

Consent and Capacity Board

Annual Report 2007/2008

(Fiscal Period – April 1, 2007 to March 31, 2008)



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OVERVIEW AND JURISDICTION OF THE CONSENT AND CAPACITY BOARD

The Consent and Capacity Board (CCB) is an independent tribunal with a mandate to adjudicate on matters of capacity, consent, civil committal, substitute decision-making and other issues affecting citizens of Ontario, the health care community, the Ministry of Health and Long-Term Care, and other government agencies.

The Consent and Capacity Board is responsible for adjudicating on questions of paramount importance to the community, including:

- Public safety - mentally ill people who may be at risk to cause harm to self or other persons as a result of mental disorder, and
- Abuse - mentally ill people or others who may be subject to financial, physical or psychological abuse.

The Consent and Capacity Board meets its legislative obligations by:

- adjudicating consistently and in a timely fashion;
- issuing high-quality decisions and reasons of Decision, and
- creating an environment of respect for the system and the tribunal and those who interact with it.

The work of Ontario's Consent and Capacity Board is internationally recognized and respected, in part because of these factors.

Over 80 percent of applications to the Consent and Capacity Board involve a review under the *Mental Health Act* of a person's involuntary status in a psychiatric facility, or a review under the *Health Care Consent Act* of a person's capacity to consent to or refuse treatment.

Jurisdiction of the Consent and Capacity Board

The Board is responsible for holding hearings and making decisions on matters in which four elements are paramount:

1. The safety of the individual - incapacitated or mentally ill people can be easily abused physically or psychologically, and can sometimes cause harm to themselves, intentionally or unintentionally;
2. The interests of the community - confinement and/or treatment are sometimes necessary for individuals who are likely at risk to cause harm to self or other persons as a result of mental disorder;
3. Dignity and autonomy of the individual - liberty and the right to choose where one will live, whether to take treatment and if so, the nature of such treatment, and how to manage one's property and finances; and
4. The right of a person to have treatment when required.

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

Health Care Consent Act

- Review of capacity 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;
- Consideration of a request to amend or terminate the appointment of a representative;
- Review of a decision to admit an incapable person to a hospital, psychiatric facility, nursing home or home for the aged for the purpose of treatment;
- Consideration of a request from a substitute decision-maker for authority to depart from prior capable wishes;
- Review of a substitute decision-maker's compliance with the rules for substitute decision-making, and
- Giving directions to parties and substitute decision-makers on issues of treatment, admission to care facilities and personal assistance services.

Mental Health Act

- Review of involuntary status (i.e., civil committal);
- Review of a Community Treatment Order;
- Review of whether a young person (aged 12 - 15) requires observation, care and treatment in a psychiatric facility, and
- Review of a finding of incapacity to manage property.

Substitute Decisions Act

- Review of a finding of incapacity to manage property.

Personal Health Information Protection Act

- Review of a finding of incapacity to consent to the collection, use or disclosure of personal health information;
- Consideration of the appointment of a representative for a person incapable to consent to the collection, use or disclosure of personal health information, and
- Review of a substitute decision-maker's compliance with the rules for substitute decision-making.

Mandatory Blood Testing Act

- If an individual has come into contact with another person's bodily fluid, the individual can apply to the Medical Officer of Health to have a blood sample of the other person analyzed for HIV, Hepatitis B & C.
- If the Medical Officer of Health cannot obtain a voluntary blood sample or cannot locate the individual the Medical Officer of Health shall refer the application to the Board.
- The Board will decide whether the individual should be ordered to provide a blood sample.

ORGANIZATION OF THE CONSENT AND CAPACITY BOARD

The Board is an independent adjudicative tribunal created under the *Health Care Consent Act* and 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*.

Members of the Consent and Capacity Board are appointed by Order-in-Council. In 2007/2008, the Board had 151 appointed members. In addition to the Chair, Board members include 51 Lawyers, 54 Psychiatrists, and 46 Public Members. In 2007/2008, there were 16 new appointees to the Board, and 34 re-appointments of existing Board members. The Board has a staff complement of 16 public servants and a fee-for-service legal counsel who support the work of the Board members.

The Consent and Capacity Board is an expert tribunal. A lawyer, a psychiatrist, and a public member sit on panels considering cases involving the deprivation of an individual's liberty. As a quasi-judicial body, the Board maintains an arm's length relationship with the Ministry of Health and Long-Term Care, and receives administrative services and support through the Corporate and Direct Services Division. The Board functions under statutory requirements and a Memorandum of Understanding between the Chair of the Consent and Capacity Board, and the Minister and Deputy Minister of Health.

PERFORMANCE MEASURES

The *Health Care Consent Act, 1996*, sets out three legislated performance measures for the CCB:

1. A hearing is to begin within seven (7) days from the receipt of an application by the Board;
2. The Board must issue its Decision within one day of the end of the hearing, and
3. Upon the request of a party, the Board must issue written Reasons for its Decision, within two business days of receiving such a request.

The Board has consistently achieved these legislative requirements. The Board holds hearings across the province. Most hearings are held in psychiatric facilities, but hearings to review an individual's capacity to make their own treatment decisions or to manage their assets, etc. may be held in long-term care facilities, private homes, or any other venue. The seven-day deadline to schedule a hearing, which involves the assignment of a hearing panel, synchronizing the schedules of the applicant's counsel, health care practitioner and other parties required at the hearing, presents a significant logistical challenge that is unique to the Consent and Capacity Board.

Also very challenging is the time requirement for delivery of Reasons for Decision (i.e., two business days). To ensure that high-quality Reasons for Decision are delivered in a timely manner, the Board has implemented an electronic system for monitoring requests. This past year, the Board has also created a reasons writing template to assist presiding members. This new template creates a guideline to help focus arguments, clarify the issues and streamline the process to ensure high-quality and timely Reasons for Decision.

The Board also endeavours to ensure that Board members with a high number of requests for Reasons for Decision are relieved of their hearing work until the outstanding Reasons for Decision have been released.

The Board submits an Annual Business Plan to the Minister of Health and Long-Term Care as required under the *Management Board of Cabinet Directive on Agency Establishment and Accountability*.

PROGRESS

Over the past year, the CCB has placed special focus on stakeholder outreach and the professional development of Board members.

In February 2007, the Strategic Planning Advisory Committee of the Board established a number of Standing Committees to coordinate the completion of a range of projects which would enhance the operation of the Board. The CCB's progress is noted in the five major areas including Standing Committees, Board Members' Training and Professional Development, Legal Developments, Appointments and Reappointments and Hearings and Scheduling.

STANDING COMMITTEES

Public Education Committee

1. Develop an information video for physicians, the public, and other stakeholder groups.
 - In collaboration with the Ottawa Hospital a mock hearing video was created to help educate stakeholders, family members and the public on the hearing process regarding capacity to consent to admission to a long-term care facility.
 - The Board has jurisdiction to review substitute decision making and end-of-life decisions which can be extremely emotional, sensitive and complicated. With the assistance of board members, stakeholders and the legal community a mock hearing video was created on "How to Conduct a Form G Hearing".
 - The videos are accessible through the Board's website.
2. Develop and implement criteria and a process for delivering public education activities.
3. Develop a CCB Summary template for use by clinicians appearing before the Board.
 - A highly successful public education campaign was launched in October 2007 to introduce the CCB Summary template province-wide. The Board targeted facilities with a high number of hearings to pilot the CCB Summary template. The summary template is designed for clinicians to help organize their evidence and present it to the panel so that the evidence and arguments are clear and the hearing is more efficient. Since the introduction of the CCB Summary, the Board has seen a decrease in the average length of hearings by 25 minutes.

4. Develop the curriculum and program for Regional Board Meetings and the Annual General Meeting.

Training and Quality Assurance Committee

1. Deliver classroom training for new Board members.
2. Develop a process for the assessment of the performance of Board members and to ensure the consistent application of Board *Rules of Practice*.
3. Develop a Mentoring process including mentoring guide and feedback form for Board members to reinforce their professional development.
 - Since the creation of the mentoring program, 6 out of the first 10 new members in the program completed their training within 90 days or less.
4. Deliver training initiatives to enhance the quality of presiding members' reason-writing.
5. Develop a complaints process for the Board.
6. Implement a pilot project to assess a procedural change regarding the introduction of an Inquiry model at hearings.

Legislation Committee

1. Develop a list of proposed amendments to the Board's legislation and *Rules of Practice*.

Operations Committee

1. Develop single-point contacts and positive working relationships with hospitals and institutions throughout the province.
2. Improve the data collection and assessment process to reinforce the capacity of the Board to evaluate its performance.
3. Establish video conferencing as a standard operating practice for Board hearings.
4. Establish a province-wide electronic hearing process for Mandatory Non-Contested CTO hearings.

Board and Bar Committee

1. Establish and maintain on-going positive relationships with legal stakeholder groups to address issues of mutual interest by holding quarterly meetings at the Board's office.

BOARD MEMBERS' TRAINING AND PROFESSIONAL DEVELOPMENT

Board members must operate at the highest level of skill and training to ensure that errors do not occur. As such, member training is a priority for the Board.

The Board has an intensive in-house training program and training protocol whereby new members participate in a two-day classroom training program, taught by more experienced senior members. New members also observe a series of hearings and participate in training panels before being allowed to sit on hearing panels.

This is intended to ensure a high level of professional skill on the part of each member. In June 2007 the Board created a mentorship program, where each new member is paired with an experienced mentor from the same discipline. The mentor is the primary contact for the new member, and serves as a resource for the new member throughout the training process. The new member and mentor participate in training panels together to ensure consistent coaching and feedback.

Ongoing professional development is also required to enhance the skills of Board members.

Regional Meetings

The Board held a series of cross sector Regional Meetings (i.e., sessions involving Lawyers, Psychiatrists, and Public members) to provide an opportunity for information exchange and learning. These Regional Meetings were planned by local Board members, and addressed a broad range of administrative, legislative, and operational learning objectives. This year's regional meetings focused on unbiased adjudicating and principles underlying the fair and efficient conduct of oral hearings, and included a writing session for lawyer members.

Annual General Meeting

The 2007 Annual General Meeting was designed to provide education and learning opportunities for Board members. Board members received educational materials and participated in small group exercises to enhance their understanding of the medico-legal issues they face at hearings. The feedback obtained from Board members, guests, speakers and staff indicates that the 2007 Annual General Meeting was effective in achieving its learning objectives, particularly those pertaining to legislative interpretation and clinical treatment. In addition, the feedback from participants indicates that cross sector sessions (i.e., sessions involving Lawyers, Psychiatrists, and Public members) were the most effective in terms of information exchange.

LEGAL DEVELOPMENTS

In August 2007 the Board received jurisdiction under the *Mandatory Blood Testing Act*, where the Board must determine if a respondent should provide a blood sample for the purposes of testing for HIV, Hepatitis B & C. In 2007 the Board received 11 applications and convened 2 hearings. The Board implemented new policies and procedures for convening these hearings as the majority of applications received involve individuals who are incarcerated in provincial correctional facilities.

APPOINTMENTS/REAPPOINTMENTS

The CCB has implemented a new process for recruiting/interviewing, tracking, and recommending the appointment and/or reappointment of Board members. The new process ensures that the Board recruits and maintains a high-quality calibre of members.

HEARINGS AND SCHEDULING

A number of CCB Procedural Guidelines were introduced in 2007-08 including:

- Guideline on the right to apply when a certificate of Involuntary Status or Renewal is renewed before the Board renders a decision.
- Guideline for ordering counsel where the subject of an application does not have legal representation.
- Guideline to address the legal implications of the issuance of a Form 47 under the *Mental Health Act*.
- Creation of internal procedural guidelines for scheduling and convening hearings under the *Mandatory Blood Testing Act*.

As well, a working group comprised of Board members and staff examined the use of video conferencing for Board hearings, and made recommendations for the use of video conferencing. The initial investigation into the purchase of video

conference equipment was completed this past year and the Board anticipates the purchase of video conference equipment during the 2008/09 fiscal year.

ADMINISTRATION AND OPERATIONS

The Consent and Capacity Board has made significant progress over the past 12 months in a number of key areas:

Budget

In 2007/2008, the Consent and Capacity Board received a budget allocation of \$4,800,700 including ODOE of \$4,095,300. This budgetary allocation represents a decrease of \$168,700 for ODOE over the previous fiscal year.

The Board will continue to review all aspects of its operations to enhance administrative efficiencies and to implement cost-savings or cost-avoidance strategies, as appropriate.

Caseload

Case management data over the past year demonstrates an average decrease of approximately 6 percent in the number of hearings scheduled, although the number of applications received has remained constant. Conversely, the Board has seen an increase in the cancellation of hearings of approximately 2 percent over the previous year and a decrease in adjournments by approximately 20 percent.

Likely causes for the reduction in hearings are due to the Board's pro-active policy on public education and reforms to the Board's training of members. In 2007, the Board launched a public education committee whose mandate, in part, was to create education sessions for the health care community. The education campaign has encouraged dialogue between health practitioners and patients which has decreased the need for a hearing, as the therapeutic relationship forged is much stronger. Additionally, the education committee created the CCB Summary which is designed to assist health practitioners present their case which allows for a quicker and more streamlined hearing process, creating less need for adjournments.

Per Diem Increase

The increase in per diem rates which was undertaken in September 2006 and October 2007 has generated a budgetary pressure for the Board, particularly in light of the mid-year introduction.

Case Management Database

The Board's Case Management System was introduced in April 2006 and tracks the progress of all the applications before the Board. The system has helped streamline the scheduling process and produces high-quality statistics and reports to assist with policy development, to create public outreach programs, and to manage and monitor workflow and financial trends.

At this time, the Case Management System has evolved to a degree which cannot be exceeded. A new Case Management System is required and the Board will investigate the financial and operational feasibility of purchasing a new case management system and merging it with the current system.

APPEALS

A party to a proceeding before the CCB may appeal the Board's decision to Ontario's Superior Court of Justice within seven days after receipt of the Board's decision. The Board is responsible for creating the record of appeal and ordering the transcripts for the hearing in question. These documents are then served on the parties and filed with the court. The following are the number of appeals and outcomes of the Board's decision since June 2003.

Type of Court Dispositions of CCB Appeals 1 January 2003 - 31 March 2008	
*Abandoned	77
Dismissed	36
Allowed	8
N/A (no info or case not disposed)	134
Total	255

Total Appeals Received 1 January 2003 - 31 March 2008	
2003	51
2004	39
2005	49
2006	49
2007	56
2008	11
Total Appeals	255

*Abandoned included: Discontinued/Moot/Closed

CONSENT AND CAPACITY BOARD
LIST OF MEMBERS
(AS OF MARCH 31, 2008)

Prefix	First Name	Last Name	Date First Appointed	Date Current Term Expires
<u>Chair</u>				
Justice	Edward	Ormston	June 1, 2006	May 31, 2009
<u>Public Members</u>				
Mr.	Richard	Aaronson	August 01, 2003	July 31, 2009
Mr.	Kenneth	Abell	June 20, 2000	June 20, 2007
Mr.	Robert	Adams	June 30, 2000	August 09, 2009
Ms.	Susan	Agranove	April 11, 2006	April 10, 2009
Ms.	Dell	Atlin	February 16, 2000	February 15, 2009
Mr.	Milton	Berger	July 4, 2001	July 20, 2007
Mr.	David	Boothby	November 29, 2006	November 28, 2008
Mr.	Earl	Campbell	December 07, 2005	December 06, 2008
Mr.	Ram	Chopra	August 25, 2004	August 24, 2012
Ms.	Joanna	Cutaia-Beales	February 10, 2006	February 09, 2009
Ms.	Shirley	Dunn	February 03, 2006	February 02, 2009
Ms.	Dawn	Eccles	May 17, 2006	May 16, 2009
Mr.	Scott	Gale	November 10, 2005	November 09, 2008
Ms.	Sandra	Haluskay	March 23, 2006	March 22, 2009
Mr.	Brian	Hamilton	May 30, 2007	May 29, 2009
Ms.	Mary	Heighington	March 23, 2006	March 22, 2009
Ms.	Beverley	Hodgson	February 27, 2008	February 26, 2010
Ms.	Connie	Holmes	August 10, 2006	August 09, 2009
Ms.	Judith	James	October 06, 1999	October 17, 2008
Ms.	Janice	Laking	July 11, 2001	October 04, 2012
Ms.	Heather	Lareau	April 26, 2006	April 25, 2009
Ms.	Barbara	Laskin	February 10, 2006	February 09, 2009
Ms.	Sandra	LeBlanc	October 26, 2005	October 25, 2008
Ms.	Linda	Leong	November 17, 2005	November 16, 2008
Mr.	Pierre	Lessard	May 28, 2003	May 27, 2009
Ms.	Nechita	Lim-King	March 07, 2007	March 06, 2009
Ms.	Judith	MacKenzie	October 06, 1999	October 17, 2008
Mr.	Duncan	MacPhee	April 11, 2007	April 10, 2009
Ms.	Joy	Martin	March 01, 2006	February 28, 2009
Mr.	Donald	McLeod	February 27, 2008	February 26, 2010
Ms.	Teresa	Michienzi	February 10, 2006	February 09, 2009
Mr.	George	Maroosis	July 05, 2007	July 04, 2008
Ms.	Patricia	Muldowney-Brooks	February 03, 2006	February 02, 2009
Mr.	Takis	Pappas	October 02, 2002	October 25, 2008
Mr.	Panos	Petrides	April 11, 2006	April 10, 2008
Mr.	Paul	Philion	December 18, 2001	December 17, 2012
Ms.	Eleanor	Plain	June 06, 2007	June 05, 2009
Ms.	Judith	Pousette	August 10, 2006	August 09, 2009
Mr.	Asif	Sherazi	December 07, 2005	December 06, 2008
Ms.	Jean	Smyth	February 10, 2006	February 09, 2009
Ms.	Lorraine	Steadman	February 03, 2006	February 02, 2009

Prefix	First Name	Last Name	Date First Appointed	Date Current Term Expires
Ms.	Jane	Stone	March 07, 2007	March 06, 2009
Mr.	Gary	Strang	September 24, 2003	September 23, 2009
Ms.	Elda	Thomas	March 23, 2005	March 22, 2013
Ms.	Joanne	Turner	September 06, 2006	September 05, 2008
Ms.	Debra	Waisglass-Bettel	October 26, 2005	October 25, 2008

Legal Members

Mr.	Ramon	Andal	January 05, 2006	January 04, 2009
Mr.	Harold	Arkin	February 10, 2006	February 09, 2009
Mr.	Kenneth	Atkinson	April 25, 2001	April 24, 2007
Mr.	Joseph	Baker	December 15, 2005	December 14, 2008
Ms.	June	Bell	September 06, 2006	September 05, 2008
Ms.	Rose-Gabrielle	Birba	June 28, 2006	June 27, 2009
Ms.	Florence	Boody-Hunter	July 31, 2001	November 16, 2007
Ms.	Elsy	Chakkalakal	April 04, 2007	April 03, 2009
Ms.	Mary Jane	Campigotto	May 02, 2007	May, 01, 2009
Mr.	Philippe	Capelle	May 17, 1999	May 16, 2013
Mr.	Rickland	Carleton	November 21, 2001	November 20, 2007
Mr.	Theodore	Charuk	November 22, 2000	March 31, 2012
Mr.	Philip	Clay	October 16, 2002	October 25, 2008
Mr.	Bernard	Comiskey	November 02, 2005	November 01, 2008
Mr.	Douglas	Coo	April 11, 2006	April 10, 2009
Mr.	Paul	DeVillers	March 29, 2006	March 28, 2009
Mr.	Douglas	Ferguson	May 12, 2004	May 11, 2012
Mr.	Leonard	Feigman	November 03, 2004	November 02, 2007
Mr.	Normand	Forest	December 12, 2001	December 11, 2007
Ms.	Anne	Freed	April 11, 2006	April 10, 2009
Mr.	Stephen	Fuerth	December 01, 2004	November 30, 2007
Mr.	Joseph	Goldenberg	November 10, 2005	November 09, 2008
Mr.	Brock	Grant	March 23, 2005	April 15, 2009
Ms.	Nathalie	Gregson	June 20, 2007	June 19, 2011
Ms.	Mary	Hall	January 15, 2007	January 14, 2009
Mr.	Mark	Handelman	May 13, 1998	May 12, 2008
Ms.	Christine	Hart	March 07, 2007	March 06, 2009
Mr.	Michael	Hennessy	August 21, 2003	August 20, 2009
Mr.	Albert	Hubbard	July 04, 2001	July 03, 2012
Ms.	Judith	Jacob	April 03, 1995	April 02, 2012
Ms.	Carolyn	Jones	August 25, 2004	August 24, 2012
Ms.	Shayne	Kert	March 24, 2004	March 23, 2012
Ms.	Erin	Lainevoool	June 20, 2007	June 19, 2008
Mr.	Roger	Leclair	February 21, 2007	February 21, 2009
Mr.	Patrick	LeSage	March 21, 2007	March 20, 2009
Ms.	Susan	Lightstone	February 21, 2007	February 20, 2009
Ms.	Karen	Lindsay-Skynner	April 03, 2002	July 20, 2008
Mr.	Ian	McTavish	June 01, 1986	April 02, 2009
Ms.	Sandra	Meyrick	March 26, 2003	March 25, 2009
Mr.	Patrick	Murphy	October 26, 2005	October 25, 2008
Mr.	Theodore	Nemetz	December 04, 1996	October 31, 2008
Mr.	Michael	Newman	October 21, 1998	October 20, 2009
Mr.	Alexander	Nicol	October 27, 1999	October 26, 2008
Mr.	John	O'Flynn	August 25, 2004	August 24, 2007
Ms.	Susan	Opler	November 21, 2001	November 20, 2012

Prefix	First Name	Last Name	First Appointment Appointed	Date Current Term Expires
Ms.	Judith	Pascoe	May 04, 2005	May 03, 2013
Ms.	Bonnie	Pelletier-Maracle	April 11, 2006	April 10, 2009
Ms.	Judith	Potter	October 26, 2005	October 25, 2008
Ms.	Jill	Presser	March 29, 2006	March 28, 2009
Mr.	David	Ramsbottom	May 17, 1999	May 16, 2009
Ms.	Holly	Rasky	June 06, 2007	June 05, 2009
Mr.	Roger	Rowe	November 10, 2005	November 09, 2008
Mr.	Rajneesh	Sharda	February 27, 2002	April 05, 2008
Mr.	Bernard	Starkman	February 27, 2002	May 03, 2013
Mr.	Larry	Steady	March 24, 2004	March 23, 2012
Ms.	Colleen	Sylvester	August 25, 2004	August 24, 2012
Ms.	Julie	Taub	October 25, 2006	October 24, 2008
Ms.	Shirley	Wales	March 23, 2005	March 22, 2013
Mr.	Stephen	Wilks	January 15, 2007	January 14, 2009
Mr.	Eugene	Williams	January 05, 2006	January 04, 2009
Mr.	John	Wilson	November 09, 2000	June 30, 2007

Psychiatrists

Dr.	Nural	Alam	January 13, 1999	January 12, 2013
Dr.	Federico	Allodi	February 21, 2001	April 22, 2013
Dr.	Rajiv	Bhatla	November 22, 2000	March 31, 2010
Dr.	Dominique	Bourget	June 22, 2006	June 21, 2009
Dr.	Donald	Braden	October 06, 1999	October 17, 2008
Dr.	John	Bradforth	June 6, 2007	June 5, 2009
Dr.	Gary	Chaimowitz	July 04, 2001	July 03, 2012
Dr.	Ranjith	Chandrasena	June 01, 1986	April 02, 2009
Dr.	Yoland	Charbonneau	August 23, 1993	April 02, 2012
Dr.	Peter	Cook	July 04, 2001	July 03, 2012
Dr.	Andre	Cote	October 23, 1986	April 02, 2012
Dr.	Isabelle	Cote	June 30, 2000	June 29, 2009
Dr.	Raymond	Denson	January 03, 2003	January 02, 2013
Dr.	Jack	Ellis	August 10, 2006	August 09, 2009
Dr.	Robert	Fairbairn	March 01, 2006	February 28, 2009
Dr.	Joseph	Ferencz	January 15, 2007	January 14, 2009
Dr.	Russel	Fleming	June 05, 1996	June 04, 2009
Dr.	Alison	Freeland	May 30, 2006	May 29, 2009
Dr.	Wayne	Furlong	February 16, 2000	May 16, 2009
Dr.	Donald	Galbraith	January 13, 1994	April 02, 2009
Dr.	Rose	Geist	February 27, 2008	February 26, 2010
Dr.	Joseph	Glaister	May 17, 1999	June 21, 2013
Dr.	Rami	Habib	December 21, 2006	December 20, 2008
Dr.	Tom	Hastings	December 06, 2006	December 05, 2008
Dr.	Alexandra	Heber	December 22, 2005	December 21, 2008
Dr.	Paul	Hoaken	January 22, 1987	April 02, 2012
Dr.	John	Johnson	July 23, 1993	April 02, 2012
Dr.	Ann	Jones	June 30, 2000	June 29, 2009
Dr.	Peter	Kelly	February 16, 2000	February 15, 2009
Dr.	William	Komer	December 18, 2001	December 17, 2012
Dr.	Stephen	List	May 03, 2006	May 02, 2009
Dr.	Eric	MacLeod	June 06, 1968	April 02, 2012

Prefix	First Name	Last Name	First Appointment Appointed	Date Current Term Expires
Dr.	William	Maley	February 06, 2002	February 05, 2008
Dr.	Rahul	Manchanda	June 17, 1993	April 02, 2009
Dr.	Paul	Max	June 30, 2000	August 09, 2009
Dr.	Helen	Meier	June 01, 1986	April 02, 2009
Dr.	Simon	O'Brien	May 02, 2007	May 01, 2009
Dr.	Derek	Pallandi	November 15, 2006	November 14, 2008
Dr.	John	Pelletier	October 02, 2002	November 01, 2008
Dr.	Emmanuel	Persad	March 24, 2004	March 23, 2012
Dr.	Quentin	Rae-Grant	June 05, 1996	June 04, 2009
Dr.	Vivian	Rakoff	August 25, 2004	August 24, 2012
Dr.	Jonathan	Rootenberg	May 16, 2007	May 15, 2009
Dr.	Edward	Rotstein	June 06, 2007	June 5, 2009
Dr.	Robert	Sheppard	January 27, 2005	January 26, 2008
Dr.	Gerald	Shugar	July 04, 2001	July 03, 2012
Dr.	Marvin	Silverman	July 11, 1990	April 02, 2012
Dr.	Cameron	Stevenson	June 05, 1996	June 04, 2012
Dr.	William	Surphlis	July 04, 2001	July 03, 2012
Dr.	Michele	Tremblay	November 20, 1992	April 02, 2012
Dr.	Zohar	Waisman	November 15, 2006	November 14, 2008
Dr.	James	Wilkes	July 04, 2001	July 03, 2012
Dr.	Si-Ann	Woods	February 21, 2007	February 21, 2009
Dr.	Leslie	Wright	July 04, 2001	July 03, 2012

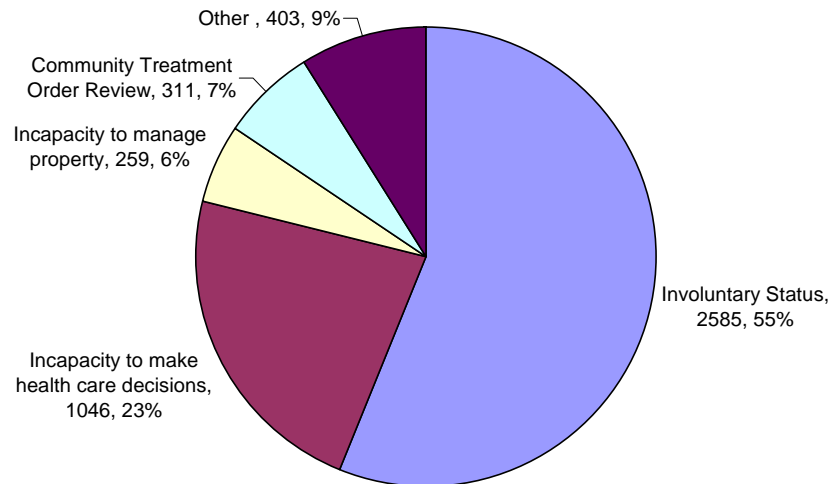
STAFF OF THE CONSENT AND CAPACITY BOARD
(AS OF MARCH 31, 2008)

Prefix	First Name	Last Name	Position
Justice	Edward	Ormston	Chair
Mr.	Joaquin	Zuckerberg	Board Counsel
Ms.	Lorissa	Sciarra	Registrar & Senior Manager
Ms.	Janet	Martell	Executive Assistant
Ms.	Margaret	James	Administrative Officer
Ms.	Saskia	Mulders	Financial Assistant
Ms.	Manal	Hanna	Secretary
Ms.	Kareen	Afarian	Case Coordinator
Mr.	Michael	Blakely	Case Coordinator
Ms.	Rosa	Cirillo	Case Coordinator
Ms.	Paula	Cabral	Case Coordinator
Ms.	Teri	D'Annunzio	Case Coordinator
Mr.	Alan	Bedassee	Case Coordinator
Ms.	Ruth	Reynolds	Case Coordinator
Mr.	Alex	Pitt	Case Coordinator
Ms.	Tanjila	Rahman	Intake/Inquiry Officer
Ms.	Angela	Moore	Records Officer
Ms.	Vanessa	Knox	Records Officer

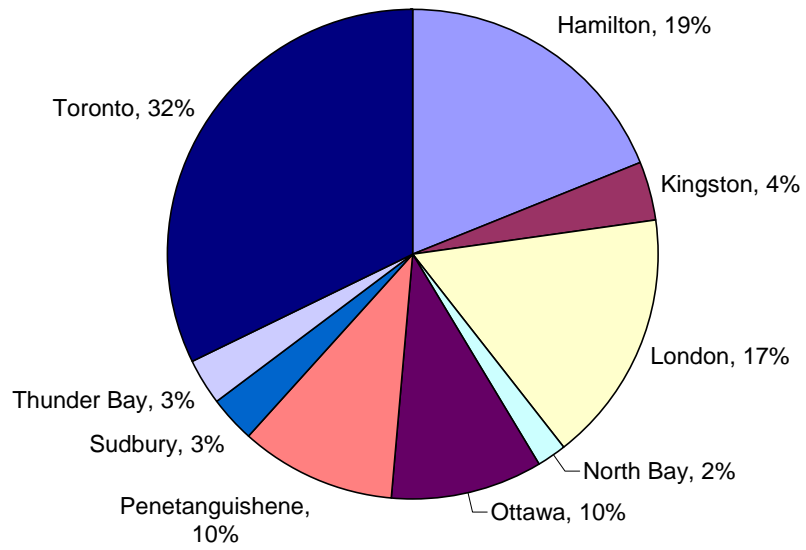
APPLICATION AND HEARING TOTALS

	2004/2005		2005/2006		2006/2007		2007/2008	
	Apps	Hearing	Apps	Hearing	Apps	Hearing	Apps	Hearing
	4282	2221	4595	2377	4476	2768	4604	2606
Increase per year	3.2%	9.8%	7.3%	7.0%	-2.5%	16.4%	2.8%	-5.8%

Breakdown of Application Type 2007 / 2008 Fiscal Year



**Regional Breakdown of Hearings Convened (%)
2007 / 2008 Fiscal Year**



Financial Expenditure Report (April 1, 2007 to March 31, 2008)

	<u>Internal</u> <u>Allocation</u>	<u>Actual</u> <u>Expenditures</u>	<u>Surplus</u> <u>(Deficit)</u>
<u>DIRECT OPERATING EXPENSE</u>			
Salaries and Wages	627,300	893,921	(\$266,621)
Benefits	78,100	123,179	(\$45,079)
<hr/>			
Subtotal	\$705,400	\$1,017,100	(\$311,700)
<hr/>			
<u>OTHER DIRECT OPERATING EXPENSES</u>			
Transportation and Communications	314,300	554,740	(\$240,440)
Services	3,433,500	4,106,069	(\$672,569)
Supplies and Equipment	347,500	37,342	\$310,158
<hr/>			
Subtotal	\$4,095,300	\$4,698,151	(\$602,851)
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TOTAL OPERATING EXPENSES	\$4,800,700	\$5,715,251	(\$914,551)