# **ANNUAL REPORT** 2004-2005



**College of Respiratory Therapists of Ontario** 





The College of Respiratory
Therapists of Ontario, through
its administration of the Regulated
Health Professions Act and the
Respiratory Therapy Act, is dedicated
to ensuring that respiratory care
services provided to the public by
its Members are delivered in a safe
and ethical manner.

# REPORT FROM THE PRESIDENT AND THE REGISTRAR

e are pleased to submit this report for the year 2004 - 2005. As we reflect on our activities since the last annual report we are confident that the CRTO is following its strategic plan. All too often organizations spend considerable time and monies in developing a plan only to store the document on the shelf. Without periodic review of the organization's charted course, it becomes hard to keep the vision alive. Here are a few of our initiatives in the last year.

## THE ALLIANCE - TOWARD A NATIONAL PROCESS

As part of the College's aim to nurture and leverage partnerships with important external stakeholders, the College has spent considerable energy working with its Alliance partners across the country refining a process wherein we can truly realize both a common profile for education purposes (the National Competency Profile) and a common assessment/ licensing approach (a common exam or other reciprocal licensing mechanism). Much remains to be negotiated including more dialogue nationally, with the clinicians/ educators, relative to curriculum development and an agreed to weighting of the competencies. The Alliance met a number of times and will be meeting again at the CSRT forum in June 2005. We remain optimistic that the Alliance can achieve a common process for education and entry into the profession from coast to coast. Indeed, one outcome was a unanimous motion to support in principle a common exam process.

# EDUCATING THE PUBLIC - FEDERATION OF HEALTH REGULATORY COLLEGES OF ONTARIO

There is an old saying about strength in numbers and in terms of the provincial government's communications with our College and our issues, the Federation is a vital link to achieving that objective. Having been fortunate to attend these meetings now for two consecutive years, we can share with you our observations that indeed, our active participation with and within the FHRCO is both necessary and of strategic significance. Our mandate of public protection has received a big boost from a FHRCO initiative aimed at increasing the public awareness of all health professionals, both regulated and un-regulated, with a view to encouraging the public to learn more about how regulated health care professionals can deliver safe, ethical care in Ontario. The project includes a radio campaign called, "It's Not a Game: Your Health Matters."

## **ENTRY TO PRACTICE**

During the College's strategic plan exercise we identified the need to ensure that changes to entry to practice requirements be based on needs assessment research and the public interest. At the February 2005 meeting, Council referred this matter to the Registration Committee that has approved an approach to research the merits, or otherwise, of baccalaureate degree level entry-to-practice for Respiratory Therapy. A message to this effect has been forwarded to our Members, and Council and all stakeholders will be provided with updates on

the Committee's consultation process and findings, which will be presented to Council when finalized.





# SUPPLY OF RESPIRATORY THERAPISTS VS DEMAND AND ABILITY TO MEET SUGGESTED NEEDS

We are aware that supply and demand issues have been raised at a number of levels and that any request for an increase in the current supply of Respiratory Therapists needs to be supported with hard data. In dealing with this issue, the RTSO has offered to follow-up on a recent government report and investigate sources of statistical information.

#### **CRTO FINANCES**

You will see from the Audited Statements that the recent fiscal year 2004-2005 has ended with the College in a healthy financial position, including a small surplus in our operations. The Council allocated some of the surplus to the Fees Stabilization Reserve Fund for the first time.

## **LEGISLATIVE CHANGES**

The College, after consultation with Members, recently made a submission to government regarding proposed Registration Regulation amendments which include:

- standard Terms, Conditions and Limitations on Graduate Certificates of Registration,
- referral to the QA Committee for Members returning to "active" status after more than 3 years as "inactive," and
- the insertion into the Regulation of current By-law provisions related to registration renewal, suspension, revocation, resignation and penalty fees.

The College, both individually and through the Federation, continues to be involved in a variety of legislative change initiatives including the RHPA Review by HPRAC.

#### **IN CLOSING**

We would like to thank all the Council and Committee Members who have given so much of their time, efforts and expertise to ensure that the College fulfills its statutory mandate, and our CRTO Staff, for their dedication, hard work and loyalty in carrying out the directives of Council. Finally, we would like to thank all of our CRTO Members for their efforts in responding to the various, and at times numerous, consultation papers that have been circulated via mail and email. Your responses have reaffirmed the positive communications and atmosphere we have been striving to restore between the College and its Members. Thank you.

James B. McCormick, RRT, RRCP, President, CRTO Gord Hyland, Registrar & CEO, CRTO

#### **EXECUTIVE COMMITTEE**

The Executive Committee met 10 times during the 2004/2005 fiscal year and the following is a brief overview of our work during that time.

## **Mediation Milestone**

The Executive Committee continues to meet with the RTSO and a milestone announcement was made by outgoing RTSO President Rick Culver that, subsequent to a membership vote which overwhelmingly favoured an end to mediation, the RTSO announced to the AGM membership that mediation with the CRTO was declared to be completed. President Jim McCormick received a formal letter signed by Michael Keim, incoming RTSO President, that the RTSO board was pleased to declare an end to mediation. Mr. Keim referred to a new climate of trust and respect between our two boards.

# **Committee Appointments**

At the December 2004 meeting the Executive Committee's primary task was to review the Committee structure and composition within Council and appoint Vice Chair, Chair and Committee Members to all our standing Committees save the Executive, which is elected by Council. Committee composition is available on the CRTO web site.

## **Finances**

Throughout the year the Executive Committee reviewed the College's financial status on an ongoing basis. It was noted by our auditor, Mr. Vinay Raja, that the College is "in a very healthy position" and for the first time some of the surplus has been allocated to the Fees Stabilization Reserve Fund. Our former President, Mr. Keith Olimb is to be applauded for his vision regarding this financial strategy. The Executive Committee considered a request for a contribution to the CSRT for use of the Occupational Profile and approved a one-time payment of \$3,000.00 to the CSRT in recognition of using the CSRT Occupational Profile. The Executive Committee also supported a commitment of \$5,000.00 per year for the next 3 years to fund a Federation public education/awareness program concerning the health regulatory Colleges, an initiative that was unanimously supported by Council. The Executive Committee also approved the allocation of \$20,000.00, in principle, to cover the cost of the Professional Standards Assessment item development as requested by the Quality Assurance Committee and voted to accept the Performance Assessment Group Inc. as the facilitator for the PSA development process.

#### Office Lease

After lengthy negotiations with the landlord, consultations with our real estate agent and tours of potential office space, the Executive Committee agreed on August 18, 2004 to accept the terms of a 10-year (January 1, 2005 to December 31, 2015) "Offer to Lease" at 180 Dundas St W., Suite 2103 (2,410 rentable square feet). The details of the offer were circulated to Council for information and approval on August 17, 2004. There being no objections, the lease has now been finalized by the Registrar and the Landlord.

# By-law and Policy Amendments

The Committee dealt with a number of proposed By-law amendments and policy amendments including those dealing with Life Members, Honourary Members, Academic Members of Council, Responsibilities of Committee Chairs and Liability Insurance.

## Resignation of Keith Olimb

It was with regret that CRTO President Jim McCormick received the resignation of Keith Olimb from Council on August 3, 2004. Keith was a Member of Council from November 24, 2000 to August 3, 2004 and President of the College from November 29, 2002 to November 27, 2003. We are indebted to Keith for the contribution he has made to the profession and to the College during his tenure.

## Referrals Regarding Members

Type of referral	RESOLUTION
Mandatory termination report	Voluntary acknowledgement and undertaking; appear before the Executive Committee to be cautioned
Mandatory termination report	Voluntary acknowledgement and undertaking
Mandatory termination report	Written warning
Mandatory termination report	Still under investigation
Mandatory termination report	Still under investigation
Registrar's referral	No action
Registrar's referral	Still under consideration

# **COMMITTEE REPORTS**









# Referral Concerning a Non-member

In February 2004 the College was made aware that an individual who was not a Member of the College was allegedly holding himself out as a Registered Respiratory Therapist. The College conducted an investigation and the investigator's report indicated that Mr. Deodat Lillie had told the investigator that he was a Respiratory Therapist and provided him with a business card identifying himself as Deodat Lillie, R.R.T. Registered Respiratory Therapist in contravention of section 9 of the Respiratory Therapy Act. At the direction of the Executive Committee, the College made an application for a restraining order requiring Deodat Lillie to comply with the legislation. Mr. Lillie consented to the Order and on May 19, 2004 the application was presented at the Superior Court of Justice and the Court Ordered that Deodat Lillie comply with section 9 of the Respiratory Therapy Act, 1991 and, in particular that Deodat Lillie refrain:

- (a) from using the title "respiratory therapist" or a variation or abbreviation or equivalent in another language, and
- (b) from holding himself out as a person who is qualified to practise in Ontario as a respiratory therapist or in a specialty of respiratory therapy.

The Court also ordered Deodat Lillie to pay partial legal costs to the College of the application in the amount of \$3,000.00.

Mr. Lillie has since become a Member of the College.

James B. McCormick, RRT, RRCP, Chair

## PATIENT RELATIONS COMMITTEE

The Patient Relations Committee is responsible for developing, establishing and maintaining a Patient Relations Program that includes Member education, public information, as well as setting guidelines for Members' conduct with patients. This Committee also advises Council on a Communications Plan and recommends amendments to the College's Professional Practice Guidelines. The Committee is mandated by the government to administer the College's program for funding therapy and counselling for eligible persons who were sexually abused by a Respiratory Therapist.

The Patient Relations Committee (PRC) had five meetings over the past year. In addition to these regular meetings a small working group comprised of several Members of the PRC and the RTSO met several times to work on the joint communications strategy.

In summary, the following matters were accomplished or are currently in progress:

- PRC Goals were reviewed and revised to reflect current needs identified by the Committee and CRTO Members.
- The following Professional Practice Guidelines were amended after approval from Council:
  - Responsibilities under Consent Legislation
  - Orders for Medical Care
- Professional Practice Guidelines in progress:
  - Proposed PPG on Dispensing Medications: currently awaiting Member feedback.
- A successful joint venture between the RTSO and the CRTO in carrying out the Communications Strategy.
  - Published a number of stories highlighting Respiratory Therapy in health related publications.
  - Exhibited at the annual conference for Ontario School Guidance Counsellors and high school career fairs.
  - Generated Public Relations Opportunities:
    - Exhibited at two Toronto Raptors Basketball Games.
    - RTs were interviewed by Rogers Community Television.
    - Participated in public advertising opportunities.
- Communications with CRTO Members
  - Started sending email updates to Members along with regular mailings.
  - Distributed Consultation Papers for Member Feedback.
  - Participated in a number of site visits with students and current Members.
- The Standards of Practice document was reviewed by the Registration, Quality Assurance and the Patient Relations Committees and the suggested revisions were approved by Council in November 2004. The revised Standards of Practice document was mailed to all Members in January 2005.
- A College position statement regarding Respiratory Therapists working as Anesthesia Assistants is currently under consideration.

Susan Bryson, Chair

#### **QUALITY ASSURANCE COMMITTEE**

In 2004-05 the Quality Assurance Committee met on seven occasions and was able to put its plan into action. During the first few months of the year, College staff presented Professional Portfolio Workshops at a dozen locations throughout the province. Over 15% of the Membership attended these sessions which guided them through the process of documenting their learning.

Throughout this time, the Committee continued to develop the content for the on-line, open-book Professional Standards Assessment (PSA). With the assistance of a consultant, the Committee determined the Blueprint on which the PSA would be based. The Blueprint outlines the legislation, standards and guidelines on which Members will be assessed. In the summer of 2004 a Working Group of RTs from a variety of backgrounds met for five days to develop the questions for the PSA.

On September 1st, 10 per cent of the Membership was randomly selected and notified of their requirement to submit their Professional Portfolios for evaluation. These Members were also asked to pilot the PSA to assist the College by testing the usability of the technology, the fairness and clarity of the questions, and their overall impression of the tool.

The majority of the randomly selected Members completed the PSA. Overwhelmingly, the College heard from Members that the open-book approach was a non-threatening and supportive way for the College to ensure that Members reviewed the legislation, standards and guidelines of the profession. Members' feedback will be reviewed by the Committee and Working Groups for making future improvements.

As part of the new Quality Assurance Program, RTs from across Ontario were approved for the role of Professional Portfolio Reviewers. After completing a two-day training session, the Reviewers utilized an on-line assessment tool to file reports on Members' Portfolios to the College. These reports, along with the Members' Portfolios were subsequently reviewed by Panels of the Committee. This was done to ensure that the Reviewers were assessing Portfolios at the same level, and providing similar feedback to the Members.

The Committee is pleased to report that nearly 90% of the Professional Portfolios either met or exceeded the minimum expectations. Those Members who did not achieve the minimum requirements were directed to meet with College

staff to gain assistance on how to better complete the four-step process of documenting their learning. The Committee expects to revise the format of the Portfolio form to help clarify the expectations. As part of the Committee's on-going commitment to assist Members in meeting the requirements, College staff are again planning to provide Portfolio Workshops in the coming year.

Harold Featherston, RRT, RRCP, Chair

#### **REGISTRATION COMMITTEE**

The College sets the requirements for registration and registers only those who have met these requirements. The Registration Committee carries out registration-related duties in accordance with the Regulated Health Professions Act, the Respiratory Therapy Act, the Registration Regulation and the By-laws and Policies of the College. Specifically, the Committee:

- Develops policies and makes recommendations regarding the criteria for certificates of registration with the College;
- 2. Considers referrals from the Registrar, of applications that do not appear to meet all of the registration requirements;
- Approves Certification Programs for advanced prescribed procedures below the dermis;
- 4. Considers requests from current Members to remove or modify terms, conditions or limitations;
- Participates in hearings or review of the Committees decisions by HPARB;
- Ensures that the registration examination approved by Council meets its objective; and
- Ensures that the Entry-to-Practice Competencies are relevant and current.

There were five meetings of the Registration Committee over the course of last year. In addition, 16 Panels were convened to consider registration referrals from the Registrar and requests from Members to have terms, conditions and limitations on their certificates lifted or revised. The Committee reviewed and approved 7 certification programs for advanced prescribed procedures below the dermis.

# **COMMITTEE REPORTS**



# Registration Committee Highlights:

- The Committee conducted an extensive review of the Registration Regulation. As a result several amendments to the regulation were drafted. These include:
  - the standard Terms, Conditions and Limitations imposed on Graduate Certificates of Registration;
  - specific requirements on those Members returning to active status where the Member has not practised for more than three years;
  - registration renewal, suspension, revocation and resignation issues (currently under the College's By-law);
  - current standard of practice that Members are required to practise only in the areas of Respiratory Therapy in which they are educated and experienced.

The proposed Regulation amendments were approved by Council for Member consultation and were mailed to all Members for input in October 2004. They have since been submitted to government.

- \* Note: The Registration Regulation amendments regarding designation were passed by government on May 31, 2005. As of this date the legal mandatory designation for CRTO General Members is RRT. However, during the time covered by this Annual Report (March 1, 2004 to February 28, 2005), the required designation was RRCP. Therefore the designations "RRT, RRCP" have been used throughout the document.
- The Committee began a review of the Prescribed Procedures Regulation. Under the Respiratory Therapy Act, Members of the College are authorized to perform "prescribed" procedures below the dermis, subject to any terms, conditions or limitations they may have on their certificate of registration. The Prescribed Procedures Regulation identifies these procedures and separates them into three categories; basic, added and advanced. The Committee developed a Members' survey to open the discussion and invite Members' comments on the issues surrounding prescribed procedures below the dermis. The survey has been approved by Council for distribution to Members.
- Two Committee Members participated, with representatives from the Quality Assurance and the Patient Relations Committees, in a review of the Standards of Practice document. The revised document has been approved by Council.

- The Committee drafted a policy on exam re-writes. Under this new policy, exam candidates will initially be allowed up to three attempts to write the approved exam. For each subsequent attempt the candidate must provide the Registration Committee with an upgrading study plan.
- The Registration Committee revised its **policy on Inactive Members** returning to active practice. Under this new
  policy, following a change to active status, Members who
  have held inactive status for more than three consecutive
  years, will be referred by the Registrar to a Panel of the
  QA Committee for assessment. The Panel will consider
  whether it is in the public and Member's interest to
  undertake some form of refresher or retraining.
- The Committee developed a policy on the registration of Graduate Members with standard terms, conditions and limitations. This policy was developed in order to expedite the registration process for graduates of accredited (or equivalent) programs applying for Graduate Certificates of Registration. It is our intent to embed this policy in an amendment to the Registration Regulation.
- Following inquiries from Members and employers, the Registration Committee developed a policy to define the different types of supervision and to address issues concerning supervision such as documentation requirements.
- The Council of the College referred the issue of a baccalaureate degree as entry level for Respiratory Therapists to the Registration Committee. At the June 2004 meeting, Council passed a motion that "the CRTO, in collaboration with Members, professional associations and educational institutions, investigate and participate in discussions to pursue the advancement of the profession through a baccalaureate degree in Respiratory Therapy". In the coming months the Committee intends to gather information regarding the merits, or otherwise, of degree level entry-to-practice credentials for Respiratory Therapy. The Committee will seek feedback from the College Members, professional associations, educational programs and other stakeholders.

The Committee would like to emphasise that any future changes to entry to practice requirements will not jeopardize current Members' registration status and that any changes in entry to practice requirements must receive government approval.

- A registration hearing regarding an applicant's appeal of an Order of a Registration Committee Panel was held on August 11, 2004. In its decision, the Health Professions Appeal and Review Board (Board) referred the application back to the Registration Committee, to direct the Registrar to issue a certificate of registration to the applicant and to impose any reasonable terms, conditions and limitations the Committee considers appropriate in light of the Board's comments. The Registration Committee met in January 2005, to consider the Board's Order and directed the Registrar to issue a General Certificate of Registration, with terms, conditions and limitations.
- The Committee continues to monitor the Prior Learning Assessment program. College Staff met with the Michener Institute PLA and Access and Options representatives to review the PLA process. No policy changes are required at this time but the PLA policy will need to be reviewed by the Registration Committee in the future.

In closing the Committee would like to acknowledge, Paul Stewart, RRT, RRCP, Registration Committee Chair from January 7, 2002 to December 9, 2004. Paul brought with him a wealth of experience and knowledge. We thank Paul for his excellent work and wish him success in his future endeavours.

Dorothy Angel, Chair

## **COMPLAINTS COMMITTEE**

The Complaints Committee deals with complaints regarding the conduct or actions of Members in accordance with the Regulated Health Professions Act, 1991, the Respiratory Therapy Act 1991, the By-laws and the policies of the College.

Panels of the Complaints Committee considered 5 complaints in the 2004/2005 fiscal year. The Panel's decisions were as follows:

- In one matter it was the Panel's decision to take no action;
- In two matters it was the Panel's decision to take no action and make recommendations:

- In one matter it was the Panel's decision to resolve the concerns through a voluntary Undertaking and Agreement between the Member and the College;
- In one matter it was the Panel's decision to caution the Member and to resolve the concerns through a voluntary Undertaking and Agreement between the Member and the College.

One decision is currently the subject of a request for review by the Health Professions Appeal and Review Board.

Peter Szkorla, RRT, RRCP, Chair

#### **DISCIPLINE COMMITTEE**

The Discipline Committee holds hearings of allegations regarding Members' professional misconduct or incompetence referred to the Committee by the Complaints Committee or Executive Committee.

A number of members of the Discipline Committee attended the Federation of Health Regulatory College's "Conducting a Discipline Hearing" workshop.

There were no referrals to the Discipline Committee in 2004/2005.

John Schenk, Chair

# FITNESS TO PRACTISE COMMITTEE

The Fitness to Practice Committee holds hearings related to Members' mental or physical capacity referred to the Committee by the Executive Committee.

There were no referrals to the Fitness to Practice Committee in 2004/2005.

John Schenk, Chair









2003	/2004	2004/2005	200	3/2004	2004/2005
REGISTRATION STATUS					
General	2038	2137	Home Care	355	405
Active	1971	2053	Rehabilitation	157	203
Inactive	67	84	Research	282	331
Graduate	20	43	Sales	193	239
Limited	20	18	Teaching/Education	970	1097
Active	19	17			
Inactive	1	1	GENDER		
TOTAL	2078	2198	Male	647	669
			Female	1431	1529
Suspended	19	13			
Due to non-payment of fees	19	13	DELEGATION		
Due to disciplinary decisions	0	0	Members who delegated a controlled act	22	29
Resigned	21	26	Members who accepted delegation of:		
Revoked	24	23	Communicating a diagnosis identifying	33	37
Due to non-payment of fees	15	12	a disease or disorder		
Due to disciplinary decisions	0	0	Performing a procedure below the	23	42
Due to expiration of Graduate Certificates	8	11	surface of a mucous membrane		
Due to expiration of Registration Certificate	1	0	Putting an instrument, hand or finger:		
Reinstated:			beyond the external ear canal;	1	2
From Resigned	9	4	the labia majora;	1	1
From Revoked	10	5	the anal verge	2	3
From Suspended	6	1	into an artificial opening into the body	19	19
Currently under Suspension	13	10	Application of a form of energy	65 N/A	151
			Cardiac pacemaker therapy	N/A	6
REQUESTS FOR INFORMATION FROM	//		Defibrilation  Conditions and the second sec	N/A	83
PUBLIC REGISTER		2.5	Cardioversion	N/A	9
No. of enquiries	75	35	Electromyography Nerve conduction studies	N/A N/A	1
No. of members information requested on	343	244		N/A N/A	2 43
40540 OF 00407105			Transcutaneous cardiac pacing Sound waves for diagnostic ultrasound	N/A N/A	43 7
AREAS OF PRACTICE	c02	701	Allergy challenge testing	15/A	17
Primary/Care	602	701	Total members who accepted delegation	159	190
Acute/Critical Care	1417	1612	Total members who accepted delegation	139	190
Sub-Acute Care	1216 1033	1316 1186	ACTIVITIES PERFORMED BY MEMBI	EDS.	
Chronic/Long-term Care Administration/Management	336	392	Arterial puncture	1477	1687
Anaesthesia	275	392	Aspiration from a cannula	959	1137
	146	182	Blood analysis	797	978
Consulting Diagnostics-cardiac	295	334	Capillary puncture	230	283
Diagnostics-pulmonary	643	773	Cardiovascular perfusion/ECMO	21	25
Equipment Service/Maintenance	875	1023	Cardioversion	36	56
Equipment Service/Manifeliance	0/3	1023		50	50

	2003/2004	2004/2005		2003/2004	2004/2005
			•		
Chest assessments	1573	1784	Suturing indwelling cannula	106	137
Defibrillation	51	85	Teaching health care practitioner	1055	1322
Diagnostics - pulmonary function	943	1096	Teaching patient/client	1607	1831
Diagnostics – polysomnography	127	135	Tracheostomy tube change	810	954
Diagnostics - ECG	746	834	Venipuncture	88	102
Diagnostics - stress testing	209	255			
Diagnostics - holter monitoring	104	127	ADVANCED PRESCRIBED PRO		
Diagnostics - echocardiography	20	23	Cannula/Line – Venous	93	107
Diagnostics - neurodiagnostics	21	40	Cannula/Line – Umbilical	11	15
Diagnostics - bronchoprovocation	241	297	Cannula/Line – Arterial	559	680
Electronic patient charting	533	683	Chest tube insertions	9	2
Equipment - quality control	1179	1337	Chest needle insertions	20	25
Equipment - preventative	1166	1312			
maintenance/Repair			HIGHEST LEVEL OF EDUCATION		2.4
Inhalation - mechanical ventilation	1419	1617	Graduate degree	22	24
Inhalation - hyperbarics	43	47	Undergraduate degree	642	709
Inhalation - nitric oxide	636	728	College diploma	2012*	2154
Inhalation - anaesthetic agent	241	286	Other	172	177
Injection - direct	198	239	EMBLOVMENT OTATUO		
Injection - via line or bag	303	358	EMPLOYMENT STATUS		
Intubation - adult/paediatric	1008	1164	Employed Full-time	1311	1382
Intubation - neonatal	307	360			
Literature search	1012	1233	Part-time	402	409
Patient transport	1089	1223	Casual	101	157
Suctioning	1457	1658	Not Employed	<b>60</b>	102
-			Seeking employment	68	102
			Not-seeking employment	192	148

NOTE: numbers are based on self-reporting by members \* revised from the 2003-04 annual report









# DISTRIBUTION OF MEMBERS BY PRIMARY EMPLOYER

COUNTY/AGE	LESS THAN 30	30 - 39	40 - 49	50 AND OVER	TOTAL
Kenora	1	0	2	0	3
Rainy River	0	0	0	0	0
Thunder Bay	8	12	4	6	30
DISTRICT #1 TOTAL	9	12	6	6	33
Algoma	3	7	6	2	18
Cochrane	9	8	2	0	19
Manitoulin	0	0	0	0	0
Muskoka	1	5	1	1	8
Nipissing	4	8	4	5	21
	0	8 1	0	0	1
Parry Sound					
Sudbury	7	23	10	3	43
Timiskaming	0	2	1	0	3
DISTRICT #2 TOTAL	24	54	24	11	113
Dundas and Stormont	1	5	2	2	10
Frontenac	13	13	12	6	44
Glengarry	0	0	0	0	0
Grenville	0	0	0	0	0
Hastings	2	6	2	3	13
Lanark	0	0	2	1	3
Leeds	1	2	0	0	3
Lennox and Addington	0	0	0	0	0
Ottawa-Carlton	69	86	69	12	236
Prescott	0	0	0	0	0
Prince Edward	0	0	0	0	0
Renfrew	1	4	2	1	8
Russell	0	0	0	0	0
DISTRICT #3 TOTAL	87	<b>116</b> 23	89	25	<b>317</b> 48
Durham	10		10	5	
Haliburton	0	0	0	0	0
Metro Toronto	122	224	127	39	512
Northumberland	1	1	0	1	3
Peel	19	56	37	3	115
Peterborough	2	7	6	2	17
Simcoe	9	16	20	2	47
York	9	21	32	3	65
Victoria	3	1	3	1	8
DISTRICT #4 TOTAL	175	349	235	56	815
Brant	3	5	1	2	11
Dufferin	0	0	4	0	4
Haldimand-Norfolk	1	4	1	2	8
Halton	1	12	13	3	29
Hamilton-Wentworth	50	47	28	13	138
Niagara	5	15	10	0	30
Waterloo	10	23	15	13	61
Wellington	6	5	7	1	19
DISTRICT #5 TOTAL	76	111	79	34	300
Bruce	2	0	0	0	2
Elgin	2	1	4	2	9
Essex	13	39	18	5	75
Grey	1	3	9	3	16
Huron	0	1	3	0	4
Kent	5	5	9	1	20
Lambton	5	10	8	1	24
Middlesex	36	65	79	20	200
Oxford	0	3	0	4	7
Perth	2	5	5	1	13
DISTRICT #6 TOTAL	66	132	135	37	370
TOTAL	437	774	568	169	1948

## COLLEGE OF RESPIRATORY THERAPISTS OF ONTARIO

## AUDITORS' REPORT

The accompanying summarized statement of financial position and statement of operations are derived from the complete financial statements of the College of Respiratory Therapists of Ontario as at February 28, 2005 and for the year then ended on which we expressed an opinion without reservation in our report dated April 15, 2005. The fair summarization of the complete financial statements is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying summarized financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

The summarized financial statements do not contain all disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that these statements may be not appropriate for their purposes. For more information on the College's financial position and results of operations, reference should be made to the related complete financial statements

Toronto, Ontario April 15, 2005 CLARKE HENNING LLP CHARTERED ACCOUNTANTS

## SUMMARIZED STATEMENT OF FINANCIAL POSITION

#### AS AT FEBRUARY 28, 2005

	2005	2004
ASSETS		
Current assets		
Cash and investments	\$ 1,259,749	\$ 1,073,485
Prepaid expenses	2,539	3,618
	1,262,288	1,077,103
Furniture and equipment	1,791	2,480
	1,264,079	1,079,583
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities	18,607	9,467
Deferred revenue	549,950	403,600
	568,557	413,067
NET ASSETS		
Abuse therapy fund	20,000	20,000
General contingency reserve fund	500,000	500,000
General investigations and hearings fund	100,000	100,000
Special projects reserve	30,000	30,000
Fees stabilization reserve	20,000	
Invested in capital assets	1,791	2,480
Operating - unrestricted	23,731	14,036
	695,522	666,516
and the state of t	1,264,079	1,079,583

## SUMMARIZED STATEMENT OF OPERATIONS

## YEAR ENDED FEBRUARY 28, 2005

1,062,300		1,073,890
40,162		43,080
1,102,462		1,116,970
524,586		463,306
61,072		58,259
78,851		70,896
113,258		94,821
-		84,608
74,831		82,959
88,386		20,050
132,472		113,305
1,073,456		988,204
\$ 29,006	\$	128,766
	1,102,462 524,586 61,072 78,851 113,258 - 74,831 88,386 132,472 1,073,456	40,162 1,102,462 524,586 61,072 78,851 113,258 

Copies of 2004/2005 complete audited financial statements are available on our website at www.crto.on.ca or on request from the Registrar at 416-591-7800.

Clarke Henning LLP

# COUNCIL MEMBERS AND NON-COUNCIL COMMITTEE MEMBERS

#### **COUNCIL MEMBERS**

March 1, 2004 to February 28, 2005

James McCormick RRT, RRCP President Susan Martin RRT RRCP, Vice-President

Marisa Ammerata RRT, RRCP

Dorothy Angel

Sudershen Beri (from October 20, 2004)

Susan Bryson Gloria Hinton Richard Levert

Judy MacGregor RRT, RRCP Vito Maiolino RRT, RRCP

Keith Olimb RRT, RRCP (to August 3, 2004)

Lorella Piirik RRT, RRCP (from November 24, 2004)

John Schenk

Paul Stewart RRT, RRCP Peter Szkorla RRT, RRCP

Gary Weeks

## **NON-COUNCIL COMMITTEE MEMBERS**

March 1, 2004 to February 28, 2005

Gary Ackerman RRT, RRCP
Mario Aquilina RRT, RRCP
Shari Cole RRT, RRCP
Brent Dionne RRT, RRCP
Jeff Earnshaw RRT, RRCP
Harold Featherston RRT, RRCP
Carole Hamp RRT, RRCP
Chris Harris RRT, RRCP

Cheryl Homuth RRT, RRCP Carmen Kergl RRT, RRCP

Daniel Larose RRT, RRCP (to November 2, 2004)

Ginny Martins RRT, RRCP Melissa McLean RRT, RRCP Bernard McNamara RRT, RRCP

Lorella Piirik RRT, RRCP (to November 23, 2004)

James Quigley RRT, RRCP Martin Rennick RRT, RRCP Kevin Taylor RRT, RRCP

## STAFF

Gord Hyland Registrar and C.E.O.

Mary Bayliss RRT, RRCP, CAE, Professional Practice Advisor (On Parental Leave, May 14, 2004 to January 31, 2005)

Melanie Jones Co-ordinator of Quality Assurance

Amelia Ma Co-ordinator of Administrative Services

Julia Pak Administrative Officer

Ania Rudzinska Co-ordinator of Registration (from January 1, 2005), Registration Officer (to December 31, 2004)

Christine Robinson Manager of Policy and Investigations

Barb Saunders Co-ordinator of Communications & Member Services

Jennifer Harrison BSc, RRT, RRCP, Professional Practice Advisor (April 1, 2004 to February 4, 2005)

The College expresses its sincere appreciation to Jennifer Harrison for her excellent work in the Professional Practice area, during Mary Bayliss' parental leave.

#### COMPLAINTS

#### March 1, 2004 to December 9, 2004

Peter Szkorla RRT, RRCP Chair Brent Dionne RRT, RRCP Vice-Chair Dorothy Angel Susan Bryson Shari Cole RRT, RRCP Carmen Kergl RRT, RRCP Vito Maiolino RRT, RRCP

Kevin Taylor RRT, RRCP

#### December 10, 2004 to February 28, 2005

Peter Szkorla RRT, RRCP Chair
Brent Dionne RRT, RRCP Vice-Chair
Dorothy Angel
Sudershen Beri
Shari Cole RRT, RRCP
Cheryl Homuth RRT, RRCP
Carmen Kergl RRT, RRCP
Vito Maiolino RRT, RRCP
Paul Stewart RRT, RRCP
Kevin Taylor RRT, RRCP

#### DISCIPLINE

Gary Weeks

#### March 1, 2004 to December 9, 2004

John Schenk Chair
Carole Hamp RRT, RRCP Vice-Chair
Marisa Ammerata RRT, RRCP
Mario Aquilina RRT, RRCP
Jeff Earnshaw RRT, RRCP
Chris Harris RRT, RRCP
Daniel Larose RRT, RRCP (to November 2, 2004)
Richard Levert
Melissa McLean RRT, RRCP
Keith Olimb RRT, RRCP (to August 3, 2004)
James Quigley RRT, RRCP
Paul Stewart RRT, RRCP

## December 10, 2004 to February 28, 2005

John Schenk Chair
Carole Hamp RRT, RRCP Vice-Chair
Gary Ackerman RRT, RRCP
Marisa Ammerata RRT, RRCP
Mario Aquilina RRT, RRCP
Susan Bryson
Jeff Earnshaw RRT, RRCP
Gloria Hinton
Richard Levert
Judy MacGregor RRT, RRCP
Ginny Martins RRT, RRCP
Bernard McNamara RRT, RRCP
Lorella Piirik RRT, RRCP
James Quigley RRT, RRCP
Gary Weeks

#### **EXECUTIVE**

## March 1, 2004 to December 9, 2004 James McCormick RRT, RRCP *Chair*

Susan Martin RRT, RRCP Vice-Chair Gloria Hinton Richard Levert Judy MacGregor RRT, RRCP Keith Olimb RRT, RRCP ex-officio (to August 3, 2004)

#### December 10, 2004 to February 28, 2005

James McCormick RRT, RRCP Chair Susan Martin RRT, RRCP Vice-Chair Gloria Hinton Richard Levert Judy MacGregor RRT, RRCP

#### FITNESS TO PRACTISE

John Schenk Chair

John Schenk Chair

#### March 1, 2004 to December 9, 2004

Carole Hamp RRT, RRCP Vice-Chair
Marisa Ammerata RRT, RRCP
Mario Aquilina RRT, RRCP
Jeff Earnshaw RRT, RRCP
Chris Harris RRT, RRCP
Daniel Larose RRT, RRCP (to November 2, 2004)
Richard Levert
Melissa McLean RRT, RRCP
Keith Olimb RRT, RRCP (to August 3, 2004)
James Quigley RRT, RRCP
Paul Stewart RRT, RRCP
Gary Weeks

#### December 10, 2004 to February 28, 2005

Carole Hamp RRT, RRCP Vice-Chair
Gary Ackerman RRT, RRCP
Marisa Ammerata RRT, RRCP
Mario Aquilina RRT, RRCP
Susan Bryson
Jeff Earnshaw RRT, RRCP
Gloria Hinton
Richard Levert
Judy MacGregor RRT, RRCP
Ginny Martins RRT, RRCP
Bernard McNamara RRT, RRCP
Lorella Piirik RRT, RRCP
James Quigley RRT, RRCP
Gary Weeks

#### PATIENT RELATIONS

#### March 1, 2004 to December 9, 2004

Susan Bryson *Chair* Gary Ackerman RRT, RRCP *Vice-Chair* Dorothy Angel Shari Cole RRT, RRCP Susan Martin RRT, RRCP Ginny Martins RRT, RRCP Melissa McLean RRT, RRCP Bernard McNamara RRT, RRCP Gary Weeks

# December 10, 2004 to February 28, 2005

Susan Bryson Chair
Ginny Martins RRT, RRCP Vice-Chair
Dorothy Angel
Shari Cole RRT, RRCP
Carole Hamp RRT, RRCP
Susan Martin RRT, RRCP
Melissa McLean RRT, RRCP
Bernard McNamara RRT, RRCP
Gary Weeks

#### **QUALITY ASSURANCE**

#### March 1, 2004 to December 9, 2004

Harold Featherston RRT, RRCP *Chair* Keith Olimb RRT, RRCP *Vice-Chair* (to August 3, 2004) Susan Bryson Vito Maiolino RRT, RRCP Lorella Piirik RRT, RRCP John Schenk

## December 10, 2004 to February 28, 2005

Harold Featherston RRT, RRCP Chair Vito Maiolino RRT, RRCP Vice-Chair (from September 9, 2004) Gary Ackerman RRT, RRCP Mario Aquilina RRT, RRCP Sudershen Beri Carmen Kergl RRT, RRCP James McCormick RRT, RRCP John Schenk

## REGISTRATION

## March 1, 2004 to December 9, 2004

Paul Stewart RRT, RRCP Chair Gloria Hinton Vice-Chair Marisa Ammerata RRT, RRCP Dorothy Angel Cheryl Homuth RRT, RRCP Martin Rennick RRT, RRCP Kevin Taylor RRT, RRCP

## December 10, 2004 to February 28, 2005

Dorothy Angel Chair
Kevin Taylor RRT, RRCP Vice-Chair
Marisa Ammerata RRT, RRCP
Chris Harris RRT, RRCP
Gloria Hinton
Lorella Piirik RRT, RRCP
James Quigley RRT, RRCP
Martin Rennick RRT, RRCP



BACK ROW, LEFT TO RIGHT: John Schenk (*Public Member*), Peter Szkorla RRT, RRCP, Sudershen Beri (*Public Member*), Gloria Hinton (*Public Member*), Jim McCormick RRT, RRCP (*President*), Vito Maiolino RRT, RRCP, Gary Weeks (*Public Member*), Paul Stewart RRT, RRCP, Richard Levert (*Public Member*)

FRONT ROW, LEFT TO RIGHT: Dorothy Angel (*Public Member*), Susan Bryson (*Public Member*), Judy MacGregor RRT, RRCP, Susan Martin RRT, RRCP (*Vice President*), Lorella Piirik RRT, RRCP, Marisa Ammerata RRT, RRCP



FRONT ROW: Christine Robinson, Gord Hyland, Mary Bayliss RRT, RRCP, CAE BACK ROW: Melanie Jones, Julia Pak, Ania Rudzinska, Amelia Ma, Barb Saunders

