

CRTO

Special Council Meeting Materials

April 24, 2023



**College of Respiratory
Therapists of Ontario**

**Ordre des thérapeutes
respiratoires de l'Ontario**

AGENDA ITEM 1.0

We acknowledge that the CRTO office is located on the traditional territory of many nations, including the Mississaugas of the Credit, the Anishinaabe, the Chippewa, the Haudenosaunee and the Wendat peoples, and is now home to many diverse First Nations, Inuit and Métis peoples.

We recognize the Indigenous People's long-standing presence in this territory.

Council Motion

AGENDA ITEM # 3.0

Motion Title:	Approval of the Special Council Agenda
Date of Meeting:	April 24, 2023

It is moved by _____ and seconded by _____ that:

The Council approve the agenda for the April 24, 2023 Special Council meeting.

CRTO Special Council Meeting Agenda

April 24, 2023

AGENDA ITEM # 3.0

9 a.m. to 11 a.m.

Zoom Link: <https://us02web.zoom.us/j/87895949459>

Meeting ID: 878 9594 9459

Passcode: 414552

Time	Item	Agenda	Page No.	Speaker / Presenter	Action	Strategic Focus
0900	1.0	Introduction & Land Acknowledgement	2	Carole Hamp		
	2.0	Conflict of Interest Declarations	-	Carole Hamp		
	3.0	Approval of Council Agenda	3-4	Chair	Decision	Governance & Accountability
	4.0	Legislative and General Policy Issues				
	4.1	Revised Registration Regulation – Approval for Submission to MOH	5-54	Carole Hamp	Decision	Core Business Practices
	4.2	Funding for Supportive Measures Policies – to Rescind and Archive	55-78	Carole Hamp	Decision	Core Business Practices
	5.0	Other Business				
	6.0	Next Meeting – May 26, 2023				
	7.0	Adjournment				

Council Briefing Note

AGENDA ITEM # 4.2

April 24, 2023

From:	Carole Hamp, Registrar & CEO
Topic:	Ontario Regulation 596/94 DRAFT Amendments – Approval to Make a Formal Submission to the Ministry
Purpose:	For Decision
Strategic Focus:	Core Business Practice
Attachment(s):	Appendix A: Draft Amended Registration Regulation Appendix B: Clause-by-clause Comparison of the Proposed Amendments Appendix C: Consultation Feedback
Motion:	It is moved by _____ and seconded by _____ that: Council approves that the DRAFT amendments to Ontario Regulation 596/94, <ul style="list-style-type: none">• Part VII Prescribed Procedures,• PART VII.1 Prescribed Substances, and• Part VIII Registration be submitted to the Ministry.

PUBLIC INTEREST RATIONALE

The [Registration Regulation](#) (Ontario Regulation 596/94: General, Part VIII) sets out the rules that establish who can be registered with the CRO. The regulation lists the classes of certificates of registration issued by the CRO (i.e., General, Graduate, Limited and Inactive). It specifies the requirements for registration, as well as the conditions imposed on Members registered in each class of registration. The regulation helps ensure that those registered with the CRO provide safe, ethical and competent care to members of the public.

In 2022, in an effort to strengthen Ontario's health human resource capacity¹, the government introduced a new regulation under the *Regulated Health Professions Act, 1991* (RHPA), which requires that health regulatory Colleges, including the CRO, have an Emergency Class of Registration. The goal of the Emergency Class is to accelerate the registration process during emergency situations, which may

¹ <https://www.ontariocanada.com/registry/view.do?postingId=41707>

include, for example, public health emergencies or other circumstances where significant interruptions would create delays in registering applicants.

ISSUE

In response to the Emergency Class registration requirement, the CRTO is proposing several amendments to three parts of Ontario Regulation 596/94, that is:

- Part VIII Registration – addition of the new Emergency Class Registration requirement, including provisions addressing the following:
 - Creating a separate class of registration;
 - Specifying the emergency circumstances in which the class will be open to applicants;
 - Addressing the expiry of a certificate issued in the emergency class of registration and the circumstances in which a member of the emergency class may transition to another class of registration;
 - Outlining the conditions that will be imposed on a certificate issued in the emergency class of registration.
- Part VII Prescribed Procedures
 - Setting out the conditions under which members in the Emergency Class can perform prescribed procedures below the dermis.
- PART VII.1 Prescribed Substances
 - Adding a provision to ensure that members in the Emergency Class are authorized to administer therapeutic oxygen by inhalation as prescribed in that regulation.

In addition, to the changes related to the Emergency Class, the CRTO is proposing several other amendments to the Ontario Regulation 596/94 Part VIII Registration. The reason for these additional amendments is to provide clarification to existing provisions and help harmonize the registration requirements for Respiratory Therapists across Canada. The changes can be grouped into the following categories:

- Suitability to Practice [ss. 53.(1) 4.]
- Education Requirement [ss. 55. (2)]
- Examination Requirement [ss. 55. (5) and (6)]
- Currency Requirement (applicants for registration) [ss. 55. (7), 56. (b), 57. (3), 58 (3), 59 (3)]
- Currency Requirement (members in the General Class) (s. 55.1)
- Graduate Class [60 (1)]

Note: the section numbers above reference the draft amended regulation.

BACKGROUND

In October 2022, the Lieutenant Governor in Council approved a regulation [under the *Regulated Health Professions Act, 1991* (RHPA)] that includes a provision requiring health regulatory Colleges to have an Emergency class of Registration. The Emergency Class provision will come into force on August 31, 2023.

To address this new requirement, the CRTC drafted amendments to Ontario Regulation 596/94, Part VIII Registration. It is also proposed that Part VII Prescribed Procedures and PART VII.1 Prescribed Substances of Ontario Regulation 596/94 be amended to ensure that members registered in the Emergency Class can provide the necessary patient care. The CRTC is also in communication with the Ministry of Health with respect to the Controlled Acts Regulation, to ensure that members in the Emergency Class are permitted to perform tracheostomy tube changes as authorized under the Controlled Acts Regulation.

As noted above, in addition, the draft revisions to the Registration Regulation include several other changes aimed to clarify existing provisions and harmonize the registration requirements for Respiratory Therapists across Canada.

The amendments have been drafted in consultation with the CRTC's legal counsel and have been reviewed by the Registration Committee at their February 1, 2023, meeting.

ANALYSIS

Note: for detailed analysis, please see Appendix B: Clause-by-Clause Comparison.

Summary of Changes:

- **Emergency Class (O. Reg. 596/94: General, Part VII, VIII, VIII):**
 - The Emergency Class of registration will only be available to applicants when the CRTC Council determines that there are emergency circumstances such that it is in the public interest to issue certificates of registration in the Emergency Class.
 - Individuals applying for a certificate of registration in the Emergency Class will need to meet specific requirements. However, they will not be required to have completed the entry-to-practice examination.
 - To mitigate any potential risk to patient safety, certificates issued in the Emergency Class will be subject to specific terms, conditions and limitations (e.g., supervision requirement).
 - A member registered under the Emergency Class may be issued a General Certificate of registration if they meet the requirements under the General Class (with the exception of the examination requirement) and satisfy the Registrar that they will practice competently and ethically or successfully complete the practice assessment.
- **Other Amendments (O. Reg. 596/94: General, Part VIII), if approved, the amendments will:**
 - Enshrine in the regulation the requirement that an applicant for registration must be mentally *and physically* competent to practise respiratory therapy [(ss. 53.(1) 4.]. Adding physical suitability to the regulation will help the CRTC ascertain if there are any conditions that impact the applicant's ability to practice respiratory therapy safely and if needed, allow it to mitigate any risk to patients through terms, conditions and limitations.
 - Help to clarify that Respiratory Therapists educational programs are approved by the Registration Committee based on criteria defined by a CRTC Council-approved policy [ss.

55.(2)]. This amendment will allow for greater flexibility in the registration process. Removing references to “a closely related” field is aimed at ensuring that applicants for registration have the minimum Respiratory Therapy competencies.

- Limit the number of times an applicant can attempt to pass the entry-to-practice examination [ss. 55. (5) and (6)]. In addition to aligning the CRTO requirements with other jurisdictions, this amendment will also help to ensure that applicants for registration have the required entry-to-practice competencies.
- Change the currency requirement for applicants from two to three years [ss. 55. (7)]. This change is intended to align the CRTO’s currency requirement with the practice of other regulators. It also reflects wider societal changes (e.g., longer parental leaves). Furthermore, the addition of minimum practice hours will allow the CRTO to more accurately ascertain the applicant’s currency, taking into consideration factors such as time and duration of last practice. This is to ensure that applicants have the current knowledge, skills and judgment required to provide safe and competent care.
- Add a new currency condition that will apply to members in the General Class. From a public interest perspective, it is essential that Respiratory Therapists have the current knowledge and level of skill required to practise safely and competently. Applicants for registration are already required to demonstrate that they meet the CRTO’s currency requirements. However, once registered, Members in the General Class can maintain their registration even if they are not practicing for an extended period of time. Absence from the profession for a prolonged period of time may not only result in loss of clinical skills but also reduces exposure to new developments and evolving best practices. Individuals lacking recent Respiratory Therapy experience may require supervision, additional training and education to ensure that they have the necessary skills and knowledge to provide safe and effective care to their patients.
- Clarify that members registered in the Graduate Class are not permitted to perform authorized act # 5 in the RTA, “administering a prescribed substance by inhalation” [49.1(2)]. In addition, the removal of “personally” will help to clarify the supervision requirement that applies to Graduate Certificates of Registration.

PUBLIC CONSULTATION

Note: the consultation feedback report will be updated after the consultation period ends on April 18, 2023.

The draft regulation amendments were posted for consultation on the CRTO website on February 17, 2023. A link to the consultation survey was also shared on the CRTO’s website homepage slider, social media accounts and through the February and April email eblasts. In total, 669 people viewed the consultation survey, and 32 respondents completed the survey.

As part of the consultation process, the CRTO sought feedback from the Office of the Fairness Commissioner (OFC). In their response, the OFC indicated that they do not have any comments at this time.

A copy of the amended regulation was also posted on the Ministry's Regulation Registry website. The Ministry did not receive any comments on the CRTO's proposal.

All comments received are included in Appendix C.

No additional changes have been proposed to the regulation as a result of the feedback received.

Length of time consultation was open: **60-days**
Date consultation closes: **April 18, 2023**

RECOMMENDATION:

It is recommended that Council approve amended regulation.

NEXT STEPS:

If the motion is carried, the regulation will be submitted to the Ministry of Health.

CONSULTATION FEEDBACK

669

Viewed

32

Completed

4.8

Completed
Views vs. Completions

**Respiratory Therapy Act, 1991
Loi de 1991 sur les thérapeutes respiratoires**

ONTARIO REGULATION 596/94

GENERAL

<https://www.ontario.ca/laws/regulation/940596#BK9>

PROPOSED AMENDMENTS (deletions are in blue & additions are in red)

**PART VIII
REGISTRATION**

CLASSES OF CERTIFICATE, GENERAL

50. The following are prescribed as classes of certificates of registration:

1. General.
2. Graduate.
3. Limited.
4. Inactive.
5. **Emergency.** O. Reg. 17/12, s. 1.

APPLICATION FOR CERTIFICATE OF REGISTRATION

51. A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar, together with the application fee. O. Reg. 17/12, s. 1.

52. It is a requirement for the issuing of a certificate of registration of any class that the applicant pay the required annual fee for that class of certificate. O. Reg. 17/12, s. 1.

REQUIREMENT FOR THE ISSUANCE OF CERTIFICATES OF REGISTRATION, ANY CLASS

53. (1) An applicant for a certificate of registration of any class must satisfy the following requirements:

1. The applicant must fully disclose details of any criminal offence of which the applicant has been found guilty, including any offence under the *Controlled Drugs and Substances Act* (Canada) or the *Food and Drugs Act* (Canada).
2. The applicant must fully disclose details of every professional misconduct, incompetence, incapacity or other similar proceeding that he or she is the subject of and that relates to his or

her registration or licensure in Ontario in another profession or in another jurisdiction in respiratory therapy or another profession.

3. The applicant must fully disclose details of every finding of professional misconduct, incompetence, incapacity or other similar finding that he or she previously has been the subject of while registered or licensed in Ontario in another profession or in another jurisdiction in respiratory therapy or another profession.
4. The applicant's past and present conduct afford reasonable grounds for belief that the applicant,
 - i. is mentally **and physically** competent to practise respiratory therapy,
 - ii. will practise respiratory therapy with decency, integrity and honesty and in accordance with the law, and
 - iii. will display an appropriately professional attitude.
5. The applicant must be able to communicate effectively in English or French in a health care environment.
6. The applicant must be a Canadian citizen or a permanent resident of Canada or be authorized under the *Immigration and Refugee Protection Act* (Canada) to engage in the practice of respiratory therapy. O. Reg. 17/12, s. 1.

(2) An applicant shall be deemed not to have satisfied the requirements for a certificate of registration if the applicant made a false or misleading statement or representation in the application. O. Reg. 17/12, s. 1.

(3) An applicant who, after having applied but before being issued a certificate, is found guilty of an offence referred to in paragraph 1 of subsection (1) or becomes the subject of a proceeding or of a finding described in paragraph 2 or 3 of that subsection shall immediately inform the Registrar. O. Reg. 17/12, s. 1.

CONDITIONS OF EVERY CERTIFICATE

54. Every certificate of registration is subject to the following conditions:

1. The member shall provide to the Registrar at the first reasonable opportunity of the details of any of the following that relate to the member and that occur or arise after the registration of the member,
 - i. a finding of guilt relating to any offence,
 - ii. a finding of professional misconduct, incompetence, incapacity or other similar finding in Ontario in relation to another profession or in another jurisdiction in relation to respiratory therapy or another profession,

- iii. a proceeding for professional misconduct, incompetence, incapacity or other similar proceeding in Ontario in relation to another profession or in another jurisdiction in relation to respiratory therapy or another profession.
- 2. The member must maintain professional liability insurance in the amount and in the form as required under the by-laws.
- 3. The member must provide information about himself or herself in the manner and in the form as required under the by-laws.
- 4. The member must pay any fees required under the by-laws. O. Reg. 17/12, s. 1.

ADDITIONAL REQUIREMENTS, GENERAL CERTIFICATE

55. (1) In addition to the requirements set out in section 53, an applicant for a general certificate of registration must satisfy the requirements set out in subsections (2), (4) and (5). O. Reg. 17/12, s. 1.

(2) Subject to subsection (7), an applicant must,

(a) have successfully completed a respiratory therapy program offered in Canada that, at the time of completion, was approved ~~or accredited by the Council or by a body approved by the Council by the Registration Committee~~ or

(b) have,

(i) successfully completed a program ~~offered outside Canada either~~ in respiratory therapy ~~or in a closely related field~~ that is acceptable to the Registration Committee, along with any additional education, **remediation or period of supervision** that is required by the Registration Committee, and

(ii) demonstrated through an assessment process acceptable to the Registration Committee that he or she has knowledge, skills and judgment equivalent to those of a person who has successfully completed a program referred to in clause (a). O. Reg. 17/12, s. 1.

(3) The College shall provide the applicant with a copy of the list of programs referred to in clause (2) (a) upon request. O. Reg. 17/12, s. 1.

(4) An applicant must have successfully completed the examinations set or approved from time to time by the Council which assess the generally accepted competencies for respiratory therapy. O. Reg. 17/12, s. 1.

(5) In every case where a candidate has failed the examinations three times after satisfying the requirements set out in subsection (2), the candidate is not eligible to apply to take the examination again until the CRTO approves their submitted study plan.

(6) If the candidate fails the examination a fourth time, after the submission of their study plan, the candidate is not eligible to take the examination again unless they successfully complete another approved respiratory therapy program.

~~(5)~~(7) An applicant must have met the requirements of subsection (2) within the ~~two~~ three years immediately preceding the application for registration unless the applicant ~~was practising~~ practised respiratory therapy for at least 1,125 hours within that ~~two~~-three-year period. O. Reg. 17/12, s. 1.

~~(6)~~(8) Subject to subsection (7) and to sections 56 and 57, the requirements in subsections (2) and (4) are non-exemptible. O. Reg. 17/12, s. 1.

~~(7)~~(9) An applicant for a general certificate of registration is exempt from the requirements of subsection (2) if the applicant previously held a general certificate of registration and, before being issued the general certificate, held a limited certificate of registration. O. Reg. 17/12, s. 1.

CONDITIONS, GENERAL CERTIFICATE OF REGISTRATION

55.1 (1) In addition to the conditions set out in section 54, it is a condition of a general certificate of registration that the member shall not engage in providing direct patient care or supervise the practice of the profession, unless the member has:

- (a) provided evidence satisfactory to the Registrar that the member has practised respiratory therapy for at least 1,125 hours during the preceding three years; or
- (b) provided evidence satisfactory to the Registration Committee through some other means that the member could meet the current standards of practice in Ontario; or
- (c) provided evidence of successful completion of a refresher course approved by the Registrar within the preceding three years.

(2) If the Registration Committee is of the opinion that the member does not meet one of the conditions in subsection (1) the Registration Committee may permit the member to continue to provide direct patient care subject to a term, condition or limitation requiring that the member be supervised, until the member is able to provide proof of having met one of the conditions in subsection (1).

MOBILITY — UNREGULATED CANADIAN PRACTITIONER

56. An applicant for a general certificate of registration is exempt from the requirements of subsections 55 (2) and (4) if,

- (a) the applicant is a member of a professional association of practitioners of respiratory therapy in another jurisdiction in Canada that does not have a statutory regulatory body for practitioners of respiratory therapy, if the professional association is recognized by the Registration Committee and the applicant has a general or full membership status in the professional association;
- (b) the applicant has safely practised the profession in that jurisdiction, while holding the general or full membership status, in a manner that demonstrates that he or she could meet the current standards of practice of the profession in Ontario, for at least 1,125 within the ~~two~~ three years immediately before the date of the application; and
- (c) the occupational standards and requirements for practitioners of respiratory therapy who are members of a recognized professional association in that jurisdiction are, in the opinion of the

Registration Committee, substantially equivalent to those for respiratory therapists registered in Ontario. O. Reg. 17/12, s. 1.

MOBILITY — REGULATED CANADIAN PRACTITIONER

57. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a general certificate of registration, the requirements of subsections 55 (2), (4) and (5) are deemed to have been met by the applicant. O. Reg. 17/12, s. 1.

(2) Despite subsection (1), it is a non-exemptible requirement that an applicant referred to in subsection (1) provide a certificate, letter or other evidence satisfactory to the Registrar that the applicant is in good standing as a respiratory therapist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 17/12, s. 1.

(3) Where an applicant referred to in subsection (1) is unable to satisfy the Registrar that the applicant practised the profession to the extent that would be permitted by a general certificate of registration at any time in the ~~two~~ **three** years immediately prior to the date of that applicant's application, that applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments, if any, that may be specified by a panel of the Registration Committee. O. Reg. 17/12, s. 1.

(4) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 5 of subsection 53 (1) where the requirements for the issuance of the applicant's out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 17/12, s. 1.

(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 17/12, s. 1.

ADDITIONAL REQUIREMENTS, GRADUATE CERTIFICATE

58. (1) In addition to the requirements set out in section 53, an applicant for a graduate certificate of registration must meet the following requirements:

1. The applicant must have successfully completed the requirements of subsection 55 (2).
2. The applicant must not yet have completed the examinations referred to in subsection 55 (4). O. Reg. 17/12, s. 1.

(2) The College shall provide the applicant with a copy of the list of programs referred to in clause 55 (2) (a) upon request. O. Reg. 17/12, s. 1.

(3) An applicant must have met the requirements of subsection 55 (2) within the ~~two~~ **three** years immediately preceding the application for registration unless the applicant ~~was practising~~ **practised** respiratory therapy **for at least 1,125 hours** in a jurisdiction outside Ontario within that ~~two~~ **three**-year period. O. Reg. 17/12, s. 1.

(4) Subject to section 59, the requirements referred to in paragraphs 1 and 2 of subsection (1) are non-exemptible. O. Reg. 17/12, s. 1.

MOBILITY — GRADUATE CERTIFICATE

59. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a graduate certificate of registration, the requirements of subsections 58 (1) and (3) are deemed to have been met by the applicant. O. Reg. 17/12, s. 1.

(2) Despite subsection (1), it is a non-exemptible requirement that an applicant referred to in subsection (1) provide a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee that the applicant is in good standing as a respiratory therapist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 17/12, s. 1.

(3) Where an applicant referred to in subsection (1) is unable to satisfy the Registrar that the applicant practised the profession to the extent that would be permitted by a graduate certificate of registration at any time in the ~~two~~ **three** years immediately before the date of that applicant's application, that applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments, if any, that may be specified by a panel of the Registration Committee. O. Reg. 17/12, s. 1.

(4) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 5 of subsection 53 (1) where the requirements for the issuance of the applicant's out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 17/12, s. 1.

(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 17/12, s. 1.

CONDITIONS, GRADUATE CERTIFICATE OF REGISTRATION

60. (1) In addition to the conditions set out in section 54, it is a condition of a graduate certificate of registration that the member shall,

- (a) at the first reasonable opportunity, advise every employer of any terms, conditions and limitations that apply to the member's graduate certificate of registration if their employment is in the field of respiratory therapy;
- (b) subject to subsections 49 (2) **and 49.1 (2)**, only perform a controlled act that is authorized to the profession if it is performed under the general supervision of a member of a College within the meaning of the *Regulated Health Professions Act, 1991* who, the member holding the graduate certificate has reasonable grounds to believe, is authorized to perform the controlled act and is competent to do so and who is available to be **personally** present at the site where the authorized act is performed on ten minutes notice; and
- (c) not delegate a controlled act. O. Reg. 17/12, s. 1.

(2) A graduate certificate is deemed to have been revoked 18 months after its date of issue. O. Reg. 17/12, s. 1.

LIMITED CERTIFICATE OF REGISTRATION

61. (1) A member who, on or before February 25, 1999, held a limited certificate of registration may continue to hold such a certificate, subject to such terms, conditions or limitations as may be specified on the certificate. O. Reg. 17/12, s. 1.

(2) A limited certificate of registration shall not be issued to a person other than a person referred to in subsection (1). O. Reg. 17/12, s. 1.

(3) A holder of a limited certificate who wishes to obtain registration in another class must satisfy the requirements for the certificate of the other class. O. Reg. 17/12, s. 1.

INACTIVE CERTIFICATE OF REGISTRATION

62. (1) In addition to the requirements set out in section 53, an applicant for an inactive certificate of registration must meet the following requirements:

1. The applicant must be a member who holds a general or limited certificate of registration.
2. The applicant must notify the Registrar in writing of his or her intention to become an inactive member.
3. The applicant must pay any outstanding fees, including any annual fee owing for the current membership, penalty or other amount owed to the College. O. Reg. 17/12, s. 1.

(2) A member who holds an inactive certificate of registration may be reissued a general or limited certificate of registration, as the case may be, if the member,

- (a) applies in writing to the Registrar for reinstatement;
- (b) pays the annual fee in respect of the class of certificate of registration which is the subject of the application for reinstatement together with any other outstanding fee, penalty or other amount owed to the College; and
- (c) satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding a certificate of registration of the type which is the subject of the application for reinstatement. O. Reg. 17/12, s. 1.

CONDITIONS, INACTIVE CERTIFICATE OF REGISTRATION

63. In addition to the conditions set out in section 54, it is a condition of an inactive certificate of registration that the member shall not,

- (a) engage in providing direct patient care;
- (b) use any title or designation listed in the Table to section 67;

- (c) supervise the practice of the profession; or
- (d) make any claim or representation to having any competence in the profession. O. Reg. 17/12, s. 1.

EMERGENCY CERTIFICATE OF REGISTRATION

63.1. (1) In addition to the requirements set out in section 53, an applicant for a certificate of registration in the emergency class must meet the following requirements:

1. The Council of the College has determined that there are emergency circumstances such that it is in the public interest to issue certificates of registration in the emergency class.
2. The applicant must have satisfied the requirements of subsection 55 (2)(a) or (b).
3. The applicant must have met the requirements of subsection 55 (2) (a) or (b) within the three years immediately preceding the application for registration unless the applicant was practising respiratory therapy for at least 1,125 hours in a jurisdiction outside Ontario in which respiratory therapy is regulated within that three-year period.

(2). The requirements referred to in paragraphs 1 and 2 of subsection (1) are non-exemptible.

63.2. (1) Unless stated otherwise on the certificate, a certificate of registration in the emergency class expires 12 months after it is issued unless it is renewed.

(2) Unless stated otherwise on the certificate, a renewed certificate of registration in the emergency class expires 12 months after it is issued unless it is renewed again.

(3) Despite subsections (1) and (2), a certificate of registration in the emergency class expires six months after the date the Council of the College determines that emergency circumstances no longer exist even where the certificate would otherwise expire before or after that time.

63.3. A member who holds, or held within the previous six months, a certificate of registration in the emergency class may be issued a certificate of registration in the general class despite not having met the requirements set out in subsection 55 (4), if the member,

- (a) applies for the certificate of registration in the general class,
- (b) satisfies all other requirements for the certificate of registration in the general class, and
- (c) provides satisfactory evidence to the Registrar based on their practice for at least 500 hours under the certificate of registration in the emergency class, that the member will practice competently and ethically even though practising without supervision, or successfully completes the practice assessment designed to assess the practice competencies of a holder of a certification of registration in the emergency class.

CONDITIONS, EMERGENCY CERTIFICATE OF REGISTRATION

63.4. In addition to the conditions set out in section 54, it is a condition of an emergency certificate of registration that the member shall,

(a) at the first reasonable opportunity, advise every employer of any terms, conditions and limitations that apply to the member's emergency certificate of registration if their employment is in the field of respiratory therapy;

(b) practise the profession only within the scope of their certificate;

(c) only perform a controlled act that is authorized to the profession if it is performed under the general supervision of a member who holds a certificate in the General Class of registration and who is available to be present at the site on ten minutes notice; and

(d) not delegate a controlled act.

RESIGNATION

64. A member may resign his or her membership by giving written notice to that effect to the Registrar and paying all outstanding fees, penalties or other amounts owed to the College. O. Reg. 17/12, s. 1.

SUSPENSIONS, REVOCATIONS, ETC.

65. (1) If a member fails to provide information about the member in the manner and in the form as required under the by-laws, the Registrar may give the member notice of intention to suspend the member and may suspend the member's certificate of registration for failure to provide the information 30 days after notice is given. O. Reg. 17/12, s. 1.

(2) Where the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the required information has been filed with the College and that any fee required for the lifting of the suspension has been paid. O. Reg. 17/12, s. 1.

(3) Where the Registrar suspends a member's certificate of registration pursuant to section 24 of the Health Professions Procedural Code, the Registrar shall lift the suspension upon being satisfied that any fee required for the lifting of that suspension has been paid. O. Reg. 17/12, s. 1.

66. (1) The Registrar may revoke a member's certificate of registration if, after giving the member written notice and an opportunity to respond the Registrar is of the opinion that the member made, by commission or omission, a false or misleading representation or declaration on or in connection with their application. O. Reg. 17/12, s. 1.

(2) The Registrar shall revoke a member's certificate of registration if the member's certificate of registration was suspended under subsection 65 (1) or under section 24 of the Health Professions Procedural Code and that suspension has not been lifted under subsection 65 (2) or (3) by the last day of the College fiscal year in which the suspension was imposed. O. Reg. 17/12, s. 1.

TITLES

67. A member who holds a certificate of registration listed in Column 1 of the Table to this section,

(a) may use a title listed in Column 2 or 3 opposite the certificate of registration; and

(b) shall use the designation listed in Column 4 opposite the certificate of registration. O. Reg. 17/12, s. 1.

TABLE

Column 1	Column 2	Column 3	Column 4
Certificate of Registration	English Title	French Title	Designation
General	Registered Respiratory Therapist; or Respiratory Therapist	Thérapeute Respiratoire Autorisé(e); or Thérapeute Respiratoire	RRT
Graduate	Graduate Respiratory Therapist	Thérapeute Respiratoire Diplômé(e)	GRT
Limited	Practical Respiratory Therapist	Thérapeute Respiratoire Auxiliaire	PRT
Emergency	Respiratory Therapist (Supervised)	Thérapeute respiratoire (sous supervision)	RT(S)

O. Reg. 17/12, s. 1.

PART VII

PRESCRIBED PROCEDURES

48. The following procedures are prescribed as procedures below the dermis for the purposes of paragraph 1 of section 4 of the Act:

1. Basic procedures:

- i. Arterial, venous and capillary puncture.
- ii. Insertion, suturing, aspiration, repositioning, manipulation and removal of an arterial cannula.
- iii. Insertion, suturing, aspiration, repositioning, manipulation and removal of a venous cannula.

2. Advanced procedures:

- i. Manipulation or repositioning of a cannula balloon.
- ii. Chest needle insertion, aspiration, reposition and removal.
- iii. Chest tube insertion, aspiration, reposition and removal.
- iv. Bronchoscopic tissue sample for the purpose of bronchoalveolar lavage and endobronchial brushing.
- v. Intraosseous needle insertion.
- vi. Subcutaneous electrode placement for interoperative and perinatal fetal monitoring.

3. Revoked: O. Reg. 86/14, s. 1.

49. (1) It is a condition of a general **or emergency** certificate of registration that a member not perform an advanced procedure unless the member has, within two years before the procedure is performed, successfully completed a certification process or program approved by the Registration Committee of the College. O. Reg. 68/99, s. 1.

(2) It is a condition of a graduate certificate of registration that a member not perform an advanced procedure. O. Reg. 86/14, s. 2.

(3) The following are conditions of a limited certificate of registration:

1. A member shall not perform an advanced procedure.

2. A member shall not perform a basic procedure unless the member is permitted to perform the procedure by the terms and conditions of his or her certificate of registration. O. Reg. 86/14, s. 2.

PART VII.1

PRESCRIBED SUBSTANCES

49.1 (1) For the purposes of paragraph 5 of section 4 of the Act, a member holding a general **or emergency** certificate of registration is authorized, in the course of engaging in the practice of the profession, and subject to the terms, conditions and limitations imposed on his or her certificate of registration, to administer therapeutic oxygen by inhalation. O. Reg. 334/12, s. 1.

(2) It is a condition of every other certificate of registration that the member not administer a prescribed substance by inhalation in the course of engaging in the practice of the profession. O. Reg. 334/12, s. 1.



**Clause-by-clause* comparison of the proposed amendments to
Ontario Regulation 596/94 Part VIII – Registration, Part VII - Prescribed Procedures and Part VII.1 - Prescribed Substances**

*only clauses with amendments are included in this table
(Deletions are in **blue** & additions are in **red**.)

Registration – Part VIII

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p align="center">CLASSES OF CERTIFICATE, GENERAL</p> <p>50. The following are prescribed as classes of certificates of registration:</p> <ol style="list-style-type: none"> 1. General. 2. Graduate. 3. Limited. 4. Inactive. O. Reg. 17/12, s. 1. 	<p align="center">CLASSES OF CERTIFICATE, GENERAL</p> <p>50. The following are prescribed as classes of certificates of registration:</p> <ol style="list-style-type: none"> 1. General. 2. Graduate. 3. Limited. 4. Inactive. 5. Emergency. O. Reg. 17/12, s. 1. 	<p>An Emergency class of registration added to meet the requirements of the Registration Requirements Regulation (O. Reg 508/22) made under the Regulated Health Professions Act, 1991 (RHPA) that all Colleges must have an emergency class of registration.</p>
<p align="center">REQUIREMENT FOR THE ISSUANCE OF CERTIFICATES OF REGISTRATION, ANY CLASS</p> <p>53. (1) An applicant for a certificate of registration of any class must satisfy the following requirements:</p>	<p align="center">REQUIREMENT FOR THE ISSUANCE OF CERTIFICATES OF REGISTRATION, ANY CLASS</p> <p>53. (1) An applicant for a certificate of registration of any class must satisfy the following requirements:</p>	

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>1. The applicant must fully disclose details of any criminal offence of which the applicant has been found guilty, including any offence under the <i>Controlled Drugs and Substances Act (Canada)</i> or the <i>Food and Drugs Act (Canada)</i>.</p> <p>2. The applicant must fully disclose details of every professional misconduct, incompetence, incapacity or other similar proceeding that he or she is the subject of and that relates to his or her registration or licensure in Ontario in another profession or in another jurisdiction in respiratory therapy or another profession.</p> <p>3. The applicant must fully disclose details of every finding of professional misconduct, incompetence, incapacity or other similar finding that he or she previously has been the subject of while registered or licensed in Ontario in another profession or in another jurisdiction in respiratory therapy or another profession.</p> <p>4. The applicant’s past and present conduct afford reasonable grounds for belief that the applicant,</p> <p style="padding-left: 40px;">i. is mentally competent to practise respiratory therapy,</p>	<p>1. The applicant must fully disclose details of any criminal offence of which the applicant has been found guilty, including any offence under the <i>Controlled Drugs and Substances Act (Canada)</i> or the <i>Food and Drugs Act (Canada)</i>.</p> <p>2. The applicant must fully disclose details of every professional misconduct, incompetence, incapacity or other similar proceeding that he or she is the subject of and that relates to his or her registration or licensure in Ontario in another profession or in another jurisdiction in respiratory therapy or another profession.</p> <p>3. The applicant must fully disclose details of every finding of professional misconduct, incompetence, incapacity or other similar finding that he or she previously has been the subject of while registered or licensed in Ontario in another profession or in another jurisdiction in respiratory therapy or another profession.</p> <p>4. The applicant’s past and present conduct afford reasonable grounds for belief that the applicant,</p> <p style="padding-left: 40px;">i. is mentally and physically competent to practise respiratory therapy,</p>	<p>Consideration of applicants’ suitability to practice is part of the CRTO’s current registration process. Broadly defined, suitability to practice includes determining whether an applicant has a physical or</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>ii. will practise respiratory therapy with decency, integrity and honesty and in accordance with the law, and</p> <p>iii. will display an appropriately professional attitude.</p> <p>5. The applicant must be able to communicate effectively in English or French in a health care environment.</p> <p>6. The applicant must be a Canadian citizen or a permanent resident of Canada or be authorized under the <i>Immigration and Refugee Protection Act (Canada)</i> to engage in the practice of respiratory therapy. O. Reg. 17/12, s. 1.</p> <p>(2) An applicant shall be deemed not to have satisfied the requirements for a certificate of registration if the applicant made a false or misleading statement or representation in the application. O. Reg. 17/12, s. 1.</p> <p>(3) An applicant who, after having applied but before being issued a certificate, is found guilty of an offence referred to in paragraph 1 of subsection (1) or becomes the subject of a proceeding or of a finding described in paragraph 2 or 3 of that subsection shall immediately inform the Registrar. O. Reg. 17/12, s. 1.</p>	<p>ii. will practise respiratory therapy with decency, integrity and honesty and in accordance with the law, and</p> <p>iii. will display an appropriately professional attitude.</p> <p>5. The applicant must be able to communicate effectively in English or French in a health care environment.</p> <p>6. The applicant must be a Canadian citizen or a permanent resident of Canada or be authorized under the <i>Immigration and Refugee Protection Act (Canada)</i> to engage in the practice of respiratory therapy. O. Reg. 17/12, s. 1.</p> <p>(2) An applicant shall be deemed not to have satisfied the requirements for a certificate of registration if the applicant made a false or misleading statement or representation in the application. O. Reg. 17/12, s. 1.</p> <p>(3) An applicant who, after having applied but before being issued a certificate, is found guilty of an offence referred to in paragraph 1 of subsection (1) or becomes the subject of a proceeding or of a finding described in paragraph 2 or 3 of that subsection shall immediately inform the Registrar. O. Reg. 17/12, s. 1.</p>	<p>mental condition or disorder that could affect their ability to practise safely. This change is intended to enhance the transparency of the registration process for all classes of registration and to ensure alignment with other health regulatory Colleges.</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p style="text-align: center;">ADDITIONAL REQUIREMENTS, GENERAL CERTIFICATE</p> <p>55. (1) In addition to the requirements set out in section 53, an applicant for a general certificate of registration must satisfy the requirements set out in subsections (2), (4) and (5). O. Reg. 17/12, s. 1.</p> <p>(2) Subject to subsection (7), an applicant must,</p> <p>(a) have successfully completed a respiratory therapy program offered in Canada that, at the time of completion, was approved or accredited by the Council or by a body approved by the Council; or</p> <p>(b) have,</p> <p>(i) successfully completed a program offered outside Canada either in respiratory therapy or in a closely related field that is acceptable to the Registration Committee, along with any additional education that is required by the Registration Committee, and</p>	<p style="text-align: center;">ADDITIONAL REQUIREMENTS, GENERAL CERTIFICATE</p> <p>55. (1) In addition to the requirements set out in section 53, an applicant for a general certificate of registration must satisfy the requirements set out in subsections (2), (4) and (5). O. Reg. 17/12, s. 1.</p> <p>(2) Subject to subsection (7), an applicant must,</p> <p>(a) have successfully completed a respiratory therapy program offered in Canada that, at the time of completion, was approved or accredited by the Council or by a body approved by the Council the Registration Committee; or</p> <p>(b) have,</p> <p>(i) successfully completed a program offered outside Canada either in respiratory therapy or in a closely related field that is acceptable to the Registration Committee, along with any additional education, remediation or period of supervision that is required by the Registration Committee, and</p>	<p>Educational programs for Respiratory Therapists (RT) are approved by the Registration Committee (RC) based on criteria defined by a CRO Council-approved policy. This amendment will allow for greater flexibility in the registration process.</p> <p>Removing reference to educational programs offered outside Canada will allow the CRO to refer graduates of unapproved/unaccredited programs (offered in and outside Canada) to the assessment process.</p> <p>Removing references to a closely related field is aimed at ensuring that applicants have the minimum Respiratory Therapy competencies. Based on the competency assessments conducted by the CRO to date, it is not feasible for a candidate who did not complete a program in respiratory therapy to demonstrate the required entry to practice competencies. This will also help</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>(ii) demonstrated through an assessment process acceptable to the Registration Committee that he or she has knowledge, skills and judgment equivalent to those of a person who has successfully completed a program referred to in clause (a). O. Reg. 17/12, s. 1.</p> <p>(3) The College shall provide the applicant with a copy of the list of programs referred to in clause (2) (a) upon request. O. Reg. 17/12, s. 1.</p> <p>(4) An applicant must have successfully completed the examinations set or approved from time to time by the Council which assess the generally accepted competencies for respiratory therapy. O. Reg. 17/12, s. 1.</p>	<p>(ii) demonstrated through an assessment process acceptable to the Registration Committee that he or she has knowledge, skills and judgment equivalent to those of a person who has successfully completed a program referred to in clause (a). O. Reg. 17/12, s. 1.</p> <p>(3) The College shall provide the applicant with a copy of the list of programs referred to in clause (2) (a) upon request. O. Reg. 17/12, s. 1.</p> <p>(4) An applicant must have successfully completed the examinations set or approved from time to time by the Council which assess the generally accepted competencies for respiratory therapy. O. Reg. 17/12, s. 1.</p> <p>(5) In every case where a candidate has failed the examinations three times after satisfying the requirements set out in subsection (2), the candidate is not eligible to apply to take the examination again until</p>	<p>ensure alignment with other health regulatory Colleges.</p> <p>Remediation and period of supervision was added to clarify that the RC might require more than additional education (e.g., supervision) to support safe, competent and ethical patient care.</p> <p>Currently, the CRTO does not limit the number of times a registration candidate can attempt the pass the national credentialing exam. However, the RT regulators in other Canadian jurisdictions,</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>(5) An applicant must have met the requirements of subsection (2) within the two years immediately preceding the application for registration unless the applicant was practising respiratory therapy within that two-year period. O. Reg. 17/12, s. 1.</p>	<p>the CRTO approves their submitted study plan.</p> <p>(6) If the candidate fails the examination a fourth time, after the submission of their study plan, the candidate is not eligible to take the examination again unless they successfully complete another approved respiratory therapy program.</p> <p>(7) An applicant must have met the requirements of subsection (2) within the two three years immediately preceding the application for registration unless the applicant was practising practised respiratory therapy for at least 1,125 hours within that two three-year period. O. Reg. 17/12, s. 1.</p>	<p>as well as the national professional association (which oversees the non-regulated jurisdiction) limit the number of exam attempts at a maximum of three (3) or four (4). Therefore, provisions #5 and 6 were added to limit the number of exam attempts at four (4) to align the CRTO requirements with other jurisdictions and ultimately to ensure that applicants for registration have the required entry to practice competencies and will provide safe and competent patient care.</p> <p>The change from two to three years is intended to align the CRTO’s currency requirement with the practice of other health regulators. It also reflects wider societal changes (e.g., longer parental leaves).</p> <p>The CRTO does not currently have a provision that requires its applicants to have practiced for a minimum number of hours to meet the currency requirement. However, all other RT regulators from across Canada do have minimal practice hours requirements. Therefore, this provision was added to ensure that applicants have the current knowledge and level of skill required to provide safe, competent, and ethical care, and to enable seamless labour mobility.</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>(6) Subject to subsection (7) and to sections 56 and 57, the requirements in subsections (2) and (4) are non-exemptible. O. Reg. 17/12, s. 1.</p> <p>(7) An applicant for a general certificate of registration is exempt from the requirements of subsection (2) if the applicant previously held a general certificate of registration and, before being issued the general certificate, held a limited certificate of registration. O. Reg. 17/12, s. 1.</p>	<p>(8) Subject to subsection (7) and to sections 56 and 57, the requirements in subsections (2) and (4) are non-exemptible. O. Reg. 17/12, s. 1.</p> <p>(9) An applicant for a general certificate of registration is exempt from the requirements of subsection (2) if the applicant previously held a general certificate of registration and, before being issued the general certificate, held a limited certificate of registration. O. Reg. 17/12, s. 1.</p>	
	<p style="text-align: center;">CONDITIONS, GENERAL CERTIFICATE OF REGISTRATION</p> <p>55.1 (1) In addition to the conditions set out in section 54, it is a condition of a general certificate of registration that the member shall not engage in providing direct patient care or supervise the practice of the profession unless the member has:</p> <ul style="list-style-type: none"> (a) provided evidence satisfactory to the Registrar that the member has practised respiratory therapy for at least 1,125 hours during the preceding three years; or (b) provided evidence satisfactory to the Registration Committee through some other means that the member 	<p>This is a new section added to ensure that CRTO members in the general class have the current knowledge and level of skill required to provide safe, competent, and ethical care. This new condition aligns with the initial currency requirement for registration. The requirement also aligns with other regulated RT jurisdictions.</p> <p>The definition of “practice” will be provided in a policy.</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
	<p>could meet the current standards of practice in Ontario; or</p> <p>(c) provided evidence of successful completion of a refresher course approved by the Registrar within the preceding three years.</p> <p>(2) If the Registration Committee is of the opinion that the member does not meet one of the conditions in subsection (1) the Registration Committee may permit the member to continue to provide direct patient care subject to a term, condition or limitation requiring that the member be supervised until the member is able to provide proof of having met one of the conditions in subsection (1).</p>	
<p>MOBILITY — UNREGULATED CANADIAN PRACTITIONER</p> <p>56. An applicant for a general certificate of registration is exempt from the requirements of subsections 55 (2) and (4) if,</p> <p>(a) the applicant is a member of a professional association of practitioners of respiratory therapy in another jurisdiction in Canada that does not have a statutory regulatory body for practitioners of respiratory therapy, if the professional association is recognized by the Registration Committee and the applicant has a</p>	<p>MOBILITY — UNREGULATED CANADIAN PRACTITIONER</p> <p>56. An applicant for a general certificate of registration is exempt from the requirements of subsections 55 (2) and (4) if,</p> <p>(a) the applicant is a member of a professional association of practitioners of respiratory therapy in another jurisdiction in Canada that does not have a statutory regulatory body for practitioners of respiratory therapy, if the professional association is recognized by the Registration Committee and the applicant has a</p>	

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>general or full membership status in the professional association;</p> <p>(b) the applicant has safely practised the profession in that jurisdiction, while holding the general or full membership status, in a manner that demonstrates that he or she could meet the current standards of practice of the profession in Ontario, within the two years immediately before the date of the application; and</p> <p>(c) the occupational standards and requirements for practitioners of respiratory therapy who are members of a recognized professional association in that jurisdiction are, in the opinion of the Registration Committee, substantially equivalent to those for respiratory therapists registered in Ontario. O. Reg. 17/12, s. 1.</p>	<p>general or full membership status in the professional association;</p> <p>(b) the applicant has safely practised the profession in that jurisdiction, while holding the general or full membership status, in a manner that demonstrates that he or she could meet the current standards of practice of the profession in Ontario, for at least 1,125 hours within the two-three years immediately before the date of the application; and</p> <p>(c) the occupational standards and requirements for practitioners of respiratory therapy who are members of a recognized professional association in that jurisdiction are, in the opinion of the Registration Committee, substantially equivalent to those for respiratory therapists registered in Ontario. O. Reg. 17/12, s. 1.</p>	<p>Changed to ensure consistency with 55(7).</p>
<p>MOBILITY — REGULATED CANADIAN PRACTITIONER</p> <p>57. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a general certificate of registration, the requirements of subsections 55 (2), (4) and (5) are deemed to have been met by the applicant. O. Reg. 17/12, s. 1.</p>	<p>MOBILITY — REGULATED CANADIAN PRACTITIONER</p> <p>57. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a general certificate of registration, the requirements of subsections 55 (2), (4) and (5) are deemed to have been met by the applicant. O. Reg. 17/12, s. 1.</p>	

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>(2) Despite subsection (1), it is a non-exemptible requirement that an applicant referred to in subsection (1) provide a certificate, letter or other evidence satisfactory to the Registrar that the applicant is in good standing as a respiratory therapist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 17/12, s. 1.</p> <p>(3) Where an applicant referred to in subsection (1) is unable to satisfy the Registrar that the applicant practised the profession to the extent that would be permitted by a general certificate of registration at any time in the two years immediately prior to the date of that applicant’s application, that applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments, if any, that may be specified by a panel of the Registration Committee. O. Reg. 17/12, s. 1.</p> <p>(4) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 5 of subsection 53 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 17/12, s. 1.</p>	<p>(2) Despite subsection (1), it is a non-exemptible requirement that an applicant referred to in subsection (1) provide a certificate, letter or other evidence satisfactory to the Registrar that the applicant is in good standing as a respiratory therapist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 17/12, s. 1.</p> <p>(3) Where an applicant referred to in subsection (1) is unable to satisfy the Registrar that the applicant practised the profession to the extent that would be permitted by a general certificate of registration at any time in the two three years immediately prior to the date of that applicant’s application, that applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments, if any, that may be specified by a panel of the Registration Committee. O. Reg. 17/12, s. 1.</p> <p>(4) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 5 of subsection 53 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 17/12, s. 1.</p>	<p>Changed to ensure consistency with 55(7).</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 17/12, s. 1.</p>	<p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 17/12, s. 1.</p>	
<p style="text-align: center;">ADDITIONAL REQUIREMENTS, GRADUATE CERTIFICATE</p> <p>58. (1) In addition to the requirements set out in section 53, an applicant for a graduate certificate of registration must meet the following requirements:</p> <ol style="list-style-type: none"> 1. The applicant must have successfully completed the requirements of subsection 55 (2). 2. The applicant must not yet have completed the examinations referred to in subsection 55 (4). O. Reg. 17/12, s. 1. <p>(2) The College shall provide the applicant with a copy of the list of programs referred to in clause 55 (2) (a) upon request. O. Reg. 17/12, s. 1.</p> <p>(3) An applicant must have met the requirements of subsection 55 (2) within the two years immediately preceding the application for registration unless the applicant was practising respiratory therapy in a jurisdiction outside Ontario within that two-year period. O. Reg. 17/12, s. 1.</p> <p>(4) Subject to section 59, the requirements referred to in paragraphs 1 and 2 of</p>	<p style="text-align: center;">ADDITIONAL REQUIREMENTS, GRADUATE CERTIFICATE</p> <p>58. (1) In addition to the requirements set out in section 53, an applicant for a graduate certificate of registration must meet the following requirements:</p> <ol style="list-style-type: none"> 1. The applicant must have successfully completed the requirements of subsection 55 (2). 2. The applicant must not yet have completed the examinations referred to in subsection 55 (4). O. Reg. 17/12, s. 1. <p>(2) The College shall provide the applicant with a copy of the list of programs referred to in clause 55 (2) (a) upon request. O. Reg. 17/12, s. 1.</p> <p>(3) An applicant must have met the requirements of subsection 55 (2) within the twothree years immediately preceding the application for registration unless the applicant was practising respiratory therapy for at least 1,125 hours in a jurisdiction outside Ontario within that twothree-year period. O. Reg. 17/12, s. 1.</p>	<p>Changed to ensure consistency with 55(7).</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>subsection (1) are non-exemptible. O. Reg. 17/12, s. 1.</p>	<p>(4) Subject to section 59, the requirements referred to in paragraphs 1 and 2 of subsection (1) are non-exemptible. O. Reg. 17/12, s. 1.</p>	
<p style="text-align: center;">MOBILITY — GRADUATE CERTIFICATE</p> <p>59. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a graduate certificate of registration, the requirements of subsections 58 (1) and (3) are deemed to have been met by the applicant. O. Reg. 17/12, s. 1.</p> <p>(2) Despite subsection (1), it is a non-exemptible requirement that an applicant referred to in subsection (1) provide a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee that the applicant is in good standing as a respiratory therapist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 17/12, s. 1.</p> <p>(3) Where an applicant referred to in subsection (1) is unable to satisfy the Registrar that the applicant practised the profession to the extent that would be permitted by a graduate certificate of registration at any time in the two years immediately before the date of that applicant’s application, that applicant must meet any further requirement to</p>	<p style="text-align: center;">MOBILITY — GRADUATE CERTIFICATE</p> <p>59. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a graduate certificate of registration, the requirements of subsections 58 (1) and (3) are deemed to have been met by the applicant. O. Reg. 17/12, s. 1.</p> <p>(2) Despite subsection (1), it is a non-exemptible requirement that an applicant referred to in subsection (1) provide a certificate, letter or other evidence satisfactory to the Registrar or a panel of the Registration Committee that the applicant is in good standing as a respiratory therapist in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 17/12, s. 1.</p> <p>(3) Where an applicant referred to in subsection (1) is unable to satisfy the Registrar that the applicant practised the profession to the extent that would be permitted by a graduate certificate of registration at any time in the two three years immediately before the date of that applicant’s application, that applicant must meet any further requirement to</p>	<p>Changed to ensure consistency with 55(7).</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>undertake, obtain or undergo material additional training, experience, examinations or assessments, if any, that may be specified by a panel of the Registration Committee. O. Reg. 17/12, s. 1.</p> <p>(4) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 5 of subsection 53 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 17/12, s. 1.</p> <p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 17/12, s. 1.</p>	<p>undertake, obtain or undergo material additional training, experience, examinations or assessments, if any, that may be specified by a panel of the Registration Committee. O. Reg. 17/12, s. 1.</p> <p>(4) An applicant referred to in subsection (1) is deemed to have met the requirements of paragraph 5 of subsection 53 (1) where the requirements for the issuance of the applicant’s out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 17/12, s. 1.</p> <p>(5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 17/12, s. 1.</p>	
<p style="text-align: center;">CONDITIONS, GRADUATE CERTIFICATE OF REGISTRATION</p> <p>60. (1) In addition to the conditions set out in section 54, it is a condition of a graduate certificate of registration that the member shall,</p> <p style="padding-left: 40px;">(a) at the first reasonable opportunity, advise every employer of any terms, conditions and limitations that apply to the member’s graduate certificate of registration if their employment is in the field of respiratory therapy;</p>	<p style="text-align: center;">CONDITIONS, GRADUATE CERTIFICATE OF REGISTRATION</p> <p>60. (1) In addition to the conditions set out in section 54, it is a condition of a graduate certificate of registration that the member shall,</p> <p style="padding-left: 40px;">(a) at the first reasonable opportunity, advise every employer of any terms, conditions and limitations that apply to the member’s graduate certificate of registration if their employment is in the field of respiratory therapy;</p>	

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
<p>(b) subject to subsection 49 (2), only perform a controlled act that is authorized to the profession if it is performed under the general supervision of a member of a College within the meaning of the <i>Regulated Health Professions Act, 1991</i> who, the member holding the graduate certificate has reasonable grounds to believe, is authorized to perform the controlled act and is competent to do so and who is available to be personally present at the site where the authorized act is performed on ten minutes notice; and</p> <p>(c) not delegate a controlled act. O. Reg. 17/12, s. 1.</p> <p>(2) A graduate certificate is deemed to have been revoked 18 months after its date of issue. O. Reg. 17/12, s. 1.</p>	<p>(b) subject to subsections 49 (2) and 49.1 (2), only perform a controlled act that is authorized to the profession if it is performed under the general supervision of a member of a College within the meaning of the <i>Regulated Health Professions Act, 1991</i> who, the member holding the graduate certificate has reasonable grounds to believe, is authorized to perform the controlled act and is competent to do so and who is available to be personally present at the site where the authorized act is performed on ten minutes notice; and</p> <p>(c) not delegate a controlled act. O. Reg. 17/12, s. 1.</p> <p>(2) A graduate certificate is deemed to have been revoked 18 months after its date of issue. O. Reg. 17/12, s. 1.</p>	<p>This amendment was made to ensure consistency with other regulations under the <i>Respiratory Therapy Act</i> (RTA). Members registered in the graduate class are not allowed to perform advanced prescribed procedures below the dermis [O. Reg. 596/94 - 49.(2)]. They are also not permitted to perform authorized act # 5 in the RTA, “administering a prescribed substance by inhalation” [49.1(2)].</p> <p>Removing personally enables supervision support via enhanced technology (e.g., videoconferencing). This is particular important in the community/home care setting.</p>
	<p>EMERGENCY CERTIFICATE OF REGISTRATION</p> <p>63.1. (1) In addition to the requirements set out in section 53, an applicant for a certificate of registration in the emergency class must meet the following requirements:</p> <p>1. The Council of the College has determined that there are emergency circumstances such that it is in the public</p>	<p>New section added for Emergency Class of Registration. The regulations establishing an emergency class of registration must include (at a minimum):</p> <ul style="list-style-type: none"> • Specify emergency circumstances in which the class is open to applicants; • Specify the expiry of a certificate issued in the emergency class of registration; and

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
	<p>interest to issue certificates of registration in the emergency class.</p> <p>2. The applicant must have satisfied the requirements of subsection 55 (2)(a) or (b).</p> <p>3. The applicant must have met the requirements of subsection 55 (2) (a) or (b) within the three years immediately preceding the application for registration unless the applicant was practising respiratory therapy for at least 1,125 hours in a jurisdiction outside Ontario in which respiratory therapy is regulated within that three-year period.</p> <p>(2). The requirements referred to in paragraphs 1 and 2 of subsection (1) are non-exemptible.</p> <p>63.2. (1) Unless stated otherwise on the certificate, a certificate of registration in the emergency class expires 12 months after it is issued unless it is renewed.</p> <p>(2) Unless stated otherwise on the certificate, a renewed certificate of registration in the emergency class expires 12 months after it is issued unless it is renewed again.</p> <p>(3) Despite subsections (1) and (2), a certificate of registration in the emergency class expires six months after the date the Council of the College determines that emergency circumstances no longer exist</p>	<ul style="list-style-type: none"> Specify circumstances in which a member of the emergency class may transition to another class of registration.

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
	<p>even where the certificate would otherwise expire before or after that time.</p> <p>63.3. A member who holds, or held within the previous six months, a certificate of registration in the emergency class may be issued a certificate of registration in the general class despite not having met the requirements set out in subsection 55 (4), if the member,</p> <p>(a) applies for the certificate of registration in the general class,</p> <p>(b) satisfies all other requirements for the certificate of registration in the general class, and</p> <p>(c) provides satisfactory evidence to the Registrar based on their practice for at least 500 hours under the certificate of registration in the emergency class, that the member will practice competently and ethically even though practising without supervision, or successfully completes the practice assessment designed to assess the practice competencies of a holder of a certification of registration in the emergency class.</p>	
	<p>CONDITIONS, EMERGENCY CERTIFICATE OF REGISTRATION</p> <p>63.4. In addition to the conditions set out in section 54, it is a condition of an emergency</p>	<p>New section added for Emergency Class of Registration.</p>

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
	<p>certificate of registration that the member shall,</p> <p>(a) at the first reasonable opportunity, advise every employer of any terms, conditions and limitations that apply to the member’s emergency certificate of registration if their employment is in the field of respiratory therapy;</p> <p>(b) practise the profession only within the scope of their certificate;</p> <p>(c) only perform a controlled act that is authorized to the profession if it is performed under the general supervision of a member who holds a certificate in the General Class of registration and who is available to be present at the site on ten minutes notice; and</p> <p>(d) not delegate a controlled act.</p>	
<p>TITLES</p> <p>67. A member who holds a certificate of registration listed in Column 1 of the Table to this section,</p> <p>(a) may use a title listed in Column 2 or 3 opposite the certificate of registration; and</p> <p>(b) shall use the designation listed in Column 4 opposite the certificate of registration. O. Reg. 17/12, s. 1.</p>	<p>TITLES</p> <p>67. A member who holds a certificate of registration listed in Column 1 of the Table to this section,</p> <p>(a) may use a title listed in Column 2 or 3 opposite the certificate of registration; and</p> <p>(b) shall use the designation listed in Column 4 opposite the certificate of registration. O. Reg. 17/12, s. 1.</p>	<p>Title added for Emergency Class of Registration.</p>

TABLE

Column 1	Column 2	Column 3	Column 4
Certificate of Registration	English Title	French Title	Designation
General	Registered Respiratory Therapist; or Respiratory Therapist	Thérapeute Respiratoire Autorisé(e); or Thérapeute Respiratoire	RRT
Graduate	Graduate Respiratory Therapist	Thérapeute Respiratoire Diplômé(e)	GRT
Limited	Practical Respiratory Therapist	Thérapeute Respiratoire Auxiliaire	PRT
Emergency	Respiratory Therapist (Supervised)	Thérapeute respiratoire (sous supervision)	RT(S)

Prescribed Procedures – Part VII

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
49. (1) It is a condition of a general certificate of registration that a member not perform an advanced procedure unless the member has, within two years before the procedure is performed, successfully completed a certification process or program approved by the Registration Committee of the College.	49. (1) It is a condition of a general or emergency certificate of registration that a member not perform an advanced procedure unless the member has, within two years before the procedure is performed, successfully completed a certification process or program approved by the Registration Committee of the College. O. Reg. 68/99, s. 1.	Added a reference to the Emergency Class of Registration to set out the conditions under which members in the Emergency Class can perform prescribed procedures below the dermis.

Prescribed Substances– Part VII.1

Current Registration Regulation	Proposed Registration Regulation	Rationale for Proposed Amendment
49.1 (1) For the purposes of paragraph 5 of section 4 of the Act, a member holding a general certificate of registration is authorized, in the course of engaging in the	49.1 (1) For the purposes of paragraph 5 of section 4 of the Act, a member holding a general or emergency certificate of registration is authorized, in the course of	Added a reference to the Emergency Class of Registration to ensure that members in the Emergency Class are authorized to administer therapeutic oxygen by inhalation as

College of Respiratory Therapists of Ontario

Clause-by-clause comparison of the proposed amendments to Ontario Regulation 596/94 Part VIII – Registration, Part VII - Prescribed Procedures and Part VII.1 - Prescribed Substances

practice of the profession, and subject to the terms, conditions and limitations imposed on his or her certificate of registration, to administer therapeutic oxygen by inhalation. O. Reg. 334/12, s. 1.	engaging in the practice of the profession, and subject to the terms, conditions and limitations imposed on his or her certificate of registration, to administer therapeutic oxygen by inhalation. O. Reg. 334/12, s. 1.	prescribed in that regulation
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Appendix C: Consultation Survey Results

Answers to Questions Proposed amendments to Ontario Regulation 596/94 Part VIII – Registration, Part VII - Prescribed Procedures and Part VII.1 - Prescribed Substances		
As of: 4/18/2023 4:00 PM		
Page: About You		
Question: Are you a...		
Number Who Answered: 66		
Respiratory Therapist (including retired)	56	85 %
Student of a Respiratory Therapy Program	2	3 %
Prefer Not to Say	8	12 %
Question: I live in...		
Number Who Answered: 66		
Ontario	60	91 %
Prefer Not to Say	6	9 %
Page: General Questions – Emergency Class		
PROPOSED AMENDMENTS TO THE REGISTRATION REGULATION AND RELATED REGULATIONS		
Question: 1. Addition of the Emergency Class under the Registration Regulation, including provisions addressing the following:		
<ul style="list-style-type: none"> • Creating a separate class of registration; • Specifying the emergency circumstances in which the class will be open to applicants; • Addressing the expiry of a certificate issued in the emergency class of registration and the circumstances in which a member of the emergency class may transition to another class of registration; • Outlining the conditions that will be imposed on a certificate issued in the emergency class of registration. 		
Do you have any comments regarding the proposed Emergency Class of Registration?		
Number Who Answered: 46		
Yes	No	
13	33	
28%	72%	
If yes, please provide further details		
Number Who Answered: 12		
<ol style="list-style-type: none"> 1. How does 63.1 (1) 3b work for RT's from BC? Or are they already addressed with labour mobility? 2. Concerned whether practicing "respiratory therapy" hours includes those out of country (i.e. in the USA). Since the US has different classes of RT's, different educational programs, and different roles within hospital settings (for example), I am concerned that even someone with the needed hours of respiratory therapy practice won't meet the minimum standards to practice in Ontario. Further clarification or details are needed on what respiratory therapy practice means? 		

3. RTs should be allowed to work in other provinces when there is higher need in that province. There should be no paperwork required or as minimal as possible. Perhaps a letter from the hospital of other province noting a job offer? Email that offer letter to CRTO and that's all? They already allow this for anesthetists. Why not AAs/RTs? The separate class could be called Temporary Emergency Registration License. The "emergency circumstances" should just be if there is a need that can't be filled causing unsafe circumstances for patients or staff. If these RTs / AAs don't have their full license, there should be a pathway to stay employed until received all their qualifications. Maybe conditions of emergency license are the same as GRT?
4. Disagree with 63.3 allowing an emergency classification converting to general certificate..bypasses the examination process
5. Regarding clause 63.3 of the proposed amendment, whereby a member of the emergency class who has been practicing for six months can obtain a registration under general class while being precluded from writing the board exam. It is my opinion that the entry requirements for the general classification should be standard across the board and that a member practicing under the emergency class, who has not previously successfully passed a board exam, should not be precluded from writing such exam. Having a member registered under the emergency class limits that individual's scope in order to quickly deploy those members where there is need. HOWEVER, when those individuals are no longer under their emergency classification, examination should be mandatory in order to obtain a general practice license.
6. This will cause extra work for employees at CRTO. If these changes will cause enough work to warrant extra staff members at CRTO, would like to see costs passed down to applicants to the Emergency Class of Registration. General members of CRTO went through the rigorous process set out for them before the proposed changes, and have paid their dues. Regardless of shortage/need for RTs, it is not fair for RTs who met less conditions than General who want to practice with similar freedom as RRTs to pass the associated costs down to all members of the CRTO.
7. The designation RT(S) for supervision is too similar to SRT - Student RT. Could you use ERT or RT(E) to define it as Emergency?
8. Great idea
9. The addition of "physically"...isn't there the potential for human rights violations here? Individuals with physical disabilities, who have completed approved education, are protected from discrimination and have to be accommodated...
10. This seems very confusing the way it is written and I think there is risk with the way it is written.
11. There should be very clear guideline regarding the time an RT can practice with this class of registration. (i.e. 3 month) There should be a system in place to verify competency (.i.e. valid registration in another province) Transition, if considered, from this class to another class of registration, should be subject to ALL requirements for the new class, including competency demonstration.(either a OSCE type program or sign off from a facility where the applicant worked in Ontario)
12. I appreciate that the class is limited in length however find it a little confusing that it is 12 months, not aligned with the CRTO usual registration calendar. As you prorrate other registrants, would this not be clearer for employers?

Question: 2. New conditions under the Prescribed Procedures Regulation.

Do you have any comments regarding the proposed conditions under which members in the Emergency Class will be authorized to perform prescribed procedures below the dermis?

Number Who Answered: 46

Yes	No
4	42
9%	91%

If yes, please provide further details:	
<i>Number Who Answered: 3</i>	
<ol style="list-style-type: none"> 1. As long as they can show competency. Written quiz on each (IV, Art line insertion followed by direct supervision of 3-5 successful attempts.) 2. There needs to be checks and balances to ensure there is a minimum level of knowledge for people who are practicing Respiratory Therapy. This seems to circumvent this. 3. Conditions should be imposed that members of this class cannot perform these procedures until they demonstrated competency to the employer. Sign off should be requested, from a licenced RT in Ontario. 	
Question: 3. New provision under the Prescribed Substances Regulation.	
Do you have any comments regarding the proposed amendments under which members in the Emergency Class will be authorized to administer therapeutic oxygen by inhalation as prescribed in that regulation?	
<i>Number Who Answered: 46</i>	
Yes	No
4	42
9%	91%
If yes, please provide further details:	
<i>Number Who Answered: 3</i>	
<ol style="list-style-type: none"> 1. I think it is a basic and necessary. The risk benefit is heavily weighted on the benefit side. 2. There needs to be checks and balances to ensure there is a minimum level of knowledge for people who are practicing Respiratory Therapy. This seems to circumvent this. 3. Conditions should be imposed that members of this class cannot perform these procedures until they demonstrated competency to the employer. Sign off should be requested, from a licenced RT in Ontario. 	
Page: Additional Comments	
Question: Do you have any additional comments you would like to share?	
<i>Number Who Answered: 11</i>	
<ol style="list-style-type: none"> 1. We pay too much for our license each year. ONA is a fraction of our price 2. We need to consider the application of energy within our scope as well. There is reasonable grounds that the public would benefit from an RT being able to apply energy, both in the assessment of EIT for optimizing ventilation, and in the ability to assist the medical team with defibrillation without requiring delegation. Given that it is an expectation that many RRTs take ACLS, PALS, etc as part of their hospital requirements, and many schools incorporate ECG and shockable rhythms as part of school, we have adequate knowledge/grounds to be able to help patients with this (much like ultrasound). 3. Not at this time 4. would suggest clarity of what the registration committee would consider acceptable be made available for applicants. Also would suggest similar for approved RT programs with the change in wording away from accredited programs 5. all looks reasonable 6. I support all of the changes proposed. I feel they were thoroughly researched and well explained. I do have a request that while the Registration Reg. is being explored, I believe we should address the gap 	

we have for retired Respiratory Therapist. as CRTO member 000074 (yep, been around that long) I was shocked to find that there was not a classification that allowed me to continue to remain a member of the CRTO and call myself a Respiratory Therapist (or Retired Respiratory Therapist). Other Colleges have such a classification (eg. CNO). I believe this is in the public's interest, and there is precedence. I would be happy to provide more context, and even assist with drafting if that would be of assistance. I have spent my working career as a proud Respiratory Therapist and would be greatly saddened to have to surrender being able to call myself that because of the lack of a category to acknowledge this. Even this survey under the Are You a... button the first was Respiratory Therapist (including retired) but there actually isn't such a thing. Harold Featherston (retired former RRT)

7. This is the worst feedback form ever.
8. NO
9. NO
10. No
11. I feel we need to limit the number of attempts at the registry exam to only two. After the first attempt you are now aware of what the exam entails. If it requires numerous attempts to pass the exam then an individual's understanding is clearly lacking. We are a profession that has people's lives in our hands. If it takes someone four times to pass the exam then would you truly want this person looking after you or your loved one? Let's keep the people that are working in our profession exceptional.

Page: General Questions – Additional Changes

Question: 4. Additional changes under the Registration Regulation to clarify existing provisions and help harmonize the registration requirements for Respiratory Therapists across Canada.

Question: a. Requirement for the Issuance of Certificates of Registration, Any Class [section 53 (1) - suitability to practice]

Number Who Answered: 36

Yes	No
10	26
28%	72%

If yes, please provide further details:

Number Who Answered: 10

1. If a respiratory therapy program is not accredited how will graduates be able to write the CBRC exam to register for a general certificate
2. Appear to be reasonable requirements
3. We pay too much for our license each year. ONA is a fraction of our price
4. I think it's important to offer opportunities for those with physical limitations to be offered a licence with restrictions. This amendment does not make this clear; and does not adequately define what is the physical requirement.
5. what is the definition of physically competent and how will such determinations be made. I can see this as a potential risk of various rights or discrimination challenges
6. RTs should be able to practice within our entire country easily
7. If someone has completed approved training then "physical" limitations must be accommodated - it's a human rights issue. Employers have processes to address return to work if a RT is injured and has a physical condition that impacts work.

- 8. Same as above.
- 9. Conditions should be imposed that members of this class must demonstrate competency/ suitability to practice to the employer. Sign off should be requested, from a licenced RT in Ontario.
- 10. [appreciate the changes](#)

Question: b. Additional Requirements, General Certificate (section 55 - education, examination, currency requirements)

Number Who Answered: 36

Yes	No
8	28
22%	78%

If yes, please provide further details:

Number Who Answered: 7

- 1. Will educators be able to keep their general certificate if they are unable produce 1125 hours of direct patient care in 3 to ears
- 2. Rationale appears accurate. Exam limit okay if defensible.
- 3. We pay too much for our license each year. ONA is a fraction of our price
- 4. 55.6 and 60.2 kind of conflict. Under 60.2 they would time out as a GRT before their 4th attempt most likley under the current exam frequency. If that is the situation 55.5 or 55.6 should reflect their GRT status will be revoked
- 5. See concerns expressed regarding section 63.3 as answered in first question.
- 6. Where is the research to support the currency requirement?
- 7. [clear](#)

Question: c. Conditions, General Certificate of Registration (new section 55.1 – currency requirement)

Number Who Answered: 36

Yes	No
6	30
17%	83%

If yes, please provide further details:

Number Who Answered: 5

- 1. Unsure of hours requirement. Not sure where number of hours comes from, appears to be just less than 0.2FTE which implies that every RT would need to work at least 1 8 hour shift per week, no vacation, no leaves to maintain eligibility to practice. Is this a reasonable requirement?
- 2. We pay too much for our license each year. ONA is a fraction of our price
- 3. new 55.1 b and c - will there be standard criteria for clause B if not would be subjective and potential for challenge. clause C will a list of approve refresher courses be published on the CRTO website like accredited schools were in the past
- 4. What is this new currency requirement? Another increase in our already astronomical fees? I did not see the proposal for this in provided documentation.
- 5. [again...added clarity](#)

Question: d. Mobility – Unregulated Canadian Practitioner (section 56. – currency requirement)	
<i>Number Who Answered: 36</i>	
Yes	No
4	32
11%	89%
If yes, please provide further details:	
<i>Number Who Answered: 3</i>	
<ol style="list-style-type: none"> 1. We pay too much for our license each year. ONA is a fraction of our price 2. What physical limitations are not allowed? It's a vague statement 3. The risk of this is too high and quality of care is at risk. 	
Question: e. Mobility – Regulated Canadian Practitioner (section 57. – currency requirement)	
<i>Number Who Answered: 36</i>	
Yes	No
3	33
8%	92%
If yes, please provide further details:	
<i>Number Who Answered: 2</i>	
<ol style="list-style-type: none"> 1. We pay too much for our license each year. ONA is a fraction of our price 2. Same as above 	
Question: f. Additional Requirements, Graduate Certificate (section 58. – currency requirement)	
<i>Number Who Answered: 36</i>	
Yes	No
2	34
6%	94%
If yes, please provide further details:	
<i>Number Who Answered: 1</i>	
<ol style="list-style-type: none"> 1. We pay too much for our license each year. ONA is a fraction of our price 	
Question: g. Mobility – Graduate Certificate (section 59. – currency requirement)	
<i>Number Who Answered: 36</i>	
Yes	No
3	33
8%	92%
If yes, please provide further details:	
<i>Number Who Answered: 2</i>	

<ol style="list-style-type: none"> 1. We pay too much for our license each year. ONA is a fraction of our price 2. Same as previous mobility question 	
<p>Question: h. Conditions, Graduate Certificate of Registration [section 60. (1)]</p>	
<p><i>Number Who Answered: 36</i></p>	
Yes	No
5	31
14%	86%
<p>If yes, please provide further details:</p>	
<p><i>Number Who Answered: 4</i></p> <ol style="list-style-type: none"> 1. Support removal of personally from 60. 2. We pay too much for our license each year. ONA is a fraction of our price 3. see 55 above 60.2 and 55.6 conflict as I read it 4. This seems to increase the risk of quality of care for the residents of Ontario 	



April 11, 2023

By E-mail

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

Dear Carole Hamp:

**Re: The College of Respiratory Therapists of Ontario (CRTO), Creation of
Emergency Class Certificate of Registration**

The College of Nurses of Ontario (CNO) is grateful for the opportunity to provide feedback on CRTO's draft Emergency Class regulations. In particular, we are providing feedback on section 63.3.

A valid, reliable and secure entry examination supports safe practice. As regulators, we are accountable for ensuring that only those who demonstrate the competence can practice autonomously as practitioners (i.e. to transition to the general class). The entry exam is an objective assessment, assessing in a standardized way whether an individual will have the knowledge, skill and judgement to practice safely.

Literature links an entry examination to patient safety. For example, studies have investigated the correlation between national registration exam performance and patient safety¹. Studies show those who score lower on the exam are at greater risk of providing

¹ Cuddy, M.M., Young, A., Gelman, A., Swanson, D., Johnson, D.A., Dillon, G.F., & Clauser, B.E. (2017). Exploring the relationships between USMLE performance and disciplinary action in practice: A validity study of score inferences from a licensure examination. *Academic Medicine*, 92(12), 1780-1785. DOI: 10.1097/ACM.0000000000001747; Kinney, C.L., Raddatz, M.M., Sliwa, J.A., Clark, G.S., & Robinson, L.R. (2019). Does performance on the American Board of Physical Medicine and Rehabilitation initial certification examinations predict future physician disciplinary actions? *American Journal of Physical Medicine & Rehabilitation*, 98(12), 1079-1083. DOI: 10.1097/PHM.0000000000001250; Norcini, J., Boulet, J.R., Opalek, A., & Dauphinee, W.D. (2014). The relationship between licensing examination performance and the outcomes of care by international medical school graduates. *Academic Medicine*, 89(8), 1157-62. doi: 10.1097/ACM.0000000000000310; Tamblyn, R., Abrahamowicz, M., Dauphinee, D., Wenghofer, E., Jacques, A., Klass, D., Smee, S., Blackmore, D., Winslade, N., Girard, N., Du Berger, R., Bartman, I., Buckeridge, D. L., & Hanley, J. A. (2007). Physician scores on a national clinical skills examination as predictors of complaints to medical regulatory authorities. *JAMA*, 298(9), 993-1001. <https://doi.org/10.1001/jama.298.9.993>; Wenghofer, E., Klass, D., Abrahamowicz, M., Dauphinee, D., Jacques, A., Smee, S., Blackmore, D., Winslade, N., Reidel, K., Bartman, I. & Tamblyn, R. (2009). Doctor scores on national qualifying examinations predict quality of care in future practice. *Medical Education*, 43(12), 1166-1173. <https://doi.org/10.1111/j.1365-2923.2009.03534.x>

an unacceptable quality of patient care. For example, they are subject to higher rates of complaints and reports with disciplinary action taken. This speaks to the importance of this objective registration requirement with respect to safe patient care.

We note in the proposed regulation changes a proposed change to register in the general class: that examination failure has serious consequences including the potential need to complete a new program [i.e. subsection 55(5) and (6)]. This is an indication of the importance placed on this objective assessment. Demonstrating competence through a standardized examination before practicing autonomously is important to patient safety. Thus, we recommend amending section 63.3 in the draft regulation and not waive the examination requirement.

Thank you again for the opportunity to provide input. Should you require further information, or if you wish to discuss our recommendation, please contact Anne Marie Shin, Director of Professional Practice at ashin@cnomail.org.

Sincerely,



Silvie Crawford, RN, BHScN, LLM-Health Law
Executive Director and CEO

/et

From: [Khalif, Maram \(MLITSD\)](#)
To: [Ania Walsh](#)
Cc: [Carole Hamp](#)
Subject: RE: CRTO - Registration Regulation Amendments
Date: April 11, 2023 2:43:11 PM

Hi Ania,

Thank you for your email and sharing your proposals to the registration regulation amendments. The OFC has no comment at this time.

Thank you so much.

M

From: Ania Walsh <walsh@crto.on.ca>
Sent: April 10, 2023 1:34 PM
To: Khalif, Maram (MLITSD) <Maram.Khalif@ontario.ca>
Cc: Carole Hamp <hamp@crto.on.ca>
Subject: CRTO - Registration Regulation Amendments

CAUTION -- EXTERNAL E-MAIL - Do not click links or open attachments unless you recognize the sender.

Hello Maram,

We are reaching out to ask the Office of the Fairness Commissioner for feedback on our proposed amendments to the [Registration Regulation](#) (O. Reg. 596/94 – Part VIII) and related regulations.

The amendments include the CRTO's response to the [Registration Requirements](#) Regulation (O. Reg. 508/22) related to the Emergency Class of Registration. In addition, the CRTO is proposing several other amendments designed to clarify existing provisions and help harmonize the registration requirements for Respiratory Therapists (RT) across Canada, such as:

- Changes to the RT education program approval process
- Limiting the number of attempts on the entry-to-practice examination
- Changes to the currency requirement for applicants
- New currency requirement for members

Our consultation documents are posted [here](#) and include the following:

- [Clause-By-Clause Comparison Chart](#)
- [Proposed regulation amendments](#)

If feasible, we ask that you provide the feedback by **Friday, April 21, 2023**.

If you have any questions, please do not hesitate to contact us.

Kind regards,

Ania

Ania Walsh, MA

Manager, Regulatory Affairs | College of Respiratory Therapists of Ontario (CRTO)

Tel: 416-591-7800 x28 | Fax: 416-591-7890 | Toll-Free: 1-800-261-0528 | Website: www.crto.on.ca | Email: walsh@crto.on.ca | Twitter: [@theCRTO](https://twitter.com/theCRTO)

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From: [Pang, Vivian \(MOH\)](#)
To: [Carole Hamp](#)
Cc: [Ania Walsh](#); [Maurier, Jason \(MOH\)](#)
Subject: CRTO Regulatory Registry Results
Date: April 14, 2023 9:07:33 AM

Hi Carole and Ania,

We are following up with the results of the 45 day consultation period of the Regulatory Registry, which concluded on April 11th. No comments were received on CRTO's proposal.

If you have any questions, please feel free to contact us.

Hope you have a lovely Friday,
Vivian

Vivian Pang | Senior Policy Analyst
Regulatory Oversight and Performance Unit
Health Workforce Regulatory Oversight Branch
Nursing and Professional Practice Division | Ministry of Health
t: 437-227-0324 | e: vivian.pang@ontario.ca

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April 14, 2023

Competition Bureau comments on the Creation of Emergency Class Certificate of Registration

Thank you for the invitation to comment on the creation of emergency classes of registration as required by Ontario Regulation 508/22 under the *Regulated Health Professions Act, 1991* (Amendments).

The Competition Bureau (Bureau), as an independent law enforcement agency, ensures that Canadians prosper in a competitive and innovative marketplace. As part of its mandate, the Bureau promotes and advocates for the benefits of competition.

Why competition matters

Ontario's health regulatory Colleges (Colleges) play a critical role in protecting the public by making sure healthcare professionals are safe, ethical and competent.¹ Pro-competitive policies can help to advance these goals, as described in our market study: [Empowering health care providers in the digital era](#). The study explained how policymakers can leverage technology to gain the benefits of competition including improved quality of care, access to care and fostering innovation and its adoption. Pro-competitive policies can have other benefits in healthcare, including contributing to the resilience of the workforce by lowering barriers to entry. As made evident by the COVID-19 pandemic, this is particularly important during emergencies, which can create additional shortages and pressures on healthcare workers.

The Bureau recommends that the Colleges create these emergency classes of registration to maximize the benefits of competition, such as increasing the supply of qualified healthcare workers, and advance their goal of protecting the public. Further, the lessons learned in the process may also be used to benefit competition and public safety during times of non-emergency.

Competition assessment in policymaking

The Bureau's [Competition Assessment Toolkit](#) was designed to assist policymakers in identifying competition issues and tailoring policies to maximize the benefits of competition. Once a policy is identified for assessment, the policymaker should consider whether it has the potential to restrict competition. This may be the case if it makes it difficult for businesses to emerge or compete, or for consumers to make informed choices or switch products or services.

The policymaker should then consider whether a feature in the policy that could restrict competition is necessary, narrowly cast and proportionate. If there is an alternative that

¹ Health Profession Regulators of Ontario (2023). [Professions and their Regulatory Bodies](#).



achieves their policy goal in a more competition friendly manner, they should implement it accordingly and monitor its effects moving forward for any unintended consequences.

Restrictions and alternatives

The various registration requirements set out by the Colleges for healthcare workers to practice are barriers to entry for future workers. Such barriers are intended to keep the public safe by ensuring that healthcare workers are ethical and competent to practice. During an emergency though, increased demand for healthcare services and strains on healthcare workers can result in labor shortages that may present their own risk to public safety.² Temporarily easing these registration requirements with an emergency class of registration (and thereby increasing or speeding up the entry of healthcare workers) can balance these risks.

By setting up the emergency class of registration to only be as restrictive as necessary during times of emergency, the Colleges can maximize the benefits of competition (i.e. a more resilient healthcare workforce and patient safety). The Amendments require the Colleges to establish registration requirements for individuals joining the emergency class. These requirements can be used to lower barriers to enter the profession. For example, by allowing for competent healthcare students, recent graduates or accredited workers from other jurisdictions to register and by exempting certain requirements for emergency class registrants to move to another class. To strike the right balance between the risks and benefits associated with temporarily lowering these barriers requires the medical expertise of the Colleges. The Bureau hopes that the framework of a competition analysis presented in the Competition Assessment Toolkit may be helpful in doing so.

The Bureau also encourages the Colleges to consider how pro-competitive policies can benefit patients and healthcare workers outside of times of emergency as well. The Amendments require the Colleges to specify a path for healthcare workers in the emergency class to move into other classes of practice and to be exempted from certain registration requirements in doing so. Such exemptions will lower barriers to entry for those workers on a more permanent basis. These lowered barriers are likely to result in faster entry and more licensed healthcare providers, and as a result, a more resilient workforce. As such, the competitive benefits of the emergency class certification extend outside of times of emergency. We encourage the Colleges to use their expertise to make these exemptions as broad as possible to maximize the benefits of competition, while still meeting the central health and safety objectives of registration requirements.

In making these decisions, as in performing any competition assessment, the Colleges should base their decision to the greatest extent possible on objective empirical evidence.³ To the extent data on the effects of similar exemptions in other jurisdictions or during the COVID-19 pandemic are available, this could inform their decision. It may also be beneficial to track data on worker entry and patient safety for healthcare workers operating under the emergency class provisions going forward. This data could be used to make future adjustments to the exemptions provided for under the emergency class, relaxing or

² Canadian Institute for Health Information (November 2022). [Health workforce in Canada: In focus \(including nurses and physicians\)](#).

³ Competition Bureau (2020). [Strengthening Canada's economy through pro-competitive policies](#). See Step 3: Identify alternatives to address policy goals, if necessary.



tightening them as needed.⁴ Perhaps more importantly, this same data could also be used to determine whether the regular registration requirements are as necessary, narrowly cast and proportionate as can be. Having identified how much these barriers to entry can be safely lowered to offset the risk of worker shortages during times of emergency, those lessons may be used to maximize the benefits of competition in ordinary times.

We're here to help

The Bureau's goal is to promote the benefits of competition across the Canadian economy. On the other end, policymakers, as subject matter experts and authorities, are in a unique and critical position to seize upon these benefits. By incorporating competition analysis into your policy assessment, you can maximize the benefits of competition while still achieving your policy goals.

Such competition analysis can be complex, but is worthwhile and the Bureau can help. If you would like to discuss the Competition Assessment Toolkit, or have questions about particular policy proposals or the suggestions above, please contact our Competition Promotion Branch.

Yours Truly,

Bradley Callaghan
Associate Deputy Commissioner
Competition Promotion Branch
Competition Bureau

⁴ *Ibid.* See Step 5: Conduct an ex-post assessment.

Council Briefing Note

AGENDA ITEM # 4.2

April 24, 2023

From:	Patient Relations Committee
Topic:	Funding for Supportive Measures Policies
Purpose:	For Decision
Strategic Focus:	Core Business Practices
Attachment(s):	Appendix A: Section 85.7 of the <i>Health Professions Procedural Code & Ontario Regulation 59/94</i> Appendix B: Funding for Supportive Measures (Patient/Client) Policy Appendix C: Funding for Supportive Measures (Non-Patient/Client) Policy Appendix D: Funding for Therapy and Counselling – Fact Sheet Appendix E: Application for Funding: Form A Appendix F: Application for Funding: Form B
Motion:	It is moved by _____ and seconded by _____ that: Council approve that the Funding for Support Measures (Patient/Client) Policy and the Funding for Support Measures (Non-Patient/Client) Policy be rescinded, archived & replaced by the Funding for Therapy and Counselling – Fact Sheet.

PUBLIC INTEREST RATIONALE

The CRTO is committed to adopting a proportionate and responsive regulatory approach with the continued policy review based on the guidance of the CRTO Policy Framework.

BACKGROUND

In 2017, *Health Professions Procedural Code* (the Code), being Schedule 2 to the *Regulated Health Professions Act, 1991*, was amended to include a new provision (section 85.7) mandating that Health Regulatory Colleges make available funding for therapy and counselling to patients/clients who were sexually abused by a Member of their College. Further, Ontario Regulation 59/94 prescribes the amount of funds that are to be made available by a College should a patient/client seek therapy and counselling funding (see Appendix A).

In response to these changes, the CRTO developed two policies to guide the funding process for patients/clients and non-patient/clients who alleged that they were sexually abused by a member of the CRTO.

ISSUE

During the policy review process, guided by the Policy Framework, it has been determined that some CRTO policies are repetitive, inconsistent with legislation, or include information that does not need to be in a policy format. This includes the Funding for Supportive Measures (Patient/Client) Policy (see Appendix B) and the Funding for Supportive Measures (Non-Patient/Client) Policy (see Appendix C). The provisions of these policies are either covered or inconsistent with the Code.

The specific reasons and rationale for rescinding and archiving these policies and replacing them with the Funding for Therapy and Counselling – Fact Sheet are discussed in the “Analysis” section.

ANALYSIS

Reasons for Rescinding and Archiving:

As the CRTO began its review of the two policies under the new Policy Framework, it was identified that both policies might be inconsistent with the requirements of section 85.7 of the Code and Ontario Regulation 59/94.

The Code, in combination with Ontario Regulation 59/94, limits the amount of funding to be made available to a patient/client to a maximum of 200 half-hour sessions of individual out-patient psychotherapy. In contrast, both policies allowed for additional funding to cover such items as transportation, lodging, and meal costs associated with attending therapy sessions.

Further, the Code restricts the definition of who can access the funding to only patients/clients of a member who were sexually abused while a patient/client of the Member. In contrast, the Funding for Supportive Measures (Non-Patient/Client) Policy allowed for funding to be accessed by non-patients/clients of a member.

The CRTO obtained a legal opinion on both these concerns from Julie Maciura, Partner, SML (CRTO’s legal counsel). Julie indicated that both concerns were valid and that both policies were in contradiction to the Code and Ontario Regulation 59/94, and that CRTO membership may view the additional funds being made available as misuse of membership funds.

Reasons for Replacing with Fact Sheet:

As the CRTO began to update the policies, it was then identified that the Supportive Measures (Non-Patient/Client) Policy was not in line with applicable legislation and, thus should be rescinded and archived. Further, the Supportive Measures (Patient/Client) Policy was repetitive to existing legislation that guides the funding for therapy and counselling and thus was not required.

Instead, the Funding for Therapy and Counselling – Fact Sheet was developed to clearly communicate the requirements of the legislation to the public. In addition to the fact sheet, two applications have been created. The first, Application for Funding - Form A, is the application a patient/client would be required to fill out if they sought funding for therapy (see Appendix E). The second, Application for Funding – Form B, is the application the applicant’s therapist/counsellor would have to complete in order directly receive payment for therapy/counselling sessions rendered to the applicant (see Appendix F).

RECOMMENDATION:

It is recommended that Council approve that the Funding for Support Measures (Patient/Client) Policy and the Funding for Support Measures (Non-Patient/Client) Policy be rescinded, archived & replaced by the Funding for Therapy and Counselling – Fact Sheet.

NEXT STEPS:

If the motion is approved, the two policies will be archived internally, and the Fact Sheet will “go live” and made available on the CRTO website and provided to any patients/clients who allege that they have been sexually abused by a member of the CRTO.

Section 85.7 of the
Health Professions Procedural Code
Schedule 2 of the Regulated Health Professions Act, 1991

FUNDING FOR THERAPY AND COUNSELLING

Funding provided by College

85.7 (1) There shall be a program, established by the College, to provide funding for the following purposes in connection with allegations of sexual abuse by members:

1. Therapy and counselling for persons alleging sexual abuse by a member.
2. Any other purposes prescribed in regulations made under clause 43 (1) (y) of the *Regulated Health Professions Act, 1991*. 2017, c. 11, Sched. 5, s. 28 (1).

Funding governed by regulations

(2) The funding shall be provided in accordance with the regulations made under the *Regulated Health Professions Act, 1991*. 1993, c. 37, s. 23.

Administration

(3) The Patient Relations Committee shall administer the program. 1993, c. 37, s. 23.

Eligibility

- (4) A person is eligible for funding if,
- (a) it is alleged, in a complaint or report, that the person was sexually abused by a member while the person was a patient of the member; or
 - (b) the alternative requirements prescribed in the regulations made by the Council are satisfied. 2017, c. 11, Sched. 5, s. 28 (2).

Timing

(5) Where a request is made for funding pursuant to subsection (1), a determination of the person's eligibility for such funding in accordance with subsection (4) shall be made within a reasonable period of time of the request having been received. 2017, c. 11, Sched. 5, s. 28 (2).

Not a finding

(5.1) The determination of a person's eligibility for funding in accordance with subsection (4) does not constitute a finding against the member and shall not be

Section 85.7 of the
Health Professions Procedural Code
Schedule 2 of the Regulated Health Professions Act, 1991

considered by any other committee of the College dealing with the member. 2017, c. 11, Sched. 5, s. 28 (2).

Cessation of eligibility

(5.2) Despite subsection (4), a person's eligibility to receive funding pursuant to subsection (1) ceases upon the occurrence of any of the prescribed circumstances. 2017, c. 11, Sched. 5, s. 28 (2).

No assessment

(6) A person is not required to undergo a psychological or other assessment before receiving funding. 1993, c. 37, s. 23.

Choice of therapist or counsellor

(7) A person who is eligible for funding is entitled to choose any therapist or counsellor, subject to the following restrictions:

1. The therapist or counsellor must not be a person to whom the eligible person has any family relationship.
2. The therapist or counsellor must not be a person who, to the College's knowledge, has at any time or in any jurisdiction been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.
3. If the therapist or counsellor is not a member of a regulated health profession, the College may require the person to sign a document indicating that he or she understands that the therapist or counsellor is not subject to professional discipline. 1993, c. 37, s. 23.

Payment

(8) Funding shall be paid only to the therapist or counsellor chosen by the person or to other persons or classes of persons prescribed in any regulation made under clause 43 (1) (y) of the *Regulated Health Professions Act, 1991*. 2017, c. 11, Sched. 5, s. 28 (3).

Use of funding

(9) Funding shall be used only to pay for therapy or counselling and for any other purposes prescribed in any regulation made under clause 43 (1) (y) of the *Regulated Health Professions Act, 1991* and shall not be applied directly or indirectly for any other purpose. 2017, c. 11, Sched. 5, s. 28 (3).

Section 85.7 of the
Health Professions Procedural Code
Schedule 2 of the Regulated Health Professions Act, 1991

Same

(10) Funding may be used to pay for therapy or counselling that was provided at any time after the alleged sexual abuse took place. 2017, c. 11, Sched. 5, s. 28 (3).

Other coverage

(11) The funding that is provided to a person for therapy and counselling shall be reduced by the amount that the Ontario Health Insurance Plan or a private insurer is required to pay for therapy or counselling for the person during the period of time during which funding may be provided for the person under the program. 2017, c. 11, Sched. 5, s. 28 (3).

Right of recovery

(12) The College is entitled to recover from the member, in a proceeding brought in a court of competent jurisdiction, money paid in accordance with this section for an eligible person referred to in subsection (4). 2017, c. 11, Sched. 5, s. 28 (3).

Person not required to testify

(13) The eligible person shall not be required to appear or testify in the proceeding. 1993, c. 37, s. 23.

O. Reg. 59/94: FUNDING FOR THERAPY OR COUNSELLING FOR PATIENTS
SEXUALLY ABUSED BY MEMBERS

FUNDING FOR THERAPY AND COUNSELLING

1. For the purposes of a program established under section 85.7 of the Code,
 - (a) the maximum amount of funding that may be provided for a person in respect of a case of sexual abuse is the amount that the Ontario Health Insurance Plan would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist on the day the person becomes eligible under subsection 85.7 (4) of the Code; and
 - (b) the period of time within which funding may be provided for a person in respect of a case of sexual abuse is five years from,
 - (i) the day on which the person first received therapy or counselling for which funding is provided under subsection 85.7 (10) of the Code, or
 - (ii) if funding is not provided under subsection 85.7 (10) of the Code, the day on which the person becomes eligible for funding under subsection 85.7 (4) of the Code. O.Reg. 59/94, s. 1.

COLLEGE OF RESPIRATORY THERAPISTS OF ONTARIO



Title: **Funding for Supportive Measures
(Patient/Client)**

Number: **PR-Funding-103**

Date originally approved:
September 21, 2018

Date(s) revision approved:
N/A

PURPOSE

In the interests of transparency and safe, ethical care, this policy sets out how the College of Respiratory Therapists of Ontario (CRTO), through the Patient Relations Program, will provide financial support to an individual who alleges that they were sexually abused by a Respiratory Therapist while a patient/client of that Member. The purpose of the financial support is to assist the individual in obtaining therapy or counselling for the alleged sexual abuse and to assist in participating in the CRTO's investigation, complaints and/or disciplinary process(es). The CRTO is committed to treating individuals who access the Patient Relations Program in a sensitive and respectful manner.

SCOPE

This policy applies to all patients/clients where it is alleged, in a complaint or report, that they were sexually abused by a Respiratory Therapist.

BACKGROUND

According to Statistics Canada, sexual assault is one of the most underreported crimesⁱ. Research has attributed this to a wide range of reasons, including the shame, guilt and stigma of sexual victimization, the normalization of inappropriate or unwanted sexual behaviour, and the perception that sexual violence does not warrant reporting. Most often, offenders were a friend, acquaintance or neighbour, then a strangerⁱⁱ. The CRTO accepts this research and wishes to support patients/clients who bring forward allegations of sexual abuse to access the investigations, complaints/discipline process(es).

Furthermore, the CRTO recognizes the seriousness and extent of harm that sexual abuse and other forms of abuse can cause patients/clients, their family members and members of the healthcare team. Sexual assault can have serious and traumatic consequences for victims, including deterioration of their health, weaker social supports, feelings of anger, fear and anxiety, substance abuse, depression and suicidal thoughts. Victims are also less satisfied with their personal safety from crime and less likely to feel safe in certain situationsⁱⁱⁱ. The CRTO has a position of zero tolerance for any form of abuse (sexual, physical, verbal, emotional, financial or cyber) by its Members and will endeavour to ensure all Respiratory Therapists understand that abuse in any form is unacceptable and will not be tolerated^{iv}.

Should a patient/client bring forward an allegation of sexual abuse against a Member, the CRTO wishes to ensure that the patient/client is provided with assistance to allow them to obtain therapy or counselling for sexual abuse. The Patient Relations Committee (PRC) developed this policy to address the CRTO's

APPENDIX B

regulatory requirement to provide funding for therapy for a patient/client alleging sexual abuse by a Member as well as alternate supportive measures designed to assist the individual with the physical, psychological, emotional and financial tolls of abuse.

DEFINITIONS

Complaint: in accordance with the *Health Professions Procedural Code* S.25.4, a complaint must be submitted to the CRTO in writing or recorded on a tape, film, disk or other medium. The individual who submits the complaint (the “complainant”) is a party to processes of the Inquiries, Complaints and Reports Committee, meaning that they have certain rights related to procedural fairness and must be provided with notice, disclosure, opportunity for submission and appeal.

Funding Limitations: in accordance with *Ontario Regulation 59/94*:

- (a) the maximum amount of funding that may be provided for a person in respect of a case of sexual abuse is the amount that the Ontario Health Insurance Plan would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist on the day the person becomes eligible under Ss.85.7(4) of the *Code*; and
- (b) the period of time within which funding may be provided for a person in respect of a case of sexual abuse is five (5) years from,
 - i) the day on which the person first received therapy or counselling for which funding is provided under Ss.85.7(10) of the *Code*, or
 - ii) if funding is not provided under Ss.85.7(10) of the *Code*, the day on which the person becomes eligible for funding under Ss.85.7(4) of the *Code*.

The intent of the CRTO’s support is to relieve some of the financial burden resulting from care or services required due to the alleged sexual abuse by a Respiratory Therapist. It may not off-set all costs.

Health Professions Procedural Code: or “the *Code*,” is Schedule 2 to the *Regulated Health Professions Act*, setting out the roles and requirements for all health regulatory Colleges and their statutory committees.

Inquiries, Complaints and Reports Committee: or ICRC, is a statutory committee established under the *RHPA* that is responsible for investigating formal complaints submitted to the CRTO, mandatory reports by employers, Members and other regulated healthcare professionals, and Registrar’s reports regarding information coming to the attention of Colleges wherein there are reasonable and probable grounds to believe that a Member has committed an act of professional misconduct, is incompetent or incapacitated.

Member: a Respiratory Therapist who holds a certificate of registration with the College of Respiratory Therapists of Ontario (CRTO). May also refer to a formerly registered Respiratory Therapist as the CRTO maintains jurisdiction over a person related to the period they were registered.

Non-Therapeutic Expenses: incidental costs incurred directly as a result of therapy/counselling (e.g., travel expenses) that are not covered by insurance or other programs. Expenses must be pre-paid by the patient/client and a receipt submitted to CRTO for reimbursement.

APPENDIX B

Patient/Client: in accordance with the *Code* Ss.1(6), without restricting the ordinary meaning of the term, a patient/client includes an individual who was a Respiratory Therapist's patient within one year (or longer as may be prescribed in regulation), from the date on which the individual ceased to be the Member's patient.

Patient Relations Committee: or PRC, is a statutory committee established by the *Regulated Health Professions Act* that is tasked with developing, implementing and maintaining a Patient Relations Program. The PRC reviews and approves applications for funding for therapy or counselling and supportive measures. The PRC also monitors the reserve fund to ensure adequate funds are available. Funding for therapy or counselling and supportive measures reserve will be approved by Council in accordance with *Ontario Regulation 59/94*, CRTO Policies and By-Laws.

Patient Relations Program: in accordance with the *RHPA* S.84, the Patient Relations Program must include measures for preventing and dealing with sexual abuse of patients, including:

- (a) educational requirements for members;
- (b) guidelines for the conduct of members with their patients;
- (c) training for the College's staff; and
- (d) the provision of information to the public.

Regulated Health Professions Act: or *RHPA*, is the umbrella legislation that governs 26 regulated health professions in Ontario. Included in the *RHPA* is the *Health Professions Procedural Code*.

Report: is a report filed by the Registrar under section 79(a) of the *Health Professions Procedural Code* and occurs as a result of information coming to the attention of the CRTO in a manner other than a "complaint".

Sexual Abuse: in accordance with the *Health Professions Procedural Code*, "sexual abuse" of a patient by a member means,

- (a) sexual intercourse or other forms of physical sexual relations between the member and the patient,
- (b) touching, of a sexual nature, of the patient by the member, or
- (c) behaviour or remarks of a sexual nature by the member towards the patient.

"Sexual nature" does not include touching, behaviour or remarks of a clinical nature appropriate to the service provided.

Therapist or Counsellor: for the purposes of the Patient Relations Program and this policy, a patient/client who is applying for funding may obtain funding relating to therapy or counselling from any therapist or counsellor except for one whom:

- (a) has a family relationship with the applicant; or
- (b) to the CRTO's knowledge has, at any time or in any jurisdiction, been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.

APPENDIX B

If the therapist or counsellor is not a member of a regulated health profession, the CRTO will require the applicant to sign a document stating that they understand that the therapist or counsellor is unregulated, and therefore, the CRTO cannot verify with any degree of certainty, whether the unregulated therapist or counsellor has ever been found guilty of sexual abuse, etc.

The therapist or counsellor must complete a CRTO form which includes information about the therapist or counsellor's training and experience, contact and billing information. Funding will only be paid directly to the therapist or counsellor.

POLICY

In addition to the mandatory provision of funding for therapy, which is equivalent to 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist^v, the CRTO's Patient Relations Program will permit an individual, about whom it is alleged in a complaint or report was sexually abused by a Respiratory Therapist while a patient/client of that Respiratory Therapist, to receive reimbursement for specified non-therapeutic expenses related to treatment stemming from the alleged abuse.

According to the Ontario Health Insurance Plan's (OHIP) Schedule of Benefits and Fees^{vi} the approximate cost for the maximum allowable 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist is currently <\$17,000. The CRTO will allot \$25,000 funding per patient/client to pay for therapy/counselling and specified supportive measures related to their allegation of sexual abuse against a Member under the Patient Relations Program. Reimbursement for non-therapeutic expenses are only payable to individuals who are receiving funding for therapy/counselling. Only the balance of funds remaining from \$25,000 less 200 half-hour sessions of individual out-patient psychotherapy is able to be used for non-therapeutic expenses (i.e., approximately \$8,000).

Funding is available for five (5) years from the date on which it is alleged in a complaint or report that the applicant was sexually abused by a Respiratory Therapist while a client/patient of the Respiratory Therapist; or, if the applicant started receiving therapy or counselling after the alleged sexual abuse took place but before a complaint or report was made to the CRTO, five (5) years from the date on which the person first started receiving therapy for which funding is provided. Fees for therapy/counselling are paid directly to the therapist/counsellor. If OHIP or a private insurance plan provides coverage for some of the costs, the CRTO will only pay the amount not covered elsewhere.

In order to receive funding for therapy/counselling and supportive measures:

- A patient/client must submit a recorded complaint alleging sexual abuse by a CRTO Member, or
- The CRTO must receive a report in which it is alleged that the patient/client was sexually abused by a Member; and
- A patient/client must submit completed applications for funding for therapy/counselling and supportive measures (Appendices A & B), and

The PRC will endeavour to review the application for funding (Appendix A) within three (3) business days from the date of receipt of the completed form.

APPENDIX B

The CRTO recognizes that sexual abuse may have significant consequences for an individual and their immediate family. For example, attending therapy or counselling may require absence from work or home, and may take place in a location that requires travel or even accommodation. Therefore, the PRC will consider requests for reimbursement of any reasonable expenses related to the patient/client's therapy or counselling so long as a direct, obvious link can be made. The following list provides examples of the types of expenses commonly incurred:

- Travel expenses, including bus, cab/taxi, ride-sharing programs (such as Uber or Lyft), etc.;
- Child care expenses, including babysitting, daycare, etc.;
- Accommodation, including hotel, accommodation-sharing services (such as AirBnB) etc.;
- Prescription medication prescribed by therapist/counsellor as part of treatment program not covered by other insurance (including OHIP); or,
- Incidental costs incurred directly as a result of therapy/counselling.

All non-therapeutic expenses must be pre-paid by the patient/client and original receipts submitted to the CRTO for reimbursement to be considered. The Patient Relations Program is intended to lessen the financial impact associated with obtaining therapy or counselling however, it may not offset all costs.

The CRTO will not provide funding for fees charged on late or missed appointments with a therapist or counsellor. The CRTO will not reimburse patients/clients for non-prescription medication. Reimbursement of non-therapeutic expenses is at the discretion of the PRC and is not guaranteed.

ⁱ Conroy and Cotter for Statistics Canada, Self-reported sexual assault in Canada, 2014 (July, 2017).

ⁱⁱ Ibid.

ⁱⁱⁱ Ibid.

^{iv} CRTO, Zero Tolerance Position Statement (February, 2014).

^v O.Reg. 59/94, Funding for Therapy or Counselling for Patients Sexually Abused by Members (February, 1994).

^{vi} Ontario Ministry of Health and Long-Term Care, Physician Services-Schedule of Benefits (April, 2017).

COLLEGE OF RESPIRATORY THERAPISTS OF ONTARIO



Title: **Funding for Supportive Measures (Non-Patient/Client)**

Number: **PR-Funding-103.5**

Date originally approved:
September 21, 2018

Date(s) revision approved:
N/A

PURPOSE

In the interests of transparency and safe, ethical care, this policy explains how the College of Respiratory Therapists of Ontario (CRTO) will provide financial support to an individual, other than a patient/client, who alleges that they were the subject of sexual misconduct by a Respiratory Therapist while the Respiratory Therapist was practicing the profession. The purpose of the financial support is to assist the individual in obtaining therapy or counselling for the alleged sexual misconduct and to assist in participating in the CRTO's investigation, complaints and/or disciplinary process(es). The CRTO is committed to treating individuals who bring forward allegations of sexual misconduct in a sensitive and respectful manner.

SCOPE

This policy applies to individuals, other than patients/clients, where it is alleged, in a complaint or report to the CRTO that they were the subject of sexual misconduct by a Respiratory Therapist.

BACKGROUND

According to a Statistics Canada, sexual assault is one of the most underreported crimesⁱ. Research has attributed this to a wide range of reasons, including the shame, guilt and stigma of sexual victimization, the normalization of inappropriate or unwanted sexual behaviour, and the perception that sexual violence does not warrant reporting. Most often, offenders were a friend, acquaintance or neighbour, then a strangerⁱⁱ. The CRTO accepts this research and wishes to support all individuals who bring forward allegations of sexual misconduct to access the processes related to investigations, complaints and/or discipline. Historically, allegations of sexual abuse against Respiratory Therapists have been reported to the CRTO by individuals who were colleagues, peers or students rather than patients/clients. The CRTO recognizes the seriousness and extent of harm that sexual abuse may cause.

Sexual assault can have serious and traumatic consequences for victims, including deterioration of their health, weaker social supports, feelings of anger, fear and anxiety, substance abuse, depression and suicidal thoughts. Victims are also less satisfied with their personal safety from crime and less likely to feel safe in certain situationsⁱⁱⁱ. The CRTO has a position of zero tolerance for any form of abuse (sexual, physical, verbal, emotional, financial or cyber) by its Members and will endeavour to ensure all Respiratory Therapists understand that abuse in any form is unacceptable and will not be tolerated^{iv}.

The Patient Relations Committee (PRC) developed this policy to address the supportive measures designed to assist an individual (other than a patient/client) with the physical, psychological, emotional

APPENDIX C

and financial tolls of abuse. Should any individual allege, by way of complaint or report, sexual misconduct by a Respiratory Therapist, the CRTO wishes to ensure that assistance is provided to allow them to obtain therapy or counselling.

DEFINITIONS

Complaint: in accordance with the *Health Professions Procedural Code S.25.4*, a complaint must be submitted to the CRTO in writing or recorded on a tape, film, disk or other medium. The individual who submits the complaint (the “complainant”) is a party to processes of the Inquiries, Complaints and Reports Committee, meaning that s/he has certain rights related to procedural fairness and must be provided with notice, disclosure, opportunity for submission and appeal.

Funding Limitations: the CRTO is offering the same amount of funding to non-patients/clients as set out in Ontario Regulation 59/94:

- (a) the maximum amount of funding that may be provided for a *patient/client* in respect of a case of sexual abuse is the amount that the Ontario Health Insurance Plan would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist on the day the person becomes eligible under Ss.85.7(4) of the *Code*; and
- (b) the period of time within which funding may be provided for a person in respect of a case of sexual abuse is five (5) years from,
 - i) the day on which the person first received therapy or counselling for which funding is provided under Ss.85.7(10) of the *Code*, or
 - ii) if funding is not provided under Ss.85.7(10) of the *Code*, the day on which the person becomes eligible for funding under Ss.85.7(4) of the *Code*.

The intent of the CRTO’s support is to relieve some of the financial burden resulting from care or services required due to the alleged sexual misconduct by a Respiratory Therapist. It may not off-set all costs.

Health Professions Procedural Code: or “the *Code*,” is Schedule 2 to the *Regulated Health Professions Act*, setting out the roles and requirements for all health regulatory Colleges and their statutory committees.

Inquiries, Complaints and Reports Committee: or ICRC, is a statutory committee established under the *RHPA* that is responsible for investigating formal complaints submitted to the CRTO, mandatory reports by employers, Members and other regulated healthcare professionals, and Registrar’s reports regarding information coming to the attention of Colleges wherein there are reasonable and probable grounds to believe that a Member has committed an act of professional misconduct, is incompetent or incapacitated.

Member: a Respiratory Therapist who holds a certificate of registration with the College of Respiratory Therapists of Ontario (CRTO). May also refer to a formerly registered Respiratory Therapist as the CRTO maintains jurisdiction over a person related to the period they were registered.

APPENDIX C

Non-Patient/Client: an individual who does not fulfill the definition of patient/client, but who brings forward allegations of sexual misconduct against a Respiratory Therapist related to the Member's practice. For example a Non-Patient/Client may be a Student Respiratory Therapist, family member of a patient/client, or a regulated or non-regulated health care peer or colleague of the Member.

Non-Therapeutic Expenses: incidental costs incurred directly as a result of therapy/counselling (e.g., travel expenses) that are not covered by insurance or other programs. Expenses must be pre-paid by the applicant and a receipt submitted to CRTO for reimbursement.

Patient Relations Committee: or PRC, is a statutory committee established by the *Regulated Health Professions Act* that is tasked with developing, implementing and maintaining a Patient Relations Program. The PRC reviews and approves applications for funding for therapy or counselling and supportive measures. The PRC also monitors the reserve fund to ensure adequate funds are available. Funding for therapy or counselling and supportive measures reserve will be approved by Council in accordance with *Ontario Regulation 59/94*, CRTO Policies and By-Laws.

Regulated Health Professions Act: or RHPA, is the umbrella legislation that governs 26 regulated health professions in Ontario. Included in the RHPA is the *Health Professions Procedural Code*.

Report: is a report filed by the Registrar under section 79(a) of the *Health Professions Procedural Code* and occurs as a result of information coming to the attention of the CRTO in a manner other than a "complaint".

Sexual Misconduct: where allegations of sexual abuse, assault or harassment are brought forward against a Respiratory Therapist by a Non-Patient/Client the behaviour, if true, would be categorized as Professional Misconduct in accordance with Ontario Regulation 753/93^v. Allegations of sexual misconduct brought forward by Non-Patients/Clients do not have the same mandatory requirements set out in legislation as sexual abuse of Patients/Clients, however, optional policy provisions may apply.

Therapist or Counsellor: for the purposes of this policy, an individual who is applying for funding may obtain funding relating to therapy or counselling from any therapist or counsellor except for one whom:

- (a) has a family relationship with the applicant; or
- (b) to the CRTO's knowledge has, at any time or in any jurisdiction, been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.

If the therapist or counsellor is not a member of a regulated health profession, the CRTO will require the applicant to sign a document stating that s/he understands that the therapist or counsellor is unregulated, and therefore, the CRTO cannot verify with any degree of certainty, whether the unregulated therapist or counsellor has ever been found guilty of sexual abuse, etc.

The therapist or counsellor must complete a CRTO form which includes information about the therapist or counsellor's training and experience, contact and billing information. Funding will only be paid directly to the therapist or counsellor.

APPENDIX C

POLICY

The CRTO's Patient Relations Committee will permit an individual who is not a patient/client, about whom it is alleged in a complaint or report was the subject of sexual misconduct by a Respiratory Therapist while the Respiratory Therapist was practicing the profession, to receive funding for therapy or counselling equivalent to 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist^{vi} and specified non-therapeutic expenses related to treatment stemming from the alleged sexual misconduct.

The CRTO is making available to non-patients/clients the same amount of funding that is available to patients/clients. According to the Ontario Health Insurance Plan's (OHIP) Schedule of Benefits and Fees^{vii} the approximate cost for the maximum allowable 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist is currently <\$17,000. The CRTO will allot \$25,000 funding per individual, to pay for therapy/counselling and specified supportive measures related to the individual's allegation of sexual misconduct against a Member. Reimbursement for non-therapeutic expenses are only payable to individuals who are receiving funding for therapy/counselling. Only the balance of funds remaining from \$25,000 less 200 half-hour sessions of individual out-patient psychotherapy is able to be used for non-therapeutic expenses (i.e., approximately \$8,000).

Funding is available for five (5) years from the date on which it is alleged in a complaint or report that the applicant was the subject of sexual misconduct by a Respiratory Therapist; or, if the individual started receiving therapy or counselling after the alleged sexual misconduct took place but before a complaint or report was made to the CRTO, five (5) years from the date on which the person first started receiving therapy for which funding is provided. Fees for therapy/counselling are paid directly to the therapist/counsellor. If OHIP or a private insurance plan provides coverage for some of the costs, the CRTO will only pay the amount not covered elsewhere.

The following are the circumstances upon which payment of funds initiated pursuant to this policy may cease:

- (a) The Inquiries, Complaints and Reports Committee makes a decision other than referring allegations of sexual misconduct to the Discipline Committee; or
- (b) The Inquiries, Complaints and Reports Committee makes a decision referring allegations of sexual misconduct to the Discipline Committee and the allegations of sexual misconduct are withdrawn; or
- (c) The Inquiries, Complaints and Reports Committee makes a decision referring allegations of sexual misconduct to the Discipline Committee and the Discipline Committee does not make a finding of sexual misconduct; and
- (d) The Patient Relations Committee determines that there are no special circumstances warranting continued funding.

Decisions regarding the cessation of funding will not be made until the period of time in which an appeal may be launched by a complainant or Member to the Health Professions Appeal and Review Board (HPARB) has passed.

In order to receive funding for therapy/counselling and supportive measures:

- An individual must submit a recorded complaint alleging sexual misconduct by a CRTO Member, or

APPENDIX C

- The CRTO must receive a report in which it is alleged that the individual was the subject of sexual misconduct by a Member; and
- The individual must submit completed applications for funding for therapy/counselling and supportive measures (Appendices A & B)

The PRC will endeavour to review the application for funding (Appendix A) within three (3) business days from the date of receipt of the completed form.

The CRTO recognizes that sexual misconduct may have significant consequences for an individual and their immediate family. For example, attending therapy or counselling may require absence from work or home, and may take place in a location that requires travel or even accommodation. Therefore, the PRC will consider requests for reimbursement of any reasonable expenses related to the individual's therapy or counselling so long as a direct, obvious link can be made. The following list provides examples of the types of expenses commonly incurred:

- Travel expenses, including bus, cab/taxi, ride-sharing programs (such as Uber or Lyft), etc.;
- Child care expenses, including babysitting, daycare, etc.;
- Accommodation, including hotel, accommodation-sharing services (such as AirBnB), etc.;
- Prescription medication prescribed by therapist/counsellor as part of treatment program not covered by other insurance (including OHIP); or,
- Incidental costs incurred directly as a result of therapy/counselling.

All non-therapeutic expenses must be pre-paid by the individual and original receipts submitted to the CRTO for reimbursement to be considered. Funding is intended to lessen the financial impact associated with obtaining therapy or counselling however, it may not offset all costs.

The CRTO will not provide funding for fees charged on late or missed appointments with a therapist or counsellor. The CRTO will not reimburse individuals for non-prescription medication. Reimbursement of non-therapeutic expenses is at the discretion of the PRC and is not guaranteed.

ⁱ Conroy and Cotter for Statistics Canada, Self-reported sexual assault in Canada, 2014 (July, 2017).

ⁱⁱ Ibid.

ⁱⁱⁱ Ibid.

^{iv} CRTO, Zero Tolerance Position Statement (February, 2014).

^v O.Reg. 753/93, Professional Misconduct Regulation (February, 1999).

^{vi} O.Reg. 59/94, Funding for Therapy or Counselling for Patients Sexually Abused by Members Regulation (February, 1994).

^{vii} Ontario Ministry of Health and Long-Term Care, Physician Services-Schedule of Benefits (April, 2017).

Overview

The College of Respiratory Therapists of Ontario (CRTO) maintains a program to provide funding for therapy and counselling to patients/clients who allege that they were sexually abused by a Registered Respiratory Therapist (RRT). The CRTO's Patient Relations Committee administers the program.

The CRTO is committed to treating individuals who apply to access the funding in a sensitive and respectful manner.

Who is eligible?

A person is eligible for funding for therapy and counselling when:

1. It is alleged in a complaint that the person was sexually abused by an RRT while that person was a patient/client of the RRT; or
2. The Registrar initiates an investigation with respect to allegations that a person was sexually abused by an RRT, while that person was a patient/client of the RRT.

Available Funding

- The maximum amount of funding that may be provided is equal to the amount that the Ontario Health Insurance Plan (OHIP) would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist on the day the person becomes eligible (this is approximately \$17,000).
- The amount of funding provided will be reduced by any amount reimbursed by OHIP or a private insurer during the relevant time period.
- Funding is available for five (5) years from the date the person became eligible or the date they first received therapy or counselling for which they sought funding.
- Funding is paid directly to the therapist or counsellor.
- Funding may only be used to pay for therapy or counselling (e.g., the CRTO will not provide funding for fees charged for late or missed appointments or for the cost of travel to appointments).

Note: Providing funding for therapy does not mean the RRT has been found guilty of sexual abuse. A separate CRTO process investigates the sexual abuse complaint or report.



Funding for Therapy and Counselling Fact Sheet

Choosing a Therapist or Counsellor

A patient/client who is applying for funding may choose any therapist or counsellor as long as the therapist or counsellor:

- Is **not** a relative of the patient/client; or
- Has not, at any time or in any jurisdiction, been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.

If the therapist or counsellor is not a member of a regulated health profession, the CRTO will require the applicant to sign a document stating that they understand that the therapist or counsellor is unregulated, and as such, is not/will not be subject to professional discipline by a regulatory college.

Applicants can use the funding to see more than one therapist or counsellor if they so choose.

Application for Funding

- **Application for Funding – Form A**

An individual may apply for funding for therapy and counselling by completing the Application for Funding – Form A. Once the application is received, CRTO staff will contact the applicant to advise them of the tentative timelines for the review of the application.

The Patient Relations Committee will review the application and determine if the applicant meets the eligibility criteria.

- **Application for Funding – Form B**

Form B is to be completed by the Applicant and their therapist or counsellor. Form B can be submitted together with Form A at the time of the application, or if the Applicant has not yet chosen a therapist or counsellor, it may be submitted after the Patient Relations Committee has approved the application.

The complete form(s) should be submitted to the CRTO by email or mail.

Email: officeofregistrar@crtto.on.ca

Mail: Patient Relations Committee College of Respiratory Therapists of Ontario
180 Dundas Street West, Suite 2103
Toronto, Ontario M5G 1Z

Funding for Therapy and Counselling **Fact Sheet**

References

- Regulated Health Professions Act, 1991, Schedule 2, Health Professions Procedural Code, [s. 85.7](#)
- [Ontario Regulation 59/94](#) - Funding for Therapy or Counselling for Patients Sexually Abused by Members

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

Application for FUNDING

FORM A TO BE COMPLETED BY THE APPLICANT

The CRTO maintains a program to provide funding for therapy and counselling to patients who allege that they were sexually abused by a Registered Respiratory Therapist. For more information, please refer to the Funding for Therapy Fact Sheet [\[insert link\]](#). The Patient Relations Committee (PRC) oversees the funding for therapy and counselling program.

The Applicant does not need a therapist/counsellor in order to apply for funding. If the Applicant already has a therapist/counsellor they should ask them to complete **Form B** [\[insert link\]](#).

1. APPLICANT INFORMATION

FIRST NAME

LAST NAME

STREET ADDRESS

CITY

PROVINCE

POSTAL CODE

COUNTRY

PHONE NUMBER

EMAIL

2. REGISTERED RESPIRATORY THERAPIST INFORMATION (if known)

FIRST NAME

LAST NAME

REGISTRATION NO.

3. THERAPIST/COUNSELLOR CONTACT INFORMATION (if available)

FIRST NAME

LAST NAME

PRACTICE ADDRESS

CITY

PROVINCE

POSTAL CODE

COUNTRY

PHONE NUMBER

EMAIL

REGISTRATION NO.

Is this therapist/counsellor a regulated health professional
(e.g., psychologist or psychiatrist)?

YES*

NO

I don't know

If YES, please specify the profession:

Are the services of this therapist/counsellor covered by OHIP or
another insurer?

YES*

NO

I don't know

If you have more than one therapist/counsellor, please provide their information on a separate form.

4. DECLARATION

1. I understand that a decision by the Patient Relations Committee of my eligibility for funding does not constitute a finding of professional misconduct against the Member of the CROTO that I have alleged sexually abused me.
2. I understand that the maximum amount of funding available to me is equivalent to the amount that the Ontario Health Insurance Plan (OHIP) would pay for 200 half-hour sessions of individual out-patient psychotherapy with a psychiatrist.
3. I understand that the funding is to be reduced by the amount that OHIP or a private insurer is required to pay for therapy or counselling.
4. I understand that any funding payments will be made directly to the therapist/counsellor.
5. I understand that the funding should be used only to pay for therapy and counselling and should not be applied directly or indirectly for any other purpose.
6. I understand that there will be no payment for late or missed appointments.
7. I do not have a family or personal relationship with the therapist/counsellor or any other potential conflict of interest.
8. I understand that if the therapist/counsellor is not a member of a regulated health profession, the therapist/counsellor is not subject to professional regulatory oversight by any regulatory body.
9. I undertake to keep confidential all information obtained through the application for funding process, including if funding is granted, the fact that funding has been granted, and to refrain from using that information for any other purpose.
10. I declare/hereby certify that the statements made on this form are complete and correct to the best of my knowledge and belief.
11. I consent to the CROTO contacting the therapist/counsellor listed on this application for the purpose of processing my application for funding.

5. SIGNATURE

APPLICANT SIGNATURE:

DATE:

Completed application should be emailed to XX@cрто.on.ca or mailed to:

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

Questions? If you have further questions, please contact the CROTO office at
 1-800-261-0528 or 416-591-7800 extension or email xx@cрто.on.ca.



College of Respiratory
Therapists of Ontario

Ordre des thérapeutes
respiratoires de l'Ontario

Application for FUNDING

FORM B TO BE COMPLETED BY THE APPLICANT'S THERAPIST/COUNSELLOR

The CRTO maintains a program to provide funding for therapy and counselling to patients who allege that they were sexually abused by a Registered Respiratory Therapist. For more information, please refer to the Funding for Therapy Fact Sheet [insert link]. The Patient Relations Committee (PRC) oversees the funding for therapy and counselling program.

Form B can be submitted with **Form A** [insert link] or after eligibility is determined by the Patient Relations Committee of the College of Respiratory Therapists of Ontario (CRTO).

1. THERAPIST/COUNSELLOR INFORMATION

FIRST NAME LAST NAME

WORK ADDRESS

CITY PROVINCE

POSTAL CODE COUNTRY

PHONE NUMBER EMAIL

Are you a member of a regulated health profession?

YES Please provide the name of the regulatory body:

Your registration number:

NO Please provide information (e.g., attach a copy of your resume) about your training or experience related to providing therapy or counselling to survivors of sexual abuse.

2. PATIENT/CLIENT INFORMATION

FIRST NAME LAST NAME

PHONE NUMBER EMAIL

3. DECLARATION

1. I confirm that I do not have any family relationship or any other potential conflict of interest with the applicant (patient/client).
2. I have not at any time or in any jurisdiction been found guilty of professional misconduct of a sexual nature or been found civilly or criminally liable for an act of a similar nature.
3. I understand that the funding should be used only to pay for therapy and counselling and should not be applied directly or indirectly for any other purpose.
4. I understand that other sources of funding (e.g., OHIP or private insurance) must be used first and that there can be no duplicate payment for the same service.

- 5. I undertake to keep confidential all information obtained through the application for funding process, including if funding is granted, the fact that funding has been granted, and to refrain from using that information for any other purpose.
- 6. I understand that the CRTO may verify the service dates with the patient.
- 7. I undertake to keep confidential all information obtained through the application for funding process, including if funding is granted, the fact that funding has been granted, and to refrain from using that information for any other purpose.
- 8. I declare/hereby certify that the statements made on this form are complete and correct to the best of my knowledge and belief.

4. SIGNATURE

THERAPIST/COUNSELLOR SIGNATURE: _____ DATE: _____

Completed application should be emailed to XX@crto.on.ca or mailed to:
 Patient Relations Committee
 College of Respiratory Therapists of Ontario
 180 Dundas Street West, Suite 2103
 Toronto, Ontario M5G 1Z8

Questions? If you have further questions, please contact the CRTO office at
 1-800-261-0528 or 416-591-7800 extension or email xx@crto.on.ca.