DRAFT AGENDA
Council Meeting
College of Homeopaths of Ontario

by teleconference

Thursday, October 6, 2022 10:00 a.m. – 3:09 p.m.

		ITEM	ACTION	FORMAT	WHO	START TIME	DURATION
1		**Call to Order**	**Information**	**Verbal**	**B Sharma**	**10:00**	**2 min**
2		**Welcome to Guests**	**Information**	**Verbal**	**B Sharma**	**10:02**	**5 min**
3		**Agenda**					
	3.1	Consent Agenda* and Committee Reports 3.1.1 Update on Action Items 3.1.2 Annual Operating Calendar 3.1.3 Membership Scorecard 3.1.4 2022-2023 Operational Goals & Objectives 3.1.5 Executive Committee 3.1.6 Inquiries, Complaints and Reports Cttee 3.1.7 Discipline Committee 3.1.8 Overview of Planning Process	**Information**	**Written**	**B Ziv**	**10:07**	**5 min**
	3.2	Adoption of Agenda	**Decision**	**Written**	**B Sharma**	**10:12**	**5 min**
4		**Declaration of Conflict of Interest**	**Decision**	**Written**	**B Sharma**	**10:17**	**3 min**
5		**Approval of minutes**					
	5.1	June 16, 2022	**Decision**	**Written**	**B Sharma**	**10:20**	**5 min**
6		**Audit**					
	6.1	Audited Financial Statements	**Decision**	**Written**	**Auditor**	**10:25**	**30 min**
	6.2	Approval of Auditor for 2023	**Decision**	**Written**	**H Broadhead**	**10:55**	**10 min**
IN CAMERA							
7		**Finances**					
	7.1	Statement of Operations	**Decision**	**Written**	**B Ziv**	**11:05**	**15 min**
	7.2	2022/2023 Budget	**Decision**	**Written**	**B Ziv**	**11:20**	**20 min**

		ITEM	ACTION	FORMAT	WHO	START TIME	DURATION
BREAK						**11:40**	**10 min**
	7.3	Progress report on strategies to strengthen financial position	**Discussion/ Decision**	**Written**	**B Ziv**	**11:50**	**60 min**
LUNCH						**12:50**	**30 min**
	7.4	Membership Retention and Recruitment Strategies	**Discussion**	**Written**	**K Harvey**	**1:20**	**30 min**
8		**Approval of *in camera* minutes**					
	8.1	June 16,2022	**Decision**	Written	**B Sharma**	**1:50**	**5 min**
9		**Recap of Strategies/Motions related to financial position**	**Decision**	**Written**	**B Ziv**	**1:55**	**15 min**
10		**Operating Plan Goals and Objectives (OPGO) 2023/2025 KRAs**	**Decision**	**Written**	**J Blanchard**	**2:10**	**10 min**
11		**Proposed Bylaw Change – 4.15 Audit Deadline**	**Decision**	**Written**	**J Blanchard**	**2:20**	**10 min**
12		**Update on Quality Assurance Program**	**Information**	**Verbal**	**J Blanchard**	**2:30**	**25 min**
13		**Other Business and Action Items Arising**	**Discussion**	**Verbal**	**B Sharma**	**2:55**	**10 min**
14		**HBS – Preparation Time**	**Information**	**Verbal**	**B Sharma**	**3:05**	**2 min**
15		**Adjournment**	**Decision**	**Verbal**	**B Sharma**	**3:07**	**2 min**

* A consent agenda is a bundle of items that is voted on, without discussion, as a package. It differentiates between routine matters not needing explanation and more complex issues needing examination. The Chair will ask if anyone wishes to remove an item from the consent agenda. Any Council member may request an item be removed so it can be discussed. To test whether an item should be included in the consent agenda, ask:

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

NOTE: Please be reminded that all meeting materials, discussions, and decisions are confidential to the College and cannot be copied or shared until they are made public.

Log-in Information

https://us02web.zoom.us/j/82254593376

Meeting ID: 822 5459 3376

Passcode: 089624

1 647 558 0588 Canada

College of Homeopaths of Ontario
Council Member Declarations
re: Conflict of Interest
as of September 27, 2022

Statement

Annually, CHO Council members complete a written declaration of Conflict of Interest which acknowledges and agrees to the premise that an actual or perceived conflict of interest can undermine confidence in the College and its ability to fulfill its public interest mandate. Council members review the College's Bylaws and conflict of interest policies and agree to take all reasonable steps to avoid any actual or perceived conflict of interest from arising and. If one cannot be avoided, Council members are required, in advance and at each meeting, to declare any real, perceived or potential conflict of interest and to remove him- or herself from any consideration of the matter in issue.

Council Member	Form Signed and Returned	Affiliations Identified	Conflict Identified
Akhlaq Ahmad	✓	Ontario Homeopathic Medical Association, Director 2017-2021 (resigned upon assuming seat on Council)	None
Heather Broadhead	✓	Rotary Club of London, member, ongoing Institute of Corp. Directors, member, ongoing Vimy Ridge Legion, member, ongoing	None
Anna Cardozo	✓	None	None
Kerri Flood	✓	CCHM, contract teacher, 2020-2021	None
Mark Heller	✓	IPAC Canada, member, ongoing Canadian College of Health Leaders, member, ongoing Ontario Long Term Care Association, member, ongoing Advantage Ontario, member, ongoing Ontario Retirement Communities Association, member, ongoing Canadian Standards Association, member, ongoing	None

Council Member	Form Signed and Returned	Affiliations Identified	Conflict Identified
Catherine Kerr	✓	None	None
Kamika McLean	✓	None	None
Sanjeev Nayyar	✓	None	None
Bhupinder Sharma	✓	LIGA Homeopathica Medicorum Internalis, NVP Canada, 2009-present Ontario Homeopathic Medical Association, member, 2017-present Canadian Homeopathic Medical College, Dean, teaching homeopathy, 2016-present Past affiliations: Community Advisory Council, William Osler Health, Brampton General Hospital, member, 2009-2019 Community Care Access Centre, board member, 2009-2017 Homeopathic Medical Educational Center of Canada, teacher, 2006-2008	None
Michael Steele	✓	Financial Planning Association (USA), Member, annual Addiction Services of Thames Valley, Board Chair, no end date MLHU Board of Health, Provincial Appointment, December 9, 2023 CIFPs, Member, annual	None
Guru Dutt Vaid	✓	None	None
Angela Vani	✓	Registrant, College of Opticians of Ontario	None

Council Meeting
College of Homeopaths of Ontario (CHO)
Minutes

Thursday, June 16, 2022
by telephone and video conference

Present

Council

Anna Cardozo	Professional (Chair)
Akhlaq Ahmad	Professional
Heather Broadhead	Public
Kerri Flood	Professional
Mark Heller	Public
Julie Hughes	Public
Catherine Kerr	Public
Kamika Mclean	Public
Sanjeev Nayyar	Professional
Bhupinder Sharma	Professional
Mike Steele	Public
Guru Dutt Vaid	Professional
Angela Vani	Professional

Staff

Janet Blanchard	Deputy Registrar
Kathryn Harvey	Communications Officer (recorder)
Heidi Mayer	Registration Officer
Basil Ziv	Registrar and CEO

Guests

Rachel Mason	Steinecke Maciura LeBlanc [item 6 only]

1 Call to Order
A. Cardozo, President, called the meeting to order at 10:02 a.m. and conducted a roll call.

2 Welcome to New Council Members
The Chair welcomed and introduced new Council member Angela Vani.

3 Agenda

3.1 Consent Agenda and Committee Reports

(Appendix 3.1 Consent Agenda Items)

(Appendix 3.1.1 Update on Action Items)

(Appendix 3.1.2 Action Items Tracking Process)

(Appendix 3.1.3 Council training schedule/plan)

(Appendix 3.1.4 Meeting calendar)

(Appendix 3.1.5 Executive Committee)

(Appendix 3.1.6 Patient Relations Committee)

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(Appendix 3.1.7 Inquiries, Complaints and Reports Committee)

(Appendix 3.1.8 Discipline Committee)

Motion # 1: To adopt the consent agenda
Moved by M. Steele, seconded by H. Broadhead

That Council adopt the consent agenda.
CARRIED

3.2 Adoption of Agenda
(Appendix 3.1 Council Agenda)

The Registrar indicated a change to item 9 in light of discussions by the Executive Committee. The issue of financial projections was deferred, and a statement of operations for the period April 1 to May 31, 2022 was added.

Motion # 2: To adopt the agenda as amended.
Moved by H. Broadhead, seconded by K. Flood

That Council adopt the agenda as amended.
CARRIED

4 Declaration of Conflict of Interest
(Appendix 4.1 Council Member Declarations re: Conflict of Interest)

None declared. No changes had been made since declarations were signed.

5 Approval of Minutes

5.1 March 10, 2022
(Appendix 5.1 Minutes, March 10, 2022 Council meeting)

Motion # 3: To approve the minutes of March 10, 2022
Moved by B. Sharma, seconded by K. Flood

That Council approve the minutes of its March 10, 2022 meeting.
CARRIED (abstaining: A. Vani)

6 Election of the Executive Committee
(Appendix 6.1 Report Form: Slate of Executive Committee and Officers Nominations)

Motion # 4: To appoint scrutineers
Moved by J. Hughes, seconded by H. Broadhead

That Council appoint as scrutineers Rachel Mason of Steinecke Maciura LeBlanc and Heidi Mayer, CHO Registration Officer.
CARRIED

Motion # 5: To appoint a Chair for the election
Moved by M. Steele, seconded by K. Flood

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That Council appoint Registrar Basil Ziv as Chair for the duration of the election process.
CARRIED

The result of the election process was as follows:

President: Bhupinder Sharma
Vice-President: Kerri Flood
Treasurer: Heather Broadhead
Member-at-Large: Anna Cardozo
Member-at-Large: Mike Steele
Past President: vacant as immediate past President is now a member at large

Motion # 6: To destroy the ballots
Moved by H. Broadhead, seconded by S. Nayyar

That Council instruct the scrutineers to destroy the ballots.
CARRIED

Registrar Basil Ziv passed the chair to the President, who asked that the outgoing President continue to chair the remainder of the meeting.

7 Operating Plan Goals and Objectives (OPGO)

7.1 2021/2022 OPGO Results

(Appendix 7.1 Operating Plan, Goals and Objectives Summary of Deliverables as of March 31, 2022)

The Registrar presented an update on the status of operating goals and objectives.

Motion # 7: To accept the report on the status of operating goals and objectives
Moved by M. Steele, seconded by C. Kerr

That Council accept the report outlining the status of 2021-2022 operating goals and objectives.
CARRIED

7.2 2022/2023 OPGO Plan

(Appendix 7.2 2022-2023 Operating Plan, Goals & Objectives)

Staff described the process undertaken to prioritize goals and objectives in the context of limited resources.

Motion # 8: To approve List A - Operating Plan Goals and Objectives for 2022/2023 and ask the Executive Committee to prioritize items on List B to complete if resources allow.
Moved by B. Sharma, seconded by M. Steele

That Council approve List A - Operating Plan Goals and Objectives for 2022/2023 and ask the Executive Committee to prioritize items on List B to complete if resources allow.
CARRIED

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Secretary's note:
As permitted by the Regulated Health Professions Act, 1991*, Schedule 2, section 7.2 there are times when it is appropriate for Council to discuss matters* in camera*. These include matters of public security; financial or personal or other matters of such a nature that it is desirable to avoid public disclosure; information related to a person involved in a criminal proceeding or civil suit; personnel matters or property acquisition; or instructions to be given to or opinions received from legal counsel. A meeting or any portion of a meeting held* in camera *is not open to the public.*

Motion # 9: To move *in camera*
Moved by H. Broadhead, seconded by C. Kerr

That Council move *in camera* at 1:23 p.m.
CARRIED

10 Bill 106: Emergency Registrant Class
(Appendix 10.1 Report Form: Emergency Registrant Class)

Staff reported that the Ministry of Health had implemented a requirement for each College to add an Emergency Registrant Class. Regulatory amendments, required policies and processes will be developed with feedback from the Registration Committee and assistance from Legal Counsel.

11 Strategic Partner Initiatives
Staff provided an update on SPI I – Registrant Education, including Resource Support for Governance Enhancement and Parts I and II of QA, noting that it will fulfill CPMF requirements, educate registrants within and beyond the QA program, enhance registrant engagement, and promote collaborative, cost-effective resource development in the short and long term.

12 Committee Appointments
(Appendix 12.1 Report Form: Committee Appointments)

Motion # 13: To approve Committee appointments
Moved by J. Hughes, seconded by H. Broadhead

That Council approve the 2022/2023 committee appointments slate as presented.
CARRIED

13 Competency-Based Governance
Deborah Adams, Registrar and CEO of the College of Registered Psychotherapists of Ontario, presented a comprehensive overview of the efforts undertaken to develop and implement competency-based governance at the CRPO.

14 Other Business and Action Items Arising
No other business.

Action Items:

1. Distribute D. Adams' slides.
2. Executive Committee to examine reasons for resignations and consider ways to address where possible.
3. Executive Committee to prioritize items on OPGO List B for completion if resources allow.
4. Develop the regulatory amendments, required policies and processes needed to establish an Emergency Registrant Class.

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15 HBS Preparation Time

Full day preparation, full day meeting
Start time: 10:02 a.m.
End time: 3:43 p.m.

16 Adjournment

Motion # 14: To adjourn
Moved by H. Broadhead, seconded by J. Hughes

That Council adjourn at 3:43 p.m.
CARRIED

The Chair agrees these minutes are an accurate reflection of the meeting.

_____ _____

, Chair **Date**

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July 4, 2022

Council Members
College of Homeopaths of Ontario
163 Queen Street East, Fourth Floor
Toronto, Ontario
M5A 1S1

Dear Council Members:

As auditors of College of Homeopaths of Ontario (the "College") for its March 31, 2022 fiscal year-end, we are required to communicate matters concerning our audit to those charged with governance. In the case of College of Homeopaths of Ontario this responsibility rests with the College's Council.

Canadian generally accepted auditing standards define “those charged with governance” as the person or persons with responsibility for overseeing the strategic direction of the entity and obligations related to the accountability of the entity.

When governance duties related to the audit of the financial statements are delegated to a subcommittee of the board or to a specific individual, it is appropriate for the auditor to communicate directly with the subcommittee or the individual.

We will issue a report to the Council at the completion of our audit which will explain the results of our audit. We will communicate other matters directly with the Council should the need arise.

Responsibilities in Relation to the Financial Statement Audit

We will conduct our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

Responsibilities in Relation to the Financial Statement Audit - Cont'd.

In making our risk assessments, we consider internal control relevant to the College's preparation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control. However, we will communicate to the Council in writing concerning any significant deficiencies in internal control relevant to the audit of the financial statements that we have identified during the audit.

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations. This responsibility includes:

- Designing, implementing and maintaining internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error;
- Selecting and applying appropriate accounting policies; and
- Making accounting estimates that are reasonable in the circumstances.

In performing our audit, we will require College of Homeopaths of Ontario's management to provide us with:

- Unrestricted access to individuals within the College from whom we determine it necessary to obtain audit evidence;
- Access to all the information relevant to the preparation of College of Homeopaths of Ontario's financial statements; and
- Any additional information that we may request from management for purposes of the audit.

Risk Based Approach

We will focus our efforts on account balances and transaction flows that we feel are more likely to result in a material misstatement to the financial statements. Specific areas we intend to focus on are outlined in the table below:

- Registration fees;
- Payroll expenses; and
- Other expenses.

Materiality

With respect to materiality, we follow the guidance provided by Canadian Auditing Standard 320 - "Materiality in Planning and Performing an Audit" (CAS 320). Accordingly, when we establish our overall audit strategy, we are required to establish an overall materiality figure for the financial statements as a whole and, if specific circumstances dictate, establish a separate materiality for a particular account balance, class of transaction or disclosure.

Based on our understanding of the College, the users of the financial statements and the guidance outlined in CAS 320 we have established overall materiality at 3% of expenses. This level of materiality will apply to all account balances, classes of transaction and disclosures.

Timing of the Audit

Based on our discussions to date with management we anticipate the following schedule for completion of the 2022 audit:

Stage of the audit/deliverable	Date
Planning	July 2022
Year-end fieldwork	Week of July 4, 2022
Draft financial statements	Early September 2022
Council meeting to approve draft financial statements	End of September 2022
Final financial statements due	September 30, 2022

Audit Team

The key members of the audit team for 2022 are shown in the table below:

Name	Responsibility
Christa Casey, CPA, CA Engagement Partner ccasey@welchllp.com (647) 288-9200 ext. 176	Responsible for the overall delivery of the audit including the quality of outputs, and signing the auditors' report.
Umar Saeed, CPA, CA Review Partner usaeed@welchllp.com (647) 288-9200 ext. 412	Responsible for reviewing the work completed by our engagement team to ensure it meets both our professional and firm standards. Responsible for communicating with management and the Board of Directors.
Samantha Slater, CPA, CA Senior Audit Manager sslater@welchllp.com (647) 288-9200 ext. 417	Responsible for coordinating and delivering the different elements of the audit work. Main point of contact for the College's finance team.

We welcome all feedback on the work of the team on an ongoing basis and ask that you identify to us any areas in which you would like to see the quality of our service improved.

Fraud Related Matters

Under Canadian Auditing Standards, we are required to communicate directly with the Audit Committee regarding fraud related matters.

To complete this component of our mandate we need to obtain certain representations from management with respect to error and fraud and establish that you have been alerted accordingly.

Please be aware that management is responsible to report all incidents of fraud, unless the matter is trivial in nature, to the Board along with their recommendation for dealing with the matter. The Board should then review the matter and advise management on how to proceed.

We will obtain written representations concerning fraud related matters from management in their Representation Letter which management will date concurrently with the release date of our audit report.

Independence

We have assessed our independence and are not aware of any relationships between the College and us that may reasonably be thought to bear on our independence. As a result, as of the date of this audit planning communication, we confirm that in our professional judgment, we are independent accountants with respect to the College, within the meaning of the rules of professional conduct of our provincial institute.

Reporting matters to those charged with governance

As explained earlier, Canadian Auditing Standard (CAS) 260 requires auditors to report audit matters to those charged with governance. We will provide this information to the College's Council upon substantial completion of our audit and the information communicated will include the following matters if any were identified:

- Details of any unadjusted misstatements in the College's accounts, along with reasons why the adjustments have not been made;
- Details of any significant deficiencies in the accounting and internal control system; and
- Details with respect to any significant difficulties encountered during the audit.

Fees

Our fees will be $9,375 (plus applicable taxes), broken down as follows:

- $8,875 (plus applicable taxes) for the audit of the financial statements for the year ended March 31, 2022; and
- $500 (plus applicable taxes) for the preparation and filing of the T3010 Registered Charity Information Return for the year ended March 31, 2022.

Fees for any additional services will be agreed upon at that time.

Should you wish to discuss the contents of this letter please feel free to contact us.

Yours truly,

Welch LLP

Christa Casey, CPA, CA
Partner

Welch LLP®
Audit • Tax • Accounting • Advisory

REPORT TO THE BOARD OF DIRECTORS

OF

COLLEGE OF HOMEOPATHS OF ONTARIO

For the year ended March 31, 2022

Prepared by:
Christa Casey, CPA, CA
Umar Saeed, CPA, CA
Partners
September 19, 2022

AUDIT STATUS

Our audit of the financial statements of College of Homeopaths of Ontario ("the College") for the year ended March 31, 2022 is substantially complete and we expect to release our auditor's report after the following outstanding matters are completed:

- Receipt of the signed management representation letter
- Board approval of the draft financial statements
- Final subsequent review up to date of approval of the financial statements
- Second partner quality review

If any significant matters arise between the date of this report and the signing of our audit report we will raise them with you. The following paragraphs provide information we are required to communicate with you in accordance with Canadian generally accepted auditing standards.

QUALITATIVE ASPECTS OF ACCOUNTING PRACTICES AND FINANCIAL REPORTING

Our audit includes consideration of the qualitative aspects of the financial reporting process, including matters that have a significant impact on the relevance, reliability, comparability, understandability and materiality of the information provided in the financial statements.

There are no matters with respect to the qualitative aspects of accounting practices that we wish to draw to your attention in relation to the financial statements for the 2022 fiscal year.

MANAGEMENT LETTER OF REPRESENTATION

It is necessary for us to obtain written representations from management as an acknowledgement of their responsibility for the fair presentation of the financial statements and as audit evidence on matters material to the financial statements. We have provided a draft of the letter of representation in Appendix A. The Registrar has committed to provide us with a signed copy of the letter on a date that coincides with the date of our auditors' report.

MISSTATEMENTS

The corrected misstatements identified during our audit are included in Appendix B. Management made all the corrections we proposed and as a result there are no unadjusted errors to report to you.

SIGNIFICANT DEFICIENCIES IN INTERNAL CONTROL

During our audit we did not identify any significant deficiencies in internal control to report to the Board.

INDEPENDENCE

Canadian generally accepted auditing standards require that we communicate at least annually with you regarding all relationships between the College and us that, in our professional judgment, may reasonably be thought to bear on our independence.

No matters have been identified that would reasonably be thought to bear on our independence. As a result, we confirm that we are independent.

FINANCIAL STATEMENT PRESENTATION

1. Significant Accounting Policies

The organization's significant accounting policies are disclosed in the notes to the financial statements. During the year there were no new accounting policies or changes to existing accounting policies.

2. Management's Judgments and Accounting Estimates

During the audit we did not encounter any situations that required significant judgments on the part of management or involved significant estimates.

DIFFICULTIES ENCOUNTERED DURING THE AUDIT

During the course of our audit we received the full co-operation of management and did not encounter any difficulties during our audit. There were no limitations on the scope of our audit work and we did not have any disagreements with management.

MATTERS SPECIFICALLY REQUIRED BY OTHER CANADIAN AUDITING STANDARDS TO BE COMMUNICATED

Other sections of Canadian Auditing Standards require us to communicate with those charged with governance in a number of specific circumstances:

- Where we encounter unusual related party transactions or significant matters related to related party transactions;
- Where we encounter other transactions that were unusual or not in the normal course of business;
- Where we suspect or detect fraud;
- Where there is inconsistency between the financial statements and other information in documents containing the financial statements; and
- Where we believe there may be non-compliance with legislative or regulatory requirements.

We did not encounter any such matters during the course of our audit.

ACKNOWLEDGEMENTS

During the course of our audit, we received considerable assistance from the College's staff and management. We would like to take this opportunity to thank them for efforts and for their constructive approach to the audit.

COLLEGE OF HOMEOPATHS OF ONTARIO

163 Queen Street East, Fourth Floor
Toronto, Ontario
M5A 1S1

Date to be determined

Welch LLP
36 Toronto Street
Suite 1070
Toronto, ON
M5C 2C5

To whom it may concern:

We are providing this letter in connection with your audit of the financial statements of College of Homeopaths of Ontario (the "College") for the year ended March 31, 2022, for the purpose of expressing an opinion as to whether the financial statements are presented fairly, in all material respects, in accordance with Canadian accounting standards for not-for-profit organizations.

We acknowledge that your examination was planned and conducted in accordance with Canadian generally accepted auditing standards so as to enable you to express an opinion on the financial statements. We understand that while your work includes an examination of the accounting system, internal control and related data to the extent you considered necessary in the circumstances, it is not designed to identify, nor can it necessarily be expected to disclose, fraud, shortages, errors and other irregularities, should any exist.

Certain representations in this letter are described as being limited to matters that are material. An item is considered material, regardless of its monetary value, if it is probable that its omission from or misstatement in the financial statements would influence the decision of a reasonable person relying on the financial statements.

We confirm, to the best of our knowledge and belief, the following representations made to you during your audit:

Financial Statements

1. We have fulfilled our responsibilities, as set out in the terms of the audit engagement dated July 4, 2022, for the preparation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations; in particular, the financial statements are fairly presented in accordance therewith.

2. The significant assumptions used by us in making accounting estimates, including those measured at fair value, are reasonable.

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For Discussion Purposes Only

Information Provided

1. We have provided you with:

   (a) Access to all information of which we are aware that is relevant to the preparation of the financial statements, such as records, documentation and other matters;

   (b) Additional information that you have requested from us for the purpose of the audit; and

   (c) Unrestricted access to persons within the College from whom you determined it necessary to obtain audit evidence

2. All transactions have been recorded in the accounting records and are reflected in the financial statements

3. We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud. We have assessed this risk as low.

4. We have disclosed to you all information in relation to fraud or suspected fraud that we are aware of and that affects the College and involves:

   (a) Management;

   (b) Employees who have significant roles in internal control; or

   (c) Others where the fraud could have a material effect on the financial statements.

5. We have disclosed to you all information in relation to allegations of fraud, or suspected fraud, affecting the College's financial statements communicated by employees, former employees, analysts, regulators or others.

6. We have disclosed to you all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing financial statements.

7. We have disclosed to you the identity of the College's related parties and all the related party relationships and transactions of which we are aware.

Tangible Capital Assets

1. All charges to tangible capital asset accounts during the year represent actual additions to and no expenditures of a capital nature were charged to the operations of the College during the year.

2. All capital assets sold or dismantled have been properly accounted for in the books of the College.

3. Appropriate rates have been used to amortize the assets over their estimated useful lives and the provisions were calculated on a basis consistent with that of the previous period.

4. The College has good title to the properties represented by the balance carried in the tangible capital asset accounts, and there are no liens, mortgages or other charges against any of the tangible capital assets shown on the books of the College.

5. Where the value of any capital assets has been impaired, this fact has been disclosed to you.

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Liabilities and Commitments

1. At the year end, with the exception of relatively immaterial obligations for which invoices had not been received or which otherwise could not readily be determined or estimated, all known liabilities of the College are included and fairly stated on the balance sheet.

2. At the year-end there were no contingent liabilities (e.g., discounted receivables or drafts, guarantees, pending or unsettled suits, matters in dispute).

3. The College has complied with all aspects of contractual agreements that could have a material effect on the financial statements in the event of non-compliance.

4. At the year-end, the College had no unusual commitments or contractual obligations of any sort that were not in the ordinary course of business or that might have an adverse effect upon the College.

5. All claims outstanding against the College or possible claims have been disclosed to you and, where appropriate, reflected in the financial statements or notes thereto.

6. We understand that any illegal or possibly illegal act could damage the College or its reputation or give rise to a claim or claims against the College. We are not aware of any violations or possible violations of law or regulations the effects of which should be considered for disclosure in the financial statements or as the basis for recording a contingent loss.

Statement of Operations

1. All of the revenues of the College for the year has been recorded in the books of account and disclosed in the financial statements.

2. The statement of operations contains no extraordinary or non-recurring items of material amount except as shown thereon.

Corporate Minutes

The minute books of the College contain an accurate record of all of the business transacted at meetings of Council and committees up to the date of this letter.

Controlled and Related Entities

The College does not have relationships with any companies or other not-for-profit organizations that involve control, joint control, or significant influence nor does the College have an economic interest in any other not-for-profit organization.

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For Discussion Purposes Only

Related Party Transactions

1. Related party relationships and transactions have been appropriately accounted for and disclosed in accordance with the requirements of Canadian accounting standards for not-for-profit organizations.

2. There have been no exchanges of goods or services with any related parties for which appropriate accounting recognition and financial statement disclosure has not been given.

Recognition, Measurement and Disclosure

1. Significant assumptions used in arriving at the fair values of financial instruments as measured and disclosed in the financial statements are reasonable and appropriate in the circumstances.

2. The College has no plans or intentions that may materially affect the carrying value or classification of assets and liabilities reflected in the financial statements.

3. The nature of all material measurement uncertainties has been appropriately disclosed in the financial statements, including all estimates where it is reasonably possible that the estimate will change in the near term and the effect of the change could be material to the financial statements.

4. The College did not undertake any material non-monetary transactions or transactions for no consideration during the financial reporting period under consideration.

Going Concern

We confirm that we have assessed the College's ability to continue as a going concern, taking into account all information which is at least twelve months from the year-end date, and we conclude that the College is able to continue as a going concern for the foreseeable future.

Other Information

Other information consists of financial or non-financial information (other than financial statements and the auditor's report thereon) included in an College's annual report. An annual report is a document, or combination of documents, prepared typically on an annual basis by management or those charged with governance in accordance with law, regulation or custom, the purpose of which is to provide owners or stakeholders with information on the College's operations and the College's financial results and financial position as set out in the financial statements.

1. We have informed you of all the documents that we expect to issue that may comprise "other information".

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General

1. We are unaware of any frauds or possible frauds having been committed by the College, its employees or any of its directors and officers and we have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.

2. We have no knowledge of any allegations of fraud or suspected fraud affecting the College's financial statements.

3. We acknowledge that we are responsible for the implementation and operation of internal controls that are designed to prevent and detect fraud and error.

4. We are unaware of any known or probable instances of non-compliance with the requirements of regulatory or governmental authorities, including their financial reporting requirements.

5. The effects of uncorrected misstatements are immaterial, both individually and in the aggregate, to the financial statements as a whole.

6. In the course of your audit of our financial statements for the year ended March 31, 2022, you have recommended certain journal entries and adjustments to our books and records as attached to this letter. We hereby acknowledge that we understand, agree with and approve of the attached journal entries which have been considered necessary to present fairly the financial position and operating results of our College.

Events Subsequent to the Year-end

No facts have been discovered which necessitate material adjustment to the year-end figures or disclosure in the notes to the financial statements.

Yours very truly,

COLLEGE OF HOMEOPATHS OF ONTARIO

Per_____
Basil Ziv, Registrar and CEO

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College of Homeopaths of Ontario
Year End: March 31, 2022
Adjustments
Rev. 10/10/01
Date: 4/1/2021 To 3/31/2022

Number	Date	Name	Account No	Reference	Annotation	Debit	Credit	Recurrence	Misstatement
1	3/31/2022	Net assets - unrestricted	32001	JJ1			896.03		
1	3/31/2022	Net assets - inv in cap assets	32002	JJ1		896.03			
		To adjust net assets to actual							
2	3/31/2022	Accrued Liabilities	27200	BB3			62,143.37		
2	3/31/2022	Consulting Professional Service:62105 Legal F	62105	BB3		62,143.37			
		To record additional legal expenses per client							
						63,039.40	**63,039.40**		

Net Income (Loss) **(130,473.79)**

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Prepared by	Reviewed by	Reviewed by	Reviewed by
SD 8/29/2022	SKS 8/30/2022		

F I N A N C I A L S T A T E M E N T S

For

COLLEGE OF HOMEOPATHS OF ONTARIO

For year ended

MARCH 31, 2022

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For Discussion Purposes Only

INDEPENDENT AUDITOR'S REPORT

To the directors of

COLLEGE OF HOMEOPATHS OF ONTARIO

Opinion

We have audited the financial statements of College of Homeopaths of Ontario (the "College"), which comprise the statement of financial position as at March 31, 2022, and the statements of operations, changes in fund balances and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at March 31, 2022 and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

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

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

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

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

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

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Auditors Responsibilities for the Audit of the Financial Statements

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

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

Chartered Professional Accountants
Licensed Public Accountants

Toronto, Ontario
Date to be determined.

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COLLEGE OF HOMEOPATHS OF ONTARIO

STATEMENT OF FINANCIAL POSITION

MARCH 31, 2022

	2022	2021
ASSETS		
CURRENT ASSETS		
Cash	$ 497,024	$ 587,142
Prepaid expenses	15,757	14,684
	512,781	601,826
TANGIBLE CAPITAL ASSETS (note 3)	1,589	2,485
	$ 514,370	$ 604,311
LIABILITIES AND FUND BALANCES		
CURRENT LIABILITIES		
Bank indebtedness (note 4)	$ 5,000	$ -
Accounts payable and accrued liabilities	133,444	39,525
Government remittances payable	30,959	42,576
Deferred registration and application fees	295,640	342,409
	465,043	424,510
FUND BALANCES		
Capital fund - internally restricted	1,589	2,485
General fund - unrestricted	37,738	167,316
Sexual abuse therapy fund - internally restricted (note 5)	10,000	10,000
	49,327	179,801
	$ 514,370	$ 604,311

Approved by the Board:

. . . . . .President

. . . . . .Vice-President

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(See accompanying notes)

WELCH LLP

COLLEGE OF HOMEOPATHS OF ONTARIO

STATEMENT OF OPERATIONS

YEAR ENDED MARCH 31, 2022

	2022			2021
	Capital Fund	General Fund	Total	Total
Revenue				
Registration fees	$ -	$ 559,587	$ 559,587	$ 553,897
Registration application fees	-	5,418	5,418	7,007
Interest and other income	-	11,303	11,303	5,860
	-	576,308	576,308	566,764
Expenses				
Salaries and benefits (note 6)	-	439,690	439,690	425,119
Professional services	-	162,687	162,687	59,974
Office and general	-	44,981	44,981	50,776
Investigations	-	41,640	41,640	24,389
Council and committees (note 7)	-	16,888	16,888	9,913
Amortization of tangible capital assets	896	-	896	2,682
	896	705,886	706,782	572,853
Excess of expenses over revenue	$ (896)	$ (129,578)	$ (130,474)	$ (6,089)

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For Discussion Purposes Only

(See accompanying notes)

WELCH LLP

COLLEGE OF HOMEOPATHS OF ONTARIO

STATEMENT OF CHANGES IN FUND BALANCES

YEAR ENDED MARCH 31, 2022

	Capital fund - internally restricted	General fund - unrestricted	Sexual abuse therapy fund - internally restricted	Total 2022	Total 2021
Fund balances, beginning of year	$ 2,485	$ 167,316	$ 10,000	$ 179,801	$ 185,890
Excess of expenses over revenue	(896)	(129,578)	-	(130,474)	(6,089)
Fund balances, end of year	$ 1,589	$ 37,738	$ 10,000	$ 49,327	$ 179,801

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For Discussion Purposes Only

(See accompanying notes)

WELCH LLP

COLLEGE OF HOMEOPATHS OF ONTARIO

STATEMENT OF CASH FLOWS

YEAR ENDED MARCH 31, 2022

	2022	2021
CASH FLOWS PROVIDED BY (USED IN)		
Operating activities		
Excess of expenses over revenue	$ (130,474)	$ (6,089)
Adjustments for:		
Amortization of tangible capital assets	896	2,682
	(129,578)	(3,407)
Changes in non-cash working capital components:		
Prepaid expenses	(1,073)	(7,624)
Accounts payable and accrued liabilities	93,919	1,788
Government remittances payable	(11,617)	15,607
Deferred registration and application fees	(46,769)	103,409
	(95,118)	109,773
CASH FLOWS FROM FINANCING ACTIVITIES		
Increase in bank indebtedness	5,000	-
INCREASE (DECREASE) IN CASH	(90,118)	109,773
CASH, BEGINNING OF YEAR	587,142	477,369
CASH, END OF YEAR	$ 497,024	$ 587,142

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For Discussion Purposes Only

(See accompanying notes)

WELCH LLP

1. NATURE OF OPERATIONS

The College of Homeopaths of Ontario (the "College") was established to allow self regulation of the homeopathy profession under the Regulated Health Professions Act, 1991 and Homeopathy Act, 2007. As the regulator and governing body of the homeopathy profession in Ontario, the College's major function is to administer the Homeopathy Act, 2007 in the public interest.

Effective April 1, 2015, the Homeopathy Act 2007 was proclaimed and the Transitional Council became an established health regulatory College.

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

2. SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations.

Fund accounting

The College uses fund accounting to report the activities of the following three funds.

1. General Fund - Unrestricted: Reports the revenue and expenses related to the core activities.
2. Capital Fund - Internally Restricted: Reports the revenue and expenses related to tangible capital assets.
3. Sexual Abuse Therapy Fund - Internally Restricted: Reports the revenue and expenses related to the sexual abuse program.

Revenue recognition

The College follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable and the amount to be received can be reasonably estimated and collections are reasonably assured.

Revenue from jurisprudence program fees, registration application fees and academic program review fees are recognized upon enrolment, application processing or program review, respectively.

Registration application fees are recognized as revenue notably over the membership year. Registration and application fees received in advance of the registration year to which they relate are recorded as deferred registration fees.

Financial instruments

The College's cash is initially recognized and subsequently measured at fair value at the financial statement date. All other financial instruments are subsequently at amortized cost.

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2. **SIGNIFICANT ACCOUNTING POLICIES** - Cont'd.

Tangible capital assets and amortization

Tangible capital assets are recorded at cost and amortized using the declining balance method over their estimated useful life at the following rates:

Computer equipment	45%
Computer software	100%
Office equipment	20%

Contributions in kind

Contributors provide a significant amount of time and absorb costs related to certain activities of the College. Because of the difficulty in determining their fair value and completeness, contributions in kind are not recorded in the financial statements. This includes the use of the College's office premises on a rent free basis from Health Force Ontario (note 8).

Use of estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Management makes accounting estimates when determining the useful life of its tangible capital assets and accrued liabilities. Actual results could differ from the estimates.

3. **TANGIBLE CAPITAL ASSETS**

Tangible capital assets consist of the following:

	2022		2021	
	Cost	Accumulated amortization	Cost	Accumulated amortization
Computer equipment	$ 23,432	$ 22,554	$ 23,432	$ 21,835
Computer software	-	-	11,836	11,836
Office equipment	1,502	791	1,502	614
	24,934	$ 23,345	36,770	$ 34,285
Less: accumulated amortization	(23,345)		(34,285)	
	$ 1,589		$ 2,485	

4. **CREDIT FACILITIES**

The College has an operating line of credit with an authorized limit of $50,000 (2021 - $50,000) that bears interest at the prime rate plus 3.5%. As at March 31, 2022, $5,000 was drawn on the operating line of credit (2021 - $nil). The credit facility is secured by a general security agreement providing a first priority interest over all assets of the College.

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5. SEXUAL ABUSE THERAPY FUND - INTERNALLY RESTRICTED

The College has internally restricted net assets in accordance with Ontario Regulation 59/94 Funding for Therapy or Counselling for Patients Sexually Abused by Members, under the Regulated Health Professions Act, 1991. The fund is set up for the purposes of a program established under section 85.7 - Funding Provide by College - of the Health Professions Procedural Code. These funds cannot be used for other purposes without the approval of the Council.

6. GOVERNMENT OF CANADA

During the year, the College received $nil (2021 - $5,500) of subsidies from the Government of Canada as part of the Temporary Wage Subsidy for Employers ("TWS") program which has been applied as a credit against salaries and benefits expenses on the statement of operations.

7. COUNCIL AND COMMITTEE EXPENSES

Certain council and committee expenses are paid directly by the Health Board Secretariat. The expenses of public appointees to the Council, made by the Lieutenant Governor in Council, will continue to be paid by the Health Board Secretariat. Total expenses paid by the Health Board Secretariat in connection with public members for the year as follows:

	2022	2021
Honorarium	$ 13,250	$ 18,800
Reimbursement of expenses	-	573
	$ 13,250	$ 19,373

Council and committee expenses, other than the payment of honorariums and reimbursement of expenses, paid directly by the College for the year were $16,888 (2021 - $9,913). Other than the payments of honorariums and reimbursement of expenses, no further amounts were paid to council members in the year (2021 - $nil).

8. OFFICE PREMISES

The College receives the use of their office premises on a rent free basis from Health Force Ontario. This arrangement will continue on an informal month-to-month basis until such time as Health Force Ontario requires the College of Homeopaths of Ontario to vacate the premises. The fair value of the current premises is not determinable.

9. UNCERTAINTY DUE TO THE ECONOMIC CONSEQUENCES OF COVID-19

In mid-March 2020, the Province of Ontario declared a state of emergency in response to the public health concerns originating from the spread of COVID-19.

On March 15, 2020, in response to the quarantine measures implemented by the provincial government to stop the spread of COVID-19, the College closed its office and has since continued operations remotely.

A high degree of uncertainty persists surrounding the full economic impact of the situation. The unpredictable nature of the spread of the disease makes it difficult to determine the length of time that the College's operations may be impacted.

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10. FINANCIAL INSTRUMENTS

The College is exposed to various risks through its financial instruments. The following analysis provides a measure of the College's risk exposure and concentrations at its fiscal year-end date.

Credit risk

The College is exposed to credit risk resulting from the possibility that parties may default on their financial obligations. The College's maximum exposure to credit risk represents the sum of the carrying value of its cash. The College's cash is deposited with a Canadian chartered bank and as a result, management believes the risk of loss is remote.

Liquidity risk

Liquidity risk is the risk that the College cannot meet a demand for cash or fund its obligations as they become due. The College has managed liquidity risk in the past by significantly reducing its core costs and increasing its membership base. The College's long-term viability depends on its ability to continue to manage its core costs in relation to the revenue from its members.

Market risk

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

i) *Currency risk*

Currency risk is the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate relative to the Canadian dollar due to changes in foreign exchange rates. The College's financial instruments are denominated in Canadian dollars and it transacts primarily in Canadian dollars. As a result, management does not believe it is exposed to significant currency risk.

ii) *Interest rate risk*

Interest rate risk is the risk that the fair value of financial instruments or future cash flows associated with the instruments will fluctuate due to changes in market interest rates. The College is not exposed to interest rate risk as the College does not currently have any interest bearing debt.

iii) *Other price risk*

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

Changes in risk

There have been no significant changes in the College's risk exposure from the prior year.

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WELCH LLP

COLLEGE OF HOMEOPATHS OF ONTARIO
REPORT FORM / BRIEFING NOTES

MEETING/DATE:	**COUNCIL, OCTOBER 6, 2022**	**DECISION**	**X**
DATE:	**SEPTEMBER 23, 2022**	**DISCUSSION**	□
ITEM NAME:	**Appointment of Auditor for 2022-2023**	**INFORMATION**	□
INITIATED BY:	**B ZIV**		
PRESENTED BY:	**B ZIV**		

OBJECTIVE OF THIS REPORT (relevance to the business of Council, potential impact/outcome of decision):

To forward to Council a recommendation to approve Welch LLP as the College's auditors for 2022-2023.

STRATEGIC DIRECTIONS: This initiative fits with the strategic direction of the College's 2022/2023 Operating Plan, Goals and Objectives in the Key Result Area or other requirement:

□ **1 Delivering on Legislative & Legal Mandate**
X 2 Practicing Good Governance
□ **3 Achieving Growth**
□ **Fulfilling RHPA Objects**
X **Meeting a Legislative/Regulatory or Bylaw Requirement**
□ **Other, specify:** _____

GUIDING LEGISLATION/BYLAW/POLICY:

Bylaw 4.12 – Appointment of Auditor
Council shall appoint an accountant or a firm of accountants licensed under the Public Accounting Act to audit the accounts of the College and to prepare financial statements for each fiscal year.

LINK TO CURRENT/FUTURE OPERATIONAL STRUCTURE:

PROTECTING THE PUBLIC: Provide a brief summary and rationale for any proposed decision and how it may impact and advance public interest and protection. I.e. How action taken or proposed demonstrates and advances public interest and protection, increases public trust and transparency, reduces risk to patients/public, and/or addresses changing public expectations.

BACKGROUND (history/pertinent info/stakeholder groups consulted/government directives/research findings/best practices. When conducting research provide full references including web links, document title, author, source, page number).:

Welch LLP has conducted the CHO's annual audit for the last four years.

RISKS / MITIGATION OPTIONS:

KEY CONSIDERATIONS:
Competitive cost, effective working relationship.

ANALYSIS:

RESOURCE IMPLICATIONS:

1. Remaining with the same auditing firm will result in no change from current human or financial resource requirements.
2. Changing firms would entail a learning curve and potentially higher costs.

OPTIONS:

1. Reappoint Welch LLP as the College's auditors for 2022-2023.
2. Explore other options.

RECOMMENDATIONS: To reappoint Welch LLP as the College's auditors for 2022-2023.

RESOLUTION:

That Council reappoint Welch LLP as the College's auditors for 2022-2023.

COLLEGE OF HOMEOPATHS OF ONTARIO
REPORT FORM / BRIEFING NOTES

MEETING/DATE:	**COUNCIL, OCTOBER 6, 2022**	**DECISION**	**X**
DATE:	**SEPTEMBER 29, 2022**	**DISCUSSION**	□
ITEM NAME:	**OPERATIONAL GOALS & OBJECTIVES: KEY RESULT AREAS FOR 2023-2025**	**INFORMATION**	□
INITIATED BY:	**B ZIV**		
PRESENTED BY:	**J BLANCHARD**		

OBJECTIVE OF THIS REPORT (relevance to the business of Council, potential impact/outcome of decision):

To discuss and confirm the Key Result Areas which will be used as the basis for the Operating Plan Goals and Objectives (OPGO) for the period of April 2023 to March 2025.

STRATEGIC DIRECTIONS: This initiative fits with the strategic direction of the College's Operating Plan, Goals and Objectives in the Key Result Area or other requirement:

□ **1 Delivering on Legislative & Legal Mandate**
X **2 Practicing Good Governance**
□ **3 Achieving Growth**
□ **Fulfilling RHPA Objects**
□ **Meeting a Legislative/Regulatory or Bylaw Requirement**
X **CPMF – College Performance Measurement Framework**
□ **Other, specify:** _____

GUIDING LEGISLATION/BYLAW/POLICY:

NONE.

PROTECTING THE PUBLIC: Provide a brief summary and rationale for any proposed decision and how it may impact and advance public interest and protection. I.e. How action taken or proposed demonstrates and advances public interest and protection, increases public trust and transparency, reduces risk to patients/public, and/or addresses changing public expectations.

Focused goals and objectives developed under Council approved Key Result Areas (KRAs) can contribute to efficient use of time and resources and promote public protection.

LINK TO CURRENT/FUTURE OPERATIONAL STRUCTURE:

The KRAs are endorsed by the Executive Committee and approved by Council and used for the basis of the annual planning of the College's Operating Plan Goals and Objectives.

BACKGROUND (history/pertinent info/stakeholder groups consulted/government directives/research findings/best practices. When conducting research provide full references including web links, document title, author, source, page number).:

2022/2023 Key Result Areas (KRA)
KRA 1: CHO Effectively Delivers it's Legislative & Legal Mandate
KRA 2: CHO to Practice Good Governance
KRA 3: CHO to Achieve Growth (Growth = Profession, Supporting Institutions, CHO Membership Levels)
The current KRA were adopted in 2019.

RISKS / MITIGATION OPTIONS:

None provided.

KEY CONSIDERATIONS:

1. The current KRAs continue to be relevant to the most pressing and urgent work of staff, committees, and the College office in fulfilment of the College's statutory mandate. This fact is likely to remain true for the next few years. As such, it is proposed that the existing KRAs be adopted for the period of April 2023 to March 2025. Working within a longer time period will help to streamline some of the planning process.
2. KRA 1 and 2 address the development and enhancement of legislative and governance requirements key to the operations of the College, its programs and services.
3. KRA 3 - CHO to Achieve Growth - continues to be critically important to the sustainability and longevity of the College.
4. The development of the 2023-2024 Operating Plan Goals and Objectives cannot be effectively completed without the approval of KRAs. Moving forward the OPGO development will continue to be an annual process based on the approved KRAs.
5. This proposal was discussed and supported by the Executive Committee at its September 13, 2022 meeting.

RESOURCE IMPLICATIONS:

There are no new or special resource requirements in the selection of KRAs.

OPTIONS:

1. Move forward by continuing with the same KRAs for the period of 2023 to 2025.
2. Modify one or more of the existing KRAs.
3. Reset all KRAs.

RECOMMENDATIONS:

1. Move forward by continuing with the same KRAs for the period of 2023 to 2025.

DEADLINES AND NEXT STEPS:

1. Start planning process for 2023/2024 OPGO in November.

RESOLUTION:

BE IT RESOLVED THAT COUNCIL APPROVE THE KEY RESULT AREAS FOR APRIL 2023 TO MARCH 2025 AS FOLLOWS:

1 CHO EFFECTIVELY DELIVERS IT'S LEGISLATIVE AND LEGAL MANDATE;
2 CHO TO PRACTICE GOOD GOVERNANCE;
3 CHO TO ACHIEVE GROWN.

Description of 2022/2023 KRAs

Key Result Area 1: CHO Effectively Delivers it's Legislative & Legal Mandate

The College's activities are outlined in the Objects under section 3 of the Health Professions Procedural Code, embedded as Schedule 2 of the Regulated Health Professions Act. The Objects give structure to the College's role to safeguard public protection by ensuring that only those individuals who are qualified, skilled and competent are registered, and only those registrants who remain competent, safe and ethical continue to practice the profession. These programs come in the form of registration, quality assurance, patient relations, inquiries/complaints and reports, fitness-to-practice and disciplines.

Key Result Area 2: CHO to Practice Good Governance

It is important for the College's Council (which acts as a Board of Directors) to manage its Governance. The CHO creates efficiency in the work they do, and with current resources, they meet their statutory objects and regulatory

mandate. With the oversight provided, the legal and ethical standing that they maintain, they uphold the reputation on behalf of the College.

On behalf of the College, the Public and Registrants, the CHO Council practices good governance allowing it to flag potential issue and respond efficiently and appropriately. They make decisions with integrity and transparency through the setting and achieving of goals, training Council and statutory committee members, with monitoring of programs and activities under its legislative and legal mandate. The CHO imparts transparent communication about its performance and the College strives to effectively manage its activities, keep its stakeholders informed and fulfil its mandate.

Key Result Area 3: CHO to Achieve Growth
(Growth = Profession, Supporting Institutions, CHO Membership Levels)

The College strives and to achieve the growth of its membership along with keeping the organization and registrant base strong and viable. In addition to delivering its legislative and legal mandate, it practices good governance. The College endeavors to work with other Colleges and system partners, where appropriate, to help execute its mandate in an effective, efficient and/or coordinated manner to ensure it is responsive to changing public expectations. Embedded in these activities, is the added intent to improve patient access to quality care and advance the College's ability to protect the public.

COLLEGE OF HOMEOPATHS OF ONTARIO
REPORT FORM / BRIEFING NOTES

MEETING/DATE:	**COUNCIL/OCTOBER 6, 2022**	**DECISION**	**X**
DATE:	**SEPTEMBER 29, 2022**	**DISCUSSION**	□
ITEM NAME:	**PROPOSED BYLAW CHANGE BYLAW 4.15 DEADLINE FOR REPORT (AUDIT)**	**INFORMATION**	□
INITIATED BY:	**B ZIV**		
PRESENTED BY:	**B ZIV / J BLANCHARD**		

OBJECTIVE OF THIS REPORT (relevance to the business of Council, potential impact/outcome of decision):
To propose a change to bylaw 4.15 and provide background on the reasons to change the timelines of releasing the report from the Auditors on the audited financial statements.

STRATEGIC DIRECTIONS: This initiative fits with the strategic direction of the College's 2021/2022 Operating Plan, Goals and Objectives in the Key Result Area or other requirement:
□ **1 Delivering on Legislative & Legal Mandate**
X **2 Practicing Good Governance**
□ **3 Achieving Growth**
□ **Fulfilling RHPA Objects**
□ **Meeting a Legislative/Regulatory or Bylaw Requirement**
□ **CPMF – College Performance Measurement Framework**
X Other, specify: Not-for-Profit Corporations Act, 2010, Section 83(1)

GUIDING LEGISLATION/BYLAW/POLICY:

EXISTING CHO BYLAW

4. Banking and Finance

4.14 – Audited Financial Statements and Report

The audited financial statements of the College, together with a signed and certified copy of the Auditor's report, shall be presented annually to Council.

4.15 – Deadline for Report

The report of the Auditor shall be prepared within one hundred and twenty (120) days of the close of the fiscal year for presentation to Council.

Not-for-Profit Corporations Act

Approval of annual financial statements

83 (1) **The directors shall** approve annual financial statements of the corporation that relate to the period that began immediately after the end of the last completed financial year and ended not **more than six months before** the annual meeting or, if the corporation has not completed a financial year, that began on the date the corporation came into existence and ended not more than six months before the annual meeting. 2010, c. 15, s. 83 (1).

Regulated Health Professions Act, 1991, Schedule 2 Health Professions Procedural Code section 94

Circulation of certain by-laws

(2) A by-law shall not be made under clause (1) (l.2), (l.3), (s), (t), (v), (w) or (y) unless the proposed by-law is circulated to every member at least 60 days before it is approved by the Council. 1998, c. 18, Sched. G, s. 22 (5).

Regulated Health Professions Act, 1991, Schedule 2 Health Professions Procedural Code section 12

Executive Committee's exercise of Council's powers

12 (1) Between the meetings of the Council, the Executive Committee has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or by-law.

Report to Council

(2) If the Executive Committee exercises a power of the Council under subsection (1), it shall report on its actions to the Council at the Council's next meeting. 1991, c. 18, Sched. 2, s. 12.

PROTECTING THE PUBLIC: Provide a brief summary and rationale for any proposed decision and how it may impact and advance public interest and protection. I.e. How action taken or proposed demonstrates and advances public interest and protection, increases public trust and transparency, reduces risk to patients/public, and/or addresses changing public expectations.

The proposed change will have no impact on the public or public protection.

LINK TO CURRENT/FUTURE OPERATIONAL STRUCTURE:

CHO hires a third-party bookkeeper and an external auditor. Information is sent from College staff to the bookkeeper (on a monthly basis) and the financial auditor at the end of each financial year (information is gather between April and August and released to the auditor between May and August).

Information provided is related to

- all banking transactions
- database transactions (new members, annual renewals, and class changes)
- expenses
- investments
- financial and legal commitments
- budget and policies/processes.

The numbers of steps are numerous and managed by two internal staff members. Information releases are also coordinating with other external parties such as legal counsel, banks, etc. Transactions and account summaries are cross checked and validated by the auditor team.

BACKGROUND (history/pertinent info/stakeholder groups consulted/government directives/research findings/best practices. When conducting research provide full references including web links, document title, author, source, page number).:

The current bylaws require the financial audit to be completed and presented within 120 days of the end of the fiscal year (i.e. by July 29). Due to the manual nature of the audit preparation, it is not realistic for College staff or the auditor to meet this deadline.

In accordance with the Not-for-Profit Corporations Act, the proposed bylaw clarifies that the process must be completed within six months of the end of the fiscal year (in the case of CHO September 30).

CHO Bylaws

4. BANKING AND FINANCE

4.14 – Audited Financial Statements and Report [unchanged]
The audited financial statements of the College, together with a signed and certified copy of the Auditor's report, shall be presented annually to Council.

4.15 – Deadline for Report
Original: The report of the Auditor shall be prepared within one hundred and twenty (120) days of the close of the fiscal year for presentation to Council.

Proposed: The report of the Auditor shall be prepared within six (6) months of the close of the fiscal year for presentation to Executive Committee or Council.

Marked: The report of the Auditor shall be prepared within six (6) months of the close of the fiscal year for presentation to Executive Committee or Council.

RISKS / MITIGATION OPTIONS:
None provided.

KEY CONSIDERATIONS:
1. Legislative requirements as detailed in the Not-for-Profit Corporations Act.
2. Staff and auditors' ability to meet the 120-day reporting requirement with limited staff and resources.
3. Executive Committee does have the power to approve the audited financial statements within the proposed timelines (as per RHPA, Schedule 2, Section 12 Executive can make any decision of Council in between Council meetings with noted exceptions). In accordance with bylaw 4.14 Council is still required to receive the Auditor's report.
4. Executive Committee does not have the authority to approve bylaw changes, however, can make recommendation to Council for consideration. As such at the September 13, 2022 meeting of the Executive Committee, the matter was discussed and the following motion was passed:

   Motion # 6: To forward the proposed bylaw change to Council for consideration.
   Moved by A. Cardozo, seconded by M. Steele

   That the matter of proposed amendment to bylaw 4.15 deadline for report (audit) be forwarded to council for consideration.
   CARRIED
5. The requirement of 60-day consultation on this bylaw is optional in accordance with section 94 of RHPA, Schedule 2. As this matter is operational in nature, Council should determine if it wishes to send this bylaw amendment out for 60-day consultation.

RESOURCE IMPLICATIONS:
There are no new or special resource requirements related to this item.

OPTIONS:
1. Accept the proposed bylaw changes as presented (with or without 60-day public consultation).
2. Accept the proposed bylaw changes with amendments (with or without 60-day public consultation).

3. Refer the matter to Governance Panel for further review and exploration.
4. Reject the proposed bylaw changes.

RECOMMENDATIONS:

1. Accept the proposed bylaw changes as presented (with or without 60-day public consultation).

DEADLINES AND NEXT STEPS:

1. Circulate for public consultation at the pleasure of Council.

RESOLUTION:

BE IT RESOLVED THAT THE MATTER OF PROPOSED AMENDMENT TO BYLAW 4.15 DEADLINE FOR REPORT (AUDIT) BE APPROVED AS PRESENTED _____[WITH/WITHOUT] 60-DAY PUBLIC CONSULTATION.