

COLLEGE OF MIDWIVES OF ONTARIO

# ANNUAL REPORT

## 2014-2015



College of  
**Midwives**  
of Ontario

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

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# ABOUT THE COLLEGE

The College of Midwives of Ontario (CMO) is the self-regulating body of the province's 762 Registered Midwives. Ontario midwives are professionals who provide a high quality of primary care to women during pregnancy, birth and continue to provide care to mothers and babies during the first six weeks postpartum.

Registered midwives offer a choice between out-of-hospital or hospital birth unless there is a risk factor that indicates that out-of-hospital is not a safe option for the woman or the baby. Registered Midwives are available to their clients 24 hours a day during the course of care and attend births in hospital or out-of-hospital according to the woman's choice and to professional protocols

## Our Mission

*The CMO promotes a model of care that protects informed choice, choice of birthplace and continuity of care and that is delivered by midwives as primary health care providers.*

## Our Mandate

*The CMO protects the public by regulating the profession of midwifery in accordance with the Regulated Health Professions Act (RHPA) and by setting the minimum standard of professional behaviour and clinical practice expected of Midwives in Ontario.*

## Our Vision

*Every woman in Ontario has access to safe, quality midwifery care.*

## MESSAGE FROM THE REGISTRAR & PRESIDENT

We are pleased to provide the 2014-2015 Annual Report of the College of Midwives of Ontario. In 2014-2015, strong emphasis was placed on enhancing our processes to ensure a governance model in which our members and public can have confidence. Throughout the year we worked to ensure a governance framework of the highest quality, increase member consultation in policy development, enhance the professionalism of our members, and provide Council and staff with the necessary knowledge and resources to continue promoting the public interest.

Just as the College must ensure quality and accountability within the profession, the College must also demonstrate to the public and our members those same values within the organization. To help achieve this, Council adopted governance policies that establish the foundation for continued effective oversight and strategic planning. Combined with increased training initiatives for Council members and staff, our new governance structure is part of the College's commitment to a process of regular review and improvement. The College will continue to examine ways in which we can improve upon our dedication to transparency and fairness and ensure that the College's decision-making capability is competent and sound.

We are proud of our achievements in many areas in 2014-15: our growing membership numbers, the inclusion of neonatal intubation in scope of practice, member engagement at Member Education Day, Council's renewed strategic outcomes, strengthened infrastructure and increased capacity and skills at the College, the development of a meaningful public and member consultation process, recognition from the Office of the Fairness Commissioner for our best practices in registration, continued government support of our operations and, commitment to increased transparency of College processes and publicly available information.

These achievements were made possible by the leadership and dedication of the College Council and Committees and help lay a solid foundation that supports us as we move into a more transparent and accessible College both for our members and the public.

The year 2014-15 was a great "step forward" for the College and our members and we look with great optimism and excitement to continued challenge and change in the year to come. As always, we invite you feedback, thoughts and comments.

Barbara-Ann Borland, RM  
President

Kelly Dobbin, RM, MA, MSc  
Registrar



# REPORT FROM COUNCIL

The Council is the governing body of the College. The College's Council sets the direction for the regulation of the midwifery profession in Ontario, and establishes the strategic goals, objectives and policies of the College. Council is made up of:

- Eight Registered Midwives elected by their peers
- Up to seven public members appointed by the provincial government

Elected members hold office for three years and may stand for re-election twice, for a maximum of nine years served. Public members may also be appointed for a maximum of nine years. The public members are not members of the profession and have a responsibility to speak for the public. They play a vital part in the College's work and their full involvement is central to the College's public accountability mandate.

Council members sit on at least one College committee. Each of these has a specific function mandated by the RHPA. General Council meetings are held at least four times per year at the College office to review the regulatory affairs of the College and make decisions regarding policy issues that influence the quality of midwifery care in Ontario. These meetings are open to all registrants and to the public.

The Executive Committee has all the powers of the Council, other than making by-laws and regulations, between meetings of the Council if a matter requires immediate attention. The Executive Committee formally reports to Council at each Council meeting. The Executive Committee also advises Council on the financial affairs of the College, recommends fiscal policies to Council, and monitors the implementation of fiscal policies. The Executive Committee is elected by Council for a one-year term and is composed of the President, Vice President Professional, Vice President Public, and two Executive members at large, including one professional and one public. The president serves as the chair of both Council and the Executive Committee.

Council is committed to achieving the objectives set out in our Strategic Plan, and demonstrates leadership by making decisions that build confidence in midwifery regulation. In 2014/15, Council did this by:

- **By-Law Amendments:** In September 2014, Council approved proposed changes to the College Fees and Remuneration By-Law to increase registration fees for the next 4 years. This will allow the CMO, which is reliant on the Ontario Ministry of Health and Long-Term Care for a portion of its annual operating budget, to gradually move towards full financial independence from the government. Such independence will further protect the CMO's ability to regulate in the interest of public safety and ensure a continued role in protecting and promoting midwifery as a primary care service for the women of Ontario.
- **Transparency Initiatives:** Council engaged in preliminary discussions of the Ministry of Health's Transparency Initiative. The College's Report on Transparency, approved by Council in November, delivered to the Minister of Health in November 2014, describes how the College is meeting and exceeding best practices for transparency in all aspects of the College's mandate. In addition, Council adopted Transparency Principles to serve as the framework for future decisions by regulatory colleges related to making more information available to the public.
- **Policies and Standards of Practice:** Council takes very seriously its responsibility to provide guidance to Ontario midwives on professionalism and specific issues through developments of policies and standards of practice that are relevant to the practice of midwifery. Council further developed the College's public consultation process to take a larger and more meaningful role in the College's policy making and to foster a more

transparent regulatory environment. When reviewing the College's policies and standards, we rely on the valuable input from Ontario midwives and other key stakeholders to make informed decisions.

Last year, Council actively reviewed and consulted on the below policies and standards of practice:

- Requalification Policy (February 2015)
- Approval of Canadian Midwifery Education Program (February 2015)
- Epidural Monitoring and Management (July 2014)
- CBA Policies, Procedures and Guidelines
- Standard on Postpartum/Newborn Visits (June 2015)
- Standard on Neonatal Resuscitation (June 2015)
- Standard on Clinical Education and Student Supervision (July 2014)
- Policy on Continuing Competency in NRP
- Policy on Continuing Education in EFM
- Alternate Practice Arrangements (APAs)
- Review Cycle for Standards of Practice
- Standard on Second Birth Attendants (January 2015)
- Policy on Active Practice Reporting (APR) (revised February 2015, in effect August 2015)
- Consultation and Transfer of Care Standard (January 2015)
- Practice Protocols Standard (January 2015)
- Surgical Assistant in Obstetrics Standard (July 2014)

**The 2014-15 Council and Executive Committee members are:**

#### **COUNCIL**

**President/Chair:** Barbara-Ann Borland, RM

**Vice President Professional:** Tiffany Haidon, RM, (*VP term began November 2014*), Wendy Murko, RM (*VP term expired November 2014*)

**Vice President Public:** Joan A Pajunen (*VP term began October 2014*), Samantha Heiydt (*VP term expired November 2014*)

**Professional Members:** Johanna Geraci, RM (*term began September 2014/resigned in March 2015*), Claudette Leduc, RM (*term began September 2014*), Lilly Martin, RM, Tia Sarkar, RM (*term ended September 2014*), Jan Teevan, RM, Edan Thomas, RM, Tiffany Haidon, RM, Wendy Murko, RM, Barbara-Ann Borland, RM

**Public Members:** Caroline Brett, Rochelle Dickenson, Samantha Heiydt, Jennifer Lemon, Philip Playfair (*term began in March 2015*), Gemma Salamat, Joan A Pajunen

#### **EXECUTIVE COMMITTEE**

**President/Chair:** Barbara-Ann Borland, RM

**Vice President Professional:** Tiffany Haidon, RM, (*VP term began November 2014*), Wendy Murko, RM (*VP term expired November 2014*)

**Vice President Public:** Joan A Pajunen (*VP term began November 2014*), Samantha Heiydt (*VP term expired October 2014*)

**Professional member at-large:** Wendy Murko, RM, Tiffany Haidon, RM

**Public member at-large:** Jennifer Lemon (*EC term began January 2015*)

**Non-Council Committee Members:** Heather Brechin, RM, Carron Canning, RM, Ann Montgomery, RM, Diane Parkin, RM, Tia Sarkar, RM, Mylene Shields, RM, Sharon Swift, RM

# COMMITTEE REPORTS

## REGISTRATION COMMITTEE

The Registration Committee ensures all applicants meet requirements for entry to practice. The Committee determines whether further training or supervision is required to meet those requirements, or if any terms, conditions, or limitations should be imposed on the midwife. These requirements ensure that midwives have the knowledge, skills and judgment to practise midwifery in Ontario.

The Registration Committee also ensures all registered midwives meet annual registration requirements and may decide to impose terms, conditions, or limitations on a member's certificate of registration to ensure the safety of the public.

The College continually explores new ways to ensure that the registration process remains efficient, fair, impartial, objective, transparent, easy to understand and accessible. New initiatives launched in 2014/2015 are helping us manage the volume of applications, support timely registrations for applicants, and illustrate our commitment to using new approaches and modern technologies.

### Registration

As of March 31, 2015, 761 members held certificates of registration with the College as follows:

- 585 in the General class
- 61 in the General class with New Registrant conditions
- 9 in the Supervised Practice class
- 106 in the Inactive class

1 former member re-registered with the College and 1 member retired. 14 members resigned their membership, 2 members were suspended and 1 member had their registration revoked in 2014/2015.

Between April 1, 2014, and March 31, 2015, 18 registration panels were held to address issues related to active practice requirements (16), supervision (1), and re-registration (1).

As of March 31, 2015 the College registered 73 new members. In 2014-15 the College registered 63 graduates from Ontario's Midwifery Education Programme, 7 graduates from the International Midwifery Pre-registration Program at Ryerson University Continuing Education, and 3 members registered in another province or territory. In addition, 4 former members re-registered via AIT.

### Registration Bylaws Amendments

Following an extensive member consultation, amendments to the CMO registration bylaws were approved by Council and went into force on October 1, 2014. These amendments include:

- Aligned by-laws concerning fees and registration classes with amendments to the CMO's Registration Regulation concerning the Transitional and Inactive classes;
- Increased registration fees;
- Decreased professional corporation application and renewal fees;
- One and two payment instalment options for registration fees; and
- Elimination of 'reduced' and 'on leave' statuses.

## Regulation and Registration Policies Updated in 2014-15

The Ministry of Health and Long Term Care approved the Ontario regulation authorizing midwives to perform neonatal intubation on January 30, 2015. O. Reg 17/15 "Midwifery Intubation of a Newborn" can be viewed here.

The Registration Committee revised and created the following policies, which were approved by Council:

- Policy on Active Practice Requirements
- Approval of Canadian Midwifery Education Programs Policy
- Requalification Program Policy

The 2014-15 Registration Committee members are:

**Chair:** Gemma Salamat (Public)

**Professional Council Members:** Barbara Borland, RM, Johanna Geraci, RM (Term started in September 2014), Lilly Martin, RM

**Public Council Members:** Caroline Brett, Joan A Pajunen, Gemma Salamat

## INQUIRIES, COMPLAINTS & REPORT COMMITTEE

The Inquiries, Complaints and Reports Committee (ICRC) oversees investigation matters related to public complaints and information the College receives through mandatory and other reports. The Committee makes dispositions in accordance with legislation, including referrals to the Discipline Committee for allegations of professional misconduct or incompetence. The Committee can also make referrals to the Fitness to Practise Committee regarding allegations of incapacity.

During the complaints process the Committee is responsible for keeping the complainant and the registrant informed and strives to reach a conclusion within 150 days of confirming the issues relevant to the complaint. Every complaint and report about midwifery care is carefully considered. We regularly review how the investigation and resolutions processes can be refined so the public is best protected.

In 2014-15, ICRC Panels jointly reviewed:

42 cases brought forward from fiscal year 2013/14  
19 new cases opened in 2014/15 fiscal year  
26 cases that were completed in 2014/15 fiscal year  
34 cases carried forward into 2015/16 fiscal year  
6 cases actively completing SCERPs  
7 case appeals to HPARB  
7 cases at investigation stage  
5 cases decision stage

The 2014-15 Inquiries, Complaints and Reports Committee members are:

**Chair:** Caroline Brett (Public)

**Professional Council Members:** Tiffany Haidon, RM, Wendy Murko, RM, Edan Thomas, RM

**Public Council Members:** Caroline Brett, Samantha Heiydt, Joan A. Pajunen

**Non-Council Professional Members:** Heather Brechin, RM, Carron Canning, RM, Ann Montgomery, RM

## QUALITY ASSURANCE COMMITTEE

The Quality Assurance Committee (QAC) develops standards of practice and policies for the CMO and is responsible for ensuring that members comply with all aspects of the Quality Assurance Program (QAP). The components of the QAP



are designed to enhance midwives' knowledge and skills and promote excellence in midwifery care. In 2014/15, the QAC implemented a three-year review and revision cycle of all professional practice standards. In addition to our usual research, expert consultations and stakeholder discussions, we also reached out to members through web-based public consultations. The feedback we received helped ensure that the revised practice standards describe the professional expectations of midwives, meet the needs of clients, are easy to use for midwives and can be understood by the public.

In addition, this year the QAC (with Council approval):

- developed criteria and a criteria-based assessment (CBA) approach to the peer and practice assessment program, which focused selection on specific practice areas identified as higher risk to the public and to direct the support of the QAP to where it can be most effective. The first CBAs will be taking place in the fall of 2015;
- aligned QAP reporting with the annual October 1st registration renewal deadline. Reporting dates for 2014 QAP activities were moved from January 1st 2015 to October 1st 2015. As a result, 2013/14 QAP compliance data are not yet known; and
- randomly selected the first three practices to participate in the Practice Assessment Workbook (PAW). The data for this first round of assessments will be collected in January 2016.

The 2014-2015 QA Committee Members are:

**Chair:** Jennifer Lemon (Public)

**Professional Council Members:** Barbara-Ann Borland, RM, Johanna Geraci, RM, Tia Sarkar, RM, Jan Teevan, RM

**Public Council Members:** Jennifer Lemon, Rochelle Dickenson

**Non-Council Professional Members:** Mylene Shields, RM

## DISCIPLINE COMMITTEE

The Discipline Committee receives referrals from the Inquiries, Complaints and Reports Committee regarding alleged professional misconduct and/or incompetence. We take every referral seriously, and are always considering how our discipline processes can be refined so they most effectively protect the public while remaining fair to all parties.

The Committee hears evidence regarding each case and decides whether to dismiss the allegations or find that the member has committed professional misconduct or is incompetent. If the member is found guilty, the committee orders an appropriate penalty. Holding midwives accountable for providing safe, quality care is an important part of maintaining public confidence in self-regulation.

The Committee conducts hearings in accordance with the Regulated Health Professions Act (RHPA). The Discipline Committee also has established rules of procedure that govern the hearings process. The College publishes disciplinary hearing summaries in accordance with the requirements of the Regulated Health Professions Act (RHPA) and the Bylaws of the College. Committee decisions are available online.

### Summary of 2014-15 discipline cases

On July 18, 2014, a panel of the Discipline Committee found Ms. Rosa Anna Perconti guilty of professional misconduct and incompetence. The penalty hearing occurred on November 7, 2014 and resulted in the Panel revoking Ms. Perconti's certificate of registration.

The hearing on costs was held over two days in January 2015. In its decision dated January 28, 2015, the Discipline Panel ordered Ms. Perconti to pay the College costs in the amount of \$155,000.

On February 27, 2015, Ms. Perconti appealed the Discipline Panel's decisions and orders to Divisional Court. The result of the appeal will be published once available.

No new cases were referred to the Discipline Committee in the 2014/15 fiscal year.

The 2014-15 Discipline Committee members are:

**Chair:** Lilly Martin, RM

**Professional Council Members:** Tia Sarkar, RM, Claudette Leduc, RM, Jan Teevan, RM, Lilly Martin, RM

**Public Council Members:** Jennifer Lemon, Gemma Salamat

**Professional Non-Council Members:** Diane Parkin, RM, Sharon Swift, RM

## FITNESS TO PRACTICE COMMITTEE

The Fitness to Practise Committee is mandated to protect the public from members who cannot practise safely or competently because of mental or physical incapacity. If a midwife is found to be incapacitated, their certificate may be revoked or suspended, or have specific terms, conditions and limitations attached to it for a given length of time.

There were no Fitness to Practise Committee proceedings in 2014-15.

The 2014-14 Fitness to Practise Committee members are:

**Chair:** Lilly Martin, RM

**Professional Council Members:** Tia Sarkar, RM, Claudette Leduc, RM, Jan Teevan, RM, Lilly Martin, RM

**Public Council Members:** Jennifer Lemon, Gemma Salamat

**Professional Non-Council Members:** Sharon Swift, RM, Diane Parkin, RM

## CLIENT RELATIONS COMMITTEE

The Client Relations Committee (CRC) is responsible for overseeing programs that continuously improve the professional relationship between midwives and their clients. This includes:

- Developing education requirements and guidelines for registrants as they relate to prevention of all forms of abuse;
- Ensuring measures are in place to prevent and deal with sexual and other forms of client abuse;
- Promoting public understanding of the College's abuse prevention plan;
- Administering a funding program, which provides therapy and counselling for clients who were sexually abused, by a College registrant.

The Committee is closely following the Sexual Abuse Task Force (SATF) appointed by Ontario Health Minister, Dr. Hoskins in December 2014. The SATF was appointed "to review and modernize legislation designed to prevent and deal with sexual abuse of patients by regulated health professionals". We carefully consider issues generated by the SATF, as well as other health regulatory Colleges, to guide our own discussions on how the CRC can best serve the CMO's mandate of protection of the public.

The Committee drafted a revised Sexual Abuse Prevention Plan Policy and Appropriate Professional Behaviour with Clients Guidelines for 2015-16 public consultation. We also reviewed and approved the Guidelines for Mandatory Reporting of Sexual Abuse, which were last revised in October 1997.

The 2014-15 Client Relations Committee members are:

**Chair:** Rochelle Dickenson (Public)

**Professional Council Members:** Barbara-Ann Borland, RM, Claudette Leduc, RM, Jan Teevan, RM, Edan Thomas, RM

**Public Council Members:** Samantha Heiydt, Rochelle Dickenson

**COLLEGE OF MIDWIVES OF ONTARIO**

SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2015

## Independent Auditor's Report

To the Council of the  
**College of Midwives of Ontario**

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2015 and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Midwives of Ontario for the year ended March 31, 2015. We expressed an unmodified audit opinion on those financial statements in our report dated September 30, 2015.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of the College of Midwives of Ontario.

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

Management is responsible for the preparation of a summary of the audited financial statements on the basis described in the note to the summary financial statements.

### *Auditor's Responsibility*

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".

### *Opinion*

In our opinion, the summary financial statements derived from the audited financial statements of the College of Midwives of Ontario for the year ended March 31, 2015 are a fair summary of those financial statements, on the basis described in the note to the summary financial statements.



Toronto, Ontario  
September 30, 2015

Chartered Professional Accountants  
Licensed Public Accountants

# COLLEGE OF MIDWIVES OF ONTARIO

## Summary Statement of Financial Position

March 31	2015 \$	2014 \$
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	1,459,166	1,121,780
Accounts receivable	320	83,751
Member fees receivable	-	324,132
Prepaid expenses	30,876	16,570
	<b>1,490,362</b>	<b>1,546,233</b>
Capital assets	47,494	42,002
Intangible assets	6,250	8,928
	<b>53,744</b>	<b>50,930</b>
	<b>1,544,106</b>	<b>1,597,163</b>
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	265,122	389,589
Deferred membership fees	618,692	547,878
Deferred course fees	74,763	-
Deferred project funding	11,800	49,933
Due to the Ontario Ministry of Health and Long-Term Care - Ontario Midwifery Program	-	259,316
Due to the Ontario Ministry of Health and Long-Term Care - Regulatory Policy Unit	275,116	275,116
	<b>1,245,493</b>	<b>1,521,832</b>
Deferred funding related to capital assets	5,578	7,438
	<b>1,251,071</b>	<b>1,529,270</b>
<b>NET ASSETS</b>		
Invested in capital and intangible assets	48,166	43,492
Internally restricted	10,000	10,000
Unrestricted	234,869	14,401
	<b>293,035</b>	<b>67,893</b>
	<b>1,544,106</b>	<b>1,597,163</b>

# COLLEGE OF MIDWIVES OF ONTARIO

## Summary Statement of Operations

Year ended March 31	2015 \$	2014 \$
Revenues		
Government grant - operations	626,100	411,384
Government grant - special funding	-	73,656
Government grant - project funding	204,491	286,593
Government grant - capital and intangible asset funding	1,860	1,861
Membership fees	1,239,025	1,080,943
Administration fees	53,045	54,897
Other income	8,642	13,849
	<b>2,133,163</b>	<b>1,923,183</b>
Expenses		
Salaries and benefits	852,480	712,297
Professional fees	99,942	68,597
Council and committees	160,910	132,507
Office and general	153,751	101,745
Rent and utilities	71,721	68,117
Quality assurance program	56,454	5,103
Investigations and hearings	175,067	393,479
Membership dues and fees	27,779	24,733
Information and communications technology	77,457	51,348
Birth Centres	168,994	247,339
eHealth Ontario	-	39,254
Intubation	44,787	-
Amortization - capital assets	8,303	9,160
Amortization - funded capital assets	1,860	1,861
Amortization - intangible assets	2,678	3,434
	<b>1,902,183</b>	<b>1,858,974</b>
Excess of revenues over expenses before the following	<b>230,980</b>	<b>64,209</b>
Loss on disposal of capital and intangible assets	-	11,858
Loss on impairment of capital assets	5,838	-
	<b>5,838</b>	<b>11,858</b>
Excess of revenues over expenses for year	<b>225,142</b>	<b>52,351</b>

# COLLEGE OF MIDWIVES OF ONTARIO

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## Note to Summary Financial Statements

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March 31, 2015

1. **Basis of presentation**

These summary financial statements have been prepared from the audited financial statements of the College of Midwives of Ontario (the "College") for the year ended March 31, 2015, on a basis that is consistent, in all material respects, with the audited financial statements of the College except that the information presented in respect of changes in net assets and cash flows has not been presented and information disclosed in the notes to the financial statements has been reduced.

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



# STAFF LISTING

Kelly Dobbin, RM	Registrar
Carolyn Doornekamp	Director of Operations (Maternity Leave August 2014-August 2015)
Suzanne Boileau	Director of Operations (Maternity Leave Replacement August 2014-August 2015)
Julie Kivinen	Director of Policy
Naakai Garnette	Director of Regulatory Affairs
Gina Dawe	Sr. Registration Coordinator
Zahra Grant	Registration Coordinator (started February 2015)
Melanie Ramkissoon	Investigations and Hearings Coordinator (departed May 2015)
Jennifer Shin	Investigations and Hearings Coordinator (started February 2015)
Marina Solakhyan	Council and Committee Coordinator (started October 2014)
Amy Fournier	Quality Assurance Coordinator (maternity leave May 2015-May 2016)
Monica Zeballos-Quiben	Executive Assistant (departed August 2014)
Rachel Rapaport Beck	Policy Analyst - Birth Centres
Michelle Kryzanauskas, RM	Clinical Practice Advisor
Sarah Meyer	Program Coordinator
Dianne Gardner	Reception (departed January 2015)
Mary D'Andrea	Bookkeeper

## College of Midwives of Ontario

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