



## 142<sup>nd</sup> Board Meeting

YouTube Live Stream: [Link](#)

<b>Board of Directors:</b>		<b>Staff:</b>
James Matera, RDT (Chair)	Mark Peters, RDT	Judy Rigby, Registrar & CEO
William (Bill) Van Evans, RDT (Vice-Chair)	Rehan Siddiqui, Public	Paola Bona, Registration and QA
Abena Buahene, Public	Adela Witko, RDT	Leanne Cheng, Governance and Regulatory Affairs
Shanice Fontaine, RDT	Clark Wilson, RDT	Rose Far, Policy and Strategic Projects
Tayla McGuckin, Public	Franz Yagin, RDT	Safyia Mohammed, Administration
Nawaz Pirani, Public		Rihanna Omar, Human Rights Specialist
	<b>Regrets:</b>	Ashney Patrick, Communications
	Asif Khan, Public	<b>Guest(s):</b>
		Emily Graham, Steinecke Maciura LeBlanc

Agenda	Speaker	Action	Time/Allotment
<b>1. Call to Order</b>	Chair		1 min
<b>2. Opening Remarks</b>	Chair		3 mins
2.1. Land Acknowledgement			
2.2. New Board Member Introduction			
<b>3. Approval of Agenda</b>	Chair	Motion	2 mins
<b>4. Conflict of Interest Declaration</b>	Chair		2 mins
4.1. Conflict of Interest			
<b>5. Consent Agenda</b>	Chair	Motion	5 mins
5.1. 141 <sup>st</sup> Board 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			
<p><b>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:</b></p> <ol style="list-style-type: none"> <li><b>1. Is this item self-explanatory and uncontroversial? Or does it contain an issue that warrants board discussion?</b></li> <li><b>2. Is this item for information only? Or is it needed for another meeting agenda issue?</b></li> </ol>			
<b>6. Elections of Officers and Executive Committee</b>	Registrar	Vote/Motion	20 mins
6.1. Process for Election of Officers			
6.2. Nomination of Scrutineers			
6.3. Nomination and Election of the Chair			
6.4. Nomination and Election of the Vice-Chair			
6.5. Nomination and Election of Executive Committee Members			
6.6. Motion for Destruction of Ballots			
<p><b>1:35 p.m. 15-minute Energy Break</b> <b>Executive Committee Meeting</b></p>			



<b>7. Governance</b> 7.1. Committee Slate 7.2. Rise and Report - Board Workshop 7.3. 2024 Board Annual and Meeting Evaluation	Chair Chair Chair	Information Information Discussion	5 mins 5 mins 10 mins
<b>8. Board Education</b> 8.1 Governance and Bias Training	E. Graham	Presentation	90 mins
<b>9. Registrar's Update</b>	Registrar	Verbal	5 mins
<b>10. In-Camera Session - Pursuant to Section 7(2)(b) of the HPPC</b> 10.1 CEO Performance Evaluation	Chair	Motion	30 mins
<b>11. Closing Remarks</b> Next Meeting Dates: April 24 <sup>th</sup> – Board Workshop April 25 <sup>th</sup> – Board Meeting	Chair	Information	1 min
<b>12. Meeting Adjournment</b>	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.



## Conflict of Interest Declarations

Committee Member	Potential Conflict(s) of Interest Declared
Abena Buahene, Public Director	City of Toronto Tribunals Nominating Panel
Shanice Fontaine, RDT	None
Asif Khan, Public Director	None
James (Jamie) Matera, RDT	None
Tayla McGuckin, Public Director	None
Mark Peters, RDT	None
Nawaz Pirani, Public Director	Manager, Registration, Examinations and Quality Programs, College of Chiropractors of Ontario
Dr. Rehan Siddiqui, Public Director	None
William (Bill) Van Evans, RDT	None
Clark Wilson, RDT	None
Adela Witko, RDT	None
Franz Yagin, RDT	Teaching Assistant, George Brown College

See the next page for details on conflict-of-interest definitions and declarations.



## Conflict of Interest

By completing the Conflict-of-Interest declaration, all Directors of the Board understand that they:

- Have a duty to carry out their responsibilities in a manner that serves and protects the interest of the public.
- Must not engage in any activities or in decision-making concerning any matters where they have a direct or indirect personal or financial interest.
- 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.

Directors of the Board recognize that a conflict of interest or an appearance of a conflict of interest:

- i. Could bring discredit to the College;
- ii. Could amount to a breach of the fiduciary obligation of the person to the College; and
- iii. Could create liability for either the College or the person involved or both.

## Declarations

Directors of the Board have disclosed the following conflicts of interest:

- Participation in other regulatory bodies or professional associations.
- Position at any educational institution for a dental technology program.
- Any other personal or professional relationships that could conflict with a Director's duties to the College.
- Close family members (e.g., spouse) or close associates (e.g., business partner) who stand to be affected financially by the Director's participation in a College decision.



## 141<sup>st</sup> Board Meeting Minutes

Date: December 6, 2024, 9:02 AM – 1:47 PM (Virtual)

### Board of Directors:

James Matera, RDT, Chair  
William (Bill) Van Evans, RDT (Vice-Chair)  
Abena Buahene, Public  
Shanice Fontaine, RDT  
Melanie Liassides, RDT  
Tayla McGuckin, Public  
Nawaz Pirani, Public  
Rehan Siddiqui, Public  
Clark Wilson, RDT  
Adela Witko, RDT  
Franz Yagin, RDT

### Staff:

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

### Guests:

Renaldo Ferreira, Kriens LaRose LLP  
Keith Johnson, KJ Consulting

### Regrets:

Asif Khan, Public

## 1. Call to Order

The Chair, J. Matera, called the 141<sup>st</sup> Board meeting to order at 9:02 am after being informed by Staff that quorum was met.

## 2. Opening Remarks

The Chair delivered the land acknowledgement and J. Rigby delivered the opening remarks. Clark Wilson, recently elected in the District 3 By-Election, was welcomed to the Board. Five returning Directors were congratulated for being re-elected or reappointed to the Board. Franz Yagin and James Matera were acclaimed in the District 1 Elections. Tayla McGuckin, Nawaz Pirani and Rehan Siddiqui were reappointed by the Public Secretariat to CDTO's Board. Their continued service and collaborative efforts contribute to the stability of the Board and its productivity.

## 3. Approval of Agenda

**MOTION: THAT** the agenda be approved as presented.

**MOVED BY:** T. McGuckin and seconded by M. Liassides

**CARRIED**

*S. Fontaine and C. Wilson joined the meeting.*

## 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:** M. Liassides and seconded by N. Pirani

**CARRIED**



## 6. Governance

### 6.1 Board Workshop and Open Executive Committee Meeting Evaluation

The evaluation completed for the September 26th Board workshop and September 27th Open Executive Committee meeting had a 100% response rate. There were many positive comments about the engagement with the George Brown College students during the workshop and learning about why they want to become RDTs.

Only one metric scored lower than 4 out of 5, “where appropriate, next steps and action items were clearly identified”. The Board was informed that this information is accessible through the Appendix of the meeting minutes which lists the Board decisions/directions from each meeting and any status updates.

### 6.2 Terms of Reference – Executive Committee

Annually, every Committee reviews its Terms of Reference and considers if changes are necessary. The Executive Committee brought forward three changes to reflect its current responsibilities that are not set out in its Terms of Reference. These are the responsibility to monitor risks to the organization, profession and the public, monitor the investment portfolio and compliance against Board policies, and oversee reports of possible fraudulent or dishonest use of College resources.

**MOTION: THAT** the Executive Committee Terms of Reference be approved as presented.

**MOVED BY:** B. Van Evans and seconded by R. Siddiqui

**CARRIED**

## 7. Board Education

### 7.1 Discipline Training

N. Pirani recently attended the Health Professions Regulator of Ontario Discipline Committee training and shared some learnings. He educated the Board about the Discipline Committee’s legislative context and the roles of the parties involved such as independent legal counsel. He also discussed the principles of Discipline hearings such as the right to be heard, impartiality, transparency and burden of proof. N. Pirani used the case example of Canada v. Valivov to express the importance of decisions in being reasonable, logical and complete.

### 7.2 Canadian Network of Agencies of Regulation (CNAR)

The Chair presented on his recent attendance at CNAR in Ottawa. His greatest takeaways were about digital transformation and innovation in regulatory practices, collaboration as a powerful tool to sustainable success and adaptive leadership to remain flexible, ready to embrace change and nurture culture of learning. J. Matera gave a dedication to Judy Rigby as an unwavering pillar of strength and visionary leadership, to our regulatory team, fellow Board members and Committee members.

### 7.3 Spectrum Day

P. Bona and R. Far presented on the recent engagement at Spectrum Day in Toronto to connect with oral health professionals. CDTO was an exhibitor with presentations on



display about continuing education credits, new mandatory identifiers and steps to becoming licensed and more. There were booth incentives for attendees with CDTO's logo and a QR Code to the website. There was also a chance to win a gift card by completing a survey to provide feedback.

P. Bona discussed a call for interest to recruit 50 dental laboratory associates to pilot the Prior Learning and Assessment Recognition Pathway. The Board was also invited to participate as the project needs 10 subject matter experts to evaluate participant portfolios and provide valuable feedback.

## **8. Regulatory Programs**

### **8.1 Practice Advisory**

R. Far presented the recent trends from practice inquiries, emphasizing that support is not only provided to RDTs but also to students, patients, employers and other health professionals. In 2023-2024, CDTO received 67 inquiries with the top three categories being supervision standard, medical devices and record keeping. R. Far informed the Board that a practice advisory on medical device licensing is being developed to outline responsibilities when sourcing materials or devices.

A Board member expressed their appreciation of the continued and constant effort that is made to keep RDTs apprised of what CDTO is doing.

### **Motion to Appoint Meeting Chair**

As the Chair had an emergency matter, he asked for a motion that J. Rigby chair the remainder of the meeting.

**MOTION: THAT** J. Rigby serve as Chair for the remainder of the 141<sup>st</sup> Board meeting.

**MOVED BY:** A. Buahene and seconded by F. Yagin

**CARRIED**

### **Motion to Revise Agenda**

A change to the agenda was sought to switch Agenda Item 10.2 Professional Excellence – Barriers to Registration – Prior Learning Assessment and Recognition with 8.2 GBC-FAQs to accommodate the presenter.

**MOTION: THAT** the agenda be approved as revised.

**MOVED BY:** T. McGuckin and seconded by F. Yagin

**CARRIED**

### **10.2 Professional Excellence – Barriers to Registration – Prior Learning Assessment and Recognition (PLAR)**

K. Johnson presented on the Access to Dental Technology Phase Two project which will create a PLAR pathway for individuals who may not have formal education but because of their courses and work experience can potentially practice safely and ethically and should be given a chance to challenge licensure. Funding from the project is also being allocated to communications to create awareness and provide tools for applicants to access before leaving their home country as well as education upgrading resources.



The PLAR tool will assess a self-directed portfolio with a pass-fail scoring that identifies deficiencies related to Canadian education and provides resources. Board members were glad to hear that the project was up to the challenge of identifying resources to fill deficiencies given the government has been cutting back. It was clarified that PLAR is available to all applicants regardless of residency or immigration status

J. Rigby added that this pathway will also benefit those who may not have access to their transcripts. For example, in war torn countries or where universities are defunct. She also expressed her excitement that a non-CADTR member is at the table, Dr. Paul O'Brien from Newfoundland Labrador Dental Board.

## 9. Finance and Audit

### 9.1 Financial Monitoring Reports 2023-2024

This agenda item supports financial transparency, accountability and the Board's responsibility that legal obligations are met. The fiscal year ended in a surplus of \$123,631 largely due to approved funding in unauthorized practice which first depleted the Strategic Initiatives Project budget and the lease ending earlier than anticipated. A new report for cash flow monitoring will support the Board in understanding the achievement of the investment strategy. J. Rigby mentioned that a minimum cash balance of \$35K is kept in the Chequing and High Interest Savings Account to avoid monthly service charges.

### 9.2 Financial Audit 2023-2024

B. Van Evans introduced the agenda item and emphasized the Board's fiduciary responsibilities that prevent it from acting in its own interest. R. Ferreria, the Auditor, presented the financial audited statements which he expressed as not just a regulatory necessity but a strategic tool for accountability, effective governance and building trust.

No noncompliance of laws and regulations was identified or significant material errors or adjustments required. The Board's attention was directed to capital assets and recommended that they be folded into unrestricted net assets as it is no longer as substantial. R. Ferreria concluded that CDTO is in a healthy financial position. Board members commended the Registrar and Staff for a clean audit and the work it takes to set and monitor departmental budgets.

**MOTION: THAT** the Board approve the 2023-2024 audited Financial Statements of The College of Dental Technologists of Ontario 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.

**MOVED BY:** A. Witko and seconded by R. Siddiqui

**CARRIED**

#### Action Item:

- Staff to inform the Auditors of the financial statement approval and the Auditor will issue a management representation letter in turn.



### 9.3 Annual Auditor Assessment

J. Rigby reminded the Board that the Auditor remains in their role until they are removed, and an annual auditor evaluation is completed. The Executive Committee is recommending that the Board conducts an annual auditor assessment for the next fiscal year rather than the comprehensive, which should only be conducted if there are concerns about the auditor's performance.

The Executive Committee members discussed how their questions were addressed with the Auditor at their Committee meeting and appreciated that the Auditors look to simplifying the process.

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

**MOVED BY:** A. Buahene and seconded by A. Witko

**CARRIED**

### 9.4 Investment Policy

J. Rigby noted that the Board's strategic plan includes governance modernization and stressed that policies must be effective to ensure prudent management and stewardship of the College's financial resources. The Executive Committee prioritized the review of the investment policy which did not establish risk tolerance, asset allocation and evaluation and reporting parameters. W. Lai, Investment Manager, discussed the substantive changes to the policy to protect and optimize the value of surplus funds by investing at the maximum yield appropriate, ensuring liquidity for day-to-day operations, and defining the roles and responsibilities of all parties.

The Executive Committee has the responsibility of monitoring investments against the policy and bringing any issues to the Board. The Registrar is authorized to do the day-to-day transactions within the confines of the policy. A Board member put forth for consideration in future revisions that targeted return be at inflation plus 25 or 50 basis points. In response to an inquiry, it was clarified that institutions are not allowed to open registered accounts as everything earned in interest, dividends and capital gains is taxable.

**MOTION: 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 interest and bring it forward for Board approval.

**MOVED BY:** T. McGuckin and seconded by F. Yagin

**CARRIED**

#### Action Item:

- Governance Policy Manual to be revised for the Registrar's responsibility to disclose conflict of interests.



## 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). KPIs reported include progress reports, engagement initiatives and identifying any risks to completing the projects. Some highlights included an increase in Quality Assurance (QA) resources accessed, on-time submission rates of QA summary Professional Development Profiles from 53% to 80% and a significant increase on the uptake of Mailchimp and videos designed to remind RDT about their Identifiers.

A Board member inquired about the Quality Assurance Portal being at risk. It was clarified that the database developer, Thentia, has had a change in ownership and is looking at a different business model which could lead to a significant increase in hosting and annual fees. There was discussion about the jurisprudence and ethics examination and direction to assess equivalency with George Brown College's program and implement an online module.

### 8.2 George Brown College – FAQs

P. Bona discussed the information circulated to students after the George Brown College Engagement Day in September. She highlighted the statistics that 92% of third year students joined the voluntary registry. It was clarified that 100 % enrollment rate may not be achieved as students may not understand the benefits of the registry or are not interested in becoming RDTs.

There was discussion about reducing barriers to registration, particularly for those who have English as a second language or immigrated from a country that does not use multiple choice testing. It was also explained that some questions are placed into an examination as testers and are not marked to allow these questions to be evaluated for low pass rates and remove any ambiguity.

*F. Yagin left the meeting at 12:58 pm.*

### 10.3 Engagement and Collaboration

A. Patrick presented recent engagement and collaborations such as George Brown College Engagement Day which met with 110 first, second and third-year students and had 47 students sign up for the voluntary register. CDTO also engaged with oral health professionals across the country at Spectrum Day which had 42 attendees participate in a feedback survey. A. Patrick also talked about updates made to the Face Behind the Smile brochure which raises awareness of the public about the role of the RDT.

### 10.4 Regulatory Excellence – Equity, Diversity, Inclusion and Indigeneity (EDI-I)

R. Omar discussed the progress CDTO has made in its EDI-I strategic priorities. An EDI-based module is being developed for Board and Committee members to empower them to lead effectively in alignment with the College's vision and core values. The first module will focus on foundational concepts such as what is EDI, why is it important to the work of a health regulator and how we can maintain an EDI focus. Future topics are expected to include



unconscious bias, bias awareness, intersectionality and allyship, truth and reconciliation and anti-racism in healthcare.

R. Omar also discussed the recent engagement with TAIBU and RCDSO for the documentary Working While Black which educates attendees through lived experience on the challenges Black identifying populations face in the workplace. Focusing on EDI will help CDTO gain a deeper understanding of the lived experiences of those who may be disadvantaged, allowing us to lead with empathy and make informed decisions that foster positive change.

### **10.5 Regulatory Excellence – Governance – Election of Officers**

A. Buahene presented and acknowledged the work of the By-Laws and Policy Review Committee and L. Cheng who have undertaken to review the By-Laws focusing first on the areas that have caused concern or needed clarification. Proposed changes to Section 6, Election of Officers, were made to improve clarity on the voting process as it has caused issues in the past. These changes were made after consideration of other regulators' By-Laws and review by legal counsel. Some changes include placing multiple positions on one ballot and clarifying tie breaking rules.

**MOTION: 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 **AND THAT** the changes take effect immediately.

**MOVED BY:** J. Matera and seconded by A. Witko

**CARRIED**

### **10.6 Regulatory Excellence – Emerging Issues – Emergency Class Supervision Policy**

M. Liassides presented and acknowledged the work of the Registration Committee and P. Bona to develop an emergency policy and associated supervision guidelines. These key documents support the amended Registration Regulation which established an emergency class of registration. It outlines circumstances under which the College can issue an emergency class certificate, waiving of registration requirements to expedite the process and expectations of emergency class registrants and their supervisors.

An environmental scan was conducted of supervision policies from other regulatory health colleges prior to the initial draft being reviewed by the Registration Committee in April 2024. The policy was further refined and reviewed by legal counsel before final approval by the Registration Committee in November 2024.

Registration Committee members discussed their approach to balancing the responsibilities of the supervising RDT and public protection. The guidelines were not made to be onerous and create barriers when RDTs already act in a supervisory capacity. The Chair and Registrar thanked the Registration Committee for stepping up to the challenge.

**MOTION: THAT** the Board approves the Emergency Class Policy and the Supervision of Emergency Class Registrants Guidelines **AND THAT** the changes take effect immediately.

**MOVED BY:** A. Buahene and seconded by T. McGuckin

**CARRIED**



### 11. Registrar's Update

J. Rigby discussed the changes in Nova Scotia to move forward with a new regulated health professions act which amalgamates dental hygienists, dental technologists and denturists and their new acronym NSRDHDTD. They are also implementing a Quality Assurance Program which targets the regulator rather than the registrants to understand their performance, similar to CPMF.

J. Rigby expressed her gratitude to Staff, the Chair and the Board for furthering the Colleges mandate and having an inspiring year with the number of decisions that were moved forward and the engagement from the Board.

### 12. Closing Remarks

J. Matera thanked the Board and Staff for their hard work in all the achievements this year at both the Board and Committee level. His relationship with J. Rigby, the Registrar, has continuously grown with a lot of respect and hard work. J. Rigby and her Staff do a fantastic job of making the Board look good every day.

### 13. In-Camera Session: None.

### 14. Meeting Adjournment

**MOTION: THAT** the 141<sup>st</sup> Board Meeting be adjourned at 1:47 pm.

**MOVED BY:** J. Matera and seconded by A. Witko

**CARRIED**



## Status Updates on Board Decisions

Board of Directors Meeting	Item	Action	Status
September 27, 2024 Open Executive Committee Meeting	QA – Professional Development	Staff to consult legal counsel about the authority to inform employers about upcoming and/or late submissions.	Completed. Reported in December 6, 2024's Registrar's Report.
September 27, 2024 Open Executive Committee Meeting	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
December 6, 2024	Financial Audit 2023-2024	Staff to inform the Auditors of the financial statement approval and the Auditor will issue a management representation letter in turn.	Completed
December 6, 2024	Investment Policy	Governance Policy Manual to be revised for the Registrar's responsibility to disclose conflict of interests.	In progress



## EXECUTIVE COMMITTEE REPORT

**January 31, 2025**

### **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.

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### **Meetings**

Since the Report provided at the December 6, 2024 Board meeting, the Executive Committee met once virtually on January 7, 2025.

### **For Action of the Board**

#### **1. CEO Performance Evaluation**

The Executive Committee met on January 7<sup>th</sup>, 2025 to review the criteria applicable to the CEO evaluation process and then discussed the specific aspects of the evaluation to come to an agreed-upon compensation package to present to the Board for approval. The Committee Chair will report in greater detail during the in-camera session of the January Board meeting.

### **For Information**

None.



## DISCIPLINE COMMITTEE REPORT

**January 31, 2025**

### **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

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### **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.

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### **Meetings and Hearings**

The Discipline Committee has not met since the last report to the Board on December 6, 2024.

### **For Action of the Board**

There are currently no items for action.

### **For Information**

Three 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 three referrals to discipline can be found here: <https://cdto.ca/protecting-the-public/discipline-decisions/>



## FITNESS TO PRACTICE COMMITTEE REPORT

**January 31, 2025**

### **Committee Members**

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

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### **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 December 6, 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

January 31, 2025

### 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)

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### 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.

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### Meetings

The ICRC had no meetings during this reporting period.

### For Action of the Board

There are currently no items for action.

### For Information

#### 1. Formal Complaints

During this reporting period, one new complaint was 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.



#### **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

**January 31, 2025**

### **Committee Members**

Nawaz Pirani, Professional Member

Asif Khan, Public Member

Tayla McGuckin, Public Member

Franz Yagin, Professional Member

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### **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 and Hearings**

The Patient Relations Committee has not met since the last report to the Board on December 6, 2024.

### **For Action of the Board**

There are currently no items for action.

### **For Information**

Going forward, the Patient Relations Committee will focus on revisiting the communications strategy to ensure it remains aligned with the College's goals and stakeholder needs. This includes a thorough review of the communications work plan to identify areas for enhancement and prioritization. The Committee will also oversee the development and implementation of EDI-I video modules, reinforcing our commitment to equity, diversity, inclusion, and Indigenous reconciliation. Additionally, the Committee will provide support for key tasks within the communications work plan as needed, ensuring impactful and effective engagement with all stakeholders.



## QUALITY ASSURANCE COMMITTEE REPORT

**January 31, 2025**

### **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

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### **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 December 6, 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

January 31, 2025

### Committee Members:

Melanie Liassides, Professional Member, Chair

Abena Buahene, Public Member

Rehan Siddiqui, Public Member

Adela Witko, Professional Member

Franz Yagin, Professional Member

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### 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.

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### Meetings:

The Registration Committee has not met since the last report to the Board on December 6, 2024.

### For Action of the Board

There are currently no items for action.

### For Information

There are currently no items for information.



## RECRUITMENT COMMITTEE REPORT

**January 31, 2025**

### **Committee Members:**

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

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### **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.

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### **Meetings:**

Since the report provided for the December 6, 2024 Board meeting, the Recruitment Committee has met once on January 13, 2025.

### **For Action of the Board**

#### **1. Committee Slate**

At the September 27, 2024 Open Executive Committee meeting, the Committee Competency Framework, which consists of the Committee Competencies and an Assessment Questionnaire, was approved for a pilot test. This questionnaire was circulated to collect information from Board Directors about competencies and diversity. The responses were then reviewed by the Recruitment Committee to recommend a Committee Slate to the Executive Committee.

In addition to the Slate, the Recruitment Committee is recommending that the Patient Relations Committee be composed of the minimum number of required Committee members at three. The Patient Relations Committee is responsible for the communications strategy and equity, diversity and inclusion strategic priorities. They could benefit from a smaller working group of diverse individuals.



At the January Board meeting, the newly elected Executive Committee will meet to review the Committee Slate and recommend it to the Board for approval.

**For Information**

None.



## BY-LAWS AND POLICY REVIEW COMMITTEE REPORT

**January 31, 2025**

**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

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**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.

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**Meetings:**

Since the last report to the Board on December 6, 2024, the Committee has not met.

**For Action of the Board**

None.

**For Information**

None.



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

Agenda Item 7.3

# 2024 Board Annual Evaluation

January 2025

# Overview

Agenda Item 7.3

## Five Categories

1. Governance
2. Leadership
3. Financial Performance & Risk
4. Board & Committee Performance
5. Continuous Improvement

## Process

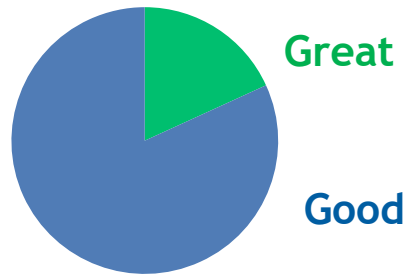
- Survey of all Board members
- 15 evaluation statements
- Plus, the opportunity to provide suggestions for Governance continuous improvement priorities for the coming year

## The Results

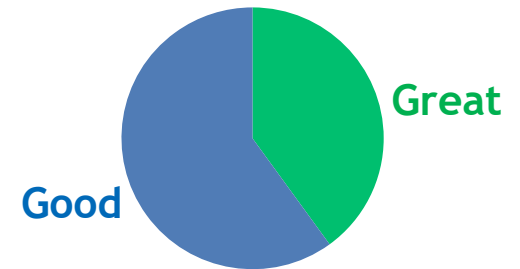
- Overall positive evaluation
- Great suggestions for improvements
- Learning and Development opportunities identified

# A. Governance

**1. Board members have a good understanding of the mandate, purpose and programs of the College.**



**2. Board members are aligned on their role as Governors, making decisions in the public interest.**

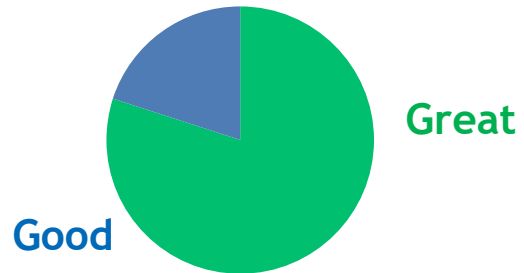


Annual general board training to support new directors and also to remind/refresh existing ones.

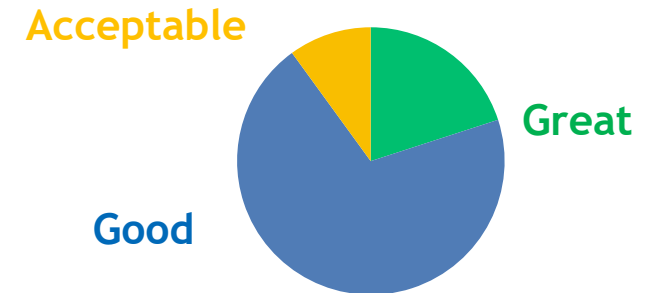
## A. Governance

Agenda Item 7.3

**3. Board members are clear and agree on the distinction between Board and Management responsibilities.**

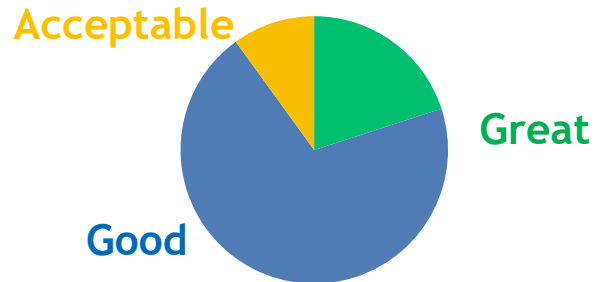


**4. Board regularly monitors and evaluates progress toward strategic and operational goals.**

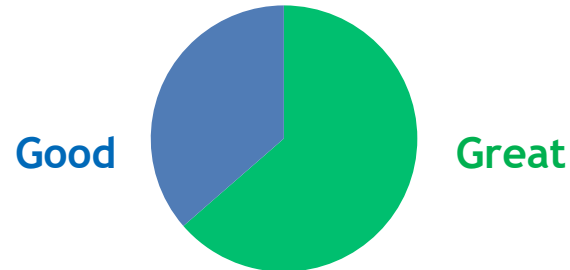


## B. Leadership

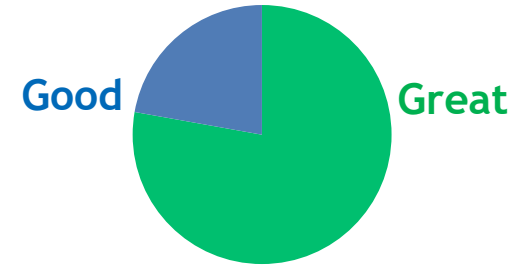
5. Board members have opportunities to develop as leaders through rotation of Committee assignments, Chair roles, and other opportunities to lead.



6. Committee Chairs are effective at guiding meetings, encouraging participation, and allowing all sides to be heard, consistent with CDTO's values and the public interest.



7. Executive Committee has the necessary skills, enthusiasm, and energy to provide leadership in the public interest to Board, and also has an effective working relationship with the CEO.



## C. Financial & Risk Oversight

Agenda Item 7.3

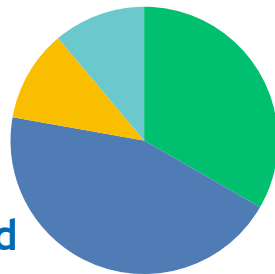
8. The Board, including through the Executive Committee, is actively and appropriately involved in setting direction for and approving the financial plan/budget.

Needs Improvement

Acceptable

Good

Great

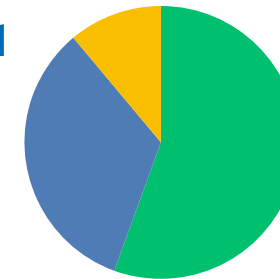


9. The Board monitors financial performance regularly and staff are able to explain variances and potential corrective actions, with few or no surprises.

Acceptable

Good

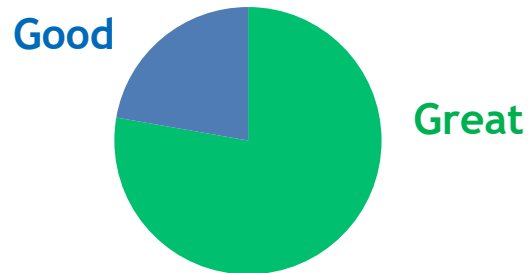
Great



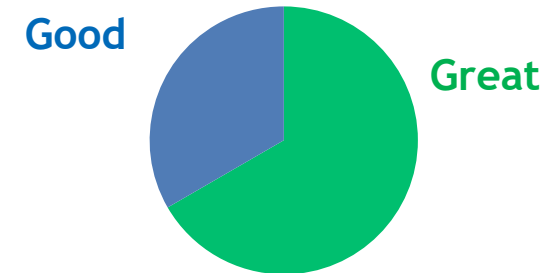
## C. Financial & Risk Oversight

Agenda Item 7.3

10. Board ensures timely, independent auditing of finances, and audit results are discussed by Board with the Auditor.



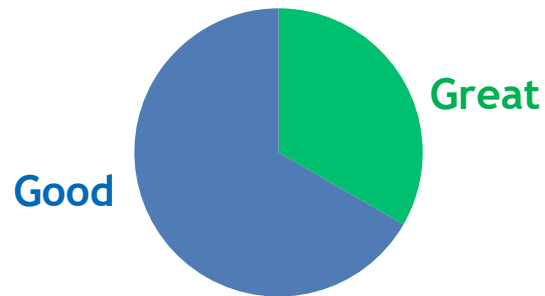
11. Board contributes to and is briefed periodically on regulatory and organizational risk management priorities and actions.



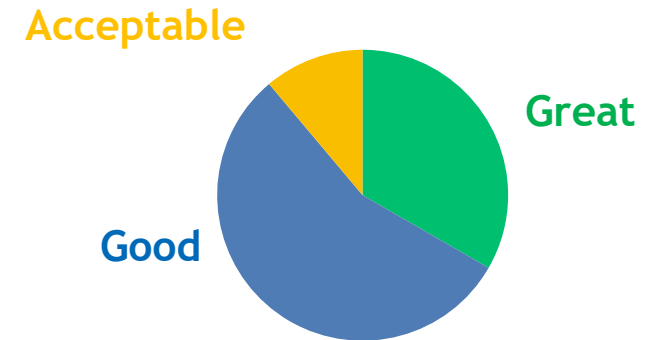
## D. Board & Committee Performance

Agenda Item 7.3

12. Board and Committee meeting agenda and packages are clear about the key issues and areas for Board/Committee's consideration. Material is received sufficiently in advance to allow for effective preparation.



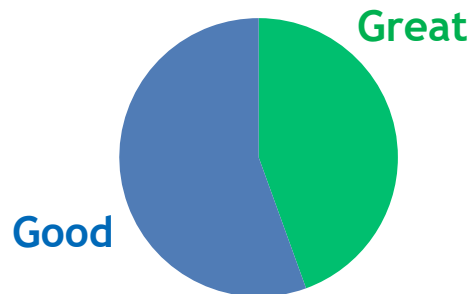
13. Board and Committee meetings start and end on time with an emphasis on substantive discussion of significant matters by Board/Committees.



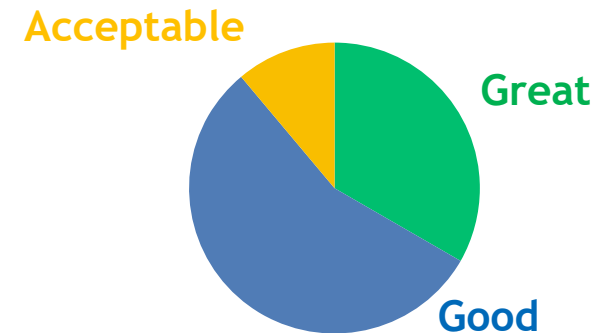
## D. Board & Committee Performance

Agenda Item 7.3

14. All necessary skills to conduct Board business are represented on Board and its Committees.



15. Board and Committee members proactively ask questions, raise issues, and engage constructively in discussion and debate.



I would recommend that all directors at the open board meetings should to ask more questions and/ or provide feedback or positive commentary on the agenda items. It is important for the public and the RDTs in attendance to see and hear that the board is actively engaged in providing strategic direction in the public interest.

The Board's engagement is always nice to see and the input is very valuable

# Looking back on 2024...

- ▶ **Board members also provided additional feedback on improvements:**
  - I think we improved in terms of engagement with members, the college and broadening our scope of practice.
  - Setting and monitoring the KPIs.
  - Timeliness of CEO objectives and goals. Timeliness and effectiveness of the review process.
  - More active participation from the directors during the public meetings.



# Learning & Development Opportunities

- ▶ **Board members also provided suggestions on learning and development opportunities**
  - DEI advancements and changes to regulatory code
  - Future of the Profession and College
  - Opportunities for Chair training

