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# AGENDA

## Transition Council Meeting

**Monday, March 16, 2026, 1:00 – 4:00 pm**

**Tuesday, March 17, 2026, 9:00 – 4:00 pm**

Council Chamber

2-71 Hanlon Creek Blvd.

Guelph, ON

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## Members

Dr. Patricia Alderson  
Mr. Ted Arnott  
Ms. Kirsti Clarida, RVT  
Dr. Kathleen Day Dunbar  
Mr. John de Bruyn

Ms. Cathy Hecimovich  
Dr. Louise Kelly  
Ms. Catherine Knipe, Chair  
Ms. Lisa Langton, RVT  
Dr. Lena Levison

Dr. Clayton MacKay  
Dr. Sean Marshall  
Mr. Phil Nichols, RVT  
Dr. Alana Parisi  
Dr. Sami Qureshi

Dr. Jessica Retterath  
Mr. Douglas Reynolds  
Dr. Yashvir Varma  
Dr. Wade Wright, Vice-Chair  
Dr. Michael Zigler

## Agenda

1. Call to Order
2. Roll Call
3. Approval of Agenda
4. Conflict of Interest
5. Approval of Minutes
  - November 26-27, 2025
6. Chair's Report
7. Registrar's Report

8. Official Documents
  - 8.1. Update on the By-laws Consultation
  - 8.2. Standard - Interprofessional Collaboration
  - 8.3. Standard - Medical Records
  - 8.4. Standard - Humane Animal Handling and Restraint
  - 8.5. Standard – After-Hours Veterinary Care
  - 8.6. Omnibus Approval of Standards and Policy
  - 8.7. Policy Tracking Chart
9. Governance
  - 9.1. Transition Council Evaluation
  - 9.2. Building Governance Readiness – Part 1 - Presentation
  - 9.3. Right Touch Regulation - Presentation
  - 9.4. Risk Factors Policy Discussion
  - 9.5. Nominations and Election Process for new Council
10. Implementation Planning
  - 10.1. Licensure Pathways
  - 10.2. Committee Transition
  - 10.3. Discipline Tribunal
11. Strategic Communications
12. In Conversation - Licensure Process Experience with Internationally Educated Veterinarians: 11:00 – 12:00 pm on March 17
13. Confidentiality
14. Next Meeting
  - June 4, 2026 (Virtual)
  - June 17, 2026 (In-Person)



## **AGENDA ITEM 4.**

### **TOPIC: Conflict of Interest**

#### **Overview**

A conflict of interest exists where a reasonable person would conclude that a Council member's personal or financial interest may affect their judgment or the discharge of their duties to the College. A conflict of interest may be real or perceived, actual or potential, direct or indirect.

All Council 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 Council members have a duty to uphold and further the intent of the Act to regulate the practice and profession of veterinary medicine in Ontario, and not to represent the views of advocacy or special interest groups.

Where a Council member believes that they may have a conflict of interest in any matter which is the subject of deliberation or action by Council, they shall:

- (i) consult, as needed, with the Chair or the Registrar;
- (ii) where there appears to be a conflict of interest, not take part in the discussion of, or vote on, any question in respect of the matter;
- (iii) where there appears to be a conflict of interest, absent themselves from the portion of any meeting relating to the matter; and
- (iv) where there appears to be a conflict of interest, not attempt in any way to influence the voting or do anything that might be perceived as attempting to influence the decision of other Council members on the matter.

COVER SHEET  
Transition Council Meeting  
March 16-17, 2026



## **AGENDA ITEM 5.**

**TOPIC: Approval of Minutes**

### **5.1 Minutes**

- November 26-27, 2025

COVER SHEET  
Transition Council Meeting  
March 16-17, 2026



**AGENDA ITEM 6.**

**TOPIC: Chair's Report**

Verbal Report.

COVER SHEET  
Transition Council Meeting  
March 16-17, 2026



**AGENDA ITEM 7.**

**TOPIC: Registrar's Report**

Verbal Report.



## AGENDA ITEM 8.1

### **TOPIC: Update on By-Law Consultation**

The CVPO By-Laws are open for consultation from January 19<sup>th</sup> – March 20<sup>th</sup>, 2026. Acer Consulting is overseeing the collection of the feedback and development of a report for review by Transition Council at its meeting on June 4, 2026.

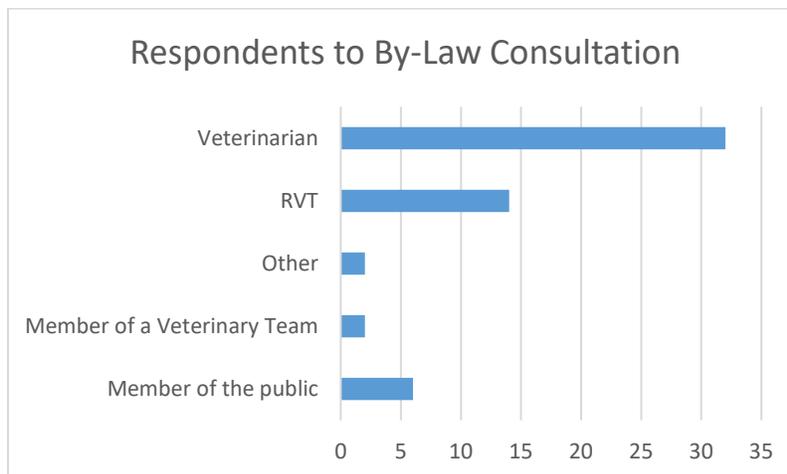
A town hall was held on February 12, 2026, to answer questions about the by-laws.

Acer has provided a brief summary of results for feedback collected so far on February 24, 2026.

Number of responses: 56

Respondent Type:

<b>Respondent Type</b>	<b># of Responses</b>
Member of the public	6
Member of a Veterinary Team	2
Other	2
RVT	14
Veterinarian	32



COVER SHEET  
Transition Council Meeting  
March 16-17, 2026



The responses are generally positive with more than half of the responses indicating agreement (strong + somewhat) with all the proposed by-law articles except for Article 15 Professional Corporations and the Fee Schedule.

Professional Corporations received a spread of responses with most respondents indicating either strong agreement, neither agree nor disagree, or somewhat disagree. It will be interesting to analyze this area, as there is very little change from the existing CVO By-Laws, with the exception of a move to an annual renewal process.

For the fee schedule most responses indicated somewhat agreement, somewhat disagreement, or strong disagreement.

The Fee Schedule section also received the greatest number of write in comments (23), followed by Article 2 Council (20) and Article 13 Professional Insurance (16). Comments on the fee schedule mainly concern the cost, especially for RVT and veterinarian licensing, and price and complexity of accreditation fees. For Article 2, comments mainly concern council eligibility and composition, particularly with respect to the number of RVTs. Professional insurance comments mainly concerned costs of the insurance, especially for RVTs, and locum coverage.



## AGENDA ITEM 8.2

### **TOPIC: Interprofessional Collaboration**

#### **Overview**

Section 100(4) of the *Veterinary Professionals Act, 2024 (VPA)* grants Transition Council the ability to pre-emptively make any standards required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario.

Given that many of these standards will rely on the regulations made under the *VPA*, they cannot be fully confirmed by Transition Council until such regulations are approved. However, Transition Council can begin considering the key concepts of these policies to ensure they are ready for consultation once regulations are made.

At its November 2025 meeting, Transition Council reviewed proposed concepts to be included in a Professional Practice Standard related to interprofessional collaboration and directed College staff to begin work on developing a standard based on these concepts. College staff have now compiled the background information and discussion that have informed the development of the standard related to interprofessional collaboration and have attached it in the form of a Briefing Note to this cover sheet (Appendix A). A copy of the *draft Professional Practice Standard: Interprofessional Collaboration* is attached to the Briefing Note – Interprofessional Collaboration as Appendix B.

#### **Discussion**

Transition Council is now asked to review the briefing note and the proposed draft *Professional Practice Standard: Interprofessional Collaboration* and to discuss next steps.

#### **Attachments**

1. Appendix A – Briefing Note – Interprofessional Collaboration
2. Appendix B – Draft Professional Practice Standard: Interprofessional Collaboration



## BRIEFING NOTE

### Interprofessional Collaboration

#### **PART A: Introduction**

##### **Issue Definition**

The College has been working on the promotion of interprofessional collaboration for several years. The topic has been raised in several areas, most recently connected to the ongoing legislative reform process including the introduction of the *Veterinary Professionals Act, 2024 (VPA)*.

Interprofessional Collaboration has been defined as: *two or more individuals, from different professions, working together on a task/service.*

Examples of interprofessional collaboration in practice may include:

- A veterinarian developing a treatment plan with a farrier or hoof trimmer;
- A veterinarian communicating with a pharmacy professional regarding a prescription; or
- A veterinary professional communicating effectively with any other animal care provider to ensure continuity of care for a mutual animal patient(s).

The introduction of the *VPA* has allowed for more direct work to begin on allowing and promoting interprofessional collaboration. The *VPA* introduces and encourages interprofessional collaboration in a number of ways. These include:

1. *Inclusion of other named professions in the authorized activities model.*

Within the authorized activities model outlined in Section 9 of the *VPA*, two professions are named as exceptions, allowing chiropractors who are members of the College of Chiropractors of Ontario, as well as pharmacy professionals who are members of the Ontario College of Pharmacists, to carry out authorized activities as described in regulation. Transition Council has included details about these activities in the regulatory concepts forwarded to the Ministry. There is now an opportunity to clarify expectations for interprofessional collaboration within the authorized activity model in a Professional Practice Standard.

2. *Allowance for the development of regulatory exemptions for non-members.*

Section 9 (5) of the *VPA* permits persons (who are not members) to perform certain authorized activities subject to any prescribed guidelines, processes, terms, conditions, limitations, or prohibitions outlined in Regulation. This ability is further confirmed in Section 93 (1) 7 of the *VPA*, which allows for the development of regulation language permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities. Transition Council has included details about these exemptions in the regulatory concepts forwarded to the Ministry. There is now an opportunity to clarify expectations for interprofessional collaboration within the authorized activity model in a Professional Practice Standard.

3. *Inclusion of interprofessional collaboration within the Objects of the College.*

Section 3(1) of the *VPA* outlines a number of objects of the College of Veterinary Professionals of Ontario. To signal the importance of interprofessional collaboration, the following object is included:

*“11. To work with other animal care providers to enhance interprofessional collaboration and access to animal health care in Ontario”.*

To work towards that Object of the College, a published Professional Practice Standard on the topic will demonstrate the College’s ongoing commitment to supporting the model. It will also allow for clear expectations to be outlined that will assist with the understanding and implementation of a more formally recognized collaborative approach to providing animal care.

### **Public Interest Rationale**

Public interest is grounded in the provision of safe, competent, and informed veterinary care. Public access to this care is paramount. Accessibility will vary depending on the circumstances of an owner(s) and/or animal(s). A veterinarian’s ability to identify and work with these circumstances will also affect the availability of care options. The public interest is best served when the delivery of veterinary care is designed to serve as many individuals and/or animals as possible. The public is already interested in and receiving care for their animals in a collaborative model. It is important that the College develop clear expectations for this model to ensure the evolution of practice is supported.

***Are there other elements that Transition Council should consider regarding its mandate relative to the issue?***

### **Legislative Authority**

As described above, the *VPA* enables the promotion of interprofessional collaboration. This intention has also been carried into the development and approval of the proposed regulatory concepts submitted to the Ministry. Now, Transition Council is being asked to consider the concept at the policy level.

Section 100(4) of the *Veterinary Professionals Act, 2024 (VPA)* grants Transition Council the ability to pre-emptively make any standards required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario.

Given that many of these standards will rely on the regulations made under the *VPA*, they cannot be fully confirmed by Transition Council until such regulations are approved. This applies to the proposed Standard related to interprofessional collaboration.

### **Analysis of Risk**

Interprofessional collaboration is one of the key ways to support access to veterinary care and reduce barriers to access. The provision of animal care by a qualified individual can reduce risk while supporting access to care. When veterinary professionals work with other animal care providers it enhances access to animal care and reduces risk in numerous ways. These include:

- veterinarians collaborating to offer clients a range of care options that consider the patient's interests and the client's goals, values, and resources;
- reducing stressors for veterinary teams such as high workload and lack of resources to provide all aspects of animal care;
- reducing pressure on veterinary professionals providing, and clients accessing timely care for animals; and
- preventing situations in which animals do not receive any form of care that may compromise animal welfare.

There is an opportunity to recognize the education, training and expertise of other non-veterinary animal care providers. Several regulated professionals as well as individuals with the necessary knowledge, training, skills and judgement to deliver safe and effective care are available for veterinary professionals to collaborate with. In particular, when collaborating with pharmacy professionals and/or chiropractors, veterinary professionals can be confident that they are collaborating with qualified individuals by knowing they are regulated by a College of their own. These individuals are required to follow a number of applicable pieces of legislation, regulation, and practice standards.

## **PART B: Background**

### **Relevant Background**

The College of Veterinarians of Ontario has been considering the need for clarity related to the regulatory oversight of related topics since 2016. This consideration has been a part of a larger series of conversations, including those related to the use of forms of energy in the treatment and/or care of animals, the use of non-conventional therapies in the practice of veterinary medicine, and veterinary acupuncture. At all times, this overarching and multi-faceted work has been focused on risk identification and mitigation related to harm or potential harm to animals and/or the public.

From February 2021 to February 2023, a Working Group on Shared Care in Animal Rehabilitation worked on a series of recommendations approved by Legacy Council to assist with both the profession and the public understanding the innovative opportunities that the concept of shared care enables. This Working Group also published a series of infographics to promote interprofessional collaboration in the area of animal rehabilitation and these are attached to this Briefing Note as Appendix A.

The recommendation for Transition Council to develop a policy related to interprofessional collaboration was raised during the development of the regulatory concepts under the *VPA*, and now Transition Council is being presented with a full draft policy document on the topic. Transition Council previously approved the proposed concepts for this policy at its November 2025 meeting.

### **Partner Needs and Preferences**

Both the profession and the public seek College policies that are clear, consistent, and easy to understand and maintain.

The public seek to obtain safe and competent veterinary care for their animals. While the type of care sought may differ, it is reasonable to assume that most animal owners seek accessible care.

Veterinarians seek to provide veterinary care that is in line with regulatory requirements. Professional judgement is an intricate part of practice that requires individual interpretation and ethical decision-making, but clear and consistent expectations from the regulator are essential to assisting veterinarians in offering acceptable forms of care.

Veterinarians also seek reassurance about their ability to adapt and adjust the ways in which they practice. Minimum standards are required to ensure public safety, but veterinarians should be assured of their ability to use their own skills, knowledge, and judgement to determine care options for each case with which they are presented.

Other veterinary regulators and like-minded organizations are also interested in the College's work related to interprofessional collaboration. The College of Chiropractors of Ontario (CCO) has an existing Standard of Practice: Chiropractic Care of Animals and conversations with CCO have acknowledged that revisions to this standard are required to reflect the *VPA* and associated regulation. The Ontario College of Pharmacists (OCP) Board has also confirmed their direction to develop a standard for pharmacy professionals providing pharmacy services to animal patients.

Feedback received during public consultation on the proposed regulatory concepts included overall support for the recognition of animal care as a system where veterinary and non-veterinary animal care providers collaborate to deliver care to animals. Partners stressed the importance of articulating clear boundaries and expectations around interprofessional collaboration. This includes feedback highlighting the need for policies and resources that

support open communication, mutual respect, and confidence required for interprofessional collaboration that improves access to seamless and effective care in the public interest.

***What else does Transition Council know or need to know relative to the decision at hand?***

**Data**

A scan of questions received by the Practice Advisory Service between February 1, 2024, and February 1, 2026, was completed to gather a sense of the types of inquiries made by members of the profession and members of the public with respect to interprofessional collaboration. The majority of questions sought guidance on expectations regarding referral, veterinarian oversight, and managing or transferring medical records both within and outside the same clinical space when collaborating with non-veterinary animal care providers.

***Is there additional data that may assist Transition Council with discussion?***

**Environment**

A jurisdictional scan of *Regulated Health Professionals Act (RHPA)* Colleges was completed to gather a sense of what other regulators have available for their members on practice guidance related to interprofessional collaboration. The outcomes of this scan was presented to Transition Council at its November 2025 meeting. A narrowed focus was then taken to consider a smaller number of these regulators to identify key themes and documents. The key themes from this analysis include identification of who to collaborate with and when, descriptions of the desired outcomes of interprofessional collaboration, and emphasis on communication, conflict resolution, and documentation as vital elements to effective interprofessional collaboration.

Please refer to Agenda Item 11.1 in the November 2025 package for the full list of regulators and analysis.

***What else does Transition Council know/need to know about current realities and future trends relative to the decision?***

**Broad Legal Advice**

The College has not sought specific legal advice related to this topic. This is due to this topic being solely policy based.

**PART C: Analysis**

**Analysis**

Transition Council has acknowledged the importance of the public having access to and choice in selecting providers for animal care. It is also the responsibility of Transition Council to ensure that higher risk activities remain the practice of veterinary medicine in order to maintain safety and accountability, and this has been done through the proposed regulatory exemptions for non-veterinary animal care providers.

First, within the authorized activities model, two professions are named as exemptions: chiropractors and pharmacy professionals. These exemptions allow chiropractors who are members of the College of Chiropractors of Ontario and pharmacy professionals who are members of the Ontario College of Pharmacists to carry out authorized activities as described in Regulation. Second, the *VPA* permits persons who are not members to perform certain authorized activities subject to any prescribed guidelines, processes, terms, conditions, limitations, or prohibitions outlined in Regulation. The proposed regulatory concepts outline exemptions for farriers and hoof trimmers, animal rehabilitation providers, individuals performing embryo transfer in cattle, and individuals required to perform mass culls of livestock and poultry.

Based on this, overarching concepts for a *Professional Practice Standard: Interprofessional Collaboration* were considered by Transition Council at the November 2025 meeting. These concepts were confirmed and have been applied to the draft. To be effective, the Standard aims to balance access to care, consumer choice, and accountability. It emphasizes communication, conflict resolution, and documentation as vital elements of interprofessional collaboration.

### Options For Consideration

Transition Council is now asked to review the draft Professional Practice Standard: Interprofessional Collaboration. Options for a motion have been provided below, in Part E of this Briefing Note.

It should be noted that should Transition Council direct that the Professional Practice Standard be circulated for consultation, this would occur at a later date due to the need for confirmation of regulations to ensure there are no conflicts with the draft Standard.

## **PART D: Additional Considerations**

### Capacity

This work will be managed as part of the College's regular policy work and will not require additional staffing or budget allocations.

### *Are there any other resource issues that need consideration?*

### Opportunity for Collaboration

The College expects there would be several opportunities for collaboration related to this policy. This includes consultation on the draft Standard with other regulators such as the Ontario College of Pharmacists and College of Chiropractors of Ontario, the Ontario Veterinary Medical Association and the Ontario Association of Veterinary Technicians.

### Measurement of Impact

Measurement of impact will be dependent on Transition Council's decision and implementation will be directed by the First Council of the CVPO.

## **PART E: Council Discussion**

### **Direction Requested**

Transition Council has the opportunity to discuss and ask questions related to the proposed *Professional Practice Standard: Interprofessional Collaboration*. A draft version of the Professional Practice Standard has been developed using the concepts approved by Transition Council at its November 2025 meeting and has been attached to this Briefing Note as Appendix B.

### **Potential Council Directions**

Following discussion, Council may elect to:

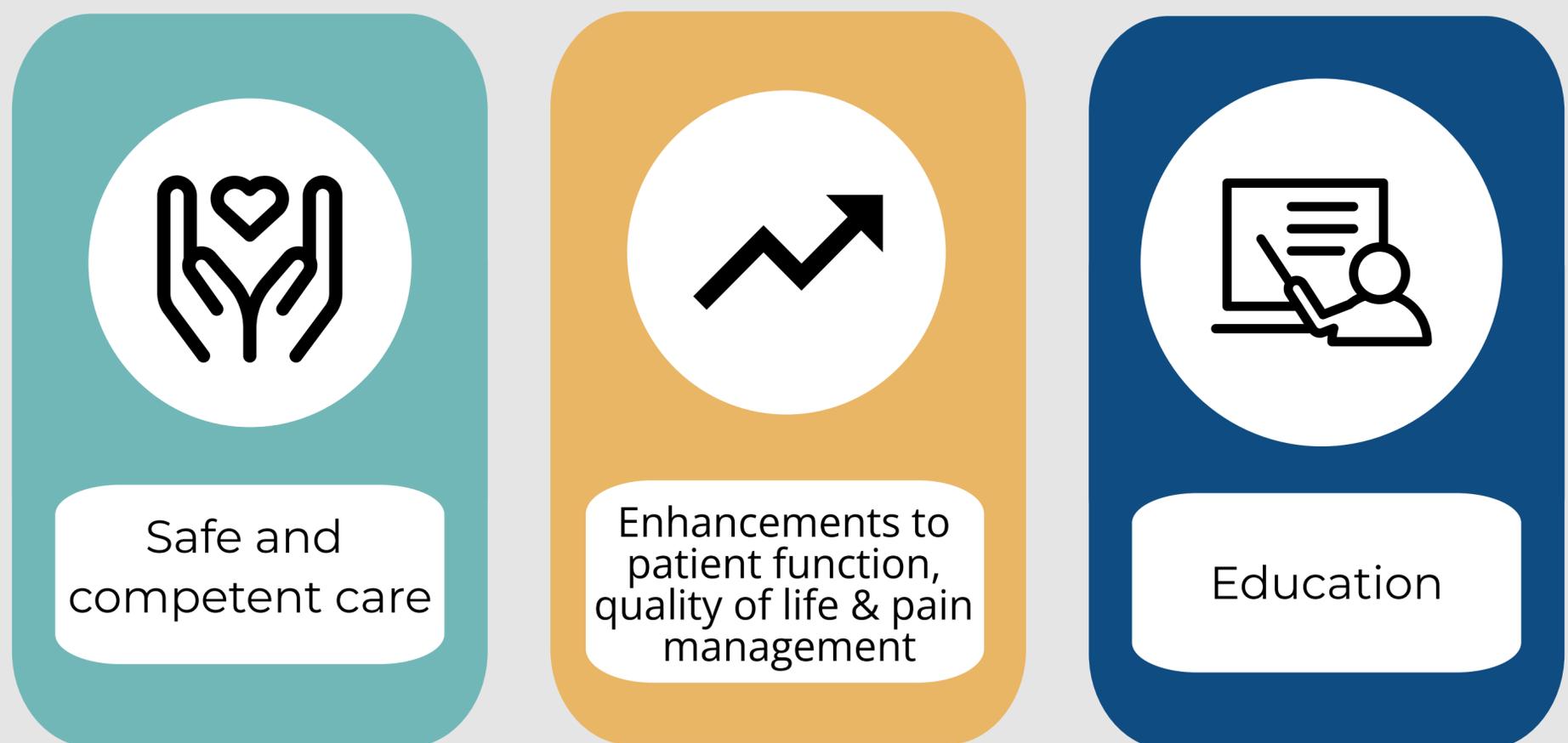
1. Direct that the proposed draft *Professional Practice Standard: Interprofessional Collaboration* be circulated for consultation as presented;
2. Direct that the proposed draft *Professional Practice Standard: Interprofessional Collaboration* be circulated for consultation as amended;
3. Direct that the proposed draft *Professional Practice Standard: Interprofessional Collaboration* be returned to staff for further review and consideration; or
4. Other.

### **Attachments**

1. Appendix A – Working Group on Shared Care in Animal Rehabilitation Recommendations
2. Appendix B – *Professional Practice Standard: Interprofessional Collaboration* (draft)

# Benefits of Collaboration in Animal Physical Rehabilitation<sup>1</sup> for Professionals

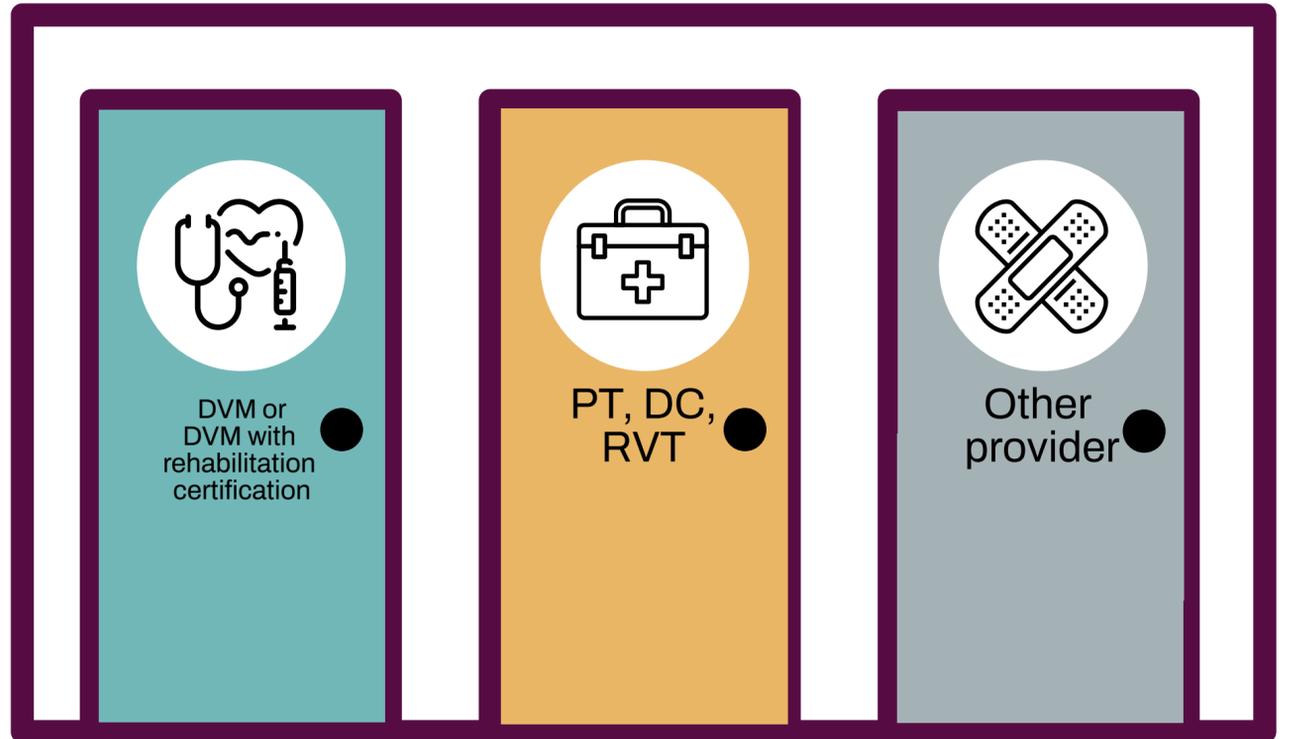
Collaboration between different providers of animal physical rehabilitation contributes to positive outcomes for animals and their owners. Shared care in physical rehabilitation of an animal is an example of professions coming together to offer services that increase function, mobility, and quality of life. Although these professions may have different skills and capabilities, their work is complementary.



Many veterinarians have already made animal physical rehabilitation a focus in their work by seeking certification and expertise in the area. There are also other care providers such as chiropractors (DC), physiotherapists (PT), and registered veterinary technicians (RVT) who have sought certification in animal physical rehabilitation that work with veterinarians to provide this shared care. This team approach to care contributes positively to an animal's outcome and is fostered by the knowledge and skills of veterinarians and certified animal physical rehabilitation providers.

1. Animal Physical Rehabilitation is a multidisciplinary collaborative approach to the restoration, management, enhancement and maintenance of physical function of an animal for optimal quality of life, maximized level of function, reduction of disability and pain, and prevention of injury. *International Association of Veterinary Rehabilitation and Physical Therapy*.

# Choosing physical rehabilitation care for your animal



## Veterinarian



- Full regulatory oversight
- Direct access to all treatment options
- Proof of training and knowledge in veterinary medicine and animal care
- Published standards of practice

## Certified animal rehabilitation professional

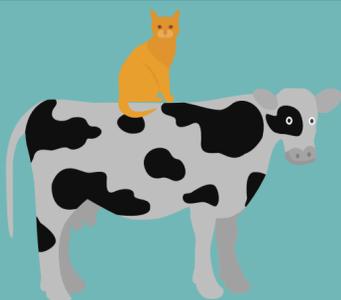


- Profession specific regulatory oversight
- Direct access to animal rehabilitation services
- Proof of training and knowledge in animal rehabilitation
- Profession specific standards of practice

## Other public provider

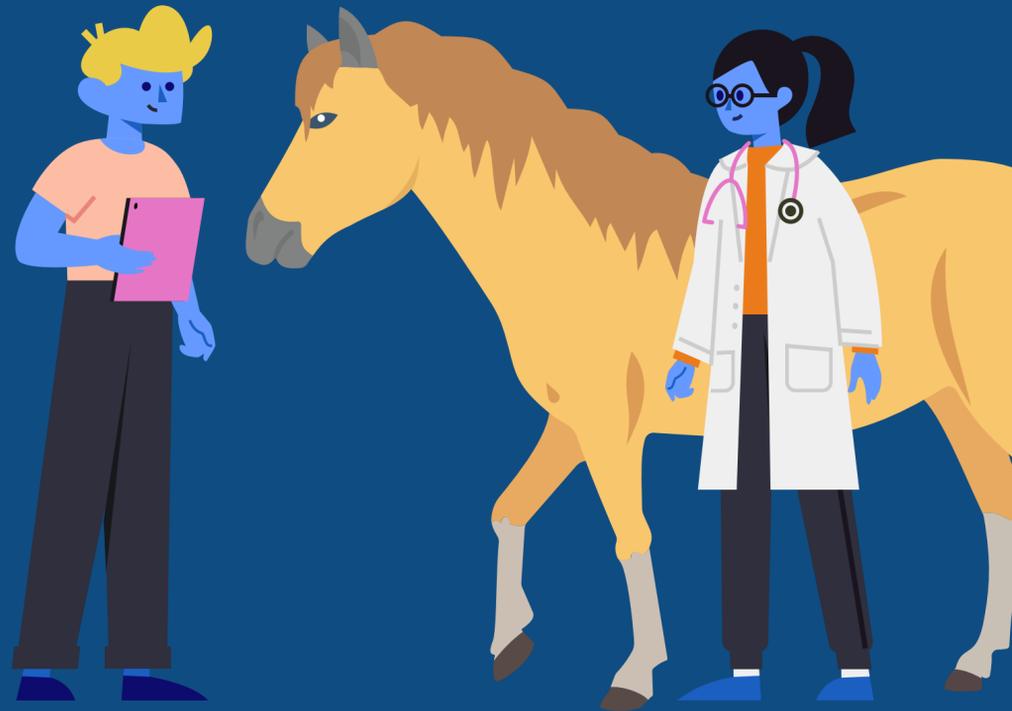


- No regulatory oversight
- Direct access to animal rehabilitation services
- No proof of training or knowledge in animal rehabilitation
- No standards of practice



The public has options when choosing the healthcare that best suits their animal.

# Benefits of Collaboration in Animal Physical Rehabilitation for the Public



## Increased communication

A collaborative approach to animal rehabilitation enhances communication between professionals.



## Continuity of care

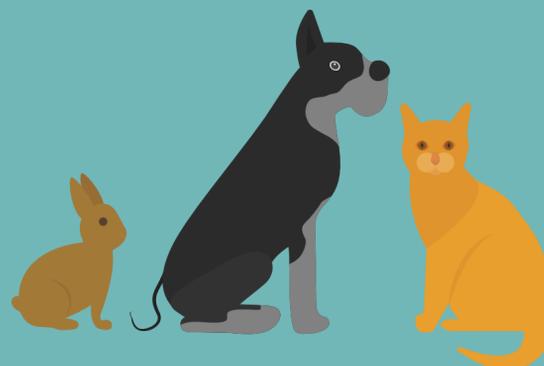
A collaborative approach promotes consistency in treatment plans and common care.



## Sharing of medical records

A collaborative approach promotes the sharing of medical records between practices.

Collaboration increases positive animal outcomes!



## Professional Practice Standard: Interprofessional Collaboration

### Introduction

The *Veterinary Professionals Act, 2024 (VPA)* formally recognizes animal care as a system in which both veterinary and non-veterinary animal care providers exist. Team-based care promotes members practising their full scope while allowing other animal care providers to continue to practise safely with a view to improving access to quality care. The *VPA* acknowledges the importance of the public having access to and choice in selecting providers for animal care within a risk and public interest-based framework. This allows for the regulation and oversight of current and evolving practice within the authorized activities model.

To function effectively and maintain safety and accountability, interprofessional collaboration is a key element of this system. Interprofessional collaboration is increasingly being promoted within veterinary practice. Examples of interprofessional collaboration in veterinary practice may include: a veterinarian developing a treatment plan with a farrier or hoof trimmer; a veterinarian communicating with a pharmacy professional regarding a prescription; and a veterinary professional communicating effectively with any other animal care provider to ensure continuity of care for an animal(s) or group of animals.

The public expects that veterinarians and veterinary technicians collaborate with other animal care providers to promote safe, competent, ethical and coordinated animal care.

Collaboration between veterinary and non-veterinary animal care providers promotes consistency in treatment plans, contributes to positive outcomes for animals and clients, and enhances communication between professionals and with clients.

This Professional Practice Standard has been developed to assist veterinarian members and veterinary technician members in understanding their professional responsibilities pertaining to interprofessional collaboration.

### Definitions

**Client:** Client means, with respect to a veterinarian, the owner of an animal(s) or group of animals that the veterinarian is treating, an authorized representative of the owner, or an individual who the veterinarian reasonably determines is acting in the interest of the animal(s) or group of animals.

**Interprofessional collaboration:** Two or more individuals, from different professions, working together on a task/service.

**Non-veterinary animal care provider:** A qualified person who provides animal care and is not a veterinarian member or a veterinary technician member.

**Task:** Task is a broad term that refers to procedures, treatments, interventions and other veterinary services.

**Veterinary Team:** Veterinarians, veterinary technicians, assistants and administrative staff at a veterinary facility.

## Practice Expectations

A member meets the *Professional Practice Standard: Interprofessional Collaboration* when they:

### Collaborate

1. Take reasonable steps to understand what other care a client may be considering or receiving for their animal(s) from a non-veterinary animal care provider for the same or a related disease, condition, or dysfunction.
2. Work collaboratively with a non-veterinary animal care provider to best address the interests of the animal(s) or group of animals and the client's goals.
3. Work effectively with a non-veterinary animal care provider to ensure the comprehensiveness and continuity of animal care.

### Communicate Effectively

1. Communicate with clients, veterinary team members and non-veterinary animal care providers in a manner that demonstrates courtesy, honesty, and respect.
2. Identify, communicate, and document risks of concurrent treatment when:
  - a. Approaches to care conflict with, and/or
  - b. The risks outweigh the benefits to the animal.
3. Recognize when a conflict may arise between the veterinary team and a non-veterinary animal care provider that could interfere with the delivery of safe, quality care and take reasonable steps to resolve it.

### Records

1. Document collaboration and professional relationships in the animal's medical record in a manner consistent with the *Professional Practice Standard: Medical Records*.
2. Protect the client's privacy and confidentiality in a manner consistent with Regulation XX and the *Personal Information Protection and Electronic Documents Act*.

### Legislative Authority

Veterinary Professionals Act, S.O., 2024, s. 3(1)11, 9, 9(5), 93(1)7

(Pending Regulation Development)

### Resources

(Pending Regulation Development)



## AGENDA ITEM 8.3

### **TOPIC: Medical Records**

#### **Overview**

Section 100(4) of the *Veterinary Professionals Act, 2024 (VPA)* grants Transition Council the ability to pre-emptively make any standards required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario.

Given that many of these standards will rely on the regulations made under the *VPA*, they cannot be fully confirmed by Transition Council until such regulations are approved. However, Transition Council can begin considering the key concepts of these policies to ensure they are ready for consultation once regulations are made.

At its August 2025 meeting, Transition Council reviewed a list of potential policies for development. One of the policies identified as needing full review and development is the existing *College Professional Practice Standard: Medical Records*.

#### **Background**

##### **Existing Medical Records Policy Document**

The College currently has a published [\*Professional Practice Standard: Medical Records\*](#) along with an associated [\*Guide to the Professional Practice Standard: Medical Records\*](#), which provides additional guidance on the Standard in a frequently-asked-question format.

The existing Standard was originally published in December 2014, and no substantial revisions have been made since November 2015. The Standard is largely based on existing sections of Regulation 1093 and contains ten expectations for veterinarians to follow.

##### **Moving Forward with the *VPA***

Transition Council did not propose that medical records information be included in the regulatory concepts submitted to the Ministry. Rather, section 97(1)b of the *VPA* allows for Council to make standards for the practice of veterinary medicine that must be met and maintained by members. One of these standards can be related to medical records. By not including medical records in

the regulatory concepts, Transition Council may now begin work on a new Professional Practice Standard that considers the existing rules in Regulation 1093 and the current Standard under the CVO.

## Concepts

Transition Council may wish to consider any number of concepts for inclusion in a revised standard related to medical records. The following concepts have been developed based on the existing Professional Practice Standard and existing sections of Regulation 1093, as well as the recognition of the shift to a one profession, two professionals model under the VPA.

### **Concept #1 – Inclusion of Both Types of Members**

A new medical records standard could clarify which expectations apply to which type of member (veterinarian or veterinary technician), or to both types of members.

For example, Transition Council may wish to clarify wording similar to existing Expectation #3 which reads:

“Ensure the record provides an accurate, complete, and up-to-date profile of the animal(s) or group of animals to enable continuity of care. Ensures that each time a record is updated, the update or change to the record is dated and documented in a clearly identifiable manner and the content of the record before each change or update is preserved.

This Expectation may be applicable to both members and could be specified as such.

### **Concept #2 – Transfer of Existing Regulation Requirements to Policy**

In accordance with the shift from the *Veterinarians Act* to the VPA, medical records expectations are no longer required to be held in regulation and can transfer to the policy level.

Currently, section 22 of Regulation 1093 holds most of the detail related to expectations for medical records. The regulations include specific information about what is required in a medical record for both companion and food producing or herd animals. A copy of the medical records section of Regulation 1093 has been attached to this cover sheet as Appendix A. Transition Council is being asked to direct staff to conduct a review of the existing Regulation using a risk-based approach and consider how it may best be incorporated into a new Professional Practice Standard.

Should Transition Council direct that work on developing a new Standard proceed, a draft Standard will include any suggested additions or omissions from existing regulation and standard expectations. To assist with discussion, these suggestions would each include a risk-based explanation. The draft Standard and additional information will be presented to Transition Council for consideration at a future meeting.

## Discussion

Transition Council has the opportunity to discuss and ask questions related to the proposed concepts of a medical records standard. Direction to staff is being sought.

## Options

Transition Council may direct:

1. That staff continue developing a new Medical Records Standard using the proposed policy concepts as presented;
2. That the Medical Records Standard work return to staff for additional research prior to development; or
3. Any other direction as determined by Transition Council.

## Attachments

1. Appendix A – Section 22 of Regulation 1093

### Regulation 1093

**22.** (1) The records required in respect of each companion animal shall contain the following information:

1. Animal identification, including species, breed, colour, age and sex.
2. The client's name, address and telephone numbers.
3. If the client is likely to be absent from his or her address while the animal is confined with the member, the name, address and telephone number of a person to be contacted in case of an emergency.
4. Date of each time that the member sees the animal.
5. A history of the animal's health, including a record of vaccinations.
6. The animal's current weight.
7. Particulars of each assessment, including physical examination data and any diagnostic investigations, performed or ordered by the member and the results of each assessment.
8. A note of any professional advice given regarding the animal and an indication of when and to whom such advice was given if other than to the client.
9. All medical or surgical treatments and procedures used, dispensed, prescribed or performed by or at the direction of the member, including the name, strength, dose and quantity of any drugs.
  - 9.1 One of the following with respect to each surgical treatment:
    - i. The written consent to the surgical treatment signed by or on behalf of the owner of the animal.
    - ii. A note that the owner of the animal or a person on the owner's behalf consented orally to the surgical treatment, and the reason why the consent was not in writing.
    - iii. A note that neither the owner of the animal nor anyone on the owner's behalf was available to consent to the surgical treatment, and the reason why, in the member's opinion, it was medically advisable to conduct the surgical treatment.
10. A copy of all reports prepared by the member in respect of the animal.
11. A final assessment of the animal.
12. The fees and charges, showing separately those for drugs and those for advice or other services.
13. Any additional records required by this Regulation. R.R.O. 1990, Reg. 1093, s. 22 (1); O. Reg. 431/00, s. 6; O. Reg. 233/15, s. 15 (1, 2).

(2) The records required in respect of each food-producing animal or herd shall contain the following information:

1. Individual or herd identification, including breed and sex.
2. If individual advice or care is given, at least one of the animal's name, the animal's tattoo or ear-tag number or the animal's colour, markings or other distinguishing physical features.
3. The client's name, address and telephone numbers.
4. The name and telephone number of a person to be contacted in the absence of the client.
5. Date of each service.
6. A history of the presenting complaint.
7. If there is a presenting complaint, particulars of each assessment, including any laboratory investigations performed or ordered by the member and the results of each assessment.
8. A note of any professional advice regarding the individual or herd and an indication of to whom the advice was given if other than to the client.
9. A complete record of all written prescriptions and drugs that the member has prescribed or dispensed.
10. A copy of any report prepared by the member in respect of the individual or herd.
11. The fees and charges, showing separately those for drugs and those for advice or other services.
12. Any additional records required by this Regulation. R.R.O. 1990, Reg. 1093, s. 22 (2); O. Reg. 510/95, s. 5 (1).

(3) The records required in respect of a horse are the same as those required in respect of a food-producing animal. R.R.O. 1990, Reg. 1093, s. 22 (3).

(4) The records required in respect of poultry, for each bird or flock, shall contain the following information:

1. Bird or flock identification, or both, including species and type.
2. The client's name, address and telephone numbers.
3. The name and telephone number of a person to be contacted in the absence of the client.
4. Date of each service.
5. A history of the presenting complaint.

6. If there is a presenting complaint, particulars of each assessment, including any laboratory investigations performed or ordered by the member and the results of each assessment.
7. A note of any professional advice regarding the bird or flock and an indication of to whom the advice was given if other than to the client.
8. A complete record of all written prescriptions and drugs dispensed or prescribed by the member, made in accordance with section 27.
9. A copy of any report prepared by the member in respect of the bird or flock.
10. The fees and charges showing separately those for drugs and those for advice or other services.
11. Any additional records required by this Regulation. R.R.O. 1990, Reg. 1093, s. 22 (4).

(4.1) A member who provides veterinary services in a temporary facility is not required to keep the information referred to in subsections (1) to (4) in respect of an animal receiving services at the temporary facility but shall maintain records containing the information specified in the certificate of accreditation for the temporary facility in accordance with subsections (5) and (6). O. Reg. 233/15, s. 15 (3).

(4.2) A member who provides veterinary services with respect to an animal in the circumstances described in clause 18 (3) (d) or (e) shall obtain only as much of the information required under subsection (1), (2), (3) or (4), as the case may be, as can reasonably be obtained in the circumstances and shall keep records of the information obtained in accordance with subsections (5) and (6). O. Reg. 233/15, s. 15 (3).

(5) The records required under this section shall be,

- (a) legibly written or typewritten;
- (b) kept in a systematic manner;
  - (b.1) in practices of more than one practitioner or practices that employ locums, identified after each entry with the initials or code of the veterinarian responsible for the procedure; and
- (c) retained for a period of at least five years after the date of the last entry in the record or until two years after the member ceases to practise veterinary medicine, whichever occurs first. R.R.O. 1990, Reg. 1093, s. 22 (5); O. Reg. 510/95, s. 5 (2).

(5.1) Each time a record required under this section is updated, the update or change to the record must be dated and documented so that,

- (a) the update or change that is being made, as well as the date on which it is made, is clearly identifiable;

(b) each update or change that was previously made to the record, as well as the date on which each update or change was made, is clearly identifiable; and

(c) the content of the record before each update or change was made is preserved. O. Reg. 233/15, s. 15 (3).

(6) Despite subsection (5), the records required by this section may be made and maintained in an electronic computer system if it has the following characteristics:

1. The system provides a visual display of the recorded information.
2. The system provides a means of access to the record of each animal by its name or other unique identifier.
3. The system is capable of printing the recorded information promptly.
4. The system is capable of visually displaying and printing the recorded information for each animal in chronological order.
5. The system maintains an audit trail that,
  - i. records the date and time of each entry of information for each animal,
  - ii. indicates any changes in the recorded information,
  - iii. preserves the original content of the recorded information when changed or updated, and
  - iv. is capable of being printed separately from the recorded information for each animal.
6. The system includes a password and other reasonable methods of protecting against unauthorized access.
7. The system automatically backs up files and allows the recovery of backed-up files or otherwise provides reasonable protection against loss of, damage to, and inaccessibility of, information.
8. The system has a secure method that permits only the member to apply an electronic signature to a document that is issued electronically and must be signed by the member. O. Reg. 233/15, s. 15 (4).

(7) If a member uses an electronic computer system described in subsection (6) to keep his or her records, the member shall use the secure method referred to in paragraph 8 of that subsection to apply an electronic signature to any document that is issued electronically and must be signed by the member. O. Reg. 233/15, s. 15 (4).



## AGENDA ITEM 8.4

### **TOPIC: Humane Animal Handling and Restraint**

#### **Overview**

Section 100(4) of the *Veterinary Professionals Act, 2024 (VPA)* grants Transition Council the ability to pre-emptively make any standards required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario.

At its August 2025 meeting, Transition Council reviewed a list of potential policies for development. One of the policies identified as needing minor changes is the existing *College Professional Practice Standard: Humane Animal Handling and Restraint*.

#### **Background**

##### **Existing Humane Animal Handling and Restraint Policy Document**

The College currently has an existing [\*Professional Practice Standard: Humane Animal Handling and Restraint\*](#) that was originally published in April 2019, and no substantial revisions have been made since then. The Standard is largely based on a list of resources including World Health Organization for Animal Health guidance, National Farm Animal Care Council Codes of Practice, and scholarly articles. It does not rely on Regulation 1093 or proposed regulatory concepts.

##### **Moving Forward with the VPA**

Transition Council did not propose that humane animal handling and restraint information be included in the regulatory concepts submitted to the Ministry. Rather, section 97(1)b of the *VPA* allows for Council to make standards for the practice of veterinary medicine that must be met and maintained by members. One of these standards can be related to humane animal handling and restraint.

## Concepts

### Concept #1 – Inclusion of Both Types of Members

Both types of members (veterinarians and veterinary technicians) will be expected to meet expectations related to humane animal handling and restraint. Given this, some language within the existing Standard requires revision. For example, the introduction of the policy is specific to the Veterinary Oath for veterinarians. In a revised policy, the principles could be applied to both types of members.

There are no proposed changes to the expectations or resources within the existing Standard.

## Discussion

Transition Council has the opportunity to discuss and ask questions related to the proposed concept of a humane animal handling and restraint policy.

## Options

Transition Council may direct:

1. That staff continue to develop a revised policy as presented or amended;
2. That the policy work return to staff for additional development and research; or
3. Any other direction as determined by Transition Council.



## AGENDA ITEM 8.5

### **TOPIC: After-Hours Veterinary Care**

#### **Overview**

Section 100(4) of the *Veterinary Professionals Act, 2024 (VPA)* grants Transition Council the ability to pre-emptively make any standards required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario.

Given that many of these standards will rely on the regulations made under the *VPA*, they cannot be fully confirmed by Transition Council until such regulations are approved. However, Transition Council can begin considering the key concepts of these policies to ensure they are ready for consultation once regulations are made.

At its August 2025 meeting, Transition Council reviewed a list of potential policies for development. One of the policies identified as needing full review and development is the *Policy Statement: After-Hours Veterinary Care*.

#### **Background**

##### **Existing After-Hours Veterinary Care Policy Document**

The College currently has a published *Policy Statement: After-Hours Veterinary Care*. This Policy Statement is attached to this cover sheet as Appendix A.

The existing Standard was originally published in July 2019, and no substantial revisions have been made since November 2023. The Standard is largely based on existing sections of Regulation 1093 and contains additional guidance related to communicating with clients, continuity of care, and managing unforeseen circumstances.

##### **Previous Work of the After-Hours Veterinary Care Taskforce**

In March 2023, Legacy Council approved the formation of the After-Hours Veterinary Care Taskforce to:

- Identify current and emerging patterns in the provision of after-hours veterinary care in Ontario that present challenges for access to care, veterinary wellness, and facility accreditation;
- Better understand the issues related to the expectations of after-hours veterinary care; and
- Provide direction to Legacy Council on possible solutions to identified challenges.

The Taskforce held seven (7) meetings from July 2023 to October 2024 and focused on:

1. Identifying how after-hours veterinary services are currently delivered in Ontario, in keeping with current College expectations and while appreciating the differences that may exist between different locations, species, and practice types;
2. Developing a list of identified issues with existing and emerging methods of meeting the after-hours veterinary care expectations and broadly considering the impact of these options on the veterinarian, the patient, and the client; and
3. Compiling a list of potential solutions and their associated pros and cons for consideration in next steps.

The meetings of the Taskforce were extremely productive and informative, with all members taking opportunities to share their own knowledge and experiences. In particular, the Taskforce strived to build upon the work completed within each meeting and sought several opportunities to ensure that their discussions were both well-rounded and risk focused.

This approach proved successful and provided the basis for the creation of the Taskforce's recommendations that were presented to Legacy Council for its approval in December 2024. These recommendations include advice related to proposed regulations, policy, and guidance and have been attached to this cover sheet as Appendix B.

### **Moving Forward with the VPA**

Transition Council included recommendations related to After-Hours Veterinary Care in the regulatory concepts submitted to the Ministry. A copy of those recommendations as presented to the Ministry has been attached to this cover sheet as Appendix C.

Using the Taskforce Recommendations, Transition Council is now being asked to consider revisions to the existing College *Policy Statement: After-Hours Veterinary Care*. Key concepts of these revisions are described below.

#### **1) Transition from Policy Statement to Professional Practice Standard**

The current College document related to after-hours veterinary care is classified as a Policy Statement, which has traditionally been used to describe how the College interprets existing legislation and regulation and what the College will do in certain circumstances, such as

pursuing alleged professional misconduct. A Policy Statement is reviewed and approved by Council.

The *VPA* and associated proposed regulatory concept allow for Transition Council to consider transitioning the existing Policy Statement to a Professional Practice Standard. This classification of document traditionally outlines professional expectations based on current standards of practice and aims to shape behaviour while remaining measurable (i.e. a member is either meeting or not meeting a standard). Professional Practice Standards are reviewed and approved by Council and are circulated for public consultation prior to approval.

## **2) Clarify the Responsibility for Providing After-Hours Veterinary Care**

The responsibility to provide after-hours veterinary care is currently found in Section 20 of Regulation 1093, and Transition Council proposed in its regulatory concepts that these requirements continue. The previous Taskforce recommended that College policy confirm the responsibility for the provision of after-hours veterinary care. It is proposed that this clarity, using the *VPA* regulations when they are confirmed, be outlined in the new Professional Practice Standard.

## **3) Clarify the Role of the Facility Director**

The previous Taskforce recommended that College policy require facility directors to confirm and oversee the after-hours veterinary care approach(es) that are undertaken at their facility, inclusive of any telemedicine methods used. Currently, there is a requirement in the Accreditation Standards for Veterinary Facilities in Ontario for a facility director to ensure that the facility they oversee has an arrangement for clients to receive after-hours care and clients are informed of this arrangement. Given the specificity of this information applying to facility directors, this information may be better suited for the Accreditation Standards. It is proposed that this requirement is not outlined in the new Professional Practice Standard.

## **4) Clarify Regulatory Requirements and Professional Judgement**

Section 20 of Regulation 1093 requires a veterinarian to provide “reasonably prompt” services outside of regular practice hours that are “medically necessary”. The previous Taskforce recommended that future College policy clarify what is meant by these terms and enable a veterinarian to use their professional judgement to determine if the thresholds have been met. It is proposed that these recommendations from the Taskforce be incorporated into the new Professional Practice Standard.

## **5) Clarify Returning Care to the Referring Veterinarian Member**

The previous Taskforce recommended that future College policy clarify situations that arise when after-hours veterinary care arrangements do not work out. The Taskforce recommended clarifying that care of an animal(s) or group of animals returns to the veterinarian member who provided care either recently or regularly if the after-hours veterinary care arrangements are, or

have become, unavailable and that this requirement be based on reasonable feasibility. It is proposed that the clarification be included in the new Professional Practice Standard.

## Discussion

Transition Council has the opportunity to discuss and ask questions related to the proposed concepts of an after-hours veterinary care Professional Practice Standard.

## Options

Transition Council may direct:

1. That staff continue developing a new After-Hours Veterinary Care standard using the proposed concepts as presented;
2. That the After-Hours Veterinary Care standard work return to staff for additional research prior to development; or
3. Any other direction as determined by Transition Council.

## Attachments

1. Appendix A – *Professional Practice Standard: After-Hours Veterinary Care*
2. Appendix B – After-Hours Veterinary Care Taskforce Recommendations
3. Appendix C – Regulatory Concepts Excerpt: After-Hours Veterinary Care



# After-Hours Care Services

Published: July 2019

Revised: November 2023

## Introduction

With the formation of a veterinarian-client-patient relationship (“VCPR”) a veterinarian assumes a variety of professional responsibilities. In accordance with Regulation 1093, one of these responsibilities is for licensed veterinarians to provide after-hours care services to animals that they have recently treated or treat regularly. These services may be provided in a variety of ways, and are contingent on finding the right balance between meeting legislative requirements, managing client expectations, assuring patient needs, and supporting the health of the individual veterinarian.

## Overview of Regulation 1093, Section 20 (Veterinarians Act)

The legislated requirements for licensed veterinarians to provide after-hours care services are outlined in Section 20 of Regulation 1093. In particular, this section clarifies that:

1. A licensed veterinarian is responsible for providing reasonably prompt services outside of regular practice hours if the services are medically necessary for animals that they have recently treated or that they treat regularly;



2. The services required under subsection (1) may be provided by the licensed veterinarian, their associate(s), or by referral to another licensed veterinarian who has agreed to cover the referring licensed veterinarian's practice;
3. When a licensed veterinarian provides after-hours care services by referring to an emergency clinic, the referring veterinarian is responsible for promptly continuing to provide medically necessary services to the animal after discharge from the emergency clinic until the services are no longer required or until the client has had a reasonable opportunity to arrange for the services of another licensed veterinarian;
4. A licensed veterinarian is required to inform their clients as to how they can access veterinary services outside of the licensed veterinarian's regular practice hours;
5. A licensed veterinarian is required to promptly inform their clients if the licensed member makes changes to how they offer after-hours care services;
6. A licensed veterinarian is required to keep records of every time they provide after-hours care services information to their clients; and
7. If an animal is to be hospitalized/housed in a veterinary facility after regular practice hours, the licensed veterinarian treating the animal shall inform their client of the supervision arrangements for that animal.

## **Requirement to Provide After-Hours Care Services**

Licensed veterinarians have a variety of options when deciding how best to provide access to after-hours care services for animals that they have treated recently or treat regularly. These options include (singularly or in combination):

- Providing "on-call" services either by themselves or in cooperation with other licensed veterinarians at the same accredited facility or through an in-house teletriage service;
- Arranging coverage agreements with other licensed veterinarians at neighbouring accredited facilities who have agreed to share the provision of "on-call" services;
- Referring clients to another accredited facility that provides 24/7 services and has agreed to accept the referrals;



- Referring clients to an independent, Ontario accredited teletriage service; and
- Referring clients to an accredited Emergency Clinic.

Licensed veterinarians are permitted to determine which options best suit their practice and expertise and are not required to maintain the same options at all times. They are permitted to set the times and parameters in which they will offer their services. They may also employ a combination of different methods to ensure the timely and responsible provision of after-hours care services

## **Communicating After-Hours Care Services to Clients**

If a licensed veterinarian chooses to make alterations to their after-hour care services, either permanently or to cover planned absences such as vacations, they are required to take steps to notify their clients of the changes as soon as possible. Such steps may include a telephone message, signage on the door of the facility or electronic notice. In accordance with Section 20 of Regulation 1093, licensed veterinarians are required to keep record of the information that was provided.

## **Requirement for Continuity of Care in an Emergency**

Licensed veterinarians are required to see an animal that they have recently treated or treat regularly after said animal is discharged from an emergency clinic if ongoing medical care is necessary, until emergency services are no longer required, or until the client has had a reasonable opportunity to arrange for the services of another licensed veterinarian.

## **Unforeseen Circumstances**

Licensed veterinarians are expected to attempt to notify their clients of any unforeseen circumstances, such as severe weather or illness, that will affect their provision of after-hour care services. However, the College does recognize that there will arise circumstances in which a licensed veterinarian is unable to reasonably provide after-hours care services or timely notification. In these instances, the College expects a licensed veterinarian to keep records that note the reasoning behind the circumstances and the information that was provided to clients.



## Requirement for Informed Consent when an Animal is Hospitalized After-Hours

Licensed veterinarians are expected to obtain informed client consent that ensures that the client understands and accepts the level of care and supervision provided when animals are housed in a veterinarian's accredited facility overnight and that the level of care may vary based on circumstance.

### Legislative Authority

R.R.O. 1990, Reg 1093, s. 20 (*Veterinarians Act*)

### Resources

The following can be found at the College's website at [cvo.org](http://cvo.org):

1. *Professional Practice Standard: Establishing, Maintaining, and Discontinuing a Veterinarian-Client-Patient Relationship (VCPR)*
2. *Guide to the Professional Practice Standard: Establishing, Maintaining, and Discontinuing a Veterinarian-Client-Patient Relationship (VCPR)*

College publications contain practice parameters and standards which should be considered by all Ontario veterinarians in the care of their patients and in the practice of the profession. College publications are developed in consultation with the profession and describe current professional expectations. It is important to note that these College publications may be used by the College or other bodies in determining whether appropriate standards of practice and professional responsibilities have been maintained. The College encourages you to refer to the website ([www.cvo.org](http://www.cvo.org)) to ensure you are referring to the most recent version of any document.

## After-Hours Veterinary Care Taskforce Recommendations

### **Regulation Under the *Veterinary Professionals Act, 2024***

The Taskforce recommends the following items related to Regulation language to be developed under the *Veterinary Professionals Act, 2024*:

1. That the current language contained in Section 20 of Regulation 1093 related to the provision of after-hours veterinary care carry forward under the new regulatory framework unless otherwise specifically stated within these recommendations.

For reference:

**20.** (1) A member is responsible for providing reasonably prompt services outside of regular practice hours if the services are medically necessary for animals that he or she has recently treated or that he or she treats regularly. R.R.O. 1990, Reg. 1093, s. 20 (1).

(2) The services required under subsection (1) may be provided by the member or an associate or by referral to another member who has agreed to cover the referring member's practice. R.R.O. 1990, Reg. 1093, s. 20 (2).

(3) If a member provides services under subsection (1) outside of regular practice hours by referring an animal to an emergency clinic, the member is responsible for promptly continuing to provide medically necessary services to the animal after discharge from the emergency clinic until the services are no longer required or until the client has had a reasonable opportunity to arrange for the services of another member. R.R.O. 1990, Reg. 1093, s. 20 (3).

(4) A member shall inform each of his or her clients as to how they can access services outside of the member's regular practice hours. O. Reg. 233/15, s. 14.

(5) If a member changes the arrangements for accessing services outside of the member's regular practice hours, he or she shall promptly inform his or her clients of the changes. O. Reg. 233/15, s. 14.

(6) The member shall keep records of every time information is provided under subsections (4) and (5). O. Reg. 233/15, s. 14.

(7) If an animal is to be left in a veterinary facility after regular practice hours, the member treating the animal shall inform the client of supervision arrangements for that animal. O. Reg. 233/15, s. 14.

(8) This section does not apply to a member who provides veterinary services in or from a temporary facility unless compliance with this section is required as a condition to the certificate of accreditation of the temporary facility. O. Reg. 233/15, s. 14.

2. That the current language in Section 20 (2) be amended to make it clearer that a veterinarian member is required to have a specific, agreed-upon arrangement with at least one veterinarian member and/or accredited facility when referring the provision of after-hours veterinary care.
3. That the current language in Section 20 (3) be amended to make it clearer that a referring veterinarian member's responsibility related to care upon discharge applies to all after-hours veterinary care arrangements.

**In Policy Developed Under the *Veterinary Professionals Act, 2024***

The Taskforce recommends the following items related to College Policy be developed under the *Veterinary Professionals Act, 2024*:

1. That College Policy confirm that the responsibility for the provision of after-hours veterinary care remains with the veterinarian member who provided care either recently or regularly to the animal(s) or group of animals.
2. That College Policy require Facility Directors to confirm and oversee the after-hours veterinary care approach(es) that are taken at their accredited facility, inclusive of any telemedicine methods used.
3. That College Policy clarify what is meant by “reasonably prompt” and “medically necessary” within the regulatory requirements as well as enable and support a veterinarian member’s ability to use their professional judgement in determining whether these thresholds have been met.
4. That College Policy clarify that care of an animal(s) or group of animals returns to the veterinarian member who provided care either recently or regularly if other after-hours veterinary care arrangements are or have become unavailable and that this requirement be based on reasonable feasibility.

**In College Guidance Developed Under the *Veterinary Professionals Act, 2024***

The Taskforce recommends the following item related to College Guidance to be developed under the *Veterinary Professionals Act, 2024*:

1. That the College develop guidance materials to support both the public and profession in understanding the concepts contained in Policy Recommendation #3.

## After-Hours Veterinary Care

### Scope

Transition Council recommends the development of regulation language related to after-hours veterinary care in accordance with Section 93 (1) 23 of the VPA.

The inclusion of veterinary technicians as members of the CVPO under the VPA necessitates the updating of regulation language related to the provision of after-hours veterinary care and offers the opportunity to increase clarity and understanding of its associated requirements.

### Concept #1 – Ongoing After-Hours Care Requirements

Transition Council recommends the development of regulation language that continues the requirements for a veterinarian to provide after-hours veterinary care outlined in Section 20 of Regulation 1093 made under the VA. This includes the requirement that a veterinarian is responsible for providing reasonably prompt services outside of regular practice hours if the services are medically necessary for animals that they have treated recently or treat regularly.

### Concept #2 – Enhanced Wording Related to After-Hours Veterinary Care Arrangements

Transition Council recommends the development of regulation language that continues to permit a veterinarian member to rely on the referral of after-hours veterinary care services to another veterinarian member and/or accredited veterinary facility (not just emergency facilities), but includes wording to clarify that this is only permissible when the referring veterinarian member has made a specific agreed-upon arrangement with the veterinarian member and/or accredited veterinary facility that they are referring to.

### Concept #3 – Clarity Around Discharge Responsibilities

Transition Council recommends the development of regulation language that makes it clearer that a referring veterinarian member's responsibility related to providing care upon discharge applies to all after-hours veterinary care arrangements regardless of the type of veterinarian member and/or accredited veterinary facility referred to.

### Administrative Notes

- ▶ Transition Council recommends that the provision of after-hours veterinary care remain a veterinarian member responsibility. This does not preclude veterinary technician members from also assisting in the delivery of this care through accredited veterinary facilities, including through initiation and/or under a veterinarian member's order.

## Drugs

### Scope

Transition Council recommends the development of regulation language related to drugs as permitted by Section 91 (1) 27 and 28 of the VPA.



## AGENDA ITEM 8.6

### **TOPIC: Omnibus Approval and Standards and Policy**

#### **Overview**

On June 13, 2025, Transition Council was presented with a proposed approach for streamlining the policy development process under the *Veterinary Professionals Act, 2024 (VPA)*.

Section 100(4) of the *VPA* grants Transition Council the ability to pre-emptively make any standards required to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario. It is important to note that no policies can be completely confirmed before regulations under the *VPA* have been approved by government. At this time, Transition Council is being asked to consider discussions on these policies at a high-level, similar to the concept approach taken in regulation and by-law development.

The approach proposed dividing the work into three main streams: changes to overall approach or direction, minor changes, or rescinding. The minor changes stream is described as:

#### Minor Changes/No Changes

This stream is intended to capture any policies requiring minor changes that would not commonly or historically require large review or public consultation. To be considered for this stream, these policies may require changes to language related to the one profession, two professionals model (for example, clarifying what type of member is meant where) and/or policies needing updated references. This stream would also capture any policies that do not require immediate changes and would help facilitate a smooth transition upon full proclamation of the regulations. It is proposed that this stream be presented to Transition Council as an omnibus motion for approval, with Transition Council having the ability to remove any policy from the motion for further review if desired. compiling

Transition Council has indicated its support for this process and directed College staff to continue working on the details of this work, including the compilation of policies requiring minor changes for an omnibus motion. The omnibus motion entails assembling these policies with revisions, which would typically be presented to Transition Council as separate agenda items, into one item to allow them to be passed with a single motion.

## Summary of Work

### Review and Sorting of Existing Policies

Following the June 13, 2025, Transition Council meeting, College staff worked to develop a list of existing College policies for sorting into the approved streams of work. A list of these sorted policies is attached to this cover sheet as Appendix A. There are twenty (20) documents categorized as requiring minor changes to be included in an omnibus motion.

At the August 11, 2025, meeting, Transition Council confirmed the proposed list to support College staff in further developing materials on each policy for its future review and consideration.

### Proposed Approach to Omnibus Motion

Following the confirmation of the policy list, including those designated for the minor changes stream and omnibus motion, College staff began developing an example of a policy that would be included in this stream. Transition Council will be asked to review the approach to the *Professional Practice Standard: Humane Animal Handling and Restraint* at its March 2026 meeting. This review is found as agenda item 8.4 of this meeting package.

Following review of the *Professional Practice Standard: Humane Animal Handling and Restraint*, Transition Council is now asked to consider applying this approach to revisions to the full list of policies requiring minor changes. If approved, College staff will apply this approach to each policy included on that list, and will present them to Transition Council at a future meeting for full review. At that time, Transition Council will be presented with tracked changes on each policy and will be able to remove any number of policies from the omnibus motion for discussion.

## Discussion

Transition Council is asked to review the information found in this cover sheet and to provide its feedback – including any questions or concerns - related to the proposed process.

## Attachments

1. Appendix A – List of Policies

**Minor Amendments (clarifying which member, updating references, etc.) for Omnibus**

**Professional Practice Standards:**

1. Prescribing a Drug
2. Use of Compounded Drugs in Veterinary Practice
3. Dispensing a Drug
4. Diagnostic Laboratory Testing
5. Management and Disposal of Controlled Drugs
6. Veterinary Euthanasia
7. Advertising
8. Telemedicine
9. Humane Animal Handling and Restraint
10. Extra Label Drug Use

**Policy Statements:**

11. Provision of Veterinary Services to Wildlife
12. Sale of Non-Drug Veterinary Products
13. Managing Questions of Ownership and Ownership Disputes of Companion Animals

**Position Statements:**

14. Reporting Animal Abuse or Neglect
15. Animal Welfare
16. Veterinary Stewardship of the Responsible Use of Antimicrobial Drugs in Animals
17. Steering
18. Bundled Services
19. Medically Unnecessary Veterinary Services
20. Pain Management



## AGENDA ITEM 8.7

### **TOPIC: Policy Tracking Chart**

#### **Background**

The Policy Tracking Chart is to provide timely background and information related to the status of each topic. The chart is designed to assist Transition Council with keeping track of the policy work that is currently under its direction and serves as an overview upon which additional questions can be asked.

#### **Discussion**

Transition Council is encouraged to ask any questions related to the College's ongoing policy work.

#### **Attachments**

1. Policy Tracking Chart
2. Appendix A – List of Policies

# Report to Transition Council

## Policy Tracking Chart

Topic	Status	Notes
After-Hours Veterinary Care	Ongoing work	<ul style="list-style-type: none"> <li>Transition Council reviewed a list of policies to be amended and identified the <i>Policy Statement: After-Hours Veterinary Care</i> as needing minor changes at its August 2025 meeting.</li> <li>Transition Council included recommendations related to After-Hours Veterinary Care in the regulatory concepts submitted to the Ministry in October 2025.</li> <li>Proposed concepts to be presented to Transition Council in March 2026.</li> </ul>
<i>Professional Practice Standard: Interprofessional Collaboration</i>	Ongoing work	<ul style="list-style-type: none"> <li>Transition Council reviewed a list of policies to be developed at its August 2025 meeting and directed staff to develop an additional policy related to interprofessional collaboration.</li> <li>Transition Council confirmed concepts and directed staff to develop a draft Professional Practice Standard at its November 2025 meeting.</li> <li>Briefing note and draft <i>Professional Practice Standard: Interprofessional Collaboration</i> to be presented to Transition Council in March 2026.</li> </ul>
<i>Professional Practice Standard: Humane Handling and Restraint</i>	Ongoing work	<ul style="list-style-type: none"> <li>Transition Council reviewed a list of policies to be amended and identified the <i>Professional Practice Standard: Humane Handling and Restraint</i> as needing minor changes at its August 2025 meeting.</li> <li>Proposed revisions to be presented to Transition Council at its March 2026 meeting.</li> </ul>
<i>Professional Practice Standard: Medical Records</i>	Ongoing work	<ul style="list-style-type: none"> <li>Transition Council reviewed a list of policies to be amended and identified the <i>Professional Practice Standard: Medical Records</i> as needing review and development at its August 2025 meeting.</li> </ul>

		<ul style="list-style-type: none"> <li>• Transition Council did not propose that medical records information be included in the regulatory concepts submitted to the Ministry in October 2025.</li> <li>• Proposed concepts to be presented to Transition Council at its March 2026 meeting.</li> </ul>
Omnibus Motion	Ongoing work	<ul style="list-style-type: none"> <li>• Transition Council was presented with a proposed approach for streamlining the policy development process at its June 2025 meeting.</li> <li>• Transition Council confirmed the proposed list, including those designated for the omnibus stream, at its August 2025 meeting.</li> <li>• Transition Council to be presented with proposed revisions to <i>the Professional Practice Standard: Humane Handling and Restraint</i> as an example approach to policies included in the omnibus motion at its March 2026 meeting.</li> <li>• Transition Council to be asked to confirm the approach to the omnibus motion at its March 2026 meeting.</li> <li>• If approved, the approach to the omnibus motion will be applied to the relevant policies, which will return to Transition Council at a future meeting.</li> </ul>

### Recently Completed Topics

*Transition Council Regulatory Concept Recommendations: Supporting the Implementation of the Veterinary Professionals Act, 2024 (October 2025)*

## **Full Review and Development by Transition Council**

### **Professional Practice Standards:**

1. Delegation (likely to become Authorized Activities)
2. Informed Client Consent
3. Veterinary Dentistry
4. Veterinarian-Client-Patient Relationship
5. Conflicts of Interest in the Practice of Veterinary Medicine
6. Interprofessional Collaboration
7. Medical Records

### **Position Statements:**

8. Unauthorized Practice

### **Policy Statements:**

9. After Hours Care (potential to transition into a Professional Practice Standard)

## **Minor Amendments (clarifying which member, updating references, etc.) for Omnibus**

### **Professional Practice Standards:**

1. Prescribing a Drug
2. Use of Compounded Drugs in Veterinary Practice
3. Dispensing a Drug
4. Diagnostic Laboratory Testing
5. Management and Disposal of Controlled Drugs
6. Veterinary Euthanasia
7. Advertising
8. Telemedicine
9. Humane Animal Handling and Restraint
10. Extra Label Drug Use

### **Policy Statements:**

11. Provision of Veterinary Services to Wildlife

12. Sale of Non-Drug Veterinary Products

13. Managing Questions of Ownership and Ownership Disputes of Companion Animals

**Position Statements:**

14. Reporting Animal Abuse or Neglect

15. Animal Welfare

16. Veterinary Stewardship of the Responsible Use of Antimicrobial Drugs in Animals

17. Steering

18. Bundled Services

19. Medically Unnecessary Veterinary Services

20. Pain Management

**Rescind by Legacy Council**

1. Use of Forms of Energy in the Treatment and/or Care of Animals Policy Statement

2. Use of Forms of Energy in the Treatment and/or Care of Animals Position Statement

3. Use of Non-Conventional Therapies in the Practice of Veterinary Medicine Position Statement

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Transition Council Meeting  
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## **AGENDA ITEM 9.1**

### **TOPIC: Transition Council Evaluation**

After every Council meeting an evaluation is sent to all Councillors to receive feedback on the meeting and to determine how we can continually improve on our performance. The survey aggregate results are provided to the Chair to assist with meeting preparation. The results are attached for Council's reference.

### **Attachment**

November 26-27, 2025 Evaluation

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## **AGENDA ITEM 9.2**

**TOPIC: Building Governance Readiness – Part 1**

There will be a presentation on this topic. Slides will be made available after the presentation.

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### **AGENDA ITEM 9.3**

**TOPIC: Right Touch Regulation**

There will be a presentation on this topic. Slides will be made available after the presentation.



## **AGENDA ITEM 10.1**

### **TOPIC: Licensure Pathways**

#### **Overview**

Since Transition Council began meeting in 2024, they have been involved in reviewing various items related to licensure. This has included licensure frameworks and the applicable regulatory concepts under the *Veterinary Professionals Act* (VPA).

This agenda item is intended to assist Transition Council with understanding where we are at in establishing licensure pathways in the VPA.

Staff will be providing a brief overview of what Transition Council has reviewed to date, the licensure requirements that are currently proposed in the regulation under the VPA, and what work Transition Council will be involved in related to licensure pathways in 2026.

#### **Attachments**

1. Appendix A – Excerpt from the *Veterinary Professionals Act* - Licensing
2. Appendix B – Proposed regulatory concepts - Licensure

## **Appendix A**

### **Veterinary Professionals Act, 2024**

#### **PART IV LICENSING AND ACCREDITATION**

##### **LICENSING**

###### **Licensees**

**14** (1) Every person who holds a licence is a member of the College.

###### **Classes of licences**

(2) Applicants may apply for one of the following classes of licences:

1. A veterinarian licence to engage in the practice of veterinary medicine as a veterinarian.
2. A veterinary technician licence to engage in the practice of veterinary medicine as a veterinary technician.

###### **Licence suspended**

(3) Despite subsection (1), a person whose licence is suspended is not a member.

###### **Conditions and limitations**

(4) A member is subject to any terms, conditions and limitations to which the licence is subject.

###### **Compliance**

(5) Every member shall comply with,

- (a) the relevant qualifications, requirements and standards set out in the Act and the regulations and the standards established by the Council pursuant to section 97;
- (b) any applicable rules or requirements respecting the practice of veterinary medicine set out in the Act or the regulations; and

(c) any terms, conditions and limitations imposed on their licence.

## **Application**

15 A person who wishes to receive a licence shall apply to the Registrar in accordance with the regulations.

## **Issuance of licence**

16 (1) Subject to subsections (2) and (3), if an application is made in accordance with the regulations and the Registrar is of the opinion that an applicant meets the qualifications and requirements under the Act, the Registrar shall,

(a) issue a licence to the applicant; and

(b) impose any terms, conditions or limitations on the licence that are required to be imposed by the regulations or the by-laws.

## **Grounds for refusal**

(2) The Registrar shall refuse to issue a licence if, in the opinion of the Registrar,

(a) the applicant does not meet the qualifications and requirements set out in the Act or as may be prescribed;

(b) the past conduct of the applicant affords reasonable ground for believing that the applicant will not engage in the practice of veterinary medicine with honesty and integrity; or

(c) there are reasonable grounds for believing that the applicant is incompetent or that their fitness to practise is impaired.

## **Referral to Licensing Committee by Registrar**

(3) The Registrar may refer an application to the Licensing Committee for a determination of whether to issue the licence.

## **Notice to applicant**

(4) The Registrar shall deliver to the applicant,

(a) if the Registrar issues a licence subject to terms, conditions or limitations or refuses to issue a licence, written notice of the decision, the reasons for the decision and any terms, conditions or limitations imposed on the licence; and

(b) if the Registrar refers an application to the Licensing Committee, written notice of the decision and of the applicant's right to make written submissions to the Committee within 30 days of receiving the notice or a longer period as specified by the Registrar in the notice.

### **Referral to Licensing Committee by applicant**

(5) After receiving notice that the Registrar has issued a licence subject to terms, conditions or limitations or refused to issue a licence, the applicant may require the Registrar to refer the application to the Licensing Committee.

### **Consideration by Licensing Committee**

17 (1) The Licensing Committee shall consider an application referred to it under section 16.

### **Same**

(2) The Licensing Committee may require an applicant to obtain such additional experience, education or training as the Licensing Committee specifies before being issued a licence.

### **Directions to Registrar**

(3) After considering the application, the Licensing Committee may direct the Registrar to,

(a) issue the licence;

(b) refuse to issue the licence;

(c) issue the licence subject to the terms, conditions and limitations the Licensing Committee specifies;

(d) issue a licence after the applicant successfully completes examinations set or approved by the Committee; or

(e) issue a licence after the applicant successfully obtains the additional experience, education or training specified by the Committee.

## **Exemption from requirements**

(4) The Licensing Committee may direct the Registrar to issue a licence, or issue a licence subject to terms, conditions or limitations, even if the applicant has not met all of the qualifications or requirements for a licence.

## **Notice to applicant**

(5) The Registrar shall deliver notice to the applicant,

(a) of the Licensing Committee's direction under subsection (3);

(b) if the Licensing Committee directs the Registrar to refuse to issue the licence, of the reasons for that decision and of the applicant's right to a hearing or review under section 27;

(c) if the Licensing Committee directs the Registrar to impose terms, conditions and limitations on the licence, of the reasons for that decision and of the applicant's right to a hearing or review under section 27;

(d) if the Licensing Committee directs the Registrar to issue a licence after the applicant successfully completes examinations set or approved by the Committee, of the reasons for that decision and of the applicant's right to a hearing or review under section 27;

(e) if the Licensing Committee directs the Registrar to issue a licence after the applicant successfully obtains the additional experience, education or training specified by the Committee, of the reasons for that decision and of the applicant's right to a hearing or review under section 27; and

(f) of any exemption under subsection (4).



## Appendix B

### Areas of Regulation-Making Authority<sup>1</sup>

#### Part A – Licensure

The licensing of veterinarians and veterinary technicians under the VPA is a fundamental pillar to the regulation of the profession. The following regulatory concepts are recommended by Transition Council to assure a robust licensure process and provide detail and clarity.

#### Licence Subclasses

##### Scope

Transition Council recommends the development of regulation language related to licence classes in accordance with Sections 14 and 93 (1) 12-14 of the VPA that applies to both veterinarian and veterinary technician members of the CVPO.

The CVPO is responsible for reviewing the education and credentials of applicants to determine whether they possess the skills, knowledge, and judgement to competently and safely practise veterinary medicine. This is achieved through the licensure process.

The CVPO oversees two classes of licensure – one for veterinarian members and one for veterinary technician members. To achieve this oversight, Transition Council recommends that each class of licensure has three subclasses – general, provisional, and short-term.

#### Concept #1 - Licence Subclasses

##### General Licence

This subclass of licence is for applicants who are competent to provide the full scope of practice for veterinarians or veterinary technicians. It includes applicants who have completed a limited licensure assessment or specialty that has confirmed competency in a narrowed scope of practice (including those limited to certain areas of public service, academia, specialty, or scope of practice). For the latter, terms, conditions, and/or limitations are placed on the general licence based on the demonstrated competencies.

##### Provisional Licence

This subclass of licence is for applicants who are actively undergoing a competency assessment process and permits applicants to practise under the supervision of a veterinarian member while completing the requirements for a general licence. It will include individuals who are completing an education program, internship, or residency.

This subclass is time-limited and is valid for three (3) years starting on the date that it is issued to ensure that applicants remain dedicated and active in their pursuit of a general licence.

---

1. Pursuant to relevant sections of the VPA.



## Short-Term Licence

This subclass of licence permits applicants to provide veterinary services in Ontario for a specific short-term purpose such as a state of emergency or specific locum arrangements.

Applicants for a short-term licence as a veterinarian are required to obtain the Registrar's approval for their proposed work and to practise at or from an accredited veterinary facility where the Veterinary Facility Director has assumed and confirmed responsibility to provide any additional follow-up care.

Applicants for a short-term licence as a veterinary technician are required to obtain the Registrar's approval for their proposed work and to work under the delegation and supervision of a veterinarian member at or from an accredited facility where the Veterinary Facility Director has assumed and confirmed responsibility to provide any additional follow-up care.

## Concept #2 – Veterinary Technicians Currently Registered with the Ontario Association of Veterinary Technicians (OAVT)

Veterinary technicians currently registered with the OAVT have a specific pathway for applying for licensure with the CVPO. This includes the requirement to complete a module in veterinary jurisprudence related to the VPA within a timeframe determined by Transition Council. This module is the same expectation as for veterinarian members.

### Administrative Notes

- ▶ There are general application requirements for all applicants including those related to professional conduct (including background checks), eligibility to work, and language requirements. These requirements are outlined at a higher level in regulation with additional details contained in CVPO policy. They are also based on current processes.
- ▶ Specific competency requirements for veterinarians will be outlined in CVPO policy and include proof of education (ex. DVM) and assessment(s) (ex. NAVLE, National Board Exams).
- ▶ Specific competency requirements for veterinary technicians will be outlined in CVPO policy and include proof of education (ex. approved veterinary technician or veterinary technologist program) and assessment(s) (ex. VTNE).
- ▶ All applicants are required to meet requirements related to veterinary jurisprudence.
- ▶ The Licensing Committee (formerly the Registration Committee) retains its ability to waive or amend any of the licensing requirements for an applicant.
- ▶ Veterinarians licensed under the VA have their licences transferred automatically under the VPA with the same terms, conditions, and limitations that exist on their current licence.
- ▶ All individuals, including veterinary technicians currently registered with the OAVT, and not currently licensed under the VA are required to submit an application for licensure to the CVPO in order to assure accurate and complete public register data and gather relevant licensure fees.



## **AGENDA ITEM 10.2**

### **TOPIC:     Committee Transition**

#### **Overview**

The role of the Transition Council is primarily to establish the early official documents of the College of Veterinary Professionals of Ontario that will assist its first elected Council to begin with confidence. The Transition date --- or the Proclamation date as we refer to it, is the date that the Veterinarians Act is sunsetted and the Veterinary Professionals Act comes into force. At that time the Transition Council is charged with holding the first election of the new Council within 9 months or less. Importantly, the Transition Council can now complete any duties or tasks that the new Council has the authority to do, that ensures the early workings of the new governance structure and rules. This duty includes assuring that there are Committees appointed, as needed, to complete the College mandate as necessary. The By-Laws, once approved, permit the Transition Council to appoint Committees in the format needed to complete the projected work (see proposed language attached as Appendix A).

#### **Discussion**

Attached as Appendix B is a proposed Committee timeline, that outlines the needs in the first phase of the work of the new College and a phase 2 that would begin under a newly elected Council. This timeline is intended to assist the Transition Council with understanding where the needs will be and begin to explore what that first appointment process might look like.

Staff will walk the Council through the proposed timeline and lead a discussion on the preferences for appointment in Phase 1 so that processes may be developed to assure a sound and defensible appointment approach.

#### **Attachments**

- Appendix A – Proposed Language
- Appendix B – Proposed Committee Timeline

## **Appendix A**

### ARTICLE 6 - Committees

#### 6.1 Council Transition Period

(1) Despite anything in these by-laws, the Transition Council may appoint and remove members of committees, and determine the composition of committees during the Council Transition Period.

(2) The terms of committee members appointed by the Transition Council remain in effect until their successors are appointed following the establishment of the First Council.

#### 6.2 Committees During First Council Year

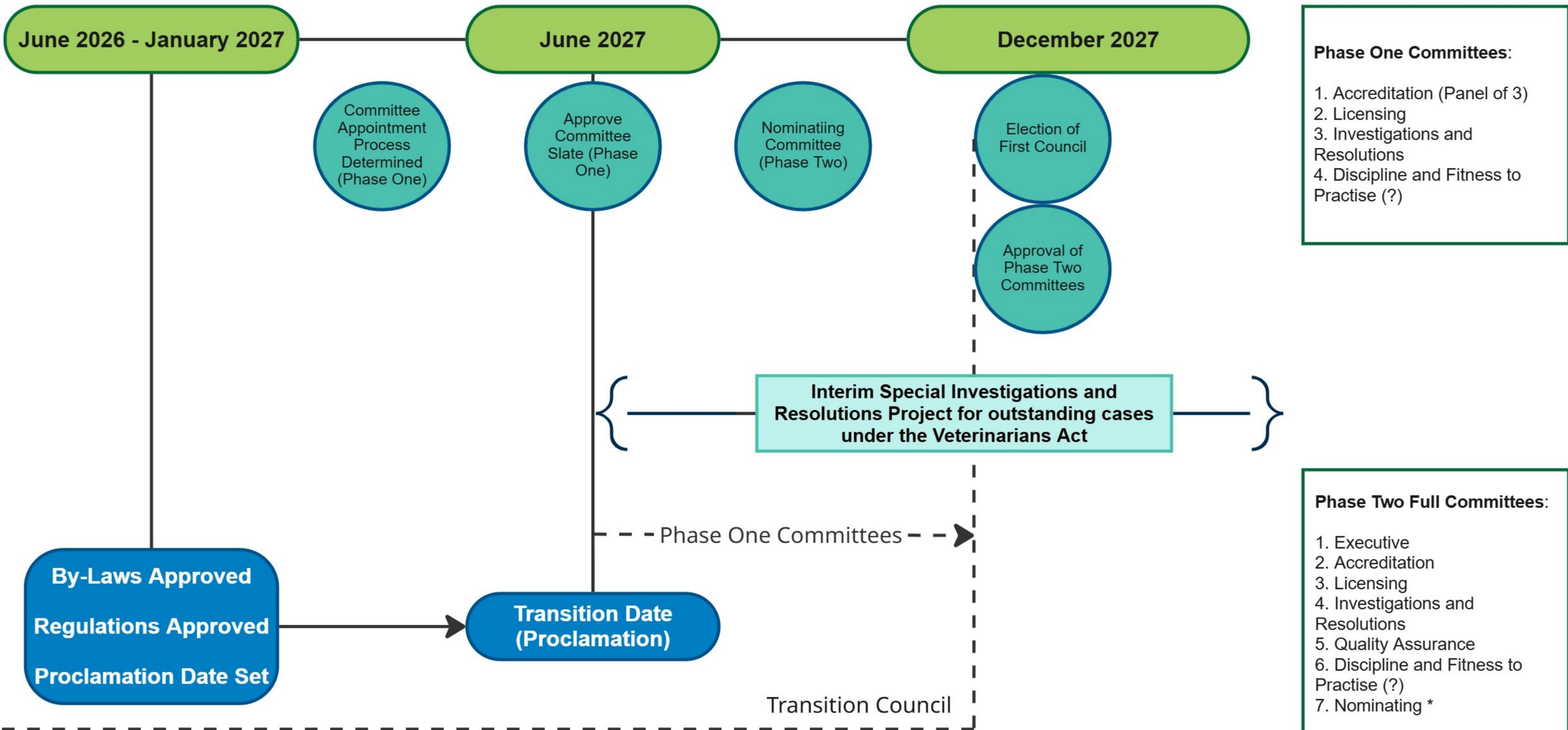
(1) Despite anything in these by-laws, the First Council may appoint and remove members of committees during the year after the First Council is established.

(2) The terms of committee members appointed by the First Council during the year after the First Council is established remain in effect until their successors are appointed in accordance with the appointment process set out in Article 6.4.

# Committees Timeline

Updated: February 20, 2026

# Appendix B



**By-Laws Approved**  
**Regulations Approved**  
**Proclamation Date Set**

**Transition Date (Proclamation)**

**Interim Special Investigations and Resolutions Project for outstanding cases under the Veterinarians Act**

**Phase Two Full Committees:**

1. Executive
2. Accreditation
3. Licensing
4. Investigations and Resolutions
5. Quality Assurance
6. Discipline and Fitness to Practise (?)
7. Nominating \*

\*Non-statutory



## **AGENDA ITEM 10.3**

### **TOPIC: Discipline Process**

#### **Background**

At its September 2025 meeting, the Transition Council directed staff to further explore the option of moving to an independent discipline tribunal external to the College. Since that time, College staff have explored the option of partnering with the Health Professions Discipline Tribunal (HPDT). Staff wanted to provide an update on the considerations of such a partnership and seek direction to continue this work.

The HPDT is an independent tribunal created by the College of Physicians and Surgeons of Ontario to create an external discipline tribunal with a stream-lined approach. In this model, the Discipline and Fitness to Practise Committee functions external to the College and it shares tribunal support with other regulators. A report on the pilot project of this work is attached for your interest. Transition Council does not need to review the entire report, but it is provided for those who wish to delve a layer deeper.

#### **Discussion**

Key features of the HPDT model will be explored below.

##### *Model*

Part of what makes this process different is the model used. This model involves the use of an experienced adjudicator. Several experienced adjudicators are appointed as members of the Discipline and Fitness to Practise Committee. These trained adjudicators are generally lawyers, and they would sit as the chair of a panel. The panel would then be made up of four other members who are veterinary professionals and public members. The experienced adjudicator would be responsible for chairing the panel, managing challenging circumstances that arise and writing the decision and reasons. The adjudicator's experience would allow hearings and writing to be managed very efficiently. The addition of the trained adjudicator removes the need to have Independent Legal Counsel support the panel.

The chair functions are those that members of our current Discipline Committee often find challenging. If an experienced adjudicator was managing those functions, that would reduce some of the stress on our veterinary professionals and public members who find it challenging to act in that capacity. This change would reduce current issues in our disciplinary process related to lack of confidence running hearings and leading the decision writing process.

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The Chair of the HPDT, who is currently David Wright, is appointed as the Chair of each College's Discipline and Fitness to Practise Committee. A Vice Chair who is either a veterinary professional or a public member of the CVPO Council would be appointed by the College. The Vice Chair would assist in oversight of the Committee and provide a link back to the Council.

A member of our legal team has raised a concern related to transparency of legal advice provided by the experienced adjudicator and the fact that it is not disclosed to all parties. The HPDT has reviewed this concern and not identified any risks. The experienced adjudicator is acting as a member of the panel and is not providing legal advice. If an independent legal issue arises that was not raised by the parties, the panel can choose to raise any legal issues it discussed with the parties.

#### *Efficiencies*

The HPDT has identified many efficiencies in their work, including reduced timelines in scheduling and completing a hearing and a reduction in days to release written decisions and reasons after a hearing.

The HPDT process is designed to move cases forward more quickly. The process relies heavily on case management conferences with an experienced adjudicator. If it would be helpful a member of the veterinary profession can also be involved in the case conferences to provide feedback to the parties on the strength of the case.

The tribunal office provides the administrative support necessary to manage the discipline process, including scheduling, correspondence, file maintenance, releasing reasons, etc.

Hearings are also held virtually in the HPDT model. The tribunals use a service to manage the technical aspect of the hearing. Hearings are recorded and there is no need for a court reporter to attend the hearing as they use the recordings to have a court report create a transcript if required.

Colleges participating in the pilot project experienced a significant reduction in average days to complete a disciplinary case. Cases were completed in an average of 201 days during the pilot and decisions were released within an average of 25 days for uncontested hearings and 59 days for contested hearings.

#### *Appeals*

Appeals of decisions from the HPDT to the Courts have been dismissed and there have not been any concerns about the approach raised.

#### *Costs*

In the pilot, the HPDT reduced the costs of disciplinary processes for regulators. At this time, ten health regulators are participating in the HPDT. This allows costs to run the tribunal office to be shared between many regulators. There are monthly fees of \$1,030 (\$12,360 per year) and then



hourly fees for each hour an experienced adjudicator spends on a case. Each College is responsible for paying the costs of administering their own hearings.

#### *Independence of the Tribunal*

The work of the Discipline and Fitness to Practise Committee would be administered external to the College. This creates increased separation between the investigation of a matter and the disciplinary process and creates a more independent process that the public and veterinarians will see is further removed from the College.

#### *Education*

The HPDT has focused on providing education and training to Committee members. There is a thorough orientation process, semi-annual business and education meetings, and an annual education conference to support Committee members in fulfilling the important responsibilities of acting on a disciplinary or fitness to practise hearing.

#### *Other Considerations*

If the CVPO wishes to partner with the HPDT there will be a number of changes that we need to make, including by-law changes, and adopting revised rules and processes. If the Transition Council supports exploring this process further, staff will seek a legal opinion on partnering with the HPDT and an assessment of any needed by-law changes that can be considered before we finalize the by-laws.

## **Options**

Transition Council may wish to:

1. Direct completion of a thorough legal review related to partnering with the Health Professions Discipline Tribunal
2. Decide not to pursue a partnership with the Health Professions Discipline Tribunal
3. Any other option the Transition Council would like to pursue

## **Attachment**

- Health Professions Discipline Tribunal – Pilot Phase Report and Proposal



# Pilot Phase Report and Proposal

HPDT  
Health Professions  
Discipline Tribunals



TDPS  
Tribunaux de discipline  
des professions de la santé



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# Glossary

The terminology used at different Health Colleges and at different times varies. For readability, we have used consistent terminology as follows.

<b>Board</b>	“Council” under the Code
<b>CASLPO</b>	College of Audiologists and Speech-Language Pathologists of Ontario
<b>HPDT or OPSDT Chair</b>	Chair of the Ontario Physicians and Surgeons Discipline Tribunal and Chair or Co-Chair of the Pilot Tribunals, currently David Wright
<b>CMC</b>	Case Management Conference
<b>CMTO</b>	College of Massage Therapists of Ontario
<b>Code</b>	Health Professions Procedural Code, Schedule 2 to the RHPA
<b>CPSO</b>	College of Physicians and Surgeons of Ontario
<b>CRPO</b>	College of Registered Psychotherapists of Ontario
<b>Discipline Tribunal</b>	A discipline committee or tribunal under the Code
<b>Experienced Adjudicator</b>	Individuals with at least five years of experience as an adjudicator, recruited through a competitive process and appointed to the OPSDT and Pilot Tribunals
<b>HPDT</b>	Health Professions Discipline Tribunals, currently the OPSDT, ORPDT, and the Discipline Committees of CMTO and CASLPO
<b>OPSDT</b>	Ontario Physicians and Surgeons Discipline Tribunal, which is the Discipline Committee of the CPSO
<b>ORPDT</b>	Ontario Registered Psychotherapists Discipline Tribunal, which is the Discipline Committee of the CRPO
<b>Parties</b>	The parties to a discipline proceedings are the College (the prosecutor) and the registrant (the defence)
<b>Pilot Colleges</b>	CASLPO, CMTO and CRPO
<b>Pilot Tribunals</b>	The Discipline Committees of CMTO and CASLPO and the ORPDT
<b>Registrant</b>	A “member” under the Code
<b>RHPA</b>	<i>Regulated Health Professions Act</i>
<b>Tribunal Office</b>	The department within CPSO that supports the OPSDT and HPDT
<b>Tribunal Office Staff</b>	Staff employed by CPSO who work on administration and case processing of HPDT matters, including the HPDT Chair and Tribunal Counsel.



# Introduction

## The OPSDT



Between 2021 and 2023, the College of Physicians and Surgeons of Ontario (CPSO) revamped its process for hearing and deciding allegations of professional misconduct and incompetence

referred for discipline hearings. The changes, reflecting best practices in administrative justice, have led to increased independence, higher participant and public confidence, dramatically shorter timelines and significant cost savings. Physician and public members hearing discipline cases have provided extremely positive feedback.

The significant components of the changes include:

- renaming the CPSO Discipline Committee the Ontario Physicians and Surgeons Discipline Tribunal (OPSDT) to signal independence and promote understanding of its work;
- appointing an independent full-time Chair to lead the OPSDT and the Tribunal Office, along with a part-time physician Vice-Chair;
- recruiting individuals with significant experience as adjudicators in other contexts to chair hearing panels, eliminating the need for independent legal counsel;
- instituting intensive case management in the pre-hearing phase, with case management conferences (CMCs) chaired by an experienced adjudicator;
- implementing a more streamlined scheduling process;
- modernizing the OPSDT's Rules of Procedure and Practice Directions to make them more plain language, flexible and values based;
- developing a separate website for the OPSDT, including detailed, plain-language guides to various OPSDT processes and other easily accessible and user-friendly resources;
- adopting a more contemporary, accessible reason-writing style and implementing a comprehensive reasons preparation and review policy with tightened timelines for completion;
- establishing a practice advisory group to gather feedback from lawyers who represent both the College and registrants;
- designing and implementing new, more robust training when new members are appointed and continuing education for all OPSDT members;
- emphasizing equity, diversity and inclusion in all we do.



## These changes produced notable successes, including:

### Shortened timelines across all stages of the process, including:



- releasing all reasons within our 84-day standard, with most completed sooner
- developing a 2024 key performance indicator of one year from referral to final decision, 80 percent of the time



**Feedback from professional and public OPSDT members that hearing management by experienced adjudicator chairs allows them to better focus on the issues the panel must decide**



**Significant cost savings**

**A more diverse discipline tribunal membership**



**Positive feedback from all participants in the process and favorable comments from the courts**



**Ability to schedule uncontested hearings within weeks of parties' agreement**

**Greater transparency**





## The HPDT Pilot



In 2023, the OPSDT embarked on a pilot project together with the Colleges of Audiologists and Speech-Language Pathologists (CASLPO), Massage Therapists (CMTO) and Registered Psychotherapists (CRPO) – the Health Professions Discipline Tribunals Pilot (HPDTP). The Pilot Colleges adopted core aspects of the model as implemented at the OPSDT. The Pilot Colleges appointed the experienced adjudicators that were initially recruited by the OPSDT to their Discipline Committees, and the HPDT Chair as the Chair or Co-Chair of their Discipline Committees. CPSO billed the Pilot Colleges for the work done on a non-profit basis.

The Pilot began in March 2023 at CMTO, April 2023 at CRPO and May 2023 at CASLPO. Initial agreements were for a one-year period. After the first year, the Pilot was extended until the end of December 2024 at all three Colleges.

There have been several differences between Pilot Colleges in implementation:

- At CMTO, only cases with allegations of sexual abuse were part of the Pilot stream; other cases continued under the existing system.
- At CASLPO, the Tribunal Office has handled case processing from the beginning of the Pilot. At CRPO, the Tribunal Office took over case processing in the spring of 2024. CMTO continues to do all its own case processing.
- CRPO, CASLPO and OPSDT harmonized their rules, forms, practice directions, guides, administrative processes and templates in the spring of 2024. CMTO continues to be distinct in these ways.



## This Report

This report on the Pilot Phase is divided into three parts. The first provides the background to the Pilot and reports on what we did. The second presents participant feedback and some quantitative measures of our work. The third outlines the form of the proposed permanent organization, which is open to both existing participants and other Ontario Health Colleges to join in 2025.

We sought feedback from multiple individuals, including members of the Pilot Tribunals and OPSDT, Pilot College leadership, prosecution and defence counsel and staff supporting the Pilot Tribunals. We have also consulted with senior leadership of other Health Colleges not currently part of the Pilot. Unless attributed to others, the analysis in this report reflects the views and proposals of the Tribunal Office. Proposals on human resources, information technology and finances are on behalf of both the Tribunal Office and CPSO as the organization responsible for resources and contractual arrangements.



# PART 1

## The model and the pilot

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# The model and the pilot



## BACKGROUND

### Changing Expectations and New Challenges

Ontario's Health Professions Procedural Code<sup>1</sup> sets out regulatory processes that apply to all 26 of Ontario's Health Colleges, including establishing various committees. The Discipline and Fitness to Practise Committees are unique within the College structure, in that they are required to hold formal, quasi-judicial hearings to decide allegations referred to them by the Inquiries, Complaints and Reports Committee.

Despite their name, Discipline Committees are administrative tribunals, a part of the justice system that decides far more disputes than the courts. They are required to hold quasi-judicial hearings in accordance with the principles of procedural fairness, write decisions and process cases effectively and efficiently. These are just some of the types of claims that tribunals address: rental housing disputes (Landlord and Tenant Board); entitlement to automobile insurance benefits (Licence Appeal Tribunal); allegations of discrimination in employment or services (Human Rights Tribunal); refugee claims (Immigration and Refugee Board), involuntary detention in psychiatric facilities (Consent and Capacity Board); and entitlement to Employment Insurance Benefits (Social Security Tribunal).

Like other parts of the administrative justice system, professional discipline tribunals are facing several challenges that have become more pronounced in recent years. One is scrutiny from the courts. Discipline decisions can be appealed by either party to the Divisional Court. Since the Supreme Court of Canada's 2019 decision in *Vavilov*,<sup>2</sup> discipline decisions no longer receive deference from the courts on questions of law; they must be correct. There is also greater scrutiny of tribunals' written reasons.

The court said in *Vavilov* that tribunals must adopt a "culture of justification" and demonstrate through reasons that their exercise of public power can be justified.<sup>3</sup>

The legal issues in discipline cases are becoming increasingly complex. Supreme Court decisions have clarified that parties may raise issues under the *Canadian Charter of Rights and Freedoms*<sup>4</sup> and the *Ontario Human Rights Code*<sup>5</sup> before tribunals. Recent discipline cases have involved decisions on *Charter* claims of freedom of expression, unreasonable search and seizure and patient privacy.

There is also a marked increase, in both tribunals and courts, in the number of self-represented litigants. Tribunals have a duty to provide appropriate support and information to self-represented litigants in published materials, communications with tribunal staff and case management/pre-hearing conferences. Some litigants' and counsel's approach to litigation can lead to hearing management challenges.

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<sup>1</sup> Schedule 2 to the *Regulated Health Professions Act, 1991*, S.O. 1991, c. 18.

<sup>2</sup> *Canada (Minister of Citizenship and Immigration) v. Vavilov*, 2019 SCC 65.

<sup>3</sup> Para. 14.

<sup>4</sup> *Nova Scotia (Workers' Compensation Board) v. Martin; Nova Scotia (Workers' Compensation Board) v. Laseur*, 2003 SCC 54.

<sup>5</sup> *Tranchemontagne v. Ontario (Director, Disability Support Program)*, 2006 SCC 14.



Finally, there are increased legal and societal expectations of transparency and accessibility. Best practice is now to write decisions using a more plain-language, non-formulaic, less legalistic approach so they are more understandable to the parties and the public. Recent court decisions have also found that the “open courts principle” requires that documents filed in tribunal proceedings be available to the public in a timely way, with limited exceptions. The use of on-line hearings that began with the pandemic and has continued since then has allowed the public, complainants, other registrants and the media to view hearings without travelling to downtown Toronto and sitting in a hearing room all day.

## Tribunal Best Practices

The following are among the best practices in contemporary tribunal design<sup>6</sup>:

- merit-based appointment and reappointment processes, based on recommendations from the tribunal leadership;<sup>7</sup>
- expert leadership that sets direction through policy, process and decision writing, promoting consistency while respecting panels’ independence;
- tribunal independence, including fixed terms for adjudicators, removal of adjudicators during terms only for cause and separation from the prosecution in discipline tribunals;<sup>8</sup>
- a robust education program for adjudicators, both at the time of appointment and on an ongoing basis;
- plain language, values-based, flexible rules of procedure that allow procedures to adapt to the needs of a particular case;
- plain-language guides and practice directions to assist parties, witnesses and the public;
- issues-based, plain language reasons;<sup>9</sup>
- “decision review and release” policies to ensure high quality and timeliness;
- supports for self-represented litigants;<sup>10</sup>
- establishment of committees or roundtables for feedback from those who appear before the Tribunal;
- the use of case management, alternative dispute resolution and active adjudication to promote settlement and streamline hearings;<sup>11</sup>
- attention to trauma-informed approaches to adjudication.

<sup>6</sup> For examples of tribunal policies in these and other areas see the Council of Canadian Administrative Tribunals Tribunal Policies Repository: <https://www.ccat-ctac.org/tribunal-policies-repository/>

<sup>7</sup> See the *Adjudicative Tribunals Accountability, Governance and Appointments Act*, S.O. 2009, c. 33, Sched. 5 (ATAGAA), which does not apply to professional discipline tribunals but is based on best practice.

<sup>8</sup> See 2747-3174 *Québec Inc. v. Québec (Régie des permis d'alcool)*, [1996] 3 SCR 919.

<sup>9</sup> See Ed Berry, *Writing Reasons: A Handbook for Judges*, 5th Edition, 2020.

<sup>10</sup> See Canadian Judicial Council, *Statement of Principles on Self-represented Litigants and Accused Persons*, September 2006: <https://cjc-ccm.ca/sites/default/files/documents/2020/Final-Statement-of-Principles-SRL.pdf>; *Pintea v. Johns*, 2017 SCC 23; Michelle Flaherty and Morgan Teeple Hopkins, “Active Adjudication and Self-Represented Litigants: the Duties of Adjudicators” (2022) 35 *Canadian Journal of Administrative Law & Practice* 177.

<sup>11</sup> See Michelle Flaherty, “Best Practices in Active Adjudication” (2015) 28 *Canadian Journal of Administrative Law and Practice* 291.



## Expertise in Adjudication and Tribunal Administration

Greater professionalization of administrative tribunals has led more people to build careers in administrative justice, resulting in a significant cadre of professionals with extensive experience in the area. Adjudicators often serve on more than one tribunal at the same time or in succession, working part-time in multiple roles and/or applying their experience in different contexts.

With regards to tribunal administration, over the last 15 years, governments have developed umbrella organizations for tribunals, in which they share resources, leadership and policies. Tribunals Ontario is made up of 14 different adjudicative tribunals with a common Executive Chair and Executive Director. Several tribunals have now been combined into the Ontario Land Tribunal. Federally, the Adjudicative Tribunals Support Service of Canada provides support services to 11 tribunals.

## Combining Legal and Health Expertise

The OPSDT and Pilot Tribunals hear discipline cases in five-member panels that include an experienced adjudicator chair, two public members of the College's Board (as required under the Code), one professional member of the College's Board (also required under the Code) and one professional non-Board member. Panels of decision-makers such as this, consisting of experts in adjudication, health care professionals and members of the public are common in Canadian administrative justice.

For example, the Consent and Capacity Board decides a variety of applications, including those related to involuntary status in a psychiatric facility, findings of incapacity to consent to treatment, reviews of community treatment orders, admission to long term care, end-of-life care, capacity to make financial decisions, access to health and youth records, and certain communicable diseases. Its members include lawyers, psychiatrists, other physicians, nurses in the extended class and members of the public. It sits in panels of one, three or five members and multi-member panels must include a mixture of lawyers, health care professionals and public members. The legal member presides and prepares the written decision and the reasons for decision.

The Ontario Review Board and its counterparts in other provinces and territories make decisions about the detention or restrictions on individuals who have been found by a court to be either unfit to stand trial or not criminally responsible on account of mental disorder. Its members include lawyers, judges, retired judges, psychiatrists, psychologists and members of the public. Panels of five are made up of two legally trained members, two health professionals and a member of the public.

The Health Services Appeal and Review Board, which holds appeals, hearings and reviews concerning publicly insured health services under the Health Insurance Act and other hearings, is required to have both lawyers and medical professionals as members, and they may sit together on panels. The lawyer generally presides.

None of these tribunals regularly use independent legal counsel.

## Other Professional Regulators

There are also various professional regulators that have panels combining legal experts and others without using independent legal counsel.

The Colleges of Physicians and Surgeons of Saskatchewan, Nova Scotia and Quebec have legally trained members sit on all panels and chair their discipline hearings, as do the College of Immigration and Citizenship Consultants and the Electrical Safety Authority.

Beginning in 2013, the Law Society of Ontario implemented significant enhancements to its hearing process. This included establishing the Law Society Tribunal (LST) as a body with a separate identity from the Society. The LST has its own premises, website and logo along with an independent, full-time chair. Beginning in 2013, it recruited experienced adjudicators to serve on panels along with elected or appointed board members. Appointee lawyer members chair many but not all hearing panels and conduct most pre-hearing conferences. The panels include paralegal and public members sitting together with lawyers, without independent legal counsel.



## The Goudge Report

In 2015, the Ministry of Health and Long-Term Care asked Stephen Goudge, a former justice of the Court of Appeal for Ontario, to make recommendations about the complaint and hearing processes at the CPSO. His report recommended, among other things:

- that non-physician members with advanced dispute resolution skills be appointed to the Discipline Committee to deal with cases where a physician pre-hearing conference chair is not required, or where a non-physician pre-hearing conference chair might be more effective; and
- that legally trained persons, experienced in running hearings, be appointed to the Discipline Committee to chair hearing panels in non-clinical standards cases. He noted that would eliminate the need for independent legal counsel at those hearings.

## THE NEW MODEL: CORE COMPONENTS

### Leadership

#### OPSDT

The CPSO Board appointed David Wright as the Chair of the then Discipline Committee for a three-year term beginning in November 2020. He was renewed for a further five-year term beginning in November 2023.

A physician serves as Vice-Chair of the OPSDT: James Watters from 2020-2023 and Joanne Nicholson since 2023. The Vice-Chair's primary role has been to provide the Chair advice and feedback and to sit as a panel member on significant or difficult cases.



David Wright has been a full-time adjudicator for over 15 years, serving in senior leadership positions at adjudicative tribunals since 2009. Prior to his appointment at CPSO, he was the Chair of the Law Society Tribunal for over seven years, during which time he led the implementation of the reforms discussed above. Before that he was a Vice-Chair, Interim Chair

and Associate Chair at the Human Rights Tribunal of Ontario as that tribunal implemented the reform of the human rights system and a new adjudicative model. David is bilingual, has been the Chair of the Council of Canadian Administrative Tribunals and is frequently asked to speak at conferences and to other tribunals. He has published several articles on administrative law and practice in peer-reviewed journals.

The OPSDT Chair is responsible for both adjudicative and administrative leadership. His appointment agreement protects his independence, under a structure that has been found by the Divisional Court to be appropriate:<sup>12</sup>

- He is appointed for a fixed term of three years and cannot be removed except for just cause. He must be provided with written reasons and an opportunity to make submissions to the Board if it is proposed that he be removed for cause. Similar provisions are included in the CPSO's agreements with the Pilot Colleges.
- He reports to the Registrar and Chief Executive Officer on operational or managerial issues and with respect to the Tribunal's goals, policies and processes.
- The agreement specifies that nothing in it is intended to prevent the OPSDT Chair from "making any decisions and expressing any opinions in the course of conducting proceedings and writing reasons as an adjudicator."

The OPSDT Chair assigns panels and sits as an adjudicator on CMCs and hearings. Since 2020, he has been case management chair for most files, and has sat regularly as a panel chair or as a single adjudicator deciding preliminary issues. He coordinates the educational programming for adjudicators and often delivers training himself. He and his team have proposed and implemented all aspects of the new model, including recruitment, preparation of policies, guides and practice directions, and the project to update the Rules of Procedure.

The OPSDT Chair has the administrative responsibilities of a director on operational matters like finance, information technology and human resources. The Tribunal Office staff report to him, and he is the final decision maker on matters of case processing. He attends CPSO Senior Leadership Team meetings occasionally, but only when there are operational matters that affect the Tribunal Office.

<sup>12</sup> *College of Physicians and Surgeons of Ontario v. Khan*, 2022 ONPSDT 23; *Kopyto v. The Law Society of Upper Canada*, 2016 ONSC 7545.



## Pilot

The leadership model differed at each of the Pilot Colleges. As CMTO had a Pilot and a non-Pilot stream, two co-chairs were appointed. The HPDT Chair fulfills the Chair responsibilities for Pilot cases and a massage therapist – first Kim Westfall-Connor and then Bobbie Flint – exercised the responsibilities for the non-Pilot cases.

At CRPO, the HPDT Chair was appointed as Chair of the Discipline Committee when the Pilot started. In 2024, Shelley Briscoe-Dimock was appointed as Vice-Chair, reflecting the model at OPSDT.

At CASLPO, the HPDT Chair was appointed as Co-Chair of the Discipline Committee. The CASLPO Co-Chair, elected by the members of the Committee, appoints the two professional and two public members to each panel. This position has been held since the Pilot started by Kim Eskritt.

## Recruitment of Adjudicators

We engaged in a rigorous process to select the five experienced adjudicators over the summer of 2021. At least five years of experience as an adjudicator was required, although those selected had considerably more experience.

Out of nearly 100 applicants, we selected 20 for interviews. The interview panel was made up of one public member and one professional member of the Discipline Committee, Tribunal Counsel and the OPSDT Chair. In addition to a structured, scenario-based interview, each interviewee was required to watch a video of a mock hearing and write a decision. The written decisions were subject to a blind evaluation, ensuring that the evaluators did not know who had written which decision. Another important consideration was diversity. Four of those selected are women, two are racialized, one is Franco-Ontarian and two can conduct hearings in French. Three live in Toronto, one in Niagara Region and one in the Ottawa Valley. Four have previous adjudicative experience in human rights and three have previous experience in professional discipline for other regulators.

A brief summary of some of their previous and current experience shows the cross-pollination in the tribunal sector. These adjudicators were appointed to the Pilot Tribunals for the Pilot period.



**Raj Anand:** Multiple adjudicative and public service roles including Chief Commissioner of the Ontario Human Rights Commission and member of the Law Society Tribunal (current). Raj led the working group that proposed the reform of adjudication at the Law Society and the creation of the Law Society Tribunal.



**Shayne Kert:** Alternate Chair of the Ontario Review Board (current); Alternate Chair of the Nunavut Review Board (current); member of the Law Society Tribunal; member of the Consent and Capacity Board.



**Sherry Liang:** Assistant Commissioner with the Office of the Information and Privacy Commissioner of Ontario; Vice-Chair of the Ontario Labour Relations Board, the Human Rights Tribunal of Ontario, and the Grievance Settlement Board.



**Sophie Martel:** Vice Chair of the Workplace Safety and Insurance Appeals Tribunal and the Human Rights Tribunal of Ontario; workplace investigator; member of the Law Society Tribunal (current).



**Jennifer Scott:** Presiding Officer with the Office of the Chief Coroner; Associate Chair of the Child and Family Services Review Board, Custody Review Board and the Ontario Special Education Tribunals; Vice-Chair of the Human Rights Tribunal of Ontario.

For their complete biographies, see <https://opsdt.ca/adjudicators>.



## Building an Independent Identity

### Renaming the Discipline Committee

The CPSO’s Board renamed the Discipline Committee of the College of Physicians and Surgeons of Ontario the Ontario Physicians and Surgeons Discipline Tribunal through a by-law amendment. The OPSDT established its own web site (opsdt.ca) and logo.

The use of “Tribunal” identifies more accurately that we conduct open, formal hearings, rather than the type of work done and paper-based process typically used by committees. Given that the College as prosecutor is a party to every case before the Tribunal, the new identity underscores its independence from the College.

The CPSO received an outside legal opinion confirming that the renaming was not contrary to the Code. In accordance with that advice, key documents like

notices of hearing include the note that the OPSDT is the discipline committee established under the Health Professions Procedural Code. There have been no legal challenges to the change of name.

The only other Pilot College to change the name of its discipline committee thus far has been CRPO, in May 2024. It is now known as the Ontario Registered Psychotherapists Discipline Tribunal, pursuant to a by-law similar to that of CPSO.

### HPDT Identity

We have begun the process of developing an identity for HPDT. It has its own logo, and we have obtained the internet domain hpdt.ca.

### Mission and Core Values

The OPSDT developed the mission and core values set out below to help define its new identity.

## MISSION

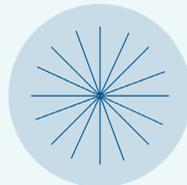
To hear and decide allegations of physician misconduct and incompetence with independence and fairness, making just decisions in the public interest.

## CORE VALUES



### Fairness

*We are neutral and ensure all parties are heard. Our decisions and processes are accessible and clearly explained.*



### Excellence

*We aim for high quality decision-making and service.*



### Respect

*We actively listen with humility and empathy. We strive to understand the diverse identities and experiences of parties, witnesses and those affected by our decisions.*



### Openness

*Our decisions, hearings and processes are transparent, balancing openness and privacy.*



### Timeliness

*We recognize the importance to participants and the public of promptly resolving cases. We act and require parties to act in a responsive and timely way.*



## Panel Composition and Roles

### Composition

Panels hearing the merits and penalty are made up of five individuals: two public members of the Board, two professional members, at least one of whom is a member of the Board and one experienced adjudicator who chairs the panel. One-member panels consisting of only an experienced adjudicator sometimes hear pre-hearing motions on issues like adjournments, evidentiary or procedural issues.

As mentioned above, panel composition flows from the Code. There are no restrictions in the Code on who the Board may appoint as a member of a discipline tribunal. Each panel must consist of 3-5 members of the discipline tribunal, two of whom must be public members of the Board and one of whom must be a professional member of the Board. The other two spots may be filled by any member of the discipline tribunal, and our practice is to always appoint another professional, either a member of the Board or not, and an experienced adjudicator.

### Roles

While the panel chair is responsible for managing the hearing and writing the first draft of the reasons, all panel members are equal in decision making. Skills in leading inclusive discussions and encouraging participation were one of the core criteria in selecting the experienced adjudicators. A key part of our training focuses on the role of all panel members in deliberations and reason writing.

Here are some quotations from experienced adjudicators about how they promote participation:

- “During deliberations I may start by framing the questions for discussion but ask the panel for their thoughts before offering my own. I will canvass each

panel member for their thoughts on each decision point, if they have not already jumped into the discussion... At the beginning of a hearing (especially with panel members I haven't worked with before), I discuss our mutual expectations around asking questions during the hearing, dealing with objections on the fly (whether it is necessary to consult with the entire panel and how they may signify if they wish to go into breakout.)”

- “At nearly every break, I check in with the other panel members to see if they are comfortable with how I am chairing and whether they have questions or comments. In deliberations, I ask the panel members about how the reasons should be written, often seeking input about specific choices on things like tone and how much detail should be included on certain issues. Where there is a reprimand, it is almost always drafted and always delivered by a professional or public member of the panel.”
- “I have been very deferential to the other panel members, essentially trying to intervene mostly to frame discussions/issues. I have also ensured all panel members are heard by specifically asking for comments from those who have yet to participate in any discussion. For hearings, it has also been important to join hearings well ahead of the scheduled start time to introduce myself and answer any questions or concerns panel members may have. During hearings, it has been important to take breaks and ensure that questions are first discussed among the panel members before being raised with the parties.”

As set out in more detail in the survey results in Part II, nearly all Tribunal members felt they were contributing, with some saying it was easier to do so than in the previous system. Many noted that the experienced adjudicators made sure all voices were heard.

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## Legality of the Model

Some lawyers in the regulatory legal community have expressed concerns, including in their feedback on the Pilot for this report, that the presence of a lawyer on a panel is improper on the basis that the lawyer is giving “legal advice” to the other members of the panel that is not being shared with the College and the defence and that the process is therefore less transparent. Section 44 of the Code, similar provisions in other legislation and the common law require that if a panel in any administrative tribunal obtains formal legal advice, it must disclose that advice to the parties and give them a chance to make submissions on it. The concern raises both legal and transparency grounds.

An example of the concerns is the following response to our survey:

“Transparency may be lacking as legal advice provided by the Experienced Adjudicator to the panel is not made available to the parties (as compared to ILC who provided their advice on the record).”

In light of concerns such as this, we obtained a legal opinion in May 2023 from Nadia Effendi, a partner at Borden Ladner Gervais LLP. Ms. Effendi is recognized as one of the leading administrative and public lawyers in Canada. Her detailed opinion, which can be provided on request, concludes that a lawyer serving as a panel member is not providing legal advice and the panel composition is not improper.

There are other factors that give us confidence that the model is appropriate:

- The model was recommended by Justice Goudge, also recognized as an expert on administrative law.
- As discussed above, panels that combine lawyers and non-lawyers without using independent legal counsel are common in Canadian administrative tribunals, and to our knowledge the model has not been challenged or overturned in the courts.<sup>13</sup>

- The panel is required to raise with the parties any analysis, factual or legal, that the parties did not raise. The parties then have the opportunity to make submissions about it. Indeed, panels have done so in OPSDT and Pilot cases.<sup>14</sup>
- Under the previous model, discussions or communications with lawyers that are not known to the parties and are not formal “legal advice” take place, including through review and assistance with decisions by independent legal counsel or the drafting of decisions on behalf of the panel by legally trained decision writers.<sup>15</sup>

## Adopting Adjudication Best Practices

### Active Adjudication and Case Management

Under the new model, the Tribunal takes a more active role in moving cases forward by promoting early settlement or partial agreement where possible, identifying pre-hearing issues and deciding them sooner with less formality. Panel chairs also take a more active role in hearings. This stems directly from the HPDT Chair and the experienced adjudicators’ expertise in alternative dispute resolution.

The first case management conference is scheduled immediately upon filing of the Notice of Hearing. Depending on the nature of the case, more CMCs are often held before the hearing is scheduled. Given the HPDT Chair’s availability, a CMC can be scheduled on short notice to quickly deal with issues.

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<sup>13</sup> The principles set out in s. 44 are a codification of common law principles of fairness, so the same principles apply whether or not there is an explicit provision to this effect. Some statutes under which tribunals use this model have a similar section to s. 44. *Health Insurance Act*, R.S.O. 1990, c. H.6, s. 23 (2) (Health Services Appeal and Review Board); *Health Care Consent Act, 1996*, S.O. 1996, c. 2, Sched. A, s. 77 (2) (Consent and Capacity Board).

<sup>14</sup> *R. v. N.C.*, 2024 ONCA 239. This occurred, for example, in *College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario v. Becker*, 2024 ONRPDT 7 (legal issue) and *College of Physicians and Surgeons of Ontario v. Fagbemiun*, 2022 ONPSDT 11 (factual issue).

<sup>15</sup> *Khan v. College of Physicians and Surgeons of Ontario*, 1992 CanLII 2784 (ON CA).



Some examples of the use of the case management process are:

- A matter that had been referred to a discipline committee in 2019 began case management when the Pilot began in spring 2023. After several case management conferences, the parties reached a joint submission. An uncontested hearing took place in October and the decision was released in early November 2023.
- A self-represented registrant advised at a CMC in early October 2023 that they would bring a motion to disqualify College counsel from acting on the case. The case management chair set a schedule under which the motion would be heard in writing, with submissions to be made in November and early December 2023. The decision on the motion was released two days after the written submissions were complete, allowing the matter to move forward.
- Several hearings where the registrant was not participating were heard in writing, avoiding scheduling challenges and reducing hearing costs.
- Through changes to scheduling practices and the use of case management, payments to OPSDT members for late cancellation of hearing dates decreased by 81% between 2021 and 2023.

There may be cases in which it would be helpful for the registrant to hear the perspective of another member of the profession. If this is identified by either of the parties or the case management chair, a CMC can be conducted jointly with a professional member.

### *Issues-Based Reason Writing*

Best practices for writing of court and tribunal reasons have undergone a revolution in recent years. Led by Justice John Laskin, formerly of the Court of Appeal for Ontario, and Ed Berry, an English professor at the University of Toronto, most legal decision makers now write very differently from the way that the courts and tribunals did previously. This approach rejects legal formality and templated decisions in favour of an audience-focused approach that emphasizes the organization of the decision based on the issues in the case, plain language and conciseness.<sup>16</sup>

Our approach to decision writing reflects this. The experienced adjudicators have all written many decisions using this approach, and indeed, their ability to do so was an important criterion when evaluating decisions during the recruitment process. Reasons look quite different than they used to and, we believe, better capture the expectations of the courts. We also promote quality decisions through a formal decision review process.

### *New Rules of Procedure*

OPSDT implemented new Rules of Procedure to replace the previous OPSDT Rules, which were similar to those of most other health professions' discipline committees.<sup>17</sup> They took effect on January 1, 2023, and were developed following an extensive process of research, consultation and drafting.

The approach to the revisions was centered around several principles (see Rule 1.1.1):

- the overarching importance of fairness;
- accessibility and understandability, using plain language and simplified processes;
- flexible processes, allowing for adaptation to the circumstances of each case;
- adopting successful practices used at other regulators and tribunals; and
- ensuring that matters move forward expeditiously.

<sup>16</sup> See Edward Berry, *Writing Reasons: A Handbook for Judges*, 5th Edition, 2020.

<sup>17</sup> <https://opsdt.ca/hpdt/rules-of-procedure>



Here are some of the most significant changes:



### Rule 2 – Openness

Under most Colleges’ current rules, a member of the public who wishes to obtain copies of documents in the discipline tribunal’s record must file a motion to do so. This can take some time. Pursuant to a 2018 decision of the Superior Court of Justice, the “open courts principle” applies to administrative tribunals. Among other things, the public must have timely access to hearing materials.

Rule 2 adapts to these changes. It establishes an automatic publication ban on the names of patients and anything that could identify them. If a party asks for additional information to be subject to a publication ban or made not public, it sets out the test to be applied, which comes from Supreme Court of Canada caselaw.

Materials in the record are public, and if there is personal health information or other personal information, it must be redacted by the party filing the document. This can be done by filing two versions: one public and one not public. A process like the old process applies to documents filed before the rules came into effect, to protect reasonable expectations of the parties.



### Rule 3 – Accommodation and Language

The rule codifies the rights of participants to accommodation in accordance with the Human Rights Code, to communicate with the discipline tribunal in English or French and to an interpreter. It also sets out the right of the registrant to choose the language of the proceeding, subject to reasonable limits.



### Rule 8 – Statement of Particulars

The tribunal may direct either party to provide more information (particulars) about their position.



### Rule 9 – Case Management

This rule sets out the discipline tribunal’s case management approach and the values that underly it. It sets out the following four goals of case management:

- a. hearings progress in a fair and timely way, in the public interest;
- b. hearing time is used efficiently and effectively;
- c. procedural and legal issues are identified early; and
- d. adjournments are only necessary in exceptional circumstances.

This rule requires a case management conference in every proceeding, and describes what the case management chair may do, including exploring and applying alternatives to traditional adjudicative or adversarial processes.



### Rule 12 – Hearing Preparation

Rule 12.3 – This rule is used mostly when the registrant is not participating. If one party sends a request to admit and the other party does not respond, the other party is deemed to have admitted the facts contained in the request to admit. This avoids the need to call evidence if the registrant isn’t participating, since the hearing can proceed based on the deemed admissions. A similar rule at the Law Society Tribunal was recently upheld and applied by the Divisional Court.<sup>18</sup>

Rule 12.4 – This rule requires each side to provide the other with a list of witnesses and a summary of their anticipated evidence. It also requires the parties to file the documents they may rely upon, including any agreed statement of facts or joint submission on penalty, one week in advance so that the panel may prepare.



### Rule 13 – Registrant Applications to the Tribunal

Rule 13.3 – The Divisional Court decided, in *Li v. College of Physicians and Surgeons of Ontario*,<sup>19</sup> that the Health Professions Procedural Code implicitly allows a discipline committee to remove or vary an indefinite term, condition or limitation on a certificate of registration. The CPSO Discipline Committee had previously concluded it had no power to do so. The court found that it was “not for us [the court] to determine the circumstances in which a member may seek a variation of a term as that issue is not before us on this application.” (para. 30) This rule sets out these conditions.

<sup>18</sup> *Khan v. Law Society of Ontario*, 2024 ONSC 3092.

<sup>19</sup> 2008 CanLII 37613.



#### **Rule 14 – Hearings**

Rule 14.1 – This rule sets out a set of factors to be considered when determining a request that a hearing be held all or partially in person.



#### **Rule 17 – Costs**

Rules 17.1.1 and 17.1.2 – The *Statutory Powers Procedure Act* allows a tribunal to make rules to order costs in circumstances other than those set out in the Health Professions Procedural Code if a party has

acted in a way that is unreasonable, frivolous, vexatious or in bad faith, and this rule does so. Examples of new situations in which this rule would allow costs include before the end of the hearing (for example, after a frivolous motion) or in favour of a third party who had to respond to a third-party records motion. Rule 17.2.1 allows for costs because of an adjournment less than two weeks before the hearing.

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There are also several provisions of the Rules that, while not new to OPSDT in 2023, would be changes from some other Colleges' discipline committee rules.

**Rule 9.4.1** – Both parties, rather than only the College are required to prepare a case management conference memo.

**Rule 10** – Adjournments are granted only where it is necessary for a fair hearing, even if both parties consent.

**Rule 12.4** – Both the College and the registrant are required to provide the other, in advance, a list of witnesses, a summary of what each witness will say and a copy of all documents the party may rely upon. This is sometimes called “reciprocal disclosure.”

**Rule 14.3** – This rule allows the parties to agree that the registrant will plead “no contest.” This means that the registrant does not admit the allegations. The registrant accepts that the discipline tribunal can rely on the facts set out in a Statement of Uncontested Facts provided by the College, but only for the purposes of the College proceeding.

**Rule 14.5.1** – This rule mirrors a similar provision in the Criminal Code that prevents the use of a complainant's sexual history except in certain circumstances.

### **Companion Resources and Adoption**

The Tribunal has prepared practice directions, forms, frequently asked questions, and guides to provide plain language information for registrants, witnesses and members of the public about the process as a whole and specific issues. These work together with the rules to promote understanding of the process and transparency. They also assist in meeting our responsibilities to self-represented registrants.

All three Pilot Colleges kept their existing Rules of Procedure for the first year, with the addition of a modified version of the OPSDT's case management rules for their Pilot cases. When the Pilot was extended in spring 2024, both the CASLPO Discipline Committee and the ORPDT adopted the new rules, forms and guidelines. They were all amended to remove any OPSDT or CPSO-specific references and are now on a separate portion of the website ([opsdt.ca/hpdt](https://opsdt.ca/hpdt)). CASLPO, CRPO and OPSDT all link to this webpage from their own websites. Each retained their previous approach to costs, reflected in Tariff A.



## Education

### Orientation

We have designed a four half-day orientation program, delivered mostly virtually, for new public or professional discipline tribunal members. Its topics include: the RHPA, the Code and its discipline provisions, procedural fairness, the burden of proof, rules of evidence, reason writing, deliberations, myths and stereotypes in sexual abuse cases, joint submissions, penalty principles and making credibility determinations. It is interactive and uses a variety of teaching techniques to support different styles of adult learning. It has been coordinated and delivered by Dionne Woodward, Tribunal Counsel and David Wright.

We have tailored the orientation to the new model. For example, we emphasize the role of panel members in deliberating, reviewing and commenting on reasons in a way that will strengthen the final product and ensure their voices are heard. In relation to hearing management, while they must have an understanding of the role of the panel chair and the principles applied, they do not need to be trained to chair themselves.

In each Pilot College, there has been an orientation to the profession for the experienced adjudicators delivered by professional members of the discipline tribunal, as well as an introduction to the Pilot for the other members provided by the HPDT Chair and counsel.

In the spring of 2024, a joint orientation was conducted for new members of the OPSDT and the CASLPO Discipline Committee. When orientation is urgent, for example when a new member is needed to sit on hearings shortly after their appointment, they have watched a recording of the most recent training.



### Ongoing Professional Development

The OPSDT has had semi-annual business/education meetings, with sessions facilitated by both Tribunal Office staff and guests. These have included:

- reason writing and deliberations;
- discussions with judges;
- lessons for our work from cognitive science;
- reprimands;
- trauma-informed adjudication;
- the law of evidence;
- deliberation scenarios; and
- the role of counsel cross-examining complainants where there is a self-represented registrant.



## Annual Conference

A one-day conference was held in November 2023, in person with an on-line option, for the members of all four discipline tribunals. It provided an opportunity both for learning and for the decision makers from different Pilot Colleges to network with each other and discuss their work. Sessions included:

- a panel of lawyers who prosecute and defend health discipline cases providing insight on hearings from their perspective and that of their clients;
- a deliberation exercise with breakout “discipline panels” made up of public and professional members from each College;
- equity in adjudication;
- mandatory revocation and sexual abuse: a legislative history;
- freedom of expression and professional discipline; and
- a networking reception.

Sessions were organized and delivered by Angela Peco, Manager and Tribunal Counsel at CMTO, Dionne Woodward and David Wright. Guests included Superior Court Justice Andrew Pinto, Palma Paccioco, a professor at Osgoode Hall Law School and Grace Vaccarelli, a mediator and investigator with over 20 years of experience in human rights.

Our second annual conference is scheduled for November 2024.

Feedback on the sessions was very positive. The overall rating for the conference by the participants who completed the evaluation was 4.72 out of 5. Here are some comments we received on the evaluation:

***“Great conference, well organized, education sessions were really good. The deliberation exercise was excellent and allowed networking as well as education.”***

***“I hope this will become a yearly event!”***

***“...[A]ll of the sessions seemed short, but I think that was because they were so interesting and time went by fast.”***

***“Great day of learning. The deliberation exercise and comparison of decisions from each group was very interesting.”***

***“I liked the varied style of presentations. Fireside chat was excellent.”***

***“Breakout session was great! Really liked the design of the exercise. Seemed daunting at first but we rolled into it quickly. Really liked hearing thought process of other professionals from different backgrounds and Colleges.”***



The Pilot has also led to benefits for individual Colleges' education. For example, Angela Peco presented to the OPSDT about the CMTO Discipline Committee's experience with appointing counsel to cross-examine complainants in contested sexual assault cases where the registrant is self-represented. This situation is common at CMTO, but recently arose at OPSDT for the first time. Similarly, David Wright made presentations at CMTO business meetings on topics such as evidence, reason writing, and updates on caselaw. Tribunal Office staff will coordinate a business/education meeting for the ORPDT in the spring of 2025.

## Newsletter

We send all members of the Pilot Tribunals and OPSDT a monthly newsletter, containing updates on decisions released in the Pilot, as well as other decisions of significance for health discipline. The newsletter, which began with the OPSDT before the Pilot and then expanded, is largely written and edited by Dionne Woodward. David Wright also writes a monthly column, usually about practical issues that arise in adjudication. All members also have access to an archive of all previous issues.



## Timeliness



Deadlines are set so that decisions are released within 84 days of the last hearing day or final submissions. This standard has been met in every case under the new model, both at OPSDT and in the Pilot, with most decisions being released more quickly. We have prepared a policy on reason preparation, review and release that establishes deadlines for each step in the process, from the first draft being provided to the panel to legal and peer review. It also establishes a process and expectations for these reviews, consistent with the requirements set out by the Court of Appeal.<sup>20</sup>

The average number of days to complete a discipline file at OPSDT decreased from 429 to 285 between 2020 and 2023. In 2023, the OPSDT's key performance indicator was 15 months from referral to the completion of the discipline process (80th percentile). As of December 2023, the 80th percentile was 11 months. In 2024, the KPI has been reduced to 12 months, with tighter criteria for exclusion from the measure. Considering that before the new model, the CPSO Discipline Committee was struggling to meet a target of starting hearings within one year, this is a dramatic change.

Data on timeliness at Pilot Colleges follows later in this report.

## Financial Implications for CPSO



While the primary motivation for change was not financial, the new model has resulted in significant cost savings for CPSO. Given other changes in recent years, in particular a lower volume of referrals and the shift to virtual hearings, it is difficult to separate how much of the savings are due to each of these factors.

Significant savings have resulted from the following:

- elimination of fees for independent legal counsel to attend hearings, provide advice and support to staff in the Tribunal Office and review decisions;

<sup>20</sup> *Shuttleworth v. Ontario (Safety, Licensing Appeals and Standards Tribunals)*, 2019 ONCA 518.



- reduced hearing time;
- reduced reason writing time;
- reduced cancellation fees;
- reduced time for decision review and editing;
- CMCs and hearings conducted by the OPSDT Chair; and
- education organized and delivered by the OPSDT Chair and Tribunal Counsel rather than ILC.

## Electronic Hearings and Hearing Support



The new model coincided with the general adoption of electronic hearings by professional regulators and other tribunals throughout Canada because of the pandemic. All OPSDT hearings have been conducted by videoconference. The OPSDT has established a Rule and Practice Direction that sets out the factors to be considered when there is a request that all or part of the hearing be held in person.

The move to electronic hearings has had various advantages. In particular, it has assisted with the challenges of scheduling five-member panel hearings with a small pool of members who meet the statutory requirements for public and physician board members and live across Ontario. Largely eliminating the need for travel means that an out-of-Toronto panelist with a commitment one evening during the week in their home city can still sit, or a panel can sit on Monday, Tuesday and Friday to accommodate schedules without wasted costs. The same advantages apply to witnesses, registrants and lawyers from outside Toronto.

Electronic hearings have also had significant benefits for transparency. Anyone, such as complainants, the registrant’s family, media or members of the public can watch a hearing without travelling to downtown Toronto.

OPSDT piloted various methods of supporting electronic hearings before reaching an agreement with First Class Conferencing Facilitation (FCCF). FCCF specializes in supporting electronic legal hearings and also supports coroners’ inquests and arbitrations, among other hearings.

FCCF, among other functions:

- sets up the Zoom hearing and the livestream accessible only through a private link;
- sets up and manages a webpage that automatically sends users who provide their name and email address the link to watch a hearing, together with relevant information;
- moves panel members, counsel, witnesses and other participants in and out of the breakout rooms;
- has expertise in troubleshooting technical issues, resolving them quickly;
- displays documents as requested by the parties or the panel, which, if appropriate, can be blocked from being viewed by the public;
- displays information on the livestream if the hearing is delayed or on a break;
- marks exhibits and other documents;
- prepares a report for the Tribunal Office staff summarizing what occurred at the hearing, including a witness list and exhibit list;
- provides a video recording from which a transcript can be generated by a court reporter, making it unnecessary to have a court reporter present during the hearing.

Among other advantages, we have found that using FCCF rather than staff allows for flexible scheduling, since FCCF can support multiple hearings on the same day. It has led to less delay due to participants’ technical issues and allows staff to focus on case processing, with other work less disrupted by hearing days.

In the Pilot, CMTO and CRPO staff have continued to support virtual hearings, while CASLPO has used FCCF.



## Ongoing Consultation

The OPSDT established the Practice Advisory Group for feedback from those who regularly represent the College and defence before the Tribunal. A similar roundtable was established under the Pilot.

## Appeals

There have been two appeals from OPSDT decisions under the new model. Both were dismissed, with positive comments from the court. There have not yet been any appeals from Pilot decisions in the other Colleges.

In *Fagbemigan v. College of Physicians and Surgeons of Ontario*, 2023 ONSC 2642, the registrant argued that the Tribunal had not fulfilled its duties to him as a self-represented litigant. The court said, at para. 47, “The transcripts clearly demonstrate that the Tribunal patiently and carefully assisted the Appellant throughout the process.” Among the issues in this case was a *Charter* challenge to the College investigators’ having viewed and removed documents during a site visit to the registrant’s clinic. The court fully upheld the Tribunal’s constitutional and professional misconduct analyses.

In *Aboujamra v. College of Physicians and Surgeons of Ontario*, 2023 ONSC 3344, the court spoke of the Tribunal’s “detailed and nuanced credibility findings” (para. 77) in rejecting the multiple challenges to the decision in a highly contested sexual abuse case. An application for leave to the Court of Appeal for Ontario was dismissed.

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## IMPLEMENTING THE PILOT

### Differences Between Colleges

During the Pilot phase, the division of responsibilities between the OPSDT and each participating College varied. Each College brought unique backgrounds and experiences in discipline matters, leading to different approaches. This diversity assisted us in evaluating the pros and cons of different options, and allowed the Pilot Colleges to adopt the arrangement that best suited their needs.



CMTO has the highest volume among the Pilot Colleges: 20 new referrals and 46 cases closed in 2022. It has a high volume of sexual abuse cases relative to its size; 56% of the cases before the CMTO Discipline Committee in 2022 were sexual abuse matters. The CMTO has a Hearings Office with several full-time staff, well-established processes and

experience in many different types of cases. Its staff and Discipline Committee members, because of this volume, have extensive experience and involvement in all aspects of discipline work under the existing model.

CMTO established two tracks. Any case in which sexual abuse was alleged and there was no activity prior to the start of the Pilot was assigned to the Pilot track. Cases with sexual abuse allegations in which there had been activity under the existing model, and cases where sexual abuse was not alleged, were assigned to the standard track. As a result of its higher case volume and experience, CMTO staff did all administration and hearing support for all cases, including those assigned to the Pilot. CMTO adapted some of the OPSDT’s policies, practices and precedents for its Pilot cases. Other cases continued as before. The two tracks were important to CMTO, among other reasons, so that it had the option to easily return to the previous system after the Pilot if either it or OPSDT decided not to continue, and so that it could make comparisons as part of evaluating the success of the new model.



CRPO’s Discipline Committee received five referrals in 2022. For the first year of the Pilot, CRPO staff continued to do all case processing and hearing support,

under the primary direction of the HPDT Chair. It adopted the policies, practices and procedures of the OPSDT, with modifications to reflect the fact that the Rules were not the same. In the spring of 2024, when the Pilot was renewed and the Rules of Procedure were harmonized, the Tribunal Office took over case processing, using the same templates and processes as for OPSDT cases.



College of Audiologists and  
Speech-Language Pathologists of Ontario  
Ordre des audiologistes et  
des orthophonistes de l'Ontario

CASLPO's Discipline Committee received four referrals in 2022. At CASLPO, the OPSDT staff did case processing from the beginning of the Pilot. Tribunal Office staff prepared modified versions of the guides

and practice directions (where possible), to reflect the differences between the OPSDT and CASLPO Discipline Committee Rules of Procedure. The CASLPO-specific versions were no longer needed when the Discipline Committee adopted the HPDT Rules of Procedure.



## Memorandum of Agreement

The Pilot was implemented through a memorandum of agreement between the CPSO and each College. The significant provisions were:

- The College would make changes to its by-laws, where needed, to allow for the experienced adjudicators to be appointed to its Discipline Committee and for the appointment of the HPDT Chair.
- Staff would recommend to the Board the appointment of the Pilot Chair and the five experienced adjudicators to the Discipline Committee for a term parallel to the term of the Pilot. The agreement would be null and void if the Board did not make the appointments.
- The independence of the HPDT Chair and adjudicators would be protected.
- A participants' committee consisting of representatives from all four Colleges would meet bimonthly.
- A dispute resolution process.



## Cost Sharing and Billing Structure

The financial arrangements were designed to reflect the following:

- CPSO is not making any profits.
- The financial approach should be clear and simple, with as little time as possible spent on administration.
- Rates should compensate CPSO for its expenses on the Pilot and for a share of salaries and administrative costs based on the time spent by its staff (including the HPDT Chair) on Pilot matters.
- Common costs should be shared equitably between the Pilot Colleges.

For the first year, the Pilot Colleges were billed only based on the time spent by the experienced adjudicators and HPDT Chair on cases and their attendance at College-specific educational programs. The OPSDT has a remuneration policy that sets out the activities for which adjudicators are compensated, including preparation, hearing and CMC time, deliberations and reason writing. There are also limits on the number of hours that can be claimed based on the nature and length of the case, which can be increased where appropriate based on the circumstances of a case with authorization of the HPDT Chair. The Pilot Colleges also reimburse CPSO for the disbursements on their behalf.

The hourly rate compensates for the adjudicator time and the time spent on administration, education, set-up and other costs. There are no separate charges to the Pilot Colleges for matters like education, administration, decision review or meetings attended by Tribunal Office staff and the HPDT Chair.

The first year's hourly rate was \$275 per hour for Colleges where their staff did case processing and hearing support and \$325 per hour where OPSDT staff were doing that work. These amounts were increased for inflation in 2024 to \$282 and \$334. The OPSDT staff recorded the amount of time they spent so that calculations could be done to determine whether the gross-up from the amounts paid to the adjudicators was over or under compensating CPSO for its staff's



time. The agreements provided that if CPSO was over compensated, it would use the surplus for future HPDT activities or return it to the Pilot Colleges. If the CPSO was under compensated, it could use future revenues to compensate for the deficit but there would be no extra charges to the Pilot Colleges.

During the first year, CPSO was under compensated. We concluded that was for three main reasons: the large amount of time and expenses associated with start-up, that the rates had been set too low and a higher-than-expected amount of time spent in meetings with and adjustments to policies and practices for individual Colleges.

In addition, the costs paid by some Colleges were disproportionate to the amount of time spent on their matters. This was because, first, there were differential amounts of time spent adapting to the needs of individual Colleges. Second, case processing and pre-hearing work often did not correspond with the amount of remunerable time on a particular file, particularly if a lot of work was put into case management that successfully reduced hearing time. Third, there was a base amount of non-remunerable time that did not vary with caseload, for example preparing the newsletter, offering educational programming or preparing invoices.

Accordingly, when the Pilot was extended, participants agreed that rather than raising the hourly rate, each Pilot College would pay a base fee of \$1,000 per month. While it is too early to reach any conclusions, it appears that with this change the compensation is more accurately reflecting CPSO’s costs and equitable sharing of expenses.



## Information Technology

IT proved to be a challenge. Initially, CPSO IT was not used for any case-related matters in the other Pilot Colleges. This required experienced adjudicators to juggle multiple laptops, email addresses and other systems. Additionally, Tribunal Office staff had to monitor multiple email boxes and learn different systems. This proved to be unwieldy, time consuming and prone to error. Accordingly, in

2024 the IT arrangement was changed so that the adjudicators use their CPSO equipment and email addresses, and staff use CPSO systems. An internal CPSO protocol has been established so that Pilot Colleges’ data cannot be accessed by anyone other than Tribunal Office and CPSO IT staff without the authorization of the Chair or the Registrar of the College concerned. Once a discipline file has been closed, the file is returned to the College concerned for retention and the CPSO does not retain the data. A common email box is used for the three discipline tribunals whose cases are administered by the Tribunal Office.

## Scheduling

The requirements of the Health Professions Procedural Code for panels that include three Board members -- two public and one professional – created challenges for scheduling at all Colleges, given the numbers of public members and the limitation on theirs and professional members’ schedules. This often increased the amount of time and back-and-forth needed to set hearing dates.

## Fitness to Practise Committee

At CPSO and CRPO, the HPDT Chair is also Chair of the Fitness to Practise Committee and the membership is the same as the discipline tribunal. There has not yet been a hearing of a Fitness to Practise case at either College since the new model was implemented.

## Summary of Current State

- OPSDT, ORPDT and the CASLPO Discipline Committee have common rules, guides, practice directions and forms, and a common “resources” website that contains them. The Tribunal Office does case processing, decision review and decision preparation and release throughout the life of a discipline file, using common processes, templates and forms. With some exceptions, the Tribunal Office is responsible for all aspects of the file from referral to final reasons.



- CMTO has two streams: a Pilot stream for cases that allege sexual abuse and a regular stream for other cases. It maintains its own Hearings Office, which does the case processing and decision review and release for Pilot and non-Pilot cases, using materials for the Pilot cases adapted from but not the same as those used elsewhere. CMTO has separate rules, policies and procedures, and has adapted the Pilot templates as appropriate.
- Each Pilot College pays a base fee plus an hourly rate for adjudicator time. The hourly rate varies depending on the level of service provided by the Tribunal Office.
- The experienced adjudicators and the HPDT Chair are cross-appointed to each Pilot Tribunal.
- The Tribunal Office offers, without additional charge, educational programming including a full day or two half days of College-specific business/educational programs, a monthly newsletter and a full-day conference. There is a registration fee per attendee to cover the costs of outside speakers, food, the venue, IT support and related matters.



# Part 2

# Feedback and Data

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# Feedback and Data



## QUALITATIVE FEEDBACK

We sought feedback through a Microsoft Forms survey, which asked open-ended questions. We sent separate, tailored surveys to lawyers on the HPDT Counsel Roundtable, to discipline tribunal members (including at OPSDT) and to the experienced adjudicators. We received 12 responses from counsel, 51 from discipline tribunal members and five from experienced adjudicators. Participants were free to reply anonymously or provide their name as they wished.

Overall, the responses were extremely positive, although some discipline tribunal members were limited in their ability to comment because they had not yet sat on a case in the new model. Most respondents believed the Pilot had met its objectives, that the changes were positive and that it should continue. The discipline tribunal members were generally more positive than counsel. As discussed below, a theme among counsel respondents was a concern that there was a lack of transparency because independent legal counsel was not present.

**Discipline tribunal members reported a greater ability to focus on the substance of the case rather than legal procedure and an improved deliberation process.**

## Panel Composition

### *Leveraging diverse skill sets*

The discipline tribunal members who had participated in Pilot hearings were nearly universally supportive of the change to panel composition. They reported a greater ability to focus on the substance of the case rather than legal procedure and an improved deliberation process.

***"The difference is that with the experience our discussion time has reduced and the adjudicator makes sure that all the panel members' concerns are heard."***

***"My concerns as we made the change between the outside legal advisors and the experienced adjudicators was gone working with individuals with strong interpersonal skills in addition to a wealth of legal knowledge."***

***"I was surprised and very pleased with this new approach. Initially I was concerned with the reduction in physician members of the panel but the new arrangement works very well..."***

***"[T]he experience and skill sets that the Chair brings to the hearings allow us to be more effective while providing us with an educational component that would have been lost if they were not part of the process. They lead us through support and collaboration."***



## Every perspective counts

We asked the discipline tribunal members whether they felt their perspectives were heard and considered. There was nearly unanimous agreement.

***“Absolutely. The adjudicator/chair of the hearings I participated in made a point of including all members in the discussion, circulated written drafts in a timely manner, incorporated suggestions/edits and opened further discussion on items as required.”***

***“Fantastic job ensuring that everyone is heard, their questions are answered and reinforcing that there are no stupid questions.”***

***“Deliberations have been handled well. It’s definitely easier to review and comment on shorter, more plain-language documents that are provided in reasonable time following a hearing.”***

***“During deliberations all voices are encouraged and heard better than ever.”***

## Other Comments

A small number of discipline tribunal members expressed concerns. One was concerned that an adjudicator did not have sufficient skills and knowledge. Another expressed concern that the non-lawyer discipline tribunal members’ legal knowledge was not being developed. A third explained as follows:

***“Compared to a traditional deliberation I do not feel as involved. It felt more like the experienced adjudicator gathering a small amount of input from the panel to satisfy the requirement. I do not necessarily see this as a negative.”***

Several lawyers expressed concern that without independent legal counsel providing legal advice on the record, the process was less transparent. They expressed concern that the panel chair was improperly providing “legal advice” in deliberations. One expressed concern that the panel chair was improperly dominating:

***“My other concern is that the Chairs dominate the proceedings, which has happened in every hearing to date.”***

Other counsel expressed the opposite view, for example:

***“I think it makes eminent sense to hire experienced lawyer adjudicators in lieu of ILC. As much as the ILC work is excellent for lawyers such as myself, it does not make sense from a resource perspective.”***



## Perspectives of the Experienced Adjudicators

Most respondents commented that the Pilot was effectively achieving its objectives. Many commented on the collegiality and discussions among the experienced adjudicators, who meet once a month to discuss issues and approaches. All appreciated the relationships they had built with professional and public discipline tribunal members, although some found it challenging given the number of members of the different Pilot Tribunals and often small volume. The HPDT Chair has been informally assigning a subset of adjudicators to each Pilot Tribunal where possible, and in general the adjudicators supported this approach.

Experienced adjudicators expressed concern about differences in technology and process, between the Colleges, but were pleased with changes that had been made in that regard in 2024. Generally, they were pleased with administrative support.

## Case Management

There was strong support among both discipline tribunal members and counsel for the more intensive case management. Respondents felt that it improved the efficiency of the process. One respondent noted that the ability of the CMC chair to provide information to self-represented litigants from a neutral perspective was helpful. Examples of the comments are:

***“The robust case management, in my experience has been extremely effective. Parties are able to schedule a case management conference with very little notice. The CMC directions are usually issued within 24 hours, and the directions I have received have been clear and fair.”***

***“Also, the CMC Chair has the power to make procedural orders, which is helpful and brings more certainty in the process. We also appreciate that the CMC Chair adopts flexible approaches and is open to waive certain procedural requirements to be efficient.”***

Several discipline tribunal members mentioned that the case management process had reduced surprises and cancellations.

Two lawyer respondents emphasized that the CMC chair should not be heavy-handed in promoting settlement. One suggested that the CMC process should better take into account different policy approaches to resolution at different Colleges and better coordinate ADR techniques with College counsel. One suggested that pre-hearing hearing conferences were less effective than they were with a member of the profession serving as chair. As set out below in the description of the new model, we can include members of the profession in CMCs along with the case management chair as appropriate.



## Quality of Hearings and Reasons

The strong view among the discipline tribunal members was that hearings were smoother and the process more efficient. Many commented on the quality of the reasons and the benefits of receiving them more quickly after the hearing.

There was near unanimous support among discipline tribunal members for obtaining the parties' materials in advance, with several respondents noting that the amount of preparation could be heavy.

Most counsel commented positively on the quality of hearings and reasons. Two respondents suggested there was little difference from the previous model and two suggested that some reasons were difficult to understand. One respondent commented that reasons in joint submission cases were sometimes too short.

***"I have always found that having an experienced Chair that is able to navigate the system allows for a more effective and efficient process, allows for more genuine conversations, and provides the panel a solid foundation of experience and application."***

***"The Pilot has been extremely effective. The quality of hearings has increased drastically with experienced chairs and removing ILC. As a public member, I feel a lot more confident in the proceedings under the Pilot than previous Discipline Panels. Decisions have been released a lot faster and more well written. Overall this has benefited our College and the public interest and we should continue this process."***

***"I've noticed a significant quality improvement of deliberation discussions under the Pilot."***

***"Increased efficiency, increased clarity of writing, and in my view increased accuracy on important points of law."***

***"In my opinion, the Pilot project is such an asset to the CMTO discipline system. Hearings progress so much more efficiently with expert tribunal and panel leadership. The experienced lawyer is able to keep panel members from straying into the weeds while deliberating. Detailed reasons for decisions are received in a timely manner. The efficiency of this whole process is astonishing. Love it."***

***"Although it takes time pre-hearing, time is saved during the hearing/deliberation phase, making it a worthwhile activity."***

***"[Receiving materials in advance] is the best part of the Pilot project for me. It is such a benefit to be able to review and absorb this information prior to the hearing."***

***"Very significant impact – allows opportunity to review the material which enhances the panel discussion and makes for an efficient use of time."***



## Education

Comments on the educational offerings were nearly universally positive.

***"I have found the education to be the most beneficial part for me so far. Being a member of the CMTO we have two discipline streams and the education from the HPDTP has been an immense benefit to my work on the non HPDTP stream as well as the HPDTP stream."***

***"Joint educational conference enabled me to see the road block or ways others have overcome. The complexity of the different Colleges and the relationship with their clientele impacts the type of hearings."***

***"I find that David's presentations are always educational and engages all the members. He brings scenarios and case examples from other institutions and his personal experiences as well. The newsletter keeps us informed about the current cases and outcome of the tribunals."***

***"Education has struck the right balance with business meetings, complemented by other learning opportunities, presentations and the newsletter which I thoroughly enjoy and learn from. Keep up the great work."***

***"My orientation session to discipline hearings was very elaborate and informative. I use this as my reference point for any hearing meetings. The monthly newsletter is a valuable tool and helps me understand the jargon used in the process."***

***"The joint educational conference was outstanding. The newsletter is well done and very informative."***





## A Selection of General Comments

***"Very impressive conceptualization and work by many. Very positive impact."***

***"I think this has been a successful experiment."***

***"Not having to Chair hearings and write D and Rs has eliminated the significant anxiety associated with those tasks."***

***"I believe the Pilot has been effective. The proceedings are more focused, the Case Management and decision writing much better. I support adopting this model going forward."***

***"It is an exciting initiative that has done a great job with our committee so far. Thank you for everything you've done to date."***

***"My peers seem pleased, and I have heard only good things from those who have sat on panels. It is great to hear the experienced adjudicators refer to their experience with other Colleges and their processes, as it gives insight into what we do at ours."***

***"In the matter of fairness and credibility the Pilot model is essential, but I on occasion feel we are relinquishing our own College's responsibility to regulate our own."***

***"I believe that this initiative should definitely continue to become our 'new normal.'"***

***"The Pilot has been a huge success thanks to David's leadership. It is also a great example of cross sectoral collaboration."***

***"Turn the Pilot into a full tribunal."***

***"It is exciting to be a part of a program that is growing in the right direction, for the right reasons. Thank you!"***

***"At this time, all I have to share is, 'Keep doing what you are doing.'"***

***"I would recommend this Pilot to all Colleges."***

## Feedback from Non-Pilot Colleges

We reached out to RHPA colleges not currently in the Pilot to canvass interest in the Pilot and their needs and held multiple meetings with senior staff. There is considerable interest in the possibility of joining, and the most common preference is to have the HPDT take on the administration and case processing as well as sharing adjudicative resources.

Some Colleges have a very low volume of discipline proceedings, which can be as infrequent as one case every two or three years. These Colleges have a different set of needs from larger ones. Rather than orienting all committee members and providing them regular education, their preference would be to have an infrastructure in place to take on the processing and management of cases, as well as the training of adjudicators when a referral is made and the need arises.

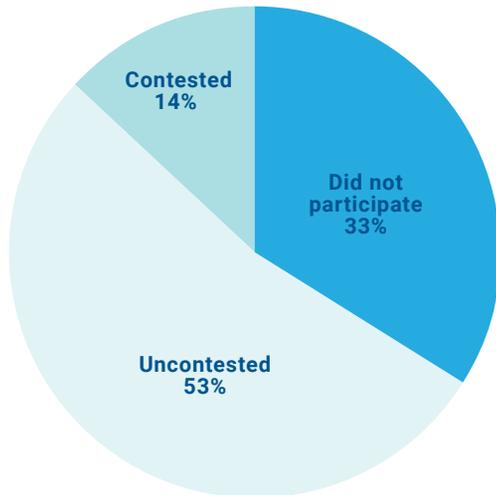


## QUANTITATIVE MEASURES

**Total of 30 hearings have been held**

### General

From the start of the HPDT Pilot to the end of June 2024, a total of 30 hearings have been held. Of these, 16 hearings, 53% were uncontested, where the merits, penalty, and costs were agreed to by the parties. In 10 (33%) of the cases, the registrant did not participate. In contrast, four hearings (14%) were contested, with the parties disagreeing on some or all issues, typically resulting in longer hearings.



Fifteen cases involving allegations of sexual abuse were completed: 11 at CMTO and four at CRPO.

Contested hearings made up less than one sixth of Pilot hearings but accounted for just over 40% of total hearing days.

### Breakdown of Hearings by College

Agreement level	CASLPO	CRPO	CMTO	Total
Contested	0	2	2	<b>4</b>
Uncontested	2	9	5	<b>16</b>
Not participating	3	2	5	<b>10</b>
<b>Total</b>	<b>5</b>	<b>13</b>	<b>12</b>	<b>30</b>

**All four contested cases involved sexual abuse allegations**

### Hearing Length

Six multi-day hearings have been held, four of which were contested. In the other two, the registrant did not participate in the hearing. The lengthiest contested hearing, in a CMTO case, was scheduled for five days but was completed in four-and-a-half days, covering both merits and penalty hearing days.

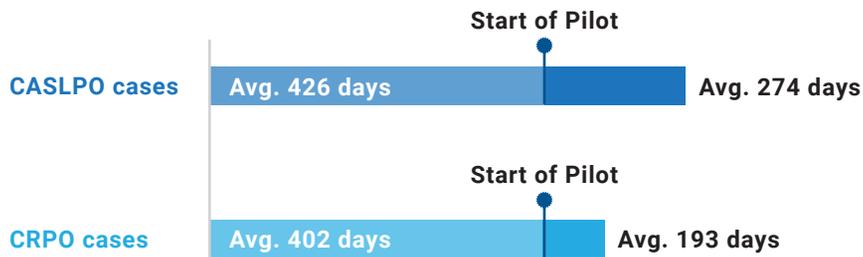
Nineteen cases were heard over a single or half day, all of which were uncontested or the registrant did not participate. There were five written hearings; in four of these, the registrant did not participate, and one involved an uncontested motion to withdraw allegations.



## Timeliness

### Cases Referred Before the Start of the Pilot

At CRPO, seven cases had been pending for an average of 402 days at the time the Pilot began. They were subsequently completed within an average of 193 days from the start of the Pilot.



At CASLPO, four cases had been pending for an average of 426 days. These cases were completed within an average of 274 days from the start of the Pilot. Two of these cases were case managed together with one other case involving the same registrant referred after the Pilot.

### Cases Referred During the Pilot

Cases that were both opened and completed after the start of the Pilot were completed on average 201 days from the date of the notice of hearing.

At CRPO, six cases that were opened after the Pilot began were completed in an average of 200 days.

At CMTO, four cases that were opened after the start of the Pilot were completed in an average of 204 days.

At CASLPO, we have yet to complete a case that was opened after the start of the Pilot.



**On average, Pilot cases have closed within 201 days.**

### Decision Release

Overall, there have been 40 decisions released during the Pilot: 16 for CMTO, 9 for CASLPO and 15 for CRPO .

**40 decisions released during the Pilot**



In the Pilot, decisions have been released within an average of 25 days following the conclusion of a hearing, significantly outperforming the 84-day benchmark.

### Average Days to Decision Release

There were four merits reasons released for cases that were contested. These reasons were released in an average of 59 days. There were ten reasons released in cases where the registrant did not participate. These reasons were released in an average of 27 days. There were 19 reasons released in uncontested cases. They were released in an average of 25 days.



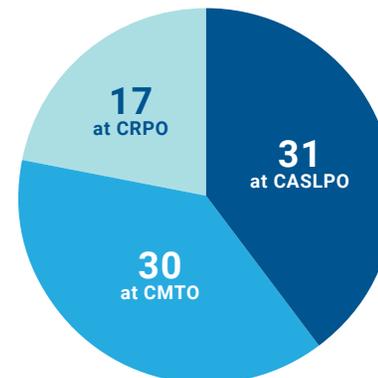
There were seven motion reasons released during the Pilot and their average time to release was six days. Of these there were five uncontested motion reasons released within an average of five days. The remaining two were contested motions and their reasons were released within an average of nine days.

### Case Management

The Pilot incorporates a comprehensive case management rule designed to streamline the hearing process in a manner that is fair, timely, and aligned with the public interest. This approach ensures that hearing time is utilized efficiently and effectively, procedural and legal issues are identified early and adjournments are reserved for exceptional circumstances only.

Throughout the Pilot, 78 CMCs have been conducted across all Pilot Colleges: 31 at CASLPO, 30 at CMTO, and 17 at CRPO. On average, there were 2.43 CMCs per contested case and 1.78 CMCs per uncontested case. The higher number of CMCs per contested case reflects the greater complexity often associated with these matters, requiring more preliminary management to ensure efficient proceedings.

### 78 CMCs have been conducted across all Pilot Colleges



The higher number of CMCs per contested case reflects the greater complexity often associated with these matters.



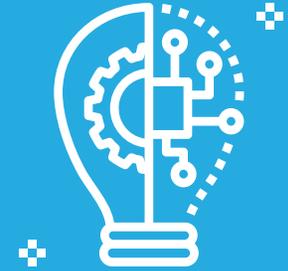
## Financial Impact

The impact of the new model on each College will be different, so it is difficult to generalize. Factors that will affect cost and cost comparisons with the previous model include:

- caseload;
- types of cases;
- settlement rates;
- discipline committee size;
- remuneration rates paid to professional members;
- staff resources devoted to discipline;
- current ILC hourly rates;
- current approach to reason writing;
- frequency and nature of education.

To give a sense of HPDT costs, we have summarized the number of adjudicator hours spent for various Pilot cases with a description of the nature of the case.

Hours Spent by Case Type		CMC Hours	Hearing Hours (including preparation and deliberation)	Reason Writing Hours	Total
<b>Joint submission through CMC process</b>	<b>Example 1</b>	5.7	2.50	1.50	<b>9.70</b>
	<b>Example 2</b>	4.00	2.75	3.50	<b>10.25</b>
<b>Written hearing; registrant not participating; complex legal issues</b>		1.00	11.20	15.70	<b>27.90</b>
<b>Contested sexual abuse; registrant represented</b>	<b>Example 1</b>	2.00	27.20	23.70	<b>52.90</b>
	<b>Example 2</b>	1.50	37.00	40.00	<b>28.50</b>
<b>Contested sexual abuse; registrant self-represented</b>		3.00	30.50	14.70	<b>48.20</b>
<b>Consent withdrawal; single adjudicator; in writing</b>		0.00	0.00	1.50	<b>1.50</b>
<b>Indefinite Adjournment after CMCs; single adjudicator</b>		1.00	1.25	0.75	<b>3.00</b>



# Part 3

# New Model

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# New Model



## PRINCIPLES

This part sets out the model we are proposing be adopted should Pilot Colleges decide to continue or other Colleges choose to join.

The following principles were applied in the design:

- The model has been very well-received and few changes are needed to the overall structure.
- The success of the model has come from the combination of all its elements, most importantly case management, the change in panel composition, enhanced education and modernized adjudicative and administrative processes.
- It is important for each profession's tribunal to maintain its separate identity and jurisprudence and provide opportunities for separate interactions and education.
- Consistency in processes, rules, templates and IT is important for many reasons, including:
  - smoother hearings and reasons through consistent approaches, in particular if the number of Colleges participating grows;
  - consistent approaches and reduced costs for representatives who appear before multiple tribunals;
  - the ability to prepare extensive documentation and support for self-represented and represented litigants that apply to all the participating tribunals;
  - reduced administrative and adjudicative costs and time;
  - changes to ensure continuous improvement are more easily made;
  - consistent fees and fair cost sharing.
- In limited circumstances there may be differences between Colleges in processes, rules and templates including:
  - on costs tariffs, which are a policy question, and do not require changes to adjudicative processes;
  - to respond to differences that relate to the nature of the profession;
  - during transition and to allow a trial period.
- Independence, and therefore the confidence of the public and registrants, is promoted by separation between the College, in particular the professional conduct staff and prosecution counsel, and the discipline tribunal.

**The success of the model has come from the combination of all its elements, most importantly case management, the change in panel composition, enhanced education and modernized adjudicative and administrative processes.**



# PROPOSAL FOR THE HPDT



## Identity

The Discipline Committee of each participating College is renamed the Ontario [name of profession] Discipline Tribunal by Board By-Law. The group of tribunals together is known as the Health Professions Discipline Tribunals. Decisions and orders have the HPDT logo at the top, followed by the name of the discipline tribunal. Each discipline tribunal has a separate section on the Canadian Legal Information Institute (CanLII) and other legal reporting services.

Correspondence and emails to and from HPDT Tribunals use a central email address and HPDT branding.

The HPDT website contains an “About Us” section with general information about the HPDT, a “Scheduled Hearings” section with all scheduled dates, which can be sorted by College, a “resources” section similar to that already built and a “contact” section. Discipline tribunals or Colleges will likely wish to maintain their own web pages for information such as cases currently referred, outcomes and a list and/or biographies of discipline tribunal members.



## Tribunal Membership and Leadership

Pursuant to the Code, each College’s Board appoints the members and leaders of its discipline tribunal. Unless there is a conflict of interest, all experienced adjudicators are appointed to all HPDT Tribunals. The HPDT Chair is appointed Chair of each HPDT Tribunal and a professional or public member of the discipline tribunal is selected as Vice-Chair. The Chair meets with each Vice-Chair as needed and there are regular meetings of all Vice-Chairs. Particularly with smaller Colleges, the Chair will make efforts to have a smaller group of the experienced adjudicators chair hearings in each HPDT Tribunal.



## Rules of Procedure, Practice Directions and Guides

Each HPDT Tribunal adopts the HPDT Rules of Procedure, Practice Directions and Guides. Where agreed by HPDT and the relevant College, Appendix A to the Rules of Procedure allows for rules that apply to one tribunal and a Practice Direction specific to that College can be prepared. Each College determines whether there will be a costs tariff and the amounts.



## Case Processing and Administration

Participating Colleges have the option to decide whether they wish to have Tribunal Office staff conduct case processing using common templates and procedures or whether they will continue to do so themselves. Both of the options presented require individual Colleges to provide staffing support, the amount of which will depend on their volumes. There is much less College staff time required with the first option.

### *Tribunal Office Processes Cases*

Where the Tribunal Office does case processing, it is responsible for all file administration from the filing of the Notice of Hearing until the file is closed, including all correspondence, scheduling, canvassing panel members for their availability, maintaining the file, tracking, editing and releasing reasons and preparing the file for storage. Further, the Chair and Tribunal Counsel leverage their legal expertise to advise Tribunal Office staff on file management issues that arise throughout the duration of a case file.



The College remains responsible for:

- advising the Tribunal Office of conflicts of interest of tribunal members;
- all updates to the public register;
- all updates to the College’s website;
- all reports, including statistical updates, reports to the Board and the College’s annual report;
- supporting business or education meetings of the individual tribunal;
- file retention;
- remuneration and reimbursement of professional members and administration of public members’ remuneration claims with the Health Boards Secretariat.

The College appoints a staff member or members outside the professional conduct department as the liaison with the Tribunal Office. The liaison advises the Tribunal Office of all changes to tribunal membership.

Tribunal Office staff and experienced adjudicators use CPSO systems, and members of the other tribunals are given access to documents using SharePoint. Data access and sharing with discipline tribunal members is conducted in accordance with the agreed-upon data protocol.

### College Processes Cases

Where the College processes its own cases, it uses the same templates and processes, email address and databases as the Tribunal Office. Tribunal Office staff provide training to the College’s staff on the processes. The HPDT Chair has ultimate responsibility and decision making in relation to case processing and may be consulted by College leadership on the performance of staff working on discipline cases.



### Hearing Support

HPDT tribunals are encouraged to use FCCF to support hearings. Where the Tribunal Office is doing administration and file processing, the Tribunal Office makes all relevant arrangements, pays FCCF invoices and invoices the College. When using FCCF, hearings are recorded and there is no need for a court reporter to attend the hearing; the recording is sent if the transcript is ordered.



### Education

The HPDT organizes an annual education conference. There is a registration fee to cover the expenses. In consultation with the Vice-Chair, the HPDT organizes up to one full-day or two half-day virtual business/education meetings.

The HPDT provides a combined orientation (four half days) for new discipline tribunal members in all HPDT Colleges. In general, the orientation takes place twice annually. If a member is needed to sit on a hearing before the next orientation, they watch the video of the last training and are invited to an individual question and answer session with the HPDT Chair or Tribunal Counsel.

The HPDT continues to produce the monthly newsletter.

Colleges provide an orientation to the profession for the experienced adjudicators when joining the HPDT and for new experienced adjudicators. The HPDT provides up to a one-day orientation to the HPDT for discipline tribunal members when the College joins the HPDT.



## Finances

The financial arrangements continue as in the Pilot. Colleges are only billed for adjudicator time (including time attending College-specific meetings), base fee, reimbursement of expenses incurred on their behalf (such as hearing support) and expense sharing for the conference. Colleges are not charged separately for preparation of education, organizing the conference, the newsletter, case processing, reasons review and editing, etc. The Tribunal Office continues to track the time spent on all other activities to ensure that the program is cost neutral for CPSO.

The 2025 base fee will remain unchanged at \$1,000 per month per College, except that for Colleges with an average of two hearings or less per year over the past five years, it will be \$750. The hourly rates will be \$350 per hour if the Tribunal Office staff are doing case processing and \$300 per hour if the College is doing its own case processing. If more Colleges participate, that will allow for steady or perhaps reduced base fees as base costs can be spread between all participating Colleges. While in the future it may be appropriate to set fees for a longer period, at the outset fees should be reviewed and agreements should be signed on an annual basis.

## Smaller Colleges

Colleges that have had an average of less than one hearing per year over the past five years, and that do not wish to regularly participate in education will pay a base fee of \$150 per month (billed on an annual basis) during any period in which they have no active cases. If there is a referral, the HPDT will provide focused training tied to the nature of the case and regular fees will apply during the period the case is active.

## Reporting, Feedback and Evaluation

There will continue to be regular meetings of all the participating Colleges and the HPDT. The HPDT-Counsel Roundtable will continue and be expanded as appropriate to include new members.

There are various issues and decisions that may need to be considered in coming years. How these are approached will depend on various factors, including the number of Colleges that join, volume of cases, our experiences under the new model and changes in the sector. These may include:

- the process for selecting the HPDT Chair;
- whether full-time experienced adjudicators in addition to the HPDT Chair should be recruited;
- the possibility of statutory and/or regulatory changes to promote effectiveness and efficiency, including to the requirement for Board members on discipline panels, methods for appointing public members and the size of panels;
- HPDT office location and financial structure;
- the duration of agreements and appointments;
- mechanisms for determining future structure and independence; and
- continuous improvement and strategic planning.

Commencing in 2026 for the year 2025, the HPDT will prepare an annual report of its activities. The HPDT will establish annual performance metrics in consultation with all participating Colleges to be reported on in the next year's annual report.

In the first half of 2028, we will consult participants from the regulatory community and prepare a report on the first three years of the HPDT and possible improvements to all aspects of the model, including the structure and the Rules of Procedure.

## Timing of New Participants and Transition

We are open to new Colleges participating at any time after January 2025. Transition, and any special arrangements during a trial period, can be discussed individually.

## Fitness to Practise

The HPDT is able to take on fitness to practise cases. Rules and processes for fitness to practise cases will be developed as needed.

HPDT  
Health Professions  
Discipline Tribunals



TDPS  
Tribunaux de discipline  
des professions de la santé

[tribunal@opsdt.ca](mailto:tribunal@opsdt.ca)

COVER SHEET  
Transition Council Meeting  
March 16-17, 2026



## **AGENDA ITEM 11.0**

**TOPIC: Strategic Communications**

There will be a presentation on this topic. Slides will be made available after the presentation.



## AGENDA ITEM 12.

### **TOPIC: Transition Council Series: In Conversation with Internationally Educated Veterinarians**

#### **About the Series**

*In Conversation* is a new series that brings diverse voices from the veterinary community into dialogue with the Transition Council. Each session features guided questions and open discussion with a panel of guests whose professional perspectives and lived experiences can inform the Transition Council's work as it moves toward establishing the College of Veterinary Professionals of Ontario.

#### **Objectives:**

- Strengthen community engagement with the work of the Transition Council
- Increase the College's understanding of lived experiences, challenges and opportunities faced by different groups and organizations within the veterinary profession
- Support the College's Commitment to Inclusion, Diversity, Equity and Accessibility (IDEA) by amplifying a diversity of voices

#### **Session 1 (March 17, 2026)**

The first session features a panel of four internationally educated veterinarians discussing their experiences with both regular and limited licensure assessment pathways, highlighting what worked, challenges encountered and insights that can inform the College's efforts toward continuous improvement in licensure pathways.

This session will take place from **11am to 12 noon**, in a hybrid format with the panelists joining through Zoom.



### Panelists:

- Dr. Aidin Esfandiari (Dr. Flora), practising at Martin Veterinary Hospital, Etobicoke
- Dr. Hesam Soleimani Savadkoohi (Dr. Hesam), practising at Village Gate Animal Hospital, Toronto
- Dr. Alejandra Melgoza Mejia (Dr. Melgoza), practising at Englehart Animal Hospital, Englehart
- Dr. César Rodríguez Balderas (Dr. Rodríguez), practising at Englehart Animal Hospital, Englehart

### Session Agenda:

- **Welcome (5 minutes)**  
Introducing the series and the panelists – *Krithika Jeyaraman, Community Engagement Strategist*
- **Building Context (40 minutes)**
  - Overview of the College's regular licensure pathway - *Michael Aubé, Principal, Licensure & Professional Corporations*
  - *Drs. Flora and Hesam* share their journeys to practising in Ontario through the regular licensure pathway
  - Overview of the College's Limited Licensure Assessment Pilot – *Michael Aubé*
  - *Drs. Melgoza and Rodríguez* share their journeys to practising in Ontario through Limited Licensure Assessment Pilot
- **Discussion Themes (15 minutes):**
  - **What worked well:**  
Aspects of the licensure process that supported progress  
Moments where panelists felt understood or supported
  - **Barriers or challenges:**  
Parts of the licensure process that felt difficult, unclear or uncertain



- **Opportunities:**  
Ways the licensure program could better support internationally educated veterinarians
  - **Beyond Licensure:**  
Experiences related to relocating and working in Ontario  
Any supports that eased the transition and challenges that made it harder
- **Closing**

### Included Materials

The following materials are included to provide additional context regarding the panelists and the College's licensure pathways.

- Panelist profiles
- Policy Statement on Competency Examination and Assessment Pathways

### Panelists:

**Dr. Hesam Savadkoohi (Dr. Hesam)** practising in Village Gate Animal Hospital, Toronto

Dr. Hesam received his degree in veterinary medicine from Islamic Azad University in 2012. He also a PhD and has completed four years of postgraduate clinical training with a focus on veterinary surgery at Shiraz University, Iran. He has worked in private practice, emergency and referral hospitals, and university teaching hospitals. He has also been actively involved in veterinary education, mentoring students, and supervising research projects.

His clinical interests include small animal soft tissue procedures, orthopedic case management, emergency and critical care, anesthesia and pain management, dentistry, and internal medicine.

Outside of work, Dr. Hesam enjoys spending time with his wife, Dr. Flora, going for walks, watching movies, playing video games, reading and relaxing at home.

**Dr. Aidin Esfandiari (Dr. Flora)** practising in Martin Veterinary Hospital, Etobicoke

Dr. Flora received her degree in veterinary medicine from Shiraz University in 2016 and has completed additional courses in dentistry and ultrasound. She co-founded and operated a



veterinary clinic in northern Iran before relocating to North America. She became a licensed veterinarian in Canada in 2023 and has worked in both Alberta and Ontario.

Her professional interests include small animal internal medicine, endocrinology and dentistry.

In her spare time, she enjoys spending time outdoors with her husband, Dr. Hesam, visiting lakes, reading, cooking and watching television.

**Dr. Alejandra Melgoza (Dr. Melgoza)** practising in Englehart Animal Hospital, Englehart

Dr. Melgoza received her degree in veterinary medicine from Universidad Nacional Autonoma de Mexico in 2005 and has more than 15 years of experience in veterinary medicine. She has a special interest and expertise in diagnostic ultrasound and surgery. She loves spending time with owners explaining treatment plans for their pets.

Outside of the clinic, she enjoys spending time with her two children and their beloved Chihuahua.

**Dr. César Rodríguez (Dr. Rodríguez)** practising in Englehart Animal Hospital, Englehart

Dr. Rodríguez received his degree in veterinary medicine from Universidad Nacional Autonoma de Mexico in 2004 and has over 20 years of experience working with small animals. He has a background in clinical pathology and holds a Master of Science degree in Neurology. He has contributed to 13 scientific publications on the central nervous system, and he received an honorable mention from the Autonomous National University of México for the impact of his research. His zotechnical experience is with areas such as maintaining and improving breeding, genetics, nutrition and housing for domesticated animals.

Outside of practice, Dr. Rodríguez has welcomed many rescued pets into his family. He enjoys spending time outdoors – hiking, photography, biking and swimming, and looks forward to becoming more actively involved in the Englehart community.

## Attachment

Policy Statement: Competency Examination and Assessment Pathways

# Competency Examination and Assessment Pathways

Published: March 2021

Revised: June 2025

## Introduction

**Successful completion of a College-approved examination and assessment pathway is one of the indicators that applicants for licensure have demonstrated the necessary knowledge, skills and abilities to meet entry to practice requirements. This policy outlines, in the interests of transparency and fairness, the examination and assessment pathways accepted by the College of Veterinarians of Ontario.**



## Scope

This policy applies to all General and Public Service licensure applicants.

Applicants who are applying for licensure under the auspices of the Canadian Free Trade Agreement (CFTA) are not required to demonstrate successful completion of an entry to practice examination or assessment pathway.

## Policy

### Recognized third-party providers

The following are College recognized providers: Canadian Veterinary Medical Association – National Examining Board (CVMA-NEB), the American Veterinary Medical Association – Educational Commission for Foreign Veterinary Graduates (AVMA-ECFVG), the American Association of Veterinary State Boards (AAVSB) and the International Council for Veterinary Assessment (ICVA).

### Graduates of an American Veterinary Medical Association – Council on Education (AVMA-COE) Accredited Veterinary School

Section 3 of Ontario Regulation 1093 indicates that a graduate of an accredited veterinary school must successfully complete the North American Veterinary Licensing Examination (NAVLE) within two attempts. The CVMA-NEB in collaboration with the Canadian Council of Veterinary Registrars has determined that a graduate of an accredited veterinary school must successfully complete the NAVLE within three attempts. A graduate of an accredited veterinary school who is not successful in the completion of the NAVLE within three attempts may be indicative of a potential knowledge deficiency. Therefore, the graduate is required to undergo additional evaluation before an acceptable level of competence can be ascertained. If a graduate is not successful within three attempts, they will be required to complete the Clinical Proficiency Examination (CPE) and any other prerequisites to the CPE, such as the Preliminary Surgical Assessment (PSA) in Canada, after successfully completing the NAVLE.

### Graduates of an AVMA listed unaccredited veterinary school

As per Section 3 of Ontario Regulation 1093, a graduate of an acceptable unaccredited veterinary school must successfully complete the NAVLE and the CPE. The traditional exam sequence has expanded to include the Basic and Clinical Science Examination (BCSE) as a prerequisite to the NAVLE and the PSA as a prerequisite to the CPE. In addition to the traditional pathway, the College has approved alternative pathways to demonstrate competency.



The College's permitted examination and assessment pathways for these graduates are:

**The National Board Examination Process:**

1. Registration with CVMA-NEB or AVMA-ECFVG
2. CVMA-NEB or AVMA-ECFVG Credential assessment
3. BCSE
4. NAVLE
5. PSA (This only applies if the applicant is registered with the CVMA-NEB; if they are registered with ECFVG then this requirement does not apply)
6. CPE

**The National Board Examination and AAVSB Program for the Assessment of Veterinary Education Equivalence option\* (AAVSB-PAVE):**

1. Registration with CVMA-NEB
2. CVMA-NEB and AAVSB-PAVE Credential assessment
3. PAVE [Qualifying Science Examination (QSE) and Evaluated Clinical Experience (ECE)]
4. NAVLE (If NAVLE is not passed within three attempts, then the PSA and CPE must also be completed.)

**The National Board Examination and Clinical Year option\***

1. Registration with CVMA-NEB or AVMA-ECFVG
2. CVMA-NEB or AVMA-ECFVG Credential assessment
3. BCSE



4. Successful completion of the final evaluated clinical year in a CVMA/AVMA accredited program
5. NAVLE (If NAVLE is not passed within three attempts, then the PSA and CPE must also be completed.)

\*Only applicants that have successfully passed the BCSE are eligible for the final (clinical year) in a CVMA/AVMA accredited program

#### Limited Licensure Competency Assessment Pathway

1. Registration with the CVMA-NEB
2. CVMA-NEB Credential Assessment
3. Limited Licensure Competency Assessment (Portfolio and Supervised Practice Assessment\*\*)

\*\*A licence limited to the pathway stream with a supervision condition is required to complete the Supervised Practice Assessment

#### Registration Committee Review

An applicant whose examination and assessment pathway is beyond what is laid out in the regulation must be reviewed by the Registration Committee in order to be granted a licence. Those who have successfully completed the Limited Licensure Competency Assessment Pathway will be eligible for a General licence limited to the pathway stream that was completed (production animal, small companion animal, equine).

#### Examination and Assessment Pathway Results

All applicants (whether they are graduates of an accredited veterinary school or unaccredited veterinary school) must supply the College with evidence from an approved certification body indicating successful completion of an approved examination and assessment pathway.

#### Requests for Exemptions

The Registration Committee may consider exempting an applicant from a licensure requirement, including the requirement to complete all or a portion of an approved examination or assessment



pathway. Exemptions may be granted with Terms, Conditions or Limitations, and/or additional training activities as specified by the Registration Committee. Exemptions for such an important, comprehensive, objective demonstration of entry-to-practice competencies will require the demonstration of alternative comprehensive and objective evidence of entry-to-practice competencies.

## **Authority**

*Veterinarians Act* R.S.O. 1990, s. 14  
R.R.O. 1990, Reg. 1093: General s. 3

College publications contain practice parameters and standards which should be considered by all Ontario veterinarians in the care of their patients and in the practice of the profession. College publications are developed in consultation with the profession and describe current professional expectations. It is important to note that these College publications may be used by the College or other bodies in determining whether appropriate standards of practice and professional responsibilities have been maintained. The College encourages you to refer to the website ([www.cvo.org](http://www.cvo.org)) to ensure you are referring to the most recent version of any document.

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## **AGENDA ITEM 13.**

### **TOPIC: Confidentiality**

Councillors are reminded that Council meetings are public meetings.

Information discussed in in-camera sessions must be kept confidential by all in attendance. All budget/financial/strategic alignment documents are not to be shared outside of the meeting as these documents are working documents of Council and not public material. Any inquiries regarding the package can be directed to the website where the public package is posted.

Minutes of the Council meeting are not approved until its next meeting.