

# Content

Message From the President & Registrar	<u>3</u>
Public Protection	<u>4</u>
Increasing Public Access to RDs	<u>6</u>
Engaging Registered Dietitians	<u>8</u>
An Effective Organization	<u>11</u>
The College Team	<u>15</u>
Member Statistics	<u>21</u>
Financials	27









# Responsible, Responsive Regulation

The College of Dietitians of Ontario is the regulatory body for Registered Dietitians. Our mandate is to regulate dietitians in the interest of the public. We regulate the profession of dietetics and ensure that dietitians meet legal and professional standards for safe, ethical and competent nutrition services.

For the College of Dietitians of Ontario, the highest achievement is public confidence in the regulation of dietitians in Ontario and being recognized for regulatory excellence in the public interest.

# Message from the President & Registrar

### Accountability & Achievement

It is a pleasure to present the 2012/13 Annual Report for the College of Dietitians of Ontario. The annual report is an important accountability tool which shows how the College exercises its regulatory mandate in the public interest and articulates what has been achieved toward this end.

2012/13 has been a rewarding year. The College has had the opportunity to support continued competence in dietetic practice through a new reflective practice tool and a new practice assessment process. We have also improved public access to competent Registered Dietitians with the implementation of changes to our Registration Regulation and strategies to increase public awareness. In addition, our continued focus on evaluation and continuous quality improvement generated important confirmation that the College has strong governance practices and is advancing with the times in its use of information technologies.

We hope that this report inspires confidence in the College and the work we do to regulate and support Registered Dietitians in Ontario to enhance safe, ethical and competent nutrition services in changing practice environments.



Elizabeth Wilfert PRESIDENT



Mary Lou Gignac
REGISTRAR &
EXCECUTIVE DIRECTOR



### **Public Protection**

In the interest of public protection, the College of Dietitians of Ontario is committed to regulating the practice of dietetics to ensure that Registered Dietitians deliver safe nutrition services to people in Ontario. The College's focus on supporting competent and ethical dietetics practice begins with entry to practice and continues throughout the dietitian's career.

### New Entry-to-Practice Competencies

Working with a national partnership of dietetic regulators, educators and the national professional association, the competency standards for registration as a dietitian in Canada were updated. The new *Integrated Competencies for Dietetic Education and Practice* (ICDEP) articulate performance indicators for each of 30 practice competencies and sets out the broad knowledge base that is necessary to prepare learners to achieve the practice competencies at entry level proficiency. The ICDEP document represents the most comprehensive description of the knowledge, skills and judgment needed to practice dietetics safely and effectively in Canada. It is a tool that RDs as well as employers across Canada may use as a guide to create role descriptions, job specifications and performance/quality assessment tools.

# Assessment of Registered Dietitians Practising Fewer than 500 Hours Over 3 Years

The 2012 change to the College's Registration Regulation now requires the Quality Assurance Committee to assess Registered Dietitians who practice fewer than 500 hours over 3 years. This provides an opportunity for the College to assess whether RDs have maintained the knowledge and skills needed to practice safely. The assessment will consider practice activities, professional development and ongoing education. As a result of the assessment, these Registered Dietitians may be required to undertake further professional development, have imposed limits on dietetic practice, or undertake not to practice dietetics unless they complete upgrading as directed by the College.

### More Registered Dietitians Were Assessed for Competency

A new 2-Step *Peer and Practice Assessment* was launched in March 2012. The new process enables the College to assess 10% of members (instead of 2-3%) without increasing costs. The first step consists of surveying an RD's patients and professional colleagues for feedback about their

competence. If the survey shows any areas of concern or if the survey scores are in the lowest 3% of the group surveyed, the RD is required to proceed to the second step, which is a behaviour-based interview and chart review (where applicable) conducted by an RD assessor. In 2012, the Peer and Practice Assessments did not result in any RDs being required to undergo remediation. The assessment process provided the RDs feedback for continuous quality improvement.

### Identifying Risk in Dietetic Practice

The College has a strategic objective of basing its priorities for regulatory activities on actual risks in dietetic practice. Doing this will ensure that the College makes the largest impact possible on public protection. The College developed a framework of risk concepts and risks associated with clients, practitioners and practice environments. This framework will be used in 2013 to identify and discuss appropriate regulatory responses to risk in dietetic practice.

### Use of the RD Professional Title Now Mandatory

A 2012 change to the College Registration Regulation requires College members, to use their professional designation, "Registered Dietitian" or the abbreviation "RD", when practicing dietetics. Being able to readily associate the professional title with the College of Dietitians of Ontario helps the public to exercise their right to approach the College about concerns and to make complaints when they have issues with the care they receive. It also helps the public access the Register of RDs to verify a member's status with the College.





# Increasing Public Access to RDs

The College of Dietitians of Ontario works to increase the number of qualified and regulated nutrition professionals to help more people in Ontario have access to safe, ethical and competent nutrition services. In 2007, the College adopted the corporate object, "To engage in and facilitate, with appropriate partners, human health resource planning and research and direct the Executive Committee and Registrar/ED to take appropriate action, including entering into agreements and arrangements with third parties to achieve this object". Having this object, the College of Dietitians of Ontario joins other organizations and interests to remove barriers to registration and address the organizational barriers currently preventing people from accessing practical education opportunities needed to qualify for a Certificate of Registration with the College.

### Public Awareness Campaign

The College's public education campaign explains how it protects the public by regulating dietitians in Ontario. A new video was added to the College's public education tools which include pamphlets distributed to primary care offices and online and print advertising in *Canadian Living, Livestrong and Fresh Juice* magazines. The new video entitled, *The College of Dietitians of Ontario Stands by Your Side*, is posted on YouTube for continued public access. It explains that the College makes sure RD's are qualified and stay qualified by setting and enforcing standards for the profession. In the video, the public is invited to access the College website or call if they have any questions or concerns about the services they have received from a Registered Dietitian.

### Extension of a Temporary Certificate of Registration

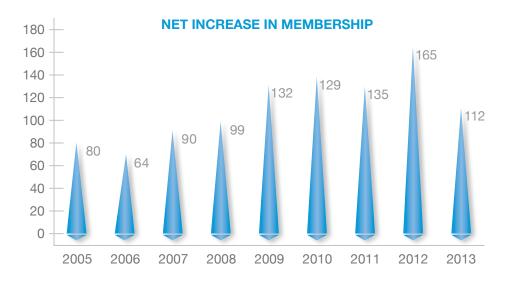
The 2012 amended registration regulation permits the College to extend a temporary certificate of registration for members who fail the registration examination the first time that they write it – on the condition that they have an approved supervisory arrangement for their dietetic practice. Policies and processes were developed to ensure appropriate supervisory arrangements were established and maintained. Enabling supervised practice prevents disruption in service for clients and employers while providing supervisory mechanism to ensure public safety. There were five extended temporary certificates granted this year.

### Recognition agreement with the Dietetic Association of Australia

A recognition agreement has been signed with the Dietetic Association of Australia. This enables mobility of RDs between the two countries. Accredited Professional Dietitians (APD) from Australia can obtain a Temporary Certificate of Registration and write the *Canadian Dietetic Registration Examination* without having an education equivalency assessment. Canadian RDs can also write the Australian professional exam and become an APD without having an education equivalency assessment.

### Growth in Ontario Dietitians

Registration statistics show continuing growth in the number of Registered Dietitians in Ontario, though the net growth in membership was lower in 2012-13 because of an increase in resignations and retirements. A close look at the resignation patterns showed that the largest number of resignations/retirements were in the 20-29, 40-49 and 60+ age ranges. The College is aware that some of the increase in resignations and retirements is due to the new requirement to assess Registered Dietitians who have practiced fewer than 500 hours over three years.

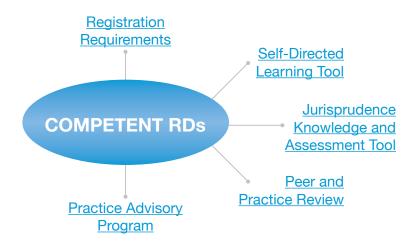


	Members Who Resigned			Members Who Retired			Total (Resigned + Retired)		
Age Group	2010/11	2011/12	2012/13	2010/11	2011/12	2012/13	2010/11	2011/12	2012/13
20-29	7	10	26	0	0	0	7	10	26
30-39	22	21	27	0	0	0	22	21	27
40-49	14	11	32	1	0	2	15	11	34
50-59	11	10	14	4	9	13	15	19	27
60+	4	2	3	10	28	40	14	30	43
Total	58	54	102	15	37	55	73	91	157



# **Engaging Registered Dietitians**

The College supports Registered Dietitians to be competent, safe and ethical by keeping them informed of the laws and other professional obligations and expectations for practice. We strive to develop innovative education, assessment and reflection tools to help them maintain their knowledge, skills and competence throughout their career and as their practice environments change.



### Engaging RDs in Reflection and Learning

In 2012, the *Self-Directed Learning* (SDL) Tool was redesigned to make the reflection component more relevant to all RDs, especially those in non-clinical areas of dietetic practice. Over 800 RDs completed an evaluation of the new 2012 SDL Tool and, overall, they felt the tool was more efficient, easier to use and allowed more time to focus on reflection and on SMART learning objectives that were relevant to their practice settings.

### Innovative Approaches to Engage RDs

The College used innovative educational approaches to engage its 3500 members. Issues of our quarterly *résumé* newsletter were offered in a hyperlinked user-friendly online format with interactive quizzes attached to professional practice scenarios. Online learning and sharing through interactive <u>e-learning modules</u> and blogs were developed in the areas of evidence-based practice, inteprofessional collaboration and professional obligations for health providers when using social media.

We continue to apply innovative conceptual and theoretical knowledge to inform the implementation and practice of interprofessional dietetic services across Ontario. Resources include four *résumé* newsletter articles, interactive presentations, online e-learning modules and an interprofessional collaboration blog.

### 49 Workshops and Presentations Given Across Ontario

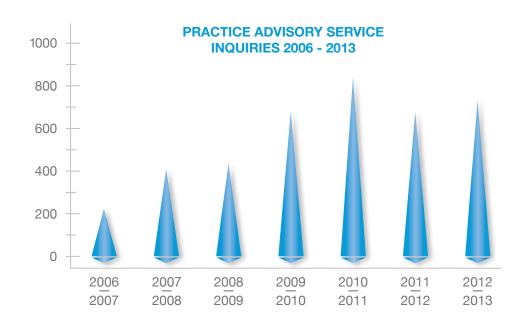
The College delivered 26 workshops across Ontario on the topic of *Evidence-Based Practice*; 25% of RDs attended the workshops, surpassing our goal of 20%

An additional 23 presentations were given to dietitians, dietetic interns and interprofessional groups on the following topics:

- the role of the College, registration, exam preparation;
- jurisprudence and dietetics in Ontario;
- interprofessional collaboration;
- evidenced-based practice;
- professional obligations when using social media in dietetic practice;
- electronic documentation.

### **Professional Practice Service**

Inquiries to the Practice Advisory Service have increased over the last few years. The peak in 2010/11 was due to an influx of questions from RDs about their new obligation to carry professional liability insurance.







### Most popular topics of inquiry:

- Liability Insurance Requirements
- Scope of Practice
- Authority Mechanisms related to controlled acts and ordering diagnostic and therapeutic services in a public hospital
- Record Keeping

### **Satisfaction Survey:**

- 84% of users were satisfied or very satisfied with the service;
- 91% of users felt their issue/question was sufficiently addressed;
- 99% of users would use the service again; and
- 98% would recommend the service to others.

# An Effective Organization

Good governance, effective operations and being an open and accountable organization are integral parts of the College's culture and commitment to gaining the public's trust in regulating the practice of dietetics. These goals are achieved through on-going education, monitoring, evaluations, collaboration and commitment to continuous improvement.

### Responsible Governance

With a view of continuous improvement, Council commissioned an external review of its governance of the college to identify governance practices that should be sustained with confidence or be improved for increased effectiveness. The consulting firm of OptimusSBR reviewed the CDO governance policies and processes against best practices for the following: board and committee composition, financial & legal stewardship, strategy and risk management, accountability, and functioning (ethics and elements of effectiveness).

The results of the independent review showed that the College of Dietitians of Ontario has a well-defined strategy, solid governance policies and aligned practices to sustain excellence in governance. CDO strategy is clearly defined and was in need of minor clarifications and some further documentation to meet best practice standards. The two most significant areas where further formalization or policies and processes would be beneficial are risk management and member engagement in policy and standards development. Work began immediately to implement the recommendations.

### Continuous Quality Improvement in College Programs

### **Commitment to Fair and Transparent Application Processes**

The Registration Program surveyed recent applicants to the College to solicit feedback about the information to applicants and the timeliness of the services provided. The feedback has been very positive, and we received good suggestions for improving the presentation of application and exam information on the College's website. Of those who responded:

- 100% indicated that they received timely responses to gueries by phone or email
- 91% indicated that written information provided by the College was clear and easy to understand

Over 95% indicated that the written notice from the College clearly explained the decision, the reasons for the decisions, and provided enough information about what the applicant needed to do to complete the next steps.



# Commitment to Cost Effective and Efficient Renewal Procedures

As a result of member feedback, improvements were made to the renewal process to make it easier for RDs to provide proof of their professional liability insurance as required by the College. Every year, 20% of RDs are randomly selected to submit proof of liability insurance. Instead of mailing their documentation, members are now able to upload their proof of insurance electronically with their renewal.

# Members and Applicants Contribute to Improving College Programs and Tools

The College recognizes the contribution of well over 200 RDs who have participated in surveys and volunteered their time to help improve College programs in the interest of public protection. We thank our members for responding to continuous improvement surveys and assessments, and for participating in program pilots.

We also thank the applicants who provided feedback on how to improve the application process. All feedback is valuable in helping the College be even more relevant and effective in supporting RDs in all areas of dietetic practice to be competent and safe.

### **Technology Upgrades**

The College has been proactive in planning and updating information and communication technologies, recognizing that effective organizations seek to maximize the benefits of new technologies in delivering and monitoring its programs. Notably, the iMIS 15.2.15 platform was purchased to reduce the total cost of managing the database and allow more flexibility for applicants and members to manage their profile and membership renewals, pay dues online and to register for events.

### Collaboration and Partnership

Working with others who share the commitment to public protection and quality of professional health services expands the base of resources, expertise and perspectives that produces excellent products. The College of Dietitians of Ontario values the opportunity to collaborate and partner with other organizations in Ontario and Canada.

### **National Partnerships**

Dietetics Entry-Level Competencies and Education Accreditation

The College of Dietitians of Ontario is pleased to be part of the leadership of the *Partnership for Dietetic Education and Practice* (PDEP) which is a national partnership of dietetic regulatory bodies, education programs and Dietitians of Canada. In 2012/13, PDEP finalized the *Integrated Competencies for Dietetic Education and Practice* which come into play beginning Fall 2013. The partnership also drafted new standards for the accreditation of academic and practical dietetic education programs. Both the competencies and education accreditation standards form critical underpinnings for the profession of dietetics and assurance of the qualifications for new dietitians to practice safely and effectively.

### Computer-Based Testing

The College works with dietetic regulatory bodies across Canada through the *Alliance* of *Canadian Dietetic Regulatory Bodies* to share perspectives on dietetic regulation and support the continuous development and administration of the *Canadian Dietetic Registration Examination*. In the past year, preparatory work was completed to implement computerized testing where exams in the past have been based on "paper and pencil". Computer-based testing began in May 2013 opening up new opportunities for modernizing the exam and its administration – increasing security, service, and exam validity.

### **Provincial Partnerships**

IPC eTool

In collaboration with the Federation of Health Regulatory Colleges of Ontario, the College participated in launching an online tool entitled, Interprofessional Collaboration (IPC) eTool. The purpose of this tool is to help interprofessional teams coordinate care with respect to the expanded scopes of practice and authorities established by the Regulated Health Professionals Statue Law Amendment Act, 2009.



### Social Media e-Learning Module

The College collaborated with six other health regulatory colleges in Ontario to develop an e-learning module entitled, Pause Before *You Post: Social Media Awareness*. It outlines the professional standards of practice, the legislation and the principles needed to establish risk management strategies to help maintain a professional reputation and appropriate professional relationships with clients.

### Public Awareness Campaign

In partnership with the Federation of Health Regulatory Colleges of Ontario, the College has participated in a public awareness campaign to explain how regulatory colleges exist to protect the public and to help the public access regulated health professionals for safe health care. The purpose of the campaign is to help people be informed health care consumers. In the context of this campaign, several articles were written for community newspapers with a reach of over 3 million Ontarians. Topics included: ask for a copy of your health records; know your health care rights; family health teams offer collaborative care; and how to have productive visits with your health care provider.



# The College Team – Council, Committees & Staff

Council, committees and College staff work hard to ensure that the College fulfills its public protection mandate and effectively supports Registered Dietitians to be safe, competent and ethical in their practice.

Council and Committees (April 1, 2012-March 31, 2013)

### COUNCIL

# Direction, Oversight and Policy RDs Elected to Council

Cynthia Colapinto, RD

Lesia Kicak, RD

Susan Knowles, RD

Terry Koivula, RD (to June 2012)

Barbara Major-McEwan, RD

Nancy Polsinelli, RD (To June 2012)

Erica Sus, RD

Deion Weir. RD

Krista Witherspoon, RD (From June 2013)

Erin Woodbeck, RD (from June 2012)

### Members of the Public Appointed to Council

Edith Brown

Francis Omoruyi (to July 2012)

Elsie Petch

Jeannine Roy-Poirier, Ph.D. (to October 2012)

Carole Wardell

Elizabeth Wilfert



### **COMMITTEES**

### **RDs Appointed to Committees**

Dietitians have an impact on how the dietetics profession is regulated by serving on College committees to help develop regulations, programs and policies for the delivery of safe, ethical and competent dietetic service. They also help assess quality assurance, registration and complaint files.

Susan Campisis, RD

Edith Chesser, RD

Angela Clark, RD

Claire Cronier, RD

Dianne Gaffney, RD

Alicia Garcia, RD (to June 2012)

Susan Hui, RD

Laurel Hoard, RD

Sobia Khan, RD (from March 2013)

Julie Kuorikoski, RD

Léna Laberge, RD

Grace Lee, RD

Kerri Loney, RD

Jill Pikul, RD

Diane Shrott, RD (from June 2012)

Marie Traynor, RD (from June 2012)

Krista Witherspoon, RD

### **Executive Committee**

The Executive Committee acts for Council between Council meetings and has all the powers of Council regarding any matter requiring immediate attention, other than the power to make, amend or revoke regulations or bylaws.

Elizabeth Wilfert, President Lesia Kicak, RD, Vice President Barbara Major-McEwan, RD

### Discipline and Fitness to Practice Committees

The Discipline Committee considers allegations of professional misconduct or incompetence of members and the responsibility of the Fitness to Practise Committee is to provide a fair hearing of matters regarding the incapacity of members to practise safely. There was one referral to the Discipline Committee.

Deion Weir, RD, Chair

Julie Kuorikoski, RD

Lesia Kicak, RD

Julie Kuorikoski, RD (to June 2012)

Barbara Major-McEwan, RD

Francis Omoruyi (to July 2012)

Nancy Polsinelli (to June 2012)

Jeannine Roy-Poirier (to October 2012)

Elizabeth Wilfert

Krista Witherspoon, RD (from June 2012)

### Inquiries, Complaints and Reports Committee (ICRC)

Fair and effective handling of complaints and reports in keeping with Ontario laws and standards.

Erica Sus, RD, Chair

Edith Brown

Cynthia Colapinto, RD

Susan Knowles, RD

Terri Koivula, RD (to June 2012)

Edith Chesser, RD

Léna Laberge, RD

Elsie Petch

Carole Wardell

Elizabeth Wilfert

Erin Woodbeck, RD

(April 1, 2012 to March 31, 2013):

No complaints were received during this period.



# There were 5 reports received this last fiscal period including two reports for one member:

- The member receiving two reports was referred to the Discipline Committee:
- 1 letter of caution was issued:
- 2 reports are still under consideration.

# There were 2 referrals to the ICRC from the Quality Assurance Committee:

- 1 member signed an undertaking following a referral for failing to submit their mandatory Self-Directed Learning Tool;
- Due to concerns about competency and capacity, the Committee supported the exploration of an undertaking not to practice.

The average length of time for completing a file was 195 days.

### Patient Relations Committee

The Patient Relations Committee advises Council with respect to public education and coordinates requests for funding for therapy and counselling should any patient be sexual abused by a member of the College.

Elsie Petch, Chair
Angela Clark, RD (to June 2012)
Lesia Kicak, RD
Sobia Khan (from March 2012)
Kerri Loney, RD
Nancy Polsinelli, RD (to June 2012)
Jeannine Roy-Poirier (to October 2012)
Elizabeth Wilfert
Deion Weir, RD
Erin Woodbeck, RD (from June 2012)

### **Quality Assurance Committee**

The Quality Assurance (QA) Committee provides direction for the design of the QA Program to promote continuing competence and quality improvement among Registered Dietitians. The QA Committee also reviews Self-Directed Learning Tools and member assessments to determine appropriate practice enhancements or public protection actions.

Carole Wardell, Chair

Susan Campisi, RD (to June 2012)

Susan Knowles, RD

Julie Kuorikoski, RD

Grace Lee, RD

Francis Omoruyi (to July 2012)

Elsie Petch

Erica Sus, RD

Deion Weir, RD

Elizabeth Wilfert

### **Registration Committee**

The Registration Committee determines the policies for fair and transparent registration practices to ensure that only qualified individuals are registered to practice dietetics in Ontario. It also assesses applicant qualifications for registration if they have not completed both accredited academic and accredited practical education programs.

Jill Pikul, RD, Chair

Krista Witherspoon, RD, Co-Chair

Alicia Garcia, RD (to June 2012)

Laurel Hoard, RD

Susan Hui, RD

Barbara Major-McEwan, RD

Francis Omoruyi (to July 2012)

Diane Shrott, RD (from June 2012)

Maria Traynor, RD (from June 2012)

Carole Wardell

Elizabeth Wilfert



### **STAFF**

### Office of the Registrar

Mary Lou Gignac, Registrar & Executive Director Beverly Nopra, Administrative Assistant

### Finances

**Sarah Ahmed,** Controller/Accountant **Elsene Randall,** Program Assistant

### Information Technology

Lisa Kershaw, Information Technology Manager

### Registration Program

Carolyn Lordon, RD, Registration Program Manager Elsene Randall, Program Assistant Heena Vyas, Registration Program Coordinator

### Quality Assurance Program

**Barbara McIntyre, RD,** QA Program Manager **Carol Culhane,** QA Program Coordinator

### Communications and Patient Relations Program

Monique Poirier, Communications Manager

### Practice Advisory Program

Carole Chatalalsingh, RD, Practice Advisor & Policy Analyst Deborah Cohen, RD, Practice Advisor & Policy Analyst

# College of Dietitians of Ontario - Member Statistics

The College of Dietitians of Ontario has the legal responsibility under the *Registered Health Professions Act* to register only qualified people to practice Dietetics in Ontario. All applicants must meet the Canadian standards for academic and practical training in order to practice as a dietitian in Ontario.

### **TOTAL MEMBERSHIP BY GENDER**

Total	Gender	Membership
3413	F	97.68%
81	М	2.32%
3494		100.00%

### **NET GROWTH FOR 2012 - 2013**

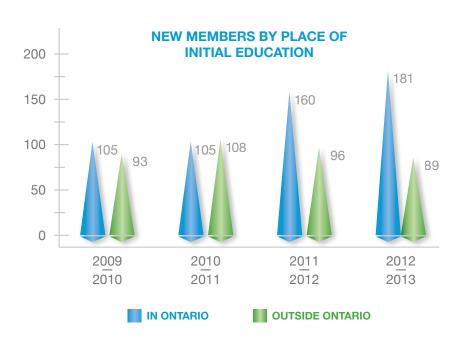
Total	Net Growth
270	Total New Members Admitted
157	Total Resigned or Retired
112	Net Growth

### **MEMBERSHIP BY MEMBER TYPE**

Total	Member Type	Status		
3457	GENERAL	А		
37	TEMPORARY	А		

2012 - 13

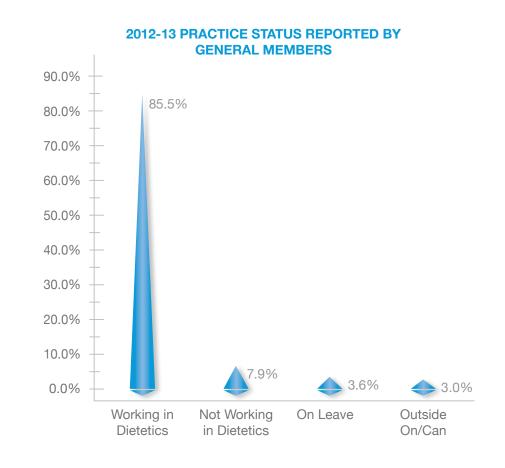




# **1966 Members (56% Of Total Membership)**Report Supervising Interns or students.

# 2,393 (69.5%) Bachelor Master Doctorate

or Equivalent





### 2012 - 13

## **Areas of Practice** Reported by Members Practising in Ontario\*†

	2009 - 2010	2010 - 2011	2011 - 2012	2012 - 2013
Area of Practice	Number of	Number of	Number of	Number of
	Responses*	Responses*	Responses*	Responses*
Clinical One-to-One	1907	2101	2221	2361
Community (Public/Population Health)	575	660	730	788
Academic Teaching and Education	203	257	267	313
Food & Nutrition Management	234	251	273	283
Research	182	217	254	296
Communication	144	166	196	231
Quality & Other Management	144	168	210	236
Policy & Program Develop- ment	143	164	209	236
Other	137	161	202	223
Clinical Nutritional Management	90	148	187	196
Sales & Marketing	107	121	128	150

### 2012 - 13

# Work Settings Reported by GEN and TEMP Members Practising in Ontario\*†

	2010	2011	2012	2013
Work Settings	Number of Responses*	Number of Responses*	Number of Responses*	Number of Responses*
Hospital including Chronic Care Institutions (Adult & Pediatric)	1083	1151	1207	1260
Long-Term Care Organization	436	523	544	553
Diabetes Education Centre	338	407	460	500
Private Practice	264	306	334	364
Public Health Department	259	277	279	279
Community Health Centre / Health Service Organization	212	261	303	317
Business and Industry	208	233	271	318
Family Health Team or Family Health Network	217	228	274	312
University / Community College	170	214	224	257
Other	102	131	171	202
Home Care Agency (CCAC case management or in-home service)	124	127	127	122
Government (Federal & Provincial)	90	98	121	115
Non-Governmental Organization and Association (e.g., Heart & Stroke, Dietitians of Canada)	98	113	141	152
Media, Public Relations & Communications Agencies	78	96	110	119
Rehabilitation Centre	78	93	105	114
Schools	41	57	60	83
Research Facility	41	54	63	72
Occupational Health / Corporate Wellness	41	49	68	72
Assisted Living	21	24	33	34

<sup>\*</sup> Some members reported working in more than one area of practice.
† Data reported only from RDs who reported working in dietetics, being on leave, or doing dietetics related volunteer work in Ontario.

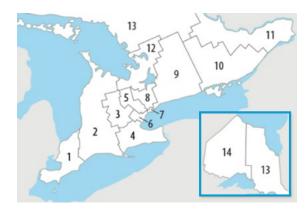
<sup>\*</sup> Some members reported working in more than one area of practice.
† Data reported only from RDs who reported working in dietetics, being on leave, or doing dietetics related volunteer work in Ontario.



### 2012 - 13

Health Integ	n by Local gration Net- (LHIN)*			
Total	LHIN No	LHIN		
126	1	Erie St. Clair		
247	2	South West		
175	3	Waterloo Wellington		
303	4	Hamilton Niagara Haldimand Brant		
115	5	Central West		
244	6	Mississauga Halton		
569	7	Toronto Central		
319	8	Central		
225	9	Central East		
132	10	South East		
378	11	Champlain		
94	12	North Simcoe Muskoka		
136	13	North East		
69	14	North West		
3132	All Ontario	Total Members with a Primary Employer in Ontario		

<sup>\*</sup>Data reported for members with a primary employer in Ontario



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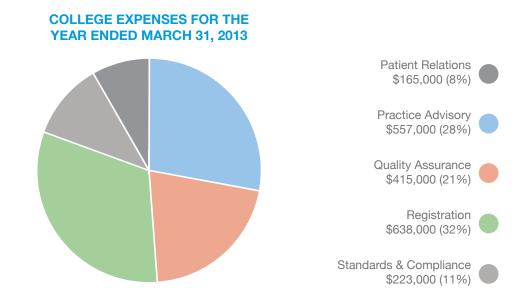
# **Financials**

# Distribution of College Funds Total 2012/2013 CDO expenditures - \$1,998,000

For the year ended March 31, 2013

Costs allocated to programs include specific program administration and a proportional allocation of general administration costs for governance, general management, information systems, rent, professional fees, office supplies and communications (i.e. website, résumé newsletter and annual report). The percentage cost for each program varies annually reflecting planned program activities.

NOTE: All amounts are rounded to the nearest \$1,000.





28

# **Independent Auditor's Report To the Council of the College of Dietitians of Ontario**

We have audited the financial statements of the College of Dietitians of Ontario as at March 31, 2013 in accordance with Canadian generally accepted auditing standards and expressed an unqualified opinion about these statements in our report of June 19, 2013.

The information presented in the accompanying Condensed Statement of Operations and Changes in Fund Balances is derived from the above mentioned financial statements and in our opinion presents fairly the information therein.

Kopskid Old

Kopstick Osher Chartered Accountants, LLP Toronto, ON June 19, 2013

Copies of the 2013 audited financial statements are available upon request.

# Condensed Statement of Operations & Changes in Fund Balances For the Year Ended March 31, 2013

	2013	2012
Revenue		
Membership fees	\$ 1,714,781	\$ 1,637,984
Other income	148,974	153,182
	1,863,755	1,791,166
Expenses		
Salaries and benefits	1,074,538	970,495
Contracted services	57,262	80,691
Council and committee expenses	158,526	130,708
Communication Initiatives	163,037	144,932
Administration	411,827	410,824
Professional services	80,631	64,118
Amortization of capital and intangible assets	51,752	51,673
	1,997,573	1,853,441
Expenses over revenue	(133,818)	(62,275)
Fund balances, beginning of year	1,396,774	1,459,049
Fund balances, end of year	\$ 1,262,956	\$ 1,396,774
Allocation of Fund Balances As at March 31, 2013	2013	2012
Investment in capital and intangible assets	\$ 127,961	\$ 148,121
Internally restricted - Note 1	910,758	915,168
Unrestricted	224,237	333,485
Fund balances, end of year	\$ 1,262,956	\$ 1,396,774

Note 1: Internally restricted funds are reserved for:

- Strategic planning initiatives
- Hearings
- Therapy and counselling of sexually abused clients
- Development and implementation of new Quality Assurance Program components
- Development and implementation of new registration criteria and assessment tools
- Capital and intangible asset purchases

These funds are not available for other purposes without the approval of Council.





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