

Overview

The [Health Professions Procedural Code](#) (the Code) sets out specific reporting obligations for employers/facilities where Respiratory Therapists (RTs) practice. The purpose of this Fact Sheet is to clarify the reporting obligations, e.g., what needs to be reported and when. Additional information about the reporting requirements can be obtained by contacting the College of Respiratory Therapists of Ontario (CRTO) [Professional Conduct Department](#).

What are Employers'/ Facilities' reporting obligations?

Hospitals, home care companies and other employers of RTs are obligated to submit a report to the CRTO if they:

- Have reason to believe that an RT:
 - has sexually abused a patient/client
 - is incompetent
 - is incapacitated, or
 - has committed an act of professional misconduct.
- Terminate the employment of an RT for reasons of professional misconduct, incompetence or incapacity.
- Suspend an RT for any length of time (even if only for one shift) for reasons of professional misconduct, incompetence or incapacity.
- Restrict an RT's practice in any way (e.g., limit an RT's area of practice to one setting, such as pulmonary function, or assign an RT to administrative duties) for reasons of professional misconduct, incompetence or incapacity.
- Intended to terminate/suspend and/or restrict an RT's practice for reasons of professional misconduct, incompetence or incapacity, but the RT resigned before the action was carried out.
- Are conducting an investigation into allegations related to professional misconduct, incompetence or incapacity and an RT resigns or relinquishes/restricts their own practice during or after the investigation.
- Take any other disciplinary action against an RT that is not listed above for reasons of professional misconduct, incompetence or incapacity.



Mandatory Reporting by Employers/Facilities **Fact Sheet**

Employers¹ of Interjurisdictional RTs practising under the “As of Right” exemption are required to report to the CRTO if they have reasonable grounds to believe that an Interjurisdictional RT has sexually abused a patient. In addition, it is:

- Strongly recommended that employers report to the CRTO any serious wrongdoing, or professional misconduct by an Interjurisdictional RT.
- Recommended that employers report to the CRTO when an Interjurisdictional RT resigns, is terminated, or suspended due to an unauthorized collection, use, disclosure, retention, or disposal of personal health information.

Timelines for Reporting Information to the CRTO

Employers/facilities are required to submit reports to the CRTO within 30 days of any action/incident or sooner if there is reason to believe that patients/clients are at risk of being harmed.

Regardless of whether an RT’s manager, supervisor or employer is a regulated healthcare professional, the requirement to submit a report is the same.

What to include in a report?

The employer/facility report must contain the following information:

- a) The name of the person filing the report
- b) The name of the RT who is the subject of the report
- c) An explanation of the alleged sexual abuse, professional misconduct, incompetence or incapacity
- d) If the reported conduct/actions of the RT relate to interventions provided to a particular patient, the name of the patient.

Note: the name of a patient who may have been sexually abused must not be included in a report unless the patient, or if the patient is incapable, the patient’s representative, consents in writing to the inclusion of the patient’s name.

The CRTO website has a [fillable form](#) which will assist an employer/facility in filing a mandatory report.

¹ Interjurisdictional RTs practising under the “As of Right” exemption are only permitted to provide professional services in public hospitals, long-term care homes and the University of Ottawa Heart Institute.



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What does the CRTO do once it receives a report?

The CRTO will review the report and may contact the employer/facility for additional information. If the Registrar believes that there are “reasonable and probable grounds” that the RT has committed an act of professional misconduct or is incompetent, a formal investigation may occur. In cases where the Registrar believes that the RT may be incapacitated, a formal health inquiry may occur to identify any underlying condition(s)/illness(es) that appear to be affecting the RT’s ability to practice safely or ethically.

Failure to submit a report

Failure to submit a mandatory report may result in a fine of up to \$50,000 for an individual or \$200,000 for a corporation (employer/facility).

In instances where a mandatory report is not submitted, and the individual required to submit the report is a regulated healthcare professional, the lack of reporting by the individual may be viewed as an act of professional misconduct.

Note: Under the Code, no action or other proceeding shall be instituted against a person for filing a report in good faith.

Additional Resources

- [Mandatory Reporting by Members Fact Sheet](#)
- [Abuse Awareness and Prevention Professional Practice Guideline](#)
- [“As of Right” Guidance Document](#)

References

- Sections [85.2 – 85.5](#) of the *Health Professions Procedural Code*

Contact Information

College of Respiratory Therapists of Ontario
180 Dundas Street West, Suite 2103
Toronto, ON M5G 1Z8

Telephone: 416-591-7800
Toll-Free (in Ontario): 1-800-261-0528
General Email: questions@crto.on.ca



College of Respiratory
Therapists of Ontario

Ordre des thérapeutes
respiratoires de l'Ontario