



**2014 / 2015**  
**Annual Report**

**College of Respiratory Therapists of Ontario**

# Many Faces



**In Many Places.**

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 Therapy services provided to the public, by its Members, are delivered in a safe and ethical manner.



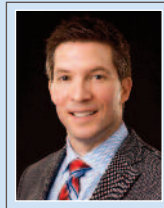
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# MESSAGE FROM THE PRESIDENT & REGISTRAR



David Jones, RRT  
President



Kevin Taylor, RRT  
Registrar & CEO

Welcome to our 2014 - 2015 Annual Report.

On behalf of the CRTO Council and staff, we are delighted to present our annual report.

The College of Respiratory Therapists of Ontario (CRTO) is one of 25 health regulatory bodies established by the *Regulated Health Professionals Act (RHPA)*, 1991. With a duty to serve and protect the public interest, the CRTO:

- Develops, establishes and maintains entry-to-practise requirements for becoming a registered Respiratory Therapist, standards of practice for the profession, and professional ethics standards for our Members;
- Promotes and enhances relations between the CRTO and its Members, other health profession colleges, key stakeholders, and the public; and
- Facilitates ongoing continuing education and professional development in our Members to assure the profession's quality of practice and support members in responding to practice environment changes, advances in technology and other emerging issues.



We believe strongly in our mandate of serving and protecting the public interest. We believe that engaging our Members and maintaining an open, trusting relationship fulfils our mandate, by fostering high quality and ethical care. We believe in fairness, transparency and accessibility; designing our communications to ensure the public and our Members remain informed, as well as being an open and approachable organization.

This year, we continued to apply the directions detailed in our strategic plan, while also adapting to emerging issues in the ever-changing health care system, and responding to the needs of patients and their families in Ontario. Our activities can be categorized under four key areas of focus:

1. Engagement
2. Supporting Practice Excellence
3. Professionalism
4. Stewardship of the Public Trust



## ENGAGEMENT

Self-regulation requires a reflexive relationship with members and the public. In other words, self-regulation only works when members participate, which makes engagement vital to serving the public interest. Information that comes from CRTO Members is essential to making good decisions – whether it's revisions to practice guidelines, understanding changing patient needs, or appreciating the evolving nature of practice. We invest heavily in both resources and time to enhance our relationship with RT Members and, as a result, we've seen increased trust, volunteerism and response rates.



## SUPPORTING PRACTICE EXCELLENCE

In 2012, we surveyed our membership on the perceived value of the CRTO as a resource. The results indicated a strong correlation between the perceived value

and length-of-practice time. This means that the more contact Members have with the CRTO, the more they view us as a resource in their professional lives. In response, we've made enormous effort to increase meaningful contact with our Members, achieving twin goals of enhancing this relationship and building awareness. Through the communications strategy we have diversified the ways Members receive information from the CRTO. We have also revised the language and tone of communications to reinforce our accessibility to members, and our student strategy connects us with the next generation of RT care providers in a more structured way. Taken together, we have a more robust platform for stakeholder consultation, disseminating practice information, and supporting practice excellence.



## PROFESSIONALISM

Enhancing professionalism begins with awareness. When the CRTO launched its professional development framework last year – GROW<sup>OM</sup> – we provided an RT-specific conceptual framework and lexicon for the first time. GROW<sup>OM</sup> has since served as a touchstone for writing professional development articles, conducting and sharing interviews with leaders in specific content areas, and encouraging RTs to become well-rounded professionals throughout their careers. In order to get to a place of discussion about enhancing RT professionalism, the CRTO must not only increase awareness about expectations for ongoing professional development, but also the importance of considering practice environment changes in combination with that growth. The CRTO sees professionalism as the key to Respiratory Therapists continuing to adapt with evolving patient and system needs.



## STEWARDSHIP OF THE PUBLIC TRUST

In our view, public trust and confidence in the CRTO's regulatory abilities are paramount. Only by maintaining this trust can we effectively carry out our mandate to protect and serve the public interest. To that end, we place the highest strategic

importance on our stewardship of that trust. For example, we've enhanced our website to improve access to services and available information. This includes a full language review for better readability, striving to have 100 per cent of content available in both English and French, as well as providing online forms for submitting concerns about an RT. The online approach for complaints is a less intimidating way for individuals to take that first step than a direct phone call. We also continuously interact with our stakeholders to remain attentive and aware of current, changing and emerging public needs. In response to the growing importance of access and care in the community setting, the CRTO released good business practices and provided information on what the public should expect from an RT. This lay the groundwork for safe and ethical practice as RTs become more prevalent outside of traditional hospital settings. Finally, we strive to be a fair and equitable organization, consistently meeting and exceeding our requirements for accessibility, fair registration practices, privacy and good governance. We believe that as a result of our efforts, the public can be confident that the practice of Respiratory Therapy in Ontario is reliably safe, effective and ethical.

The following pages describe the activities and accomplishments of the CRTO over the past year. We are proud of our progress and role in contributing to the health care needs of patients and their families in Ontario.

Sincerely,



**DAVID JONES, RRT**  
PRESIDENT



**KEVIN TAYLOR, RRT**  
REGISTRAR & CEO

# COMMITTEE LIST

as of February 28, 2015

## DISCIPLINE

Allan Cobb (Chair)	Daniel Fryer, RRT	Daphne Shiner, RRT
Allan MacLean (Vice-Chair)	David Jones, RRT	Christina Sperling, RRT
Julie Boulianne, RRT	Carrie-Lynn Meyer, RRT	Cary Ward, RRT
Rhonda Contant, RRT	Kathleen Olden-Powell, RRT	Carol-Ann Whalen, RRT
Susan Docherty-Skippen	Sylvia Rondelez, RRT	Paul Williams, RRT

## EXECUTIVE

David Jones, RRT (President)	Allan Cobb	Christina Sperling, RRT
Sandra Ellis, RRT (Vice-President)	Gordon Garshowitz	

## FITNESS-TO-PRACTISE

Allan Cobb (Chair)	Daniel Fryer, RRT	Daphne Shiner, RRT
Allan McLean (Vice-Chair)	David Jones, RRT	Christina Sperling, RRT
Julie Boulianne, RRT	Carrie-Lynn Meyer, RRT	Cary Ward, RRT
Rhonda Contant, RRT	Kathleen Olden-Powell, RRT	Carol-Ann Whalen, RRT
Susan Docherty-Skippen	Sylvia Rondelez, RRT	Paul Williams, RRT

## INQUIRIES, COMPLAINTS AND REPORTS

Angela Shaw, RRT (Chair)	Jeff Earnshaw, RRT	Patricia Latimer
Gordon Garshowitz (Vice-Chair)	Sandra Ellis, RRT	Lori Peppler-Beechey, RRT
Alexandra Brazeau, RRT	Ginette Greffe-Laliberté, RRT	Kerri Porretta, RRT
Allison Chadwick, RRT	Jesse Haidar	Bruno Tassone, RRT

## PATIENT RELATIONS

Christina Sperling, RRT (Chair)	Jeff Earnshaw, RRT	Angela Shaw, RRT
Allison Chadwick (Vice-Chair)	Gordon Garshowitz	Cary Ward, RRT
Rhonda Contant, RRT	Carrie-Lynn Meyer, RRT	
Susan Docherty-Skippen	Sylvia Rondelez, RRT	

## PROFESSIONAL PRACTICE

Paul Williams, RRT (Chair)	Allison Chadwick, RRT	Bruno Tassone, RRT
Rhonda Contant, RRT (Vice-Chair)	Allan Cobb	Carol-Ann Whalen, RRT
Julie Boulianne, RRT	Patricia Latimer	
Alexandra Brazeau, RRT	Lori Peppler-Beechey, RRT	

## QUALITY ASSURANCE

Sandra Ellis, RRT (Chair)	Daniel Fryer, RRT	Kerri Porretta, RRT
Carrie-Lynn Meyer, RRT (Vice-Chair)	Ginette Greffe-Laliberté, RRT	Daphne Shiner, RRT
Allan Cobb	Allan MacLean	Carol-Ann Whalen, RRT
Susan Docherty-Skippen	Lori Peppler-Beechey, RRT	

## REGISTRATION

Patricia Latimer (Chair)	Jesse Haidar	Cary Ward, RRT
David Jones, RRT (Vice-Chair)	Allan MacLean	Paul Williams, RRT
Alexandra Brazeau, RRT	Kathleen Olden-Powell, RRT	
Gord Garshowitz	Sylvia Rondelez, RRT	



# COUNCIL & NON-COUNCIL COMMITTEE LIST

as of February 28, 2015

## COUNCIL

Julie Boulianne, RRT  
Allan Cobb  
Rhonda Contant, RRT  
Susan Docherty-Skippen  
Jeff Earnshaw, RRT  
Sandra Ellis, RRT  
Gord Garshowitz  
Jesse Haidar  
David Jones, RRT  
Patricia Latimer  
Allan MacLean  
Carrie-Lynn Meyer, RRT  
Angela Shaw, RRT  
Christina Sperling, RRT  
Paul Williams, RRT

## NON-COUNCIL COMMITTEE

Alexandra Brazeau, RRT  
Allison Chadwick, RRT  
Daniel Fryer, RRT  
Ginette Greffe-Laliberté, RRT  
Kathleen Olden-Powell, RRT  
Lori Pepler-Beechey, RRT  
Kerri Porretta, RRT  
Sylvia Rondelez, RRT  
Daphne Shiner, RRT  
Bruno Tassone, RRT  
Cary Ward, RRT  
Carol-Ann Whalen, RRT

# STAFF LIST

as of February 28, 2015

**KEVIN TAYLOR RRT**, Registrar & CEO  
**MELANIE JONES-DROST**, Deputy Registrar  
**CAROLE HAMP RRT**, Quality Practice Manager  
**ANIA WALSH**, Registration Manager  
**AMELIA MA**, Finance and Office Manager  
**JANICE CARSON-GOLDEN**, Communications Manager  
**KENDRA STEPHENSON**, Stakeholder Relations Coordinator  
**LISA NG**, Registration & Administrative Assistant

# EXECUTIVE COMMITTEE REPORT



David Jones, RRT  
Executive Committee Chair

## BY THE NUMBERS :

1

### Position Statement Developed

1. Dispensing, Handling and Administration of Controlled Substances Position Statement

2

### New Policies Developed

1. Policy on the Disclosure of Witness Statements in complaint and report situations
2. Policy on Public Reprimands

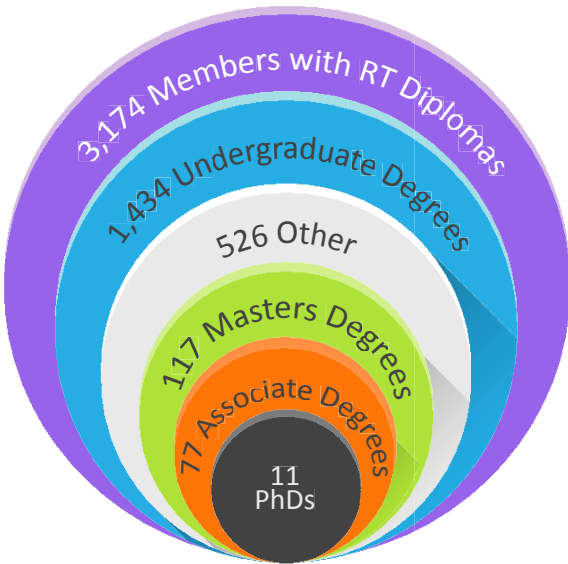
### Additional Information:

- **Monitored** the CRTO's budget, financial position and investments
- Received an external reviewer's report on **Governance of Risk Management** by the CRTO
- Reviewed the CRTO's **Audited Financial Statements**
- Received a report developed by the National Alliance of Respiratory Therapy Regulatory Bodies that **identified a Common Academic Standard for use** when appraising the education of applicants trained outside of Canada
- Oversaw the electronic **elections** for Districts 3, 4 and 6
- **Appointed profession Members** to fill vacancies in Districts 3 and 6 post-election, as per CRTO by-laws
- Appointed Council and Non-Council members to various **CRTO committees**
- Monitored the CRTO's response and role in **Ebola** preparation
- Oversaw the CRTO's initiatives for **enhancing Transparency**
- Led the CRTO Council in **identifying strategic areas of Focus** for the next three years

# STATISTICS AND DEMOGRAPHICS

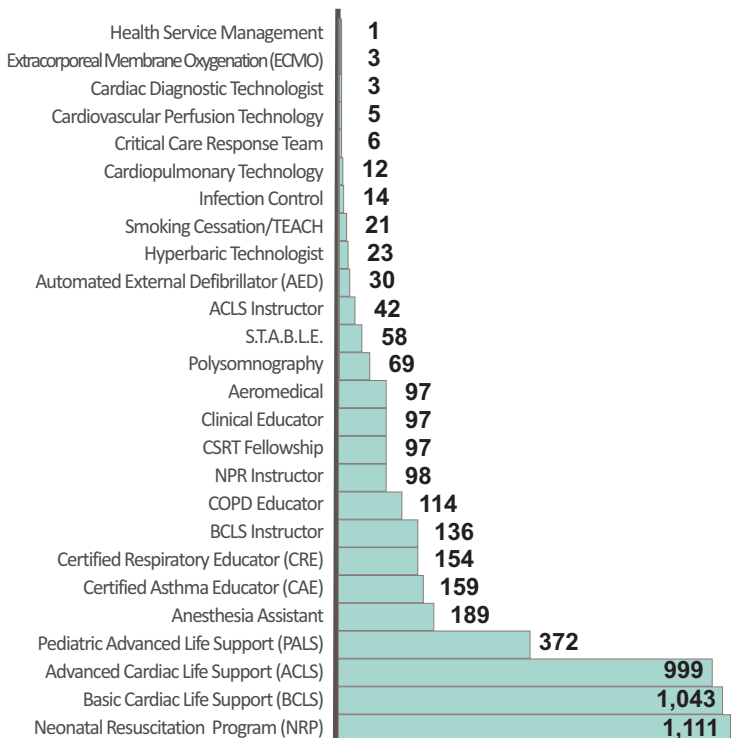
as of February 28, 2015

## Educational Profile

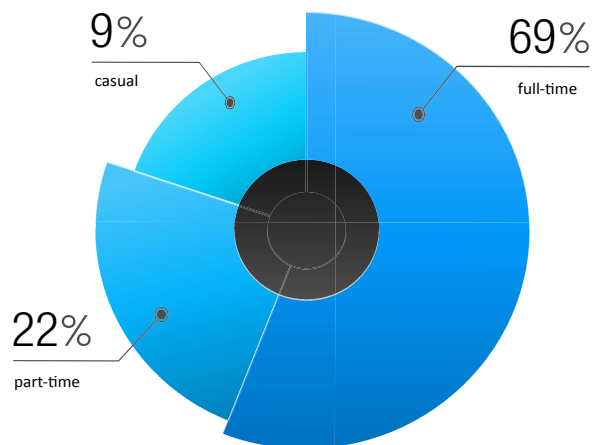


## Certification Types

Certifications held by Members as reported at Renewal

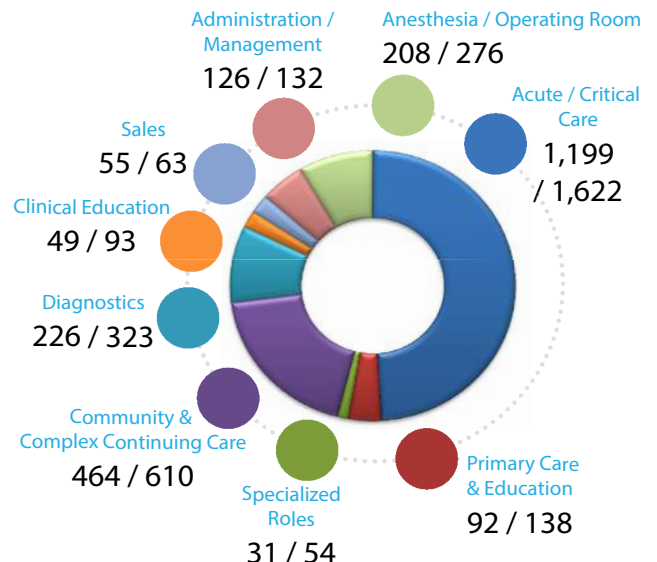


## Employment Status



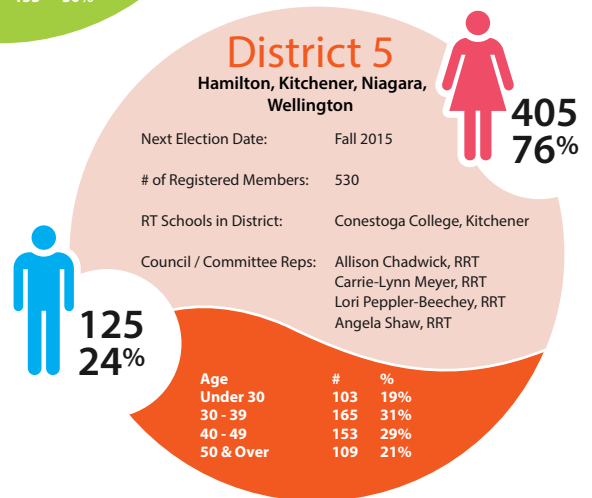
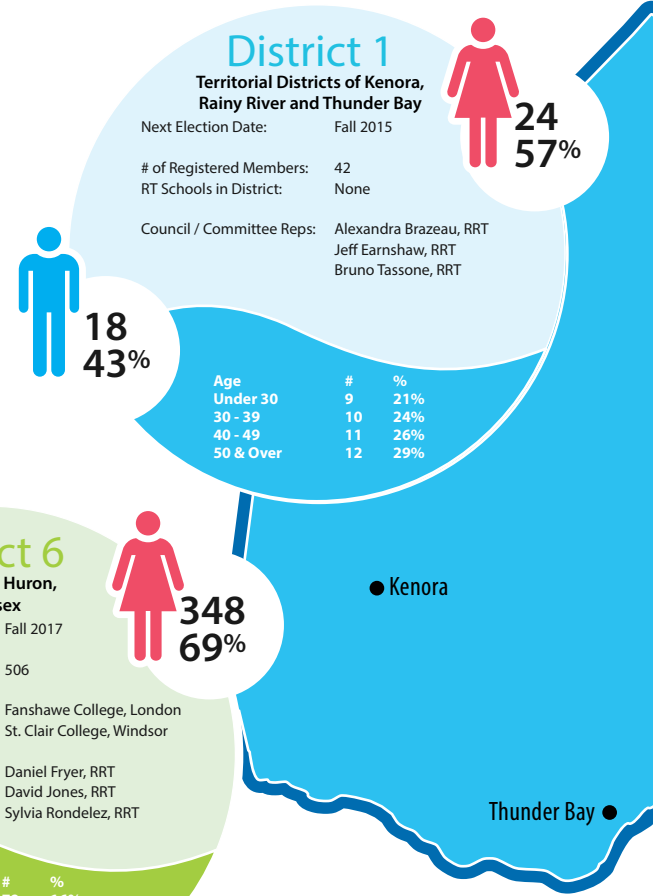
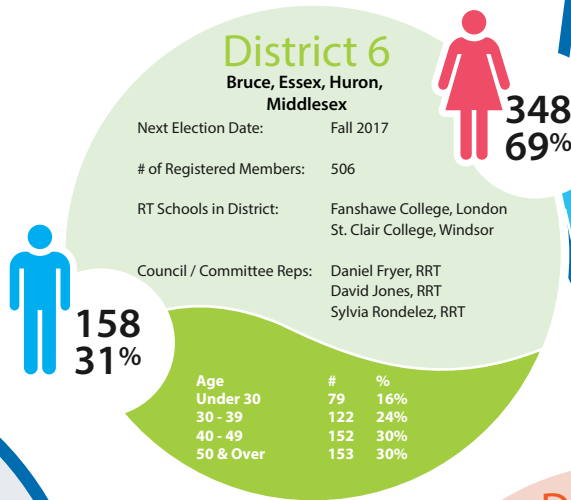
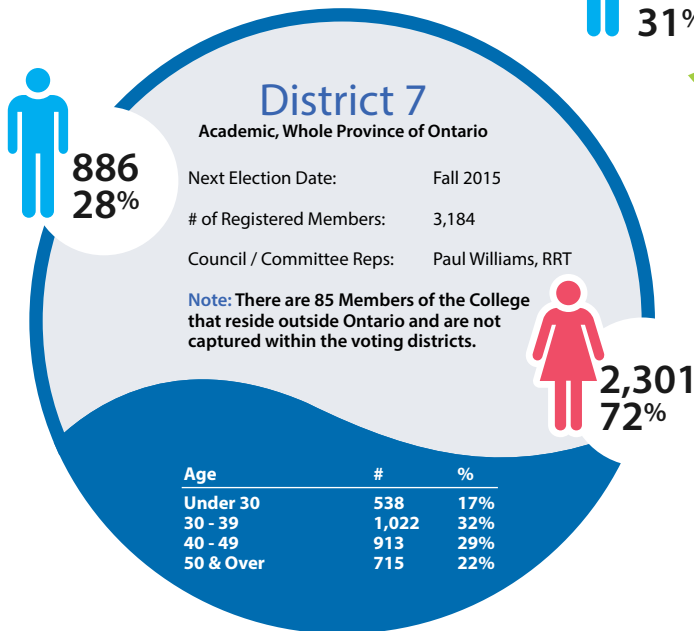
## Main Area of Practice

Main focus of Respiratory Therapy practice at Members place(s) of employment. First number by primary employer, second number by all employers.

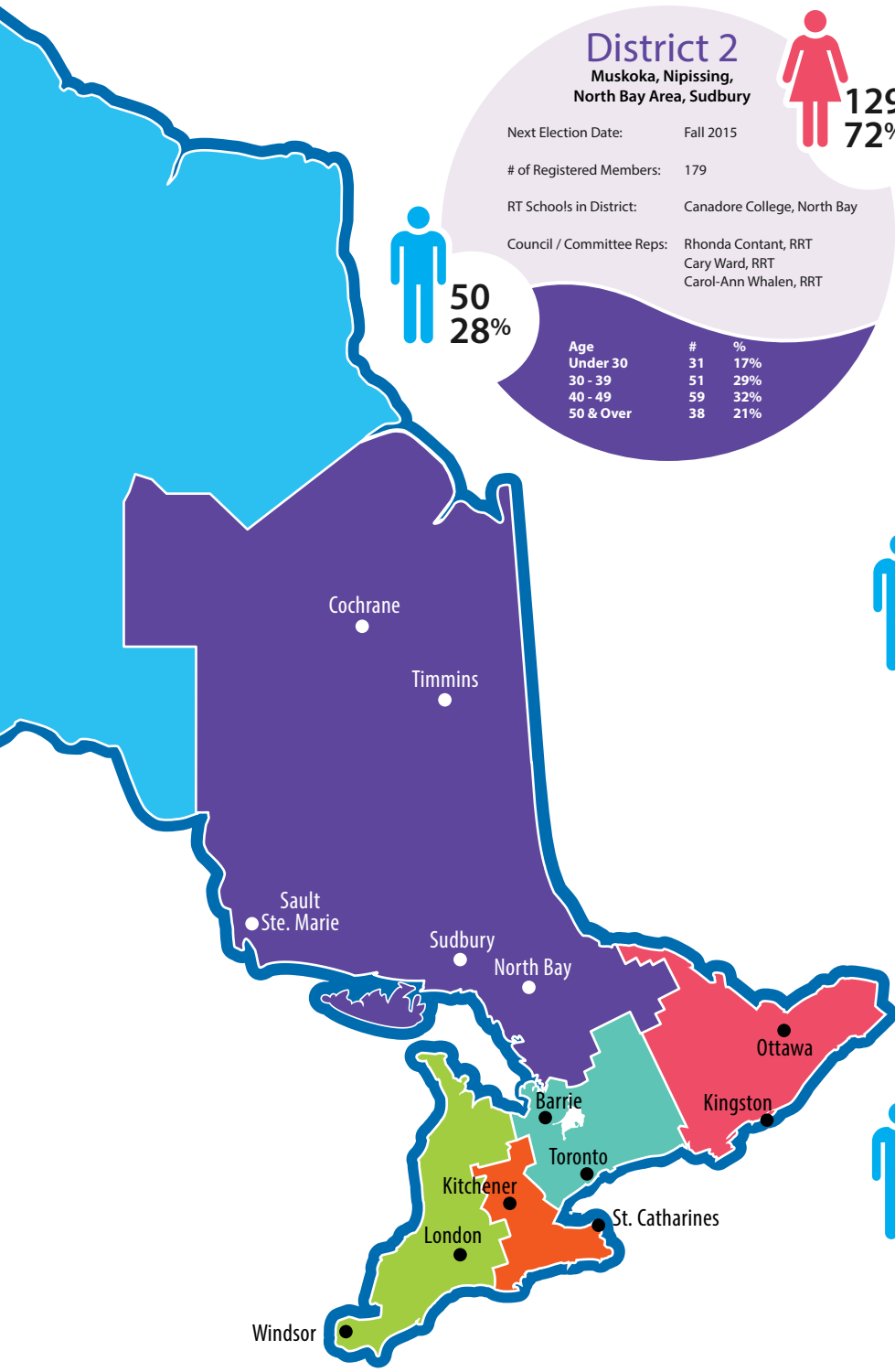


### CRTO Electoral Districts

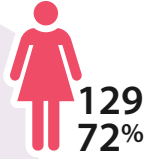
- 1 - Territorial Districts of Kenora, Rainy River and Thunder Bay
- 2 - Muskoka, Nipissing, North Bay Area, Sudbury
- 3 - Ottawa-Carlton, Renfrew, Hastings
- 4 - Greater Toronto, Haliburton, Northumberland, Simcoe
- 5 - Hamilton, Kitchener, Niagara, Wellington
- 6 - Bruce, Essex, Huron, Middlesex
- 7 - Academic, Whole Province of Ontario



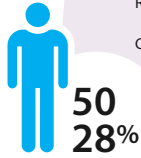
# 2014 / 2015



## District 2 Muskoka, Nipissing, North Bay Area, Sudbury

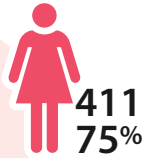


Next Election Date: Fall 2015  
# of Registered Members: 179  
RT Schools in District: Canadore College, North Bay  
Council / Committee Reps: Rhonda Contant, RRT  
Cary Ward, RRT  
Carol-Ann Whalen, RRT

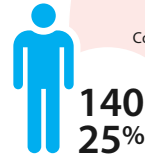


Age	#	%
Under 30	31	17%
30 - 39	51	29%
40 - 49	59	32%
50 & Over	38	21%

## District 3 Ottawa-Carlton, Renfrew, Hastings

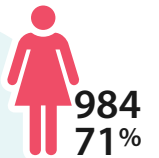


Next Election Date: Fall 2017  
# of Registered Members: 551  
RT Schools in District: Algonquin College, Ottawa  
La Cité collégiale, Ottawa  
Council / Committee Reps: Julie Boulianne, RRT  
Ginette Greffe-Laliberté, RRT  
Daphne Shiner, RRT

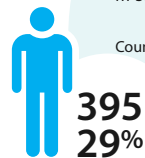


Age	#	%
Under 30	111	20%
30 - 39	205	37%
40 - 49	133	24%
50 & Over	102	19%

## District 4 Greater Toronto, Haliburton, Northumberland, Simcoe



Next Election Date: Fall 2017  
# of Registered Members: 1,379  
RT Schools in District: The Michener Institute  
for Applied Health Sciences, Toronto  
Council / Committee Reps: Sandra Ellis, RRT  
Kathleen Olden-Powell, RRT  
Kerri Porretta, RRT  
Christina Sperling, RRT

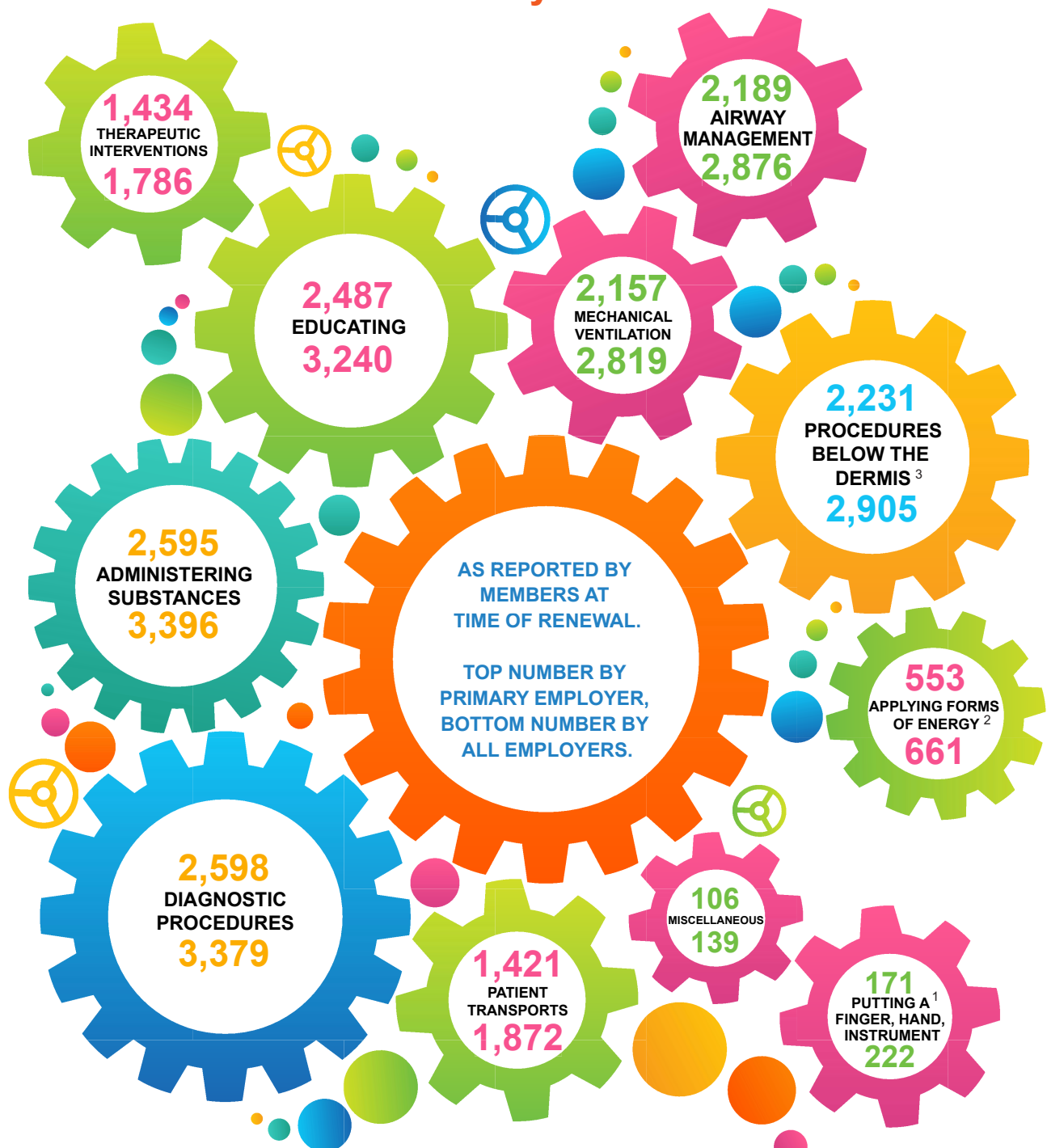


Age	#	%
Under 30	205	15%
30 - 39	469	34%
40 - 49	405	29%
50 & Over	301	22%

# STATISTICS AND DEMOGRAPHICS

as of February 28, 2015

## RT Activities Performed by Members



<sup>1</sup> E.g., Into Artificial Opening Into the Body, Beyond the Anal Verge.

<sup>2</sup> E.g., Defibrillation, Cardioversion, Automatic External Defibrillator (AED).

<sup>3</sup> E.g., Arterial Cannulation, Chest Tubes, Epidural, Venipuncture.

# QUALITY ASSURANCE COMMITTEE REPORT



**Sandra Ellis, RRT**  
Quality Assurance Committee Chair

The Quality Assurance Committee develops, implements and maintains the CRTO's QA program, encouraging continued professional improvement of RT Members. This committee conducts a review of the Quality Assurance Program's effectiveness every five years. Every year, the committee randomly selects about 10 per cent of the membership to submit their Professional Portfolios for peer evaluation and complete a Professional Standards Assessment. The QA Committee also monitors compliance with the QA program and makes decisions about Members who have been identified with unsatisfactory knowledge, skills, or judgement through this framework.

## BY THE NUMBERS :

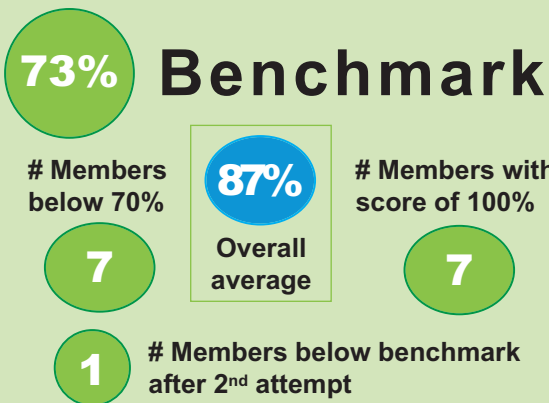
### 2014 QA Random Selection Summary

**231**

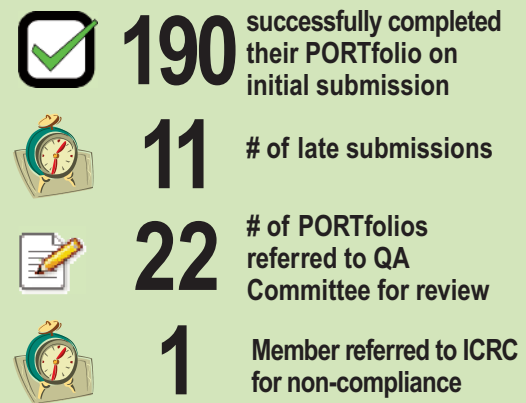
Members completed  
PSA & submitted their  
PORTfolio<sup>OM</sup> in 2014

- 2** Members who want to become PORTfolio reviewers after completing the QA process
- 237** Members randomly selected
- 14** Members who received a 12-month deferral in 2013
- 3** Members referred by Registration Committee
- 25** Deferrals granted by the QA Committee

### PSA Results



### PORTfolio<sup>OM</sup> Results

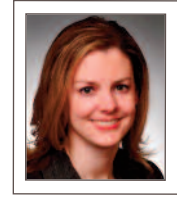


### QA Portal on the CRTO Website

During the 2013 QA Program Evaluation, 40 per cent of Members surveyed "strongly agreed" that they would like to have easier access to Quality Assurance (QA) tools and process information. As a result, the CRTO created a QA Portal within the Member Login area of the website providing all QA information and tools in one place.

Members can now use the QA Portal to directly access their Portfolio Online for Respiratory Therapists (PORTfolio<sup>OM</sup>) and complete the Professional Standards Assessment (PSA), if randomly selected. A Member who has been randomly selected can also keep track of their QA status - including their PORTfolio and PSA due dates and submission - as well as their final results. In addition, randomly selected Members can now submit online deferral requests.

# REGISTRATION COMMITTEE REPORT



**Patti Latimer**  
Registration Committee Chair

This committee directs the Registrar on issuing certificates of registration to applicants and may impose terms, conditions and limitations on these licenses. The Registration Committee also reviews and develops policies related to registration such as approved RT educational programs, Prior Learning Assessments and registration criteria.

## BY THE NUMBERS :

**11** **PANELS**

convened to consider  
registration referrals  
from the Registrar

**7** **Currency**  
applicants who have not been engaged in the practice of Respiratory Therapy within the two years preceding their application to the CRTO

**2** **Conduct & Competency Concerns**  
considered by the panels

**2** To ratify the Registrar's offer to register two applicants with  
**Graduate Certificate of Registration**

**5** **Policies Updated**

1. Application for Registration Document Requirements Policy
2. Access to Records – Application Files Policy
3. Terms, Conditions and Limitations Policy
4. Registration Currency Requirement Policy
5. Graduate Certificate of Registration Policy

**2** **Professional Practice Guidelines**

Review and updates to:

1. Registration and Use of Title Professional Practice Guideline
2. Certification Programs for Advanced Prescribed Procedures Below the Dermis Professional Practice Guideline

## Additional Information:

- Monitored the Respiratory Therapy programs' **accreditation status**.
- Reviewed & approved one **certification program** for Prescribed Procedures Below the Dermis.
- Monitored the ongoing review of the CRTO's **assessment process** for internationally educated applicants.
- Guided the development of a **registration guide for applicants** who do not meet the two-year currency requirement for registration.
- Monitored the **system-based self-assessment** of the CRTO's registration practices (part of the Office of the Fairness Commissioner Cycle 2 assessments of Ontario regulatory bodies).





**Paul Williams, RRT**  
Professional Practice Committee Chair

# PROFESSIONAL PRACTICE COMMITTEE REPORT

The Professional Practice Committee (PPC) is a non-statutory committee established to develop, review and amend Respiratory Therapy practice-related standards, including: professional practice guidelines, clinical best practice guidelines, standards of practice, position statements, policies and other practice-related resources. The PPC also acts as a resource to Council, committees and CRTO staff.

## BY THE NUMBERS :

3

## Professional Practice Guidelines

Review and updates to:

1. Administering & Dispensing (*formerly Dispensing*) Professional Practice Guideline
2. Conflict of Interest Professional Practice Guideline
3. Interpretation of Authorized Acts Professional Practice Guideline



### ***Administering & Dispensing Medications PPG (formerly Dispensing Medications)***

Although RTs dispense medication under delegation, the PPC felt that it was important to elaborate on their role in administering medication, because it is a more common part of daily practice. A section on administering medication was added, and the existing “dispensing” section was also expanded. Other issues covered in this revised PPG were narcotics and other controlled substances, as well as considerations when dispensing samples and medication errors.

### ***Conflict of Interest PPG***

The PPG was revised to ensure the guideline aligns with the new CRTO Conflict of Interest regulation. It was also updated to provide greater clarity to Members about identifying, preventing and managing conflicts of interests that may occur in professional practice. Expanded definitions were added to the PPG, as well as a number of examples and practice scenarios to help Members identify conflicts of interest.

### ***Interpretation of Authorized Acts PPG***

Information was added to this guideline due to the new Prescribed Substances addition and recent revisions to the Prescribed Procedures regulation.

# PATIENT RELATIONS COMMITTEE REPORT



**Christina Sperling, RRT**  
Patient Relations Committee Chair

The Patient Relations Committee is responsible for developing, establishing and maintaining a Patient Relations Program, including measures for preventing and/or dealing with sexual abuse of patients by Members of the CRTO and administering funding for therapy/counseling for patients who have been sexually abused by our Members. This committee also advises Council on communications plans and develops many of the CRTO’s Professional Practice Guidelines.

## BY THE NUMBERS :

**1** Professional Practice Guideline

Review and updates to:

- Abuse Awareness & Prevention Professional Practice Guideline

**13** on-site visits were requested by:

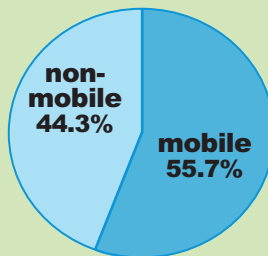
**5** RT Schools

**8** Health Care Facilities

**51.1%** of visitors to the CRTO website are new

**48.9%** of visitors to the CRTO website are returning

### Email opens by device type



**61,353** emails were sent to Members

<b>99.3%</b> were successfully delivered	<b>0.7%</b> were undeliverable (due to invalid email addresses or full mailboxes)
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**207**  
tweets sent

**13**  
BLOG posts

**12**  
FAQs published

### Additional Information:

- The **PRC Planning Priorities** are closely linked to several in the CRTO 2011 – 2016 Strategic Plan. Ongoing committee activities related to these priorities include: Member engagement, public awareness, and optimizing scope of practice.
- As part of the **PRC Member & Student Engagement strategy**, the CRTO and staff made several on-site visits to various RT program schools and health care facilities during the year.



Angela Shaw, RRT  
ICRC Committee Chair

# INQUIRIES, COMPLAINTS & REPORTS COMMITTEE REPORT

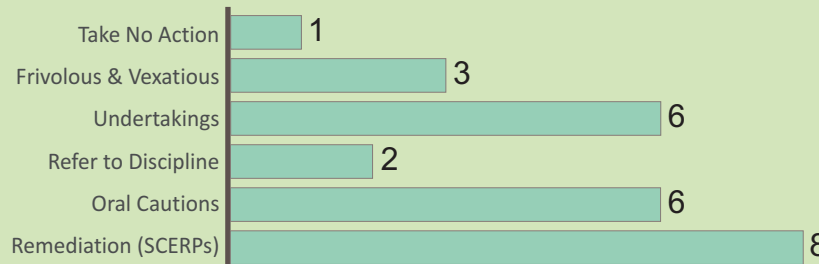
This committee is responsible for handling Member-specific concerns brought to the Registrar’s attention through complaints or reports, such as mandatory termination reports. The ICRC reflects on concerns related to a Member’s conduct, capacity and competence to determine if a referral to the Discipline or Fitness-to-Practise Committee is needed.

## BY THE NUMBERS :



## Decisions were made regarding **26** cases

(some cases remained unresolved from 2013/14)



## Remediation Programs (SCERPs) ordered by ICRC in 2014/15



# DISCIPLINE COMMITTEE REPORT



**Allan Cobb**  
Discipline Committee Chair

**P**anels of this committee are responsible for hearing and determining allegations of professional misconduct or incompetence referred by the Inquiries, Complaints and Reports Committee (ICRC). Discipline hearings are open to the public and proceedings against a Member before the Discipline Committee panel are civil in nature. Based on submitted evidence, the panel must arrive at a decision and determine a penalty if there's a finding of guilt.

There were two Discipline Committee hearings during the 2014-2015 fiscal year. For full details on the hearings please visit our website.

1. **CRTO vs. Tiffany Tin-Yee Chan, RRT**  
([https://www.crto.on.ca/pdf/Discipline/003436\\_Discipline\\_10-2014.pdf](https://www.crto.on.ca/pdf/Discipline/003436_Discipline_10-2014.pdf))
2. **CRTO vs. Derek Mickle, RRT**  
([https://www.crto.on.ca/pdf/Discipline/003262\\_Discipline\\_03-2014.pdf](https://www.crto.on.ca/pdf/Discipline/003262_Discipline_03-2014.pdf))

# FITNESS-TO-PRACTISE COMMITTEE REPORT



**Allan Cobb**  
Fitness to Practise Committee Chair

**O**n referral from a Panel of the Inquiries, Complaints and Reports Committee, the Fitness-to-Practise Committee conducts hearings to determine whether a Member is incapacitated. In the interest of the public, sometimes a Member suffering from a physical or mental condition/disorder can no longer practise safely or must practise with restrictions. A Fitness-to-Practise hearing is generally closed to the public unless the Member requests otherwise.

There were no referrals to the Fitness-to-Practise Committee during the 2014-2015 fiscal year.

# INDEPENDENT AUDITOR'S REPORT

## TO THE MEMBERS OF THE COUNCIL OF THE COLLEGE OF RESPIRATORY THERAPISTS OF ONTARIO

The accompanying summary financial statements of the College of Respiratory Therapists of Ontario (the "College"), which comprise the summary balance sheet as at February 28, 2015, and the summary statement of operations for the year then ended, are derived from the audited financial statements of the College for the year ended February 28, 2015. We expressed an unmodified audit opinion on those financial statements in our report dated June 5, 2015.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements therefore, is not a substitute for reading the audited financial statements of the College.

### **Management's Responsibility for the Summary Financial Statements**

Management is responsible for the preparation of a summary of the audited financial statements in accordance with Canadian accounting standards for not-for-profit organizations.

### **Auditor's Responsibility**

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, "Engagements to Report on Summary Financial Statements".

### **Opinion**

In our opinion, the summary financial statements derived from the audited financial statements of the College for the year ended February 28, 2015 are a fair summary of those financial statements, in accordance with Canadian accounting standards for not-for-profit organizations.

Toronto, Ontario  
June 5, 2015

**CLARKE HENNING LLP**  
CHARTERED ACCOUNTANTS  
Licensed Public Accountants

# SUMMARY BALANCE SHEET

## AS AT FEBRUARY 28, 2015

	2015	2014
<b>ASSETS</b>		
Current assets		
Cash	\$ 955,816	\$ 1,209,099
Sundry receivables and prepaid expenses	26,677	19,247
	<b>982,493</b>	1,228,346
Marketable securities	<b>1,620,663</b>	1,586,617
Capital assets	<b>59,827</b>	55,017
	<b>2,662,983</b>	2,869,980
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	75,399	69,146
Deferred revenue - registration fees	<b>1,241,363</b>	1,376,076
	<b>1,316,762</b>	1,445,222
<b>NET ASSETS</b>		
Abuse therapy fund	<b>20,000</b>	20,000
General contingency reserve fund	<b>500,000</b>	500,000
General investigations and hearings fund	<b>150,000</b>	150,000
Special projects reserve	<b>400,000</b>	400,000
Fees stabilization reserve	<b>150,000</b>	150,000
Invested in capital assets	<b>59,827</b>	55,017
Operating - unrestricted	<b>66,394</b>	149,741
	<b>1,346,221</b>	1,424,758
	<b>2,662,983</b>	2,869,980

# SUMMARY STATEMENT OF OPERATIONS

## YEAR ENDED FEBRUARY 28, 2015

	2015	2014
<b>REVENUES</b>		
Registration, renewal and application fees	1,542,490	1,498,703
Investment and sundry income	35,928	33,921
	<b>1,578,418</b>	1,532,624
<b>EXPENSES</b>		
Salaries and benefits	830,918	746,618
Occupancy costs	137,657	136,671
Quality assurance	44,170	45,348
Professional fees	92,136	63,108
Printing, postage, stationery and delivery	35,353	25,027
Council and committee	65,702	80,293
Special projects	155,111	181,802
All other operating expenses	295,908	258,190
	<b>1,656,955</b>	1,537,057
Deficiency of revenues over expenses for the year	<b>\$ (78,537)</b>	\$ (4,433)

Copies of 2014 / 2015 complete audited financial statements are available on our website at [www.crto.on.ca](http://www.crto.on.ca) or on request from the Registrar at 416-591-7800.



**College of Respiratory Therapists of Ontario**

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