



August 21, 2008

**BY REGULAR MAIL AND EMAIL**

**Ron Sapsford**

Deputy Minister of Health and Long-Term Care  
Hepburn Block, 10th Floor  
80 Grosvenor St.  
Toronto, ON M7A 1R3  
Ron.Sapsford@ontario.ca

**Philip Steenkamp**

Deputy Minister of Training, Colleges and Universities  
Mowat Block, 3rd Floor  
900 Bay St.  
Toronto, ON M7A 1L2  
Philip.Steenkamp@ontario.ca

Dear Mr. Sapsford and Mr. Steenkamp:

**Re: Request for referral to Pan-Canadian Process regarding increasing entry to practice education requirements to a Baccalaureate Degree for Registered Respiratory Therapists in Ontario**

On behalf of the Council of the College of Respiratory Therapists of Ontario, the regulatory body for the profession in Ontario, I am writing to you regarding the preliminary results of a 3 year study into entry to practice requirements (ETP) for Respiratory Therapists in Ontario. *We are asking that this request be referred to the pan-Canadian process for consideration of an increase in entry to practice education requirements from a diploma to a baccalaureate degree.* This letter will serve as our *letter of intent* and will briefly describe the results of our study to date, why the Council believes it is in the best interest of patient care in Ontario to increase ETP requirements for Registered Respiratory Therapists and some of the remaining work that is planned should you agree to refer this matter to the pan-Canadian process.

We would also like to highlight that throughout the course of this study we have met and discussed our progress and findings with staff from both the MOHLTC and MTCU on several occasions. Wherever possible we have followed a philosophy of transparency with our Members, stakeholders and government and have updated the progress of our study by posting updates on our website and in the College's *Exchange* newsletter. Furthermore, our study blueprint [*see appendix I*] was based on requirements as set out by government. We have also received full support of our request to increase the ETP in

Ontario from the National Alliance of Respiratory Therapy Regulatory Bodies (NARTRB) and both professional associations: the Canadian Society of Respiratory Therapists (CSRT) and the Respiratory Therapy Society of Ontario (RTSO). [see *appendix II* for a list of NARTRB members, the CSRT and RTSO]

## **Respiratory Therapy Profession Description**

Registered Respiratory Therapists provide care in a variety of healthcare settings and to patients of all ages. The majority of the current 2600 RRTs in Ontario work in acute care hospitals providing their expertise in critical care areas such as adult, paediatric and neonatal critical care units, emergency departments and the operating room (e.g., working as anaesthesia assistants). A smaller number of RRTs work in the private sector or home care providing much needed care to those vulnerable patients who require oxygen therapy or home mechanical ventilation. Our members also specialize in patient education and can be found working in asthma clinics and pulmonary rehabilitation programs for patients with chronic obstructive pulmonary diseases (COPD). Of note, Canada will experience a significant increase in the prevalence of chronic respiratory diseases which will result in an increased demand on the health care system.<sup>1</sup>

### *Severe Acute Respiratory Syndrome (SARS)*

The genesis of the College's examination into the entry to practice education requirements for Respiratory Therapists resulted from the experience of our Members during the 2003 SARS crisis in Toronto. Although our Members were directly affected by the SARS crisis, as the SARS crisis affected the patients that RRTs treat, it was evident early on in the crisis that RRTs were not being consulted. Specifically, the initial government "directives" that were developed and which had direct impact on the practice of our Members, were devoid of RRT input. This resulted in confusion and the inability to implement the directives because some of the information/guidance was not possible to implement. In the aftermath of SARS the RT profession strove to understand why it took so long to be heard and for the advice of the RT profession to be implemented. One prevailing theme that arose following SARS was the supposition that RRTs were not fully recognized or acknowledged for their expertise because they were not being educated to the baccalaureate level at universities alongside physicians, nurses, pharmacists and physiotherapists to name a few.

### *Current RT education in Ontario*

Respiratory Therapy education program in Ontario is currently offered in 5 community colleges and the Michener Institute for Applied Health Sciences. All of these programs are 3-year advanced diploma programs. The Michener Institute offers a joint diploma/degree program with Dalhousie University in Halifax, leading to a Bachelor of Applied Health Sciences in Respiratory Therapy.

1. Algonquin College, *Ottawa*
2. Canadore College, *North Bay*
3. Conestoga College, *Kitchener*

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<sup>1</sup> Public Health Agency of Canada, 2001

4. Fanshawe College, *London*
5. La Cite collegiale, *Ottawa*
6. The Michener Institute for Applied Health Sciences, *Toronto*

#### *Current RT education in Canada*

RT education programs are currently offered in 8 provinces: Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland, Nova Scotia, Ontario and Quebec. There are 19 RT programs that are accredited through the national accrediting body, the Council on Accreditation of Respiratory Therapy Education (CoARTE). [*Please see appendix III for a list of RT programs in Canada.*]

#### *Canadian RT Degree Programs*

Of the 19 RT programs in the country, **three** programs are already at the baccalaureate level: The University of Manitoba, Dalhousie University and the University of New Brunswick. Furthermore, there are numerous degree completion opportunities for Respiratory Therapists leading to bachelor degrees in applied health sciences/respiratory therapy, adult education, and health service management.

#### *Interprofessional Education and Practice*

There is growing evidence that that optimal patient care is provided by interdisciplinary teams and that there is a need to move toward greater integration among health care providers.<sup>2</sup> The MOHLTC and the MTCU agree that current education of health care professions is “siloed” in Ontario.<sup>3</sup> Studies have indicated that educational experiences and the socialization process that occurs during the training process of each HCP leads to the entrenchment of separate “professional cultures” which contribute to the challenges of effective interprofessional teamwork. Enabling RTs to be educated along side those professions they will be working with (e.g., physicians, nurses, pharmacists) will facilitate the development of common values, language and problem-solving approaches.<sup>4</sup> It is also noteworthy that the MOHLTC has introduced a new role in Ontario, that of the Physician Assistant (PA). New PA education programs are being introduced in Ontario and the PA entry-to-practice education requirements will be at the baccalaureate level.

### **The Study Blueprint and timelines**

#### *Phase I of the study- Preliminary information gathering*

We engaged the assistance of consultant Harry Cummings and Associates (HCA) to conduct focus groups with randomly selected RRTs in 5 locations in Ontario: Toronto, London, Hamilton, Ottawa and Sudbury. The majority of the focus group RT participants (72%) supported the change in ETP requirement from diploma to degree. In addition, HCA conducted key informant interviews with RT managers and managers of RTs who were not members of the profession. Concurrently, written questionnaire/ surveys were sent to key RT stakeholders including other RT regulatory bodies in

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<sup>2</sup> Health Canada, 2006

<sup>3</sup> Proceedings Report for the Summit on Advancing Interprofessional Education and Practice, June 14 and 15, 2006, Toronto, Ontario.

<sup>4</sup> Curran, V. (2004). Interprofessional Education for Collaborative Patient-Centred Practice: Research Synthesis Paper. Health Canada.

Canada, RT professional associations, RT educational programs, the Ontario Hospital Association and RT employers. Overall, the Respiratory Therapy managers and employers strongly supported (89.5%) the move from diploma to degree ETP requirement. Of these, half of the non-Respiratory Therapy employee respondents (including the OHA) clearly supported the change to a degree entry-to-practice requirement. Four of the five regulators / associations respondents strongly supported a move from a diploma to degree program for entry-to-practice. The results of phase I of the study can be found on the CRTO's website <http://www.crto.on.ca/html/degree-project.htm>.

*Phase II of the study - literature search; consultation with government; advisory group*  
We engaged the assistance of HCA and a Respiratory Therapist doctoral student to assist us with phase II of the study. A comprehensive literature search was completed examining evidence surrounding entry to practice education for health care professionals and patient outcomes. The literature review found significantly higher critical thinking ability, more professionalism, higher professional autonomy and greater impact on interprofessional collaboration with higher levels of nursing education.

College staff along with Harry Cummings and Associates also met with MOHLTC and MTCU staff to gain a better understanding of the issues surrounding any proposed change in ETP. Student RTs from all Ontario programs (and all 3 years of study) were invited to respond to a web-based survey regarding their views on any possible change in entry-to-practice for RTs. 66% of the students indicated they would have preferred that the RT program was a degree program. In addition, we convened an Advisory Group comprised of representatives from all 6 RT education programs in Ontario and representatives from the provincial and national RT associations to explore degree education models and options.

*Phase III of the study - consultation with RT programs and government*  
In-depth interviews with officials of the six colleges that currently offer RT programs in Ontario were conducted. The positive aspects of moving from diploma to degree requirement as ETP, as seen by the colleges included: better critical thinking and research skills; increased quality of health care; increased ability to deal with a complex health care environment; and opportunities for post-graduate study and advancement. Some of the concerns expressed related to costs and the need for faculty to upgrade education.

### **Key Findings**

The key findings to date suggest that increasing entry to practice will better prepare RRTs to contribute to health care in Ontario and will specifically:

- augment research skills which will ultimately better serve the Ontario public when the province is faced with another SARS or SARS-like crisis or a pandemic influenza;
- enhance critical thinking, problem-solving and decision-making skills;
- facilitate interprofessional education and practice since RRTs will be educated alongside those healthcare professionals they interact with the most (i.e., physicians, nurses, physiotherapists and pharmacists);
- better prepare RRTs for management and leadership positions;

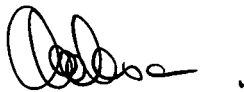
- better prepare RRTs to respond to the changing technology and the evolving scope of practice, responsibility and accountability of Respiratory Therapy;
- improve perception by other health professions, the public and government on level of expertise;
- attract and recruit more suitable candidates into the Respiratory Therapy profession and graduate RRTs in less time (i.e., 4 years instead of 5-7 years for those students who enter the program with a degree or some university); and
- provide career and education laddering opportunities.

In summary, the CRTO has taken a systematic and research-based approach to answering the question of whether patients of Ontario would be better served if the entry to practice education was a baccalaureate degree. The Council did not enter this initiative lightly, nor did they do so with a bias; instead they took a neutral position in their approach to the issue. Following the results of the first 3 phases of the study, the *Council voted unanimously* to write a letter of intent to request a referral to the pan-Canadian process for consideration of a change in the entry to practice education requirement from a diploma to a degree for Respiratory Therapists. Although we have not yet completed the entire study, we are of the view that the outcomes of the first 3 phases provided strong evidence for the need of increasing ETP for Respiratory Therapists. Should you refer this matter to the pan-Canadian process we are quite prepared to enter into and fulfill the rigorous application process and to complete the final phase of the study which consists of consulting with all CRTO Members and stakeholders through a questionnaire/survey, preparing a gap analysis and publishing the results of the study.

We respectfully ask that you provide us with the opportunity to proceed through the pan-Canadian process and eagerly look forward to your response.

Should you have any questions or require additional information please contact me at 416-591-7800 ext 21.

Sincerely,



Christine Robinson MEd.  
Registrar and CEO  
robinson@crto.on.ca

c. Susan Martin RRT, CRTO President  
James McCormick RRT, President  
NARTRB  
Patrick Nellis RRT, President, RTSO  
Stephen Cheng, MOHTLC  
Jeff Goodyear, MOHLTC  
Marilyn Wang, MOHLTC

Dr. Joshua Tepper, MOHLTC  
Francis Lamb, MTCU  
Monique Wernham, MTCU

**College of Respiratory Therapists of Ontario**  
**Blueprint: An approach to a study into baccalaureate degree level  
 entry-to-practice for Respiratory Therapy**

STEPS		PARTICIPANTS	TIME LINE
<b>PHASE 1</b>			
1.	<b>Brainstorming</b>	staff	05/03/08
2.	<b>Registration Committee support for Blueprint</b>	Registration Committee	05/03/17
3.	<b>Information to members re: investigating RT degree initiative; website and March mailing</b>	staff	March 2005
4.	<b>Preliminary information gathering</b>		
4.1	Information concerning other College's experiences	Selective Colleges who have gone through the process (CNO; OT)	April 2005
4.2	Literature search; ETP credentials	staff	May/June 2005
4.3	Current status of degree initiatives and programs in RT	RT Programs; CSRT; Manitoba: Dalhousie University, American experience – (AARC)	November 2005
4.4	Preliminary Consultation with associations and regulators	Provincial and National RT regulators and professional associations	October 2005
4.5	Identify issues	<u>Focus groups:</u> - members - RT employers/managers <u>Other:</u> - RT programs coordinators - non-RT managers/ employers - OHA - OPSEU	August-September 2005  October 2005
4.6	Outline government principles– see template	staff	March 2005
4.7	Outline government questions – see template	staff	March 2005
4.8	Results of preliminary info gathering - report to Council		February 2006
4.9	Policy decisions	Registration Committee/Council budgetary considerations	January/February 2006

STEPS	PARTICIPANTS	TIME LINE	
<b>PHASE 2</b>			
5.1	<b>Comprehensive literature search; gap analysis</b>	Mika Nonoyama RRT, PhD (c)	June/July 2006
5.2	<b>Meet with Ontario Ministries: Health and Long Term Care; Training Colleges and Universities; Citizenship and Immigration.</b>	Staff: CR, MB, AW	April/May 2006
5.3.	<b>Convene Advisory Group to identify options/transitional issues</b>	Representatives from the 6 RT programs; CR, MB, AW.	October 2006
5.4	<b>Survey RT Students</b>		April - September 2006
5.5	<b>Report to Registration Committee/Council</b>		May/June 2007
6.0	<b>Explore possible Educational Models for RT Degree</b>	HCA meetings with staff	
6.1	Research. Meet with MTCU/MOHLTC regarding funding; degree-granting College programs; eligibility for entry to university graduate programs.	Harry Cummings and Associates; CR, MB	June 2007 Sept 2007
6.2	Meet with Ministry of Citizenship and Immigration	CRTO Staff (CR;MB)	Summer 2007
6.3	Meet with each RT school, individually.	Harry Cummings; CR; MB.	October/ November
6.4	Report to Registration Committee and Council for decision	Harry Cummings; CR; MB.	January 2008
7.0	<i>Depending on the recommendation of the Registration Committee and Council's decision:</i>		<b>February 2008</b>
a.	<i>Take no further action, or</i>		

STEPS		PARTICIPANTS	TIME LINE
b.	<i>Submit a letter of interest to Deputy Ministers of Health and Long Term Care and Training, Colleges and Universities</i>		Summer 2008
<b>PHASE 4 (dependent on outcome of 7.0 above)</b>			
<b>8.0</b>	<b>Consultation process</b>		
8.1	Consultation process Develop research tool	Consultant and staff Council approval	
8.2	Consultation process Distribute research tool	<ul style="list-style-type: none"> <li>▪ Schools/universities (e.g., Ryerson, Michener, University of Ontario Institute of Technology; Dalhousie University)</li> <li>▪ CRTO Members</li> <li>▪ The public</li> <li>▪ CSRT</li> <li>▪ RTSO</li> <li>▪ Employers</li> <li>▪ RT managers</li> <li>▪ Canadian RT regulators and associations</li> <li>▪ Other Ontario Health Colleges</li> <li>▪ Other HCPs (e.g., respirologists, anesthesiologists, intensivists, pediatricians, neonatologists, nurses,)</li> <li>▪ Prospective students</li> <li>▪ Current students</li> <li>▪ Government</li> </ul>	
8.3	Compile results of research	Staff and/or consultant	
<b>9.0</b>	<b>Publish outcome of study</b>		
9.1	Add history of development and training of Respiratory Therapy; changes in scope of practice	CSRT/RTSO	
9.2	Add synopsis of literature search		
9.3	Add results of consultation	staff/consultants	
9.4	<i>Discussion and decision</i>	Registration Committee/Council	

**The National Alliance of Respiratory Therapy Regulatory Bodies and  
Respiratory Therapy Professional Associations**

<b>Canadian RT Regulators and Professional Associations</b>	<b>Presiding Officers</b>
Alberta College and Association of Respiratory Therapy Suite # 370, 6715 8 <sup>th</sup> Street N.E. Calgary, Alberta T2E 7H7	Cliff Seville, President Bryan Buell, Registrar
Manitoba Association of Registered Respiratory Therapists Box 2087 Winnipeg, Manitoba R3C 3R4	Tracy Simcoe, President Shane McDonald, Registrar
Ordre professionnel des inhalothérapeutes du Québec 1440 rue Saint-Catherine Ouest; bureau 320 Montreal, QC H3G 1R8	Céline Beaulieu, President Josée Prud'Homme, Executive Director and Secretary
Nova Scotia College of Respiratory Therapists PO Box 9410, Station A Halifax, NS B3K 5S3	Barbara MacDonald, President Shannon McDonald, Interim Registrar
Canadian Society of Respiratory Therapists 102-1785 Alta Vista Drive Ottawa, ON K1G 3Y6	Ray Hubble, President Christiane Ménard, Executive Director
Respiratory Therapy Society of Ontario 6519-B Mississauga Rd. Mississauga, ON L5N 1A6	Patrick Nellis, President

## Canadian Respiratory Therapy Education Programs

<b>Province</b>	<b>College/University</b>
British Columbia	<b>Thompson Rivers University</b> <i>(formerly) University College of the Cariboo (UCC)</i> Box 3010 900 McGill Rd., Kamloops, BC, V2C 5N3
Alberta	<b>Northern Alberta Institute of Technology (NAIT)</b> 11762 106 Street, Edmonton, AB, T5G 2R1  <b>Southern Alberta Institute of Technology (SAIT)</b> 1301 16th Ave. NW, Calgary, AB, T2M 0L4
Manitoba	<b>University of Manitoba - School of Medical Rehabilitation</b> R106-771 McDermot Ave., Winnipeg, MB, R3E 0T2
Ontario	<b>The Michener Institute for Applied Health Sciences</b> 222 Saint Patrick Street, Toronto, Ontario, M5T 1V4  <b>Algonquin College of Applied Arts and Technology</b> 1385 Woodroffe Ave., Building J, Room 117, Ottawa, Ontario, K2G 1V8  <b>Canadore College of Applied Arts and Technology</b> P.O. Box 5001, 100 College Drive, North Bay, Ontario, P1B 8K9  <b>La Cité collégiale - Collège d'arts appliqués et de technologie</b> 801 promenade de l'aviation, Ottawa, Ontario, K1K 4R3  <b>Fanshawe College of Applied Arts and Technology</b> 1460 Oxford Street East, London, Ontario, N5V 1W2  <b>Conestoga College Institute of Technology and Advanced Learning</b> 299 Doon Valley Drive, Kitchener, Ontario, N2G 4M4
Quebec	<b>Vanier College</b> 821 Sainte-Croix Blvd., Montreal, QC, H4L 3X9  <b>Le Cégep de Ste-Foy</b> 2410, chemin Sainte-Foy., Sainte-Foy, QC, G1V 1T3  <b>Le Cégep de Sherbrooke</b> 475, rue du Parc., Sherbrooke, QC J1E 4K1  <b>Collège de Rosemont</b> Programme d'inhalothérapie 6400 16e avenue, (Rosemont) Montréal, QC H1X 2S9  <b>Cégep de Chicoutimi</b> Programme d'inhalothérapie 534, rue Jacques-Cartier Est, Chicoutimi QC G7H 1Z6

<b>Province</b>	<b>College/University</b>
Nova Scotia	<b>QEII/Dalhousie School of Health Sciences</b> 1278 Tower Road, 6th Floor Bethune Bldg., Halifax, NS, B3K 6A3
New Brunswick	<b>New Brunswick Community College (NBCC) - Saint John</b> P.O. Box 2270, Saint John NB, E2E 1H8  <b>Collège communautaire du Nouveau-Brunswick (C.C.N.B.),            campus Campbellton/Université de Moncton/Régie régionale de la            santé Beauséjour, Hôpital régional</b> Dr-George-L.-Dumont de Moncton C.P 309 47, avenue Village Cambellton NB E3N 3G7
Newfoundland	<b>College of the North Atlantic (CNA)</b> Prince Philip Drive Campus 1 Prince Philip Drive, P.O. Box 1693, St. John's, NF, A1C 5P7