

# **Consent and Capacity Board**

**Annual Report 2021-2022**

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## Chair's Message

I am pleased to report on the Consent and Capacity Board (CCB) for the fiscal year 2021/2022.

This year the Board faced unprecedented challenges impacting the nature of its work and membership. Once again, application and hearing numbers continued to increase province-wide, and there was meaningful pressure on membership. The conversion of administrative and adjudicative processes to a completely electronic platform required support of electronic file management for all hearing documentation, effective communication, problem-solving and adaptation of and between staff and members as operations and hearing processes evolved. The pilot project to increasingly hold hearings by zoom continued to develop as members were trained in the use of the technology and practices were developed for success in this format. Staff and members responded to the challenges professionally, efficiently and effectively.

The objective of providing fair, respectful and efficient hearings completely electronically required significant member support. Knowledge and application of technology systems, including zoom, were required of all members in order to adapt quickly to changing technology challenges. Member supports were delivered in multiple ways; working groups were established to problem solve and recommend best practices, individuals with expertise in technology provided group and individual coaching, forums were created where members could share problems, solutions and explore best practices, group training in technology platforms, individual study, member meetings and written communication. Despite the many challenges the Board was successful in meeting its mandate without interruption of hearing processes. No single hearing day was lost or cancelled. Regular and ongoing communication with stakeholders and the public was a critical element of the Board's success.

The need for more adjudicators to meet the increased hearing demand together with significant membership losses created meaningful pressure on a part-time membership model. The Board instituted major, province-wide membership recruitment across its five disciplines. Education, training and mentoring programs for new members were prioritized to provide key instruction to support fair, efficient and sensitive hearing practices. As with hearing practices, training and mentoring programs were revised and delivered electronically. Recruitment and appointment of two key vice-chair public members from the ranks of experienced public members, supported the development of the competence of members in the area of technology.

Hearing efficiency was supported by a prehearing practice where complex matters were identified and carefully case managed by a team of experienced senior lawyer members. This year all members were provided training designed to identify and debate best practices in hearing management. The

Board reinstated its practice of membership wide education sessions through a diverse program delivered in multiple sessions by zoom.

The COVID-19 outbreak created unprecedented challenges to the Board. The Board continues to use teleconference as a default hearing platform augmented by a pilot project using (zoom) videoconferencing technology. To date In-person hearings have not been held respecting social distancing, stay at home requirements and eliminating personal attendance at facilities. The Board communicated revisions to the electronic hearing platform to the public and stakeholders.

The CCB continued to meet legislated requirements regarding scheduling hearings within seven days of receipt of an application, releasing decisions by the end of the day following the hearing and issuing written reasons within four business days even in a state of health emergency.

I acknowledge and thank CCB staff for the delivery of efficient, timely and fair customer service to the public, and support for the membership and acknowledge the challenges posed by the various public health measures, disruptions, and personal and community challenges each of us faced over the past two years. Staff members have continued to work tirelessly to ensure that the Board's statutory requirements were met and adapted to continually changing circumstances brought by the pandemic environment and consequential systemic change.

I acknowledge and thank CCB members for the dedication, professionalism, compassion, flexibility and fairness they demonstrate in the fulfillment of their duties. The decisions they reach have real, serious and lasting effects on the most vulnerable in our society. Members were nimble in response to rapidly changing circumstances including significant challenges posed by a rapid transformation in hearing processes.

Staff and members are to be commended for their extraordinary and professional response to the pandemic.



Marg Creal  
Chair

# Mission, Mandate and Jurisdiction

## Mission

To provide fair, timely, effective and respectful hearings that balance legal and medical considerations while protecting individual rights and ensuring the safety of the community.

## Mandate

The CCB is an independent administrative tribunal with a mandate to adjudicate on matters of capacity, consent, civil committal, substitute decision making, disclosure of personal health information and mandatory blood testing.

## Jurisdiction

The CCB is responsible for holding hearings and for making decisions on matters in which the least restrictive, least onerous and least intrusive decisions are made to:

- 1) maintain the safety of the individual
- 2) protect the safety of the community
- 3) maintain the dignity and autonomy of the individual
- 4) preserve the right of a person to have treatment when required.

The CCB's authority to hold hearings arises under the following legislation:

### ***Health Care Consent Act***

- Review of a finding of incapacity to consent to treatment, admission to a care facility or a personal assistance service
- Consideration of the appointment of a representative to make decisions for an incapable person with respect to treatment, admission to a care facility or a personal assistance service
- Giving directions on issues of treatment, admission to care facilities and personal assistance services

- Consideration of a request for authority to depart from prior capable wishes of an incapable person
- Review of a decision to consent to an admission to a hospital, psychiatric facility or other health facility for the purposes of receiving treatment
- Review of a substitute decision-maker's compliance with the rules for substitute decision-making
- Consideration of a request to amend or terminate the appointment of a representative

### ***Mental Health Act***

- Review of involuntary status for a patient subject to a certificate of involuntary status, renewal of involuntary status or continuation of involuntary status
- Consideration of a request to order, vary or cancel specific conditions for an involuntary patient
- Review of a finding of incapacity to manage property
- Review of whether a young person (aged 12 - 15) requires observation, care and treatment in a psychiatric facility
- Review of a Community Treatment Order

### ***Substitute Decisions Act***

- Review of a finding of incapacity to manage property

### ***Personal Health Information Protection Act***

- Review of a determination of incapacity to consent to the collection, use or disclosure of personal health information;
- Review of a substitute decision maker's compliance with the rules for substitute decision-making
- Consideration of the appointment of a representative to consent to the collection, use or disclosure of personal health information on behalf of an incapable person
- Consideration of a request to amend or terminate the appointment of a representative

### ***Child, Youth and Family Services Act***

- Review of a determination of incapacity to consent to the collection, use or disclosure of personal information

- Review of a substitute decision maker's compliance with the rules for substitute decision-making
- Consideration of the appointment of a representative to consent to the collection, use or disclosure of personal health information on behalf of an incapable person
- Consideration of a request to amend or terminate the appointment of a representative

***Mandatory Blood Testing Act***

- Review of a request, by an eligible individual who has allegedly come into contact with another person's bodily fluid, for an order that a blood sample of the other person be provided and analyzed for specific blood borne pathogens.

## Organization

The CCB is an independent adjudicative Board created under the *Health Care Consent Act* with jurisdiction under that Act, the *Mental Health Act*, the *Substitute Decisions Act*, the *Personal Health Information Protection Act* and the *Mandatory Blood Testing Act*.

The CCB had 132 members, as of March 31, 2022. In addition to the full-time Chair and two full time Vice Chairs, part-time CCB members include five Vice Chairs, 40 Lawyers, 29 Psychiatrists, ten Physicians, nine Nurses in the Extended Class and 36 Public members. Members of the CCB are appointed by Order-in-Council, for a term of one to five years.

As of March 31 2022, 18 employees of the Ontario Public Service support the work of the CCB and its members including 14 permanent positions allocated to the Board, three temporary unallocated positions and one lawyer reporting to the Ministry of the Attorney General and permanently assigned to the Board. Along with a Registrar, Deputy Registrar and Counsel, ten employees in the hearings unit and five in the administrative unit are responsible for functions such as: scheduling and supporting hearings, creating and serving appeal records, records management, financial processing, providing executive support to the Chair, coordinating the member appointment process, organizing staff and member training, liaising with stakeholders, answering public inquiries, strategic planning, providing legal advice to the Chair and the Board, and monitoring and ensuring compliance with legislation and government directives and policies.

As a quasi-judicial body, the CCB maintains an arm's length relationship with the Ministry of Health. The Chair is accountable to the Minister while staff report through the Corporate Services Division of the Ministry. The CCB functions under statutory requirements and a Memorandum of Understanding between the Chair and the Minister of Health.



# Performance Measures

## Statutory Performance

Performance measures for the CCB regarding the scheduling of hearings and the issuance of decisions and written reasons are established by the *Health Care Consent Act* and are as follows:

1. The Board shall promptly set a time and place for the hearing.
2. The hearing shall begin within seven days after the day the Board receives the application, unless all parties agree to a postponement.
3. The Board shall render its decision and provide a copy of the decision to each party, or the person who represented the party, within one day after the day the hearing ends.
4. If within 30 days after the day the hearing ends, the Board receives a request from any of the parties for reasons for its decision, the Board shall, within four business days after the day the request is received, issue written reasons for its decision; and provide a copy of the reasons to each person who received a copy of the decision
5. Where a decision of the Board is appealed, the Board shall promptly serve the parties and the Court with the record of proceedings before the Board, including a transcript.

The Board consistently meets its statutory timelines with respect to notice, convening hearings and issuing decisions, reasons and records of proceeding.

## Operational Performance

The CCB moves exceptionally quickly to adjudicate matters at the intersection of the medical and legal systems and makes decisions on issues with serious consequences for individuals and for the community, such as civil detention, decisions regarding health care or loss of control of personal financial resources. Decisions of the Board have implications for both the wellbeing and rights of individuals. Hearings are convened at up to 250 venues throughout the province, including hospitals, long-term care facilities and community locations, with most hearings taking place within schedule 1 psychiatric facilities (note that in 2021/2022 all hearings took place remotely). Adjudicators are part time appointees, most of whom have other professional obligations, and Board staffing resources are very lean relative to caseload. Given the environmental considerations and operational constraints within which the Board operates, the

CCB must strive to ensure that its adjudicative and operational processes are clearly focussed on achievement of its statutory performance measures.

Compliant statutory performance is dependant upon excellent operational performance including the following requirements:

- Engage in high quality, merit-based recruitment of new members and reappointment recommendations of existing members
- Provide excellent initial training and onboarding to new members
- Provide efficient and effective ongoing educational opportunities for members to develop and maintain specialized expertise
- Provide effective mentorship and peer review for members
- Provide high quality initial training, onboarding and ongoing training and development opportunities for staff to ensure they are skilled, knowledgeable and engaged
- Make use of technology to support hearing operations
- Provide clear, informative and accessible information to stakeholders and the public
- Engage with stakeholders and government with respect to the delivery of the Board's services
- Maintain administrative processes which are designed to support the achievement of the Board's mandate
- Use public funds in a responsible fashion
- Conduct hearings which are both fair and efficient
- Create an environment of respect for the adjudicative process, the parties and the public
- Engage in ongoing review of the Board's operations, through a lens of continuous improvement

## 2020/2021 Accomplishments

### COVID-19 Pandemic Response

Until early 2020 the CCB conducted primarily in-person hearings convened in the health facility where the subject of the application was located or received care while also making limited use of teleconferencing and videoconferencing to convene select hearings. This primarily in-person model required board members to travel to up to three health facilities (including hospitals and long-term care homes) per day, and up to 15 different facilities in a week. The Board's response to COVID-19, which was developed in keeping with local, provincial and federal pandemic requirements, was focussed on protecting parties, adjudicators, service providers, facilities and the community at large while continuing to deliver the Board's challenging mandate and meeting statutory timelines associated with its work. As previously reported the Board switched all hearing operations to a digital format as of March 16, 2020. Throughout 2021/2022 the Board continued with digital operations, working to improve and refine both internal processes and service delivery. Staff and members continued to work primarily remotely, workflows and tools were refined to better meet the demands of the pandemic model, enhanced training was provided to members to support digital hearing operations and a gradual expansion of the use of video for hearings began.

### Digital Hearing Operations

1. *Embracing Digital-First* – as a Tribunal which had long incorporated digital tools in its hearings and administrative operations, the Board was well positioned to pivot to a fully digital environment at the onset of the pandemic. The Board recognizes that digital hearings do present challenges and obstacles that must be considered however they also present many positive opportunities that the Board intends to leverage beyond the pandemic environment. For example, digital hearings present the opportunity to convene diverse panels, to provide a common hearing experience for individuals located in all communities in the province, to enhance the opportunity for an accessible and open hearing process and help to ensure the responsible use of public resources. The Board has, since March 2020, taken an iterative approach to improving digital operations, pursuing strategies such as realigning workflows in the scheduling and hearing support units, improvements to document delivery protocols, utilization of members by the Chair's office in support of improved hearing efficiency and effectiveness, and the delivery of technical training and support to members. The Board will

continue with efforts to enhance the digital experience for parties, adjudicators, staff and stakeholders as it moves forward with a digital-first focus in the year ahead.

2. *Videoconference Pilot Project* – In March 2020 the Board ceased holding in-person hearings, replacing them with teleconferences, in keeping with public health restrictions and with the goal of protecting the wellbeing of parties, adjudicators and the community. While in-person hearings were suspended due to the public health emergency, there was a recognition that teleconferencing would not meet the needs of all hearings and the Board continued to convene a limited number of matters by videoconference where the circumstances warranted, either on request of the parties or on the Board’s own initiative. The Board later launched a pilot program to usher in a formal process for requesting a videoconference. Upon receipt of such a request a Case Conference was held to consider the request, hear from other parties, and discuss the logistics of convening the matter by video. By the end of 2021/2022 the Board implemented its current policy where requests for videoconference hearings which are made mutually by the parties are automatically granted.
3. *Video-first Expansion* – In Q4 of 2020/2021 the Board launched a proof-of-concept pilot which saw all hearings at one facility presumptively scheduled as videoconferences. This early effort was successful and throughout 2021/2022 the Board invited additional facilities to join this video-first model. Planning is currently underway to roll out an enhanced video-first program in 2022/2023.

## **Stakeholder Consultation, Outreach, Education and Communication**

1. *General stakeholder relations:* In 2020/2021 the CCB met with various organizations and bodies, including the Ministry of Health and Legal Aid Ontario and participated in discussions of mutual interest.
2. *Stakeholder committees:* The CCB also engaged with two key stakeholder committees in 2021/2022. The first is composed of psychiatrists that generally represent themselves at CCB hearings. The second is composed of counsel that represent patients / residents, physicians and other parties before the CCB. These meetings provided an opportunity to communicate on issues of mutual interest and proved to be an effective tool for sharing information and gathering feedback. In particular in 2021/2022, these meetings provided an invaluable opportunity to discuss the electronic hearing platforms instituted in response to the pandemic.

3. *Information sharing and stakeholder education:* The CCB continued its information sharing program in response to requests to educate parties to CCB hearings, counsel and stakeholders about the roles and responsibilities of the Board, its processes, and associated implications for healthcare professionals and individuals. These presentations are designed to assist persons who appear before the Board to communicate with CCB personnel and effectively prepare for, and participate in, hearings. This initiative promotes good relations with the Board and facilitates high quality hearings. In 2021/2022 eight programs were delivered virtually to stakeholders. In addition, In 2021/2022 the Canadian Network of Mental health Review Board Chairs Working Group met to discuss matters of mutual interest and share information regarding tribunal work in mental health across the country.
4. *Communications:* The Board began a process of reviewing communication tools such as its website, information sheets, notices, fax cover sheets and letters. The goal of these ongoing efforts is to make legal and technical processes more accessible through the use of plainer language, easy-to-use information, and simplified and accessible formatting.

## **Effective Hearing Management**

1. *Case Conferences:* In 2021/2022 the Board refined its use of case conferences to focus on matters which would most benefit from case management. This allowed the Board to reduce the overall number of hearing sessions convened while continuing to improve the efficiency and effectiveness of the hearing process in complex matters. In 2020/2021 the Board utilized case conferences in 370 cases, while in 2021/2022 this was reduced to 263 cases.
2. *Delivery of documents to be relied upon at hearing to the Board and other parties:* In 2021/2022 the Board worked to expand stakeholder knowledge of, and compliance with, Policy Guideline 4 which was implemented in October 2020. Policy Guideline 4 aims to support effective hearing operations and procedural fairness by laying out requirements for the submission of documents parties will rely on at hearings. In addition to appending a copy of the Policy Guideline to all Notices of Hearing, in 2021/2022 the Board implemented Hearing Reminders sent parties and counsel two business days prior to all hearings, reminding them of their obligations under the Guideline. The Board has observed increased compliance with the Guideline since this implementation which has contributed to a better hearing experience and improved overall operations.

## **Member Recruitment, Training, Continuing Education, Engagement and Development**

1. *Recruitment:* Recruitment, merit-based interviews and recommendation of new members are conducted in accordance with the requirements of the Adjudicative Tribunal Accountability Governance and Appointments Act. In 2021/2022 the CCB initiated one recruitment competitions for a full time Vice-Chair (Lawyer) and two part time Vice Chair (Public) members. Interviews were also undertaken in three competitions initiated previously, including for Lawyer, Medical and Public members. In 2021/2022 17 new members were appointed to the CCB including six Lawyers, one Physician, three Psychiatrists, one Nurse-in-the-extended-class and six Public members. There were nine members reappointed and another nine members were not reappointed during this period including one who sought reappointment and was recommended by the Chair.
2. *New Member Training:* The CCB conducted its new member training program which includes hearing observation, classroom training, a mock hearing exercise and participation on hearing panels with experienced member mentors. 18 new members received this training in 2021/2022. See Board Members' Training and Professional Development section of this Report for further details.
3. *In-Service Training:* In response to the increasing complexity of matters before the CCB, and turnover among more experienced members, in 2021/2022 the Board continued its in-service training program, initiated in 2017/2018, with 16 sessions with a combined attendance of 757, with many members attending training on more than one topic. Further details on member training programs can be found in the Board Members Training and Professional Development section of this Report.
4. *Technical Skill Development:* While the level of technical competence among members, who do not receive in-hearing support from the Board office, has increased dramatically in the face of digital hearings, the Board continues to support the development of technical skills among members to enhance their ability to manage in a digital hearing environment. In 2021/2022 two member-led sessions were provided on the use of advanced PDF tools required by lawyer members for the management of documents presented by parties for hearings. Two additional member-led sessions were provided on the use of Zoom, the platform used by the Board for video hearings. A highly skilled Public member also provided numerous informal individual and small-group sessions tailed to support individual member needs and competency development.

5. *Engagement* – In addition to supporting significant peer-led education and knowledge sharing, the Chair hosted four member town hall meetings which provided a forum for consistent messaging, identification of issues, constructive discussion and solution development among the membership. While such open forum discussions have been held in the past, in 2020/2021 the inclusion of this interactive communication between the Chair’s office and the membership was of paramount importance as a means to acknowledge and address the various challenges presented by the new digital hearing model ranging from technical issues, to new hearing management needs, to member isolation.

## **Scheduling and Administration**

1. *Business Continuity in a Remote Environment:* As employees of the Ontario Public Service, and in keeping with public health recommendations at the municipal, provincial and federal levels, CCB staff have been teleworking throughout the pandemic, with the exception of attendance at head office for essential work and as part of brief OPS-wide “return to the office” programs in late 2021 and early 2022. The Board leveraged earlier operational and technical modernizations to pivot quickly to a fully remote workforce. Working collaboratively Board staff built on the pre-existing integration of technology in their daily work to transition workflows and develop new best practices while seamlessly providing ongoing service to the public. Leveraging the opportunities created by remote work allowed the Board to maintain high productivity and meet its challenging statutorily mandated timelines, while absorbing new responsibilities related to scheduling and supporting a fully digital hearing platform and the transition of corporate activities from hardcopy to digital processes. Due to the Board’s quick and nimble transition to a digital hearing model scheduling, hearing and business operations have continued without interruption in a remote environment.
2. *Workflow realignments and resourcing complement:* The Board undertook a review of scheduling operations and made significant workflow adjustments that better supported the absorption of ongoing caseload increases and the demands of digital hearings while leveraging the opportunities of remote work. The Board was also granted three temporary resources in response to exceptional caseload increases which occurred during the covid pandemic. These additional resources, while temporary, have allowed a better alignment of scheduling and hearing support activities, have improved the wellbeing of staff and have resulted in better service to stakeholders.

## Diversity, Equity and Inclusion

- 1. Member and Staff Education:* The Chair invited an expert in cultural competence in adjudication to host a workshop for members as the plenary session of the fall 2021 all member education series. The goals of this workshop were to help adjudicators to examine the role of implicit bias, power and privilege in the hearing room; to consider the scope and significance of cultural differences and how they relate to adjudicative work; and to develop skills required to create inclusive hearing environments. Meanwhile, Board staff embarked on a series of educational programs to develop anti-racism capacity and competencies with an initial session which led them on an exploration of the roots of racism. All staff also participated in an Indigenous Cultural Competency Training program offered by the Ontario Public Service in response to Call to Action 57 from the Truth and Reconciliation Commission's Report. This mandatory program was designed to help Ontario public servants increase their capacity and awareness to build resilient relationships with Indigenous communities; develop culturally respectful policies and programs that are accessible and address the needs of Indigenous peoples; and act as cultural allies. This program was also offered on a voluntary basis to members with more than 30 accepting the initial invitation in Q4 of 2021/2022. These educational and knowledge sharing sessions will continue in the year ahead.
- 2. Cultural Competency & Diversity Working Group:* In 2021/2022 the Chair struck a committee of members to examine, consider and advise on issues of diversity, equity and inclusion, cultural competency and bias. Their ongoing work will be invaluable to the efforts of the Board to address these issues in the Board's system, adjudication and recruitment of members.
- 3. Gender Inclusive Language:* The Board initiated efforts to review and revise standards of communication through an inclusivity lens focused on gender inclusive language. As documents, such as information sheets and application forms, are updated, gender inclusive language is being employed. Board staff and members are also encouraged to adopt inclusive standards in their formal and informal written and oral communications on behalf of the Board and to embrace the best practice of proactively providing their own preferred pronouns to demonstrate their commitment to inclusivity for others



## **Members' Training and Professional Development**

The CCB has a comprehensive training program for new and existing members, designed to ensure the Board is populated with well-trained and highly qualified adjudicators. The Board's training program includes new member education, mentoring, performance evaluation, reference resources and in-service training. In 2021/2022 all training and development was provided virtually to members with nearly 800 learners in total, with many members attending multiple sessions.

### **New Member Education**

New Member Training, which is mandatory for all new members, provides an essential overview of the legislation, rules and policies that govern the work of the Board and provides new members with a foundational understanding of their role in the delivery of the Board's mandate. New Member Training is a member-led program and in 2021/2022 was delivered once, by videoconference, over the course of three days with 18 new members participating. As part of their training, new members are also paired with an experienced mentor who sits on panels with their mentee and who provide new members with advice and guidance during the training period and beyond.

### **New Presiding Member Supplemental Training**

New Presiding Member supplemental training was developed in recent years in recognition of increasing hearing complexity, heightened demands on Lawyer members and the significant number of new Lawyer members. This training was provided once in 2020/2021 to four Lawyer members.

### **Member-sector Best Practices Training**

Expanding on sector specific training program for best practices for presiding members (lawyer members) which was developed by members, under the guidance of the Chair, in recognition of increased hearing complexity, the unique demands of digital hearings, and the value of continually refreshing adjudicative knowledge and skills a similar program was developed for

medical and public members. These virtual sessions were held on six occasions in 2021/2022 and were attended by 77 members.

## **All Member Education**

In the fall of 2021, the Board offered members and staff a five-part weekly series of professional development sessions on a range of topics relevant to CCB adjudicators. These sessions were developed and organized by a member working group and delivered by primarily by members. Participation was mandatory for members. Topics included practical legal issues, ethical issues, selected topics in psychiatry and administrative matters. An external legal educator was also retained to develop and present a session, with input from adjudicators, on culturally competent adjudication.

## Legal Developments

### Ontario Superior Court of Justice End of Life Decision Affirming Board's Jurisdiction and Role

[Morlani et al. v. Haddara, 2021 ONSC 7288 \(CanLII\)](#)

In November 2021, the Ontario Superior Court of Justice heard an end-of-life matter that affirmed the Board's jurisdiction and role in such cases.

In this matter, the applicant (parent) filed a Form C (Application for an appointment as representative to make treatment decisions) and a Form D application (Application to the Board for Directions), primarily to determine if an apnea test proposed by the health practitioners was consistent with the patient's wishes and in his best interests. The patient was on a ventilator and was receiving fluids and medications. An apnea test, which assesses respiratory effort, was recommended by the neurologist as more formal and standard testing to determine whether the criteria for neurological death had been met.

At a preliminary case conference before the Board, the doctor took the position that the Board lacked jurisdiction to make these findings and indicated that the apnea test would proceed. As a result, the applicant brought an urgent application to the Ontario Superior Court of Justice for an injunction to prevent the apnea test from taking place, and to permit the Board to review the matter.

The Ontario Superior Court's decision referred (pages 7-8) to the Supreme Court of Canada's seminal decision in [Cuthbertson v. Rasouli, 2013 SCC 53 \(CanLII\), \[2013\] 3 SCR 341](#). In particular, the Superior Court referred to the Supreme Court's analysis: on whether consent is required to withdraw life support; the broad and expansive definition of "treatment" in the *Health Care Consent Act, 1996* (HCCA); the statutory framework in the HCCA in relation to this issue; and the Board's responsibility (as set out by the HCCA) to decide disputes over consent to treatment for patients who have been determined to be incapable based on an objective assessment of whether the substitute decision maker complies with the principles of consent and requirements in the HCCA.

Ultimately, the Ontario Superior Court found that the Board has jurisdiction to determine what is treatment (and whether the proposed apnea testing is "treatment" for which consent is required) and that such types of applications fall under the Board's jurisdiction. The Court also commented about the need for a fulsome review of such questions and commented on the Board's role and process:

[55] In my view, the Board is well equipped to determine its own jurisdiction. If it errs on an issue of jurisdiction, there is an appeal route to the Court. The Court then exercises the appropriate standard of review with respect to jurisdiction. In my opinion, the Court ought not to lightly enter the fray at first instance when there is a statutorily empowered tribunal that has expertise in the area and interprets the legislation in question as part of its mandate.

[...]

[58] In my view, that same reasoning applies with respect to the issue of jurisdiction. The Board is well suited to determine its own jurisdiction. There remains a role for the Court during the appeal process. If the Board declines jurisdiction when it ought not to, or acts without jurisdiction, the Court may review that determination on appeal.

[59] I return to *Rasouli*, where McLachlin C.J.C. concluded as follows at para. 103:

[103] Bringing its expertise to the issue, the Board’s decisions may be expected to bring consistency and certainty to the application of the statute, thereby providing essential guidance to both substitute decision-makers and health care providers in this difficult area of law.

The Ontario Superior Court later released an Costs Endorsement (unpublished) in this case on March 18, 2022. In this Endorsement, the Court again commented on the Board’s jurisdiction as above, its considerable expertise as well as the Board’s very timely and cost-effective adjudicative process.

### **Revised and Updated Policy Guidelines 1 and 2, effective March 31, 2022**

The Consent and Capacity Board’s Policy Guidelines assist Board members in carrying out their duties. The purpose of these Policies is to promote coherence, consistency, and fairness in the treatment of applicants appearing before the Board.

The Board’s Policies are developed after extensive internal and external consultation, and they identify guiding principles for adjudicating and managing cases. While not binding on Board members, these Policies provide guidance to Board members and to the personnel supporting

adjudicative functions with regard to the procedures that should be followed in particular situations before the Board.

Board members are expected to apply these Policies or provide a reasoned justification for not doing so in special circumstances in which the application of the Policy Guidelines will result in undue unfairness to one of the parties.

In February 2022, the Board posted two newly updated proposed versions of Policies 1 and 2 for stakeholder consideration and comment. These Policies were updated for consistency with case law developments and/or to provide further guidance to stakeholders.

The Board received numerous responses from both internal and external stakeholders, and extended the time period set for feedback as a result of the great interest in the Policy Guidelines. The Board thanks all individuals and groups that took the time to provide feedback on the Proposed Policy Guidelines. The Board carefully reviewed all the extensive feedback received and implemented several of the suggestions received during the consultation with a view to improving the clarity of the Policy Guidelines and add to the fairness considerations included in the Policy Guidelines.

The Revised and updated Policies can be found at:

- [Policy Guideline No. 1](#) - Right to Apply When Certificate of Involuntary Status or Renewal or Continuation is Renewed Before the Board Renders a Decision
- [Policy Guideline No. 2](#) - Arranging Legal Counsel for a Person who is the subject of an application

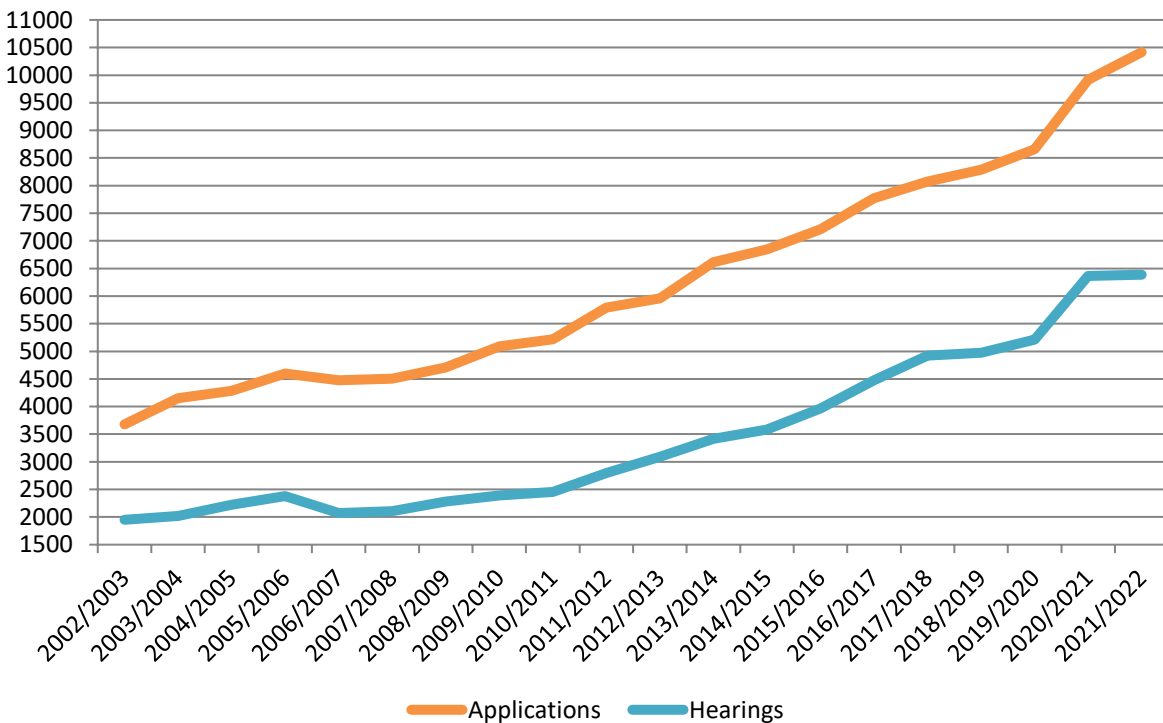
The new Policy Guidelines are effective as of March 31, 2022.

# Caseload

## Caseload Increase

The CCB has an obligation to accept and process all applications submitted and convene hearings within statutory timelines regardless of increased volumes or other factors. For the 2021/2022 fiscal year application receipts climbed to over 10400 and over 6300 hearings were convened province wide. This is approximately a 180% increase in applications and a 227% increase in hearings since the centralization of provincial operations.

## Caseload Increase

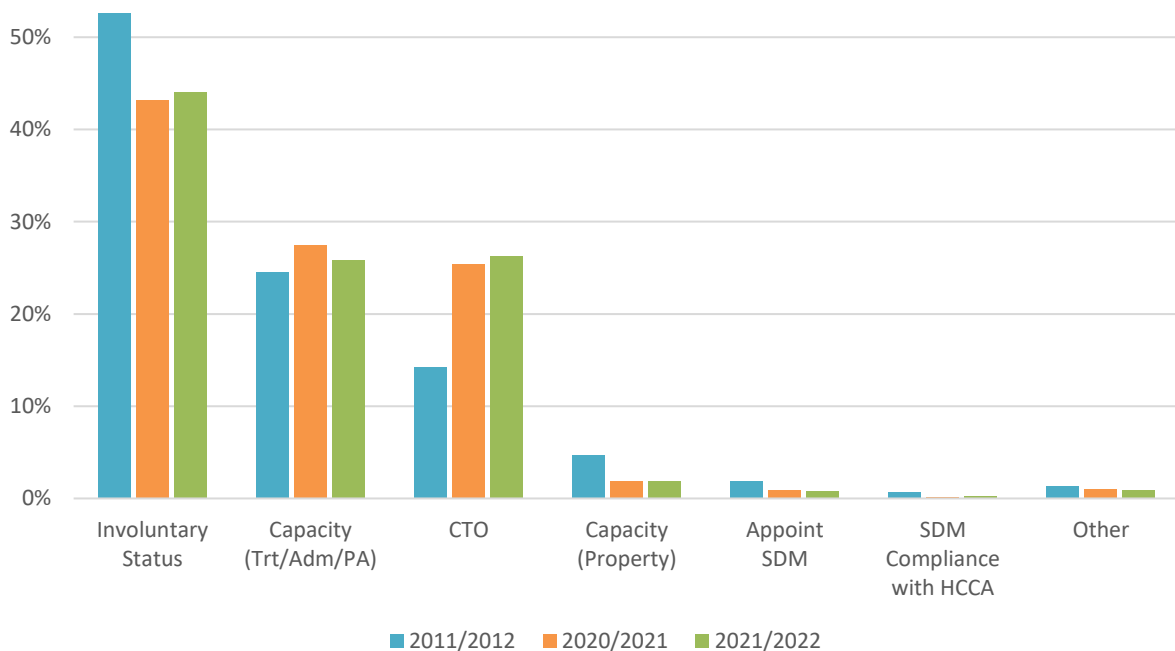


## Applications to the Board

In 2021/2022 a total of 10417 applications were received by the CCB. This is up from 9917 the prior year and 5794 in 2011/2012. The chart below shows application types received as a percentage of the total received in 2021/2022 in comparison to 2020/2021 and 2011/2012.

The majority of the applications to the Board continue to be those related to a review of involuntary status however, as the chart illustrates, involuntary status applications as a percentage of total applications to the Board has fallen over time. Additionally, growth in applications to review Community Treatment Orders, both patient initiated and mandatory, somewhat mirrors the decline in involuntary status applications. In 2021/2022 applications with respect to a review of a finding of incapacity (regarding treatment, admission to long term care, or the provision of personal assistance services in a long term care or retirement home) made up approximately a quarter of all applications to the Board, as did applications to review CTOs. Applications to review the compliance of a substitute decision maker with the principles of substitute decision making as laid out in the Health Care Consent Act continue to make up less than a quarter of one percent of all applications received.

Application Types Received as Percentage of Total

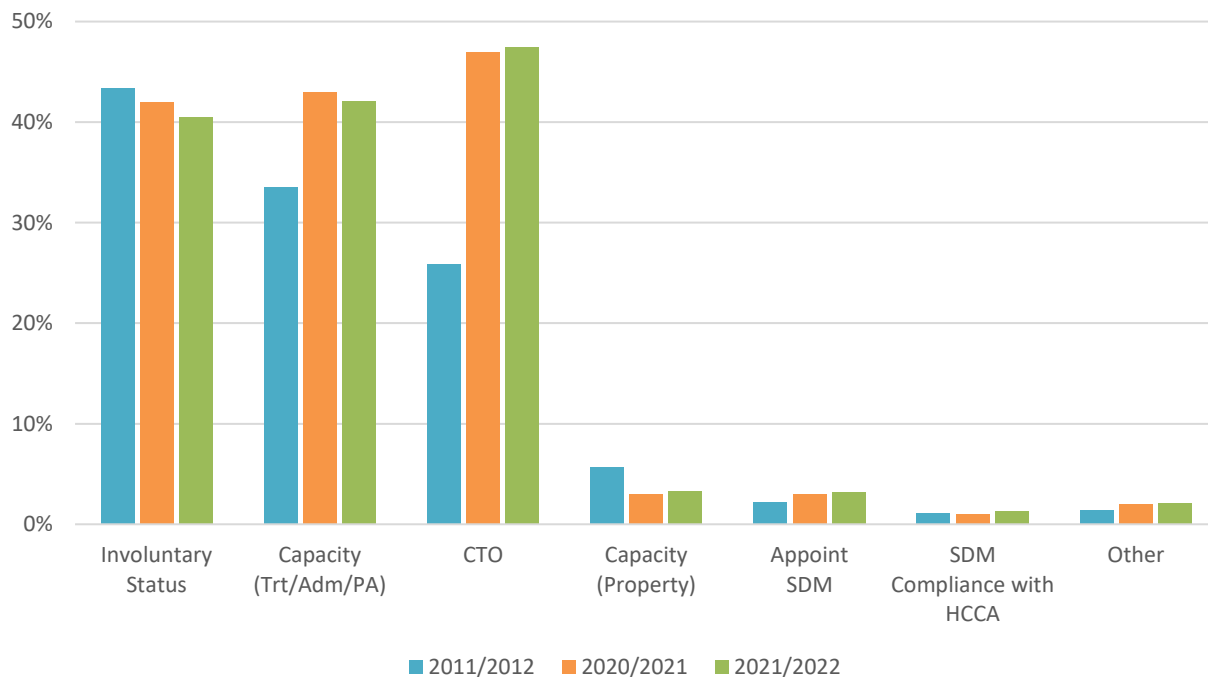


## Applications Reviewed at Hearings

In 2021/2022 a total of 6382 hearings were convened by the CCB. This is up from 6365 the prior year and 2794 in 2011/2012. The chart below shows the percentage of hearings at which various application types were heard in 2021/2022 in comparison to 2020/2021 and 2011/2012. Note that the total of all hearings by application type is greater than 100% because more than one application may be reviewed at a single hearing.

As with applications received, historically most hearings convened by the Board involve an application for a review of involuntary status, a finding of incapacity with respect to treatment, admission or personal assistance, or a Community Treatment Order. In a continuation of the trends seen in application receipts, the percentage of hearings considering involuntary status has declined, while those considering CTOs have increased. In 2021/2022 Community Treatment Order reviews were the most common application reviewed at hearing, having been considered at 47% of all hearings, up from 26% in 2011/2012. This marks the second consecutive year that CTO were the application most commonly considered at hearings which convened.

Percentage of Hearings by Application Type



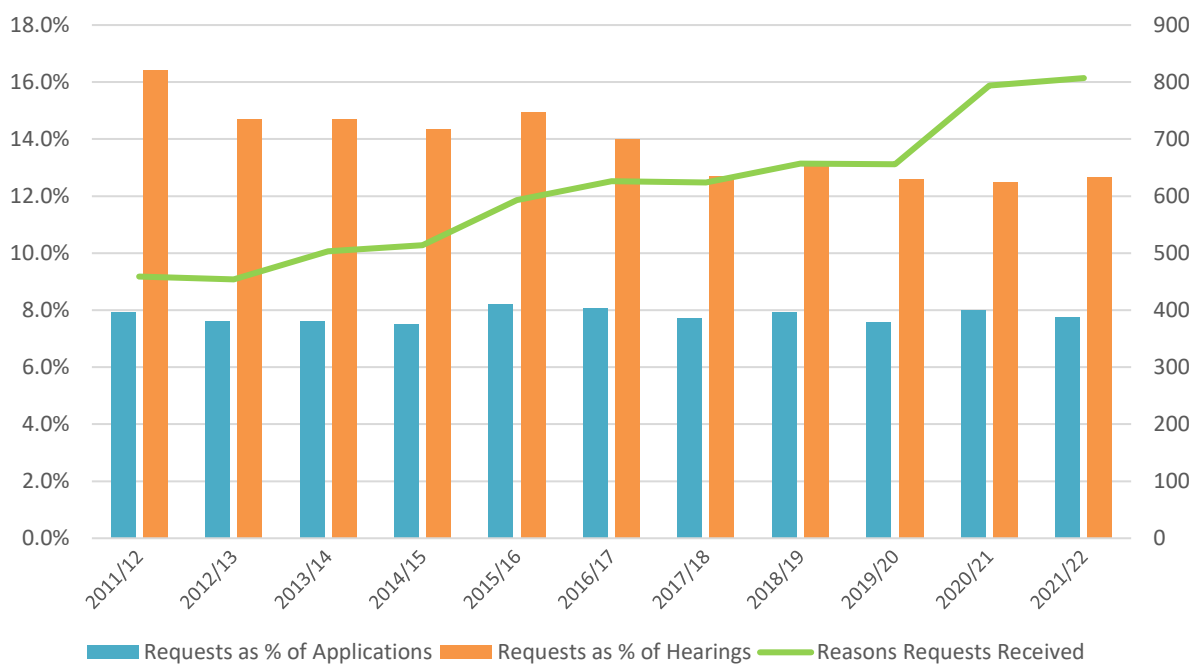


## Written Reasons for Decision

Following a decision of the the Board, any party may request written reasons for that decision. Reasons are prepared and released in accordance with statutory provisions. Regardless of who the requesting party is, written reasons, once prepared, are issued to all parties. If written reasons for decision have not already been prepared at the request of a party, they are subsequently prepared when a decision of the Board is appealed to the Ontario Superior Court of Justice for inclusion in the Record of Proceeding. Reasons are published for reference purposes and are available for free on the website of the Canadian Legal Information Institute. Reasons are fully redacted to protect the privacy of vulnerable persons.

In 2021/2022 the Board received 807 requests for written reasons, up marginally from 794 the year prior. Although requests for reasons have increased by 75% since 2011/2012, as the chart below shows, the number of requests have roughly kept pace with the overall increase in caseload during the same period. For the past five years the volume of reasons requests have been approximately equal to 8% applications received or 13% of hearings convened. While there is not a direct correlation between applications or hearings and reasons requests, this comparison provides some context for the increases in appeal raw numbers over time.

**Reasons Requests Received and as a Percentage of Applications Received and Hearings Convened**

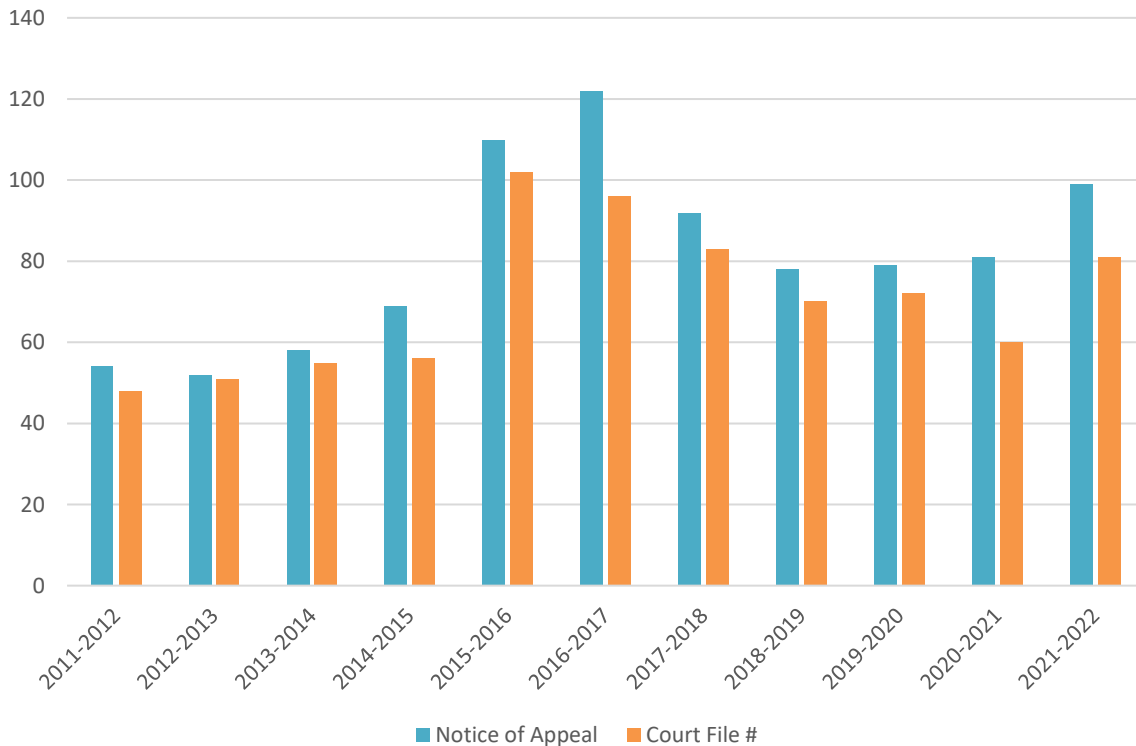


# Appeals

## Appeals Initiated

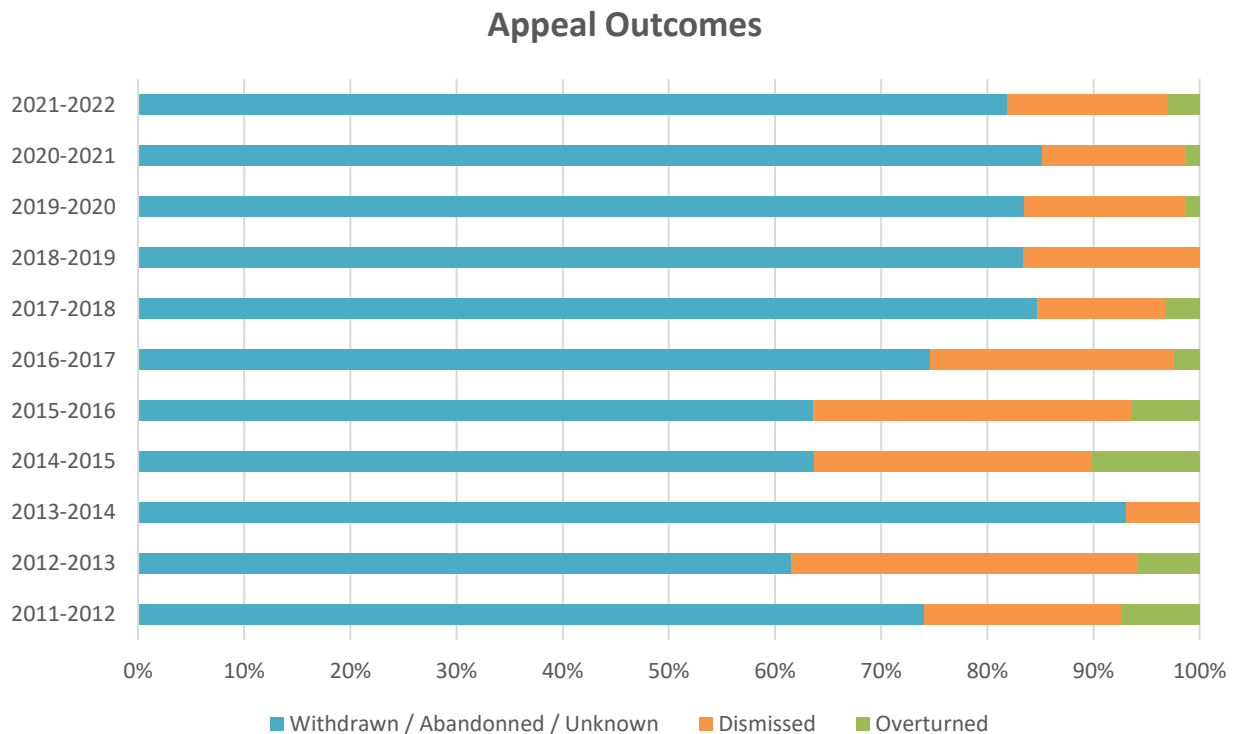
Parties may appeal a decision of the CCB to the Superior Court of Justice within seven days of the Board’s decision. From 2011-2012 until 2014-2015 the Board received an average of 55 Notices of Appeal per year and received Court File Numbers for an average of 51 per year. 2015-2016 and 2016-2017 saw steep increases in appeals due to changes in the funding of CCB appeals by Legal Aid Ontario. From 2017-2018 to 2020-21 the average was 83 Notices of Appeal and 71 Court File Numbers received annually with actuals increasing modestly year over year. 2021-2022 saw a continuation of this increase with 99 Notices of Appeal and 81 Court File Numbers received. Notices of Appeal were approximately equivalent to 1% of applications received, virtually unchanged from 2011-2012. While there is not a direct correlation between applications received and appeals, this comparison provides some context for the increases in appeal raw numbers over time.

Notification of Appeals Initiated Received



## Appeal Outcomes

Frequently the Board is not notified of the outcome of appeals. Most appeals are believed to be withdrawn or abandoned by the Appellant. The Board is typically notified by the parties of the outcome when there is an impact before the Board for the Appellant or the Respondent. Impacts before the Board may include a matter being returned to the CCB by the Court necessitating a new hearing, or a dismissal (or withdrawal) which may impact the final disposition date of a matter which the Board must consider in some cases with respect to subsequent applications. The following chart illustrates the percentage of appeals where the court overturns the CCB decision in some fashion, upholds the CCB decision by dismissing and those which were abandoned, withdrawn or for which the Board has no information about the outcome. The Board continues to work with the parties and the courts to pursue improved updating of appeal outcomes.



## Finance

From 2000/2001 to 2017/2018 the CCB experienced annual pressures of \$1 - \$2M in most fiscal years due to primarily to cumulative caseload increases representing shortfalls equivalent to as much as 25% of allocated funding. Allocation adjustments in 2018/2019 better aligned allocated resources with the operational needs of the Board in response to increased demand for services. Since that time allocations have again started to decouple from the Board's overall needs. The Board's allocation for fiscal 2021/2022 was \$8,454,400, up 0.5% from 2020/2021. Total expenditure for the year was approximately 17.5% above allocation at \$9,939,701. Long term increases in CCB expenditures are historically outpaced by caseload increases. Since 2011/2012 actual expenditures increased approximately 80% while hearings convened by the Board increased 128%.

Note that in 2020/2021 responsibility for accommodations for the Board was transferred to the Ministry of Government and Consumer Services, along with the allocation for this expenditure. As a result, the Board is no longer including accommodation costs in its financial reporting and any comparisons in this report also exclude accommodations for the comparator years as well.

Member remuneration is driven by hearing demand and volume. The CCB makes significant efforts to create hearing schedules that are both logistically sound and cost effective with respect to the deployment of adjudicators, while ensuring all legal and procedural obligations are met. Total per diem expenditures for part time appointees 2021/2022 were \$6,824,337 and full-time appointee salary and benefits were \$559,739.

The CCB exercises prudent fiscal controllership by ensuring all member claims and vendor invoices adhere to Board and government guidelines and directives and continues to carefully monitor all aspects of its operations to enhance administrative efficiencies and to implement cost-savings or cost-avoidance strategies, as appropriate.

**Financial Expenditure Report**  
**April 1, 2021 to March 31, 2022**

	Allocation	Actual Expenditures	Surplus (Deficit)
<u>DIRECT OPERATING EXPENSE</u>			
Salaries and Wages	1,392,400	1,484,896	(92,496)
Benefits	201,900	232,746	(30,846)
<b>Subtotal</b>	<b>1,594,300</b>	<b>1,717,642</b>	<b>(123,342)</b>
<u>OTHER DIRECT OPERATING EXPENSES</u>			
Program Specific Costs	6,860,100	8,222,059	(1,361,959)
<b>TOTAL</b>	<b>8,454,400</b>	<b>9,939,701</b>	<b>(1,485,301)</b>

# Consent and Capacity Board Members and Remuneration

## Members of the Board as of March 31, 2022

Surname	First Name	Member Type	Appointment Date	Appointment Expiry Date	Per Diem Rate	2021/2022 Remuneration
<b>Chair</b>						
Creal	Marg	Chair	March 11, 2015	March 10, 2025	N/A *	\$224,441.21
<b>Full Time Vice Chairs</b>						
Newman	Michael	L	September 01, 2017	August 31, 2022	N/A *	\$146,371.15
Patton	Lora	L	July 11, 2017	July 10, 2027	N/A *	\$146,371.15
<b>Part Time Vice Chairs</b>						
Bhatla	Rajiv	Ps	November 22, 2000	April 23, 2023	788	\$12,336.28
Lester	Nina	L	April 11, 2018	April 10, 2023	788	\$125,330.60
Strang	Gary	Pu	January 15, 2016	January 14, 2024	583	\$73,407.72
Vaillancourt	Timothy	Pu	August 26, 2021	August 25, 2023	583	\$74,385.37
Warr	Anthony	Pu	August 26, 2021	August 25, 2023	583	\$93,238.15
<b>Part Time Members</b>						
Alatishe	Yuri	Ps	March 19, 2014	March 18, 2023	788	\$2,296.07
Alexander	Hilary	Pu	December 20, 2019	December 19, 2024	472	\$57,268.24
Ambrosini	Daniel	L	June 22, 2016	December 31, 2022	788	\$141,362.27
Andrade	Donna	N	August 29, 2019	August 28, 2024	788	\$107,208.75
Anweiler	Jane	L	October 31, 2019	October 30, 2024	788	\$68,746.20
Bakewell	Francis	Ph	May 28, 2020	May 27, 2022	788	\$17,784.34
Beasley	Geoffrey	L	May 18, 2016	May 17, 2026	788	\$38,372.88
Beaton	Marilyn	Pu	October 17, 2019	October 16, 2024	472	\$53,090.24
Bessner	Ronda	L	August 13, 2014	August 15, 2024	788	\$6,646.37
Bismil	Ramprasad	Ps	May 28, 2020	May 27, 2025	788	\$19,507.63
Braden	Donald	Ps	October 06, 1999	October 17, 2024	788	\$19,564.14
Brisson	Kim	Pu	February 08, 2018	February 26, 2023	472	\$73,552.25
Brook	Shelley	Ps	August 29, 2019	August 28, 2024	788	\$31,003.72
Buckingham	Robert	Ps	October 09, 2013	December 11, 2022	788	\$60,023.86
Bullbrook	Jane	L	November 28, 2019	November 27, 2024	788	\$93,551.89
Cato	Kimberly	Pu	August 17, 2017	September 12, 2022	472	\$41,381.37
Cavanaugh	David	L	May 31, 2017	August 15, 2022	788	\$122,607.35
Chandrasena	Ranjith	Ps	June 01, 1986	April 08, 2023	788	\$24,604.62
Charbonneau	Yoland	Ps	August 23, 1993	April 02, 2025	788	\$89,750.48
Chenoweth	Frederick	L	January 28, 2015	January 27, 2025	788	\$31,237.40
Chillman	Brian	L	January 15, 2016	January 14, 2026	788	\$58,265.80

<b>Surname</b>	<b>First Name</b>	<b>Member Type</b>	<b>Appointment Date</b>	<b>Appointment Expiry Date</b>	<b>Per Diem Rate</b>	<b>2021/2022 Remuneration</b>
Clapp	Suzanne	L	October 30, 2013	December 11, 2024	788	\$78,238.10
Cook	Peter	Ps	July 04, 2001	July 25, 2024	788	\$36,968.07
Corey	JoAnn	Ps	August 17, 2017	September 12, 2022	788	\$13,857.93
Curry	Joyce	Pu	October 07, 2021	October 06, 2023	472	\$6,111.59
Danbrook	Catherine	Pu	October 17, 2019	October 16, 2024	472	\$29,194.01
Datta	Partha	Ph	April 24, 2020	April 23, 2025	788	\$25,066.55
Decaria	Jennifer	Pu	October 17, 2019	October 16, 2024	472	\$24,438.20
Desloges	Chantal	L	October 07, 2021	October 06, 2023	788	\$18,118.57
Donald	Lesley	Pu	October 07, 2021	October 06, 2023	472	\$10,353.09
Doyle	Patricia	Ph	October 17, 2019	October 16, 2024	788	\$55,632.80
Drouin	Danielle	N	October 17, 2019	October 16, 2024	788	\$94,519.24
Duggan	Stephen	Pu	October 17, 2019	October 16, 2024	472	\$47,162.57
Earle	Julie	N	October 17, 2019	October 16, 2024	788	\$37,745.20
Erstling	Rachel	Ps	July 08, 2021	July 07, 2023	788	\$5,828.48
Ewer	Diane	L	January 15, 2016	January 14, 2026	788	\$28,547.35
Ferencz	Joseph	Ps	January 15, 2007	January 14, 2023	788	\$16,289.86
Flanagan	Curt	L	March 25, 2020	March 24, 2025	788	\$33,946.49
Forget	Martin	Pu	March 12, 2020	March 11, 2025	472	\$51,594.49
Galbraith	Donald	Ps	January 13, 1994	April 08, 2023	788	\$77,305.52
Giles	Donna	Pu	November 18, 2021	November 17, 2023	472	\$7,104.42
Giroux	Maurice	Pu	July 11, 2017	September 25, 2022	472	\$48,017.05
Goodman	R. Gail	L	November 21, 2019	November 20, 2024	788	\$100,592.26
Gopikrishna	Sabnavis	Pu	January 07, 2021	January 06, 2023	472	\$25,732.14
Gorewicz	Harvey	Pu	February 14, 2020	February 13, 2025	472	\$54,841.52
Hanbidge	John	L	January 15, 2016	January 14, 2026	788	\$66,827.86
Hand	Karen	Ps	May 04, 2011	May 03, 2026	788	\$68,556.00
Handelman	Mark	L	August 29, 2019	August 28, 2024	788	\$184,905.55
Handsor	Julie	Pu	October 31, 2019	October 30, 2024	472	\$27,766.61
Harris	Janet	Pu	October 19, 2016	December 11, 2022	472	\$38,975.81
Harris	Yvonne	Pu	October 18, 2017	October 17, 2022	472	\$54,148.17
Harvie	Elizabeth	L	August 17, 2017	September 25, 2022	788	\$73,751.92
Heakes	Susan	L	November 21, 2019	November 20, 2024	788	\$102,975.29
Henry	Amir	Pu	October 07, 2021	October 06, 2023	472	\$6,583.59
Herne	Jill	Pu	September 28, 2016	November 13, 2022	472	\$43,059.41
Hodgson-Harris	Loree	L	May 18, 2016	December 31, 2022	788	\$44,752.98
Johnson	Slavo	Pu	April 14, 2010	May 12, 2023	472	\$43,424.00
Johnston	Susan	Ps	April 24, 2020	April 23, 2025	788	\$62,458.51

Surname	First Name	Member Type	Appointment Date	Appointment Expiry Date	Per Diem Rate	2021/2022 Remuneration
Kay	Gary	Ps	September 08, 2015	September 07, 2025	788	\$40,758.62
Kindiak	Darlene	Pu	October 17, 2019	October 16, 2024	472	\$31,648.41
Kirkpatrick	Kimberley	N	October 17, 2019	October 16, 2024	788	\$89,696.13
Krasnik	Catherine	Ps	August 01, 2012	July 31, 2022	788	\$25,824.66
Ladouceur Beauchamp	Renee	Pu	October 25, 2019	October 24, 2024	472	\$28,930.34
Lake	Rae	Ph	April 02, 2020	April 01, 2025	788	\$64,702.95
Lakra	Rekha	L	May 08, 2013	December 31, 2024	788	\$79,664.09
Landry	Lynn Marie	L	April 24, 2020	April 23, 2022	788	\$67,848.45
Langlois	David	Pu	October 17, 2019	October 16, 2024	472	\$17,097.79
Legault	Suzanne	Ps	July 08, 2021	July 07, 2023	788	\$13,909.56
Liddle	John	L	January 15, 2016	January 14, 2026	788	\$126,751.15
Links	Paul	Ps	September 14, 2016	November 13, 2022	788	\$39,872.80
Lossing	Julie	N	October 25, 2019	October 24, 2024	788	\$51,959.09
Louvish	Dimitri	Ph	May 28, 2020	May 27, 2025	788	\$72,536.76
Lyn	Leonard	L	October 17, 2019	October 16, 2024	788	\$47,125.67
Martschenko	Linda	L	January 15, 2016	January 14, 2026	788	\$116,061.53
Matheson	Charles	Pu	October 31, 2019	October 30, 2024	472	\$45,360.83
Maunder	Leslie	L	September 16, 2021	September 15, 2023	788	\$19,202.75
McDonald	Christena	N	July 08, 2021	July 07, 2023	788	\$16,221.93
McFadden	David	Pu	February 24, 2016	April 28, 2026	472	\$25,886.76
Menezes	Natasja	Ps	August 29, 2019	August 28, 2024	788	\$38,448.96
Merrifield	Thomas	L	October 31, 2019	October 30, 2024	788	\$99,872.20
Morrish	Deborah	Pu	October 07, 2021	October 06, 2023	472	\$5,981.39
Murphy	Patrick	L	August 29, 2019	August 28, 2024	788	\$35,188.26
Naidu	Kumar	Ps	July 08, 2021	July 07, 2023	788	\$7,947.93
Nathanson	Jay	Ps	January 29, 2014	January 30, 2023	788	\$15,732.83
Nemet	Joseph	L	August 17, 2017	September 12, 2022	788	\$64,081.26
Neuburger	Sheila	Pu	October 31, 2019	October 30, 2024	472	\$47,110.48
Nytko	Barbara	Pu	October 31, 2019	October 30, 2024	472	\$47,328.58
Papatheodorou	George	Ps	November 04, 2015	December 09, 2025	788	\$75,607.24
Pelletier	John	Ps	October 02, 2002	December 11, 2022	788	\$54,738.83
Pilon	Brigitte	L	April 26, 2017	December 09, 2024	788	\$106,850.60
Power	Martina	Ps	April 09, 2014	April 08, 2024	788	\$75,523.01
Proops	Simon	Pu	February 21, 2018	February 26, 2023	472	\$43,847.17
Quinlan	Elizabeth	L	June 11, 2020	June 10, 2022	788	\$31,818.89
Raina	Shashi	L	December 09, 2015	December 08, 2025	788	\$70,585.79



Surname	First Name	Member Type	Appointment Date	Appointment Expiry Date	Per Diem Rate	2021/2022 Remuneration
Rainboth	Robert	Pu	August 17, 2017	September 12, 2022	472	\$96,288.00
Ranger	Nathalie	Ph	August 29, 2019	August 28, 2024	788	\$53,760.62
Rasminsky	Frances	Pu	September 13, 2017	September 12, 2022	472	\$50,495.86
Ribeyre	Anne-Sophie	Pu	October 25, 2019	October 24, 2024	472	\$25,878.62
Roblin	Blair	L	November 28, 2019	November 27, 2024	788	\$49,482.06
Rosen	Lonny	L	July 18, 2012	July 17, 2022	788	\$15,708.38
Sarjeant	Jennifer	Ph	August 29, 2019	August 28, 2024	788	\$78,297.31
Schofield	Carol	Pu	March 25, 2020	March 24, 2025	472	\$36,628.83
Shoucri	Rami	Ph	August 29, 2019	August 28, 2024	788	\$31,172.19
Shugar	Gerald	Ps	July 04, 2001	July 03, 2025	788	\$47,144.14
Silver	Laura	L	May 18, 2016	December 31, 2022	788	\$139,600.99
Smith	Mary	N	May 07, 2020	May 06, 2025	788	\$43,244.90
Spence	Robert	L	November 20, 2021	November 19, 2023	788	\$21,156.45
Squire	Philip	L	October 07, 2021	October 06, 2023	788	\$18,803.31
Stewart	Ross	L	February 24, 2016	February 23, 2026	788	\$94,481.22
Tackaberry	Debra	Pu	March 25, 2020	March 24, 2025	472	\$32,747.03
Tomaszewski	Katherine	L	November 28, 2019	November 27, 2024	788	\$75,615.40
Tulandi	Myrna	L	April 24, 2020	April 23, 2025	788	\$115,376.78
Tulotsang	Dolkar	Pu	October 17, 2019	October 16, 2024	472	\$36,189.37
Uchendu	Kate	N	May 31, 2017	July 25, 2027	788	\$34,318.76
Velamoor	Varadaraj	Ps	May 31, 2017	July 25, 2027	788	\$59,738.55
Veltman	Albina	Ps	July 11, 2017	July 25, 2027	788	\$24,088.35
Vivona	Francesca	Pu	October 31, 2019	October 30, 2024	472	\$33,194.62
Waddell	Andrea	Ps	April 24, 2020	April 23, 2025	788	\$37,470.76
Weinberg	Erica	Ph	July 08, 2021	July 07, 2023	788	\$14,251.93
Whitehead	Katherine	Ph	April 12, 2017	April 11, 2023	788	\$31,153.17
Williams	Eugene	L	January 05, 2006	January 30, 2023	788	\$52,187.37
Woodman	Mary	N	August 29, 2019	August 28, 2024	788	\$71,566.70
Woogh	Carolyn	Ps	October 09, 2013	December 11, 2022	788	\$97,225.61
Zeath	F. Zeenath	L	March 07, 2018	March 11, 2023	788	\$34,047.05

\* Member Types:

L – Lawyer

Ps – Psychiatrist

Ph – Physician

N – Nurse in the Extended Class

Pu - Public

**Members Whose Appointment to the Board Ended  
between April 1 2021 and March 30 2022**

Surname	First Name	Member Type *	Appointment Date	Appointment End Date	Per Diem Rate	2020/2021 Remuneration
<b>Part Time Members</b>						
Bedard	Jean	L	September 16, 2021	March 04, 2022	\$788	\$12,417.79
Booth	Hazel	N	August 29, 2019	August 28, 2021	\$788	\$29,156.00
Bruckmann	Elisabeth Margaret	L	June 20, 2012	February 03, 2022	\$788	\$20,126.61
Cohen	Alina	Pu	October 17, 2019	October 16, 2021	\$472	\$0.00
Edwards	Virginia	Ps	August 01, 2012	September 23, 2021	\$788	\$36,465.38
Hackett	R. Andrew	Ps	March 18, 2015	April 08, 2021	\$788	\$12,743.86
Hopgood	Derek	Ps	August 29, 2019	August 28, 2021	\$788	\$0.00
Jacob	Judith	L	April 03, 1995	May 20, 2021	\$788	\$4,442.69
Koyama	Ken	Pu	October 17, 2019	October 16, 2021	\$472	\$0.00
List	Stephen	Ps	May 03, 2006	February 03, 2022	\$788	\$16,901.24
Monestime Belter	Vala	Pu	October 07, 2021	February 28, 2022	\$472	\$4,776.97
Sharma	Sangita	Ph	August 29, 2019	August 28, 2021	\$788	\$0.00
Sweetlove	James	L	September 29, 2021	March 04, 2022	\$788	\$11,409.70

\* Member Types:

L – Lawyer

Ps – Psychiatrist

Ph – Physician

N – Nurse in the Extended Class

Pu - Public

## Members Reappointed in 2021/2022 using ATAGAA Waivers

Surname	First Name	Member Type *	Initial Appointment Date	Waiver Appointment Date	Appointment Expiry Date
<b>Full Time Members</b>					
Creal	Marg	Chair	March 11, 2020	March 11, 2022	March 10, 2025
<b>Part Time Members</b>					
Alexander	Hilary	Pu	December 20, 2019	December 20, 2021	December 19, 2024
Andrade	Donna	N	August 29, 2019	August 29, 2021	August 28, 2024
Anweiler	Jane	L	October 31, 2019	October 31, 2021	October 30, 2024
Beasley	Geoffrey	L	May 18, 2018	May 18, 2021	May 17, 2026
Beaton	Marilyn	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Brook	Shelley	Ps	August 29, 2019	August 29, 2021	August 28, 2024
Bullbrook	Jane	L	November 28, 2019	November 28, 2021	November 27, 2024
Danbrook	Catherine	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Decaria	Jennifer	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Doyle	Patricia	Ph	October 17, 2019	October 17, 2021	October 16, 2024
Drouin	Danielle	N	October 17, 2019	October 17, 2021	October 16, 2024
Duggan	Stephen	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Earle	Julie	N	October 17, 2019	October 17, 2021	October 16, 2024
Flanagan	Curt	L	March 25, 2020	March 25, 2022	March 24, 2025
Forget	Martin	Pu	May 12, 2020	March 12, 2022	March 11, 2025
Goodman	R. Gail	L	November 21, 2019	November 21, 2021	November 20, 2024
Gorewicz	Harvey	Pu	February 14, 2020	February 14, 2022	February 13, 2025
Handelman	Mark	L	August 29, 2019	August 29, 2021	August 28, 2024
Handsor	Julie	Pu	October 31, 2019	October 31, 2021	October 30, 2024
Heakes	Susan	L	November 21, 2019	November 21, 2021	November 20, 2024
Karen	Hand	Ps	May 04, 2016	May 04, 2021	May 03, 2026
Kindiak	Darlene	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Kirkpatrick	Kimberley	N	October 17, 2019	October 17, 2021	October 16, 2024
Ladouceur Beauchamp	Renee	Pu	October 25, 2019	October 25, 2021	October 24, 2024
Langlois	David	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Lossing	Julie	N	October 25, 2019	October 25, 2021	October 24, 2024
Lyn	Leonard	L	October 17, 2019	October 17, 2021	October 16, 2024
Matheson	Charles	Pu	October 31, 2019	October 31, 2021	October 30, 2024
Menezes	Natasja	Ps	August 29, 2019	August 29, 2021	August 28, 2024
Merrifield	Thomas	L	October 31, 2019	October 31, 2021	October 30, 2024
Murphy	Patrick	L	August 29, 2019	August 29, 2021	August 28, 2024
Neuburger	Sheila	Pu	October 31, 2019	October 31, 2021	October 30, 2024

Surname	First Name	Member Type *	Initial Appointment Date	Waiver Appointment Date	Appointment Expiry Date
Nytko	Barbara	Pu	October 31, 2019	October 31, 2021	October 30, 2024
Pilon	Brigitte	L	December 10, 2020	December 10, 2021	December 09, 2024
Ranger	Nathalie	Ph	August 29, 2019	August 29, 2021	August 28, 2024
Ribeyre	Anne-Sophie	Pu	October 25, 2019	October 25, 2021	October 24, 2024
Roblin	Blair	L	November 28, 2019	November 28, 2021	November 27, 2024
Sarjeant	Jennifer	Ph	August 29, 2019	August 29, 2021	August 28, 2024
Schofield	Carol	Pu	March 25, 2020	March 25, 2022	March 24, 2025
Shoucri	Rami	Ph	August 29, 2019	August 29, 2021	August 28, 2024
Tackaberry	Debra	Pu	March 25, 2020	March 25, 2022	March 24, 2025
Tomaszewski	Katherine	L	November 28, 2019	November 28, 2021	November 27, 2024
Tulotsang	Dolkar	Pu	October 17, 2019	October 17, 2021	October 16, 2024
Vivona	Francesca	Pu	October 31, 2019	October 31, 2021	October 30, 2024
Woodman	Mary	N	August 29, 2019	August 29, 2021	August 28, 2024

\* Member Types:

L – Lawyer

Ps – Psychiatrist

Ph – Physician

N – Nurse in the Extended Class

Pu – Public

**Ce document est disponible en français. Veuillez contacter la Commission pour demander le document en français ou visiter notre site Web à [www.ccboard.on.ca](http://www.ccboard.on.ca).**