



141st Board Meeting

Date: Friday, December 6th, 2024, 9:00 AM to 1:30 PM

YouTube Live Stream [Link](#)

<p>Board of Directors: Jamie Matera, RDT, Chair Abena Buahene, Public Shanice Fontaine, RDT Asif Khan, Public Melanie Liassides, RDT Tayla McGuckin, Public Nawaz Pirani, Public</p>	<p>Board of Directors (cont'd): Rehan Siddiqui, Public Bill Van Evans, RDT, Vice-Chair Clark Wilson, RDT Adela Witko, RDT Franz Yagin, RDT</p> <p>Guests: Kriens LaRose LLP</p>	<p>Staff: Judy Rigby, Registrar & CEO Paola Bona, Registration and QA Leanne Cheng, Governance and Regulatory Affairs Rose Far, Policy and Strategic Projects Safyia Mohammed, Administration Rihanna Omar, Human Rights Specialist Ashney Patrick, Communications</p>
--	---	--

Agenda	Speaker	Action	Est. Time
1. Call to Order	Chair	Information	1 min
2. Opening Remarks 2.1 Land Acknowledgement 2.2 Welcome New and Returning Directors 2.3 Recognition of Outgoing Director	Chair	Information	5 mins
3. Approval of Agenda	Chair	Motion	2 mins
4. Conflict of Interest Declaration 4.1 Conflict of Interest Summary	Chair	Information	2 mins
5. Consent Agenda 5.1 179 th Open Executive Meeting Minutes 5.1.1 Appendix 1 – Status Updates on Board Action Items 5.2. Executive Committee 5.3. Discipline Committee 5.4. Fitness to Practice Committee 5.5. ICRC Committee 5.6. Patient Relations Committee 5.7. Quality Assurance Committee 5.8. Registration Committee 5.9. Recruitment Committee 5.10. By-Laws and Policy Review Committee	Chair	Motion	5 mins

A consent agenda is a bundle of items that is voted on, without discussion, as a package. It differentiates between routine matters not needing explanation and more complex issues requiring further discussion. Any Director may request to the Chair that an item be removed for discussion. To test whether an item should be included in the consent agenda, ask:

- 1. Is this item self-explanatory and uncontroversial? Or does it contain an issue that warrants board discussion?**
- 2. Is this item for information only? Or is it needed for another meeting agenda issue?**



Agenda	Speaker	Action	Est. Time
6. Governance			
6.1. Board Workshop and Open Executive Meeting Evaluation – September 26 and 27	Chair	Discussion	10 mins
6.2. Terms of Reference – Executive Committee	Chair	Decision	10 mins
7. Board Education			
7.1. Discipline Training	N. Pirani	Education	10 mins
7.2. Canadian Network of Agencies of Regulation	Chair	Education	10 mins
7.3. Spectrum Day	P. Bona/R. Far	Education	10 mins
8. Regulatory Programs			
8.1. Practice Advisory	R. Far	Presentation	10 mins
8.2. GBC – FAQs	P. Bona	Information	10 mins
9. Finance and Audit			
9.1. Financial Monitoring Reports 2023-2024	Registrar	Information	15 mins
9.1.1. Operating Budget			
9.1.2. Strategic Initiatives Project Budget			
9.1.3. Investments			
9.1.4. Cash Flow			
9.2. Financial Audit 2023-2024	Kriens LaRose LLP	Decision	30 mins
9.2.1. Post-Audit Communication			
9.2.2. 2023-2024 Draft Audited Financial Statements			
9.3. Annual Auditor Assessment	Registrar	Decision	10 mins
9.4. Investment Policy	Registrar	Decision	20 mins
11:40 a.m. Energy Break – 15 minutes			
10. Strategic Plan 2024-2027			
10.1. Strategic Projects Dashboard	R. Far	Information	10 mins
10.2. PE – Barriers to Registration – PLAR	Registrar	Presentation	15 mins
10.3. E – Engagement and Collaboration	A. Patrick	Presentation	10 mins
10.4. RE – Equity, Diversity, Inclusion-Indigeneity	R. Omar	Presentation	15 mins
10.5. RE – Governance – Election of Officers	A. Buahene	Decision	15 mins
10.6. RE – Emerging Issues – EC Supervision Policy	M. Liassides	Decision	15 mins
11. Registrar's Update			
11.1. Registrar's Report	Registrar	Information	10 mins
11.2. CDTO Dashboard			
11.3. Communications Dashboard			
12. Closing Remarks			
Next Meeting Date: Jan. 31 st , 2025	Chair	Information	10 mins
13. In-Camera Session - Pursuant to Section 7(2)(b) of the HPPC			
None.	Chair	None	0 mins
14. Meeting Adjournment			
	Chair	Motion	1 min

CDTO Land Acknowledgement Statement

In this virtual space, we wish to acknowledge the land of the original people of Ontario.

For thousands of years the traditional land where the College is located has been the home of the Huron, Wyandot, the Seneca, Mississauga New Credit.

The College also acknowledges the over 40 Treaties and land agreements of Nations of Ontario including the Metis Nation.

We acknowledge the painful history of genocide and forced removal from this territory, and we honor and respect these nations as the traditional stewards of the land and water on which we share today. We honour the ancestors on those traditional lands we are on today.

The CDTO is committed towards Indigenous reconciliation and will actively support the health and wellness and inclusion of Indigenous People in all sectors of Ontario.

We stand in solidarity of murdered and missing indigenous women, girls, and two-spirited people.



Declaration of Conflict of Interest

All Board and Committee members have a duty to carry out their responsibilities in a manner that serves and protects the interest of the public. As such, they must not engage in any activities or in decision-making concerning any matters where they have a direct or indirect personal or financial interest. All Board and Committee members have a duty to uphold and further the intent of the act to regulate the practice and profession of dental technology in Ontario, and not to represent the views of advocacy or special interest groups.

It is a best practice as per the College Performance Measurement Framework that Board members complete a conflict of interest (COI) questionnaire annually and that the responses are included as an appendix to each board meeting package. These responses are reviewed at the beginning of the meeting along with any declarations of conflict for the meeting agenda.

All Directors have confirmed that they comply with the College's conflict of interest policy. Click [here](#) to review the signed COIs.

CDTO Directors:

1. Abena Buahene, Public
2. Shanice Fontaine, RDT
3. Asif Khan, Public
4. Melanie Liassides, RDT
5. James Matera, RDT,
6. Tayla McGuckin, Public
7. Nawaz Pirani, Public
8. Rehan Siddiqui, Public
9. William Van Evans, RDT
10. Clark Wilson, RDT
11. Adela Witko, RDT
12. Franz Yagin, RDT



179th Open Executive Meeting Minutes

Date: September 27, 2024, 9:00 AM – 2:56 PM (In-Person)

Executive Committee:

James Matera, RDT, Chair
Abena Buahene, Public
William (Bill) Van Evans, RDT
Adela Witko, RDT

Board of Directors:

Shanice Fontaine, RDT
Melanie Liassides, RDT
Tayla McGuckin, Public
Rehan Siddiqui, Public
Franz Yagin, RDT

Regrets:

Asif Khan, Public
Nawaz Pirani, Public

Staff:

Judith Rigby, Registrar & CEO
Paola Bona, Registration & Exams
Leanne Cheng, Governance and
Regulatory Affairs
Rose Far, Policy and Strategic
Projects
Rihanna Omar, Human Rights
Ashney Patrick, Communications
Safyia Mohammed, Registration
and Administration

1. Call to Order

The Chair, J. Matera, called the 179th Open Executive Committee meeting to order at 9:00 am after being informed by Staff that quorum was met.

2. Opening Remarks

The Chair welcomed Directors, members of the public, the profession, and other system partners and informed them that the Board is not currently constituted. There is a vacancy on the Board as Jill Langford has retired from the profession. Jill has been an elected member of the Board not only once but four times and has shared her knowledge and expertise on many statutory committees and served as Committee Chair. The Board thanks Jill for being an important part of the fabric of the College.

Open Executive Committee meetings are held in lieu of Board meetings when the Board is not constituted. Directors of the Board are present and provide their input for any decisions that can be made by the Executive Committee.

As the meeting is being held at George Brown College, M. Liassides delivered their land acknowledgement.

3. Approval of Agenda

MOTION: THAT the agenda be approved as presented.

MOVED BY: A. Buahene and seconded by W. Van Evans

CARRIED

4. Conflict of Interest Declaration

There were no changes to the annual conflict of interest forms or declarations for the items to be discussed at the meeting.

5. Consent Agenda

MOTION: THAT the consent agenda be approved as presented

MOVED BY: A. Buahene and seconded by W. Van Evans

CARRIED



6. Governance

6.1 Rise and Report – Board Workshop

The Chair reported on yesterday's Board workshop which included a tour of the dental technology laboratories and classes at George Brown College. Directors heard from the students about their journeys to entering the dental technology program and any challenges they might face upon graduation. Thirty-seven students signed up for CDTO's voluntary register to keep in touch and receive important updates. Bethanie Huen, Associate Dean, School of Dental Health, presented information about the Dental Technology program which led to an open discussion on admissions, attrition, capacity, the challenges the profession faces without a controlled act and how system partners can collaborate on initiatives that support aspiring RDTs and dental technology in the interest of the public.

The workshop also involved discussions about the risks the College may be facing, a review of the Investment Policy, and completing the Health Profession Regulators of Ontario's EDI Organizational Self-Assessment.

6.2 Board Meeting Evaluation – June 21, 2024

The June 21, 2024 meeting evaluation received a 100% response rate and all metrics were scored more than 4 out of 5. There was positive feedback about receiving the meeting package with sufficient time to prepare and the meeting being informative. There was constructive feedback about how discussions and decisions could be improved after reflecting on the RDT Stamp discussion.

7. Board Education – Dental Technology System Partners

K. Sahil, President of the Association of Dental Technologists of Ontario, presented on the system partnerships they maintain to support the industry of dental technology. He spoke about the awareness campaign that was jointly issued with CDTO for oral health month. Sahil also spoke about their yearly communication with third year students and a student register to connect them to industry events and professional development opportunities.

ADTO is engaged in a project to create a national association that is important for standardizing scope of practice and having a national voice, even to those provinces who do not have associations. There was discussion about communicating with students and incentivizing them to join ADTO's student register, providing free educational opportunities and other benefits. K. Sahil also provided an update on the dental technology national fee guide.

8. Regulatory Programs

8.1 Trademarking College Logo

J. Rigby shared a reminder that the Board made a decision to stop using the College's logo as an identifier. The College can trademark its current logo but will need to enter into license agreements with RDTs to use it on certain documents. This is a costly process that may not yield the benefits expected as dentists are not looking for the College logo and the College



would still need to pursue unauthorized practice processes (e.g., cease and desist letters, Superior Courts). There was agreement to reconsider the matter after a year of the new changes to the RDT Stamp.

8.2 QA – Professional Development

P. Bona outlined the requirements of the Quality Assurance Program which includes the requirement to submit a Summary Professional Development Profile (SPDP) every three years. QA is now enforcing late notice fees for SPDPs not received by the deadline of August 31st. After seven targeted notices about the August 31st deadline, 117 RDTs submitted out of 147. This is an improvement in compliance from 53% in past years to 80%. P. Bona clarified that the SPDP and annual renewal deadline are on the same date but two separate activities. CDTO has not assessed the correlation between late submission statistics for SPDPs and renewals. There was discussion on employers being notified about SPDP late submissions as there is no assurance that the registrant continues to practice competently.

Action Item: Staff to consult legal counsel about the authority to inform employers about upcoming and/or late submissions.

9. Finance and Audit

9.1. Pre-Audit Communication

R. Ferreira, senior manager at Kriens LaRose LLP presented their audit strategy and confirmed that they have no conflicts of interest. The audit is expected to start on October 7th and the draft financial statements delivered by October 31st. R. Ferreria explained materiality and why they are using half of what was used in the previous year. As they are newly appointed Auditors, lowering the materiality will increase scrutiny which is also important given the size of CDTO's budget and its main source of revenue being registrant fees.

9.2. Q3 Financial Monitoring

J. Rigby informed of a \$150K surplus expected for 2023-2024, a result of early termination of the physical office, capitalizing on human resource costs, and taking advantage of safe investment vehicles. Although the unauthorized practice budget has a surplus, it is not due to inaction but effectiveness of lower cost processes like cease-and-desist letters. In 2024-2025, there will be a separate Governance budget from Administration to clearly identify the costs of good governance and transparency.

9.3. Investment Policy and Portfolio Manager

At the previous day's workshop, W. Lai of Nesbitt Burns provided guidance on how it can expand its investments and identify its risk tolerance. The mandate of investments is not to generate the best return but to fund robust regulatory programs. An asset mix of up to 35% for moderate risk was discussed. These decisions will be made when the Board is constituted.

Action Item: The Investment Policy will be revised and brought forward to the Board for approval at the Board's next constituted meeting.



R. Siddiqui left the meeting at 1:30 pm.

10. Strategic Plan 2024-2027

10.1 Strategic Projects Dashboard

R. Far reviewed CDTO's Strategic Projects Dashboard which provides performance information against the Key Performance Indicators (KPIs) the Board agreed upon at its April workshop. KPIs reported include progress reports, engagement initiatives and identifying any risks to completing the projects. There was a question about how applicant satisfaction is benchmarked and suggestion that data collected is not just quantitative but also qualitative.

10.2 Regulatory Excellence – Equity, Diversity, Inclusion – Indigeneity

R. Omar, EDI Lead and Human Rights Specialist, provided an update to the College's progress on EDI initiatives over the last few months. These include developing the EDI webpage, Board and Staff education which will be expanded to registrants and completing HPRO's EDI Organizational Self-Assessment. Over the next twelve months, the College will be creating EDI learning modules and finalizing an EDI policy which covers many aspects including the importance of hiring practices, fostering culture that embraces EDI, and inclusive language.

10.3 Professional Excellence – Prior Learning Assessment Recognition

CDTO is collaborating with the Canadian Alliance Dental Technology Regulators to create a Prior Learning Assessment and Recognition pathway that will support internationally educated and trained dental technologists seeking licensure in Canada. It will recognize experience in lieu of formal education with a degree of reliability to allow an individual to challenge the examinations. K. Johnson, project manager shared that their project was approved for the longest term of 36 months as they want a meaningful pilot phase which would last 18 months. There was discussion about recognizing the outcomes of the pilot for candidates who submit to PLAR.

10.4 Engagement – Engagement and Collaboration

A. Patrick presented on her work to drive innovation, enhance learning experience and equip the College with AI capabilities to meet future challenges. She played the AI videos that were created to support registrants during annual renewal and with understanding the changes to the RDT Stamp. Future videos are planned for CDTO Elections, collaborations with CADTR and EDI initiatives. There was discussion about improving accessibility of the videos.

10.5 Professional Excellence – Standards and Ethics

D. Melhem and R. Kocsis of Pivotal Research presented the outcomes of Phase 2 of their project to reform CDTO's ethical principles and standards of practice. They conducted two focus groups with dental technologists and oral health professionals inside and outside of Ontario. A draft framework was developed that consists of three core components – ethical principles, professional standards and practice standards. They will be seeking feedback to



further refine the framework. There was discussion about a focus group or Committee reviewing the framework before circulation to registrants.

T. McGuckin left the meeting at 2:35 pm.

10.6 Regulatory Excellence – Committee Competency Framework

A. Buahene, Chair of the Recruitment Committee, presented on their work to develop a Committee Competency Framework which will be used to establish the Committee Slate. The Framework outlines the necessary competencies for each of CDTO's Committees and recognizes that each member may not have all the competencies, but the Committee as a whole will have them. The information to assess the competencies will be collected through a questionnaire and submission of a resume. The questionnaire will also collect voluntary diversity information to support diversity on the Committees.

MOTION: THAT the Executive Committee approves the Committee Competency Framework to be piloted for the 2025 Committee Slate.

MOVED BY: B. Van Evans and seconded by J. Matera

CARRIED

11. Registrar's Update

J. Rigby shared a reminder that the College's work extends beyond our province to a national level and that we must demonstrate leadership. The last two days have brought to light many benefits and tangible outcomes of system partner relationships. J. Rigby spoke about September 30th, the national day for Truth and Reconciliation and thanked attendees for wearing orange to the workshop in support of George Brown College's commitment.

11. Next Meeting Dates

The next Board meeting will be December 6th. Dates have been proposed for the 2025 Board meetings and the Board will be asked to provide feedback.

12. In-Camera Session: None.

13. Meeting Adjournment

MOTION: THAT the 179th Open Executive Committee Meeting be adjourned at 2:56pm.

MOVED BY: J. Matera and seconded by A. Buahene

CARRIED

Status Updates on Board Decisions

Board of Directors Meeting	Item	Action	Status
June 21, 2024	RDT Stamp	J. Rigby to seek a legal opinion on the College logo and trademark infringement.	Completed
September 27, 2024	QA – Professional Development	Staff to consult legal counsel about the authority to inform employers about upcoming and/or late submissions.	In progress
September 27, 2024	Investment Policy	The Investment Policy will be revised and brought forward to the Board for approval at the Board’s next constituted meeting.	In progress



EXECUTIVE COMMITTEE REPORT

December 6, 2024

Committee Members

James Matera, Professional Member, Chair
William (Bill) Van Evans, Professional Member, Vice-Chair
Abena Buahene, Public Member
Adela Witko, Professional Member

Committee Mandate

The Executive Committee supports the Board in advancing the College's strategic objectives. Between Board meetings, the Executive Committee may exercise all the powers and duties of the Board with respect to any matter that requires immediate attention, other than the power to make, amend or revoke a regulation or By-Law.

Meetings

Since the Report provided at the September 27, 2024 Board meeting, the Executive Committee met once virtually on November 19, 2024.

For Action

1. Terms of Reference

As per its annual responsibilities, the Committee reviewed its Terms of Reference and suggested three additions. These are responsibilities currently held by the Executive Committee but not reflected in its Terms of Reference:

- monitoring risks to the organization, the public and the profession, and provides recommendations to the Board for corrective action as necessary;
- monitoring the investment portfolio to ensure compliance with the policies set by the Board and making recommendations to the Board for investment advisors or consultants, and policy changes; and
- overseeing reports of possible fraudulent or dishonest use or misuse of College resources or property (Oversight of fraudulent activities policy approved by the Board on December 10, 2021).

Please see Agenda Item 6.2 – Terms of Reference – Executive Committee.

2. 2023-2024 Draft Audit Financial Statements

The Committee received a presentation from Kriens LaRose LLP, the Auditors for their post-audit communication and the draft Audit 2023-2024 Financial Statements. The Committee recommends to the Board the approval of the 2023-2024 Financial Statements of the College of Dental Technologists of Ontario and that Staff be authorized to issue the final audited Financial Statements upon receiving the

Independent Auditor's Report. Please see Agenda Item 9.2 Post-Audit Communication and 9.2.1 2023-2024 Draft audited Financial Statements.

3. Step 4 – Annual Auditor Assessment

The Annual Auditor Assessment consists of 4 components of which the Committee previously completed Step 1 – Scope and Timing. After the completion of the audit, the Committee reviewed Step 2 – Input from Staff and completed Step 3 – Executive Committee Evaluation. The Committee recommends to the Board that Step 4 – Annual Auditor Assessment be completed for 2024-2025 should Kriens LaRose continue as the College's auditor. Please see Agenda Item 9.3 – Step 4 – Annual Auditor Assessment.

4. Investment Policy

Substantive changes were made to CDTO's Investment Policy to reflect the discussions held at the September 26, 2024 Board workshop about risk tolerance and asset mix. The changes will also improve clarity regarding the roles and responsibilities in managing the investment portfolio. The Committee approved the proposed Investment Policy in principle and recommended it to the Board for approval. Please see Agenda Item 9.4 – Investment Policy.

For Information

1. Board Workshop

The Committee continued the discussion from their September 10, 2024 meeting and from the September 26, 2024 Board workshop about the risks the College is facing. The Committee suggested that the Board hold a workshop in the new year to further discuss the risks and plan the necessary actions to ensure sustainability of the College. This meeting is best held in person to ensure effective and engaged discussions.

2. Financial and Monitoring Reports

The Committee reviewed the 2023-2024 Operating, Strategic Initiatives and Investment Monitoring Reports. In doing so, it reviewed the financial health of the College, discussed long-term sustainability and considered the favourable and unfavourable variances. These reports are also presented to the Board for review under Agenda Item 9.1 Financial and Monitoring Reports.



DISCIPLINE COMMITTEE REPORT

December 6, 2024

Committee Members

Pursuant to the College By-Laws, every member of the Board is a member of the Discipline Committee.

Non-Board Committee Members

Manijeh Rezaeizadeh, Professional Member
Ovidiu Lauric, Professional Member

Committee Mandate

The Discipline Committee is responsible for determining whether registrants of the profession have committed professional misconduct and/or are incompetent. Matters are referred from the Inquiries, Complaints and Reports Committee to the Discipline Committee. The Discipline Committee conducts hearings, through panels selected by the Chair, in a fair and impartial manner. The panel provides reasonable and fair dispositions based exclusively on evidence admitted before it.

Meetings and Hearings

The Discipline Committee has not met since the last report to the Board on September 27, 2024.

For Action of the Board

There are currently no items for action.

For Information

Two cases have been referred to the Discipline Committee. The respondents have been served with a notice of hearing and it is also posted on the College website. The notices of hearing for the two referrals to discipline can be found here: <https://cdto.ca/protecting-the-public/discipline-decisions/>



FITNESS TO PRACTICE COMMITTEE REPORT

December 6, 2024

Committee Members

Every member of the Board is a member of the Fitness to Practice Committee.

Committee Mandate

The Fitness to Practice Committee hears allegations relating to registrants who may be incapacitated, by reason of physical or mental condition or disorder, and whose health condition or disorder may interfere with his or her ability to practice safely and in the interest of the public. A panel of the Fitness to Practice Committee adjudicates whether the registrant is, in fact, incapacitated and, if so, what terms, conditions or limitations are to be placed on their certificate of registration, including whether the registrant should be practicing at all.

Given the personal health information that is often at issue in such hearings, they are closed to the public.

Meetings and Hearings

The Fitness to Practice Committee has not met since the last report to the Board on September 27, 2024. To date, no hearings have been held by the Fitness to Practice Committee.

For Action of the Board

There are currently no items for action.

For Information

There are currently no items for information.



INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

December 6, 2024

Committee Members

James Matera, Professional Member (Chair)

Asif Khan, Public Member

Rehan Siddiqui, Public Member

Adela Witko, Professional Member

Manijeh Rezaeizadeh, Professional Member (non-Board Committee Member)

Committee Mandate

The Inquiries, Complaints and Reports Committee (ICRC) investigates formal complaints, Registrar's Reports, and referrals from the Quality Assurance Committee, for concerns regarding acts of professional misconduct, incompetence or incapacity. A panel of the ICRC makes decisions regarding matters before it that can include referring the matter to the Discipline Committee, requiring the registrant to appear before the panel to be cautioned, or to take no further action.

Meetings

The ICRC had a panel meeting on October 17, 2024.

For Action of the Board

There are currently no items for action.

For Information

1. Formal Complaints

During this reporting period, no new complaints were received, and no complaints were carried forward.

2. Registrar's Reports

During this reporting period, no new Registrar's Reports were initiated, and none were carried forward.

3. Quality Assurance Committee Referral

During this reporting period, there was no new referral from the Quality Assurance Committee to the ICRC, and one was carried forward.

4. Health Professions Appeal and Review Board

The complainant or the registrant who is the subject of the complaint may request the Health Professions Appeal and Review Board (HPARB) to review a decision of a panel of the ICRC (unless the decision was a referral of an allegation of professional misconduct to the Discipline Committee or incompetence to the ICRC for incapacity proceedings) within 30 days of receiving the decision. HPARB has no right to review decisions made on Registrar's Reports.

During the reporting period, no new panel decisions were appealed to HPARB. HPARB has not rendered any decisions during this reporting period.



PATIENT RELATIONS COMMITTEE REPORT

December 6, 2024

Committee Members:

Nawaz Pirani, Professional Member

Asif Khan, Public Member

Tayla McGuckin, Public Member

Franz Yagin Professional Member

Committee Mandate:

The Patient Relations Committee promotes and enhances relationships between the College, its members, other health colleges, system partners, and the public. The Committee is responsible for the Patient Relations program, which must include measures for preventing and addressing the sexual abuse of patients, as well as the responsibilities related to Equity, Diversity, Inclusion, and Indigeneity (EDI-I).

Meetings:

The Patient Relations Committee has not met since the last report to the Board on September 27, 2024.

For Action

None.

For Information

None.



QUALITY ASSURANCE COMMITTEE REPORT

December 6, 2024

Committee Members

William (Bill) Van Evans, Professional Member, Chair

Shanice Fontaine, Professional Member

Ovidiu Lauric, Professional Non-Board Member

Melanie Liassides, Professional Member

Allison Malloy, Public Member (to July 29, 2024)

Nawaz Pirani, Public Member

Committee Mandate

The Quality Assurance (QA) Committee is responsible for ensuring registrants provide quality service to the public by practicing according to the standards and policies of the College. The Quality Assurance Committee oversees and implements the Quality Assurance Program. The goal of the program is to promote continuing competence of dental technologists by encouraging them to continually upgrade their knowledge, skills and judgement throughout their professional careers.

Meetings

The QA Committee has not met since the last report to the Board on September 27, 2024.

For Action of the Board

There are currently no items for action.

For Information

There are currently no items for information.



REGISTRATION COMMITTEE REPORT

December 6, 2024

Committee Members:

Melanie Liassides, Professional Member, Chair

Abena Buahene, Public Member

Rehan Siddiqui, Public Member

Adela Witko, Professional Member

Franz Yagin, Professional Member

Committee Mandate:

The Registration Committee is responsible for developing and implementing transparent, objective, impartial and fair registration policies and procedures. The Committee decides on the eligibility of applicants for registration referred by the Registrar in an equitable and consistent manner for all applicants. It also reviews candidate requests for additional examination attempts under the College's Examination Regulation.

Meetings:

The Registration Committee has not met since the last report to the Board on September 27, 2024.

For Action of the Board

1. Emergency Class Policy and Supervision of Emergency Class Registrants Guideline
To support the new Emergency Class of Registration under CDTO's Registration Regulation, a policy and guideline was developed to identify when an emergency could be declared and how to expedite the registration process. The Committee is recommending the approval of the Emergency Class Policy and the Supervision of Emergency Class Registrants (ECR) Guidelines to the Board. Please refer to Agenda Item 10.6 RE – Emerging Issues – EC Supervision Policy.

For Information

1. Terms of Reference (ToR) As required in the Policy Review Schedule of the Governance Policy Manual, the Committee reviewed their Terms of Reference and confirmed that no changes are required.
2. The Committee received updates on several items, including the 2024-2025 Annual Renewal (See Table), GBC Dental Technology student engagement since September, the development of the Applicant Satisfaction Survey, progress on ADT Project II – Prior Learning Assessment & Recognition (PLAR), CADTR services, and OFC activities.

TABLE:

Annual Renewal Update, as of November 22, 2024:

Notice of Renewal for 2024-2025	
General Class Renewal	498
Inactive Class Renewal	27
Total Number of Renewal Notices Sent on June 27, 2024	525
Renewals Received for 2024-2025	
General Class Renewals*	465
Inactive Renewals*	24
Total Number of RDTs on November 22, 2024	489
Transfer of Registration Class	
General Class to Inactive Class*	8
Inactive Class to General Class*	1
Reinstatement*	1
Newly Registered RDTs (since September 1st)*	5
Former Registrants	
General Class to Retire/Resign	22
Inactive Class to Retire/Resign	4
Suspended	16
Notice of Intention to Suspend Notices Sent - Sept 10/24	30
Late Fees Paid – since Sept 1/24	16
Suspension Notices Sent - Oct 10/24	16
Applicants for a General Certificate of Registration (in progress)	2
Total Number of RDTs (includes*)	489
Percentage change from June 27th Annual Renewal Launch	-6.86%



RECRUITMENT COMMITTEE REPORT

December 6, 2024

Committee Members:

Abena Buahene, Public Member, Chair
Shanice Fontaine, Professional Member
Melanie Liassides, Professional Member
Leanne Cheng, Staff Appointment

Committee Mandate:

The Recruitment Committee is responsible for coordinating the recruitment process for Board and Committees from the Registrants of the College. The Committee decides on the appropriate number of interview questions, conducts interviews to determine the eligibility of applicants (elected and appointed), and recommends appointments for positions to the Board.

Meetings:

Since the report provided for the September 27, 2024 Board meeting, the Recruitment Committee has met three times on October 4, 2024, October 7, 2024 and November 1, 2024 by teleconference.

For Action

None.

For Information

1. Candidate Interview

The Recruitment Committee conducts the Candidate Interview for elections to the Board of Directors using pre-determined questions to assess key competencies. The Committee conducted Candidate Interviews for District 1 and the District 3 by-election on October 4th and October 7th. As District 1 had less nominations than positions available, it proceeded to a by-election and those Candidate Interviews were conducted on November 1st.



BY-LAWS AND POLICY REVIEW COMMITTEE REPORT

December 6, 2024

Committee Members:

Abena Buahene, Public Member, Chair
Asif Khan, Public Member
Nawaz Pirani, Public Member
William (Bill) Van Evans, Professional Member
Franz Yagin, Professional Member

Committee Mandate:

The By-Laws and Policy Review Committee is an ad-hoc Committee established pursuant to section 12.02 of the College's By-Laws. The Committee was appointed at the April 26, 2024 Board Meeting to support the modernization of the College's By-Laws and policies. This includes analyzing emerging governance modernization trends, writing or revising sections of the By-Law for consideration by the Board, and developing and revising governing and Board policies as necessary to support the By-Laws.

Meetings:

Since the last report to the Board on September 27, 2024, the Committee met on November 18, 2024 by teleconference.

For Action

1. Election of Officers and the Executive Committee Members

The Committee is bringing forth proposed changes to Section 6 of the By-Laws, Election of Officers and Policy 6.1 of the Governance Policy Manual, Officer Election. These changes will improve the elections process for Officers and Executive Committee members and ensure that the procedure is transparent and clear. Please see Agenda Item 10.5 – Regulatory Excellence – Governance – Election of Officers

For Information

1. By-Laws and Policy Review

The Committee has completed its review of Section 3, Contracts and Other Documents, and Section 4, Banking and Finance of the By-Laws. The accompanying policies will be reviewed and brought forth to the Board for approval in 2025.

Q2 The agenda items and materials were appropriate to the Board's role, and the materials were sufficient to assist me in forming opinions on matters before the Board.

Answered: 9 Skipped: 0

4.4★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	11.11% 1	33.33% 3	55.56% 5	9	4.44

#	DO YOU HAVE ANY SUGGESTIONS TO STRENGTHEN THE BOARD'S EFFECTIVENESS IN THIS AREA? (PARTICULARLY IF YOU SELECTED UNACCEPTABLE OR NEEDS IMPROVEMENT).	DATE
1	No	11/14/2024 1:32 PM
2	Na	11/4/2024 10:12 AM

Q3 The meeting package was received with sufficient time to allow me to prepare.

Answered: 9 Skipped: 0

4.6★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	0.00% 0	44.44% 4	55.56% 5	9	4.56

#	DO YOU HAVE ANY SUGGESTIONS TO STRENGTHEN THE BOARD'S EFFECTIVENESS IN THIS AREA? (PARTICULARLY IF YOU SELECTED UNACCEPTABLE OR NEEDS IMPROVEMENT).	DATE
1	No	11/14/2024 1:32 PM

Q4 Time was used effectively and discussions were focused.

Answered: 9 Skipped: 0

4.2★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	22.22% 2	33.33% 3	44.44% 4	9	4.22

#	DO YOU HAVE ANY SUGGESTIONS TO STRENGTHEN THE BOARD'S EFFECTIVENESS IN THIS AREA? (PARTICULARLY IF YOU SELECTED UNACCEPTABLE OR NEEDS IMPROVEMENT).	DATE
1	No	11/14/2024 1:32 PM
2	More time for discussion on some topics would be helpful, but I understand the time constraints of our workshops and meetings.	10/9/2024 2:06 PM

Q5 Board discussions and deliberations remained centred on the public interest, and we did not get into administrative and operational management details.

Answered: 9 Skipped: 0

4.1★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	22.22% 2	44.44% 4	33.33% 3	9	4.11

#	DO YOU HAVE ANY SUGGESTIONS TO STRENGTHEN THE BOARD'S EFFECTIVENESS IN THIS AREA? (PARTICULARLY IF YOU SELECTED UNACCEPTABLE OR NEEDS IMPROVEMENT).	DATE
1	No	11/14/2024 1:32 PM

Q6 Any disagreements were handled openly, honestly, and directly. There was a positive climate of trust and respect.

Answered: 9 Skipped: 0

4.4★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	0.00% 0	55.56% 5	44.44% 4	9	4.44

Q7 Where appropriate, next steps and action items were clearly identified.

Answered: 9 Skipped: 0

3.9★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	33.33% 3	44.44% 4	22.22% 2	9	3.89

Q8 Directors appeared prepared for the meeting.

Answered: 9 Skipped: 0

4.2★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	11.11% 1	55.56% 5	33.33% 3	9	4.22

Q9 I was satisfied with the opportunities that all of us had to participate in and contribute to the discussion and debate.

Answered: 9 Skipped: 0

4.3★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	11.11% 1	44.44% 4	44.44% 4	9	4.33

Q10 The Chair was effective in guiding the meeting and allowing all sides to be heard, while bringing matters to decision.

Answered: 9 Skipped: 0

4.6★
average rating



	UNACCEPTABLE	NEEDS IMPROVEMENT	ACCEPTABLE	GOOD	GREAT	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	0.00% 0	44.44% 4	55.56% 5	9	4.56

Q11 The Board education/training was effective at improving my ability to perform my role as a Board Director.

Answered: 9 Skipped: 0

4.2★
average rating



	VERY INEFFECTIVE	INEFFECTIVE	NEUTRAL	EFFECTIVE	VERY EFFECTIVE	TOTAL	WEIGHTED AVERAGE
☆	0.00% 0	0.00% 0	11.11% 1	55.56% 5	33.33% 3	9	4.22

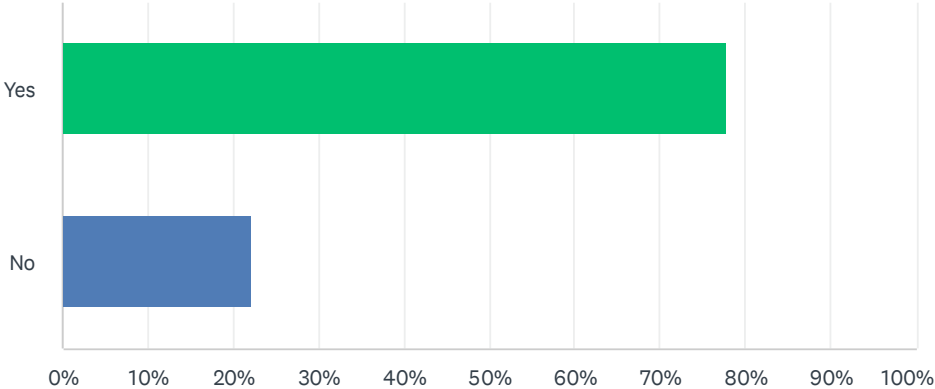
Q12 Do you have any other suggestions for governance improvement? Or any other comments about the meeting you would like to share?

Answered: 9 Skipped: 0

#	RESPONSES	DATE
1	No improvements are needed.	11/15/2024 7:10 PM
2	No	11/14/2024 1:32 PM
3	NA	11/14/2024 10:29 AM
4	N/a	11/14/2024 10:26 AM
5	no	11/4/2024 10:46 AM
6	No	11/4/2024 10:12 AM
7	Not at this time	11/4/2024 9:52 AM
8	Not at the moment.	10/10/2024 10:21 AM
9	NA	10/9/2024 2:06 PM

Q13 Did you attend the Workshop on September 26, 2024? If you select "NO" it will take you to the end of the evaluation.If you select "Yes" it will take you to part 2 of the evaluation on the Workshop

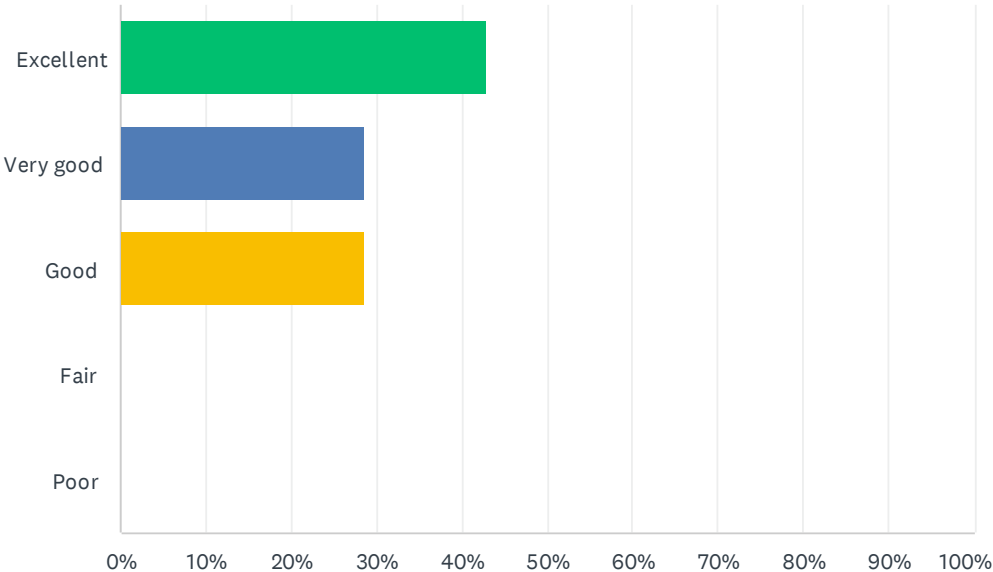
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	77.78%	7
No	22.22%	2
TOTAL		9

Q14 1. Overall, did you like the process that we used?

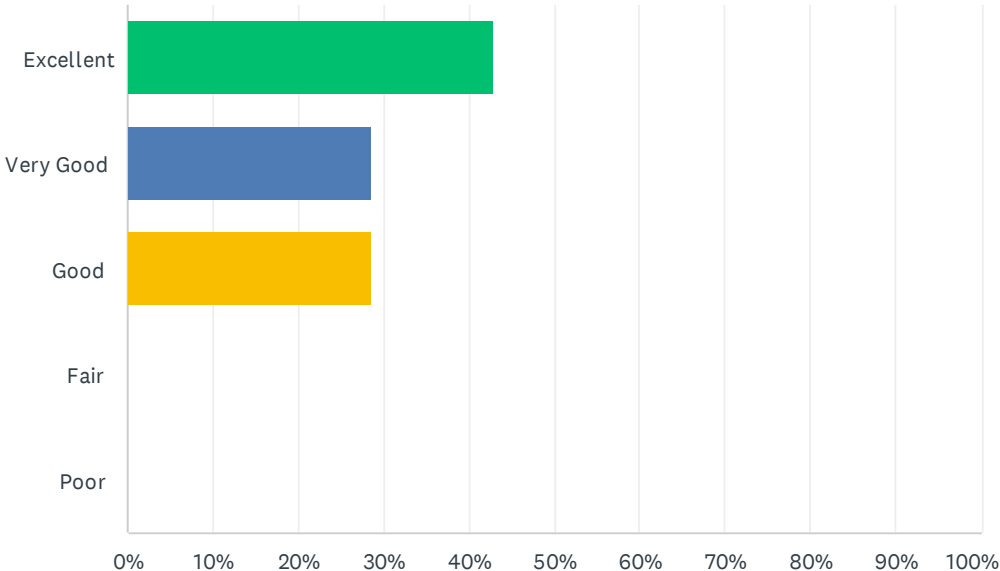
Answered: 7 Skipped: 2



ANSWER CHOICES	RESPONSES	
Excellent	42.86%	3
Very good	28.57%	2
Good	28.57%	2
Fair	0.00%	0
Poor	0.00%	0
Total Respondents: 7		

Q15 2. Did you feel that you had lots of opportunity to participate, share views, create common understandings, and that your input was valued?

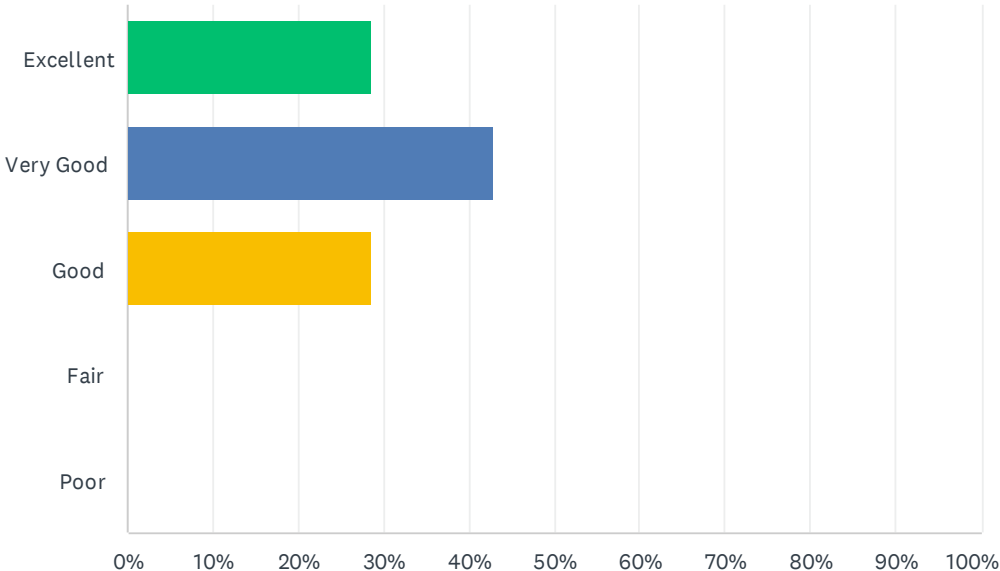
Answered: 7 Skipped: 2



ANSWER CHOICES	RESPONSES	
Excellent	42.86%	3
Very Good	28.57%	2
Good	28.57%	2
Fair	0.00%	0
Poor	0.00%	0
Total Respondents: 7		

Q16 3. Are you satisfied with the progress that was made and the outcome of the workshop?

Answered: 7 Skipped: 2



ANSWER CHOICES	RESPONSES	
Excellent	28.57%	2
Very Good	42.86%	3
Good	28.57%	2
Fair	0.00%	0
Poor	0.00%	0
Total Respondents: 7		

Q17 4. What did you like best about the day? Is there anything you would have liked to see more of or wish had been done differently?

Answered: 7 Skipped: 2

#	RESPONSES	DATE
1	I really like the interaction with college and students!	11/15/2024 7:11 PM
2	To the point discussion	11/14/2024 10:31 AM
3	Na	11/14/2024 10:27 AM
4	Great Participation from all members and staff	11/4/2024 10:46 AM
5	Interaction with students and future members of the profession	11/4/2024 9:53 AM
6	Very good for the dental technologists to meet the Board as well as for us to engage with them to gain an understanding why they want to to be RDTs.	10/10/2024 10:22 AM
7	Visiting the students and interacting with them. Several came with questions to our next class together and wanted to continue the discussion. This should be planned annually.	10/9/2024 2:08 PM

2.1.1 Executive Committee

Policy Section: Terms of Reference

Introduction

Between Board meetings, the Executive Committee has all powers of the Board with respect to any matter that requires immediate attention, other than the power to make, amend or revoke a regulation or By-law. If the Executive Committee exercises the power of the Board, it shall report on its actions to the Board at the Board's next meeting. Whenever possible, the Committee shall make recommendations to the Board, rather than assuming the above authority.

Mandate

The Executive Committee supports Board in advancing the CDTOs strategic objectives. The Executive Committee is responsible for:

1. monitoring proper operation of the College in cooperation with the Registrar;
- ~~2.~~ 2. monitoring risks to the organization, the public and the profession, and provides recommendations to the Board for corrective action as necessary;
- ~~2.~~ 3. reviewing the annual budget, the draft audited financial statements, the independent Auditor's report, and the pre- and post-audit communication, and making a recommendation to Board for decision;
- ~~3.~~ 4. ensuring the independence of the external auditor through an annual evaluation
5. monitoring the financial results quarterly and making a recommendation to Board for decision if corrective action is necessary;
- ~~4.~~ 6. monitoring the investment portfolio to ensure compliance with the policies set by the Board and making recommendations to the Board for investment advisors or consultants, and policy changes;
- ~~5.~~ 7. presenting to Board for approval slates of candidates for committee appointments;
- ~~6.~~ 8. appointing Directors to fill any vacancies if necessary for a Committee to achieve its quorum or if necessary to give effect to the provisions of the Code;
- ~~7.~~ 9. appointing an Acting Registrar should the office of the Registrar become vacant;
- ~~8.~~ 10. overseeing the search for a Registrar should the office of the Registrar become vacant, and making a recommendation to Board;
- ~~9.~~ 11. setting the Registrar compensation and reviewing the Registrar Compensation policy with recommendations to Board for revisions;
- ~~10.~~ 12. conducting the Registrar's annual review to be presented to the Registrar by the Chair and Vice-Chair;
- ~~11.~~ 13. calling special Board meetings;

- +2.14. ___ initiating and holding an inquiry should there be reasonable grounds to doubt or dispute the validity of the election of any Director;
- 15. investigating complaints against Directors or Committee members;
- +3.16. overseeing reports of possible fraudulent or dishonest use or misuse of College resources or property;
- +4.17. ___ monitoring the Committee’s performance;
- +5.18. ___ ensuring appropriate evaluation procedures have taken place during the self-evaluation of all Committees;
- +6.19. ___ regularly reviewing, considering, and making recommendations to Board for changes to applicable legislation, regulations, By-laws, policies, strategic goals, programs, Rules of Procedure, standards, and guidelines that fall within the scope and purpose of the Committee; and
- +7.20. ___ reviewing any proposed expense exceeding \$5,000 if the item is not an expenditure in the College budget and make recommendations to the Board for approval – if immediate action is required, the Executive Committee may approve the expenditure.

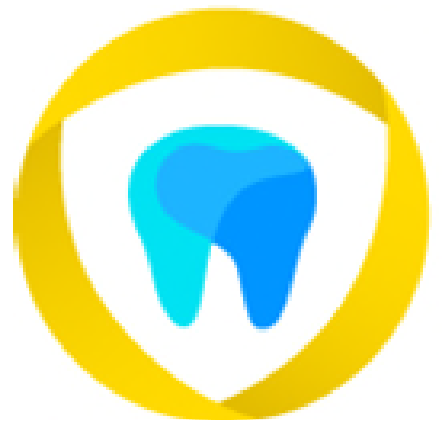
Membership

The Executive Committee shall be composed of five (5) Directors:

1. three (3) Elected Directors,
2. two (2) Public Directors, and
3. the Chair and Vice-Chair of the Board.

Chair Role & Responsibilities

The Chair shall serve as the Chair of the Executive Committee. In addition to the role and responsibilities of a Committee Chairperson described in policy 3.2 of this Governance Manual, the Chair of the Executive Committee shall provide leadership to the Committee and Board as a whole.



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Spectrum Day

Toronto

October 25, 2024

Toronto Congress Centre





College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

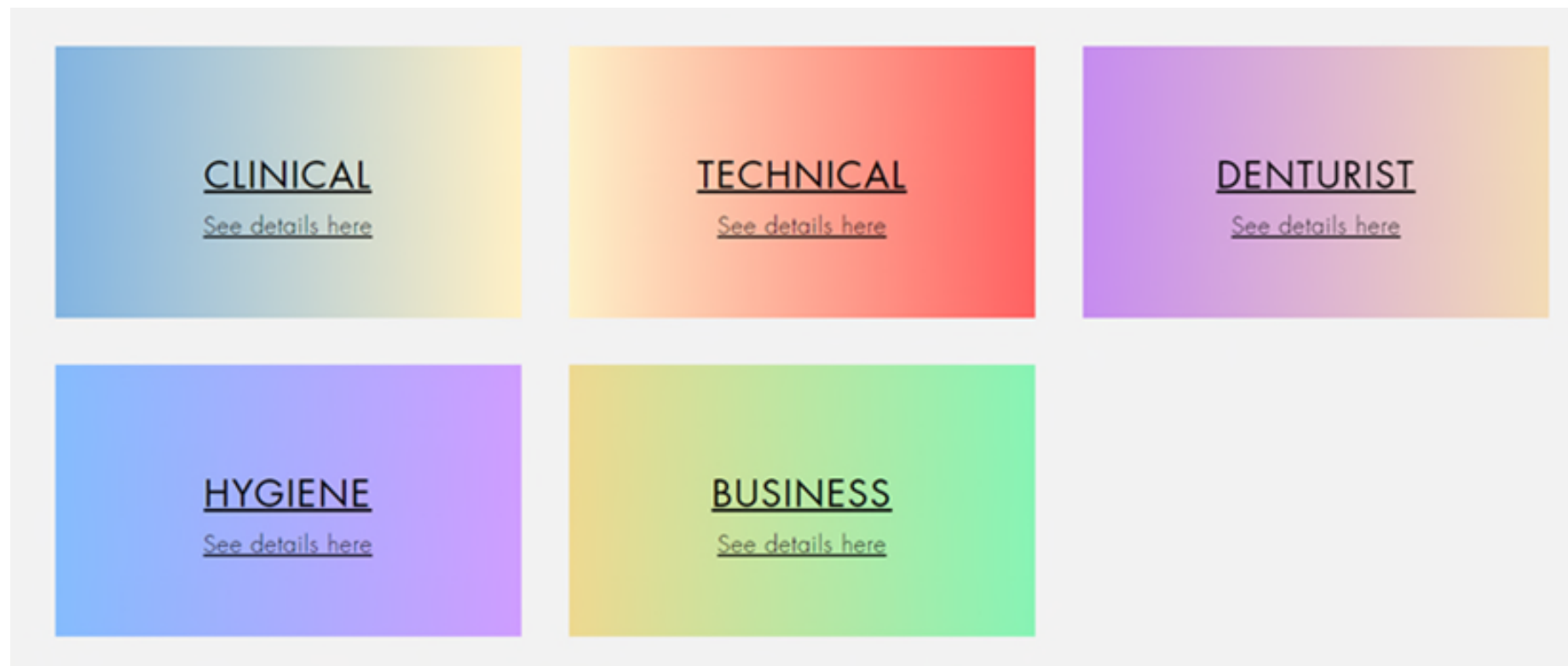
RDTs Earn 20 CPD Credits Today!

2 Credits – General conference attendance

3 Credits – Each one-hour dental technology related lecture in the Clinical, Technical and Denturist Programs

6 available lectures in the Technical Programs

Note: Hygiene and Business Program lectures are 2 credits (non-dental technical related activity)



Evidence of completion: Scan QR code provided at end of each lecture as evidence of attendance

[Link to Spectrum Day](#) – Toronto 2024 (TECHNICAL PROGRAM 1) credits

RDT Mandatory Identifiers



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

The College of Dental Technologists of Ontario (CDTO) will no longer issue RDT Stamps.

Obsolete College Stamp



Samples of New Identifiers Format

Instead, RDTs must include the following identifiers on any documents that previously required a stamp, in a format of their choosing:

1- Full Name

(as listed on the CDTO's Public Register)

2- Registration Number

(as listed on the CDTO's Public Register)

3- Full Title:

"Registered Dental Technologist"



Jane Doe
Reg.# 0000
Registered Dental Technologist

Jane Doe
Reg.# 0000
Registered Dental Technologist



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Invitation for RDTs

Your Expertise is Needed!

Help Shape the Future of Our Standards



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Standards and Ethics Initiative

We are excited to announce the launch of the “Standards and Ethics” initiative.

Designed to promote competence and cultural sensitivity within the profession.

Your insights and expertise as RDTs are essential to this effort.

Standards and Ethics Initiative

Current Progress



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario



Phase 1: Completed.

We conducted extensive research, a best practices review, and interviews with experts to gather key insights.



Phase 2: Ongoing.

Following initial focus groups, we are now seeking input from targeted groups of RDTs to review and provide feedback on our draft standards and ethics.

Why Your Participation Matters?



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Shape

Shape the Future: Use your voice to influence the standards that govern our profession and shape its future direction.

Advance

Advance Professional Excellence: Help create robust, evidence-based standards that support excellence for all registrants.

Promote

Promote Cultural Sensitivity: Contribute to developing standards that foster a more inclusive and culturally sensitive environment for patients.

Standards and Ethics Initiative

Your Opportunity to Contribute



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

If you are interested in participating, please scan the **QR code** to express your interest!



Your input will be crucial in ensuring our standards are current, evidence-informed, and reflective of the diverse practices.

How to become an RDT in 5 Steps?



Step 1: Apply with CADTR

Step 2: Internationally educated select “Dental Technology Education Equivalence” route and successfully complete credentialing

Step 3: Pass Examinations

- Knowledge Based Assessment (KBA) - 3 hrs, Virtual, Theory based
- Performance Based Assessment (PBA) - 4 hrs, In-person, Demonstrate your skills

Within 15 months of getting your CADTR Certificate of Completion

Step 4: Apply with CDTO and pass the Jurisprudence & Ethics exam

Step 5: Register



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Keep in Touch!

Complete GBC Student Voluntary Registry





College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

What does the future hold for Dental Lab Associates (DLAs)?

- Prior Learning Assessment & Recognition (PLAR) is a pathway that provides credit for learning through formal/informal study and several years of lab experience!
- PLAR aligns non-traditional learning with entry-to-practice competencies!
- Acceptable evidence may include a self-directed portfolio.



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Keep in Touch!

Complete Survey to join Stakeholder Distribution List



Is PLAR Right for you?



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

- X Formal dental technology program
- ✓ Years of hands-on dental lab experience in Canada and Abroad
- ✓ Formal or informal dental technology study and training

For updates on the PLAR project scan this QR Code:



Why is it important to develop a PLAR Program?

- ✓ Acknowledges that many dental lab associates may have the competencies taught at approved dental technology programs but gained through non-traditional learning.
- ✓ Accepts that lack of resources should not be a barrier to becoming an RDT in any regulated province.
- ✓ Critical to protecting the patient by ensuring that oral health providers have access to qualified RDTs.
- ✓ Recognized as a pan-Canadian education pathway by dental technology regulators across Canada and by other health professions.
- ✓ Recognized by the Government of Canada to ensure newcomers to Canada have equitable access to practice the profession in a timely manner.
- ✓ Supported by Ontario's Fairness Commissioner and the Ministry of Health.



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Ask Yourself...

How Can I Help to Shape the Future of Access to the Profession?

- We need 6-8 Subject Matter Experts to participate in an online Development Workshop (December 12 and 13, 2024).
- We need 50 DLAs (non-RDTs) to pilot the PLAR in 2025. Apply in April 2025 and receive orientation and portfolio requirements.
- We need 10 Subject Matter Experts to evaluate portfolios and provide feedback.

If you want to help with the PLAR project as an SME or be a pilot participant scan this QR Code to add your name:



Stay Informed!



CADTR/ACORTD

Tel: (416) 438-5003

Email: info@cadtr-acortd.com

Website: cadtr-acortd.com



College of Dental Technologists of Ontario
Ordre des Technologes Dentaires de l'Ontario

CDTO

Tel: (416) 438-5003

Email: info@cdto.ca

Website: cdto.ca

Follow Us   @CDTONTARIO

Watch Us  @collegeofdentaltechnologis1726



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Important Update for Oral Health Professionals:

- Video [LINK](#)
- Presentation Slides [LINK](#)

Important Update for Oral Health Professionals

Change from RDT Stamp to New Identity Card for Public Protection

~~Full Legal Name, RDT Reg. #0000
Expires Nov. 1, 2024~~

College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Searchable Online Public Register



GBC Dental Technology Students

Since Sept 26th Presentations & Focus Groups:

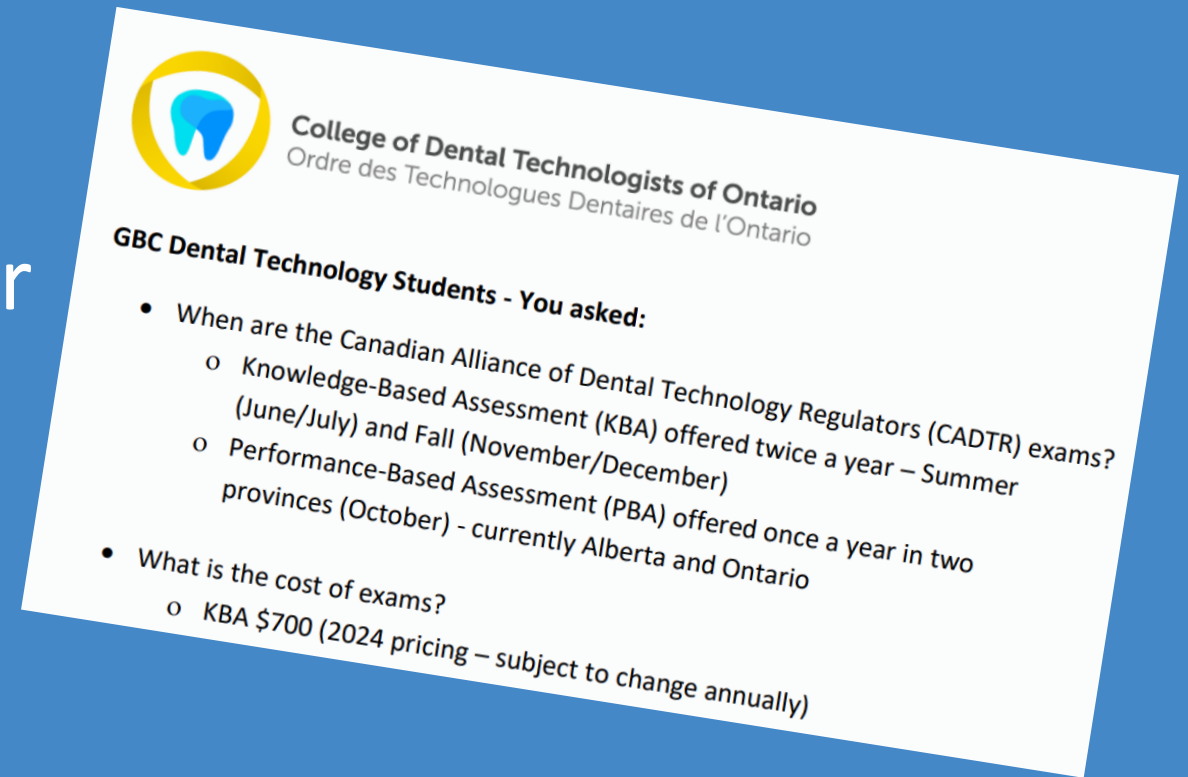
- Provided information to students
- Engaged with approximately 10 students at Spectrum Day
- Invited to speak with 3rd year students on Nov 22nd
- Spring 2025 invited to speak with 3rd year students before they graduate from the dental technology program



GBC Dental Technology Students

Information provided to students:

- Presentation Slides
- Application Checklist
- Voluntary Registry Poster
- Questions & Answers
- MailChimp
- Postcard



GBC Dental Technology Students

Voluntary Registry:

- 38 registered in September
- 8 registered in October
- 46 students registered for Voluntary Registry





College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Board Report

Date Report Authored: December 6, 2024

SUBJECT: Financial Monitoring Reports 2023-2024

PREPARED BY: Judith Rigby, Registrar & CEO

PURPOSE:

This report is to provide the Board with monitoring reports on the College's financial performance for the fiscal year ending August 31, 2024.

PUBLIC INTEREST RATIONALE:

It is in the public interest that the College plans for, monitors, and reports on, in a timely manner, its financial health and long-term financial stability. This supports the College's governance and regulatory programs required to carry out its mandate. Financial transparency, accountability and reliable financial reporting are key to earning the trust of its Registrants, the primary source of college revenue, the public and system partners and necessary for the Board to fulfill its fiduciary responsibilities.

BACKGROUND:

The Board of Directors are the College's fiduciaries who steer the organization towards a sustainable future by adopting sound ethical and legal governance, and financial management policies, as well as by making sure the College has adequate resources to advance its mandate. In exercising its duty, the Board has delegated the responsibility of monitoring the College's financial health against the approved policies and budget(s) to the Executive Committee. The Committee reports back to the Board and seeks Board approval where required. To be effective, all Directors must read and understand the financial reports and be willing to question expenditures and examine variances.

The reporting period for the College is the fiscal year September 1 to August 31.

INFORMATION & CONSIDERATIONS:

Financial Monitoring Reports

1. Statement of Operations (Appendix 1)

On June 23, 2023, the Board approved the 2023-2024 balanced Operating budget based on departmental expenses of \$1,041,174 in expenditures (2022-2023 \$1,034,326). Three major policy decisions were reflected in the approved budget:

- Continue to increase fees by CPI year over year (mandated in By-laws).
- Pro-rate new members registration fee for the General Certificate of Registration (ongoing).
- Set the Inactive Class Registration fee at 50% of General Certificate of Registration fee.

The College ended the fiscal year 2023-2024 with an operating surplus of \$123,631 (2022-2023 deficit \$19,931) before strategic initiatives.

Total operating revenue of \$1,064,050, is \$12,876 higher than budget largely due to interest earned on a short-term investment which matured in July 2024 and adopting a new investment strategy for excess funds in high interest savings and short-term investments of 3 to 12 months (Appendix 3). The CEBA loan forgiveness also increased revenue by \$10,000.

The College staff, Board and Committee continued their work remotely during the fiscal period resulting in expenditure reductions for meetings and professional development. Continuous process improvements also contributed to cost reductions in benefit premiums and credit card fees.

Total operating expense of \$940,419, excluding strategic initiatives, was \$100,755 or 9.7% under budget. The material favourable (FV) and unfavourable (UFV) variances to budget are:

- Complaints and Discipline - ~ \$51,373 UFV due to ICRC Panel directing further investigation & a request for prosecutorial viability opinion (likelihood of success at discipline) for a carry forward case; and accruing costs at August 31st for 3 referrals to discipline. Hearings are scheduled for 2024-2025 fiscal year.
- Administration - ~\$67,000 FV due to higher consulting fees for the new strategic planning cycle.
- Unauthorized practice - ~\$30,200 FV due to drawing down the SIP funds and gaining compliance through lower cost processes such as issuing cease and desist letters in collaboration with RCDSO.
- Human resources - ~ \$26,350 FV due to position vacancy, short term leave of absence and maximizing government employment subsidies.

The Registrar reviewed the financial statements and Board minutes to ensure compliance with the Surplus Retention policy during the fiscal period, which are:

- Unrestricted net assets on August 31, 2023, are between 6-12 months of the 2023-2024 annual operating expenses.
- Internally restricted net assets for SIP, abuse therapy and complaints and discipline are maintained and used for its intended purpose.
- Transfers from Unrestricted net assets to Internally restricted for SIP were approved by the Board.
- The Board authorized spending from Internally restricted net assets for SIP.

2. Strategic Initiatives and Projects (SIP) (see Appendix 2)

Expenses incurred for strategic initiatives are funded from net assets Internally Restricted for Strategic Initiatives (SIP reserve) and are approved by the Board for the life of the project, which can span one or more fiscal years. The Board agreed to carry forward the total amount of \$114,364, unspent funds on August 31, 2023, for Special Projects and on June 21, 2024, approved new funds of \$47,100 be transferred from unrestricted net assets to SIP for the Standards revision and Equity Diversity, Inclusion and Indigeneity (EDI-I) projects.

In 2023-2024 \$23,271 was spent on the Standards and Regulatory Disruption Unauthorized Practice (UAP) projects. The UAP project is now complete and will be closed as SIP while ongoing program expenditures are considered in the operating budget. As of August 31, 2024, 81% of \$736,018 in cumulative funds approved for SIP since 2015-2016 have been spent and \$140,191 carried forward to 2024-2025 fiscal year.

3. Investments (Appendix 3)

In 2023-2024 the College adopted a new investment strategy using high interest savings in addition to short-term investments that can be easily converted to cash, typically within 5 years. During the fiscal period a short-term investment matured and 100% of the principal and interest reinvested for one year, fully redeemable in 30 days. This was done to allow the College to revise its investment policy and transition to a new Investment Advisor. By optimizing investments for surplus cash not required to fund operations and SIP within a 3-month window the College earned investment income of approximately \$30,000, 100% higher than budget, while adhering to the investment policy in force (Appendix 3).

4. Cash Flow (Appendix 4)

Cash and short-term investments are made up of annual fiscal revenue and cumulative surpluses from prior years held in unrestricted and internally restricted net assets.

To ensure that the College can meet its financial obligations during the fiscal year, budgeted at just over \$1 million, a monthly cash flow is maintained and reconciled to the bank. In 2023-2024 93% of the College's annual revenue was received prior to September 1, 2023, while cash disbursements averaged 22-29% in each quarter. Since liquidity is key to meeting both operating and SIP cash requirements, excess cash was transferred to HISA and 3–6-month investments.

As of September 1, 2023, the amount of net assets was \$1,135,000 of which \$831,831 was invested for a 3-year term and the balance in cash. In 2024-2025 we will explore investing more of the net assets as we are a going concern and do not need immediate access to cash.

DECISION(S) SOUGHT:

THAT the Board receives the financial monitoring reports for the 2023-2024 fiscal year ended August 31, 2024.

ATTACHMENTS:

Appendix 1: Monitoring Report – Operating August 31, 2024

Appendix 2: Monitoring Report – Strategic Initiatives August 31, 2024

Appendix 3: Monitoring Report – Investments

Appendix 4: Monitoring Report - Cash Flow

**College of Dental Technologists of Ontario
Management Report - Statement of Operations**

Appendix 1

2023-2024

	Approved Budget	Actual	Actual vs. Budget Variance		Actuals 2022-2023	Variance 23-24 vs 22-23	
	\$	\$	\$	%	\$	\$	%
Revenues							
Registration ^{N2}	\$ 1,021,822	1,016,689	-5,133	-0.5%	976,247	40,442	4.1%
Examination	\$ 4,502	7,392	2,890	64.2%	5,310	2,082	39.2%
Investment income ^{NI}	\$ 14,849	29,969	15,119	101.8%	9,300	20,669	222.2%
Other income ^{NI}	\$ -	10,000	10,000	0.0%	0	10,000	0.0%
TOTAL REVENUE	1,041,173	1,064,050	12,876	1.2%	990,857	73,193	7.4%
Expenses							
Registration	\$ 8,550	2,490	6,060	70.9%	35,547	33,057	93.0%
Examination	\$ 4,502	5,075	-573	-12.7%	690	-4,385	-635.5%
Quality Assurance	\$ 10,040	4,294	5,746	57.2%	3,429	-865	-25.2%
Complaints, Discipline ^{N4}	\$ 50,276	101,649	-51,373	-102.2%	69,842	-31,807	-45.5%
Unauthorized Practice	\$ 30,410	211	30,199	99.3%	0	-211	0.0%
Patient Relations	\$ 1,800	300	1,500	83.3%	400	100	25.0%
Administration ^{N5}	\$ 242,145	175,162	66,983	27.7%	258,639	83,477	32.3%
Human Resources ^{N3}	\$ 672,125	645,773	26,353	3.9%	629,628	-16,145	-2.6%
Communications (Publications)	\$ 10,175	3,929	6,246	61.4%	8,407	4,478	53.3%
Legislation & Policies	\$ 11,150	1,537	9,614	86.2%	4,206	2,669	0.0%
Total Expenses	1,041,174	940,419	100,755	9.7%	1,010,788	70,369	7.0%
Surplus/ (Deficit) from Operations	-0	123,631	113,631		-19,931	2,824	-14.2%

Variance Explanations:

Revenues

NI Surplus funds invested, interest income exceeded budget due to favourable interest rate conditions. Other income includes \$10K CEBA forgiveness on repayment.

N2 Annual renewal fees are distributed over 12 months as per revenue recognition policy.

Expenses

N3 Favourable variance due to position vacancy and short term leave of absence.

N4 ICRC panel sent one carryforward case for further investigation & prosecutorial viability opinion (likelihood of success at discipline); 3 new cases more complex resulting in significant inv

N5 Lease terminated 4 months prior to expiration and use of internal staff resources for governance and strategic planning instead of consultants.

**COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO
STRATEGIC INITIATIVES ***

	Approved Budget 2015 - 2024	Balance -End of August 2023	Actual 2023-2024	Balance - end of August 2024	FCST September 2024 -2025	FCST 2025- 2026	Balance -end of August 2026
Database Modules - Project Manager	\$ 272,947	\$ 34,844	\$ -	\$ 34,844	\$ 34,844	\$ -	\$ (0)
Regulations and associated policies	\$ 32,488	\$ 13,365	\$ -	\$ 13,365	\$ 6,365	\$ 7,000	\$ 0
Standards and Ethics	\$ 85,933	\$ 37,098	\$ 13,856	\$ 41,542	\$ 41,542	\$ -	\$ -
Quality Assurance - QAP Review	\$ 8,000	\$ 8,000	\$ -	\$ 8,000	\$ 8,000	\$ -	\$ -
Regulatory Disruption	\$ 81,851	\$ 15,806	\$ 7,417	\$ 8,389	\$ 8,389	\$ -	\$ 0
Equity, Diversity, and Inclusion	\$ 41,808	\$ 2,515	\$ -	\$ 31,315	\$ 31,315	\$ -	\$ -
Governance	\$ 16,100	\$ 2,735	\$ -	\$ 2,735	\$ 2,735	\$ -	\$ 0
Total*	\$ 736,018	\$ 114,363	\$ 21,273	\$ 140,191	\$ 133,190	\$ 7,000	\$ 1

3%

18%

1%

Intended use of funds
Project manager/communication for QA /discipline module or upgrade
Legal and government relation to advance limited class, PLAR and J&E
Pivotal Research + Honoraria for Consultation
Review, Update/Revise the QA Program's Self and Peer Assessments. QA portal followed after completion of updating QA program and budget is in the database.
Awareness on unauthorized practice complaint processes.
Legal fee for updating bylaws and board/governance policies

Note 1

Note 2

Note 3

Note 3

Note 4

Note 6

* To be funded from Internally Restricted for Strategic Initiatives

Notes:

1. Database - funds held to implement online QA, Complaints and revision to Registration modules, includes PM.
2. Registration Regulation draft amendments for the emergency class of registration, regulating a limited class of regulation, and expanding pathways to registration.
3. Phase I of Standards and Ethics project is completed pending revised report by the end of May - Balance goes to Standards and Ethics -Phase 2
4. Regulatory disruption focus is developing and piloting a strategy for Unauthorized Practice. Remaining funds will be used to conclude current court case. An operating budet has been approved for 2023 - 2024.
5. Projects are complete. The Board approved a transfer \$7,148 from the Regulatory Disruption project to cover underfunding and close out these projects.
6. Equity, Diversity and Inclusion is a Board approved strategic project funded in June 2023.

College of Dental Technologists of Ontario
Investment Monitoring

General Assumptions: Assume interest + principal renews shortly after maturity date
 Conservative interest rate projection
 No additional investments

FY September 2023-August 2024

	Conservative Interest Rate	Interest Rate	Purchase Date	Maturity Date	Interest to Maturity	Principal Invested	Principal Balance	31-Aug-24 Accrued Interest to August 31	Assumptions
HISA	current	3.55%	26-Feb-24			\$ 100,000	\$ 100,000	\$ 1,716	No additional contributions, interest paid monthly
Short Term GIC	current	5.10%	19-Jan-24	17-Jul-24	\$ 7,525	\$ 300,000	\$ -	\$ 7,525	Matured
Short Term GIC (new)	current	4.95%	02-Aug-24	27-Jul-25	\$ 14,972	\$ 307,525	\$ 307,525	\$ 1,209	Reinvest Principal + interest (rate decrease)
1-year GIC	current	5.30%	19-Jan-24	20-Jan-25	\$ 9,035	\$ 170,000	\$ 170,000	\$ 5,539	
RBC Dominion	current	1.26%	22-Mar-21	25-Jul-24	\$ 34,529	\$ 807,644	\$ -	\$ 10,630	Matured
1-year Redeemable Short-Term Investme	current	4.40%	29-Jul-24	28-Jul-25	\$ 36,853	\$ 842,173	\$ 842,173	\$ 3,350	Redeemable in 30 days
						\$ 1,419,698		\$ 29,969	



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Board Report

Date Report Authored: December 6, 2024

SUBJECT: 2023-2024 Financial Audit

PREPARED BY: Judith Rigby, Registrar & CEO

PURPOSE:

The Board is asked to review and approve the College's draft audited financial statements at August 31, 2024.

PUBLIC INTEREST RATIONALE:

It is in the public interest that the College plans for, monitors, and reports on, in a timely manner, its financial health and long-term financial stability. This supports the College's governance and regulatory programs to carry out its mandate. Financial transparency, accountability and reliable financial reporting are key to earning the trust of its Registrants, the primary source of college revenue, the public and system partners. The Board is accountable for the success and sustainability of the College. This includes ensuring that an independent audit of the College's financial statements is conducted by an external auditor who provides a level of assurance considered most appropriate in fulfilling the Board's oversight role and discharging their fiduciary responsibilities from a financial reporting perspective.

BACKGROUND:

The Board of Directors are the College's fiduciaries who steer the organization towards a sustainable future by adopting sound ethical and legal governance, and financial management policies, as well as by making sure the College has adequate resources to advance its mandate. In exercising its duty, the Board has delegated the responsibility of monitoring the Colleges financial health against the approved policies and budget(s) and conducting an annual independent audit of the financial statements prepared by management to the Executive Committee. The Committee reports back to the Board and seeks Board approval where required. To be effective, all Directors must read and understand the financial reports and be willing to question expenditures and examine variances.

On an annual basis, the College prepares financial statements for the reporting period in accordance with Part III of the Chartered Professional Accountants of Canada ("CPAC") Handbook which are

subject to an audit. The annual audit of the financial statements supports the data integrity and financial stability of the College. On June 23, 2024, the Board appointed Kriens LaRose as the College's auditor for the 2023-2024 fiscal year.

The College prepares an annual report that extends its commitment to transparency and accountability by publishing its audited financial statements along with the Committee reports that detail activities for the reporting period. The College submits the annual report to the Ministry of Health and Long-Term Care (the "MOHLTC") in compliance with the RHPA and College By-Laws. It also makes the information on the College's activities and financial affairs available to its Registrants, the public and other system partners on the College website.

The reporting period for the College is the fiscal year September 1 to August 31.

INFORMATION & CONSIDERATIONS:

2023-2024 Financial Report (Draft Audited Financial Statements)

Kriens LaRose LLP completed an audit of the 2023-2024 Financial Statements for the College and has expressed an unqualified or "clean" opinion that the Financial Statements present fairly, in all material respects, the financial position of the College (see Appendix 2). In reaching this finding, Kriens LaRose presents a post audit communication designed to highlight and explain key issues, which they believe to be relevant to the audit and to continue two-way communication with the Executive Committee and the Board, which commenced prior to the engagement (Appendix 1). During the auditor's presentation to the Executive Committee, the Committee satisfied itself that material changes in the Statement of Financial Position and Statement of Operations were reasonable and verifiable and fulfilled its responsibility of overseeing the financial reporting process of the College.

For management reporting purposes, the expenditure for SIP is not presented as part of the Operating budget as they are one-time costs not funded by in-year revenue (See Agenda Item 9.1). However, for financial reporting purposes (audited financial statements) the SIP operating costs of \$21,273 (2022-23 \$57,867) are presented as strategic initiatives on the Statement of Operations in accordance with Canadian accounting standards for not-for-profit organizations.

DECISION(S) SOUGHT:

THAT the Board approve the 2023-2024 audited Financial Statements of The College of Dental Technologists for the fiscal year ended August 31, 2024.

AND THAT Staff be authorized to issue the final audited Financial Statements for the fiscal year ended August 31, 2024, upon receiving the Independent Auditors Report.

ATTACHMENTS:

Appendix 1: Kriens LaRose LLP Post-Audit Findings Communication

Appendix 2: 2023-2024 Draft Audited Financial Statements



COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO

REPORT TO THE EXECUTIVE COMMITTEE

This report serves as a formal document between the auditor and those charged with Governance with respect to our terms of engagement; significant matters/issues discussed with management; internal control weaknesses (if any); management representations; the status of our final procedures and other required communications required by our professional standards.



37 Main Street
Toronto, Ontario M4E 2V5

Tel. 416-690-6800
Fax. 416-690-9919

www.krienslarose.com

November 4, 2024

The Executive Committee
College of Dental Technologists of Ontario
PO Box 4021 Scarborough RPO McCowan SQ
Scarborough, Ontario
M1H 0A4

Dear Members of the Executive Committee:

We have recently completed our audit of the College's August 31, 2024 financial statements and we are pleased to present the results.

This report to the Executive Committee summarizes the terms of our engagement, the issues of audit significance discussed with management, the status of our final procedures, and provides the communication required by our professional standards.

This report is intended solely for the use of the Executive Committee and management and is not intended to be and should not be used by anyone other than these specified parties. We disclaim any responsibility to any third party who may rely on it. Further, this report is a by-product of our audit of the 2024 financial statements and indicates matters identified during our audit. Our audit did not necessarily identify all matters that may be of interest to the Executive Committee in fulfilling its responsibilities. The detailed terms of our engagement are outlined in our engagement letter.

Yours very truly,

KRIENS~LAROSE, LLP
Chartered Professional Accountants
Licensed Public Accountants

Thomas Kriens

Thomas Kriens, CPA, CA, LPA, BBM, Partner

TABLE OF CONTENTS

Index	Page
Audit Approach.....	1-2
Materiality.....	2
Audit Team	3
Audit Communications.....	4-6
Audit Adjustments.....	7

AUDIT APPROACH

Overview

For purposes of our audit of the financial statements, our audit scope was developed after considering inherent and control risks and the effectiveness of the College's internal controls.

A variety of factors are considered when establishing the audit scope including size, specific risks, the volumes and types of transactions processed, changes in the business environment, and other factors.

Our audit procedures are customized based on the College's significant accounts, disclosures and classes of transactions, as well as our assessment of risk, including the risks of fraud. Given the size of the operations, our procedures are primarily of a substantive nature. The approach resulted in the most effective external audit.

Our understanding of the College and controls provides the basis for our audit risk assessment, and the identification of audit procedures responsive to those risk assessments. Our balanced approach is designed to focus comparatively more audit effort on complex, higher- risk areas than on those assessed as lower risk.

The Audit Process

We have completed our examination of the College's August 31, 2024 financial statements and have issued an unqualified audit opinion on the financial statements.

The objective of an audit of financial statements is to express an opinion whether the financial statements present fairly, in all material respects, the financial position, results of operations and cash flows of the College in accordance with Canadian accounting standards for not-for-profit organizations.

The audit process involved:

- Assessing the risk the financial statements may contain material misstatements;
- Examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements;
- Assessing the accounting principles used, and their application;
- Assessing the significant estimates made by management; and
- Reviewing the internal controls, to gain a sufficient understanding in order to plan the audit and determine the level of control risk.

The engagement team undertook a documented planning process prior to commencement of the audit to identify concerns, address independence considerations, assess the engagement team requirements, and plan the audit work and timing.

Audit Approach

The audit techniques used in our audits of not-for-profit organizations has been developed based on our not-for-profit audit experience and the Canadian auditing standards as required by CPA Canada/Ontario. Our goal in completing the audit was to ensure that the audit is completed in a timely and efficient manner. The summarized procedures we followed included the following:

- Preparation of a year-end planning letter setting out the audit plan, scheduling of the audit, timing of the financial statements and information to be prepared for the audit.
- Correspondence with accounting staff prior to the year-end audit to review the year-end planning letter, address significant audit issues, audit confirmations and the timing of the audit.
- Completion of compliance and substantive procedures to ensure that the assets of the Organization are adequately safeguarded. Analysis of the revenue and expense accounts including reasonability testing, verification and analysis of accounts.
- Post audit review with the management and accounting staff to review the results of the audit and any improvements recommended for the next fiscal year.
- Prepare and deliver to the Executive Committee our report conveying the results of our audit and our concerns, if any, relative to the internal accounting, operating controls, and other matters of material importance with respect to the operations, including our recommendations, if any, for improving the system of internal control, which may be discovered during the course of our audit.

MATERIALITY

Materiality in an audit is used to:

- Guide planning decisions on the nature and extent of our audit procedures;
- Assess the sufficiency of the audit evidence gathered; and
- Evaluate any misstatements found during our audit.

Materiality is the term used to describe the significance of financial statement information to decision makers. An item of information, or an aggregate of items, is material if it is probable that its omission or misstatement would influence or change a decision. Materiality is a matter of professional judgment in the circumstances.

We used a final materiality of \$32,000, based on 3% of gross revenues.

AUDIT TEAM

Audit Team

Kriens~LaRose, LLP continues to serve you with a team of professionals who offer both industry experience and a working knowledge of your College. Below are the members of the 2024 audit team.

Engagement Member	Responsibility
Thomas Kriens	Engagement Partner
Renaldo Ferreira	Senior Manager, Assurance
Raymond Lee	Senior Associate

AUDIT COMMUNICATIONS

AREA	COMMENTS
<p>Auditors Responsibilities under Canadian Audit Standards (CAS)</p> <p>As set out in the section on terms of engagement, we designed our audit to express an opinion on the College's financial statements.</p> <p>The financial statements are the responsibility of management. Our audit was designed in accordance with CAS which provides for reasonable, rather than absolute, assurance that the financial statements are free from material misstatement.</p> <p>As part of our audit, we obtained a sufficient understanding of the internal control structure to plan our audit and to determine the nature, timing and extent of testing performed.</p>	<p>We will issue the final signed audit opinion upon approval of the financial statements by the Executive Committee, and provision to us of the signed representation letter and the completed subsequent events form.</p>
<p>Illegal Acts, Fraud, Intentional Misstatements and Error</p> <p>Our auditing procedures, including tests of your accounting records, are limited to those considered necessary in the circumstances and would not necessarily disclose all illegal acts, fraud, intentional misstatements or errors should any exist. We conducted the audit under CAS, which included procedures to consider (based on the control environment, governance structure and circumstances encountered during the audit) the potential likelihood of fraud and illegal acts occurring.</p> <p>These procedures are not designed to test for fraudulent or illegal acts, nor would they necessarily detect such acts or recognize them as such, even if the effect of their consequences on the financial statements is material. However, should we become aware that an illegal or possible illegal act or an act of fraud may have occurred, other than one considered clearly inconsequential, we will communicate this information directly to the Executive Committee.</p> <p>It is management's responsibility to detect and prevent illegal actions. If such acts are discovered or Executive Committee members become aware of circumstances under which the College may have been involved in fraudulent, illegal or regulatory non-compliance situations, such circumstances must be disclosed to us.</p>	<p>We have performed some mandatory procedures, regardless of specifically identified risks of fraud, to address the risk of management override of controls, including:</p> <ul style="list-style-type: none"> • Examine transaction listing and other adjustments for evidence of possible material misstatement due to fraud. • Review accounting estimates for biases that could result in material misstatement due to fraud, including a retrospective review of significant prior year estimates. • Evaluate the business rationale of significant unusual transactions. • Discussions with management. <p>Based on the work performed, there were no findings with respect to illegal acts, fraud, intentional misstatements or errors.</p>

AUDIT COMMUNICATIONS (Continued)

AREA	COMMENTS
Related Party Transactions	
<p>During our audit, we conduct various tests and procedures to identify transactions considered to involve related parties. Related parties exist when one party has the ability to exercise, directly or indirectly, control, joint control or significant influence over the other. Two or more parties are related when they are subject to common control, joint control or common significant influence. Related parties also include management, directors and their immediate family members and companies with which these individuals have an economic interest.</p>	<p>No related party transactions were identified during the audit. Management has advised that no related party transactions have occurred that have not been disclosed to us. The Executive Committee is required to advise us if it is aware of or suspects that any other related party transactions have occurred, which have not been disclosed in the financial statements.</p>
Significant Accounting Principles and Policies	
<p>We determine that the Executive Committee is informed about the initial selection of, and any changes in, significant accounting principles or their application when the accounting principle or its application, including alternative methods of applying the accounting principle, has a material effect on the financial statements.</p> <p>In addition, we report to the Executive Committee all alternative accounting treatments within Canadian accounting standards for not-for-profit organizations for policies and practices related to material items (including recognition, measurement, presentation and disclosure alternative) that have been discussed with management during the current audit period including ramification of the use of such alternative disclosures and treatments and the preferred treatment by us.</p>	<p>No significant changes noted in the current year.</p>
Management Judgments and Accounting Estimates	
<p>The preparation of financial statements requires management to make estimates and assumptions that affect the reporting amounts of assets and liabilities, disclosure of contingent assets and liabilities, disclosure of information related to going concern issues, and disclosure of information related to financial dependency.</p>	<p>Based on our audit procedures, we have concluded such estimates and judgments are reasonable in the context of the financial statements when taken as a whole. Financial results as determined by actual events could differ from those estimates and it is reasonable to assume such differences may be material.</p>

AUDIT COMMUNICATIONS (Continued)

AREA	COMMENTS
Significant audit adjustments and unadjusted differences considered by Management to be immaterial	Refer to "Audit Adjustments" section for details of unrecorded and recorded differences.
Disagreements with Management	In the course of our audit, we did not have any disagreements with management, nor were we under any significant time pressures or poor working conditions. We are not aware of any cause for concern as to management's attitude, competence or credibility with respect to matters affecting the financial statements.
Major Issues Discussed with Management Including Accounting for Significant Unusual Transactions and for Controversial or Emerging Areas	We are not aware of any significant unusual transactions recorded by College or of any significant accounting policies used by the College related to controversial or emerging areas for which there is a lack of authoritative guidance.
Serious difficulties encountered in dealing with Management when performing the audit	None
Material weaknesses in internal control	None
Consultation with other Accountants	None required.
Independence	We confirm our independence from College of Dental Technologists of Ontario.
Other information in documents containing audited financial statements	We will review the annual report when it becomes available, if applicable.

Audit Adjustments

We provide the College with assistance related to the preparation of its financial statements and disclosures related thereto. The adjusting entries have been prepared in consultation with and direction from management. We can confirm that we do not authorize or execute transactions on behalf of the College. The adjusting entries are attached and have been approved by management.

Summary of Unadjusted Differences

We did not find any unadjusted misstatements in the current year, and we do not have any reversing unadjusted misstatements carried forward from the prior year.

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO

FINANCIAL STATEMENTS

AUGUST 31, 2024

Draft

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO

FINANCIAL STATEMENTS

AUGUST 31, 2024

INDEX	PAGE
Independent Auditor's Report	1 - 3
Statement of Financial Position	4
Statement of Changes in Net Assets	5 - 6
Statement of Operations	7
Statement of Cash Flows	8
Notes to the Financial Statements	9 - 15

INDEPENDENT AUDITOR'S REPORT

To the Board of
College of Dental Technologists of Ontario

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of College of Dental Technologists of Ontario (the "College"), which comprise the statement of financial position as at August 31, 2024, and the statements of changes in net assets, operations, and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at August 31, 2024, and the results of its operations and its cash flows for the year then ended, in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the College in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Information

Management is responsible for the other information. The other information comprises the information, other than the financial statements and our auditor's report thereon, in the annual report. Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

The annual report is expected to be made available to us after the date of our auditor's report. If, based on the work we will perform on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact to those charged with governance.

INDEPENDENT AUDITOR'S REPORT (continued)

Other Matter

The financial statements of College of Dental Technologists of Ontario for the year ended August 31, 2023 were audited by another auditor who expressed a unqualified opinion on those statements on January 19, 2024.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

INDEPENDENT AUDITOR'S REPORT (continued)

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

KRIENS~LAROSE, LLP

**Chartered Professional Accountants
Licensed Public Accountants**

Toronto, Ontario
November XX 2024

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO
STATEMENT OF FINANCIAL POSITION
AS AT AUGUST 31, 2024

Page 4

	2024	2023
	\$	\$
ASSETS		
CURRENT		
Cash	898,904	1,355,839
Investments (Note 2)	1,329,797	831,831
Accounts receivable	40,254	55,229
Prepaid expenses	14,539	7,962
	2,283,494	2,250,861
CAPITAL ASSETS (Note 3)	2,159	2,288
	2,285,653	2,253,149
LIABILITIES		
CURRENT		
Accounts payable and accrued liabilities	83,265	114,291
Accrued liabilities – complaints and discipline	60,877	18,441
Deferred registration fees	903,621	944,884
CEBA Loan (Note 4)	-	40,000
	1,047,763	1,117,616
NET ASSETS		
Unrestricted net assets	925,539	848,880
Invested in capital assets	2,159	2,288
Internally restricted for complaints and discipline (Note 5)	150,000	150,000
Internally restricted for abuse therapy (Note 5)	20,000	20,000
Internally restricted for strategic initiatives (Note 5)	140,192	114,365
	1,237,890	1,135,533
	2,285,653	2,253,149

APPROVED ON BEHALF OF THE BOARD:

_____, Chair _____, Vice-Chair

See accompanying notes to the financial statements

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO
STATEMENT OF CHANGES IN NET ASSETS
 FOR THE YEAR ENDED AUGUST 31, 2024

	Unrestricted	Invested in Capital assets	Internally restricted for complaints and discipline	Internally restricted for abuse therapy	Internally restricted for strategic initiatives (Note 5)	Total 2024
Balance, beginning of year	848,880	2,288	150,000	20,000	114,365	1,135,533
Excess (deficiency) of revenues over expenses for the year	123,630	-	-	-	(21,273)	102,357
Amortization of capital assets	1,247	(1,247)	-	-	-	-
Acquisition of capital assets	(1,118)	1,118	-	-	-	-
Inter-fund transfer (Note 5)	(47,100)	-	-	-	47,100	-
Balance, end of year	925,539	2,159	150,000	20,000	140,192	1,237,890

See accompanying notes to the financial statements

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO
STATEMENT OF CHANGES IN NET ASSETS
 FOR THE YEAR ENDED AUGUST 31, 2023

	Unrestricted	Invested in Capital assets	Internally restricted for complaints and discipline	Internally restricted for abuse therapy	Internally restricted for strategic initiatives (Note 5)	Total 2023
Balance, beginning of year	879,179	4,928	150,000	20,000	159,224	1,213,331
(Deficiency) of revenues over expenses for the year	(19,931)	-	-	-	(57,867)	(77,798)
Amortization of capital assets	3,970	(3,970)	-	-	-	-
Amortization of tenant inducements	(2,805)	2,805	-	-	-	-
Disposal of capital assets	1,475	(1,475)	-	-	-	-
Inter-fund transfer (Note 5)	(13,008)	-	-	-	13,008	-
Balance, end of year	848,880	2,288	150,000	20,000	114,365	1,135,533

See accompanying notes to the financial statements

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO
STATEMENT OF OPERATIONS
 FOR THE YEAR ENDED AUGUST 31, 2024

Page 7

	2024	2023
	\$	\$
REVENUES		
Registration	1,016,689	976,247
Investment income	29,969	9,300
Government assistance (Note 4)	10,000	-
Examination	7,392	5,310
	1,064,050	990,857
EXPENSES		
Human resources	645,773	629,628
Administration	175,162	258,639
Complaints and discipline (Note 6)	101,649	69,842
Strategic initiatives (Note 5)	21,273	57,867
Examination	5,075	690
Quality assurance	4,294	3,429
Publications	3,929	8,407
Registration	2,490	35,547
Legislation and policies	1,537	4,206
Patient relations	300	400
Unauthorized practice	211	-
	961,693	1,068,655
EXCESS (DEFICIENCY) OF REVENUES OVER EXPENSES FOR THE YEAR	102,357	(77,798)

See accompanying notes to the financial statements

COLLEGE OF DENTAL TECHNOLOGISTS OF ONTARIO
STATEMENT OF CASH FLOWS
 FOR THE YEAR ENDED AUGUST 31, 2024

Page 8

	2024	2023
	\$	\$
CASH FROM OPERATING ACTIVITIES		
Cash receipts registration and membership renewal	990,401	1,004,076
Cash receipts from examination fees	7,392	5,310
Interest	19,870	9,300
Cash paid to suppliers and employees	(955,612)	(1,048,468)
	62,051	(29,782)
CASH FROM INVESTING ACTIVITIES		
(Purchase)/disposal of capital assets	(1,119)	4,198
(Purchase) of investments	(487,867)	-
	(488,986)	4,198
CASH FROM FINANCING ACTIVITIES		
(Repayment) of CEBA loan	(30,000)	-
Change in cash	(456,935)	(25,584)
Cash, beginning of year	1,355,839	1,381,423
Cash, end of year	898,904	1,355,839

See accompanying notes to the financial statements

PURPOSE OF THE ORGANIZATION

The College of Dental Technologists of Ontario (the "College") was incorporated as a non-share capital corporation under the Regulated Health Professions Act, 1991 (the "Act").

The purpose of the College is to regulate the practice of dental technology and govern its members in the Province of Ontario.

The College is a not for profit organization, as described in Section 149(1)(l) of the Income Tax Act, and therefore is not subject to income taxes.

1. SIGNIFICANT ACCOUNTING POLICIES

These financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations in Part III of the CPA Handbook and include the following significant accounting policies:

Financial Instruments

Measurement of financial assets and liabilities

The College initially measures its financial assets and financial liabilities at fair value adjusted by the amount of transaction costs directly attributable to the instrument.

The College subsequently measures all of its financial assets and financial liabilities at amortized cost.

Amortized cost is the amount at which a financial asset or financial liability is measured at initial recognition minus principal repayments, plus or minus the cumulative amortization of any difference between that initial amount and the maturity amount, and minus any reduction for impairment.

Financial assets measured at amortized cost include cash, accounts receivable and investments.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities and loan payable.

1. SIGNIFICANT ACCOUNTING POLICIES (continued)

Use of Estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make judgments, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the current year. Actual results may differ from these estimates, the impact of which would be recorded in future years.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the year in which the estimates are revised and in any future years affected.

Cash and Cash Equivalents

Cash and cash equivalents consist of cash on hand and fixed income investments with maturities of less than 90 days.

Investments

Investments consist of fixed income investments with maturity dates greater than twelve months from date of acquisition. Investments that mature within twelve months from the year-end date are classified as current.

Prepaid Expenses

Prepaid expenses are recorded for goods and services to be received in the next fiscal year, which were paid for in the current year.

Capital Assets

The costs of capital assets are capitalized upon meeting the criteria for recognition as a capital asset, with the exception of expenditures on internally generated intangible assets during the development phase, which are expensed as incurred. The cost of a capital asset comprises its purchase price and any directly attributable cost of preparing the asset for its intended use.

Capital assets are measured at cost less accumulated amortization and accumulated impairment losses.

Amortization is provided for, upon commencement of the utilization of the assets, on a straight-line basis at rates designed to amortize the cost of the capital assets over their estimated useful lives. The annual amortization rates are as follows:

Office furniture and equipment	5 years straight-line
--------------------------------	-----------------------

Continued...

1. SIGNIFICANT ACCOUNTING POLICIES (continued)

Capital Assets (continued)

Where equipment no longer has any long-term service potential to the College, the excess of their net carrying amount over any residual value is recognized as an expense in the statement of operations.

Net assets invested in capital assets

Net assets invested in capital assets comprises the net book value of capital assets less the unamortized balance of deferred tenant inducements used to purchase capital assets.

Revenue Recognition

Registration fees are recognized as revenue in the fiscal year to which they relate. The registration year of the College coincides with that of the fiscal year of the College, being September 1 to August 31. Registration fees received in advance of the fiscal year to which they relate are recorded as deferred registration fees.

Examination fees are recognized as revenue when the examinations are held.

Investment income comprises interest from cash and investments and is recognized as revenue on an accrual basis. Interest on investments is recognized over the term of the investments using the effective interest method

Government Assistance

Government assistance is recognized as revenue when the related expenses are incurred or when there is reasonable assurance that the College has complied or will comply with all of the conditions of the assistance, and collection is reasonably assured.

2. INVESTMENTS

	2024 \$	2023 \$
BMO GIC, interest at 5.30%, due January 20, 2025	175,539	-
BMO GIC, interest at 4.95%, due July 27, 2025	308,735	-
BMO Redeemable Short-Term Investment Certificate, interest at 4.40%, due on July 28, 2025	845,523	-
Toronto Dominion Bank callable bond, interest at 1.259%, due on July 25, 2024	-	831,831
Total	1,329,797	831,831

3. CAPITAL ASSETS

	2024		2023	
	Cost \$	Accumulated amortization \$	Cost \$	Accumulated amortization \$
Office furniture and equipment	9,086	6,927	7,968	5,680
Net book value	2,159		2,288	

Continued...

4. CEBA LOAN

In fiscal 2020, the College received a loan under the Canadian Emergency Benefit Account program, totaling \$40,000, for the payment of non-deferrable expenses. During the initial term ending January 18, 2024, the College was not required to repay any portion of the loan and no interest accrued. If the College repays 75% of the loan by January 18, 2024, the remainder of the loan was eligible to be forgiven if certain terms and conditions are met.

The College repaid \$30,000 on January 12, 2024. The remainder of the loan of \$10,000 was forgiven since the terms and conditions were met.

5. INTERNALLY RESTRICTED NET ASSETS

Net assets internally restricted for complaints and discipline

The College makes best efforts to anticipate the costs associated with complaints and discipline matters based on past experience and current caseload. However, in the event that the College incurs costs beyond the normal scope of such matters, the Board of the College has internally restricted net assets to fund expenditures related to these matters.

The internal restriction is subject to the direction of the Board upon the recommendation of the Executive Committee.

Net assets internally restricted for abuse therapy

The College has internally restricted net assets to provide for potential obligations under the Act with respect to cases where a patient alleges they were sexually abused by a member and sought funding for counselling. Decisions on granting funding rest with the Patient Relations Committee as set out in the Act.

Net assets internally restricted for strategic initiatives

The College has internally restricted net assets to provide funding to undertake several projects to support the achievement of the strategic initiatives of the College. The following expenses were included in the statement of operations and have been allocated to internally restricted net assets for strategic initiatives.

5. INTERNALLY RESTRICTED NET ASSETS (Continued)

Net assets internally restricted for strategic initiatives (continued)

	2024	2023
	\$	\$
Standards and Ethics	13,856	-
Regulatory disruption	7,417	26,964
Governance	-	1,288
Regulations	-	19,122
Diversity, equity and inclusion	-	10,493
Total	21,273	57,867

During the year, the Board approved a transfer of \$47,100 (2023 - \$13,008) from unrestricted net assets to net assets internally restricted for strategic initiatives to meet the anticipated future strategic initiatives of the College.

The internal restriction is subject to the direction of the Board upon the recommendation of the Executive Committee.

6. COMPLAINTS AND DISCIPLINE

	2024	2023
	\$	\$
Complaints and discipline expense	101,649	71,370
Cost recoveries	-	(1,528)
Total	101,649	69,842

Continued...

7. FINANCIAL INSTRUMENTS

The College is exposed to various risks through its financial instruments. The following presents the College's risk exposures and concentrations at August 31, 2024.

Credit Risk

Credit risk is the risk that one party to a financial instrument will fail to discharge an obligation and cause the other party to incur a financial loss. The College's credit risk would occur with their accounts receivable. Actual exposure to credit losses has been minimal in prior years. The allowance for doubtful accounts is \$nil (2023 : \$nil).

Liquidity Risk

Liquidity risk is the risk the College will encounter difficulties in meeting obligations associated with financial liabilities. The College's exposure to liquidity risk mainly is in respect of its accounts payable and accrued liabilities. The College expects to meet these obligations as they come due by generating sufficient cash flow from operations. There has been no change in the risk assessment from the prior period.

Market Risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risks: currency risk, interest rate risk and other price risk.

Currency Risk

Currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. The College is not exposed to foreign currency risk.

Interest Rate Risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The College does not have a significant interest rate risk.

Other price risk

Other price risk refers to the risk that the fair value of financial investments or future cash flows associated with the investments will fluctuate because of changes in market prices (other than those arising from currency risk or interest rate risk), whether those changes are caused by factors specific to the individual investment or its issuer or factors affecting all similar investments traded in the market. The College is not exposed to other price risk.



Board Report

Date Report Authored: December 6, 2024

SUBJECT: Annual Auditor Assessment
PREPARED BY: Judith Rigby, Registrar

PURPOSE:

This report is for information on the completed steps of the 2023 – 2024 Annual Auditor Assessment and to present the Executive Committees recommendation to conduct an annual assessment of the Auditor for the 2024-2025 audit for decision.

PUBLIC INTEREST:

A performance measure that contributes to a regulator effectively serving and protecting the public interest is its demonstration of responsible stewardship of its financial resources in achieving statutory objectives and regulatory mandate. The Board is accountable for the success and sustainability of the College. This includes ensuring that an audit of the College's financial statements is conducted by an external auditor who provides a level of assurance considered most appropriate in fulfilling the Board's oversight role and discharging their fiduciary responsibilities from a financial reporting perspective. Sound management of the auditor's performance through an annual assessment is essential to assessing the independence and effectiveness of the external auditor and determine whether the external audit firm should be reappointed.

INFORMATION & CONSIDERATION:

In 2017 the Board removed the requirement to reappoint the auditors annually from its By-laws with the expectation that assessments of the external auditor would be conducted to align with best practices laid out in the Enhanced Audit Quality Initiative put forward by the Chartered Professional Accountants of Canada (CPA). The Annual Assessment's purpose is to help the Committee identify areas for improvement for the audit firm, and not to decide if the external audit should be put out for tender. If the Committee finds real concerns, they could choose to recommend the tender early, but normally this would be a decision made at the time of the Comprehensive Assessment.

At the June 21, 2024, the Board appointed Kriens LaRose LLP as CDTO's Auditor for the 2023-2024 fiscal year. Kriens LaRose fully supports the Auditor Evaluation tool. There are four steps in conducting the annual assessment which takes place in the calendar year of the audit.

The Executive Committee reviewed the audit scope, timing and process at its September 10, 2024, meeting and determined that no changes were required for the 2023 – 2024 audit (Step 1). At the same meeting, Kriens LaRose provided the pre-audit communication and addressed the Committee’s questions on how to complete its own evaluation of the auditors, following receipt of the Staff’s evaluation (Step 2). On November 19, 2024, the Committee received the post-audit communication and a presentation of the audited draft financial statements from Thomas Kriens, Partner, and Renaldo Ferrera, Senior Manager of Kriens LaRose LLP. During the meeting the Committee completed step 3, its own evaluation of the Auditor:

- Independence, objectivity, and professional skepticism
- Communication and interaction with the Executive Committee
- Quality of service
- Approach to other considerations requested by the Executive Committee (none)

The Executive Committee was satisfied that it had sufficient information to reach a conclusion and consider the assessment complete. Based on its evaluation, the Committee is recommending that an annual assessment be conducted in the following year and that no changes be made to the assessment procedures, through a written report (Step 4 Appendix 1). It is not necessary that Kriens LaRose be reappointed as Auditor for the 2024-2025 fiscal year as the By-laws state that the Auditor shall remain in office until removed by the Board.

DECISION(S) SOUGHT:

THAT an Annual Auditor Assessment of the Auditor, Kriens LaRose LLP, be completed for 2024-2025 fiscal year end audit.

ATTACHMENTS:

Appendix 1: Step 4 Report to the Board 2023-2024.

ANNUAL ASSESSMENT REPORT TO THE BOARD

Reporting Year:	2024
Summary Observations:	<p>Committee members engaged in a process which included meeting time taken to review, discuss and complete the tool appropriately.</p> <p>Both the Engagement letter and the Final Opinion letter gave a detailed explanation of the audit process, with the rendering of a clean Opinion on the financial statements of the College. The Auditor enabled the Committee to complete its evaluation by providing guidance on understanding and completing the assessment without day-to-day interaction during the audit process.</p> <p>The Audit partner and senior manager met with the Committee on two occasions and the Board on one occasion and provided a comprehensive overview of the audit process, the responsibilities of each party, document testing and the handling of errors or misstatements.</p> <p>The Executive Committee concluded that the audit process was very positive and are assured that management has strong financial knowledge and that the College’s internal controls are effective.</p>
Recommendations made to the Auditor:	None.
Recommended Audit Structure for the Following Year (FOR APPROVAL BY THE BOARD):	<p><input checked="" type="checkbox"/> Annual Assessment</p> <p><input type="checkbox"/> Comprehensive Assessment</p> <p>The Committee has no concerns about the independence and effectiveness of the Auditor.</p>
Any recommendations For changes to the Assessment Process for future:	None



Board Report

Date Report Authored: December 6, 2024

SUBJECT: Investment Policy

PREPARED BY: Judith Rigby, Registrar & CEO

PURPOSE:

The Board is asked to approve the revised Investment Policy.

PUBLIC INTEREST RATIONALE:

It is in the public interest to ensure that the College's investment strategy, objectives, risk tolerance, and constraints are current and provide adequate direction to manage and monitor the investment program. The unrestricted and restricted net assets, held within CDTO's investments, exist to ensure CDTO's long-term operating stability to support program delivery to the public and registrants.

BACKGROUND:

At its September 10th, 2024 meeting, the Executive Committee carried out a review of the Investment Policy to ensure adequate policies are in place that reflect the Board's fiduciary duty to protect the organization's finances and other assets and enable the work of the By-laws and Policy Review Committee. Wilson Lai, Investment Advisor, BMO Wealth Management- Nesbitt Burns and Chris Hanna, Sr. Investment Associate presented the key considerations for an Investment Policy that enable the Executive Committee and the Registrar to support the Board in exercising their Duty of Care.

The Registrar and Investment Advisor presented the essential elements of the policy to the Board at its September 26th, 2024, workshop and based on the input made substantive revisions to the existing Investment Policy (Appendix 2).

INFORMATION & CONSIDERATIONS:

The Executive Committee was satisfied with the revised draft Investment policy presented on the day of the meeting and approved it in principle, knowing that further non-substantive revisions may be necessary following a review by the Investment Advisor and the Auditor (Appendix 1). The Auditor's response, after reviewing the draft final policy, is that "overall, the policy appears to be conservative and aligned with maintaining financial stability, which is a reasonable and appropriate approach for

not-for-profit organizations.” They noted that the CRA may scrutinize activities if they appear speculative or overly risky. However, a well-diversified portfolio with limited equity exposure, as outlined in the revised policy, typically avoids this concern.

The substantive revisions to the original approved Investment Policy being presented to the Board are:

1. Expanding the policy purpose to both protect and optimize the value of surplus funds by investing at the maximum yield available with appropriate security, liquidity and diversification constraints.
2. Defining the roles and responsibilities of the Board, Executive Committee, Registrar, and the Investment Advisor.
3. Delegating approval for investing activities, in accordance with the policy, to the Registrar solely.
4. Adding Schedule 2 Chartered Banks and medium/moderate risk Equities as Permitted Investments.
5. Defining the asset allocation by asset class, range and risk, and stipulating that Investments considered to be aggressive or deemed high risk will not be included in the College’s investment portfolio.
6. Incorporating investment monitoring and reporting requirements.

A discussion took place about adding disclosure of conflict of interest by the Registrar with respect to the Investment Advisor and investment portfolio to the Executive Committee who are responsible for reviewing conflicts of interest and deciding the next steps. The Registrar was asked to review the Governance Policy Manual to ensure this requirement is captured. The Committee also proposed updates to its Terms of Reference to ensure its roles and responsibilities are defined to implement the proper oversight for the College’s investments (See Agenda Item 6.2).

DECISION(S) SOUGHT:

THAT the Board approves the revised Investment Policy,

AND THAT the policy takes effect immediately,

AND THAT Staff revise the Governance Policy Manual to include the Registrar’s responsibility to disclose conflict of interests and bring it forward for Board approval.

ATTACHMENTS:

Appendix 1: CDTO Revised Investment Policy FIN02 v.2

Appendix 2: Current CDTO Investment Policy in the Governance Policy Manual

Policy Information	
Date of Approval:	Section: Finances & Expenses
Approved By:	Status: Draft Version: 2
Effective Date: April 3, 2020	Last Review Date: November 19, 2024
Responsible Authority: Executive Committee	

1. Purpose

The College's main source of revenue is registrant fees. Any surplus funds of the College are maintained to achieve its public protection mandate.

The objective of this policy is to establish guidelines which facilitate the effective management of the College's cash balances that are not immediately required for operations or the specific purposes they are committed for and to provide a source of internal funds for strategic priorities. To ensure prudent management and stewardship of the financial resources of the College, it is desirable to both protect and optimize the value of these funds by investing at the maximum yield available with appropriate security, liquidity and diversification constraints,

2. Responsibilities and Approvals

Each of the Board, Executive Committee, and Registrar participate in the oversight of the College's invested funds.

2.1 Board

The Board of the College of Dental Technologists of Ontario ("The Board") has ultimate authority over and responsibility of the investment portfolio ("portfolio"). The Board's role with respect to this policy is one of oversight, as it has delegated responsibility for investing to the Registrar and the Executive Committee. To assist it in the performance of its duties and to ensure that the portfolio meets its objectives, the Board will:

- a. Receive the Executive Committee's recommendations with respect to the Investment Policy and approve or amend it on an annual basis or as needed.
- b. Review all the other reports and recommendations of the Executive Committee with respect to the portfolio and take appropriate action.

2.2 Executive Committee

The Executive Committee will:

- a. Maintain an understanding of legal and regulatory requirements and constraints applicable to the portfolio and keep the Board fully apprised of these.
- b. Review the Investment Policy on an annual basis, with the consideration that any substantive

changes, particularly with respect to the asset mix, should only be considered every five years, barring exceptional circumstances.

- c. Monitor the portfolio's performance and its compliance with the Investment Policy and report on these matters to the Board on a quarterly basis.
- d. Monitor the portfolio's financial risks and report any significant risks to the Board, including the consequences of potential significant losses or investments of any part of or of the entire portfolio.
- e. Provide recommendations to the Board regarding the selection, engagement, or dismissal of professional Investment Advisor or consultants they may wish to hire.
- f. Set parameters within which the Registrar will have discretion to select, terminate, or replace the Investment Advisor/Manager.
- g. Take appropriate steps to resolve any conflict-of-interest issues.

2.3 Registrar

The Registrar will not manage CDTO's investments without the services of an Investment Advisor to provide expertise in the investment approach and investment portfolio.

The Registrar will:

- a. Invest the excess cash funds, as delegated by the Board, in accordance with this policy and in a timely manner.
- b. Monitor the cash flow and receive or invest funds to address the College's cash requirements.
- c. Select, terminate or replace the Investment Advisor within the set parameters and report to the Executive Committee.
- d. Liaise with Executive Committee and Investment Advisor.
- e. Monitor the Investment Advisor and investments to ensure compliance with the investment policy and approach.
- f. Provide the Executive Committee with draft changes to the Investment Policy for consideration and recommendation for approval as necessary.
- g. Promptly report any non-compliance issues of the Investment Policy to the Executive Committee.

2.4 Investment Advisor

Custody of the Portfolio's assets will be delegated by the Registrar to an Investment Advisor who is recognized as a depository for securities. The Investment Advisor will report to the College and will:

- a. provide safekeeping for Portfolio assets.
- b. process authorized transactions as directed by the College.

- c. collect interest, dividends and the proceeds of cash equivalent and fixed income instrument maturities.
- d. inform the Registrar of pending corporate actions (e.g., name changes, mergers, odd lot offerings) and process instructions related to such matters.
- e. deposit and transfer funds and payment of expenses as directed by the College.
- f. maintain a record of all transactions.
- g. provide regular reports to the College and to the Executive Committee as provided for in Section 6 of this policy.
- h. provide the College, the Registrar, and the Executive Committee with information required to fulfill their duties, or as directed by the Executive Committee.
- i. to the extent possible, provide applicable information as may be requested by the College's auditor.

2.6 Approvals

All investing activities are to be approved by the Registrar.

3. Investment Objectives

The investment of excess cash balances must satisfy the following investment objectives:

1. Return on Investment

The College's objective is to achieve a return ahead of the rate of inflation set by the Bank of Canada that protects the long-term purchasing power of the capital component emphasizing focus on some preservation of capital.

2. Risk Tolerance

The investment portfolio should be structured and managed to achieve a reasonable rate of return while aiming to minimize risk. The portfolio should have a greater emphasis on lowering volatility and limiting losses in the short-term by diversification of investments as defined by the policy and varying terms of maturity.

3. Provide Liquidity

The College does not anticipate any large cash withdrawals over the time horizon. However, for the portion of investments in cash and fixed income they should be structured with maturity terms to anticipate and address immediate and long-term operating requirements. Any funds invested in Equities would be subject to potential gains or losses if sold. We will only allocate funds to equities that we do not anticipate needing for immediate requirements.

4. Permitted Investments

- i. Federal Government of Canada Bonds
- ii. Canadian Provincial Bonds
- iii. A corporate bond issued by a corporation with a rating of BBB or higher with the *Dominion Bond Rating Service (DBRS)* or Moody's Rating agency.
- iv. A Schedule 1 Canadian Chartered bank. Limit to GIC's \$100K to \$500K.
- v. A Schedule 2 Canadian Chartered bank. Limit to GIC's \$100K and CDIC insured.
- vi. Equities which may include: Canadian, US, International and Emerging Markets equities or Schedule 1 Canadian Chartered bank Principal at Risk Structured Notes.

5. Asset Allocation

Investments considered to be aggressive or deemed high risk will not be included in the College's investment portfolio. Investment of College assets should fall within the asset classes and ranges specified below:

Asset Class	Permissible Range	Risk
Cash	10%-15%	Low
Fixed Income	25%-90%	Low
Equity	0%-25%	Medium/Moderate

6. Investment Monitoring & Reporting

On a quarterly basis and within 30 days of the end of the calendar year, the Investment Advisor/Manager will provide the Registrar with:

- a. A Performance Report of the valuation of the portfolio as of the end of the quarter, including the market value of each investment.
- b. Data and commentary on the portfolio's investment performance relative to the policy and mandate, as well as for most recent quarter and year.

On a quarterly basis the Registrar will report to the Executive Committee and Board on investment results and compliance with its Investment Policy.

5.3 Investment Policy

Policy Section: Finance & Expenses

Introduction

The College must ensure that its financial resources are managed with competency and with risk minimization practices in mind. Long-term stability and organizational goals must be prioritized when investing College funds and a plan must be put into place to evaluate the benefit of such investments to determine the merits of continued participation.

Investments or reinvestments of College funds shall prioritize:

1. preserving capital;
2. providing liquidity of investments;
3. obtaining a reasonable rate of return; and
4. minimizing the risk profile through investment diversification and varying terms of maturity.

Authority

Any two of the Registrar, Chair, and Vice-Chair may invest or re-invest the funds of the College. The Board retains the right to, by resolution, direct and select an Officer(s) of the College to implement their direction.

The persons authorizing the investment or reinvestment of College funds or the person that they appoint in their stead shall ensure that such fund allocation is:

1. financially feasible and in the best interest of the College;
2. aligned with the College mandate, values, and vision;
3. compliant with conflict of interest related By-laws and policies of the College;
4. monitored for performance; and
5. reported in the annual report published by the College.

Requirements

All investments and re-investments shall:

1. only be made with funds of the College that are not immediately required for the purposes of the College;
2. be made in securities issued or guaranteed by:
 - a. the Government of Canada.
 - b. the Province of Ontario.

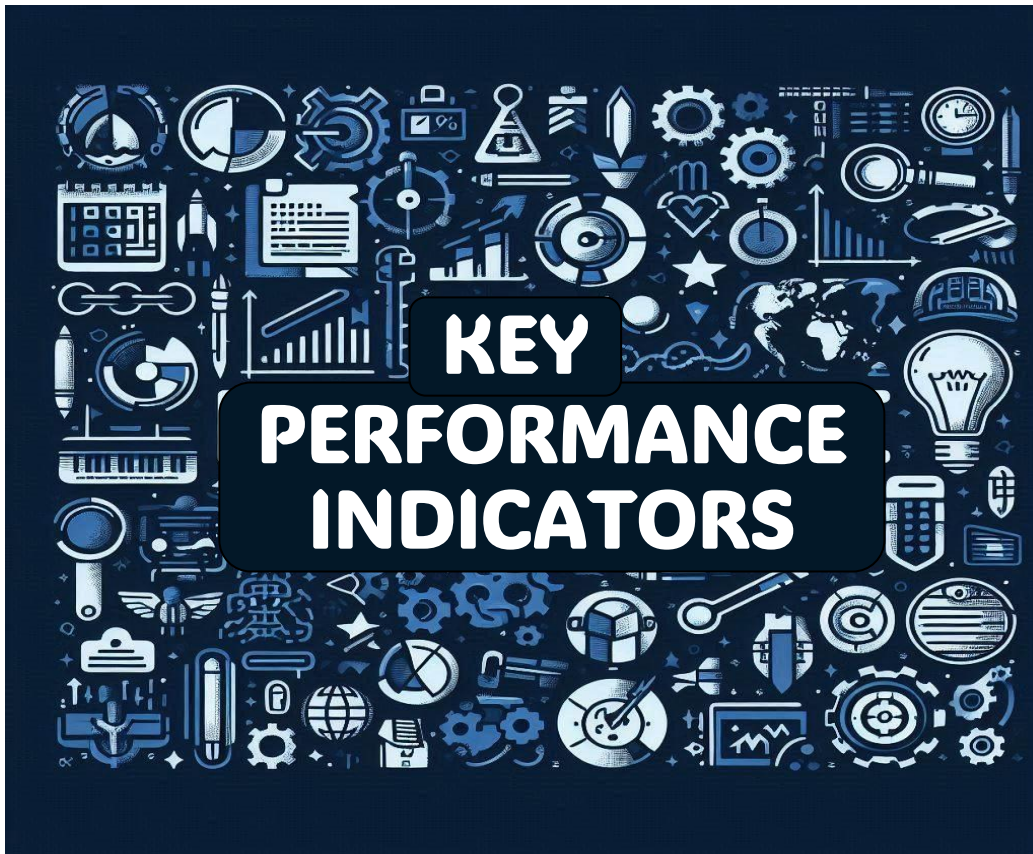
- c. a corporate bond issued by a corporation with a rating of BBB or greater with the Dominion Bond Rating Service or a rating of four (4) stars with Morningstar Bond Ratings.
 - d. a Schedule I Canadian chartered bank.
3. be accurately documented and accounted for, including all related transactions.



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Strategic Plan: KPIs

Board Dashboard Report



DECEMBER 2024

Strategic Projects - KPIs

Overviews

	Domain	KPIs
Professional Excellence	Standards and Ethics	Progress report on Standards and Ethics as applicable Completion rate for Standards in order of priority
	Professional Development	Progress report on QA Portal Number of resources provided to registrants Utilization of resources and user satisfaction rate On time submission rate of SPDP Progress report on Peer Practice Assessment Progress report on Self-Assessment
	Reduce Barriers to Registration	Progress report on Jurisprudence program Progress report on ethics initiative Progress report on PLAR Number of activities or initiatives towards improving prospective and current applicant experience and engagement Applicant satisfaction rate
Engagement	System Partner Engagement & Collaboration	Engagement report Engagement effectiveness Number of collaborative initiatives with system partners Progress report on Communication Strategy
	Dental Technology & Unauthorized Practice Awareness	Number of people engaged for awareness campaigns conducted Awareness rate on unauthorized practice/complaint processes.
Regulatory Excellence	EDI-I	Number of participants who have attended EDI learning opportunities. Progress towards developing /implementing EDI Action Plan
	Governance	Progress report on governance modernization Effectiveness, type of Board education, and training initiatives implemented
	Emerging Issues	Progress report on ECR readiness or implementation

KPIs Report: STANDARDS AND ETHICS



PROFESSIONAL
EXCELLENCE

Progress Report on Standards and Ethics

		Phase 1 Research and environmental Scan			Phase 2 Targeted Consultation		Phase 3 General Consultation		Phase 4 Approval
		Research and Analysis	System Partner Interview	Initial Report	Focus Group Consultation	Initial Draft	General Consultation	Redrafting	Final Review by the Board
Standard Framework	Identify Ethical Principles								
	Identify Professional Standards								
	Identify Practice Standards								
Professional Standards	Standard 1								
	Standard 2								
	Standard 3								
	Standard 4								
Practice Standards	Standard 1								
	Standard 2								
	Standard 3								
	Standard 4								

- In Progress
- Completed
- Not Yet Started
- Completed Since the Last Update

Completion rate for Standards in order of priority

The rate is contingent upon the completion of Standard Framework to identify Professional and Practice Standards.

KPIs Report: Professional Development

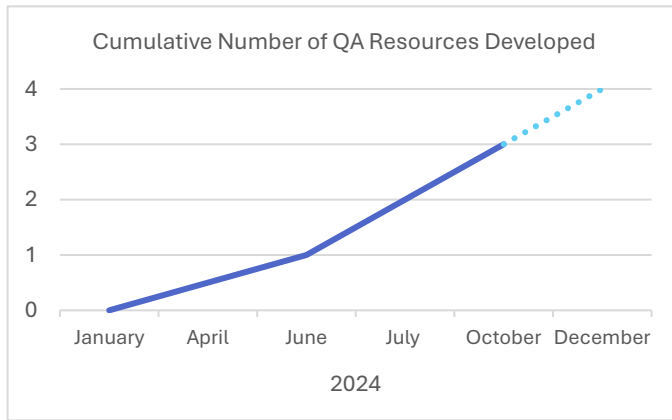


PROFESSIONAL
EXCELLENCE

Progress Report on QA Portal

Project Summary	Status
QA Portal	
1) Submit QA Portal design to database developer	Completed
2) Determine with database developer feasibility of moving forward	At Risk
3) Review and set workplan and deliverables with database developer	Not Yet Started
4) Database provider to create the QA Portal	Not Yet Started
5) Test and provide feedback on QA Portal	Not Yet Started
6) Pilot with select group	Not Yet Started
7) Communication prior to launch	Not Yet Started
8) Launch new QA Portal	Not Yet Started
9) Monitor and continued improvement	Not Yet Started

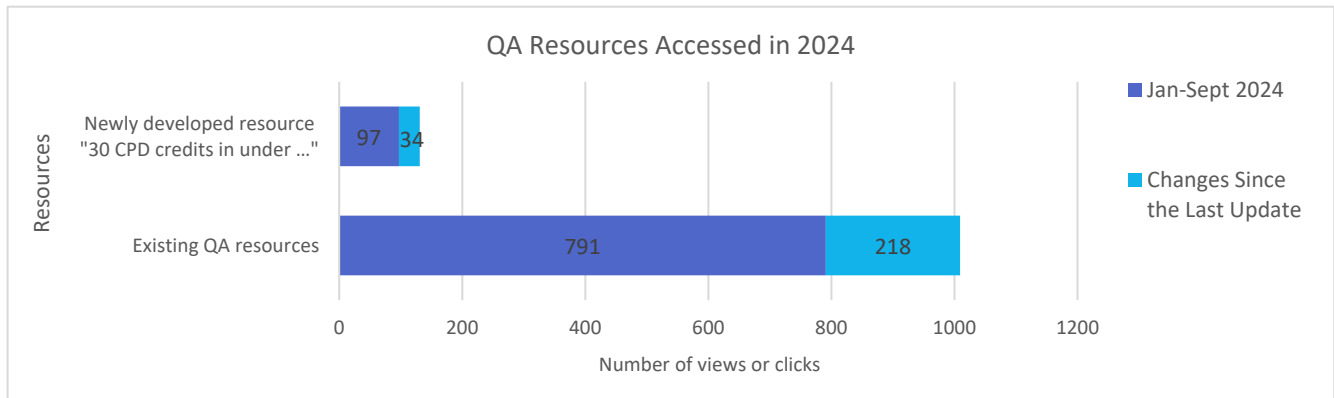
Number of resources provided to registrants



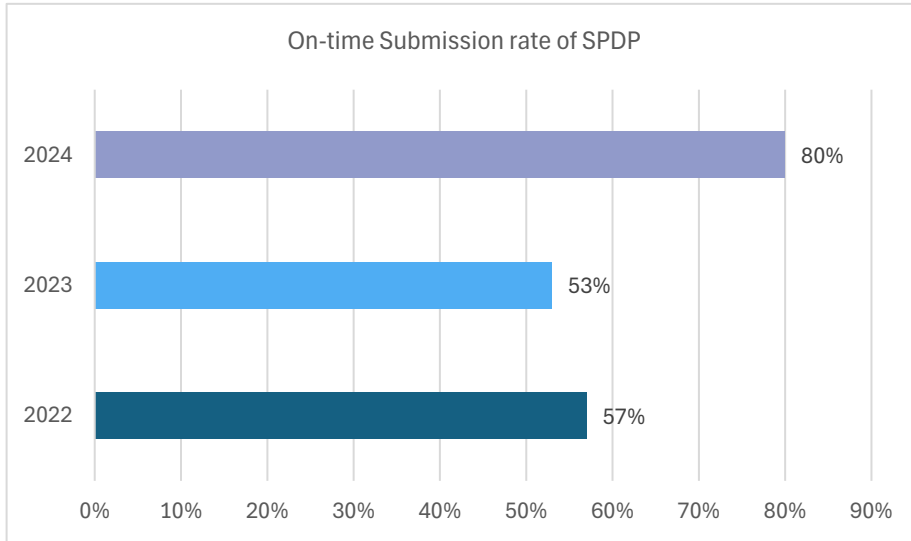
Resources developed in 2024:

1. 30 CPD credits in under three days
2. Examples of ways to obtain CPD credits
3. Spectrum Day 2024 – credits for technical program 1
4. QAP Program Tutorial - educational video (in progress)

Utilization of resources and user satisfaction rate



On-time submission rate of SPDP



Progress report on Peer Practice Assessment

Not yet started

Progress report on Self-Assessment

Not yet started



Progress report on Jurisprudence program

Project Summary	Status
Jurisprudence Program (JP) Development	
1) Conduct research on JP requirements	In Progress
2) Map out project plan to move from a written examination to online program including selection of online provider, development of program, and allocation of financial and human resources	Not Yet Started
3) Test and provide feedback to service provider	Not Yet Started
4) Pilot with select group of registrants	Not Yet Started
5) Communication prior to launch directed to applicants	Not Yet Started
6) Launch new Jurisprudence Program for applicants	Not Yet Started
7) Monitor and gathered feedback for continued improvement	Not Yet Started
GBC Jurisprudence & Professionalism Course Equivalency	
1) Review GBC Jurisprudence & Professionalism Course (J&P)	In Progress
2) Determine equivalency of GBC J&P to CDTO Jurisprudence Program	Not Yet Started
3) Consider exemption of CDTO's Jurisprudence Program registration requirement for those who have successfully completed GBC's J&P course	Not Yet Started
4) Consult with the Quality Assurance Committee to consider implementing CDTO Jurisprudence Program as mandatory CE requirement for QAP	Not Yet Started

Progress report on ethics initiative

Project Summary	Status
Exploration of integrating CDTO's Ethics examination into CADTR KBA	
1) Environmental scan of Canadian Dental Technology Regulator ethics registration requirements	Not Yet Started
2) Consult with CADTR regarding implementation of ethics items into the Knowledge-Based Assessment (KBA)	Not Yet Started
3) Share CDTO's ethics questions with CADTR	Not Yet Started
4) Liase with CADTR psychometrician to implement ethics items into KBA (to be directed by CADTR Board)	Not Yet Started

Progress report on PLAR

The project timeline started Jan 2024, fully launch by Dec 2026.

Project Summary	Status
Prior Learning Assessment and Recognition (PLAR)	
1) Project Initiation	
a. Secure the funding – CDTO Project Sponsor	Completed
b. Project announcement	Completed
2) Project Foundation	
a. Establish project governance: CDTO chairs the ADT II steering committee	Completed
b. Project Charter, Project Plan and risk register development	Completed
c. Retain Project Manager	Completed
3) Develop Pan-Canadian PLAR Assessment Tool and scoring rubric	
a. Retain PLAR Consultant	Completed
b. Environmental scan and literature review with recommendation	Completed since the last update (Sept 2024)
c. Subject Matter Experts Group to develop and test the tool and scoring rubric based on the recommendations	In Progress
d. Develop orientation materials	Not Yet Started
e. Conduct 18-month pilot	Not Yet Started
4) Education Upgrade Tools for Applicants	
a. Retain Education and Upgrading Consultant	In Progress
b. Develop and Launch Education Upgrade Tools	Not Yet Started
5) Implement outreach strategy and gather feedback	
a. Retain a Communication Consultant	In Progress
6) Finalize, Translate and launch French/English PLAR and scoring rubric	Not Yet Started

Number of activities or initiatives towards improving prospective and current applicant experience and engagement



Engagement activities in 2024:

1. Introduction to the College – GBC students
2. Focus group – GBC students
3. Spectrum day – interactions with students
4. Jurisprudence and ethics - GBC students

Applicant satisfaction rate

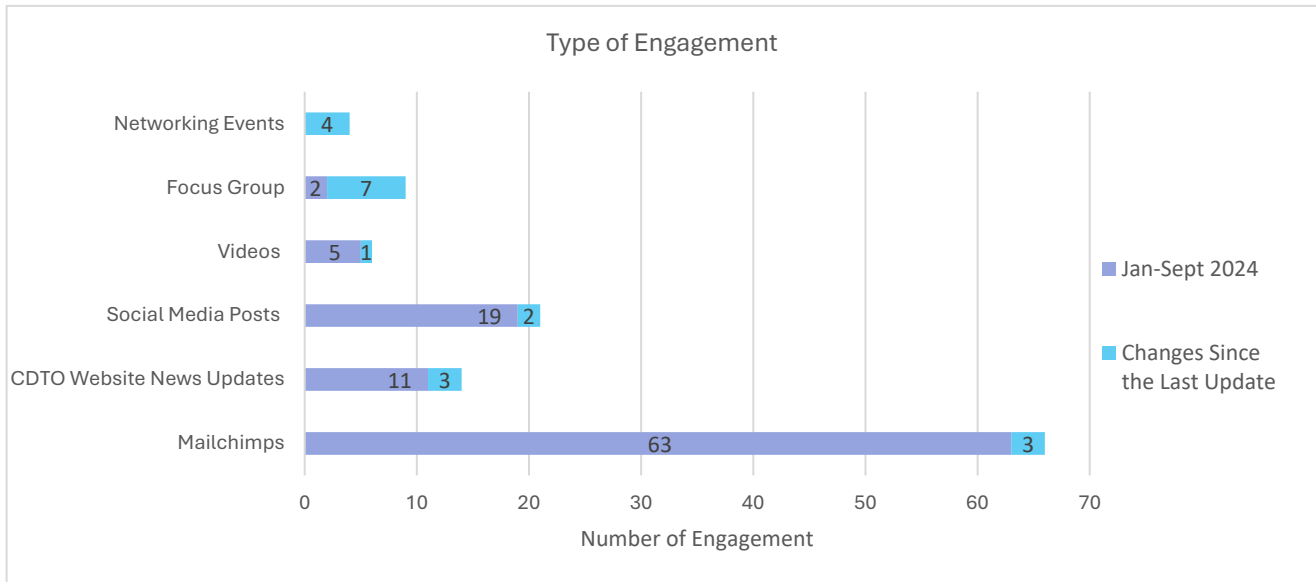
Not yet started - Survey for distribution to new RDTs under development.

KPIs Report: System Partner Engagement & Collaboration

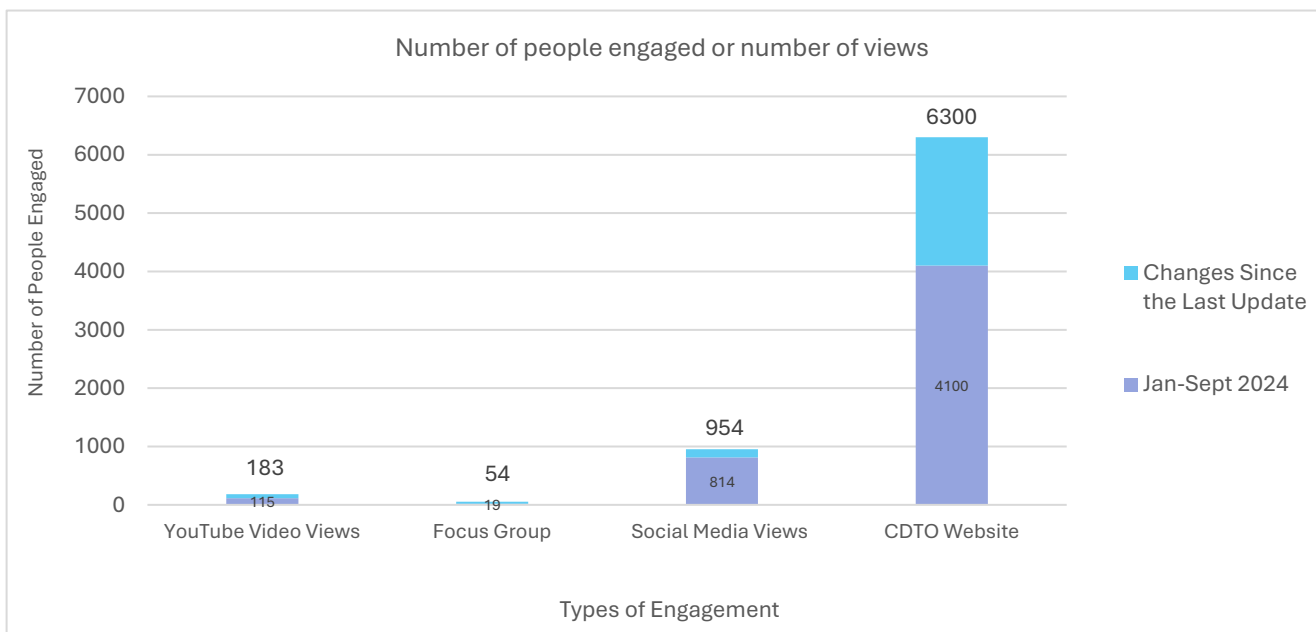


ENGAGEMENT

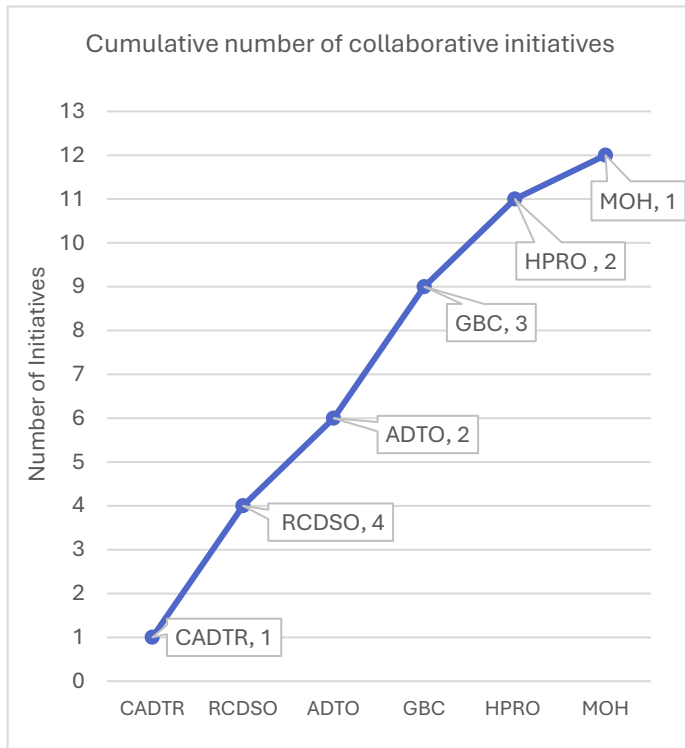
Engagement Report



Engagement Effectiveness



Number of collaborative initiatives with system partners



Collaborative initiatives in 2024:

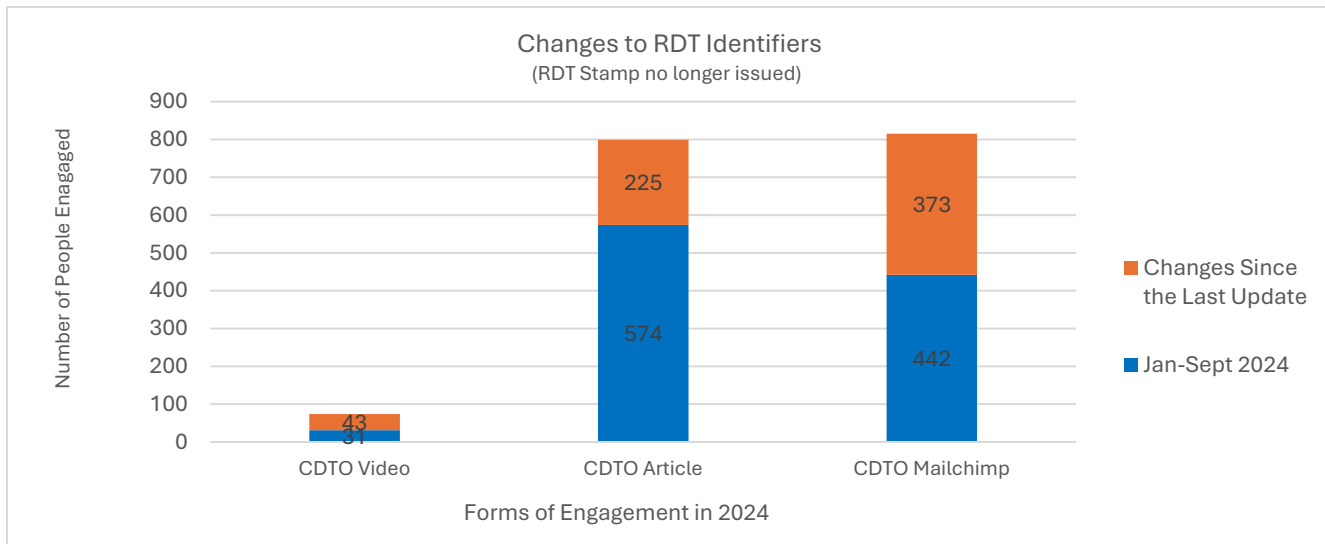
- **CADTR:** Prior Learning Assessment and Recognition (PLAR) development
- **RCDSO:**
 - Workshop for the TAIBU Screening
 - Communication: changes to RDT identifiers
 - Education: requirement for dentists to verify that the dental laboratory has an RDT listed on CDTO's Public Register
 - Joint response to an unauthorized practice complaint and provided supervision requirement to dentist
- **ADTO:** Networking events
- **GBC:**
 - Student Voluntary Registry, poster, and Q&A
 - Introduction to CDTO
 - Focus group on barriers to registration
- **HPRO:**
 - Bi-weekly registrar meetings
 - EDI network project
- **MOH:** IPAC working group

Progress report on Communication Strategy

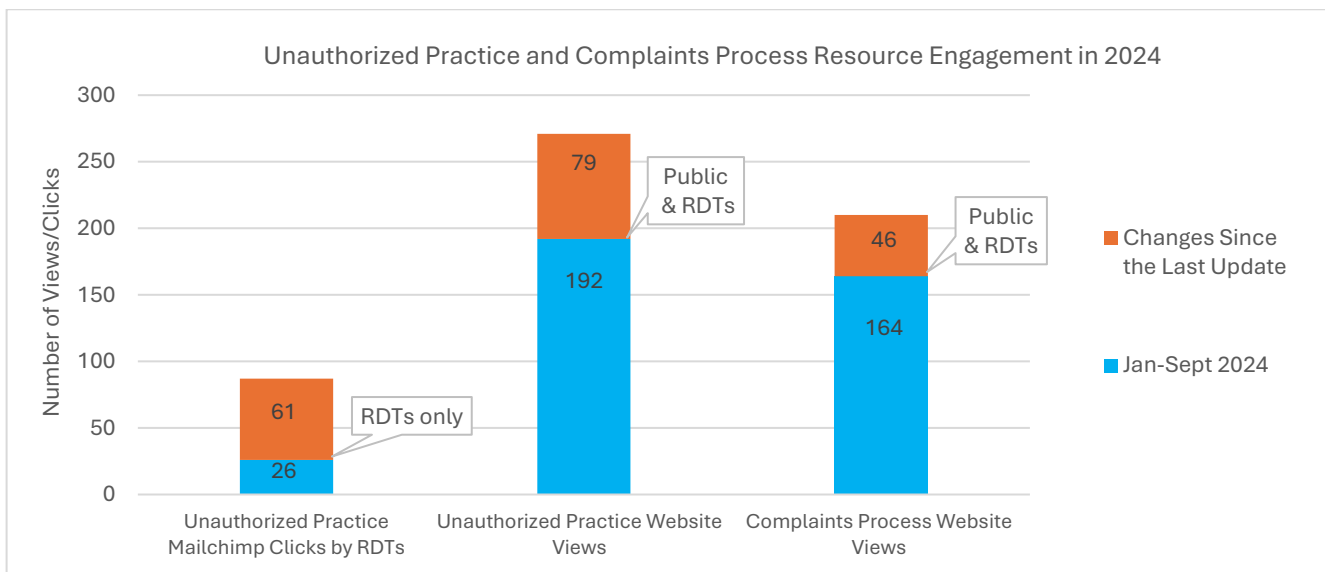
Project Summary	Status
Communication Strategy Review	
1) Establish Clear Objective and Scope	Completed
2) Assessment of Communication Channels	Completed
3) Updating Messaging Framework	Completed
4) Draft of Communications Strategy	Completed
5) Implementation of Feedback	In Progress
6) Board for Approval	Not Yet Started



Number of people for awareness campaigns conducted



Awareness rate on unauthorized practice/complaint processes



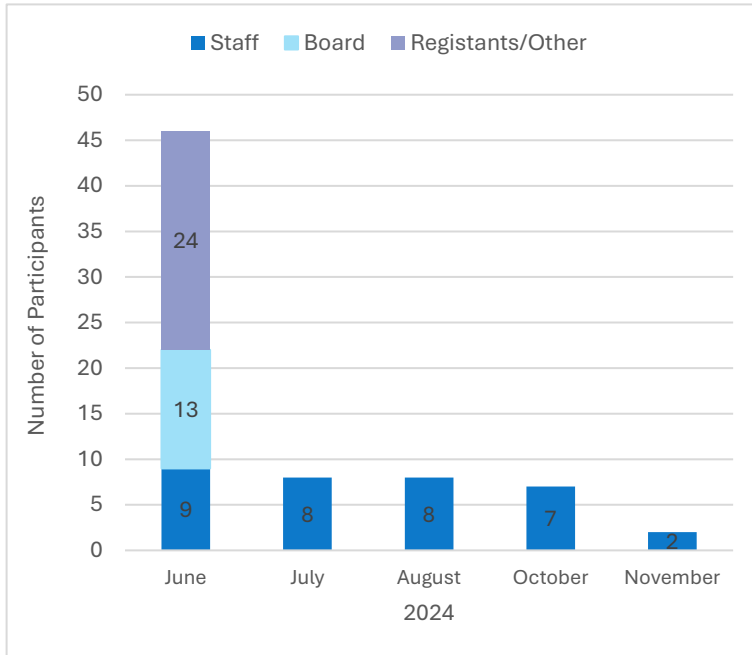
KPIs Report:

Equity, Diversity, Inclusion and Indigeneity (EDI-I)



REGULATORY
EXCELLENCE

Number of participants who have attended EDI learning opportunities



List of EDI Initiatives Completed in 2024:

1. Inclusivity – Decolonizing Workplace Practices
2. HPRO Race-Based Data Collection
3. EDI Workshop 1 & 2 (Internal)
4. TAIBU Screening “Working While Black”
5. EDI seminars at CNAR 2024
6. Collecting EDI data – CNO Workforce census

Progress towards developing /implementing EDI Action Plan

Project Summary	Status
EDI Action Plan	
1) Administered HPRO Survey to Staff	Completed
2) Identify Top Three Priority Areas for Next Fiscal Year	Completed
Priority Area 1 - Governance	
1) Update EDI Webpage with Land Acknowledgement	Completed
2) Implement EDI Lens Within Board and Committee Competencies	In Progress
3) Finalize EDI Policy	In Progress
4) Hire EDI Consultant	Not Yet Started
Priority Area 2 – Data Collection	
1) Establish Team Lead	Completed
2) Identify Data Collection Strategy	Completed Since the Last Update
3) Identify Data Collection Plan	In Progress
4) Implement Data Collection Plan	Not Yet Started
Priority Area 3 – Equity Impact Assessment	
1) Establish Team Lead	Completed
2) Identify Equity Impact Assessment Strategy and Plan	In Progress
3) Identify and consult with equity-seeking groups	In Progress
4) Implement Equity Impact Assessment Plan	Not Yet Started

KPIs Report: Governance

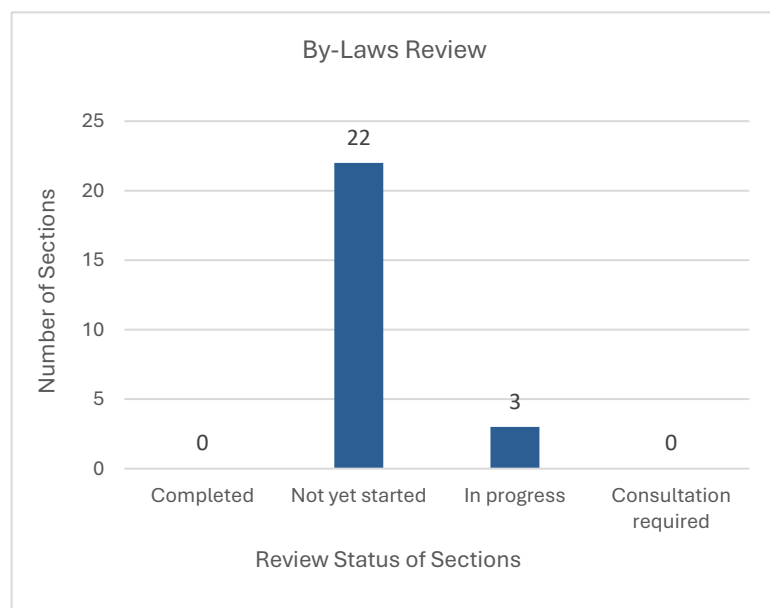


REGULATORY
EXCELLENCE

Progress report on governance modernization.

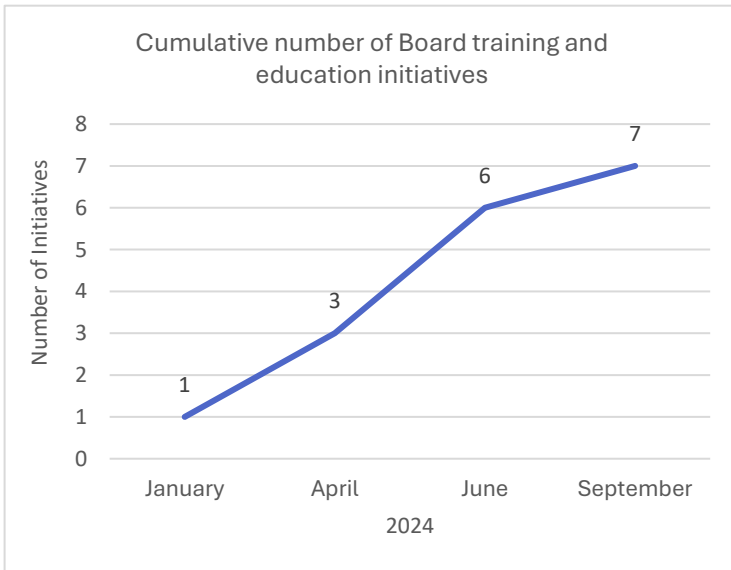
Project Summary	Status
By-Laws and Policy Review	
1) Establish a By-Laws and Policy Review Committee	Completed
2) Review all sections of the By-Laws	In Progress
3) Develop and revise policies to support the By-Laws	In Progress
4) Seek Board Approval (Final or for Circulation to System Partners)	Not Yet Started
Committee Competency Framework	
1) Conduct an Environmental Scan	Completed
2) Establish Committee Competency Framework	Completed
3) Seek Board Approval for Pilot	Completed Since the Last Update
4) Pilot Framework	In Progress
5) Pilot Evaluation and Revisions	Not Yet Started
6) Implement Committee Competency Framework	Not Yet Started
Board Evaluation	Not Yet Started
Succession Planning	Not Yet Started
CEO Performance Evaluation	Not Yet Started

Statistics on By-Laws Review Project:



Effectiveness, type of Board education, and training initiatives implemented.

Training Initiatives Implemented:

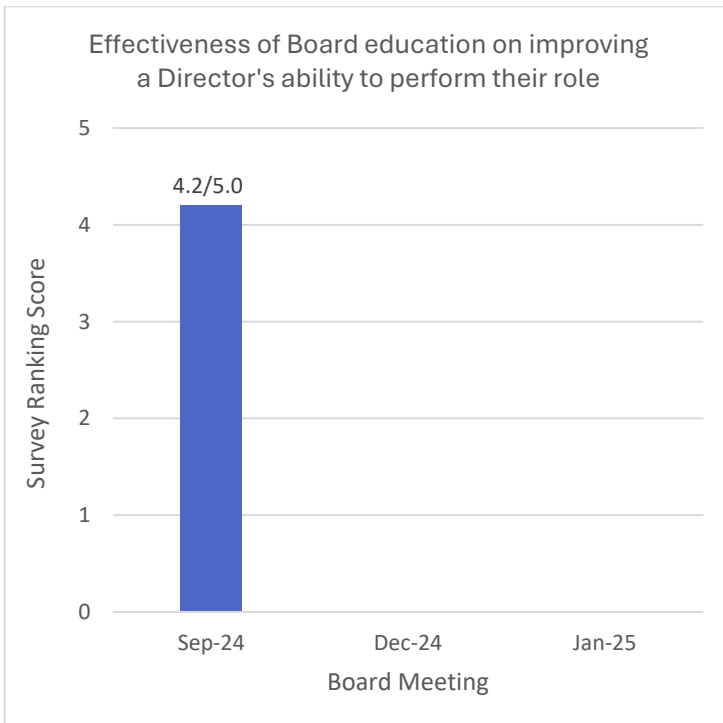


Type of Board Training:

Training and education initiatives completed in 2024:

1. Governance and Bias Training – Julie Maciura, SML Law
2. By-Laws, Governance, Board and Operational Policies – Judy Rigby, Registrar
3. Health Professions Regulators of Ontario – Beth Ann Kenny, HPRO
4. National Indigenous Peoples Day – Judy Rigby, Registrar
5. Decolonizing Workplace Practices – Inclusivity and Len Pierre Consulting
6. Finance and Audit – Judy Rigby, Registrar
7. Dental Technology System Partnerships – Karim Sahil, ADTO President

Board Education and Training Effectiveness:



KPI Report:
Emerging Issues



REGULATORY
 EXCELLENCE

Progress report on Emergency Class or Registration (ECR) readiness or implementation

Project Summary	Status
ECR Policy	
1) Research	Completed
2) Initial Draft Policy	Completed
3) Registration Committee Review	Completed
4) Policy Finalizing	Completed Since the Last Update
5) Final Committee Review	Completed Since the Last Update
6) Board Approval and Implementation	In Progress
ECR Supervision Guideline	
1) Research	Completed
2) Initial Draft Guideline	Completed
3) Registration Committee Review	Completed
4) Policy Finalizing	Completed Since the Last Update
5) Final Committee Review	Completed Since the Last Update
6) Board Approval and Implementation	In Progress



CDTO

Engagement and Collaboration



December 6, 2024



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

TAIBU Documentary Screening

- CDTO staff attended the screening of the documentary *Working While Black*, hosted by TAIBU Community Health and held at the RCDSO.
- The documentary provided an in-depth exploration of the emotional and professional challenges of workplace racism and highlighted the essential structural changes needed to foster more inclusive and equitable work environments.
- Staff were asked to reflect on what they watched/what they learned and how it can be applied to their work at CDTO



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

George Brown College

- CDTO Board members and staff met with the Acting Chair, instructors, and a group of 110 first and third year students.
- Focus groups were held to gather insights, resulting in actionable feedback.
- CDTO also briefly visited the second year students.
- 47 Students participated in the Voluntary Registry



George Brown College - Poster

Dental Technology Program Students (S100)

Why join CDTO's Voluntary Registry?

To Receive Informational Updates:

- National Examinations
- Provincial Licensing
- Regulatory Program Updates
- Continuing Education
- Mentorship

Join CDTO's Voluntary Registry!



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Stay Connected

Tel: (416) 438-5003 x 228

Email: registration@cdto.ca

Website: cdto.ca

@CDTOntario

@collegeofdentaltechnologists1726

CADTR | ACORTD

Tel: (416) 438-5003 x 221

Email: info@cadtr-acortd.com



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

George Brown College – Student Voluntary Registry



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario



Thank You for Joining CDTO's Voluntary Registry

Thank you for signing up for the voluntary registry and participating in the presentations held in September. Your engagement and interest were truly appreciated, and we're excited about the opportunity to support you further.

As promised, we have compiled answers to the questions raised during the presentations. You can access the responses through the following link:

[Answers to Your Questions](#)

Additionally, we encourage you to explore The Bridge, a valuable resource designed to share information with you. View The Bridge here:

[CDTO Fall Bridge](#)

Encourage your friends to join the registry to receive answers to their questions and access valuable resources like The Bridge.

If you have any further questions or need additional assistance,

Mailchimp Statistics:

- Opens: 42
- Clicks: 15



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

ADTO – Networking Event

- ADTO presented 10 newly registered members
- CDTO proudly presented certificates to 9 of those individuals, celebrating their accomplishment and welcoming them to the profession.



Spectrum Day



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Spectrum Day Stats

- 3,700 attendees, speakers, exhibitors, and students
- 289 were Registered Dental Technologists (RDTs) and Certified Dental Technicians (CDTs)
- Engage with over 80 attendees during the event
- 42 attendees participated in CDTO Spectrum Day Survey
 - 14 RDTs, 2 Dentist, 12 Dental Hygienist, 10 Students, 1 DLA, 3 Other

Spectrum Day SWAG



CDTO Postcard



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

The face behind the Smile

FOR MORE INFORMATION, SCAN THE QR CODE TO VISIT OUR WEBSITE



About the RDTs

Registered Dental Technologists (RDTs) of the College of Dental Technologists of Ontario are dedicated to delivering high quality and ethical services to dentists, and other regulated health professionals, and their patients.

RDTs are committed to providing excellent dental technology services, leveraging their technical expertise, precision, and artistic creativity.

LEARN MORE



Website: cdto.ca
Email: info@cdto.ca

Who are we?

The College of Dental Technologist (CDTO) is a governing body established by provincial legislation to regulate those who practice dental technology in Ontario.

Our Mandate

Our mandate is to serve and protect the public interest through providing leadership and setting quality standards through self-regulation for RDTs in Ontario. The CDTO fulfills its mandate to protect the public interest in variety of ways.

For example, it ensures that individuals seeking registration to practice dental technology in Ontario meet specific education and qualification requirements.

What they do?

RDTs craft crowns, bridges, dentures, orthodontics, implants, and other dental devices. As regulated healthcare professionals, they are a trusted face behind your smile.

To qualify as an RDT, individuals must complete an approved program in Canada or any oral health program that is substantially equivalent, pass the national entry-to-practice written and performance-based competency assessments, and meet the requirements set by the CDTO.

Training



Anatomy and physiology of the mouth and associated structures.



Physical and chemical characteristics of dental materials used for dental appliances.



Physiological functioning of these devices in the mouth.



Techniques and procedures necessary for the design, fabrication, modification, and repair of dental prostheses and orthodontic devices.



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario



Equity, Diversity, Inclusion Updates: Training and Outreach



EDI Training

EDI Training Module - Overview

What: Looking to implement EDI-based training modules for Board members and non-Board committee members to complete during onboarding process

Purpose: To educate the Board and Committee members on equity, diversity, and inclusion concepts, empowering them to lead effectively in alignment with the College's vision and core values

Alignment with Strategic Plan: Regulatory excellence in EDI-I and governance

Delivery Method:

- Online video format

EDI Training Module - Progress

Where We Are:

1. Conducted environmental scan of HPRO colleges implementing EDI-focused training modules
2. Reached out to specific HPRO colleges to establish connections and gain insights into their current progress
3. Collated list of topics used by HPRO colleges to implement EDI Training Modules
4. Modules will be tailored to meet the needs of the College and within committed strategic initiative projects funding

EDI Training Module - Progress

Module 1 – Introduction to EDI Foundational Concepts

- Currently being developed and tailored to fit the needs of the College.
- It is expected to be completed in January 2025 and piloted with the Patient Relations Committee in February 2025.
- This module will focus on foundational EDI concepts including:
 - What is EDI? Why EDI is important to our work as a health regulator?
 - An overview of what we have accomplished
 - Our current EDI strategy and goals
 - How we plan to maintain our EDI focus

EDI Training Module

List of Topics For Future Module(s) – not exhaustive:

- Unconscious Bias & Bias Awareness
- Intersectionality & Allyship
- Truth and Reconciliation
- Anti-Racism in Healthcare

EDI Training Module - Feedback

What is something you want to see included in these EDI Training Modules? Do you believe something is missing from this list?

EDI External Partnership and Outreach

TAIBU Workshop

What: CDTO Staff were invited to participate in an in-person screening and Q&A session for “Working While Black” hosted by TAIBU Community Health and RCDSO

Workshop Goals:

- TAIBU – Educate attendees through lived experience on the challenges Black-identifying populations face in the workplace
- CDTO – Forge a connection with an equity-seeking group to support our EDI pillar of external partnership and outreach while also educating staff



TAIBU Workshop: Key Takeaways

What Staff Learned:

Continuous Learning and Self-Awareness

- There is always more to learn about equity and inclusion, and we must remain open to recognizing and addressing our own biases.

Understanding The Realities of Racism

- Personal stories and discussions highlighted the ongoing challenges faced by Black individuals in the workplace, underscoring the importance of empathy and recognition of systemic racism.

Fostering Authenticity and Diversity

- Embracing true diversity means allowing individuals to bring their authentic selves to work, rather than conforming to rigid expectations of behavior and appearance.

TAIBU Workshop: Key Takeaways

What Information Can We Use At The College:

Continuous Reflection and Feedback

- It's crucial to regularly evaluate processes and seek feedback to identify and break down barriers, recognizing that meaningful change requires long-term, intentional effort.

Holistic Approach to Change

- Real, lasting change must involve examining all aspects of the organization, both internally and externally, including partnerships and collaborations.

Self-Awareness and Positive Communication

- Understanding and addressing personal biases is essential to creating a positive work environment while maintaining fairness and objectivity in all communications with colleagues.

Questions?



Board Report

Date: December 6, 2024

SUBJECT: Election of Officers and Executive Committee Members
INITIATED BY: By-Laws and Policy Review Committee

PURPOSE:

The Board is asked to approve changes to Section 6 of the By-Laws, Election of Officers, and Policy 6.1 of the Governance Policy Manual, Officer Election.

PUBLIC INTEREST RATIONALE:

The By-Laws and Policy Review Committee was appointed by the Board on April 27, 2024 to review CDTO's By-Laws and policies for governance modernization. This review ensures that the College can respond to emerging issues and changing public expectations in a timely manner and that its processes are clear and transparent.

INFORMATION & CONSIDERATIONS:

The Committee is proposing changes to the Elections of Officers and Executive Committee members' process to improve clarity on the process and consider issues previous elections may have faced. These changes fall under section 94(1)(e) of Schedule 2 to the *Regulated Health Professions Act, 1991* and are not required to be circulated to registrants for feedback. If the changes are approved by the Board, they will be implemented for the next elections held in January 2025.

Changes were proposed to the By-Laws and accompany policy. The steps taken in the By-Law review are:

1. Reviewed the equivalent By-Laws and policies of a selected number of regulatory health colleges and analyzed the results against CDTO's By-Laws.
2. Proposed changes are reviewed by the By-Laws and Policy Review Committee and approved for review by legal counsel on August 8, 2024.
3. Legal counsel review by Erica Richler of SML.

4. Final proposed changes are approved by the By-Laws and Policy Review Committee on November 18, 2024 and recommended to the Board for approval.

A summary of the improvements to the process are:

1. Clarifying in the By-Laws that the remaining Executive Committee members, those who are not Officers, are also elected to their position.
2. Including a procedure for the removal or filling of a vacancy for an Officer (same as that for the Vice-Chair).
3. Clarifying that when a majority vote is not won, and a tie occurs between the lowest votes that these candidates would be dropped from the ballot.
4. Clarifying that should only one candidate be left on a ballot after dropping those with the lowest votes, they are acclaimed.
5. Simplifying the process for the remaining Executive Members by allowing multiple candidates to be placed on one ballot and the positions won by the most votes.

DECISION(S) SOUGHT:

- 1) **THAT** the Board approves the changes to Section 6 of the By-Laws and Policy 6.1 of the Governance Policy Manual, Election of Officers and Executive Committee Members.
- 2) **AND THAT** the changes take effect immediately.

ATTACHMENTS:

Proposed Changes to Section 6 of the By-Laws – Elections of Officers

Proposed Changes to Policy 6.1 of the Governance Policy Manual – Officer Election

Section 6: Election of Officers and Executive Committee Members

Current By-Law Provision	Rationale	Proposed Changes
<p>6.01 – Eligibility for Nomination Only a Director of the Board is eligible for nomination or election as an officer of the College.</p>	<p>Clarity is improved that the Executive Committee members are also elected.</p>	<p>6.01 – Eligibility for Nomination Only a Director of the Board is eligible for nomination or election as an officer of the College and as a member of the Executive Committee.</p>
<p>6.02 – Election Procedure At the first regular Board meeting after the elections for Elected Directors, the Board shall elect by secret ballot from among those Directors eligible for election, the Chair, Vice-Chair and any other officer positions, in accordance with these By-Laws and the “Process for Election of Officers” set out in Schedule 1.</p>	<p>Article 5.01 sets out who the Officers of the College are and those positions do not need to be listed.</p> <p>Schedule 1 of the By-Laws is repealed, and reference made to Board policy (Proposed changes are also made to Section 6.1 Officer Election of the Governance Policy Manual).</p>	<p>6.02 – Election Procedure At the first regular Board meeting after the elections for Elected Directors, the Board shall elect the Officers of the College as set out in article 5.01 and members of the Executive Committee in accordance with the policies established by the Board.</p>
<p>6.03 – Removal of the Chair or Vice-Chair The Chair and/or Vice-Chair may be removed from office by a resolution adopted by not less than two-thirds of the Directors present and voting subject to the following criteria:</p> <ul style="list-style-type: none"> (i) The Chair and/or Vice-Chair, as the case may be, has been given advance notice of the resolution consistent with the notice period required for Board meetings; (ii) The resolution is presented at a Board meeting; (iii) The Registrar shall preside over the resolution; (iv) The vote regarding this resolution shall be taken by secret ballot; (v) Following the tally of the vote and the report to the Board, the Registrar shall ensure that the ballots are destroyed. 	<p>The same process for the removal of the Chair and Vice-Chair should apply to the removal of any other officer.</p> <p>The circumstances and the process for removal in sections (i) to (v) are set out in 3.5 Registrar, Specific Responsibilities of the Governance Policy Manual.</p>	<p>6.03 – Removal of an Officer The Chair, Vice-Chair and/or any other officer may be removed from office by a resolution adopted by not less than two-thirds of the Directors present in accordance with the policies established by the Board.</p>

Current By-Law Provision	Rationale	Proposed Changes
<p>6.04 – Filling Vacancies (Chair) In the event that the Chair is removed from office, resigns or dies or the position of Chair becomes vacant for any reason, the Vice-Chair shall become the Chair for the remaining term of the office and the office of the Vice-Chair shall become vacant.</p>	<p>Changing “In the event that” to “If”.</p>	<p>6.04 – Filling Vacancies (Chair) If the Chair is removed from office, resigns or dies or the position of Chair becomes vacant for any reason, the Vice-Chair shall become the Chair for the remaining term of the office and the office of the Vice-Chair shall become vacant.</p>
<p>6.05 – Filling Vacancies (Vice-Chair) In the event that the Vice-Chair is removed from office, resigns or dies or the position of Vice-Chair becomes vacant for any reason, the Board shall elect a new Vice-Chair to hold office for the remainder of the term.</p>	<p>Changing “In the event that” to “If”.</p> <p>Broaden the language to include any other officer as an election would be held for them under the same conditions as for the Vice-Chair.</p> <p>Reference is made to Board policy (Proposed changes are also made to Section 6.1 Officer Election of the Governance Policy Manual).</p>	<p>6.05 – Filling Vacancies (Vice-Chair and Other Officers) If the Vice-Chair or any other officer is removed from office, resigns, dies or the position becomes vacant for any reason, the Board shall elect a new Vice Chair and/or officer to hold office for the remainder of the term in accordance with the policies established by the Board.</p>

Current By-Law Provision	Rationale	Proposed Changes
<p>Schedule 1 – Process for Election of Officers</p>	<p>Reference is made to Board policy (Proposed changes are also made to Section 6.1 Officer Election of the Governance Policy Manual).</p>	<p>Repeal.</p>

6.0

6.1 Officer Election Election Procedure for Officers and Executive Committee Members

Policy Section: General

Introduction

The College's Board of Directors must have a Chair and Vice Chair under the Dental Technology Act, 1991 and in accordance with Article 5 of the College's By-Laws, the Officers of the College are the Chair and the Vice Chair, and any other Officers the Board may determine. The Health Professions Procedural Code requires the College to have an Executive Committee which, as per Article 13.01 of the College's By-Laws, is composed of the Chair and Vice Chair and three Directors. Of the five members of the Executive Committee, three must be Elected Directors and two must be Public Directors.

To serve as Chair, Vice-Chair, or a member of the Executive Committee, a Director must be elected by ~~their peers on~~ the Board.

Elections are held at the first regular Board meeting ~~subsequent to~~after the election for Elected Directors.

Eligibility and Nomination

Only a Director is eligible for nomination or election as an Officer of the College or as a member of the Executive Committee.

Electoral Procedure

The election ~~for Board shall proceed~~procedure is as follows:

1. the elections ~~shall~~must be supervised by the Registrar, who may be assisted by scrutineers;
2. prior to the first regular meeting ~~subsequent to~~after the election for Elected Directors, the Registrar shall invite all Directors wishing to stand for election to the offices of Chair and Vice-Chair and as a member of the Executive Committee to notify the Registrar in writing;
3. at the meeting, the Registrar shall announce the names of eligible candidates, the position they are running for and take any at which point additional nominations ~~may also be made~~ from the floor;

4. a Director may withdraw as a candidate at any time before the election takes place.
5. the election of the Chair will take place first.
 - a. before the vote, all candidates who have indicated their interest for the position of Chair will be given a period not exceeding ~~five~~ three (3) minutes (in ~~an order determined by lot~~ alphabetical order by last name) to speak to their suitability to the position ~~they are running for~~;
 - b. where there is only one candidate for the position, that person is acclaimed.
 - c. if there is more than one candidate for the position, voting shall be conducted by secret ballot by the Directors present and decided by a majority vote;
 - d. where no candidate receives a majority vote, the candidate receiving the lowest number of votes will be dropped from the ballot, and the Board shall by secret ballot vote on the remaining candidates until one candidate receives a majority vote. If more than one candidate is tied for the lowest number of votes, those candidates tied for the lowest number of votes will be dropped from the ballot, and the Board shall by secret ballot vote on the remaining candidates until one candidate receives a majority vote. If only one candidate remains after dropping the candidates with the lowest number of votes, the remaining candidate is acclaimed.
 - ~~4.e.~~ if there is a tie for the most votes between the candidates for the position, a subsequent vote will be held. Prior to voting, the candidates may speak for another three (3) minutes. If this vote results in a tie, the winning candidate will be determined by the Registrar by lot (i.e. by drawing a name at random using a method selected by the Registrar).
- ~~5.~~ voting shall be conducted by secret ballot by those present and decided by majority;
 - f. the Registrar ~~shall~~ will tabulate, record, and report the results, however, the number of votes accorded to each candidate shall not be disclosed;
6. once the Chair is elected, the Vice-Chair will be nominated and elected in the same manner as the Chair.
7. once the Vice-Chair has been elected, the remaining Executive Committee positions will be filled in the same manner as the Chair and Vice-Chair with the following modifications:
 - a. where two or more positions are available for a Public or Elected Director, they may be elected on one ballot.
 - b. the Board will elect the position(s) to be filled by Public Directors first.
 - c. once the Public Director position(s) are filled, the Board will elect the position(s) to be filled by Elected Directors.
 - ~~6.d.~~ the required number of candidates who receive the most votes cast on the ballot will be declared elected and a majority vote is not required.
8. once the election is completed, the Registrar shall call for a motion to destroy the ballots.
- ~~7.9.~~ the elected members of the Executive Committee may briefly address the Board if they wish.

~~This procedure shall first be executed for the Chair, followed by the Vice-Chair, other Officers of the College, and the remaining Executive Committee positions.~~

~~Subtleties~~

- ~~1. when only one nominee is eligible for a position, that person shall be elected.~~
- ~~2. where no candidate received a majority vote, the candidate with the fewest votes shall be disqualified and an additional vote, by secret ballot, shall be executed until one (1) candidate receives the majority vote.~~
- ~~3. in the event of a tie between the final two candidates for a position, a second ballot shall be executed and both candidates may speak for a second five (5) minute period.
 - ~~a. a persistent tie vote shall be broken by the Registrar by lot.~~~~



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Committee Report

Date: December 6, 2024

SUBJECT: Emergency Class Policy and Supervision Guidelines
INITIATED BY: Registration Committee

PURPOSE:

The Board is requested to review and approve the proposed Emergency Class policy and associated supervision guidelines to ensure clarity, compliance, and effective implementation in emergency situations.

PUBLIC INTEREST RATIONALE:

On August 31, 2024, the College's Registration Regulation was amended to establish the Emergency Class of Registration, a temporary class. In alignment with amendments to the Health Professions Procedural Code (the "Code") under Schedule 2 of the Regulated Health Professions Act, 1991 (RHPA), the Government of Ontario mandated that all Health Profession Regulatory Colleges create an Emergency Class of Registration. This ensures that health professionals can be registered rapidly during public health crises or other significant events, thereby ensuring Ontarians continue to receive safe, uninterrupted access to high-quality healthcare services.

INFORMATION & CONSIDERATIONS:

The Committee is proposing a policy that outlines the circumstances under which the College can issue Emergency Class certificates and expedite the registration process by permitting certain registration requirements to be waived. Additionally, guidelines are proposed to clarify the supervision expectations for Emergency Class Registrants (ECRs) and their supervisors.

The steps taken in the development of the policy and guidelines:

1. Reviewed the equivalent emergency class policy and supervision documents of a selected number of regulatory health colleges.
2. The initial draft of the policy and guidelines was reviewed and approved for further development by the Registration Committee on April 4, 2024.
3. Staff further refined the policy and guidelines, consulting SML legal counsel for review.
4. Final proposed changes were approved by the Registration Committee on November 22, 2024, and are now recommended to the Board for approval.

Key elements of Emergency Class Policy:

- Circumstances that trigger the Emergency Class
- Responsibilities of the Registration, Executive Committee, and the Board
- Registration considerations for applicants, including:
 - Returning/entering active practice (retired, resigned, inactive, out-of-province, dental technology students)
 - Timelines for applicants (retired, resigned, inactive, out-of-province)
- Waiving of registration-related fees during an emergency
- Ongoing assessment at each Board or Executive Committee meeting
- Process for resolving a declared emergency

Key elements of ECR Supervision Guidelines:

- Conditions for an Emergency Certificate of Registration as defined in the Registration Regulation
- Who can supervise ECRs:
 - General Certificate holders from the College or registrants of the Royal College of Dental Surgeons of Ontario (RCDSO)
- Roles and Responsibilities of Supervisors:
 - Must be physically present at the premises where the ECR is practising or be otherwise available in real time to consult with the ECR
 - Determine and provide the necessary oversight for the ECR to ensure public safety
- Roles and Responsibilities of ECRs:
 - May only practice dental technology under supervision
 - Inform clients that they are practising under supervision and use the specified title in section 10.2 (4) of the Registration Regulation
- Documentation
 - Signed Emergency Class Supervision Agreement
 - Maintain a record of the days worked or assigned to a given laboratory

DECISION(S) SOUGHT:

- 1) **THAT** the Board approves the Emergency Class Policy;
- 2) **AND THAT** the Board approves Supervision of Emergency Class Registrants (ECR) Guidelines;
- 3) **AND THAT** the changes take effect immediately.

ATTACHMENT(S):

Appendix 1 – Emergency Class Policy

Appendix 2 – Supervision of Emergency Class Registrants (ECR) Guidelines

REFERENCE:

[Registration Regulation](#) of the *Dental Technology Act, 1991* (O. Reg 874/93)



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Emergency Class Policy

[Policy No. REG03]

Policy Information	
Date of Approval:	Section:
Approved By:	Status:
Effective Date:	Last Review Date: New
Responsible Authority: Registration Committee	

I. Purpose:

This policy describes the circumstances when the College can issue Emergency Class certificates and is intended to expedite the registration process during emergency situations by permitting certain registration requirements to be waived. Nothing in this policy replaces or detracts from the requirements set out in the College’s Registration Regulation.

II. Definitions:

“**College**” or “**CDTO**” refers to the College of Dental Technologists of Ontario.

“**Academic**” refers to components of programs that are primarily instructional in nature. This can include courses, modules, lectures, tutorials, and other formats involving instruction within the context of a given program.

“**Board**” refers to the Board of Directors of the College.

“**Emergency Class**” refers to the emergency certificate of registration as set out in the Registration Regulation.

“**Executive Committee**” refers to the Executive Committee of the Board.

“**Government**” refers to the Minister of Health of Ontario.

“**Inactive Class**” refers to the inactive certificate of registration as set out in the Registration Regulation.

“Labour Mobility” refers to the provisions relating to out-of-province applicants as set out in section 22.18 of the *Health Professions Procedural Code*, which is schedule 2 to the *RHPA*, and section 8 of the Registration Regulation.

“RHPA” refers to the *Regulated Health Professions Act, 1991*, SO 1991, c 18.

“Registration Regulation” refers to Ontario Regulation 874/93 made under the *Dental Technology Act, 1991*, SO 1991, c 23.

“Work placement” refers to requirements in programs involving experiential learning or actual employment.

III. **Scope:**

This policy describes the circumstances when the College can issue Emergency Class certificates. This policy is only applicable during times of emergency as determined by either the Government or the Board of Directors of the College.

IV. **Policy Requirements:**

a. General Principles

- i. The College has a duty to regulate dental technology in the public interest and to assist with ensuring public safety. The College is a key player in safeguarding the supply of registered dental technologists in emergencies.
- ii. Under paragraph 1 of subsection 10.1 of the Registration Regulation, the Government can request that the College begin issuing Emergency Class certificates of registration.
- iii. The Emergency Class provision also delegates similar authority to the Board where it determines that there are emergency circumstances and it is in the public interest to issue Emergency Class certificates. In making this determination, the Board must consider all the relevant circumstances that impact the ability of applicants to meet the usual registration requirements, which can include the presence of a significant interruption in the processing of applications for registration to meet an identified public interest need.
- iv. In accordance with section 12(1) of the *Health Professions Procedural Code*, being Schedule 2 to the *RHPA*, the Executive Committee may also determine that the College should begin issuing Emergency Class certificates if the issue requires immediate attention between the meetings of the Board.¹

When the Emergency Class is in force, an applicant for a certificate of registration in the Emergency Class will be required to meet the registration requirements and conditions set out in the Registration Regulation.

¹ Per section 12(2) of the Code, if the Executive Committee exercises such a power, then it must report to the Board on its actions at the next Board meeting.

b. Triggering Emergency Class

For the Board or Executive Committee to trigger the Emergency Class under the Registration Regulation, it must be satisfied that all of the following criteria are met:

- i. There must be a current or imminent need to expeditiously register dental technologists to service the needs of the public.
- ii. The public and/or the healthcare system is negatively impacted by these circumstances*.
- iii. Immediate action is required to remedy the circumstances.
- iv. With the guidance of the Registration Committee, the Board or Executive Committee must be satisfied that other options do not suitably address the concerns identified and the Emergency Class is the best solution in the circumstances.
- v. It would be in the public interest to trigger the Emergency Class of certificate.

*These circumstances might include situations where:

- i. There is a significant interruption of a registration pathway leading to a lengthy delay for applicants in their registration; or
- ii. Any other emergency circumstance where it is in the public interest to issue emergency class of registration.

The Board or Executive Committee must be satisfied that these criteria are met before determining that “it is in the public interest to register dental technologists in the Emergency Class to address emergency circumstances” as stipulated in the Registration Regulation.

The College must take appropriate measures to inform the public of the emergency circumstances.

c. Registration Considerations – Emergency Class

During times of emergency and/or health crises, the Registration Committee may authorize the Registrar to waive certain registration requirements for registering applicants in the Emergency Class who meet the conditions detailed in this policy.

i. **Retired or Resigned Members:**

Previous registrants who have retired and/or resigned their certificate of registration with the College can apply by submitting an application for registration.

Applicants must have been in good standing with the College at the time of their retirement or resignation.

At the time of the application, applicants who have held a General certificate of registration less than three (3) years ago will be issued an Emergency certificate of registration. The certificate of registration may contain additional terms, conditions and limitations, including those previously held.

For applicants who have not held a General certificate of registration within the last three (3) to five (5) years, at the time of application, the Registration Committee grants the Registrar the authority to register the individual in the

Emergency Class. The certificate of registration may contain additional terms, conditions and limitations, including those previously held.

Applicants who have not held a General certificate of registration within five (5) years of the date of application will be referred to the Registration Committee for consideration for registration in the Emergency Class. If granted, the certificate of registration may contain additional terms, conditions and limitations, including those previously held.

ii. Inactive Class of Registration:

Registrants in the Inactive Class can apply for an Emergency certificate of registration depending on the length of time they have been in the Inactive Class.

At the time of the application, the registrant in the Inactive Class must be in good standing with the College.

At the time of the application, registrants who have held an Inactive certificate of registration for less than three (3) years will be issued an Emergency certificate of registration. The certificate of registration may contain additional terms, conditions and limitations, including those previously held.

For registrants who have held an Inactive certificate of registration for between three (3) and five (5) years, at the time of application, the Registration Committee grants the Registrar the authority to issue an Emergency certificate of registration. The certificate of registration may contain additional terms, conditions and limitations, including those previously held.

Registrants who have held an Inactive certificate for more than five (5) years of the date of application will be referred to the Registration Committee for consideration for registration in the Emergency Class. If granted, the certificate of registration may contain additional terms, conditions and limitations, including those previously held.

iii. Out-of-Province Applicants:

Out-of-province applicants wishing to register under a General certificate of registration may apply if they are eligible under the Labour Mobility provisions. Applicants under this category do not need to have attempted or successfully completed the College's Jurisprudence program.

Applicants applying under Labour Mobility will be required to:

- Hold an equivalent general certificate of registration in one of the provinces approved by the Government.
- Submit a written declaration stating that they have worked as a dental technologist/technician within the past three years and have no outstanding conduct issues.
- Provide evidence of good standing at the time of applying for registration with the College from each Canadian jurisdiction where the applicant is

currently registered. Evidence of good standing is valid for three (3) months.

- Commit to completing the College's Jurisprudence & Ethics examination within six (6) months after registration in the General Class.

iv. **Dental Technology Students:**

Dental Technology students enrolled in a recognized program wishing to register under the Emergency Class may apply if they are in good standing, are eligible to work in Canada, meet the minimum language requirements, and have completed and passed all academic (in class instruction) components of the program. The academic requirement can be met even if the applicant has not yet completed the work placement requirements, if any, that would be required for them to successfully complete the program. This is contingent on confirmation from the educational program, satisfactory to the College, that the applicant has completed all academic components of the program.

Dental Technology students who have not met these requirements are not eligible for registration with the College.

In addition to the requirements set out in section 10.4 of the Registration Regulation, Dental Technology students who have been granted an Emergency certificate of registration may be required to satisfy the regular requirements of a General certificate of registration before transferring to the General class.

d. **Registration-related Fees**

During an emergency, registration-related fees may be waived, at the discretion of the Registrar. The decision will be based on the circumstances of the emergency, as well as the need for qualified dental technologists in the workforce and will be balanced against the necessity of finances for the College to continue operating effectively.

e. **Continuous assessment**

Once the Emergency Class is in force, the Registration Committee will monitor the situation and provide regular updates to the Board including but not limited to applications received, processing times, and emerging issues. An assessment of the emergency circumstances will be made at each Board or Executive Committee meeting while the Emergency Class is in effect.

f. **Resolving an emergency**

If it is determined that the criteria set out above can no longer be met, the Registration Committee may recommend that the Board or Executive Committee pass a motion to direct the College to cease issuing Emergency certificates of registration.

Pursuant to subsection 10.3 (2) of the Registration Regulation, all Emergency certificates of registration will expire six months after the finding of the Government, the Board, or the Executive Committee that the emergency circumstances have ended.

V. Legislative References, Associated Policies, and Procedures

Regulated Health Professions Act, 1991, SO 1991, c 18.
Ontario Regulation 874/93

VI. Review:

This policy is subject to review every three (3) years or:

- a. As determined by the Registrar/CEO
- b. As determined by the Responsible Authority; or
- c. In response to legislative changes.

VII. Version History:

NEW POLICY

DRAFT



College of Dental Technologists of Ontario
Ordre des Technologues Dentaires de l'Ontario

Supervision of Emergency Class Registrants (ECR) Guidelines

Purpose

These guidelines supports Registered Dental Technologists (General) and Emergency Class Registrants (ECRs) in fulfilling the conditions of an emergency certificate of registration set out in section 10.2 of the College's Registration Regulation.

Definitions

"Canadian Alliance of Dental Technology Regulators" or "CADTR" refers to the federal alliance of dental technology regulators across Canada. The College is part of this organization.

"College" or "CDTO" refers to the College of Dental Technologists of Ontario which is the Ontario health professional regulator for dental technologists.

"Emergency Class Registrant" or "ECR" refers to a registrant of the College of Dental Technologists of Ontario who holds an emergency certificate of registration.

"Emergency Class Supervision Agreement" refers to an agreement between an Emergency Class Registrant and a qualified supervisor setting out the scope of supervision that the supervisor will provide.

"good standing" for a registrant of the College includes but is not limited to: not being the subject of any discipline or fitness to practice order or of any proceeding, ongoing investigation, interim order or agreement as a result of a complaint, investigation or proceeding and having current registration permitting practice in dental technology.

"Royal College of Dental Surgeons of Ontario" or "RCDSO" refers to the Ontario professional regulator for dentists.

Conditions of an Emergency Certificate of Registration

Conditions of an Emergency Certificate of Registration set out in the Registration Regulation include:

1. ECRs must practise the profession only under the supervision of a registrant of the College with a general certificate of registration or a registrant of the RCDSO.
2. ECRs must at all times when providing professional services identify themselves as practising under supervision and use one of the following permitted titles:
 - i. “dental technologist (emergency)”
 - ii. “registered dental technologist (emergency)” or
 - iii. “RDT (emergency)”.

ECRs can practice the full scope of dental technology, which is to design, construct, repair or alter a dental prosthetic, restorative or orthodontic device. Some degree of supervision is necessary as ECRs may not have successfully completed the entry-to-practice examinations and/or Jurisprudence requirements.

Who can supervise Emergency Class Registrants?

For supervision of an ECR the supervisor must:

- Hold a General Certificate of Registration with the College or be a registrant of the RCDSO.

In addition, the supervisor should:

- Be in good standing.
- Not have any terms, conditions, or limitations on their certificate of registration that prevents them from supervising and/or practicing independently.
- Have agreed to supervise the ECR.
- Have a signed Emergency Class Supervision Agreement in place with the ECR being supervised.
- Have a legitimate connection to the place of business where the ECR will be supervised as reported on the public register.

Roles and Responsibilities of Supervisors:

The registrant providing supervision should:

- Be physically present at the premises where the ECR is practising or be otherwise available in real time to consult with the ECR.
- Determine the amount of oversight that an ECR will require to ensure public safety and provide that oversight.

Supervisors should supervise ECRs only in the dental technology disciplines in which they have the knowledge, skills, and judgement to practice safely. Supervisors must comply with the legislation, regulation, by-laws, and standards governing the practice of Dental Technology in Ontario.

Supervisors should:

- i. Ensure that the supervised ECR has the knowledge, skill, and judgement to deliver safe and competent care. To assist in determining the level of oversight needed, it may be helpful for the supervisor to consult CADTR's [National Essential Entry-to-Practice Competencies](#).
- ii. Ensure that they are available to assist or consult with the ECR as needed.
- iii. Have a signed Emergency Class Supervision Agreement in place with each ECR being supervised.
- iv. Report any concerns about an ECR to the College regarding professional misconduct, incompetence, professional negligence, sexual abuse, or concerns regarding incapacity.
- v. Maintain a record of the days ECR worked or assigned to a given laboratory and provide it to the College on request.
- vi. Inform the ECR if they are no longer eligible or available to supervise.

Roles and Responsibilities of Emergency Class Registrants:

ECRs may only practice Dental Technology under supervision. An ECR is not permitted to supervise the practice of dental technology.

ECRs are required to:

- i. Comply with legislation, regulation, by-laws, and standards governing the practice of Dental Technology in Ontario.
- ii. Inform clients that they are practising under supervision prior to providing dental technology services and use the title "dental technologist (emergency)", "registered dental technologist (emergency)" or "RDT (emergency)" when identifying themselves.
- iii. Identify their intended place(s) of business using the College's Registrant Services portal.
- iv. Ensure that they have adequate supervision at each place of business which they intend to practise.
- v. Update any changes to their place(s) of business, supervisor(s), identity, address, contact information, and practice in other jurisdictions within 30 days of the change using the College's Registrant Services portal.
- vi. Practice in accordance with the terms, conditions, and limitations on their certificate of registration.

In addition, ECRs should:

- i. Confirm that the supervisor is eligible to practice and in good standing with the College or Royal College of Dental Surgeons of Ontario.
- ii. Have a signed Emergency Class Supervision Agreement in place before beginning to practise with each supervisor.
- iii. Maintain a record of the days worked or assigned to a given laboratory and provide it to the College on request.

Documentation:

Prior to beginning practice, the ECR and their intended supervisor must agree on the scope of the supervision that will be provided by the supervisor, this may be done through an Emergency Class Supervision Agreement. The document setting out the Emergency Class Supervision Agreement must be signed by the supervisor and ECR.

Nothing in this document replaces or detracts from the requirements set out in the [College's Laboratory Supervision Standards](#).



Board Report

Date: December 6, 2024

SUBJECT: Registrar's Report
PREPARED BY: Judith Rigby, Registrar & CEO

PUBLIC INTEREST RATIONALE

Regular reports to the Board on College activities and performance support their oversight role to ensure the College is fulfilling its public interest mandate.

GOVERNANCE

Equity, Diversity and Inclusion

- We are pleased to announce the recent update of the Equity, Diversity, and Inclusion (EDI) webpage on [CDTO's website](#). The enhanced page now features a comprehensive drop-down menu covering key areas, including "EDI Strategy and Accountability," "Anti-Racism," "Truth and Reconciliation," "EDI Glossary," and "Resources." We encourage you to explore these sections to learn more about the College's commitment to advancing Equity, Diversity, Inclusion, and Reconciliation initiatives.

Accountability Reporting

- The Ministry of Health is committed to growing Ontario's health workforce and has requested that HPRO Colleges provide registration data to support red tape reduction, creating new pathways to registration and breaking down barriers for highly trained international professionals to practice in Ontario. CDTO submitted the Q1 report, April to June 2024, on August 14, 2024, along with feedback which was collated and submitted by HPRO. On November 15, 2024, the Minister extended appreciation for the feedback and provide a revised reporting template. Q2 report submission deadline has been extended by one month to December 31, 2024. The College's work on the ADT II project to develop a Prior Learning Assessment Recognition for internationally trained dental professionals aligned with the MOH.

Public Appointments

- Through the collaborations of CDTO and the Public Appointments Unit of the Ministry of Health, we have successfully gained the re-appointment of Tayla McGuckin, Nawaz Pirani, and

Rehan Siddiqui for a term of three years. Their continuation on the Board ensures that CDTO continues to benefit from their expertise and engagement to accomplish our strategic priorities and serve in the best interest of the public. We look forward to a productive three years progressing CDTO forward.

Board Elections

- District 1, Toronto and Peel Region, elections closed on October 1, 2024, with two candidates elected by acclamation. Congratulations to James Matera, RDT, and Franz Yagin, RDT, who will be serving on the Board for a second 3-year term starting in January 2025.
- Melanie Liassides, RDT chose not to re-nominate herself for District 1 due to personal and professional priorities. This was Melanie's second term on the Board, and we thank her for her invaluable contributions to the Board and its Committees. A By-election was called for the third position with three candidates nominated. Voting closes on December 9, 2024.
- After Jill Langford's retirement on September 1, 2024, a By-Election which closed on November 20, 2024, was called to fill the vacant position for District 3. Congratulations to Clark Wilson for being elected to the role. Clark has previous experience on the Board and brings a wealth of expertise as an RDT.

REGULATORY ENVIRONMENT AND PROGRAMS

Ministry of Health

- [Ontario Continuing to Support and Grow its Nursing Workforce](#)
 - To build on the nearly 100,000 new nurses the province has added to the workforce since 2018, the government is investing \$510 million over the next three years to give more than 20,000 health care learners the opportunity to work in hospitals and home and community care organizations by the end of 2027.
 - The Enhanced Extern Program (EEP) helps hospitals hire qualifying nursing, medical, respiratory therapy, paramedic, physiotherapy, and occupational therapy students and internationally educated nurses to work in a hospital in an unregulated capacity, under the supervision of regulated care providers.
 - The Supervised Practice Experience Partnership (SPEP) program provides internationally educated nurses the opportunity to demonstrate their current nursing knowledge, skill and language proficiency while working to meet the requirements to enter practice as a nurse.

2024-2025 Annual Renewals

- On June 27, 2024, the College sent the annual renewal notice to 525 RDTs, of which 498 are practicing and able to supervise. As of November 5, 2024, we have seen a net decrease of 36 RDTs, or negative growth in the profession of 6.86%. Today, we have 465 practicing RDTs from a total registrant base of 489.

- During the annual renewal, 26 RDTs have resigned/retired ([click here for a list of names](#)) of which sixty-five percent (65%) are over 60 years of age. In addition, 15 RDTs were suspended due to non-payment of fees ([click here for a list of names](#)).

Quality Assurance (QA) Summary Professional Development Profile (SPDP)

- At the September 27, 2024, Open Executive Committee meeting, there was discussion about opportunities to improve timely professional development profile submissions in addition to the penalty fees being enforced. Staff agreed to seek a legal opinion regarding the authority to inform employers about upcoming and/or overdue QA SPDP submissions to improve compliance rates.
 - Legal counsel's opinion is that generic emails can be sent outlining the deadline, the general need for compliance and a suggestion that employers remind their RDTs of the obligation. However, this communication should not mention specific names or identify individual registrants, as doing so would disclose confidential information about their participation in the QA program and violates the confidentiality provisions outlined in sections 83 and 83.1 of the Code, Schedule 2 to the RHPA.

SYSTEM PARTNERSHIPS

Canadian Alliance of Dental Technology Regulators (CADTR) – ADT Phase II update

- On September 24, 2024, we hosted a virtual meeting with the directors of the approved Dental Technology programs across Canada introducing them to the objectives and outcomes of the project and inviting them to share information on Prior Learning pathways and education upgrading opportunities. Ongoing collaboration is key to developing upgrading tools, such as bridging courses, for applicants who may not be successful initially.
- Two ADT SC meeting were held in October 2024 (in-person in Ottawa) and November 2024 (virtual). Dr. Paul O'Brien, Registrar for the Newfoundland Labrador Dental Board attended expressing interest in participating in the national PLAR development.
- Construct Measures presented their findings of the environmental scan conducted with 10 organizations in and outside Canada. Five recommendations spanning defining PLAR as a credentialing pathway, the eligibility criteria, assessment approach and outcomes report with gap identification and remediation. A call for interest has been issued to recruit 10 practising RDTs across Canada, 2 from Ontario, who will join the consultants to develop the PLAR tool. Training workshops will be held in January 2025.
- Request for Proposals for a Communications Consultant and an Education Consultant will be circulated with a closing date of December 2024. The Communications Consultant is asked to develop and launch: an outreach and social media strategy; the PLAR application package and website materials including self-assessment tools. The Education Consultant is responsible to identify best practices in gap filling, remediation pathways and opportunities for collaboration.

CADTR Credential and Assessment Services for the period January to November 2024:

Credentialing Status

- 80 applicants in various steps of application or credentialing:
 - 34 Approved programs (AP) (7 GBC (1- 2020, 6-2024) *, 15 NAIT, 4 VCC, 1 CDI (2020) and 7 that are still completing their profiles)
 - 2 Referral,
 - 6 L-CAS,
 - 38 DTEE (Colombia, Czech Republic, Germany Hungary, Italy, Jordan, Korea, Nigeria, Poland, Romania, Syria, Taiwan, US, Ukraine and Philippines).
- 33 Females, 42 Males, 5 unknowns.

**2024 graduates – 29*

Competency Assessments Status

- Knowledge Based Assessment (KBA)
 - June 28, 2024 - 30 candidates attempted of which 19 were successful (65.50% success rate).
 - November 29, 2024 - 14 candidates registered, 6 Approved Program (1 GBC, 4 NAIT, 1 CDI) 5 DTEE, 2 LCAS and 1 RR. 10 first attempts and 4 repeats.
- Performance Based Assessment (PBA)
 - Held Oct 19 in Alberta (NAIT) – 28 candidates
 - Held Oct 26 in ON (GBC) – 10 candidates
 - CADTR Board approval of pass/fail standard is in progress. Results will be released to candidates in December to meet the 8-week deadline.

Association of Dental Technologists of Ontario (ADTO)

- The Chair and Registrar attended the ADTO Gala in October 2024, at which nine new registrants were recognized. CDTO also emphasized the importance of strong collaboration between regulators, associations, and educational institutions as a foundation for effective patient advocacy and advancing professional standards.
- I was invited to present at the ADTO Annual General Meeting on November 6, 2024. The focus was on recent changes to the RDT Stamp and identifiers, RCDSO's expectations for dentists when working with commercial labs in Ontario and CDTO's registration fees. I informed RDTs that a guidance will be published about medical device licensing and encouraged them to share knowledge with each other.

George Brown College (GBC)

- Directors and staff engaged in-person with over 110 first, second- and third-year dental technology program students in September, delivering presentations, hosting focus groups and fielding questions about the profession and registration. Since then, over 50 students have signed up on CDTO's newest engagement platform, the "Voluntary Register" to receive information that will support them in attaining licensure and provide access to timely governance and regulatory updates.
- A welcome letter with the latest Bridge and FAQ's by students has been sent to those on the Voluntary Register.
- On November 27th, CDTO presented to the 3rd year Jurisprudence & Ethics class on the mandate of the College and topics that will support their journey to registration.

Oral Health Colleges

- CDTO staff attended the screening of the documentary Working While Black, produced by TAIBU Community Health and hosted by RCDSO at their office. This impactful documentary provided an in-depth exploration of the emotional and professional challenges of workplace racism and highlighted the essential structural changes needed to foster more inclusive and equitable work environments. We extend our sincere gratitude to Michelle Tremblay, Organizational Transformation & College Equity Officer, RCDSO, for this important invitation and the opportunity to engage in such a critical discussion centered on lived experiences in government, for profit and not-for-profit sectors.

ENGAGEMENT

Spectrum Day Toronto

- CDTO was an exhibitor at the 25th anniversary of Spectrum Day, held on October 25th. Joining over 3,700 attendees, including speakers, exhibitors, students and 289 Registered Dental Technologists (RDTs) and Certified Dental Technicians (CDTs). We had the opportunity to engage with over 80 attendees at our booth providing an opportunity to create awareness about the College, our latest projects and initiatives, and gain valuable information about the profession and commercial lab practices. I participated in the Digital Workflow session gaining a better understanding of the impact of digital technologies for the Dentist, Dental Technologist and the patient.

PROFESSIONAL DEVELOPMENT

Since the last report, staff and Board members have attended professional development sessions to support continuing competence towards regulation and governance excellence.

- EDI Governance: The Missing Link Between Strategy & Impact, hosted by Inclusivity Insight, shared information on how to structure EDI so it lives beyond a single champion, embed EDI within the culture as opposed to a standalone initiative, and navigate EDI in the limitations of an organization.

- CNO Workforce Census: This webinar focused on identity-based data collection within Ontario’s nursing population, highlighting the importance of collecting this data, outlining the rationale behind it and how the College plans to utilize the findings to drive meaningful change. Key topics included community engagement strategies, the development and administration of surveys, and the potential impact of the data on policy and practice. The webinar was interactive to foster regulatory collaboration efforts.
- CNAR’s 17th Annual Conference took place in Canada’s picturesque capital and was well attended both in-person and virtually by CDTO Board members and staff. The keynote speaker Dr. Roberta Bondar, Canada’s first female astronaut and the world’s first neurologist in space, was exceptionally inspiring and informative. Her message for regulators is “risk becomes a force for change and all change bears risk”.
 - I had the privilege of hosting a livestream CNAR TV episode titled “Sink or Swim: A Small Regulator’s Resourcefulness in the Face of Crisis”. The episode highlights the resourcefulness, leadership and accountability of a Board to put a provincially mandated licensing exam in place in less than one year. [Link to episode](#)
 - There were many opportunities to engage in diverse sessions covering critical and timely topics that directly impact the regulatory landscape. Indigenous cultural safety and anti-racism sessions emphasized the importance of addressing systemic inequities and fostering trust by incorporating culturally safe practices and policies. Discussions on equity, diversity, and inclusion (EDI) underscored the need to create inclusive frameworks within regulatory organizations, ensuring equitable access to the professions and care they regulate.
 - Sessions on improving access to care highlighted innovative strategies to bridge gaps and dis-mantle barriers in healthcare delivery, ensuring underserved populations can access quality services. Workshops on discipline and investigations explored evolving best practices for addressing professional misconduct while maintaining fairness, transparency, and public trust. The focus on risk in regulation offered insights into identifying and mitigating emerging risks in a rapidly changing environment, equipping regulatory bodies to respond proactively to challenges.
 - Of particular interest were updates on regulatory changes in British Columbia (Project Gemini), which spotlighted innovative reforms aimed at modernizing and streamlining regulatory frameworks. The integration of artificial intelligence (AI) into regulation was another forward-looking topic, exploring its potential to enhance efficiency, decision-making, and service delivery while addressing ethical and implementation challenges.



Dashboard – September 2024 – December 2024 (Fiscal Update)

Professional Excellence

Registration

465 General Certificate
23 Inactive Certificate
5 New RDTs
2 Reinstatements
489 TOTAL RDTs
26 Retired / Resigned
15 Admin Suspended

Quality Assurance

Professional Development 2024
117 SPDPs submitted by August 31 – Group B
4 RDTs that requested an extension
9 RDTs retired/resigned during renewals
19 Late submission notice sent \$58 penalty
 (10 SPDPs received & 9 2nd notices sent \$115 penalty)
Practice Assessment / full PDP
10 Annual random selection at 2% approved by QAC for PPA and full PDP

Organizational Effectiveness

Communications

Social Media
 YouTube
 Website Updates
 Mailchimp

People & Culture

0 Resignation
0 New Hire

Practice Advisory

21 Number of Inquires Received fiscal YTD

RDTs	61.9%
Dentists	9.5%
Patients	4.7%

Top 3 Topics

- 1 RDT's Identifiers
- 2 Supervision – Commercial Dental Lab
- 3 Record Keeping

Professional Conduct

Open
0 Registrar's Investigations
0 QA Referrals
0 Complaints
Closed
0 Registrar's Investigations
0 Complaints
3 Referrals to Discipline
0 Unauthorized Practice Investigations

Financial Health

Q1 ended November 30th, 2024

The results will be formally presented at the next board meeting.



Financial Health





Social Media Statistics



Vistors 99
New Followers 8
Engagement Rate 4.03%
Impressions 140

Video Sharing Statistics



Subscriptions 69
Videos 2
Views 183

E-Mail Statistics



Emails 7
Opens 1445
Link Clicks 107

CDTO Website Statistics



Visitors 2200
Average View Time 1M 18S
Top Countries Referrals

1. 🇨🇦 Canada	1. 🌐 mailchi.mp
2. 🇺🇸 United States	2. 🌐 cac-word-edit.officeapps.live.com
3. 🇳🇮 Nigeria	3. 🌐 ontariocolleges.ca
4. 🇵🇱 Poland	4. 🌐 regulatedhealthprofessions.on.ca
5. 🇮🇳 India	5. 🌐 georgebrown.ca
6. 🇰🇷 South Korea	6. 🌐 learn.georgebrown.ca
7. 🇩🇪 Germany	7. 🌐 chatgpt.com
8. 🇮🇶 Iraq	8. 🌐 healthforceontario.ca
9. 🇩🇿 Algeria	9. 🌐 ontario.ca
10. 🇵🇭 Philippines	10. 🌐 word-view.officeapps.live.com

Top Pages

1. College of Dental Technologists of Ontario Ensuring competency and accountability of dental technologists practicing in the province of Ontario.
2. About Dental Technology College of Dental Technologists of Ontario
3. For Applicants College of Dental Technologists of Ontario
4. Who We Are College of Dental Technologists of Ontario
5. Legislation, Regulations and By-Laws College of Dental Technologists of Ontario
6. Competencies, Standards, Advisories College of Dental Technologists of Ontario
7. Quality Assurance College of Dental Technologists of Ontario
8. Staff College of Dental Technologists of Ontario
9. Resources College of Dental Technologists of Ontario
10. Member Login College of Dental Technologists of Ontario

CADTR Website Statistics



Visitors 3500
Average View Time 45S
Top Pages

Home - Canadian Alliance of Dental Technol...	1.8K
Knowledge-Based Assessment (KBA) Practi...	1.6K
Becoming Registered - Canadian Alliance of...	906
Page not found - Canadian Alliance of Dent...	900
Competency Assessment - Canadian Allian...	642
Credentialing - Canadian Alliance of Dental ...	359
About CADTR - Canadian Alliance of Dental ...	323