



**Attending:**

Arwen Caines – President, Regulated Member  
Heidi Knupp – Vice President, Regulated Member  
Carrie Hait – Councillor, Regulated Member  
Joyce Vayalumkal – Councillor, Regulated Member  
Dennis Fitzgerald – Councillor, Public Member  
Christie Bergman – Councillor, Public Member  
Dr. Zahid Rafiq - Councillor, Public Member

Marianne Baird – CEO and Registrar  
Benny Mutoni – Recording Secretary

**Regrets:**

Kristin Ward – Councillor, Regulated Member

***Voting Members for This Meeting – Carrie, Joyce, Heidi, Christie, Dennis & Dr. Rafiq***

**1. GATHERING**

Arwen called the meeting to order at 9:01 a.m. A roundtable was held with members reconnecting and sharing updates since the holidays.

**2. APPROVAL OF AGENDA**

With no suggested changes to the agenda, Council brought forward a motion.

**MOTION:** To approve the January 25, 2025, ACOT Council meeting agenda as presented – Dennis (MOVED) Heidi (SECONDED). CARRIED.

**3. STRATEGIC PLANNING**

***Update on Strategic Plan***

Marianne shared the following:

- ACOT continues to post on social media with a focus on examples of what OTs do in different work settings.
- Social media following continues to inch up.



- External committee members continue to report positive experiences as part of ACOT's committees. Surveys will be run again in 2025.
- ACOT's Standards of Practice and Code of Ethics roadshow has had great take up by the University of Alberta (U of A) OT department, schools, community groups and Alberta Health Services.
- Messaging in the roadshow has been added to highlight differences between ACOT, SAOT, CAOT, and employer roles and responsibilities.

Q: When you present to the U of A, is the Calgary cohort attending this virtually as well?

A: Yes, the Calgary cohort attends, as well as the Camrose cohort.

### ***Action Items***

Examples of action items completed included:

- ACOT has begun initial discussions with the U of A about development of a course on diagnosis for OTs
- ACOT started collaborating with Physiotherapists, Speech-Language Pathologists & Audiologists, and Psychology Colleges for the development of an "Informed Consent in Schools" video.
- The Council charter has been updated and has all but two signatures completed.

Q: How did the Psychologists come on board?

A: That is the grouping in schools. This is often OT, PT, but often psychology as well. It also made sense for all health professionals to have consistent messaging. Psychologists also have slightly different requirements if it's a counsellor or psychologist, so this will be highlighted as well.

Q: When is the video expected to be available?

A: We are still at the script development level.

Q: Will informed consent be part of the Continued Competence requirements?

A: It would be a small part of it. There is a member-selected goal where registrants can choose what they want to work on, and then a college-selected goal that is mandatory. ACOT could consider it for future years for the college selected goal.

### ***Practice Inquiries Activity***

Marianne reported the following:

- Ethical scenarios, informed consent, key partner inquiries and general registrant support were the frequent inquiry categories for November and December.



- The volume of inquiries was down giving ACOT time to update and run meetups about registration renewal requirements.

***Generative Thinking - Updates on Race-Based and Indigenous Identity Requirements in Bylaws, Policy/Procedures, Key Partner Analysis***

Marianne presented the updated bylaws, changing the requirement from mandatory to voluntary collection of race-based and Indigenous identity data, which is gathered only at renewal. This update is consistent with what Council agreed on for collection of these data.

Marianne discussed the updated policy and procedures, which include better privacy and data usage provisions, and recommended council approval of the new version.

Q: What are some of the biggest changes between the updated and previous policy and procedures versions?

A: The new version is more robust and covers more details about data ownership, data minimization, where the data goes, reporting and accountability, accurate and ethical data collection.

**MOTION:** To approve the edited bylaws – Dennis (MOVED) Carrie (SECONDED). CARRIED.

**MOTION:** To accept proposed the policy and procedures– Christie (MOVED) Heidi (SECONDED). CARRIED.

Marianne discussed the key partner analysis, noting that ACOT has good working partnerships with the U of A, Alberta Health Services, and the Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO).

Marianne opened the floor for feedback on any changes or additions to the key partners analysis.

Q: With the recent Alberta Health Services changes, should we consider Recovery Alberta?

A: That is a good point. This is manifesting already with some Recovery Alberta employees reaching out to ACOT with practice inquiries and employer updates.

Marianne shared that she had an opportunity to speak with the U of A Continuing Professional Education (CPE) reps about development of a course as prerequisite for OTs being able to establish a diagnosis. Marianne highlighted the following:

- The development of the course would take about a year, involving an advisory group to finalize the curriculum.
- CPE suggested the advisory group be comprise of ACOT and other healthcare providers, including those OTs already performing diagnostic functions, to inform the curriculum.



Marianne recapped previous council discussions on OTs and diagnosis to provide context for Council's new member and opened the discussion for feedback from Council.

A Council member shared that diagnosis with interprofessional collaboration will be useful, especially with the guardrails in place and this would benefit Albertans, especially in rural areas.

Another Council member added the need to highlight that diagnosis will be within the scope of practice of the OTs, for protection of the public.

Q: Do we have a list of diagnoses?

A: We do not have one as it is broad. We can develop examples and vignettes for the proposed diagnosis course to illustrate potential scenarios and guardrails.

Q: Is there risk of OTs without the experience taking on diagnoses outside their scope?

A: This would be more of a practice and discipline issue. When we look at contemporaries, like physiotherapists as an example, we learned that while many took the diagnostic imaging course and got permission to do it, not as many are using it. Just because OTs can diagnose doesn't necessarily mean they will.

Q: Are there diagnoses OTs will do on their own?

A: It will depend and would be on a case-by-case basis. For example, in some cases, OTs may need to rule out symptoms by requesting blood work, which would require interdisciplinary collaboration with other health professionals.

A: Another example is OTs in hospital neurology wards might help with dressing, moving, look at homecare needs. However, they cannot diagnose stroke or brain injury as this requires scans.

**ACTION:** Marianne to add Recovery Alberta as a new key partner.

**ACTION:** Marianne to send an email with the revised Council meeting dates and times to all members.

**ACTION:** Marianne to prepare a briefing note summarizing the discussions on permitting diagnosis activity for OTs, including survey results and information from U of A discussions.

**ACTION:** Marianne to develop examples for the proposed diagnosis course to illustrate potential scenarios and guardrails.

#### **4. COMMITTEE REPORTS**

##### ***Governance Committee***

Heidi shared that the Committee met and reviewed the Registrar Limitations (RLs) in the Council policy manual, with most of the changes made being formatting and wording changes to ensure consistency.

A Council member asked if there was a reason as to why the RLs are written in the negative.

Marianne explained that the wording “must not fail to” is part of the Carver’s Convention. Arwen added that this defines what the CEO/Registrar must not do, rather than prescribing specific actions they must take.

Marianne identified an edit in the budget document (RL 2.2 c) and suggested a section should be its own sentence rather than a sub-point.

**MOTION:** To accept the Governance Committee report with modification of RL2.2 c – Dennis (MOVED) Carrie (SECONDED). CARRIED.

### ***Competence Committee***

Marianne shared the following updates:

- The Committee completed two practice visits in November and December.
- The Committee met in January to update policies and procedures for practice visits, and review and evaluations, that previously referenced repealed legislation. The updated policies will be brought forward for approval at the February Council meeting.

Marianne explained the process of practice visits and review and evaluations, including the criteria for selecting registrants and the steps taken when ratings are not acceptable.

**MOTION:** To accept the Competence Committee report as presented – Christie (MOVED) Carrie (SECONDED). CARRIED.

### ***Acting Against Racism and Intolerance (AARI) Committee***

Marianne shared the following AARI Committee activities since the last report:

- The Committee has looked at tying ACOT’s new logic model outcomes to the AARI deliverables tracker recommendations. ACOT is working to getting this information into a web-friendly format.
- The committee is creating up to six learning modules with anti-racism content for registrants, staff, and council. This is aimed to be rolled out in 2025/2026.
- The Committee is exploring ways to collaborate with First Nations, including engaging an elder or knowledge keeper to guide their work. They are still discussing how to add value for First Nations to this collaboration.



Q: Who is creating these learning modules?

A: The Indigenous history in Canada as it relates to OT practice modules are being developed by Kaarina Valavaara who has taught these modules to U of A OT students in the past and will provide a refreshed version for ACOT. The general anti-racism modules are being developed in consultation with Sheela Ivlev, who has created US-based anti-racism and OT modules and is now collaborating with ACOT to create Canadian-based modules. Faiza Karim, on the AARI Committee, is also working on the modules

Marianne added that all this content will be reviewed by the AARI Committee.

**ACTION:** Marianne to send the AARI logic model to Council.

**MOTION:** To accept the AARI Committee report as presented – Heidi (MOVED) Christie (SECONDED). CARRIED.

### ***Onboarding Committee***

Marianne shared that the Committee has not met since April 2024 when the onboarding checklist was finalized, which will now be implemented with the newest Council member.

The Council checked in with the new Council member on how the mentorship process is going. The new Council member shared positive feedback noting significant learning and that a follow-up in six months is a good timeline to offer better feedback on the onboarding process.

**MOTION:** To accept the Onboarding Committee report as presented – Dennis (MOVED) Carrie (SECONDED). CARRIED.

## **5. CONSENT ITEMS**

### ***Review of Last Meeting's Minutes***

Council examined the November 25, 2024, ACOT Council Meeting Minutes and requested one adjustment:

- Update Page 2 formatting, removing an extra space.

**MOTION:** To approve the November 25, 2024, ACOT Council Meeting Minutes with the adjustment discussed - Joyce (MOVED) Dennis (SECONDED). CARRIED.

### ***RL 2.1: 2024-2025 Q3 Budget vs Actual***

Marianne shared the following highlights:

- Registration revenue is down from what was forecasted due to transposed numbers in the initial budget and decreased interest rates at banks.
- Administrative expenses are down due to savings with reduced mailing costs, and with lower computer and office equipment maintenance costs.
- Legal and investigation expenses have increased significantly due to four complex hearings. The budget for these expenses in 2025-2026 has been adjusted to reflect this increased usage.
- Council education expenses reflect the spending on the Canadian Network of Agencies of Regulation (CNAR) conference that Council approved to cover at actual cost.

**MOTION:** To approve RL 2.1: 2024-2025 Q3 Budget vs Actual as presented - Dennis (MOVED) Christie (SECONDED). CARRIED.

### ***RL 2.2: Budget 2025-2026***

Highlights from the report included:

- Projected revenue reflects a 3% increase in registrants based on averages from past years.
- Funds have been allocated to administration items to reflect an ACOT staff member switching from contractor to permanent part-time.
- Computer and office equipment maintenance are projected to increase next year as result of added cybersecurity measures, including web and local machine penetration tests.
- Registrar travel expenses have been reduced to more closely match actual usage in recent years.
- The budget for legal, investigations and hearings has been bumped up to reflect increased usage and serious hearings.

A Council member mentioned the possibility of requiring registrants, especially those in private practice, to obtain their own cybersecurity insurance.

Marianne shared that this can be considered and will be brought forward to a future Council meeting for further discussion.

**MOTION:** To approve RL 2.2: Budget 2025-2026 as presented - Joyce (MOVED) Dennis (SECONDED). CARRIED.

### ***RL 8: Legislative Compliance***

Marianne shared the following:

- This RL looks at whether ACOT meets the legal requirements for registrants to complete their registration and Continuing Competence Program (CCP) components each year.
- These components are baked into the permit renewal process online each year – registrants are unable to renew their registration unless they complete their CCP components.



### ***RL 8.1: Legislative Compliance – Discipline***

Marianne shared information on the reporting ACOT does to the Ministry of Health and to Council about Complaints, including Complaints Activity Reports and the complaints section in our Annual Report.

Q: Has the government ever come back and questioned our complaints in our Annual Reports?

A: ACOT has followed the guidelines provided for Annual Reports and there haven't been any questions thus far.

**MOTION:** To accept RL 8 and RL 8.1 as presented - Heidi (MOVED) Carrie (SECONDED). CARRIED.

### ***Complaints Activity***

ACOT has had a few new inquiries since November that did not result in complaints.

There are eleven open complaints, and nine closed complaints so far this year.

Q: When a registrant with a revoked permit re-applies after 3 years, what steps are taken by ACOT?

A: This would be a Registrar decision in collaboration with legal counsel. We may require an assessment focusing on likelihood to repeat the misconduct, as well as requiring a new criminal record check, and depending on their currency hours they may need to do our re-entry program.

**MOTION:** To accept the Complaints Activity Report as presented – Dennis (MOVED) Christie (SECONDED). CARRIED.

## **6. REFLECTIONS ON GOVERNANCE**

### ***Follow up Questions from Annual Council Self Evaluation Survey***

Marianne shared the results of the annual self evaluation.

One of the action items was discussing whether Council members place interests of the organization above any personal or constituent interests.

Council members had a roundtable discussion, sharing their professional affiliations to ensure transparency and address any potential conflicts of interest.

Another action item was to discuss whether Council provides sufficient direction to management about expectations for monitoring and reporting on the organization's performance in relation to strategic, business and project plans.



A Council member shared that the Governance Committee reviews the RLs, and these are reviewed by Council to provide guidance.

Q: Where did the wording of these survey items come from?

A: The Governance Committee had a subcommittee that produced the questions.

Council discussed re-examining the survey questions.

Council then discussed how the College maintains positive roles which are advisory with post secondary institutions and professional associations positively influencing the professional competency of new graduates.

Marianne shared the following:

- ACOT meets periodically with the Society of Alberta Occupational Therapists (SAOT) to collaborate within their respective roles and responsibilities.
- ACOT has collaborated with the Canadian Association of Occupational Therapist (CAOT) and OT university programs on Accountability and Equity in OT Practice.
- Marianne speaks to students in the U of A OT department about three times a year.

Council had a discussion on how the continuing competence process ensures protection of the public by only allowing those to meet the required level of ethical behavior, skills, and professionalism to remain register.

Marianne provided an overview of ACOT's CCP.

Q: Who sets the competence questions?

A: The ACOT Director of Competence and Practice.

Council suggested adding a public member to the Competence Committee for an additional public voice.

**ACTION:** Governance Committee to expand on declarations regarding conflicts of interest.

**ACTION:** Include an annual discussion in the Council meeting workflow to remind Council members of their affiliations and potential biases.

**ACTION:** Review and potentially revise the annual Council self evaluation survey questions to ensure clarity and relevance.

**ACTION:** Marianne to share roles and responsibilities of ACOT, SAOT, CAOT and employers with Council.

**ACTION:** Marianne to recruit a public member volunteer to the Competence Committee.



### ***Ends Policy***

Council provided their input on whether the Ends Policy was met during this meeting:

- Good conversation touching on things like diagnosis, and reflections on surveys, and thoughtful in terms of what we are doing to protect the public.
- We met the obligation to put the public at the forefront of the discussion.
- Lots of items were in the interest of the public.
- Effective and good meeting.
- Good participation and everyone's voice was heard.

### **7. MEETING SURVEY**

Council took four minutes to complete the Council meeting survey.

MOTION: To move the January 25, 2025, Council meeting to an in-camera session – Heidi

(MOVED), Christie (SECONDED). CARRIED.

### **8. IN CAMERA**

MOTION: To adjourn the January 25, 2025, Council meeting – Christie (MOVED), Carrie (SECONDED). CARRIED.

The meeting was adjourned at 1:27 p.m.