



# 2018 Annual 2019 Report



College of  
**Midwives**  
of Ontario

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

**25** YEARS | ANS

The College of Midwives of Ontario regulates midwifery in the public interest, and ensures that midwives in Ontario are qualified, skilled, and competent to practise.

Ontarians can be confident that the College makes decisions in their best interest.



# Table of Contents

Message from the President	4
Message from the Registrar and CEO	5
Council	8
Committees	10
25 Years of Regulation	13
How We Regulate Effectively	16
How We Measure Our Regulatory Effectiveness & Increase Our Transparency	20
How We Engage with Members, Stakeholders & the Public	22
By the Numbers	24
Financial Statements	27



# Message from the President

The College registered its first midwives on January 1, 1994, making this year the 25th anniversary of regulating the profession in the public interest. I have been extremely fortunate to be able to be a part of this milestone as your President and have been honoured to spend nine years on Council, two of which as President at the College.

We've accomplished so much in this time, and none of this work could have been possible without our current and past Council and Committee members. Our Council and Committee members know the importance of their roles and have governed the College with care. They have been hard at work to accomplish our strategic objectives, as evidenced in this report, and have set the College up for future success.

It's been an absolute honour and pleasure to serve on Council as President these past two years. The College has set itself up well for the coming years, and I have high hopes for the future of midwifery regulation. I look forward to seeing the College and Council evolve even further and will be cheering them on for their continued success.

Sincerely,

A handwritten signature in black ink that reads "Haidon". The signature is fluid and cursive, with a long horizontal line extending to the right.

Tiffany Haidon  
President  
College of Midwives of Ontario



# Message from the Registrar and CEO

I'd like to begin this report by thanking our staff for their dedication over the past year. Together, we have accomplished great work and have reached many milestones set out in our operational plan. I look forward to another year of delivering on the strategic priorities and participating in the planning of our next strategic plan.

It's been a pleasure this past year to work collaboratively with Council and our Committees to achieve strategic goals and effectively regulate the profession in the public interest. We've worked on supporting our members' regulatory compliance with the development of new guides and policies, streamlining our registration processes, and increasing transparency of our own work as a demonstration of accountability to members, stakeholders and the public.

We've also spent this past year working closely with our stakeholders at the Ministry of Health and Long-Term Care towards modernizing midwifery legislation and regulations. Thank you to all stakeholders with whom we meet regularly and who also play an important role in ensuring the safe delivery of midwifery care in Ontario.

I'm thrilled to be a part of the 25th year of midwifery regulation in Ontario. I joined the College as a new member in 1996, and since then have been fortunate to work on Council, and on staff, among so many others who care deeply about this profession. Collectively we have a lot to be proud of, and I feel privileged to help launch the College toward its next 25 years of success. Thank you for the opportunity to do so.

Regards,

A handwritten signature in black ink that reads "Kelly Dobbin".

Kelly Dobbin  
Registrar  
College of Midwives of Ontario

# Mission & Vision

Regulating midwifery in the public interest

Inspiring trust and confidence in midwifery by leading in regulatory excellence

**Accountability** We make fair, consistent and defensible decisions

**Transparency** We act openly to enhance accountability

**Integrity** We act with respect, fairness and honesty

**Proportionality** We allocate resources proportionate to the risk posed to our regulatory outcomes

**Innovation** We translate opportunity into organizational value

# Council

Our work at the College is overseen by Council who sets the strategic direction and ensures long-term success. In accordance with the *Midwifery Act, 1991*, Council is composed of at least seven and no more than eight elected professional members and at least five and no more than seven appointed public members. Their duty is to oversee the administration of the *Regulated Health Professionals Act, 1991* (RHPA), the *Midwifery Act, 1991* and related regulations. They set the College's strategic direction, oversee the operational plan, approve annual budgets, monitor financial statements, and approve necessary regulatory tools including regulations, by-laws, policies and standards.

In the 2018-2019 fiscal year, the College Council met five times, with meetings held on: June 13, 2018, October 10 and 11, 2018, December 12, 2018, and March 20, 2019. Members and the public can find our agendas and meeting materials on our website. We advise midwives and members of the public when we post our meeting materials online and welcome anyone interested to observe our meetings in person.

# Meet Your Council



**Tiffany Haidon, RM**  
President  
Professional Member



**Deirdre Brett**  
Public Member



**Rochelle Ivri**  
Public Member



**Marianna Kaminska**  
Public Member



**Jennifer Lemon**  
Vice-President  
Public Member



**Susan (Sally) Lewis**  
Public Member



**Lilly Martin, RM**  
Professional Member



**Isabelle Milot, RM**  
Professional Member  
Term ended October 2018



**Wendy Murko, RM**  
Professional Member



**Lisa Nussey, RM**  
Professional Member



**Claire Ramlogan-Salanga, RM**  
Vice-President  
Professional Member



**Maureen Silverman, RM**  
Professional Member



**John Stasiw**  
Public Member



**Jan Teevan, RM**  
Professional Member



**Edan Thomas, RM**  
Professional Member

**Karen Wood**  
Public Member  
(Appointed from December 2018 - January 2019.)

# Committees

In addition to our Council, we have seven statutory committees that perform the functions that are assigned to them under the authority of the RHPA. In addition to their statutory functions, Committees operating under the Council are assigned to undertake work on behalf of Council and to reinforce the wholeness of Council's job. Each committee reports to Council, and these reports are public and are included in the Council meeting materials. Non-council committee members are appointed for 1-year terms to serve on statutory committees.

## Non-Council Appointed Committee Members, April 2018 - December 2018

Heather Brechin, RM  
Christi Johnston, RM  
Claudette Leduc, RM  
Amy McGee, RM  
Alexandra Nikitakis, RM

## Non-Council Appointed Committee Members, December 2018 - March 2019

Christi Johnston, RM  
Claudette Leduc, RM  
Amy McGee, RM  
Isabelle Milot, RM  
Alexandra Nikitakis, RM



## Executive Committee

The Executive Committee conducts business between Council meetings to ensure the objectives of the College are being met and to contribute to the development of governance excellence by the Council. The Executive Committee also has all the powers of the Council with respect to any matter that, in the Committee's opinion, requires immediate attention, other than the power to make, amend or revoke a regulation or by-law. Additionally, the Executive Committee performs audit, finance and risk oversight responsibilities, and performs annual evaluations of the Registrar.

## Registration Committee

The Registration Committee is mandated to ensure protection of the public by recommending policies to Council, ensuring that registration policies and processes meet the standards of good regulation, and are transparent, objective, fair, and impartial.

The Registration Committee also considers referrals of applications for initial registration, re-registration and class changes that do not meet the minimum requirements set out in the Registration Regulation. The Registration Committee has the power to direct the Registrar to issue, revoke, refuse or apply terms, conditions and limitations to an application for registration.

## Quality Assurance Committee

The Quality Assurance Committee is mandated to ensure protection of the public interest by administering the Quality Assurance Program (QAP), including the peer and practice assessment program. The QAP is designed to assure that knowledge and professional judgment of midwives remains current throughout their professional careers and that they continue to provide safe and ethical care to their clients.

The Quality Assurance Committee also develops standards of practice to set minimum requirements regarding midwifery practice and conduct, and other guiding documents to help midwives achieve the best outcomes for their clients and the public.

## Inquiries, Complaints, and Reports Committee

The Inquiries, Complaints and Reports Committee investigates public complaints and information that the College receives through mandatory and permissive reports regarding concerns related to professional misconduct, incompetence, or incapacity. Based on this, the Committee decides whether the concerns warrant a referral to the Discipline or Fitness to Practise Committees, or if some other action would better serve the public interest.

## Discipline Committee

When a midwife has been referred by the Inquiries, Complaints and Reports Committee because of the serious nature of the alleged professional misconduct and/or incompetence, the Discipline Committee holds a hearing.

Discipline hearing panels are appointed from the committee and must be composed of at least two public members of the Council of the College and at least one professional member of Council. The panel has a designated chairperson and is responsible for writing its own decision.

## Fitness to Practise Committee

The Fitness to Practise Committee considers cases of incapacity that are referred by the Inquiries, Complaints, and Reports Committee. The Fitness to Practice Committee consists of members of the public and the profession; Fitness to Practice panels are appointed from the committee and must be composed of at least one public member.

Fitness to Practise hearings are closed to the public unless the midwife who is alleged to be incapacitated requests that it be open to the public. The hearing requires the Fitness to Practise panel to make a finding on whether a person is incapacitated and if so, what order would be most appropriate.

## Client Relations Committee

The Client Relations Committee is mandated to ensure protection of the public interest by developing the policies and procedures of the College to prevent sexual abuse of clients by members and to define appropriate professional relations between the members of the College and their clients.

In addition, the Client Relations Committee administers the funding program for therapy and counselling for clients who make a complaint to the College about sexual abuse by members or are the subject of a Registrar's investigation involving allegations of sexual abuse by members, at the time the allegation of sexual abuse is made.





College of  
**Midwives**  
of Ontario

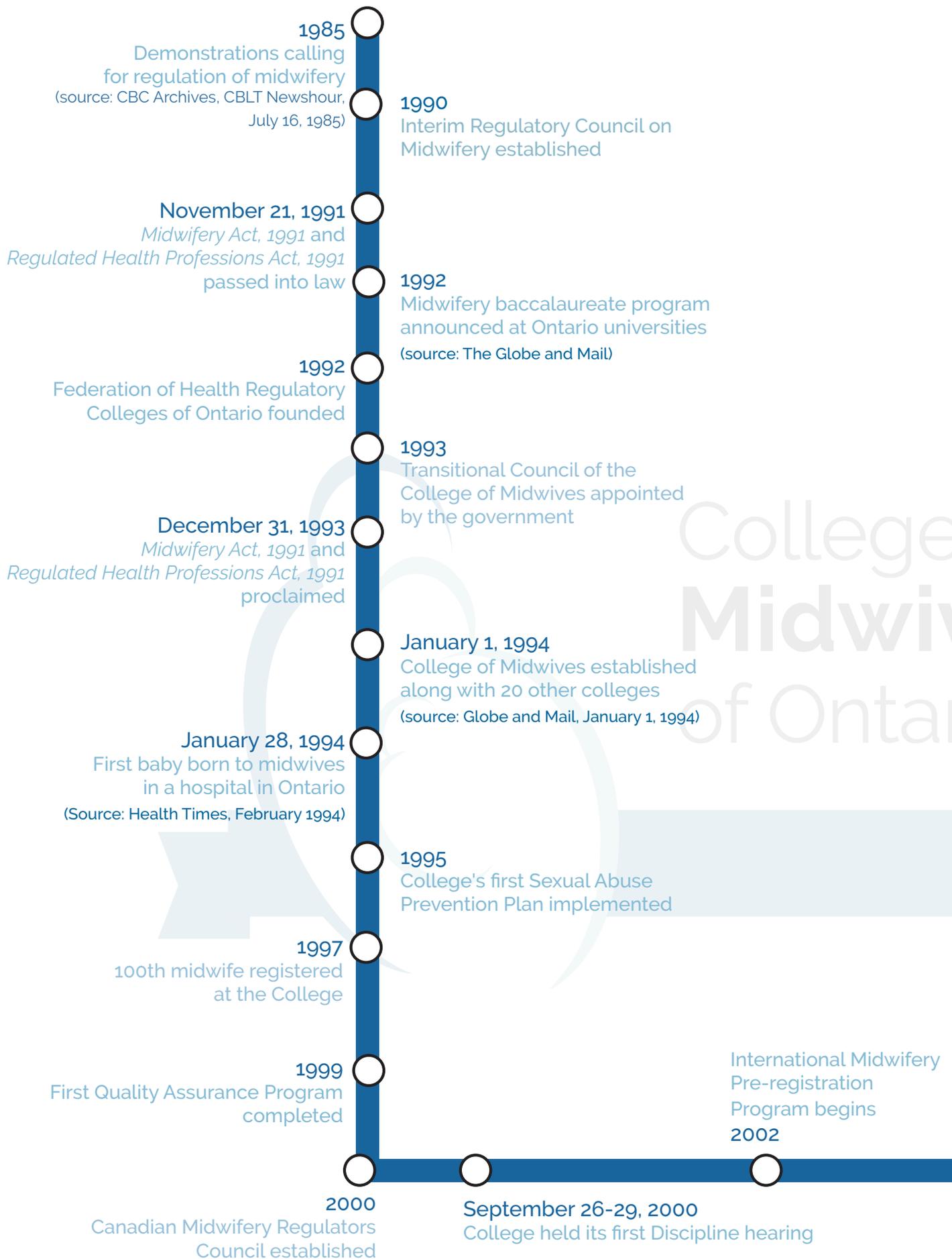
Ordre des  
**sages-femmes**  
de l'Ontario

**25** YEARS | ANS

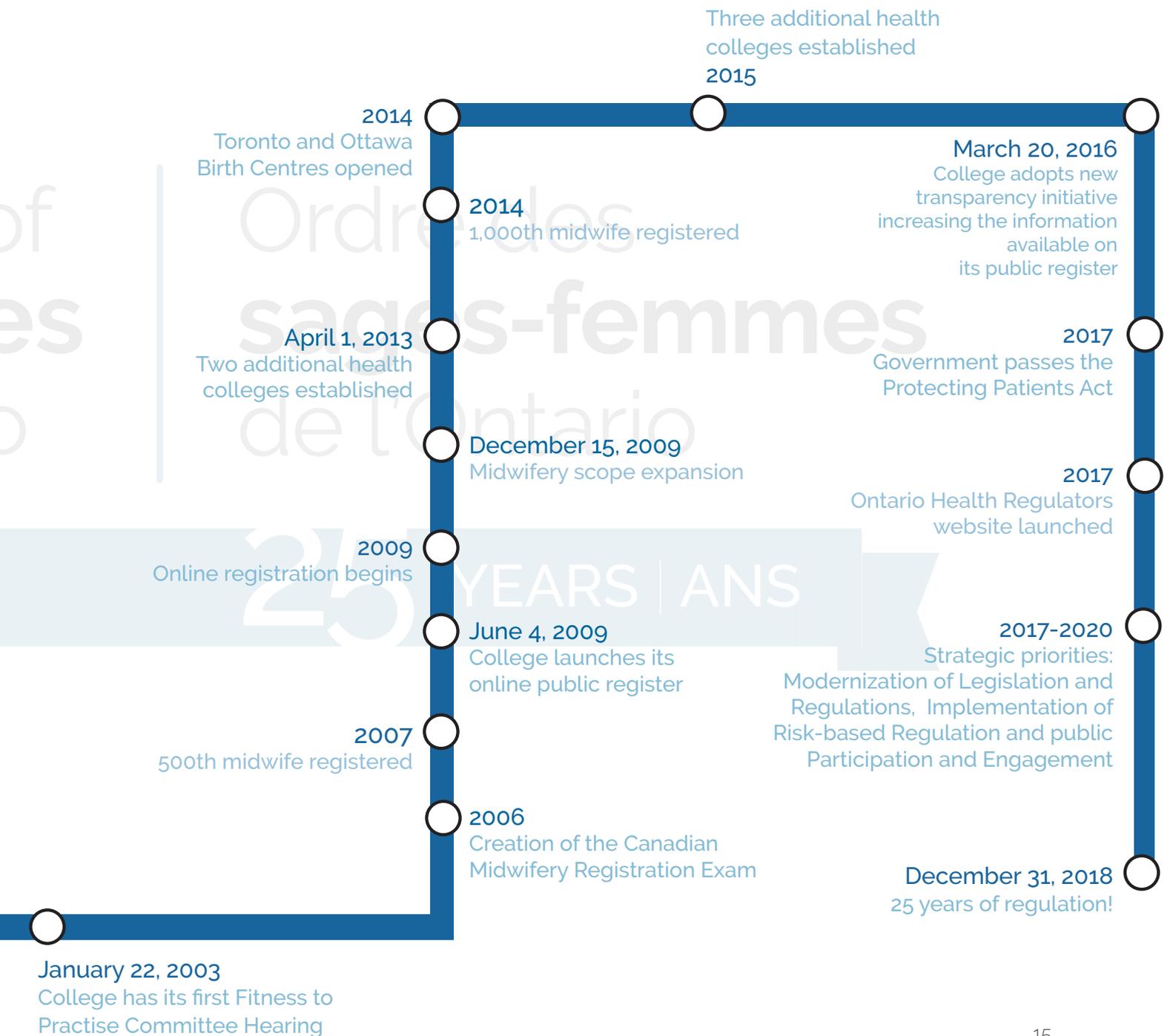
## Celebrating 25 Years of Regulating in the Public Interest

We're thrilled to be marking the 25th year of midwifery regulation in the public interest and are proud of all the achievements that have been accomplished to date.

Please go to the next page to see highlights from the past 25 years!



# Celebrating 25 Years of Regulation



# How We Regulate Effectively

The College is the regulator of midwifery in Ontario. We regulate midwives by ensuring that they meet College requirements and standards, and by acting when risks are identified.

In the past year, the College continued to review and refine its approach to regulation and simplified its standards of practice, policies and procedures to make sure that the College is regulating effectively in the public interest.

Some of our work is outlined below.

## Implementation of Risk-based Regulation

We have continued making changes to our regulations, standards, policies and procedures to implement risk-based regulation by the end of 2019. Its successful completion and implementation will enable the College to deliver, to its fullest extent, proactive risk-based regulation in the public interest; regulation that is effective, targeted, proportionate, and transparent. Risk-based regulation means that the day-to-day activities of the College are guided by focusing activity and attention on issues and potential risks that pose the greatest threat to clients and members of the public. The College does not seek to eliminate risk completely, but to make the best use of its limited resources to proactively reduce the risks posed to an acceptable level. Risk-based regulation assumes that the quality of care received by midwifery clients is the result of a wide array of decisions made by different organizations, not just the College.

## Professional Standards for Midwives

The Professional Standards for Midwives (Professional Standards) came into effect on June 1, 2018. The development of the Professional Standards was a major step forward in reforming the College's standards of practice promoting targeted and proportionate regulation in the public interest. We moved away from reliance on detailed, prescriptive rules to more high-level, broadly stated rules or principles to set the standards by which midwives must practise. The Professional Standards provides the right amount of regulation based on the core principles of midwifery in Ontario, while ensuring high-quality care is delivered by individual midwives. By reducing its focus on the small details, we support midwives to work autonomously using their knowledge, skills and judgment and to organize their practice in a way that better meets the needs of their clients given the unique conditions under which midwives work.

## Second Birth Attendants Standard

With the implementation of the Professional Standards, the requirement for two midwives at a birth was replaced by the requirement of either two midwives or one midwife and a second birth attendant attend each birth. For this reason, we revised the Second Birth Attendant Standard to define the expectations for midwives who work with second birth attendants.

Second birth attendants who provide care in homes or other out-of-hospital locations, or in hospitals other than as employees or as privileged staff, are required to obtain a certificate of completion from the Neonatal Resuscitation Program (NRP) every 12 months.

## Waiver Policy

Under the approved Waiver Policy, College standards can be waived if midwives can demonstrate that there are exceptional circumstances related to their practice that warrant a departure from the current standards of practice. Exceptional circumstances is defined as conditions beyond one's control that justify waiving College standards. A midwife applying for a waiver must demonstrate that the circumstances of the application are both in the public interest and are sufficiently exceptional to justify a departure from the relevant standards.

## Criminal Record Screening Policy

Council approved the Criminal Record Screening Policy in October, and it was implemented in April 2019. The Criminal Record Screening Policy was developed in order for the College to have means to consistently screen applicants at entry-to-practise and current College members to determine if they meet the good character requirements of the Registration Regulation. As of April 1,

2019, all applicants are required to submit the results of a Vulnerable Sector (VS) Check as part of their application to the College. College members are required to submit the results of a VS Check upon request. This is to determine whether there are any concerns about the member's suitability to practise. If such grounds exist, the Registrar may appoint an investigator to inquire whether a member has committed an act of professional misconduct or is incompetent.

## Active Practice Requirements & Procedures

The Registration Committee approved a new Active Practice Requirements and Procedures document to ensure that the College is administering the current Registration Regulation effectively and has an effective process to support active practice requirements shortfall decisions. The new process was implemented on November 1, 2018.

## Unauthorized & Illegal Practice

The College revised its approach to specifically address issues with unauthorized practitioners to whom cease and desist letters have been sent. In the past, all individuals who had received a cease and desist letter, or those that the College was in the process of seeking an injunction against, have had their names posted to the College's website. Currently, the College only posts the names of individuals whom the College is in the process of obtaining an injunction against, or those that have already obtained an injunction against, and not those to whom cease and desist letters have been sent.

## Supervised Practice

The Registration Committee made changes to the Supervisor Criteria and Supervisor Agreement documents. New criteria are used to determine if a proposed midwife may act as a supervisor for an applicant or a member who is eligible to practise under a Supervised Practice certificate of registration. In October 2018, Council rescinded the Policy on Criteria for Approval of Supervisors. The Agreement to Act as Supervising Midwife form was replaced with an updated Agreement and Conflict of Interest Declaration.

## Revised New Registrants Policy

Council approved changes to the way the College had been administering new registrant provisions outlined in the Registration Regulation.

The definition of established practice has been revised to ensure that practices taking on new registrants have the capacity and resources to adequately orient and support them to the practice and hospital environments. New registrants are required to work at an established practice in their first year of practice. The policy also requires that new registrants attend births only with a general registrant who is not subject to new registrant conditions unless such registrants have already met the minimum requirement of attending 30 births as a primary midwife and 30 births as a second midwife. The policy requires that all births be attended in Ontario. The policy was approved in March 2019 to be implemented June 1, 2019.

## Transitional Certificate of Registration

The Registration Committee made changes to the Transitional Certificate of Registration information and forms to align them with other revised registration policies, such as the revised New Registrants Policy. The revised Undertaking to be filed by an applicant and the Supervisor Agreement clarify what level supervision and coordination of supervision is expected in the context of the Transitional certificate of registration.

## Alternative Dispute Resolution

Alternative Dispute Resolution (ADR) is an alternative to the College's complaints process and has no formal investigation. In ADR, the midwife considers the complainant's perspective and provides an account of their conduct that was considered to be problematic by the complainant. This process only takes place if both the complainant and the midwife agree to resolve the complaint through this process. Only low-risk complaints that meet strict College criteria are eligible for a referral to ADR. Higher risk complaints, including matters that involve alleged sexual abuse or matters that have already been referred to the Discipline Committee cannot be handled in this low-risk manner. The ADR Framework and associated guides were approved by Council in December 2018 and are now in effect.

## Governance Changes

The College values public participation in its governance and took steps this past year to change its governance structure to allow for more public engagement and participation. These steps included making by-law changes to allow for the appointment of public members to the College's Committees.

Council also approved by-law changes with respect to the eligibility and disqualification criteria for nomination to Council, appointment to Committees and disqualification of sitting members. Professional members are ineligible to run for election or apply for appointment if they have a moderate or significant professional conduct history. Any sitting professional member on Council would also be disqualified with the same professional conduct history.

In addition, by-law changes were made to require completion of the College's training program relating to the duties, obligations and expectations of Council and committee members prior to becoming eligible for election, or appointment as a non-Council committee member (professional or public). Council approved the College's Governance Education Modules in March 2019 as the required training program outlined in the by-laws. The modules and related quizzes were successfully introduced in time for the 2019 professional election cycle.

## Birth Centre Facility Standards & Clinical Practice Parameters

One of the College's duties, acting on behalf of the Ministry of Health and Long-Term Care, is to administer assessments of the two Ontario Midwife-Led Birth Centres licensed under the *Independent Health Facilities Act* (IHFA). The College is responsible for setting the Facility Standards & Clinical Practice Parameters (FS & CPP) for the Birth Centres which also serves as the basis for assessments.

In the past year, the College conducted a comprehensive review of the FS & CPP and implemented revised standards on January 1, 2019. This work was undertaken to prepare for the next scheduled general assessments of Birth Centres in 2020.



# How We Measure Our Regulatory Effectiveness and Increase Our Transparency

As part of our strategic plan, we strive to regulate effectively and increase transparency for the public and our members. Some of our work is outlined below.

## Performance Measurement Framework

We have high expectations of our members and we also have high expectations for ourselves as a regulatory body. Therefore, we developed a regulatory performance framework to measure the College's regulatory effectiveness and to focus on areas for improvement. The framework describes the outcomes the College is expected to achieve in four broad domains: Regulatory Policy; Suitability to Practise; Openness and Accountability; Good Governance. It comprises a number of performance standards the College must meet while fulfilling our regulatory functions. In developing the performance standards, we sought to give a balanced overall picture of what the College is required to do, covering all functional areas of the College such as policy, registration, investigations and complaints, and quality assurance. This framework is now complete and will be implemented in the 2019-2020 fiscal year.

## The HIROC Risk Assessment Checklists

In 2018, our Professional Conduct, Registration and Operations departments completed Year 2 of the Risk Assessment Checklist program developed by the Healthcare Insurance Reciprocal of Canada (HIROC). The program consists of risk modules for each of the high-frequency risks identified from HIROC's extensive claims database.

Each risk module is comprised of evidence-based mitigation strategies that Colleges are encouraged to implement to effectively address the respective risk in the areas of registration, professional conduct, privacy and access to information, and operations. Remaining areas of improvement were incorporated into departmental work plans and will be completed by November 2019.

## Public Register By-law

Since 2015, in response to public demands and requests from the Ministry of Health and Long-Term Care, all health regulatory colleges, including the College of Midwives of Ontario, took significant steps to improve transparency of member information available to the public to enable them to decide who they wish to see for their health care. With the introduction of Bill 87, *Protecting Patients Act, 2017* the College's Public Register By-law which sets out what information is made public required further amendments to reflect the current legislation. Council approved the proposed changes in June 2018 to be implemented immediately.

## Risk Assessment Tools Made Available to the Public

The College is committed to fairness and transparency and as a result of this commitment, has posted its decision-making tools that are used by the College to promote consistent, fair and proportionate decision making, and to help with meaningful trends analysis.

### Quality Assurance Program Non-Compliance Decision Making Tool

This framework guides Quality Assurance Committee panel decision-making regarding Quality Assurance Program (QAP) non-compliance thereby enabling a transparent, consistent and fair process.

### Registration Committee Risk Assessment Tool for Determining Requalification Programs

This tool is designed to support registration panel consistent decision-making when:

1. assessing the extent to which deficiencies identified in a member's or an applicant's clinical experience affect their ability to provide competent midwifery care, and
2. identifying what measures should be taken to satisfactorily address the deficiencies in the applicant's or the member's clinical experience.

### ICRC Risk Assessment Framework

Designed to guide ICRC panels in their assessment of complaints and reports, this tool aids panel members in making fair, consistent and transparent decisions, and assists panel members when considering clinical and/or practice issues that may be raised in complaints and reports, along with the risk of harm they pose to clients and the public interest.

Risk is categorized into one of four categories: No or minimal risk; low risk; moderate risk; or high risk. By categorizing all actions into risk categories, decision makers on the panel are able to uniformly assess each complaint and report, enabling transparent, consistent and fair decision-making.

For each complaint and report, the ICRC panel assesses alleged concerns using the following categories that align with the principles outlined in the Professional Standards for Midwives:

- Demonstrating Professional Knowledge & Practice
- Providing Person-Centred Care
- Demonstrating Leadership & Collaboration
- Acting with Integrity
- Being Committed to Self-Regulation

In each situation there can be aggravating factors and mitigating factors, which are considered by the panel. Some examples of aggravating factors include prior history, intent, and harm to the client. Some examples of mitigating factors include willingness to address the issue(s), cooperation, remorse, and no harm to the client.

### Regulatory Impact Assessment Tool

Our regulatory impact assessment is an assessment of the expected impact of each regulatory or policy initiative that must be done before any regulatory measure is introduced or revised. The results of this analysis are, in effect, a justification of the need for regulation. Regulatory impact assessment is designed to help the College understand the impact of decisions, structure ideas, test assumptions and think beyond a regulation-based solution as the default. Every policy proposal designed to introduce a regulatory tool must be accompanied by a regulatory impact assessment (RIA) statement. This tool is designed to encourage rigour and better policy outcomes from the beginning.

# How We Engage with Stakeholders and the Public

Our role at the College is to protect client safety and maintain public confidence in midwifery services. To achieve this, we register qualified individuals, set professional standards, establish requirements for continuous education and professional development, and investigate complaints and reports about professionals' competence, conduct and fitness to practise.

We cannot effectively fulfil our mandate of regulating in the public interest without thoughtful engagement with stakeholders. We recognize the limits of our own statutory powers and responsibilities, and we believe that we do better work when working with others. We also believe that maintaining quality relationships with our stakeholders will enable us to achieve better regulatory outcomes. Our focus is always on the needs of the clients and the public, and by building comprehensive stakeholder engagement we will ensure that issues are dealt with by the most appropriate organization, rather than simply falling outside our remit.

## Stakeholder Engagement Strategy

Our Stakeholder Engagement Strategy, developed in 2018, enables the College to use risk mitigation as the foundation for partnership. In doing so, we will continue to regulate effectively and work with stakeholders to ensure that any changes in regulations or policies are understood and easy to implement. This strategy also ensures that our communications with membership and stakeholders is clear, targeted, consistent and effective.

This strategy will help raise awareness among students and members about the College, our role, and what is required for students to become registered and for members maintain their registration with the College.

## Resources For Members

Throughout the 2018–2019 fiscal year, the College developed guides to assist members with their regulatory responsibilities.

### Guide to the Health Care Consent Act

The purpose of this guide is to outline a midwife's legal obligations for obtaining client consent as set out in the *Health Care Consent Act*.

### Guideline on Ending the Midwife-Client Relationship

This guideline was created to describe situations in which it is appropriate for a midwife-client relationship to end and the corresponding obligations of a midwife in such situations.

## Guide on Mediating Risk in Care for Related Persons & Others Close to Midwives

The purpose of this guide is to assist midwives in understanding those circumstances where they have discretion to decide whether to provide care to family members and others close to them and if so, what factors should be taken into consideration in making that decision.

## Guideline on Managing Personal & Practice Health

This guide was created to assist midwives in recognizing sources of stress in the midwifery profession along with signs of mental illness and addiction. It provides suggestions on how to manage personal health and wellness. It also provides suggestions for midwifery practice partners on how to appropriately administer a practice to ensure the health and wellness of associates.

## Resources for the Public

### What to Expect From Your Midwife Brochure

The brochure outlines the role of the College in regulating midwifery in the public interest, as well as what clients can expect from their midwives throughout their pregnancy and for the first six weeks postpartum. We sent brochures to all Midwifery Practice Groups across the province for client distribution.

### Filing a Complaint Guide

Filing a Complaint Guide aims to educate the public on how they can file a complaint against a midwife, what the process is once the complaint is filed, and approximately how long the process takes.

## Guide on Funding for Therapy & Counselling

The Guide on Funding for Therapy & Counselling sets out the information on the process for obtaining funding for therapy and counselling for individuals who were, or may have been, sexually abused by a member of the College.

## Sexual Abuse Complaints Guide

The Sexual Abuse Complaints Guide is intended to assist clients and the public in the understanding of why it is important to report sexual abuse and what you can expect when you do.

## Public Engagement Strategy

During the past year, we focused on raising awareness about the College through our social media platforms. This involved the development of strategic posts and running ads on Facebook, Twitter and Google to reach a wider audience. Content posted on these channels ranged from important updates from the College, highlights from 25 years of midwifery regulation and other relevant news pieces.

We have also collaborated with other health regulatory colleges on the Federation of Health Regulatory Colleges of Ontario (FHRCO) Public Engagement Project which involved the development of a public-facing website. It was created as a one-stop gateway to the websites of all the health regulatory colleges in Ontario. From here the public can find the most trustworthy, relevant, and up-to-date information about their health care professional and the colleges that regulate them.

# By the Numbers

707

General

60

General with  
New Registrant  
Conditions

11

Supervised  
Practice

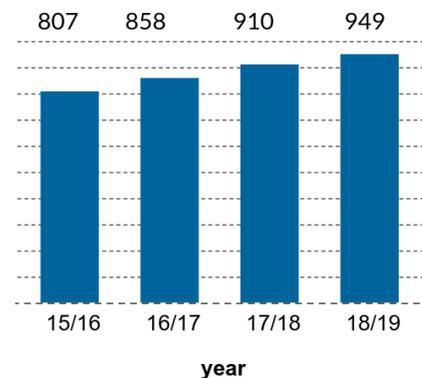
171

Inactive

949

registered  
midwives

number of registered  
midwives over the  
last five years



18% increase in the number of  
registered midwives over the  
last five years

75

New  
Registrations

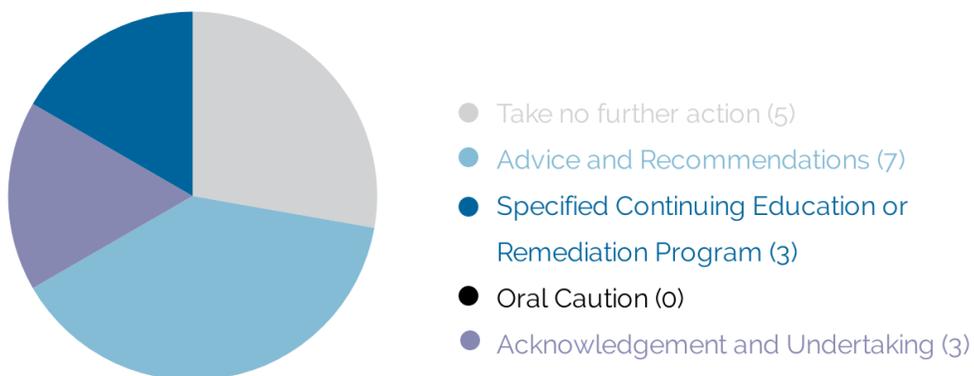
- 4 suspended for non-payment of fees
- 1 revoked for non-payment of fees
- 1 revoked for failure to meet registration requirements
- 33 resignations

# By the Numbers

The Inquiries, Complaints, and Reports Committee (ICRC) held 24 panels to address complaints and reports. 18 decisions were made in 2018-2019. The cases discussed at each panel were first opened at the College in the 2018-2019 fiscal year, or in a previous fiscal year, as some cases span fiscal years. The decision breakdown is below.



## Decision Breakdown



# By the Numbers

## top questions from members



Laboratory Testing & Designated Drugs



Second Birth Attendant Standard



Providing care outside of pregnancy, intrapartum and 6 weeks postpartum.



Pregnancy Leave Authorization



Scope of Practice

## top questions from non-members

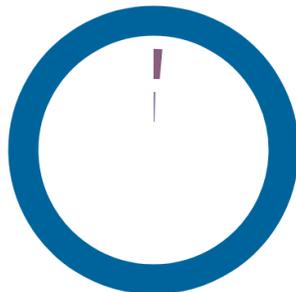


Pharmacists asking about which drugs midwives are authorized to administer and prescribe.

---

## College Panels

### Quality Assurance Program Reporting



**2018-2019**

11 Non-compliance  
3 Exempt  
935 Compliant

### The Registration Committee held 30 panels to address:

- 3 Clinical Experience Shortfalls
- 1 Re-registration Requiring Requalification
- 1 Re-instatement Application Following Revocation for Non-payment of Fees
- 21 Application for Class Change From Inactive to General
- 2 Supervised Practice Certificate Re-issuance for extension
- 1 Plan for Supervised Practice and Evaluation Review and Supervisor Approval
- 1 Active Practice Requirements (APR) Shortfall Follow Up



# Financial Statements



**COLLEGE OF MIDWIVES OF ONTARIO**

SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2019

## Report of the Independent Auditor on the Summary Financial Statements

To the Council of the College of Midwives of Ontario

### Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2019, 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 (the "College") for the year ended March 31, 2019.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, on the basis described in the note to the summary financial statements.

### Summary Financial Statements

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 and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of the College and the auditor's report thereon.

### The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 26, 2019.

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

Management is responsible for the preparation of the summary 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 whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.



Toronto, Ontario  
June 26, 2019

Chartered Professional Accountants  
Licensed Public Accountants

# COLLEGE OF MIDWIVES OF ONTARIO

## Summary Statement of Financial Position

March 31	2019 \$	2018 \$
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	2,288,046	1,508,744
Accounts receivable	27,604	3,576
Due from the Ontario Ministry of Health and Long-Term Care	398,381	799,415
Prepaid expenses	28,508	41,236
	<b>2,742,539</b>	2,352,971
Capital assets	<b>123,215</b>	159,742
	<b>2,865,754</b>	2,512,713
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	324,132	240,301
Deferred registration fees	928,262	823,388
Deferred project funding	3,352	3,352
	<b>1,255,746</b>	1,067,041
Deferred lease incentives	<b>40,770</b>	52,701
	<b>1,296,516</b>	1,119,742
<b>NET ASSETS</b>		
Invested in capital assets	102,128	132,484
Internally restricted for therapy and counselling	16,000	16,000
Unrestricted	1,451,110	1,244,487
	<b>1,569,238</b>	1,392,971
	<b>2,865,754</b>	2,512,713

# COLLEGE OF MIDWIVES OF ONTARIO

## Summary Statement of Operations

Year ended March 31	2019 \$	2018 \$
Revenues		
Government grant - operations	398,381	799,415
Government grant - project funding	65,154	75,140
Registration fees	1,848,332	1,632,022
Administration and other	104,491	74,411
	<u>2,416,358</u>	<u>2,580,988</u>
Expenses		
Salaries and benefits	1,231,438	1,246,356
Professional fees	85,114	85,103
Council and committees	141,850	171,377
Office and general	110,774	122,871
Rent and utilities	168,947	159,810
Quality assurance program	15,560	27,297
Investigations and hearings	256,553	170,900
Membership dues and fees	53,133	25,648
Information and communications technology	75,041	71,021
Government projects	65,154	75,140
Amortization	36,527	41,242
	<u>2,240,091</u>	<u>2,196,765</u>
Excess of revenues over expenses for year	<u>176,267</u>	<u>384,223</u>

# COLLEGE OF MIDWIVES OF ONTARIO

---

## Note to Summary Financial Statements

---

March 31, 2019

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, 2019, 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 and disclosed in the notes to the audited financial statements has not been presented.

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

# HILBORN

LISTENERS. THINKERS. DOERS.



21 St Clair Ave E. , Suite 303  
Toronto, Ontario, M4T 1L9  
x 416 640 2257

Email : [cmo@cmo.on.ca](mailto:cmo@cmo.on.ca)

Website: [www.cmo.on.ca](http://www.cmo.on.ca)

Twitter: [@cmo\\_osfo](https://twitter.com/cmo_osfo)

Facebook: [facebook.com/cmo.on.ca](https://facebook.com/cmo.on.ca)