Board of Directors Meeting-June 18, 2026

June 18, 2026, 1:00 – 4:00 pm ET

Burlington, ON

Burlington, ON L7L 6W6

Board of Directors Meeting-June18, 2026

AGENDA

1 PARTICIPANTS

BOARD OF DIRECTORS:
John Burke, RCIC, Interim Chairperson
Richard Dennis, RCIC
Tim D'Souza
Jennifer Henry
France Houle
Ben Rempel
Marc Spector

MINISTERIAL OBSERVER:
Peter Christensen, Assistant Director, Integrity Policy & Programs, Immigration, Refugees and Citizenship Canada

MANAGEMENT:
Stan Belevici, RCIC-IRB, Interim President & CEO
Jessica Freeman, Director, Corporate & Public Affairs
Laura Halbert, Director, Professional Conduct
Cathy Pappas, Director, Registration & Interim Registrar
Beata Pawlowska, Director, Professional Standards, Research, Education & Policy
Thomas Wardman, Interim Director, Operations
Victoria Rumble, Corporate Secretary
Nithiya Paheerathan, Coordinator, Board Administration

GUEST:
Andrew Dumont, Partner, CEO & Board Services, Social Impact Sector, Boyden Executive Search

2 CONSENT AGENDA

John Burke, RCIC

Minutes of Meeting of March 26, 2026
Independent Complaints Review Officer's Report
Proposed Board and Committee Meeting Dates for 2027
Annual General Meeting Location and Format 2026
2026 Annual Report Design Concept and Table of Contents
Risk Response Strategies Register

3 MEETING AGENDA

1:00 PM — Welcome and Introductory Remarks (2 mins)
John Burke, RCIC
Recording Secretary

	Land Acknowledgement	
	Introductions	
	Conflict of Interest	
1:02 PM	Approval of Consent Agenda *John Burke, RCIC*	Approval (1 min)
1:03 PM	Approval of Meeting Agenda *John Burke, RCIC*	Approval (2 mins)

4 REPORT OF THE INTERIM CHAIRPERSON

1:05 PM	Report of the Interim Chairperson *John Burke, RCIC*	Report (10 mins)

5 MANAGEMENT REPORTS

1:15 PM	MANAGEMENT REPORTS	Discussion (10 mins)
	Report: Professional Standards, Research, Education and Policy *Beata Pawlowska*	Reference
	Report: Registration Department *Cathy Pappas*	Reference
	Report: Professional Conduct Department *Laura Halbert*	Reference
	Report: Corporate and Public Affairs *Jessica Freeman*	Reference
	Report: Operations Department *Thomas Wardman*	Reference
	DEPARTURE OF DEPARTMENT DIRECTORS (5 MINS)	

6 SUSTAINABILITY

1:40 PM	Report of Finance and Audit Committee *Tim D'Souza*	Report (5 mins)
1:45 PM	Review of Financial Results for period ended March 31, 2026 *Tim D'Souza*	Discussion (5 mins)
	Summarized Financial Report for F2026 Q3	Discussion
	Financial Report for F2026 Q3 Forecast	Discussion
1:50 PM	Draft Budget for Fiscal 2027 *Tim D'Souza*	Approval (20 mins)
2:10 PM	Auditor Engagement and Remuneration *Tim D'Souza*	Approval (5 mins)
2:15 PM	Approval of Maximum Compensation Fund Claim Amount *Tim D'Souza*	Approval (15 mins)

2:30 PM

7 BREAK (15 MINS)

8 GOVERNANCE

2:45 PM	Report of the Governance and Nominating Committee	Report (5 mins)

	Ben Rempel	
2:50PM	Update on Regulatory Framework *Ben Rempel*	Discussion (20 mins)
3:10PM	Extension of the 2023–2026 Strategic Plan *Ben Rempel*	Approval (20 mins)
	9 GENERAL INFORMATION	
3:30PM	Board of Directors Meeting *John Burke, RCIC* Date: September 24 & 25, 2026 Location: Burlington, ON	Reference
3:30PM	**10 IN CAMERA SESSION - MEETING CLOSED TO PUBLIC** *John Burke, RCIC*	
4:00 PM	**11 TERMINATION** *John Burke, RCIC*	Approval

Minutes of a Meeting of the Board of Directors of the College of Immigration and Citizenship Consultants Held at 12:30 PM ET, Thursday, March 26, 2026 At the College of Immigration and Citizenship Consultants Office and via Zoom 5500 North Service Road, Suite 1002, Burlington, ON L7L 6W6

Board of Directors Present:

Stan Belevici, RCIC-IRB, Chairperson
John Burke, RCIC (Vice-Chairperson) *
Richard Dennis, RCIC
Tim D'Souza
Jennifer Henry
France Houle
Ben Rempel
Marc Spector

Ministerial Observer Present:
Peter Christensen, Assistant Director, Integrity Policy & Programs, Immigration Refugees and Citizenship Canada

Guest Present:
John Wilkinson, Partner, WeirFoulds LLP

Management Present:

Kate Lamb, Interim President & CEO
Jessica Freeman, Director, Communications and Stakeholder Relations
Laura Halbert, Director, Professional Conduct
Cathy Pappas, Director, Registration
Beata Pawlowska, Director, Professional Standards, Research, Education and Policy
Thomas Wardman, Interim Director, Operations

Nithiya Paheerathan, Coordinator, Board Administration and Recording Secretary

Absent:
Victoria Rumble, Corporate Secretary

* *Via Teleconference*

3.1 WELCOME AND INTRODUCTORY REMARKS

Quorum

The Chairperson declared a quorum to be present and the meeting to be duly constituted for the transaction of business at 12:30 pm ET.

With the consent of the meeting, Nithiya Paheerathan acted as Recording Secretary.

Land Acknowledgement

The Chairperson acknowledged the land on which they gathered was part of the traditional territories of many nations covered by 70 treaties and other agreements with Indigenous peoples. He expressed gratitude for the privilege to work and live on these territories.

Introductions

The Chairperson welcomed all members of the Board, Ministerial Observer, members of the public, College licensees and introduced those in attendance. He gave instruction on how to listen to the broadcast in French.

Conflict of Interest Declaration

The Chairperson asked for declarations of conflict of interest with any items being discussed. None were declared.

3.2 APPROVAL OF CONSENT AGENDA

The Chairperson referred to the pre-circulated materials and requested a motion to approve the consent agenda. A request was made to move the Annual Review of Insurance Coverage to the meeting agenda for a discussion. The Chairperson then called for a motion to approve the amended consent agenda.

<table>
<tr><th colspan="4">RESOLUTION – CARRIED:</th></tr>
<tr><td>Moved By:</td><td>Jennifer Henry</td><td>Seconded</td><td>Ben Rempel</td></tr>
<tr><td colspan="4">BE IT RESOLVED THAT:
the 9 items contained in the consent agenda be and are hereby approved, as amended:
• Minutes of meeting of September 25, 2025
• Minutes of the meeting of November 27, 2025
• Independent Complaints Review Officer’s Report
• Board and Committee Workplans 2026-27
    ○ Board of Directors Workplan
    ○ Finance and Audit Committee Workplan
    ○ Governance and Nominating Committee Workplan
    ○ Human Resources Committee Workplan
• Signing Officer Policy
• Confirmation of Authorized Signing Officers</td></tr>
<tr><td>Opposed:</td><td>None</td><td>Abstained:</td><td>None</td></tr>
</table>

3.3 APPROVAL OF MEETING AGENDA

The Chairperson referred to the amended agenda and called for a motion for its approval.

<table>
<tr><th colspan="4">RESOLUTION – CARRIED:</th></tr>
<tr><td>Moved By:</td><td>Marc Spector</td><td>Seconded</td><td>Tim D’Souza</td></tr>
<tr><td colspan="4">BE IT RESOLVED THAT:
That the agenda be approved as amended.</td></tr>
<tr><td>Opposed:</td><td>None</td><td>Abstained:</td><td>None</td></tr>
</table>

3.4 REPORT OF THE CHAIRPERSON

The Chairperson reported that the College was approaching a significant milestone with the anticipated release of the final regulations under the *College of Immigration and Citizenship Consultants Act*, marking the conclusion of its transition period. He noted that, throughout this phase, the Board has balanced the maintenance of existing structures with the development of a modern regulatory framework—work that is now nearing completion.

He further advised that recent governance updates included the appointment of new directors, France Houle and Marc Spector, and acknowledged the valuable contributions of departing members, Normand Beaudry and Jyoti Singh.

Looking ahead, the Chairperson reaffirmed that key priorities include finalizing the by-laws, advancing the Compensation Fund framework, and recruiting a permanent Chief Executive Officer.

In closing, he emphasized that as the College moves forward, it remains committed to strengthening governance, enhancing operational effectiveness, and maintaining public trust through continued transparency, accountability, and dedication to its public interest mandate.

4. MANAGEMENT REPORTS

4.1 REPORT OF THE INTERIM PRESIDENT & CEO

The Chairperson called upon Kate Lamb, Interim President & CEO to report.

Kate Lamb addressed the Board of Directors with her first report as Interim President and CEO, noting that the College was transitioning from a foundational phase into a position of strength, guided by four strategic pillars: Professional Standards and Compliance, Unauthorized Practitioners, Stakeholder Communication, and Sustainability. She highlighted a significant regulatory shift under the *College of Immigration and Citizenship Consultants Act*, with regulations expected by July 2026 and a full suite of by-laws anticipated by early 2027 in collaboration with the Department of Justice, while also acknowledging concerns about reduced flexibility as more elements move into by-laws. Operationally, she reported a 20% year-over-year increase in complaints but emphasized progress in reducing legacy cases to 10% of the caseload, alongside efforts to address a backlog of 1,115 licensees in the mandatory mentoring program through expanded cohort intake. She also underscored initiatives to combat unauthorized practice, including the launch of Fraud Prevention Month and strong engagement with the public register, as well as expanded global outreach across 16 countries and evolving media strategies.

Internally, she pointed to a comprehensive IT infrastructure review, the advancement of Diversity, Equity, Inclusion, and Accessibility initiatives through a dedicated council, and ongoing recruitment for key leadership roles to support long-term organizational sustainability.

The Directors thanked Kate Lamb for her report and further emphasized the need for clearer delineation between governance, strategic, and operational policies. The Directors requested stronger performance metrics to assess whether the organization is on track, deeper analysis of the drivers behind increased complaints, careful consideration of by-law rigidity, and continued transparency on DEI progress and mentoring program prioritization.

The Chairperson thanked Kate Lamb and the management team for their report.

4.2 PRESENTATION: FRAUD PREVENTION

The Chairperson called upon Jessica Freeman, Director, Communications and Stakeholder Relations, to present.

Jessica Freeman presented the College's 2026 people-centred outreach strategy, emphasizing a research-driven approach through interviews with individuals with lived immigration experience from the United Kingdom, Pakistan, Iran, and the United States. She reported that the findings indicated that fraud frequently exploits user confusion and system complexity, leading individuals to trust the first credible-looking source encountered online. She advised that the College is regarded as a trusted resource, with the Public Register identified as the primary tool for protection.

Jessica Freeman further noted that the campaign achieved broad reach through an eight-week initiative implemented across transit systems in nine major Canadian cities, as well as in 16 international countries. She reported that the campaign was delivered in six languages: English, French, Arabic, Farsi, Hindi, and Simplified Chinese. She also highlighted a shift in social media strategy, reporting 3.3 million views of the Public Register. This included a planned reduction in presence on X due to concerns regarding anti-immigration sentiment, with a transition toward BlueSky.

During the Board discussion, Directors emphasized the importance of maintaining fraud prevention efforts on a year-round basis. Management confirmed that this is supported through ongoing strategic advertising initiatives. Directors also raised questions regarding outreach to vulnerable groups, including international students; management advised that search-based advertising ensures timely and relevant visibility of the College's messaging. Concerns were also expressed regarding negative commentary on paid advertisements. Management clarified that such feedback originates from the broader public rather than followers and confirmed that staff actively monitor and manage these interactions at the platform level.

The Chairperson thanked Jessica Freeman for her report.

Management were excused from the meeting.

6. SUSTAINABILITY

6.1 REVIEW OF FINANCIAL RESULTS FOR PERIOD ENDED DECEMBER 31, 2025 AND ANNUAL REVIEW OF INSURANCE COVERAGE

The Chairperson called upon Tim D'Souza, Chairperson Finance and Audit Committee to report.

Tim D'Souza referred to the materials circulated in advance of the meeting and reported that the Finance and Audit Committee (FAC) reviewed the unaudited financial results for the quarter ended December 31, 2025. He reported an overall positive financial position, driven by higher-than-expected revenues, including interest income and tribunal-related receipts, alongside lower-than-budgeted expenses across most departments. He reported that notable cost efficiencies were achieved through reduced staffing, consulting, and vendor expenditures, while IT and professional conduct remained significant cost centres.

Net assets were reported as approximately $28 million, including $13.5 million in unrestricted reserves, representing roughly six months of operating capacity. Despite these strengths, he advised that management projected a year-end deficit of $600,000, exceeding the budgeted deficit due to lower program-related revenues, particularly in specialization and mentoring initiatives.

Board discussions focused on several key operational and strategic concerns. Directors were informed that the current extension for D&O and liability insurance coverage was in place until April 30, 2026, prompting discussion on the challenges of securing appropriate coverage for a regulatory body and the need to benchmark rates against comparable organizations. Directors also raised concerns regarding revenue stability, particularly in relation to licensee attrition, with members requesting more detailed data on departures to better support Compensation Fund planning. In addition, the Board engaged in a policy-oriented discussion regarding the treatment of fines, noting their unpredictability and questioning their inclusion in the budget. Lastly, Directors noted their anticipation of the forthcoming IT review, which is expected to assess opportunities to modernize systems and potentially reduce the current $5 million in IT and professional conduct expenditures.

Overall, Tim D'Souza reported that the organization expected to maintain a strong financial position while continuing to focus on cost management, revenue stabilization, and strategic planning for future fiscal periods.

The Chairperson thanked Tim D'Souza for his report.

6.2 COMPENSATION FUND

The Chairperson called upon Kate Lamb, Interim President & CEO to report.

Kate Lamb referred to the documents distributed in advance of the meeting and reported that the fund was positioned as a central element of the new regulatory framework, with management highlighting significant preparatory efforts underway. She advised that this included close collaboration with external actuaries who are providing detailed risk analyses to the Finance and Audit Committee, alignment with Immigration, Refugees and Citizenship Canada and the Department of Justice to ensure compliance with federal standards, and internal readiness initiatives such as staff training on application and referral processes.

Despite this progress, the Board identified several elevated risks, including a current regulatory gap pending full implementation, concerns regarding the fund's long-term sustainability amid potential declines in fee-paying licensees, and the need to reassess the investment strategy to ensure adequate reserve growth. The Board also addressed enforcement challenges, including the pursuit of restitution orders through federal court and the ongoing difficulty of recovering funds from non-compliant practitioners who evade accountability by relinquishing their licenses.

The Chairperson thanked Kate Lamb for her report.

6.3 RISK RESPONSE STRATEGIES REGISTER

The Chairperson called upon Kate Lamb, Interim President & CEO to report.

Kate Lamb referred to the documents circulated in advance of the meeting and reported that the College's risk register now reflects a more assertive approach to risk identification, including a 17% reduction in low-risk classifications as items were re-evaluated into higher categories and the introduction of a new "critical" tier for risks posing immediate threats to the College's operations or reputation. Key critical risks identified include the reputational impact of transitioning to new statutory authorities, heightened IT and cybersecurity vulnerabilities—particularly related to the iMIS system—and challenges in talent retention.

Board members expressed strong support for the report's enhanced detail and clarity, particularly the explicit link between each risk and its mitigation strategy. Discussion also addressed client service risks, including mitigation through channel reviews and external counsel, as well as broader strategic considerations related to enforcement. The Board requested that future reports focus only on moderate to high risks. Directors also asked about workforce stability and engagement, and Kate Lamb noted that turnover remains manageable and that a new engagement survey is planned to assess staff alignment with the College's mission.

The Chairperson thanked Kate Lamb for her report.

7. GOVERNANCE

7.1 UPDATE ON REGULATORY FRAMEWORK

The Chairperson called upon Ben Rempel, Chairperson of the Governance and Nominating Committee and Kate Lamb, Interim President & CEO to provide an update on the Regulatory Framework. Ben Rempel reported that that the regulations were expected to come into force by July 2026 following publication in the Gazette, while associated by-laws are anticipated in early 2027, with interim operations continuing under existing Council rules.

Kate Lamb reported ongoing bi-weekly engagement with the Department of Justice, which has assumed a more direct role in drafting, requiring alignment between the College's preliminary models and federal legal requirements. The Board discussed concerns regarding the shift of key elements from policy to by-law, noting potential limitations on flexibility and the need to identify high-risk areas. Directors noted that moving key elements into by-laws reduces Board flexibility and increases the administrative burden associated with change. It was further emphasized that, upon enactment of the regulations, the College will assume full statutory authority, bringing heightened expectations for governance, enforcement, and program delivery.

The Chairperson thanked Ben Rempel and Kate Lamb for their report.

7.2 PROPOSED APPOINTMENT TO TRIBUNAL COMMITTEE

The Chairperson called upon Ben Rempel, Chairperson of the Governance and Nominating Committee, to provide his report. He reported that the Governance and Nominating Committee had reviewed the shortlisted recommendation. The Board discussed the importance of these appointments in supporting the College's mandate.

The Chairperson then called for a motion to approve the appointment of the recommended candidate to the Tribunal Committee.

RESOLUTION – CARRIED:			
Moved By:	Ben Rempel	**Seconded**	Richard Dennis
BE IT RESOLVED THAT: the appointment of Lyudmila (Mila) Aberten, as a RCIC member to the Tribunal Committee for a period of not more than 5 years (as per Section 29(3) of the Act. *It has been the practice of the GNC to recommend the appointment for one-year terms given the anticipated new regulations.			
Opposed:	None	**Abstained:**	None

The Chairperson thanked Ben Rempel for his report.

8. GENERAL INFORMATION

The Chairperson announced the next meeting of the Board of Directors will be held on June 18, 2026, in Burlington, Ontario and via Zoom.

MEETING CLOSED TO THE PUBLIC (IN CAMERA SESSION)

IN-CAMERA SESSION MOTIONS

RESOLUTION – CARRIED:			
Moved By:	Ben Rempel	**Seconded**	Richard Dennis
BE IT RESOLVED THAT: the Board will now move in camera.			
Opposed:	None	**Abstained:**	None

The Board met in camera to discuss confidential governance and organizational matters. No resolutions were passed, and there was nothing to rise and report.

RESOLUTION – CARRIED:			
Moved By:	Jennifer Henry	**Seconded**	John Burke
BE IT RESOLVED THAT: The meeting move to open session.			
Opposed:	None	**Abstained:**	None

PROPOSED APPOINTMENT AND REAPPOINTMENTS TO STANDING COMMMITTEES

After a discussion of the composition of the standing committees of the Board, the Chairperson called for a motion to accept the appointments as outlined below:

RESOLUTION – CARRIED:			
Moved By:	John Burke	**Seconded**	Ben Rempel

BE IT RESOLVED THAT:

the following Directors be and are hereby appointed/reappointed as members of the following standing Committees, each to hold such position until a successor is appointed:

1. Finance and Audit Committee:
   - T. D'Souza (Chairperson)
   - J. Burke
   - R. Dennis
   - J. Henry
   - M. Spector
   - S. Belevici (Ex-Officio)

2. Governance and Nominating Committee:
   - B. Rempel (Chairperson)
   - R. Dennis (Vice-Chairperson)
   - J. Burke
   - F. Houle
   - M. Spector
   - S. Belevici (Ex-Officio)

3. Human Resources Committee:
   - S. Belevici (Chairperson)
   - T. D'Souza
   - J. Henry
   - B. Rempel
   - F. Houle

Opposed:	None	**Abstained:**	None

RESOLUTION – CARRIED:			
Moved By:	Stan Belevici	**Seconded**	Marc Spector
BE IT RESOLVED THAT: the following Directors be and are hereby appointed/reappointed as members of the following working group of the Human Resources Committee: CEO Succession Planning Working Group: S. Belevici (Chairperson) J. Burke F. Houle B. Rempel			
Opposed:	None	**Abstained:**	None

TERMINATION

RESOLUTION – CARRIED:			
Moved By:	Jennifer Henry	**Seconded**	France Houle
BE IT RESOLVED THAT: the meeting is hereby terminated at 5:25 pm ET.			
Opposed:	None	**Abstained:**	None

These minutes were approved by the Board on

Stan Belevici
Chairperson

Nithiya Paheerathan
Recording Secretary

Summary of Resolutions and Actions Discussed

Record of Resolutions

Resolution	Agenda Item	Topic	Motion
3.2	**Consent Agenda**	**RESOLVED THAT** the 9 items contained in the Consent agenda, as amended, be and are hereby approved: 1. Minutes of Meeting of September 25, 2025 2. Minutes of Meeting of November 27, 2025 3. Independent Complaints Review Officer's Report 4. Board and Committee Workplans 2026-27 a. Board of Directors Workplan b. Finance and Audit Committee Workplan c. Governance and Nominating Committee Workplan d. Human Resources Committee Workplan 5. Signing Officer Policy 6. Confirmation of Authorized Signing Officers	1
3.3	**Agenda**	**RESOLVED THAT** the Agenda for the meeting be and is hereby approved as amended.	2
7.2	**Proposed Appointment to Tribunal Committee**	**RESOLVED THAT** the appointment of Lyudmila (Mila) Aberten, as a RCIC member to the Tribunal Committee for a period of not more than 5 years (as per Section 29(3) of the Act. *It has been the practice of the GNC to recommend the appointment for one-year terms given the anticipated new regulations.	3
	Board meeting move in camera	**RESOLVED THAT** the Board meeting move in camera.	4
	In camera session be moved to the open session and the Board resume in open session	**RESOLVED THAT** 1. To close the in camera session and, 2. Move the meeting into open session.	5
		RESOLVED THAT The meeting move to open session.	6
	Proposed Appointment and Reappointments to Standing Committees	**BE IT RESOLVED THAT:** the following Directors be and are hereby appointed/reappointed as members of the following standing Committees, each to hold such position until a successor is appointed: 1. Finance and Audit Committee:	7

Resolution	Agenda Item	Topic	Motion
		T. D'Souza (Chairperson) J. Burke R. Dennis J. Henry M. Spector S. Belevici (Ex-Officio) 2. Governance and Nominating Committee: B. Rempel (Chairperson) R. Dennis (Vice-Chairperson) J. Burke F. Houle M. Spector S. Belevici (Ex-Officio) 3. Human Resources Committee: S. Belevici (Chairperson) T. D'Souza J. Henry B. Rempel F. Houle	
		BE IT RESOLVED THAT: the following Directors be and are hereby appointed/reappointed as members of the following working group of the Human Resources Committee: CEO Succession Planning Working Group: S. Belevici (Chairperson) J. Burke F. Houle B. Rempel	8
	Termination	**RESOLVED THAT** the meeting be and is hereby terminated at 5:25 PM ET.	9

Independent Complaints Review Officer's QUARTERLY REPORT for period of January 1, 2026 to March 31, 2026

May 14, 2026

Introduction

This is the Quarterly Report required by Section 5.2 of the Independent Complaints Review Officer Regulation ("ICRO Regulation"):

> 5.2 The ICRO shall report to the Council[1] every quarter of the calendar year:
>
> (a) statistics that include the number of requests for reviews received in each quarter, the number of reviews concluded in each quarter, the number of reviews still active at the end of each quarter, and the general outcomes of the concluded reviews;
>
> (b) a summary of the disposition of the reviews concluded by the ICRO in each quarter, including a summary of any matters referred to the Council, and the reasons for that referral; and
>
> (c) an assessment of the Council's handling of complaints, including any trends or concerns, and recommendations regarding improvement of those processes.

This Quarterly Report, covering the first quarter of 2026, the period from January 1, 2026 to March 31, 2026 ("Current Period"), will be presented for the Council's review at its next quarterly meeting.

As required, this Quarterly Report is divided into the following sections: General Statistics, Summary of Disposition of Reviews by ICRO, Assessment of the Handling of Complaints by the College, and Recommendations.

Mandate of the ICRO

On receiving a request for review of a complaint that was not referred to Discipline, the ICRO reviews the College's handling of the complaint to determine if there was any procedural unfairness or any errors in fact or in law. Reviews are expected to be completed within 30 days of the ICRO's receipt of the request for review.

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[1] Any references to the Council, and associated terminology, are to be read as references to the College, including the Complaints Committee.

The mandate of the ICRO is set out under section 27 of the By-law, which states in part:

> 27.2
> A complainant may only request an ICRO review by written application using the application form on the Council website. The ICRO is not required to review every matter requested and may in their discretion decide not to conduct a review or may discontinue a review already in progress.
>
> 27.3
> The ICRO may only review the fairness of the procedure used by the Council or the Complaints Committee to handle the complaint. The ICRO's review will be guided by the accepted principles in the rules and By-laws related to the Complaints and Discipline process. The ICRO cannot review the actual merits of any particular complaint.
>
> 27.4
> The ICRO will either accept that the procedures were fair or refer the complaint back to the Complaints Committee with a recommendation for further action. During the review, if the ICRO receives fresh information the ICRO considers significant, they may refer that information back to the Complaints Committee for further consideration. Where a matter is referred back to the Complaints Committee the ICRO will direct whether the matter must be considered by a different panel than that which first reviewed the complaint.

Section 4.1 of the ICRO Regulation, enacted pursuant to sections 27 and 56.7 of the By-law, sets out more detail the broad authority of the ICRO:

> 4.1 The ICRO has the power and discretion to decide how to respond to any request by a complainant to review the closing of their complaint. The ICRO may decide to do one or more of the following:
>
> (a) refuse the complainant's request for a review, because it does not raise issues that are serious enough, or because any review will likely not lead to any different outcome, or for any other reason;
>
> (b) review the closing of the complaint, by investigating the Council's handling of the complaint;
>
> (c) mediate with the complainant and the Council to try to achieve an agreement to settle the matter; or
>
> (d) stop or temporarily suspend a review at any time, and close the review without any referral or further action, or decide to refer the complaint back to the Council.

These provisions emphasize that, where the request for review is not refused or temporarily suspended, the ICRO's review of a complaint shall be based upon whether the procedures used by the College in its handling of a complaint were fair. The By-law and the ICRO Regulation provide that the ICRO cannot review the actual merits of any complaint, and that the ICRO's review will be governed by the principles in the Tribunal Committee Rules of Procedure and the By-laws related to the Complaints and Discipline process.

Although the ICRO has the power and discretion under the ICRO Regulation to also mediate with the complainant and the College, this power has not yet been used.

Finally, an important part of the role of the ICRO is to make recommendations to the College on how to improve its handling of complaints, including the fairness and transparency of its complaint procedure and process.

General Statistics

This Quarterly Report includes a chart that keeps track of the Current Period statistics, and also includes statistics from prior quarterly reports since this ICRO's appointment started.

As seen below, the fourth quarter of 2025 was even slower than the third quarter of 2025, which itself was significantly slower than the trend established by the prior five quarters.

Quarter[2]	**Requests for Review Received by ICRO**	**Reviews Concluded**	**Active Reviews (as of Mar 31, 2026)**
Current Period 1st, 2026	**6**	**3[3]**	**4**
Prior Quarterly Report Statistics			
4th, 2025	3	2	1
3rd, 2025	4	5	0
2nd, 2025	8	8	2
1st, 2025	14	9	5
4th,2024	5	11	0
3rd, 2024	9	4	7
2nd, 2024	3	2	1
1st, 2024[4]	1	3	0
4th, 2023[5]	10	10	2
3rd, 2023[6]	5	4	2
2nd, 2023[7]	2[8]	2	1
1st, 2023[9] 1st, 2023[10]	3 1	2 3	1 0
4th, 2022[11]	4	2	1

ICRO decisions are expected to be rendered within 30 days receipt of a request for review. During this Current Period, one of the three reviews was completed within the 30 days, one was delayed by the holiday break in the month of December 2025, and another one was delayed

2 The earlier reports did not cover precise quarterly periods.
3 One of these reviews were from an ICRO request from the 4th quarter, 2025.
4 This Quarterly Report covered the period from February 1, 2024 to March 31, 2024.
5 This Quarterly Report covered the period from October 1, 2023 to January 31, 2024.
6 This Quarterly Report covered the period from August 1, 2023 to September 30, 2023.
7 This Quarterly Report covered the period from April 7, 2023 to July 31, 2023.
8 This includes two requests for an extension of time, and the related decision on this request.
9 This Quarterly Report covered the period from January 21, 2023 to April 6, 2023.
10 This Quarterly Report covered the period from November 12, 2022 to January 20, 2023.
11 This initial Quarterly Report covered the period from September 29, 2022 to November 11, 2022.

General Outcome of Reviews Concluded

In conducting a review, generally the ICRO may either (i) accept that there was procedural fairness and no errors in fact or in law in the way the complaint was handled; or (ii) refer the complaint back to the College or Complaints Committee with a recommendation for further action.

This Current Period continues a trend from the 3rd quarter 2025 of a reduction in the number of requests for ICRO review, particularly when compared to the peaks in the period starting in the 3rd quarter of 2024 through to the 2nd quarter of 2025. There were four new requests for review during this Current Period, and three reviews were concluded, one of which was a request for ICRO review stemming from the 4th quarter 2025. There were four active reviews at the end of the Current Period.

In all three of the completed reviews for this Current Period, I concluded that there was procedural fairness and no errors in fact or in law in the way that the College handled the complaints. The outcomes are summarized in the next section of this Quarterly Report.

Summary of Disposition of Reviews by ICRO

The following is a summary of the disposition of the reviews conducted:

1. **College File No:** CD.2025.892774
   Review Acknowledged by ICRO: December 17, 2025
   Matter Closed by ICRO: January 23, 2026

   Disposition: The decision of the College to close the complaint with guidance to the Licensee was confirmed. There were no findings of procedural unfairness, or errors in fact or in law, in the way that the complaint was handled.

2. **College File No:** CD.2025.1092003 (French language)
   Review Acknowledged by ICRO: January 19, 2026
   Matter Closed by ICRO: February 13, 2026

   Disposition: The decision of the College to close the complaint without any further action was confirmed. There were no findings of procedural unfairness, or errors in fact or in law, in the way that the complaint was handled.

3. **College File No:** CD.2025.883527-2
   Review Acknowledged by ICRO: February 11, 2026, but confirmed March 16, 2026[12]
   Matter Closed by ICRO: March 31, 2026

   Disposition: The decision of the College to close the complaint without any further action except to provide remedial action through the Voluntary Resolution Program (VRP) was confirmed. There were no findings of procedural unfairness, or errors in fact or in law, in the way that the complaint was handled.

[12] Through inadvertence, the original email was missed.

Assessment of the Handling of Complaints by the College and Recommendations

The College has a critical role in regulating immigration and citizenship consultants in the public interest. It protects the public by (a) establishing and administering qualification standards, standards of practice and continuing education requirements for licensees; (b) ensuring compliance with the code of professional conduct; and (c) undertaking public awareness activities. As part of this mandate, the College went through significant internal reforms in 2024 and introduced others at the beginning of 2025.

Significantly, in a news release on May 6, 2026, Canada's Minister of Immigration, Refugees and Citizenship announced new regulations to enhance the oversight of immigration and citizenship consultants: https://www.canada.ca/en/immigration-refugees-citizenship/news/2026/05/canada-strengthens-regulation-of-immigration-and-citizenship-consultants.html As noted in the news release, these new regulations, effective July 15, 2026, are intended to reinforce the role of the College and help applicants obtain more reliable, transparent and accountable services throughout their immigration or citizenship process.

Against this backdrop of increased public protection measures, the ICRO continues its role of reviewing the College's handling of complaints to determine if there has been any procedural unfairness or any errors in fact or in law. In the context of this role, I have found that the College's handling of complaints has continued to generally proceed with procedural fairness.

The historical overview of general statistics since I started as ICRO shows that starting in the third quarter to the end of 2025, requests for review have considerably slowed since the busiest period over the five quarters between the 3rd quarter of 2024 through to the 2nd quarter of 2025

This Current Period, the ICRO made no recommendations to the College.

Conclusion

Complainants play a critical role in supporting the College's mandate of regulating immigration and citizenship consultants in the public interest. The College relies on them to file complaints about licensees who breach their code of professional conduct or standards of competence. Without these complaints, the College would not be aware of licensee misconduct.

However, notwithstanding the critical role that they play in supporting the College's regulatory mandate, the caselaw is clear that a complainant is not entitled to the same level of fairness as the licensee who is the subject of a complaint.[13] The extent of this regulatory duty is clearly laid out in the College's By-Law and the ICRO Regulation.

The ICRO's independent role in reviewing the College's complaints handling processes for its closure of complaints ensures the College's accountability. The ICRO's role in making recommendations also identifies for the College areas where the College can improve, including enhancing or strengthening, its complaints handling processes and procedures.

[13] *Makis v College of Physicians and Surgeons of Alberta (Complaint Review Committee)*, 2020 ABCA 451, at paragraphs 7-8, and *Toutsaint v Investigation Committee of The Saskatchewan Registered Nurses' Association*, 2023 SKCA 11, at paragraph 22.

Over the course of this ICRO's appointment, there has been less of a need to make recommendations on improving the College's complaints handling processes. It is worthy to note that the College has considered and implemented many of the ICRO's past recommendations, and that as a result, there has been a decreasing number of recommendations coming from the ICRO.

The ICRO will continue to monitor the College's complaints handling processes and provide recommendations, as needed.

Dated this May 14, 2026.

Independent Complaints Review Officer

Lai-King Hum (she/her/elle), ICRO

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BRIEFING NOTE

To:	Board of Directors
Meeting Date:	Thursday June 18, 2026
Consent Agenda Item #:	2
Subject:	Proposed Board and Committee Meeting Dates for 2027
Prepared By:	Victoria Rumble, Corporate Secretary
Presented By:	Ben Rempel, Chairperson, Governance and Nominating Committee
Action Required:	*For Discussion*

PURPOSE

The purpose of this report is to present the proposed meeting dates for the upcoming governance cycle to support effective planning and coordination.

BACKGROUND

In alignment with governance best practices and to accommodate Board member availability, meeting dates are scheduled in advance. This proactive approach ensures sufficient notice for participation and alignment with the Board's annual work plan. The report outlines the proposed regular meeting dates for the upcoming year.

ANALYSIS

The proposed dates were selected with consideration of the following factors:

- Historical scheduling patterns and frequency
- Avoidance of statutory holidays and known peak periods
- Alignment with reporting cycles and key decision-making timelines
- Consideration of availability and preferences indicated by Board members, where applicable

All meetings are proposed to be held in person or by virtual participation.

RECOMMENDATION

1. That the Board of Directors review the proposed meeting dates as outlined in the appendix.
2. That these dates be included in the official Board calendar.

POTENTIAL RISK(S)

1. Scheduling Conflicts

Risk: Despite early notice, some Directors may encounter scheduling conflicts.

Mitigation: Advance planning allows for proactive coordination and adjustment if needed.

2. Unforeseen Disruptions *Risk:* Emergencies or changes in public health guidelines or other events may require date adjustments. *Mitigation:* Flexibility is built into scheduling, and virtual participation remains an option.
RESOLUTION Not applicable - no action required
NEXT STEPS • Circulate meeting dates to all Board members
APPENDICES Proposed Meeting Dates – Board of Directors

Appendix A

Proposed Meeting Dates

BOARD OF DIRECTORS

Proposed Date	Proposed Location	Notes
Thursday, March 18, 2027 Friday, March 19, 2027	Burlington, Ontario	
Thursday, June 17, 2027 Friday, June 18, 2027	Burlington, Ontario	Operating and Capital Budget for Fiscal 2027
Thursday, September 23, 2027 Friday September 24, 2027	Burlington, Ontario	
Tuesday, October 19, 2027	On-Line	Audited Financial Statements
Thursday, December 2, 2027 Friday, December 3, 2027	TBD	Annual General Meeting of College Licensees

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RESOLUTION

To:	Board of Directors
Meeting Date:	Thursday, June 18, 2026
Consent Agenda Item:	2
Subject:	Annual General Meeting Location and Format 2026
Prepared By:	Victoria Rumble, Corporate Secretary
Presented By:	Victoria Rumble, Corporate Secretary
Action Required:	*For Approval*

PURPOSE

The Board is being asked to approve the format and general location framework for the 2026 Annual General Meeting (AGM), with management to finalize the specific venue and logistical arrangements.

BACKGROUND

Pursuant to section 11 of the College of Immigration and Citizenship Consultants Act, the College must hold an Annual General Meeting within six months of the end of each fiscal year at a time and place in Canada fixed by the Board. Accordingly, Board approval is required to establish the location and format of the 2026 Annual General Meeting.

The AGM may be delivered either as an in-person/hybrid event or a virtual-only event. While an in-person component supports traditional engagement and networking, a virtual-only event would significantly reduce costs and ensure accessibility for all licensees regardless of location.

The College has historically held AGMs in an in-person/hybrid format. Virtual-only and hybrid formats have now become common practice across comparable organizations and are widely accepted as effective governance approaches.

The proposed in-person/hybrid format would permit both in-person and virtual participation, including access to AGM materials, opportunities for questions from attendees, and voting processes in accordance with the College's procedures.

ANALYSIS

In response to the Governance and Nominating Committee's request on May 20, 2026, this revised memorandum incorporates additional research and analysis regarding governance practices associated with virtual-only AGMs, including current practices among regulatory and professional organizations and major Canadian financial institutions.

1. Location options and attendance considerations

Both Toronto and Burlington have suitable venues and hotel capacity to accommodate the expected number of attendees. Attendance levels may vary depending on proximity and travel accessibility for licensees located within major population centres.

Greater Toronto Area, Ontario

- Approximately 3 directors and 3–4 staff would require travel
- Majority of licensees are within driving distance
- Venue and catering costs remain moderately high
- Estimated attendance: 300–350 licensees

Virtual-only option

- No travel or venue costs
- Fully accessible to all licensees
- Most cost-effective option
- Limited in-person networking opportunities

2. Preliminary financial considerations - Based on projected expenses, the total anticipated costs for the AGM are:

- Greater Toronto Area (in-person/hybrid): approximately $97,800
- Virtual-only: approximately $5,500

A virtual AGM would eliminate most in-person expenses, including travel, venue rental, catering, and onsite logistics. Costs for the GTA option would be consistent with prior in-person/hybrid AGMs, including the 2025 Calgary AGM ($120,000).

Financial considerations associated with the proposed AGM format should be considered in the context of the College's projected deficit position for FY2026.

Key differences between the proposed in-person/hybrid AGM and virtual AGM options are summarized below, with detailed line-item costs provided in Appendix B.

Factor	Greater Toronto Area (In-Person/Hybrid)	Virtual -Only AGM
Estimated total cost	Approximately $97,800	Approximately $5,500
Cost difference	Baseline	Potential savings of over $90,000 versus in-person
Accessibility	Convenient for many Ontario based licensees; travel required for others	Accessible to all licensees across Canada; no travel needed
Engagement/networking	Strong in-person networking and informal engagement	Limited informal networking; engagement via online tools
Operational complexity	Higher: venue, catering, travel, onsite logistics	Lower: focus on virtual platform, AV, and moderation
Financial/attendance risk	Higher risk if in-person attendance is lower than projected	Lower financial risk; main risk is technology performance

RECOMMENDATION

Management recommends that the Board approve an in-person/hybrid format for the 2026 Annual General Meeting to be held in the Greater Toronto Area on December 3, 2026.

While a virtual AGM would provide material cost savings and increased accessibility, an in-person/hybrid format supports stronger engagement opportunities for licensees, enhances informal networking and relationship-building, and aligns with the College's commitment to meaningful engagement, transparency, and strengthened relationships with licensees and stakeholders.

POTENTIAL RISK(S)

1. Financial Considerations
   - Risk: An in-person/hybrid AGM involves significantly higher costs than a virtual-only format, including venue, travel, catering, and audiovisual expenses.
   - Mitigation: Management will seek cost-effective venue and service arrangements while balancing accessibility, engagement, and operational requirements.
2. Attendance Variability
   - Risk: Actual in-person attendance may be lower than projected, resulting in higher per-attendee costs for venue, catering, and related logistics.
   - Mitigation: Historical attendance trends will be used to inform venue selection, catering estimates, and registration planning.

3. Regional Accessibility
   • Risk: Hosting the AGM in the Greater Toronto Area may limit in-person participation for licensees located outside Ontario.
   • Mitigation: Hybrid participation options will continue to support national accessibility and virtual attendance.
4. Operational and Technology Requirements
   • Risk: Hybrid events involve increased operational coordination and audiovisual requirements to support both in-person and virtual participation.
   • Mitigation: Management will work with experienced vendors and implement appropriate testing and contingency planning in advance of the AGM.

RESOLUTION

BE IT RESOLVED THAT the Board of Directors approve an in-person/hybrid format for the 2026 Annual General Meeting to be held in the Greater Toronto Area on December 3, 2026, with the final venue location to be determined by management.

NEXT STEPS

- Confirm venue and accommodation arrangements, if applicable.
- Finalize travel and logistical requirements for Board members and staff.
- Coordinate audio-visual and virtual participation requirements.
- Prepare the AGM notice and registration materials.

APPENDICES

- Appendix A – Examples of Virtual and Hybrid Annual or Governance Meetings
- Appendix B – Detailed Cost Analysis
- Appendix C – Locations of Prior Licensee Meetings

Appendix A – Examples of Virtual and Hybrid Annual or Governance Meetings

Virtual and hybrid formats are now used by a range of regulatory and professional bodies, as well as major financial institutions, for their Annual General Meetings (or equivalent annual meetings of members) and other key governance meetings, in order to support broad, geographically dispersed participation.

- BC College of Oral Health Professionals (BCCOHP) – Holds its Annual Meeting online, allowing registrants across British Columbia to attend virtually via Zoom, with live participation and recordings available afterward, instead of a traditional in-person AGM.
- Colleges Ontario – Schedules key governance meetings, including Council of Presidents meetings, in virtual format during parts of the year, reflecting normalization of virtual governance-level meetings in the post-secondary sector and supporting province-wide participation similar in purpose to an AGM.
- National Association of Career Colleges (NACC) – Regularly delivers national member and governance-related events virtually (e.g., via Zoom), enabling participation by colleges and instructors across Canada without travel, in a format analogous to an annual members' meeting.
- Major Canadian banks and insurers – A group including BMO, CIBC, Canadian Western Bank, Laurentian Bank, National Bank, RBC, Scotiabank, TD, Great-West Lifeco, Canada Life, Manulife and Sun Life obtained court approval to conduct their annual meetings using virtual-only or hybrid formats (webcast and teleconference) and have used remote participation to allow shareholders and policyholders to attend, ask questions, and vote electronically.
- International and policy bodies – The OECD reports that regulators in multiple jurisdictions have updated legal and regulatory frameworks to allow fully virtual and hybrid general meetings, indicating that remote participation in annual and governance meetings is now an accepted practice.

These examples demonstrate that virtual and hybrid formats for AGMs and comparable annual governance meetings are widely used and increasingly standard among regulatory and professional bodies, as well as highly regulated financial institutions, to enhance accessibility, participation, and cost-effectiveness while maintaining transparency and accountability.

Appendix B – Detailed Cost Analysis

	GREATER TORONTO AREA	VIRTUAL
Venue	$ 3,600.00	$ -
Hotel	$ 9,450.00	$ -
Flights	$ 7,000.00	$ -
AV	$ 25,000.00	$ -
Food	$ 30,000.00	$ -
Interpreters	$ 5,500.00	$ 5,500.00
Swag	$ 15,000.00	$ -
Flags	$ 500.00	$ -
Badges	$ 1,500.00	$ -
Signage	$ 250.00	
Total	$ 97,800.00	$ 5,500.00

APPENDIX C – LOCATIONS OF PRIOR LICENSEE MEETINGS

Date	Province	City	Licensee Base
December 2022	Ontario	Burlington	46.4%
June 2023	Manitoba	Winnipeg	2.71%
September 2023	Alberta	Edmonton	12.9%
November 2023	Ontario	Ottawa	
March 2024	British Columbia	Victoria	25.8%
June 2024	Ontario	Mississauga	46.4%
September 2024	Nova Scotia	Halifax	0.9%
December 2024	Quebec	Montreal	8.9%
November 2025	Alberta	Calgary	12.9%
Annual General Meeting			

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BRIEFING NOTE

To:	Board of Directors
Meeting Date:	Thursday June 18, 2026
Consent Agenda Item #:	2
Subject:	2026 Annual Report Design Concept and Table of Contents
Prepared By:	Jessica Freeman, Director, Corporate & Public Affairs
Presented By:	Jessica Freeman, Director, Corporate & Public Affairs
Action Required:	*For Awareness*

PURPOSE

The Board of Directors is being provided with the design concept, theme and table of contents for the College's 2026 Annual Report.

BACKGROUND

The College must submit its Annual Report to the Minister of Immigration, Refugees and Citizenship by October 28, 2026. Work is underway and the College is on track to meet this requirement, followed by public posting on the College's website and social media channels.

ANALYSIS

The theme of the 2026 Annual Report will be "Safeguarding the Immigration Journey Through Regulatory Excellence."

To visually express this theme, the cover and interior spreads will feature stylized location-based photography from across Canada, paired with the number of RCICs and RISIAs serving in each province. This approach highlights the national presence of licensees and their role in protecting the public interest from coast to coast.

The design continues to evolve the College's brand, incorporating corporate red tones alongside a clean, modern typographic layout. Key statistics, graphs, and maps will accompany content spreads to highlight KPIs and accomplishments over the past year.
Key accomplishments will include:

- disciplinary actions taken in the public interest
- implementation of new regulations
- the 2026 fraud prevention campaign
- public awareness initiatives
- advancement of government and stakeholder relations
- updated essential competencies
- expanded education opportunities for licensees and candidates

• launch of the Diversity, Equity, Inclusion and Accessibility Council
RECOMMENDATION This item is being provided as information to the Board of Directors.
POTENTIAL RISK(S) There are no identified potential risks.
RESOLUTION No decision is required at this time.
NEXT STEPS Corporate & Public Affairs will take the following actions: • Content drafting was completed in April and May. • Project timelines, including requests for statistics, have been shared with all internal Directors. • The Governance and Nominating Committee will review a full draft of the Annual Report at its July 23, 2026 meeting.
APPENDICES • 2026 Annual Report Design Concept

Safeguarding the Immigration Journey Through Regulatory Excellence

Alberta – Home to 1,588 RCICs and 59 RISIAs

College of Immigration and Citizenship Consultants
5500 North Service Road, Suite 1002
Burlington, Ontario
L7L 6W6
Canada

2026 ANNUAL REPORT

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Immigration Fraud Can Be Hard to Spot

For this year's multilingual Fraud Prevention campaign, the College continued to build awareness of the Public Register as a tool to help safeguard the public from immigration fraud.

Revisiting last year's theme, *Immigration fraud can be hard to spot*, the College encouraged people around the world to check our Public Register to verify that they are not unknowingly falling prey to an Unauthorized Practitioner.

This is one of the best ways people can protect themselves from immigration fraud, which can have a devastating impact on prospective newcomers hoping to make Canada their home.

Digital ads ran on Facebook, Instagram and Google Search in Canada and 16 of the top source countries for immigration to Canada.

This year we expanded our presence on transit ads in Canadian cities from coast to coast, running ads in Ottawa, Montreal, Vancouver, Toronto, Calgary, Saskatoon, Winnipeg, Halifax and Saint John. These transit ads generated 160 million impressions.

The campaign earned more than 687 million impressions globally across all channels and drove 1.7 million new users to the Public Register. The College also achieved 67,300 new social media followers, driven by 65,000 new Instagram followers.

To reach potential newcomers, 60% of our campaign budget focused on international audiences. Of our total impressions, 515.5 million were international. India was the most engaged market, followed by Pakistan and Bangladesh. The social media campaign particularly resonated with younger audiences, aged 25–34.

Our Google Search campaign was the most effective channel for reaching individuals who were actively researching immigration to Canada, earning a total of 1.2 million impressions. Engagement was strongest internationally, especially in markets like Pakistan, Congo, Cameroon and Côte d'Ivoire. Total international Google Search impressions were more than 902,000.

687M

Total impressions globally.

160M

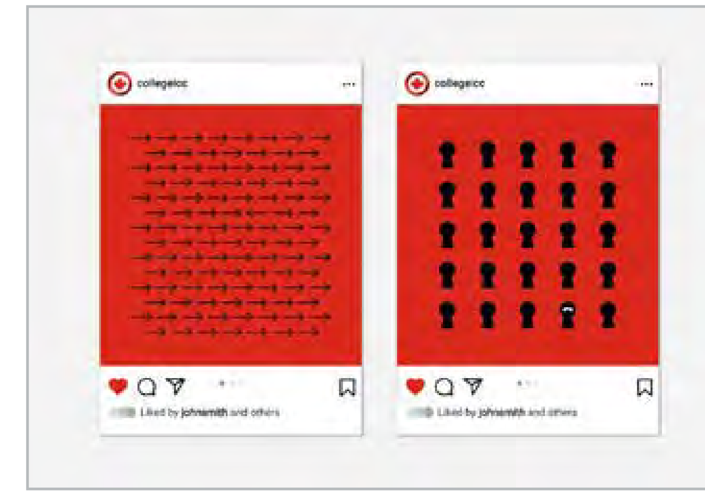
Total impressions from transit ads in Canadian cities from coast to coast.

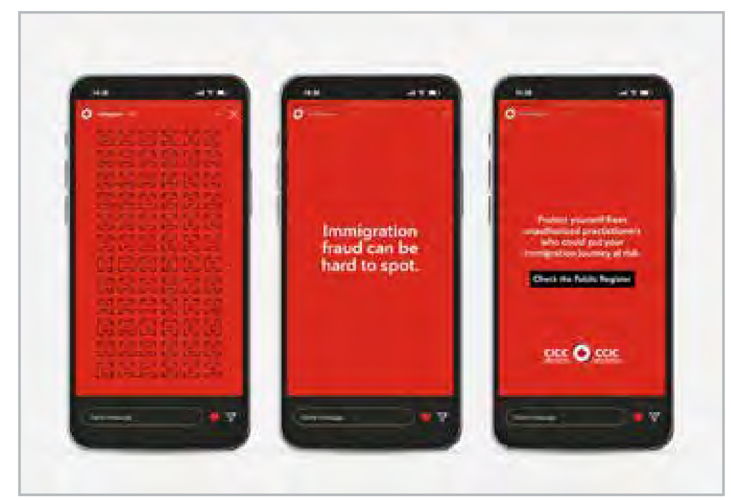
1.7M

New users to the Public Register.

6 Languages:

English, French, Hindi, Punjabi, Arabic and Simplified Chinese.





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RISK MITIGATION REGISTER

A. Summary of College Risk

The following provides a summary of the total number of risks over the past 12 months, as represented by Risk Level.

For March 31, 2026: Four risks were removed. See Appendix 2 for details.

Summary As At March 31, 2026					
Date	Total	Low	Moderate	High	Critical
3/31/25	25	68%	24%	8%	0%
6/30/25	25	64%	28%	8%	0%
9/30/25	27	59%	33%	7%	0%
12/31/25	26	42%	35%	19%	4%
3/31/26	22	41%	32%	23%	4%

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** **6 to 10 = Moderate Risk** **11 to 18 = High Risk** **19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

B. Critical and High Risks

The following summarizes the Critical and High Risks for the College as of March 31, 2026. The below also indicates status as of March 31, 2026: increasing, staying the same, or decreasing.

For March 31, 2026:

- One risk has increased, although remains in the High risk range: Complaints Process.

Risk label	Risk description	Impact	Mitigation	Rating (pre/post)	Status
New College Act Regulations and supporting governance.	• New College Act Regulations coming into force in 2026, which require By-Laws and program changes for implementation. • By-Laws not complete until 2027	• Operational challenges, including establishment of Compensation Fund, and operational requirements. • Reputational risk - Licensee confusion. • Reputational damage if compensation fund is not launched effectively.	• Early engagement with federal Department of Justice (DOJ) (November 2024); frequent communication with IRCC. • Change Management Strategy created focused on external and internal changes. • Transitional provisions of College Act allow current By-laws to continue until new By-Laws enacted/approved. • External legal support obtained to support governance strategy and by-law development. • Project Plan established with workstreams to implement changes.	**Before Management** 25 **After Management** 20	Static
IT Systems	• Underperforming IT systems – both College managed and vendor managed	• Data integrity issues impacting organizational decisions. • Poor internal and external user experience. • Increased costs – vendor and internal resources. • College ability to achieve strategic goals within established timetable is diminished. • Operational instability. • Reputational damage.	• Holistic review of IT systems underway including EMS and establishment of a road map and plan for system improvements. • Engagement with external vendor to address critical bugs/risks in EMS • RFP for new exam administrator underway and review of current system/processes.	**Before Management** 16 **After Management** 16	Static
Complaints Process Efficiency/ Effectiveness	• Incoming complaint volumes outpace College ability to meet processing timelines. • Delays in processing of complaints creates perception of increased risk to the public as licensee misconduct appears unchecked.	• Reputational damage. • Public at risk	• Early communication with licensees and complainants to establish expectations. • PC portal allows licensees and complainants to track file progress in real time. • Focus on resolving legacy complaints has substantially reduced outstanding complaint inventory. • Increased use of interim suspensions in appropriate cases.	**Before Management** 20 **After Management** 12	Increasing: Increased volume of complaints over Q1-3; resource constraints.

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk**	**6 to 10 = Moderate Risk**	**11 to 18 = High Risk**	**19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic				

Risk label	Risk description	Impact	Mitigation	Rating (pre/post)	Status
			• Monthly monitoring of PC statistics by Director and CEO. • Continuous Quality Improvement review of PC processes. • Ongoing monitoring of HR resource requirements by Director and CEO. • Law firms on block fee retainers provide flexible resources to meet increased volumes efficiently.		
Compensation Fund	• Proposed Compensation Fund is unable to process or fund all claim requests (post-launch in F2026 and thereafter).	• Potential volumes and financial impact are unknown. • Increased Judicial Review Applications. • Increased legal resource requirements. • Reputational damage. • Increased resources required to implement Compensation Fund – operations, communications and financial.	• Actuarial support engaged to overcome lack of historical claims experience and provide advice on anticipated funding requirements. • College Regulations include eligibility criteria. • Pre/post launch communication strategy to advise licensees of ultimate funding responsibilities. • Pre/post launch communications strategy to manage claimant expectations. • Compensation fund processes and training resources being developed.	**Before Management** 20 **After Management** 12	Static
Cyber-security	• Cyber-Security and data breach. • IT data loss.	• Disclosure of personal data. • Shutdown of operating systems. • Financial losses due to fraud. • Legal and Financial liability. • Reputational damage.	• Cyber-security insurance coverage maintained. • Development of comprehensive cybersecurity strategy. • Implementation of multi factor authentication, strengthened password protocols, and introduction of mandatory staff training and phishing tests. • Board education on cybersecurity risks. • Regular review and updating of virus and malware protection. • Use of cloud-based storage providers, subject to periodic assessment to ensure appropriate cybersecurity controls, data protection standards, and system safeguards are maintained.	**Before Management** 25 **After Management** 12	Static
Negative Media Coverage of Licensee(s)	• Media reports of about the College and/or licensee(s) engaged in illegal/criminal activity.	• Negative media causes reputational damage to the College and the profession.	• Enhance College pro-active media strategy to provide timely, transparent, and accurate communication that reinforces public trust and highlights the College's regulatory role. • Provide high-level information about standard regulatory processes and issue general public condemnation of alleged misconduct to promote transparency and uphold public trust. • LT has completed a crisis communications plan that included a real-time tabletop crisis simulation.	**Before Management** 16 **After Management** 12	Static

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** 6 to 10 = Moderate Risk 11 to 18 = High Risk 19 to 25 = Critical Risk
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

APPENDIX

C. Appendix: Full list of Risks and Ratings

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
Professional Standards and Compliance	• New College Act Regulations and supporting governance.	• New College Act Regulations coming into force in 2026, which require By-Laws and program changes for implementation. • By-Laws not complete until 2027	• Operational challenges, including establishment of Compensation Fund, and operational requirements. • Reputational risk - Licensee confusion. • Reputational damage if compensation fund is not launched effectively.	• Early engagement with federal Department of Justice (DOJ) (November 2024); frequent communication with IRCC. • Change Management Strategy created focused on external and internal changes. • Transitional provisions of College Act allow current By-laws to continue until new By-Laws enacted/approved. • External legal support obtained to support governance strategy and by-law development. • Project Plan established with workstreams to implement changes.	**Before Management**		
					5	5	25
					After Management		
					4	5	20
					Strategy: Reduce		
Sustainability	• IT Systems -	• Underperforming IT systems.	• Data integrity issues impacting organizational decisions. • Poor internal and external user experience. • Increased costs – vendor and internal resources. • College ability to achieve strategic goals within established timetable is diminished. • Operational instability. • Reputational damage.	• Holistic review of IT systems underway including EMS and establishment of a road map and plan for system improvements. • Engagement with external vendor to address critical bugs/risks for EMS • RFP for new exam administrator underway and review of current system/processes.	**Before Management**		
					4	4	16
					After Management		
					4	4	16
					Strategy: Reduce		
Professional Standards & Compliance	• Complaints Process Efficiency and Effectiveness	• Incoming complaint volumes outpace College ability to meet processing timelines. • Delays in processing of complaints creates perception of increased risk to the public as licensee misconduct appears unchecked.	• Reputational damage. • Public at risk.	• Early communication with licensees and complainants to establish expectations. • PC portal allows licensees and complainants to track file progress in real time. • Focus on resolving legacy complaints has substantially reduced outstanding complaint inventory. • Increased use of interim suspensions in appropriate cases. • Monthly monitoring of PC statistics by Director and CEO.	**Before Management**		
					5	4	20
					After Management		
					4	4	16
					Strategy: Reduce		

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** **6 to 10 = Moderate Risk** **11 to 18 = High Risk** **19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
				• Continuous Quality Improvement review of PC processes. • Ongoing monitoring of HR resource requirements by Director and CEO. • Law firms on block fee retainers provide flexible resources to meet increased volumes efficiently.			
Professional Standards and Compliance	• Compensation Fund	• Proposed Compensation Fund is unable to process or fund all claim requests (post-launch in F2026 and thereafter).	• Potential volumes and financial impact are unknown. • Increased Judicial Review Applications. • Increased legal resource requirements. • Reputational damage. • Increased resources required to implement Compensation Fund – operations, communications and financial.	• Actuarial support engaged to overcome lack of historical claims experience and provide advice on anticipated funding requirements. • College Regulations include eligibility criteria. • Pre/post launch communication strategy to advise licensees of ultimate funding responsibilities. • Pre/post launch communications strategy to manage claimant expectations. • Compensation fund processes and training resources are being developed.	**Before Management** 4 **After Management** 3 **Strategy: Reduce**	 5 4	 20 12
Sustainability	• Cyber-security	• Cyber-Security and data breach. • IT data loss.	• Disclosure of personal data. • Shutdown of operating systems. • Financial losses due to fraud. • Legal and Financial liability. • Reputational damage.	• Cyber-security insurance coverage maintained. • Development of comprehensive cybersecurity strategy. • Implementation of multi factor authentication, strengthened password protocols, and introduction of mandatory staff training and phishing tests. • Board education on cybersecurity risks. • Regular review and updating of virus and malware protection. • Use of cloud-based storage providers, subject to periodic assessment to ensure appropriate cybersecurity controls, data protection standards, and system safeguards are maintained.	**Before Management** 5 **After Management** 3 **Strategy: Reduce**	 5 4	 25 12
Stakeholder Communication	• Negative Media Coverage of Licensee(s)	• Media reports of about the College and/or licensee(s) engaged in illegal/criminal activity.	• Negative media causes reputational damage to the College and the profession.	• Enhance College pro-active media strategy to provide timely, transparent, and accurate communication that reinforces public trust and highlights the College's regulatory role. • Provide high-level information about standard regulatory processes and issue general public condemnation of alleged misconduct to promote transparency and uphold public trust. • LT has completed a crisis communications plan that included a real-time tabletop crisis simulation.	**Before Management** 4 **After Management** 4 **Strategy: Reduce**	 4 3	 16 12

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	1 to 5 = Low Risk 6 to 10 = Moderate Risk 11 to 18 = High Risk 19 to 25 = Critical Risk
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
Unauthorized Practitioners (UAPs)	• Unauthorized Practitioners	• Public harm caused by unauthorized practitioners (UAPs) may lead to reputational damage and erode public trust in the profession. • Media coverage of UAP activity often fails to differentiate among licensees and UAPs.	• Reputational damage.	• Continue "cease and desist"/ injunction proceedings against domestic UAPs. • Continue maintaining and expanding College-led UAP disruption efforts, including website/social media monitoring and the roll-out of disruption techniques to domestic and international partners. • Continue international and domestic public awareness campaigns. • Continue efforts to license UAPs who meet College standards. • Enhance College pro-active media strategy. • Continue promptly evaluating and addressing media inquiries to ensure the College has opportunity to provide accurate information. • Communicate the College's condemnation of UAP activity, reinforce its regulatory role, warn of UAP-associated risks, and emphasize the importance of seeking services from licensees.	**Before Management** 5 **After Management** 5 **Strategy: Acceptance**	5 2	25 10
Sustainability	• Political	• Major change in immigration policy.	• Sharp decline in Active/prospective licensees if policy change reduces market for licensees resulting in decrease of College revenues. • College inability to meet surge in active licensees if policy change rapidly increases licensee applications. • College ability to achieve strategic goals within established timetable is diminished.	• Monthly monitoring of licensee data including applications and GDP enrolments. • Robust annual budget process leading to Board approval. • Detailed quarterly financial reporting/review by Finance and Audit Committee and Board of Directors. • FAC workplan includes establishment of operating reserves and revision of investment policy. • Substantial surplus maintained to support planned initiatives and future operations.	**Before Management** 3 **After Management** 3 **Strategy: Acceptance**	4 3	12 9
Sustainability	• People	• College loses capacity to attract and retain required, specialized talent.	• College ability to achieve strategic goals within established timetable is diminished. • Reputational risk.	• HR Audit completed and implementation plan on recommendations developed. • College Compensation philosophy established, approved by Board, and implemented/maintained. • Periodic benchmarking of College benefits program against industry standards/ regulators. • College Public Awareness and stakeholder relations	**Before Management** 3 **After Management** 3	4 3	12 9

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** **6 to 10 = Moderate Risk** **11 to 18 = High Risk** **19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
				activities raise College profile within the domestic and international regulatory community. • Great Place To Work and Diversity, Equity and Inclusion strategy launched.	**Strategy: Eliminate**		
Strategic	• Regulatory Purpose	• Failure to fulfill regulatory purpose due to strategic plan misalignment.	• Reputational damage. • Loss of public trust. • Potential Government Intervention.	• Robust strategic planning with active Board and Leadership collaboration. • Relevant ongoing performance monitoring. • Alignment of Strategic goals with regulatory obligations	**Before Management**		
					5	5	25
					After Management		
					2	4	8
					Strategy: Acceptance		
Sustainability	• Legal/ Regulatory/ Compliance	• College fails to comply with applicable and evolving legislative, regulatory and employment obligations.	• Monetary penalties. • Reputational damage. • Legal risk.	• Review of compliance statutory obligations underway with external counsel. • Ongoing/policy/legislation review and timely amendments to policies and processes. • Participation in Treasury Board Secretariat informational meetings. • Employment agreements outlining compliance	**Before Management**		
					4	4	16
					After Management		
					2	4	8
					Strategy: Reduce		
Sustainability	• Leadership & Key Staff Succession	• Risk of loss of key executives (non-CEO) or staff without adequate succession planning. • Loss of institutional knowledge and operational disruption.	• Operational delays. • Reputational damage. • Loss of institutional knowledge and operational disruption.	• Maintain succession plans for all key roles. • Cross-training and knowledge transfer. • Retention strategies and interim coverage plans.	**Before Management**		
					3	4	12
					After Management		
					3	2	6
					Strategy: Reduce		
Stakeholder Communication	• Client Service Standards	• Delayed responses to public or licensee requests.	• Reputational damage. • Licensee disengagement and non-compliance	• Incoming licensee communications and responses tracked and reviewed monthly. • Establishment of a Channel Strategy and service level standards for each licensee and public facing department. • CSR engagement in design/delivery of all licensee compliance communications. • "Live" online and telephone helplines established for compliance periods (i.e., Annual Renewal).	**Before Management**		
					3	4	12
					After Management		
					2	3	6
					Strategy: Reduced		

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** **6 to 10 = Moderate Risk** **11 to 18 = High Risk** **19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
Sustainability	• Internal Financial Controls	• Inadequate internal financial controls, including procurement, expense management, accounts payable & receivable and banking authorizations.	• Financial loss, fraud, legal and reputational risks or mismanagement.	• Review of internal financial controls by Management with report to FAC. • Regular review by Finance and Audit Committee of authorized signatories list and banking arrangements. • Multiple authorized signatories for significant transactions.	**Before Management** 5 **After Management** 2 **Strategy: Reduced**	 4 2	 20 4
Sustainability	• Risk Management	• Unexpected/uninsured liabilities.	• College unable to meet its financial obligations. • Reputational damage.	• Insurance requirements reviewed annually with best practices focus. • Insurance policies reviewed annually against all risks and updated as necessary. • Restricted funds allocation(s) reviewed annually by FAC and approved by the Board.	**Before Management** 3 **After Management** 2 **Strategy: Eliminate**	 5 2	 15 4
People	• Group Retirement Savings Plan	• College Group RRSP fails to comply with legal, tax, or fiduciary obligations.	• Financial penalties resulting from failure to comply. • Loss of skilled employees. • Reputational damage.	• Group RRSP provided by 3rd party provider. • College provides ongoing employee communication and support to address concerns or questions. • Continuous monitoring of payroll deductions.	**Before Management** 4 **After Management** 2 **Strategy: Transfer**	 4 2	 16 4
Sustainability	• Financial Performance	• Financial resources insufficient to meet ongoing/future requirements. • Decrease in revenue increase in expenses.	• College unable to meet its financial obligations. • College ability to achieve strategic goals within established timetable is diminished. • Operational instability. • Reputational damage.	• Robust annual budget process leading to Board approval. • Detailed quarterly financial reporting/review by Finance and Audit Committee and Board of Directors. • FAC workplan includes establishment of operating reserves and revision of investment policy. • Substantial surplus maintained to support planned initiatives. • Periodic FAC review of restricted funds allocation. • The College ensures financial stability through rigorous budgeting, regular financial reporting, strategic reserve planning, and ongoing review of fund allocations.	**Before Management** 3 **After Management** 1 **Strategy: Eliminate**	 4 4	 12 4

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk 6 to 10 = Moderate Risk 11 to 18 = High Risk 19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
Sustainability	• Pandemic/Natural Disaster	• Unforeseen business disruption. • Public Health Crisis or natural disaster causes widespread business disruption.	• College ability to achieve strategic goals within established timetable is diminished. • College staff are at risk. • Face-to-face meetings/travel limited. • Operational instability. • Reputational damage.	• Continuity Plan in place. • All College staff work remotely. • Remote work policy in place • Emergency protocols developed and regularly reviewed.	**Before Management** 4 **After Management** 3 **Strategy: Acceptance**	 4 1	 16 3
Sustainability	• CEO Succession	• Unplanned departure of CEO.	• Diminished organizational stability. • College ability to achieve strategic goals within established timetable is diminished. • Internal uncertainty could affect staff retention and morale.	• CEO succession plan reviewed regularly by Human Resources Committee. • HRC review of CEO's succession plan for leadership completed.	**Before Management** 2 **After Management** 1 **Strategy: Eliminate**	 5 3	 10 3
Professional Standards and Compliance	• Mentoring Program Compliance /Capacity	• Licensee non-compliance /failure to complete program requirements. • Volume of licensees exceeds the College's enrollment capacity.	• Licensee suspensions for non-compliance or College waiver of completion deadline. • Licensee dis-engagement or non-compliance. • Reputational damage.	• Targeted licensee communications to inform licensees of their obligations and program requirements. • PLAR to support throughput and compliance. • Licensee communications to increase awareness of mandatory requirements. • Timely follow-up with non-compliant licensees. • Undertakings developed for non-compliant licensees. • Implementation of financial incentive for Mentor recruitment.	**Before Management** 4 **After Management** 1 **Strategy: Reduced**	 4 2	 16 2
Sustainability	• Director Liability	• Individuals unwilling to serve as Directors due to perceived personal liability.	• Governance failure.	• College Act amendments increased immunity for Directors and other participants. • Directors & Officers (D&O) liability insurance reviewed and renewed annually. • D & O restricted fund reviewed and renewed annually. • Director compensation benchmarked periodically against similar organizations. • Public awareness/stakeholder engagement activities increase College awareness and reputation.	**Before Management** 4 **After Management** 1 **Strategy: Eliminate**	 4 2	 16 2
Strategic	• Conflict of Interest	Board members not disclosing perceived/real Conflict of Interest.	• Board members' objectivity compromised by real or perceived conflicts of interest.	• Conflict of Interest policy for Board members, Officers, and Committee members in place. • Board development of Conflict-of-Interest By-law ongoing.	**Before Management** 4	 3	 12

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	1 to 5 = Low Risk 6 to 10 = Moderate Risk 11 to 18 = High Risk 19 to 25 = Critical Risk
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

Risk category	Risk label	Risk Description	Impact	Mitigation Plan	Inherent Likelihood (1-5)	Inherent Severity (1-5)	Inherent Risk Rating
			• Public confidence is undermined. • Reputational damage.	• Standing Board and Committee agenda item re declaration of Conflict of interest • Periodic Board governance training. • Development of annual Conflict of Interest attestation.	**After Management**		
					1	2	2
					Strategy: Eliminate		

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** **6 to 10 = Moderate Risk** **11 to 18 = High Risk** **19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

APPENDIX 2

D. Appendix 2: Risks removed

Risk category	Risk Label	Risk Description	
Professional Standards and Compliance	• Mentoring Program	• Judicial Review (JR) application by licensee in progress.	• Issue as opposed to Risk • Case resolved in College's favour
Governance/Oversight	• Policy Governance Framework	• Absence of a complete, up-to-date policy inventory and consistent review process limits effective oversight of overall policy framework.	• Sub risk or issue of Governance
Sustainability	• Records Management	• Non-Compliance with *Library and Archives Canada Act.*	• sub risk or issue of Compliance
Sustainability	• Postal Interruption	• Minimal impact on the College	• No longer relevant

Likelihood	1 - Remote	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost Certain	**1 to 5 = Low Risk** **6 to 10 = Moderate Risk** **11 to 18 = High Risk** **19 to 25 = Critical Risk**
Severity	1 - Minor	2 - Moderate	3 - Significant	4 - Major	5 - Catastrophic	

DEPARTMENT REPORT

To:	Board of Directors
Meeting Date:	Thursday June 18, 2026
Agenda Item #:	5
Subject:	Report of Professional Standards, Research, Education & Policy (PREP) Department
Key Contact:	Beata Pawlowska, Director, PREP
Action Required:	*For information only*

Executive Summary

During the reporting period, the PREP Department continued advancing the College's public protection mandate through regulatory intelligence, competency-based education, examination development and validation, continuous competence programming, and policy development initiatives.

Key priorities included completion of the 2026 Public Protection Benchmark Study, RCIC population forecasting analysis, ongoing modernization of continuous competence programs, support for the By-Law drafting process, and continued development of evidence-based regulatory and operational planning tools.

Department initiatives undertaken during the reporting period directly supported Strategic Plan priorities related to Professional Standards & Compliance, Unauthorized Practitioner awareness, public protection, research and policy development, and organizational sustainability.

KEY HIGHLIGHTS

Regulatory Intelligence, Assessment and Evaluation

- **Professional Competence and Public Protection: Evidence from the 2026 Benchmark Study:** The College completed its second benchmark study drawing on responses from more than 20,000 participants across Canada. Compared to 2023, a greater proportion of respondents reported seeking services from RCICs and RISIAs (up by 10%). Those who engaged UAPs reported negative outcomes (e.g. misinformation and financial loss). Importantly, the services most highly valued by the public align directly with the College's competency frameworks providing evidence that the standards established by the College translate into high-quality professional service experienced and valued by the public.
- **Three- and Five-Year Population Forecasts:** The College completed two RCIC population forecasting studies: a three-year forecast and a five-year forecast, each modeling licensee population growth under four distinct scenarios. Together, the studies provide the College with a comprehensive, evidence-based view of the

profession's longitudinal trajectory. Beyond forecasting population trends, they identify key risks, opportunities, and mitigation strategies to support long-term regulatory strategy, resource planning, operational readiness, and evidence-informed decision-making.

- **PME Participation Analysis:** The analysis of PME participation patterns provides an evidence-based view of how licensees progress through mandatory PME requirements during their first year of practice. The findings establish baseline completion and participation trends, strengthen the College's understanding of early-career competence development, and support forecasting, compliance monitoring, and operational planning for F27.

Licensing Examination and Validation

- The research staff facilitated **47 sessions** with licensee participation to support the development and validation of College's Entry-to-Practice exam and Specialization Exam content.

Item Bank Total # of Items per Exam				
	Approved	**Pending Review**	**Removed**	**TOTAL**
SPE	**1563**	**447**	**397**	**2407**
RCIC-EPE	**1501**	**194**	**487**	**2182**
RISIA-EPE	**600**	**124**	**294**	**1018**
				5607

Continuous Competence Programs

- **Specialization Program:** As of May 30, 2026, the program has graduated 2,182 licensees, with 209 participants currently enrolled. While Enrollment is lower in the current fiscal year; licensee satisfaction continues to exceed 94%, reflecting achievement of program objectives and intended learning outcomes.
- **Mentoring Program:** The College successfully completed Intake 4 of the Mentoring Program in March 2026, supporting 395 mentees and 70 mentors, including regular mentor support sessions. Intake 5 launched on April 20, 2026, following the completion of mentee enrolment and mentor onboarding, with 419 mentees and 71 mentors actively participating in the program, continuing the College's efforts to support licensee competence verification and mitigate early-practice risks.
- **Practice Management Education Program:** Between January 1 and May 30, 2026, the College delivered 152 English and 45 French PME sessions, filling 1,997 licensee seats. Satisfaction rates continued to exceed 90% across all PME courses, reflecting the program's effectiveness in supporting licensee competence and professional practice.
- **Continuing Professional Development Program:** Between January 1 and May 30, 2026, the College processed 373 provider activities, approving 274, and 127 individual licensee activities, approving 33. As of May 30, 2026, fiscal year-to-date, application volumes reached 721 provider applications and 315 individual licensee applications. The College currently accredits 65 CPD providers, including 54 English, 6 French, and 5 bilingual providers.

Policy

- Development of the College's By-Laws progressed through seven drafting sessions with the Department of Justice (DOJ) and College staff. To inform the drafting process, College staff also participated in a series of focus groups to identify regulatory, operational, and policy considerations for discussion during drafting sessions with DOJ. The By-Law drafting process will continue following a scheduled summer recess from June 22 to August 10, 2026.

CURRENT PROJECTS AND INITIATIVES

Regulatory Transition and Governance
- By-laws Drafting and Transition Project

Continuous Competence Programs
- PME Program Revision
- Mentoring Program Backlog Reduction
- Quality Improvement Across All Competency-Based Programs (Operational and Curricular CQI)

Accreditation and CPD Quality Assurance
- Modernization of the CPD Accreditation Framework

Research, Evaluation and Regulatory Intelligence
- Ongoing Regulatory Intelligence and Impact Analysis

CHALLENGES AND OPPORTUNITIES

- Ongoing growth in program participation, increasing regulatory complexity, and modernization initiatives will require continued evaluation of operational capacity, technology supports, and resource requirements.

RECOGNITION AND MILESTONES

- The completion of the 2026 Second Benchmark Study represents a significant milestone for the Research Team and the College's academic and sector partners. The study found that the services most valued by the public align with the competency frameworks established by the College, providing evidence that the College's regulatory framework translates directly into licensee services that protect and serve the public interest.

- The completion of the College's first three- and five-year RCIC population forecasting studies represents a significant milestone in regulatory intelligence. Over an eight-week period, the Research Team developed a longitudinal dataset spanning the College's licensing history, generating evidence to support strategic planning, risk identification, and evidence-based decision-making.

- Despite limited resources and aging systems, which introduce significant risks, College programs continue to support a volume of licensees that exceeds the annual output of many post-secondary programs while maintaining participant satisfaction rates exceeding 90%. This reflects the dedication, expertise, and sustained efforts of staff responsible for delivering the College's continuous competence programs.

- The By-Law Drafting and Transition Project remains one of the most significant initiatives currently underway at the College. Its progress reflects the substantial contributions of staff across multiple departments supporting the development of the College's future regulatory framework.

RECOMMENDATIONS

No recommendations at this time.

DEPARTMENT REPORT

To:	Board of Directors
Meeting Date:	Thursday, June 18, 2026
Agenda Item #:	5
Subject:	Report of Registration Department
Key Contact:	Cathy Pappas, Director, Registration
Action Required:	*For information only*

Executive Summary

During the third quarter of FY2026, the Registration Department supported the College's public protection mandate through licensing administration, entry-to-practice oversight, compliance enforcement, and Public Register modernization. Activity levels across licensing, re-licensing, enforcement, and entry-to-practice remained consistent with prior quarters, ensuring stable regulatory operations.

Key priorities this quarter included preparation for annual renewal, Public Register modernization, CPD compliance oversight, and strengthened unauthorized practice detection. These activities directly support Strategic Plan priorities related to Professional Standards & Compliance, Stakeholder Communication, Unauthorized Practitioner Awareness, and organizational sustainability.

Departmental results this quarter indicate stable licensing volumes, continued enforcement activity aligned with prior trends, strong CPD audit compliance, and improved capacity to identify unauthorized practice.

KEY HIGHLIGHTS

Licensing and re-licensing activity for the quarter is summarized below in the chart showing new licensees for the quarter:

	RCIC	**RISIA**	**Re-licensed**	Count
Jan	77	5		82
Feb	23		1	24
Mar	52	1	5	58
Q.3	**152**	**6**	6	**164**

Licensing volumes remained stable and throughout the reporting period with no significant fluctuations impacting operational capacity or licensing service delivery.

Licensee Report for the first three quarters (from July 2025 to April 2026):

Month	Total Licensees	% growth month-over-month	% growth in current FY
July	12681	0.58%	0.58%
August	12601	-0.63%	-0.06%
September	12590	-0.09%	-0.14%
October	12449	-1.12%	-1.26%
November	12451	0.02%	-1.25%
December	12449	-0.02%	-1.26%
January	12469	0.16%	-1.10%
February	12474	0.04%	-1.06%
March	12496	0.18%	-0.89%
April	12498	0.02%	-0.87%

In addition, the licensing team completed mentor vetting for 287 licensees within two weeks for Intake 5 of the New Licensee Mentoring Program supporting quality assurance and professional standards objectives.

Enforcement action from the professional complaint team for the quarter is summarized below:

- 248 license suspensions, with the majority being for non-payment of quarterly licensing fees
- 46 license revocations

Enforcement activity levels remained generally consistent with previous quarters and reflect ongoing regulatory oversight, compliance monitoring, and enforcement of licensing requirements.

Suspension and revocation numbers are also consistent with previous quarters.

Entry to practice activity for the quarter is summarized below:

- 233 RCIC writers for the January 2026 Entry to Practice exam
- 37 RISIA writers for the February 2026 Entry to Practice exam

Entry-to-practice activities continued to support timely access to the profession while maintaining established licensing and examination standards.

The CPD audit was completed at the end of the quarter. 200 licensees were selected for review. The majority met the requirements of the audit with some enforcement action resulting in licenses who were non-compliant.

The audit program supports ongoing professional competence, regulatory accountability, and public protection objectives.

Overall licensee volumes remained relatively stable during the reporting period, with modest month-over-month fluctuations consistent with normal licensing and renewal cycles.

CURRENT PROJECTS AND INITIATIVES

- Project Plan finalized to modernize and enhance the College Public Register to improve accuracy, transparency, usability, legal compliance, and operational efficiency. The modernization initiative will also support implementation of new regulatory requirements related to licensee information, licence history, and discipline history and public protection.
- The team continues to proactively reach out to licensees for follow up on missing information on the Public Register
- Testing continues for Annual Renewal 2026-27 which opens in next quarter on June 1, 2026, including the introduction of a more streamlined method for licensees to update their current address and work details

CHALLENGES AND OPPORTUNITIES

- **Unauthorized Practice Identification:**

  Enhanced checks of employment and agent applications also strengthened the team's ability to identify potential unauthorized practice matters. As a result, **3 unauthorized practice cases** were identified and referred for investigation during the quarter.

  These enhanced verification measures continue to strengthen the College's proactive regulatory oversight and public protection efforts.

RECOGNITION AND MILESTONES

- Email response times continue to meet the standard of a 48-hour response
- In January 2026 the team presented to 217 students of the graduating cohort of the Graduate Diploma in Immigration and Citizenship Law at Queen's University on how to apply for the entry-to-practice exam and application for licensing
- We collaborated with both Queen's University and the University of Montreal to restructure the dates for the entry-to-practice exams for RCICs to better align with their graduating cohorts
- In April 2026 we published a Request for Proposal (RFP) to replace our current exam host and online proctoring service

RECOMMENDATIONS

No Board decisions are requested at this time

CICC CCIC
College of Immigration and Citizenship Consultants
Collège des consultants en immigration et en citoyenneté

DEPARTMENT REPORT

To:	Board of Directors
Meeting Date:	Thursday June 18, 2026
Agenda Item #:	5
Subject:	Report of Professional Conduct Department
Key Contact:	Laura Halbert, Director, Professional Conduct
Action Required:	*For information only*

EXECUTIVE SUMMARY

During the reporting period, the Professional Conduct Department advanced the College's public protection mandate through risk-based complaint management, unauthorized practitioner disruption, regulatory modernization, and implementation planning for the new Regulations and Compensation Fund.

Operational trends reflected increasing complaint volumes. Despite this pressure, the department continued to reduce legacy complaint inventory, maintain procedural fairness standards, and prioritize higher-risk matters using right-touch regulation principles. Activities undertaken this period supported Strategic Plan priorities related to Professional Standards & Compliance, Complaints Process Efficiency and Effectiveness, Unauthorized Practitioner Enforcement, and public protection.

KEY HIGHLIGHTS

- PC staff continue to use right touch regulation principles and focus on those licensees with highest risk profile based on nature of complaints and/or volume. 1% of our licensees are responsible for 54% of open complaints vs 64% and 68% in past two FYs
- 93% reduction in legacy complaints (those inherited by the College from predecessor org) (1647 to 118)
- ~ 20% increase in new complaints year over year is impacting ability to reduce overall inventory levels.
- Unauthorized practitioners' disruption activities including social media takedowns and cease and desist letters are outpacing last FY totals.
- No findings of procedural unfairness or errors in fact/law by the Independent Complaint Review Officer (ICRO)

CURRENT PROJECTS AND INITIATIVE

- PC subject matter experts are leading the Compensation Fund claims process development and revisions to complaint handling processes related to new regulations.

• PC managers and legal team are participating in DOJ by-law revision drafting instruction meetings relying on their knowledge of regulatory best practices, legislative authorities, efficiencies and new regulatory tools in new regulation.
CHALLENGES AND OPPORTUNITIES • Complaint volumes increase ~20% year over year. • New regulations will create additional workload pressure not only in anticipated volume (CF related expectations) but with fettered discretion to close certain matters when public interest has already been served. • Discipline Committee briefing on new regulations and Compensation Fund was an opportunity to discuss, with experienced adjudicators, areas of concern and mitigation strategies. • Meeting with ICRO is planned for later in June regarding same as we anticipate an increase in review requests for those cases not referred to the committees or CF process. • The criteria for CF claims are a challenge to communicate concisely to complainants and are crucial for managing expectations. We relied on several team members with complaint handling experience to review our FAQs and website content in coordination with C&PA.
RECOGNITION AND MILESTONES • PC team members from all disciplines are engaged during this transition period with new regulation preparation and by-law drafting instructions, not just for those matters PC facing, but College wide. These time-consuming initiatives have been taken on by staff in additional to regular responsibilities. • CF project engagement across the College has been robust.
RECOMMENDATIONS • Minimize net new projects/initiatives during this period of transition and leadership void.

DEPARTMENT REPORT

To:	Board of Directors
Meeting Date:	Thursday June 18, 2026
Agenda Item #:	5
Subject:	Report of Corporate & Public Affairs Department
Key Contact:	Jessica Freeman, Director, Corporate & Public Affairs
Action Required:	*For information only*

Executive Summary

Corporate & Public Affairs made significant progress during the first half of 2026 across fraud prevention outreach, stakeholder engagement, media relations, and regulatory communications. The department's primary operational focus remained advancing public protection objectives, supporting implementation of the new Regulations, and strengthening public awareness of the College's regulatory role.

Departmental initiatives undertaken during the reporting period directly supported the College's Strategic Plan objectives related to Stakeholder Communication, combatting Unauthorized Practitioners via awareness, organizational sustainability, and public protection. The FY2026 Fraud Prevention campaign exceeded all established KPIs and materially outperformed the prior year in impressions, Public Register usage, and audience engagement.

Media & Issues: The College received **17 media inquiries (3 FR and 14 EN)** since January 1, 2026 and responded to 100 percent within established service standards. All deadlines were met, resulting in **5 major stories:** Globe & Mail, CBC, and OMNI News. Most notably, OMNI News Filipino featured an on-camera interview with Jessica Freeman who spoke about the College's Fraud Prevention Month campaign. In addition to direct inquiries, the College was referenced in 25 media mentions related to the new Regulations, indicating continued external interest and heightened stakeholder attention during implementation.

Management continues to monitor inquiry trends, reputational risk, and issue escalation patterns to assess communications pressures and ensure sufficient organizational response capacity during the Regulations implementation period.

Government & Stakeholder Relations: Key stakeholder relationships continued to be established and strengthened over the past five months. Engagements have included provincial governments such as Saskatchewan (ISA) and Alberta (Bill 26), IRCC policy and communications staff, and two meetings with IRCC's new Deputy Minister.

We also participated in two joint presentations with IRCC and the High Commission of Canada to Nigeria to reinforce awareness of the College's and mandate and public protection role internationally.

In addition, our sponsorship of NCIC this year provided an important opportunity for staff to engage directly with licensees and stakeholders through an on-site booth. Podium presentation to conference delegates on the College's Fraud Prevention work emphasized its importance as a core public protection measure and a key component in maintaining trust in the immigration consulting profession.

Stakeholder engagement activity continues to support enterprise objectives related to government relations, sector visibility, regulatory transparency, and stakeholder confidence.

Channel Strategy Update: The implementation of the Stakeholder Experience function also supports the Strategic Plan objective of strengthening organizational capacity through improved enterprise coordination, service consistency, and stakeholder communications management.

The Specialist, Stakeholder Experience is a new role, established to serve as the single point of intake and quality control. This new role will work closely with subject matter experts and Communications Advisors to deliver accurate, timely, and consistent responses to external audiences while improving operational efficiency.

DEIA Council: As Executive Sponsor, I work with the College's newly launched and highly engaged DEIA Council in advancing organizational inclusion initiatives and employee engagement strategies. Initial activities included, the establishment of Important and Commemorative Dates to publicly acknowledge, beginning with Pride Month in June.

FY2026 Fraud Prevention Results:

The FY2026 Fraud Prevention campaign directly supported the College's strategic objective to combat unauthorized practitioners through awareness, outreach, and public education initiatives. Increased Public Register usage and campaign reach demonstrate growing public engagement with regulatory verification tools and support the College's public protection mandate.

This year's campaign exceeded all established KPIs and outperformed last year's effort.

The campaign ran for 10 weeks, in 6 languages across 17 countries (including Canada where we expanded our OOH/transit advertising to 9 cities from coast to coast) and yielded an unprecedented:

- 687M impressions, up 227% from 2025
    - This included 160M transit impressions, up 2,253% from 6.8M in 2025
- 1.7M total Public Register users, up 239% from 2025
- 67.3K growth in followers, including 939% increase in EN and FR Instagram followers (now more than 70K on that channel alone)

Public Awareness

- Domestic print and digital advertising campaign designed to strengthen outreach to diverse communities, especially in regions with high newcomer populations in English, French, Arabic, Hindi, Punjabi, simplified Chinese and traditional Chinese
- Bilingual ad placements have been featured on CBC.ca and in Canadian Immigrant (Discipline Decisions), Immigrant Quebec, Metroland and The Hill Times

New Regulations

- Robust communication plan was prepared in support of the new Regulations
- Key deliverables so far have included a new Compensation Fund webpage and an enhanced, user friendly By-Laws, Regulations and Policies webpage

2026 Annual Report

The report is progressing well, and we are on track to meet our requirement to submit to the Minister of Immigration, Refugees and Citizenship by October 28, 2026. Creative concept and content outline went to GNC in April.

CHALLENGES AND OPPORTUNITIES – n/a

RECOGNITION AND MILESTONES – n/a

RECOMMENDATIONS – No Board decisions are requested at this time

DEPARTMENT REPORT

To:	Board of Directors
Meeting Date:	Thursday, June 18, 2026
Agenda Item #:	5
Subject:	Report of Operations Department
Key Contact:	Thomas Wardman, Interim Director, Operations
Action Required:	*For information only*

Executive Summary

During Q3 FY2026, the Operations Department continued advancing organizational sustainability, operational modernization, cybersecurity, human resources modernization, and corporate compliance initiatives supporting the College’s regulatory mandate and day-to-day operations.

Key priorities during the quarter included cybersecurity enhancements, information technology roadmap planning, modernization of HR policies and practices, records management framework development, privacy governance improvements, and preparation for upcoming technology contract renewals.

Department initiatives undertaken during the reporting period directly supported Strategic Plan priorities related to organizational sustainability, legal and regulatory compliance, enterprise management systems, records management, and operational effectiveness.

KEY HIGHLIGHTS

The College’s operations teams advanced several organizational sustainability, modernization, and compliance initiatives during the quarter, including:

Improvements in cybersecurity were made, and a general review of the IT technology roadmap began in Q3.

Human resources made progress in modernizing internal policies, as well as starting the recruitment process for the College’s next Manager.

We launched several new important policies, including a new Privacy Policy and completed a draft Records Management Framework.

Upcoming renewals in existing technology contracts will provide opportunities to assess operational needs and improve financial performance of our core technology infrastructure.

CURRENT PROJECTS AND INITIATIVES

The Operations team has several initiatives and projects which are currently underway. These activities support the day-to-day operations of the College and contribute to supporting its regulatory mandate.

Information Technology:

In Q3, the Information Technology team advanced several key initiatives, including:

Improvements were made to the cybersecurity of the College, including introducing stronger internal account controls, new phishing testing and training, and improvements to the base cybersecurity of our Microsoft 365 environment.

Following the issuing of an RFP for a vendor to perform a "Information Technology Review," in Q2, the College selected a vendor through a competitive process, The review began in Q3 and will assess the College's technology environment and identify a 3-to-5-year roadmap to help the College prioritize future technology investment. Updates will be shared with the Board early in the next fiscal year.

Human Resources:

The Human Resources team continued progress in modernizing HR operations.

Major activities in Q3 consisted of,

We onboarded an external HR consultant with expertise in building inclusive workplace cultures, to support modernization of the College's HR policy framework. Initial work focused on work place safety (Work Place Health and Safety Policy and Prevention Policy and Program) and culture-affecting policies such as the various leave policies (Vacation, Sick, Personal Days, Statutory days, etc.). Policy development is expected to be mostly completed at the end of Q4, with implementation in Q1 and Q2 in FY27.

The College completed planning for FY2026 talent development in Q3, with FY2026 Talent Development work to be completed by the end of Q4.

Recruitment activities for a new Manager, HR to join the College were completed in Q3. We expect a new Manager, HR to be on board before the end of Q4.

Compliance:

The corporate compliance team completed several activities in Q3 including,

Updated Terms of Use for the College website was approved and posted. The Terms of Use govern non-licensee access to our website.

A new internal Privacy Policy was launched near the end of Q3. Staff training on the new policy is to be completed in Q4.

- The draft Records Management framework was completed, including proposed schedules and a new policy. Work will continue in FY27 to support refinement and future implementation.

Number of ATIP Requests Received – July 1, 2025 to Mar 31, 2026

	Q1 Jul 1– Sep 30		Q2 Oct 1– Dec 31		Q3 Jan 1 – Mar 31		Q4 Apr 1 – Jun 30		Total	
	ATIA	PA	ATIA	PA	ATIA	PA	ATIA	PA	ATIA	PA
Number of requests	2	2	5	3	1	3	TBD	TBD	8	8

Number of ATIP Requests Received in Q3

	Q3 Jan 1– Mar 31	
	ATIA	PA
Number of requests	1*	3

*sent to us in error, meant for IRCC

ATIP Requests Closed in Q3

	0 to 15 days	16 to 30 days	31 to 60 days	61 to 120 days	121 to 180 days	Still open
ATIA	1					
PA			1	1		

Note: 100% of requests were closed on time (including those where we took an extension)

Number of pages processed & released (volume) – Q3

Act	# processed	# released
ATIA	0	0
PA	1811	836
Total	1811	836

Number of minutes released (audio) – Q3

	# processed	# released
N/A		

Number of minutes released (video) – Q3

	# processed	# released
N/A		

The College continued to meet legislated ATIP response requirements during the quarter, with all requests completed within applicable timelines, including approved extensions.

CHALLENGES AND OPPORTUNITIES

Information Technology:

- Several key technology contracts will come for renewal in FY27. Planning is underway, and those that can be tendered to the market will do so in Q4. There will be opportunities to look for efficiencies in pricing and implementation through the renewal process, which will be incorporated into the proposed FY27 budget.

RECOGNITION AND MILESTONES

No significant operational milestones to report during the quarter.

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MEMORANDUM

To: **Board of Directors**

From: **Tim D'Souza**
Chairperson, Finance and Audit Committee

Re: **Agenda Item 6 – Summarized Financial Report for F2026 Q3**

Date: **June 18, 2026**

A. Executive Summary:

The financial result of the College for the third quarter ended March 31, 2026, is presented for Board review.

B. Requested Action:

For the information of Board members only, no action required.

C. Discussion/Analysis:

The F2026 Q3 resulted in an excess of $842,752 of revenue over expense.

Summarized Financial Report for F2026 Q3 ended March 31, 2026 presents the following:

- Summarized Statement of Operations showing results of revenue and expense compared with the Budget
- Highlights of Revenue and Expenses
- Summarized Statement of Financial Position showing results compared with last year-end
- Highlights of changes in assets and liabilities
- Investment as at March 31, 2026

Attachment:
Summarized Financial Report for F2026 Q3

Summarized Financial Report for F2026 Q3 ended March 31, 2026

Summarized Statement of Operations

For the third quarter ended March 31, 2026, compared with the Budget is presented as follows:

Summarized Statement of Operations Period ended March 31, 2026	Actual	Budget	Variance over (Under) Budget
Total Revenue	18,597,322	18,882,071	(284,749)
Total Expense	17,754,570	19,109,128	(1,354,558)
Excess of Revenue Over Expenses	**$842,752**	**$(227,057)**	**$1,069,809**

Highlights of Revenue and Expenses

Revenue under budget by 1.5%, unfavourable variance of $285K

- **Mentoring Program:** $263K under budget **-** Mentoring Intake 5 started in April 2026. Intake 6 has been scheduled for next fiscal year.
- **CPD Fines:** $180K under budget - Issuance of fines invoices to licensees for not meeting CPD obligations was deferred until fourth quarter.
- **Specialization Program:** $167K under budget - Enrolment has been lower than expected.

  Reduced by:
  - **Interest Income:** $306K over budget - Investment and bank interest rates were higher than budgeted.

The unfavourable revenue variances are partially offset by favourable ones, resulting in an overall unfavourable revenue variance of $285K at third quarter end.

Expense under budget by 7.1%, favourable variance of $1,354K

- **IT Enterprise Management System:** $454K under budget - Spending controls implemented on the delivery of the BSI contract. Some of the underspend will be utilized for IT risk assessment and roadmap development.
- **Payroll and professional development:** $246K under budget - Higher payroll costs in OCEO ($678K) related to recent changes in management. This was offset by lower payroll and professional development costs in other departments ($908K) due to delay in hiring

of budgeted positions, timing and lower payroll taxes as contribution limits maxed out. The net impact resulted in an overall underspend.

- **Legal and Consulting:** $279K under budget **-** Temporary underspend due to timing.
- **Regulatory committees:** $120K under budget - Increased proportion of matters being resolved through negotiation prior to Tribunal hearings, resulting in reduced hearing days and associated per diem costs.
- **Travel:** $94K under budget – Travel expenses lower than expected for OCEO ($37K) and CSR ($56K). Underspend in CSR travel expense to be utilized for public awareness activities.

The unfavourable expense variances are offset by favourable ones, resulting in an overall favourable expense variance of $1,354K at third quarter end.

Summarized Statement of Financial Position:

As of March 31, 2026, compared with June 30, 2025, is presented as follows:

Summarized Statement of Financial Position	**March 31, 2026**	**June 30, 2025**	**Increase (Decrease)**
Total Assets	33,572,419	29,840,587	3,731,832
Total Liabilities	4,860,293	1,971,214	2,889,079
Total Net Assets	**$28,712,125**	**$27,869,373**	**$842,752**

Highlights of changes in assets and liabilities:

- Assets increased due to cash inflow from collection of annual fees. Some funds were invested in Guaranteed Investment Certificates (GICs), some were kept in bank accounts to earn interest while maturing GICs were partially redeemed to fund operations.
- Liabilities increased due to the deferred portion of licensee renewal fees, which will be recognized as revenue by the end of the fiscal year.

Investment

As at March 31, 2026, is presented as follows:

	Principal	Rate	Maturity date
CIBC GICs			
Non-redeemable GIC 0345	1,000,000	3.00%	08-Jul-26
Non-redeemable GIC 0353	1,000,000	3.00%	08-Jul-26
Non-redeemable GIC 0388	1,000,000	3.00%	09-Jul-26
Non-redeemable GIC 0396	1,000,000	3.00%	09-Jul-26
Non-redeemable GIC 0418	1,000,000	3.00%	09-Jul-26
Non-redeemable GIC 0426	1,000,000	3.00%	12-Aug-26
Non-redeemable GIC 0434	1,000,000	3.00%	12-Aug-26
Total CIBC	**$ 7,000,000**		
RBC GICs			
Prime-Linked Cashable GIC 018	1,200,000	2.95%	15-Jul-26
Total RBC	**$ 1,200,000**		
Investment Interest receivable	**$ 169,973**		
Total Short-term investments	**$ 8,369,973**		

Highlights:

- Total investments were $8.2M as of March 31, 2026.
- Total Year-to-date investment interest income earned was $222K.

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MEMORANDUM

To: **Board of Directors**

From: **Tim D'Souza**
Chairperson, Finance and Audit Committee

Re: **Agenda Item 6 – Financial Report for F2026 Q3 Forecast**

Date: **June 18, 2026**

A. Executive Summary:

The financial reports of the College for the third quarter forecast is presented for Board review.

B. Requested Action:

For the information of Board members only, no action required.

C. Discussion/Analysis:

The F2026 Q3 Forecast anticipated an excess of $63,773 of revenue over expense by year-end.

Revenue:
The following provides a summary of the key factors in the Revenue Forecast for F2026 Q3:
- Shortfall in Annual Fees revenue. Negative growth rate of -1.6%.
- Program fees: Same as Q2 Outlook. Anticipated deficiency in Specialization Program fees revenue due to low enrolment.
- CPD Fines: Enforcement of CPD deficiency in the last quarter. CPD fines invoices issued in April resulted in increase of other revenue.

Expense:
The following provides a summary of the key factors in the Expense Forecast for F2026 Q3:
- IT expenses: Lower than Q2 Outlook. Savings from negotiated reduced rate of the College Portal (iMIS) software and the deferral of the Enterprise Management System development to the next fiscal.
- Legal and consulting services. Increase support required to implement the new Regulations, By-Laws and the Compensation Fund.
- Payroll expenses: Slightly higher than Q2 Outlook with higher salary expenses reduced by lower in payroll taxes and employee benefits.

Attachment:
Financial Report for F2026 Q3 Forecast

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Financial Report for F2026 Q3 Forecast

The following are the summarized Q3 Forecast statement of operations and the variance explanation. The estimated result by year end is an excess of $64,000 of revenue over expense.

Q3 FORECAST STATEMENT OF OPERATIONS FOR FISCAL ENDING JUNE 30, 2026

	F2026			Variance $	
				Q3 Forecast over/(under)	
	Q3 Forecast	**Q2 Outlook**	**Budget**	**Q2 Outlook**	**Budget**
Revenue					
Annual fees	21,801,771	21,832,595	21,835,247	(30,824)	(33,476)
Examination Fees	555,220	579,433	570,275	(24,213)	(15,055)
Mentoring Program	547,919	536,143	800,073	11,776	(252,154)
Specialization Program	479,850	477,650	890,600	2,200	(410,750)
Interest Income	948,130	866,001	583,000	82,130	365,130
Tribunal Cost and Fines	50,000	42,233	30,000	7,767	20,000
Other Revenue	413,595	293,178	534,500	120,418	(120,905)
Total Revenue	**$24,796,486**	**$24,627,232**	**$25,243,695**	**$169,253**	**$(447,209)**
Expense					
Office of the CEO	2,898,533	2,994,534	2,211,213	(96,001)	687,320
Human Resources	619,292	634,069	673,063	(14,777)	(53,771)
Professional Conduct	5,166,546	5,025,036	5,595,697	141,511	(429,151)
Operations	2,765,477	2,663,735	3,055,673	101,742	(290,196)
Information Technology	1,906,091	2,340,415	2,336,824	(434,324)	(430,733)
PREP	3,497,782	3,506,488	3,766,242	(8,705)	(268,460)
Corporate & Public Affairs	2,631,873	2,661,959	2,725,633	(30,086)	(93,760)
Registration	2,028,684	2,065,355	2,292,689	(36,671)	(264,005)
Governance, Board and AGM	499,476	435,662	423,607	63,814	75,869
Finance	1,737,195	1,772,023	1,776,688	(34,828)	(39,493)
Bad debts	540,000	678,799	347,000	(138,799)	193,000
Total Expense before amortization	**$24,290,949**	**$24,778,074**	**$25,204,329**	**$(487,125)**	**$(913,380)**
Excess/(Deficiency) of revenue over expense before amortization	**$505,536**	**$(150,842)**	**$39,366**	**$656,378**	**$466,170**
Less: Amortization of Capital Assets	$441,764	$444,202	$452,169	$(2,438)	$(10,405)
Total Expense after amortization	**$24,732,713**	**$25,222,275**	**$25,656,498**	**$(489,563)**	**$(923,785)**
Excess/(Deficiency) of revenue over expense after amortization	**$63,773**	**$(595,044)**	**$(412,803)**	**$658,816**	**$476,576**

VARIANCE EXPLANATION FOR F2026 Q3 Forecast compared with Q2 Outlook

The estimated excess of $64,000 compared with Q2 Outlook deficit of $595,000 results in a favourable variance of $659,000 which is a combination of favourable revenue and expense variance of $169,000 and $490,000 respectively.

REVENUE:
Estimated revenue exceeds Q2 Outlook by 0.7%, favourable variance of $169K.

Favourable variance of revenue items include:
- Mentoring Program - $12K
- Interest income - $82K – anticipated no bank rates adjustment before fiscal year end
- Other Revenue - $120K – invoicing of CPD deficiency in Q4

Continued shortfall in:
- Annual fees - $31K
- Examination fees - $24K
    - Higher attrition rate than number of new licensees joining. Net growth of -1.6%.
    - Cancellation of EPE examination to align with school graduation.

EXPENSE:
Estimated expense lower than Q2 Outlook by 2%, favourable variance of $490K.

Major favourable variance of expense items include:
- IT expenses - $434K under Q2 Outlook
    - Savings from reduced support and software fees for iMIS resulted in unspent budget.
    - IT infrastructure assessment is in progress; significant development deferred to F2027.
- Bad debts - $139K under Q2 Outlook
    - Overestimated in Q2 Outlook

Other favourable expense items:
- Operations - Office & administration expense - $20K
- Human Resources - $28K. Lower recruitment expenses and accessibility/ergonomic assessment request.
- PREP - $17K. Lower in research and specialization program expenses.
- Proctoring Expenses - $20K
- Professional Development - $21K
- Travel expenses - $14K

Total favourable expense variances are reduced by the following expense increase.

Major unfavourable variance of expense increase include:

- Unbudgeted item - $71K over Q2 Outlook
    - Expenses related to the legal and consulting services on employment matter for the change in positions of the OCEO and assessment of human resources function.
- Legal expenses - $125K over Q2 Outlook
    - Support for the implementation of new Regulations and By-laws.
    - Support from external legal services for increase in complaints.
- Consulting expenses - $19K over Q2 Outlook
    - Support from actuarial services on Compensation Fund and fees structure studies.
- Payroll expenses - $12K over Q2 Outlook– higher salary expenses reduced by lower payroll taxes and employee benefits
    - Salary expenses – $143K over Q2 Outlook due to:
        - Increase in vacation accrual to reflect the earned vacation entitlement by year end and workforce restructuring to align with the resources required for the new Regulations and By-laws.
        - Anticipated employee complement by year end is 137 which is lower than Q2 Outlook by 8.
    - Payroll taxes/Employee Benefits - $131K under Q2 Outlook.

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MEMORANDUM

To: **Board of Directors**

From: **Tim D'Souza**
Chairperson, Finance and Audit Committee

Re: **Agenda Item 6 – Draft Budget for Fiscal 2027**

Date: **June 18, 2026**

A. Executive Summary:

The draft College Budget for fiscal 2027 is presented for approval by the Board of Directors.

B. Requested Action:

THAT:

The proposed budget for the financial year of the College ending June 30, 2027, in substantially the form attached hereto, be and is hereby approved with immediate effect.

C. Discussion/Analysis:

A deficit budget of $1,778,317 for fiscal year ending June 30, 2027 is proposed. The budget for total revenue and expense are $23,153,100 and $24,931,417 respectively.

Fiscal year 2027 is a year of change and complexity for the College. Through the course of 2027, the College will onboard a permanent President & CEO, develop a new Strategic Plan, implement new College Regulations and related By-laws, end the transition period and continue to fulfill its mandate to act in the public interest. The challenges to be encountered include:

- anticipated negative growth in licensees and low enrolment in Specialization Program
- increasing complaint volume
- cybersecurity risk
- compliance requirements
- employee attraction and retention

At the Finance and Audit Committee (FAC) meeting of May 21, 2026, Management presented the draft College Budget for fiscal 2027 for review and recommendation. The Committee approved the budget and is recommending it to the Board for approval.

Attachment:
Draft Budget for Fiscal 2027

College of Immigration and Citizenship Consultants

Budget

Fiscal year ending June 30, 2027

Summarized Statement of Operations
Budget for the fiscal year ending June 30, 2027

Summarized Statement of Operations	F2027 Budget	F2026 Q3 Forecast	Variance F2027 Budget vs F2026 Q3 Forecast	F2026 Budget
Revenue				
Annual fees	20,508,900	21,801,771	(1,292,871)	21,835,247
Examination Fees	466,100	555,220	(89,120)	570,275
Mentoring Program	700,200	547,919	152,281	800,073
Specialization Program	214,800	479,850	(265,050)	890,600
Interest Income	800,000	948,130	(148,130)	583,000
Tribunal Cost and Fines	37,000	50,000	(13,000)	30,000
Other Revenue	426,100	413,595	12,505	534,500
Total Revenue	**$23,153,100**	**$24,796,486**	**$(1,643,386)**	**$25,243,695**
Expense				
Office of the CEO	1,374,619	2,898,533	(1,523,914)	2,211,213
Professional Conduct	6,569,510	5,166,546	1,402,964	5,595,697
Operations	5,298,261	5,290,860	7,401	6,065,560
Professional Standards, Research, Education and Policy	3,287,379	3,497,782	(210,403)	3,766,242
Corporate & Public Affairs	2,782,030	2,631,873	150,157	2,725,633
Registration	2,242,683	2,028,684	213,999	2,292,689
Governance, Board and AGM	375,674	499,476	(123,802)	423,607
Finance	2,076,661	1,737,195	339,466	1,776,688
Bad debts	450,000	540,000	(90,000)	347,000
Total Expense before amortization	**$24,456,817**	**$24,290,949**	**$165,868**	**$25,204,329**
(Deficiency)/Excess of revenue over expense before amortization	**$(1,303,717)**	**$505,536**	**$(1,809,253)**	**$39,366**
Less: Amortization of Capital Assets	474,600	441,764	32,836	452,169
Total Expense after amortization	24,931,417	24,732,713	198,704	25,656,498
(Deficiency)/Excess of revenue over expense after amortization	**$(1,778,317)**	**$63,773**	**$(1,842,090)**	**$(412,803)**

Proposed Capital Budget

Capital Budget	F2027
Computers Public Register rebuild College-ic.ca website update	$ 60,000 $ 200,000 $ 75,000
Total proposed capital budget	**$ 335,000**

Revenue:

Annual fees: (no change in rates)

- RCIC annual fees: $1,809.25 + HST
- RISIA annual fees: $913 + HST
- Calculated based on estimated # of licensees in the chart below:

	F2027			F2026	
	Budget			Forecast	Budget
Estimated # of licensees:	RCIC	RISIA	Total	Total	Total
Beginning	11,840	537	12,377	12,608	12,880
Revocations	(350)	(3)	(353)	(390)	(350)
Resignations	(390)	(20)	(410)	(357)	(342)
Deceased	(2)	-	(2)	(5)	(3)
New licensees	468	90	558	521	700
	(274)	67	(207)	(231)	5
Ending	(274) 11,566	67 604	(207) 12,170	(219) 12,377	5 12,885
Annual fees	$19,966,237	$500,813	$20,467,050	$21,754,296	$21,782,747
Licensing application fees	$35,100	$6,750	$41,850	$47,475	$52,500
Total Annual fees revenue	**$20,001,337**	**$507,563**	**$20,508,900**	**$21,801,771**	**$21,835,247**

Examination fees: (no change in rates)
ETP Examination application fee: $75
First attempt ETP examination fee: $425
Subsequent additional ETP examination fee: $325
Specialization examination fee: $450

		F2027	F2026	
Examination fees	**Estimated # of writers**	**Budget**	**Forecast**	**Budget**
RCIC EPE	660	$295,350	$313,435	$331,150
RISIA EPE	100	$44,750	$54,125	$67,125
Specialization Program Examination	280	$126,000	$187,660	$172,000
Total Examination fees		**$466,100**	**$555,220**	**$570,275**

Mentoring Program: (no change in rates)
Program fee: $665
Re-enrolment fee: $532
Administrative Service fee: $150

			F2027	F2026	
Mentoring Program (RCIC)	**Estimated # of licensees**	**Intake**	**Budget**	**Forecast**	**Budget**
Program fee	940	6 & 7	$625,100	$537,719	$752,115
Re-enrolment	100	6 & 7	$53,200		$36,708
Administrative service fee			$21,900	$10,200	$11,250
Total Mentoring Program	1,040		**$700,200**	**$547,919**	**$800,073**

Forecast of $537,719 is the total of mentoring program fee and re-enrolment

Specialization Program: (no change in rates)
Education pathway: $1,000
Re-enrolment program fee: $200

			F2027	F2026	
Specialization Program	**Estimated # of Seats**	**Estimated # of Cohorts**	**Budget**	**Forecast**	**Budget**
Education Pathway	157	23	$157,000	$418,000	$850,000
Re-enrollment	289		$57,800	$61,850	$40,600
Total Specialization program	446		**$214,800**	**$479,850**	**$890,600**

Other revenue

	F2027	F2026	
	Budget	**Forecast**	**Budget**
Regulatory Offenses fees	154,600	208,945	239,200
Late payment fees	350,000	283,575	292,300
	504,600	492,520	531,500
Deduct: Bad debts	(150,000)	(130,000)	(75,000)
	354,600	362,520	456,500
Certificate/ID card	2,000	1,825	4,000
Agent Registration fees	69,500	49,250	74,000
Total Other Revenue	**$426,100**	**$413,595**	**$534,500**

Budget By Department:

Office of the CEO Budget

Office of the CEO	F2027 Budget	F2026 Forecast	F2026 Budget
Salaries and benefits	786,631	2,496,079	1,756,550
PD/Dues/Teambuilding	13,288	15,727	34,771
External legal services	400,000	293,238	247,500
Travel	11,500	15,482	67,242
Conference registration	3,200	3,707	5,150
Translation services	-	1,500	-
Consulting	160,000	72,800	100,000
Total	**$1,374,619**	**$2,898,533**	**$2,211,213**

- Structural change
    - HR division moves from OCEO to Operations effective January 2026
    - F2026 Forecast and Budget salaries and benefits included first 6 months (July to December 2025) allocation of HR employees
- 4 positions (permanent full time)
- Support for corporate legal services of the College administered by OCEO
- Support for consulting services of the College administered by OCEO

Professional Conduct Budget

Professional Conduct	F2027 Budget	F2026 Forecast	F2026 Budget
Salaries and benefits	5,303,519	4,213,273	4,446,572
PD/Dues/Teambuilding	61,631	55,909	64,585
External legal services	542,868	430,194	435,720
Legal research licences	-	8,662	8,800
External investigator	115,500	149,277	132,000
Translation services	65,500	62,797	49,000
Regulatory committee expenses	431,492	188,407	369,167
ICRO expenses	20,000	12,650	40,500
Travel	25,000	37,485	40,700
Conference registration	4,000	7,892	8,653
Total	**$6,569,510**	**$5,166,546**	**$5,595,697**

- 44 positions (40 permanent full time; 4 contract)
- Legal research licences
  - Move to IT Budget
- Regulatory committee expenses
  - Include expense for Complaint Committee, Discipline Committee, Compensation Fund Committee and Capacity Evaluation Committee

Operations (including Operations, HR and IT) Budget

Operations	F2027	F2026	
	Budget	Forecast	Budget
Salaries and benefits	2,471,087	2,009,726	2,157,088
PD/Dues/Teambuilding	15,989	6,174	22,861
Office rent	280,000	272,788	300,000
Office supplies	12,000	10,367	25,000
Courier & postage	10,000	9,866	15,000
Office equipment lease	3,000	2,584	3,000
Repair & maintenance	18,440	13,013	25,224
External legal services	-	164,132	215,000
Consulting	-	59,718	60,000
Insurance	222,000	214,668	230,000
Travel	5,000	2,441	2,500
Total	**$3,037,516**	**$2,765,477**	**$3,055,673**

Human Resources	F2027	F2026	
	Budget	Forecast	Budget
Mandatory training	50,000	46,801	47,000
PD/Dues/Teambuilding	33,530	205,663	209,950
Recruitment	60,000	69,003	98,063
Consulting	85,500	107,590	108,300
HR projects	100,000	8,000	13,500
External legal services	-	176,024	170,000
Travel	8,000	468	1,250
Accessibility/ergo equipment	10,000	5,743	25,000
Total	**$347,030**	**$619,292**	**$673,063**

Information Technology	F2027 Budget	F2026 Forecast	F2026 Budget
Internet services	10,800	9,700	10,800
Telephony	50,540	38,808	50,540
Cloud resources	332,746	339,721	317,746
Firewall & Security	201,620	37,869	38,120
Department software	413,230	324,423	304,880
IT Consulting	35,594	102,017	39,073
EMS software fees	369,185	341,995	375,665
EMS development	500,000	711,558	1,200,000
Total	**$1,913,715**	**$1,906,091**	**$2,336,824**

- 19 positions (permanent full time)
- Structural change
  - HR division moves from OCEO to Operations effective January 2026
  - F2026 Forecast and Budget salaries and benefits included last 6 months (January to June 2026) allocation of HR employees
- Support for legal services administered by OCEO
- Support for consulting services on ATIP administered by OCEO

Professional Standards, Research, Education and Policy (PREP) Budget

PREP	F2027	F2026	
	Budget	**Forecast**	**Budget**
Salaries and benefits	2,866,353	3,115,285	3,272,528
PD/Dues/Teambuilding	28,208	35,826	44,268
Travel	10,000	14,844	21,752
Conference registration	6,000	5,052	6,800
PME course development	24,517	-	-
Specialization Program	41,441	29,601	41,299
Mentoring Program	200,200	142,589	213,000
Research	110,660	154,585	166,595
Total	**$3,287,379**	**$3,497,782**	**$3,766,242**

- 26 positions (22 permanent full time; 3 part time; 1 contract)
- PME course revision and update due to new Regulations and By-laws
- No Research Symposium

Corporate & Public Affairs Budget
(formerly Communications & Stakeholder Relations)

Corporate & Public Affairs	F2027	F2026	
	Budget	Forecast	Budget
Salaries and benefits	1,999,080	1,811,535	1,868,488
PD/Dues/Teambuilding	12,950	15,175	20,145
Advertisements & outreach	150,000	240,869	150,000
Fraud prevention & outreach	415,000	395,868	400,000
Tradeshows & sponsorships	31,000	22,000	55,000
Brand Management	80,000	82,549	80,000
Printing	12,000	12,500	15,000
Translation services	40,000	21,403	20,000
Promotional items and mailers	-	5,999	8,000
Travel	25,000	16,732	89,000
Conference registration	17,000	7,243	20,000
Total	**$2,782,030**	**$2,631,873**	**$2,725,633**

- 17 positions (16 permanent full time; 1 part time)

Registration Budget

Registration	F2027 Budget	F2026 Forecast	F2026 Budget
Salaries and benefits	2,114,899	1,914,058	2,125,626
PD/Dues/Teambuilding	14,810	2,259	25,190
RISIA EPE administration	7,875	9,333	13,425
RCIC EPE administration	51,975	49,808	66,230
SP exam administration	27,628	31,085	30,788
Cert and ID supply	13,896	9,013	10,000
Conference registration	-	900	3,520
Travel	11,600	12,228	17,910
Total	**$2,242,683**	**$2,028,684**	**$2,292,689**

- 22 positions (22 permanent full time)

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Governance Budget

Governance, Board and AGM	F2027	F2026	
	Budget	Forecast	Budget
Director fees	99,694	94,795	84,337
Board meetings/AGM/licensee events	240,980	171,470	259,270
Board training	30,000	43,962	80,000
Others	5,000	189,249	-
Total	**$375,674**	**$499,476**	**$423,607**

- Others
    - The platform to be used for Board election
    - The amount of $189,249 in F2026 Forecast represents the estimated expenses of the legal and consulting services on employment matter for the change in positions of the OCEO and the assessment of human resources function

Finance Budget

Finance	F2027 Budget	F2026 Forecast	F2026 Budget
Salaries and benefits	1,481,901	983,996	992,615
PD/Dues/Teambuilding	14,600	11,022	18,213
Audit fees	66,000	67,667	68,000
Consulting	-	500	4,000
Travel	2,000	1,929	1,300
Merchant fees	504,000	664,226	685,000
Bank Charges & other fees	8,160	7,855	7,560
Total	**$2,076,661**	**$1,737,195**	**$1,776,688**

- 13 positions (12 permanent full time; 1 contract)
- Consulting is in the OCEO budget

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MEMORANDUM

To: **Board of Directors**

From: **Tim D'Souza**
Chairperson, Finance and Audit Committee

Re: **Agenda Item 6 – Auditor Engagement**

Date: **June 18, 2026**

Summary:
In accordance with its Terms of Reference, the Finance and Audit Committee (FAC) is reporting to the Board on the Auditor Engagement Letter received from Doane Grant Thornton LLP for the fiscal year ending June 30, 2026. The Committee reviewed the engagement letter at its meeting on May 21, 2026 and identified no areas of concern. The terms are consistent with prior years, and the Committee confirmed that the auditor remains independent.

Requested Action:
For the information of Board of Directors. No action required.

Discussion/Analysis:
The audit engagement letter serves as a formal agreement between the auditor and the College. It outlines the scope, objectives, responsibilities, and limitations of the audit engagement. Its purpose is to promote transparency and accountability by:

- Defining the audit scope, including the specific financial statements and any limitations or exclusions;
- Outlining the responsibilities of both the auditor and the College;
- Establishing key limitations on the services being provided and clarifying any disclaimers.

The Finance and Audit Committee reviewed the Auditor Engagement Letter at its meeting on May 21, 2026, and found no areas of concern.

1. Objective of the Audit

The primary objective is to provide an independent audit opinion on whether the College's financial statements are fairly presented, in all material respects, in accordance with Canadian Accounting Standards for Not-for-Profit Organizations (ASNPO). The audit will cover:

- Statement of Financial Position as at June 30, 2026
- Statements of Operations, Changes in Net Assets, and Cash Flows for the year ending June 30, 2026
- Notes to the financial statements, including a summary of significant accounting policies

The audit will be conducted in accordance with Canadian generally accepted auditing standards (GAAS) and will seek to obtain reasonable assurance that the financial statements are free from material misstatement due to error or fraud.

2. Scope of the Audit

- The audit is required under the College's governing legislation.
- Risk-based procedures will be performed, including an assessment of internal controls (not for the purpose of expressing an opinion on their effectiveness).
- The audit will include an evaluation of accounting estimates, financial disclosures, and overall presentation.
- The auditors will assess the appropriateness of the College's use of the going concern basis of accounting.

3. Limitations of the Audit

- No Guarantee: Although the audit aims to obtain reasonable assurance, it does not guarantee detection of all material misstatements, especially those resulting from fraud.
- Not for Third-Party Use: The audit is not designed for reliance by third parties or for use in evaluating specific transactions.
- Internal Controls: The audit will not include an opinion on the effectiveness of internal control systems.
- Reliance on Management: The audit depends on management providing complete and accurate information. Management remains responsible for the financial statements.

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MEMORANDUM

To: **Board of Directors**

From: **Tim D'Souza**
Chairperson, Finance and Audit Committee

Re: **Agenda Item 6 – Auditor Remuneration**

Date: **June 18, 2026**

Summary:
The Board of Directors is asked to review and approve the proposed remuneration of the Auditor, Doane Grant Thornton LLP for the fiscal year 2026 audit.

Requested Action:

THAT: the remuneration fee of the Auditor, Doane Grant Thornton, LLP for fiscal year 2026, being a base fee of $50,000 plus a contingency fee of $5,000, exclusive of administrative costs, disbursements, and applicable taxes—be and is hereby approved with immediate effect.

Discussion/Analysis:
Doane Grant Thornton, LLP was appointed as Auditor of the College at the Board Meeting held on November 27, 2025.

For the fiscal year 2026 audit, the Auditor has proposed:

- base fee of $50,000,
- contingency fee of $5,000 has been included to cover any unforeseen or additional work that may be required,
- plus administrative costs, disbursements, and applicable taxes,

The proposed fee is unchanged from the previous year and remains consistent with industry standards for an organization of comparable size and complexity. The Finance and Audit Committee reviewed the proposed fee at its meeting and supports its approval.

Audit deliverables will include:

- Communication of audit strategy
- Communication for audit results
- Independent auditor's report on the June 30, 2026 financial statements
- Corporate tax return filings – T2 and T1044

The proposed remuneration is based on the scope of work outlined in the current Audit Plan.

RESOLUTION

To:	Board of Directors
Meeting Date:	Thursday, June 18, 2026
Agenda Item #:	6
Subject:	Approval of Maximum Compensation Fund Claim Amount
Prepared By:	Victoria Rumble, Corporate Secretary
Presented By:	Tim D'Souza, Chairperson, Finance and Audit Committee
Action Required:	*For Approval*

PURPOSE

The Board of Directors is being asked to approve the inclusion of a maximum compensation award limit per claim within proposed draft By-law 10 governing the Compensation Fund and approve the recommended maximum compensation award of $7,000 per eligible claim.

BACKGROUND

As part of the College's by-law initiative, proposed draft By-law 10 includes provisions related to the establishment and administration of a Compensation Fund intended to provide financial recourse to eligible individuals financially harmed by licensee's dishonest act.

The Board is being asked to provide direction if a maximum compensation claim limit should be included within the proposed draft By-law 10 framework and, if so, the appropriate maximum amount.

To support this work, the College retained Dion Strategic Consulting Services to complete an actuarial analysis of the proposed Compensation Fund model, including projected claims exposure, sustainability considerations, and potential financial risk. The analysis included scenario testing related to claim frequency, compensation limits, investment yield, recoveries, retroactive claims exposure, and future funding assumptions.

On May 20, 2026, the Governance and Nominating Committee (GNC) reviewed whether proposed draft By-law 10 should include a maximum compensation claim limit. Following discussion, GNC supported the inclusion of a maximum claim limit within the proposed draft By-law 10 in order to support the long-term sustainability of the future Compensation Fund and mitigate financial risk.

GNC further recommended that the Finance and Audit Committee (FAC) review the actuarial analysis and determine the appropriate quantum of the limit for recommendation to the Board.

On May 21, 2026, FAC reviewed the actuarial analysis and recommendations prepared by Dion Strategic Consulting Services, including projected financial exposure and sustainability considerations associated with the proposed Compensation Fund framework. Following discussion, FAC supported a maximum compensation award of $7,000 per eligible claim and recommended that the matter be escalated to the Board for approval.

If approved, management will provide direction to the Department of Justice (DOJ) to incorporate the approved maximum compensation claim limit into the regulatory drafting associated with proposed draft By-law 10.

ANALYSIS

Management, GNC, and FAC considered the actuarial analysis prepared by Dion Strategic Consulting Services in determining whether a maximum compensation award (limit per claim) should be established and the appropriate amount of that limit.

The analysis considered:

- projected claims frequency and potential claim values;
- anticipated sustainability of the proposed Compensation Fund:
- potential future liabilities and financial risk exposure;
- regulatory and industry benchmarks;
- retroactive claims exposure; and
- balancing meaningful public protection with prudent stewardship of future Fund resources.

The actuarial analysis concluded that establishing a per claim limit materially reduces the financial exposure of the proposed Compensation Fund and supports the long-term viability of the Fund. The report also identified potential risks as public awareness of the Fund increases.

Based on the actuarial analysis and committee deliberations, the proposed $7,000 maximum compensation award (limit per claim) is intended to balance meaningful public protection with the long-term financial viability and sustainability of the proposed Compensation Fund.

During GNC discussions, additional considerations were raised for future exploration with DOJ, including:

- the potential inclusion of an annual escalation factor tied to a national inflationary index or Consumer Price Index (CPI); and
- the inclusion of a mandatory review provision within a defined review period.

At this time, no escalation factor is being recommended for approval. Management will continue discussions with DOJ regarding potential escalation and review mechanisms as part of the ongoing by-law drafting process.

RECOMMENDATION

The Governance and Nominating Committee recommends that the Board of Directors:

1. approve the inclusion of a maximum compensation award (limit per claim) within proposed By-law 10 governing the Compensation Fund; and

The Finance and Audit Committee recommends that the Board of Directors:

2. approve a maximum compensation award of $7,000 per eligible claim.

POTENTIAL RISK(S)

• Future claims activity may exceed actuarial projections once the Compensation Fund becomes operational;

• The approved maximum amount may not fully compensate all losses experienced by future applicants;

• Future operational, legal, or regulatory changes may require revisions to the compensation limit structure; and

• Increased public awareness of the Compensation Fund may result in increased claims activity over time.

These risks will be mitigated through ongoing monitoring, future actuarial review, and continued consultation with DOJ during the by-law finalization process.

RESOLUTION

BE IT RESOLVED THAT the Board of Directors approve the inclusion of a maximum compensation award per eligible claim within proposed By-law 10 governing the Compensation Fund;

AND FURTHER THAT the Board approve a maximum compensation award of $7,000 per eligible claim;

AND FURTHER THAT management be directed to provide instruction to the Department of Justice to incorporate the approved maximum compensation award into the applicable regulatory drafting associated with proposed draft By-law 10.

NEXT STEPS

- Provide direction to the Department of Justice regarding the approved maximum compensation award of $7,000 per claim;
- Continue discussions with DOJ regarding potential escalation and review provisions.

SUPPLEMENTARY DOCUMENTS

- Dion Strategic Compensation Fund Project – Phase 2

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RESOLUTION	
To:	Board of Directors
Meeting Date:	Thursday, June 18, 2026
Agenda Item #:	8
Subject:	Extension of the 2023–2026 Strategic Plan
Prepared By:	Victoria Rumble, Corporate Secretary
Presented By:	Ben Rempel, Chairperson, Governance and Nominating Committee
Action Required:	*For Approval*

PURPOSE

The purpose of this report is to seek Board approval to extend the College's 2023–2026 Strategic Plan by one year, to June 30, 2027.

BACKGROUND

The Board approved the current Strategic Plan in June 2023 following a strategic planning process involving both the Board of Directors and the Leadership Team. Progress updates have been regularly provided through President's Reports and organizational dashboards.

The College is now in a significant transition period linked to the anticipated implementation of the new Government Regulation in Summer 2026. Management is preparing implementation, communication, and training plans to support both licensees and employees through this transition.

In parallel, the College is working closely with the Department of Justice (DOJ) on the development of the College By-Laws. DOJ approval will follow implementation of the new Regulation, and regular meetings will continue throughout this period.

The Board is also in the process of recruiting a permanent President & CEO, who will play a central role in shaping the next Strategic Plan.

ANALYSIS

Extending the Strategic Plan by one year will allow the College to:

- Maintain organizational stability during a period of regulatory change
- Ensure alignment between the next Strategic Plan, the finalized Regulation, and the updated By-Laws
- Enable meaningful leadership and participation from the incoming President & CEO

Developing a new Strategic Plan prior to regulatory finalization risks misalignment, rework, and inefficient use of Board and management resources. It could result in the need for substantial revisions shortly after approval.
During the extension period, management will continue to advance the current strategic priorities while monitoring regulatory and operational developments.

Planning for the next Strategic Plan
Management proposes initiating the next strategic planning process in January 2027, beginning with a risk management review and a Board visioning session. Regular updates will be provided to the Governance and Nominating Committee, with a final Strategic Plan presented to the Board for approval in June 2027.

RECOMMENDATION
Management recommends extending the current Strategic Plan by one year to support organizational stability during the regulatory transition and to allow the incoming President & CEO to participate fully in the development of the next Strategic Plan.

POTENTIAL RISK(S)

- Emerging regulatory and operational priorities may not be fully captured in the existing framework
- Potential misalignment between evolving regulatory requirements and current strategic priorities
- Some emerging issues may require interim adjustments
- These risks will be mitigated through regular Board reporting, ongoing monitoring of strategic priorities, and integration of regulatory developments into operational planning.

RESOLUTION
BE IT RESOLVED THAT the College's 2023–2026 Strategic Plan be extended for one additional year, to June 30, 2027, to support organizational stability during the regulatory transition and to enable input from the incoming President & CEO.

NEXT STEPS

1. Update the Strategic Plan webpage to reflect the one-year extension
2. Communicate the extension internally to employees
3. Provide updates to the Board, as discussed at the March Board meeting, including:
   a. Progress on current strategic priorities and key initiatives
   b. Status updates on identified risks or challenges
   c. A forward-looking view of priorities, including impacts related to the Government Regulation and College By-Laws

APPENDICES

- 2023-2026 Strategic Plan

July 1, 2023 –
June 30, 2026
Strategic Plan

Setting the Standard for Public Protection

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TM/MC

Vision 2025

Every person who seeks Canadian immigration and citizenship advice has informed choice and access to a College licensee who consistently offers professional services.

Purpose

To regulate immigration and citizenship consultants in the public interest and protect the public, including by:

a. establishing and administering qualification standards, standards of practice and continuing education requirements for licensees;

b. ensuring compliance with the code of professional conduct; and

c. undertaking public awareness activities.

Values

Transparency

Share decisions, policies, procedures and disciplinary outcomes with licensees and the public.

Integrity

Maintain the highest moral and ethical standards.

Accountability

Ensure that the Board of Directors, management and staff take full responsibility for actions and decisions.

Excellence

Achieve excellence in all endeavours.

Fairness

Ensure that policies, practices, procedures and decisions are justified and well understood.

Communication

Welcome licensees, stakeholders and the public to contact the College on any matter relating to the regulation of the Canadian immigration and citizenship consulting profession.

Strategic Plan

OBJECTIVES	
Professional Standards & Compliance Standards address evolving needs and licensees consistently practise to those standards.	**Unauthorized Practitioners (UAPs)** Combat unauthorized practitioners by enforcement, licensing, and awareness.
INITIATIVES	
1. Quality Management	1. Domestic Injunctions
2. Mentoring Program	2. Unauthorized Practitioner Registration
3. Practice, Policy, and Public-centred Research	3. Domestic and International Partnerships (Immigration, Refugees and Citizenship Canada (IRCC), Canada Border Services Agency (CBSA), etc.)
4. Regulations, By-laws and Policies Development	4. UAP Research
5. Post-licence Education Programming	5. Fraud Prevention Awareness
6. Complaints Process Efficiency and Effectiveness	
MEASURES	
1. Quality Management Program is developed to provide clear guidance and direction for licensees	1. UAPs complying with College demands or pursued
2. Mentoring programs are developed to provide clear guidance and direction for licensees	2. Number of UAPs licensed
3. Research symposiums inform College strategies	3. Number and scope of partnerships created
4. Regulations, by-laws, and policies are evidence-based, well-researched, and meet the needs of the stakeholders	4. Research projects in progress, submitted conference presentations, and publications in preparation
5. Adoption of evidence-based accreditation practices and improved CPD quality	5. Web traffic to the UAP warning page
6. Increased complaint throughput rate	

Strategic Plan continues on the next page.

Strategic Plan (continued)

OBJECTIVES	
Stakeholder Communication The College's role as a respected regulator is broadly accepted.	**Sustainability** The College strengthens organizational capacity.
INITIATIVES	
1. Communications Capacity Building	1. Culture and Engagement
2. Proactive Licensee Communication	2. Diversity, Equity and Inclusion
3. Government Relations and Issues Management	3. Legal, Regulatory, Directives and Policies Compliance
4. Strategic Relationship Partnering	4. Enterprise Management System (EMS)
5. Public Awareness Communication	5. Records Management
MEASURES	
1. Organization structure designed and implemented	1. Task Team evaluation of initiative effectiveness
2. Consultation and feedback from CAPIC	2. Employee-identified feedback
3. Emerging issues are controlled effectively	3. Submission of reports as required to the House of Commons, Senate, TBS, Commissioners, and ATIP inquiries
4. Partners view the College as a competent SRO	4. iMIS launched on the target date and initiative development of predictive and detective abilities
5. Public awareness of the College's role and key messages	5. Compliance with IRCC and TBS on ATIP requirements