



College of Occupational
Therapists of Ontario

Annual Report 2005

SHAPING OUR FUTURE

FUTURE

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ANNUAL GENERAL MEETING

Annual General Meeting Registrants, Stakeholders, and members of the public are warmly invited to join College staff and Council members at the College's Annual General Meeting. The meeting will be held in conjunction with a regular Council meeting on **October 26th, 2005 at 9:00 A.M. at the College office.**

Please call 1-800-890-6570 or (416) 214-1177, ext.232 to confirm your attendance.

GROWING
EXPANDING
COLLABORATING
CONTINUITY
REPOSITIONING

FUTURE

SHAPING OUR FUTURE

JOINT MESSAGE FROM THE PRESIDENT AND REGISTRAR



SYLVIA BODDENER
President



BARB WORTH
Registrar

A handwritten signature in cursive script, reading "Sylvia Boddener".

A handwritten signature in cursive script, reading "Barb Worth".

One of the most significant accomplishments the College achieved in the last year was setting a new direction for shaping our future.

In the fall of 2004, council and staff members embarked upon a strategic planning process. As a part of the process, Council approved a revised mission and vision for the College setting direction for the next five years. The mission and vision are highlighted in this annual report.

We hope that you will be an active participant in shaping the future with us. Throughout the next five years we will seek information and input from all our stakeholder groups. Feedback from all stakeholders will assist us in successfully achieving specific initiatives and direct any changes made. Your input is critical as changes that are made must be relevant to practice and appropriate in the current environment. The College values all feedback received.

In addition to a revised mission and vision, the College has identified three priority areas. Each priority has strategies and initiatives that have been identified to be achieved over the next five years. We are excited to report that the College has already achieved some of the foundational projects that lay the groundwork for shaping our future.

One of the key priority areas is public awareness. A public awareness campaign will be initiated this fall in conjunction with Occupational Therapy month to promote awareness of the role of the College and to inform the public that Occupational Therapists are regulated health professionals. The College is committed to ensuring that our mandate and the perception of our role are well understood by registrants and the public.

The second priority area identified was related to College governance. To ensure that the College continues to be well positioned to thrive in a changing health care environment, Council has identified as a priority to focus on our organizational and governance frameworks. Council members have participated in an education session on best practices in governance, which helped to highlight the importance of governance to ensure a solid future. Further learning will occur by conducting an environmental scan of governance models that are currently in place in regulatory organizations. As a result of this learning Council will determine if their structure and processes need to be changed.

The third and final priority identified was to work on development of standards. A standards framework has been approved by Council to guide the development of standards in areas of practice. This framework will be used as a foundation that will lead to the development of standards for several practice areas over the next five years. We are committed to developing clear standards that registrants can understand and easily apply to everyday practice.

While the priority areas were chosen as focus areas for the College over the next five years, the core programs of quality practice, conduct and registration will continue to be the focus of the work of the college. We are confident that the strategic plan will enhance how these programs are delivered.

It is clear from the revised mission, vision and our strategic plan, that the way in which the work of the College is conducted will be taking a different shape. Our future will be built by timely and relevant stakeholder input and collaboration, appropriate governance; and standards of practice.

The College of Occupational therapists of Ontario is a self-governing body that protects the public interest and improves their health and well-being by registering, regulating, and supporting the ongoing competency of Occupational Therapists.

OUR MISSION

OUR VISION

By 2010, COTO is recognized and respected for its strong collaborative relationships that influence Ontario's health-care system while supporting the needs of the public through the OT profession.

THE NEW MISSION, VISION AND PRIORITIES

Our mission statement is the declaration of our core purpose, our reason for existence.

Central to the new mission is the desire to protect the public interest through providing support to occupational therapists. This is a change in emphasis that was strongly endorsed by Council and staff. The statement addresses who we are, what we do, for whom we do it and why we do it.

A leadership vision was created to set the course for the next five years. A detailed description of the desired state that we will be in five years was created. This includes the College wanting the public to be aware of the regulated occupational therapy services that are available to them. That we help assure that Ontarians have access to competent professional OT services. That registrants' practice will be consistent with and supported by defined professional standards and competencies. The College's programs and services support competence in practice. It also includes a desire to have strong productive working relationships with our registrants, and other stakeholders. And finally the desired state would be one in which the college successfully influences health policy and anticipates changes in the broader environment.

Our vision statement is intended to be a clear and compelling statement of what we want the College to be that is demanding but achievable. A vision statement has often been compared to a lighthouse in the distance. A targeted end point that the organization feels inspired to reach.

In order to achieve the vision (future state), the Council identified 3 priorities that embrace the various issues and challenges we face as well as the opportunities we wish to seize.

Our role and the perception of our role

We seek to achieve our full potential within the profession. We will address the understanding and perception surrounding the role of the College and our relationship with stakeholders.

Our organizational and governance frameworks

We have benefited as an organization from an effective council and strong and appropriate organizational operations. We will continue to reinforce these elements, and adjust as necessary, to assure that we continue to be well positioned to thrive within a changing health care environment.

Evaluation and measurement

We will develop clear standards and valid, reliable and credible evaluation methods across the organization. For registrants through the development of OT standards; and for all of COTO's programs and services.

STATUTORY COMMITTEE ACTIVITIES

Summary of Activity for the year June 1, 2004 to May 31, 2005

PATIENT RELATIONS COMMITTEE

- Initiated revisions for College Standards on Prevention of Sexual Abuse
- Developed a plan to update and revise the Colleges Sexual Abuse Prevention Guidebook with a new Professional Boundaries Workbook
- Revised and reprinted the brochure for the public on the College Position and general information related to Sexual Abuse by Occupational Therapists (Sexual Abuse: What the Public Needs to Know)
- Continued development of a Patient Relations Resource Manual for Council and Staff
- Initiated review of the College's Advertising Regulation to reflect new Ministry of Health and Long Term Care Guidelines on Advertising
- Initiated development of a Conflict of Interest Regulation in response to new Ministry of Health and Long Term Care Guidelines on Conflict of Interest
- Continued to explore and develop the role of the Patient Relations Committee

REGISTRATION COMMITTEE

- Continued review and development of proposed changes to the Registration Regulation including exploration of examination issues, supervised practice and criminal record checks.
- Completed Phase 3 of the validation study for the development of an academic review tool for internationally educated applicants.
- Explored issues related to currency and scope of practice for registrants in academic roles and other non-clinical roles.
- Oversaw College activities related to Access to Professions and Health Human Resource Planning

DISCIPLINE AND FITNESS TO PRACTICE COMMITTEE

For Fiscal year 04/05, there were no cases referred to the Discipline Committee, and as such, no hearings took place.

COMPLAINTS COMMITTEE

This is a screening committee for complaints received by the College. For Complaints statistics, see page 10.

EXECUTIVE COMMITTEE

- Provided oversight to the Strategic Planning process.
- Recommended Council approve the final draft of the privacy code.
- Recommended to Council to approve the 2004/05 budget.
- Selected the Data Information System vendor to implement a new integrated information system.
- Recommended to Council to approve a new Support Personnel Guideline recommended by the Practice Issues Subcommittee.
- Selected a communications firm to develop a public education strategy.
- Approved Terms of Reference for a non Clinical Registrants Working Group. This group will report to Executive and will provide recommendations with respect to a College position on non clinical registrants.
- Approved financial support to a Federation project on the issue of authorizing mechanisms for controlled acts.
- Approved a Practice Issues Subcommittee recommendation to withdraw the discussion paper on multi-skilling from the registrant binder. This document contained out of date information.
- Recommended that Council approve the format for practice standards recommended by the Practice Issues Subcommittee. This will be used to develop standards in the future.

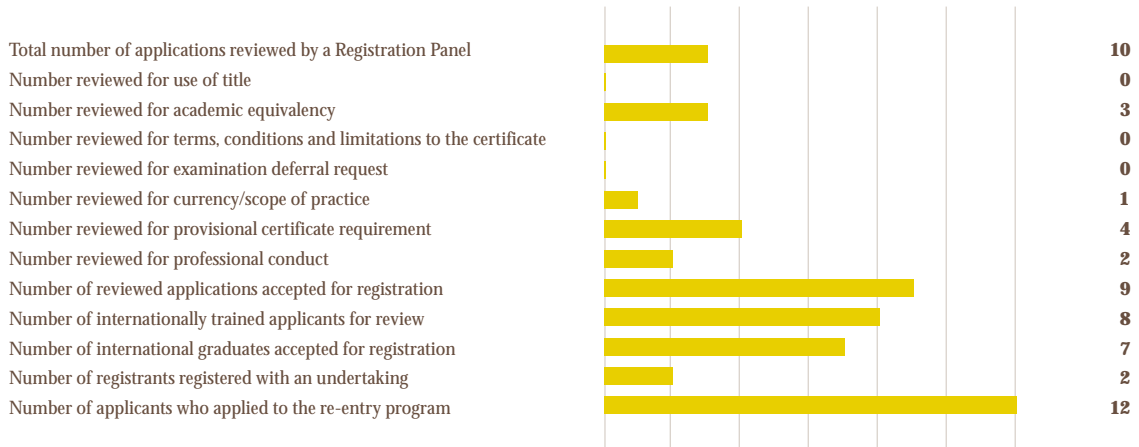
QUALITY ASSURANCE COMMITTEE

- Revised Self-Assessment Tool distributed, July 2004
- Hired new Manager, Quality Programs, September 2004
- Cancelled Competency Review 2004 (due to staffing change)
- Distributed PREP 7, January 2005 & PREP 7 Answers, April 2005
- Selected a topic for PREP 8 topic and initiated development of Module
- Issued decisions for ten Competency Evaluations referrals
- Randomly selected Registrants for Competency Evaluations and conducted seven evaluations
- Revised Fact Sheets for Competency Review and Evaluation
- Raised the issue of QA requirements for non-clinicians at Council in January 2005 — a Working group has been initiated to address this issue at a College wide level
- Initiated Quality Assurance Program Evaluation
- Re-affirmed commitment to reaching a target of reviewing 20% of registrants annually
- Initiated review and revision of tools and processes for Competency Review and Evaluation in order to achieve that target
- Recruited four new members to QA Subcommittee

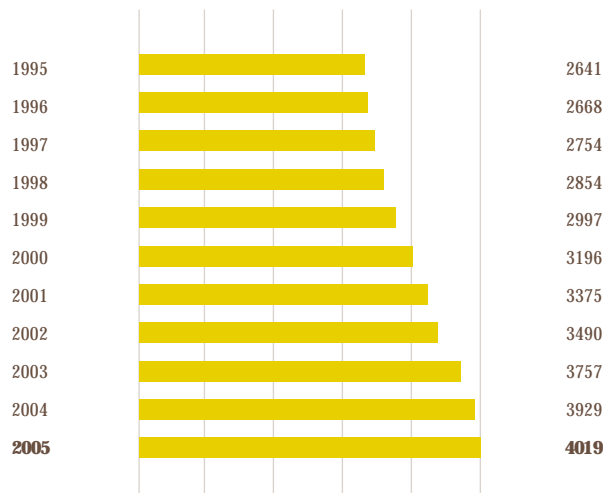
STATISTICS

REGISTRATION (as at May 31, 2005)

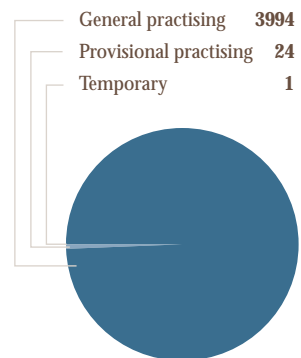
Entry to Practice



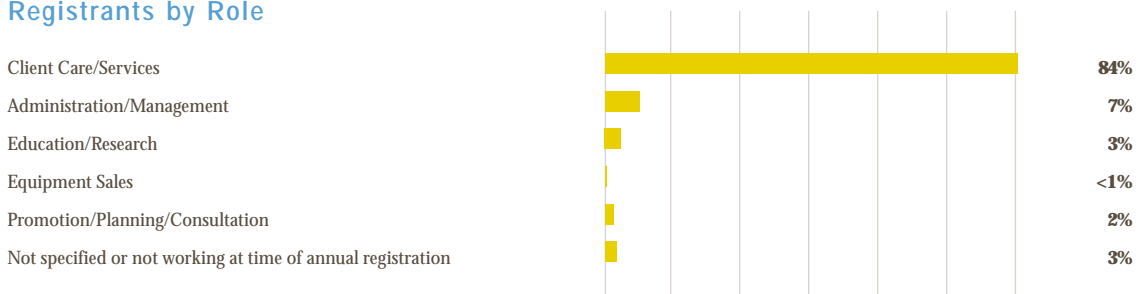
Total Number of Registrants: 4019



Registrants by Category



Registrants by Role



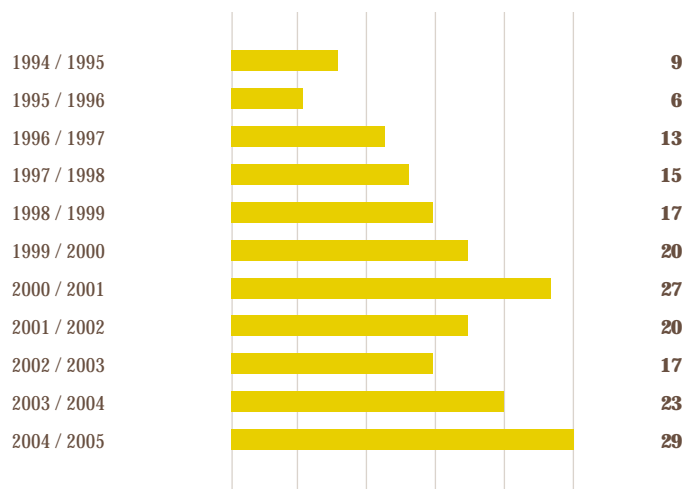
Professional Corporations

Total number of Certificates of Authorization issued to professional corporations: **11**

COMPLAINTS (June 1, 2004 — May 31, 2005)

Please be advised that due to an administrative change in the reporting of complaints statistics, the complaints data for 2003/2004 was incorrectly reported in last year's Annual Report. The total number of cases opened and reviewed for this period was 23. For more detailed information on the breakdown, please contact the Manager, Investigations and Resolutions.

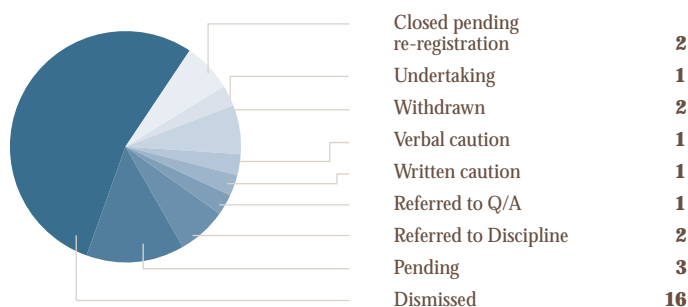
Total Cases Opened and Reviewed: 29



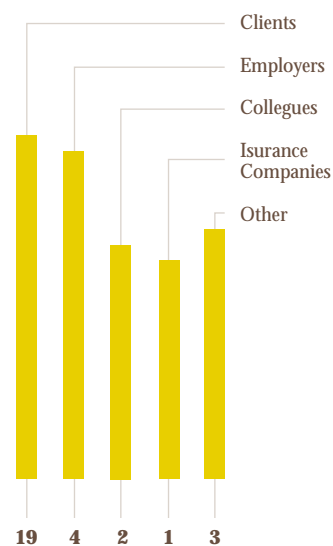
Most Common Concerns

- Biased Assessment
- Communication
- Consent
- Professional Conduct/ Unprofessional Behavior
- Report Writing
- Competence
- Conflict of Interest
- Fees
- Consent

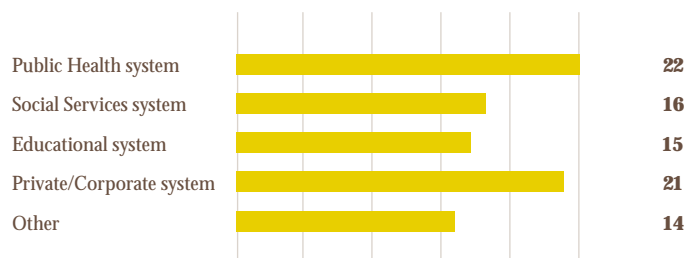
Status of All Cases Opened and Reviewed



Complaints are Being Filed by:



The Primary Employment Situation for Registrants Involved in the Complaints Process



Employment information is obtained during the annual renewal process. Each therapist may work in more than one sector.

EXECUTIVE COMMITTEE (June 1, 2004 – May 31, 2005)

Total Cases: 3

Type of Reports:	Concerns Raised:	Outcomes of Cases:
Mandatory Reports: 3	<ul style="list-style-type: none"> • Competence • Standards of Practice • Unprofessional Behavior 	Pending 2 Written Caution 1
All 3 cases of OT's are working in direct client care in the Public Health system.		

QUALITY ASSURANCE (June 1, 2004 – May 31, 2005)

Competency Evaluation*

Random Selections		14
Referrals		16
Postponements / Excusions / Resignations		10
Peer Assessments Conducted		7
Decisions issued by QA Committee		12

Results of Decisions Issued by QA Committee

No Recommendations		1
Recommendations Only		10
Requirements for Competency Improvement		1

Competency Improvement (results based on 5 active cases during this period)

Cases successfully completed		2
Cases in process		1
Cases on hold		2
Cases referred to Executive		0
Cases required to complete a second phase of Competency Improvement		0

*Competency Evaluation Explanation:

- During this time period, a total of 30 Registrants newly entered the Competency Evaluation component of the Quality Assurance (QA) Program or were carried forward from the previous year.
- Of these 30, 13 entered the program by random selection and 5 were new referrals (either from QA Committee or Executive Committee). 12 cases were carried forward from the previous year.
- In total 10 Registrants were either excluded from the process, resigned from the College or were granted postponements.
- During this fiscal year, 7 peer assessments were conducted.
- The QA Committee issued 12 Decisions based on the peer assessments completed during this year and the year prior.
- Of these Decisions, 1 resulted in 'No Recommendations'; 10 resulted in 'Recommendations Only' and 1 resulted in 'Requirements for Competency Improvement'.



NEW DIRECTION
CHANGING
MOVING FORWARD
LEARNING
THRIVING

AUDITORS' REPORT

The accompanying summarized statements of financial position and operations are derived from the complete financial statements of the College of Occupational Therapists of Ontario as at May 31, 2005 and for the year then ended on which we expressed an opinion without reservation in our report dated June 22, 2005. The fair summarization of the complete financial statements is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying summarized financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

The summarized financial statements do not contain all disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that these statements may be not appropriate for their purposes. For more information on the College's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

Toronto, Ontario
June 22, 2005

CLARKE HENNING LLP
Chartered Accountants

Summarized Statement of Financial Position

AS AT MAY 31, 2005

	2005	2004
ASSETS		
Current assets		
Cash and marketable securities	\$ 1,800,049	\$ 1,279,540
Accounts receivable and prepaid expenses	16,033	11,550
	<u>1,816,082</u>	<u>1,291,090</u>
Property and equipment	193,590	166,248
	<u>\$ 2,009,672</u>	<u>\$ 1,457,338</u>
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities	\$ 106,923	\$ 62,989
Deferred revenue	1,105,365	479,860
	<u>1,212,288</u>	<u>542,849</u>
Deferred lease inducement	98,720	110,567
	<u>1,311,008</u>	<u>653,416</u>
NET ASSETS		
Designated funds	434,436	540,322
Invested in capital assets	94,870	55,681
Operating – unrestricted	169,358	207,919
	<u>698,664</u>	<u>803,922</u>
	<u>\$ 2,009,672</u>	<u>\$ 1,457,338</u>

Summarized Statement of Operations

YEAR ENDED MAY 31, 2005

Revenues		
Registration and application fees	\$ 1,715,820	\$ 1,665,618
Interest and other income	75,987	85,593
	<u>1,791,807</u>	<u>1,751,211</u>
Expenses		
Salaries, benefits and professional development	773,045	717,184
Council	187,400	163,208
Occupancy costs	227,241	189,851
Designated funds		
– Investigations and resolutions	62,711	56,763
– Quality assurance	–	34,292
– Special projects	83,138	95,122
Communications	147,711	193,099
Quality assurance	116,154	152,793
Registration	31,923	18,778
Depreciation	55,194	41,699
All other operating expenses	212,548	205,007
	<u>1,897,065</u>	<u>1,867,796</u>
Excess (deficiency) of revenues over expenses for the year	<u>\$ (105,258)</u>	<u>\$ 116,585</u>

The comparative figures for 2004 in the Statement of Operations have been adjusted to include non-operating interest income of \$39,582 to conform with the financial statement presentation adopted for the current year.



COLLEGE COUNCIL

Back Row, Left to Right:

HAZEL BOWLES
District 2

WILLIAM YEE
Public Member

RUTH YOUNG
District 5

HARRY MCCOSH
Public Member

CAROL MIERAS
District 4

SYLVIA BODDENER
District 1

CHRIS ANDREWS
Public Member

UPALI OBEYESEKERE
Public Member

LESYA DYK
District 2

JAN MILLER POLGAR
Academic Member

JONATHAN CHEUNG
District 6

Front Row, Left to Right:

MARIE EASON KLATT
District 1

ED RAYMENT
Public Member

BONNY JUNG
Academic Member

PASQUALE FIORINO
Public Member

PAM GOLDSILVER
District 1

Absent:

BARBARA MILLS
District 3

*Also Absent are the following
Council members with terms
ending in Spring of 2005:*

SANDRA ANSTEY
Public Member

GODWIN IFELDI
District 4

JILL TRITES
District 2

RICHARD FLEMING
Public Member

NON-COUNCIL COMMITTEE MEMBERS

The following individuals are currently active as non-Council members, or completed their terms within the 2004/05 year.

REBECCA BAUMAN
Practice Issues sub-Committee

ISABELLE BOISVERT
Quality Assurance sub-Committee

PAULA CAPPADOCIA
Quality Assurance sub-Committee

NANCY CLARK
Quality Assurance sub-Committee

LINDA COTTRELL
Quality Assurance Committee

DENISE DE LAAT
Quality Assurance sub-Committee

DIANE DOUGLAS
Fitness to Practice Committee

EMILIE EMBREY
Quality Assurance sub-Committee

RACHEL GERVAIS
Quality Assurance sub-Committee

NIKI KIEPEK
Practice Issues sub-Committee

BRENDA KNIGHT
Board of Inquiry

MARTA KRYWONIS
Quality Assurance Committee

MARY LALONDE
Practice Issues sub-Committee

BRENT MCDEVITT
Quality Assurance sub-Committee

ELISABETH MCLEAMING
Quality Assurance sub-Committee

MANDANA JAM MODARAI
Practice Issues sub-Committee

KATHLEEN MURPHY
Complaints Committee

WANDA NAYDUK
Patient Relations Committee

E. KAREN OLSZOWIEC
Practice Issues sub-Committee

NANCY ROBINSON
Quality Assurance sub-Committee

CHRISTINE RUPERT
Registration Committee

LINDA SCHERZINGER
Quality Assurance sub-Committee

TERI LYNN SHACKLETON
Editorial Board

JENNIFER SHIN
Quality Assurance sub-Committee

NELLY SCHUURMAN
Discipline Committee

THELMA SUMSION
Continuing Education sub-Committee

KAREN TAIPALE
Quality Assurance sub-Committee

GILLIAN TEMPLETON
Board of Inquiry

JUDY THREINEN
Discipline Committee

JOYCE TRYSSENAAR
Quality Assurance sub-Committee



COLLEGE STAFF

Back Row, Left to Right:

SUSAN JAMES
Deputy Registrar

ANITA ASHTON
Manger, Investigations and Resolutions

BRIGEEN TRACY
Manager, Quality Programs

JEWELLE SMITH-JOHNSON
Director, Operations and Communications

BARB WORTH
Registrar

Front Row, Left to Right:

MARION RANTIN
Executive Assistant, Practice

PAM MARLER
Registration Coordinator

LISA ANNE LABILLOIS
Operations and Communications Associate

Absent:

KAREN ALMEIDA
Investigations and Resolutions Associate

HELEN NAVARATNARAJA
Practice Associate

FRAN WEAVER
Executive Assistant, External Relations

AFFILIATES

CAROLYN EVERSON
Strategic Planning Facilitator

MARILYN BARTLETT
Investigator

GILLIAN SYMONS
Photographer (clinical)

CLARKE HENNING & CO.
Auditors

AJAZ SADIO
Accountant

CRESCENT GROUP LTD.
Graphic Design

MATRIX RESEARCH LTD.
Quality Assurance Program Consultants

SCHROEDER MEASUREMENT TECHNOLOGIES
Quality Assurance Program Consultants

BRUCE ZINGER
Photographer (staff & council)

LEGAL COUNSEL

EDWARD R. SMITH
Practical Legal Solutions, LLP

RICHARD STEINECKE,
JULIE MACIURA, BERNIE LEBLANC
Steinecke Maciura LeBlanc

CHRISTINE TOMLINSON
Ruben Tomlinson, LLP

CATHERINE BRAY
Borden Ladener Gervais, LLP

NANCY SPIES
Stockwood Spies

PEER ASSESSORS

MARDI BURTON

GINETTE CÔTÉ

SIOBHÁN DONAGHY

MICHAEL O'DRISCOLL

ERIKA POND-CLEMENTS

NELLY SCHUURMAN

SANDRA SAHAGIAN WHALEN

SUSAN WILKINSON

GABRIELE WRIGHT

PRACTICE

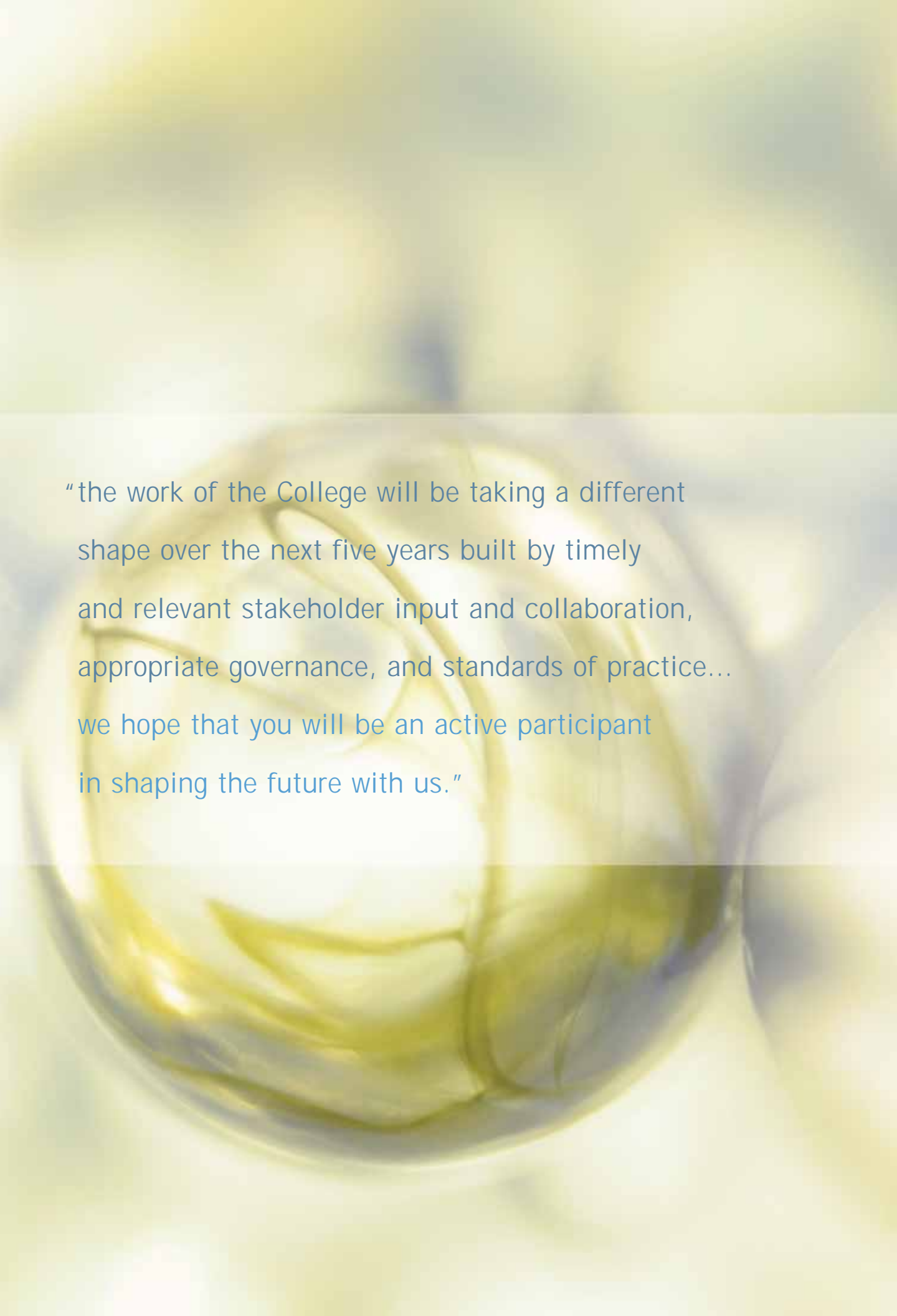
HELEN ANTEBI

CONSULTANTS

JOHN NICHOL
M&N Consultants

CYNDY DE GIUSTI
GPC Public Affairs

CAROLINE WERLE
RIM



“the work of the College will be taking a different shape over the next five years built by timely and relevant stakeholder input and collaboration, appropriate governance, and standards of practice... we hope that you will be an active participant in shaping the future with us.”

**College of Occupational
Therapists of Ontario**

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Therapists of Ontario**

