

BRIEFING NOTE

TO: Board of Directors

FROM: Fazal Khan, Registrar, CEO

DATE: October 4, 2021

SUBJECT: 5.1 Strategic Planning Monitoring Report

☐ For Decision ☐ For Information ☒ Monitoring Report

Purpose:

To provide the board with a monitoring report on the Strategic Outcomes Policy, in accordance with the monitoring report scheduled approved by the board.

Background:

The Strategic Outcomes Policy (**Appendix A**) was passed by the board in October 2019. The information contained in this monitoring report represents compliance with a reasonable interpretation of the policy. This monitoring report covers the period from January 2021 to September 2021.

The strategic outcomes set out in policy have been combined with the board's 2020-2022 Strategic Plan (**Appendix B**). Targets on the Key Performance Indicators (KPIs) have been set to measure progress on the strategic outcomes. Achievements to-date on each strategy are described in Appendix B. In some areas, KPI data will not be available until December 31, 2021.

Action Required:

The board is asked to consider the following questions:

1. Was the Registrar, CEO's interpretation of the Strategic Outcomes Policy reasonable?
2. In the board's opinion, did the Registrar, CEO comply with this policy?

POLICY TYPE: STRATEGIC OUTCOMES

1-01 Strategic Outcomes Policy

Strategic Outcomes Policy (Our Vision)

We ensure the highest standard of vision care for all Ontarians.

Further, COO works to achieve the following more specific Strategic Outcomes:

1. Accountable Professionals

- a. Practice standards and guidelines exist which are reflective of technology and changing patient preferences.

2. Public Trust

- a. Public trust exists through an excellent governance framework and effective organizational processes.
- b. Collaborative relationships with stakeholders exist that demonstrate effectiveness and trustworthiness.

Definition:

For the purposes of this policy ‘stakeholders’ are defined as including, the public, registrants, COO employees, the government, peer regulators, and others who have an interest in effective health regulation.



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Strategic End – Accountable Professionals: Practice standards and guidelines exist which are reflective of technology and changing patient preferences.						
1.0 Goal Statement: To modernize how the College regulates the dispensing of eyewear in light of changing technology in the practice environment and changing patient preferences.						
Strategy	Key Performance Indicators (KPIs)	Targets	Evidence Data	Status	2022 Goals	Action Item Achievements/Challenges
1.1 Update the Standards of Practice, which Include Guidelines for Online Dispensing, Emerging Technologies and Telepractice	% of ROs who indicate they know about and adopt the updated delegation standard guideline	60% of RO respondents	N/A Registrant survey will be carried out before the end of 2021.	N/A	80% of RO respondents (baseline in 2021 with follow up survey in 2022; potential for webinar or other CE to fill gap)	<ul style="list-style-type: none"> Standards of Practice Approved by board in December 2019, included a standard on telepractice/remote practice. The COO collaborated with Optometry to ensure consistency between Standards Completed extensive stakeholder feedback, including focus groups with industry, associations and ROs Emergency Practice Guidelines developed (April 24, 2020) and continually updated during pandemic lockdown. Guidelines around remote practice allowed ROs to continue to provide essential services to patients during pandemic lockdown. Return to Practice Guidelines developed (May 13, 2020) when medical directive lifted allowing ROs to practice with certain requirements. Continually updated as the situation unfolds and translated into French. Webinar conducted to introduce the return to practice guidelines, which was attended by 171 ROs. Standards of Practice regarding delegation and refraction considered at the December Board.
	% of ROs who are offering remote services/telepractice	n/a (<i>Collect data in 2021 to establish baseline</i>)	N/A Registrant survey will be carried out before the end of 2021.	N/A	2022 goals to be set once baseline established.	
	# page views on standards section of website	500-page views	678-page views on SOPs (175 page views), emergency (56 page views) and return to practice guidelines (447 page views) in 10 months (from January 1, 2021, to August 31, 2021)	↑	Not more than a 20% decline in page views in 2022.	
	% of patients who are using telepractice for EG and CL	n/a (<i>Commission public poll in 2021</i>)	N/A	N/A	2022 goals to be set once baseline established.	

LEGEND

✓ - Achieved

↑ - Positive trend, not yet achieved

X - Not achieved in timeframe anticipated

NA - Not yet applicable/data not yet available

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						<ul style="list-style-type: none"> Collaborated with the College of Optometrists and Association of Optometrists to develop Standards. Public poll was commissioned in 2021 and launched in September 2021. A report of the results will be available in the coming weeks. A survey was conducted in August 2021 on the clarity and utility of the Refraction standard of practice. Additional environmental scanning will be carried out in Fall 2021.
1.2 Review and Update the Quality Assurance Program and practice resources for Opticians to ensure they reflect the competencies that opticians need to dispense safely in the changing practice environment	# of hours of new professional CE developed by the COO	2 CE hours	New Accredited Jurisprudence Modules: 3 New Accredited COO Presentations: 4.5	✓	Development of at least 2 new CE activities	<ul style="list-style-type: none"> Updated Quality Assurance Program approved by board in December 2019. In its redesign of the program, the QAC obtained feedback from ROs on multiple occasions. The new program includes a new category of CE called professional growth (PG) which will allow the College to provide continuing education to ROs on topics that reflect changes in the practice environment and patient needs New jurisprudence modules created in 2020-2021: Communications, RHPA, Diversity, Equity and Inclusion. In addition, updates were made to the test for the Professional Boundaries and Sexual Abuse Prevention module. 4 COO presentations delivered in 2020 include: College update, Return to Practice Guideline Presentation/Webinar 1 COO presentation delivered in 2021: College update
	# of hours of new professional CE developed by the COO undertaken by opticians	1500 total CE hours	3719 CE hours reported by ROs in 2020* (803 hours relating to new Jurisprudence Modules; 2916 hours of new accredited COO presentations) *2021 hours will not be available until after the December 31 reporting deadline	✓	TBD based on 2021 data	
	# of practice resources developed relating to new technologies	4	2	✓	2 new resources in 2022	

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						<ul style="list-style-type: none"> Diversity, Equity and Inclusion module developed in 2020, in addition to new CE, further practice resources include: Standard 7 – Remote Practice and Technology and a blog post on telepractice and professional judgment. The QAC accredited 44 new Professional Growth activities in 2020. 22 PG activities have been accredited so far in 2021.
1.3 Build on risk of harm research to inform risk-based policy and decision making	# of College functions/processes considering or adopting the risk of harm data into decision-making frameworks or policies	0	1	✓	Consider or adopt risk of harm data into at least 1 framework or policy.	<ul style="list-style-type: none"> Standards of practice were updated having regard to environmental scans, stakeholder feedback and a consideration of risk of harm/professional judgment when opening up standards to remote practice/technology Additional environmental scans/literatures reviews conducted for the following program/policy amendments: removing gender from register, disclosure of criminal charges, vulnerable sector checks, Canadian experience and registration, CE accreditation, assessing how relational the College and its website and communications are, displaying preferred names on the public register, suspension and restriction information on the public register, a proposed spousal exemption regulation, proposed updates to the Code of Ethics, the Refraction standard of practice Research is being done on risk of harm data relating to health practitioner currency as well as the practice of myopia control
	# of enviro scans, literature reviews, research studies commissioned	3	12 program/departmental scans completed to-date	✓	At least 4 additional enviro scans, literature reviews or studies in 2022	

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COO Strategic Plan 2020 – 2022 Monitoring Report

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Strategic End – Public Trust Public trust exists through an excellent governance framework and effective organizational processes.						
2.0 Goal Statement To transform our governance framework and organizational processes to increase efficiency and public trust.						
Strategy	Key Performance Indicators (KPIs)	Targets	Evidence Data	Achieved	2022 Goals	Action Item Achievements/Challenges
2.1 Create and explore synergies among Ontario health regulators and regulatory functions	# of processes/policies streamlined	4	7 regulatory and internal processes streamlined in 2021	N/A	5 processes/policies streamlined	<ul style="list-style-type: none"> Two collaboration issues brought to HPRO, one was tasked to a working group (universal governance training) and the COO has been exploring the concept of a website/joint register Staff participated in HPRO governance working group Staff presented to management team at College of Social Workers on our journey with relational service standards The COO invited the CNO to present to the board on its own governance efforts Collaborated with Optometry on updated standards Board Chair, Vice-Chair and senior staff attended CNAR regulatory conference for second year Registrar presented to CNAR on disruptive technology and its impact on regulation/standards of practice, which was the first ever COO presentation at a regulatory conference. Embarked on two exploratory projects in the area of collaboration. 1) An integration consulting firm was retained to provide an assessment on the COO's readiness to collaborate with one or more other regulatory Colleges (report presented to the board in May 2021). 2) The
	\$ operational budget savings	n/a (<i>Targets to be set in 2022</i>)	1 working group involving a shared consultant	N/A	TBD	
	# of initiatives involved in	3	1 - Final Integration Readiness Report presented to the board in May 2021. 2 – New Delegation Standard approved in December 2020 following consultation with Optometry. 3 – Collaborations/working groups with other RHPA colleges on CPMF and procurement	✓	Explore additional opportunities for synergies and cost savings	

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						<p>College also took part in a series of back-end/operational collaborative projects with a number of other regulatory Colleges in the domains of shared HR services, shared data collection/methodology and shared procurement</p> <ul style="list-style-type: none"> • Collaborated with Optometry on COVID-19 guidelines and communications • Participated in a working group with 8 other colleges who jointly shared costs to retain a consultant for the purpose of developing a tool to manage data relating to the College Performance Measurements Framework (CPMF). • Participated in weekly collaboration calls organized by HPRO relating to the CPMF report, and bi-weekly meetings relating to COVID-19 responses, guidelines, vaccination policies, return to office protocols and other issues. • Participated in a Registrar compensation study. Results of this study are pending. • In 2021, the following processes were streamlined: enhancements to the QA portal to permit the entire portfolio to be uploaded electronically, automation of the student/intern renewal process, the introduction of French website hub to house French-language policies and forms, launching an integrated sign-in for the Registrant Portal and Jurisprudence Tool, and enhancements to internal administrative forms and processes, including expense forms, and data tracking for Peer and Practice Assessments and the annual HPDB report
2.2 Transform and Streamline Board Governance in accordance	# of governance reforms adopted	2 in 2020 1 in 2021	2020: 3 reforms adopted, with 1 pending at October meeting	✓	Explore additional	

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with Provincial, Canadian and global best practices			2021: 1, with 1 pending at October meeting		evidence-based governance reforms that are supported by literature	<ul style="list-style-type: none"> • Environmental scan completed by Governance Committee, continual environmental scanning updates being provided to the board • Support letters sent to Ontario and BC Governments, respectively, regarding the CNO and Harry Cayton reports • Reform 1 and 2: At February 2020 meeting, board approved by-law change for 3-year cooling off period for association members and changes to terminology for Board and its officers and updated board director code of conduct • Reform 3: At July 2020 meeting, board approved a pre-election training module policy which requires board election candidates to complete College training to become eligible for elections (required in 2020 election) • Reform 4: At October 2020 meeting, board approved opening up appointed committee positions to non-ROs • Reform 5: At May 2021 meeting, board approved pre-election/appointment competencies for elected board members and appointed committee members. • Pending reforms: at the October 2021 meeting, the board will consider whether to implement a process for third party evaluations of the board's performance. • The board continues to refresh its governance policies in line with its governance framework • Board approved updated Committee terms of reference updated for Executive, Governance and will consider updated terms for ICRC, Discipline and Patient Relations in
	% improvement in public trust on pre- and post-reform survey	n/a (<i>Establish baseline in 2021</i>)	N/A	N/A	Explore additional opportunities for increasing public trust	

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						<p>October 2020. Clinical Practice, Registration and QA terms are in development</p> <ul style="list-style-type: none"> Exit surveys for parties in the complaints and investigations process is under development and expected to be launched in Fall 2021.
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Strategic End – Public Trust Collaborative relationships with stakeholders exist that demonstrate effectiveness and trustworthiness.						
3.0 Goal Statement To enhance the College’s effectiveness and trustworthiness through improved stakeholder awareness and engagement.						
Strategy	Key Performance Indicators (KPIs)	Targets	Evidence Data	Achieved	2022 Goals	Action Item Achievements/Challenges
3.1 Ensure that College communications are transparent, relational and accessible	# of relational audit initiatives achieved	2	Relational audit complete Improvement in score from 2015-2020 (Scores 2.8/5 to 3.5/5)	✓	Monitor implementation of relational audit initiatives	<ul style="list-style-type: none"> Growing social media presence established, capturing College messaging and program/policy updates Revamped COO website launched in April 2020 Engaging ROs in second relational regulation audit, which will conclude this fall SEO project launched August 2020 Blog posts launched (to-date: 2 directed to ROs, 1 to public, 2 in-progress) Staff training on relational communications completed
	# of documents/words translated into French	10 documents (10,000 words)	2020: 18 documents (9,655 words) translated 2021 (to August 31): 15 documents (13,899 words) translated	✓	Identify and prioritize documents necessary for new registrants	
	# of views to College media, social media	Social media engagements : 5% increase from 2019	Total social media impressions from Jan to December 2020: 73,118. January to August 31, 2021: 45,089	↑	5% increase from 2021 to 2022 (in recognition that	

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		10% increase from 2020 to 2021	<p>Instagram: 626 followers; 1,747 engagements (2020) Instagram: 677 followers; engagements 1,328 (2021) Facebook: 374 followers; 3,423 engagements (2020)</p> <p>Facebook: 483 followers; 1,135 engagements (2021) Twitter: 74 followers; 729 engagements (2020) Twitter: 89 followers; 236 engagements (2021)</p> <p>*2019 comparison data not available*</p>		the “COVID bump” seen in 2020-2021 may not be sustainable)	<ul style="list-style-type: none"> Internal style guide developed to ensure consistent and relational communications 2019 comparison data not available; 2020 data will be used to establish baseline for 2021 2 new blog posts (RO-facing) 2021 website updates are in progress and should be launched shortly Established a French document hub and continuing efforts to translate more documents for posting to the hub, and to make the hub appear in a more prominent spot on the website Hired bilingual coordinator in Registration department to improve communication with applicants, registrants and public and to better support graduates from French language programs
	% of positive feedback received to the communication initiative	<p>n/a (<i>Establish baseline in 2020</i>)</p> <p>75%</p>	College in the second half of the year through our eblast feedback survey 84% of the total respondents either said that the eblast was “extremely clear and informative” or “very clear and informative” (5 surveys). This number has increased to 86% for 2021. (5 surveys)		Maintenance of minimum 75% satisfaction rate (in recognition of the fact that the “COVID bump” may not be sustainable	

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3.2 Increase opportunities to engage the public	# of unique page views on public-facing website section	150 views	21,401 unique page views from April 15, 2020 when the new website launched to December 31, 2020) Jan 1 to August 31, 2021: 25,538 unique page views.	✓	Maintenance of 2021 numbers	<ul style="list-style-type: none"> One topic presented to CAG to date (return to practice guidelines). It is anticipated that upcoming draft standards on delegation will be circulated to CAG, along with a request for feedback on the College website. Pop-up survey will be added to gather feedback on functionality of new website. 1,515 responses. Continued investigation for additional avenues for engagement 2 CAG surveys (code of ethics and spousal exemption reg) Leger poll launched September 2021
	Public response rates to consultations	n/a (<i>Establish baseline in 2021</i>)	N/A	N/A	Consider new strategies for public consultations	
	Increase in number of complaints	+2 more public complaints than 2019	Complaints from public 2019 – 14 Complaints from public 2020 – 17 Complaints from public 2021 (to date) - 14	↑	Maintenance of current rate of increase.	
3.3 Enhance College Board and Committee Effectiveness and Trustworthiness	Perception of board effectiveness by stakeholders, compared to board self-evaluation/workplan	n/a (<i>baseline to be set once external evaluation is carried out in 2022</i>)	N/A	N/A	N/A	<ul style="list-style-type: none"> Comprehensive training to Board in February 2020, topics include diversity and inclusion, governance, conflict of interest and fiduciary duties, and updates on regulatory trends Additional board training sessions in 2020 included meeting facilitation training, communications, financial and governance monitoring reports Pre-elections training module policy approved in July 2020, requiring candidates for election to complete training module in order to be considered eligible

LEGEND

✓ - Achieved

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NA - Not yet applicable/data not yet available

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						<ul style="list-style-type: none"> • In February 2020, the board approved a bylaw which would disqualify board and Committee members if not in compliance with QA requirements (effective 2021). • Pre-election/appointment competencies added to board elections and appointed recruitment process in 2021, as well as the approval of a new panel to carry out screening interviews • Board workplan and progress available publicly in board materials and on the College’s website • Board adopted a new self-evaluation tool in October 2020 that permits comparability with other similar boards • Updated terms of reference for all committees approved as of February 2021 • A proposal is underway for the adoption of third party board evaluation process • Adoption of land acknowledgments before every board and committee meeting • The board has participated in quarterly training sessions on Indigenous Cultural Safety and Humility as well as a comprehensive workshop in September 2021 which focused on health inequities and individual/institutional allyship • The board adopted a set of strategic goals relating to diversity, equity and inclusion in 2021.
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- LEGEND**
- ✓ - Achieved
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3.4 Enhance QA program in order to improve trust and confidence in the College	% of registrants QA Program compliance	66% compliance	For the 2020 CRE (review of 2019 portfolios), 77% were in compliance For the 2021 CRE (review of 2020 portfolios), 86% were in compliance	✓	90% compliance	<ul style="list-style-type: none"> Database project completed to allow CE upload to registrant portal, all ROs required to upload CE by December 31, 2020 (To-date, 824 registrants have uploaded to the portal) Database project completed allowing ROs to pay QA fees in portal Jurisprudence project in progress to allow test completion in portal
3.5 Improve the College's stakeholder engagement process	Response rates to College consultations	11% average response rate (based on 3083 ROs) 7% for 2021, based on the data compiled in 2020	Average 2020 to-date: 9.97% High rate: 22.8% (Return to Practice Guidelines) Low rate: 0.68% (College By-laws) 2021: One open consultation with a response rate of 1.6% Average 2021 to-date: 6.76% High rate: 13.08% (Proposed Registration Fee, Option A) Low rate: 3.24% (Proposed Update to the Code of Ethics)	✓	TBD based on 2021 data	<ul style="list-style-type: none"> Amended stakeholder policy approved by Board in October 2019 Facilitated focus groups with associations, industry and registrants conducted for standards update Internal stakeholder resource guide in development
	Eblast open rates, number of click-throughs	Eblast open rate: avg 60%	Until December 2020 Average eblast open rate: 72.42% Jan 1, to August 31, 2021 Average eblast open rate: 71.68%	✓	Maintenance of current trends	

LEGEND

✓ - Achieved

↑ - Positive trend, not yet achieved

X - Not achieved in timeframe anticipated

NA - Not yet applicable/data not yet available