



Nova Scotia College of Counselling Therapy

Board of Directors Meeting Summary

February 21, 2026 (1-4PM) Hybrid Format

Chair	Chris Charles
Present	Alana Baxter, Micheala Slipp, Kimberly MacDonald, Cherie Borden, Maria Cain, Jennifer Hemeon (<i>ex-officio</i>), Mary Kate Jollymore (<i>staff</i>).
Regrets	Patricia Arab, Drew McClure, Kelsey Green, Arvind Babajee
Guests	None

Agenda Item	Information/Discussion
1.0 Call to Order & Certification of Quorum	C. Charles called the meeting to order at 1:07 p.m. and provided the land acknowledgement. Quorum was confirmed.
2.0 Approval of Agenda	A registration update from M.K. Jollymore was added to the agenda. <u>MOTION:</u> To approve the February 21, 2026 agenda as amended Moved: C. Charles Seconded: A. Baxter CARRIED
2.1 Registration Update (Agenda Addition)	M.K. Jollymore provided an update on the annual renewal process. Clarification questions received to date have primarily related to the temporary CEC reporting pause and how continuing education requirements will be applied in future reporting cycles (2027 CEC requirements).

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	<p>It was noted that a key focus of this renewal cycle is confirmation of updated professional liability insurance coverage amounts. When required renewal documentation is missing or incomplete, applications are returned to the registrant for correction.</p> <p>Registrants have until March 31 to complete all renewal requirements. Applications not finalized by that date incur a late fee. If all requirements are not satisfied by May 1, the registrant’s license will lapse.</p>
3.0 Declaration of conflict of interest	No conflicts of interest were declared.
4.0 Action Items from previous minutes	<p>J. Hemeon noted that the action item tracker was included in the meeting package for oversight and continuity purposes. It was clarified that the tracker serves as a monitoring tool to ensure items are not lost. Discussion occurred following questions raised regarding outstanding items, and J. Hemeon provided updates on action items within the tracker.</p> <p>It was noted that the EDR will continue to maintain the tracker and that the Chair and EDR will review outstanding items in advance of each Board meeting to provide updates. Board members requested that highlights or concerns be flagged where relevant in future updates.</p> <p>Action Item(s):</p> <ul style="list-style-type: none"> • Chair and EDR to review the Action Item Tracker prior to each Board meeting and provide updates, including identification of risks/concerns.
5.0 Approval of December 2025 Board Meeting Minutes	<p>C. Charles noted the minutes were thorough and reflected improvement in documentation practices.</p> <p><u>MOTION:</u> To approve the December 2025 Board Meeting Minutes.</p> <p>Moved: C. Charles Second: A. Baxter CARRIED</p>
6.0 Macro Agenda – for approval	<p>J. Hemeon shared that the Macro Agenda reflects the Board’s DHW workplan and is used by the EDR & Chair when preparing meeting agendas. It is intended to function as a living governance tool and would be monitored by the Governance Committee once established.</p> <p>Discussion occurred following a question raised regarding timing of a Board skills gap analysis and competency matrix updates. It was noted that several new Board members have joined and that a current competency matrix has not yet been updated to reflect those changes.</p> <p>Board members discussed:</p>

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	<ul style="list-style-type: none"> • Whether terms are aligned to calendar dates or appointment initiation dates • Whether staggered terms may affect timing of nominations • The timing of the next call for nominations (potentially April) • The need to fill the Secretary role and whether that position should be filled internally from existing Board members or through a call for interest • Recruitment of public representatives for statutory committees (noting that J. Hemeon is currently exploring options through NSRHPN) • Whether structural changes should be minimized during the current migration period • The need to ensure the Appointments Committee is operational, even if no immediate Board vacancies exist <p>Discussion followed regarding deadlines. It was agreed that:</p> <ul style="list-style-type: none"> • A current competency matrix should be updated • A Board skills gap analysis should be completed to inform future nominations <p><u>MOTION:</u> To approve the Macro Agenda as drafted, with the addition of competency matrix updating and a Board skills gap analysis, and to refer the document to the Governance Committee for ongoing monitoring, discussion, and revision.</p> <p>Moved: A. Baxter Seconded: M. Cain CARRIED</p> <p>Action Item(s):</p> <ul style="list-style-type: none"> • Update the Board competency matrix and complete a skills gap analysis • Governance Committee to assume oversight of the Macro Agenda as a living governance document • Circulate internal call for interest to fill the Secretary roll • Operationalize the Appointments Committee
<p>7.0 Anti-Racism Position Statement – for approval (DEFERRED)</p>	<p>The Board had previously deferred approval of an EDIRA Statement following questions raised at the December 20, 2025 meeting.</p> <p>A broader discussion followed regarding the College’s public facing statements.</p>

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	<p>It was agreed that further review of the EDIRA Statement is required and that the College’s related public statements should be reviewed collectively, including the EDIRA Statement, Anti-racism Statement and Land Acknowledgement</p> <p>Action Item(s):</p> <ul style="list-style-type: none"> • The EDIRA Statement will be reviewed at the next Board meeting. • The Anti-Racism Statement, and Land Acknowledgement will be reviewed at a future date.
<p>8.0 Complaint Tracker</p>	<p>J. Hemeon introduced the complaint tracker and advised that complaints management was discussed at the February 17, 2026 meeting with DHW, including follow up questions regarding several historical files.</p> <p>One complaint has been received in 2026, with a possible additional complaint forthcoming.</p> <p>Two new panel members have been appointed to the Complaints Committee and will receive training. Expanded committee capacity is expected to support workload management.</p> <p>Discussion also addressed financial sustainability considerations should complaint volumes increase or matters proceed to hearings with associated legal costs.</p> <p>Action Item(s):</p> <ul style="list-style-type: none"> • Cross-post registrant communications emails in the Registrant Portal. • EDR to attend next Complaints Committee meeting to address any questions or concerns related to leadership changes.
<p>9.0 Appoint board members to board committees and establish terms of reference for each board committee appointed by the Board (R 4.2)</p> <p>Appoint members to Nominations Committee – chair and member.</p>	<p>The Board discussed the requirement under R 4.2 to appoint members to Board committees and establish terms of reference for each committee.</p> <p>It was noted that public members currently serving on statutory committees will continue in their roles during a transitional period. Recruitment of additional public representatives is underway through outreach to NSRHPN.</p> <p>Discussion occurred regarding the most immediate steps required to operationalize committees.</p> <p>Board members agreed that:</p> <ul style="list-style-type: none"> • A survey will be circulated to Board members outlining available committees, expected time commitments, and estimated term lengths • The terms of reference will identify how many members are required per committee

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	<ul style="list-style-type: none"> • Committees will review and formally approve their terms of reference before commencing work • All Board members are encouraged to serve on at least one committee • A general guideline of no more than two committees per member was recommended to support quality participation • Committee composition should reflect the knowledge, experience, and expertise currently available on the Board <p>There was consensus that committee membership should be finalized within the next few weeks.</p> <p>The Nominations Committee (Chair and one member) will be appointed as part of this process.</p> <p>Action Item(s):</p> <ul style="list-style-type: none"> • Circulate committee survey and finalize committee appointments (including Nominations Committee). • Committees to review and formally approve terms of reference prior to commencing work. • Continue transitional management and recruitment of public representatives through NSRHPN.
<p>10.0 QARP Action Plan Item: Create a documented process that outlines how standards are reviewed and updated (standard 3.4)</p>	<p>J. Hemeon presented a draft policy review schedule to ensure that all policies, standards, and forms are reviewed at least once every three years. Having a policy review schedule is in accordance with QAPR Standard 3.4.</p> <p>It was noted that:</p> <ul style="list-style-type: none"> • A consolidated policy inventory has been compiled • The draft schedule outlines when policies will be presented to the Board for review and approval • The schedule is intended to function as a living document <p>Discussion occurred regarding the volume of reviews scheduled for 2026 and whether the timeline is realistic.</p> <p>Board members raised the following considerations:</p> <ul style="list-style-type: none"> • Some policies have not been reviewed in several years and present governance risk if further delayed • Certain policies may require minimal revision and could be approved efficiently • Operational policies should be reviewed by their respective committees (e.g., Complaints, Registration), and Governance). • The three Board policies (Board Code of Conduct, Board Conflict of Interest, Reimbursement of Expenses) are identified in the work plan with an April 30/May 1 deadline • Staggering review cycles may be advisable to avoid clustering all reviews in the same future three-year period <p>It was agreed that:</p> <ul style="list-style-type: none"> • The draft review schedule be approved as a framework

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	<ul style="list-style-type: none"> • Progress updates will be provided at future Board meetings • Staggering of review cycles will be considered to promote sustainability <p>Action Item(s):</p> <ul style="list-style-type: none"> • Implement the approved three-year policy review schedule as a living framework. • Committees to prioritize policies within their mandates and bring forward Board level policies (due April 30/May 1). • EDR to provide progress updates and adjust staggering of review cycles as appropriate.
<p>11.0 Establish a policy or protocol for when registrants contact a board member about an operational issue or governance issue. (R 8.1)</p>	<p>The Board discussed the action item under R 8.1 of the Work Plan to establish a documented protocol outlining how Board members respond when contacted directly by registrants regarding operational or governance matters.</p> <p>It was noted that registrants may contact individual Board members through existing professional relationships. The Board agreed that a clear and consistent process is required to ensure appropriate governance boundaries and communication flow.</p> <p>Discussion occurred regarding whether inquiries should be directed to the Chair or the EDR. The following principles were identified:</p> <ul style="list-style-type: none"> • Governance related matters should be directed to the Chair • Operational matters should be directed to the EDR • To avoid fragmented communication, all Board members should direct registrant inquiries to the Chair in the first instance • The Chair may then delegate operational matters to the EDR as appropriate • If a registrant or staff member contacts the EDR and remains unsatisfied, they may escalate the matter to the Chair. <p>It was further discussed that the Chair should provide periodic summaries to the Board identifying the general nature of inquiries received (practice questions, governance concerns, operational matters), to ensure Board awareness without breaching confidentiality.</p> <p>Board members agreed that a simple written policy outlining this flow should be drafted.</p> <p>It was suggested that where a Board member is uncertain whether a matter is operational or governance related, they should consult with the Chair for clarification.</p> <p>During discussion of communication practices, related governance IT considerations were raised:</p> <ul style="list-style-type: none"> • A resource folder will be created in the online hub (Teams) to support Board access to governance materials

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	<ul style="list-style-type: none"> • Document editing permissions will be reviewed to ensure files are appropriately restricted (view-only vs. editable) to prevent unintended changes, or to allow collaboration • The Board acknowledged the need for a formal policy addressing downloading College documents to personal or employer issued devices • It was noted that documents downloaded to employer-issued devices may be accessible to third parties depending on institutional settings • The development of an information management policy remains part of the workplan and is to be prioritized <p>Action Item(s):</p> <ul style="list-style-type: none"> • Draft Board communication protocol outlining governance/operational inquiry flow for Board review. • Establish governance resource folder; review document permissions • Advance information management policy development.
<p>12.0 Correspondence for the Board from Registrants</p>	<p>Correspondence received from a group of registrants was pre-circulated and discussed. Concerns related to the supervision processes, audit matters, and governance oversight. The memo also included several suggestions regarding budget, staffing, and operational improvements. Board members noted that many of the issues raised are already reflected in the current workplan and action plan priorities, including review of supervision processes. The Chair confirmed that the group was thanked for their engagement and reassured that the Board will reach out if appropriate.</p> <p>No formal action was required at this time.</p>
<p>13.0 Update on Ministerial Direction and QAP Action Plan</p>	<p>C. Charles provided an update on the February 17 meeting with DHW representatives. The meeting primarily addressed financial reporting, CRA compliance matters, audit completion, governance stability, and implementation of the QAP Action Plan.</p> <p><u>Financial Reporting & CRA Compliance</u></p> <p>The Board was advised that:</p> <ul style="list-style-type: none"> • Revised T4s have been issued in relation to prior CRA reporting matters, and the College is awaiting updated confirmation from CRA regarding remittance reconciliation. • Auditors have been engaged and are awaiting CRA confirmation before finalizing the audit reports • No concerns were expressed regarding the College’s ability to satisfy compliance requirements. • The College has not experienced reporting issues since 2021/2022 <p>Discussion occurred regarding operating deficits referenced by DHW. It was noted that a 2025 deficit had been projected, and clarification is required regarding the 2024 deficit reference (including whether it may have been offset by the GIC identified). The College will confirm actuals and provide clarification to DHW.</p>

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	<p>DHW also requested confirmation of Board liability insurance coverage. The relevant policies will be documented accordingly.</p> <p><u>Compliance Monitoring & Action Plan</u></p> <p>The Board reviewed progress on:</p> <ul style="list-style-type: none"> • The consultant review and associated workplan • Implementation of an action item tracking system • Development of compliance monitoring processes (environmental, labour standards, etc.), noting that some elements remain in progress <p>The Board acknowledged that certain short-term priorities have been accelerated by DHW.</p> <p><u>Governance Stability & Capacity</u></p> <p>DHW raised concerns regarding governance stability, recent turnover, and long-term capacity. Historical context of prior DHW intervention (2019/2020) was referenced. The Chair will circulate additional historical documentation to ensure Board awareness of prior oversight.</p> <p>Board members reiterated that recent Board recruitment was successful and interest in governance roles has been demonstrated.</p> <p><u>Potential Amalgamation Discussion</u></p> <p>DHW introduced the possibility of exploring future amalgamation with another regulatory body. No specific partner or timeline was identified.</p> <p>Reasonings include:</p> <ul style="list-style-type: none"> • Financial sustainability • Consolidation of administrative resources • Broader regulatory standardization trends in healthcare <p>Action Item(s):</p> <ul style="list-style-type: none"> • Circulate historical DHW documentation for Board awareness. • Confirm and document Board liability insurance coverage.

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	<ul style="list-style-type: none"> Seek further clarification from DHW regarding potential amalgamation timing and scope.
14.0 Acting EDR Report (DEFERRED)	The Acting EDR Report was pre-circulated. However, discussion was deferred due to time constraints.
15.0 2026-2027 Budget (DEFERRED)	<p>Given time constraints and the pending CRA reconciliation and audit finalization, the Board deferred detailed budget deliberations until updated financial figures are available.</p> <p>It was suggested that an earlier meeting in March may be required to advance budget approval and financial planning once updated figures are available.</p>
16.0 Communication: - Plan townhalls/communique	Discussion included potential town halls and a communication strategy.
17.0 In Camera Session	In-camera session used: MK Jollymore and J. Hemeon were not in attendance
18.0 Adjournment	Meeting adjourned at approximately 4:40 p.m.

Upcoming Meetings		
Date	Format	Time
March TBD	TBD	TBD
May 30 2026	Hybrid	TBD
September 12 2026	Hybrid	TBD
November 21 2026	Hybrid	TBD

Upcoming Training		
Date	Format	Time
April 25, 2026	TBD	TBD
September 26, 2026	TBD	TBD

Summary of Motions Passed: February 21 2026		
Section	Motion	Outcome
2.0	To approve the February 21, 2026 agenda as amended	Moved: C. Charles Second: A. Baxter Vote: All in favor
5.0	To approve the December 2025 Board Meeting Minutes.	Moved: C. Charles Seconded: M. Slipp Vote: All in favor
6.0	To approve the Macro Agenda as drafted, with the addition of competency matrix updating and a Board skills gap analysis, and to refer the document to the Governance Committee for ongoing monitoring, discussion, and revision.	Moved: A. Baxter Seconded: M. Cain Vote: All in favor

Summary of Deferred Items: February 21 2026

Section	Re:
7.0	Anti-Racism Position Statement [& EDIRA Statement etc.]
14.0	Acting EDR Report
15.0	2026-2027 Budget

Summary of Arising Action Items: February 21 2026

Section	Item(s)	Responsible
4.0	<ul style="list-style-type: none"> Chair and EDR to review the Action Item Tracker prior to each Board meeting and provide updates, including identification of risks/concerns. 	Chair and EDR
6.0	<ul style="list-style-type: none"> Update the Board competency matrix and complete a skills gap analysis (target September; subject to Governance Committee review). Governance Committee to assume oversight of the Macro Agenda as a living governance document. Circulate internal call for interest to fill the Secretary role Operationalize the Appointments Committee. 	Nominations Committee Governance Committee Nominations Committee Nominations Committee Chair
7.0	<ul style="list-style-type: none"> Review and revise the EDIRA Statement, Anti-Racism Statement, and Land Acknowledgement, and return to board for discussion/approval. 	Board members
8.0	<ul style="list-style-type: none"> Provide onboarding/training to new committee members Cross post registrant communications/notices in the Members-Only Portal. EDR to attend next Complaints Committee meeting to address any questions or concerns related to leadership changes. 	EDR and Chair Mary Kate Jollymore J. Hemeon
9.0	<ul style="list-style-type: none"> Circulate committee survey and finalize committee appointments (including Nominations Committee). Committees to review and formally approve Terms of Reference prior to commencing work. Continue transitional management and recruitment of public representatives through NSRHPN. 	J. Hemeon Board committee Chairs J. Hemeon
10.0	<ul style="list-style-type: none"> Implement the approved three-year policy review schedule as a living framework. Board level policies due April 30/May 1. EDR to provide progress updates and adjust staggering of review cycles as appropriate. 	J. Hemeon Governance Committee Chair J. Hemeon

<p>11.0</p>	<ul style="list-style-type: none"> • Draft Board communication protocol outlining governance/operational inquiry flow for Board review. • Establish governance resource folder, review document permissions, and advance data management policy development. 	<p>J. Hemeon J. Hemeon</p>
<p>13.0</p>	<ul style="list-style-type: none"> • Circulate historical DHW documentation for Board awareness. • Confirm and document Board liability insurance coverage. • Seek further clarification from DHW regarding potential amalgamation timing and scope. 	<p>Board Chair J. Hemeon Board Chair</p>