



# CONDUCT COUNTS!

## Communication

### SCENARIO

Maria, a Registered Respiratory Therapist, (the “Member”) has been practicing in the Respiratory Therapy (RT) profession in the province of Ontario for over 30 years and loved everything about her job, always providing the best possible care to Patient’s and continuously collaborating with her team. Maria was a dedicated, experienced, and knowledgeable RT that provided immense contributions to the Intensive Care Unit (ICU) at the Hospital she worked at. The Member was highly regarded amongst the RT profession, well known in the network of healthcare professionals, and thanked often by the Patient’s for the care she provided.

On an extremely busy day in the ICU Maria had a lot of patients that needed to be seen. Maria rushed in and out of each patient’s room, forgetting to introduce themselves to the patient or the patient’s family, forgetting to explain the procedure that she was about to perform on the patient and failing to provide continuous communication with the patient as to where Maria was going to touch the Patient, throughout the procedure.

One of the Patient’s was really upset that Maria hadn’t introduced herself, didn’t explain the procedure, and touched the Patient without asking and stating what she was about to do. The Patient felt that this wasn’t right and submitted a complaint to the CRTO.

A Panel of the ICRC conducted an investigation into Maria’s conduct and actions.

### RESULTS

Over the course of the investigation, in response to the allegations, Maria stated that she “was just so busy, and despite knowing what she was doing, she forgot that the Patient did not know who she was, what the procedure included, and where she would be touching the Patient”, Maria was extremely remorseful for her conduct and stated that the experience of being subject to a complaint was extremely upsetting and that this was an important reminder to always be aware of the Patient that she is treating.

After considering the information before them, the ICRC was seriously concerned that Maria failed to communicate with her Patient appropriately and effectively throughout numerous points in the Patient interaction. While Maria had no prior history with the CRTO, and demonstrated accountability for her actions, the ICRC issued advice and recommendations to the Member. This decision would become part of Maria’s record with the CRTO, should Maria come before the ICRC in the future.



### PROFESSIONALISM

“Professionalism” or professional conduct is a term often used to describe the behaviours that are expected of individuals who hold a certain role in society. A “professional” is typically someone who has obtained skills that are recognized as requiring specific, intensive training and who applies those skills in a position impacting others (e.g., engineer, lawyer, RT, PT, MD, etc.). Professionals are often held to moral, ethical and legal standards because of this potential impact.



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### EXPECTATIONS

The Panel of the Inquiries, Complaints and Reports Committee felt that Maria conduct contravened the Standards of Practice, including:

#### **Standard 3:** Communication

Respiratory Therapists (RTs) must use clear and effective communication techniques to provide information to support safe, competent, ethical patient/client care.

- a. Communicate pertinent information clearly and accurately to patients/clients, healthcare team members, and others through verbal, non-verbal, and/or written means.
- b. Deliver information in a manner that acknowledges individual diversity and health literacy and facilitates patients'/clients' understanding of pertinent information.
- c. Demonstration professionalism and respect in all forms of communication (e.g., verbal, non-verbal, written, social media).

#### **Standard 13:** Professional Responsibilities

Respiratory Therapists (RTs) must ensure their professional practice complies with all applicable regulatory requirements.

##### ***Responsibilities to the CRTO***

- a. Assume responsibility and accountability for their own actions and decisions.
- g. Must not contravene, or fail to maintain, a standard of practice of the profession or a published standard of the CRTO.

##### ***Responsibilities to the Profession and the Public***

- f. Introduce themselves to patients/clients and other members of the healthcare team using their name and professional title.

The Panel's opinion was that although Maria may not have intentionally forgotten to communicate with the Patient, Maria failed to act in accordance with their professional obligations and expectations. Effective, continuous, and consistent communication is integral to providing patient care. Communication establishes and maintains trust, respect, and integrity to the profession of Respiratory Therapy, and regulated healthcare professionals.

Members of the public expect regulated healthcare professionals to act in accordance with CRTO expectations, and therefore this significantly impacted the public's trust of Maria and Respiratory Therapists.

## BOTTOM LINE

A regulated healthcare professional has an obligation to adhere to and carryout all requirements set out under the *Regulated Health Professions Act, 1991, (RHPA)*, and perform their duties in accordance with the CRTO's Standards of Practice. Failure to do so can be seen as an act of professional misconduct.

Always communicate to a Patient: who you are, what procedure you are about to perform, and where you are going to touch the Patient.

## RESOURCES

[CRTO Standards of Practice](#)