certificate of authorization is \$250.
- 18.20 The fee for the issuing of a document or certificate respecting a professional corporation, other than the first certificate of authorization or the annual renewal of a certificate of authorization, is \$50.

Other Matters

- 18.21 The fee for issuance of a document confirming a member's registration status is \$25.

Committee and Program Fees

- 18.22 The Registrar may charge members a fee for anything that a Committee of the College is required or authorized to do under statute or regulations.
- 18.23 Committee and program fees include, but are not limited to, the following:

- a. Cost of hearings or other items ordered by the Discipline Committee;
- b. For the College's Quality Assurance Program, a fee of \$100 for failure to complete any of the mandatory requirements of the College's Quality Assurance Program within the timelines established by the Quality Assurance Committee;
- c. For individual education or remediation programs, the fee charged by and payable to the supervisor, monitor, mentor or program;
- d. For monitoring, supervision, or assessment pursuant to a decision of the Registration Committee, the fee charged by and payable to the monitor, supervisor, mentor or assessor;
- e. Fees and/or costs related to activities, including but not limited to programs and assessments, referred to in acknowledgements and undertakings entered into by a member with the College; and,
- f. Fees and/or costs related to orders and directions of the College Committees.

18.24 Any outstanding balance owed to the College in respect of any decisions made by a Committee, and any fees payable under this By-law will be added to and included in the member's annual fees.

BRIEFING NOTE

2025.01.04G

MARCH 2025 COUNCIL MEETING

DRAFT BUDGET: JUNE 1, 2025, TO MAY 31, 2026

STRATEGIC DIRECTION REFLECTION

Continuous Quality Improvement Culture

MOTION FOR CONSIDERATION

That the Council approve the Draft Budget 2025 - 2026 as presented.

Moved By TBD

PROPOSED BUDGET SUMMARY

Please find the proposed College budget for the fiscal year June 1, 2025, to May 31, 2026, accompanying this briefing note. For your reference, I have attached the budget spreadsheet which presents the following information in the columns from left to right:

- Actual spending for each of the past 6 years as well as the projected year-end for 2024-2025
- Proposed budget for 2025-2026

The proposed budget for 2025-2026 projects a slight surplus to buffer unexpected costs. Of note, the budget this year reflects the stabilization of ABA applicants, as the current fiscal year saw an immediate jump from no ABA registrants to over 1,500 (including application fees, examination fees, and prorated membership fees). This will be the second consecutive year that the College is expecting a balanced budget following a period of seven consecutive deficit years.

It is also expected that the operational costs associated with regulating another profession will begin to accrue, such as the management of complaints and reports, and will be reflected in the College's costs. Although the College staff compliment will not require doubling in size, right-sizing will be crucial to ensure adequate human resources and to avoid staff attrition.

It should be noted that this current year will include two in-person Council meetings, in September 2024 and March 2025, and two in-person Council Training Days, the day before each of the respective Council meetings. In-person meetings require financial consideration as it must be recognized that virtual meetings are far more economical, and it is important to carefully consider the value added of hosting in-person meetings. The Council's current direction is to continue to hold two in-person meetings/training days per year as there is added value to discuss some Council matters in-person and supports a sense of team. Two in-person Council meetings provide a good balance between efficiency and social interaction. Committees and working groups have generally functioned extremely well virtually and it is recommended all (other than the exception above) continue this way.

As is the case each year in developing the budget, there are many areas of College work for which the prediction of potential costs is extremely difficult. It is possible to predict fixed costs such as staff payroll,

rent, insurance and association membership fees and events such as the Barbara Wand Seminar with reasonable accuracy; this is not possible for many other areas.

Other expense areas are considerably more variable and dependent upon the activity which comes to the College's attention. Costs associated with lines such as legal advice for Investigations, Discipline and Registration; Discipline panels and the hearing facilities; the need for ICRC experts and outside investigators; and requests for funding for therapy are fully dependent on events occurring during the year. Committee *T.A.M.* are also difficult to predict as Committee composition and the number of out-of-town Committee members, or private practitioners claiming the overhead expense allowance, is not determined until after the June Council meeting by which time the budget has been approved.

Below is a description of the main features of each budget area.

Revenue

The primary source of revenue for the College is member *Registration Fees*; this includes both autonomous practice, supervised practice, academic, inactive, and retired. Together with *Application Fees* this accounts for approximately 90% of the College Revenues. The remaining 10% is received from *Incorporation Applications* and *Renewal Fees, Examination Fees, Net Investment Income, Quality Assurance Penalties* and *Discipline Cost Recovery*. As explained in Cost of Sales below, revenue from *Examination Fees* does not offset the cost of administering the examinations.

The budget anticipates a stabilization of annual membership fees, as the current year experienced a surge in ABA applications due to the proclamation of the *Psychology and Applied Behaviour Analysis Act (2021)* on July 1, 2024. Thus, ABA application and examination revenue will appear lower in the budget, as the rate of new ABA members will be less than the initial 1500+ increase in members this current year. The current year's budget also required significant estimations of how many ABA members the College would receive from the two transitional registration routes. Although it was possible to estimate Transition Route 1 with some accuracy (fast-track registration based on BCBA-BCBA-D certification), it was much more difficult to estimate the number of Transition Route 2 applicants. There were significantly fewer Transition Route 2 applicants than expected, and the budget corrects for this overestimation. While it is difficult to calculate what the actual increase in membership will be this year, the budget reflects a conservative estimate based on a year-by-year trend in membership growth.

Cost of Sales

This area presents the expenses the College incurs in administering the Registration process and offering the Barbara Wand Seminar. The proposed budget anticipates an increase in these costs over the current year's budget. This increase is primarily due to increases in the per diem rates for professional members participating in the Oral Exam processes as well as the need to maintain the psychometric consultant for the psychology Jurisprudence and Ethics Examination until a transition to a low stakes format has been completed.

The budget continues to anticipate that the June and December Oral Examinations will be held virtually. This has been done successfully over the past three years and results in significant savings in examiner *T.A.M.* costs and the facility expense associated with the rental of a large number of hotel rooms as well as catering. Similarly, the budget anticipates that the Barbara Wand Seminar will continue to be offered virtually resulting in significantly lower costs over in-person events.

Governance

The *Governance* budget for 2025-2026 shows a decrease over the current budget despite an increase in professional member per diems (Council, Executive and FAC) and Council TAM expenses for the two, 2-day in-person meetings (Council Meeting + Training). The realization of savings comes primarily from the lack of need of the modernization consultant for the prescription privilege project during the current year, as the Registrar (with the President's assistance) was able to complete this preliminary work. Significantly less funds are allocated this year for the consultant to complete the remaining potential work. Funds have also been budgeted for the execution of recommended initiatives from the Equity, Diversity, and Inclusion Working Group, should they be accepted by the Executive and Council. The President's stipend also received a modest increase as a cost-of-living adjustment.

Registration

The proposed expenditures for this area are higher than those set out in the previous budget due to the increase in per diem rates (participation and preparation time) for Registration Committee members. The addition of ABA members also resulted in increased costs. The budget for legal consultation regarding HPARB reviews has been increased reflecting the projected year's estimated spending. Funds continue to be allocated to *Registration Other Expenses* to cover anticipated costs of reviewing examinations (i.e. Psychology Oral Exam) and other registration-related issues (i.e. OFC).

Client Relations Committee

The estimated spending on Client Relations in 2025-2026 will remain stable despite the increase in professional committee member per diem rates. Cost savings were realized as funds are no longer allocated for social events, due to the College's need to focus on core operations and strategic matters during the next fiscal year.

In planning for the next fiscal year, it is difficult to predict the amount that will be required to support the *Program for Funding for Therapy and Counselling*. Expenses are dependent upon the number of individuals for whom funding is approved, the number of sessions they attend with their chosen therapist or counsellor and the fee charged. The amount budgeted is based on the current year's projected experience, previous expenditures in this area, and the number of individuals currently benefitting from the program.

Quality Assurance

The estimated spending in the Quality Assurance area will increase primarily due to the impact of increasing Committee member per diems and to include ABA members. In the current year, many PARs were held virtually resulting in substantially lower *T.A.M* costs.

Investigations and Resolutions

The overall budget for this area is estimated to be higher in the next fiscal year due to an increase in per diem rates for Committee members and the addition of ABA members. This increase also impacts Committee member prep time costs. The budget also reflects the increased need for outside *Experts* upon whom the panels rely for expert opinions when necessary. It is anticipated that there will be continued need for services such as computer specialists and digital experts and summons servers. These are budgeted for within *Other Expenses*. This area is among those which is very hard to predict as the costs are dependent on the nature of complaints and the need to go 'outside' to ensure a full and comprehensive investigation.

Hearings

Overall, the budget for 2025-2026 will be slightly higher than the current year, which is due to the change in per diem rates and the larger size of the Discipline Committee with the addition of ABA members.

Liaison

Liaison expenses are primarily associated with the College's membership in a variety of organizations and the associated membership fees. Currently the College is a member of a number of organizations relevant organizations. The budget provides separate lines related to the costs association with the federation of Health Profession Regulators of Ontario (HPRO), the Association of Canadian Psychology Regulatory Organizations (ACPRO) and the Association of State and Provincial Psychology Boards (ASPPB). The budget includes the funds to support the College President's attendance at the four meetings a year held by ACPRO and ASPPB which have associated per diem expenses. The cost of travel to support the President's attendance is difficult to predict as it depends on the location of the meetings. However, travel, meals, and accommodations have all increased in price as a result of inflationary pressures, and an increase in the budget is allocated to offset these costs.

Membership fees related to the Council on Licensure, Enforcement, and Regulation (CLEAR), the Canadian Network of Agencies of Regulation (CNAR) and the Canadian Society of Association Executive (CSAE) are shown within *Liaison Other* as there are no separate lines for this. Also, funds are budgeted in *Liaison Other* to support the semi-annual meetings hosted by the College for the Directors of Clinical Training and the Internship Directors. It may include other miscellaneous meetings with the government, other stakeholders, or other one-time meetings.

Administration

The overall proposed *Administration* budget is higher than the current year.

The increase in *Office Net Rent* and *Additional Rent* is anticipated as it is based on the details of the lease which was signed in January 2020. *Bank Charges* in the proposed budget are expected to increase due to the increase in membership, as they fees are primarily incurred when membership and application fees are paid by credit card and EFT.

Communications Consultant will also see an increase in the proposed budget to enhance French language services which includes translation of essential materials and resources of the College, ensuring better accessibility for our French-speaking members and stakeholders.

Payroll reflects an increase in the proposed budget. There is a continued need to maintain competitive compensation in the human resources marketplace. The College was able to replace a senior leadership position this past year, but compensation was a barrier to recruiting candidates. The focus of the College's management team is to build sufficient capacity in their operational flows to buffer inevitabilities such as sick time and vacation. Historically, the human resources infrastructure relied on decreasing productivity during these times. With the onboarding of ABA, operations must have safeguards in place to ensure functioning. Right sizing will need to occur this coming year to meet the demands of the College. The budget includes two additional case managers and an assistant within the Investigations and Hearings portfolio.

The total compensation package for staff currently includes retirement planning with a 7% gross contribution towards an RRSP. After surveying the staff and benchmarking with other health regulators, a defined pension plan for the staff was the preferred form of retirement compensation. This was

particularly true for longstanding employees who were close to retirement, reinforcing the desirability of this option.

Two defined pension plans were reviewed for potential adoption, HOOPP and CAAT, with the vast majority of staff voting for HOOPP. Any current staff member who prefers to continue to receive an RRSP contribution would be able to do so. Employer contributions range from 8.69% to 10.27% depending on the salary of the staff member. Even with the addition of three additional staff members (described above), there is solely a \$68,568.38 increase to the budget in comparison to the 7% RRSP contribution. The additional costs to the College would be the mandatory Ontario Hospital Association annual membership required of all HOOPP participants, estimated for the College to be \$4,000. Funding for professional development and staff attendance at relevant conferences was also increased to ensure that the College continues to invest in its staff to reduce attrition, to develop relevant skills, and to attract new talent.

Professional Services shows an increase in the upcoming budget with the need for contractors to assist with modernizing the College's IT infrastructure. Significant investment is required to update the College's security and data management systems and would have been spent under the now-terminated agreement with Thentia. Due to the increased risks to the professional Council members receiving vexatious complaints associated with their role on the Council, resourcing for indemnifications was adjusted to account for these costs.

The budget as presented is the anticipated spending for 2025-2026. As previously noted, many areas, both in revenue (membership and application fees, etc.) as well as Funding for Therapy and Counselling, ICRC and Discipline costs are highly dependent on circumstances that are variable from year to year.

ATTACHMENT**1. Draft Budget 2025-2026**

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

June 2025 - May 2026

	ACTUAL 2018-2019	ACTUAL 2019-2020	ACTUAL 2020-2021	ACTUAL 2021-2022	ACTUAL 2022-2023	ACTUAL 2023-2024	PROJECTED YEAR-END 2024-2025	PROPOSED BUDGET 2025-2026
Ordinary Income/Expense								
Income								
FEES								
Registration Fees								
40100 · Registration Regular		2,952,045.00	3,054,202.85	3,135,308.61	3,147,100.72	3,239,694.22	4,910,000.00	5,240,400.00
40150 · ABA Registration Regular							850,000.00	1,244,970.00
40200 · Registration Academic		8,781.00	4,108.48	3,180.00	2,783.50	2,436.00	4,200.00	3,000.00
40300 · Registration Inactive		36,998.00	37,852.90	35,276.53	39,390.88	36,976.18	44,000.00	38,740.00
40301 ABA · Registration Inactive								6,678.00
40400 · Registration Retired		16,916.00	18,904.11	20,306.05	20,647.88	20,599.49	24,000.00	26,937.50
40500 · Late Penalty		8,362.00	23.85	10,093.77	7,249.10	5,686.35	41,245.90	36,000.00
40550 · Adjustments			0.00	0.00	0.00	0.00	0.00	0.00
Total Registration Fees	2,963,896.00	3,023,102.00	3,115,092.19	3,204,164.96	3,217,172.08	3,305,392.24	5,873,445.90	6,596,725.50
40700 · Supervised Practice	135,552.00	136,665.00	120,189.19	124,549.17	129,446.55	154,845.50	122,650.00	121,200.00
40701 · ABA Supervised Practice								2,750.00
Application Fees								
40900 · Mobility Application - AIT		1,700.00	2,700.00	5,100.00	3,500.00	3,500.00	2,000.00	2,000.00
40950 · Mobility Application - IAP		8,800.00	11,200.00	10,400.00	10,000.00	10,800.00	8,000.00	8,000.00
41000 · Registration Application		54,740.00	51,880.00	42,550.00	52,210.00	346,150.00	122,650.00	52,000.00
41001 · ABA Application Fees								5,750.00
Total Application Fees	58,584.00	65,240.00	65,780.00	58,050.00	65,710.00	360,450.00	132,650.00	191,700.00
Total FEES	3,158,032.00	3,225,007.00	3,301,061.38	3,386,764.13	3,412,328.63	3,820,687.74	6,128,745.90	6,788,425.50
INCORPORATION								
41010 · Corporation Application	16,350.00	15,750.00	23,100.00	27,350.00	30,450.00	27,650.00	25,000.00	21,000.00
41020 · Corporation Renewal	83,700.00	92,750.00	102,000.00	119,250.00	137,750.00	148,250.00	150,000.00	150,000.00
Total INCORPORATION	100,050.00	108,500.00	125,100.00	146,600.00	168,200.00	175,900.00	175,000.00	171,000.00
EXAM FEES								
41100 ABA JEE Fees								
41110 ABA JEE Module						92,400.00	305,000.00	40,000.00
41120 ABA Entry to Practice Exam							30,000.00	10,000.00
Total 41100 ABA JEE Fees							335,000.00	50,000.00
41200 · Jurisprudence Exam	47,200.00	51,196.00	42,400.00	53,000.00	57,000.00	58,400.00	47,000.00	47,000.00
41300 · Oral Examination	83,600.00	70,950.00	79,750.00	77,550.00	74,800.00	71,500.00	77,000.00	77,000.00
41400 · Interviews	7,000.00	4,000.00	7,500.00	7,000.00	6,000.00	7,500.00	1,050.00	4,000.00
Total EXAM FEES	137,800.00	126,146.00	129,650.00	137,550.00	137,800.00	229,800.00	460,050.00	178,000.00
OTHER INCOME								
42100 · Seminar Income	50.00	50.00		0.00	0.00	0.00	0.00	0.00
42200 · Net Investment Income	117,468.00	157,188.00	34,101.55	27,007.46	204,219.29	281,087.51	167,936.03	100,000.00
42400 · Discipline Costs Recovery			7,000.00	7,000.00	13,500.00	9,872.50	42,000.00	10,000.00
42600 · Sundry Income	6,950.00	5,053.00	8,024.92	21,899.70	4,142.30	3,657.81	2,500.00	2,500.00
42800 · Quality Assurance Penalties	0.00	0.00	0.00	0.00	9,900.00	2,600.00	0.00	5,000.00
49000 Government Grant Revenue					124,738.16	300,145.13	0.00	0.00
43000 · Unrealized Gains/Losses	229.00	-1,369.00	-2,009.28	-4,880.00	0.00	0.00	0.00	0.00
Total OTHER INCOME	124,697.00	185,618.00	47,421.10	51,027.16	356,499.75	597,362.95	212,436.03	117,500.00
Total Income	3,520,579.00	3,645,271.00	3,603,232.48	3,721,941.29	4,074,828.38	4,823,750.69	6,976,231.93	7,254,925.50

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

June 2025 - May 2026

	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	PROJECTED	PROPOSED
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	YEAR-END	BUDGET
							2024-2025	2025-2026
Cost of Goods Sold								
COS								
ABA Jurisprudence								
51100 ABA Entry to Practice Exam						21,236.23	48,000.00	48,000.00
51110 ABA Juris Learning Module					18,362.50	281.89	57,872.00	57,872.00
Total ABA Jurisprudence						21,518.12	105,872.00	105,872.00
Jurisprudence								
51200 · Juris-Exam Devel Maint	15,762.00	28,072.00	27,402.66	6,230.69	14,331.25	4,875.00	20,000.00	11,400.00
51210 · Juris - Administration	12,955.00	12,818.00	13,295.58	15,990.63	17,248.32	17,701.45	21,650.00	21,650.00
51220 · Juris - Contractor Fees & Exp.	24,984.00	31,982.00	54,240.00	38,768.50	39,917.25	32,657.00	32,770.00	40,000.00
Total Jurisprudence	53,701.00	72,872.00	94,938.24	60,989.82	71,496.82	55,233.45	74,420.00	178,922.00
Oral								
51300 · Oral Exam - Admin Expenses		103,086.00	0.00	59,288.05	225.87	0.00	4,000.00	4,000.00
51310 · Oral Exam - Per Diem		100,575.00	118,006.35	115,353.38	128,499.71	111,014.44	114,000.00	142,500.00
Total Oral	212,665.00	203,661.00	118,006.35	174,641.43	128,725.58	111,014.44	118,000.00	146,500.00
51400 · Oral Interview Expenses	3,753.00	1,102.00	11,375.00	7,550.00	6,831.25	8,875.00	4,000.00	5,000.00
52000 · Publication Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
52100 · Seminar Expenses	26,952.00	30,864.00	6,837.33	14,558.99	10,363.35	6,566.43	22,000.00	22,000.00
Total COS	297,071.00	308,499.00	231,156.92	257,740.24	235,779.50	203,207.44	324,292.00	352,422.00
Total COGS	297,071.00	308,499.00	231,156.92	257,740.24	235,779.50	203,207.44	324,292.00	352,422.00
Gross Profit	3,223,508.00	3,336,772.00	3,372,075.56	3,464,201.05	3,839,048.88	4,620,543.25	6,651,939.93	6,902,503.50

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

June 2025 - May 2026

						PROJECTED	PROPOSED
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	YEAR-END	BUDGET
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
							2025-2026
Expense							
GOVERNANCE							
Council Members							
53000 · Per Diems	16,519.00	22,213.00	13,368.75	12,618.75	9,962.50	17,531.25	36,400.00
53020 · T.A.M. Expenses	20,129.00	17,013.00	0.00	0.00	0.00	0.00	25,000.00
53030 · Election Expenses	1,409.00	1,250.00	1,430.00	1,580.00	1,370.00	1,370.00	3,000.00
53040 · Training	13,831.00	8,917.00	81.25	11,862.00	10,093.75	15,947.50	50,000.00
53045 · Special Proj-Other	0.00	650.00	6,362.50	13,928.56	73,132.81	34,381.25	40,000.00
53046 · Special Proj-Cmte Audit	7,345.00	16,837.00	6,215.00	0.00	0.00	0.00	0.00
Total Council Members	59,233.00	66,880.00	27,457.50	39,989.31	94,559.06	69,230.00	154,400.00
Executive Committee							
53100 · Per Diem	5,525.00	6,513.00	4,118.75	4,550.00	2,600.00	4,175.00	6,800.00
53120 · T.A.M. Expenses	18,632.00	5,139.00	0.00	0.00	0.00	0.00	0.00
53140 · Training	1,300.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Executive Committee	25,457.00	11,652.00	4,118.75	4,550.00	2,600.00	4,175.00	6,800.00
Finance and Audit Committee							
53180 · Per Diem	731.00	1,463.00	487.50	1,056.25	650.00	1,287.50	1,200.00
53185 · T.A.M. Expenses	284.00	1,114.00	0.00	0.00	0.00	0.00	0.00
Total Finance and Audit Committee	1,015.00	2,577.00	487.50	1,056.25	650.00	1,287.50	1,200.00
53200 · President's Admin Stipend	8,500.00	8,500.00	8,499.96	8,499.96	8,499.96	8,499.96	8,500.00
70500 · D&O & Travel Accident	5,476.00	5,855.00	6,175.71	6,722.46	6,905.79	7,166.88	7,055.50
Total GOVERNANCE	99,681.00	95,464.00	46,739.42	60,817.98	113,214.81	90,359.34	177,955.50

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

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						PROJECTED	PROPOSED
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	YEAR-END	BUDGET
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
							2025-2026
REGISTRATION							
Registration Committee							
53400 · Per Diem & 53410 - Prep Time	39,713.00	22,413.00	42,093.75	38,662.50	34,237.50	44,518.75	60,000.00
53420 · T.A.M. Expenses	24,955.00	13,591.00	0.00	0.00	0.00	0.00	0.00
Total Registration Committee	64,668.00	50,629.00	42,093.75	38,662.50	34,237.50	44,518.75	60,000.00
53440 · HPARB Reviews - Legal	22,429.00	46,469.00	39,793.83	56,838.76	22,601.90	27,321.94	40,000.00
53450 · Registration Other Expenses			162.50	0.00	0.00	0.00	5,000.00
Total REGISTRATION	87,097.00	97,098.00	82,050.08	95,501.26	56,839.40	71,840.69	105,000.00

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						PROJECTED	PROPOSED
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	YEAR-END	BUDGET
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
							2025-2026
CLIENT RELATNS, COMMUN EDUCATN							
Client Relations Committee							
53600 · Per Diem	2,275.00	2,383.00	3,981.25	4,387.50	2,437.50	587.50	3,500.00
53620 · T.A.M. Expenses	353.00	300.00	0.00	0.00	0.00	0.00	0.00
53645 · Prog. For Funding	11,721.00	9,913.00	18,885.00	25,142.75	33,549.00	50,248.38	35,000.00
Total Client Relations Committee	14,349.00	12,596.00	22,866.25	29,530.25	35,986.50	50,835.88	38,500.00
54100 · Presentations By Staff To Orgs	2,017.00	2,658.00	0.00	0.00	34.00	0.00	500.00
54200 · Social Events For Members	2,837.00	2,128.00	0.00	0.00	0.00	0.00	0.00
Total CLIENT RELATNS, COMMUN EDUCATN	19,203.00	17,382.00	22,866.25	29,530.25	36,020.50	50,835.88	39,000.00
							47,000.00

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						PROJECTED	PROPOSED
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	YEAR-END	BUDGET
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
							2025-2026
QUALITY ASSURANCE							
Q.A. Committee							
54300 · Per Diem	5,491.00	7,813.00	8,275.00	8,812.50	16,937.50	19,525.00	14,000.00
54320 · T.A.M. Expenses	5,830.00	4,012.00	0.00	0.00	0.00	0.00	0.00
Total Q.A. Committee	11,321.00	11,825.00	8,275.00	8,812.50	16,937.50	19,525.00	14,000.00
Peer Assisted Review							
54500 · Per Diem	22,438.00	16,363.00	3,025.00	8,483.80	21,662.50	5,850.00	27,000.00
54520 · T.A.M. Expenses	2,284.00	4,478.00	25.00	0.00	434.20	1,006.46	4,000.00
Total Peer Assisted Review	24,722.00	20,841.00	3,050.00	8,483.80	22,096.70	6,856.46	31,000.00
Practice Reviews							
54620 · T.A.M. Expenses	0.00	124.00	0.00	0.00	0.00	0.00	0.00
Total Practice Reviews	0.00	124.00	0.00	0.00	0.00	0.00	0.00
Total QUALITY ASSURANCE	36,043.00	32,790.00	11,325.00	17,296.30	39,034.20	26,381.46	45,000.00

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

June 2025 - May 2026

							PROJECTED	PROPOSED
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	YEAR-END	BUDGET
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	2025-2026
INVESTIGATIONS & RESOLUTIONS								
ICRC								
54700 · Per Diem	45,838.00	29,569.00	29,006.25	32,150.00	27,006.25	29,556.25	40,000.00	50,000.00
54710 · Prep Time	0.00	29,006.00	28,275.00	30,176.25	22,181.25	24,293.75	34,000.00	50,000.00
54720 · T.A.M. Expenses	31,628.00	23,423.00	0.00	0.00	0.00	0.00	0.00	0.00
54750 · Other Expenses	408.00	0.00	0.00	0.00	3,390.00	0.00	0.00	0.00
Total ICRC	77,874.00	81,998.00	57,281.25	62,326.25	52,577.50	53,850.00	74,000.00	100,000.00
ICRC Training								
54800 · Per Diem	0.00	0.00	162.50	325.00	162.50	0.00	3,200.00	5,000.00
54820 · T.A.M. Expenses	667.00	1,510.00	0.00	0.00	0.00	0.00	1,500.00	0.00
Total ICRC Training	667.00	1,510.00	162.50	325.00	162.50	0.00	4,700.00	5,000.00
Inquiries & Investigations								
54900 · Experts	13,613.00	17,907.00	18,240.00	47,980.00	29,131.98	60,557.88	60,000.00	70,000.00
54910 · Investigators	5,926.00	6,537.00	0.00	25,927.52	33,314.62	38,817.81	125,000.00	125,000.00
54950 · Other Expenses	22,195.00	13,794.00	19,208.29	10,437.93	71,360.66	21,790.80	50,000.00	50,000.00
Total Inquiries & Investigations	41,734.00	38,238.00	37,448.29	84,345.45	133,807.26	121,166.49	235,000.00	245,000.00
Total INVESTIGATIONS & RESOLUTIONS	120,275.00	121,746.00	94,892.04	146,996.70	186,547.26	175,016.49	313,700.00	350,000.00

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

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	ACTUAL 2018-2019	ACTUAL 2019-2020	ACTUAL 2020-2021	ACTUAL 2021-2022	ACTUAL 2022-2023	ACTUAL 2023-2024	PROJECTED YEAR-END 2024-2025	PROPOSED BUDGET 2025-2026
HEARINGS								
Prosecution/Hearing								
55100 · Legal	299,516.00	151,043.00	265,765.30	236,357.38	654,310.58	587,379.39	600,000.00	600,000.00
Total Prosecution/Hearing	299,516.00	151,043.00	265,765.30	236,357.38	654,310.58	587,379.39	600,000.00	600,000.00
Pre-Hearing Conf.								
55200 · Per Diem	1,300.00	1,013.00	975.00	975.00	1,706.25	1,075.00	5,000.00	10,000.00
55220 · T.A.M. Expenses	2,725.00	1,182.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Pre-Hearing Conf.	4,025.00	2,195.00	975.00	975.00	1,706.25	1,075.00	5,000.00	10,000.00
Discipline Comm.								
55300 · Per Diem	11,456.00	3,488.00	8,543.75	11,975.00	10,843.75	3,168.75	15,000.00	20,000.00
55320 · T.A.M. Expenses	11,492.00	1,492.00	0.00	0.00	0.00	0.00	0.00	0.00
55350 · Other Expenses	8,991.00	-646.00	1,547.82	38.17	17,255.21	0.00	1,000.00	1,000.00
Total Discipline Comm.	31,939.00	4,334.00	10,091.57	12,013.17	28,098.96	3,168.75	16,000.00	21,000.00
Discipline Comm./Fit To Prac								
55400 · Hearing Facilities	0.00	5,881.00	1,580.88	3,862.37	14,306.73	4.50	20,000.00	20,000.00
55410 · Experts	0.00	0.00	3,825.00	12,129.75	2,796.75	19,518.75	5,000.00	5,000.00
55420 · Legal	0.00	14,737.00	44,352.50	77,359.81	71,335.71	27,038.11	50,000.00	50,000.00
Total Discipline Comm./Fit To Prac	0.00	20,618.00	49,758.38	93,351.93	88,439.19	46,561.36	75,000.00	75,000.00
Discipline Comm. Training								
55500 · Per Diem	0.00	0.00	4,300.00	2,025.00	1,950.00	2,868.75	5,000.00	5,000.00
55520 · T.A.M. Expenses	0.00	1,558.00	0.00	0.00	0.00	0.00	0.00	0.00
55550 · Other Expenses	7,541.00	4,225.00	9,513.50	5,615.00	5,800.00	4,500.00	2,500.00	2,500.00
Total Discipline Comm. Training	7,541.00	5,783.00	13,813.50	7,640.00	7,750.00	7,368.75	7,500.00	7,500.00
Total HEARINGS	343,021.00	183,973.00	340,403.75	350,337.48	780,304.98	645,553.25	703,500.00	713,500.00

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						PROJECTED	PROPOSED
	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	YEAR-END	BUDGET
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
							2025-2026
LIAISON							
Federation (HPRO)							
53540 · Membership	8,475.00	8,475.00	8,475.00	8,475.00	8,475.00	9,652.10	11,300.00
Total Federation	8,475.00	8,475.00	8,475.00	8,475.00	8,475.00	9,652.10	11,300.00
ACPRO							
56500 · Council Member P.D.	1,950.00	813.00	0.00	325.00	1,737.50	887.50	2,500.00
56520 · Council Member T.A.M.	2,682.00	2,018.00	0.00	0.00	1,528.32	1,267.74	1,500.00
56530 · Membership	4,154.00	4,090.00	4,089.96	4,089.96	4,089.93	4,089.96	4,200.00
Total ACPRO	8,786.00	6,921.00	4,089.96	4,414.96	7,355.75	6,245.20	8,200.00
ASPPB							
56600 · Council Member P.D.	2,925.00	1,463.00	162.50	2,031.25	2,581.25	3,218.75	8,500.00
56620 · Council Member T.A.M.	5,186.00	2,143.00	0.00	2,447.41	2,732.32	4,856.57	9,000.00
56630 · Council Member Regist.	801.00	0.00	129.26	629.51	386.94	767.18	1,200.00
56640 · Membership	3,703.00	3,785.00	3,668.22	3,585.32	3,687.98	3,880.85	3,625.00
Total ASPPB	12,615.00	7,391.00	3,959.98	8,693.49	9,388.49	12,723.35	22,325.00
56700 · Liaison - Other	4,417.00	3,297.00	1,365.42	2,534.01	2,372.13	2,969.36	3,000.00
Total LIAISON	34,293.00	26,084.00	17,890.36	24,117.46	27,591.37	31,590.01	44,825.00

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	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	PROJECTED	PROPOSED
	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	YEAR-END	BUDGET
							2024-2025	2025-2026
ADMINISTRATION								
Amortization								
70000 · Computer Equip & Software	10,294.00	21,874.00	22,746.20	17,052.49	6,220.40	13,678.29	30,000.00	16,000.00
70010 · Furniture & Office Eqmt	3,341.00	2,942.00	1,767.09	26,625.56	26,060.56	27,598.49	25,000.00	30,000.00
70020 · Leaseholds	12,943.00	20,089.00	64,251.57	112,888.11	101,169.81	101,169.81	100,000.00	100,000.00
70030 · Website & Database Devt	28,612.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Amortization	55,190.00	44,905.00	88,764.86	156,566.16	133,450.77	142,446.59	155,000.00	146,000.00
Insurance								
70510 · Property	1,205.00	1,292.00	1,493.37	1,666.35	1,798.29	2,010.96	2,000.00	2,100.00
Total Insurance	1,205.00	1,292.00	1,493.37	1,666.35	1,798.29	2,010.96	2,000.00	2,100.00
Occupancy Costs								
71000 · Net Rent	120,223.00	143,916.00	172,875.19	183,405.74	189,548.52	193,936.17	200,078.00	205,344.17
71010 · Additional Rent	162,375.00	166,715.00	175,393.24	171,035.22	187,362.22	191,497.54	202,432.36	192,306.79
Total Occupancy Costs	282,598.00	310,631.00	348,268.43	354,440.96	376,910.74	385,433.71	402,510.36	397,650.96
71050 Amortn of Deferred LH Inducement				-25,461.73	-25,461.74	-25,461.73	-25,461.74	-25,461.74
Office								
72000 · Bank Charges	72,340.00	59,687.00	85,403.77	75,195.43	77,612.79	119,379.99	100,000.00	100,000.00
72020 · Computer Software <1000	4,351.00	10,903.00	15,641.18	21,618.88	25,291.75	40,766.27	60,000.00	60,000.00
72040 · Courier/Postage/Mail/Email	28,771.00	18,588.00	11,038.84	14,600.95	12,730.09	21,607.82	16,000.00	19,000.00
72060 · Equipment < \$1000	1,940.00	4,668.00	1,028.29	2,022.45	0.00	615.87	3,000.00	3,000.00
72080 · Equipment Leasing & Maintenance	19,760.00	23,140.00	21,798.65	9,995.43	6,684.52	6,806.20	8,000.00	8,000.00
72140 · Printing	6,621.00	3,747.00	408.56	56.96	177.01	120.20	2,000.00	2,000.00
72160 · Publications For Office Use	547.00	1,298.00	1,110.90	2,514.98	2,339.19	4,869.03	3,000.00	4,000.00
72200 · Supplies & General	31,792.00	28,487.00	15,160.23	20,932.70	24,152.14	30,577.43	30,000.00	32,000.00
Total Office	166,122.00	150,518.00	151,590.42	146,937.78	148,987.49	224,742.81	222,000.00	228,000.00
Payroll								
73000 · Salaries And Wages & RSP	1,542,579.00	1,748,825.00	1,829,686.26	1,897,875.22	2,058,875.23	2,259,612.93	2,869,797.00	3,131,880.00
73100 · CPP Expense	0.00	54,000.00	60,641.59	65,821.92	80,605.46	93,684.10	100,000.00	100,000.00
73200 · Ei Expense	0.00	24,000.00	25,203.78	25,176.00	31,670.02	34,308.62	45,000.00	80,000.00
73300 · Employee Benefits	109,516.00	113,240.00	108,512.87	113,888.02	120,315.94	120,182.87	160,000.00	274,117.00
73500 · Staff Training And Development	10,059.00	8,094.00	2,803.22	3,965.35	4,649.99	5,565.59	20,000.00	40,000.00
73600 · Staff Travel/Registrn-Mtgs,Conf	12,553.00	6,608.00	594.36	263.04	7,990.02	15,529.12	20,000.00	24,000.00
Total Payroll	1,674,707.00	1,954,767.00	2,027,442.08	2,106,989.55	2,304,106.66	2,528,883.23	3,214,797.00	3,649,997.00

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	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	YEAR-END	BUDGET
							2024-2025	2025-2026
Professional Services								
74000 · Accounting	78,004.00	81,680.00	76,017.93	79,981.29	79,942.52	82,444.80	84,811.02	87,355.35
74010 · Audit	17,526.00	15,820.00	20,419.00	17,458.50	18,817.50	21,162.25	19,500.00	20,475.00
74020 · Legal - General	46,114.00	9,204.00	38,541.11	30,284.00	98,652.62	46,967.68	90,000.00	90,000.00
74025 · Legal - Indemnifications	1,482.00	0.00	0.00	0.00	0.00	13,103.93	5,037.11	6,000.00
74030 · Communications Consultant	25,220.00	70,845.00	5,367.50	1,098.93	0.00	11,037.27	0.00	40,000.00
74040 · Computer Consultant	0.00	565.00	0.00	37,385.62	46,104.00	44,923.15	30,230.16	52,000.00
74050 · L.T. Contractors	92,730.00	71,119.00	54,993.71	57,423.21	22,102.80	13,277.50	124,000.00	260,000.00
74060 · S.T. Contractors & Temp.	0.00	1,510.00	0.00	26,801.18	0.00	2,116.71	5,000.00	20,000.00
74070 · Recruiting	649.00	649.00	648.62	1,621.55	1,683.70	19,871.05	2,000.00	2,000.00
Total Professional Services	261,725.00	251,392.00	195,987.87	252,054.28	267,303.14	254,904.34	360,578.29	577,830.35
Telephone								
75000 · 1-800-Number	855.00	851.00	303.40	111.60	143.09	162.54	150.00	150.00
75010 · Directory Advertising	1,509.00	400.00	0.00	0.00	0.00	0.00	0.00	0.00
75020 · Internet Service Provider	11,831.00	8,634.00	8,612.40	8,402.82	8,387.06	9,237.17	8,600.00	8,600.00
75030 · Long Distance	253.00	219.00	80.23	0.17	11.97	7.47	0.00	0.00
75040 · Services	10,232.00	10,305.00	11,132.06	8,469.71	8,998.06	8,310.56	9,000.00	9,000.00
Total Telephone	24,680.00	20,409.00	20,128.09	16,984.30	17,540.18	17,717.74	17,750.00	17,750.00
Website & Database								
76000 · Expenses	69,464.00	131,096.00	81,668.61	103,891.72	127,736.53	68,747.88	149,000.00	170,000.00
Total Website & Database	69,464.00	131,096.00	81,668.61	103,891.72	127,736.53	68,747.88	149,000.00	170,000.00
77000 Government Grant Expenses					124,738.16	300,145.13	0.00	0.00
80000 · Other Expenses	0.00	2,831.00	20,798.51	0.00	2,090.50	0.00	0.00	90,000.00
Total ADMINISTRATION	2,535,691.00	2,867,841.00	2,936,142.24	3,114,069.37	3,479,200.72	3,899,570.66	4,498,173.91	5,253,866.57

THE COLLEGE OF PSYCHOLOGISTS AND BEHAVIOUR ANALYSTS OF ONTARIO
DRAFT BUDGET

June 2025 - May 2026

	ACTUAL 2018-2019	ACTUAL 2019-2020	ACTUAL 2020-2021	ACTUAL 2021-2022	ACTUAL 2022-2023	ACTUAL 2023-2024	PROJECTED YEAR-END 2024-2025	PROPOSED BUDGET 2025-2026
REVENUE	3,520,579.00	3,645,271.00	3,603,232.48	3,721,941.29	4,074,828.38	4,823,750.69	6,976,231.93	7,254,925.50
COST OF SALES	297,071.00	308,499.00	231,156.92	257,740.24	235,779.50	203,207.44	324,292.00	352,422.00
GROSS MARGIN	3,223,508.00	3,336,772.00	3,372,075.56	3,464,201.05	3,839,048.88	4,620,543.25	6,651,939.93	6,902,503.50
EXPENDITURES								
Governance	99,681.00	95,464.00	46,739.42	60,817.98	113,214.81	90,359.34	177,955.50	219,508.28
Registration	87,097.00	97,098.00	82,050.08	95,501.26	56,839.40	71,840.69	105,000.00	115,000.00
Client Relations, Communications & Education	19,203.00	17,382.00	22,866.25	29,530.25	36,020.50	50,835.88	39,000.00	47,000.00
Quality Assurance	36,043.00	32,790.00	11,325.00	17,296.30	39,034.20	26,381.46	45,000.00	57,375.00
Investigations and Resolutions	120,275.00	121,746.00	94,892.04	146,996.70	186,547.26	175,016.49	313,700.00	350,000.00
Hearings	343,021.00	183,973.00	340,403.75	350,337.48	780,304.98	645,553.25	703,500.00	713,500.00
Liaison (Professional Organizations)	34,293.00	26,084.00	17,890.36	24,117.46	27,591.37	31,590.01	39,325.00	44,825.00
Administration	2,535,691.00	2,867,841.00	2,936,142.24	3,114,069.37	3,479,200.72	3,899,570.66	4,498,173.91	5,253,866.57
Total Expenditures	3,275,304.00	3,442,378.00	3,552,309.14	3,838,666.80	4,718,753.24	4,991,147.78	5,921,654.41	6,801,074.85
EXCESS OF REVENUE OVER EXPENDITURES	-51,796.00	-105,606.00	-180,233.58	-374,465.75	-879,704.36	-370,604.53	730,285.52	101,428.65

BRIEFING NOTE

2025.01.04E

MARCH 2025 COUNCIL MEETING

2025-2026 EXECUTIVE COMMITTEE ELECTIONS & COUNCIL APPOINTMENTS

STRATEGIC DIRECTION REFLECTION

Innovation in Regulation

FOR INFORMATION

By-Law 4: Election of Members of Executive Committee requires that at this meeting, Council members wishing to seek election to the Executive Committee for the upcoming year 2025-2026 be advised of the process as outlined in this By-law. The election to the Executive Committee takes place at the first meeting of the Council in the new fiscal year – June 20, 2025. Those interested in seeking election to the Executive Committee must inform the Registrar of their intention at least 25 business days (May 16, 2025) before the meeting at which the election takes place.

By-Law 5: Selection of Committee Chairs and Committee Members requires that Council members be notified of the opportunity to indicate preferences for Committee involvement for the coming year.

Following the elections to Council taking place on March 31, 2025, an e-mail notification regarding the above will be sent to all Council members.

ATTACHMENTS (relevant sections highlighted)

1. *By-Law 4: Election of Members of Executive Committee*
2. *By-Law 5: Selection of Committee Chairs and Committee Members*

CONTACT FOR QUESTIONS

Tony DeBono, MBA, Ph.D., C.Psych.
Registrar & Executive Director

BY-LAW 4: ELECTION OF MEMBERS OF EXECUTIVE COMMITTEE

[Approved by Council on June 11, 1994; last amended on June 19, 2009]

This By-law is made under the authority of the *Regulated Health Professions Act, 1991* as amended, and the *Psychology and Applied Behaviour Analysis Act, 2021* as amended.

- 4.1 At the meeting of Council preceding the annual election prescribed in the By-laws, the President will advise Council of the process for seeking election to the Executive Committee.
- 4.2 At least twenty-five (25) business days prior to the first meeting of Council following the annual election, Council members, including those newly elected, will indicate their intention to seek election for a position on the Executive Committee. One may indicate one's interest in being a candidate for one or more Executive Committee positions.
- 4.3 If one indicates interest in being a candidate for President, one may also indicate an interest in being a candidate for Vice-President and/or for Member of the College/Public Member should one be unsuccessful in the preceding election. If one wishes to run for election to one of these other positions, one shall make this intention known at the time that the original expression of interest is submitted.
- 4.4 If one indicates interest in being a candidate for Vice-President, one may also indicate an interest in being a candidate for Member of the College/Public Member should one be unsuccessful in the Vice- President election. If one wishes to run for election to this other position, one shall make this intention known at the time that the original expression of interest is submitted.
- 4.5 The list of candidates will be forwarded to all Council members, along with notification that further names will be accepted until fifteen (15) business days before the first meeting of Council following the annual election.
- 4.6 All candidates will provide the Registrar with a biographical statement and candidate statement not to exceed one page in length, no later than fifteen (15) business days before the first meeting of Council following the annual election.
- 4.7 Only, if there is no candidate for a position, members of Council may indicate their willingness to run at the first meeting of Council following the annual election.
- 4.8 At the first meeting of Council after the annual election as prescribed in the By-laws, the Council shall elect from among the members of Council an Executive Committee in accordance with the By-laws.
- 4.9 The Executive Committee members elected in accordance with 4.8 will hold office until the first meeting of Council after the annual elections the following year.
- 4.10 The Registrar shall be responsible for supervising and administering all elections of the College.
- 4.11 Prior to the balloting, each candidate for office will answer questions from other Council members for a maximum of ten (10) minutes.
- 4.12 The order for the elections to the Executive Committee will be: President, Vice-President, Member

of the College, Public Member of Council. Unsuccessful candidates in an election, who have indicated their interest in candidacy for other Executive Committee positions as per 4.3 and 4.4, will be included in subsequent elections unless they choose to withdraw their name.

- 4.13 The election of the members of the Executive Committee shall be by secret ballot and, where more than two members of Council are running for any position, the member of Council who receives the lowest number of votes on each ballot shall be deleted from candidacy unless one member of Council receives a majority of the votes cast. This procedure shall be followed until one member of Council receives a majority of the votes cast.
- 4.14 The ballots will be counted by the Registrar and a member of Council not seeking election to office.
- 4.15 In the event of a tie vote, Council will be afforded the opportunity to question candidates for ten minutes, and then vote again. In the case of a second tie, the Registrar will flip a coin to decide the outcome of the election. The member of Council who has been assisting in counting the ballots will call the toss ("heads – candidate A; tails – candidate B") prior to the toss.
- 4.16 If the office of the President becomes vacant the Vice-President shall become the President for the unexpired term of the office and the office of Vice-President thereby becomes vacant.
- 4.17 A position of the Executive Committee becomes vacant if the holder of the office dies, resigns, ceases to be a member of Council or is disqualified from sitting on the Council by a vote of Council at a special meeting called for that purpose. In addition, the position of Vice-President may become vacant, in accordance with subsection 4.16.
- 4.18 The Council shall fill a vacancy in the office of Vice-President or any other Executive Committee position at a special meeting which the President shall call for that purpose as soon as feasible after the vacancy occurs.

BY-LAW 5: SELECTION OF COMMITTEE CHAIRS AND COMMITTEE MEMBERS

[Approved by Council on June 11, 1994; last amended on March 11, 2022]

This By-law is made under the authority of the *Regulated Health Professions Act, 1991* as amended, and the *Psychology and Applied Behaviour Analysis Act, 2021* as amended.

- 5.1 The Council may by resolution establish Committees additional to those established through Section 10 of the Health Professions Procedural Code being Schedule 2 of the *Regulated Health Professions Act, 1991*.

Notification of Committee Positions Available

- 5.2 At least two months prior to the first meeting of Council following the annual election, College members will be notified of the opportunity to put their names forward for possible appointment to a Committee of the College. In addition to other information, College members, interested in appointment to a Committee are required to submit a statement of qualifications pertaining to the mandate of the Committees in which they wish to participate. Prior to the member submitting a Committee interest form, the member has completed any orientation program specified by the College relating to the business and governance of the College and the duties, obligations and expectations of Council and Committee members.
- 5.3 At the meeting of Council preceding the annual election prescribed in the By-laws, the President will advise the Council of the process for Committee appointments and for indicating their Committee preference. At least one month prior to the first meeting of Council following the annual election, all Council members will be notified of the opportunity to submit their preferences for appointment to Committees of the College.

Committee Appointments Working Group

- 5.4 A Committee Appointments Working Group will prepare a list of suggested appointees from the College membership to the Committees of the College. This list will be provided to the Executive Committee at the first meeting of Council following the annual election.

Appointment Process

- 5.5 Immediately after the first meeting of Council following the annual election, the Executive Committee shall appoint the Chairs and the members of the Committees identified in subsection 5.1 as well as those designated in section 10 of the Code.
- 5.6 Committee Chairs:
- a. Each Committee will have a Chair and each Statutory Committee will have a Vice-Chair, one of whom is a Council member; with the exception of the Registration Committee which will have Co-Chairs sharing the duties outlined in this policy.
 - b. The Committee Chair reports to Council on behalf of the Committee.
 - i. The Vice-Chair will be elected or appointed by the Committee at the earliest opportunity.
 - ii. If the Chair of a Committee is not a Council member, the Vice-Chair will report to Council.
 - c. The duties of the Committee Chair, or of the Vice-Chair in the Chair's absence, include;
 - i. Chairing Committee meetings;
 - ii. Approving meeting agendas prepared by College staff;
 - iii. Determining whether Committee members have the resources and training to effectively

- perform the Committee's work;
 - iv. Working with the Committee and College staff to establish, monitor and execute Committee goals;
 - v. Providing effective leadership for the Committee and facilitating Committee Meetings;
 - vi. Liaising with Council and the Executive Committee on the affairs of the Committee; and,
 - vii. Any other duties determined or assigned by Council.
- 5.7 Committee appointments will be announced within five business days of the first meeting of Council following the annual election.
- 5.8 A majority of the members of a Committee, other than a Committee prescribed in section 10 of the Code, constitutes a quorum.
- 5.9 Where one or more vacancies occur in the membership of a Committee during the year, so long as the number is not fewer than the prescribed quorum, the Committee may continue to conduct its business.
- 5.10 The Executive Committee may and, if necessary for a Committee to achieve its quorum, shall appoint members of the Council, or of the College where required, to fill any vacancies which occur in the membership of a Committee to take effect immediately and to be reported to Council at its next meeting.
- 5.11 Every appointment to a Committee automatically expires at the first meeting of Council following the annual elections unless otherwise prescribed in subsection 3(d) of By-law 21: *Committee Composition*; or any provision to the contrary in the Code, the By-laws or the policies of the College.
- 5.12 All registration titles will be represented on all Statutory Committees.

STRATEGIC DIRECTION 2023-2028

2025.06.05A

MISSION *[Why we exist]*

To protect the public through the responsible regulation of psychological and behavioural care.

VISION *[What we aspire to be]*

Excellence in self-regulation and quality psychological and behavioural care for the people of Ontario.

VALUES *[What we uphold in all our activities]*

Beneficence: The College functions in service of the public good.

Dignity: The College treats all persons and peoples with dignity.

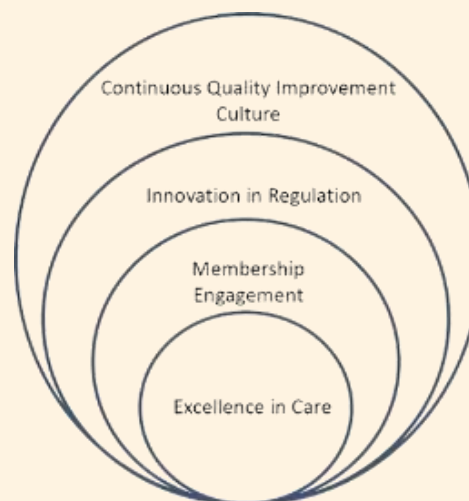
Fairness: The College approaches decisions in a just, reasonable and impartial manner.

Accountability: The College acts as a self-sustaining, responsible steward of resources grounded in the fiduciary duty to the public.

Integrity: The College acts honestly, ethically, and responsibly.

STRATEGIES *[How we accomplish our Mission]*

Strategy 2023-2028 is an ecological model that will focus on four interrelated priorities. At the core of the strategy is excellence in care, ensuring that the public receives ethical, safe, and high-quality services. Quality care is delivered through our registrants/members who have expertise to impart upon their peers and who participate on College Council, Committees, and Workgroups. The College will need to continue to modernize its regulation practices to best meet the needs of the public, now, and into the future (including “Right-Touch Regulation”). Encapsulating the overall strategy is a commitment to continuous quality improvement of College processes with a focus on maximizing value and minimizing waste.



This work will be informed by principles that will guide the College in all of its activities:

- Cultivate a College culture of humility grounded in a growth mindset.
- Apply innovative and proportionate approaches to regulation.
- Engage members to impart expertise to each other and the communities they serve.
- Remain agile in responding to advancements in society, technology, and the profession to meet the needs of Ontarians.

2023-2028 IMPLEMENTATION CHART - UPDATED February 13, 2025

Agenda Key	Strategies	Recent Activities	In Development
S1	Excellence in Care	<ul style="list-style-type: none"> Update to the Standards of Professional Conduct (June 2024) Health Equity Impact Assessment (June 2024) 	<ul style="list-style-type: none"> EDI Plan Completed (on agenda) Scope of Practice (RxP; awaiting further direction from the Ministry)
S2	Membership Engagement	<ul style="list-style-type: none"> Deputy Registrar: SickKids Presentation on Ethical Decision-Making in Professional Practice (November 2024) Registrar: GTA Resident Seminar (November 2024) Registrar & Deputy Registrar: Ottawa Hospital Psychology Community, Standards Q&A (November 2024) Consultation: Proposed Amendments to By-law 18: Fees and By-law 19: Cooling off Period (December 2024) ABA Stakeholder Customized Sessions (October 2023 – December 2024): 23 sessions Registrar Visit: Ottawa Psychology & ABA Community Gathering: Child Solutions (January 2025) 	<ul style="list-style-type: none"> Amendments to Per Diem and Expense Claims Policy (on agenda) Consultation: Proposed Amendments to By-law 18: Fees 18.4(f)
S3	Innovation in Regulation	<ul style="list-style-type: none"> Proclamation of the Psychology and Applied Behaviour Analysis Act, 2021 (July 2024) 	<ul style="list-style-type: none"> Pursue amendments to O.Reg. 74/15 under the Psychology Act, 1991 to discontinue Master's level registration and at that time, grant the title Psychologist to all existing Psychological Associates. (September 2019)

			<ul style="list-style-type: none"> • Research & Report Approved by Council (March 2024) • Ontario-BC MOU Intention Document Signed (April 2024) • Telepsychology MOU expansion for select Manitoba registrants providing care to residents of Northwestern Ontario (on agenda: <i>By-Law 18: Fees</i>) • Proposal for Approved Programs (on agenda)
S4	Continuous Quality Improvement Culture	<ul style="list-style-type: none"> • Approved amendment of Policy - III F - 2 Reserve Funds (June 2024) • June 14, 2024 Council Meeting Evaluation Summary • September 27, 2024 Council Meeting Evaluation Summary • December 13, 2024, Council Meeting Evaluation Summary 	<ul style="list-style-type: none"> • Financial analysis of programs and processes, Internal examinations, JEE & Orals (November 2023; ongoing) • Jurisprudence and Ethics Examination Re-Imagining (Approved; Council December 2024; in process)

The items shown in BLUE have been added by the Registrar since February 2025 as activities undertaken in service of the College's Strategic Directions 2023-2028.



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