



## 147<sup>th</sup> Board Meeting

### January 23, 2026, 9:00 a.m. to 11:00 a.m.

[YouTube Live Stream Link](#)

Agenda	Speaker	Action	Time
<b>1. Call to Order</b>	Chair		1 min
<b>2. Opening Remarks</b> 2.1. Land Acknowledgement	Chair		3 mins
<b>3. Approval of Agenda</b>	Chair	Motion	2 mins
<b>4. Conflict of Interest Declaration</b> 4.1. 2026 Conflict of Interest	Chair		2 mins
<b>5. Consent Agenda</b> 5.1. 146 <sup>th</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	Chair	Motion	5 mins
<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 Members</b> 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 6.6. Motion for Destruction of Ballots	Registrar	Vote/Motion	20 mins
<b>9:30 a.m. 15-minute Energy Break</b>			
<b>7. Governance</b> 7.1. Committee Slate 7.2. 2025 Board Annual and Meeting Evaluation	Chair Chair	Information Discussion	5 mins 10 mins
<b>8. Board Education</b> 8.1 Right Touch Regulation	Alan Clamp, Professional Standards Authority for Health and Social Care	Presentation	45 mins



<b>9. Registrar's Update</b>	Registrar	Verbal	10 mins
<b>10. Closing Remarks</b> Next Meeting Dates: April 23 <sup>rd</sup> – Board Workshop April 24 <sup>th</sup> – Board Meeting	Chair	Information	1 min
<b>11. In-Camera Session</b> <i>Pursuant to Section 7(2)(b) of the HPPC, financial or personal or other matters may be disclosed of such nature that the harm created by the disclosure would outweigh the desirability of adhering to the principle that meetings be open to the public.</i>	Chair	Motion	5 mins
<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

Board Director	Declared Affiliations and Roles
Shanice Fontaine, RDT	None
James (Jamie) Matera, RDT	None
Tayla McGuckin, Public Director	None
Mark Peters, RDT	None
Nawaz Pirani, Public Director	Director, Registration and Regulatory Programs, College of Chiropodists of Ontario
Jatinderpal Randhawa, Public Director	None
Dr. Rehan Siddiqui, Public Director	None
Vernu Sivakkolundu, Public Director	None
William (Bill) Van Evans, RDT	Member of the Board of Integrative Medicine
Clark Wilson, RDT	None
Adela Witko, RDT	None
Franz Yagin, RDT	None

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.



## 146<sup>th</sup> Board Meeting Minutes

Date: December 26, 2025, 9:03 AM – 2:35 PM (Virtual)

### Board of Directors

James Matera, RDT, Chair  
William (Bill) Van Evans, RDT, Vice-Chair  
Shanice Fontaine, RDT  
Mark Peters, RDT  
Dr. Rehan Siddiqui, Public  
Vernu Sivakkolundu, Public  
Clark Wilson, RDT  
Adela Witko, RDT  
Franz Yagin, RDT

### Regrets

Jatinderpal Randhawa, Public  
Nawaz Pirani, Public  
Tayla McGuckin, Public

### Staff

Judith Rigby, Registrar & CEO  
Leanne Cheng, Governance and Regulatory Affairs  
Rose Far, Policy and Strategic Projects  
Safyia Mohammed, Registration and Administration  
Ashney Patrick, Communications

### Guests

Renaldo Ferreira, Kriens LaRose LLP  
Irwin Glasberg, Office of the Fairness  
Commissioner  
Keith Johnson, KJ Consulting

## 1. Call to Order

The Vice Chair, W. Van Evans, presided over the meeting in the absence of the Chair. He called the 146<sup>th</sup> Board meeting to order at 9:03 a.m..

## 2. Opening Remarks

### 2.1. Land Acknowledgement

W. Van Evans invited Dr. R. Siddiqui to deliver the land acknowledgement and held a moment of silence for everyone to reflect on its meaning and how they can seek truth and reconciliation.

## 3. Approval of Agenda

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

**MOVED BY:** S. Fontaine and seconded by R. Siddiqui

**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 with the Discipline Committee report removed.

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

**CARRIED**



L. Cheng presented the Discipline Committee Report on behalf of the Discipline Chair, N. Pirani. An update was provided on the November 7<sup>th</sup> hearing in which Mr. Frank Smith was found to have falsified his Quality Assurance professional development profile. The Committee ordered a penalty of revocation of his certificate of registration, the most serious disciplinary measure available, along with a reprimand and \$2,500 in costs.

*C. Wilson joined the meeting at 9:27 a.m.*

## 6. Financial Matters

### 6.1. 2024-2025 Financial and Monitoring Reports and Fiscal Audit

J. Rigby provided an overview of the College's financial controls, including budget approval, internal spending controls, quarterly monitoring, and the annual external audit. She noted an operating surplus of approximately \$176,000 driven by underspending on complaints and discipline, governance, and unauthorized practice.

R. Ferreira of Kriens LaRose LLP presented the 2024–2025 audit, confirming the firm's independence. The audit found no significant issues, and an unqualified opinion is expected. The College remains in a strong financial position, with an operating surplus, healthy cash flow, and no going concern issues.

**MOTION: THAT** the Board:

1. Receives the final quarterly financial monitoring reports for the fiscal year ended August 31, 2025;
2. Approves the 2024-2025 Financial Statements of The College of Dental Technologists of Ontario, August 31, 2025; and
3. Be authorized to issue the final audited Financial Statements for the fiscal year ended August 31, 2025, upon receiving the Independent Auditors Report.

**MOVED BY:** A. Witko and seconded by M. Peters

**CARRIED**

### 6.2 Annual Auditor Assessment

J. Rigby reported that the Board delegated the 2024–2025 annual auditor evaluation to the Executive Committee. After completing its review, the Executive Committee was satisfied with Kriens LaRose LLP's performance, objectivity, and communications and did not recommend a comprehensive assessment or a change in audit firm.

**MOTION: THAT** an Annual Auditor Assessment of the Auditor, Kriens LaRose LLP, be completed for the 2025-2026 fiscal year end audit.

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

**CARRIED**

## 7. Registrar's Update

J. Rigby updated the Board on her activities since the last meeting, highlighting engagement with registrants, system partners, and professional associations, including participation in national and international conferences. She emphasized the College's role



in ensuring access to the profession while maintaining public and patient safety, and acknowledged that professional development opportunities have strengthened her capacity to address regulatory challenges innovatively.

## **8. Strategic Plan**

### **8.1 Strategic Dashboard**

R. Far provided a brief update on the College's strategic initiatives, highlighting progress on the Standards and Ethics Project, including completion of the first two components of the standard framework with the Quality Assurance Committee, and the launch of a new resource to help registrants earn required professional development credits. She also noted ongoing outreach to George Brown College students and activities at Spectrum Day to reduce barriers to registration.

### **8.2 PE – Reducing Barriers to Registration**

#### **8.2.1 Prior Learning Assessment Recognition (PLAR) Engagement**

K. Johnson provided an update on the PLAR pilot, explaining that the pathway allows experienced individuals without formal dental technology education to pursue licensure. The pilot is currently supporting 18 applicants in developing portfolios of work-based evidence that will be evaluated against a competency framework, with a submission deadline of March 15.

K. Johnson also highlighted progress on pre-arrival communications for internationally trained applicants, including videos and infographics to simplify licensing information, and work on upgrading opportunities to help applicants address skill gaps. They are also exploring fast-track or mutual recognition agreements to speed licensure for qualified individuals from comparable jurisdictions.

#### **8.3 PE – Standards and Ethics**

W. Van Evans provided an overview of progress on the draft professional standards led by the Quality Assurance (QA) Committee. He noted that the standards are grounded in five ethical principles: protection of the public; safe and competent care; effective communication and collaboration; public trust and respect; and respect for the dignity of all persons.

W. Van Evans emphasized that the principles encourage RDTs to act professionally and exercise judgment rather than simply following prescriptive rules, thereby elevating professional standards. He acknowledged the significant contributions of committee members, staff, and Pivotal Research in developing the document. The draft is expected to be presented to the Board in April 2026, followed by general consultation.



## 8.4. Engagement

### 8.4.1. System Partner Engagement, Collaboration and Awareness

A. Patrick reported on CDTO's presence at Spectrum Day, which was attended by approximately 4,200 dental professionals. She highlighted the College's information booth and its first Peer Circle. Feedback emphasized the value of continuing Peer Circles, expanding topic areas, and refining communication timing to improve registrant engagement.

J. Rigby also shared concerns raised at Spectrum Day about a U.S.-based vendor offering incentives to dentists. The matter was referred to the Royal College of Dental Surgeons of Ontario (RCDSO) whose practice advisory team advised that such arrangements could constitute a conflict of interest under their regulation. Historically, when similar concerns have been raised, the RCDSO has assured CDTO that dentists are reminded of their obligations when using non-Canadian dental laboratories. She noted that registrants raising these concerns demonstrate effective self-regulation and collaboration.

*The Chair joined the meeting at 1:45 p.m. The Vice-Chair continued to preside over the meeting.*

## 9. Board Education

### 9.1 Office of the Fairness Commissioner – Parallel Processing Plans

I. Glasberg presented on parallel processing plans, noting that while the legislative requirement applies to non-health regulators under the Fair Access to Regulated Professions and Compulsory Trades Act, the Office of the Fairness Commissioner promotes these plans as best practices for health regulators. He explained that parallel processing allows applicants to complete registration requirements concurrently, where possible, to reduce delays and improve timeliness of registration and workforce entry.

In response to questions, I. Glasberg noted that parallel pathways may be voluntarily adopted by health regulators where consistent with their regulatory framework and highlighted examples from other professions addressing labour shortages and international credential recognition.

### 8.5.1 Committee Competency Framework (Agenda item was moved due to timing)

L. Cheng presented the Framework on behalf of the Recruitment Committee. The framework meets a best practice under the College Performance Measurement Framework and is intended to ensure committee members collectively possess the appropriate skills, knowledge, and judgment to support effective governance and the public interest. The framework includes defined competency criteria and an assessment questionnaire, which were pilot tested and used to inform the 2025 committee slate. Director feedback indicated the framework was clear, helpful, and reflective of committee needs.

**MOTION:** THAT the Board approves the Committee Competency Framework for use in establishing the annual Committee Slate.

**MOVED BY:** F. Yagin and seconded by C. Wilson

**CARRIED**



## 10. Governance

### 10.1 Board Workshop Evaluation September 25<sup>th</sup> and Board Meeting Evaluation

The Board reviewed the results of the recent Board workshop and meeting evaluations. A new evaluation approach is being piloted that replaces post-meeting surveys with an immediate roundtable discussion to support timelier feedback, clearer discussion, and continuous improvement. Both the workshop and meeting received positive evaluation results, along with constructive feedback to be considered in planning future meetings.

### 10.2 Terms of Reference

The Executive Committee is seeking an update to their Terms of Reference to include their responsibility to review and approve accountability reports as designated by the Board.

**MOTION: THAT** the Board approves the Executive Committee Terms of Reference as amended.

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

**CARRIED**

## 11. Regulatory Programs

### 11.1 Canadian Alliance of Dental Technology Regulators (CADTR) Credential and Assessment Services

S. Mohammed presented the CADTR report, noting that since inception in 2021 there have been 498 applications created, with 152 candidates completing credential assessment requirements and receiving certificates of completion. She highlighted recent assessment activity, including a November Knowledge-Based Assessment with 31 candidates and a recent Performance-Based Assessment held in Ontario and Alberta with 63 candidates.

### 11.2 As of Right Rules

L. Cheng provided an update on the implementation of As-of-Right rules, which will take effect on January 1, 2026. This will allow eligible professionals licensed in another Canadian jurisdiction to practise in Ontario for a one-time, six-month period while their registration application is under review. Amendments to the Regulated Health Professions Act and the Dental Technology Act will enable this approach. Preparatory work is underway, including collaboration with the Ministry, development of an attestation form, and implementation of a tracking system to monitor applications and outcomes.

## 12. Closing Remarks

W. Van Evans thanked attendees and announced the conclusion of the public portion of the meeting. He expressed appreciation to directors for their contributions and focus. He reflected on 2025 as a successful year, citing accomplishments, strengthened collaboration, and initiatives that will benefit the College in the future.

**MOTION: THAT** the Board moves in-camera.

**MOVED BY:** C. Wilson and seconded by A. Witko

**CARRIED**



**13. In-Camera Session**

**14. Meeting Adjournment**

**MOTION: THAT** the Board moves out of in-camera and adjourns the meeting.

**MOVED BY:** A. Witko and seconded by V. Sivakkolundu

**CARRIED**



## Status Updates on Board Decisions

There are currently no outstanding decisions.



## EXECUTIVE COMMITTEE REPORT

**January 23, 2026**

### **Committee Members**

James Matera, RDT (Chair)  
William (Bill) Van Evans, RDT (Vice-Chair)  
Nawaz Pirani, Public  
Dr. Rehan Siddiqui, Public  
Adela Witko, RDT

### **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**

The Executive Committee has not met since the last report to the Board on December 5, 2025.

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

None.

### **For Information**

None.



## DISCIPLINE COMMITTEE REPORT

**January 23, 2026**

### **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, RDT

Ovidiu Lauric, RDT

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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 5, 2025.

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

None.

### **For Information**

None.



## **FITNESS TO PRACTICE COMMITTEE REPORT**

**January 23, 2026**

### **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 December 5, 2025. To date, no hearings have been held by the Fitness to Practice Committee.

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

None.

### **For Information**

None.



## INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

**January 23, 2026**

### **Committee Members**

Adela Witko, RDT (Chair)

James Matera, RDT

Tayla McGuckin, Public

Jatinderpal Randhawa, Public

Clark Wilson, RDT

Manijeh Rezaeizadeh, RDT (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 met once on December 16, 2025 since the last report to the Board on December 5, 2025.

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

None.

### **For Information**

#### **1. Formal Complaints**

During this reporting period, no new complaints were received, and one complaint was carried forward. The ICRC reached a decision on the carried-forward complaint and a Decisions and Reasons will be drafted and circulated to the parties.

#### **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 23, 2026

### Committee Members

Tayla McGuckin, Public (Chair)  
Clark Wilson, RDT  
Vernu Sivakkolundu, Public

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### Committee Mandate

The Patient Relations (PR) 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 PR Committee met on November 28, 2025, after the publishing of the materials for the December 5, 2025, Board meeting. An update on that meeting is below.

### For Action of the Board

None.

### For Information

#### 1. Equity, Diversity, and Inclusivity (EDI)

CDTO provided an overview of its EDI training initiative, including the plan to develop 13 short, regulatory-focused EDI micro-modules (approximately 3–5 minutes each) for Board and Committee members and staff. The modules will be tailored to CDTO and designed using a micro-learning approach. Development will proceed in phases, with Phase 1 (Modules 1–5) focused on foundational concepts. Once the first module is completed, it will be brought forward for Committee review.



The proposed three-phase structure was reviewed:

1. Phase 1 addresses commitment and core concepts (e.g., land acknowledgement, systemic discrimination, inclusive conduct);
2. Phase 2 focuses on governance and decision-making (e.g., applying an equity lens, fair registration, EDI data collection, accountability); and
3. Phase 3 addresses practice, service, and culture (e.g., diverse registrants, accessibility, partnering for equity, personal EDI learning plans).

The phased approach was supported, with agreement to implement modules as they are completed rather than waiting for all modules to be finalized.

## **2. Mentorship Program**

CDTO and the Committee discussed opportunities to strengthen the mentorship program and improve how students are connected with RDT mentors. Key themes included enhancing the matching process (e.g., enabling mentees to indicate preferred mentors aligned to career goals), creating a progression pathway where mentees can eventually become mentors, and exploring geographic organization through regional groupings supported by an online platform.

Feedback from recent mentorship activity also surfaced areas requiring improvement, including the need for clearer program structure, defined expectations and guidance for mentors and mentees, stronger screening and intake processes, and better clarity for applicants on eligibility and appropriate pathways (including ensuring candidates are directed to the correct pathway before entering mentorship). The discussion also highlighted the importance of maintaining consistent, high-quality participant experience to protect program credibility.



## QUALITY ASSURANCE COMMITTEE REPORT

**January 23, 2026**

### **Committee Members**

William (Bill) Van Evans, RDT (Chair)

Shanice Fontaine, RDT

Mark Peters, RDT

Ovidiu Lauric, RDT (non-Board)

Nawaz Pirani, Public

Dr. Rehan Siddiqui, Public

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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 QAC oversees and implements the QA 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.

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### **Meetings**

The QA Committee has not met since the last report to the Board on December 5, 2025.

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

None.

### **For Information**

None.



## REGISTRATION COMMITTEE REPORT

**January 23, 2026**

### **Committee Members**

Shanice Fontaine, RDT (Chair)  
Jatinderpal Randhawa, Public  
Rehan Siddiqui, Public  
Adela Witko, RDT  
Franz Yagin, RDT

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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 to 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 5, 2025.

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

None.

### **For Information**

#### **1- Upcoming Meetings**

The next Registration Committee Meeting will be held in the second week of February 2026.



## RECRUITMENT COMMITTEE REPORT

**January 23, 2026**

### **Committee Members**

Vernu Sivakkolundu, Public (Chair)

Mark Peters, RDT

Franz Yagin, RDT

Leanne Cheng, Staff

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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**

The Recruitment Committee has not met since the last report to the Board on December 5, 2025.

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

None.

### **For Information**

None.



## BY-LAWS AND POLICY REVIEW COMMITTEE REPORT

**January 23, 2026**

### **Committee Members:**

Nawaz Pirani, Public (Chair)

William (Bill) Van Evans, RDT

Franz Yagin, RDT

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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**

The By-Laws and Policy Review Committee has not met since the last report to the Board on December 5, 2025.

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

None.

### **For Information**

None.



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

# CDTO 2025 Board Evaluations

January 23, 2026

## December 5, 2025 Meeting Evaluation

An assessment of the effectiveness, structure, and outcomes of this specific meeting to ensure objectives were met and identify areas for improvement.

# Overall Score

	Sept. 25, 2025	Sept. 26, 2025	Dec. 5, 2025
<b>Average Score</b>	9.5	8.3	9.1
<b># of Respondents</b>	12 Total: 8 Directors 4 Staff	15 Total: 11 Directors 4 Staff	13 Total: 8 Directors 5 Staff



# Score Distribution

	Sept. 25, 2025	Sept. 26, 2025	Dec. 5, 2025
10	8	2	0
9.5	0	0	7
9	4	7	5
8.5	0	0	1
8	0	4	1
7	0	2	0



# Feedback Summary

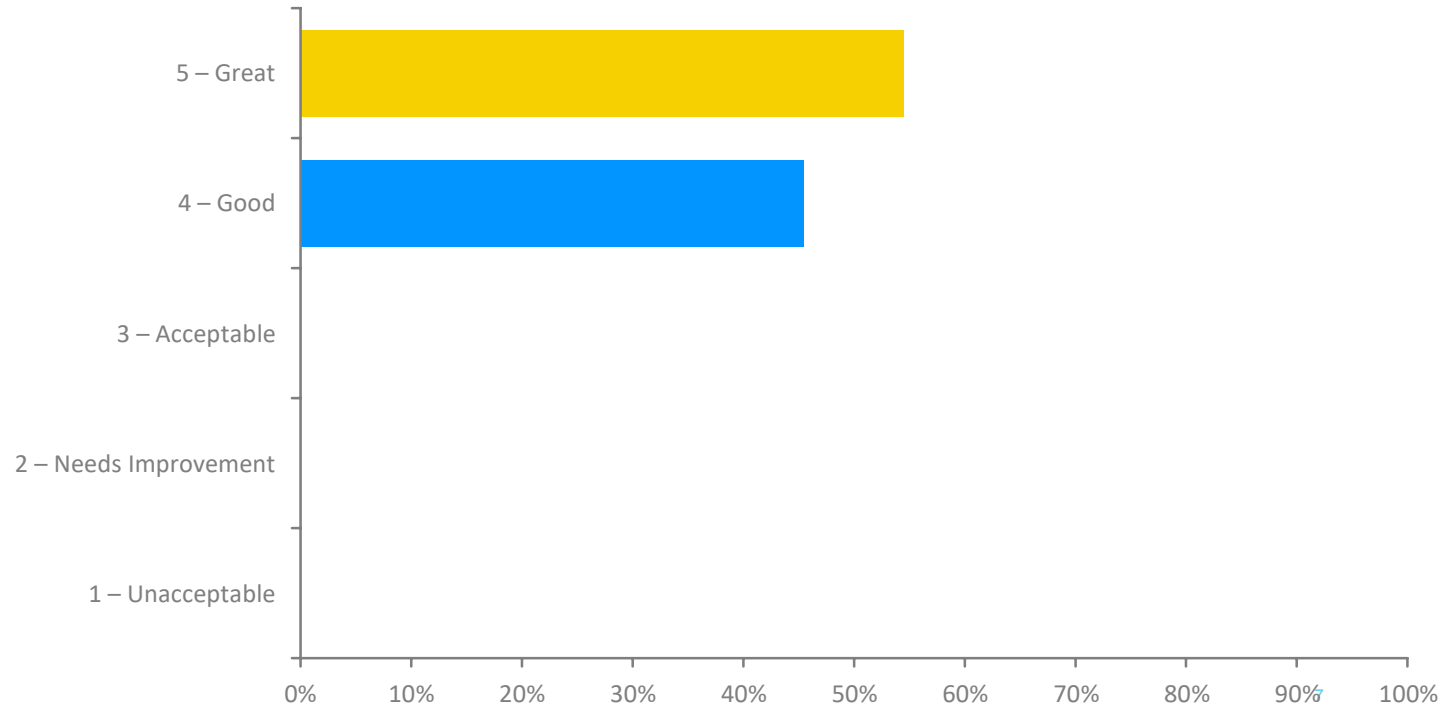
	<b>Strengths</b>	<b>Areas for Improvement</b>
<b>Materials</b>	<ul style="list-style-type: none"> <li>Received materials in a timely manner to efficiently prepare for the meeting</li> </ul>	
<b>Agenda</b>	<ul style="list-style-type: none"> <li>On-time, efficient meetings with strong chairing and staff support</li> </ul>	
<b>Engagement and Presentations</b>	<ul style="list-style-type: none"> <li>Guest speakers were great and informative</li> <li>Kept on track and focused with strong engagement</li> <li>Flexibility of Staff and the Chair in accommodating speakers and responding to changes</li> </ul>	<ul style="list-style-type: none"> <li>Strengthen motion practices by encouraging consistent and visible participation cues</li> </ul>
<b>Outcomes</b>	<ul style="list-style-type: none"> <li>Discussing key several topics to continue to progress the College forward</li> </ul>	



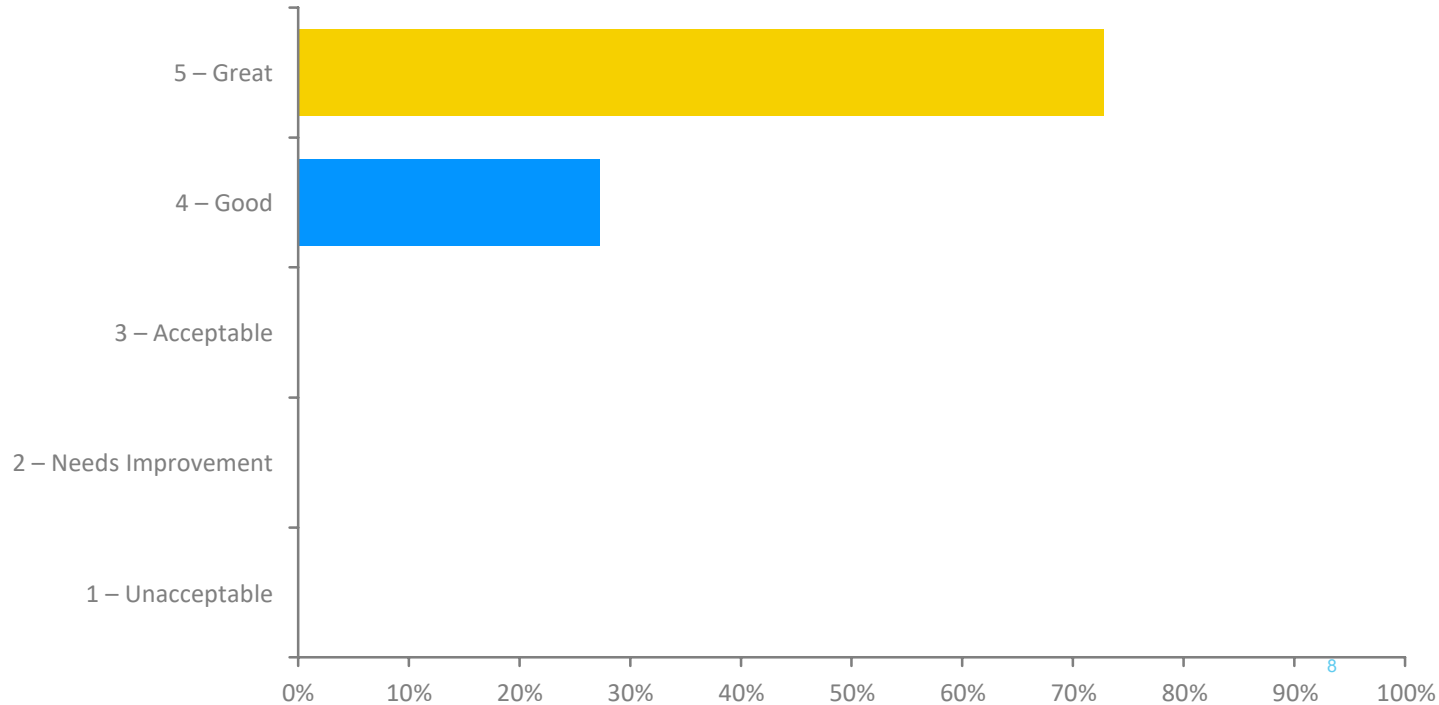
# 2025 Annual Board Evaluation

A comprehensive review of the Board's overall performance and governance practices over the year to strengthen accountability and effectiveness.

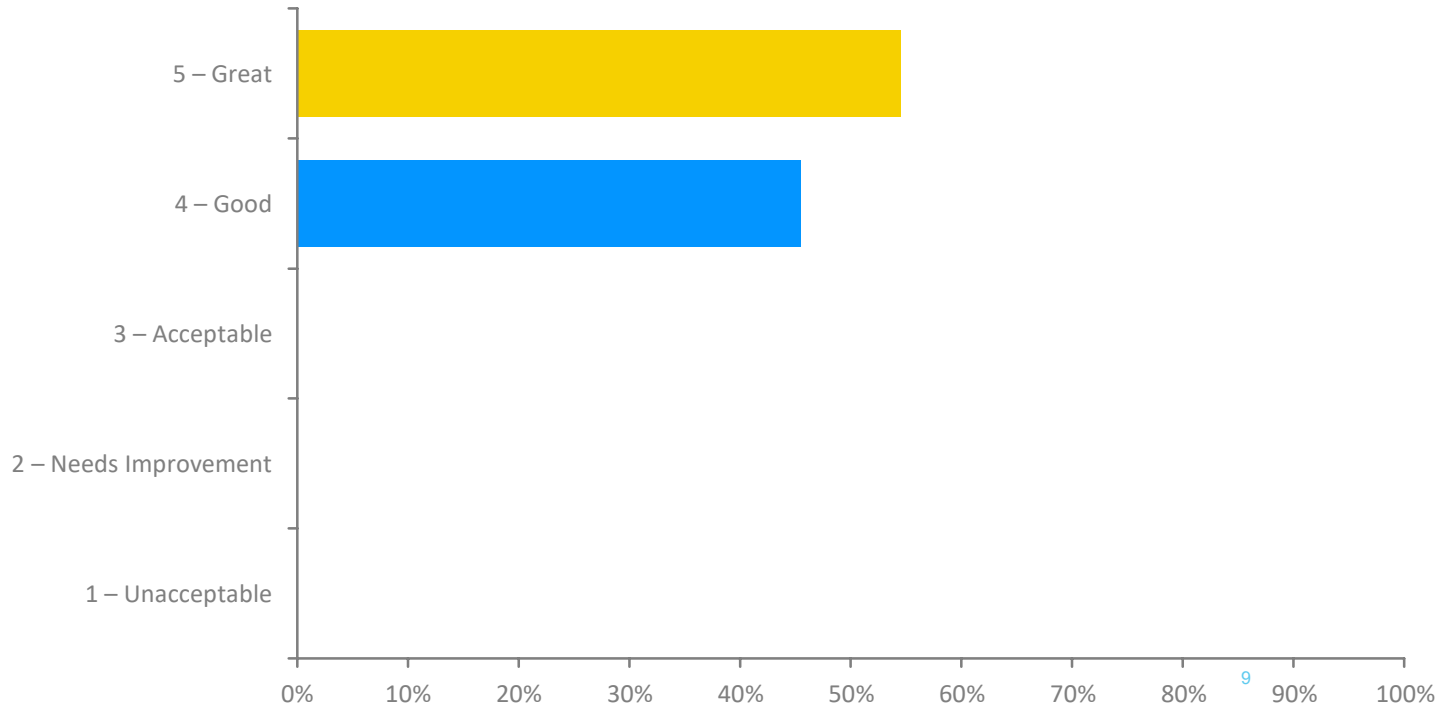
# Board members have a good understanding of the purpose, mandate, and programs of the College.



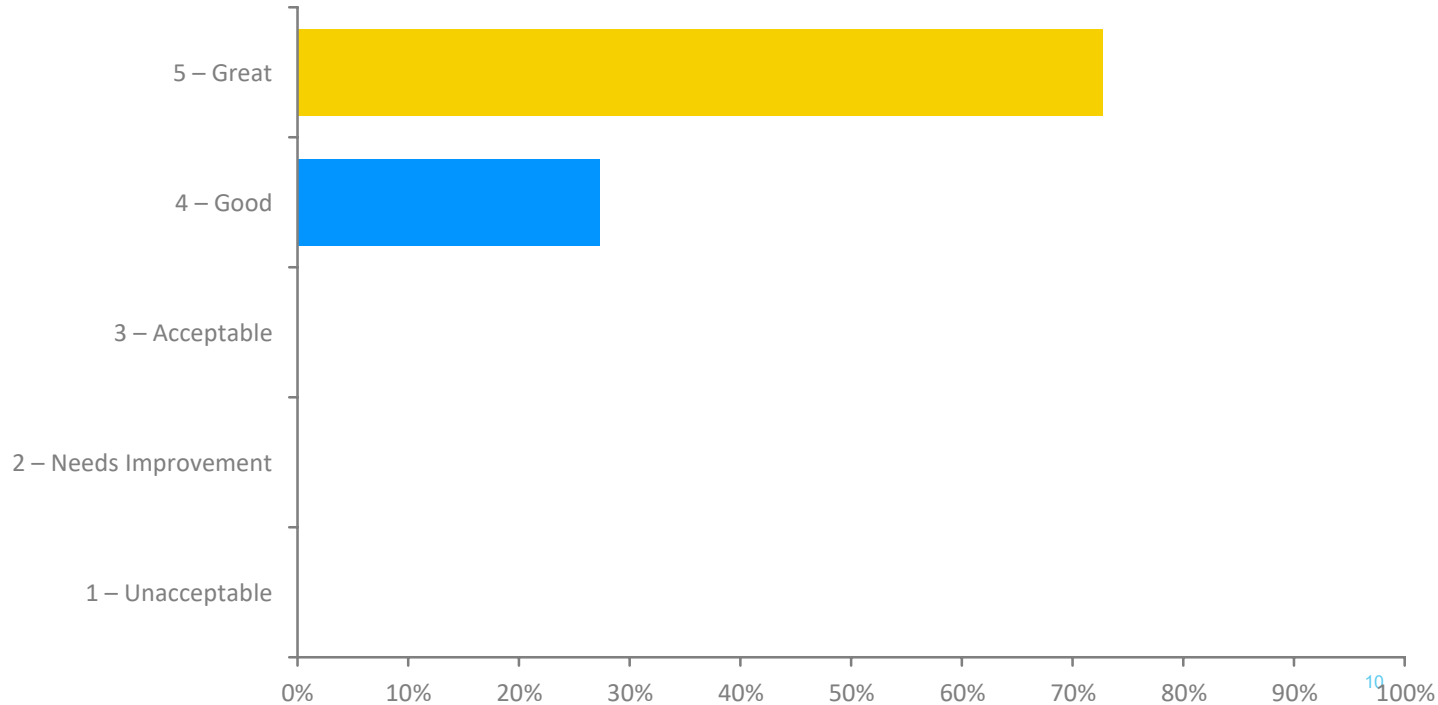
Board members are aligned on their role as Governors, making decisions in the public interest.



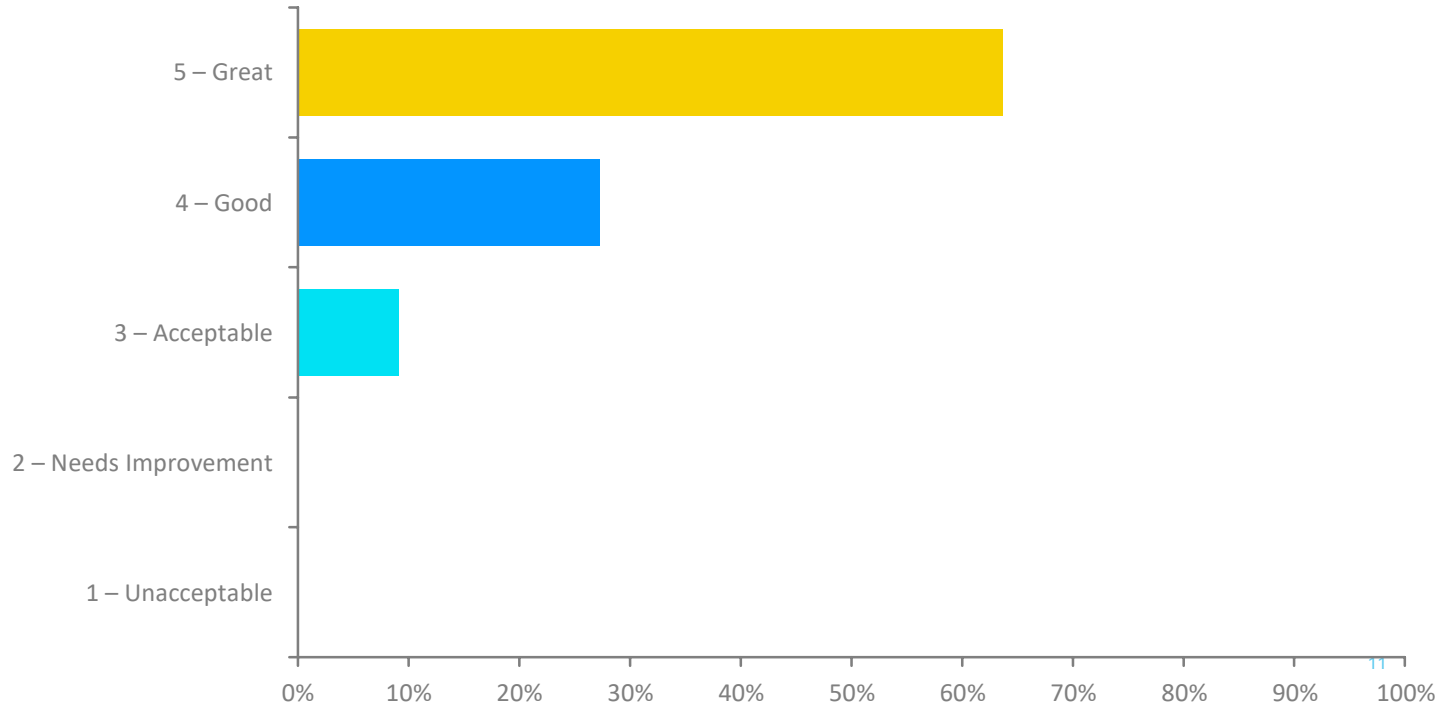
# Board members are clear and agree on the distinction between Board and Management responsibilities.



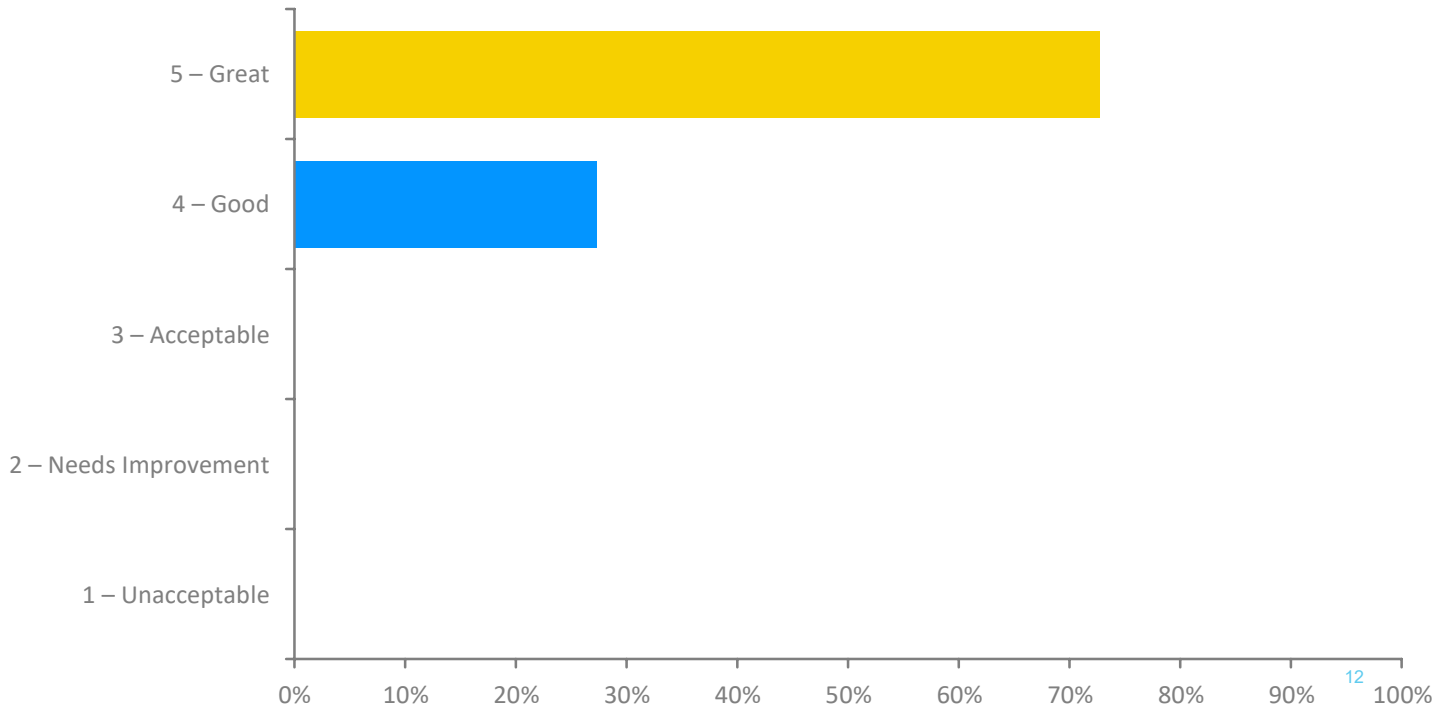
# The Board regularly monitors and evaluates progress toward strategic and operational goals.



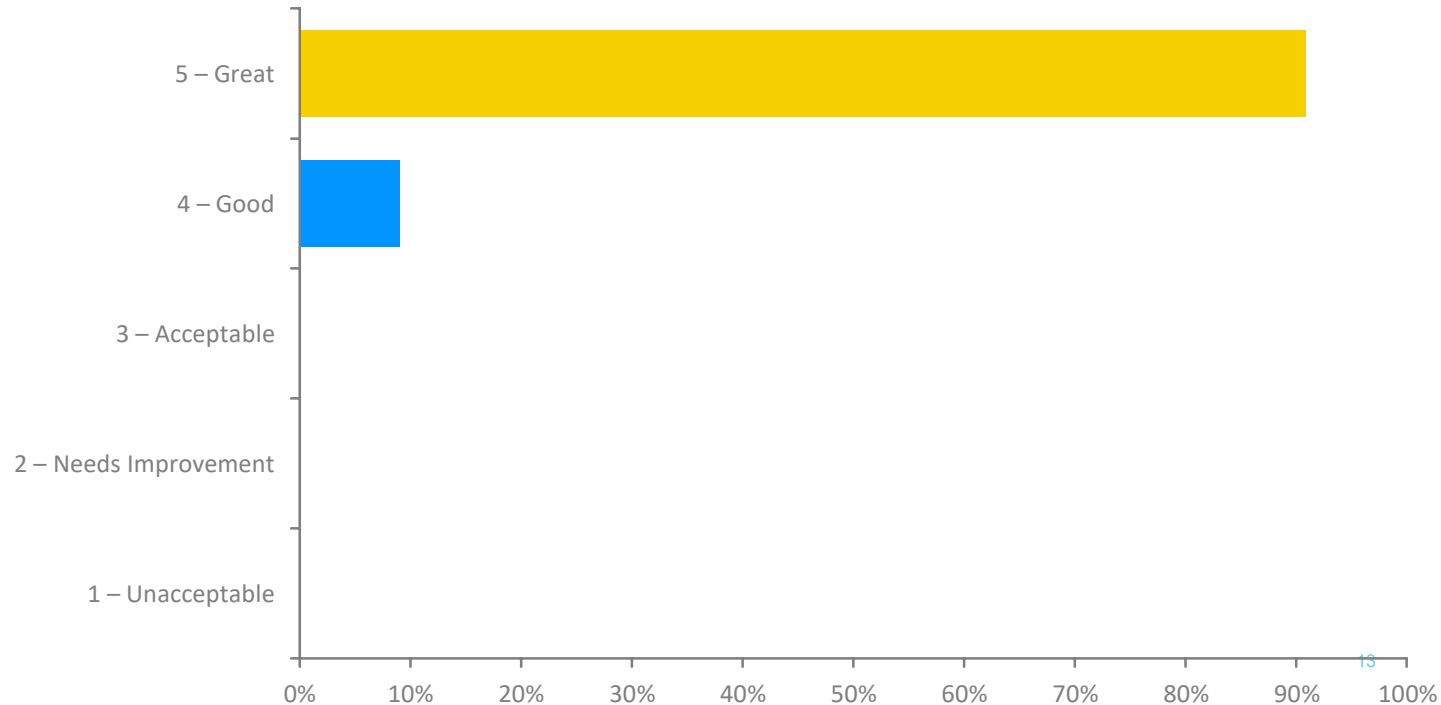
Board members have opportunities to develop as leaders through rotation of Committee assignments, Chair roles, and/or other opportunities to lead.



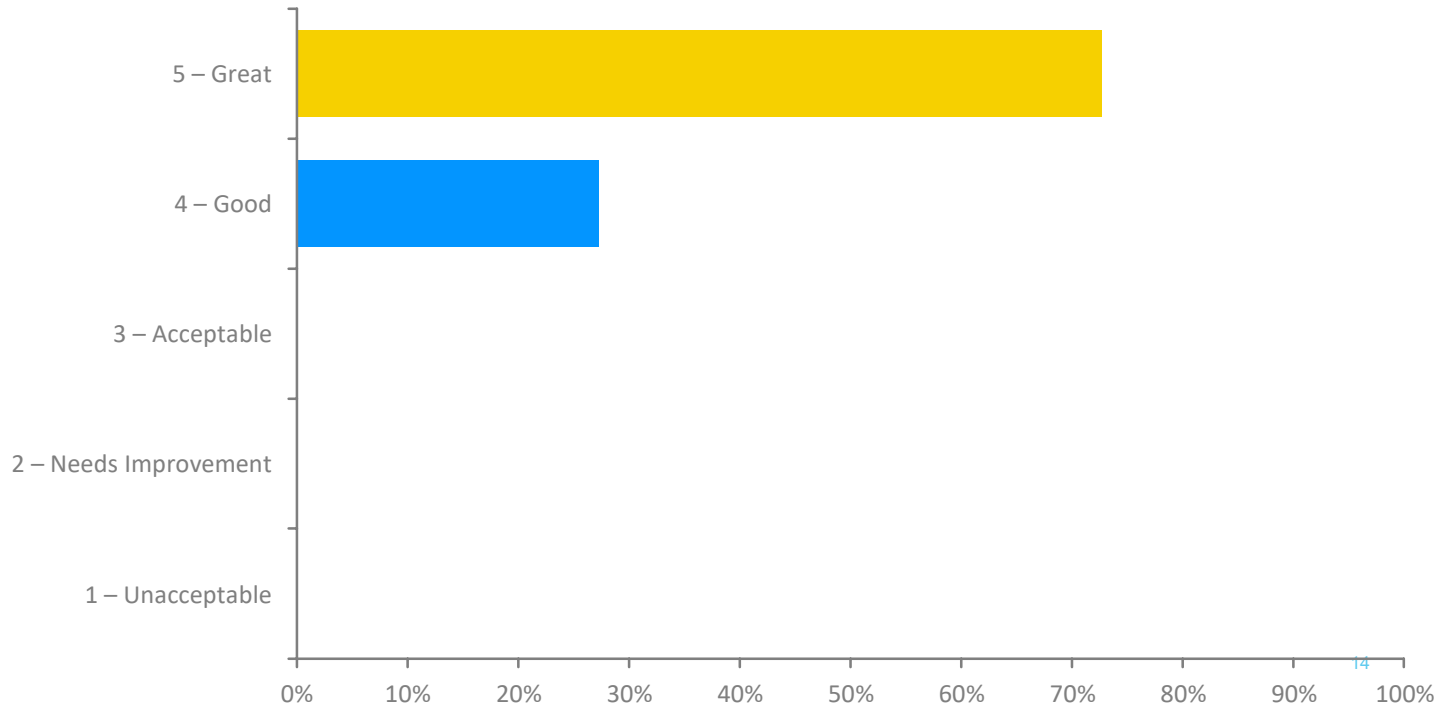
Committee Chairs are effective at guiding meetings, encouraging participation, and allowing all sides to be heard, consistent with CDTO's values and the public interest.



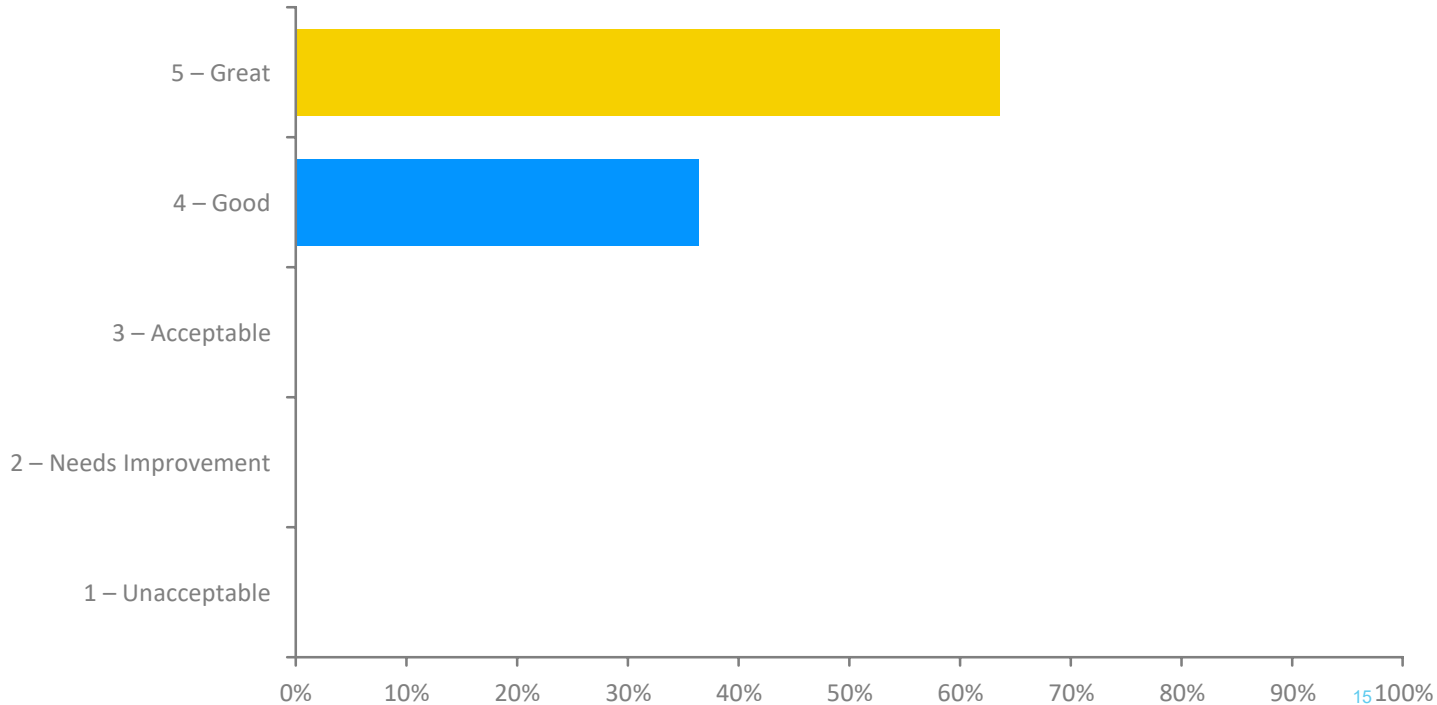
Executive Committee has the necessary skills, enthusiasm, and energy to provide leadership in the public interest to the Board, and also has an effective working relationship with the CEO.



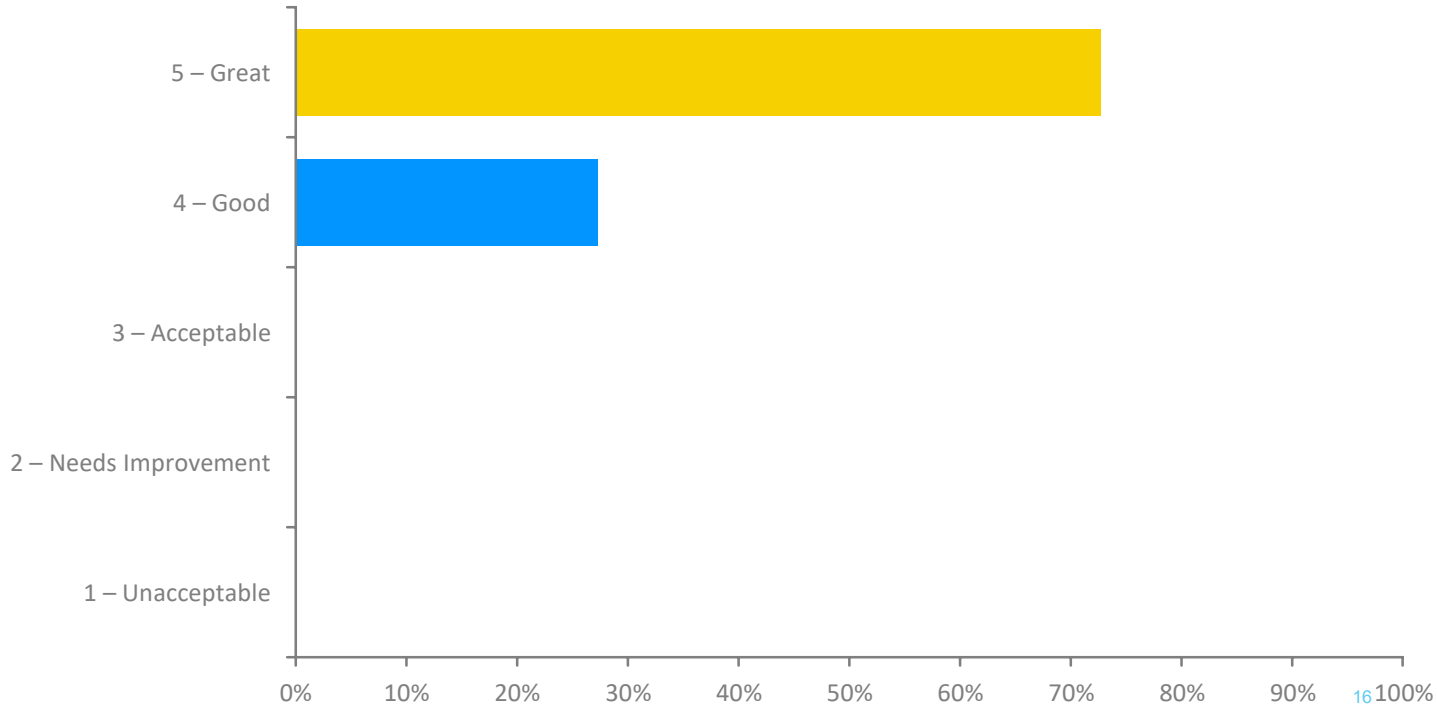
The Board, including through the Executive, is actively and appropriately involved in setting direction for and approving the financial plan/budget.



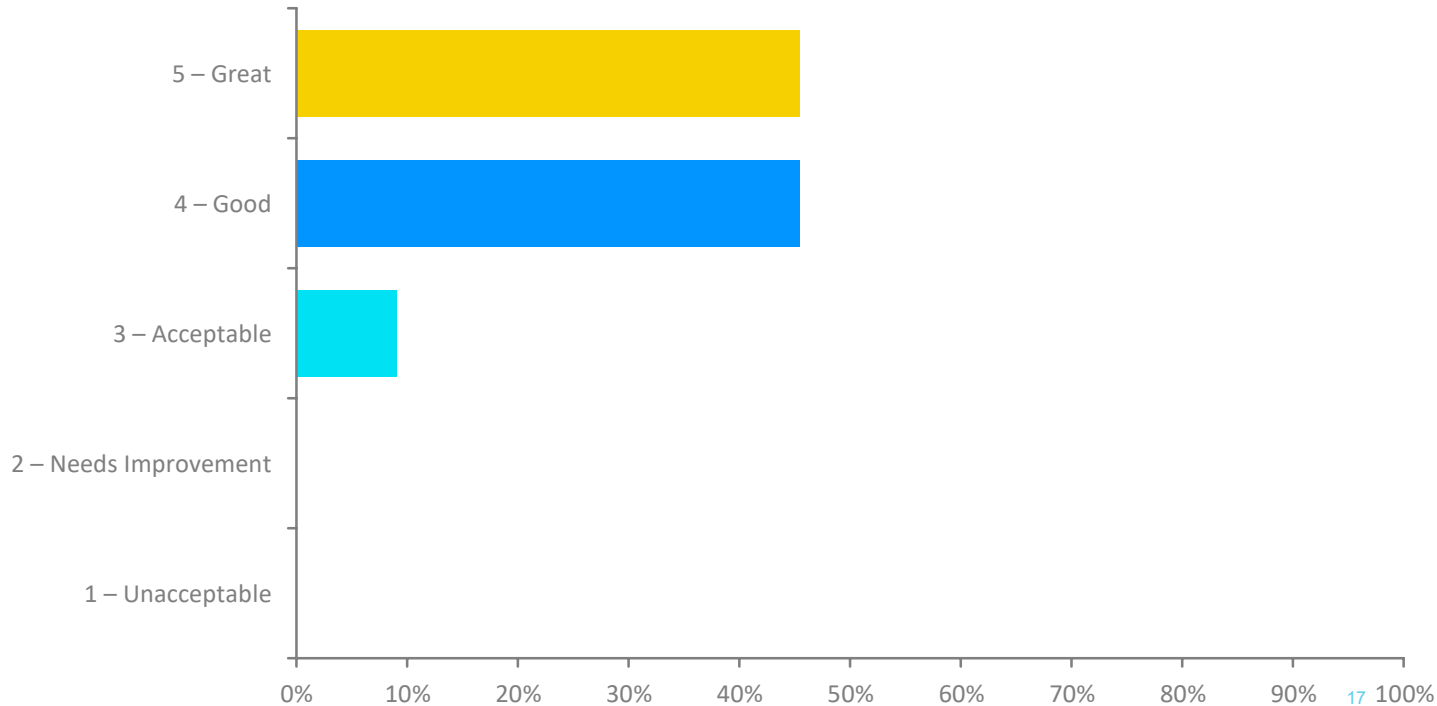
The Board monitors financial performance regularly and staff are able to explain variances and potential corrective actions, with few or no surprises.



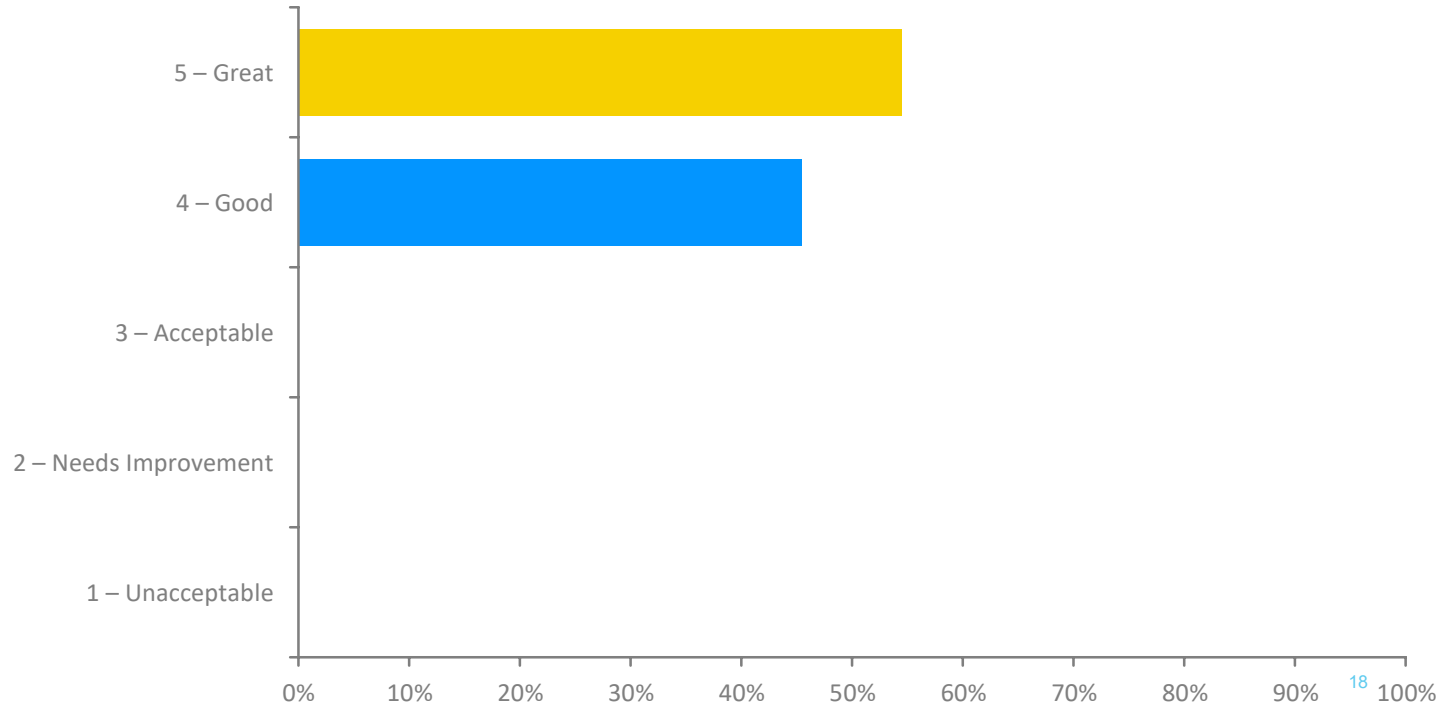
# The Board ensures timely, independent auditing of finances, and audit results are discussed by the Board with the Auditor.



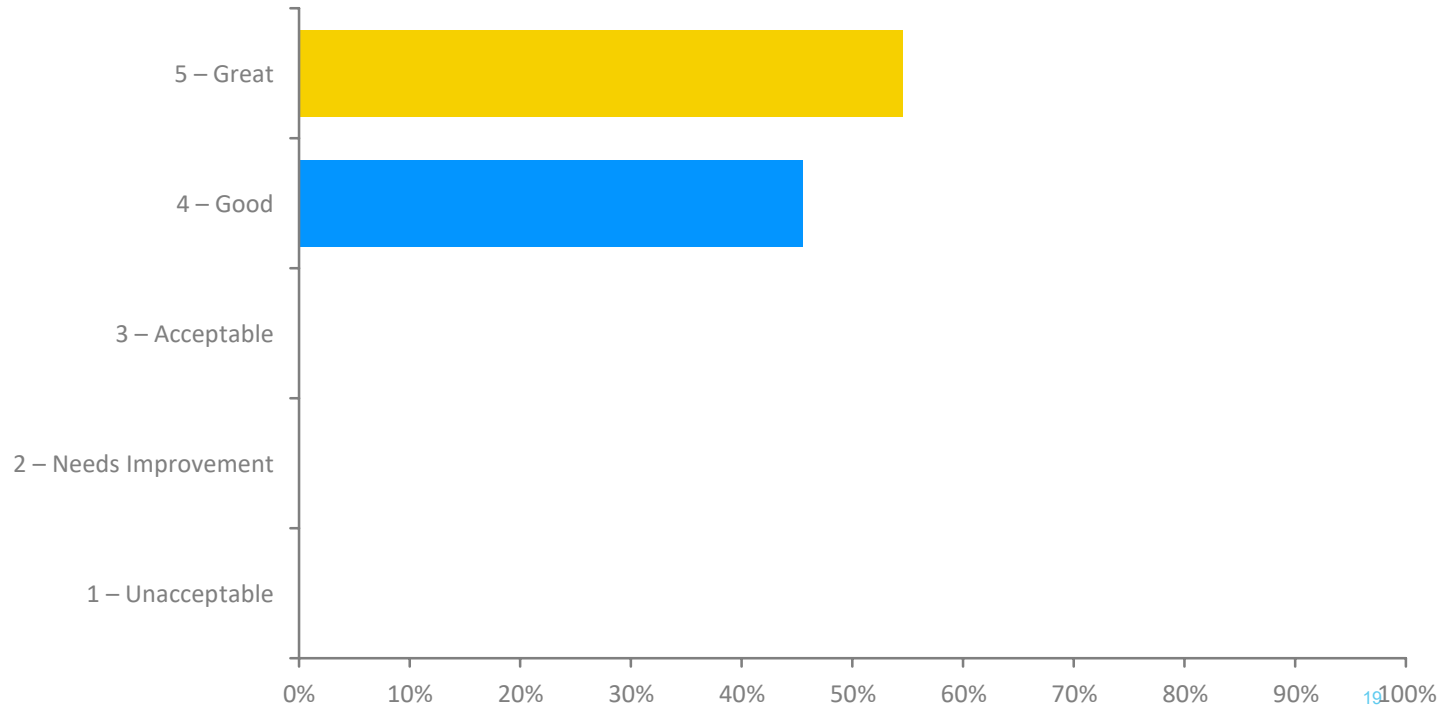
The Board contributes to and is briefed periodically on regulatory and organizational risk management priorities and actions.



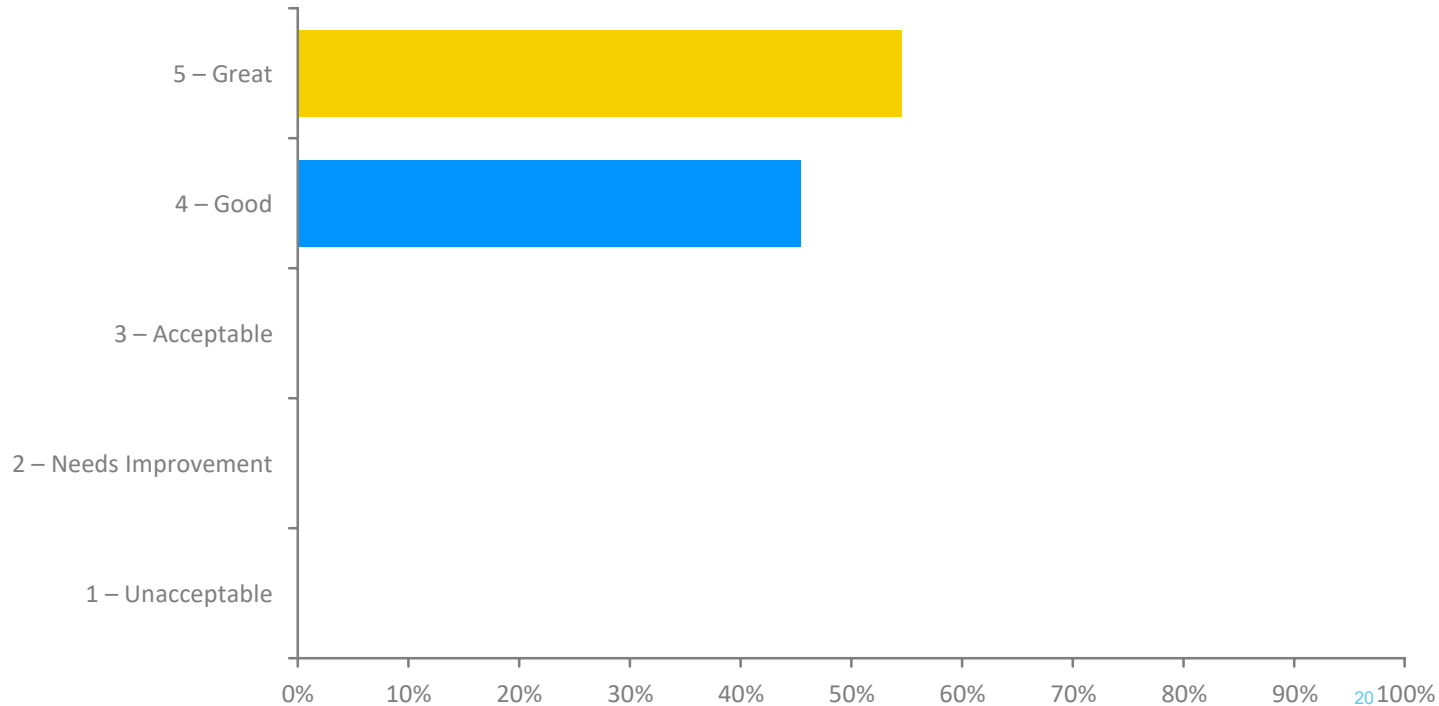
Board and Committee meeting agenda and packages are clear about the key issues and areas for the Board's/Committee's consideration. Material is received sufficiently in advance to allow for effective preparation.



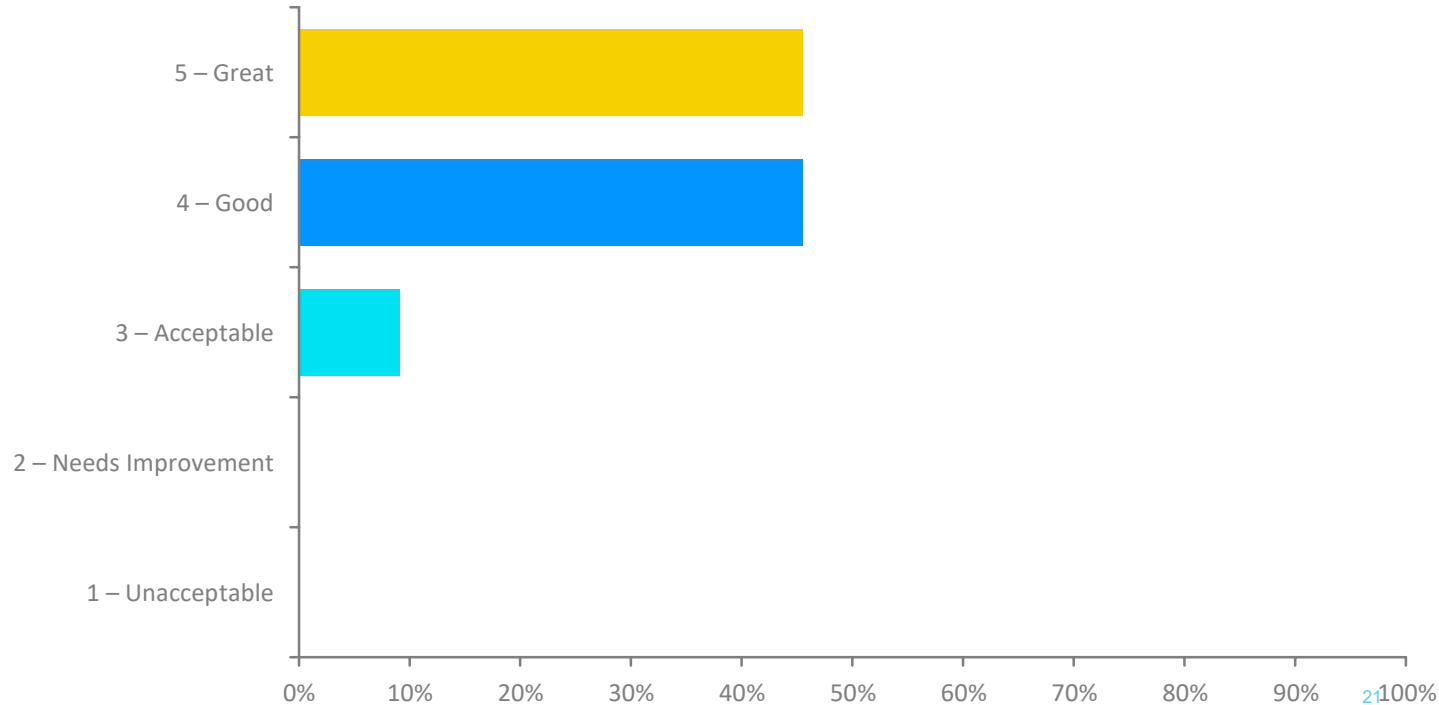
Board and Committee meetings start and end on time with an emphasis on substantive discussion of significant matters by the Board/Committees.



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



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



# Feedback from the Board

Areas where the Board's performance and effectiveness can be improved:

- ▶ Foster greater engagement from all Board members to strengthen participation and dialogue.
- ▶ Promote balanced input by actively inviting perspectives from public members alongside elected members.
- ▶ Encourage thorough review of meeting materials in advance to support informed and effective decision-making.
- ▶ Optimize meeting time by ensuring materials and discussions are aligned with the Board's governance and oversight role.



# Feedback from the Board

New or additional learning development that would be beneficial:

- ▶ Regular training and reinforcement of core governance principles to strengthen understanding of the College mandate, Board responsibilities, and regulatory best practices.
- ▶ Financial oversight training to build confidence in reviewing budget documents and evaluating audit processes and firms.



# Right-touch regulation: Top 10 messages.

Alan Clamp

23 January 2026

# NUMBER 1

All regulators – regardless of the sector or jurisdiction – face the same challenges. RTR is a really useful framework for tackling these challenges.



## NUMBER 2

The challenges: operational processes (barriers to innovation, improvement and good regulation); stakeholder relationships (criticisms); and impact.



# NUMBER 3

RTR is a principles-based framework. Can be used to transform: operational processes; stakeholder relationships; and impact.



# NUMBER 4

Important to emphasise the purpose of regulation – and to consider whether the challenges relate to regulation as a noun or a verb, or to the regulator itself.



# NUMBER 5

RTR can reduce the risks of harm:

- (a) Are the risks bad enough?
- (b) Will regulation make a difference?
- (c) If so, what form of regulation?



# NUMBER 6

Right-touch regulation is all about balance.



23 January 2026

# NUMBER 7

Regulation is just one part of a lines of defence model that protects us from harm.



# NUMBER 8

## The six principles:

- Targeted
- Accountable
- Proportionate
- Consistent
- Agile
- Transparent



# NUMBER 9

## The process:

- Problem
- Risks
- Outcome
- Evaluation



# NUMBER 10

## Ways of working:

- Collaborative
- Innovative
- Efficient
- Fair
- Inclusive



# RTR in action



23 January 2026

# Questions



23 January 2026