CREDIBLE
COMPETENT
COMMITTED

ANNUAL REPORT 2013
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 the regular Council meeting on October 30, 2013 at 9:00 a.m. at the College offices.

Seating is limited, please call 1-800-890-6570 or (416) 214-1177, ext. 232 to confirm your attendance.
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 in enabling the health of Ontarians.

OUR VISION
Innovative, quality-driven regulatory leadership.
PRESIDENT’S MESSAGE

Demonstrating our Commitment to Regulation

As the College looks forward to celebrating 20 years of regulation of the profession of Occupational Therapy, it is time to recognize the accomplishments of the past year. It is also a time to re-affirm the College’s commitment to the regulation of occupational therapists in the interest of the public. The support of competent and ethical occupational therapy practice furthers the credibility of this profession and enables the College’s mission.

This commitment to regulation has allowed the College to emerge as a leader in several key areas. One of the leadership priorities embodied in the College’s strategic plan has been regulatory leadership. Relative to its size, the College has shown leadership in such areas as the development of standards of practice, the Quality Assurance Program, as well as the Policy Governance model that has been adopted by Council. Other regulatory colleges have turned to this College for advice or support in these areas.

Throughout this year, Council has ensured that committees are productive and able to carry out their respective mandates. Through a regular review process, Council has also ensured that its own policies were up-to-date with respect to its continued efficacy. Council members are proud to share in the College’s achievements, as well as to highlight its ongoing work with Registrants, stakeholders, and members of the public.

These achievements could not be accomplished without a strong, committed Council. Elected Council members often serve multiple terms, and the appointed public members contribute to the continuity of governance processes by providing an unbiased representation of the public interest. This dedicated group of people invest their time and energy to ensure that Council decisions are made in the public interest.

Another strategic priority of Council is engaging occupational therapists. This priority is not only about communicating with Registrants, but an active exchange of ideas that deepens the level of understanding of what the College is working to achieve. One way this exchange is accomplished is through the level of interest and participation in College committees by occupational therapists who are not Council members. In addition, occupational therapists standing for district elections have been on the rise. No longer is the College in the position of having to seek out nominations for candidates for Council, or acclaiming Council positions due to a lack of nominees. This exemplifies the commitment of occupational therapists to successful self-regulation.
This commitment to regulation has allowed the College to emerge as a leader in several key areas.

The challenges professional health regulators have faced in the past ten years have far exceeded those of the first ten years since the College’s inception. The commitment of the Council has allowed the College to adjust to a rapidly changing regulatory environment. Council is prepared and committed to meet any new challenges that may eventually arise in health regulation in the years to come.

I myself am ending my third and last term on Council, and my third year as the College’s President. Nine years have flown by. It has been a privilege to serve Registrants and stakeholders in this role with the College, which has allowed me to serve both the profession and the public. I wish to thank Barb Worth, Elinor Larney, and all the staff at the College for their excellent work and their support of Council.

As the College looks forward to celebrating its 20th year, it is the commitment of the profession to self-regulation, as well as the commitment of the individuals who contribute to the mission of the College, be they Council members, non-Council members or staff, that require acknowledgement. It is evident that all these individuals uphold the values of the College, ensuring that it continues to be a leader in self-regulation.

Lesya Dyk
President
REGISTRAR’S MESSAGE

Credible, competent, committed.

These 3 words have long been associated with the College and have been a recurring theme for almost 20 years. As the College looks toward the future, it is important to look back on the past year and reflect on the impact regulation has had for the profession of occupational therapy in Ontario, as well as the College’s commitment to regulating the profession to support ethical and competent practice.

The College could not do its work properly without the commitment of occupational therapists who take on the work necessary for self-governing the profession. This year marks the last of nine years of commitment to Council and the profession, by current President, Lesya Dyk. Lesya’s contributions to the College and the profession have been immeasurable. Public members of Council, while not occupational therapists, are committed to the mission of public protection, as well as ensuring that practice support for occupational therapists is always available through the College. Elected Council members also demonstrate their commitment to Registrants and the College; they are tasked, along with public and non-council members, with rendering thoughtful decisions on the difficult issues that come before them.

The College celebrated 10 year anniversaries for several peer assessors this past year. Peer assessors are highly experienced and thoughtful individuals charged with the task of implementing Step 2 of the Quality Assurance Program. They are extremely valued for their wisdom and for the kindness they display in the completion of their duties. Several College staff have reached their 5 year anniversary and others recently celebrated their 10th year with the College. College staff display a dedication and commitment to excellence in all they do. The College could not meet its mandate of protecting the public through the support of occupational therapists, as well as ensuring their ethical and competent service to Ontarians, without this host of committed individuals.

It is this commitment, and in addition to working through the many cases and decisions that follow in the pages of this annual report, that has enabled the College to realize many important accomplishments.

As part of the Tripartite Steering Committee for the Review of the Occupational Therapy Scope of Practice, the College determined that its role was to investigate and approve a regulatory model to ensure public protection. This accomplishment was reached this year, therefore the College is prepared and Registrants are informed about the possible future of occupational therapy practice.

Secondly, the College developed and approved a standard that was added to the already published Standards for Psychotherapy, to guide occupational therapists on their legal use of the title Psychotherapist.
The College has plans to implement positive changes over the next few months and into the future.

Thirdly, with the evolution of the Code of Ethics, and in response to a need for additional educational resources related to ethical practice, the development of an educational ethics program was initiated.

In support of occupational therapists whose practice does not involve direct service to clients, the Quality Assurance Program now includes review processes for both the Multi-Source Feedback process and Step 2, the Behavioural-Based Interview for occupational therapists in this group.

The College has also embarked on a process to determine a program for individuals wishing to re-enter the profession without the required currency hours, but will practise completely in a non-clinical role.

Support for practice continues to evolve. The Practice Development Portal, originally designed to manage quality assurance mandatory tools and processes, contains searchable resources for occupational therapists wishing to locate case studies, standards or other College material on their topic of interest. The written documents of the College now have an ongoing schedule of review to ensure their currency and relevance. Of note, there were 918 inquiries to the Practice Resource Service in this past year. This volume of practice calls and emails reinforces the College as an important resource for occupational therapists and the public. These resources also create the opportunity for conversations about what is impacting everyday practice, as well as supporting safe, ethical, effective services.

Finally, to gather information for the strategic objective of Registrant engagement, a Registrant survey was conducted to determine how best to engage occupational therapists in the future. Much was learned by the College about the views of occupational therapists regarding their level of engagement. The College has plans to implement positive changes over the next few months and into the future.

Together, the College and the occupational therapists in this province can demonstrate their credibility, competence and ongoing commitment to enabling the health of Ontarians.

Elinor Larney
Interim Registrar
STATUTORY COMMITTEES

REGISTRATION COMMITTEE
The Registration Committee is responsible for reviewing applications for certificates of registration referred to them if the Registrar,

- has doubts, on reasonable grounds, about whether the applicant fulfills the registration requirements;

- is of the opinion that terms, conditions, or limitations should be imposed on a certificate of registration and the applicant does not consent to the imposition; or

- proposes to deny the applicant a Certificate of Registration.

During the period June 1, 2012, to May 31, 2013, the Registration Program and Committee activities included:

1. The Registrar’s referral of 18 applications to the Registration Committee for review:

- The Committee directed the Registrar to issue a Certificate of Registration upon completion of additional training to 9 applicants.

- The Committee directed the Registrar to issue a Certificate of Registration upon receipt of a signed undertaking with the College to 7 applicants.

- The Committee directed the Registrar to issue a Certificate of Registration upon successful completion of National Occupational Therapy Certification Examination and additional training to 1 applicant.

- The Committee directed the Registrar to remove the terms, conditions and limitations on a Certificate of Registration upon receipt of a signed undertaking with the College to 1 applicant.

2. The processing of 32 applications for re-entry to the profession where a period of volunteer supervised practice was required. Of these, 14 have since completed re-entry requirements successfully. 18 applicants are still completing their period of supervised practice.

3. The completion of its fifth annual Fair Registration Practices Report to the Office of the Fairness Commissioner.

4. The review and revision of Registration Committee policies.

5. The review and approval of program revisions to the Occupational Therapy Examination and Practice Preparation Project (OTepp) curriculum content.
## Total Number of Registrants over the last 5 years

<table>
<thead>
<tr>
<th>Year</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>5058</td>
</tr>
<tr>
<td>2012</td>
<td>4993</td>
</tr>
<tr>
<td>2011</td>
<td>4906</td>
</tr>
<tr>
<td>2010</td>
<td>4733</td>
</tr>
<tr>
<td>2009</td>
<td>4563</td>
</tr>
</tbody>
</table>

## Age of Registrants

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 30 and Under</td>
<td>920</td>
</tr>
<tr>
<td>2 31 - 40</td>
<td>1777</td>
</tr>
<tr>
<td>3 41 - 50</td>
<td>1378</td>
</tr>
<tr>
<td>4 51 - 60</td>
<td>793</td>
</tr>
<tr>
<td>5 Over 60</td>
<td>190</td>
</tr>
</tbody>
</table>

## Area of Practice by %

<table>
<thead>
<tr>
<th>Area of Practice</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health and Addiction</td>
<td>530</td>
</tr>
<tr>
<td>General Service Provision</td>
<td>1708</td>
</tr>
<tr>
<td>Other Areas Direct Service</td>
<td>817</td>
</tr>
<tr>
<td>All Other Areas of Practice</td>
<td>2003</td>
</tr>
</tbody>
</table>

## Registrants by Category

<table>
<thead>
<tr>
<th>Category</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managers</td>
<td>197</td>
</tr>
<tr>
<td>Professional Leaders</td>
<td>144</td>
</tr>
<tr>
<td>Direct Service Provider</td>
<td>3876</td>
</tr>
<tr>
<td>Educators</td>
<td>104</td>
</tr>
<tr>
<td>Research</td>
<td>53</td>
</tr>
<tr>
<td>Salesperson (Equipment)</td>
<td>3</td>
</tr>
<tr>
<td>Owner/Operator</td>
<td>48</td>
</tr>
<tr>
<td>Consultant</td>
<td>161</td>
</tr>
<tr>
<td>Quality Management Specialist</td>
<td>13</td>
</tr>
<tr>
<td>Administrator</td>
<td>84</td>
</tr>
<tr>
<td>Other Positions (not labeled)</td>
<td>177</td>
</tr>
<tr>
<td>Not Stated</td>
<td>198</td>
</tr>
</tbody>
</table>

## Nature of Practice

<table>
<thead>
<tr>
<th>Nature of Practice</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical</td>
<td>3846</td>
</tr>
<tr>
<td>Mixed</td>
<td>670</td>
</tr>
<tr>
<td>Non-Clinical</td>
<td>382</td>
</tr>
<tr>
<td>No Response</td>
<td>154</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>6</td>
</tr>
</tbody>
</table>

## New Registrants Place of Education

<table>
<thead>
<tr>
<th>Place of Education</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educated in Ontario</td>
<td>4079</td>
</tr>
<tr>
<td>Outside of Ontario within Canada</td>
<td>473</td>
</tr>
<tr>
<td>United States</td>
<td>160</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>92</td>
</tr>
<tr>
<td>India</td>
<td>81</td>
</tr>
<tr>
<td>Philippines</td>
<td>41</td>
</tr>
<tr>
<td>Hong Kong</td>
<td>27</td>
</tr>
<tr>
<td>South Africa</td>
<td>15</td>
</tr>
<tr>
<td>Ireland</td>
<td>8</td>
</tr>
<tr>
<td>Israel</td>
<td>10</td>
</tr>
<tr>
<td>International Other</td>
<td>72</td>
</tr>
</tbody>
</table>

## Location of Education of Registrants

<table>
<thead>
<tr>
<th>Location</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ontario</td>
<td>4079</td>
</tr>
<tr>
<td>Outside of Ontario within Canada</td>
<td>473</td>
</tr>
<tr>
<td>United States</td>
<td>160</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>92</td>
</tr>
<tr>
<td>India</td>
<td>81</td>
</tr>
<tr>
<td>Philippines</td>
<td>41</td>
</tr>
<tr>
<td>Hong Kong</td>
<td>27</td>
</tr>
<tr>
<td>South Africa</td>
<td>15</td>
</tr>
<tr>
<td>Ireland</td>
<td>8</td>
</tr>
<tr>
<td>Israel</td>
<td>10</td>
</tr>
<tr>
<td>International Other</td>
<td>72</td>
</tr>
</tbody>
</table>
PATIENT RELATIONS COMMITTEE

The Patient Relations Committee is mandated by the Regulated Health Professions Act (RHPA, 1991) to develop and implement the Patient Relations Program. This includes administering the College’s fund for therapy and counselling for persons where a member has been found to be at fault under the regulations.

To date, there have not been any findings of fault related to sexual abuse of a client by an occupational therapist in Ontario.

Accomplishments of the Patient Relations Committee in this year include:
- Revisions to the Conscious Decision Making Framework;
- Dissemination of the Guide to the Code of Ethics;
- Review and revision of the Standards for the Prevention of Sexual Abuse;
- Commencement of work on a remediation/education program for ethics;
- Recommendation that Council withdraw the proposed changes to the Advertising Regulation submitted to the Ministry of Health and Long-Term Care.

QUALITY ASSURANCE COMMITTEE

The College’s Quality Assurance Program is committed to promoting reflective practice and providing tools and resources for OTs to continue to enhance their knowledge and skills. The program is intended to be educational in nature and is designed to ensure that Registrants can demonstrate their continued competence.

The Regulated Health Professions Act (RHPA, 1991) prescribes the activities that must be included in a quality assurance program; the College’s QA program meets all the requirements of the RHPA.

Accomplishments of the QA Committee and Quality Programs in 2012/2013 fiscal year included:
- Developed and distributed the PREP Module: Conflict of Interest;
- Administered the Competency Review and Evaluation to over 670 Registrants;
- Fully implemented online portfolio requirements for the Self-Assessment Tool, Professional Development Plan, and PREP Module;
- Engaged 66 Registrants in Competency Review and Evaluation: Step 2 (peer assessment);
- Identified and implemented changes to reflect amendments to the Quality Assurance Regulation.

### Competency Review and Evaluation: Step 1

### Portfolio Review and Multi-Source Feedback

<table>
<thead>
<tr>
<th>Participants (from June 1/12 - May 31/13)</th>
<th># Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Random Selection</td>
<td>698</td>
</tr>
<tr>
<td>Previous deferral</td>
<td>64</td>
</tr>
<tr>
<td>Deferral granted</td>
<td>89</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Participant Outcome</th>
<th># Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of Registrants who participated in Step 1</td>
<td>674</td>
</tr>
<tr>
<td>Total number of Registrants who successfully completed Step 1</td>
<td>449</td>
</tr>
<tr>
<td>Total number of Registrants whose portfolio material were incomplete</td>
<td>112</td>
</tr>
<tr>
<td>Total number of Registrants whose Multi-Source Feedback results fell below the survey threshold</td>
<td>69</td>
</tr>
</tbody>
</table>
*Note: Some results were sent to Registrants who participated in 2012-2013 in the following fiscal year.

**Some Registrants who fell below the threshold will also be included in the incomplete portfolio category

Competency Review and Evaluation: Step 2 Peer Assessments

Participants (from June 1/12 – May 31/13) #

- Registrants entering process *69
- Deferrals granted 3
- 1st Peer Assessments Conducted **84

*The number is based on the total number of Registrants required to participate in Step 2 during the 2012/13 fiscal year. This includes registrants who were previously granted a deferral and were now required to participate.

**This number includes Registrants who were required to participate from the previous fiscal year.

Competency Review and Evaluation: Step 2

Participants by practice area

Participants (from June 1/12 – May 31/13) #

- General Hospital 14
- Rehabilitation 14
- Mental Health 13
- Community 11
- Insurance/Self-employed 12
- Paediatrics 14
- Other 6

Participant Outcomes #

- Case decisions Issued by QA Committee following Step 2 54
- Request for Deferral 6
- Directed remediation 6
- Recommendations and directed remediation 1
- Recommendations only 10
- Take no action 31
INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE (ICRC)

COMPLAINTS

In 2012/2013 fiscal year, the College received 29 new complaints (10 more than the 19 complaints received in the previous fiscal year). The ICRC considered eight complaints that were carried over from previous years. Of the 29 new complaints, only one intake was not completed.

The ICRC’s practices are governed by the Regulated Health Professions Act (RHPA, 1991). The RHPA requires that the College dispose of a matter within 150 days. This timeline may be extended in complex cases, where investigations can be lengthy and often in circumstances that are not within the College’s control. The RHPA details the steps the College must take whenever a matter extends past the 150 day time frame.

The Committee reviewed and made their decisions on all cases decided in 2012/2013 within an average of 179 days. The Committee was able to review a case and make a decision within the 150 day timeline in 50% of cases.

As in previous years, the majority of complaints received by the College were initiated by recipients of occupational therapy services or their representatives.

Complaints received by the College are related to a variety of practice areas. Nearly two-thirds of the complaints received by the College in 2012/2013 were associated with assessments by occupational therapists working in the auto insurance sector. The five most common concerns made by complainants related to whether the occupational therapist:

• Demonstrated a commitment to their clients and the public;
• Demonstrated professional integrity;
• Adhered to the Code of Ethics;
• Demonstrated a systematic client-centred approach; and
• Communicated effectively with the client and other stakeholders using a client-centred approach.

The ICRC issued decisions in 20 cases in 2012/2013. In three-quarters of those decisions, the ICRC took no further action. The outcomes of these decisions are detailed in the table below:

<table>
<thead>
<tr>
<th>Complaints Reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resolved Cases</td>
</tr>
<tr>
<td>No Further Action</td>
</tr>
<tr>
<td>Referred to Discipline</td>
</tr>
<tr>
<td>Specified Continuing Education and Remediation Program (SCERP)</td>
</tr>
<tr>
<td>Verbal Caution</td>
</tr>
<tr>
<td>Withdrawn</td>
</tr>
</tbody>
</table>

APPEALS TO THE HEALTH PROFESSIONS APPEAL AND REVIEW BOARD (HPARB)

Four cases which were decided by the ICRC in 2012/2013 were appealed to HPARB in the same fiscal year. The Board conducted three reviews for which the decisions are pending, and one review has been scheduled but not completed by the Board.

One additional case decided by the ICRC in 2012/2013 was appealed to the Board after the conclusion of the fiscal year. The review has not yet been conducted. Two other reviews were held by the Board in 2012/2013 were for matters decided by the ICRC in 2011/2012. In both of those cases, the Board confirmed the decision of the ICRC.
MANDATORY REPORTS / REGISTRAR’S INQUIRIES

The College received twelve new Mandatory Reports and seven new Registrar’s Inquiry matters in the 2012/2013 fiscal year for consideration by the ICRC. Eight mandatory reports and no Registrar’s Inquiry cases were carried over from the prior fiscal years.

Mandatory reports were filed with the College in compliance with the reporting obligations specified in the RHPA. These reports cited a variety of concerns related to the practice of occupational therapists that typically resulted in termination or resignation. The most common areas of concern which prompted mandatory reports related to whether the occupational therapist:

- Communicated using a timely and effective approach (mostly as it relates to timely and effective record keeping);
- Demonstrated a systematic client-centred approach;
- Demonstrated a commitment to their clients and the public;
- Demonstrated professional integrity;
- Implemented a plan for occupational therapy services; and
- Managed day-to-day practice processes.

The ICRC made ten decisions for Mandatory Reports and Registrar’s Inquiry matters in 2012/2013, for which the majority resulted either in a Committee’s decision to take no further action or to issue a Specified Continuing Education and Remediation Program (SCERP). Dispositions of mandatory reports and Registrar’s Inquiries in the 2012/2013 fiscal year are detailed in the table below:

<table>
<thead>
<tr>
<th>Mandatory Reports / Registrar’s Inquiry Matters</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Resolved Cases</td>
<td>10</td>
</tr>
<tr>
<td>No Further Action</td>
<td>4</td>
</tr>
<tr>
<td>Referred to Discipline</td>
<td>1</td>
</tr>
<tr>
<td>Verbal Caution</td>
<td>1</td>
</tr>
<tr>
<td>Specified Continuing Education and Remediation Program (SCERP)</td>
<td>4</td>
</tr>
</tbody>
</table>

OTHER ICRC WORK

In 2012/2013, other than case reviews, the members of the ICRC also:

- Reviewed and finalized a discipline penalty checklist as well as a procedural guide for referrals to the Discipline Committee;
- Discussed the ICRC powers to order Specified Continuing Education and Remediation Programs;
- Discussed administrative improvements for future Committee meetings;
- Reviewed the topics of conflicts of interest and appearance of bias; and
- Reviewed feedback from Registrants about ICRC processes.

DISCIPLINE COMMITTEE

During the 2012/2013 fiscal year, two Discipline hearings were held at the College.

COLLEGE OF OCCUPATIONAL THERAPISTS OF ONTARIO AND ALICE TAM

On December 3, 2012, the Discipline Committee held a hearing into allegations against Ms. Alice Tam. The following is a summary of the matter.
BACKGROUND
In May 2011, the College received a mandatory report from Ms. Tam’s supervisor, expressing concerns with regard to Ms. Tam’s practice while under the employer’s supervision. After an extensive investigation of those concerns, the Inquiries, Complaints and Reports Committee (a screening committee of the College) referred the matter to the Discipline Committee for a hearing.

Before the hearing date, counsel for Ms. Tam and counsel for the College reached an agreement on the facts (an Agreed Statement of Facts) and an agreement on the penalty (a Joint Submission on Penalty).

THE MEMBER’S PLEA
College counsel submitted to the Discipline Panel a Plea Inquiry Questionnaire signed by Ms. Tam on November 30, 2012 by which Ms. Tam admitted the allegations against her and confirmed that she made voluntary, informed and unequivocal admissions of professional misconduct.

PROFESSIONAL MISCONDUCT
Counsel for the College advised the Panel that agreement had been reached between the parties on the facts, and submitted the Agreed Statement of Facts as evidence. The Panel accepted the Agreed Statement of Facts and decided that Ms. Tam had committed acts of professional misconduct in violation of the following sections of the Professional Misconduct Regulation, Ontario Regulation 95/07 under the Occupational Therapy Act (1991), S.O. 1991, c. 33:

• Paragraph 1: Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession.
• Paragraph 18: Practising the profession while the member is in a conflict of interest.
• Paragraph 19: Submitting an account or charge for services that that the member knows is false or misleading.
• Paragraph 27: Failing to keep records in accordance with the standard of the profession.
• Paragraph 36: Contravening, by act or omission, a term, condition or limitation on the member’s Certificate of Registration.
• Paragraph 48: Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.
• Paragraph 49: Engaging in conduct that would reasonably be regarded by members as conduct unbecoming an occupational therapist.

Having been found guilty of professional misconduct by the Discipline Committee in 2007, Ms. Tam was subject to terms, conditions and limitations on her Certificate of Registration which required her to practise occupational therapy under supervision for three years. In December 2012, Ms. Tam was found by the Discipline Panel to have breached those terms, conditions and limitations on her Certificate of Registration, she practised occupational therapy outside of business hours without supervision, including on evenings and weekends, she used her personal email account for her work, and she solicited her employer’s clients following the termination of her employment contract with her employer, in breach of that contract. In addition, she failed to disclose to another employer that she had conditions on her Certificate of Registration, in violation of that employer’s code of conduct.

Ms. Tam failed to meet the standards of practice in that she did not communicate effectively with clients and staff. She issued false statements to her supervisor by stating that she was at a facility when in fact she was on vacation. She submitted invoices and accounts to her employer for assessments and visits conducted on dates that were different from the dates and times of the actual
assessments and visits. She failed to substantiate in her records the need for occupational therapy for her clients. Lastly, she failed to return to her employer at least one client file within two weeks after the clients were discharged, as required by the employer.

**PENALTY**

The Panel of the Discipline Committee agreed that the penalty jointly proposed by counsel for the College and counsel for the Member, as set out in the Joint Submission on Penalty, was reasonable.

The Discipline Panel considered Ms. Tam’s conduct to be of a very serious nature, and stated that the penalty in this case needed to reflect the seriousness of that conduct. The Discipline Panel took into consideration that this was Ms. Tam’s second offence and that it occurred while terms, limitations and conditions on her Certificate of Registration were still in effect, as a consequence of the first finding of professional misconduct by the Discipline Committee. Since Ms. Tam’s conduct in this offence was similar to her first offence, the Panel considered Ms. Tam to be ungovernable. Although there were mitigating factors in the case, the Discipline Panel determined that the only reasonable decision by way of penalty was to revoke Ms. Tam’s Certificate of Registration. The Panel also determined that this was an appropriate case in which to order costs in the amount of $3,500 payable to the College by Ms. Tam.

The following is the text of the Joint Submission on Penalty which was accepted by the Panel:

1. The Discipline Panel directs the Registrar to revoke Ms. Tam’s Certificate of Registration effective December 3, 2012; and
2. The Discipline Panel orders Ms. Tam to pay the College’s costs in the amount of $3,500.00 payable within 30 days of the date of the Discipline Panel’s order.

**COLLEGE OF OCCUPATIONAL THERAPISTS OF ONTARIO AND HINA ARORA**

On February 3, 2013, the Discipline Committee held a hearing into allegations against Ms. Hina Arora. The following summarizes the decision of the Discipline Committee.

**BACKGROUND**

In August 2012, Ms. Arora was referred to the Discipline Committee for allegations that she submitted to employers and/or others a copy of her curriculum vitae that implied that she was registered as an occupational therapist in Ontario in 2005 when that was not the case.

**THE MEMBER’S PLEA**

College counsel submitted to the Discipline Panel a Plea Inquiry Questionnaire signed by Ms. Arora by which Ms. Arora admitted the allegations against her and confirmed that she made voluntary, informed and unequivocal admissions of professional misconduct.

**PROFESSIONAL MISCONDUCT**

Counsel for the College advised the Panel that agreement had been reached between the parties on the facts, and submitted the *Agreed Statement of Facts* as evidence. On February 13, 2013, Ms. Arora was found by the Discipline Committee, based on an *Agreed Statement of Facts*, to have committed an act of professional misconduct, in that she engaged in conduct that would reasonably be regarded by members as conduct unbecoming an occupational therapist as per paragraph 49 of the *Professional Misconduct Regulation*, O.Reg. 95/07 under the *Occupational Therapy Act* (1991). The Panel found that Ms. Arora had submitted a curriculum vitae that implied she was a registered
occupational therapist in 2005. Her use of the title Occupational Therapist, when she was not a Registrant of the College of Occupational Therapists of Ontario, constituted an act of professional misconduct. Ms. Arora misrepresented her professional title and qualifications on her curriculum vitae by circulating a document which contained false and misleading information about her qualifications and registration status.

PENALTY
The Panel of the Discipline Committee agreed that the penalty jointly proposed by counsel for the College and counsel for the Member, as set out in the Joint Submission on Penalty, was fair and reasonable. It was within the appropriate range of penalties for professional misconduct of this type, and serves to protect the public and upholds the standards and regulations of the profession of occupational therapy. The Panel considered Ms. Arora’s cooperation in the process, including her admission of professional misconduct as an indicator of her remorse.

The Panel of the Discipline Committee ordered a one-week suspension of Ms. Arora’s certificate of registration, required Ms. Arora to appear before it to be reprimanded, and ordered Ms. Arora to pay a fine of $250.00 to the Minister of Finance within 60 days of the date of the Panel’s order. Ms. Arora was further ordered to pay the College costs in the amount of $1,000.00.

Both summaries of the Discipline Committee’s decisions are available on the College’s website. Copies of the decisions may be obtained by contacting the Manager, Investigations & Resolutions.

FITNESS TO PRACTISE COMMITTEE
There were no Fitness to Practise hearings held at the College during the 2012/2013 fiscal year.

EXECUTIVE COMMITTEE
The College’s Executive Committee has the role of:

Managing administrative matters with the powers of the Council which require attention between Council meetings, other than the power to make, amend or revoke bylaws and regulations.

The following are the accomplishments of the Executive Committee in the last fiscal year:
1. Appointed Chairs of the Statutory Committees;
2. Approved Statutory Committee composition;
3. Recommended that Council approve the 2012/2013 Budget;
4. Recommended to Council to approve the Audit of the Financial Statements;
5. Approved monthly financial reports and balance sheets between Council meetings;
6. Recommended that Council approve amendments to the Standards for Psychotherapy to include a 12th standard regarding the use of the title Psychotherapist;
7. Amended the governance policy GP-12, Conflict of Interest, to be consistent with language in the Bylaws, part 16;
8. Revised the Terms of Reference for the Executive Committee to clarify the schedule of meetings and to include reference to Section 74 of the Health Professions Procedural Code regarding orders with respect to a revoked or suspended Certificate of Registration;
9. Recommended Draft Terms of Reference for the Elections Committee, to be approved by Council;

10. Approved the revised Practice Guideline: Working Within a Climate of Managed Resources;

11. Approved the revised Practice Guideline: Use of Surveillance Material in Assessments;

12. Approved the Revisions to the Guide to the Child and Family Services Act;

13. Approved the Guide to the Review of Financial Information, as a Council resource;

14. Recommended that Council approve the amendments to the definition of the Hearings Reserve Fund to include all hearings in that the College may become involved;

15. Recommended to Council the approve the Key Messages for the Practice Guideline: Social Media;

16. Amended the role description for the Registrar;

17. Approved the development of a Guide to Discontinuation of Services, by the Practice Issues Subcommittee; and

18. Appointed an Interim Registrar due to the illness and leave of absence of the Registrar.
FINANCIAL STATEMENTS 2013
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, 2013, 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, 2013. We expressed an unmodified audit opinion on those financial statements in our report dated August 7, 2013.

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.

A surplus has been realized this year it will be used to build the reserves funds that have been identified in policy including the Fee Stabilization Reserve Fund.

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

FINANCIAL SUMMARY 2012/13

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 it will be used to build the reserves funds that have been identified in policy including the Fee Stabilization Reserve Fund.

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

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, 2013, 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, 2013. We expressed an unmodified audit opinion on those financial statements in our report dated August 7, 2013.

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, 2013 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not-for-profit organizations.
SUMMARIZED STATEMENT OF FINANCIAL POSITION
AS AT MAY 31, 2013

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and marketable securities</td>
<td>$ 5,407,156</td>
<td>$ 4,767,671</td>
</tr>
<tr>
<td>Accounts receivable and prepaid expenses</td>
<td>5,492</td>
<td>2,922</td>
</tr>
<tr>
<td></td>
<td>5,412,648</td>
<td>4,770,593</td>
</tr>
<tr>
<td>Property and equipment</td>
<td>58,612</td>
<td>74,048</td>
</tr>
<tr>
<td></td>
<td>$ 5,471,260</td>
<td>$ 4,844,641</td>
</tr>
<tr>
<td><strong>LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>$ 427,103</td>
<td>$ 339,659</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>2,888,182</td>
<td>2,466,186</td>
</tr>
<tr>
<td>Deferred lease inducement</td>
<td>3,944</td>
<td>15,791</td>
</tr>
<tr>
<td></td>
<td>3,319,229</td>
<td>2,821,636</td>
</tr>
<tr>
<td><strong>NET ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating fund</td>
<td>718,364</td>
<td>747,748</td>
</tr>
<tr>
<td>Invested in property and equipment</td>
<td>54,667</td>
<td>58,257</td>
</tr>
<tr>
<td>Hearings reserve fund</td>
<td>350,000</td>
<td>200,000</td>
</tr>
<tr>
<td>Premises reserve fund</td>
<td>117,000</td>
<td>117,000</td>
</tr>
<tr>
<td>Sexual abuse therapy and counselling reserve fund</td>
<td>15,000</td>
<td>15,000</td>
</tr>
<tr>
<td>Contingency reserve fund</td>
<td>737,000</td>
<td>725,000</td>
</tr>
<tr>
<td>Fee stabilization reserve fund</td>
<td>160,000</td>
<td>160,000</td>
</tr>
<tr>
<td></td>
<td>2,152,031</td>
<td>2,023,005</td>
</tr>
<tr>
<td><strong>SUMMARIZED STATEMENT OF OPERATIONS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>YEAR ENDED MAY 31, 2013</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registration and application fees</td>
<td>$ 3,431,290</td>
<td>$ 3,360,688</td>
</tr>
<tr>
<td>Investment and other income</td>
<td>94,749</td>
<td>111,082</td>
</tr>
<tr>
<td></td>
<td>3,526,039</td>
<td>3,471,770</td>
</tr>
<tr>
<td>Expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries, benefits and professional development</td>
<td>1,554,808</td>
<td>1,512,364</td>
</tr>
<tr>
<td>Programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality assurance</td>
<td>266,753</td>
<td>255,941</td>
</tr>
<tr>
<td>Investigations and resolutions</td>
<td>177,067</td>
<td>70,400</td>
</tr>
<tr>
<td>Registration</td>
<td>12,525</td>
<td>47,241</td>
</tr>
<tr>
<td>Practice</td>
<td>453</td>
<td>3,600</td>
</tr>
<tr>
<td>Communications</td>
<td>210,349</td>
<td>181,641</td>
</tr>
<tr>
<td>Council</td>
<td>153,211</td>
<td>161,618</td>
</tr>
<tr>
<td>Occupancy costs</td>
<td>259,259</td>
<td>272,016</td>
</tr>
<tr>
<td>Depreciation</td>
<td>61,447</td>
<td>51,331</td>
</tr>
<tr>
<td>All other operating expenses</td>
<td>701,141</td>
<td>677,122</td>
</tr>
<tr>
<td></td>
<td>3,397,013</td>
<td>3,233,274</td>
</tr>
<tr>
<td>Excess of revenues over expenses for the year</td>
<td>$ 129,026</td>
<td>$ 238,496</td>
</tr>
</tbody>
</table>
The College depends on dozens of volunteers every year to achieve its mission and reach its goals. Whether you pilot-tested a PREP Module, lent your expertise as a non-Council member, or committed your time and talents as a member of Council, the College extends its sincerest gratitude to you.

COLLEGE COUNCIL

Back Row, Left to Right:  
UPALI OBEYESEKERE  
Public Member  
KARA RONALD  
District 1  
MARIE EASON KLATT  
District 1  
ERNIE LAUZON  
Public Member  
TERRY KRUPA  
Academic member  
FRANK CARDILE  
Public Member

Front row, left to right:  
ANNE VANDERWEIL  
District 2  
JANE COX  
District 3  
LEYA DYK  
District 2  
NICOLE THOMSON  
District 1  
SHANNON GOUCHIE  
District 5

Absent:  
JULIE COLBOURN  
District 6  
RACHEL GERVAIS  
District 4  
KATHY KASTNER  
Public Member  
MARIA LEE  
Public Member  
ANGELA MANDICH  
Academic Member  
SHARON KULAR  
Public Member

Term ending March 2013:  
KAREN TAIPALE  
District 1  
JACKLYN PEARCE  
District 1

NON-COUNCIL COMMITTEE MEMBERS

JOANNE ANDREWS  
Practice Issues  
Subcommittee

PAOLA AZZUOLO  
Practice Issues  
Subcommittee

ANURADHA BANAVALKAR  
Practice Issues  
Subcommittee

KATHRYN BERARDI  
Practice Issues  
Subcommittee

SYLVIA BODDENER,  
Practice Issues  
Subcommittee

MICHAEL CHAN  
Quality Assurance  
Subcommittee

MEGAN EDGELOW  
Practice Issues  
Subcommittee

GORD HIRANO  
Patient Relations

BIRAJ KHOSLA  
Patient Relations

NIKI KIEPEK  
Quality Assurance  
Subcommittee

WARREN KIRLEY  
Quality Assurance  
Subcommittee

SONYA KOCHANSKI  
Fitness to Practise

KELLY LOWTHER  
Quality Assurance  
Subcommittee

JAMES MACDONALD  
Quality Assurance  
Subcommittee

LAURIE MACDONALD  
Quality Assurance

IONA MAIRI MACRITCHIE  
Quality Assurance  
Subcommittee

KATRINE MARIE-LISA SAUVE  
Quality Assurance  
Subcommittee

AMANDA MOWBRAY  
Quality Assurance  
Subcommittee

KATHLEEN MURPHY  
Discipline

JOANNE O’KEEFE  
Quality Assurance

KARA RONALD  
Registration

KRISTINE ROTH  
Fitness to Practise

MATHEW ROSE  
Inquiries, Complaints, Reports

MARIE-CLAUDE ROULEAU  
Editorial Board

VIJAY SACHDEVA  
Quality Assurance

MARTHA WILKE  
Inquiries, Complaints, Reports

SHELLEY WILLIAMS  
Discipline

DAVID WYSOCKI  
Registration
COLLEGE STAFF

Back Row, Left to Right:

SERENA SHAHSTRIST-ESTRADA,
Practice Resource Liaison

JEWELLE SMITH-JOHNSON
Director of Operations and Communications

LISA ANNE LABILLOIS
Finance and Operations Associate

CATHY SANNUTO
Executive Assistant, Executive Office

TIMOTHY MBUGUA
Policy Analyst

WENDY JOSEPH
Executive Assistant, Deputy Registrar

JEFF PAYETTE
Communications Coordinator

MARNIE LOFSKY
Manager, Quality Programs

KAREN GIANNELIS
Quality Programs Associate

BRANDI PARK
Manager, Registration

ANITA JACOBSON,
Practice Resource Liaison

ELINOR LARNEY
Interim Registrar

ALISON REYNOLDS
Registrant Services Associate

SUE PRICE
Registrant Services Associate

Front Row, Left to Right:

BRANDI PARK
Manager, Registration

ANITA JACOBSON,
Practice Resource Liaison

ELINOR LARNEY
Interim Registrar

ALISON REYNOLDS
Registrant Services Associate

SUE PRICE
Registrant Services Associate

Absent:

GILLIAN SLAUGHTER
Manager, Investigations & Resolutions

BARBARA WORTH
Registrar (on leave)

BETH LAUGHLIN
Investigations & Resolutions Associate

AFFILIATES

AJAZ SADIQ
Accountant

BENARD + ASSOCIATES
Investigator

BRUCE ZINGER
Photographer (staff & Council)

CAROLINE WERLE
RIM Services Inc.

CIDO RESEARCH LTD.

CLARKE HENNING & CO.
Auditors

COURT REPORTERS
Toronto Court Reporter Ltd.

CRESCENT GROUP LTD.
Graphic Design

DEBORAH HANNAH
TSL Solutions

GABRIELLE WRIGHT
Investigator

IAN EVANS
CHRISt BOx
Etech

JAMA CONSULTING & INVESTIGATION SERVICES
Investigator

KEITH STOUTE
Visual Antidote

KRISTINA MULAK
Investigator

LEANNE WORSFOLD
iComp Consulting

MARIlyn BARTLETT
Investigator

MEDIATOR
Roger Beaudry
Aptus Conflict Solutions

PULSAR PRINTING

SUSAN PEDWELL
Editor

LEGAL COUNSEL

BRIAN GOVER
Stockwoods LLP Barristers

ALAN BROMSTEIN
Barrister and Solicitor

RICHARD STEINECKE & JULIE MACIURA
Barristers and Solicitors Steinecke Maciura LeBlanc

CONSULTANTS

CAROLYN EVESON
The Everson Company Inc.

MARTHA LYNCH
MML Communications

KEVIN REEL
Ethicist

PAULETTE BLAIS
Blais Consulting

BOBBIE CAREFOOT
VVC Consulting

PEER ASSESSORS

MARGO CARKNER

MICHAEL O’DRISCOLL

ERIKA POND-CLEMENTS

NELLY SCHUURMAN