Our Mission

The College of Occupational Therapists of Ontario is the self-regulatory body that, in the interest of public protection, supports registered occupational therapists to ensure that they are competent, ethical and accountable.

Our Vision

Leaders in Innovative Quality-Driven Regulation

Leadership Priorities 2014-2017

1 Regulatory Leadership and Practice Support: Promoting proactive and innovative leadership that supports understanding of the role and mandate of the College, influences regulatory policy and supports OT practice.

2 Relational Regulation: Engaging in collaborative relationships that promote mutual respect.

3 Accountability: Sustaining strong and effective organizational and governance practices.
In Ontario, many health professions are permitted to self-regulate. That’s not a right; it’s a privilege, and it comes with accountability.

What does that accountability mean in practice? It’s ensuring that occupational therapists meet their fundamental obligations – to attain and maintain competencies, uphold what the profession stands for, and follow a set of ethics and standards. Like every health regulator, we hold our member professionals accountable for their conduct and practice. Members of the profession must think of their patients and clients first. Likewise, the regulatory College must always act in the public interest. That’s accountability.

This report highlights some of the College’s achievements from June 1, 2015 through May 31, 2016. In reviewing our accomplishments, consider that how we work can be just as important as what we do. Being open around our processes, operations and decision-making is part of being accountable to the public. Transparency instills trust among the people of Ontario, and that’s also a big part of our story this year.
Self-regulation is a partnership between the profession and the public. I want to thank my fellow Council members for their dedication to our mission. I especially want to express my gratitude to the departing Council members for their tremendous contribution, and welcome the new voices that have joined.

On behalf of Council, we all look forward to continuing to protect the people of Ontario who rely on occupational therapy services, and doing so in a way that’s open. All of that helps to meet the public’s expectations of – and confidence in – the profession and the College that governs it.

Jane Cox
President
As the regulatory College for occupational therapists, we have a range of critical responsibilities: ensuring that people meet the requirements to practice the profession in Ontario; developing and updating standards for occupational therapists to follow; providing tools and support to promote ongoing professional development and evaluation; and, taking action whenever concerns are raised about any occupational therapist’s care or conduct.

Each is a distinct duty, but all revolve around one objective: protecting the public. Regulating the profession is about supporting the public’s right to safe, ethical and competent care by Ontario’s occupational therapists.

This report highlights the many ways we meet our mandate. Our focus also reflects our 2014–2017 strategic plan. The period described here marks the middle year of the plan. It’s clear how many of our achievements align with its three priorities.

For instance, in the area of Regulatory Leadership and Practice Support, we helped the profession to continually understand and carry out their responsibilities. That’s true in everything from offering advice to refreshing standards to creating more efficient processes.

When it comes to Relational Regulation, we’ve seen huge efforts in connecting with various stakeholders. Forging productive working groups with other Colleges (around clinic oversight and psychotherapy) is one example and collaborating with regulatory leaders across the country through the Association of Canadian Occupational...
Therapy Regulatory Organizations is another. Other evidence comes from the way people are increasingly engaged with the College, whether participating in surveys, webinars, online elections or bylaw consultations.

Lastly, for **Accountability** we’re making our organizational and governance practices as open and transparent as possible. That applies to how we work and the information we make available and accessible.

When information flows freely and knowledge is shared – among members of the profession, for the public and with other stakeholders – that helps everyone to make the best decisions about care. Ultimately, that adds to public protection.

_Elinor Larney_
Registrar
Transparency and Accountability

More information on the Public Register

People should be able to make the most informed choices about their care. That includes knowing relevant details about the professionals providing health services.

To help, the information available on Find an Occupational Therapist (the public register of OTs) has been expanded. As of January 1, 2016, if a registered occupational therapist is convicted of an offence, that guilty finding appears on the public register. Criminal convictions such as those for drug offences and any other offence related to the practice of occupational therapy, will also be posted.

At their March 31, 2016 meeting, Council approved bylaw amendments that will require the College to publish even more on the public register. This relates to the outcomes of a complaint or report. The amendments mean that on January 1, 2017 the College can publish three more pieces of information:

1. Caution given to an occupational therapist in person.
2. Undertakings, which is the term for voluntary agreements between an OT and the College. This could include certain obligations that the OT must meet to address practice issues identified, and/or practice restrictions.
3. Specified continuing education or remediation programs (SCERPs), which are educational opportunities for OTs to improve their knowledge, skill and judgement.

Convictions and discipline findings are a serious matter. Making that information available is part of the College’s mandate to protect the public. All regulatory health Colleges are committed to sharing more information.

Find details of Council meetings online

Part of transparency is a sense that deliberations and decisions don’t happen behind closed doors. Council meetings are already open to the public. At their October 29, 2015 meeting, Council approved the publication on the College website of Council agendas, highlights and detailed minutes. See the About Us section of our website.

Ready to support strengthened laws

The College is anticipating the release of a report from the Minister’s Task Force on the Prevention of Sexual Abuse of Patients and the Regulated Health Professions Act, 1991. The Task Force was established by the Minister of Health and Long-Term Care in December 2014 to provide the Minister with advice and recommendations about how to strengthen the laws related to the sexual abuse of patients by regulated health professionals. The College has offered assistance to the Ministry in support of this important initiative.

Watch for an enhanced quality assurance program

In late 2015, the College began a comprehensive evaluation of the OT Competency Review and Evaluation process. The goal is to ensure we are accurately identifying those OTs who could benefit from additional support in meeting the essential competencies of practice. We have received tremendous input and feedback from OTs thus far and expect to complete the evaluation and analysis in 2017.
Collaboration

Clinic oversight can enhance public protection

Ontarians receive health care services in a variety of settings. Some, like hospitals and long-term care facilities, are regulated. Others, like many clinics, are not. The College of Occupational Therapists of Ontario is part of a working group of 13 health regulatory Colleges exploring a possible clinic oversight model.

In November 2015, the Colleges launched public consultations to discuss whether Ontarians would benefit from clinic regulation and what it might look like. It’s ultimately up to the Ontario government to decide whether to establish a clinic regulation model.

We and the other Colleges believe there is an opportunity to further enhance public protection and strengthen our health care system. Better oversight of clinics can increase quality of care and reduce misuse of health care resources.

Labour mobility strengthened through consistent evaluation

The College was pleased to be part of the new process to harmonize the way internationally educated OTs meet the education requirements in Canada. As a member of the Association of Canadian Occupational Therapy Regulatory Organization, the College has recognized the new assessment process and worked to support and ensure its effective implementation.

College Council

Top row, from left: Julie Entwistle, Ernie Lauzon, Jennifer Henderson, Abdul Wahid, Winston Isaac, Valerie Corbin, Serena Shastri-Estrada, Carol Mieras, Julie Chiba Branson, Angela Mandich, Kurisummoottil S. Joseph, Paula Szeto

Bottom row, from left: Laurie Macdonald, Shannon Gouchie, Jane Cox, Annette McKinnon, Jeannine Girard-Pearlman

The complete Council list is available on page 27.
Defining the controlled act of psychotherapy

In health care, certain activities and procedures have higher risk, so not everyone is allowed to perform them. These are called controlled acts. Under Ontario law, different health care professionals – and only those professionals – are permitted to perform certain controlled acts in whole or part.

Members of our College and five other Colleges (psychotherapists, psychologists, physicians, nurses, and social workers and social service workers) will have access to the controlled act of psychotherapy. The Ministry of Health and Long-Term Care asked a working group of these six Colleges to clarify this controlled act. The group’s efforts are helping to ensure that the meaning of psychotherapy activities or services are transparent, both to members of the Colleges and to the public.

Looking Forward

While annual reports are a time to look back on achievements, the College continually looks ahead too.

In the next year, we plan to keep the focus on public outreach and transparency. It’s vital that the people we serve understand the College’s roles and responsibilities, and how we carry them out. That means clear, timely, relevant and accessible information.

As part of our outreach, we’re seeking feedback from members of the public. Their feedback will help us to shape our 2017-2020 strategic priorities, now in development. We’re also exploring the variety of ways that OTs work with people to lead richer lives – and carry out those duties with the maximum safety, ethics and competency.

In Ontario, the regulation of health care professionals like occupational therapists is a partnership with the public. Our governing Council and Committees include public members and professional OTs alike, and Council meetings are open to the public.

We will further strengthen how we share information, in a way that serves the public interest, enables choices by patients and clients, and increases our accountability as a College.
Patient Relations

The Patient Relations Committee develops and implements the Patient Relations Program.

Core elements of this program include:

- development of standards of practice for registrants
- education of the profession, Council and staff
- provision of information to the public
- administration of the Sexual Abuse Counselling Fund

There were no client applications for funding to the Patient Relations Committee in the 2015-2016 fiscal year.

Recognizing the significance of the program, this year the Patient Relations Committee established a new framework to monitor Committee effectiveness in meeting the goals and legislative requirements of the program.
Practice Advice

Every year the Practice Resource Service at the College addresses questions from members of the public including clients and families, employers, OTs, and students. This service is offered to address questions from the public about what to expect when receiving care from an OT, clients’ rights and how to address concerns about OT practice. For OTs, this service is offered to promote the delivery of safe, high quality, ethical care.

In 2015-2016 the Practice Advisors answered 930 calls and emails.

Top 10 issues identified

1. Record Keeping
2. Consent
3. Conflict of Interest
4. Scope of Practice
5. Not a College Issue*
6. Other
7. Support Personnel
8. Use of Title
9. Controlled Acts
10. Clinical Judgement

Users of the Practice Resource Service

79% OTs
11% Public Includes clients, family members and others
6.5% Employers
3.5% Students

*usually refers to system issues around access to OT services

Information about the practice questions received each year helps the College better understand trends in practice and provides direction for the development of resources for the public and OTs.
Registration Committee

The Registration Committee establishes and maintains the requirements for registration with the College.

The Committee reviews and makes orders on all applications that are referred to it by the Registrar. Written decisions and reasons are issued for each order made by the Committee.

The Committee also creates new policies for registration, and reviews and revises existing policies.

This year, the Committee:

• Processed 35 applications for re-entry to the profession where a refresher program was required.

• Completed the College’s eighth annual Fair Registration Practices Report to the Office of the Fairness Commissioner (OFC).

• Revised a number of existing policies to reflect the new assessment process for internationally educated OTs

• Reviewed 34 applications referred to the Committee by the Registrar.

34 total decisions

Outcomes

8
Issue certificate of registration

18
Issue certificate of registration after additional training

3
Issue certificate of registration with terms, conditions and limitations

5
Deny certificate of registration

Appeals

0
Health Professions Appeal and Review Board
Registration - Statistics

Total Number of Registrants

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>5554</td>
</tr>
<tr>
<td>2015</td>
<td>5379</td>
</tr>
<tr>
<td>2014</td>
<td>5185</td>
</tr>
<tr>
<td>2013</td>
<td>5058</td>
</tr>
<tr>
<td>2012</td>
<td>4993</td>
</tr>
</tbody>
</table>

Number of Registrants by Primary Role

- Direct Service Provider: 4179
- Manager: 241
- Other Role: 227
- Not Stated: 217
- Consultant: 213
- Professional Leader: 125
- Educator: 106
- Administrator: 93
- Owner/Operator: 68
- Researcher: 67
- Quality Management Specialist: 15
- Salesperson (Equipment): 3
- Total: 5554

Area of Practice

- Physical Health: 50%
- Mental Health: 33%
- Other (includes other areas of practice, other areas of direct service, consultation, research, education, etc.): 10%
- Administration: 7%
### Nature of Practice

- **Clinical**: 4176
- **Mixed**: 742
- **Non-Clinical**: 449
- **Not Stated**: 187
- **Total**: 5554

### New Registrant Education

#### New Registrants
- OT Reg. (Ont.): 528
- Educated in Ontario: 407
  - In Canada, Outside of Ontario: 46
  - Outside of Canada: 75
- Other International: 97

#### New Registrants who Graduated in 2015/2016
- Educated in Ontario: 225
  - In Canada, Outside of Ontario: 15
  - Outside of Canada: 12
- Other International: 252

### Location of Education

- **Ontario**: 4483
- **In Canada, Outside of Ontario**: 507
- **United States**: 183
- **United Kingdom**: 90
- **India**: 88
- **Philippines**: 46

**Total**: 5554
Quality Assurance

The College’s Quality Assurance Committee oversees the development and maintenance of programs and policies to promote registrants’ continuing competence to practice safely, ethically and effectively. The program is educational in nature and is committed to promoting reflective practice and providing tools and resources for OTs to continue to enhance their knowledge and skills.

This year, the QA Committee:

- Developed and distributed the PREP Module: Jurisprudence;
- Established and implemented a Quality Assurance program evaluation;

Please note: There was no random selection in October 2015 as preparations were being made for the implementation of the program evaluation. The program evaluation selected fewer participants, however, every participant engaged in both Step 1 and Step 2 of the Competency Review and Evaluation process.
Competency Review and Evaluation: Step 1
Portfolio Review and Multi-Source Feedback

<table>
<thead>
<tr>
<th>PARTICIPANTS (from June 1/15 – May 31/16)</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total registrants randomly selected</td>
<td>110</td>
</tr>
<tr>
<td>Deferrals granted</td>
<td>26</td>
</tr>
<tr>
<td>Total participants</td>
<td>84</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PARTICIPANT OUTCOMES (from June 1/15 – May 31/16)</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registrants who successfully completed Step 1</td>
<td>*251</td>
</tr>
<tr>
<td>Registrants with incomplete portfolios</td>
<td>*188</td>
</tr>
<tr>
<td>Registrants whose multi-source feedback results fell below the threshold</td>
<td>**44</td>
</tr>
</tbody>
</table>

*Note: Results were provided to registrants who were selected prior to June 1, 2015.*

**Some registrants who fell below the threshold will also have incomplete portfolios.

Competency Review and Evaluation: Step 2
Peer and Practice Assessment

<table>
<thead>
<tr>
<th>PARTICIPANTS (from June 1/15 – May 31/16)</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entering Step 2 process</td>
<td>*119</td>
</tr>
<tr>
<td>Peer assessments conducted</td>
<td>81</td>
</tr>
</tbody>
</table>

*The total number of registrants required to participate in Step 2 during the 2015-2016 fiscal year including registrants previously granted deferrals and now required to participate as well as those participating in the program evaluation.*
Competency Review and Evaluation: Step 2
Participants by Nature of Practice

<table>
<thead>
<tr>
<th>Nature of Practice</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical</td>
<td>77</td>
</tr>
<tr>
<td>Mixed</td>
<td>3</td>
</tr>
<tr>
<td>Non-clinical</td>
<td>1</td>
</tr>
</tbody>
</table>

Competency Review and Evaluation: Step 2
Clinical Participants by Practice Area

Number of Registrants

- **Paediatrics**: 18
- **General Hospital**: 15
- **Community**: 14
- **Mental Health**: 11
- **Rehabilitation**: 10
- **Insurance/Self-employed**: 7
- **Other**: 2

PARTICIPANT OUTCOMES

Total Case Decisions Issued by QA Committee

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consisting of:</td>
<td></td>
</tr>
<tr>
<td>Request for Deferral</td>
<td>6</td>
</tr>
<tr>
<td>Incomplete portfolio or multi-source feedback process</td>
<td>11</td>
</tr>
<tr>
<td>Referral to Investigations, Complaints and Reports Committee</td>
<td>1</td>
</tr>
<tr>
<td>Directed remediation</td>
<td>8</td>
</tr>
<tr>
<td>Take no action (with and without recommendations)</td>
<td>62</td>
</tr>
</tbody>
</table>
Inquiries, Complaints and Reports Committee (ICRC)

The Inquiries, Complaints and Reports Committee (ICRC) reviews concerns about a registrant’s practice that have been brought to the attention of the College.

Complaints

In 2015-2016, the College received 27 new complaints (6 more than the 21 complaints received in the previous fiscal year). The ICRC reviewed 19 complaints that were carried over from previous years. Of the 27 new complaints, three intakes were not completed.

The ICRC issued decisions in 25 cases in 2015-2016, 10 more decisions than in the previous fiscal year. In slightly more than fifty percent of those decisions, the ICRC took no further action. The outcomes of these decisions are detailed in the table below:

<table>
<thead>
<tr>
<th>Resolved Cases</th>
<th>25</th>
</tr>
</thead>
<tbody>
<tr>
<td>No further action</td>
<td>13</td>
</tr>
<tr>
<td>SCERP</td>
<td>7</td>
</tr>
<tr>
<td>SCERP and written caution</td>
<td>1</td>
</tr>
<tr>
<td>Withdrawn</td>
<td>1</td>
</tr>
<tr>
<td>Frivolous &amp; vexatious</td>
<td>1</td>
</tr>
<tr>
<td>Written caution</td>
<td>0</td>
</tr>
<tr>
<td>Caution-in-person</td>
<td>0</td>
</tr>
<tr>
<td>Referred to discipline</td>
<td>2</td>
</tr>
</tbody>
</table>

Appeals to the Health Professions Appeal and Review Board (HPARB)

The Health Professions Appeal and Review Board (HPARB) reviews decisions made by the ICRC in complaint matters.

Four complaints received by the College in 2015-2016 were appealed to HPARB. In addition, six complaints received by the College in 2014-2015 and two complaints received by the College in 2013-2014 were appealed to HPARB. During the 2015-2016 fiscal year, HPARB conducted three reviews.

HPARB issued decisions for four cases in 2015-2016 and in each case upheld the decision of the ICRC.
Reports Reviewed by the ICRC: Registrar’s Inquiries

The Office of the Registrar opened 16 Registrar’s Inquiries in the 2015-2016 fiscal year for consideration by the ICRC. Information forming the basis of 11 of these investigations came to the College’s attention through mandatory reports. Thirteen Registrar’s Inquiries were carried over from previous years.

The ICRC made 14 decisions on reports arising out of Registrar’s Inquiries in 2015-2016. The majority of the ICRC’s decisions were to take no further action or to issue a specified continuing education or remediation program (SCERP). The outcomes of the ICRC’s decisions related to Registrar’s Inquiries in the 2015-2016 fiscal year are detailed in the table below.

<table>
<thead>
<tr>
<th>Resolved Cases - Registrar’s Inquiries</th>
<th>14</th>
</tr>
</thead>
<tbody>
<tr>
<td>No further action</td>
<td>4</td>
</tr>
<tr>
<td>SCERP</td>
<td>2</td>
</tr>
<tr>
<td>SCERP and written caution</td>
<td>1</td>
</tr>
<tr>
<td>SCERP and verbal caution</td>
<td>3</td>
</tr>
<tr>
<td>Written caution</td>
<td>0</td>
</tr>
<tr>
<td>Verbal caution</td>
<td>1</td>
</tr>
<tr>
<td>Undertaking</td>
<td>2</td>
</tr>
<tr>
<td>Referred to discipline</td>
<td>1</td>
</tr>
</tbody>
</table>
**Discipline Committee**

The Discipline Committee conducts hearings into allegations of professional misconduct or incompetence that are referred to it by the Inquiries, Complaints and Reports Committee.

During the 2015-2016 fiscal year, three discipline hearings were held at the College.

**Discipline Summary: Julie Robinson**

On November 4, 2015, the Discipline Committee of the College of Occupational Therapists of Ontario found that Ms. Julie Robinson committed acts of professional misconduct by engaging in sexual abuse; engaging in an act or omission that would be reasonably regarded by the members of the profession as disgraceful, dishonourable and unprofessional conduct; by engaging in conduct unbecoming an occupational therapist; and, by failing to maintain a standard of practice of the profession.

On November 4, 2015, the Discipline Committee ordered and directed that:

- the Registrar revoke Ms. Robinson’s certificate of registration, effective immediately;
- Ms. Robinson appear before the panel to be reprimanded on a date to be fixed by the College; and,
- Ms. Robinson reimburse the College for funding provided to clients under the program required under section 85.7 of the Health Professions Procedural Code, and shall post security acceptable to the College in the amount of $16,000.00 to guarantee the payment of any amounts she may be required to reimburse the College.

The Discipline Committee ordered Ms. Robinson to pay to the College costs in the amount of $2,000.00.

**Discipline Summary: Sukaina Jagani**

On February 29, 2016, the Discipline Committee of the College of Occupational Therapists of Ontario found that Ms. Sukaina Jagani committed acts of professional misconduct by contravening a standard of practice of the profession or failing to maintain a standard of practice of the profession; by engaging in misconduct of a sexual nature involving someone, other than a client, with whom the member is in a position of trust; and, by engaging in conduct that would be reasonably regarded by OTs as conduct unbecoming an occupational therapist.

On February 29, 2016, the panel of the Discipline Committee ordered and directed that:

- Ms. Jagani be reprimanded;
- the Registrar suspend Ms. Jagani’s certificate of registration for twenty four (24) weeks effective immediately. Seven weeks of the suspension to be suspended so long as Ms. Jagani complies with the terms, conditions and limitations imposed by the Discipline Committee;
- Ms. Jagani, at her own expense, successfully complete the Professional/Problem-Based Ethics (ProBE) course in professional ethics, within twelve months of the hearing date; and,
- Ms. Jagani, at her own expense, participate in a practice monitoring program relating to jurisprudence and professional boundaries for nine months.

The Discipline Committee ordered Ms. Jagani to pay to the College costs in the amount of $4,000.00.
**Discipline Summary: Hina Arora (under appeal)**

On April 11, 2016, the Discipline Committee of the College of Occupational Therapists of Ontario found that Ms. Hina Arora committed acts of professional misconduct by contravening, by act or omission, a term, condition or limitation on the member’s certificate of registration; by failing to comply with an order of a panel of the College; by engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all circumstances, would reasonably be regarded by members as unprofessional; and, by engaging in conduct that would reasonably be regarded by members as conduct unbecoming an occupational therapist. The Discipline Committee was not satisfied, based on the evidence presented, that one of the allegations advanced by the College amounted to professional misconduct; namely, Ms. Arora’s refusal to re-take the ProBE course.

**On June 15, 2016, the panel of the Discipline Committee ordered and directed that:**

- the Registrar suspend Ms. Arora’s certificate of registration for a period of four (4) months;
- following the expiry of the suspension described above, Ms. Arora not practice occupational therapy until she satisfies a practice consultant, approved by the Registrar and engaged at the expense of Ms. Arora, that she fully understands the ethical and professional obligations incumbent on members of the College; and,
- Ms. Arora does not supervise occupational therapy students, provisional practising certificate holders or temporary certificate holders for a period of two (2) years from the date she becomes entitled to engage in the practice of occupational therapy in accordance with the Order.

The Discipline Committee ordered Ms. Arora to pay to the College costs in the amount of $26,000.00. This matter is currently under appeal to the Ontario Superior Court of Justice (Divisional Court). The Discipline Committee’s Orders on penalty and costs are stayed pending final disposition of the appeal.

**Fitness to Practise Committee**

The Fitness to Practise Committee holds hearings to determine if a registrant is physically or mentally incapacitated.

There were no Fitness to Practise hearings held at the College during the 2015-2016 fiscal year.
Executive Committee

The Executive Committee facilitates the efficient and effective functioning of Council and other Committees. It also makes decisions between Council meetings, for any matters that require immediate attention, but cannot make, amend, or revoke a regulation or bylaw. Last year, the Committee:

Finance
- Approved financial reports and balance sheets.
- Discussed the content, format, and frequency of the College’s regular financial reports to Executive and Council, and agreed to present to Council the draft augmented report content for possible adoption.
- Reviewed the 2015-2016 projected budget.
- Approved the financial statements for 2014-2015 as presented by the auditor.
- Recommended to Council to approve the reappointment of the College auditors for an additional 5-year term.
- Approved the budget to renovate the current College office to maximize space – the most cost-effective solution based on a cost-benefit analysis.

Transparency
- Recommended that Council approve the draft bylaw amendments to increase transparency of the information on the public register.
- Recommended that Council approve the bylaw amendments related to the publication of ICRC outcomes, specified continuing education or remediation programs (SCERPs), cautions-in-person (oral cautions) and undertakings on the public register.
- Recommended that the College publishes on its website all Council agendas prior to Council meetings and all Council minutes (once approved by Council). Both moves increase transparency of College processes and decision-making.

Standards
- Recommended that Council approve the revised Standards for Record Keeping.
- Recommended that Council approve the revised Standards for Consent be circulated for stakeholder consultation.

Psychotherapy
- Recommended that Council approve a document that clarifies the controlled act of psychotherapy, pending feedback by the Ministry of Health and Long-Term Care.

Council Elections
- Recommended that Council approve the proposed amendments to Bylaw 5.03.1 pertaining to eligibility for elections.

Bylaw Review
- Added a complete bylaw review to the work plan in 2016-2017.
Financial Statements

2016
Financial Summary 2015-2016

The College’s primary responsibility is to meet the regulatory mandate as set by the government. Many of the programs and services that the College provides are required by legislation. These include assessing and registering applicants, maintaining a register that is available to the public, establishing professional practice standards and guidelines, investigating concerns about occupational therapy practice and providing a quality assurance program.

The College’s revenue comes almost solely from registration fees. The costs of programs and services include only the direct costs incurred by the College. The salaries, benefits and professional development costs are not included in the program costs; these are included in salaries and benefits. Similarly the costs of the meetings related to program functioning are included in the Council expense line.

A surplus has been realized this year. This surplus will be used to invest in technology modernization and process enhancements to strengthen the College’s ability to respond to the increasing needs and expectations of the public and government.

The following information is provided to add clarity to the Summarized Statement of Operations.

### College Statement of Operations

<table>
<thead>
<tr>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration &amp; application fees</td>
<td>98.1%</td>
</tr>
<tr>
<td>Interest and other income</td>
<td>1.9%</td>
</tr>
<tr>
<td>Total Operating Revenue</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries, benefits &amp; professional development</td>
<td>50.3%</td>
</tr>
<tr>
<td>Programs (QA, I&amp;R, Reg., Practice)</td>
<td>10.8%</td>
</tr>
<tr>
<td>Communications</td>
<td>2.9%</td>
</tr>
<tr>
<td>Council</td>
<td>4.0%</td>
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<tr>
<td>Occupancy costs</td>
<td>7.2%</td>
</tr>
<tr>
<td>Operations (depreciation &amp; other operations)</td>
<td>24.8%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
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</tbody>
</table>
Independent Auditor’s Report

To the members of the Council of the College of Occupational Therapists of Ontario

The accompanying summary financial statements of the College of Occupational Therapists of Ontario (the “College”), which comprise the summary statement of financial position as at May 31, 2016, and the summary statement of operations for the year then ended, are derived from the audited financial statements of the College for the year ended May 31, 2016. We expressed an unmodified audit opinion on those financial statements in our report dated August 25, 2016.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements therefore, is not a substitute for reading the audited financial statements of the College.

Management’s Responsibility for the Summary Financial Statements

Management is responsible for the preparation of a summary of the audited financial statements in accordance with Canadian accounting standards for not-for-profit organizations.

Auditor’s Responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, “Engagements to Report on Summary Financial Statements”.

Opinion

In our opinion, the summary financial statements derived from the audited financial statements of the College for the year ended May 31, 2016 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not-for-profit organizations.

Clarke Henning LLP
Chartered Accountants
Licensed Public Accountants

Toronto, Ontario
August 25, 2016
## Summary Statement of Financial Position

As at May 31, 2016

### Assets

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and investments</td>
<td>$6,352,308</td>
<td>$6,004,834</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>44,088</td>
<td>45,972</td>
</tr>
<tr>
<td></td>
<td>6,396,396</td>
<td>6,050,806</td>
</tr>
<tr>
<td><strong>Property and equipment</strong></td>
<td>249,964</td>
<td>62,470</td>
</tr>
<tr>
<td></td>
<td>6,646,360</td>
<td>6,113,276</td>
</tr>
</tbody>
</table>

### Liabilities

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>478,474</td>
<td>470,288</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>3,116,082</td>
<td>2,699,218</td>
</tr>
<tr>
<td></td>
<td>3,594,556</td>
<td>3,169,506</td>
</tr>
</tbody>
</table>

### Net Assets

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating fund</td>
<td>908,840</td>
<td>1,140,300</td>
</tr>
<tr>
<td>Invested in property</td>
<td>249,964</td>
<td>62,470</td>
</tr>
<tr>
<td>Hearing reserve fund</td>
<td>350,000</td>
<td>350,000</td>
</tr>
<tr>
<td>Premises reserve fund</td>
<td>200,000</td>
<td>200,000</td>
</tr>
<tr>
<td>Sexual abuse therapy</td>
<td>18,000</td>
<td>18,000</td>
</tr>
<tr>
<td>Contingency reserve</td>
<td>1,050,000</td>
<td>1,000,000</td>
</tr>
<tr>
<td>Fee stabilization</td>
<td>275,000</td>
<td>173,000</td>
</tr>
<tr>
<td></td>
<td>3,051,804</td>
<td>2,943,770</td>
</tr>
<tr>
<td></td>
<td>6,646,360</td>
<td>6,113,276</td>
</tr>
</tbody>
</table>
## Summary Statement of Operations

As at May 31, 2016

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registration and application fees</td>
<td>$3,820,392</td>
<td>$3,703,229</td>
</tr>
<tr>
<td>Investment and other income</td>
<td>74,576</td>
<td>122,743</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>$3,894,968</td>
<td>$3,825,972</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries, benefits and professional development</td>
<td>1,906,573</td>
<td>1,633,573</td>
</tr>
<tr>
<td>Programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality assurance</td>
<td>151,731</td>
<td>189,548</td>
</tr>
<tr>
<td>Investigations and resolutions</td>
<td>222,755</td>
<td>162,978</td>
</tr>
<tr>
<td>Registration</td>
<td>34,173</td>
<td>19,067</td>
</tr>
<tr>
<td>Communications</td>
<td>108,394</td>
<td>166,785</td>
</tr>
<tr>
<td>Council</td>
<td>151,155</td>
<td>169,141</td>
</tr>
<tr>
<td>Occupancy costs</td>
<td>271,783</td>
<td>264,112</td>
</tr>
<tr>
<td>Depreciation</td>
<td>66,935</td>
<td>40,691</td>
</tr>
<tr>
<td>All other operating expenses</td>
<td>873,434</td>
<td>747,561</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>3,786,933</td>
<td>3,393,456</td>
</tr>
<tr>
<td><strong>Excess of Revenues over Expenses for the Year</strong></td>
<td>$108,035</td>
<td>$432,516</td>
</tr>
</tbody>
</table>
College Council

Julie Chiba Branson, Professional Member, District 1 - Central East
Valerie Corbin, Public Member (Term began April 2016)
Jane Cox, President, Professional Member, District 3 - South West
Marie Eason Klatt, Professional Member - District 1 Central East (Term ended March 2016)
Julie Entwistle, Professional Member, District 2 - Central West
Jeannine Girard-Pearlman, Former Member at Large, Finance, Current Member at Large, Education, Public Member
Shannon Gouchie, Vice President, Professional Member, District 5 - North East
Jennifer Henderson, Professional Member, District 2 - Central West
Winston Isaac, Current Member at Large, Finance, Public Member
Kurisummoottil S. Joseph, Public Member
Sharon Kular, Public Member (Term ended March 2016)
Ernie Lauzon, Public Member
Maria Lee, Former Member at Large, Education, Public Member (Term ended March 2016)
Laurie Macdonald, Professional Member, District 6 - North West
Angela Mandich, Academic Member
Annette McKinnon, Public Member (Term began April 2016)
Carol Mieras, Professional Member, District 4 - Eastern
Serena Shastri-Estrada, Professional Member - District 1 Central East (Term began March 2016)
Debra Stewart, Academic Member
Paula Szeto, Professional Member - District 1 Central East
Abdul Wahid, Public Member

Non-Council Committee Members

Paola Azzuolo
Leanne Baker
Anuradha Banavalikar
Kathryn Berardi
Sylvia Boddener
Anne Cooper-Worsnop
Megan Edgelow
Gord Hirano
Shaheeda Hirji
Warren Kirley
Kelly Lowther (Resigned July 2015)
Iona Mairi Macritchie
Avelino Maranan

Nancy McFadyen
Kathleen Murphy
Mathew Rose
Vijay Sachdeva
Carol Salmon (Term began March 2016)
Katrine Marie-Lisa Sauvé-Schenk
Roxane Siddall
Christine Sniatala (Term began March 2016)
Michelle Stinson
Martha Wilkie (Resigned June 2015)
Phyllis Wong
David Wysocki
Thank you

Thank you to all members of the public, OTs, Council and Committee members, staff, and volunteers who have shared their time and expertise with the College to help ensure Ontarians receive quality care.