

The College of Midwives of Ontario  
**ANNUAL REPORT**

2015/  
2016



College of  
**Midwives**  
of Ontario

Ordre des  
**sages-femmes**  
de l'Ontario



# Annual Report 2015-2016

# 2015-2016

## Annual Report

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The primary responsibility of the CMO is the protection of the public.

## Our Vision

Every woman in Ontario has access to safe, quality midwifery care.

## Our Mission

The CMO promotes a model of care that protects informed choice, choice of birth-place and continuity of care and that is delivered by midwives as primary health care providers.

## Our Mandate

The CMO protects the public by regulating the profession of midwifery in accordance with the RHPA and by setting the minimum standard of professional behaviour and clinical practice expected of midwives in Ontario.

# Message from the Registrar & CEO



I am pleased to present the 2015-2016 Annual Report of the College of Midwives of Ontario. I take great pleasure in reflecting on the previous twelve months as we have been steadfast in our commitment to fair and transparent self-regulation in the public interest. As Council made important decisions throughout the year to enhance transparency and accountability, College staff ensured the application of those same values to all day-to-day processes, internal policies and interactions with members and the public.

We have a lot to be proud of this year. The launch of the new online member portal, as a function of our database, permits midwives to easily update personal and practice information. Additionally, Registration renewal, credit card payments, Quality Assurance Program and active practice reporting are now all managed through the same portal, thereby enabling the College to produce meaningful data on which to better inform our future decisions. Our ever-evolving database also allowed us to immediately implement Council's transparency-related bylaw amendments, so that all approved information is readily available on our Public Register.

Much was accomplished by our Council and Committees during this past fiscal year. I hope you take the time to read through the attached report for many of the year's highlights. I would also like to commend the College staff on their work in the development, maintenance and evaluation of the programs delivered. For example, our Quality Assurance department investigated best practices in quality assurance and evaluated our program in anticipation of a revised program launch in 2017. Our Registration department streamlined and digitized processes to improve data collection, response times and service to members and applicants. In addition, the Professional Conduct department administered complaints, investigations and hearings with care, sensitivity and integrity.

In addition, we continued to advance our Alternate Practice Arrangement Program, supporting innovation in midwifery in response to community need. New peer and practice assessors were selected, trained and mentored to conduct criteria-based assessments throughout the province. Two Birth Centre facility assessments were carried out, on behalf of the Independent Health Facilities Branch, which marked the successful close to their first year of operations. And while we regularly reached out to members through newsletters, reminders, website, Facebook and Twitter, we took enormous pleasure in answering individual calls and emails as well as interacting face-to-face with members at forums and stakeholder events.

There is a tremendous sense of forward momentum at the College as we modernize our regulations, propose changes to the midwifery scope of practice and engage with members and the public more meaningfully. I am very often inspired and deeply appreciative of the quality of care that midwives provide in this province, and congratulate all of those who work tirelessly and collaboratively to keep the profession in such high regard. It is an absolute pleasure to operate alongside you in the self-regulation of midwifery in Ontario.

A handwritten signature in black ink, reading "Kelly Dobbin".

Kelly Dobbin, RM, MA, MSc  
Registrar & CEO

# Message from the President



On behalf of the Council of the College of Midwives of Ontario (CMO) I present this report of activities and achievements for the 2015-16 year. The CMO Council is composed of members of the public as well as professional midwives. Together we strive to make decisions that will not only protect the public but also strengthen the public's trust in the profession of midwifery. Within this report you will find many examples of how the College is doing just that. Our dedication to transparency, effective governance, and leadership were highlighted this year through the introduction of new systems and tools that will allow the College's Council to work in the best interest of the public.

## Transparency

Over the past several years, the Ontario government and members of the public have expressed that health care regulators need to disclose more information about their members. In response to this request the College has taken the steps to address the need for additional information about our members with the expansion of the Public Register. The decision to increase the amount of information about Registered Midwives that the College makes public was made carefully, involving many of our statutory committees, public consultation, outreach and education to members, as well as plenty of discussion at the Council table. This thoughtful approach has resulted in a Public Register that allows for clients of midwifery care to make fully informed decisions regarding their choice of care provider.

## Governing Effectively

The role of the Council is to set the direction for the College. In order to do that well, the Council needs a sound approach to governance, as well as skilled, knowledgeable and well educated Council members. To achieve this, the Council has instituted regular Council training days and expanded our annual orientation to include all members of Council. Further, we have enhanced and updated our own performance evaluation processes to best learn where we will focus our continuing education to expand the skills of Council Members. Finally, we have consulted with governance experts and received governance training that will ensure even greater accountability to both the public and members.

## Accountable Leadership

Throughout the 2015-2016 the College saw growth and development in the tools and processes Council uses to review the performance of the Registrar and Council President. Through clearly stated expectations, role descriptions, and measurable key performance indicators the Registrar and President are given feedback that supports leadership oriented direction for CMO Council and leadership.

In closing, I would like to point out that the positive outcomes achieved this year at the College would not be possible without the dedication of our hard working Council, who approach every decision with great care and thoughtfulness. I am very proud of all we have accomplished in the 2015-2016 year, and thank them for their dedication to protecting the interest of the public by ensuring that midwifery care in Ontario is provided safely.

A handwritten signature in black ink, appearing to read 'BB', written in a cursive style.

Barbara Borland, RM  
President

# Council Highlights

## Transparency:

College by-laws were revised to make more information about members available to the public to assist them to make informed healthcare choices. New information that appears on the Public Register includes: findings of guilt; charges; bail conditions; registration history with other regulators in Ontario and other jurisdictions; past practice locations; alternate practice arrangements, including names of second birth attendants; resignations while under investigations; oral cautions ordered by the Inquiries, Complaints and Reports Committee (ICRC); written cautions ordered by the ICRC; and specified continuing education or remediation programs (SCERPs) that require a follow up or monitoring ordered by the ICRC. Matters determined to be low risk will not be made public. These include complaints and reports that the ICRC take no action on, as well as matters that are addressed through advice or recommendation. All quality assurance information will remain confidential, as well as members' personal information, such as home or e-mail addresses.

## Strategic Planning:

In November 2015, Council announced the start of the strategic planning process that will produce a strategic plan laying out the College's vision and goals for 2017-2020. Five members of the Council formed the College's Strategic Planning Steering Committee. The Committee, led by President Barbara Borland began meeting in March 2016 to determine the path forward. The Committee sets the tone for cooperation to ensure the strategic planning project goals are achieved; ensures key milestones are delivered and the planning process is inclusive and open; reviews findings and provides direction and advice on final recommendations. The College's Strategic Plan for 2017-2020 is set to be approved by Council at its December 2016 meeting.

## Strengthening Governance:

A governance review was undertaken to look for ways to improve the effectiveness and the efficiency of the College's governing body and to ensure greater accountability to the public and the membership.

## Member Forums:

In the fall of 2015, College conducted member forums in Kitchener, Ottawa and Sudbury to discuss the College's important initiatives with its members. The College also offered live streaming from our Sudbury forum. Going forward, the College will conduct annual half-day forums in different parts of the province to engage in the topics that are most relevant to the members.



## Policies and Standards Approved by Council

Last year, Council actively consulted on and reviewed the following policies, standards of practice and other regulatory tools:

1. *Essential Equipment, Supplies and Medications Standard*
2. *Policy on Active Practice Requirements*
3. *Code of Ethics*
4. *Laboratory Testing Standard*
5. *Consultation and Transfer of Care Standard*
6. *Practice Protocols Standard*
7. *Sexual Abuse Prevention Policy (SAPP)*
8. *Guideline to Appropriate Professional Behaviour with Clients*
9. *Policy on Continuing Competencies*

# 2015-2016

# Executive Committee

# members:

### Chair:

Barbara Borland, RM

### Professional Council Members:

Tiffany Haidon, RM

Wendy Murko, RM

### Public Council Members:

Jennifer Lemon

Joan A. Pajunen

# MEET YOUR COUNCIL

This year the College said farewell to long standing and hardworking Council members, Samantha Heydt and Edan Thomas. The CMO Council would like take this opportunity to thank them for their dedication to public service and the CMO. In addition, Council welcomed Philip Playfair, Isabelle Milot and Carron Canning.



**Barbara Borland, RM**  
Council President  
Professional Member



**Caroline Brett**  
Public Member



**Carron Canning, RM**  
Professional Member



**Rochelle Dickenson**  
Public Member



**Tiffany Haidon, RM**  
Vice President - Professional  
Professional Member



**Samantha Heydt**  
Public Member  
Term end: May 2015



**Claudette Leduc, RM**  
Professional Member



**Jennifer Lemon**  
Public Member



**Lilly Martin, RM**  
Professional Member



**Isabelle Milot, RM**  
Professional Member



**Wendy Murko, RM**  
Professional Member



**Joan A. Pajunen**  
Vice President- Public  
Public Member



**Philip Playfair**  
Public Member



**Gemma Salamat**  
Public Member



**Jan Teevan, RM**  
Professional Member



**Edan Thomas, RM**  
Professional Member  
Term end: September 2015

## Non-Council Committee Members

Heather Brechin, RM

Ann Montgomery, RM (until September 2015)

Diane Parkin, RM

Tia Sarkar, RM

Mylene Shields, RM

Edan Thomas, RM (appointed in November 2015)

2015-2016

Committee  
Reports

# Registration

The Registration Committee ensures all applicants meet requirements for entry to practise. The Committee determines whether further training or supervision is required to meet those requirements, or if any terms, conditions, or limitations should be imposed. These requirements ensure that midwives have the knowledge, skills and judgment to practise midwifery in Ontario.

The Registration Committee also ensures all registered midwives meet annual registration requirements and may decide to impose terms, conditions, or limitations on a member's certificate of registration to ensure the safety of the public.

The College continually explores new ways to ensure that the registration process remains efficient, fair, impartial, objective, transparent, easy to understand and accessible.

Total of **807** currently registered midwives as of March 31st, 2016



## Between April 1 2015 and March 31 2016:

31 members resigned their membership, 1 member passed away, 4 members were suspended, and 2 members had their registration revoked.

8 registration panels were held to address issues related to changes in class with active practice shortfalls (5), supervision (1), and re-registration (2).

78 new members were registered, of whom 62 were graduates from Ontario's Midwifery Education Programmes, 14 were graduates from the International Midwifery Pre-registration Program at Ryerson University Continuing Education, and 2 were registered from another province or territory via *The Agreement of Internal Trade* (AIT). In addition, 3 former members re-registered with the College after having previously resigned and practised in other Canadian regulated jurisdictions.

# Registration

As part of its annual activities the Registration Department filed the CMO's 2015 Annual Fair Registration Practices Report with the Office of the Fairness Commissioner, and the Health Professions Database report with the Ministry of Health and Long-Term Care. The Jurisprudence handbook was finalized, and the online course will be implemented in October 2016.

The CMO coordinated two successful administrations of the Canadian Midwifery Registration Examination (CMRE) in two locations in Ontario, in both May 2015 and October 2015.

Proposed changes to College by-laws were brought forward to Council and approved. These by-laws changes ensure compliance with the Minister of Health's transparency directive. The Public Register of the College now includes:

- Findings of guilt (criminal findings or findings under the *Health Insurance Act* or the *Controlled Drugs and Substances Act*)
- Criminal charges
- Bail conditions
- Registration history with other regulators
- Alternate Practice Arrangements
- Names of Second Birth Attendants
- Past practice locations

The Registration Committee updated their Terms of Reference, and Committee members and staff received training from legal counsel on registration procedures.

The CMO introduced an electronic registration wallet-card available for download via the online member portal and re-designed the certificate of registration.

The Registration Committee revised the following policy that was approved by the Executive Committee on behalf of Council:

*Policy on Active Practice Requirements*

# Registration

## 2015-2016 Committee members:

### Chair:

Gemma Salamat

### Professional Council Members:

Carron Canning, RM

Lilly Martin, RM

Isabelle Milot, RM

### Public Council Members:

Caroline Brett

Joan Pajunen

### Non-Council Members:

Mylene Shields, RM

Barbara Borland, RM *ex-officio*

# Fitness to Practise

The Fitness to Practise Committee is mandated to protect the public from members who cannot practise safely or competently because of mental or physical incapacity. If a midwife is found to be incapacitated, their certificate may be revoked or suspended, or have specific terms, conditions and limitations attached to it for a given length of time.

There were no Fitness to Practise Committee proceedings or referrals in the 2015-16 fiscal year.

## 2015-2016 Committee members:

### Chair:

Lilly Martin, RM

### Professional Council Members:

Claudette Leduc, RM

Jan Teevan, RM

### Public Council Members:

Jennifer Lemon

Philip Playfair

Gemma Salamat

### Non-Council Members:

Diane Parkin, RM

Barbara Borland, RM *ex-officio*

# Discipline

The Discipline Committee receives referrals from the Inquiries, Complaints and Reports Committee (ICRC) regarding alleged professional misconduct and/or incompetence.

A panel appointed by the Committee hears evidence regarding each case and decides whether to dismiss the allegations or find that the member has committed professional misconduct or is incompetent. If the member is found guilty, the panel orders an appropriate penalty. Holding midwives accountable for providing safe, quality care is an important part of maintaining public confidence in self-regulation.

The Committee conducts hearings in accordance with the *Regulated Health Professions Act* (RHPA). The Discipline Committee also has established rules of procedure that govern the hearings process. The College publishes discipline hearing summaries in accordance with the requirements of the *Regulated Health Professions Act* and the By-laws of the College. Committee decisions are available online at the College's website.

Two matters were referred to the Discipline Committee for the 2015-2016 fiscal year. The first proceeded as an uncontested hearing and a summary of the decision can be found below. The second matter, former member Rosa Anna Perconti, was granted an indefinite adjournment since her Certificate of Registration was revoked in 2014.

## Summary of the 2015-2016 Discipline Case

On December 2, 2015, a panel of the Discipline Committee of the College of Midwives of Ontario found Ms. Mélanie Guérin guilty of professional misconduct for i) contravening the *Midwifery Act*, 1991, the *Regulated Health Professions Act* or the regulations thereunder (specifically, practising illegally); ii) practising midwifery while her certificate of registration was suspended; and iii) engaging in disgraceful, dishonourable or unprofessional conduct.

The Panel ordered the following:

- Ms. Guérin was required to appear before a panel of the Discipline Committee to be reprimanded, with the fact of the reprimand to appear on the Public Register of the College;
- Ms. Guérin's certificate of registration was to be suspended by the Registrar for six weeks, out of which two weeks could be suspended, such that Ms. Guérin would serve four weeks of suspension, if she successfully completed the College's Jurisprudence Course and exam by April 2, 2016, failing which she would be required to serve the remaining two weeks of suspension beginning immediately on April 2, 2016.

# Discipline

## 2015-2016 Committee members:

### Chair:

Lilly Martin, RM

### Professional Council Members:

Claudette Leduc, RM

Jan Teevan, RM

### Public Council Members:

Jennifer Lemon

Philip Playfair

Gemma Salamat

### Non-Council Members:

Diane Parkin, RM

Barbara Borland, RM *ex-officio*

# Inquiries, Complaints & Reports

The Inquiries, Complaints and Reports Committee (ICRC) oversees investigation matters related to formal complaints and information the College receives through mandatory and other reports. The Committee makes dispositions in accordance with legislation, including referrals to the Discipline Committee for allegations of professional misconduct or incompetence. The Committee can also make referrals to the Fitness to Practise Committee regarding allegations of incapacity.

During the complaints process the Committee is responsible for keeping the complainant and the registrant informed and strives to reach a conclusion within 150 days of confirming the issues relevant to the complaint. Every complaint and report about midwifery care is carefully considered. The committee regularly reviews how the investigation and resolutions processes can be revised so the public is best protected.

In 2015-16, ICRC Panels jointly reviewed:

- 29 cases brought forward from fiscal year 2014/15
- 21 new cases opened in 2015/16 fiscal year
- 16 cases that were completed in 2015/16 fiscal year

Of the 34 cases carried forward into 2016/17 fiscal year:

- 7 cases were being monitored for Specified Continuing Education or Remediation Program (SCERPs) completion
- 2 cases were appealed to Health Professions Appeal and Review Board
- 2 cases were returned to ICRC by the Health Professions Appeal and Review Board for reconsideration
- 16 cases were at the investigation stage
- 5 cases were at the decision stage
- 2 matters were referred to the Discipline Committee

## Inquiries, Complaints and Reports Committee Highlights

Proposed changes to the College by-laws were brought forward by the ICRC to Council and were approved. These by-law changes ensure compliance with the Minister of Health's transparency directive. The Public Register of the College now includes:

- Written cautions ordered by the ICRC
- Oral cautions ordered by the ICRC
- Specified Continuing Education or Remediation Programs that require a follow-up or monitoring ordered by the ICRC
- Resignations while under investigation

The Inquiries, Complaints & Reports Committee updated their Terms of Reference and Committee members and staff received training from legal counsel on ICRC procedures.

# Inquiries, Complaints & Reports

## 2015-2016 Committee members:

### Chair:

Rochelle Dickenson as of November 2015  
(Former Chair: Caroline Brett)

### Professional Council Members:

Carron Canning, RM  
Tiffany Haidon, RM  
Wendy Murko, RM  
Edan Thomas, RM

### Public Council Members:

Samantha Heiydt  
Joan A. Pajunen

### Non-Council Members:

Heather Brechin, RM  
Ann Montgomery, RM  
Edan Thomas, RM

Barbara Borland, RM *ex-officio*

# Quality Assurance

The Quality Assurance Committee develops standards, policies, guidelines and regulations for Council's approval. The Quality Assurance Committee monitors and oversees the Quality Assurance Program (QAP), including peer and practice assessments and Alternate Practice Arrangements. The Quality Assurance Committee also appoints assessors for the birth centre assessments.

## Quality Assurance Program

The College initiated a new annual reporting deadline of October 1st to align with registration renewal. The Quality Assurance Committee implemented panel reviews of all non-compliant members. Panels had the authority to make decisions to take no action, order an assessment, take remedial action or refer to the Inquiries, Complaints and Reports Committee.

## Standards

Council approved the following Standards that were brought forward by The Quality Assurance Committee:

- Revised *Policy on Continuing Competencies* that lists courses approved by the College
- Revised *Code of Ethics*
- Revised *Consultation and Transfer of Care Standard* to address phototherapy for the treatment of newborn jaundice occurring after 24 hours
- Revised *Laboratory Testing Standard* that linked to the *Laboratory and Specimen Collection Centre Licensing Act*

## Panel meetings

Two Quality Assurance panels were held

- One panel reviewed 9 members who were non-compliant with QAP
- One panel reviewed criteria-based assessment results of 7 members who were selected

## Assessments

The Quality Assurance Committee appointed 9 assessors to conduct Criteria-Based Assessments (CBA) and birth centre assessments. 2 members and all eligible members of their practice group, for a total of 7 members, were assessed through a criteria-based assessment selection process. 3 practices participated in Self-Assessment, using the Practice Assessment Workbook, after being randomly selected in December 2015.

# Quality Assurance

## Birth Centres

Final pilot project facility assessments of two Ontario Midwifery-Led Birth Centres took place in the fall of 2015. Both assessments were successfully completed for the Independent Health Facilities Branch.

## Alternative Practice Arrangements

Members continue to have access to the Alternate Practice Arrangement (APA) program when they need to modify their primary care activities. 7 members or Midwifery Practice Groups (MPGs) continued in an APA or signed a new Letter of Agreement with the CMO in 2015-2016. 31 MPGs worked with Second Birth Attendants in their practice in the College-approved APA.

## Committee Training

The Quality Assurance Committee invested in committee member training to enhance knowledge and understanding of roles, responsibilities and powers of the committee.

## 2015-2016 Committee members:

### Chair:

Jan Teevan, RM as of November 2015  
(Former Chair: Jennifer Lemon)

### Professional Council Members:

Lilly Martin, RM

### Public Council Members:

Rochelle Dickenson  
Jennifer Lemon  
Philip Playfair  
Gemma Salamat

### Non-Council Members:

Tia Sarkar, RM  
Mylene Shields, RM

Barbara Borland, RM *ex-officio*

# Client Relations

The Client Relations Committee (CRC) is responsible for overseeing programs that continuously improve the professional relationship between midwives and their clients. This includes:

- Developing education requirements and guidelines for registrants as they relate to the prevention of sexual abuse
- Developing guidelines for the conduct of registrants with their clients
- Ensuring measures are in place to prevent and deal with sexual and other forms of client abuse
- Promoting public understanding of the College's sexual abuse prevention program
- Administering a funding program, which provides therapy and counselling for clients who were sexually abused by a College registrant.

The *Sexual Abuse Prevention Policy* and *Guideline to Appropriate Professional Behaviour With Clients* were brought forward to Council on behalf of the Client Relations Committee (and approved) in November 2015.

This year, while the Committee awaits a report from the Sexual Abuse Task Force (SATF) appointed by The Honourable, Dr. Eric Hoskins, Minister of Health and Long Term Care, has continued to produce documents to guide registrants. The Committee drafted the following resources to guide registrants on the appropriate use of social media, electronic communications and compliance with the *Personal Health Information Protection Act* (PHIPA):

- Webpage on *Midwives Using Electronic Communications*
- Webpage on *Midwives Using Social Media*
- Guide on *Compliance with Personal Health Information Protection Act (PHIPA)*

## 2015-2016 Committee members:

### Chair:

Claudette Leduc, RM as of November 2015  
(Former Chair: Rochelle Dickenson)

### Professional Council Members:

Carron Canning, RM  
Tiffany Haidon, RM  
Wendy Murko, RM  
Jan Teevan, RM  
Edan Thomas, RM

### Public Council Members:

Rochelle Dickenson  
Philip Playfair

Barbara Borland, RM *ex-officio*

# STAFF DIRECTORY

Kelly Dobbin

Registrar & CEO  
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Registration Coordinator  
 Currently on maternity leave

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 Currently on maternity leave

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2015-2016

Financial  
Statements

**COLLEGE OF MIDWIVES OF ONTARIO**

SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2016

## Independent Auditor's Report

To the Council of the  
**College of Midwives of Ontario**

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2016 and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Midwives of Ontario for the year ended March 31, 2016. We expressed an unmodified audit opinion on those financial statements in our report dated June 22, 2016.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of the College of Midwives of Ontario.

### *Management's Responsibility for the Summary Financial Statements*

Management is responsible for the preparation of a summary of the audited financial statements on the basis described in the note to the summary financial statements.

### *Auditor's Responsibility*

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".

### *Opinion*

In our opinion, the summary financial statements derived from the audited financial statements of the College of Midwives of Ontario for the year ended March 31, 2016 are a fair summary of those financial statements, on the basis described in the note to the summary financial statements.



Toronto, Ontario  
June 22, 2016

Chartered Professional Accountants  
Licensed Public Accountants

# COLLEGE OF MIDWIVES OF ONTARIO

## Summary Statement of Financial Position

March 31	2016 \$	2015 \$
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	1,139,898	1,459,166
Accounts receivable	184,057	320
Prepaid expenses	60,754	30,876
	<b>1,384,709</b>	<b>1,490,362</b>
Capital assets		
Intangible assets	241,521	47,494
	-	6,250
	<b>241,521</b>	<b>53,744</b>
	<b>1,626,230</b>	<b>1,544,106</b>
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	212,041	265,122
Deferred membership fees	693,020	618,692
Deferred course fees	-	74,763
Deferred project funding	11,800	11,800
Due to the Ontario Ministry of Health and Long-Term Care - Regulatory Policy Unit	-	275,116
	<b>916,861</b>	<b>1,245,493</b>
Deferred funding related to capital assets	-	5,578
Deferred lease incentives	76,563	-
	<b>993,424</b>	<b>1,251,071</b>
<b>NET ASSETS</b>		
Invested in capital and intangible assets	201,921	48,166
Internally restricted	10,000	10,000
Unrestricted	420,885	234,869
	<b>632,806</b>	<b>293,035</b>
	<b>1,626,230</b>	<b>1,544,106</b>

# COLLEGE OF MIDWIVES OF ONTARIO

## Summary Statement of Operations

Year ended March 31	2016 \$	2015 \$
Revenues		
Government grant - operations	840,500	626,100
Government grant - project funding	206,815	204,491
Government grant - capital and intangible asset funding	5,578	1,860
Membership fees	1,381,995	1,239,025
Administration and other fees	52,820	61,686
	<b>2,487,708</b>	<b>2,133,162</b>
Expenses		
Salaries and benefits	1,084,841	852,480
Professional fees	93,917	76,244
Council and committees	167,265	184,608
Office and general	176,496	153,588
Rent and utilities	122,541	71,721
Quality assurance program	44,944	19,593
Investigations and hearings	119,446	175,067
Membership dues and fees	26,706	27,779
Information and communications technology	117,517	77,457
Birth Centres	174,650	168,994
eHealth Ontario	32,165	-
Amortization - capital assets	24,826	8,303
Amortization - funded capital assets	-	1,860
Amortization - intangible assets	-	2,678
	<b>2,185,314</b>	<b>1,820,372</b>
Excess of revenues over expenses before the following	<b>302,394</b>	<b>312,790</b>
Loss on disposal of capital assets	(5,442)	-
Loss on disposal of intangible assets	(6,250)	-
Loss on impairment of capital assets	-	(5,838)
Intubation course revenue	138,114	-
Intubation course expenses	(89,045)	(81,810)
	<b>37,377</b>	<b>(87,648)</b>
Excess of revenues over expenses for year	<b>339,771</b>	<b>225,142</b>

# COLLEGE OF MIDWIVES OF ONTARIO

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## Note to Summary Financial Statements

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March 31, 2016

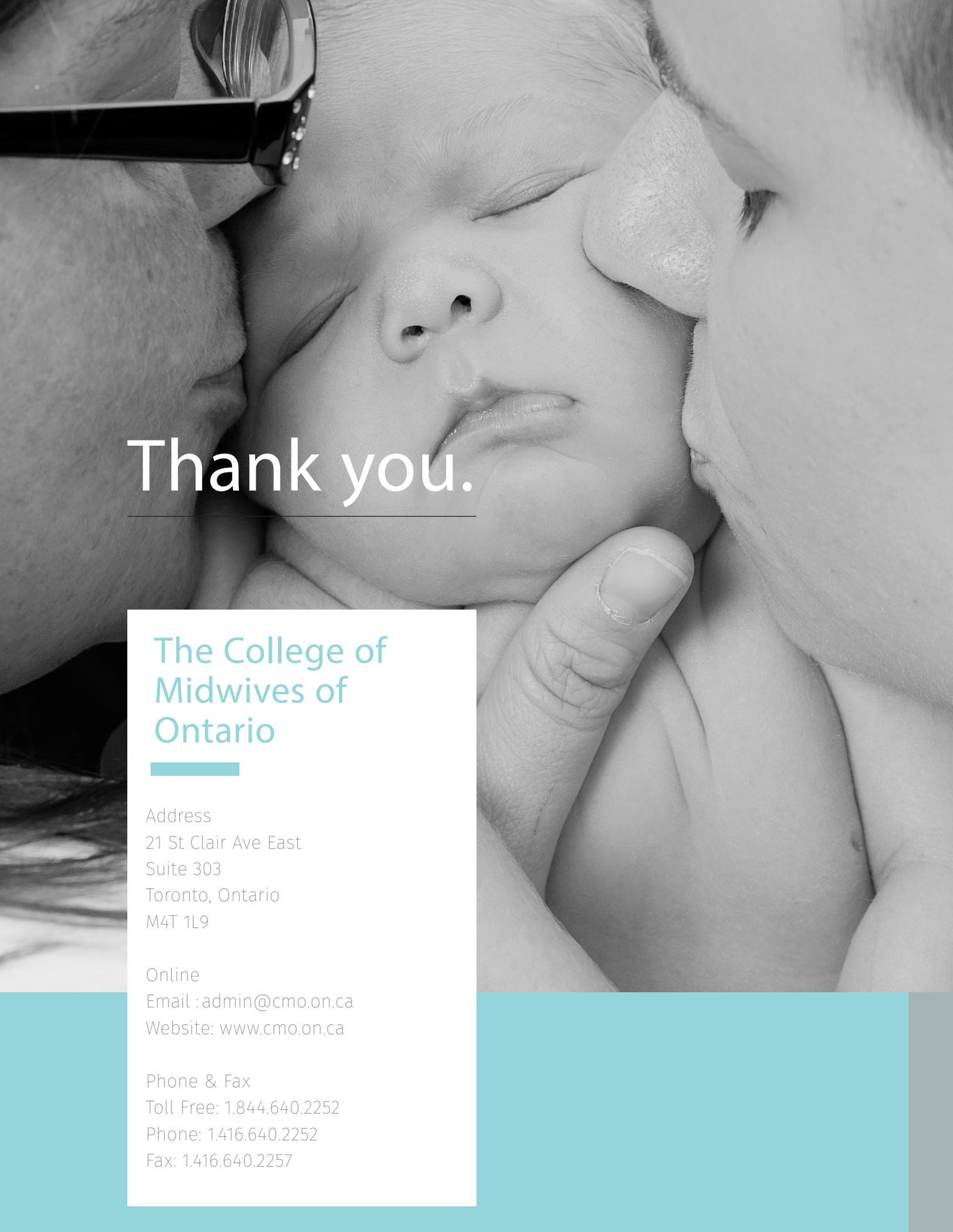
1. **Basis of presentation**

These summary financial statements have been prepared from the audited financial statements of the College of Midwives of Ontario (the "College") for the year ended March 31, 2016, on a basis that is consistent, in all material respects, with the audited financial statements of the College except that the information presented in respect of changes in net assets and cash flows has not been presented and information disclosed in the notes to the financial statements has been reduced.

Complete audited financial statements are available to members upon request from the College.

# HILBORN

LISTENERS. THINKERS. DOERS.



# Thank you.

## The College of Midwives of Ontario

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