



COLLEGE OF NURSES  
OF ONTARIO  
ORDRE DES INFIRMIÈRES  
ET INFIRMIERS DE L'ONTARIO

THE STANDARD OF CARE.

# Council briefing package



Note: To navigate this document and jump to specific sections, use the bookmarks tool.

## Agenda

[Council's Governance Principles](#)

[Council's Annual Plan](#)

[Council's Team Norms](#)

9:00 a.m.	<b>1. Agenda</b> 1.1 <a href="#">Motion for Closure</a>	
9:10 a.m.	<b>2. <a href="#">Minutes of meeting of June 3, 2021</a></b>	Decision
	<b>3. Strategic Issues</b>	
9:15 a.m.	3.1 <a href="#">Appointment of the members of the Interim Nominating Committee</a>	Decision
9:50 a.m.	3.2 <a href="#">Nursing Education Program Approval</a>	Decision
10:00 a.m.	<b>Break</b>	
10:15 a.m.	3.3 Strategic Plan: 2021-2024: update	Information & discussion
10:30 a.m.	3.3.1 Applicant assessment <ul style="list-style-type: none"> <li>• Key regulatory requirement: Entry-to-Practice</li> <li>• Modernizing Applicant Assessment</li> </ul>	Information & discussion
11:00 a.m.	3.3.2 <a href="#">Modernizing Standards</a>	Information & discussion
11:30 a.m.	3.3.3 Quality Assurance Program Update	Information & discussion
Noon	<b>Break</b>	

1:00 p.m.	<b>Closed Session</b>	
	<b>4. Reports</b>	
1:30 p.m.	4.1 Executive Director Update	Information and discussion
2:00 p.m.	4.2 Executive Committee meetings 4.2.1 <a href="#">July 22, 2021</a> 4.2.2 <a href="#">August 26, 2021</a> 4.2.3 <a href="#">September 14, 2021</a>	Information
2:10 p.m.	<a href="#">4.3 Finance Committee meeting of August 26, 2021</a>	Information & Decision
	<b>5. Council operations and governance</b>	
2:20 p.m.	5.1 <a href="#">Confirmation of committee appointments</a>	Decision
2:30 p.m.	5.2 <a href="#">Dates of Council meetings in 2022</a>	Decision
.	<b>6. Agenda items added by Council members</b>	
2:40 p.m.	<b>7. Reflecting on Council's Norms</b>	Discussion
	<b>8. Date of next meeting</b>	
	<b>9. Conclusion</b>	

**Next scheduled meeting:**  
December 1 and 2, 2021

# Governance Principles

Council is individually and collectively committed to regulating in the public interest in accordance with the following principles:

## Accountability

- We make decisions in the public interest
- We are responsible for our actions and processes
- We meet our legal and fiduciary duties as directors

## Adaptability

- We anticipate and respond to changing expectations and emerging trends
- We address emerging risks and opportunities
- We anticipate and embrace opportunities for regulatory and governance innovation

## Competence

- We make evidence-informed decisions
- We seek external expertise where needed
- We evaluate our individual and collective knowledge and skills in order to continuously improve our governance performance

## Diversity

- Our decisions reflect diverse knowledge, perspectives, experiences and needs
- We seek varied stakeholder input to inform our decisions

## Independence

- Our decisions address public interest as our paramount responsibility
- Our decisions are free of bias and special interest perspectives

## Integrity

- We participate actively and honestly in decision making through respectful dialogue
- We foster a culture in which we say and do the right thing
- We build trust by acting ethically and following our governance principles

## Transparency

- Our processes, decisions and the rationale for our decisions are accessible to the public
- We communicate in a way that allows the public to evaluate the effectiveness of our governance

## SEPTEMBER

2021

- Appointment of members of the interim Nominating Committee
- Dates of Council meetings in 2022
- Modernizing applicant assessment update
- Modernizing practice standards
- Nursing Education Program Approval
- Quality Assurance Program update
- Regulatory function: entry-to-practice
- *Strategy 2021-2024*

## DECEMBER

2021

- 2022 budget
- Modernizing practice standards
- Nursing Education Program Approval
- Nursys Canada update
- Regulatory function: enforcement
- Stipend and expense policy review
- *Strategy 2021-2024*

## MARCH

2022

- 2021 College Performance Measurement Framework
- 2021 annual reports of statutory committees
- Election of the Executive and committee appointments
- Quality Assurance Program update
- *Strategy 2021-2024*

## JUNE

2022

- *2021 Annual Report*
- 2021 audited financial statements
- Appointment of the auditor for 2022
- Standing committees appointments

## SEPTEMBER

2022

- Dates of Council meetings in 2023
- Nursing Education Program Approval

## **Team Norms**

As members of Council, we are committed to:

- Being engaged, participating in Council discussion and decision-making
- Acknowledging and building on each others' contributions
- Fostering consensus
- Being comfortable raising dissenting views, respecting dissenting views
- Supporting decisions made by Council
- Respecting each other and the agenda
- Avoiding side discussions or off-line debate
- Being succinct
- Being open-minded
- Being genuine
- Being fully attentive
- Being kind to each other



## Decision Note – September 2021 Council

### Closure of Council meeting

#### Contacts for Questions or More Information

Anne Coghlan, Executive Director and CEO

#### Decision for consideration

That the Council meeting be closed at 1:00 p.m. on Thursday, September 30, 2021 under Section 7(2)d of the *Health Professions Procedural Code* because “personnel matters or property acquisition will be discussed”

#### Background

A closed session is being recommended for the above reason. This is in accordance with Section 7(2) of the *Health Professions Procedural Code*.

Attached, for your information, are the Accountabilities for Closed Sessions.





# Accountabilities for Closed Sessions

## Council Member Accountabilities

- Maintain strict confidentiality.
- Do not discuss the issue outside of the closed session, even with others who participate. This includes:
  - before the meeting,
  - during break, and
  - after the closed session.

## Staff Accountabilities

- Maintain strict confidentiality
- Support Council decision-making (if relevant)
  - Provide staff resources to support decision-making.
  - Engage relevant external experts to attend meeting (e.g. legal counsel), where required.
  - Document closed session during meeting and prepare confidential appendix to minutes (where a formal decision is made).



Feb. 2011, Rev 2015 (Portal), Rev 2020 (Boardvantage & remote meeting)

## Notes

### Present

S. Robinson, Chair  
P. Ankamah  
A. Arkell  
J. Armitage  
T. Crowder  
D. Cutler  
T. Dion  
S. Douglas  
R. Dunn  
K. Goldenberg

R. Henderson  
N. Hillier  
T. Holland  
C. Hourigan  
A. Jahangir  
R. Kaur  
M. Klein-Nouri  
R. Lastimoso Jr.  
M. MacDougall  
D. May

I. McKinnon  
F. Osime  
J. Petersen  
L. Poonasamy  
M. E. Renwick  
M. Sheculski  
P. Sullivan-Taylor  
N. Thick  
D. Thompson  
J. Walker

### Regrets

S. Eaton  
K. Gartshore

B. MacKinnon

M. Sabourin

### Guest

B. MacKenzie

### Staff

A. Coghlan  
F. Garvey  
J. Hofbauer, Recorder

E. Horlock  
B. Knowles  
K. McCarthy

S. Mills  
A. M. Shin  
C. Timmings

## Welcome and introductions

S. Robinson welcomed new Council members. She informed Council that J. Wright had resigned and that a by-election has been called.

## Agenda

The agenda had been circulated and was approved on consent.

## Minutes

Draft minutes of the Council meeting of March 3 and 4, 2021 had been circulated.

## Motion 1

Moved by M. Klein-Nouri, seconded by D. Cutler,

That the minutes of the Council meeting of March 3 and 4, 2021 be approved as circulated.

CARRIED

## Annual Report

S. Robinson noted that the legislation requires that CNO submit an annual report to the Minister of Health. The report is an operational accountability. Council's role is to approve the report for submission to the Minister.

A. Coghlan highlighted the report – *Rising to the Challenge*. She noted it is designed to speak to the public about how CNO's actions protect them. The report reflects CNO's work to support safe nursing care during the pandemic.

In discussion, Council confirmed that the report highlights how CNO supported the health care system and supported nurses in understanding their accountabilities during a time of constant change and challenge.

A. Coghlan noted that CNO has learned from the pandemic and is building on the changes for the future. CNO also shared its experiences, for example how to run virtual Discipline hearings, with other regulators.

## Motion 2

Moved by J. Armitage, seconded by N. Hillier,

That Council approve the 2020 Annual Report, *Rising to the Challenge*, for submission to the Minister of Health.

CARRIED

## Audited Financial Statements

Council had received the audited financial statements for the year ended December 31, 2020.

S. Mills introduced B. MacKenzie from Hilborn, LLP, CNO's auditors. He informed Council that the Finance Committee met on May 6<sup>th</sup> and reviewed the audited financial statements and that the committee is recommending that Council approve the statements.

B. MacKenzie highlighted the purpose of the audit and the role of the parties involved:

- management prepares the statements

- the auditor adds third party credibility to the statements and
- the Finance Committee, acting on Council's behalf and under Council's authority, reviews the statements carefully and determines whether the statements can be relied on by Council for strategic decision making.

B. MacKenzie confirmed the independence of the auditor, noting that the only services provided to CNO by Hilborn LLP are audit services.

B. Mackenzie reported that the Finance Committee meets twice with the auditors to fulfill its functions, including meeting without staff both times to allow for frank discussion and for either party to raise concerns.

Council was informed that, while the audit was conducted virtually, neither the sufficiency of the audit nor the quality of the evidence was reduced in any way from previous audits.

B. MacKenzie highlighted the audited financial statements. He noted that CNO ended the year with unrestricted net assets (accumulated surplus) of \$35.6M which is approximately 8.5 months of operating expenses and that the surplus supports CNO's ongoing financial stability. He confirmed that the auditors believe that the statements fairly represent CNO's financial position and operations for the year ended 2020.

### **Motion 3**

Moved by R. Lastimosa Jr., seconded by R. Henderson,

That the audited financial statements for the year ended December 31, 2020 be approved.

CARRIED

S. Robinson expressed appreciation to B. MacKenzie. He left the meeting.

### **Follow-up Action**

Send the Annual Report, including the Audited Financial Statements, to the Minister of Health Executive Director and CEO

### **Registration Examination – Practical Nurse (REx-PN)**

S. Robinson reminded Council that in January 2022, the REx-PN will become the entry-to-practice exam for candidates seeking to become an RPN in Ontario and British Columbia. She noted that later in the meeting, Council will review changes to the Fees By-Law to support implementation of this exam.

E. Tilley, Strategy Consultant, updated Council on this new regulatory exam. She highlighted what makes the exam valid, reliable, secure and fair, as well as stakeholder engagement

activities related to implementing the exam. The provisions to address diversity and ensure that the exam reflects Canadian nursing were highlighted.

E. Tilley noted that, given the exam type and how it is administered, CNO will no longer limit candidates to a specific number of writes. The new exam tracks if an individual is retaking an exam and they will get all new questions on any retake. This means they can only pass if they demonstrate their competence. She highlighted the provisions that CNO has put into place to support applicants who have failed the current exam three times to be able to take the new exam.

### **Exam date change for the Council approved education assessment process**

S. Robinson noted that in March, Council was informed about CNO's work to modernize applicant assessment. Based on a review of evidence, Council decided that the approved process for evaluating internationally educated nurse applicants for registration as an RN in Ontario would be amended to include passing the NCLEX-RN exam on or after January 1, 2015.

She noted that staff have continued work on this issue. A. M. Shin, Director, Professional Practice, and S. Vogler, Manager of Entry to Practice highlighted a staff recommendation for a change in the exam date and the rationale, including the evidence for why an earlier date was not recommended.

In discussion it was noted that the decisions about using successful completion of the exam as part of the assessment of an applicant's education program is a first step in modernizing applicant assessment. CNO is reviewing all applicant assessment processes and there will be further changes in the future.

### **Motion 4**

Moved by M. Sheculski, seconded by D. Thompson,

That Council approve a revised date of April 1, 2013 for passing the NCLEX-RN as part of the evaluation that is used to determine if internationally educated registered nurse applicants possess the requisite nursing knowledge, skill and judgement to meet the nursing education requirement.

CARRIED

### **Follow-up Action**

Inform relevant applicants of the change.  
Executive Director and CEO

### **3.4 Fees By-Law Amendments**

S. Robinson noted that in March, Council approved amendments to the Fees By-Law for circulation. These amendments were to shift collection of the fees to the exam provider. It was

noted that with the implementation of the REx-PN exam CNO will only collect the fees for the jurisprudence exam.

Council received a report of the feedback. It was noted that the exam contract includes provisions related to reasonableness of fees and increases for inflation. S. Robinson reminded Council that a 2/3 majority is required to approve a by-law.

## Motion 5

Moved by D. Cutler, seconded by J. Walker,

That Article 8 of By-Law No. 2: Fees be amended as it appears in attachment 1 to the briefing note.

That, effective 90 days after the last day of the last Canadian Practical Nurse Registration Examination window for Ontario applicants, Article 8 of By-Law No. 2: Fees be further amended as it appears in attachment 2 to the briefing note.

CARRIED

## Follow-up Action

Update the By-Laws  
Executive Director and CEO

## Nursing Education Program Approval

S. Robinson asked if any Council members had a conflict of interest related to making decisions on approving the new programs. No conflicts were declared.

## Motion 6

Moved by D. May, seconded by J. Petersen,

That Council grant Preliminary Approval to each of the following new nursing programs in Ontario:

- Algonquin College's new practical nursing program for internationally educated nurses
- Georgian College's new baccalaureate program in nursing
- Nipissing University's two new baccalaureate programs in nursing
- York University's new baccalaureate program in nursing

CARRIED

## Follow-up Action

Inform the education programs of their approval status.  
Update the status of programs on [cno.org](http://cno.org).  
Executive Director and CEO

## Strategy 2021-2024

S. Robinson noted that CNO provided Council with an update on implementation of the strategic plan in March and updates are planned at every Council meeting in 2021. A. Coghlan, S. Mills and C. Timmings updated Council on work being done to implement the plan and how plans have been impacted by the pandemic.

It was noted that while some plans requiring stakeholder engagement have been set back due to the pressures COVID is putting on stakeholders, the pandemic has clarified the value of engaging with the regulator for stakeholders. Employers particularly have seen the value of partnering with CNO to address patient safety. A. Coghlan informed Council that the government is engaged with CNO and other stakeholders in addressing the needs of long-term care.

## Approach to modernizing the practice standards

S. Robinson noted that Council was first introduced to this proposed change in March. At this time, Council is being asked to provide early input into a draft framework for modernizing standards.

R. Jabbour, Strategy Consultant, highlighted the work done to date, the draft framework and ongoing plans. She noted that the continuing pandemic has impacted on CNO's ability to engage effectively with key stakeholders and will affect the timing for this project moving forward.

In discussion, the importance of clearly articulating accountability for nurses in the standards and guidance was flagged. It was suggested that health equity be addressed. It was noted that with retirement of standards, maintaining the guidance, for example the decision trees, is important. It was confirmed that the framework will support CNO becoming a more proactive regulator.

S. Robinson thanked Council for its input and noted that Council will be addressing this again in the future.

## Executive Director Update

S. Robinson introduced the Executive Director update by noting that A. Coghlan has announced her retirement at the end of 2021. She noted that A. Coghlan has been the face of regulatory excellence in Ontario and is a highly respected and influential regulatory leader.

A. Coghlan updated Council on:

- CNO's ongoing work to address the pandemic and the impact of the pandemic on CNO programs and projects
- The Quality Assurance Program
- Addressing health care staffing and safety issues highlighted by the pandemic
  - CNO's participation in the Ministry's new accelerator action group to support its long-term care staffing plan and a health care recruiting and training program
  - Passage of the Advancing Oversight and Planning in Ontario's Health System Act, 2021 that, among other things, provides for the regulation of Personal Support Workers and
- CNO's ongoing work on Diversity, Equity and Inclusion.

### **Executive Committee**

S. Robinson noted that the Executive met twice since March: May 6 and May 18. Draft minutes of the meetings were circulated. She highlighted the actions at both meetings. She reported that the Executive acted on behalf of Council and appointed Donna May to Council to address a vacancy created when a new member resigned.

### **Finance Committee**

N. Thick reported on the Finance Committee meeting of May 6. She noted that a number of recommendations from the committee had already been addressed on the Council agenda.

The Finance Committee is recommending that Council accept the unaudited statements for the first quarter ended March 31, 2021. N. Thick noted that the surplus for the quarter was \$2M, approximately \$.5M more than budgeted.

### **Motion 7**

Moved N. Thick, seconded by D. May,

That the unaudited financial statements for the three months ended March 31, 2021 be approved.

CARRIED

The Finance Committee is recommending the appointment of the auditor for 2021. N. Thick informed Council that all committee members had confirmed that the current auditor communicates clearly and is independent.

### **Motion 8**

Moved by N. Thick, seconded by A. Arkell,

That Hilborn LLP be reappointed as CNO's auditors for 2021.

CARRIED



N. Thick reported that as part of ongoing education and to meet its accountability for oversight, staff provided a presentation on procurement to the committee.

### **Statutory Committee Appointments**

To support onboarding of new Council and committee members, the Executive appointed new members to statutory committees.

#### **Motion 9**

Moved by J. Walker, seconded by M. Klein-Nouri,

That T. Crowder, D. May and F. Osime be appointed to the Discipline and Fitness to Practise committees and that F. Osime be appointed to the Registration Committee.

CARRIED

#### **Conduct Committee**

The Executive, acting as the Election and Appointments Committee, is recommending the members of the 2021-2022 Conduct Committee. S. Robinson noted that, while the terms of reference call for two public members, one member volunteered. The Executive is recommending that Council approve a Conduct Committee with one public member.

#### **Motion 10**

Moved by N. Thick, seconded by R. Lastimoso Jr.,

That the following be the 2021-2022 Conduct Committee: D. Cutler, Chair, S. Douglas, A. Jahangir and R. Kaur.

CARRIED

#### **Finance Committee**

The Executive, acting as the Election and Appointments Committee, is recommending members of the Finance Committee from among volunteers.

#### **Motion 11**

Moved by M. MacDougall, seconded by F. Osime,

That the following be appointed to the 2021-2022 Finance Committee: S. Douglas, N. Hillier, P. Sullivan-Taylor and M. Sheculski.

CARRIED

## **Nominating Committee**

S. Robinson noted that, while the terms of reference require one public member from Council on the new Nominating Committee, no public member volunteers applied. Council was informed that the Executive reviewed the competencies of the candidates who are moving forward to the next stage and believes that the required competencies will be met through a committee of four of the candidates.

Through a show of hands, Council supported going forward with a Nominating Committee of four:

- Chair, the immediate Past-President of Council
- one nurse Council member and
- two members of the public who are not members of Council.

## **Reflection on team norms**

Council de-briefed on the meeting, particularly on the impact of the draft team norms on meeting effectiveness. It was confirmed that there was a substantial change from June of 2020, with more active listening and full discussion. It was suggested that it is important to be thoughtful and ensure sufficient discussion for each item.

New members identified that they felt welcomed and supported. They noted that having a mentor, a touch-base over lunch, and being able to meet all Council members during orientation was helpful.

## **Next Meeting**

Council will meet again on September 29 and 30, 2021.

## **Conclusion**

The meeting concluded at 3:00 p.m. on completion of the agenda and consent.

## Decision Note – September 2021 Council

### Appointment of the members of the Interim Nominating Committee

#### Staff Contact for Information

Kevin McCarthy, Director, Strategy

#### Decision for Consideration re. Recommendation of the Executive Committee<sup>1</sup>

That the following be appointed to the Interim Nominating Committee:

- Diane Ballantyne to June 2024
- Sue Haywood to June 2024
- Terry Holland to June 2022

Note: As immediate Past-President, the Terms of Reference specify Cheryl Evans will chair the Interim Nominating Committee until June 2022.

#### Public Interest Rationale

Fundamental to Council's [governance vision](#), which is evidence-based and centered on public trust, is that members of the Board and committees have the competencies and attributes to enable them to fulfil their roles and public protection mandate.

#### Background


Council's vision includes a [Nominating Committee](#) that has the [knowledge, skills and attributes](#) to support the Board in competency-based appointments. Appointing this committee is an important step in moving forward the vision.

#### Interim Nominating Committee

In 2019, Council decided to proceed with a Nominating Committee to support it in making competency-based committee appointments, among other accountabilities required under the current legislation (e.g., election processes). Since the full role of the Nominating Committee

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<sup>1</sup> In accordance with Article 24.08 of the [General By-Law](#), the Executive is making these recommendations in its capacity as the Election and Appointments Committee.



cannot be implemented until legislation is passed, it was decided to establish an *Interim* Nominating Committee (NC).

Council's input into the establishment of this committee included:

December 2019:

- decision to implement a NC to replace the Election and Appointments Committee

March 2020:

- Approval of the NC's Terms of Reference ([attachment 1](#)) and associated [by-law](#) revisions.
- Decision to have the Executive fulfil the accountabilities of the former Election and Appointments Committee until the NC can be appointed

March 2021:

- Competencies and attributes for the NC were reviewed by Council and supported for moving forward with recruitment and appointment of its members

June 2021:

- Council was updated on recruitment for the NC and was informed that no public Council member volunteered.
- Council supported going forward with a NC of four members: the Chair, one nurse Council member and two members of the public who are not Council members.

Establishing the interim Nominating Committee positions CNO for the transition from its current to future governance model. If government amends laws as requested by CNO, the NC will assist Council with the transition by providing an evidence-based mechanism to support appointment of the first Board.

### **Process for selection of the recommended candidates**

[Governance Solutions Inc.](#) (GSI) <sup>2</sup> provided external, expert support to CNO and the Executive Committee in the recruitment and assessment of candidates for the NC. David Brown, Executive Vice-President of GSI will attend Council in September for this agenda item.

Based on the membership specifications set out in the terms of reference, recruitment this year was for:

- 1 nurse member of Council
- 1 public member of Council and
- 2 public members who are not members of Council.

The recruitment and on-line application process took place from March 19 to April 16, 2021:

- CNO invited Council members to apply when the application opened and
- GSI undertook a focused recruitment for members of the public.

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<sup>2</sup> Governance Solutions Inc. focuses on providing governance expertise and support. GSI has been involved in the development of the competencies for the future board, statutory committees, leadership activities and most recently the Nominating Committee. GSI has supported the application and assessment of candidates for statutory committees, statutory committee chairs and most recently the Interim Nominating Committee.



Candidates completed an online self-assessment against the required competencies and submitted a resume. In addition, the immediate Past President, Cheryl Evans, completed the online application and submitted a resume so that her competencies would form part of the overall assessment.

As a candidate, Terry Holland recused herself from meetings when the Executive was considering the appointments for the NC.

In May, the Executive received the first report from GSI, along with the resumes of the candidates. The report assessed candidates against the required competencies and included recommendations about which candidates should proceed to interviews.

Based on the assessment and recommendations from GSI, the Executive selected candidates to move forward to the next step in the process:

- an interview
- reference checks
- completion of the Conduct form (commitment to behave in accordance with Council’s Code of Conduct if appointed)

The Executive also provided input into the interview questions.

The table below outlines the number of positions, applications received and the candidates who moved forward to the next step in the process:

	<b>Number of positions available</b>	<b>Number of candidates</b>	<b>Number of candidates for interviews</b>
Council member – nurse	1	2	2
Council member public	1	-	-
Non-Council public member	2	7	5

In August, the Executive received the final report from GSI. The report included assessments by GSI of:

- the candidates against the competencies
- candidates’ “fit” with the recommended team and
- a score reflecting how well the candidate performed in the interview.

Based on the assessment, GSI recommended candidates for appointment. The Executive reviewed the report and concurred with GSI’s recommendations. It is recommending that the first members of Council’s Interim Nominating Committee be:

- Cheryl Evans, RN, Chair (as immediate past-President)
- Diane Ballantyne, member of the public
- Sue Haywood, member of the public and
- Terry Holland, nurse Council member





## **Next Steps**

If Council accepts the recommendations of the Executive:

- all candidates will be officially informed of the outcome of the process
- the new Interim Nominating Committee will be oriented and begin its work
- in February 2022, CNO will recruit for a Council nurse and a Council public member to serve on the Interim Nominating Committee (to be appointed in June 2022).

## **Attachments:**

1. Interim Nominating Committee Terms of Reference
2. Nominating Committee Competencies and Attributes

## Attachment 2

### Interim Nominating Committee Terms of Reference

<b>Role</b>
<p>The interim Nominating Committee assists the Board of Directors ('Board')<sup>1</sup> in ensuring the Board and Committees (statutory, standing, and special committees) have the competencies and attributes (the experience, knowledge, skills, and character), to enable them to fulfil their roles and public protection mandate. The interim Nominating Committee fulfills specific roles related to the election of Board members and the Executive Committee, and recommends to the Board candidates for appointment or re-appointment to Committees.</p>
<b>Responsibilities</b>
<p>The interim Nominating Committee is responsible for:</p> <ul style="list-style-type: none"><li>• Succession planning for the Board and Committees.</li><li>• Collaborating with the Board, Committee chairs, and CNO staff to assess the needs of the Board and Committees.</li><li>• Implementing a Board-approved process that is structured, transparent, and objective for actively recruiting, evaluating, and selecting qualified, diverse candidates for appointment to Committees.</li><li>• Recommending to the Board candidates for appointment or re-appointment to Committees.</li><li>• Acting in accordance with applicable legislation, CNO by-laws, and Board-approved principles, policies, processes, and criteria in discharging its duties.</li><li>• Declaring election results, resolving election disputes and fulfilling other duties related to the election of nurses to the Board.</li><li>• Making recommendations to the Board for filling Board vacancies in-between elections.</li><li>• Supporting the Board to elect the Executive Committee.</li><li>• Seeking the Board's input and involving the full Board in its work on a regular basis, as appropriate.</li><li>• Discharging its duties in a transparent, independent, impartial, and fair manner.</li><li>• Reviewing the interim Nominating Committee's processes on a regular basis and recommending improvements to the Board.</li><li>• Reviewing these Terms of Reference no later than three years from their approval, and making recommendations to the Board about a more permanent Nominating Committee structure if required.</li><li>• Performing any other activities necessary to fulfil its mandate, or as may be required by the Board from time to time.</li></ul>

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<sup>1</sup> Also referred to as 'Council'.

## Chair

The Chair of the interim Nominating Committee is the immediate past President of the Board, who may or may not be a current director of the Board.

The Chair may delegate their role to another member of the interim Nominating Committee when unavailable.

## Membership

The Board appoints the members of the interim Nominating Committee.

The interim Nominating Committee is composed of 5 members. If the Chair is a director on the Board, the remaining committee shall be composed of:

- 1 other director of the Board;
- 3 individuals who are not on the Board, and have not been on the Board in the past 5 years.

If the Chair is not a director on the Board, the remaining committee shall be composed of:

- 2 directors;
- 2 individuals who are not on the Board, and have not been on the Board in the past 5 years.

The members of the Board who are also on the interim Nominating Committee shall be composed equally of 1 public director and 1 nurse director.

No more than 50% of the members of the interim Nominating Committee may be current or past registrants of CNO, or applicants to CNO.

The interim Nominating Committee is properly constituted despite any vacancy so long as there are sufficient members for quorum.

## Terms of Office

The term of office for the interim Nominating Committee Chair is up to 2 years.

The other members of the interim Nominating Committee are appointed for up to 3-year terms, with a maximum of 2 consecutive terms. Interim Nominating Committee members' terms may be staggered so that no more than 2 expire in any given year.

## Meetings

The interim Nominating Committee meets as needed to fulfil its mandate, at the call of the Chair.

Meetings are conducted in person, or by electronic means approved by the Chair.

The interim Nominating Committee meets in person at least once per year.

The interim Nominating Committee maintains minutes of its meetings.



<b>Quorum</b>
Four members of the interim Nominating Committee including at least 1 director on the Board and 1 member not on the Board constitutes a quorum of the interim Nominating Committee.
<b>Decisions and Voting</b>
<p>When possible, the interim Nominating Committee's decisions are made by consensus.</p> <p>Should consensus not be reached, the interim Nominating Committee's decisions are made by a simple majority vote of the members present at a meeting of the interim Nominating Committee that has achieved quorum.</p> <p>Each member of the interim Nominating Committee has 1 vote.</p>
<b>Accountability and Reporting</b>
<p>The interim Nominating Committee is accountable to the Board and reports its activities and recommendations to the Board at the Board's next meeting. Time-sensitive issues are brought to the Board's attention in a timely manner.</p> <p>The interim Nominating Committee provides the Board with sufficient information and documentation for the Board to make informed decisions.</p>
<b>Resources</b>
<p>The Registrar &amp; CEO acts as a resource for the interim Nominating Committee, but is not a member of the interim Nominating Committee. The Registrar &amp; CEO designates further staff resource(s) to support the interim Nominating Committee as required.</p> <p>Outside advisors and consultants may be retained to assist the interim Nominating Committee in discharging its duties.</p>
<b>Approvals</b>
<p>Approved: dd-mmm-yyyy</p> <p>Revisions: dd-mmm-yyyy; dd-mmm-yyyy; dd-mmm-yyyy</p> <p>Next review: dd-mmm-yyyy</p>

## Attachment 1

### Nominating Committee Competencies & Attributes Profile

#### CORE COMPETENCIES

It is expected that all, or most, of the members of the Nominating Committee would demonstrate these core competencies:

##### I. Leadership Skills

You demonstrate skills and ability to lead others to solve problems, adapt and manage change, innovate and achieve results.

##### II. Change Management

You demonstrate skills related to change management, such as relationship management, engagement, socialization of ideas, consultation and negotiation.

##### III. Decision Maker

You are a proven decision-maker using different decision-making methods.

##### IV. Public interest

You have experience in, and understanding of, protecting and acting in the public interest.

#### SPECIALIZED COMPETENCIES

Additionally, one, or two, members of the Nominating Committee would have expertise in one or more of these specialized competencies, so that collectively the committee would have the benefit of all of these:

##### V. Human Resources Leadership Experience

You have experience in, and an understanding of, human resource management with a strong understanding of organizational structure and human resources oversight, including recruiting, assessing and succession planning - well versed in assessing the competence and character of individuals based on a set of specific requirements.

##### VI. Psychology and Learning

You have experience and expertise working in the fields of human psychology and behaviour, which may include elements such as industrial-organizational psychology, workplace research, corporate culture, management styles, employee engagement, cognitive science, emotional intelligence, personality types, learning styles, and the application of psychometric tools and assessments.

##### VII. Governance and Boards

You demonstrate strong familiarity and understanding of governance roles and responsibilities, current governance policy, issues and trends. You may have gained this through prior board and/or committee experience in an organization of similar size, scope and complexity as the College, and/or through formal governance education and director certification (e.g. ICD.D (Institute of Corporate Directors), Pro.Dir. (Professional Director®), C.Dir (Director's College)).

### **VIII. Broad Health Sector Leadership**

You have experience in a senior leadership position in a health care administrative setting.

### **IX. Cross-Cultural Experience**

You demonstrate leadership in promoting diversity, equity and inclusion, including experience working with diverse teams and populations, e.g. working cross-culturally, internationally, experience with social, humanitarian, anti-racism, anti-oppression and LGBTQ positive principles.

### **X. Regulatory Experience**

You have experience in the oversight of self-regulated professions, and the ability to understand and oversee regulations and standards setting and certification. You have awareness/knowledge of the regulatory climate and evolving regulatory issues, regulated industries and their oversight regimes. You may be, but are not necessarily, a lawyer.

## **DIVERSITY CONSIDERATIONS**

CNO is an organization that embraces diversity, equity and inclusion. In composing the Nominating Committee, we seek a group that is itself diverse and also demonstrates commitment to diversity, equity and inclusion.

Diversity means recognizing and identifying the seen and unseen characteristics in the lived experiences of people that result in each person's unique perspectives.

Equity means ensuring fairness and objectiveness by recognizing and removing historical and contemporary barriers and biases that create unfair systems and practices.

Inclusion means actively creating and intentionally fostering an environment where everyone feels welcome, respected and has an opportunity to participate.

## **CHARACTER ATTRIBUTES**

All Nominating Committee members would be expected to demonstrate these character attributes:

### **I. Communicator**

You are able to communicate clearly, concisely and accurately, orally and in writing.

### **II. Constructive**

You are able to build relationships, you are constructive and helpful.

### **III. Emotionally Mature**

You are able to understand and skillfully manage emotions, especially when faced with conflict and confrontation; you are self-aware and professional.

### **IV. Ethical**

You have unquestioned ethical integrity; you comply and/or will comply with the College's conduct expectations, bylaw and policies

**V. Fiduciary**

You are able to put others' interests first (servant leadership); you have a passion for the public interest, commitment and drive.

**VI. Inclusive**

You are able to create a place for everyone's voice; you understand the concept of equity; are aware of and respect diversity such as social and cultural differences; you are empathetic.

**VII. Independent**

You are able to think independently, while knowing when and how to consult others.

**VIII. Learner**

You are able to apply your learning to the public interest; you demonstrate a willingness to learn and develop.

**IX. Listener**

You are able to listen and question to achieve understanding; you are an effective and active listener.

**X. Proactive**

You are able to think proactively and to anticipate.

**XI. Strategic**

You are able to move beyond the details to envision the grander future; you are a strategic thinker.

**XII. Adaptable**

You are able to adapt easily and quickly to changing evidence and environments; you demonstrate cognitive flexibility.

**XIII. Fortright**

You are able to present an unpopular or controversial position in the face of opposition or opposing views.

**XIV. Professional Judgement**

You are able to think critically.

**XV. Astute**

You are able to apply your knowledge in the context of Board-level decision-making and leadership.

**XVI. Problem Solver**

You are able to evaluate complex issues and to make effective decisions (find solutions).

**XVII. Unifier**

You are able to encourage divergent thinking and dissent from others, and to build consensus; you stand behind the collective decisions of the Board in unity.

**XVIII. Systems-level Thinker**

You are able to conceptualize on a systems level and communicate this understanding to others.

## Decision Note – August 2021 Council

### Nursing Education Program Approval

#### Contact for Questions

Katie Dilworth, Manager, Education Program

#### Decision for Consideration

That Council grant Preliminary Approval for the following new nursing programs in Ontario:

- Loyalist College:
  - Direct Entry Full Program – Bachelor of Science in Nursing
  - Pre-Health Education Entry Specified Program – Registered Practical Nurse (RPN) to Bachelor of Science in Nursing
- Seneca College:
  - Direct Entry Full Program – Honours Bachelor of Science - Nursing
  - Pre-Health Education Entry Specified Program – Registered Practical Nurse (RPN) Bridge to BScN Honours Bachelor of Science - Nursing
- Canadore College:
  - Direct Entry Full Program – Honours Bachelor of Science – Nursing Program
  - Pre-Health Education Entry Specified Program – RPN to BScN Honours Bachelor of Science – Nursing Bridging Program

#### Public Interest Rationale

It is key to public safety that new nursing graduates have attained a level of competence that enables them to enter practice safely. Program Approval is a mechanism that allows for rigorous assessment of entry level nursing education programs. This ensures that graduates have the knowledge, skill, and judgement to practise safely, ethically, and competently as they enter practice.

#### Background

Approving nursing education programs<sup>1</sup> is an important part of Council's accountability to protect the public.

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<sup>1</sup> The *Nursing Act, 1991* includes a requirement that in order to be eligible for registration, applicants must:

“successfully complete a program that was specifically designed to educate and train persons to be practising” nurses and that the “program was approved by Council or a body approved by Council for that purpose” [Subsections 2(1)1i, 3(1)1i, and 4(1)2i of Ontario Regulation 275/94].



## Program Approval

In accordance with the [Program Approval Policy](#) approved by Council, all entry level nursing programs, including practical nurse diploma (PN), baccalaureate nursing (BScN or BN) and nurse practitioner (NP), come to Council for consideration for approval using the Program Approval Framework. Programs must be approved by Council in order for a graduate from the program to be eligible for registration with CNO.

All new nursing programs must receive Preliminary Approval before admitting students. Preliminary Approval includes a detailed review of the program's curriculum.

At this time, six new nursing programs are coming to Council for Preliminary Approval. They have all met the curriculum indicator (see [Attachment 1](#)).

- Loyalist College:
  - Direct Entry Full Program
  - Pre-Health Education Entry Specified Program
- Seneca College:
  - Direct Entry Full Program
  - Pre-Health Education Entry Specified Program
- Canadore College:
  - Direct Entry Full Program
  - Pre-Health Education Entry Specified Program

These programs are being implemented following a recent regulation amendment that removed the requirement that a university issue the degree. This permits Colleges of Applied Arts and Technology (CAATs) to independently offer baccalaureate programs rather than requiring collaboration with a university. As these partnerships change, universities and colleges are independently seeking approval for their own programs. Existing programs will continue to support current and new learners in their collaborative programs.

One year after the first cohort of students have graduated these programs will undergo a Comprehensive Review. The Comprehensive Review scoring methodology, a copy of the Program Approval Score Card and the approval status criteria can be found in [Attachments 2](#) and [3](#).

## Next Steps:

Following Council's decision CNO will:

- Provide a letter to the schools confirming their program approval status and the upcoming dates for the Comprehensive Review. The letter will also include a Program Approval report outlining the results of the Preliminary Review.
- Update the status of these schools on CNO.org.

## Attachments:

Attachment 1: Detailed Program Review scoring

Attachment 2: Program Approval Comprehensive Review Scoring Methodology

Attachment 3: Approval Status Criteria

## Attachment 1 - Detailed Program Review Scoring

### Proposed NEW Baccalaureate Nursing (RN) Program Approval Review Results

Institution	Nursing Program	CNO Program Category	Indicator: Curriculum	Approval Status Recommendation
Loyalist College	Bachelor of Science in Nursing	Direct Entry Full	Met	Preliminary Approval
	Registered Practical Nurse (RPN) to Bachelor of Science in Nursing	Pre-health Education Entry Specified	Met	Preliminary Approval
Seneca College	Honours Bachelor of Science – Nursing	Direct Entry Full	Met	Preliminary Approval
	Registered Practical Nurse (RPN) Bridge to BScN Honours Bachelor of Science – Nursing	Pre-health Education Entry Specified	Met	Preliminary Approval
Canadore College	Honours Bachelor of Science – Nursing Program	Direct Entry Full	Met	Preliminary Approval
	RPN to BScN Honours Bachelor of Science – Nursing Bridging Program	Pre-health Education Entry Specified	Met	Preliminary Approval

## **Attachment 2 – Program Approval Comprehensive Review Scoring Methodology**

For full approval, programs receiving preliminary approval must undergo a Comprehensive Review in the academic year following the first class of graduates. In a Comprehensive Review, nursing education programs are evaluated based on the three standards (Structure, Curriculum and Outcomes) and the associated 9 indicators. A score is calculated for each indicator, standard and overall for each program leading to entry-to-practice.

### **1. Program Approval Scorecard Overview**

Nursing program approval is based on the total program score achieved on the program approval scorecard (see next page).

### **2. Mandatory Indicators**

Two indicators have been defined as “mandatory” from a regulatory perspective and need to be fully met for the program to receive an Approved status. The mandatory indicators include:

- #2, Client and student safety; and
- #4, Entry-to-practice (ETP) competencies and foundational standards integrated into the curriculum.

### **3. First-time pass rates on registration exams (3-year cumulative totals)**

Schools’ exam results contribute to their overall approval score. Exam results are scored based on the following rubric:

The first-time pass rate used for program approval purposes is calculated based on the total number of first-time writers that pass the registration exam over a three-year period expressed as a percentage. Using three years of data provides a larger denominator of students for the calculation and helps to mitigate single-year result variations – both commonly seen in smaller programs.

### **4. Indicators 8 and 9**

Collection of outcome Indicators 8 (recent graduates’ assessment of how well the program prepared them to practise safely, competently and ethically;) and 9 (preceptor assessment of student readiness to practice safely, competently and ethically) commenced in 2021.

These outcome indicators were to start collection in 2020 but due to the pandemic, this process was delayed. As the program approval outcome indicators scores are based on a cumulative 3-year review of aggregate data, these indicators will be part of annual assessments presented to Council beginning after 3 years of data is available.



<b>CNO NURSING EDUCATION PROGRAM APPROVAL SCORECARD</b>	
<b>Structure Standard (Total weight 25%)</b>	
<b>Indicator (Sub-indicator)</b>	<b>Weight</b>
1. Nursing program governance	<b>6</b>
1a. Nursing program governance structure	2
1b. Curriculum review structure	2
1c. Annual review of program outcomes	2
<b>2. Client and student safety (mandatory indicator)</b>	<b>13</b>
2a. Orientation of student and faculty to clinical setting	2
2b. Student supervision in all clinical placements	3
2c. Regular evaluation of student performance in clinical setting which includes documented assessments and mechanisms for remediation as required.	3
2d. Processes are in place to manage safety incidents involving clients and students.	5
3. Qualified Faculty	<b>6</b>
3a. Faculty who are RN, RPN and NP's have current certificate of registration in Ontario	2
3b. Regular process to evaluate teaching	4
Sub-total - Structure Indicators	<b>25%</b>
<b>Curriculum Standard (Total weight 40%)</b>	
<b>4. Curriculum incorporates entry-to-practice competencies and foundational standards (mandatory Indicator)</b>	<b>25</b>
5. Clinical learning opportunities support learners to attain and demonstrate acquisition of program objectives	<b>10</b>
6. Processes in place to communicate expectations for the student placement to preceptor for the integrated practicum.	<b>5</b>
Sub-total - Curriculum Indicators	<b>40%</b>
<b>Outcome Standard (Total weight 35%)</b>	
7. Registration exam scores – 1 <sup>st</sup> time pass rates (3-year cumulative total)	<b>7</b>
8. Recent graduates' ratings of their preparation to practice safely, competently and ethically <sup>1</sup>	<b>18</b>
9. Preceptor ratings of student's readiness to practice	<b>10</b>
Sub-Total -Outcome Indicators	<b>35%</b>
<b>All Standards and Indicators (Total weight 100%)</b>	<b>100%</b>

<sup>1</sup> Collection of outcome Indicators 8 and 9 commenced in 2021. Program approval outcome indicators scores are based on a cumulative 3-years of aggregate data. These indicators will be part of annual assessments presented to Council in the future.

## Attachment 3 – Approval Status

For each program, one of four approval statuses are granted:

<b>Status</b>	<b>Criteria</b>
Approved	<p>Granted when the program meets a score of 75% and the mandatory indicators for program approval.</p> <p>Graduates from a program with this status are considered graduates of an approved nursing program and eligible for registration in Ontario.</p>
Approved with Conditions	<p>Granted when the program does not meet the score of 75% OR does not meet the mandatory indicators.</p> <p>Graduates from a program with this status are considered graduates of an approved nursing program and are eligible for registration in Ontario. Programs that receive conditional approval status are required to develop an action plan to address the gaps based on the recommendations and schedule provided by CNO.</p>
Preliminary Approval	<p>Granted to a new program with curriculum that meets required criteria. For full approval, programs receiving preliminary approval must undergo a comprehensive review in the academic year following the first class of graduates.</p> <p>Graduates from programs with this status are considered graduates of an approved nursing program and are eligible for registration in Ontario.</p>
Not Approved	<p>The program fails to meet the score of 75% OR does not meet the mandatory indicators over a number of consecutive years and does not demonstrate improvement in meeting the requirements.</p> <p>Graduates of a program with this status are not eligible for registration in Ontario.</p>



## Discussion Note – September 2021 Council

### Modernizing Practice Standards

#### Contact for Questions or More Information

Kevin McCarthy, Director of Strategy

#### Introduction

We are seeking Council's input on key considerations and next steps to support modernizing CNO's practice standards.

#### Strategic Outcome

Modernizing practice standards support the implementation of CNO's [Strategic Plan 2021-2024](#).

Informed by evidence, the objectives of this initiative are to ensure practice standards are:

- accessible (clear and easy-to-understand)
- defensible (evidence-informed, measurable), and
- relevant (reflect contemporary practice, informed by stakeholders, and meet stakeholder needs )

Modernized practice standards advance CNO's strategic outcome so that *nurses' conduct will exemplify understanding and integration of CNO standards for safe practice.*


#### Background

In [March 2021](#) and June 2021, Council reviewed and provided feedback on a draft evidence-informed<sup>1</sup> framework to guide CNO's standards modernization.

At the [June 2021](#) Council meeting, Council discussed the importance of clearly articulating nurses' accountabilities in the practice standards and guidance, including addressing issues related to health equity. It was noted that maintaining guidance, such as decision trees, would be important practice resources if specific practice standards were to be retired. Council confirmed that the framework will support CNO becoming a more proactive regulator.

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<sup>1</sup> Literature (academic, grey), environmental scan, legislative analysis, and preliminary stakeholder perspectives. Refer to the March 2021 and June 2021 briefing note for more information.



Under this draft framework, CNO proposed that the Code of Conduct, which was first approved in December 2018, would be updated to ensure relevance to current nursing practice, health system realities, changing expectations and societal values. Given that the Code of Conduct is meant to be overarching and set out the key accountabilities of a nurse, topic specific practice standards would be situated underneath the Code of Conduct, as appropriate, to contain the necessary detail to support the breadth of CNO’s regulatory work to protect the public.

This draft framework continues to evolve and be informed by many sources of evidence which includes:

- literature,
- jurisdictional scans,
- identifying and analysing risk to the public,
- consultation with regulatory functions and,
- preliminary stakeholder perspectives.

Council received and discussed the findings of the literature review and jurisdictional scans in [March 2021](#).

### **Preliminary Stakeholder Perspectives**

Given the COVID-19 pandemic, external engagement and broad communication has been limited. Early consultations with the following stakeholders have been conducted to date:

- Citizen’s Advisory Group,
- Nurse Advisory Group<sup>2</sup> and
- Key Informants in diversity, equity and inclusion.

Key themes from these consultations are outlined below:

- Modern standards must retain salient information from existing standards.
- Modern standards must be clear, understandable and reassure the public of what they can expect from a nurse.
- Modern standards must adjust to meet evolving public and health care system realities and expectations.
- Clarity is required on the differences between practice standards and guidance, and the role guidance plays in nursing practice.
- Modern standards must reflect diversity, equity and inclusion principles and appropriate terminology.
- The Code of Conduct must be robust and comprehensive to contain necessary detail to support safe nursing practice.

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<sup>2</sup> This is a CNO advisory group formed for the purposes of consultation on Standards Modernization. The group consists of nurses from different geographical regions, roles, practice settings and years of experience.



## An Evolving Framework

The evidence and feedback continue to support a framework that focuses on:

- The Code of Conduct as the prominent and overarching practice standard with more topic specific standards underneath it that reflect accessibility, relevance and defensibility.

## Next Steps

- In Fall 2021, Council can expect:
  - Continue to gather evidence to inform modifications to the framework
  - Socialize standards modernization project with key stakeholders
- In December 2021, Council can expect:
  - A modified framework and topic specific practice standards that would exist under the Code of Conduct
  - A stakeholder engagement plan

## Questions for Council

Please share your feedback. What considerations would you like staff to keep in mind moving forward?

## Minutes

### Present

S. Robinson, Chair  
T. Holland

N. Thick  
M. Sheculski

D. Thompson

### Staff

A. Coghlan  
J. Hofbauer

R. Jabbour

K. McCarthy

## Agenda

The agenda had been circulated and was approved on consent.

### Debrief on the Council orientation and professional development

#### May Meet and Greet

The Executive confirmed that holding an early session with the Executive and new members was an important part of supporting the new members in integrating into Council. It allowed them to meet the Executive, their mentor and also each other. With the Executive leading, it was an informal and engaging opportunity to discuss how Council works, key governance expectations and how to prepare for Council with the new members. Members noted that feedback from new members was that they felt welcomed, and that the session supported them in moving forward. The Executive confirmed that the session should continue in the future.

#### Mentorship

Members of the Executive reported on their approach to mentorship and the positive feedback from the new members. It was noted that new members had different needs for support and that the mentor's approaches reflected the learning needs of the mentees. It was agreed that mentoring of new Council members should continue as part of the onboarding/orientation process.

#### PD session on Regulatory Governance

It was noted that it was a new approach to have all of Council oriented together. It was identified that the Executive Director and CEO's overall orientation to regulatory governance, paired with Richard Steinecke's presentation with scenarios and polls was helpful in setting out and confirming the key concepts in regulatory governance.

#### Council's conversation on anti racism and anti-discrimination

The Executive noted that all of the orientation activities that took place before this session enabled Council members to feel comfortable and participate in difficult conversations. It was

noted that the session resulted in an understanding of the diverse lived experiences across Council. It was confirmed that there is more work to be done, particularly to clarify the governance role in relation to diversity, equity and inclusion.

### **June Council de-brief**

It was identified that the culture reflected during the meeting was positive and respectful.

### **Team norms**

In May, the Executive had discussed the team norms and identified that they needed work to clarify. The Executive discussed a draft of revised norms prepared by staff, and provided input on wording, order, and possible additional guidance. Staff will bring a new draft of the Team Norms to the Executive in August. The norms would then go to Council.

### **September professional development session – continuing orientation**

It was noted that at the June PD session there was a brief discussion about the key regulatory requirements. At that time, it was identified that there would be ongoing education on the requirements.

Staff are proposing that the September PD session focus on standards as the fundamental key regulatory requirement. The session would address CNO's regulatory accountability to articulate standards of practice for the profession. It would be a strategic conversation to support Council in its continuing work related to modernizing the standards. There was support for a session that would clarify Council's governance role and accountability related to standards. Staff will bring a more detailed proposal to the Executive in August.

### **Land acknowledgement statement**

The Executive discussed a staff proposal for a Land Acknowledgment Statement to begin Council meetings. The Executive supported the reference to this being a step toward truth and reconciliation and the invitation for participants to reflect on the lands where they are located and acknowledge the indigenous occupants.

Staff will undertake additional review and consultation and this item will be discussed in August, prior to starting with the statement at September Council. It was noted that beginning other meetings with a land recognition statement will be addressed as part of CNO's ongoing work on diversity, equity and inclusion,

### **Interim committee appointments**

Inquiries, Complaints and Reports Committee – appointed committee members

The Executive was informed that three appointed committee members have resigned from the Inquiries, Complaints and Reports Committee. The Executive reviewed information on the candidates for appointment from 2021.

## **Motion 1**

Moved by N. Thick, seconded by D. Thompson,

That the following be appointed to the Inquiries, Reports and Complaints Committee:

- Nicole Krywionek, RN until June 2023,
- Shelley Sheedy, RN until June 2022, and
- Heather Whittle until June 2022.

CARRIED

Discipline Committee – Interim Council member appointment

The Executive was informed that Michael Hogard, RPN has been acclaimed to Council. He is filling the position created when J. Wright resigned, which also created an RPN Council member vacancy on the Discipline and Fitness to Practise committees.

## **Motion 2**

Moved by T. Holland, seconded by D. Thompson,

That Michael Hogard be appointed to the Discipline and Fitness to Practise committees.

CARRIED

## **Conclusion**

The meeting concluded at 4:15 p.m. on completion of the agenda and with consent.



## Minutes

### Present

S. Robinson, Chair  
T. Holland

N. Thick  
M. Sheculski

D. Thompson

### Staff

A. Coghlan  
J. Hofbauer

R. Jabbour

K. McCarthy

### Agenda

The agenda had been circulated and was approved on consent.

### Minutes

Minutes of the meetings of May 6, 2021, May 18, 2021 and July 21, 2021 had been circulated and were approved on consent.

### Land Acknowledgment Statement

The Executive received a briefing and a draft Land Acknowledgment Statement. The statement had been revised based on the Executive's input in July. The Executive confirmed that the revised statement reflects their input. Sandra will introduce the statement at Council, beginning with the September meeting.

### Approach to orienting new Council member

The Executive was informed of the approach to orient M. Hogard. T. Holland volunteered to mentor M. Hogard.

### Dates of Council meetings in 2022

The Executive received proposed dates for Council meetings in 2022. The Executive supported recommending the dates to Council.

### Diversity, Equity and Inclusion

It was confirmed that members of the Executive have received an email from CNO about a diversity, equity and inclusion professional development session related to the statutory committee role.

K. McCarthy provided an update on other CNO activities related to diversity, equity and inclusion. He noted that the decision to move forward with a land acknowledgment statement for

Council positions CNO to start discussing how to implement a land acknowledgment statement internally.

### **Team Norms**

The Executive received draft team norms, with revisions based on the Executive's input in July. It was confirmed that the changes reflect the Executive's input and are a good basis for moving forward. It was suggested that a brief introductory statement be included to provide context.

The Executive approved the revised norms on consent. Council will begin using the revised norms in September. It was noted that the norms are a living document and will be reviewed annually.

### **Orientation to Regulatory Requirement – Standards**

A half-day professional development/orientation session is planned for Council in September.

#### **Social activity**

Given the success of the social activity at the June Council professional development session, staff are proposing that each Council PD session begin with a small group social activity. These sessions will provide an opportunity for Council members to connect personally within a virtual meeting.

#### **Session on the standards**

The Executive was informed that staff are developing an orientation session on regulatory standards. The session will allow for a deeper discussion about the relevance of standards to CNO's regulatory functions. The session will support Council in its governance role in moving forward with modernizing the standards.

The Executive confirmed the value of Council having an opportunity to learn and discuss more about standards. The session will include opportunities for engagement and for discussion.

### **Council Agenda**

The Executive received the draft agenda for the September Council meeting. It was noted that the Minister of Health has been invited to attend and address Council about governance. Until the Minister's attendance is confirmed, the specifics of date and timing of the agenda for the Council business meeting are subject to change. If the Minister does attend, the agenda will need to be amended to include time for her address and questions.

CNO has asked the Minister to speak to governance change and it was identified as important to focus Council's questions and discussion on the importance of implementing Council's governance vision to support regulatory excellence.

S. Robinson noted that she will provide an update to Council on the search for a new Executive Director. It will be addressed at the start of the reports section of the agenda.



Executive Committee Minutes  
August 26, 2021

The draft agenda was approved for posting. It will be clarified that until there is confirmation from the Minister, Council will be asked to hold both full days for the meetings Council business meeting and the orientation to standards.

**Executive Session**

J. Hofbauer, R. Jabbour and K. McCarthy left the meeting. The Executive and A. Coghlan met.

**Conclusion**

On completion of the agenda and following the Executive session, the meeting of the Executive Committee concluded.

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Chair

DRAFT

## Minutes

### Present

S. Robinson, Chair  
T. Holland

N. Thick  
M. Sheculski

D. Thompson

### Staff

J. Hofbauer

### Purpose

The Executive met to appoint a new public member to statutory committees.

### Committee appointment

The Executive Committee received background about a new public member, Sandra Larmour, including her time availability.

### Motion 1

Moved by Diane Thompson, seconded by Maria Sheculski,

That Sandra Larmour be appointed to the Discipline and Fitness to Practise committees.

CARRIED

### Mentor

As part of the orientation of new members, Executive Committee members have served as mentors. M. Sheculski volunteered to be S. Larmour's mentor.

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Chair

## Finance Committee Report – August 26, 2021

### Contact for questions or more information

Stephen Mills, Chief Administrative Officer

The Finance Committee met on August 26, 2021. Attachment 1 is the [draft minutes](#) of the meeting. This was the first meeting of the 2021-2022 Finance Committee; an orientation had been held in July.

### Financial statements

The unaudited financial statements for the six months ended June 30, 2021 ([Attachment 2](#)) were reviewed in detail. The financial statements included variance analysis and the Management Discussion and Analysis included reports on projects.

The six-month operating surplus is approximately \$4.2M, a \$3.6 M favourable variance from the budgeted surplus of \$0.6M. The surplus was a result of a number of factors. The positive revenue variance of \$1.2M is a result of more renewals, applications and examinations than budgeted. The \$2.4M expense variance is a result of a number of factors, the largest related to salaries, resulting from vacancies.


It was noted that the accumulated surplus is currently over the six-month maximum in CNO's guidelines (an accumulated surplus between three and six months of the operating budget). With construction commencing, it is expected that the accumulated surplus will reduce as construction costs are incurred.

After extensive discussion of the statements and accompanying confidential Management Discussion and Analysis document, the Finance Committee recommends:

**That Council approve the unaudited financial statements for the six-months ended June 30, 2021.**

### Budget development

The Finance Committee received an outline of the process for developing the 2022 budget. The committee was informed of a new approach to budgeting and to releasing funds for projects.



A detailed review of the budget will take place in November, for presentation to Council in December.

**Attachments:**

1. Draft minutes of the Finance Committee meeting of August 26, 2021
2. Unaudited financial statements for the six-months ended June 30, 2021

## Minutes

### Present

T. Holland, Chair  
N. Thick  
C. Halket  
N. Hillier

S. Robinson  
M. Sheculski,  
P. Sullivan-Taylor  
S. Douglas

### Staff

A. Coghlan  
J. Hofbauer  
L. Parsons, Recorder

N. Mamodehousen  
S. Mills  
R. Prathivathi

### Chair

T. Holland chaired the meeting.

### Agenda

The agenda had been circulated and was approved on consent.

### Minutes

Minutes of the Finance Committee meeting of May 6, 2021 had been circulated and were approved on consent.

### Financial Statements

Members of the Finance Committee had received the unaudited financial statements for the six months ended June 30, 2021. S. Mills highlighted the statements. He noted that at the end of the second quarter there was an excess of revenues over expenses (a surplus) of \$4.2M which is \$3.6M higher than budget.

It was noted that the current accumulated surplus is more than the guideline maximum of 6 months' expenses. The surplus is expected to decrease over the next few months as construction costs are incurred.

The Finance Committee discussed the key drivers for the positive variances in revenues and expenses.

The Finance Committee discussed the confidential Management Discussion and Analysis (MD&A). S. Mills highlighted the project updates included in the MD&A.

The committee was informed that, as CNO builds its capacity to report on its data, it is exploring different and more meaningful approaches to reporting on privacy breaches.

## **Motion 1**

Moved by N. Thick, seconded by M. Sheculski,

That approval of the unaudited six-month financial statements as of June 30, 2021 be recommended to Council.

CARRIED

## **Budget Development Plan**

Members of the Finance Committee had received a briefing highlighting the budget development process. S. Mills highlighted the briefing, noting the new approach to budgeting, and releasing funds for projects.

In response to a question, S. Mills noted the role of the Compensation Sub-Committee is to advise the Finance Committee about whether CNO's compensation is consistent with the compensation principals approved by Council and with best practices in human resources.

## **Self-Monitoring Tool**

The self-monitoring tool supports the committee in assessing if it is fulfilling its mandate. The committee received the tool for August and confirmed that it met its terms of reference for the meeting. N. Thick reminded members that the Finance Committee Handbook, which can be found in Boardvantage, is a helpful reference tool.

In response to a question, S. Mills noted that insurance coverage remains consistent, with some adjustments for inflation and acquisitions.

## **Next Meeting**

The next meeting will be the afternoon of November 11<sup>th</sup>, 2021.

## **Conclusion**

At 2:30 p.m., on completion of the agenda and consent, the Finance Committee meeting concluded.

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Chair



## Attachment 2

**College of Nurses of Ontario**  
**Statement of Financial Position (\$)**  
**As at June 30**

	<b>2021</b>	<b>2020</b>	<b>2020</b>
	<b>June</b>	<b>June</b>	<b>December</b>
<b>ASSETS</b>			
Current assets			
Cash	33,753,290	12,293,058	46,194,137
Investments	21,318,822	40,511,394	31,747,963
Sundry receivables	(31,629)	21,164	499,231
Prepaid expenses	1,103,972	777,625	891,044
	<u>56,144,454</u>	<u>53,603,241</u>	<u>79,332,374</u>
Investments	14,329,105	10,127,611	14,278,799
Capital assets			
Furniture and fixtures	2,300,024	2,300,024	2,300,024
Equipment - non computer	1,244,766	1,127,271	1,127,271
Computer equipment	7,276,842	4,954,643	5,394,389
Building	6,835,907	6,835,907	6,835,907
Building improvements	3,923,184	3,923,184	3,923,184
Land	3,225,009	3,225,009	3,225,009
Art	44,669	44,669	44,669
	<u>24,850,399</u>	<u>22,410,706</u>	<u>22,850,452</u>
Less: Accumulated amortization	<u>(16,701,127)</u>	<u>(15,549,792)</u>	<u>(15,935,701)</u>
	<u>8,149,273</u>	<u>6,860,914</u>	<u>6,914,752</u>
Intangible Assets	4,095,159	4,095,159	4,095,159
Less: Accumulated amortization	<u>(3,943,146)</u>	<u>(3,820,968)</u>	<u>(3,886,868)</u>
	<u>152,013</u>	<u>274,191</u>	<u>208,291</u>
	<b><u>78,774,845</u></b>	<b><u>70,865,957</u></b>	<b><u>100,734,216</u></b>
<b>LIABILITIES</b>			
Current liabilities			
Accounts payable and accrued liabilities	7,504,664	6,138,774	13,820,752
Deferred membership and examination fees	24,323,234	23,792,775	44,175,488
	<u>31,827,898</u>	<u>29,931,549</u>	<u>57,996,240</u>
Accrued pension liability	-	796,546	
	<u>31,827,898</u>	<u>30,728,095</u>	<u>57,996,240</u>
<b>NET ASSETS</b>			
Net assets invested in capital assets	8,301,286	7,135,105	7,123,043
Unrestricted net assets	38,645,661	33,002,758	35,614,933
	<u>46,946,947</u>	<u>40,137,863</u>	<u>42,737,976</u>
	<b><u>78,774,845</u></b>	<b><u>70,865,957</u></b>	<b><u>100,734,216</u></b>

College of Nurses of Ontario  
Statement of Operations (\$)  
Six Months Ended June 30

	2021 Year to Date June			2020 Year to Date June			2021 Budget	
	Budget	Actual	Variance Fav/(Unfav)	Budget	Actual	Variance Fav/(Unfav)	Remaining	Approved
<b>REVENUES</b>								
Membership fees	24,843,867	25,598,920	755,053	24,690,741	25,009,860	319,119	24,844,390	50,443,310
Application assessment	3,110,825	3,313,564	202,739	2,563,925	2,924,475	360,550	1,734,686	5,048,250
Verification and transcripts	19,790	49,930	30,140	38,245	17,525	(20,720)	4,870	54,800
Interest income	384,874	403,847	18,973	665,643	687,770	22,127	234,884	638,731
Examination	1,226,700	1,457,430	230,730	1,063,000	1,053,790	(9,210)	493,570	1,951,000
Other	137,133	90,158	(46,975)	150,370	144,015	(6,355)	196,092	286,250
<b>Total Revenues</b>	<b>29,723,189</b>	<b>30,913,849</b>	<b>1,190,660</b>	<b>29,171,924</b>	<b>29,837,435</b>	<b>665,511</b>	<b>27,508,492</b>	<b>58,422,341</b>
<b>EXPENSES</b>								
Employee salaries and expenses	19,435,637	17,684,801	1,750,836	18,058,101	15,955,828	2,102,273	21,598,210	39,283,011
Contractors and consultants	3,671,068	3,296,996	374,072	4,208,598	2,886,687	1,321,911	5,891,916	9,188,912
Legal services	1,095,750	1,362,963	(267,213)	1,338,600	1,198,191	140,409	1,802,837	3,165,800
Equipment, operating supplies and other services	2,693,915	1,992,298	701,617	2,296,282	1,707,661	588,621	6,518,893	8,511,191
Taxes, utilities and depreciation	989,730	947,317	42,413	983,618	802,437	181,181	1,000,341	1,947,658
Exam fees	991,166	1,206,244	(215,078)	794,867	801,703	(6,836)	265,256	1,471,500
Non-staff remuneration and expenses	220,794	214,257	6,537	410,032	225,509	184,523	279,264	493,521
<b>Total Expenses</b>	<b>29,098,060</b>	<b>26,704,876</b>	<b>2,393,184</b>	<b>28,090,098</b>	<b>23,578,016</b>	<b>4,512,082</b>	<b>37,356,717</b>	<b>64,061,593</b>
<b>Excess of revenues over expenses/(expenses over revenues)</b>	<b>625,129</b>	<b>4,208,973</b>	<b>3,583,844</b>	<b>1,081,826</b>	<b>6,259,419</b>	<b>5,177,593</b>	<b>(9,848,225)</b>	<b>(5,639,252)</b>
<b>Opening net assets</b>		<b>42,737,976</b>			<b>33,878,443</b>			
<b>Defined Benefit cost remeasurement</b>		<b>-</b>			<b>-</b>			
<b>Closing net assets</b>		<b>46,946,949</b>			<b>40,137,862</b>			

**College of Nurses of Ontario  
Statement of Changes in Net Assets (\$)  
Six Months Ended June 30**

	<b>2021</b>			<b>2020</b>
	<b>Invested in Capital and Intangible Assets</b>	<b>Unrestricted</b>	<b>Total</b>	<b>December</b>
<b>Balance, beginning of period</b>	<b>7,123,043</b>	<b>35,614,933</b>	<b>42,737,976</b>	<b>33,878,442</b>
Excess of (expenses over revenues)/revenues over expenses	(821,704)	5,030,677	4,208,973	8,538,957
Purchase of capital assets	1,999,947	(1,999,947)	-	-
Defined benefit pension plan - remeasurements and other items	-	-	-	320,576
<b>Balance, end of period</b>	<b>8,301,286</b>	<b>38,645,663</b>	<b>46,946,949</b>	<b>42,737,975</b>

**College of Nurses of Ontario**  
**Statement of Cash Flows (\$)**  
**Six Months Ended June 30**

	<b>2021</b>	<b>2020</b>
	<b>June</b>	<b>June</b>
<b>Cash flows from operating activities</b>		
Excess of revenue over expense for the period	4,208,971	6,259,419
Adjustments to determine net cash provided by/(used in) operating activities		
Amortization of capital assets	765,426	621,242
Amortization of intangible assets	56,278	68,000
Interest not received during the year capitalized to investments	(218,081)	(375,075)
Interest received during the year previously capitalized to investments	559,849	237,818
Funding of pension benefits	(1,207,760)	(291,238)
Pension benefit expense	1,207,760	291,238
	<b>5,372,443</b>	<b>6,811,404</b>
<b>Changes in non-cash working capital items</b>		
Decrease in amounts receivable	530,860	1,499
(Increase) in prepaid expenses	(212,928)	248,599
(Decrease) in accounts payable and accrued liabilities	(6,316,088)	(7,218,245)
(Decrease) in deferred membership fees	(19,852,254)	(19,482,468)
	<b>(20,477,967)</b>	<b>(19,639,211)</b>
<b>Cash flow from investing activities</b>		
Purchase of investment	(5,991,595)	(54,133,501)
Proceeds from disposal of investments	16,028,662	37,004,274
Purchase of capital assets	(1,999,947)	(185,417)
Purchase of intangible assets	-	-
	<b>8,037,120</b>	<b>(17,314,644)</b>
Net decrease in cash and cash equivalents	(12,440,847)	(36,953,855)
Cash and cash equivalents, beginning of year	46,194,137	49,246,911
<b>Cash and cash equivalent, end of quarter</b>	<b>33,753,290</b>	<b>12,293,056</b>

## Decision Note – September 2021 Council

### Confirmation of statutory committee appointments

#### Contact for Questions or More Information

Kevin McCarthy, Director of Strategy

#### Decision

That Council confirm the following statutory committee appointments:

Inquiries, Complaints and Reports Committee (ICRC) - Appointed committee members:

- Nicole Krywionek, RN until June 2023,
- Shelley Sheedy, RN until June 2022, and
- Heather Whittle until June 2022.

Discipline and Fitness to Practise committees – Council members:

- Michael Hogard, and
- Sandra Larmour

#### Background

The Executive Committee fills mid-year committee vacancies (Article 31.03). Those appointments come into effect immediately and need to be confirmed by Council at its next meeting.

#### Inquiries, Complaints and Reports Committee

Three committee members resigned from ICRC. In July, the Executive Committee reviewed the candidates for committee appointments for 2021 and appointed Nicole Krywionek, Shelley Sheedy and Heather Whittle. The term of office of interim committee appointments ends when the term of the member they are replacing will end. All these new members will be eligible for reappointment, based on meeting the competencies.

#### Discipline Committee

Michael Hogard, RPN was acclaimed as the Council member in the Northwestern Region By-Election. In July, the Executive appointed him to fill the vacancy created when Josee Wright resigned.

On September 2<sup>nd</sup>, Sandra Larmour was appointed to Council. On September 14, based on committee requirements and Sandra's time availability, the Executive appointed her to the Discipline and Fitness to Practise committees.

## Decision Note – September 2021 Council

### Dates of Council meetings in 2022

#### Contacts for Questions or More Information

Anne Coghlan, Executive Director and CEO

#### Decision for consideration re. recommendation of the Executive

That the following be the dates for Council meetings in 2022:

- Wednesday and Thursday, March 2 and 3, 2022
- Tuesday and Wednesday, June 7 and 8, 2022
- Wednesday and Thursday, September 28 and 29, 2022
- Wednesday and Thursday, December 7 and 8, 2022.

#### Background

To allow for advance planning, Council dates for the coming year (2022) are confirmed at the September Council meeting.

In accordance with Article 7.02 of *By-Law No. 1: General*, Council meetings take place on dates set by Council. The Executive recommends the dates of meetings to Council.

The recommended dates take into account:

- the needed timing between each Council meeting, for preparatory work;
- requirements for financial reporting (e.g., the March meeting is scheduled to allow for presenting the year-end management financial statements);
- avoiding March break; and
- allowing for officer and staff participation in key stakeholder activities.

The proposed dates keep to previous patterns, with meetings scheduled over two days. However, there are unknowns, including whether meetings will remain fully or partly remote. As was done in 2021, the specific dates and times of the meetings will be adjusted as the agenda is finalized.