



College of Respiratory  
Therapists of Ontario

Ordre des thérapeutes  
respiratoires de l'Ontario

180 Dundas Street West, Suite 2103  
Toronto, Ontario M5G 1Z8  
Tel: 416.591.7800  
Toll Free: 1.800.261.0528  
Fax: 416.591.7890  
Website: [www.crto.on.ca](http://www.crto.on.ca)  
Twitter: @theCRTO

## **CRTO Council Meeting Minutes**

**Held on September 25<sup>th</sup>, 2020 from 9:00 am to 12:00 pm**

**Location: Zoom Meeting**

### **Attendance:**

#### **Board Members:**

Christina Sperling, RRT - **Chair**  
Allison Chadwick, RRT - **Vice Chair**  
Kelly Arndt, RRT  
Michelle Causton, Public Member  
Rhonda Contant, RRT  
Andrea Winters, RRT  
Lindsay Martinek, RRT

Kelly Munoz, RRT  
Brad Bedford, Public Member  
James Lexovsky, Public Member  
Yvette Wong, Public Member  
Kim Morris, Public Member  
Jody Saarvala, RRT  
Jeff Earnshaw, RRT

#### **Staff:**

Kevin Taylor, RRT, Registrar & CEO  
Carole Hamp, RRT, Deputy Registrar  
Amelia Ma, Manager Finance & Office  
Janice Carson-Golden, Manager of  
Communications  
Temeka Tadesse, IT & Database Specialist  
Lisa Ng, Manager of Registration

Shaf Rahman, Manager of Professional Conduct  
Sophia Rose, Coordinator of Professional  
Conduct  
Denise Steele, Professional Programs  
Coordinator

#### **Guest:**

Doug Ross, MOH

#### **Regrets:**

None

## 1.0: INTRODUCTION AND GUESTS

Christina Sperling, RRT, Chair, welcomed Council Members, guest and staff to the meeting.

## 2.0: APPROVAL OF COUNCIL AGENDA

Council reviewed the agenda for September 25<sup>th</sup>, 2020.

**Motion # 1**      MOVED BY Lindsay Martinek, RRT, and SECONDED BY Andrea Winters, RRT, to recommend that Council approve the Meeting Agenda for September 25th, 2020.

**MOTION # 1 CARRIED.**

## 3.0: STRATEGIC ISSUES

### 3.1 EXECUTIVE COMMITTEE ELECTION – PUBLIC MEMBER

Kevin Taylor, Registrar & CEO provided an overview of the Executive Committee election process, referring to the Election Policy that had been provided for Council's information. There were two nominations for the Executive Committee that were brought to the floor. Kim Morris, Public Member and Yvette Wong, Public Member. By vote, Yvette Wong was elected to sit on the Executive Committee and was congratulated by all of Council.

### 3.2 CRTO COVID-19 RESPONSE TIMELINE

Carole Hamp presented to Council a detailed overview of the data that was collected in response to Covid-19.

#### **Communication Highlights:**

- Covid webpage was added to the CRTO website and a FAQ page;
- Communication surrounding the suspension of PDP;
- Emergency Registration for GRTs and SRTs;
- Media interviews;
- Ramping up non-essential services.

## 4.0: OPERATIONAL & ADMINISTRATIVE ISSUES

### 4.1 REGISTRAR + STAFF ACTIVITY REPORT

Kevin Taylor, Registrar & CEO, reported on general CRTO activities and initiatives.

**Key Initiatives:**

- The CRTO continues to monitor daily stakeholder updates by the MOH Emergency Operations Centre (EOC) and the Critical Care Secretariat of Ontario (CCSO). The role of the CRTO is to be prepared to review our standards and licencing practices in the event of a surge.
- Under the Emergency Registration policy the CRTO registered many 3<sup>rd</sup> year students as well recently retired and Inactive RTs.
- The Professional PORTfolios were extended for RTs and those that were unable to submit by the deadline were granted a deferral to the following year.
- The CRTO continued to receive complaints and reports during the pandemic. The Provincial emergency order allows the CRTO flexibility with meeting timelines. CRTO staff continued to manage the caseload in a timely fashion.

## **4.2 FINANCIAL STATEMENTS**

Council reviewed the financial statements as of August 31, 2020.

## **4.3 INVESTMENT PORTFOLIO**

Council reviewed the Investment Portfolio as of August 31, 2020.

## **4.4 MEMBERSHIP STATISTICS**

Lisa Ng, Manager of Registration presented to Council the membership statistics. The total membership reported was **3,783**. The CRTO received **166** applications for registration from March 1, 2019 September 1, 2020. Out of the total number of applications received, **147** are graduates of an Ontario RT program, **10** are graduates from other provinces, and only **9** of them is a graduate from outside of Canada.

Christina Sperling, President suggested health data statistics be shared with Council yearly.

## **5.0: CONSENT AGENDA ITEMS**

### **5.1 MINUTES FROM MAY 29<sup>TH</sup>, 2020**

Council reviewed the Minutes from May 29<sup>th</sup>, 2020 and no changes were made.

### **5.2 EXECUTIVE COMMITTEE REPORT**

(Submitted by Christina Sperling, RRT, Chair)

The Executive Committee has met one (1) time since the May 2020 Council meeting. Highlights of the Executive Committee's activities are outlined below.

The Executive Committee:

- Reviewed all financial and investment statements for this period;
- Made the following committee appointments:

**Brad Bedford – Registration, Quality Assurance, Discipline and Fitness to Practise Committees**

**Lindsay Martinek – Vice-Chair, Fitness to Practise Committee**

**Michelle Causton – Vice-Chair, Discipline Committee and Member**

- Developed a draft Council agenda for the meeting on Sept. 25, 2020.

### 5.3 REGISTRATION COMMITTEE REPORT

(Submitted by Christa Krause, RRT, Chair)

There have been no meetings of the Registration Committee since the last Council meeting.

Panels of the Committee held three meetings on the following dates:

- June 17, 2020;
- August 26, 2020
- September 23, 2020

#### Referral Summary

Reason for Referral	Decision
One application requesting to change the terms, conditions and limitations imposed on the Member's Graduate Certificates of Registration, specifically to extend the graduate certificate revocation date from December 3 <sup>rd</sup> to December 31, 2020.	The request was approved. The Panel agreed to change the terms, conditions and limitations to extend the graduate certificate revocation date to December 31, 2020.
Two applications were referred due to currency requirements.	Both applications were to issue a General Certificate of Registration with terms, conditions and limitations (including direct supervision requirement).
One application was referred to consider whether or not it is in the public interest to approve the application based on the	To refuse to issue a certificate of registration. The Panel recommends that in order to meet the CRO registration requirements, the Applicant develop

Applicant's entry-to-practice assessment results. The Applicant had completed all three stages of the assessment.	and complete an approved remediation plan. The Panel recommends that the Applicant contact CRTO staff to discuss their remediation options.
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## 5.4 QUALITY ASSURANCE COMMITTEE REPORT

(Submitted by Rhonda Contant, RRT, Chair)

There have been no meetings of the Quality Assurance Committee (QAC) since the last Council meeting. The following is a summary of the activities related to the QAC that have been ongoing since May 29th:

### **2020 Relevant eLearning Module**

As of March 1<sup>st</sup>, 122 Relevant modules remained incomplete. Due to the emerging pandemic and its potential impact on RTs in clinical practice, the CRTO decided on March 12<sup>th</sup> to temporarily suspend all elements of the Professional Development Program (PDP), including the Relevant module. Since that time, a number of Members have gone on to complete the module, and as of Sept. 15<sup>th</sup>, only 20 Relevant eLearning modules remained outstanding. The CRTO decided not to compel these remaining individuals to complete the 2020 module, as the majority of them are not currently engaged in RT practice.

### **2020 PORTfolio Submissions**

724 PORTfolios were initially due to be submitted by April 1, 2020, and as of March 1<sup>st</sup>, 259 PORTfolios had been submitted. When the PDP was suspended, the remaining Members were given the option to either submit their PORTfolio by the extended due date of June 1<sup>st</sup> or be automatically deferred to 2021. 661 Members submitted their PORTfolio by the extended deadline and were reviewed by 39 RT PORTfolio Peer Assessors. This review was completed by July 1<sup>st</sup>, and 32 PORTfolio Peer Coaching sessions were required before all Members could be considered to have successfully completed this component of their PDP requirements. 63 Members had their PORTfolio Review Year automatically deferred to 2021.

### **2020 Launch RT Jurisprudence Assessment**

Launch was also suspended on March 12<sup>th</sup> and began again on July 1<sup>st</sup>, 2020. All new Members who should have completed Launch between March and July have either been assessed or are in the process of completing their assessment.

### **ICRC SCERP due to Non-Compliance with the PDP**

Two Members failed to submit their PORTfolio in 2019 and did not respond to any communications from the CRTO. Therefore, these matters were referred from QAC to ICRC. Both Members were offered an Agreement and Undertaking, and one individual submitted their PORTfolio. The other Member had also not completed their Relevant eLearning module in 2019 and had not participated in a Practice Assessment as required by the QAC. Therefore, they were required to complete the 2019 Relevant module in addition to submitting their PORTfolio. This individual was also required to complete a customized eLearning module on the CRTO Standards of Practice (STD 13 – Professional Responsibilities) and to meet with an RT Mentor to discuss the purpose of the CRTO's QA Program and their participation

in that program.

## 5.5 PATIENT RELATIONS COMMITTEE REPORT

(Submitted by Michelle Causton, Chair)

The Patient Relations Committee has had no meetings since the last Council meeting on May 29, 2020. The next PRC meeting is currently unscheduled.

## 5.6 INQUIRES, COMPLAINTS AND REPORTS COMMITTEE (ICRC)

(Submitted by Allison Chadwick, RRT, Chair)

### **ICRC Deliberations:**

Since the last Council meeting the ICRC held six teleconference meetings and three motions were made via document review and email voting.

### **Teleconference Meetings:**

- 1.) The first meeting was to render a decision on an investigation relating to an Employer Report alleging that the member demonstrated a lack of clinical knowledge and judgement. The member resigned in lieu of termination. After reviewing all relevant materials, a Panel of the ICRC took no action regarding the concerns raised in the employer report, as the information before the Panel did not appear to show a breach of the CRTC Standards of Practice. The Panel concluded that the member (who was a new graduate) lacked the confidence and experience required for the role, but did demonstrate appropriate clinical judgement and knowledge.
- 2.) The second meeting required a greater amount of time to discuss a three member complaint. A Panel of the ICRC was tasked with reviewing three separate investigations and rendering three separate decisions. The Complainant in the matter alleged that all three members exhibited an absence of clinical judgement and assessment, and did not document their interactions with the patient during a specific timeframe. The Complainant's concerns stem from the belief that the Complainant witnessed an RT provide intervention on the patient. The Panel took no action on all 3 investigations, as there was information to suggest that during the timeframe the Complainant was expressing concerns about, none of the members provided care to the patient. The information before the Panel suggested that no respiratory therapist provided care to the patient during the specified period of time.
- 3.) The third meeting was regarding an investigation into a complaint, in which the Complainant expressed concerns that the member refused the Complainant service, and did not accept the Complainant's prescription in relation to a CPAP machine purchase. A Panel of the ICRC took no action on the matter, as the information before them suggested that the Member was following Facility policy in refusing to sell a used CPAP machine, (which was not reliable), to the

Complainant as the Complainant's primary CPAP machine. In addition, the Panel concluded that the Member considered the Complainant's safety in not accepting an old prescription for a CPAP machine from the Complainant and correctly requested that the Complainant attend for a new study.

4. The fourth meeting was regarding an employer report investigation in which it was alleged that the member failed to attend a call for assistance by another RT, and subsequently, was not truthful in providing a rationale as to why the Member could not attend the call. A Panel of the ICRC ordered that the member complete a specified continuing education or remediation program ("SCERP") related to professional communication, as well as submit a reflective essay on recognizing the elements of professionalism and communication in the workplace, its relevance to patient care, and what the member will do to ensure that similar incidents do not reoccur. The information before the Panel suggested that the member could have attended for the call for assistance but did not do so. The Panel however did not find information to support that the member was untruthful, rather that there was a breakdown in communication between the member and other RT staff.
5. The fifth meeting was regarding an employer report investigation in which it was alleged that the member was unprofessional and abusive in their communication with other staff at the Facility, and that the member's charting was inadequate and unprofessional. A Panel of the ICRC ordered the member to successfully complete a specified continuing education or remediation program ("SCERP") related to documentation and its relationship to patient safety. Further, the member must complete a reflective essay on the importance of appropriately documenting disagreements in patient intervention and following up with the appropriate individuals of the health care team. The information before the Panel did not suggest that the member was unprofessional and abusive in their communication with the other staff, as the Panel was unable to assess credibility. However, the Panel was of the opinion that the information before them suggested that the member's charting was unprofessional and did not meet the Standards of Practice of the CRTO in relation to elevating concerns, consulting with the health care team and documenting appropriately.
6. In the sixth meeting, a Panel of the ICRC met to discuss the possibility of imposing either an interim suspension or interim terms, conditions and limitations (TCLs) on the members certificate of registration, during the course of a recently launched investigation into allegations that the a member's clinical error resulted in patient harm. The Panel was concerned that given the member's prior history with the CRTO, and the serious nature of the current allegations, the member posed a risk to patient safety. After seeking legal advice, the Panel offered the member the option to voluntarily enter into an agreement in which the member's practice would be directly supervised until such time as the investigation into the new allegation was completed and a decision by the ICRC was rendered. If the member was not agreeable to entering into the agreement, the Panel would reconvene to order either a suspension or TCLs on the member's certificate of registration.

#### **Motions by Email Vote:**

- 1.) A Panel of the ICRC was notified by CRTO staff that a Member, subject to a health inquiry, had failed to attend for an independent medical evaluation, as previously ordered by the Panel.

After reviewing the updated memo from CRTO staff, the Panel made a motion notifying the Member of their intent to suspend the Member's certificate of registration until such time they attended for the evaluation. The Member was provided with 14 days' notice to provide the Panel with additional information or to attend for the evaluation.

- 2.) The Panel in the above noted matter was notified that the Member failed to provide any additional information and failed to attend for another appointment to complete the independent medical evaluation. As such, the Panel directed the Registrar to suspend the member's certificate of registration.
- 3.) In relation to the Teleconference Meeting # 6, the Panel was notified by CRTO staff that the member (during the period of time in which they were contemplating the offer of the agreement by the Panel) made another clinical error of a similar nature. The Member was terminated from their employment. Accordingly, the Panel made a motion offering the Member one final agreement in which the Member would agree to not practice respiratory therapy until such time as the investigation into their conduct was concluded, and a final decision was rendered by the ICRC. The Member accepted and signed the agreement.

#### **Oral Cautions:**

Members of the ICRC also conducted four oral cautions since the last Council meeting.

- 1.) The first oral caution was in relation to an employer report investigation alleging incompetence by the Member. The Panel concluded that there was information to suggest incompetence, and ordered an oral caution as part of their decision.
- 2.) The second oral caution was in relation to an employer report investigation alleging breach of privacy and confidentiality of personal health information. The ICRC concluded that there was information to suggest that the member breached the patient's privacy and confidentiality of personal health information, and ordered an oral caution as part of their decision.
- 3.) The third oral caution was in relation to a Quality Assurance Committee referral to the ICRC, as the Member failed to complete their PortFolio. The Panel found that the Member did not complete their PortFolio, and ordered an oral caution as part of their decision.
- 4.) The fourth oral caution was in relation to a Quality Assurance Committee referral to the ICRC, as the Member failed to complete their PortFolio, complete their Relevant e-learning module, and attended for a peer assessment. The Panel found that the Member failed to complete all three items as outline in the Quality Assurance Committee referral, and ordered an oral caution as part of their decision.

#### **New Matters:**

Since the last Council meeting, the CRTO received 5 new matters and initiated an investigation into 26 Respiratory Therapists in relation to a complaint made by a patient's family.



Of the 5 new matters, 3 were public complaints. The other two matters were employer reports. All 5 matters are currently being investigated.

Further, on June 9, 2020, an ongoing complaint, which was in the inquiry stage, was confirmed and an investigation was launched after the CRTC obtained the names of all RTs involved, and the Complainant confirmed the parameters of their complaint. As mentioned earlier, this matter will encompass 26 concurrent investigations in the conduct of 26 RTs.

## 5.8 DISCIPLINE COMMITTEE

(Submitted by Christina Sperling, RRT, Chair)

Since the last Council meeting there have been no Discipline hearings, nor referrals to the Discipline Committee.

## 5.9 FITNESS TO PRACTISE COMMITTEE

(Submitted by Christina Sperling, RRT, Chair)

Since the last Council meeting there have been no new referrals to the Fitness to Practise Committee and no Fitness to Practise hearings have taken place.

**Motion # 2** MOVED BY Lindsay Martinek, RRT and SECONDED BY Michelle Causton, to recommend that Council approve all consent agenda items.

**MOTION # 2 CARRIED**

## 6.0 COMMITTEE ITEMS ARISING

### 6.1 EXECUTIVE COMMITTEE ITEMS

- No items for this meeting.

### 6.2 REGISTRATION COMMITTEE ITEMS

- No items for this meeting.

### 6.3 QUALITY ASSURANCE COMMITTEE ITEMS

- No items for this meeting.

## 6.4 PATIENT RELATIONS COMMITTEE ITEMS

- No items for this meeting.

## 6.5 INQUIRES COMPLAINTS AND REPORTS COMMITTEE ITEMS

- No items for this meeting.

## 6.6 DISCIPLINE & FITNESS TO PRACTISE COMMITTEES ITEMS

- No items for this meeting.

## 7.0 LEGISLATIVE AND POLICY ISSUES:

- No items for this meeting.

## 8.0: OTHER BUSINESS

### 8.1 REGISTRAR PERFORMANCE REVIEW AND COMPENSATION

The Registrar Performance Review and Compensation was in camera in accordance with the *Regulated Health Professions Act*, 1991, Health Professions Procedural Code Section (2) where (d) personnel matters or property acquisitions are discussed.

## 9.0: NEXT MEETING

### Next Council Meeting:

Friday, December 04, 2020 at 09:00 to 16:00

### Location:

ZOOM Conference

## 10: ADJOURNMENT

### Adjournment

**MOTION # 3** MOVED BY Michelle Causton and SECONDED BY Ally Chadwick to adjourn the Council Meeting.

**MOTION # 3 CARRIED.**

The September 25<sup>th</sup>, 2020 Council Meeting adjourned at 1:30 pm.