



Disclosure of Witness Statements

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1.0 BACKGROUND

Concerns reported to the College of Respiratory Therapists of Ontario (CRTC) about members sometimes relate to workplace bullying or harassment. As a result, witnesses, who are often colleagues of the member who is the subject of the report or complaint, are hesitant to participate in an inquiry or investigation process due to fear of reprisal from the member.

Members of the CRTC have an obligation to cooperate with the CRTC when an inquiry or investigation into their conduct or actions occur. The CRTC recognizes that where concerns related to workplace bullying or harassment are alleged, the potential for perceived threat of reprisal may be greater.

One of the key statutory responsibilities of the CRTC is to investigate concerns about members. The Registrar and/or the Inquiries, Complaints and Reports Committee (ICRC) investigates concerns related to allegations of professional misconduct, incompetence or incapacity. Investigations often include interviewing witnesses regarding the incidents or situations that gave rise to the concerns.

2.0 POLICY STATEMENT

During a Registrar's inquiry or at the ICRC stage, it is the policy of the CRTC to provide a member who is facing allegations of professional misconduct with witness names and statements.

Witness names and statements may be excluded/redacted if there are reasons to believe that disclosure may result in an unnecessary risk to an individual or the integrity of the inquiry or investigative process.

3.0 PURPOSE

The purpose of this policy is to assist the Registrar or the ICRC in determining if identifying information or other information should be withheld or disclosed during an inquiry or investigation process, while maintaining procedural fairness. In addition, it is designed to



provide witnesses with some comfort regarding the protection of their identities and information, if need be, while maintaining the member's right to procedural fairness.

4.0 SCOPE OF POLICY

The scope of this policy applies to all inquiries or investigations by the CRTO and ICRC for concerns related to a member's competency, capacity or conduct.

5.0 RESPONSIBILITIES

When safety risks are identified, CRTO staff and/or the ICRC will consider the member's right to procedural fairness along with the following factors:

- (a) Whether the nature of the information may be detrimental to the member (e.g., psychological harm);
- (b) Whether the privacy interests of the witness (or an individual to whom the witness refers) would be significantly affected;
- (c) Whether other significant concerns have been raised by the witness(es), employer or other party regarding the impact of disclosure.

Options available to address safety risks at the ICRC stage include:

1. excluding the names of witnesses from the Investigation Report;
2. redacting portions of the witness statement;
3. providing the member with a summary of the witness statement;
4. cautioning the member that retaliating against a witness can result in additional allegations of professional misconduct against the member.

6.0 AUTHORITY & MONITORING

Under the *Regulated Health Professions Act, 1991 (RHPA)*, the *Health Professions Procedural Code* being Schedule 2 (the *Code*), CRTO By-Laws, and the Regulations under the *Respiratory Therapy Act, 1991*, all members of the CRTO have an obligation to cooperate with the CRTO.

7.0 RELATED DOCUMENTS

[Section 76 \(3.1\) of the Code](#)

8.0 CONTACT INFORMATION

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