

CAAA 2017 AGM minutes

May 7, 2017

Present: Council members: Lowell Ask, Liye (William) Zhao, Carmen Lawlor, Paul Hu, Boxin Wanglin, Yang Su, Don Fan, Colton Oswald, Heather Thompson
Committee Chairs: Marc Raedschelders, Michelle Phillips, Constantine Karampelas, Marjorie Copithorn, William Zhao, Yang Su, Lowell Ask
Chair: Lowell Ask
Minutes: Lindsay Babcock

1. Meeting called to order – 1:07pm
Quorum - reached, 80+ members
2. Proposed agenda approved
3. Last Meeting minutes read and approved – 1st Karen Korecki, 2nd Donald Marco, Carried
4. Opening Remarks and Report – Lowell Ask

Lowell gave a comprehensive presentation called “The Acupuncture and TCM Profession in Alberta: Charting a Course”. He thanked everyone for the support and trust placed in the CAAA Council. He talked about the challenges our profession faces, particularly the competition from other professions that utilize forms of acupuncture. Lowell warns that what we do now will “make or break” the profession in the next decade or two, and hopes we can raise our standards, particularly in biomedical education. Lowell then revealed a CAAA Global Review process in which the Council has been conducting a self-study review of structures, policies, procedures, and activities related to governance, practice standards, educational standards, registration examinations, and member services and support. This is being accomplished by using proper consultation and services of appropriate authorities, legal counsel, psychometrics, etc. and consultation by email, direct mail, meetings, surveys, etc. with relevant stakeholders. Projects and tasks were delegated to appropriate committees, members, or employees of the CAAA. The CAAA would also contract experts as necessary using fair and equal opportunity hiring procedures.

Lowell was proud to report that many things have been accomplished already including a draft of minimum standards in acupuncture education, a proposed Acupuncture Regulation for HPA, review of CAAA Bylaws, an improved website, ongoing evaluation of Registration Examinations, policy review and development, a public awareness promotional media campaign, deepening the CAAA’s awareness of roles and responsibilities, and improved communication with all stakeholders. He also mentioned a direct email communication address for all stakeholders to contact Council: council@acupuncturealberta.ca.

To finalize, Lowell presented the vision for the profession in Alberta and beyond. This included the completed HPA transition, TCM Regulation, expanded scope of practice, Alberta Healthcare and hospital integration, and the establishment of a national board of examiners and a national program accreditation board. Lowell then asked everyone to pledge themselves to excellence in their own practices to promote a high level of ethics, integrity, and professionalism for the profession, and finished his presentation with a big thank you to all.

5. Registrar/Exe Director Report – Paul Hu

Good afternoon, everyone!

As always, first of all, thank you for attending today's meeting. Very pleased to see all of you!

My report today will cover two areas. One is about my role and responsibilities. The other area I will report today is the vision for the profession. The council had lots of discussion about the future of the profession. Under the guidance of the council, a report titled *Acupuncture in Alberta: History, Status and Prospects* was developed which reviewed the history of acupuncture profession in Alberta, summarized what the College has accomplished since 2011, and most importantly, outlined the council's strategic planning for the profession.

First, my role and responsibilities. My responsibilities can be roughly divided into three areas: first, fulfill the statutory functions as required by the act and regulations; second, coordinate with council, committees, ad hoc committees, stakeholders: receive their guidance and input, and ensure things get done; the third is to oversee the office operation.

Statutory functions include: review and make decisions on registration applications, handle complaints and appeals in accordance with the Act and Regulation, and conduct preliminary investigations and prepare investigation reports.

To carry out the statutory functions requires experience to handle things properly and to make solid decisions. I am very pleased to report to you that over the last few years, only one applicant appealed the decision. The applicant withdrew her appeal before the scheduled hearing.

Regarding investigation, the Health Disciplines Act authorizes the registrar or a hired preliminary investigator to conduct the investigation. To save the College's money, I have conducted all the investigations except one.

Errors and mistakes in carrying out the statutory functions could be very expensive. I am very pleased that I have contributed to the integrity of the profession and minimized the costs of the College.

The second area of my responsibilities is coordination. I believe most of you have experience coordinating an event, and you understand how much work is involved,

because different people always have different opinions. For me, I work with the council, five standing committees, Ad Hoc committees and stakeholders including acupuncture programs and government departments. As an employee, I have to prepare various documents and follow up to ensure things get done.

The third area of my responsibilities is management of the office operation. Most of our members are private practitioners. If you run your own clinic and hire someone else, you will understand how much energy it can take. For the College, office management involves policy management, financial management and human resources management.

I am very lucky that my colleagues all work very hard and they are very helpful. I am very grateful for their loyal services and commitment. However, no one is perfect. We all have our strengths and weaknesses. As the manager, my role is to work with them, optimizing their strength for efficiency and effectiveness.

I have served the profession for over five years. It is a great honour. Many people told me: Paul, it is amazing that you have survived at this position. Others were very generous in their remarks. They told me: Paul, we are very lucky to have you for our profession.

I am always humbled by such remarks. I have a very strong passion for this profession. I have tried my very best under the guidance of the council to move the profession forward. As you know, we are transitioning to the Health Professions Act. More positions will be required under the HPA, such as Complaints Director, Hearings Director, Continuing Competency Director, etc.. I look forward to seeing more people share the responsibilities for this profession.

The second part of my report is the plan for the future. To plan for the future, we must know the history and the status of the profession. As I mentioned, a report titled *Acupuncture in Alberta: History, Status and Prospects* has been developed under the council's guidance. This report outlines a detailed plan for the profession, with the identified challenges in consideration. Today, I will make a brief report on the plan.

The first challenge faced by the profession is public awareness and perception of acupuncture. Acupuncture has a relatively short history in the West and has remained on the margins of our health care system. As a result, the public has acquired only cursory understandings of acupuncture. Many people use acupuncture as a last resort. This deficit in public awareness and knowledge is also reflected in current legislation and insurance coverage. As such, the council has approved a budget to promote public awareness of acupuncture. The messages we want to convey include: acupuncture is a restricted activity, and performing acupuncture without proper authorization is a breach of the law; the CAAA is the regulatory body of acupuncturists in Alberta, and the public can find an acupuncturist on the CAAA website. We will explore other promotional activities as well.

The second challenge faced by the profession is the much-needed government support. From 1988 to 2010, this profession was governed by the Acupuncture Committee under the Health Disciplines Board. Three pieces of governing legislation are the *Health Disciplines Act; Acupuncture Regulation, and Standards of Competence and Practice,*

haven't had timely amendments. In 2006, the government tried to combine acupuncture with herbology, and regulate the whole of Traditional Chinese Medicine under the *Health Professions Act*. Unfortunately, the efforts did not succeed. Now, ten years later, only two professions still remain under the *Health Disciplines Act*. According to the *Health Disciplines Act*, the College is not fully self-regulated yet. The College is accountable to the *Health Disciplines Board*, and many changes that the College proposes will require approval by the *Health Disciplines Board*.

Although we appreciate the guidance of the Health Disciplines Board, changes to the Health Disciplines Board membership create challenges for not only continuity, but also progress. New members to the Board often lack necessary background information of acupuncture, and also of the specific concerns and goals of our profession. This constitutes a great challenge for effective governance and advance of the profession.

The council resumed working with Alberta Health and submitted the proposed regulation policies in December 2016. The College will try its very best to get the preparation work done for the transition. I also hope our members can use their connections and networks to advocate the urgency and importance of the transition.

The third challenge faced by the profession is external competition. In Alberta, the *Health Professions Act* allows overlap of scope of practice. As such, medical doctors, physiotherapists, chiropractors, and naturopathic doctors are authorized to perform acupuncture according to their own regulation. In some cases, they use different names, such as dry needling, IMS, contemporary acupuncture, trigger point acupuncture, etc., which is very confusing to the public. Our major concern is the lack of consistency in service standards to the public. The Health Quality Council of Alberta has brought up this issue, and the recommendation in their report is dual registration. We hope the government can consider the concerns and make changes accordingly.

The last identified challenge, but definitely not the least, is internal challenge. Although we are all proud of our profession, we must admit that standards for many areas of the profession are incomplete or absent. The major advantage of self-regulation is to utilize the expertise of the membership to regulate a profession in public interest. Since 2011, we have established many policies and standards. Today, I am very pleased to report to you that the CAAA contracted an expert to re-defined the Minimum Standards for Acupuncture Education. This is a significant accomplishment, because education is the very foundation and cornerstone of a profession. Alberta is the first province in Canada to regulate acupuncture. I believe we are also the first province in Canada to establish the educational standards in such detail, and it will have far reaching significance to the profession.

To conclude, this profession has been regulated in Alberta since 1988. Frankly speaking, it faces many challenges. I understand that some members are very anxious and want to see much more progress. However, we must realize that the limitations faced by the profession.

Advancement of the profession requires united efforts. I want to take this opportunity to thank all of you who have been part of the united efforts, in the role of council member,

committee member, Ad Hoc committee member, examiner, or a volunteer without being a committee member. I know how hard they work and how much they contribute to the profession. I also extend my thanks to their family members for their support. It is a big commitment!

We must rely on ourselves and work with the government, continuously improving the standards of practice, education, competence and ethical conduct. In my humble opinion, I think this is the only way to EARN the confidence of the public and the support of the government.

Thank you!

6. Financial/BFAC Report – Yang Su, Treasurer/BFAC Chair

The Financial/BFAC report will include BFAC activity, current financial report, 2017 budget highlight, new financial plan, and general comments.

BFAC members include Ricky Wang, WangLin Boxin, Cherisee Osness, and Yang Su. Their task is to: review, revise, and propose financial policies and budget; conduct internal audit to ensure financial integrity (all revenues are deposited, and expenses are valid, accurate, and inline with the budget, as reflected in the bank statements); review all internal processes and reporting methods with the council; appoint an external professional auditor; and prepare a financial report for the AGM.

2016 activities: had an internal audit in August 2016; reviewed and revised the CAAA Financial Policy; developed the Budget Development Guideline; decided to have a financial audit for the year 2016.

Total Revenue: \$606,230; Total Expense: \$520,844; excess of revenue over expenses for 2016: \$85,386.

New Financial Plan: balance the books or keep a surplus for contingency (either through increased revenue or decreased spending); build a long term sustainable financial model; continue to monitor and reduce any unnecessary spending; continue to promote our profession in action as was promised in the last election; set a reserve fund for continued operation in case of a lawsuit or other issue.

Highlight of changes and ongoing projects:

Increased the examination fees from \$1300.00 to \$ 1500.00 : increase of \$50 for both Pan-Canadian Written and Case-study Exam; and \$100 for Safety & Jurisprudence Exam.

Modified the honorarium rate for council & committee members. Under the new honorarium policy, no more payments will be made for any meetings under two hours (previously it was one hour).

Hired a professional accounting firm to do the bookkeeping to ensure the accuracy of all transactions (no more operating like a family business).

Approved a budget for the council to have promotional campaigns for acupuncture, through mediums such as radio, google searches, TV, etc.
Due to the current economic recession, we are freezing the member registration fee at \$660 for the next 2 years.

General Comments:

A special thank you to our Registrar/ED Mr. Hu and staff; they did a fantastic job in assisting BFAC activity.

A special thank you to our president, vice president, and all council members, including the public members that support my role. We all share the same goals in protecting the public interest, the integrity of the CAAA. A unified council term will only make our profession greater and stronger.

Being treasurer of a CAAA is a great honor and great responsibility. I will do everything I can to protect the best interests of our profession.

The floor was open for questions and comments:

- Questions about advertising – how message will be chosen and delivered?
Lowell answered that the content will be more specific to the CAAA role (not a message from the Membership Services Committee side of things).
Expected to start deliver June 1, for a duration of 6 months. Council in process of approving message/content.
- Question about lawsuit, response – no information available to share at this time

Financial report motion for approval: 1st Sheila Feng, 2nd Michael McFarlane, carried

7. Registration and Program Review – Marjorie Copithorn, Committee Chair

The Registration and Program Review committee has 5 members: Zoe Zhao, Dr. Han, Michelle Phillips, Jessica Stankowski, and Marjorie Copithorn (chair)

In the past year, the RPRC can report the following accomplishments:

- RPRC met 3 times in person, and had 2 teleconference calls.
- We completed site visits to all 5 schools in the province in May of 2016.
- The CAAA's Registration Types Policy, which we have worked on for a considerable amount of time, was approved by HDB this year. This policy assists greatly in decision-making regarding registration applications being reviewed by the registrar, and when necessary by RPRC as well.
- Established a minimum standard for "Direct Practice Hours" requirements for registration and registration renewals.
- Amended the CEU Policy.
- Supervision policy approved with clarifications.
- Supervision Guide: all clarifications have been added. Appendices and report forms still need to be completed.
- Language Requirement Policy is pending.
- Marjorie is stepping down as chair after the 2017 sight visits are completed.

8. Conduct and Competency Committee – Marc Raedschelders, Committee Chair

Members of the Conduct and Competence Committee include: Marc Raedschelders (Chair), Dr. Frank Du, Dr. Michael McFarlane, Dr. Amanda Ballas, Dr. Heather Thompson, Dr. Ann Zee, and Dr. Gord Ariza.

This year I'm very pleased to report that since the last AGM there have not been any complaints against members resulting in a hearing. The few complaints that were received do warrant however to caution the membership about a few issues (see end of the report) and to encourage members to regularly review the jurisprudence document that can be found on the CAAA website and to practice risk management diligently.

I would also like to stress the importance of ethical principles that guide the practice of our profession: Confidentiality, Respect and Honesty.

Further Concerns and Cautions for the membership:

Registered members need to be prudent about the inclusion of alternative health methods that are not a part of the core knowledge of TCM/Acupuncture in their daily practice. We have to make sure to ensure that the public is not confused about the practice and treatments of registered acupuncturists. In extreme cases patients may start wondering if they visited an acupuncture clinic or a naturopathic clinic.

For many years your regulating body, the CAAA has been working hard to bring acupuncture to the main stream of health care for Albertans by building credibility for our profession in the health care community and establishing a good relationship with allied health professions. This can be achieved by demystifying acupuncture and TCM. I would like to quote Matthew Bauer, President of ANF (Acupuncture Now Foundation): "The future of acupuncture depends on traditionally trained acupuncturists becoming accepted as a new type of health care professionals within modern medicine." Key in this statement is "Traditionally trained acupuncturists" and yet I am concerned to see a trend among some of our members to expand their traditional treatments with sometimes questionable or at least not very well researched treatment methods, diagnostic methods and new technology. This may very well put our profession in an unfavorable light and open to rightful criticism from allied health care providers.

While it would be wrong and misplaced to make a judgment on including these features in an acupuncture practice, I would strongly recommend that members inform their patients that these techniques are not Acupuncture/TCM related. An additional informed consent should be obtained for the non-TCM related techniques, also informing the patients of the lack of strong evidence or research if that is the case.

Correct truthful communication has been proven to drastically decrease complaints.

The last thing we need during a time where we are trying to move on from the HAD to the HPA and during a time when we are trying to get TCM regulation, is the muddling of our scope with questionable practices that have very little if anything to do with TCM, and that put the professionalism of all of us in question.

I wish you all a successful and complaint-free year.

The floor was open for questions and comments:

- Summary of complaint/hearing: complaints must be responded to according to regulations. 1st – person is investigated, and assesses if further action is necessary – assessment of legitimacy of complaint, and if there is sufficient evidence. If there is sufficient evidence, the complaint is relayed to Marc (chair), who organizes a hearing. A panel must be assembled. Legal council may be present at the meetings as desired by participants. Complaints may relate to professional misconduct or unskilled practice. If found guilty, may result in suspension, monetary penalties (including cost of hearing), and other remedial recommendations. May appeal decision to Health Disciplines Board, starting process over again (and doubling the cost).
- Question from member – what type of questionable therapies? Marc: we criticize other professions for practicing acupuncture, we should consider the same consideration; are we properly trained for the other modality? Is there enough evidence to support?

9. Examination Committee – William Zhao, Committee Chair

The EC, or the Examination Committee, is responsible for the examination process. The exam is used in credentialing to determine if candidates who desire to be registered to practice acupuncture in Alberta under the governance of the CAAA have acquired minimal entry-level standards of practice in knowledge and skills. Under the Health Disciplines Act, the EC's testing assures the public that new acupuncturists are capable practitioners, who will practice competently and safely and are accountable under provincial legislation for their practice.

Eligible candidates for registration as acupuncturists must meet minimum standards of competency, which are tested for in the five parts of the testing process:

- Pan-Canadian Written Examination for TCM Acupuncturists (multiple choice)
- Pan-Canadian Clinical Case Study Examination for TCM Acupuncturists (short answer questions)
- CAAA Online Safety Examination (multiple choice)
- CAAA Modalities Clinical Examination (OSCE for needling, cupping, and moxibustion)
- CAAA Acupuncture Points Clinical Examination (OSCE for point location, precautions, and contraindications)

The two practical exams are OSCE exams – Objective Structured Clinical Examinations. It is a modern type of examination often used in health sciences, such as midwifery and physical therapy. It is designed to test clinical skill performance and competence in skills such as communication, clinical practice, and dealing with precautions and contraindications. It is a test that is designed to be a hands-on, real world approach to practice that keeps practitioners engaged in understanding the key factors in practicing needling, cupping, and moxibustion. This type of testing process reveals practitioners errors in case-handling, based on evidence-based practice for real-world responsibilities.

There are several requirements that must be met for members to serve on the Examination Committee: the member must have a minimum of 5 years of practicing acupuncture in Alberta; they must be currently registered with the CAAA and be in good standing; and they can not have been affiliated with any acupuncture/TCM schools for at least 3 years. Our current Exam Committee members are: Amanda Ballas, in charge of Modalities Stations; YuCheng Chen in charge of Points Stations; Boxing Wanglin, Wenjun Dai, Zhaocheng Han, and William Zhao. We also have two previous EC members available as consultants: Lowell Ask for Modalities; and Don Fan for Points Stations.

The written exam and case study are designed to cover several aspects of acupuncture/TCM practice, and a specific percentage range of questions address each area. The areas addressed are: Professionalism/interpersonal skill/practice management (8-10% on written), TCM foundation (27-31% written, 28-30% case study), Biomedicine (11-13% written, 10-12% case study), Diagnosis and treatment (28-33% written, 52-56% case study), Acupuncture technique (8-10% written, 5-7% case study), and Safety (8-10% written).

The 2016 Exam components have pass rates that range from 33% (Retake of Point location) to 100% (Online safety exam). The written exam took place on Oct 15, 2016, and had an overall pass rate of 67%. The case study exam took place on Jan 21, 2017, and had an overall pass rate of 58%. The online safety exam was on Oct 15, 2016, and had a 100% pass rate. The modalities exam took place on Oct 15 and 16, 2016 and had a passing rate of 57.6%. The point location exam took place on Oct 15 and 16, 2016, and had a passing rate of 46%.

A breakdown of the Examination Committee's expenses was provided. The total for Exam Committee expenses was \$115,799.01. The income from exam fees was \$130,000.

The Exam Committee is invested in communicating well with the schools in the province. Every member of the EC goes through the conflict of interest policy, and signs a form stating that they have no conflict of interest. We also recommend to all the schools the same list of textbooks as resources. The Exam Committee strives to have the same minimum standards of competency as the schools. One member of

the committee is also a member of the Adhoc committee, and facilitates communication between the two groups.

The EC has a plan for the 2017 year. Alberta will continue to use the pan-Canadian Written and Case-study Exams for the 2017 year. The EC will continue to use – and improve – the OSCE exams for Modalities and Point Location. For the Point location exam, we have developed an OSCE points database system. The EC will also provide a Safety exam program.

I would like to thank all the members who were in the Examination Committee this year. I would like to thank Amanda for being in charge of the Modalities Stations, Dr. Chen for being in charge of Points Stations, and Lowell and Don for consulting with us. I would also like to thank our Registrar Paul Hu and our office staff.

10. Membership Services Committee – Constantine Karampelas/Margaret Kennedy, Committee Chairs (Constantine presenting, Margaret unable to be here today)

The Membership Services Committee has continued with its main efforts as previous years, and tries to offer helpful benefits to CAAA members. We have continued to provide regular CEU events throughout the year, in coordination with other acupuncture groups as well as our own initiatives. We continue to request direct billing services from insurance companies – most notably Blue Cross.

In another aspect of member benefits, we have lined up a home and auto insurance program, which is available to all members. The presentation this morning by Ryan Fowler shared the details of this program with you.

I would like to encourage all members to reach out to us, the Membership Services Committee, with any ideas or areas that you believe we could be serving the members in. We would love quality feedback and opinions from the acupuncture community about where the direction of MSC should assist others. We can also recommend members to join our facebook group for updates.

Finally, I would like to thank the members of the committee that served with me this year – my co-chair, Margaret Kennedy; Carol Xu, Amanda Gergely, Lyla Yip, and Lindsay Babcock.

11. TCM Regulation Ad Hoc Committee – Michelle Phillips

The TCMRC has recently become active, as we have been advised that we do not have to be under the HPA to go ahead with regulation development and approval. Members of the TCMRC are: Dr. Jessica Stankowski, Dr. Devonne Nafzinger, Dr. Andrea Hejtmanek, Dr. Cheng Xia, Dr. Colton Oswald, Dr. Frank Du, Dr. Michael Zhao, Dr. Ju-lin Wang, Dr. Michelle Phillips (Chair). We have had one meeting thus far via teleconference to establish a basic outline of how we are going to approach TCM regulation this time around. Two main areas of focus were

identified - expansion of the scope of practice and herbal regulation. It is important that we identify and include all modalities that we want officially regulated and integrated into our scope of practice. BC and ON have successfully regulated TCM. We will review and utilize both the methodologies and available documentation from these two provinces to develop regulations that are best suited for Alberta practitioners. Having access to this information should significantly shorten the process, as we will not be developing a plan from scratch.

Regarding Scope of Practice - given the experience in BC and ON, we need to have a very strong presentation to government regarding all modalities that we are asking to include in our scope of practice. The main requirements are information on current practice, training and record of safety. Each modality will require an in depth report that covers all of these areas. Training needs to be provided by individuals who have appropriate experience and credentials. Other professions, such as Naturopathic Doctors, Chiropractors and Physiotherapists, have been able to expand their scope of practice by becoming trained in a modality, practicing the modality and then requesting regulation for it. This model has been very successful and requires serious consideration.

Regarding Herbal Regulation - it is important to include all parties with vested interest; that is all herbal associations, societies, etc. that would like to be involved in the development of the herbal regulations. We would like to have representatives from all of these groups involved and give everyone an opportunity to voice their thoughts, opinions and concerns. We will issue a formal invitation to participate once we have better defined the most efficient and effective way to accomplish this. All interested parties will be invited to participate at the initiation of formal discussion regarding herbal regulation.

The TCMRC will be meeting again at the end of May. Our goal is to work through the regulation process as quickly and efficiently as possible.

Thank you.

The floor was open to questions and comments:

- Question about diet recommendations in scope of practice – response recommends discussing from TCM point of view, and how it relates to modern dietary discussions. Further (from Lowell), there is a difference between scope of practice and restricted activities. Dietary recommendations are not a restricted activity. Being included in the scope of practice does reduce liability.
- Clarification of practicing of example (herbal injection) – getting training will enable you to get insurance for the practice. It is not yet included in scope of practice. Injections are a restricted activity.
- Discussion regarding college vs college and association – member voiced experience from when the CAAA was being developed, information from other colleges that were colleges alone, they tend to decrease.

- Comment – nurses applying for ability to perform acupuncture (already have safety requirements for needle insertion).

12. Minimum Standards for Acupuncture Education. – Lowell Ask, Ad Hoc Committee Chair

- The standards being developed are not just curriculum, but standards for teaching staff and teaching clinics.
- This is not meant to limit the programs, but to ensure a minimum level of criteria for programs.
- The recommendations are currently being viewed by schools (stakeholders), which are preparing feedback.
- Question from member: are they increasing minimum school entry requirements? (AB less than other places in the world – currently only require 2 years of post-secondary) - Marc comment that we only have diploma level programs; US and British model best for us to replicate to our situation (when it was being developed). Needed to balance protection of public, and protection of the student taking the acupuncture program.
- There will be a meeting before council make decision

13. Bylaws Amendment Presentation – Heather Thompson

Bylaws form fundamental rules that regulate our members in the public Interest. Bylaws are only superseded by Governmental Acts like: the HDA, HPA or PIPA or the Acupuncture Regulations. Any policies, guidelines or codes Council or a Committee draft CAN NOT conflict with bylaws (ex: Code of Professional Conduct, Conflict of Interest Policy). Bylaws serve as the backbone that the public uses to evaluate our profession. They are the rules that the Council of the CAAA must use to regulate the profession.

The CAAA bylaws were first adopted in 2007 from the amalgamation of 3 Associations (forerunners of the CAAA). These bylaws were amended in 2010 with the formation of the CAAA. They were last amended in 2015. Bylaws change as the organization they govern grows. Not all scenarios were conceived at the time they were first put in place

The CAAA has grown considerably. Since 1988, the earliest members have registration numbers below 100. By 2006, 411 were issued. Now there are over 700 members. It took almost 20 years to grow to 400 members, now in just over 11 years we've almost doubled again. With rapid growth comes the need for expanded bylaws to facilitate clarity and transparency in the operations of the CAAA.

There are several reasons to amend the bylaws now. First, the proposed changes will help minimize conflict of interest. Second, they will serve us as we transition to the HPA - the role of Council is expanded under HPA, therefore it is important that we reflect best practices in the make up of council prior to the transition. Third, they will ensure clarity and transparency in the direction of the profession in the public

interest. Fourth, it will ensure we use our wealth of human resources – experience and expertise - appropriately and not over use them. And lastly, the changes help provide a mental shift to accommodate previously unforeseen situations that result from the substantial growth in our profession.

In regards to conflict of interest, the CAAA Code of Professional conduct says:

“10.1 A conflict of interest is deemed to exist in any situation where a registrant has a personal interest in a matter that may be reasonably seen to influence their professional advice, decision-making and/or conduct.

For the purposes of the foregoing, a “personal interest” includes, but is not limited to financial, professional, family and other personal relationships, and includes those situations in which a family member or associate of the registrant has a significant interest in a matter.”

As indicated by the aforementioned statement, a conflict of interest may influence a person’s professional advice, decision-making, or conduct. The following are examples of ways these areas may be influence:

- Professional advice:
 - Based on confidential information could develop a significant advantage over other members or a school not represented
 - Use confidential information from Council meetings to position their school in a certain way
- Decision Making
 - Who sits on Committees – Standing and Ad Hoc – influence
 - Contract research and development as well as make final decisions on: Minimum Professional Standards, Entry Level Education Standards as well as other decisions like approving new school applications
 - Decides on the policies and guidelines that direct the profession
 - Access to confidential and sensitive information regarding exams and other information
- Conduct
 - When a school owner who is also a council member promises students they will be a ‘Doctor’ of TCM after 4 years, it is perceived by students this is CAAA Policy
 - Sit at multiple junctions of decision-making about and/or have power over a student’s education, examination and career
 - Students don’t like this and are reasonably intimidated by this, if the student sees their principal/owner on council they don’t believe they have recourse
 - We are one of the only medical professions that has these co-mingled roles so we must take even more care to define, observe and demonstrate separation
 - Based on confidential information could exploit a significant advantage over other members or a school not represented

As per the CAAA Conflict of Interest Policy:

DEFINITION OF CONFLICT OF INTEREST A conflict of interest is a situation in which a person has a private or personal interest sufficient to appear to influence the objective exercise of his or her official duties as a member of the Council, Committee or Ad Hoc Committee with CAAA.

“Private or personal interest” refers to an individual’s self-interest (e.g. to achieve financial profit or avoid loss, or to gain another special advantage or avoid a disadvantage); the interests of the individual’s immediate family or business partners; or the interests of another organization in which the individual holds a position (voluntary or paid).

“Objective exercise of duties” refers to an individual’s ability to carry out her or his responsibilities in the best interest of CAAA.

It should also be noted that there are several types of conflicts of interest: actual or real, perceived or apparent, and foreseeable or potential.

(Review of Proposed bylaw amendments – as presented during the meeting, and in the subsequent letter mailed out to all members.)

To summarize, updating the CAAA bylaws has several benefits. It will help manage growth of the profession; greatly reduce conflicts of interest; and increase clarity and transparency of the operations of the CAAA in the public interest.

Brittney Tess – Lawyer

- The firm she works at was hired to consult on the proposed bylaw amendments. There was a clerical error in the original proposed bylaw amendments, and therefore there will be no vote today. The vote will be completed by mail-in ballots in the near future.

Questions from Bylaw presentation:

- Question from members to clarify “education affiliate”; first amendment is to add a definition of what an education affiliate is, second mentioning limits the number of education affiliates on council to one. Previous limit was four, but it is found that having that many educational affiliates is not always functional, ex.: when voting on education matters, educational affiliates must excuse themselves from voting due to conflict of interest. Other part of change is due to student concerns of impact to their education and options for re-course by addressing the council with their concerns (when their teacher/principal/etc. is then sitting on the committee).
- Questions for possible conflict of interest for council members that serve on other committees (within the CAAA) – council response reflects a view of minimal conflict of interest in other committees (they don’t financially gain from those committees, they are working to the same goal of the whole CAAA, instead of a school outside of the CAAA).

14. New Business - No new business addressed, and meeting no longer reaches quorum

15. Final Comments – Boxin Yanglin (vice-pres)

Thank you to our president, Lowell Ask, and our registrar, Paul Hu, for all their work, as well as other council members, the CAAA office staff, committees, and public members of council. Thank you for your hard work and commitment.

16. Meeting adjourned – 5:40pm; 1st Cheryl Bower, 2nd Michael McFarlane, carried