

The College of Optometrists



Province of British Columbia

Annual Report 2010

Mandate

The mandate of the College is derived from section 16 of the Health Professions Act where it states "It is the duty of a college at all times to serve and protect the public, and to exercise its powers and discharge its responsibilities under all enactments in the public interest." The College does not advocate for the profession but works to serve the public.

Vision Statement

College of Optometrists of British Columbia is committed to serving and protecting the public interest by guiding the profession of optometry in British Columbia.

2011 Annual General Meeting
Sunday, April 17, 2011

J. Wosk Centre for Dialogue
Vancouver, British Columbia

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COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA 2010 ANNUAL REPORT

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College of Optometrists of BC

ANNUAL REPORT

Year 2010

As you are aware, the College of Optometrists of BC became the regulatory body for optometry in our province on March 2, 2009. It replaced the previous regulatory body, the Board of Examiners in Optometry.

As of December 31, 2010, the College is comprised of:

Elected members:

- Dr. Dale Dergousoff, Board Chair
- Dr. Tanya Flood, Vice Chair, Quality Assurance Co-Chair
- Dr. Kenneth Lawenda, Registration Committee Chair
- Dr. Jeffrey Mann, Quality Assurance Co-Chair
- Dr. Mitra Mehin, Member
- Dr. Robin Simpson, Inquiry Committee Chair

Appointed members:

- Mr. David MacPherson, Financial Advisory Group Chair
- Ms. Barbara Buchanan, Patient Relations Committee Chair
- Mr. James Grey, Public Member

College staff:

- Dr. J Barton McRoberts, Registrar
- Dr. Lawrence MacAulay, Deputy Registrar
- Dr. Thomas Adamack, Deputy Registrar
- Stanka Jovicevic, Chief Administrative Officer and Assistant to the Registrar
- Jela Vuksan, Administrative Assistant
- Inga Shishko, Receptionist

The College has completed its second year as the regulatory body for our profession under the *Health Professions Act*. During this year primary care physicians and the public have become increasingly aware of our expanded scope of practice. Due to the high standards we set for ourselves, an increasing number in the healthcare delivery field see optometrists as an indispensable access point and appropriate gatekeepers for secondary and tertiary level eye care services delivered by BC's ophthalmologists. The result has been better, more accessible and more cost-effective eye healthcare for British Columbians. As we continue to enhance our ability to keep the public of BC seeing as well as they can for as long as they can, we maintain and enhance the public's confidence in our profession. This relationship of trust demands a duty of care.

The College has fulfilled its mandate with respect to each of its committees required under the HPA. In addition to the registrants and Board members, we are indebted to the Public Representatives who serve on these committees. They are: Mr. Jeff Larcombe, Mr. Brian Newlands, Mr. Jack Corbett, Mr. David Christie and Mr. William Archibald. Neither the Discipline Committee nor the Patient Relations Committee has had a single case to process in 2010. The Inquiry Committee has been efficient and effective in processing complaints received by the Registrar and has improved the public's access to the complaint process through the College website. The Quality Assurance Committee has worked tirelessly to develop, enhance and maintain programs which will improve the already high quality of optometric practice in BC. They have also been reviewing newer automated perimeter instrumentation as these must be approved by the College before they are used for MSP reimbursed services. The Registration Committee has diligently worked to efficiently process applications for registration in this province. They have paid particular attention to developing fair, objective, transparent and unbiased procedures for evaluating applicants from other provinces or countries wishing to relocate and practice in our province. The Patient Relations Committee has approved and continues to refine guidelines for BC's optometrists to ensure that the College deals appropriately with complaints of the sexual nature. The Pharmaceutical Advisory Committee has been very active in developing Standards, Limits and Conditions for the treatment of glaucoma. Although, the PAC has diligently addressed the mandated requirements, events have conspired to frustrate our efforts to properly have anti-glaucoma agents added to the Schedule of drugs in our Regulation. There is no doubt that the ability of optometrists to treat glaucoma in certain situations would be in the public interest. The College is hopeful that this change in our scope of practice will be implemented in the near future. The Bylaws have also undergone significant amendments. The College acknowledges the expert guidance and assistance provided by Mr Daryl Beckett, Director, Professional Regulation, Ministry of Health Services in this and our ongoing expanded scope of practice.

The College Board has worked diligently at keeping the costs of running the College to the minimum amount necessary to fulfill its mandate while providing uncompromised regulation for our profession. The Financial Advisory Group has been pleased to work with our new auditor, Smythe Ratcliffe to provide the Board with the information they need for prudent financial planning. Please see our audited financial statements which are also published on the website.

The College represents our jurisdiction and is actively involved in many regulatory groups including the Health Regulatory Organization of BC (HRO), the Canadian Optometric Regulatory Authorities (CORA), the Canadian Examiners in Optometry (CEO), and the Association of Regulatory Boards of Optometry (ARBO).

One of our long serving public members, Mr. Thomas Beasley has retired from the Board. He provided depth and insight to our discussions, which will be missed. We welcome our newest public member, Mr. James Grey. Our public members enrich the board with the diversity of experience and perspective. Their contribution to our profession is greatly appreciated. Finally, our College could not function without dedicated conscientious support of the College office staff. The welfare of the College, our profession and the public we serve are the constant care of Stanka, Jela and Inga. Please, never miss an opportunity to thank them.

Our College is committed to working cooperatively with other health regulatory colleges and the Ministry of Health Services in BC, under the guidelines of the *Health Professions Act*, the *Optometrists Regulation* and the *Bylaws of the College of Optometrists of BC* to maintain and enhance the confidence of the public, other health care practitioners and government in our profession through effective regulation of optometry in BC.

**COLLEGE OF OPTOMETRISTS
OF BRITISH COLUMBIA**

**Financial Statements
December 31, 2010**

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INDEPENDENT AUDITORS' REPORT

TO THE BOARD MEMBERS OF THE COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA

We have audited the accompanying financial statements of the College of Optometrists of British Columbia, which comprise the statement of financial position as at December 31, 2010 and statements of operations and change in net assets, and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian generally accepted accounting principles 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted 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 auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation 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 entity's internal control. 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.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of the College of Optometrists of British Columbia as at December 31, 2010, and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Other Matters

The financial statements of the College of Optometrists of British Columbia as at December 31, 2009 and for the year ended were audited by another firm of auditors who expressed an unmodified opinion on those statements on January 20, 2010.

SmytheRatcliffe LLP

Chartered Accountants

Vancouver, British Columbia
February 4, 2011

Smythe Ratcliffe LLP is a member firm of both the PKF International Limited network and PKF North America, which are, respectively, a network and an association of legally independent firms and does not accept any responsibility or liability for the actions or inactions on the part of any other individual member firm or firms.

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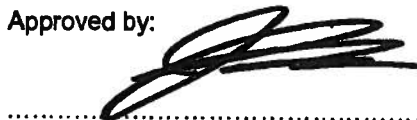
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COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Statement of Financial Position
December 31

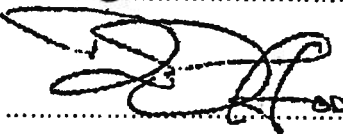
	2010	2009
Assets		
Current		
Cash	\$ 279,746	\$ 58,854
Term deposits (note 5)	1,657,152	1,623,351
Accounts receivable	2,056	6,869
Prepaid expenses	4,810	8,330
Current portion of note receivable (note 7)	0	12,750
	1,943,764	1,710,154
Furniture and Equipment (note 6)	53,988	72,918
Note Receivable (note 7)	99,000	110,000
Deposit	14,000	14,000
	\$ 2,110,752	\$ 1,907,072
Liabilities		
Current		
Accounts payable and accrued liabilities	\$ 38,510	\$ 26,470
Deferred revenue	777,781	705,688
	816,291	732,158
Net Assets		
Unrestricted	1,294,461	1,174,914
	\$ 2,110,752	\$ 1,907,072

Commitments (note 8)

Approved by:



..... College Registrar



..... Chair, Board of College

COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Statement of Operations and Changes in Net Assets
Year Ended December 31

	2010	2009
Revenues		
Annual registration fees	\$ 840,001	\$ 738,051
Registration application fees	47,920	35,570
Penalties and fines	31,381	30,872
Interest	21,489	30,319
Corporation application fees	11,025	7,000
	951,816	841,812
Expenditures		
Office services	140,949	51,702
Committees	139,043	130,286
Registrar	131,752	84,345
Salaries and benefits	125,396	200,513
Rent	80,037	74,871
Meetings and travel	78,637	59,018
Office and telephone	59,953	43,979
National and other	16,416	29,640
Accounting and audit	13,750	15,955
General legal and settlement costs	7,442	39,252
By-laws and policies	6,900	3,787
Training and education	4,755	11,006
Amortization	27,239	21,315
	832,269	765,669
Excess of Revenues over Expenditures	119,547	76,143
Net Assets, Beginning of Year	1,174,914	1,098,771
Net Assets, End of Year	\$ 1,294,461	\$ 1,174,914

COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Statement of Cash Flows
Year Ended December 31

	2010	2009
Operating Activities		
Excess of revenues over expenditures	\$ 119,547	\$ 76,143
Item not involving cash		
Amortization	27,239	21,315
	146,786	97,458
Changes in non-cash operating working capital		
Accounts receivable	4,813	(5,174)
Prepaid expenses	3,520	(5,669)
Note receivable	23,750	150
Accounts payable and accrued liabilities	12,040	8,180
Deferred revenue	72,093	63,069
	116,216	60,556
Cash Provided by Operating Activities	263,002	158,014
Investing Activities		
Purchase of furniture and equipment	(8,309)	(82,449)
Investment in term deposits	(33,801)	(656,776)
Cash Used in Investing Activities	(42,110)	(739,225)
Inflow of Cash	220,892	581,211
Cash, Beginning of Year	58,854	640,065
Cash, End of Year	\$ 279,746	\$ 58,854

See notes to financial statements.

COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Notes to Financial Statements
Year Ended December 31, 2010

1. OPERATIONS

The College of Optometrists of British Columbia (the "College") is a not-for-profit organization with the objective to serve and protect the public in relation to the practice of optometry in British Columbia.

The College's bylaws are regulated under the *Health Professions Act* of British Columbia (the "HPA"). The College establishes qualifications of members and ensures the standards set out in the HPA are maintained by the members.

The College is mandated by the HPA and is exempt from income tax under the provisions of the *Income Tax Act*.

2. SIGNIFICANT ACCOUNTING POLICIES

(a) Revenue recognition

The College follows the deferral method of accounting for registration renewal fees. Registration renewal fees are recognized as revenue in the year in which the related expenses are incurred. Registration renewal fees received in advance have been recorded as deferred revenue.

Registration fees, incorporation fees, penalties and fines are recognized as revenue when the member is invoiced.

Interest income is recognized as it is earned.

(b) Furniture and equipment

Furniture and equipment are recorded at cost less accumulated amortization and amortized on a straight-line basis as follows:

Online computer software	- 4 years
Office equipment	- 4 years
Computer equipment	- 3 years
Furniture	- 4 years

Starting in 2010, additions during the year are amortized at one-half the annual rate.

During 2010, the College changed its estimate of useful life for online computer software from 7 years to 4 years. The effect on net income for the year ended December 31, 2010, due to the change in accounting estimation, is a decrease in net income of \$9,545.

These changes have been reflected on the financial statements prospectively.

COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Notes to Financial Statements
Year Ended December 31, 2010

2. SIGNIFICANT ACCOUNTING POLICIES (Continued)

(c) Financial instruments

All financial instruments are classified into one of these five categories: held-for-trading, held-to-maturity, loans and receivables, available-for-sale financial assets or other financial liabilities. All financial instruments are measured in the statement of financial position at fair value except for loans and receivables, held-to-maturity investments and other financial liabilities, which are measured at amortized cost. Any financial instrument may be designated as held-for-trading upon initial recognition.

The College has elected to continue with the Canadian Institute of Chartered Accountants' Handbook Section 3861, "Financial Instruments - Disclosure and Presentation", as permitted for not-for-profit organizations. The College has designated cash and term deposits as held-for-trading; note receivable and accounts receivable as loans and receivables; and accounts payable and accrued liabilities as other liabilities.

(d) Use of estimates

The preparation of financial statements in conformity with Canadian generally accepted accounting principles 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. Significant estimates include the rates of amortization. Management believes the estimates are reasonable; however, actual results could differ from those estimates and could impact future results of operations and cash flows.

3. FINANCIAL INSTRUMENTS

(a) Fair value

The carrying values of cash, term deposits, accounts receivable, and accounts payable and accrued liabilities approximate their fair values because of the short-term maturity of these financial instruments.

(b) Interest rate risk

The College is not exposed to significant interest rate risk due to the short-term nature of its current monetary assets and liabilities.

(c) Credit risk

The College is exposed to credit risk on its cash and term deposits. This risk is minimized as cash and term deposits have been placed with a major Canadian financial institution. Additionally, the College is exposed to credit risk on its note receivable. This risk is minimized as the College has determined the note to be collectable.

4. COMPARATIVE FIGURES

Certain of the prior year amounts have been reclassified to conform to the current year's presentation.

COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Notes to Financial Statements
Year Ended December 31, 2010

5. TERM DEPOSITS

Term deposits are comprised of guaranteed investment certificates held at a chartered bank. The investments earn interest at 1.65% to 2.10% per annum and mature within one year.

6. FURNITURE AND EQUIPMENT

	2010		2009	
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Online computer software	\$ 76,164	\$ 30,119	\$ 46,045	\$ 58,162
Office equipment	14,423	10,594	3,829	6,020
Computer equipment	18,608	15,370	3,238	6,884
Furniture	14,530	13,654	876	1,852
	\$ 123,725	\$ 69,737	\$ 53,988	\$ 72,918

7. NOTE RECEIVABLE

The note receivable is interest-free and due from a former member as a result of various fines and restitution for legal expenses. The former member is in the process of having membership reinstated with the College and to have the balance of the note settled. However, the College does not anticipate any payments to be received during the 2011 year-end.

	2010	2009
Note receivable	\$ 99,000	\$ 122,750
Less: Current portion	0	12,750
	99,000	110,000

8. COMMITMENTS

The College is committed to minimum rental payments, which include occupancy costs and property taxes, aggregating \$234,799 over the term of a lease expiring January 31, 2014 and equipment lease payments aggregating \$35,459 over the term of a lease expiring July 12, 2015.

Commitments in each of the next five years are as follows:

2011	\$ 83,981
2012	83,981
2013	83,981
2014	14,175
2015	4,140
	\$ 270,258

COLLEGE OF OPTOMETRISTS OF BRITISH COLUMBIA
Notes to Financial Statements
Year Ended December 31, 2010

9. CAPITAL MANAGEMENT

The College considers its capital management to be comprised of its unrestricted net assets, which are funds available for future operations and are preserved so the College can have financial flexibility should opportunities arise in the future. The College's objective when managing its net assets is to provide adequate funding to ensure efficient delivery of its service activities. The College intends to achieve this objective through cost control.

The College is not exposed to externally imposed capital requirements. There have been no changes to the College's approach to capital management during the year.

CHAIR'S REPORT
Dr. Dale Dergousoff

I am pleased and honored to have had the opportunity to serve as the Chair of the College of Optometrists of BC for the past year. It has been a wonderful experience and I have had the chance to meet and work with some amazing and talented individuals in our profession, not just here in BC, but also across Canada and the US.

I want to thank all the registrants and public representatives whom have given their time to be members of the various College's committees. I can honestly say that we have a number of great optometrists and public members on the different committees. Everyone has been very committed to their work and has really taken an interest in the various regulatory matters of our profession.

Most of all the members of the board, both public and elected, have all been great contributors to the College and we have worked hard as a team. Everyone has learned the importance of our mandate and has devoted an incredible amount of their time to make sure our College is there for the public and our registrants. I thank them all for their contributions this past year. Their devotion to the profession has allowed our College to maintain its stability through some challenging times.

Once again, this past year we have dealt with some changes in our profession and continued growth of the workload within the College. I thank Stanka, Jela and Inga at the College office for all their time, loyalty and energy. They are devoted to working for all registrants, so please take the time to thank them as they are deeply committed to the betterment of the profession.

With the increased demands on the College's administrative workload, the College's Board, as you know, recently made the decision to have a single full-time Registrar. There are so many phone calls and requests that come into the College office that the Board felt the College would be better served by having a Registrar in the office at least three days a week. This was not an easy decision but one the Board felt would be best in the long run. The result of this was that the College had to discontinue the services of three amazing colleagues who were carrying out the duties of the Registrar. Dr. Bart McRoberts, Dr. Lawrence MacAulay and Dr. Thomas Adamack have all given their heart and soul to the profession, but the time commitment and needs of the College did not blend well with having them work in a part time capacity. The College will miss them but will continue to use them as advisors as they have a wealth of knowledge. Please, if you have the opportunity to speak with them, thank them for all their years of contributions to the betterment of our profession. It was a great pleasure to have worked with them at the College during the past year and all the previous years that I have been involved with the College or the Board of Examiners.

Besides his regular work as Registrar, Dr. McRoberts had put in a tremendous amount of effort trying to get optometrists here in BC included in PharmaNet. This will be a great asset to our day to day practice once we are signed up. We hope to see this come to fruition some time this year.

At the last AGM, it was announced that we were very close to having our scope expanded to include the treatment of glaucoma but only to have that pulled from us at the very last hour. Our ability to treat glaucoma will happen, but unfortunately due to

a number of challenges that the Ministry of Health Services put before us during the past year, plus the political uncertainty in the province, it is unknown when or if this expanded scope will happen this year. Yes, it is very frustrating but be assured the Pharmaceutical Advisory Committee (PAC) has been doing everything the Ministry has asked of them and everything in their power to make this happen. I applaud the work of Dr. Gerald Komarnicky, Chair of PAC, and his committee.

The Quality Assurance Committee (QA) has made some huge strides since last April. Dr. Tanya Flood and Dr. Jeffrey Mann have put together a great team and all have been working very hard towards having an exceptional QA program. Expect to hear more and more from their committee this year and in the years to come. The reality is that there needs to be an assurance that we all maintain a standard of care relative to the current Bylaws and scope of practice. The importance of a good QA program will not be diminishing so please take time every year to review the Bylaws and Policies to ensure you are in compliance with your responsibilities as an optometrist. I also encourage you to take part in the Peer Circle Reviews or even better get involved as an assessor.

The busiest committee continues to be the Inquiry Committee. Dr. Robin Simpson has done a tremendous job guiding this committee through the numerous complaints that have come before the College.

Finally, I want to thank my wife and children for making the sacrifices to allow me to serve as Chair of the College Board.

REGISTRAR'S REPORT Dr. Bart McRoberts

I became Registrar last February after the resignation of then Registrar, Dr. Lawrence MacAulay. Lawrence had been Registrar, providing exemplary service to both the Board of Examiners and then the College after its formation, for four years. Lawrence did this in addition to having a full time practice. He was totally committed to the management of the College, but due to the huge workload required for all of the various committees, taking and dealing with public complaints, overseeing all of the legal/legislative issues, and College finances as well as attending the many interprofessional, government, national and international meetings.

In taking the position, I talked Lawrence into changing places with me and becoming Deputy Registrar. He has continued to assume many responsibilities such as financial, attending some meetings, developing our jurisprudence exam and being in the College office on a regular basis. The load was still onerous, so Dr. Tom Adamack was appointed by the Board of the College with the specific responsibility of Inquiry and later Quality Assurance. These two areas alone take a huge amount of time and responsibility and Tom's efforts have made a great impact on these areas. This system has also allowed for coverage of these positions when one person or another is away on holiday, etc.

The year was quite eventful with the changes brought forth by the government in June which in effect legalized sight testing in B.C., while at the same time deregulating the practice of opticianry. While the College of Optometrists was very concerned about the lack of public safety in allowing stand alone sight testing, the College's mandate covers optometrists only. The Colleges position was made clear by the Ministry of

Health which reminded us that the College is not an advocacy group, and advocacy and regulatory bodies functions are different and should not overlap.

On March 19, the Ministry gave notice of proposed amendments to the Optometrists Regulation that would be brought into force on May 1, 2010. The only change to our legislation was to require the provision of a PD measurement to any spectacle prescription released from an optometric office. This change was made without any consultation with our College and has caused some difficulty with the public, especially in light of the fact that there is no justifiable reason for requiring this measurement other than possibly to facilitate the online sale of glasses.

The ability of optometrists to treat glaucoma was announced and was to come into effect in June 2010. For various reasons this did not happen at that time. A meeting was held under the auspices of the Ministry of Health including our College, the College of Physicians and Surgeons, the British Columbia Association of Optometrist and the BC Society of Eye Physicians and Surgeons. All of these other groups were able to make their views known. After this, the PAC chaired by Dr. Komarnicky distilled the input from this meeting as well as other groups such as the Canadian Ophthalmological Society. The final document is an excellent outcome of these consultations. It has gone forward to the Minister of Health for his signature. Unfortunately, at the time it was to be signed, the Minister resigned to run for the office of Premier. The PAC continues to oversee this file, and will continue to press for a satisfactory outcome; however, little can happen until there is a new Minister of Health.

There have been several changes in bylaws over the past year. These changes have been overseen by Dr. MacAulay, in his position as Deputy Registrar. These changes will likely continue as the profession evolves and as the bylaws are fine tuned.

I attended some meetings on behalf of the College including the CORA meeting in Newfoundland. A major topic at that meeting was the matter of registration requirements. The Board revisited this matter in December. I expect the new registration requirements are detailed in the Registration Committee Chair's report.

The issue of ordering lab tests is one that optometry in B.C. is going to have to pursue. Optometrists treat eye disease in British Columbia. Therefore, they require all the tools to do this properly. The fact is lab tests are sometimes required. Other College's registrants, besides physicians have this ability.

I have initiated the process whereby our registrants have access to PharmaNet in their offices so they can call up what medications their patients are taking. This can also be extended to determine what lab tests a patient has had, and what were the results. I can't think of another one single item which will better serve to minimize errors in prescribing for patients and make a much more efficient and effective system.

It has been my great pleasure and honour to serve the profession as your Registrar for the past year. I would like to thank all members of the College Board and the College staff for their hard work and immense time dedicated to the College and its Committees. It has also been my honour to serve with some dedicated and inspiring company – Drs. MacAulay, Adamack and Komarnicky – thank you all for making me look good.

DEPUTY REGISTRAR'S REPORT
Dr. Thomas Adamack

Since assuming the Deputy Registrar's position, the bulk of my responsibilities have been with the Inquiry Committee. This is a very active committee. In addition to the active and formal complaints fielded by the Inquiry Committee, there are approximately ten times as many telephone inquiries to the College office involving questions as to what a Registrant may or may not do. The bulk of these revolve around the fees being charged in your offices with regard to contact lenses or for releasing and/or faxing additional prescriptions for patients. The other major concern is the omission of PD measurements in the prescriptions being issued to patients. Since May 1, 2010, this is required on most prescriptions. All registrants are urged to review the Optometrists Regulation regarding this requirement.

DEPUTY REGISTRAR'S REPORT
Dr. Lawrence MacAulay

As you may know, I became one of two Deputy Registrars for the College in April 2010. Previous to that, I served as Registrar for the College, and before that as Registrar for the Board of Examiners. As Deputy, I worked under the direction of Dr. Bart McRoberts along with Dr. Tom Adamack (also a Deputy Registrar), Dr. Dergousoff (as Board Chair), the Board, Stanka and the College staff. I fulfilled duties such as working in the College office 6-8 days per month to answer inquiries, to fulfill the committee mandates, to fulfill directives from the Registrar, Chair and Board, and to help Stanka, Jela and Inga with daily College business. One of my other responsibilities was to act as a liaison to the Board's Financial Advisory Chair, Mr. David MacPherson, and to manage the financial affairs of the College. I also submitted Bylaw amendments to government on behalf of the Board, and acted as "ex-officio" for the Registration and Patient Relations Committees, and attended Health Regulatory Organizations of BC meetings, and various other meetings on behalf of the Registrar, College or College Board.

I would like to thank the following people for their co-operation in helping me fulfill my duties: Dr. Bart McRoberts, Dr. Tom Adamack, Dr. Dale Dergousoff and all the Board members, Stanka, Jela and Inga, and most importantly my wife Donna, who tolerated the many hours I spent without her, while I was completing my work for the College.

REGISTRATION COMMITTEE REPORT
Dr. Kenneth Lawenda

The Registration Committee has completed its second year since the transition from the Board of Examiners to the College, under the Health Professions Act. Our College is very fortunate to have such diverse and talented members serving on this committee: Dr. Tanya Flood, Dr. Mitra Mehin, Dr. Gerald Komarnicky, Dr. Dale Dergousoff, Dr. Lawrence MacAulay, Mr. David MacPherson, Mr. Jeff Larcombe and Mrs. Stanka Jovicevic. My Thanks to all our Committee members for the long hours and conference calls to serve our College's mandate.

As of our year end 2010 we have the total of 626 registered optometrists in BC and of that total we welcomed 63 new registrants.

As in the past, the purpose of the Committee is "to review issues regarding registration and registration renewals that have come forth due to our bylaws." We then draft policies to address those issues and they are then presented to the College Board for consideration. Those policies, once adopted are then utilized by our College staff on those issues. "

Once again, the deadline for registration renewal is October 31st. It is extremely important for all of us to make sure that all our continuing education requirements, registration renewal forms and fees are received by the Registrar on date. The Registration Committee has had a number of registrants who had not submitted their requirements on time, and therefore they were obliged to pay late fees. We impress upon you to complete these requirements on time.

The Registration Committee has dealt with many issues this year. A majority of our time this year was spent on the issue of the equivalency of the CSAO and the NBEO. This issue was of paramount interest to those wanting to be registered in the Province. This issue concerns Optometry school students preparing to take the NBEO in the States and those students at Waterloo and Montreal. At our last Board meeting, the Board of the day passed the motion that as of January 1, 2013 that CSAO or CACO be a registration requirement in British Columbia for applicants that have not previously been registered or licensed in any other jurisdiction.

I once again want to thank all of our Committee members for a job well done. The issues we deal with are sometimes easy and in some cases quite complex. But in the end, we have been fair and transparent and as mentioned by our previous Chair of Registration Committee, Dr. Mario Pozza...*"we attempt to come up with fair compromises and solutions to the problems for the benefit of all while protecting the public."*

INQUIRY COMMITTEE REPORT Dr. Robin Simpson, Chair

The Health Professions Act (HPA) requires that the College maintain an Inquiry Committee (IC), and under s. 16(2)(i.1) obligates the College "to establish and employ registration, inquiry and discipline procedures that are transparent, objective, impartial and fair;". The IC is mandated to investigate complaints against registrants which are delivered to the registrar in writing. The IC may also initiate an investigation of a registrant under s. 33(4). Upon conclusion of an investigation, there are only four options open to the Inquiry Committee under s. 33(6) of the Act:

33(6) After considering any information provided by the registrant, the IC may:

- (a) take no further action if the inquiry committee is of the view that the matter is trivial, frivolous, vexatious or made in bad faith or that the conduct or competence to which the matter relates is satisfactory;
- (b) in the case of an investigation respecting a complaint, take any action it considers appropriate to resolve the matter between the complainant and the registrant;
- (c) act under section 36; or
- (d) direct the registrar to issue a citation under section 37.

The IC is mindful of their duty to protect the public and act in the public interest, and will always treat those before them with dignity and respect.

The Chair would like to take this opportunity to express his heartfelt thanks to these members. All have volunteered on this committee for many years. Their experience was freely shared. Their support was greatly appreciated. Their dedication to this difficult task admired. It is a privilege to serve on this committee with these members: Dr. Sally Donaldson, Dr. Nina Gill, Dr. Gerald Komarnicky, Dr. Tom Adamack, Dr. Dale Dergousoff, Ms. Barbara Buchanan, Mr. Brian Newlands, Mrs. Stanka Jovicevic and Ms. Angela Westmacott (Legal Counsel).

Since the beginning of the year, the IC assumed thirteen cases in process. Eighteen new cases have been received. The Committee appointed inspectors in three cases. Twenty three cases have been decided in six meetings of the IC and one teleconference. Fifty two decision letters and one Consent Order have been drafted and approved.

Two cases have been resolved by mediation; one by the Health Profession Review Board (HPRB) and one by the College.

The committee has also completed a "Concerns and Complaints" page for the College website. The page explains the inquiry process and the Inquiry Committee's mandate, under the HPA. An online form is available to be downloaded or completed online for a complainant wishing to register a complaint with the Registrar.

Section 39.3 of the *Health Professions Act* requires public notification of Inquiry Committee and Discipline Committee decisions that involve certain matters, including consent orders in relation to a "serious matter". The Inquiry Committee has drafted an explanatory notice to the public which can be viewed on our website under the "Public Information" tab.

The Inquiry Committee was concerned that any communication to the College from a registrant regarding the activities or conduct of another registrant automatically triggers the formal complaint process under the Health Professions Act. Our concerns arise from this being an expensive, resource intensive and lengthy process that is frightening to some and that does not allow for a holistic approach to the profession. The IC feels that it would be beneficial to the profession as a whole if we could devise an informal process that would allow registrants to voice their concerns without triggering the formal complaint process. To that end the IC instituted the "Informal Dialogue Program (IDP)."

The intent of the IDP is to act as an informal process in advance of, and hopefully instead of, the formal complaint process. This will allow registrants to communicate concerns about each other through the Registrar without there being the fear of formal investigations, hearings and penalties. In order to avoid tainting any Inquiry Committee or Discipline Committee member who might participate in a formal complaint, the IDP will be under the direction of the Registrar's office.

The IC will meet every six to eight weeks to review new complaints, proceed with the investigation of existing complaints, monitor compliance with Consent Orders under s. 36, and make timely decisions regarding the disposition of complaints under s. 33(6) which are transparent, objective, impartial and fair.

QUALITY ASSURANCE COMMITTEE REPORT

Dr. Tanya Flood, Co-Chair

Dr. Jeffrey Mann, Co-Chair

Members: Dr. Katherine Pratt, Dr. Brad McDougall, Dr. Neil Paterson, Dr. Stephanie Gautier, Ms. Barbara Buchanan, Public Members, Mr. David Christie, Public Representative, Stanka Jovicevic, Staff member.

Practice Assessors: Dr. Brenda Horner, Dr. Susan Seibold, Dr. Jessica Ng, Dr. Stephanie Brooks, Dr. Jaspaul Manhas, Dr. Louise Myshak, Dr. Alan Boyco, Dr. Lawrence MacAulay, Dr. Katherine Pratt, Dr. Brad McDougall, Dr. Michael Dennis, Dr. Tanya Flood.

The Quality Assurance (QA) committee is mandated by the Health Professions Act (HPA) and it is a component of each of the Health Professions Colleges. The current QA program is best described by these four pillars:

- Continuing Education
- Practitioner/Practice Assessment
- Peer Circles
- Support/Remediation

The goal of the program is to encourage continued competence, and to support the registrants. At the same time, allowing us to meet our requirements as defined by the HPA.

QA Health Regulatory Organizations (HRO) Meeting, November 1st, 2010: Dr. Flood and Dr. Mann attended this meeting at which Mr. Daryl Beckett presented on the topics of QA and Delegation, at the request of the BC College of Registered Nurses (CRNBC). Mr. Beckett answered three questions which have been outstanding for the Colleges:

- 1) When will there be a specific QA regulation in place? He stated that there is no date. He described the many pressing priorities that the Ministry currently has and made it clear that it would likely be 3-5 years before there is any content even considered.
- 2) What might the content include? The Ministry would like to define minimum requirements, but have not yet decided on content. They are encouraging the Colleges to be creative and reasonable and do what suits their needs. He encouraged us to use QA as an umbrella under which there would be a variety of activities which ensure competence.
- 3) Do the Colleges have authority to enforce their QA program? He stated that the Colleges are enabled to have a QA program via 26.2, and that our Bylaws then give us the authority to enforce the requirements that we define. Therefore registrants must comply with all requirements set by the College.

A number of health profession Colleges attended the November 1st QA meeting hosted by the BC College of registered Nurses, including Registered Nurses, licensed Practical Nurses, Occupational therapists, Opticians, Chiropractors, Speech and Language Therapists and Denturists. We will continue to be involved in ongoing conversations with the HRO members as we enhance our QA programs.

Policy Development for 2011: It is the desire of the College Board to have an effective QA program which meets our regulatory requirements. The focus of the QA committee for 2011 is the continued development of the QA program in conjunction with the HRO group, government and our registrants. Specifically, the QA committee will be focussing on a balanced QA program which will enhance our 4 pillars of the current QA program: Continuing Education; Practitioner Assessment; Peer Circles and Support/Remediation.

Currently, the practice assessments are more “place of practice” directed than “practitioner” directed. In 2011, we hope to develop and gradually introduce a shift to “practitioner” directed assessments as we bring elements of the competency model to our program. The shift to a competency based model occurred in Alberta a few years ago under HPA direction to all health profession Colleges in that province. We anticipate a similar shift will also occur in British Columbia. We feel this is a sound decision considering our expanded scope into therapeutics. We will also continue to offer and enhance Peer Circle opportunities as part of the overall QA program.

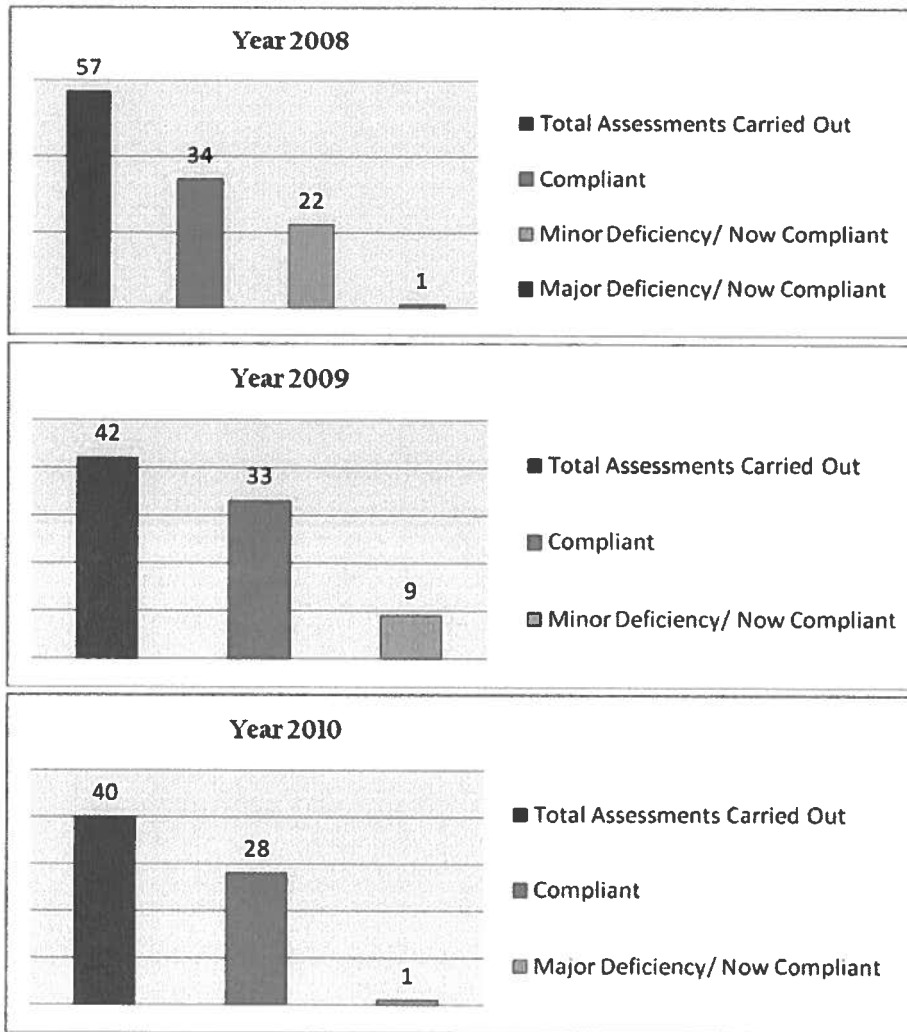
Practitioner Assessment program research: Dr. Jeff Mann and Dr. Brad McDougall attended a meeting of the Alberta College of Optometrists Continuing Competency

Committee (CCC) on October 2nd 2010. The Alberta CCC committee’s work is similar to our Quality Assurance role. The main difference is that in Alberta there is a significant emphasis on review of record keeping in the practice assessments. Record keeping is used as a window, to view and assess the patient centered clinical thinking that is occurring in the examination room. The Alberta program has been running smoothly for several years, and it continues to enjoy broad acceptance of Alberta’s registrants. Dr. Mann and Dr. McDougall attended a session with all the practice assessors as they discussed their findings of the practice assessments. We were able to observe how this committee manages record keeping concerns, where the premise is: the right test on the right patient at the right time. Their committee then decides on the proper course of remedial action to take. It is a confidential, transparent and efficient process completed within one day for each round of practice assessments.

Edmonton/ACO consultation: On January 21st, 2011, Drs. Flood, Mann and McDougall along with Stanka visited the Alberta College of Optometrists office in Edmonton and attended a “Mock review” as a training exercise at the office of the Alberta Registrar. The purpose of this visit was to observe exactly how the record keeping assessment is done, and to see how the administrative work for the reviews is handled by the ACO office staff.

Following this experience, our QA committee will develop policy for an expanded QA program for our Board to approve. Research, training and form development will flow into the next round of assessments. As well, we will be enhancing the Peer circle program and making it more readily accessible for registrants

Practice assessments 2008, 2009 and 2010: Assessments for 2008, 2009 have been completed and 2010 assessments are being finalized. During a 2010 review of the status of the QA program, it was identified that there were some outstanding items from the 2008 and 2009 practice assessments, which required completion. As well, the 2010 practice assessments required distribution to assessors and follow-up by the committee. Please see the totals for 2008, 2009 and 2010 as follows:



The deficiencies identified are generally items such as:

- signage or stationary not indicating optometric corporation
- signage or stationary not indicating some derivative of optometrist
- failing to post optometry degree, college registration certificate and/or optometric corporation permit
- posting the name of a registrant not practicing at that location
- non-secured office environment where TPAs, instruments and prescription pads could be accessed
- advertising indicating superior skill or services

To date all 2008 and 2009 deficiencies have been corrected. We are currently completing the 2010 assessments.

Visual Field Instrumentation Review: The QA committee is reviewing Visual Field Analyzer technology as it pertains to approval for Billing of Automated fields to the Medical Services Plan. The College presently approves instruments that can be used to perform fields for MSP reimbursement. There have been tremendous advances in automated perimetry instrumentation since the College originally began approving instruments. There have been recent requests from registrants for approval of new instruments, and it is time for the College to develop criterion to guide the approval of instruments. This work is in progress.

PATIENT RELATIONS COMMITTEE REPORT
Barbara Buchanan, Chair

The Patient Relations Committee establishes and maintains procedures for dealing with complaints of sexual misconduct of registrants as well as programs to prevent professional misconduct of a sexual nature, as per Bylaw 19.

The BC College of Optometrists believes in collaborating with the Colleges of other health professions in the province to promote common goals and initiatives to prevent sexual misconduct. These initiatives may include a joint education endeavor and a commitment to work together collaboratively in the future.

Building on the work of the previous Patient Relations Committee with Chair, Mr. Thomas Beasley, the Board approved the current guidelines.

These guidelines and complaint procedures are periodically reviewed with a focus on continuous quality improvement. The BC College of Optometrists views any conduct of a sexualized nature between registrant and patient to be unacceptable, and the Patient Relations Committee will work actively to address the prevention of such conduct.

The Patient Relations Committee members are: Ms. Barbara Buchanan, Mr. Jack Corbett, Dr. Joan Hansen, Dr. Mitra Mehin, Dr. Sherman Olson, Ex officio: Dr. Dale Dergousoff and Dr. Lawrence MacAulay and Staff representative: Jela Vuksan.

PHARMACEUTICAL ADVISORY COMMITTEE REPORT
Gerald S. Komarnicky, B.Sc., O.D., F.A.A.O.

The Pharmaceutical Advisory Committee (PAC) is guided by Section 19(1)(k) of the Health Profession Act (HPA) and established by Section 20 of the College Bylaws.

As per Bylaw 20(1), the PAC consists of:

- four full registrants (Dr. B. McRoberts, Dr. R. Gafur, Dr. C. Bowden and Dr. G. Komarnicky)
- one medical practitioner confirmed by the College of Physicians and Surgeons of BC as suitable for the committee (Dr. R Schertzer – glaucoma sub-specialist)
- one pharmacist confirmed by the College of Pharmacists as suitable for the committee (Ms. S. Hahn – practicing pharmacist)
- one person nominated by the Ministry of Health Services (Dr. G. MacDonald – UBC School of Pharmacy)

Bylaw 20(2) states: “The Pharmaceutical Advisory Committee must develop and recommend to the board standards, limits and conditions on the prescribing, dispensing and administering of therapeutic pharmaceutical agents by registrants in accordance with the regulations and bylaws.”

Before the College's first AGM in February 2010, the Ministry of Health granted the College permission to announce that anti-glaucoma agents would be added to the schedule of drugs in our Regulations, on June 2, 2010. Getting to that point was a year

long effort following the protocols of the HPA, the Bylaws and a request from the Ministry for the College to consult with the College of Physicians and Surgeons on this regulatory change.

As you may already be aware, in May 2010 the British Columbia Association of Optometrists (BCAO) and the BC Society of Eye Physicians and Surgeons (BCSEPS) co-signed a letter asking the Ministry for a 120 day delay in implementing the addition of anti-glaucoma agents to our schedule as these two primary stakeholders wanted to provide input into the proposed Standards Limits and Conditions (SLCs) that would govern optometry's prescribing anti-glaucoma agents. Neither advocacy group had submitted written concern to the College prior to their May letter to the Ministry.

The College posted the SLCs on its web page seeking greater input from stakeholders. (see Bylaw 20(3)) Written comments were received from optometrists, ophthalmologists, colleges and associations from across North America except the BCAO or the BCSEPS before the posted deadline.

The College convened a meeting in September 2010 so that the Ministry could remind stakeholders that the College and only the College would be responsible for establishing SLCs to practice.

The BCAO and the BCSEPS met with the PAC Chair in October 2010 so that they could comment on the proposed SLCs.

The input from stakeholders was compiled and that input was used to create a revised SLC document which was reviewed line by line by the PAC, in November before recommending it to the Board. The Board gave its approval in December 2010. Unfortunately, just as the revised SLCs were to be presented to Mr. Falcon, he resigned as Minister of Health so that he could join the leadership race in the governing BC Liberal party. As a result, no further action is anticipated until a new Minister of Health is appointed in March.

BCSEPS has taken opportunity with the delay to further cement its point of view with the Ministry. On February 5, 2011 the Ministry confirmed it is now reserving its decision and the process has lost momentum. The Ministry has called for a meeting with the College and the BCAO late in February regarding this matter.

The PAC has done those things as required in its mandate.

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