



Alberta College of Occupational Therapists
Council Meeting Minutes
April 26, 2025

Attending:

Arwen Caines – President, Regulated Member
Heidi Knupp – Vice President, Regulated Member
Carrie Hait – Councillor, Regulated Member
Joyce Vayalumkal – Councillor, Regulated Member
Kristin Ward – Councillor, Regulated Member
Christie Bergman – Councillor, Public Member

Marianne Baird – CEO and Registrar
Benny Mutoni – Recording Secretary

Regrets:

Dennis Fitzgerald – Councillor, Public Member
Dr. Zahid Rafiq - Councillor, Public Member

Voting Members for this Meeting – Heidi, Christie

1. GATHERING

Arwen called the meeting to order at 9:00 a.m.

2. APPROVAL OF AGENDA

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

MOTION: To approve the April 26, 2025, ACOT Council meeting agenda as presented – Christie (MOVED) Heidi (SECONDED). CARRIED.

3. GENERATIVE THINKING

SharePoint Tour

Marianne provided a brief tour of the organization's SharePoint site, highlighting key features focusing on document storage. The demonstration aimed to familiarize Council members with



the platform's capabilities and how it supports internal communication and document management.

Q: Is this on the onboarding list for new Council members?

A: It is not, but this is something we can implement, and it would be good addition.

ACTION: Marianne to have an ACOT staff member update SharePoint folders with the latest information.

ACTION: SharePoint tour to be added to the Councillor onboarding checklist.

Annual Council Self Evaluation Follow Up Questions

Marianne shared outstanding action items from Council's self evaluation from September 2024.

The first item covered the College's need to maintain positive roles which are advisory and thought provoking with post-secondary institutions and professional associations, positively influencing the professional competency of new graduates.

Marianne shared that the following is being done:

- Marianne speaks to the University of Alberta (U of A) OT students at least three times a year; welcoming new crop in the fall, speaking to the first-year students about the difference between a college and association and the obligations when registered with the college, as well as speaking to the second-year students about registration and continuing competence program requirements.
- ACOT also has a connection with the U of A faculty of Rehabilitation Medicine, which has bi-annual meetings with key partners where information on latest updates is shared.
- ACOT also meets with professional associations, the Society of Alberta Occupational Therapists (SAOT) and the Canadian Association of Occupational Therapists (CAOT) for collaborative work.

Marianne opened the floor for Council to discuss other things ACOT could be doing.

Council members shared their confidence in the work that ACOT is already doing.



The second item covered the college need to engage and connect with government leadership to allow for strategies resulting in a positive influence on the development of legislation and implementation of policies.

Marianne shared that the College has been part of the Alberta Federation of Regulated Health Professions (AFRHP) and continues to be active in its interest groups. The Federation is the main liaison with government reps.

Q: With the amalgamation of regulatory bodies and how that has been happening in different provinces to varying degrees, does the College have a voice?

A: The Federation has a voice in that and would communicate this.

Council members shared that ACOT is doing all it needs to do regarding government liaison at the moment.

Cyber Insurance Checklist

Marianne shared the checklist of considerations when determining whether OTs need cyber insurance.

Council reviewed the checklist and shared the following input:

- These are very reasonable things to be thinking about for OTs.
- It will be important to share this information to be shared in a way that most OTs can access.

Q: How will this information be shared?

A: This will be shared in ACOT's eNews.

Q: Did you use some resources to help put together this list?

A: I looked at what CAOT insurance includes and asked the ACOT OT staff. To help structure some of the questions, I also used ChatGPT.

Diagnosis Course Advisory Committee

Marianne shared that ACOT has received 14 OT applicants from a variety of practice areas with expression of interest in joining the committee. ACOT will be looking to select 6 of them to



make the committee size manageable as the committee will also have ACOT staff members and U of A representatives.

Marianne asked if one or more Council members were interested in joining.

Two regulated members were interested and agreed to alternate attendance.

One Council member suggested having a public member as well as someone from another regulatory body on the committee. Another Council member supported this as there would be different perspectives brought to the committee.

ACTION: Marianne to check with public members on Council and someone from the College of Physiotherapists of Alberta about interest in joining the Diagnosis Course Advisory Committee.

Strategic Planning Options

Marianne shared that the previous facilitator of ACOT's last strategic plan is unavailable on September 13th when Council will be getting together for its strategic planning retreat. ACOT received two proposals from alternate facilitators.

Council engaged in an in-depth discussion, particularly focusing on value for money and the long-term impact of each option.

After thorough deliberation, Council selected one of the proposals, noting the facilitator's ability to challenge organizational thinking, push the status quo, and support a long-term vision with ambitious goals. It was also noted that the selected facilitator has prior positive experiences working with one of the Council members.

A Council member suggested that Marianne confirms commitment from Council members attending considering the investment in the strategic planning.

ACTION: Marianne to reach out to Council members to confirm attendance at the strategic planning retreat taking place on September 13th, 2025 in Red Deer.

4. COMMITTEE REPORTS

Competence Committee



Marianne shared that the Committee has had two reviewer training sessions following creation of reviewer training manuals, reviewer training materials/slides, and the review and evaluation processes in our online database.

Acting Against Racism and Intolerance (AARI) Committee

Marianne shared the following:

- The Committee looked at four draft practice guidance documents.
- The Committee is continuing its work on several learning modules that will be ready in the coming months. These modules will be made available to registrants, staff and Council members.

Q: Are these modules ones that OTs can use as one of their goals for their competence?

A: Yes, it will be the college selected learning in alternate years.

MOTION: To accept the committee Competence and AARI Committee reports as presented – Heidi (MOVED) Christie (SECONDED). CARRIED.

5. CONSENT ITEMS

Review of Last Meeting's Minutes

Edits discussed included:

- Page 2: Remove “retired” and keep “Council member”.
- Page 3: Replace the third answer stating, “him forward” with “this forward”.
- Page 3: Add “overall” to the “results were not as surprising”.

MOTION: To approve the March 24, 2025, Council Meeting Minutes, with the revisions discussed - Christie (MOVED) Heidi (SECONDED). CARRIED.

RL 2: Finances

Marianne shared that KBH Chartered Professional Accountants has provided ACOT with annual external auditing services for the last 3 years, on time and on budget. KBH will continue with their services into this year.

Marianne will issue a request for proposals next year after KBH has completed five years of audit services for ACOT.



RL 2.1 2024-2025 Q4 Budget vs Actual

Marianne shared that ACOT ended the year in a better position than expected, with the following updates:

- ACOT had higher banking revenues with GICs coming due and an over \$18,000 contribution from the Canadian Institute of Health Information (CIHI) for work on updating our registrant database to CIHI's 2022 minimum data set. On the expense side, legal costs related to investigations and hearings were high this year. Other legal costs were under budget, resulting in lower than budget legal costs overall.
- Lower Council activity costs offset higher Council education costs.
- ACOT did not draw down reserves but will potentially do so this year.

Comments on the 2024-2025 fourth quarter (Q4) Budget vs Actual included:

- One Council member asked if there is an opportunity to reduce registration fees to draw down on the reserves. Marianne responded that it can be considered if ACOT is at the same financial point next year. Council agreed to bring this forward to every quarterly financial report.
- A Council member brought up potentially looking into compensation for the advisory committee for the diagnosis. Council members agreed that these are valuable positions and will discuss further on the matter in the coming weeks.

MOTION: To approve RL 2: Finances and RL 2.1: 2024-2025 Q4 Budget vs Actual as presented – Heidi (MOVED) Christie (SECONDED). CARRIED

Annual Report 1st Draft

Council viewed the first draft of the ACOT's 2024-2025 Annual Report.

The next draft will be presented at the May Council meeting. It will include graphics, updated demographics, and placeholders filled with accurate data. Edits requested in the first draft include:

-page 5, Council members – remove OT by Joyce's name.



- page 7, note Christie is Chair of the Onboarding Committee.
- page 10, check with Dr. Rafiq which letters to put beside his name in the public members' message.
- page 17, put a space before and after the hyphen after the word "competence".

6. OPEN FORUM

Marianne welcomed participants to the open forum, then invited participants and Council to introduce themselves.

Marianne then opened the floor for Robyn Telasky, Executive Director of SAOT to share updates on their advocacy efforts.

SAOT Updates:

- Extensive overhaul of the SAOT website to the OTAlberta website in the fall of 2024. The website's purpose is to provide the public with a better understanding of the role of OT. This features topics such as "managing at home," "succeeding at school," "adapting at work," and "improving mental health."
- Launch of an extensive social media campaign from October 2024 to January 2025. This was on Facebook, Instagram, and LinkedIn with the goal to increase public awareness of the role of OT.
- SAOT put together a new podcast series called Beyond Barriers. This also had a social media campaign from October 2024 to January 2025. The six-episode podcast had practicing OTs as guests, focusing on topics such as in-patient rehabilitation, continuing care, mental health and neurology. The podcast is available on Spotify, Apple Podcasts, YouTube, Audible, and on the OTAlberta website.
- SAOT was invited to a consultation process by the government of Alberta as they moved to a no-fault vehicle insurance system. An ad hoc committee was formed, and participated with ACOT in the government consultation meeting. ACOT and SAOT collaborated on a response document which has been received by government.
- SAOT's third party task force and a professional affairs committee, made of volunteer OTs is working on extended health benefit coverage for OTs. There has been success in getting OTs covered by the United Nurses of Alberta and the Alberta Retired Teachers



- Association. SAOT also did a presentation to Alberta Blue Cross and is waiting to hear back on the outcome for individual and family plans.

Marianne then opened the floor for Irving Gold, CEO of CAOT to share updates on their advocacy efforts.

CAOT Updates:

- Responding to The Truth and Reconciliation Commission of Canada (TRC) calls to action is a priority. CAOT had a meeting with a band to discuss collaboration with one of the key conversations being around Jordan's Principle funding.
- CAOT is also advocating for active team-based primary care to be recognized as part of primary care, including collaboration with the Canadian Medical Association (CMA)
- Finding adequate evidence-based data has been a challenge for advocacy of the OT profession. CAOT is partnering up with organizations and medical professionals to do data collection.
- CAOT is also working on the disability benefit and tax credit alongside the CMA.
- CAOT is working on outreach and involvement of students to learn more about their priorities and vision for the future. This includes setting up more formal structures for students to provide meaningful input for CAOT.
- In the upcoming year, CAOT is looking to broaden the advocacy for OT, including advocating for student loan forgiveness for OTs.

ACTION: Marianne to have a discussion with CAOT on OT data and how this can be leveraged.

Marianne moved the discussion to Council's recent decision to permit OTs to establish diagnosis once they have successfully completed the diagnosis course approved by Council and applied to be part of an ACOT diagnosis roster.

Marianne shared that ACOT is in the process of recruiting to a diagnosis course advisory committee and has received 14 applications for the committee role. The advisory committee will be tasked with agreeing on a course curriculum, monitoring curriculum development, pilot testing, and measuring the results of the pilot testing. It is anticipated that the course will be ready for pilot testing in 12 to 18 months, and the course will be approximately 18 weeks in length.

Marianne also shared a summary of the high-level course components that the advisory committee will refine and update into individual course module requirements. While course development is underway, ACOT will work with its online registration system provider to create the diagnosis roster, which will work similarly to how the current acupuncture roster works. The advisory committee will also work on a comprehensive list of diagnoses that OTs will be able to establish. The course will focus on safety and risk management, as well as competence within OTs' areas of expertise before proceeding to establish diagnosis.

Marianne opened the floor for questions and discussion.

Q: Will this be a focus on medical and psychological assessment, or are we looking at functional assessment as well?

A: This will include all the above.

Q: Do you have an example of a medical diagnosis OTs are likely to be involved in?

A: Some of the diagnoses we have discussed include autism, developmental coordination disorder, and mental health.

Q: Are you able to share what the structure of the course might look like?

A: This is still yet to be determined and will be the work of the diagnosis course advisory committee.

Q: When it comes to competence, will there be like a list of recommended professional development and training courses?

A: ACOT would not be looking at an endorsement of specific courses as it would not have the capacity to review all the courses available. Part of the emphasis in the course would be letting OTs know that it is part of the OT's responsibility to find out what the gold standard in training is and assess the content of the course provider for adequacy.

Q: What is the process like for those on the acupuncture roster right now?

A: Council looks at summative and formative evaluation, as well as whether the course is taught under a provider that is a licensed acupuncturist and includes supervised practice hours, before approval. On behalf of Council, the Registrar looks at the course to determine if it meets



Council's requirements. If the course does, then the OT is approved and added to the roster. The OT is expected to maintain their education over time.

Q: How long does training take for acupuncture?

A: This varies by course provider. Some have courses up to two years, while others have shorter courses.

Q: Are there specifically outlined limitations on diagnosis based on practice area e.g., when and who to refer to?

A: The course will go over things to consider when deciding on whether to establish a diagnosis. For example, whether you only need OT input or need to refer to a physician, speech specialist, or psychologist and so on. OTs would not diagnose conditions that other providers are primarily the treatment providers for, e.g., if a blood clot is suspected, a referral to a physician would be required because they can prescribe the appropriate treatment for this.

Q: Is ACOT officially communicating about the diagnosis ability to different systems and different funders?

A: That's where ACOT would partner with the associations. Then the associations can add that to their advocacy pieces.

Comments included:

- I can see the value of it with the automobile insurance reform previously discussed by SAOT, with this diagnosis function.
- This will be very exciting once the course is implemented. I'm glad I attended.
- This adds strength to the profession for OTs, who are functional specialists.
- It has been very helpful knowing what has been happening with ACOT and the discussion on OT diagnosis.

7. REFLECTION ON GOVERNANCE

Ends Policy

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

- We are taking all the steps necessary to protect the public in the decision-making process.



- There was a high level of engagement when it comes to diagnosis, which is paramount to protecting the public.
- Great participation and all voices are heard.
- We continue to reach the Ends Policy and strive for public protection.
- It was a good and effective meeting.

8. MEETING SURVEY

Council took a few minutes to complete the Council meeting survey.

MOTION: To move to an in-camera session – Christie (MOVED), Heidi (SECONDED). CARRIED

9. IN CAMERA

MOTION: To move to an in-camera session – Heidi (MOVED), Christie (SECONDED). CARRIED

10. CLOSING REMARKS AND MEETING ADJOURNMENT

MOTION: To adjourn the April 26, 2025 Council meeting – Heidi (MOVED), Christie (SECONDED). CARRIED

The meeting was adjourned at 1:40 p.m.