

Minutes of the 2010 Annual General Meeting held on January 9th, 2011, at the Radisson Hotel Vancouver Airport, 8181 Cambie Road, Richmond, BC, V6X 3X9.

Board Members Present:

Arden HENLEY (Board Chair), John BLAZEVIC (Board Member), David Huanwei CHEN (Board Member), Michael CHUNG (Board Member), Harvey HU (Board Member), Fang LIU (Board Member), William D. MACLEOD (Board Member), Vivienne STEWART (Board Member), Ann YUAN (Board Member), Mary WATTERSON (Registrar).

Also Present:

6 staff of CTCMA, 1 interpreter, and 76 registrants

Meeting began at 2:03 p.m. with Arden Henley in the Chair.

1) Call to Order

Chair Arden Henley confirmed the presence of the quorum and called the meeting to order at 2:03 p.m.

2) Confirm Quorum

76 registrants in attendance presented at the Annual General Meeting.

3) Introduce Guests & New 2010 Registrants

Arden Henley, on behalf of the Board, welcomed everyone to the 2010 Annual General Meeting of the College and introduced the Board Members.

4) Adoption of the Agenda

Agenda approved.

5) Approval of the Minutes of the 2009 Annual General Meeting held on January 31st, 2010

Minutes adopted.

All in favour, no contrary.

6) Convention Standing Rules

Convention standing rules were circulated when registrants came to the meeting. Approved by majority.

7) Chairman's Report

It is my pleasure on this occasion to report to you that this past year has been a productive one. There have been a number of significant accomplishments and notable developments. Foremost, in my estimation, has been the College's formation of an Interim Working Group incorporating both registrants and representatives from 4 other regulatory colleges. The purpose of this interdisciplinary Group is a final review of proposed changes to CTCMA by laws and regulations in relation to Point Injection Therapy, Schedule H, and Schedule I. Schedule H refers to the

approval of educational institutions and Schedule I to a list of herbs to be prescribed exclusively by qualified College registrants. The College has worked closely with the legislative branch of the provincial government in advancing these developments. The College has also worked effectively with the newly formed Health Professions Review Board.

With the Board's encouragement and support and the Registrar's leadership the College continues to lead the way in Canada in identifying and validating TCM professional competencies, developing national exams and meeting the requirements of the Agreement on Internal Trade (AIT). In the context of the trademark matter, the College has answered the call to protect not only the TCM profession, but also the integrity of the Health Professions Act. The provincial Ministries of both Health and Education have now responded to this issue.

In a singular step forward for the TCM profession in North America acupuncture treatments were included for the first time in Canada as a supplementary benefit for Medical Services Plan (MSP) premium assistance recipients in April, 2008. The first billing cycle for this coverage has now been completed. One of the challenges the College has faced this year has been responding to the regulatory issues that arise from such developments. Assuring the public that MSP billing by professionals is carried out honestly and accurately is a significant responsibility that the profession must assume.

This year has been the sixth and final year of my series of appointments to the Board of Directors by the provincial government Board Resourcing Unit and, so it is on this occasion, the time for me to say goodbye.

It has been an honour for me as a government appointee and non-practitioner to serve on the Board. I am grateful to the practitioners and scholars of Traditional Chinese Medicine and Acupuncture, past and present, named and unnamed, known and unknown for this opportunity and for the many benefits that I have received from this ancient and contemporary philosophy, life science and medicine with its deep roots in the culture and history of China. I am similarly grateful to founding Board Chair of the CTCMA, Mason Loh and all those who have served so capably on the Board over the past years. My thanks to the members of the Board: I believe we accomplished a great deal in an atmosphere of harmony and cooperation. Some of you will return and continue to provide leadership to the regulation of the profession. I commend you for your contributions and willingness to serve. I also want to express my appreciation for the leadership that the College's Registrar, Dr. Mary Watterson provides and the warm and exceptionally cooperative collegial relationship we have enjoyed during my tenure.

Finally, I am grateful to you, the heart and soul of the profession in BC, the registrants of the College of Traditional Chinese Medicine and Acupuncture Practitioners.

There are many conditions that make the evolution of Traditional Chinese Medicine and Acupuncture in British Columbia possible. One of those conditions is the over 40 years of cordial and mutually respectful relations between the countries of China and Canada and the ongoing productive cultural exchange between the peoples of the two countries. Another condition is the willingness of practitioners from China and other Asian countries to practice in North America and to share with North American practitioners the treasure of Traditional Chinese Medicine and Acupuncture. We all benefit from the Canadian government's official policy of multiculturalism and the rich multicultural tapestry of British Columbia.

Once again, please accept my thanks for this precious opportunity to learn and to return in some small measure the enormous benefits my family and I have received from Traditional Chinese Medicine and Acupuncture.

8) Financial Report

Finance Committee – Bill Macleod

The Registrar presented a summary of the financial report to the AGM.

9) Committee Chairs Introduction

Discipline Committee – Bill Macleod

The Discipline Committee is mandated to:

1. Deal with matters related to the Professional Medical Code of Ethics and Code of Conduct.
2. Conduct evaluation of investigation results handed over by the Inquiry Committee, and
3. Issue citation for and conduct hearing session(s)
4. Consider and take action if necessary as follows:
 - a) dismiss the matter
 - b) reprimand the respondent
 - c) impose limits or conditions
 - d) suspend respondent's registration
 - e) cancel respondent's registration
 - f) fine the respondent
 - g) assess costs (or part of them) of the hearing against the respondent

One Hearing took place in Victoria January 28, 2010. The CTCMA 3-member Hearing Panel convened to determine whether the alleged registrant acted contrary to the HPA, CTCMA Regulations and Bylaws by engaging in the unauthorized practice of acupuncture and herbology.

Examination Committee – Harvey Hu

The Examination Committee consists of three Members appointed by the Board.

The Examination Committee is responsible for advising the Registrar with regard to registration examinations, and acts as a consulting body to the Registrar in the appropriate testing of applicants' knowledge and skills.

The Examination Committee had four meetings in 2009 (June 10, July 6, October 21 and December 9).

Dr.TCM Written Examination was held on May 29, 2009 with 29 candidates. Dr.TCM Clinical Examination was held on June 21, 2009 with 14 candidates.

The Herbology Written Examination was held on September 25, 2009 with 64 candidates. The Herbology Clinical Examination was held on November 14, 2009 with 60 candidates.

The Acupuncture Written Examination was held on October 2, 2009 with 153 candidates. The Acupuncture Clinical Examination was held on November 21-22, 2009 with 124 candidates.

In 2009, Examination Committee further clarified policies on Dr.TCM examination eligibility and advertisements from registrants participating in development and administration of examinations.

Governance Committee – Vivienne Stewart

The bylaw amendments approved by the Board on April 18, 2009 have been submitted to the Minister of Health Services and the provincial health regulatory organizations as required by section 19 (6.2) of the *Health Professions Act*. Effective December 28, 2009 the Ministry of Health approved the following bylaw amendments:

1. Section 2 is repealed and replaced by the following:
 2. (1) The board consists of six elected board members and the appointed board members.
 - (2) At least one of the elected board members must be elected from the province of British Columbia outside the Lower Mainland.

2. Section 7 is repealed and replaced by the following:
 7. (1) The term of office for an elected board member commences at the first regular meeting of the board after the election of the board member.
 - (2) The term of office for an elected board member is 3 years.
 - (3) Despite subsection (2), the terms of office for the elected board members elected in 2010 are:
 - (a) two years for three positions, and
 - (b) three years for three positions.
 - (4) Subject to section 4,
 - (a) an elected board member is eligible for re-election, but may not hold office as an elected board member for more than 6 consecutive years, and
 - (b) an elected board member who is ineligible under subsection (4) for re-election is again eligible for election after at least two years have elapsed since the expiry of his or her last term in office as an elected board member.
 - (5) An elected board member may resign at any time by delivering a notice in writing to the registrar.
 - (6) The resignation of an elected board member shall take effect immediately upon delivery of a notice in writing to the registrar.

3. Section 15.1 is repealed and replaced by the following:
 - 15.1(1) The inquiry committee is established consisting of nine members appointed by the board.
 - (2) The inquiry committee must include at least three public representatives

4. Section 17(3)(c) is repealed and replaced by the following:
 - (c) recommending criteria to the board for the purpose of the continuing education requirement under section 57.

5. Section 47 is repealed and replaced by the following:
 47. The following classes of registrants are established:

- (a) Registered Acupuncturists, abbreviated as “R.Ac.”;
- (b) Registered Traditional Chinese Medicine Herbalist, abbreviated as “R.TCM.H.”;
- (c) Registered Traditional Chinese Medicine Practitioner, abbreviated as “R.TCM.P.”;
- (d) Doctor of Traditional Chinese Medicine, abbreviated as “Dr. TCM.”;
- (e) limited;
- (f) student;
- (g) non-practising;
- (h) temporary.

6. Section 48(1)(a) is repealed and replaced by the following:

- (a) graduation, from an acupuncture education or training program for registration as an acupuncturist, or from a traditional Chinese herbology education or training program for registration as a traditional Chinese herbalist, or from a traditional Chinese medicine education or training program for registration as a traditional Chinese medicine practitioner or Doctor of traditional Chinese medicine, in accordance with the requirements listed in Schedule “E”,
- (a.1) successful completion of not less than two (2) years of liberal arts or sciences study (comprised of at least 60 credits) in an accredited college or chartered/approved university acceptable to the registration committee,

7. Section 48(2)(c) is repealed and replaced by the following:

- (c) an original certificate, notarized copy, or other evidence satisfactory to the registration committee of graduation from a program referred to in subsection (1)(a), and evidence satisfactory to the registration committee that the applicant is the person named therein,
- (c.1) an original diploma, notarized copy, or other evidence satisfactory to the registration committee, confirming successful completion of a program referred to in subsection (1)(a.1), and evidence satisfactory to the registration committee that the applicant is the person named therein,

8. Section 48 is amended by adding the following subsections:

- (3) Despite subsections (1)(a), (a.1) and (b), an applicant may be granted full registration by the registration committee if the applicant
 - (a) holds registration or licensure in another Canadian jurisdiction as the equivalent of a full registrant, which is not subject to any practice limitations, restrictions or conditions in that jurisdiction that do not apply generally to registrants in British Columbia, and provides evidence satisfactory to the registration committee of the applicant’s registration or licensure, and that the applicant is the person named therein,
 - (b) provides evidence satisfactory to the registration committee that the applicant meets any applicable continuing competence and quality assurance requirements established by the applicable regulatory or licensing authority in the jurisdiction referred to in paragraph (a), and

- (c) meets the requirements established in subsection (1)(c) and (2)(a), (b), (d), (e) and (f).
- (4) Despite subsection (1)(a) and (a.1), the registration committee has discretion, in satisfying itself under section 20 of the *Act* that the applicant meets the conditions or requirements for registration as a member of the College, to consider whether the applicant's knowledge, skills and abilities are substantially equivalent to the standards of academic or technical achievement and the competencies or other qualifications established in subsection 1(a) and (a.1), and to grant registration on that basis provided the applicant
 - (a) provides evidence satisfactory to the registration committee, of such knowledge, skills and abilities, and
 - (b) meets the requirements established in subsection (1)(c) and 2(a), (b), (d), (e) and (f).
- 9. Section 51 (1)(b) is repealed and replaced by the following:
 - (b) satisfies the registration committee of the good character of the person consistent with the responsibilities of a registrant and the standards expected of a registrant, and
- 10. Section 53 is amended by adding the following:

53.(1.1) Despite subsection (1)(b)(ii), the registrar may waive or reimburse any applicable application or registration fees payable or paid in respect of registration under subsection (1) if, in the opinion of the registrar, circumstances exist in relation to the applicant or registrant that warrant waiver or reimbursement.
- 11. Section 57(1)(a) is repealed and replaced by the following:
 - (a) complete 25 hours of continuing education every 2 calendar years that meets the criteria established by the board, and
- 12. The following section is added:

57.1 The work performed by the registrar and deputy registrar for the College for a period of up to 10 years shall be considered as active practice for the purposes of renewal of registration and the registration committee will not require the registrar or deputy registrar to complete a retraining program for any application for renewal that they submit within that 10 year period.
- 13. The heading of Schedule E is amended by deleting the word "Approval" and substituting the word "Recognition".
- 14. The following paragraph is added to Schedule E immediately after the heading "Recognition Guidelines for Education/Training Program":

Students who complete training in British Columbia will only receive recognition for programs offered by training institutions that are currently registered or accredited with the Private Career Training Institutions Agency ("PCTIA"). As of March 31, 2012, recognition will only be given for completion of programs offered by training institution programs in British Columbia that are accredited by PCTIA.

15. Schedule E is further amended by deleting the following requirement from the "Minimum educational program requirements":
- Entrance requirement for all programs is 2 years of university education or equivalent.

Inquiry Committee – Vivienne Stewart

The Inquiry Committee investigates written complaints made regarding the practice of a College registrant and matters related to professional practice under the *Health Professions Act*. It also investigates matters involving unauthorized practice by non-registrants and can also initiate an investigation on its own motion.

Actions in 2009-2010:

1. "Notice of Citations" being approved by the Board ;
2. Resolution passed by the Board stated that : *That members of the Board and non-Board members who sit on committees, who are the subject of an investigation by the Inquiry Committee or a disciplinary proceeding by the Discipline Committee, or the subject of any disciplinary proceeding in another jurisdiction, may be required by the Board to refrain from attending meetings and participating in any decision-making at Board or committee meetings until the satisfactory resolution of the proceeding by the Inquiry Committee and/or Discipline Committee. At the conclusion of the investigation or disciplinary proceeding, the Board will determine if it is appropriate for the Board member or non-Board member to resume his or her functions for the College*
3. As of end of March 2009, there were 11 cases on file - 4 cases of unauthorized title (registrants), 2 cases of unauthorized title (non-registrants), and 2 cases of unauthorized title/practice (non-registrant). One case resulted in a Citation to Discipline, and 3 other suspensions remain in effect.

Patient Relations Committee – David Chen

The Committee's mandate is to deal with complaints of professional misconduct of a sexual nature by:

1. establishing and maintain procedures to deal with such complaints,
2. developing and coordinating educational programs for professionals and the public,
3. developing guidelines for professional conduct, and
4. providing information to the Public re the College's complaint and disciplinary process

The Committee shall function in accordance with the relevant provisions set out in the *Health Professions Act* and the College Bylaws, and shall report its findings and recommendations to the Board.

Actions in 2009-2010:

4. Four committee members, representing CTCMA, attended a workshop held in October 22, 2009 sponsored by the HROs. The subjects were (a) "Overview of Boundaries, Ethics and Professionalism" and (b) Professional Vulnerability" presented by Dr. Glen Gabbard. They were directed to regulatory organizations "Notice of Citations" being approved by the Board ;
5. The committee has reviewed the educational booklet "Where's the Line" published by the College of Physical Therapists (CPTBC). The Committee gratefully acknowledges permission from the CPTBC to adapt their publication to CTCMA registrants. It was

agreed that the adapted booklet be sent out to all registrants, including students, and that it be recommended as an educational tool for CTCMA registrants.

6. The Committee will continue to examine tools for registrant education. The Committee will also be following the HRO Subgroup on professional boundaries and the potential for collaborative work.

Quality Assurance Committee – Michael Chung

The Quality Assurance Committee consists of four professional members and two public members appointed by the Board. It is mandated to review the standards of practice and to enhance the quality of practice and to reduce incompetent, impaired or unethical practice among registrants; to establish and maintain a continuing competency program to promote high standards of practice among registrants; and to recommend criteria to the board for continuing education requirements.

The Committee had four meetings between April 2009 and March 2010

A Task Force was appointed to review continuing competency programs including a recently implemented program by the Ordre des acupuncteurs du Quebec. It is anticipated that early in the New Year the Committee will submit recommendations to the Board on criteria for Continuing Competency Requirements, and supporting Registrant File documentation.

Registration Committee – Ann Yuan

The Registration Committee consists of six Members appointed by the Board.

The Registration Committee is responsible for reviewing and approving the registration of a person as a member of the College.

The Registration Committee had seven meetings in 2009/2010 (April 15, May 6, June 3, September 9 and October 28, 2009, February 3 and March 17, 2010).

The annual registration renewal rate in 2009 was 95% and the renewal cycle of the student registration has been brought into compliance with the bylaw provisions (March 31st of each year).

As of March 31, 2010, the register consisted of: 784 R.Ac., 54 R.TCM.H., 380 R.TCM.P., and 301 Dr.TCM.

The Registration Committee has approved applications for examination candidacy in 2009 including applications for Dr.TCM examination and AH examinations.

As of March 31, 2010, 2 cases were under review by Health Professions Review Board (HPRB).

Standards and Education Committee – Arden Henley

The Standards of Education Committee consists of six member appointed by the Board. The Committee is responsible for establishing, implementing, enforcing and evaluating the standards of education for the approval of training programs and for reviewing and making recommendations to the board regarding education programs.

One of the major activities of the Standards of Education committee in 2009 was developing a policy framework to ensure that registrants practising point injection technique (PIT) are adequately trained and competent and that the parameters of the practice are clearly defined. The Committee reviewed the comprehensive PIT Task Force Report and a review of existing scientific literature. A policy analyst was then brought in to provide the College with recommendations for developing policy regarding the regulation of PIT. The subsequent report also serves as a report of a systematic analysis to inform policy options available to the College regarding the regulation of PIT as part of the practice of CTCMA registrants and the processes the College would need to put in place to regulate such practice in the keeping with the current Health Professions Act.

During the Committee's on-going review of information on PIT, the use of other more invasive injection procedures caused concern. Based on this research and subsequent discussion the Committee recommended to the Board:

That the 'Restricted activities' as listed in the Traditional Chinese Medicine Practitioners and Acupuncturists Regulation does not currently include intra-articular injection including synovial fluid replacement therapy/viscosupplementation, epidural injection, facet joint injection, or any other type of intra-articular injection; nor does it include regenerative injection therapy/prolotherapy; mesotherapy/injection lipolysis; or intravenous therapy including intravenous injection, infusion; or nerve blocks of any type. A CTCMA registrant may practice such procedures only if the registrant holds current dual registration with a second College whose Regulations do include such 'Restricted activities'.

10) CTCMA Registrar Report

Registrar's Report: AGM January 9, 2011

In September 2010 the Board held a strategic planning session, reviewing the past four years and planning forward for the next four years. The Board decided that it would be a good idea for registrants to have a summary of what the College has been doing for the past four years.

Today, instead of the usual AGM report on the past year, I am going to give you a summary of the goals accomplished and the work in-progress since 2007. The conclusion will include a brief summary of some of the strategic plans for 2011 to 2014.

Inquiry & Discipline

The College is now main-stream and the public know CTCMA is here. The result is an increase in complaints received from members of the public. The College has an Inquiry & Discipline Coordinator to work with the Inquiry Committee to process complaints, keep cases on track and within the timelines required by the HPRB, and to advise and direct the trained investigators that are now in place. The high cost of investigations is partially offset by fines and tariffs initiated in 2009.

Patient Relations

The publication on boundary issues "Where's the Line" was mailed out last year to all registrants and is now mailed out to each new registrant. Practice Standards on Sexual Misconduct, Consent to Treatment, and Draping were set in 2008.

Quality Assurance

Continuing Competency Program Requirements and an Activities Log have been adopted. In keeping with our colleagues in the other health professions, an increase in continuing education requirements has been approved.

Health Regulatory Organizations (HROs) Collaboration

- Discipline Hearing Workshop Co-sponsored
- Signatory to group communication to provincial government (Bill 25; AIT)
- Subgroups:
 - Health Professions Review Board
 - Sexual Ethics/Boundary education

Examination & Course Initiatives

The Safety Courses are now administered on-line. Examination candidate information, handbooks, forms and results are now available on-line. The examination Development Teams work year 'round in a secure on-line sight. Acupuncture practical examination has been restructured. Item banks are in place for the three examinations in two languages with the history of how each question item has performed in each examination. Psychometric evaluation is used for every examination from development and administration to post-analysis.

Communications

The AGM Education/Scientific Session was initiated in 2007. Regular meetings are held with the TCM/A schools in the province. A number of meetings have been held with the TCM professional associations. The Newsletter has been updated and upgraded and is mandatory reading for all registrants. In an effort to 'go green' we are asking registrants to request newsletters by email – and to date 27% of the registrants do receive the newsletter electronically.

The new redesigned website will be launched this month.

Operations

The paper files of over 3100 registrants, former registrants and applicants have been reviewed and catalogued. Files have also been arranged in alphabetical order versus the previous numbering system. The files of grandparented registrants have had detailed personal patient information removed and shredded.

The renewal process has been refined and registrants are required to keep a Registrant File which includes CE, Patient Visit records, insurance and business license information. Randomized clinical reviews and site visits have been initiated.

After 7 years the College moved from a packaged workplace to a self-contained office.

By-Law Amendments

In-progress and involving on-going communication with multiple stakeholders:

- Schedule H – Approved Training Programs for registration purposes
- Schedule I – TCM herbs that designated registrants are authorized to prescribe or administer in their practice as CTCMA registrants.
- Regulation amendments to include 'Restricted Activities' currently being practiced

Approved and Submitted:

- CE requirements increased
- Honorariums for Board and Committees has been increased in appreciation of the work involved
- Authorization to work in Canada required for registration

Deposited Amendments:

- Board Election: staggered and increased terms of office
- Inquiry Committee – membership increase
- Quality Assurance Committee role in recommending CE criteria to the Board
- Registration requirement: 2-years liberal arts or science stand-alone requirement
- BC Schools and PCTIA accreditation requirement
- Schedule F – fee increases

Unauthorized Practice

Registrants and members of the public have asked the College for clarification on both registration and registration titles. The College has responded by conducting investigations with the last year resulting in: 31 cases of unauthorized practice/title used by registrants
10 cases of unauthorized practice
5 injunctions in the BC Supreme Court resulting in court orders to stop practice
Discipline Hearing: unauthorized practice by a former student registrant

Education and Training Programs

- Training Program Review - TCM schools in BC
 - Part 1 Curriculum Review
 - Part 2 Clinical Review/Site visit
 - Program initiated in April, 5 schools currently undergoing Curriculum Review,
 - PCTIA requires schools to meet Review requirements
- Transcript requirements developed
- System for tracking student registration
- Relationship with ICES

Medical Services Plan:

The College cooperative with the MSP through implementation and maintenance of the practitioner lists. In April 2008 the Ministry of Health Services included acupuncture treatments for the first time in Canada as a supplementary benefit for Medical Services Plan (MSP) premium assistance recipients. The College has received a number of complaints alleging a variety of billing irregularities by registrants.

As you heard from Dr. Vern Davis of the Audit and Investigations Branch of the Ministry of Health Services, the Billing Integrity Program has concerns regarding acupuncture practises. The Branch has initiated investigations of four CTCMA registrants which include site audits of clinics and a review of all billings submitted to MSP.

The CTCMA continues to be in communication with the Ministry of Health Services and other third party insurers and will ensure, through its own statutory mandate, that offending practitioners and those who engage in the unauthorized practice of acupuncture and/or submit inaccurate bills will face appropriate regulatory consequences. We assure you that the College is acting quickly and effectively to protect the public and preserve the integrity of the profession.

Another outcome of the investigations is the identification of remedial training needs. An example is clinical record management.

Pan-Canadian Standards

- CTCMA has been the project lead for 5 government funded projects to develop pan-Canadian standards for TCM/A. The projects have brought the other 4 TCM/A provincial regulators together to form the national regulatory group known as CARB, or ‘the Alliance’.

As you can see much of the work is on-going as the College assesses entry-level competency and ensures continued competency – all based on enhancing the quality of care provided to the public – and in particular the most vulnerable of the public—the patient.

Why a Strategic Plan for the future?

Telling the future by looking at the past assumes that conditions remain constant. This is like driving a car by looking in the rear view mirror (Herb Brody).

We have looked in the rear view mirror and a great deal has been accomplished – and now it is time to look ahead. Your Board, with the wisdom and leadership of Dr. Arden Henley, has developed a strategic plan for the future. The following is a summary of the strategic plan, keeping in mind that much of the work of the College involves on-going activities requiring the cycle of monitoring – assessing – benchmarking – and revising.

Strategic plans for the next four years include:

- Ensuring minimum standards of entry
 - Approved Training Programs and National educational standards
 - Competency Assessment and national examinations
 - National safety courses
- Practice enhancement
 - Continued professional development
 - Identification of remedial programs for implementation
 - Clinical Records
 - Ethics
 - Informed Consent
 - Certified Practices (post-graduate training beyond entry-level)
 - Practice Advisor (guide to appropriate resources)
 - English language (review and recommendations)
- Effective Communication – with the Community and beyond
 - Registrant surveys
 - Website (monitor/revise/expand)
 - Reaching the public (advertising options)

Canadian Alliance of Regulators (CARB-ACOR)

- Formally incorporated
- National standards
- Website

In the last four years the College has made significant strides in establishing itself as a mainstream regulatory body. The goals achieved and the activities accomplished reflect the governance of the board giving direction and the perseverance and enthusiasm and commitment of the entire team – Board, Committees, Staff, and the many other part-time volunteers who make the College what it is.

People are the College's #1 resource

Thank you for another successful year.

11) A Questions & Answers period followed.

12) Recognizing outgoing Board Members & Introducing new Board Members

a. Outgoing Board members: Arden, Harvey, David

b. New Elected Board members: Sonia Hsiao-Feng Huang, Todd Howard

13) Adjournment

The meeting adjourned at 3:03 p.m.