

# Patient Relations Committee

## Terms of Reference



### Authority and Purpose

The Patient Relations Committee is a statutory committee. [HPPC<sup>1</sup>, s. 10(1) para 7]

The College is required to have a program to provide funding for therapy and counselling for persons alleging sexual abuse by a Registrant. [HPPC s.85.7(1)]

### Mandate, Duties and Powers

The main responsibility of the Patient Relations Committee is to administer the College's program for funding therapy and counselling for persons alleging sexual abuse by a Registrant in accordance with the HPPC. [HPPC, s. 85.7]<sup>2</sup>

The Patient Relations Committee is also responsible for advising the CPSO Board of Directors (the Board) on the College's patient relations program. The College is required under the HPPC<sup>3</sup> to have a patient relations program which includes measures for preventing and dealing with sexual abuse of patients, including:

- educational requirements for Registrants;
- guidelines for the conduct of Registrants with their patients;
- training for the College's staff; and
- provision of information to the public. [HPPC, s. 84(2-3)]

### Roles and Responsibilities

In connection with the above mandate and duties, the Patient Relations Committee:

- reviews applications for funding for therapy and counselling;
- reviews specific therapy requests;
- makes recommendations on issues related to the funding for therapy and counselling program;
- advises the Board with respect to the administration of the fund for therapy and counselling; and

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<sup>1</sup> *Health Professions Procedural Code ("HPPC")*, Schedule 2 to the *Regulated Health Professions Act, 1991* ("RHPA")

<sup>2</sup> The funding program may also provide funding for other purposes related to allegations of sexual abuse by Registrants as may be prescribed in regulations. As of the date of these Terms of Reference, there are no such additional purposes.

<sup>3</sup> The purpose of the provisions of the HPPC with respect to sexual abuse of patients by Registrants is to encourage the reporting of such abuse, to provide funding for therapy and counselling in connection with allegations of sexual abuse by Registrants and, ultimately, to eradicate the sexual abuse of patients by Registrants.

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- considers matters referred to it by the Board and/or other CPSO Committees as appropriate.

### Reporting

The Patient Relations Committee reports to the Board.

### Composition

The Patient Relations Committee shall be composed of the following:

- no fewer than two and no more than four Registrants who are not currently Directors or current members of other committees; and
- one or two members of the public who are not Registrants and who are not currently Public Directors. [CPSO By-laws, s.8.5.1]

### Term of Appointment

The term of office of each Patient Relations Committee member is up to three years and automatically expires at the close of the third Annual Organizational Meeting of the Board<sup>4</sup> which occurs after the appointment or at such earlier time as the Board specifies in the appointment. [CPSO By-Laws, s. 7.6.2)] The maximum number of years that a member may serve on the Patient Relations Committee is nine years. [CPSO By-laws, s. 7.6.6]

### Chair

The Chair of the Patient Relations Committee is a member of the Committee appointed by the Board. The term of the Chair is up to two years.

### Meetings

The Patient Relations Committee meets approximately once a month. Meetings of the Patient Relations Committee may, at the discretion of the Chair, be held in any manner that allows all the persons participating to communicate with each other simultaneously and instantaneously. [CPSO By-laws, s. 7.7.8]

Members of the Patient Relations Committee are expected to regularly attend and actively participate in meetings.

The Chair, or their appointee for this purpose (the “presiding officer”), will preside over meetings of the Patient Relations Committee [CPSO By-laws, s. 7.7.6]. The presiding officer is responsible for recording the meeting deliberations in writing (i.e. minutes). The minutes will be brought to a subsequent Patient Relations Committee meeting for acceptance (and corrections, if any), and once accepted, the minutes are conclusive proof that they accurately reflect the proceedings and deliberations at the prior Patient Relations Committee meeting. [CPSO By-laws, s. 7.7.9-7.7.10]

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<sup>4</sup> The Annual Organizational Meeting is the Board meeting that takes place between November 1st and December 14th of each year. [CPSO By-laws, s. 6.1.1(a)]

### **Quorum**

A majority of the members of the Patient Relations Committee constitutes a quorum. [CPSO By-laws, s. 7.7.5]

### **Decision-Making**

Questions or motions before the Patient Relations Committee may be decided by a majority of the votes cast at the meeting (including the presiding officer at the meeting). <sup>5</sup> If there is an equality of votes, the question is deemed to have been defeated. [CPSO By-laws, s. 7.7.7]

### **Compensation**

Committee members are compensated for committee work and travel time, and are reimbursed for expenses incurred in the conduct of committee business, in accordance with section 12.1 of the CPSO By-laws.

### **Committee Staff Support**

The Patient Relations Committee will receive administrative support from the staff within the Policy division of CPSO. Administrative support includes scheduling meetings, preparing and distributing meeting materials and assistance with organization and notice of each meeting.

### **Declaration of Adherence**

Each member of the Patient Relations Committee must sign a Declaration of Adherence in the form provided by CPSO, which requires committee members to comply with, among other things, conflict of interest, confidentiality obligations and CPSO policies.

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<sup>5</sup> For example, where there are only 3 Committee members present, a majority of the votes is 2.