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.
President’s Message

The College of Occupational Therapists of Ontario is responsible for protecting the public within our province. This is the foundational reason our College exists, our unwavering priority, and the philosophy behind decisions made by Council.

We achieve this priority by supporting occupational therapists (OTs) and making sure they practice safely, ethically and effectively. ‘How’ we do this, with the accelerated pace of change in the health care system, is the continually moving and progressing area of our work. Even in my two years as President, I have seen and been honoured to be a part of many changes and developments at the College.

Increased transparency has proven to be a driving force of recent change. This year, Council thoughtfully approved bylaw changes that require more registrant information to be available on the public register. This update is now an expectation of the public, the Ministry of Health and Long-Term Care, and the profession. It is also part of an important and positive effort that will help the public make informed decisions about their health care.

With increased transparency comes increased communication. This year we placed emphasis on evaluating and improving our communications tools and methods.

We continue to strive for effective, two-way communication, which is integral to creating meaningful engagement and relationships.
The large amount of feedback we received from our recent proposed bylaw consultations – 160 responses – is a testament to this open communication loop. I encourage you to continue sharing your thoughts and opinions with the College. I personally assure you, your feedback is taken seriously and helps to shape Council decision-making.

Council has made strides at a national level this year, supporting a cross-Canada assessment process for internationally educated OTs, with the Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO). We are proud to participate in the creation of country-wide standards and tools that will build greater confidence with the public.

Our strategic plan to structure the College for the future is gaining forward momentum. We will continue to monitor key issues and watch for opportunities to state our position.

On behalf of Council, I look forward to another successful year with many more progressive changes to come!

Jane Cox
President
Registrar’s Message

Change is good. After this year, I would argue change that fosters collaboration, innovation and enhanced relationships, is even better.

Helping patients and clients make safe, informed decisions about their care is at the heart of what we do. Being honest and open about our processes and decision-making helps people understand our work and our mandate of public protection and safety. Last year, direction from the Ministry of Health and Long-Term Care (MOHLTC) and College Council furthered that commitment. As you will read on the following pages, exploration and implementation of College-wide initiatives to improve transparency of information and to support MOHLTC efforts to enhance measures and protocols related to the prevention of sexual abuse were top priorities.

New projects and areas of focus continued to arise at the College and our commitment to relational regulation grew with new partnerships, conversations, and consultations.

Working together with other health regulatory Colleges, we launched an interprofessional record-keeping resource, worked on the controlled act of psychotherapy, and also explored clinic regulation. Cross-country collaboration with provincial OT regulators resulted in a new system to assess internationally educated OTs.
Woven throughout our new projects, initiatives and materials, was – and is - our emphasis on enhanced communications. You may have already noticed some differences. Everything from our voice to our online presence is being evaluated as we aim to most effectively support the College’s mission and mandate. Ultimately, our goal is to create and grow meaningful relationships with registrants and stakeholders.

Those relationships begin with you and we encourage you to be involved. This year, decisions were made to facilitate online Council elections. Voting will now be as simple as a click of a button! This is a much anticipated change and we hope to see increased participation from the profession.

I invite you to reflect on the highlights and projects captured in our Annual Report. Here you will find in-depth data on our operations, initiatives, and goals for the future, which aim to support our registrants in the delivery of safe, ethical care.

We look forward to another challenging and rewarding year ahead.

Elinor Larney
Registrar
Year in Review

The second year of the 2014-2017 strategic framework was one of reflection and growth for the College and the Council. Our framework recognizes the need for open communication and transparency in all that we do. Key components such as transparency, collaboration, and consultation were highlighted throughout the year as the College worked with the provincial government, registrants and stakeholders to further its public protection mandate.

Transparency and Accountability

In October 2014, the Honourable Dr. Eric Hoskins, Ontario Minister of Health and Long-Term Care wrote to all Colleges that regulate health care professionals in Ontario. In his letter, Minister Hoskins asked all Colleges to improve the transparency of information given to the public about how Colleges regulate the professions. At its October 2014 meeting, College Council considered and adopted eight principles of transparency that were developed by the Advisory Group on Regulatory Excellence.

In January 2015, proposed changes to the College bylaws, which would require more registrant information to be available on the public register were presented to Council. Those changes were based on the principles of transparency adopted by most Ontario regulatory health Colleges. Council approved circulation of the changes to registrants and stakeholders and the College subsequently received more than 160 responses to the consultation. Feedback was presented to Council, and bylaw changes to address the posting of additional information on the public register were approved. Further changes will be proposed in the coming year.

Zero Tolerance

The College has zero tolerance for the sexual abuse of patients by occupational therapists (OTs) and expressed its support for the Ministry’s establishment of the Task Force for the Prevention of Sexual Abuse and the Regulated Health Professions Act, 1991 (RHPA). In response to the Minister’s request to all health regulatory Colleges, information was provided about the programs, processes and resources we have in place to prevent the sexual abuse of patients and the processes to manage any complaints from patients related to sexual abuse. The College looks forward to further collaboration with the Task Force and to addressing any recommendations put forth in its report.
Collaboration

Significant strides were made to further the College commitment to relational regulation, regulatory leadership and practice support. Relationships supported collaboration through ongoing initiatives such as the exploration of clinic regulation and the development of interprofessional resources for use in multi-disciplinary settings.

Collaboration also strengthened existing relationships as the College played a lead role in the development of the new Substantial Equivalency Assessment System by the Association of Canadian Occupational Therapy Regulatory Organizations. Consistent assessment processes for internationally educated OTs and enhanced labour mobility between provinces are two of the expected outcomes of this pan-Canadian collaboration with OT regulators.

Policies were revised to improve efficiencies, standards were reviewed and revised to ensure content reflected the current practice environment, and the College’s Practice Resource Service addressed hundreds of inquiries from registrants, students, the public and other stakeholders.

College Council

Back row left to right: Jennifer Henderson, Winston Isaac, Angela Mandich, Marie Eason Kiatt, Sharon Kular, Julie Entwistle, Ernie Lauzon, Julie Chiba Branson, Debra Stewart, Paula Szeto, Abdul Wahid, Laurie Macdonald

Front row left to right: Carol Mieras, Jane Cox, Kurisummoottil S. Joseph, Shannon Gouchie, Maria Lee. The complete Council list is available on page 24.
Looking Forward

As we enter the next year, we anticipate further changes and an increased focus on the regulator’s role in ensuring safe, ethical care for Ontarians. Building greater transparency and public awareness of the work we do will inform many conversations and strategic decisions.

This College and five others (psychotherapists, psychologists, physicians, nurses, social workers and social service workers) will continue to work together to further define the controlled act of psychotherapy and ensure the meaning of psychotherapy activity or service is transparent to members of the Colleges and the public.

Numerous projects included in our strategic framework will be furthered. Among them, a look at the use of specialty titles and credentials. The College mandate to make decisions in the public interest demands we take a measured approach to this complex issue. We look forward to exploring next steps.

Progress and change will affect us all. We encourage you to stay involved with the College. Council meetings are open to the public, feedback is always welcome and the move to electronic elections will make it easier than ever to participate. We look forward to hearing from you and hope you will take the time to make your voice heard.
Statutory Committees

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:

- Reviewed 26 applications referred to the Committee by the Registrar.
- Processed 51 applications for re-entry to the profession where a refresher program was required.
- Completed the College’s seventh annual Fair Registration Practices Report to the Office of the Fairness Commissioner (OFC).
- Piloted the OFC’s online learning module on the fair access law and its practical applications.
- Approved, on behalf of the College, the Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO) as the provider of the Substantial Equivalency Assessment System (SEAS) for assessment of all internationally educated occupational therapists (IEOTs) applying to practice in Ontario from May 1, 2015 forward.
- Revised existing policies and created several new policies to reflect ACOTRO as the third party assessor of all applications from IEOTs, and the new assessment process.
### Total Number of Registrants

<table>
<thead>
<tr>
<th>Year</th>
<th>Registrants</th>
</tr>
</thead>
<tbody>
<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>
<tr>
<td>2011</td>
<td>4906</td>
</tr>
</tbody>
</table>

### Area of Practice by Percentage

- **Physical Health**: 50.0%
- **Mental Health**: 11.0%
- **Administration**: 7.5%
- **Other**: 31.5%

### Age of Registrants

- **30 and Under**: 954
- **31 - 40**: 1831
- **41 - 50**: 1499
- **51 - 60**: 878
- **Over 60**: 217

### Number of Registrants by Category

- **Direct Service Provider**: 4095
- **Managers**: 219
- **Consultant**: 181
- **Professional Leaders**: 120
- **Educators**: 102
- **Administrator**: 88
- **Owner/Operator**: 62
- **Research**: 61
- **Quality Management Specialist**: 17
- **Salesperson (equipment)**: 3
- **Other Positions (not labelled)**: 219
- **Not Stated**: 212
- **Total**: 5379

### Nature of Practice

- **Clinical**: 4083
- **Mixed**: 682
- **Non-Clinical**: 422
- **No Response**: 192
- **Not Applicable**: 0
- **Total**: 5379

### Regressent Education

#### New Registrants

- **Educated in Ontario**: 381
- **Educated Outside of Ontario within Canada**: 52
- **Internationally Educated**: 46
- **Total**: 479

#### New Registrants Who Graduated in 2014/2015

- **Educated in Ontario**: 198
- **Educated Outside of Ontario within Canada**: 22
- **Internationally Educated**: 5
- **Total**: 225

### Location of Education

- **Ontario**: 4346
- **Outside of Ontario within Canada**: 506
- **United States**: 168
- **United Kingdom**: 91
- **India**: 84
- **Philippines**: 40
- **Hong Kong**: 29
- **South Africa**: 17
- **Ireland**: 5
- **Israel**: 9
- **Other International Location**: 84
- **Total**: 5379
Patient Relations Committee
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

This year, the Committee published the Fundamentals of Occupational Therapy Ethics: A Workbook for OTs Registered in Ontario (2015), which supports education and remediation activities. Numerous materials were also reviewed and revised including the Standards for Professional Boundaries, the Sexual Abuse Counselling Fund Policy, and public education materials regarding sexual abuse prevention.

To date, there have been no findings of fault related to sexual abuse of a client by an OT in Ontario.

Quality Assurance Committee
The Quality Assurance (QA) Committee develops and maintains programs and policies to promote continuing competence among registrants. The program is intended to be educational in nature.

This year, the QA Committee:

- Developed the Prescribed Regulatory Education Program (PREP) Module: Communication.
- Administered the Competency Review and Evaluation to more than 750 registrants.
- Engaged 53 registrants in Competency Review and Evaluation: Step 2 Peer and Practice Assessment.
- Reviewed and updated policies and procedures for the QA program and Committee.
- Established a decision-making framework for the Committee.
Competency Review and Evaluation: Step 1
Portfolio Review and Multi-Source Feedback

<table>
<thead>
<tr>
<th>PARTICIPANTS (June 1, 2014 - May 31, 2015)</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Randomly selected</td>
<td>695</td>
</tr>
<tr>
<td>Previously deferred</td>
<td>167</td>
</tr>
<tr>
<td>New deferral granted</td>
<td>109</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PARTICIPANT OUTCOME (June 1, 2014 - May 31, 2015)</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of registrants participating in Step 1</td>
<td>751</td>
</tr>
<tr>
<td>Number of registrants who successfully completed Step 1</td>
<td>*518</td>
</tr>
<tr>
<td>Number of registrants with incomplete portfolios</td>
<td>*266</td>
</tr>
<tr>
<td>Number of registrants whose multi-source feedback results fell below the threshold</td>
<td>**76</td>
</tr>
</tbody>
</table>

*N*ote: Some results were sent to registrants who participated in 2013-2014 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 and Practice Assessment

<table>
<thead>
<tr>
<th>PARTICIPANTS (June 1, 2014 - May 31, 2015)</th>
<th>Number of Registrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identified to complete Step 2</td>
<td>*78</td>
</tr>
<tr>
<td>Deferrals granted</td>
<td>2</td>
</tr>
<tr>
<td>Peer assessments conducted</td>
<td>**53</td>
</tr>
</tbody>
</table>

*The number is based on the total number of registrants required to participate in Step 2 during the 2014/15 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. In total, the OT nature of practice was divided into forty-one clinical, nine mixed and three non-clinical.
Competency Review and Evaluation: Step 2 Participants by Practice Area

PARTICIPANTS (June 1, 2014 - May 31, 2015)

<table>
<thead>
<tr>
<th>Practice Area</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Hospital</td>
<td>10</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>6</td>
</tr>
<tr>
<td>Mental Health</td>
<td>4</td>
</tr>
<tr>
<td>Community</td>
<td>6</td>
</tr>
<tr>
<td>Insurance/Self-employed</td>
<td>10</td>
</tr>
<tr>
<td>Mixed</td>
<td>9</td>
</tr>
<tr>
<td>Non-clinical</td>
<td>3</td>
</tr>
<tr>
<td>Paediatrics</td>
<td>5</td>
</tr>
</tbody>
</table>

PARTICIPANT OUTCOME

<table>
<thead>
<tr>
<th>Case Decision Type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Take no action</td>
<td>52</td>
</tr>
<tr>
<td>Directed remediation</td>
<td>10</td>
</tr>
<tr>
<td>Request for deferral</td>
<td>9</td>
</tr>
<tr>
<td>Inquiries, Complaints and Reports Committee history review</td>
<td>2</td>
</tr>
</tbody>
</table>

Total Case Decisions Issued by QA Committee Following Step 2: 73
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 2014/2015, the College received 21 new complaints (five less than the 26 complaints received in the previous fiscal year). The ICRC reviewed 10 complaints that were carried over from previous years. Of the 21 new complaints, one intake was not completed.

The ICRC issued decisions in 15 cases in 2014/2015, 10 fewer decisions than in the previous fiscal year. In nearly 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>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>No further action</td>
<td>7</td>
</tr>
<tr>
<td>Specified Continuing Education and Remediation Program (SCERP)</td>
<td>4</td>
</tr>
<tr>
<td>Withdrawn</td>
<td>3</td>
</tr>
<tr>
<td>Frivolous &amp; vexatious</td>
<td>1</td>
</tr>
<tr>
<td>Written caution</td>
<td>0</td>
</tr>
<tr>
<td>Verbal caution</td>
<td>0</td>
</tr>
<tr>
<td>Referred to discipline</td>
<td>0</td>
</tr>
</tbody>
</table>

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

The Health Professions Appeal and Review Board (HPARB) reviews the decisions made by the Inquiries, Complaints and Reports Committee.

Two complaints received by the College in 2012/2013 and three complaints received by the College in 2013/2014 were appealed to HPARB. As of May 31, 2015, HPARB had conducted one review. For all five cases, the outcome is pending.

HPARB issued decisions for four cases in 2014/2015 and in each case upheld the decision of the ICRC.
Mandatory Reports/Registrar’s Inquiries

The College received 12 new mandatory reports and three new Registrar’s Inquiry matters in the 2014/2015 fiscal year for consideration by the ICRC. Five mandatory reports and one Registrar’s Inquiry case were carried over from the prior fiscal years.

The ICRC made nine decisions for mandatory reports and three decisions for Registrar’s Inquiry matters in 2014/2015. The majority of the ICRC’s decisions were to take no further action or to issue a Specified Continuing Education and Remediation Program (SCERP). Decisions related to mandatory reports and Registrar’s Inquiries in the 2014/2015 fiscal year are detailed in the table below.

<table>
<thead>
<tr>
<th>Resolved Cases</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>No further action</td>
<td>4</td>
</tr>
<tr>
<td>Specified Continuing Education and Remediation Program (SCERP)</td>
<td>4</td>
</tr>
<tr>
<td>SCERP and verbal caution</td>
<td>3</td>
</tr>
<tr>
<td>Referral to discipline</td>
<td>1</td>
</tr>
<tr>
<td>Written caution</td>
<td>0</td>
</tr>
<tr>
<td>Verbal caution</td>
<td>0</td>
</tr>
</tbody>
</table>

In 2014/2015, the members of the ICRC also:

- Implemented decision-making by panel, instead of decision-making by the entire Committee, to enhance efficiency and effectiveness.
- Reviewed the College’s response to the Honourable Dr. Eric Hoskins, Ontario Minister of Health and Long-Term Care, regarding the Minister’s requests for increased transparency of College’s procedures and decision-making.
Discipline Committee

The Discipline Committee considers allegations of professional misconduct or incompetence that are referred for a hearing.

During the 2014/2015 fiscal year, one discipline hearing was held at the College.

Discipline Summary: Agnes Agnelli

On December 3, 2014, Ms. Agnes Agnelli pled guilty to allegations that she failed to comply with her Quality Assurance obligations and to respond appropriately to the College and within the timelines given to her. This conduct was also in breach of the Order of the Discipline Committee dated April 21, 2010.

The Discipline Committee found Ms. Agnelli guilty of professional misconduct, and ordered that:

1. She attend for an oral reprimand before the panel;
2. Her certificate of registration be suspended for four months beginning on December 3, 2014, and be suspended until she complies with all of her outstanding Quality Assurance obligations;
3. Several terms, conditions or limitations be imposed on Ms. Agnelli’s certificate of registration:
   a. She must submit a reflective paper acceptable to the Registrar within 60 days of the hearing;
   b. She may not supervise occupational therapy students, provisional practising certificate holders or temporary certificate holders until December 3, 2017; and
   c. She must respond appropriately and in a timely fashion to all correspondence from the College until December 3, 2017.

The Discipline Committee ordered Ms. Agnelli to pay to the College costs in the amount of $6,795.
**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 2014/2015 fiscal year.

**Executive Committee**

The Executive Committee has all of the powers of Council between Council meetings with respect to any matter that requires immediate attention. Executive Committee cannot make, amend, or revoke a regulation or bylaw.

Last year, the Committee:

- Appointed Chairs of the Statutory Committees.
- Approved Statutory Committee composition.
- Recommended that Council approve the 2014/15 budget.
- Approved the audited financial statements.
- Recommended to Council to reappoint the auditor.
- Approved monthly financial reports and balance sheets between Council meetings.
- Recommended draft terms of reference and bylaws for the Inquiries, Complaints & Reports Committee to allow the appointment of two additional non-Council members to the Committee.
- Approved the development of a College document for Occupational Therapy Practice in the Auto Sector.
- Recommended to Council to approve the proposed Policy on Approval of Supervisors and Other Agents of the College.
- Recommended to Council to approve the Transparency Principles for adoption by the College.
- Recommended to Council to retire the Position Statement on Dual Practice.
- Recommended to Council to amend, for clarity, the governance policy GP-17 related to the term of office of a member elected to Council.
• Recommended to Council to express commitment and support for the Substantial Equivalency Evaluation System, as developed by the Association of Canadian Occupational Therapy Regulatory Organizations.

• Recommended to Council to approve the development of bylaw changes to address increased transparency of information related to posting on the public register:
  1) Registration history with other regulators
  2) Bail conditions of registrants
  3) Criminal findings of guilt

• Recommended to Council to approve that names of individuals who have been identified as non-registrants of the College and practicing illegally, be posted on the website.

• Recommended to Council to approve the revised Standards for Infection Prevention and Control, for consultation with stakeholders.

• Recommended to Council to approve the amendments to the Ends Policies and Ends Priorities to enhance the strategic direction of the College related to transparency.

• Recommended to Council to approve the proposed amendments to the bylaws related to elections to facilitate the move to electronic elections.
Financial Summary 2014/15

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. The cost 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 reserve funds that have been identified in policy including the Fee Stabilization Reserve Fund.

The following information is provided to add clarity to the Summary 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, 2015, 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, 2015. We expressed an unmodified audit opinion on those financial statements in our report dated August 11, 2015.

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, 2015 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not for profit organizations.

Toronto, Ontario
August 11, 2015

Clarke Henning LLP
Chartered Accountants
Licensed Public Accountants
Summary Statement of Financial Position  
As at May 31, 2015

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and marketable securities</td>
<td>$ 6,004,834</td>
<td>$ 5,765,895</td>
</tr>
<tr>
<td>Accounts receivable and prepaid expenses</td>
<td>45,972</td>
<td>17,882</td>
</tr>
<tr>
<td><strong>Total Current assets</strong></td>
<td>$ 6,050,806</td>
<td>$ 5,783,777</td>
</tr>
<tr>
<td>Property and equipment</td>
<td>62,470</td>
<td>59,420</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$ 6,113,276</td>
<td>$ 5,843,197</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>470,289</td>
<td>456,155</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>2,699,218</td>
<td>2,875,787</td>
</tr>
<tr>
<td><strong>Total Current liabilities</strong></td>
<td>3,169,507</td>
<td>3,331,942</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating fund</td>
<td>1,140,299</td>
<td>986,330</td>
</tr>
<tr>
<td>Invested in property and equipment</td>
<td>62,470</td>
<td>59,420</td>
</tr>
<tr>
<td>Hearings reserve fund</td>
<td>350,000</td>
<td>350,000</td>
</tr>
<tr>
<td>Premises reserve fund</td>
<td>200,000</td>
<td>140,000</td>
</tr>
<tr>
<td>Sexual abuse therapy and counselling reserve fund</td>
<td>18,000</td>
<td>15,000</td>
</tr>
<tr>
<td>Contingency reserve fund</td>
<td>1,000,000</td>
<td>800,505</td>
</tr>
<tr>
<td>Fee stabilization reserve fund</td>
<td>173,000</td>
<td>160,000</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td>2,943,769</td>
<td>2,511,255</td>
</tr>
<tr>
<td></td>
<td>$ 6,113,276</td>
<td>$ 5,843,197</td>
</tr>
</tbody>
</table>
## Summary Statement of Operations

**Year Ended May 31, 2015**

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registration and application fees</td>
<td>$3,703,229</td>
<td>$3,579,275</td>
</tr>
<tr>
<td>Investment and other income</td>
<td>122,743</td>
<td>93,372</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>$3,825,972</td>
<td>$3,672,647</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries, benefits and professional development</td>
<td>1,633,573</td>
<td>1,487,222</td>
</tr>
<tr>
<td>Programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality assurance</td>
<td>189,548</td>
<td>210,353</td>
</tr>
<tr>
<td>Investigations and resolutions</td>
<td>162,978</td>
<td>161,371</td>
</tr>
<tr>
<td>Registration</td>
<td>19,067</td>
<td>41,443</td>
</tr>
<tr>
<td>Communications</td>
<td>166,785</td>
<td>198,108</td>
</tr>
<tr>
<td>Council</td>
<td>169,141</td>
<td>150,544</td>
</tr>
<tr>
<td>Occupancy costs</td>
<td>264,112</td>
<td>266,908</td>
</tr>
<tr>
<td>Depreciation</td>
<td>40,691</td>
<td>40,675</td>
</tr>
<tr>
<td>All other operating expenses</td>
<td>747,563</td>
<td>756,799</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$3,393,458</td>
<td>$3,313,423</td>
</tr>
<tr>
<td><strong>Excess of revenues over expenses for the year</strong></td>
<td>$432,514</td>
<td>$359,224</td>
</tr>
</tbody>
</table>
College Council

Frank Cardile, Public Member (Resigned October 2014)
Julie Chiba Branson, Professional Member, District 1 - Central East
Julie Colbourn, Professional Member, District 6 - North West (Term ended March 2015)
Jane Cox, President, Professional Member, District 3 - South West
Julie Entwistle, Professional Member, District 2 - Central West
Shannon Gouchie, Vice President, Professional Member, District 5 - North East
Jennifer Henderson, Professional Member, District 2 - Central West
Winston Isaac, Public Member
Kurisummoottil S. Joseph, Public Member
Kathy Kastner, Public Member (Term ended March 2015)
Marie Eason Klatt, Professional Member, District 1 - Central East
Terry Krupa, Academic Member (Term ended March 2015)
Sharon Kular, Public Member
Ernie Lauzon, Public Member
Maria Lee, Member at Large, Education, Public Member
Laurie Macdonald, Professional Member, District 6 - North West
Angela Mandich, Academic Member
Carol Mieras, Professional Member, District 4 - Eastern
Upali Obeyesekere, Public Member (Term ended March 2015)
Jeannine Girard-Pearlman, Member at Large, Finance, Public Member
Kara Ronald, Professional Member, District 1 - Central East (Resigned July 2014)
Debra Stewart, Academic Member
Paula Szeto, Professional Member, District 1 - Central East
Nicole Thomson, Professional Member, District 1 - Central East (Resigned July 2014)
Abdul Wahid, Public Member

Non-Council Committee Members

Paola Azzuolo, Practice Issues Subcommittee
Leanne Baker, Inquiries, Complaints, Reports (Term began October 2014)
Anuradha Banavali, Practice Issues Subcommittee
Kathryn Berardi, Practice Issues Subcommittee
Sylvia Boddener, Practice Issues Subcommittee
Anne Cooper-Worsnop, Quality Assurance Subcommittee (Term began June 2014)
Megan Edgelow, Practice Issues Subcommittee
Gord Hirano, Patient Relations Committee
Shaheezaa Hirji, Inquiries, Complaints, Reports Committee (Term began October 2014)
Warren Kirley, Quality Assurance Subcommittee
Kelly Lowther, Quality Assurance Subcommittee
Laurie Macdonald, Quality Assurance Committee (Resigned March 2015)
Iona Mairi Macritchie, Quality Assurance Subcommittee
Non-Council Committee Members (Continued)

Avelino Maranan, Fitness to Practice Committee (Resigned June 2015),
Quality Assurance Committee (Term began June 2015)
Nancy McFadyen, Fitness to Practice Committee
Kathleen Murphy, Discipline Committee
Mathew Rose, Inquiries, Complaints, Reports Committee
Marie-Claude Rouleau, Editorial Board (Term ended August 2014)
Vijay Sachdeva, Quality Assurance Committee
Katrine Sauvé-Schenk, Quality Assurance Subcommittee
Michelle Stinson, Discipline Committee
Roxane Siddall, Quality Assurance Subcommittee (Term began June 2014)
Martha Wilke, Inquiries, Complaints, Reports Committee (Resigned June 2015)
Phyllis Wong, Inquiries, Complaints, Reports Committee (Term began June 2015)
David Wysocki, Registration Committee

College Staff

Laura Briard, Temporary Assistant, Investigations and Resolutions
Aida da Silva, Finance and Corporate Services Associate
Karen Giallelis, Quality Program Associate
Lisa Anne LaBillois, Finance and Operations Associate
Elinor Larney, Registrar
Marnie Lofsky, Manager, Quality Programs
Tim Mbugua, Policy Analyst
Jennifer McDonald (on leave), Investigations and Resolutions Associate
Brandi Park, Manager, Registration
David Pham, Information and Resources Associate
Sue Price, Registrant Services Associate
Alison Reynolds, Registrant Services Associate
Kara Ronald, Deputy Registrar
Samantha Shantz, Communications Coordinator
Gill Slaughter, Manager, Investigations and Resolutions
Jewelle Smith-Johnson, Director of Finance and Corporate Services
Andjelina Stanier, Executive Assistant, Executive Office
Nancy Stevenson, Director of Strategic Communications and IT

Thank You

Much of the work of the College is possible because of the dedication of our registrants. Thank you to everyone who has shared their time, expertise and talent with the College.