



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
Twitter: @theCRTO

CRTO Council Meeting Minutes

Scheduled on May 27, 2022, from 9:00 am to 1:00 pm

Location: Virtual meeting via Zoom Videoconference

Attendance:

Board Members:

Lindsay Martinek, RRT – **Chair**
Kim Morris – **Vice-Chair**
Derek Clark, Public Member
Jeff Dionne, RRT
Shawn Jacobson, RRT
Andriy Kolos, Public Member
Christa Krause, RRT

Katherine Lalonde, RRT
Kelly Munoz, RRT
Jeffrey Schiller, Public Member
Jillian Wilson, RRT
Yvette Wong, Public Member

Staff:

Carole Hamp, RRT, Registrar & CEO
Shaf Rahman, Deputy Registrar
Janice Carson, Manager of Communications
Kelly Arndt, RRT, Coordinator of Quality Practice
Sophia Rose, Coordinator of Professional Conduct

Ania Walsh, Manager of Regulatory Affairs
Denise Steele, Coordinator of Professional Programs
Temeka Tadesse, IT & Database Specialist
Stephanie Tjandra, Finance & Office Coordinator
Abeeha Syed, Professional Conduct Associate

Guests:

Lanjuan Wang, CPA, CA, Auditor

Regrets:

Angela Miller, RRT
Allison Peddle, Public Member
Jody Saarvala, RRT

1.0: INTRODUCTIONS & LAND ACKNOWLEDGEMENT

The meeting was called to order at 9:00 am. Lindsay Martinek welcomed Council, Staff, and Guest to the meeting.

2.0: CONFLICT OF INTEREST DECLARATION

No conflict of interest was declared.

3.0: APPROVAL OF COUNCIL AGENDA

Council reviewed the meeting agenda for May 27, 2022.

MOTION # 3.0 MOVED BY Jeffrey Schiller, and SECONDED BY, Christa Krause, RRT, that Council approve the Agenda for May 27, 2022.

MOTION # 3.0 CARRIED.

4.0: STRATEGIC ISSUES

4.1 FINANCIAL AUDIT 2021 – 2022

(Guest: Lanjun Wang, CPA, CA, Auditor)

The CRTO Audit Findings Communication for the year ended February 28, 2022, was presented to Council. It provides an overview of the CRTO's draft audited financial statements, and the processes involved with the financial audit.

MOTION # 4.1 MOVED BY Derek Clark, and SECONDED BY, Kim Morris, that Council approve the 2021 – 2022 Financial Audit.

MOTION # 4.1 CARRIED.

4.2 APPOINTMENT OF AUDITOR FOR 2022 – 2023

The results of the evaluation of the external auditor done by the Executive Committee and the Registrar were presented to Council. The financial oversight role of the Executive Committee will be transferred over to the Finance & Audit Committee by the end of 2022. To minimize disruptions during this transition, it was decided that the CRTO will retain Hilborn LLP to be the CRTO's independent auditor for the 2022 – 2023 fiscal year.

There was a discussion regarding the length of time an organization should retain the same auditor and the plan to utilize the new Annual Assessment of the External Auditor tool that was developed by CRTO staff.

MOTION # 4.2 MOVED BY Katherine Lalonde, RRT, and SECONDED BY, Jillian Wilson, RRT, that Council approve the appointment of Hilborn LLP as the CRTO's independent auditor for the 2022 – 2023 fiscal year.

MOTION # 4.2 CARRIED.

4.3 ANNUAL REPORT 2021 – 2022

Janice Carson, Manager of Communications presented to Council the 2021 – 2022 Annual Report. There was a brief dialogue on the distribution of the demographics within the CRTO Electoral Districts.

MOTION # 4.3 MOVED BY Kelly Munoz, RRT, and SECONDED BY, Jeffrey Schiller, that Council approve the CRTO 2021 – 2022 Annual Report.

MOTION #4.3 CARRIED.

4.4 COLLEGE PERFORMANCE MEASUREMENT FRAMEWORK – REPORT SUMMARY

Carole Hamp, Registrar & CEO presented to Council an overview of the 2021 College Performance Measurement Framework (CPMF) report that the CRTO submitted at the end of March 2022. This report summary highlights the CPMF measurement domains, how the CRTO scores in each measure, and the CRTO's ongoing initiatives under each domain.

There was a discussion around capturing demographics of members as part of a DEI initiative to assess the diversity of the profession. It was noted that the CRTO currently has no such data yet, but expected that the Office of Fairness Commissioner (OFC) will soon request this information. The CRTO will ask the OFC for guidance in regards to best practices for data collection to ensure it meets privacy requirements.

4.5 2021 – 2025 STRATEGIC DIRECTION UPDATE REPORT

Carole Hamp, Registrar & CEO presented to Council the 2021 – 2025 Strategic Direction Update Report. The 2021 – 2025 Strategic Direction plan was approved by Council in December 2021. This updated version is heavily influenced by the reporting requirements set out in the Ministry of Health's 2021 College Performance Measurement Framework. If the motion is approved, these updates will be posted on the CRTO website. There was a recommendation to update the document to expand on acronyms and add more specific details, including timelines of projects/initiatives.

MOTION # 4.5 MOVED BY Kelly Munoz, RRT, and SECONDED BY, Jeff Dionne, RRT, that Council approve the *2021 – 2025 Strategic Direction Update Report*.

MOTION # 4.5 CARRIED.

4.6 COUNCIL EFFECTIVENESS – BOARDSOURCE SURVEY RESULTS

Carole Hamp, Registrar & CEO presented to Council the BoardSource Survey Results. BoardSource is a U.S.-based organization that provides support and resources for non-profit boards in the areas such as governance and leadership.

5.0: OPERATIONAL & ADMINISTRATIVE ISSUES

5.1 REGISTRAR'S REPORT

Carole Hamp, Registrar, reported on general CRTO activities and initiatives.

INTERNAL – Current Initiatives

- **Policy Framework & Professional Practice Guidelines (PPGs) & Clinical Best Practice Guidelines (CBPGs)**

The review and revision of all CRTO policies and procedures continues. At the April 8th Council meeting, eight (8) revised policies were approved, and eight (8) policies were rescinded and archived. There will be eight (8) revised policies to be presented for approval at today's Council meeting.

- **Professional Conduct & IT Infrastructure Reviews**

The Professional Conduct and IT management processes reviews have now been completed. Staff in both departments are currently working on their implementation plans.

- **Database Management**

There have been ninety-four (94) banker boxes of Member records scanned into electronic files.

ADMINISTRATION – Internal

- **Staffing Changes**

The CRTO is pleased to welcome back Ania Walsh as Manager, Regulatory Affairs. Lisa Ng, Manager of Registration is currently on maternity leave. There is an ongoing recruitment process for the position of Coordinator, Professional Conduct. The following staff promotions announcement was made:

- Shaf Rahman – Deputy Registrar
- Sophia Rose – Manager, Professional Conduct
- Kelly Arndt – Manager, Quality Practice
- Denise Steele – Coordinator, Professional Programs (Registration)

- **2021 – 2022 Financial Audit**

The audit for the 2021 – 2022 fiscal year has been concluded, and the results were presented to Council today.

EXTERNAL

- **College Performance Management Framework (CPMF)**

The 2021 CPMF Report has been submitted at the end of March. A summary has been created to guide the implementation of the opportunities for improvement identified in the framework. This report summary was presented to Council today.

- **Strategic Direction Update Report**

One of the outcomes of the 2021 CPMF has been the creation of an ongoing Strategic Direction Update Report, which was presented today. Beginning in May 2022, a revised version of this report will be presented at each Council meeting, and the most updated version will be available on the CRTO website.

- **BoardSource Survey Results**

A summary of the BoardSource survey results has been presented to Council today. Information from this survey will assist in developing a framework to regularly evaluate the effectiveness of Council meetings and Council.

- **Bill 106 – Pandemic and Emergency Preparedness Act, 2022**

This is an omnibus Bill that has passed third reading and received Royal Assent. Bill 106 seeks to amend the *Regulated Health Professions Act* to:

- prohibit Colleges from requiring Canadian experience as a qualification for registration
- require Colleges to comply with the regulations respecting their English or French language proficiency requirements (i.e., use of language tests approved by Immigration, Refugees & Citizenship Canada)
- require the Councils of the Colleges to make regulations establishing an emergency class of registration
- establish time limits in which Colleges must make certain decisions related to registration

Regulation-making powers are to be enabled to operationalize these changes. The government has asked

that Colleges provide their input regarding implementing these expectations by June 10th. The Bill does not address the proposed governance reforms and new oversight bodies subject to recent consultations.

5.2 FINANCIAL STATEMENTS

Council reviewed the consolidated financial statements for March 1, 2022 – April 30, 2022.

MOTION # 5.2 MOVED BY Derek Clark, and SECONDED BY, Kim Morris, that Council approve the Financial Statements for March 1, 2022 – April 30, 2022.

MOTION # 5.2 CARRIED.

5.3 INVESTMENT PORTFOLIO

Council reviewed the Investment Portfolio.

MOTION # 5.3 MOVED BY Jeff Dionne, RRT, and SECONDED BY, Kim Morris, that Council approve the Investment Portfolio.

MOTION # 5.3 CARRIED.

5.4 MEMBERSHIP STATISTICS

Ania Walsh, Manager of Regulatory Affairs presented to Council the membership statistics. The total membership reported was **3,887**. The CRTO received **106** applications for registration from March 2022 to May 2022. Out of the total number of applications received, **100** are graduates of an Ontario RT program, **3** are graduates from other provinces, and **3** are graduates from outside of Canada.

5.5 DRAFT REVISED ADMINISTERING AND DISPENSING MEDICATION (PPG)

Kelly Arndt, Manager of Quality Practice presented to Council the Draft Revised Administering and Dispensing Medication Professional Practice Guideline (PPG). This document was previously revised in November 2014. The PPG provides information regarding accepting delegation to dispense, legislative requirements surrounding narcotics, and the requirements of orders and documentation when administering medication. It has been simplified, and updated to include neutral gender pronouns, and additions made to the medication error section, the states of medication administration, and the rights of a patient to refuse medication. If the motion is approved, the PPG will be circulated for feedback from members and stakeholder rights and title holders.

Clarification was made to the distinction/delineation of the personal and professional scope of practice.

MOTION # 5.4 MOVED BY Christa Krause, RRT, and SECONDED BY, Katherine Lalonde, RRT, that Council approve the Draft Revised Administering and Dispensing Medication (PPG) for Consultation.

MOTION # 5.4 CARRIED.

6.0: CONSENT AGENDA ITEMS

6.1 MINUTES FROM MARCH 4, 2022 & APRIL 8, 2022

Council reviewed the Minutes from March 4, 2022 & April 8, 2022. No changes were made to the minutes.

6.2 EXECUTIVE COMMITTEE REPORT

Lindsay Martinek, RRT, Executive Committee Chair, presented the Committee Report to Council.

(Submitted by Lindsay Martinek, RRT, Chair)

The Executive Committee has met once since the March 4, 2022 Council meeting. On May 16, 2022, the Executive Committee reviewed the following items:

- Registrar's Report & General Updates
- CRTO Financial Statements & Investment Portfolio
- 2021 – 2022 Audit Findings
- Draft Council Agenda for May 27, 2022
- Appointment of the Auditor for 2022 – 2023

6.3 REGISTRATION COMMITTEE REPORT

Christa Krause, RRT, Registration Committee Chair, presented the Committee Report to Council.

(Submitted by Christa Krause, RRT, Chair)

Since the Council meeting on March 4, 2022, the Registration Committee (RC) met on the following dates:

- April 5, 2022 (Panel)
- April 27, 2022 (Email review and approval of registration policies)

Referral Summary

Reason for Referral	Decision
Two applications were referred to the Panel of the RC due to currency requirements.	For both applications, the panel of the RC decided to issue them a General Certificate of Registration with terms, conditions and limitations (including general supervision requirements).
One application was referred to the Panel of the Registration Committee to ratify the Registrar's offer to issue a General Certificate of Registration with terms, conditions, and limitations.	The Panel ratified the Registrar's offer and approved to issue the applicant a General Certificate with terms, conditions and limitations (including the general supervision requirement).

- **Policy Framework:**

- **Approval of Registration Policies for Council in May 2022:**

- Staff followed up with the Registration Committee to indicate that the public consultation period has closed for the Graduate Certificate of Registration Policy, Approval of Canadian Education Programs Policy, Application for Registration Documents Policy, and the Application for Registration – File Closure Policy. Overall, only a small number of responses

were provided, and the consultation feedback received was supportive of the changes made to these policies.

The above policies were approved by the RC to go to the May 2022 Council meeting for final approval:

- **RG-403 Graduate Certificate of Registration:** This policy was last approved by Council on September 26, 2014. Although the policy has been revised, it is important to note that no changes were made to the intent or the direction of the original policy. The policy has been updated to ensure its relevance to existing registration practices, legislation, and readability, and to incorporate gender-neutral language.
- **RG-408 Approval of Canadian Education Programs Policy:** This policy was last approved by Council on December 6, 2019. Due to the new Policy Framework, this document was updated to the new template. This document has gone through a rigorous policy review process to ensure that all legislative and regulatory requirements have been met. Although the policy has been revised, it is important to note that no changes were made to the intent or the direction of the original policy.

As a result of the consultation feedback received via e-mail, and as advised by legal counsel, specific changes have been made under section 3.0 Approved Status. Please see the policy (item 8.4), and the track changes.

- **RG-420 Application for Registration Document Requirements Policy:** This policy was last approved by Council on June 6, 2014. This policy has been updated with the new policy template. Although the format of the policy has been revised, its intent and direction have not changed.

The only substantive change to this policy is section 4.0 (Documentation). CRTO staff have revised the policy to include members of the Alliance of Credential Evaluation Services of Canada as accepted credential provider

- **RG-426 Revised Applicant for Registration – File Closure Policy:** This policy was last approved by Council on December 6, 2019. This policy has been updated with the new policy template. Although the format of the policy has been revised, its intent and direction have not changed. The policy has been revised to ensure its relevance to existing registration practices, legislation, and readability, and to incorporate gender-neutral language. Information about application closure has been added to the policy under section 3.0 to illustrate the procedures of notifying applicants and then closing an application.

6.4 QUALITY ASSURANCE COMMITTEE REPORT

Andriy Kolos, presented on behalf of Ginette Greffe-Laliberte, RRT, Quality Assurance Committee Chair the Committee Report to Council.

(Submitted by Ginette Greffe-Laliberte, RRT, Chair)

Since the last Council meeting, there has been one meeting, May 6, 2022 and one (electronic) panel (sent April 18, 2022) of the Quality Assurance Committee (QAC).

The following is a summary of the activities related to the QAC that have been ongoing since our last Council meeting:

QAC Panel

The panel reviewed a second deferral request from a Member for their 2022 Portfolio. The committee reviewed an internationally trained RT's application for consideration, as they had not written the CBRC, nor graduated from an approved Canadian RT program.

QAC Action Plan and Terms of Reference and Policy Framework Update

The committee reviewed and approved the revision of the QAC terms of reference, action plan, and 2022 action plan. The final Professional Development Program deferral policy, with consultation results was brought to the committee for review May 6, 2022, and approved for publication on the CRTO website. The recently revised Professional Development Policy procedure was reviewed by the QAC and approved.

2022 RelevantT elearning Module

The RelevantT survey results were shared with the committee May 6, 2022, with completion by 3772 Members. 96% reported that the new module was easy to use. 96% reported that this module increased their understanding of CRTO guidelines and practice standards. The committee was presented with the list of those who did not complete RelevantT 2022 for review and decision. All 15 Members have now been referred to the Inquiries, Complaints, and Reports Committee.

2022 PORTfolio Submissions

Members are currently assigned to submit their PORTfolio in 2022. Due to the ongoing pandemic, the deadline has again been extended to June 1st. In addition, the CRTO has notified these Members that if they do not submit their PORTfolio by the extended deadline, and have not previously requested a deferral they will automatically be deferred to 2023. The orientation for our 35 Peer Assessors was completed in April.

6.5 PATIENT RELATIONS COMMITTEE REPORT

Kim Morris, Patient Relations Committee Chair, presented the Committee Report to Council.

(Submitted by Kim Morris, Chair)

Since the last Council meeting, the Patient Relations Committee (PRC) has met once via Zoom on April 1, 2022. The following is an overview of the key issues that were discussed at that time:

PRC 2022 Action Plan

The committee reviewed action plan that was approved at the last March Council meeting to make sure no updates or changes were required.

Diversity, Equity, and Inclusion Audit

The committee reviewed the Request for Quote responses that were submitted to the CRTO. Seven DEI consulting firms received the RFQ, and it was posted on both the CRTO website and the HPRO website. From there, two RFQ responses were received, PRC reviewed the RFQ responses and unanimously selected Canadian Equity Consultants proposal. The firms have been notified and the Committee is waiting in to finalize next steps. An update will be brought to the next Council meeting.

Diversity, Equity, and Inclusion (DEI) Strategic Plan

The committee reviewed the Diversity, Equity, and Inclusion Strategic Plan. The strategic plan will evolve as we go through the Equity Audit and implementation, but no further changes have been made at this time. The DEI Strategic Plan is currently available on the CRTO website.

Equity Impact Assessment

The committee reviewed and discussed the Health Equity Impact Assessment Tool and Workbook that was

approved at the March Council meeting. The Committee decided that a more in-depth review was needed, and a working group of PRC members will be meeting late May to further review and streamline. The HEIA tool and workbook will be brought to the September Council meeting for final approval.

6.6 INQUIRES, COMPLAINTS AND REPORTS COMMITTEE (ICRC)

Kim Morris, Inquiries, Complaints and Reports Committee Chair, presented the Committee Report to Council.

(Submitted by Kim Morris, Chair)

ICRC Orientations:

Since the last Council meeting, the CRTO staff held an additional orientation meeting via Zoom on March 1, 2022.

This meeting presented on the ICRC's Goals and Terms of Reference where the Committee reviewed the revised ICRC Goals and Terms of Reference master document and 2022 Action Plan. The Committee also reviewed two policies requiring the Committees approval to go for public consultation, the Code of Conduct for Public Observers Policy and Unauthorized Use of Title and Holding Out Prior to Registration Policy. The Committee also reviewed the two policies requiring the Committees approval to go to Council for final approval, the Health Professions Appeal and Review Board Appeals for ICRC Policy and Disclosure of Witness Statements Policy.

ICRC Deliberations:

Since the last Council meeting, the ICRC held three (3) meetings via Zoom. Three (3) of the meetings were to review investigations and render a decision on the matters. Two of the matters were regarding employer reports and one was regarding a complaint.

New Matters:

Since the last Council meeting, the CRTO received twenty-eight (28) new matters. Of the twenty-eight (28) new matters, four (4) are Complaints from the public, one (1) is a self-report with one synonymous employer report, nine (9) Employer Reports, and fifteen (15) from the Quality Assurance Committee (QAC).

Fifteen referrals from the QAC have been made to the ICRC.

Policy Framework:

The ICRC continues to review its policies per the CRTO Policy Framework.

6.7 DISCIPLINE COMMITTEE

Lindsay Martinek, RRT, Discipline Committee Chair, presented the Committee Report to Council.

(Submitted by Lindsay Martinek, RRT, Chair)

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

6.8 FITNESS TO PRACTICE COMMITTEE

Lindsay Martinek, RRT, Fitness to Practice Committee Chair, presented the Committee Report to Council.

(Submitted by Lindsay Martinek, 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.

6.9 FINANCE & AUDIT COMMITTEE

Jeff Dionne RRT, Finance and Audit Committee Chair, presented the Committee Report to Council.

(Submitted by Jeff Dionne, RRT)

The Finance & Audit Committee (FAC) held a meeting on May 13, 2022, to continue discussion items from their February 1, 2022 meeting and consider new items. The following topics were discussed.

Topics Reviewed During Meeting:

a.) Review of the Policies and Procedures:

After the February 1, 2022, FAC meeting, it was decided that the Investment & Management of Net Assets Policy and Procedure documents would be split into two different policies and two different procedure documents. During the May 13, 2022 meeting, the following policies and procedures were reviewed and edited:

- i.) Investments Policy
- ii.) Investments Procedures
- iii.) Net Assets Policy
- iv.) Net Assets Procedures

A detailed line by line discussion and edits took place regarding all four documents. At the conclusion of the discussion, it was decided that final edits will be done and the documents will go through an additional review by the FAC at their next meeting.

b.) External Auditor (Hilborn LLP) 2021-2022 Audit Plan Review.

In preparation for the FAC taking on the function of reviewing audit plans and making recommendations to Council regarding the appointment of an external auditor for the 2022 – 2023 fiscal year, the FAC reviewed the 2021-2022 Audit Plan to ensure an understanding of what an audit plan consists of and what items should be considered by the FAC in the future.

c.) Discussion on “Annual Assessment of the External Auditor Tool”:

In preparation for the FAC taking on the function of reviewing audit plans and making recommendations to Council regarding the appointment of an external auditor for 2022 – 2023 fiscal year, the FAC looked over a tool developed by staff to assess the performance of the CRTO’s external auditor. This tool will be used in the future for the FAC to assess the performance of the external auditor and provide recommendations to Council accordingly.

d.) Initial Discussion on Special Projects:

The FAC discussed two special projects that the FAC will start this year:

- i.) Hiring of an Investment Advisor by the CRTO

Points of discussion on this topic included establishing criteria/qualifications that the CRTO would seek in an investment advisor and what the recruitment process would entail.

- ii.) Establishing Financial Key Performance Indicators
Points of discussion included identifying resources available to assist the FAC in identifying KPIs, determining most appropriate KPIs to monitor, establishing benchmarks to compare the KPIs to, and identifying the individuals best suited for obtaining the financial data needed for the KPIs.

On May 16, 2022, the FAC joined the Executive Committee meeting to observe a presentation by Lanjun Wang, Hilborn LLP, in which Lanjun Wang provided a presentation on the results of the 2021-2022 audited financial statements.

MOTION # 6.0 MOVED BY Jeffrey Schiller, and SECONDED BY, Yvette Wong, that Council approve all consent agenda items.

MOTION # 6.0 CARRIED.

7.0: COMMITTEE ITEMS ARISING

7.1 EXECUTIVE COMMITTEE ITEMS

- No items for this meeting.

7.2 REGISTRATION COMMITTEE ITEMS

- No items for this meeting.

7.3 QUALITY ASSURANCE COMMITTEE ITEMS

7.3.1 QAC TERMS OF REFERENCE & ACTION PLAN

Kelly Arndt, RRT, Manager of Quality Assurance presented to Council the QAC Terms of Reference & Action Plan. This document was last revised and approved in January 2022. As part of the policy framework, changes were made to align the terms of reference and action plan with other committees. Policies that were archived and/or no longer relevant were taken out, and the by-law section was updated. The action plan is a living document that will be submitted to Council for approval after the first Committee meeting each fiscal year. This action plan will inform the Committee's annual report.

7.4 PATIENT RELATIONS COMMITTEE ITEMS

- No items for this meeting.

7.5 INQUIRIES, COMPLAINTS & REPORTS COMMITTEE ITEMS:

7.5.1 ICRC TERMS OF REFERENCE & ACTION PLAN

Sophia Rose, Manager of Professional Conduct presented to Council the ICRC Terms of Reference & Action Plan. The changes in this document reflected the revisions that were recently made to the by-laws. The action plan is a living document that will be submitted to Council for approval after the first Committee meeting each fiscal year. This action plan will inform the Committee's annual report. Policies and Guidelines are reviewed on a five-year cycle or as needed.

7.6 DISCIPLINE & FITNESS TO PRACTICE COMMITTEE ITEMS:

- No items for this meeting.

7.7 FINANCE & AUDIT COMMITTEE

- No items for this meeting.

8.0: LEGISLATIVE AND POLICY ISSUES:

8.1 REVISED CD-180 CODE OF CONDUCT FOR PUBLIC OBSERVERS POLICY

Kim Morris presented to Council the revised Code of Conduct for Public Observers Policy. This policy was last approved and reviewed by Council in June 2018. It sets out the expectations the CRTO has when public observers attend certain proceedings such as Council or Discipline hearings. The title, intent and direction of this policy has changed to broaden the scope, as well as updated to include in-person and virtual proceedings.

The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

MOTION # 8.1 MOVED BY Katherine Lalonde, RRT, and SECONDED BY, Lindsay Martinek, RRT, that Council approve the revised Code of Conduct for Public Observers Policy.

MOTION # 8.1 CARRIED.

8.2 REVISED CD-430 UNAUTHORIZED USE OF TITLE AND HOLDING OUT PRIOR TO REGISTRATION POLICY

Kim Morris presented to Council the revised Unauthorized Use of Title and Holding Out Prior to Registration Policy. This policy was last approved by Council in March 2020. It outlines the criteria the Registrar may consider when determining an appropriate regulatory response to address information received regarding a person's unauthorized use of a restricted title, designation, holding themselves out as a person who is qualified to practise in Ontario as a Respiratory Therapist (RT), or in specialty of Respiratory Therapist. The intent and direction of the policy have not changed, and the policy has been revised to include applicants for registration, inactive and suspended members who are using the title and/or holding out to practice before their registration.

The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

MOTION # 8.2 MOVED BY Kelly Munoz, RRT, and SECONDED BY, Jillian Wilson, RRT, that Council

approve the revised Unauthorized Use of Title and Holding Out Prior to Registration Policy.

MOTION # 8.2 CARRIED.

8.3 REVISED RG-403 GRADUATE CERTIFICATE OF REGISTRATION POLICY

Christa Krause, RRT presented to Council the revised Graduate Certificate of Registration Policy. This policy was last approved by Council in September 2014. It outlines the conditions and criteria for issuing a Graduate Certificate of Registration to applicants who meet all the registration requirements under Ontario Regulation 596/94, (Part VIII, "Registration Regulation"), but has not yet passed the approved registration exam. The intent and direction of the policy has not changed. It has been updated to ensure its relevance to existing registration practices, legislation, and readability, and to incorporate gender-neutral language. The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

MOTION # 8.3 MOVED BY Andriy Kolos, and SECONDED BY, Kim Morris, that Council approve the revised Graduate Certificate of Registration Policy.

MOTION # 8.3 CARRIED.

8.4 REVISED RG-408 APPROVAL OF CANADIAN EDUCATION PROGRAMS POLICY

Christa Krause, RRT presented to Council the revised Approval of Canadian Education Programs Policy. This policy was last approved by Council in December 2019. It sets out the approach used by the Registration Committee to recommend approval of Canadian Respiratory Therapy Programs to CRTO Council. The intent and direction of the policy has not changed. It has been updated to ensure its relevance to existing registration practices, legislation, and readability, and to incorporate gender-neutral language. The document was posted according to the CRTO's public consultation process. Through the consultation feedback, and as advised by legal counsel, a paragraph under section 3.0 Approved Status has been removed. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

It was clarified that if a registrant comes from an unaccredited program, they will be expected to go through the assessment process, if not coming under Labour Mobility.

It was clarified that if a registrant comes from an unaccredited program, the graduates will be expected to go through the assessment process, if they are not coming through the labour mobility.

MOTION # 8.4 MOVED BY Andriy Kolos, and SECONDED BY, Jeff Dionne, RRT, that Council approve the Revised Approval of Canadian Education Programs Policy.

MOTION # 8.4 CARRIED.

8.5 REVISED RG-420 APPLICATION FOR REGISTRATION DOCUMENT REQUIREMENTS POLICY

Christa Krause, RRT, presented to Council the revised Application for Registration Document Requirements

Policy. This policy was last approved by Council in June 2014. It informs applicants on the types of documentation required to support their application for registration to the CRTO. The intent and direction of the policy has not changed. It has been updated to ensure its relevance to existing registration practices, legislation, and readability, and to incorporate gender-neutral language. The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

MOTION # 8.5 MOVED BY Andriy Kolos, and SECONDED BY, Kim Morris, that Council approve the Revised Application for Registration Document Requirements Policy

MOTION # 8.5 CARRIED.

8.6 REVISED RG-426 REVISED APPLICATION FOR REGISTRATION – FILE CLOSURE POLICY

Christa Krause, RRT, presented to Council the revised Application for Registration – File Closure Policy. The policy was last approved by Council in December 2019. It is intended to ensure that registration decisions are based on current and relevant information, and the application process is transparent so that applicants are aware of the expected application timelines at the start of the process. The intent and direction of the policy has not changed. It has been updated to ensure its relevance to existing registration practices, legislation, and readability, and to incorporate gender-neutral language. The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

MOTION # 8.6 MOVED BY Andriy Kolos, and SECONDED BY, Kelly Munoz, RRT, that Council approve the Revised Application for Registration – File Closure Policy

MOTION # 8.6 CARRIED.

8.7 QA-104 DEFERRAL OF QUALITY ASSURANCE REQUIREMENTS POLICY

Andriy Kolos presented to Council the revised Deferral of Quality Assurance Requirements Policy. This policy was last approved by Council in June 2018. The purpose of the policy was to acknowledge that exceptional circumstances may temporarily make it difficult for members to meet their Professional Development Program (PDP) obligations within the timeframe specified by the CRTO. The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebulletin.

MOTION # 8.7 MOVED BY Katherine Lalonde, RRT, and SECONDED BY, Jeff Dionne, RRT, that Council approve the revised Deferral of Quality Assurance Requirements Policy.

MOTION # 8.7 CARRIED.

8.8 RG-405 SUPERVISION PROFESSIONAL PRACTICE POLICY

Kelly Arndt, RRT, Manager of Quality Practice presented to Council the revised Supervision Professional Practice Policy. This policy was last approved by Council in May 2021. It is intended to provide direction for members with supervision requirements on their certificate of registration, and explains the difference between direct and indirect (general) supervision requirements. The document was posted according to the CRTO's public consultation process. No further changes were made from the results of the feedback. If the motion is approved, the policy will be posted on the CRTO website and communicated to members in the next ebuletin.

MOTION # 8.8 MOVED BY Kim Morris, and SECONDED BY, Christa Krause, RRT, that Council approve the final draft for publication

MOTION # 8.8 CARRIED.

8.9 POLICIES BEING RESCINDED & ARCHIVED

Carole Hamp, Registrar & CEO presented to Council the rationale for rescinding and archiving the Public Register – Notations of Suspensions/Revocation of a Certificate of Registration Policy. It was found that the content of this policy has been repeated in other CRTO policies and/or by-laws, and/or not consistent to current registration practice. If the motion is approved, the policy will be archived internally.

MOTION # 8.9 MOVED BY Andriy Kolos, and SECONDED BY, Kelly Munoz, RRT, that Council approve the RG-421 Public Register – Notations of Suspension/Revocation of a Certificate of Registration Policy, to be rescinded and archived.

MOTION # 8.9 CARRIED.

9.0: OTHER BUSINESS

- No items for this meeting.

10.0: NEXT MEETING

Next Council Meeting:

Friday, September 23, 2022, from 09:00 to 13:00 hrs.

Location:

108 Chestnut St, Toronto, ON M5G 1R3
DoubleTree by Hilton – Victoria Conference Room

11: ADJOURNMENT

Adjournment

MOTION # 11.0 MOVED BY Christa Krausta, RRT, and SECONDED BY, Kim Morris, to adjourn the Council Meeting.

MOTION # 11.0 CARRIED.

The May 27, 2022, Council Meeting adjourned at 12:15 pm.