



# Attachments

## Circulated at the Meeting of the Council

Date: March 29, 2019

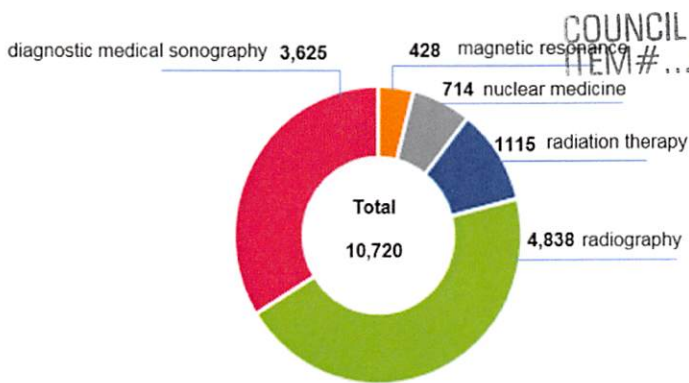
ITEM	ATTACHMENT
5bii	Updated CMRTO Dashboard: Q4 2018
5cii	Draft CMRTO Annual Report for 2018
6avi	Letter to Patrick Dicerni, ADM, Staretegic Policy and Planning Division, MOHLTC, from Linda Gough, dated March 29, 2019, regarding Regulation of Diagnostic Medical Sonographers with CMRTO
6diii	Draft letter to The Honourable Christine Elliott, MPP, Deputy Premier and Minister of Health and Long-Term Care, from Wendy Rabbie, President and Linda Gough, Registrar and CEO, dated March 29, 2019, regarding 'Governance reform recommendations', with the following attachment: <ul style="list-style-type: none"><li>• CMRTO news release – January 3, 2019</li></ul>
7cv	Alliance of Medical Radiation and Imaging Technologists Regulators of Canada's news release entitled 'New name, new statement of purpose, and new officers', dated March 20, 2019

# CMRTO Dashboard Q4 2018: January 1 – December 31, 2018

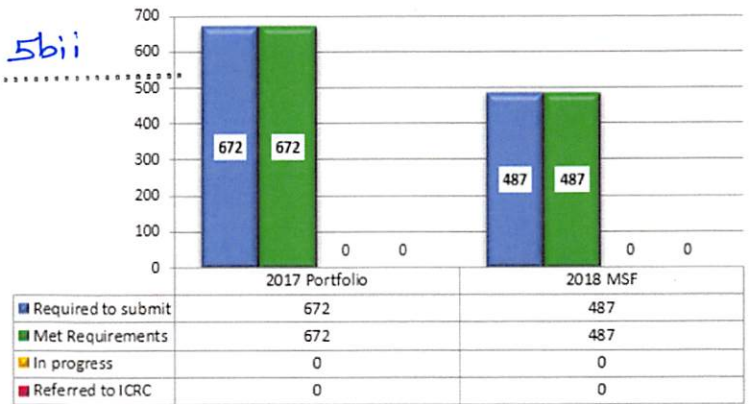
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MAR 29 2019

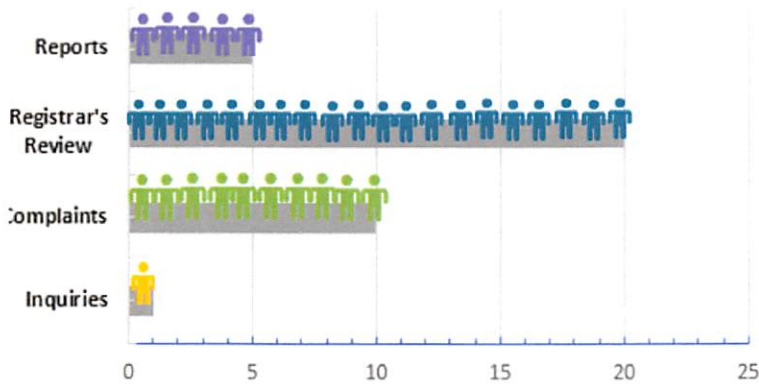
## Active members by primary specialty



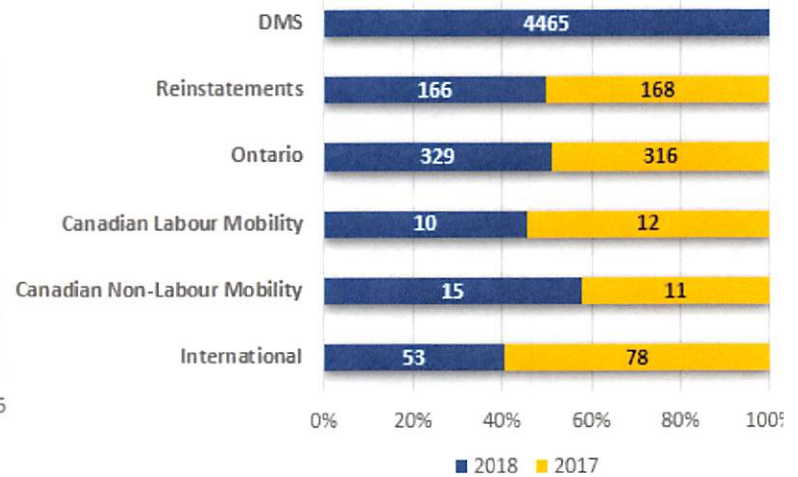
## Quality Assurance



## Professional Conduct New Cases



## Registration Applications



## Communications

72 new followers / 925 total  
61 new posts / 182 YTD  
1,764 engagements / 3,848 YTD

18 eblasts / 43 YTD  
108,716 emails / 205,624 YTD

41 new followers / 385 total  
62 new posts / 188 YTD  
479 engagements / 1,472 YTD

47 new followers / 356 total  
46 new updates / 57 YTD  
224 social actions / 385 YTD



**39 Presentations**  
to members & applicants  
2471 attendees



**7 Conference exhibits**  
532 booth visits



**19 Meetings**  
with ministry & agencies

CIRCULATED AT MEETING

OF MAR 29 2019

COUNCIL  
ITEM#..... 5cii.....



College of  
Medical Radiation  
Technologists of  
Ontario

Ordre des  
technologues en  
radiation médicale  
de l'Ontario

# Annual Report 2018

**Five specialties, one profession: ensuring public protection**

DRAFT

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## **President's Message**

What an amazing year we had!

At the end of last year, Council commented on the fact that despite everything we accomplished together in 2017, our job was still not finished. CMRTO now needed to register the province's estimated 3,000 sonographers. That was our goal for 2018 and we accomplished it. In fact, through the herculean effort of CMRTO staff and our Registration Committee, nearly 4,000 diagnostic medical sonographers (DMS) had been registered and approved for registration with the College by the end of the year.

Surprisingly, registering members in a new specialty was a catalyst to do something else that needed doing. We decided to optimize our governance structures to ensure they were not only inclusive of all specialties, but were also focused on maximizing the efficacy and performance of CMRTO's oversight of the profession in the interest of protecting the public.

Chief among the changes were adjustments to the composition and size of Council (fewer Council members!), and the ratio of public to professional members. Council will now be composed of seven public members and seven members of the profession representing the five specialty 'districts', one appointed academic member, and one elected member-at-large. This reconfiguration ensures Council has equal representation from the public and the profession, which is consistent with best practices in the regulatory world and makes a lot of sense given our dual mandates to regulate the profession of medical radiation technology and serve and protect the public interest.

These changes also necessitated a review of the Council's committee structure, election procedures and by-laws, meeting formats, and methods of ensuring ongoing education of Council members in all aspects of self-regulation and self-governance.

Effective governance and oversight are at the heart of making sure our profession meets its responsibilities and accountabilities to the public. Council's governance and oversight enable us to advance the profession's regulatory framework, ensure medical radiation and imaging technologists maintain and improve the knowledge, skills and judgement required in a changing practice environment, enhance our sector leading QA program, allow us to implement regulatory changes efficiently and transparently and empower our participation in the development of public policy and regulatory innovation in the public interest.

Competent governance practices also ensure we are able to proactively plan for, implement and integrate changes, and make certain that members' fees are used wisely. A few years ago, before even a single diagnostic medical sonographer had been registered, Council decided that the costs of bringing this new specialty into the CMRTO would be funded from our reserves. Allocating funds up front allowed us to direct change proactively and ensured that our ability to grow by more than 50% in a single year went as smoothly as possible.

Our successful integration of close to 4,000 members within a twelve-month period was the result of good decisions made by a forward-thinking Council. As a Council, our vision has always been to be future-focused, responsive, and collaborative regulator committed to excellence. The changes to Council's structure and composition brought about by By-law No. 60 will ensure we continue to have a strong and proactive leadership directing our future.

That said, there are still many changes to come and much additional work to do. We had hoped by year end 2018 that the *Medical Radiation and Imaging Technology Act, 2017* would have been proclaimed in force by the Ontario government. This Act will change the name of the CMRTO to the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO) to reflect more accurately the five specialties that are now part of one profession. At the time of publication, however, we are still standing by. But as further evidence of what I said earlier about foresight, we already have a new website built and ready to launch.

In the meantime, we continue to work in anticipation of the legislation coming into force. I am confident that the CMRTO Council, Registrar & CEO and staff are ready to hit the ground running — just as we did with the massive job of registering 4,000 new members in one year, just as we did in restructuring Council to meet a new era, and just as we did in maintaining and improving the operations of the CMRTO in a demanding year.

Yes, 2019 is going to be another exciting year for us.

Wendy Rabbie  
President

## Registrar & CEO's Message

After a whirlwind of activity, CMRTO now has almost 11,000 members! By the end of 2018, we had approved and registered nearly 4,000 diagnostic medical sonographers (DMSs) as new members of the CMRTO in our profession's fifth specialty — diagnostic medical sonography. The public of Ontario can now be assured that no matter what type of medical imaging procedure they need to have, their medical radiation and imaging technologist is registered with CMRTO and is qualified to perform the procedure safely, effectively and ethically.

Registering such a large number of members in such a short time required a huge effort from CMRTO staff. And they are to be recognized and congratulated for it, as I have done on nearly every occasion at which I have met with Council members, new and experienced members, ministry officials and representatives of other national and provincial organizations. In order to manage the addition of so many new members, it also meant growing the CMRTO staff complement while maintaining fiscal responsibility by efficiently managing expenses and bringing on new team members to support member growth of more than 50% year-over-year.

But I want to point out that the actual registration and approval of applications was only one part of a comprehensive undertaking. At the core of this enterprise was communication — getting across the who, what, why, when, and how of adding a new specialty to an existing regulatory body, as well as of finding and supporting sonographers around the province to recognize the importance of self-regulation with the CMRTO and their new professional accountability.

Throughout 2018 we engaged in a multi-faceted communication effort that took advantage of both established and new information 'delivery technologies' to reach sonographers and current members of the CMRTO's four other specialties.

'Delivery technologies' may not be the term you would think of to describe the 20 in-person spring and fall information sessions, the numerous presentations to educational institutions and DMS students, and the writing and distribution of newsletters and other print materials that educated DMSs about their new accountabilities under the *Medical Radiation Technology Act, 1991* (MRT Act), kept members apprised of all professional practice developments including the development and release of updated Standards of Practice to include the practice of diagnostic medical sonography, and provided detailed guidance on how to apply to the CMRTO in the specialty of diagnostic medical sonography.

We also published important additions and updates to our 'What You Must Know About ...' series of publications or 'WYMKA's as they are affectionately known. One of these publications focuses on updated professional obligations for 'Mandatory Reporting,' while another, called 'Performing Procedures for Medical Radiation and Imaging Technologists,' covers what members must know regarding the performance of medical radiation and imaging technology procedures in accordance with the legislative framework for orders and different forms of energy used by medical radiation technologists (MRTs) and diagnostic medical sonographers.

But the phrase 'delivery technologies' is certainly an apt way to describe the series of eight webinars with 2,788 registrants and over 4,000 additional views of the recordings on such subjects as 'Sonographers: how to apply to the CMRTO,' 'CMRTO QA Program – Simplified!' and even one provocatively titled 'Myths, Rumours & Urban Legends' that we created in 2018. We also updated our website to become a go-to content hub for all things regarding sonography application and registration, and created an introductory video explaining self-regulation for members and applicants that was shared via YouTube. Our social media platforms like our Facebook page continued to be an important tool for reaching our 925 followers in the profession through over 180 posts. Similarly, we saw substantial growth in the number of followers on our Twitter and LinkedIn accounts through our tweets and updates about workshops, publications and registration protocols for prospective new members.

This comprehensive commitment to communication through both traditional and contemporary means not only supported the registration and education of new and existing members, but also provided evidence of our promise of transparent and accountable discharge of our responsibilities to members and the public.

Of course, the year was not just about the registration of new members. For example, we undertook a critical update to our Quality Assurance program to align it with the new Standards of Practice and transitioned to a mandatory ePortfolio submission. (By the end of 2018 *all active members* had been assessed to ensure they were maintaining and improving their knowledge, skills and judgement to meet the requirements demanded of a changing professional practice.) We also participated in task forces and other reviews of legislation, engaged in public consultations about proposed regulations and by-laws and maintained, at a high level, the daily delivery of all the services expected of a leading regulatory body.

There is still much work to be done to complete the integration of sonography as a fifth specialty, not least of which will be the inauguration of a new name – the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO) – and a new name – medical radiation and imaging technology – for our profession once the *Medical Radiation and Imaging Technology Act, 2017* is proclaimed in 2019.

But I can pledge that the CMRTO, and its successor the CMRITO, will approach these new challenges with the same diligence and professionalism it did in 2018 throughout one of the most complex and demanding years in our 25-year history of protecting the public.

Linda Gough  
Registrar & CEO



## Report from Council

### Council

Wendy Rabbie, President	MRT(R)	District 1 - Radiography
Jay A. Neadles, Vice President	MRT(MR)(R)	District 4 - Magnetic Resonance
Ebenezer Adiyiah	MRT(R)	Former District 3 – Radiography (continues until June 2020)
Susan Allen	Public Member	
Nathalie Bolduc	MRT(R)	Former District 1 – Radiography (continues until June 2019)
Elaine Bremer	Public Member	
Angela Cashell	MRT(T)	District 2 - Radiation Therapy
Mary (Susan) Gosso	Public Member	
Janice Hoover	Public Member	
Ray Lappalainen	DMS	Transitional Council Member (continues until June 2019)
Franklin Lyons	Public Member	
Cathryne Palmer	MRT(T)	Former District 7 – Faculty (continues until June 2019)
Janet K. Scherer	MRT(R)	Former District 4 – Radiography (continues until June 2019)
Carolyn Trottier	DMS	Transitional Council Member (continues until June 2019)
Martin Ward	Public Member	
Sandra Willson	MRT(N)	District 3 - Nuclear Medicine

### Executive Committee

Wendy Rabbie, President	MRT(R)	Council Member
Jay A. Neadles, Vice President	MRT(MR)(R)	Council Member
Nathalie Bolduc	MRT(R)	Council Member
Angela Cashell	MRT(T)	Council Member
Janice Hoover	Public Member	Council Member
Martin Ward	Public Member	Council Member

The following is a summary of what has been an exciting and extremely productive year for Council, its statutory committees and CMRTO staff.

## **The regulation of diagnostic medical sonographers**

In 2018, the CMRTO began registering diagnostic medical sonographers in the College's fifth specialty. Building upon the work started in 2017, CMRTO introduced an online application process for diagnostic medical sonographers on January 1, 2018. This online process facilitated the registration of 3,625 new members last year – a feat that would not have been possible without this new process and the diligent work of the CMRTO staff, Council and the Registration Committee.

To support this new process, CMRTO worked with our external partners to upgrade our customer relationship management software and customize new features on our website to meet our registration needs. This behind-the-scenes work resulted in the development of a robust online application process that new applicants found easy and intuitive, and streamlined processes for CMRTO staff.

During the first few months, the new process was optimized and new staff were trained. By July, the Registration Team began operating at peak efficiency. Throughout the fall, our dedicated staff worked overtime to ensure that anyone who applied for registration with CMRTO as a diagnostic medical sonographer by the administrative deadline of November 16, 2018 would have their application reviewed in time for December 31, 2018 registration.

Ultimately, 3,625 diagnostic medical sonographers registered with CMRTO in 2018, with an additional 257 approved for registration.

Diagnostic medical sonographers were required by law to be registered with CMRTO to be legally authorized to practice the profession in Ontario on January 1, 2019. As a result, thousands of individuals needed to submit their applications, which then needed to be reviewed by the CMRTO Registration Team and approved in a timely fashion within a compressed timeline to ensure that diagnostic medical sonographers were able to practice on January 1, 2019. Not only were these health professionals relying on CMRTO to achieve this daunting task – the Ontario health care system was as well.

As a result, the Registration Team deserves many thanks for their tireless work answering questions, reviewing materials, liaising with applicants, and ensuring thorough and complete application packages were submitted. Without their effort and attention to the smallest details, there is little chance that we would have been able to register so many applicants in such a short time.

Similarly, the Registration Committee deserves to be recognized for reviewing and approving 299 applications over the course of 2018. Comprised of professional and public members, the Registration Committee effectively doubled the number of applications reviewed and decisions rendered in an average year.

Finally, the almost 4,000 diagnostic medical sonographers who applied for registration with the CMRTO in 2018 deserve to be commended for navigating a very thorough and precise application process and fulfilling all of the requirements to become registered members of the profession. As unregulated health professionals with little experience working within the exacting standards of a health regulator, the registration process had the potential to be stressful and overwhelming for a lot of individuals. Nevertheless, these applicants actively and enthusiastically participated in a comprehensive application process, complied with essential requirements, patiently waited for instruction from the CMRTO Registration team, and ultimately completed the registration process and joined CMRTO in a very compressed timeline. As a result, CMRTO would like to formally congratulate and welcome all of the diagnostic medical sonographers that joined the profession of medical radiation and imaging technologists in 2018.

### **New Standards of Practice, Code of Ethics and QA Program**

On January 1, 2018, the CMRTO introduced three updated foundational documents for members – the CMRTO Standards of Practice, the Code of Ethics, and the QA Program.

In 2017, a review of the Standards of Practice was conducted to integrate the knowledge and skills required of diagnostic medical sonographers into CMRTO's existing standards. Medical radiation technologists, diagnostic medical sonographers, other health professionals and members of the public were invited to participate in a survey to review the Standards of Practice, where almost 200 comments were collected and applied to revise the Standards of Practice.

The new Standards of Practice and Code of Ethics reflect that the practice of medical radiation technology now includes the use of soundwaves for diagnostic ultrasound for the purpose of diagnostic procedures, the evaluation of images and data relating to the procedures and the assessment of an individual before, during and after the procedure.

These new documents set out the minimum requirements for professional practice and conduct for members and are meant to ensure the quality of professional practice.

Similarly, the Quality Assurance program was also updated to align it with the revised Standards of Practice and Code of Ethics. Based on these changes and the regulation of diagnostic medical sonographers, the QA Committee introduced a number of changes to make the QA Portfolio easier to use and to increase member compliance with the QA program. In support of these goals, CMRTO moved to an online-only ePortfolio for members to record their self-assessments and participation in continuing education and professional development activities. This streamlined process was designed to make it easier for members to fulfill their responsibilities as regulated health professionals, and now features only three components: the QA profile, the self-assessment, and the record of continuing education and professional development. Supporting documentation about the revised QA Program was communicated to

members in January 2018 and, in concert with the support provided by the Quality Assurance team, proved to be useful in shepherding members through the revised QA Program in its first year.

### ***Medical Radiation and Imaging Technology Act, 2017***

In 2017, the Ontario Government passed the *Strengthening Quality and Accountability for Patients Act, 2017*, which includes the *Medical Radiation and Imaging Technology Act, 2017* (MRIT Act). The new Act will repeal and replace the *Medical Radiation Technology Act, 1991*, when the government proclaims the MRIT Act in force.

The MRIT Act will improve transparency to the public by changing the CMRTO's name to the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO), and the name of the profession to medical radiation and imaging technology to better reflect all five specialties providing medical radiation and imaging services to patients in Ontario.

CMRTO staff spent much of 2018 working on activities in support of the new MRIT Act and how it will impact the CMRTO, including:

- developing a new visual identity to reflect the College's new name, the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO), that represents our full membership, including diagnostic medical sonographers
- building a new website that reflects the change in the College's name and delivers enhanced navigation and content, making it a more useful tool for the public, members and employers
- developing new publications, letterhead and templates that reflect the College's new identity

CMRTO staff continue to work on these priorities in anticipation of the coming into force of the MRIT Act.

The new Act was expected to come into effect on January 1, 2019 but has yet to be proclaimed into force. Once this happens, however, the College will be in a good position to swiftly introduce its new identity, launch the new website, and disseminate revised publications that reference up-to-date legislation and link to new online resources.

## **Communications Outreach**

### *Information sessions*

As 2018 was a transformational year for CMRTO, Registrar & CEO Linda Gough traveled across the province in both the spring and the fall to speak with members and applicants on a number of important topics.

A total of 395 individuals attended the 20 workshops held in April, May, October and November in locations including Sudbury, Thunder Bay, Ottawa, Toronto and all points in between.

During these sessions, Linda spoke about the regulation of diagnostic medical sonographers, new Standards of Practice and Code of Ethics, changes to the QA program, changes to legislation (*Medical Radiation and Imaging Technology Act, 2017*), the introduction of By-law No. 60, changes to CMRTO Council and electoral districts, and new guidelines for performing procedures, and participated in conversations with members and applicants about the issues affecting medical radiation and imaging technologists.

### *Webinars*

CMRTO also offered a number of webinars throughout 2018 designed to provide members and applicants with the knowledge and skills necessary to carry out their responsibilities and requirements better. This popular communications outreach effort attracted 2,788 individuals to register for the eight webinars offered, and an additional 4,032 viewers on YouTube and other video streaming platforms.

Topics for these webinars included:

- Sonography is being regulated, now what?
- Sonographers: how to apply to CMRTO
- CMRTO QA Program
- Getting to know your College
- Myths, Rumours and Urban Legends
- What happens January 1, 2019?
- What you must know about ... performing procedures for medical radiation and imaging technologists
- What you must know about ... mandatory reporting

The impact of our webinars was tangible, allowing us to conveniently connect with a sizable portion of our audience and share information in a cost-effective and flexible manner. Future efforts will focus on finding webinar times that are convenient for an increased number of members and identifying topics that are of the greatest use and relevance to our members in meeting their professional accountabilities.

### *Conferences and presentations*

Throughout 2018, CMRTO staff and Council members were active in delivering presentations at academic institutions and attending conferences. The Registrar & CEO, Deputy Registrar, Quality Assurance Director, Quality Assurance Manager, and Professional Practice Advisor delivered a total of 39 presentations to 2,471 attendees and attended seven conferences throughout the year, meeting with 532 booth visitors. The opportunity to speak at these venues and communicate face-to-face with members, students and applicants was very productive in terms of answering questions, alleviating apprehension, and assisting current and future members of the profession to understand the public protection mandate of CMRTO.

### *Email communications*

Upon moving to a new customer relations management platform, the College leveraged newly available tools to enhance online communication efforts with members and applicants throughout 2018. A total of 43 targeted bulk email messages were sent to members and applicants to inform them of new developments, outline their obligations as regulated health professionals, and share information about upcoming events and activities of interest. This focus on online communication delivery was very successful, as demonstrated by a delivery rate of 99.7% and over 16,000 in-message clicks indicating a substantial interest by our audience in learning more about the topics covered in the email messages they received.

### *Social media*

CMRTO also bolstered communications efforts online in an effort to reach and grow audiences via a number of social media platforms in 2018. Our most widely adopted social media platform continues to be Facebook, which saw an increase in followers of 25% year-over-year and 3,548 engagements (likes, shares, comments, clicks, etc.) on 182 posts over the course of the year. The College's Twitter account experienced 44.2% increase in followers and 1,472 engagements on 188 tweets, while our LinkedIn account saw our followers increase by 44.7% and 385 engagements or social actions resulting from 57 updates. Ultimately, these results show that our audience is seeking us out on different social media platforms and that continued commitment to sharing content on social media should result in an increasingly engaged and informed audience base.

## **By-law No. 60**

In 2018, CMRTO sought to streamline our existing by-laws into a single, comprehensive by-law and to prepare for the regulation of diagnostic medical sonographers.

A public consultation was held in the summer eliciting a considerable amount of comments from members and the public. Feedback collected through the online consultation was incorporated into a revised draft of the By-law that was approved by Council in September.

In addition to consolidating all of the elements of the previous by-laws into a single by-law, By-law No. 60 also introduced significant changes to the composition of CMRTO Council and its electoral districts. These changes stemmed from the regulation of diagnostic medical sonographers commencing in 2019 and the need to secure representation from this specialty on Council.

Following its approval by Council in September, the clauses pertaining to elections came into force on October 1, 2018 while all other elements of By-law No. 60 came into force on January 1, 2019.

### **Council composition**

In recent years, regulators have been adjusting the composition of their Councils to better reflect their membership and involve the public in a more significant way. In concert with the added responsibility of regulating diagnostic medical sonographers, CMRTO determined that our Council structure required modification to ensure better representation from all five specialties and include an equal number of professional and public members.

Previously, By-law No. 12 provided for eight elected members of Council based on eight electoral districts: Radiography (Northern District), Radiography (Eastern District), Radiography (Central District), Radiography (Western District), Radiation Therapy, Nuclear Medicine, Faculty Members, and Magnetic Resonance. Reflecting governance best practices of smaller Council sizes and an equal number of public and professional members, By-law No. 60 provides for six electoral districts: one for each of the five specialties of medical radiation and imaging technology, and one member-at-large elected from the entire membership.

Other changes to Council included moving the Faculty Council Member position from an elected position to a competency-based appointed position.

The transition to the new Council composition will occur incrementally over the next two election cycles (2019 and 2020) and will result in the total number of professional members on Council being reduced by one. The seven professional members will join seven public members to create a balanced Council. These changes reflect the governance best practices of smaller Council sizes and an equal public/professional member ratio.

### **Strategic Plan 2017-2021: Commitment to Regulatory Excellence**

In December 2016, Council approved *Strategic Plan 2017-2021: Commitment to Regulatory Excellence* to guide the work of the CMRTO for the next five years.

As part of this plan, the following strategic and enabling goals were identified to help guide CMRTO activities and projects:

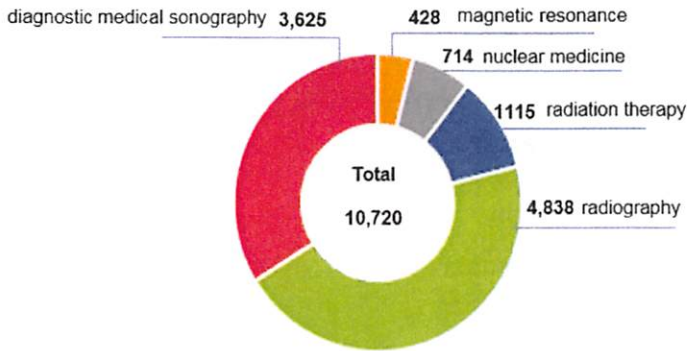


Throughout 2018, these strategic and enabling goals took centre stage in our activities, and especially regarding the regulation of diagnostic medical sonographers.

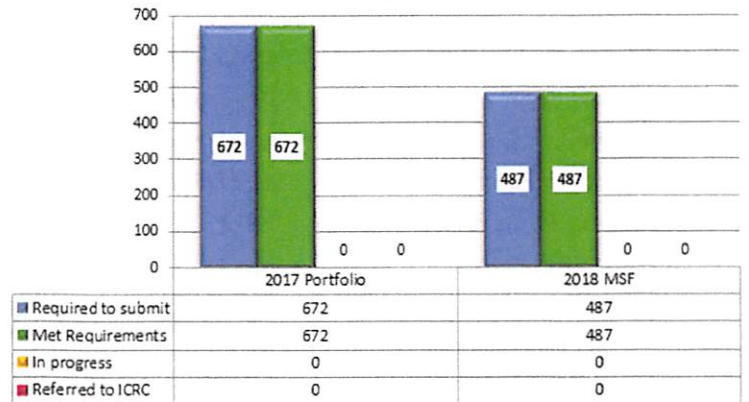


# CMRTO Dashboard Q4 2018: January 1 – December 31, 2018

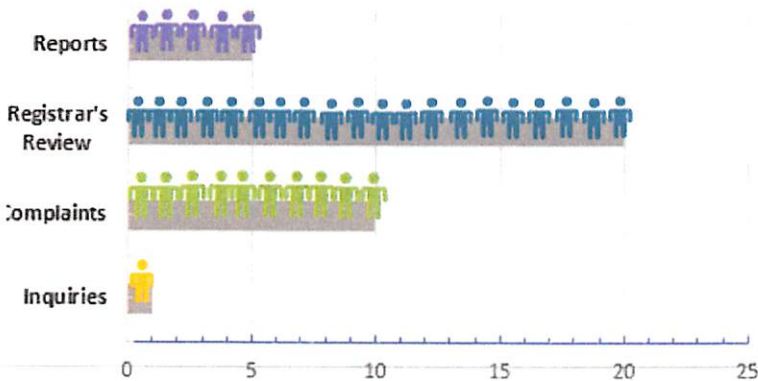
## Active members by primary specialty



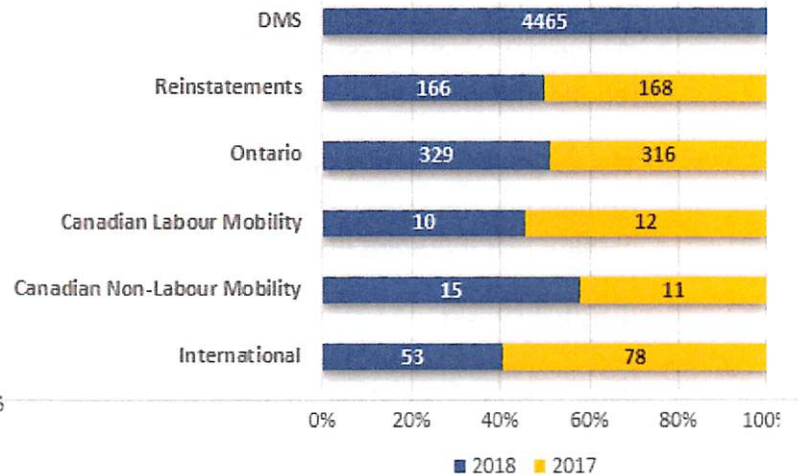
## Quality Assurance



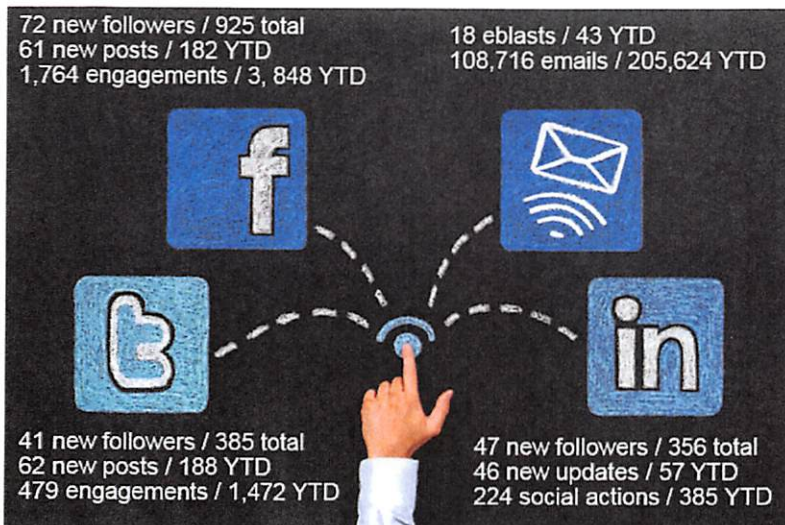
## Professional Conduct New Cases



## Registration Applications



## Communications



**39 Presentations**  
to members & applicants  
2471 attendees



**7 Conference exhibits**  
532 booth visits



**19 Meetings**  
with ministry & agencies

## Committee Reports

### Inquiries, Complaints and Reports Committee

Elaine Bremer, Chair	Public Member	Council Member
Susan Allen	Public Member	Council Member ( <i>from June 14, 2018</i> )
Rania Arabi	MRT(N)(MR)	Appointed Member ( <i>from June 14, 2018</i> )
Bronwen Baylis	MRT(R)	Appointed Member
Angela Brunetti	MRT(T)	Appointed Member
Angela Cashell	MRT(T)	Council Member
Lisa Giampa	MRT(N)	Appointed Member
Tarja Heiskanen	MRT(T)	Appointed Member
Veronica Nelson	MRT(R)	Appointed Member
Janet Scherer	MRT(R)	Council Member
Titus Stan	DMS	Appointed Member ( <i>from June 14, 2018</i> )
Kimberly Thorvaldson	MRT(R)	Appointed Member
Martin Ward	Public Member	Council Member
David M. Wilson	MRT(N)	Appointed Member ( <i>until June 14, 2018</i> )

The Inquiries, Complaints and Reports (ICR) Committee is the statutory committee under the *Regulated Health Professions Act, 1991* (the RHPA) responsible for handling all complaints, reports and inquiries regarding member conduct.

The Chair of the ICR Committee has appointed two separate panels, the Inquiry Panel and the Complaints and Reports Panel. The panels hold separate meetings and deal with distinct matters and therefore their data is tracked separately.

#### Inquiry Panel

Inquiry cases involve issues related to a member's fitness to practise. The inquiry is focused on identifying if a member is suffering from a physical or mental condition or disorder, the nature and extent of the condition or disorder and whether to refer the matter to the Fitness to Practise Committee for a hearing. These cases are handled by the Inquiry Panel of the ICR Committee.

#### Complaints and Reports Panel

Complaint cases are opened when the College receives a written/recorded complaint regarding the conduct of a member. These cases are investigated by the Complaints and Reports Panel of the ICR Committee.

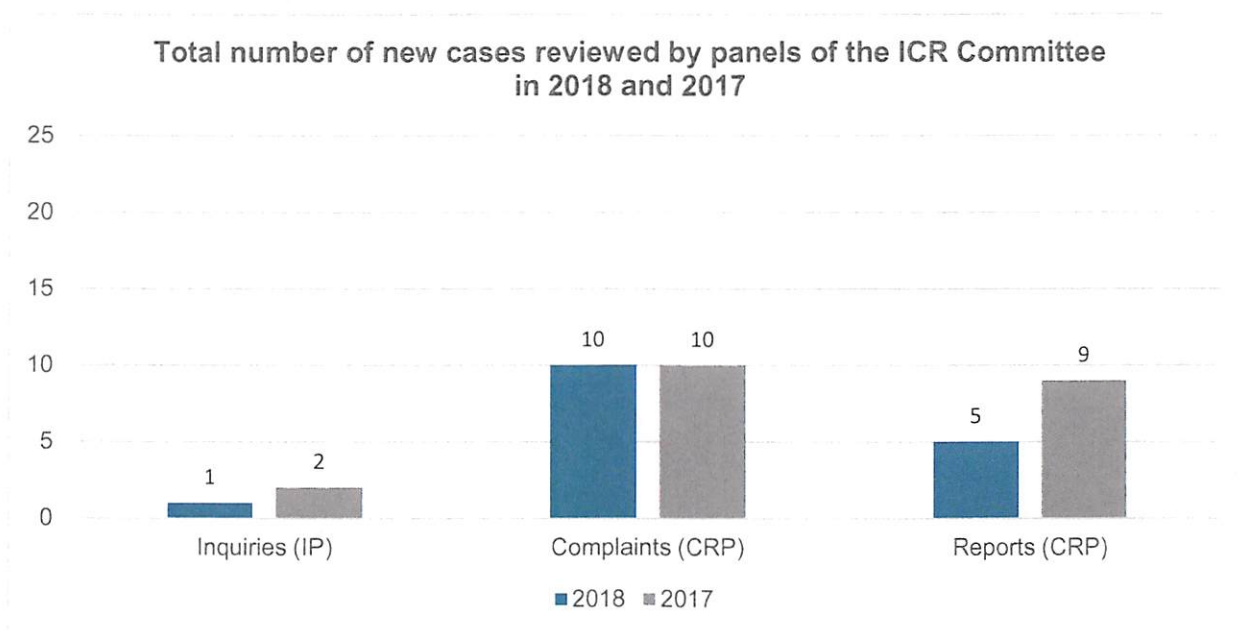
The Complaints and Reports Panel of the ICR Committee also considers reports made by the Registrar regarding the results of an investigation conducted by an investigator appointed by the Registrar. With the approval of the ICR Committee, the Registrar may appoint an investigator to

conduct an investigation to determine whether a member has engaged in professional misconduct or is incompetent.

In 2018, panels of the ICR Committee reviewed a total of 16 new cases. Of those cases, ten were complaints, five were reports and one was an inquiry.

In 2018, panels of the ICR Committee issued a total of 19 decisions.

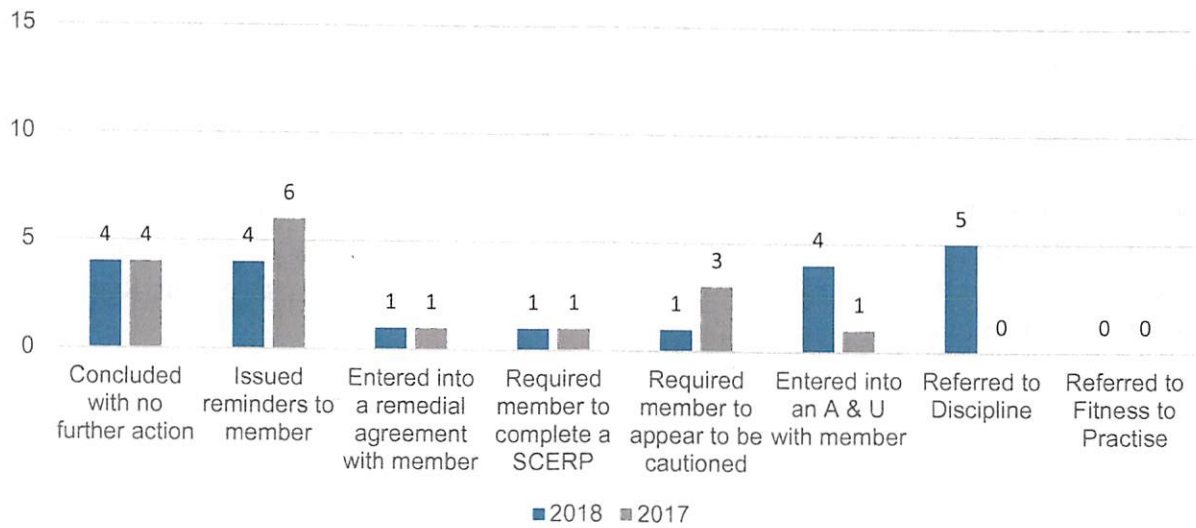
Below are charts that show the outcomes of the decisions issued by the ICR Committee in 2018, as well as a breakdown of the complaints and reports by the related practice standard and comparative numbers from 2017. Please note that a decision may involve more than one outcome and more than one practice standard.



\*IP – Inquiry Panel

\*CRP – Complaints and Reports Panel

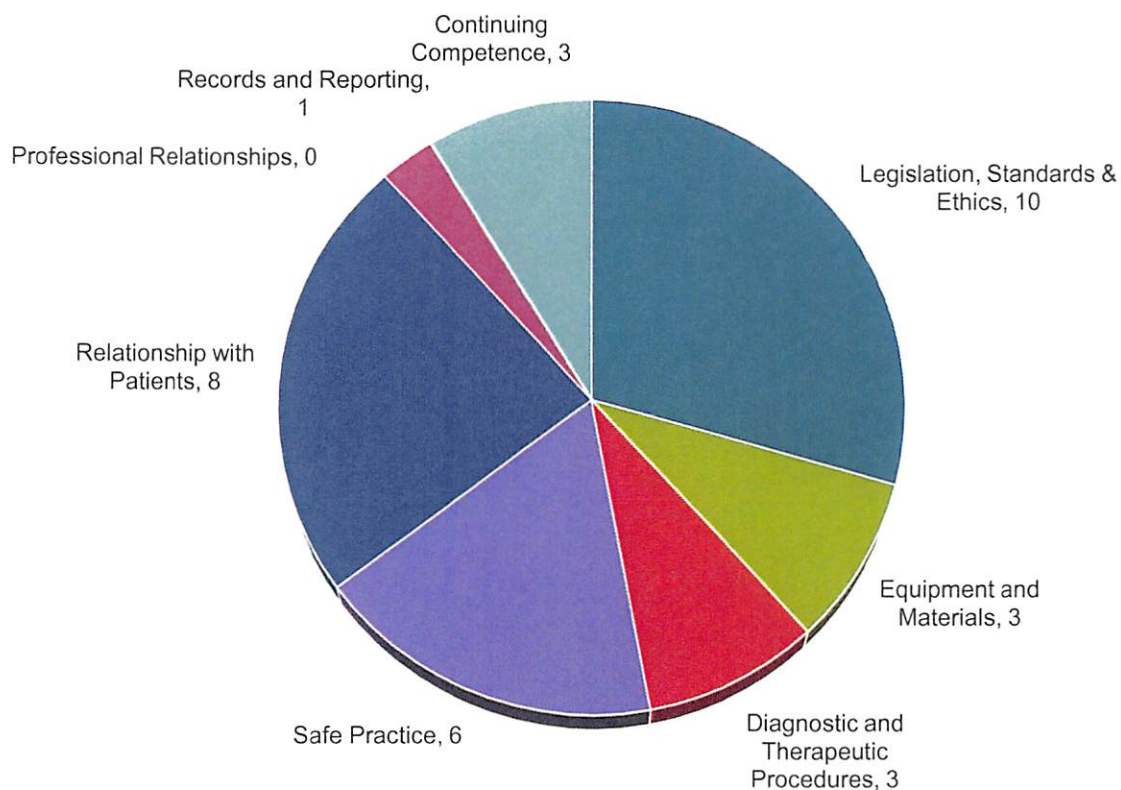
### Decision Outcomes issued by panels of the ICR Committee in 2018 and 2017



\*SCERP – specified continuing education and remediation program

\*A&U – Acknowledgement & Undertaking

## Complaints/Reports by Practice Standard 2018



- Legislation, Standards & Ethics
- Diagnostic and Therapeutic Procedures
- Relationship with Patients
- Records and Reporting
- Equipment and Materials
- Safe Practice
- Professional Relationships
- Continuing Competence

\*A complaint or report may involve more than one practice standard. The total number of practice standards may not equal the total number of complaints and reports decisions issued. The practice standards involved in a complaint or report are assigned at the time the decision is issued.

## **Health Professions Appeal and Review Board**

The Health Professions Appeal and Review Board (HPARB) is an agency of the government, independent of the CMRTO that is responsible for reviewing the decisions of the Inquiries, Complaints and Reports Committee regarding complaints. HPARB can review both the adequacy of the investigation and the reasonableness of the decision. A review may be requested by either the complainant or the member who is the subject of the complaint.

In 2018 there were three HPARB decisions issued. In two cases, HPARB confirmed the decision of the Inquiries, Complaints & Reports Committee, and in one case HPARB returned the decision to the Inquiries, Complaints & Reports Committee and required it to reconsider its decision in light of the Board's Reasons.

## Discipline Committee

Franklin Lyons, Chair	Public Member	Council Member
Ebenezer Adiyiah	MRT(R)	Council Member
Susan Allen	Public Member	Council Member ( <i>to June 14, 2018</i> )
Rania Arabi	MRT(N)(MR)	Appointed Member ( <i>to June 14, 2018</i> )
Renate Bradley	MRT(T)	Appointed Member ( <i>from June 14, 2018</i> )
Martin Chai	MRT(T)	Appointed Member ( <i>to June 14, 2018</i> )
Lisa Di Prospero	MRT(T)	Appointed Member
Claudina Di Zio Longo	MRT(R)	Appointed Member
Simrat Grewall	DMS	Appointed Member ( <i>from June 14, 2018</i> )
Janice Hoover	Public Member	Council Member
Jia Inacio	MRT(R)	Appointed Member ( <i>from June 14, 2018</i> )
An Ling	DMS	Appointed Member ( <i>from June 14, 2018</i> )
Jay Neadles	MRT(MR)(R)	Council Member
Scott Tracze	Public Member	Council Member ( <i>from June 14, 2018</i> )
Lamees Wahab	MRT(N)	Appointed Member ( <i>to June 14, 2018</i> )
Martin Ward	Public Member	Council Member
Sandra Willson	MRT(N)	Council Member

The Discipline Committee is responsible for holding hearings related to professional misconduct and incompetence matters referred by the Inquiries, Complaints and Reports Committee.

There were five referrals to the Discipline Committee in 2018 and five Discipline hearings were held. A summary of each hearings is set out below.

Four of the five hearings summarized below proceeded by way of an agreed statement of facts relating to the allegations against the member (or former member) and a joint submission on penalty. One hearing was contested.

### ***Summary of Discipline Hearing – Patrick M. Jew***

On October 25, 2018, a Panel of the Discipline Committee (the Panel) found Patrick M. Jew to have committed acts of professional misconduct in that he:

- failed to comply with a decision of the Inquiries, Complaints and Reports (ICR) Committee;
- engaged in conduct relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as unprofessional;
- failed to appear before a panel of the ICR to be cautioned; and
- failed to comply with a requirement or order of the ICR Committee.

The hearing proceeded by way of an agreed statement of facts. The Panel accepted a joint position on penalty and made the following order:

- that Patrick M. Jew be required to appear before a Panel of the Discipline Committee to be reprimanded on October 25, 2018;
- that the Registrar suspend Patrick M. Jew's certificate of registration, commencing on November 30, 2018, until such time as he has complied with any remediation recommended as a result of the assessment of his quality assurance portfolio for the year 2016;
- that the Registrar impose specified terms, conditions or limitations on Patrick M. Jew's certificate of registration, requiring that he successfully complete the College's online Jurisprudence Course and the online quiz for the Legislation Learning Package, by no later than November 30, 2018; and
- that Patrick M. Jew pay the College's costs in the amount of \$1,500.00 on October 25, 2018.

### ***Summary of Discipline Hearing – Catherine Vermeersch***

On October 31, 2018, a Panel of the Discipline Committee (the Panel) found Catherine Vermeersch to have committed acts of professional misconduct in that she:

- failed to comply with a decision of the Inquiries, Complaints and Reports (ICR) Committee;
- engaged in conduct relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as unprofessional;
- failed to appear before a panel of the ICR Committee to be cautioned; and
- failed to comply with a requirement or order of the ICR Committee.

The hearing proceeded by way of an agreed statement of facts. The Panel accepted a joint position on penalty and made the following order:

- that Catherine Vermeersch be required to appear via teleconference before the Panel to be reprimanded on October 31, 2018; and
- that Catherine Vermeersch pay the College's costs in the amount of \$1,500.00 by November 30, 2018.



### ***Summary of Discipline Hearing – Denise McBain***

On November 6, 2018, a Panel of the Discipline Committee (the Panel) found Denise McBain to have committed acts of professional misconduct in that she:

- failed to satisfactorily complete the Peer and Practice Assessment – Multi-Source Feedback (MSF) Assessment for the year 2016,
- engaged in conduct relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as unprofessional, and
- failed to comply with a requirement or order of a Committee or panel of a Committee of the College, namely the Quality Assurance Committee.

The hearing proceeded by way of an agreed statement of facts. The Panel accepted a joint position on penalty and made the following order:

- that Denise McBain be required to appear before a Panel of the Discipline Committee to be reprimanded on November 6, 2018; and
- that Denise McBain pay the College's costs in the amount of \$1,500.00 by November 30, 2018.

### ***Summary of Discipline Hearing – Ivan Jagarcic***

On November 15, 2018, a Panel of the Discipline Committee (the Panel) found Ivan Jagarcic to have committed acts of professional misconduct in that he:

- failed to cooperate with the Quality Assurance Committee or any assessor appointed by that committee;
- failed to satisfactorily complete that Quality Assurance Portfolio for the year 2016;
- engaged in conduct relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as unprofessional; and
- failed to comply with a requirement or order of the Quality Assurance Committee.

The hearing proceeded by way of an agreed statement of facts. The Panel noted that Ivan Jagarcic had agreed to resign and never practice in Ontario. The Panel accepted a joint position on penalty and imposed the following order:

- that Ivan Jagarcic be required to appear via teleconference before the Panel to be reprimanded on November 15, 2018.

### **Summary of Discipline Hearing – Misbahuddin Ahmed**

On November 30, 2018, a Panel of the Discipline Committee (the Panel) found Misbahuddin Ahmed to have committed acts of professional misconduct in that he:

- has been found guilty of an offence that is relevant to his suitability to practise, in particular when he committed the offences of conspiring to knowingly facilitate a terrorist activity and knowingly participating in the activities of a terrorist group;
- Contravened a federal law, namely the *Criminal Code of Canada*, and that the contravention is relevant to his suitability to practise, in particular when he committed the offences of conspiring to knowingly facilitate a terrorist activity and knowingly participating in the activities of a terrorist group; and
- Engaged in conduct or performed an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional, in particular when he committed the offences of conspiring to knowingly facilitate a terrorist activity and knowingly participating in the activities of a terrorist group.

The member was not present or represented so the hearing proceeded as a contested hearing.

The Panel noted that Misbahuddin Ahmed had resigned his membership and signed an undertaking to never practice again in Ontario. The Panel issued a written reprimand.

## **Fitness to Practise Committee**

Nathalie Bolduc, Chair	MRT(R)	Council Member
Mary (Susan) Gosso	Public Member	Council Member
Hanan Massoud	DMS	Appointed Member ( <i>from June 14, 2018</i> )
David McDougall	MRT(R)	Appointed Member
Derek Ribeiro	MRT(T)	Appointed Member ( <i>to June 14, 2018</i> )

The Fitness to Practise Committee is responsible for holding hearings related to incapacity matters referred by the Inquiries, Complaints and Reports Committee.

There were no referrals to the Fitness to Practise Committee in 2018 and no hearings were held in 2018.

## Patient Relations Committee

Wendy Rabbie, Chair	MRT(R)	Council Member
Nathalie Bolduc	MRT(R)	Council Member
Angela Cashell	MRT(T)	Council Member
Janice Hoover	Public Member	Council Member
Jay Neadles	MRT(MR)(R)	Council Member
Martin Ward	Public Member	Council Member

The Patient Relations Committee is responsible for the CMRTO's Patient Relations Program. The Patient Relations Program includes measure for preventing and dealing with sexual abuse of patients, including educational requirements for members, guidelines for the conduct of members with their patients, training for CMRTO's staff and the provision of information for the public.

At the CMRTO, the Executive Committee also acts as the Patient Relations Committee, reflecting the importance of the role and the fact that the Patient Relations Program and any patient relations initiatives should permeate all activities undertaken by the CMRTO and should not be restricted to the activities of a single committee.

Bill 87, the *Protecting Patients Act* was introduced into the legislature on December 8, 2016 and proposed extensive amendments to the *Regulated Health Professions Act, 1991* in response to the recommendations in the Task Force on Sexual Abuse's Report. Bill 87 received Royal Assent on May 30, 2017 but some provisions only came into force on proclamation. On May 1, 2018, the provisions which expand the eligibility for funding and therapy for patients who allege they have been sexually abused by a health care professional were proclaimed in force. In addition, on May 1, 2018 two new regulations came into force, one prescribing the criminal code offences that would result in mandatory revocation and another outlining the criteria to determine whether an individual is a patient.

The Patient Relations Committee is also responsible for administering the fund for therapy and counseling for patients who allege they have been sexually abused by a member. There were no requests for funding for therapy or counselling in 2018.

## Quality Assurance Committee

Sandra Willson, Chair	MRT(N)	Council Member
Tatiana Grankina	DMS	Appointed Member ( <i>from June 14, 2018</i> )
Thomas (Tom) Holland	MRT(R)	Appointed Member
Constance Krajewski	MRT(R)	Appointed Member
Donna D. Lewis	MRT(T)	Appointed Member ( <i>until June 14, 2018</i> )
Merrylee McGuffin	MRT(T)	Appointed Member
John Andrew Mogg	MRT(R)(MR)	Appointed Member ( <i>from June 14, 2018</i> )
Derek Ribeiro	MRT(T)	Appointed Member ( <i>from June 14, 2018</i> )
Tammy E. Urso	MRT(N)	Appointed Member ( <i>until June 14, 2018</i> )
Martin Ward	Public Member	Council Member

The role of the Quality Assurance Committee is to develop and administer a quality assurance program that includes:

- continuing education or professional development to promote continuing competence and continuing quality improvement among the members,
- self, peer and practice assessments, and
- a mechanism to maintain members' participation in, and compliance with, the program.

The Quality Assurance Committee held six days of meetings in 2018. In 2018, 17% of the CMRTO membership was randomly selected for assessment under the QA program. 10% of the CMRTO membership was required to submit their QA Portfolio for assessment and 7% of members were selected to participate in a peer and practice assessment by means of a multi-source feedback (MSF) assessment.

## Quality Assurance Portfolio

The QA Portfolio is completed each calendar year by every member. The QA Portfolio includes a self-assessment based on the standards of practice, a QA profile which describes the member's practice, and a method to keep a record of continuing education and professional development activities completed each year. Each member is required to complete and record at least 25 hours of continuing education and professional development activities each year. A member may be requested to submit the QA Portfolio for assessment by the QA Committee or an assessor.

CMRTO introduced a new Quality Assurance Program in 2018 due to the integration of diagnostic medical sonographers as a new specialty and the introduction of the revised Standards of Practice and Code of Ethics. In an effort to make the QA Portfolio easier to use and enhance member compliance, CMRTO moved exclusively to an online-only ePortfolio, replacing the paper-based Portfolio that was an option for members to use for many years. The new ePortfolio features three components – the QA profile, the self-assessment and the record of continuing education and professional development – allowing members to easily record their

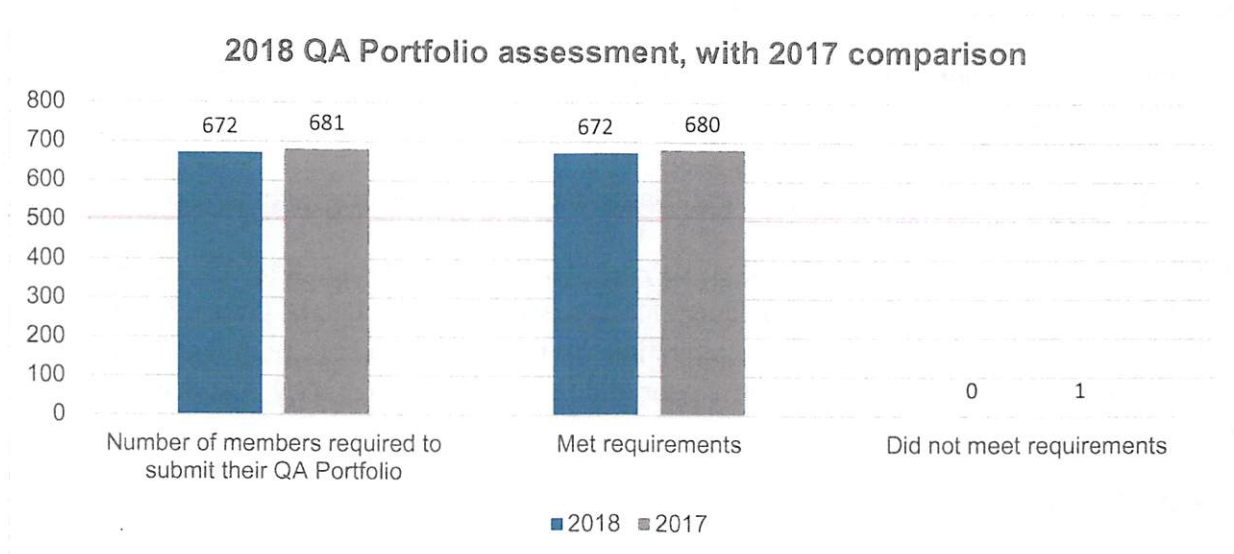
self-assessments and participation in learning activities in real time via a mobile device. This tool also facilitates the review process for the Quality Assurance team.

For 2018, Council approved 10% of members to be randomly selected to submit their 2017 QA Portfolios for assessment.

## QA Portfolio

In 2018, CMRTO retired the old paper portfolio – all members are now required to record their continuing education and professional development activities hours using the ePortfolio.

The majority of members who submit their ePortfolio exceed the required 25 hours of continuing education and professional development activities, with some members recording over 100 hours.



## QuickQA app

The QuickQA app was launched in August 2015 for both Android and Apple mobile devices. This free app allows members to record their continuing education and professional development activities using their smartphones and tablets, which upload recorded activities to the QA ePortfolio when connected to the internet.

The QuickQA app has been downloaded 1,882 times and has proven to be a popular tool among members for recording continuing education and professional development activities.

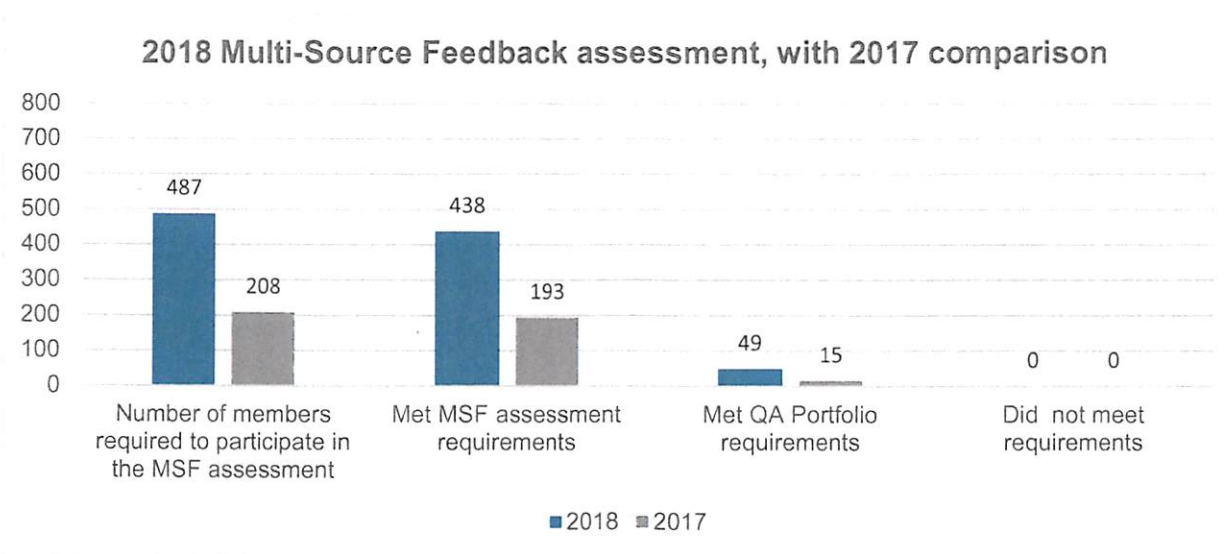
## Multi-Source Feedback (MSF) assessment

The peer and practice assessment by means of a multi-source survey is completed by individual members selected by the QA Committee in accordance with the QA regulation. The

assessment includes a self, peer and co-worker, and patient assessments of a member's practice, based on the standards of practice. A report of this assessment is prepared by the QA Committee, a copy of which is provided to the member.

The criteria for MRTs to complete the MSF assessment include:

- sufficient number of peers and co-workers
- involved in clinical practice in Ontario. Over 450 members were required to participate in the MSF assessment in 2018. A total of 15 (7.2%) members did not meet the criteria to participate in the MSF assessment process and were required to submit their QA Portfolio instead.



### Individual Practice Assessment (IPA)

The circumstances under which a member will be selected by the QA Committee to participate in an IPA with an assessor include when, based on an assessment of the QA Portfolio or an MSF assessment, the QA Committee is of the opinion that there may be a gap in a member's practice and a further assessment of the member's practice is required.

There were no individual practice assessments conducted in 2018.

## Registration Committee

Janice Hoover, Chair	Public Member	Council Member (Chair: June 14, 2018 to August 7, 2018; reappointed November 14, 2018)
Martin Ward	Public Member	Council Member (from August 8, 2018) (Chair: August 8, 2018 to November 13, 2018)
Valentina Al-Hamouche	MRT(R)	Appointed Member
Zafar Bajwa	DMS	Appointed Member (from June 14, 2018)
Ruvette Coelho	MRT(T)	Appointed Member (from June 14, 2018)
Dolores Dimitropoulos	MRT(R)	Appointed Member
Cara Mazur	MRT(R)(DMS)	Appointed Member (from June 14, 2018)
Cathryne Palmer	MRT(T)	Council Member
Anna Simeonov	MRT(MR)(R)	Appointed Member
Kieng Tan	MRT(T)	Appointed Member
Alan Thibeau	MRT(N)	Appointed Member (until August 27, 2018)

The role of the Registration Committee is to assess applications for registration which have been referred to the Committee by the Registrar to determine whether the applicants meet the requirements for registration to practise the profession in Ontario, in a fair, transparent, objective and impartial manner.

The Registration Committee held ten days of meetings to discharge its statutory responsibilities in 2018. The Registration Committee held nine days of meetings and a one-day workshop to review and develop evaluation tools for assessing applications for registration in diagnostic medical sonography.

During the nine days of meetings, the Committee reviewed and approved the following:

### **Internationally educated applicants (in the specialties of radiography, nuclear medicine, magnetic resonance and radiation therapy)**

- Reviewed 53 new applications for registration from internationally educated individuals
- Issued 63 decisions (ten decisions were from applicants who had submitted their applications for registration in 2017 but the panel did not issue their decisions until 2018) where the panel approved 63 applications for registration following the completion of certain requirements, including the successful completion of the CMRTO-approved examination (the Canadian Association of Medical Radiation Technologists' national certification examination)

### **Applicants for registration in the specialty of diagnostic medical sonography**

- Reviewed 90 applications for registration from applicants who applied for a certificate of registration in diagnostic medical sonography



- Issued 90 decisions where the panel approved 89 applications for registration following the completion of certain requirements and refused one application.

### Applications from members

- Reviewed one application for a variation of a term, condition or limitation on a member's certificate of registration. The Registration Committee issued a decision to remove the term, condition or limitation from the member's certificate of registration
- Reviewed one application for reinstatement from a member whose certificate of registration was suspended. The Registration Committee issued a decision to reinstate the certificate of registration

### Office of the Fairness Commissioner

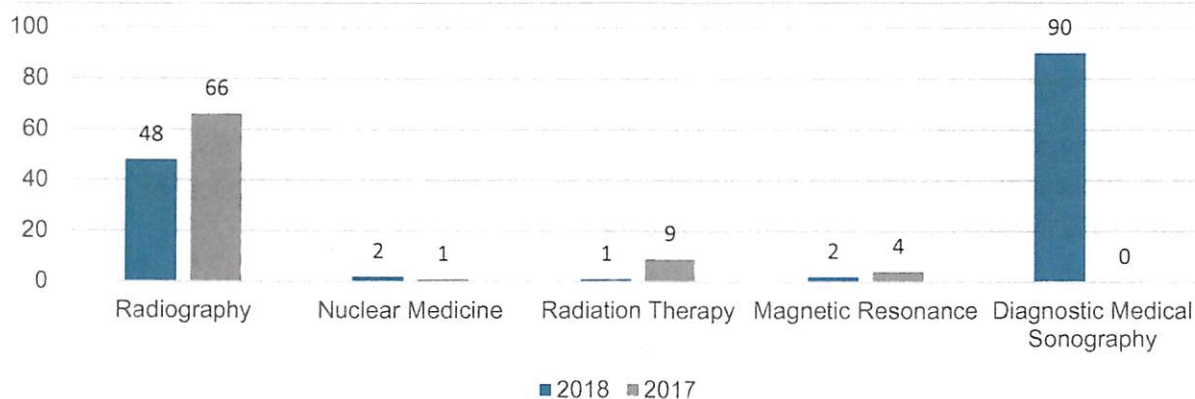
The CMRTO submitted the 2018 Fair Registration Practices Report to the Office of the Fairness Commissioner in February 2019.

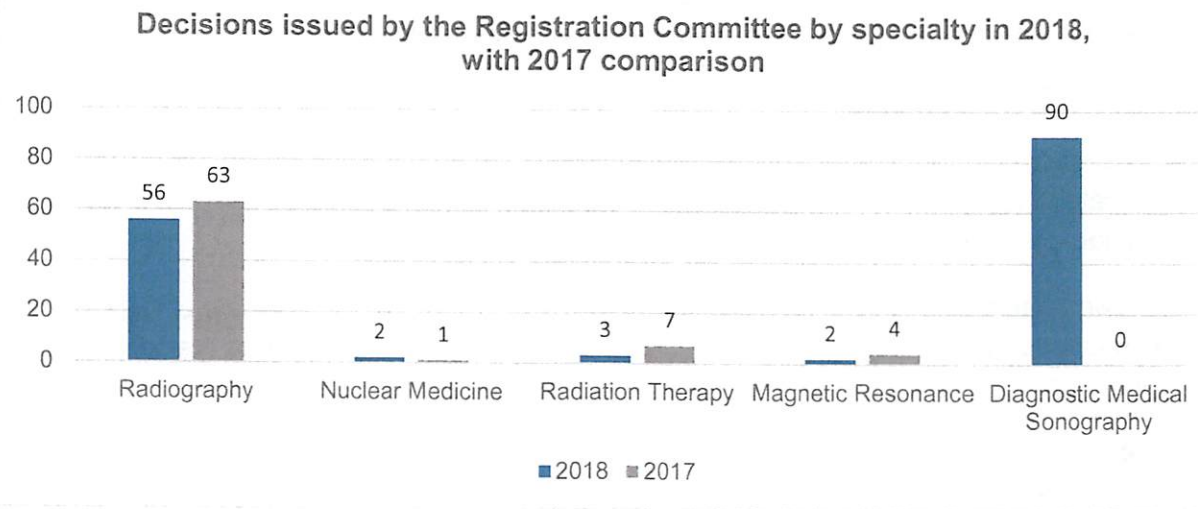
### Education and Training

New members of the Registration Committee completed an orientation and training on the legislative framework and the CMRTO Registration Committee assessment processes and procedures.

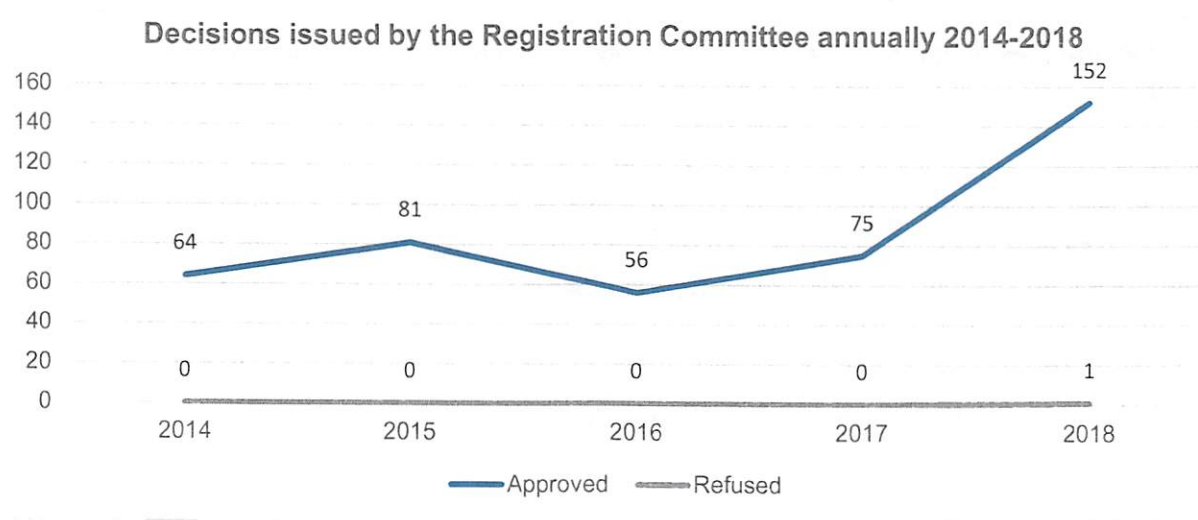
The Registration Committee participated in an orientation session on the legislative framework, the amended registration regulation which came into force on January 1, 2018 and the CMRTO application review process, for applicants applying for a certificate of registration in the specialty of diagnostic medical sonography under the grandparenting provision.

**Total number of new applications reviewed by the Registration Committee by specialty - 2018, with comparison for 2017**



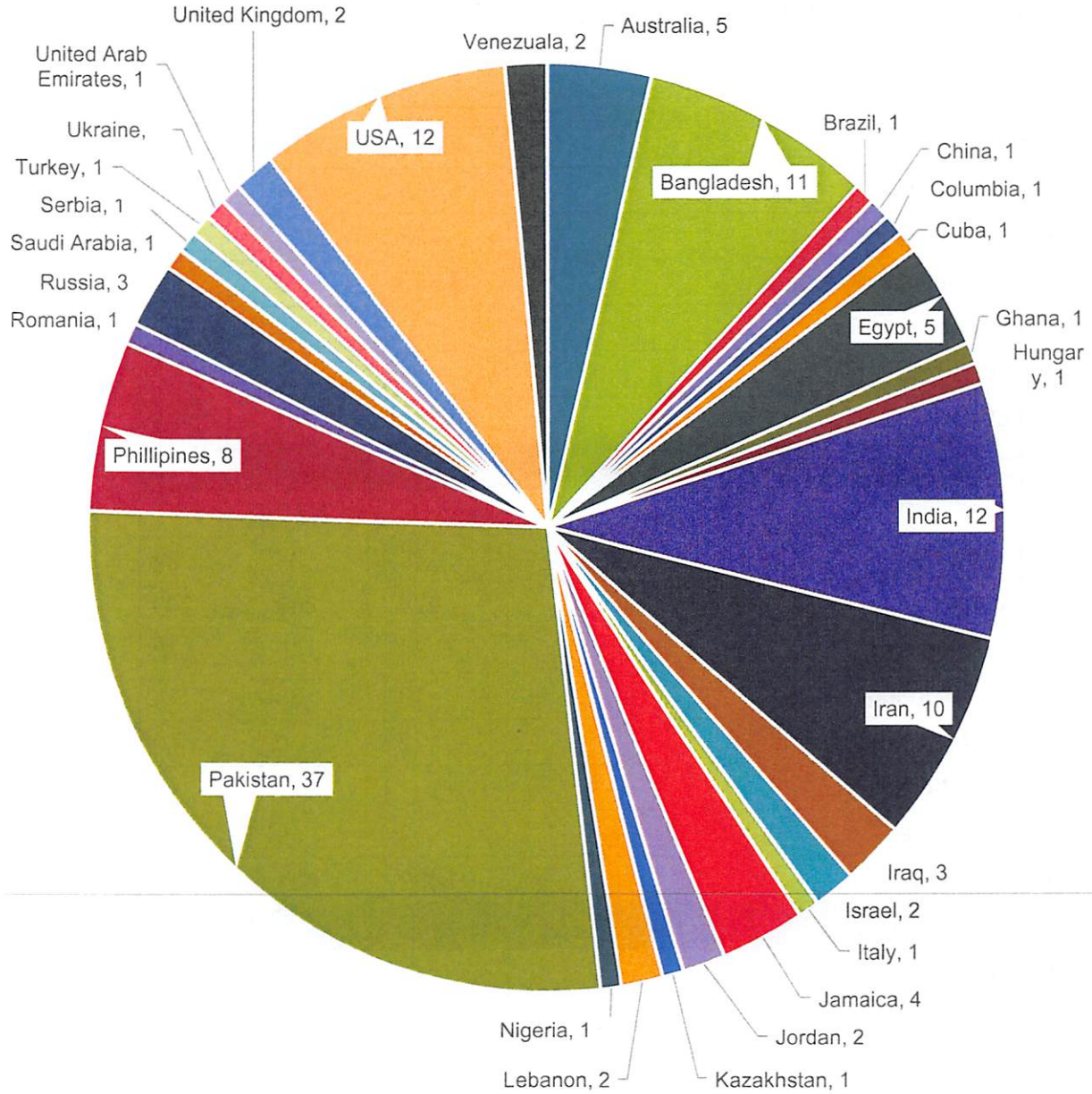


\*The total number of decisions may not correspond to the total number of applications reviewed as decisions may be pending receipt of additional information or decisions may be issued for applications reviewed in the previous calendar year.



\*The total number of decisions issued by the Registration Committee includes decisions for all types of applications referred to the Committee including Ontario educated applicants, internationally educated applicants and past members.

**Countries in which international applicants completed their education  
in medical radiation technology, 2018**

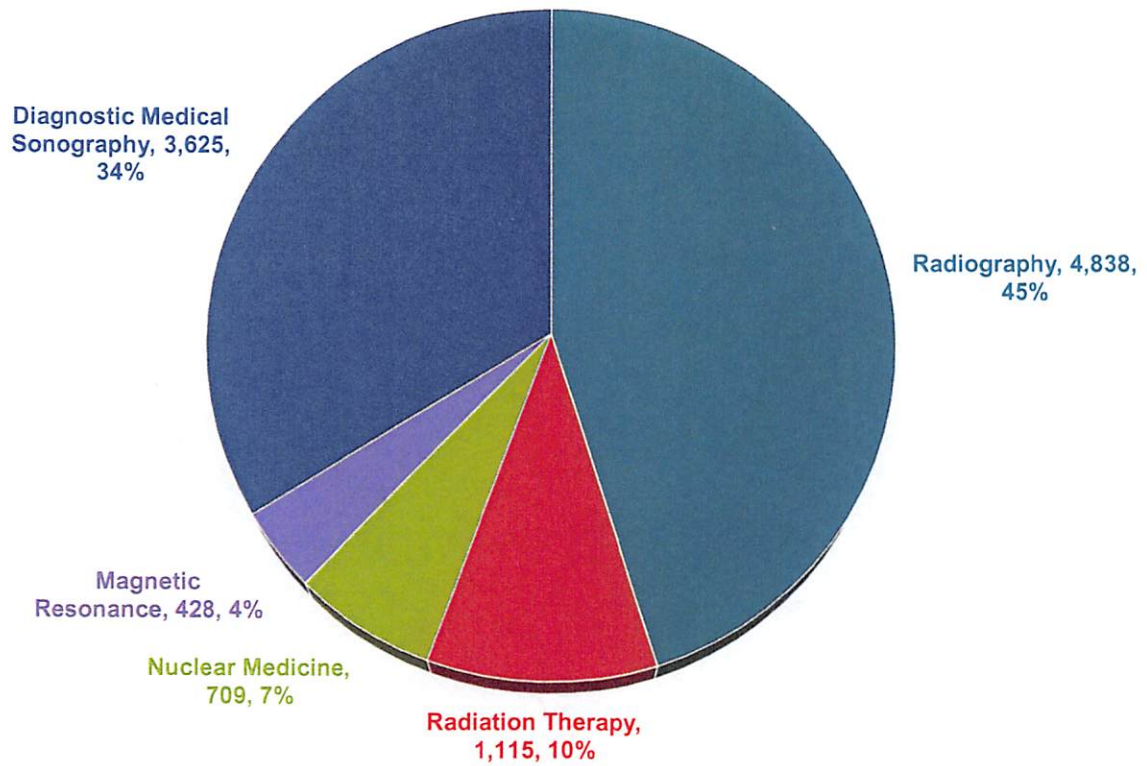


\*The total number of countries in which international applicants completed their education in medical radiation technology for new applications received in 2018 does not correspond to the total number of applications reviewed, or decisions issued, as the total number of applications reviewed includes applications from Canadian applicants.

## Membership Profile

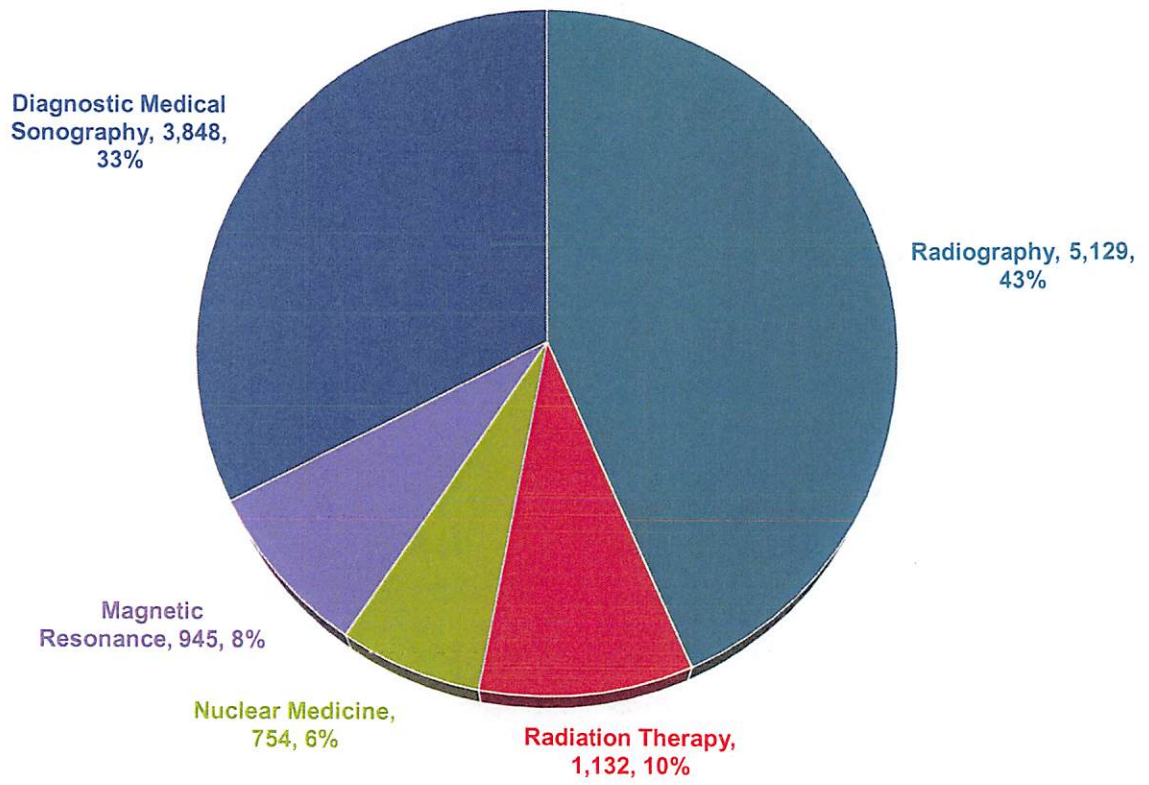
	2018	2017	2016
<b>Active</b>			
<b>Specialty</b>			
Nuclear Medicine	709	722	723
Radiography	4,838	4,814	4,777
Radiation Therapy	1,115	1,084	1,058
Magnetic Resonance	428	414	417
Diagnostic Medical Sonography	3,625	0	0
<b>Employment Specific</b>			
Nuclear Medicine	5	7	7
<b>Total Active</b>	<b>10,720</b>	<b>7,041</b>	<b>6,982</b>
<b>Resigned</b>			
<b>Specialty</b>			
Nuclear Medicine	46	34	32
Radiography	329	269	248
Radiation Therapy	84	80	75
Magnetic Resonance	19	28	14
Diagnostic Medical Sonography	2	0	0
<b>Employment Specific</b>			
Nuclear Medicine	2	0	0
<b>Total Resigned</b>	<b>482</b>	<b>421</b>	<b>369</b>
<b>Suspended (for failure to pay fees)</b>			
<b>Specialty</b>			
Nuclear Medicine	1	0	1
Radiography	8	4	3
Radiation Therapy	1	0	1
Magnetic Resonance	1	0	0
Diagnostic Medical Sonography	0	0	0
<b>Total Suspended</b>	<b>11</b>	<b>4</b>	<b>5</b>
<b>Total Active, Resigned and Suspended</b>	<b>11,213</b>	<b>7,466</b>	<b>7,356</b>

Active members on December 31, 2018 by primary specialty



Total: 10,720

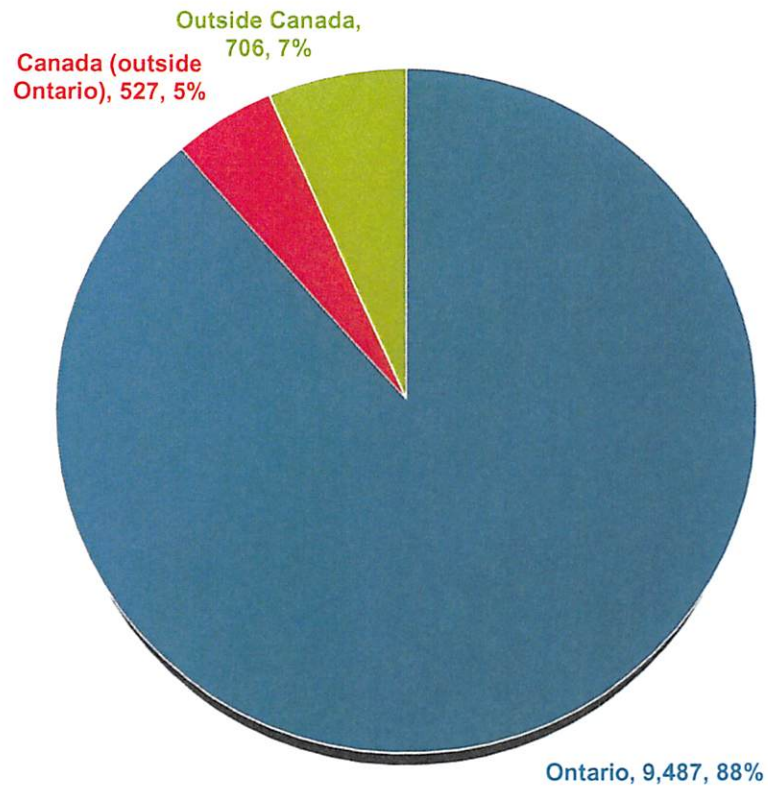
Active specialty certificates on December 31, 2018



Total: 11,808

\*A member may hold one or more specialty certificates.

Active members on December 31, 2018 by location of initial education in medical radiation technology



## **Financial Report**

Financial Report to come.





March 29, 2019

Mr. Patrick Dicerni  
Assistant Deputy Minister  
Strategic Policy and Planning Division  
Ministry of Health and Long-Term Care  
10, 438 University Avenue  
Toronto, ON M5G 2K8

CIRCULATED AT MEETING

OF MAR 29 2019

COUNCIL  
ITEM# 6avi

Dear Mr. Dicerni:

**Re: Regulation of Diagnostic Medical Sonographers with CMRTO**

The College of Medical Radiation Technologists of Ontario (CMRTO) is pleased to report that we have successfully completed the regulation of diagnostic medical sonography as a fifth specialty of medical radiation technology and have registered over 4,000 diagnostic medical sonographers. The information enclosed with this letter is CMRTO's final report to the Ministry of Health and Long-Term Care regarding the successful completion of the regulation of diagnostic medical sonographers.

As you know, on August 2, 2017, CMRTO President, Wendy Rabbie, received a letter from Denise Cole, Assistant Deputy Minister, Health Workforce Planning and Regulatory Affairs Division directing the CMRTO to regulate diagnostic medical sonographers under the CMRTO, and to begin the registration of diagnostic medical sonographers by 2018. On January 1, 2018, the CMRTO commenced regulating diagnostic medical sonography as a fifth specialty. Effective January 1, 2019, registration with CMRTO is mandatory in order for an individual to practise as a diagnostic medical sonographer in Ontario and to apply soundwaves for diagnostic ultrasound.

Since receiving direction to regulate diagnostic medical sonographers, CMRTO Council, Committees and staff have been hard at work to ensure the smooth regulation of diagnostic medical sonographers as a fifth specialty. This work has included, among other things: amending the CMRTO Standards of Practice and Code of Ethics, posting information to the CMRTO website, communicating with stakeholders and prospective members, approving new policies and amending existing policies, by-law amendments, the publication of new practice guidelines, facilitating the appointment of diagnostic medical sonographers to statutory committees, and hiring and training new staff. Please find enclosed an overview of the work that has been done between August 2, 2017 and January 7, 2019.

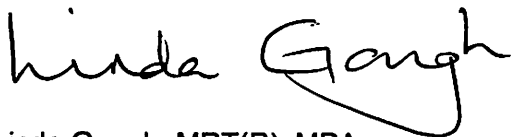
Although much work has been done, the regulation of diagnostic medical sonography under the *Medical Radiation Technology Act, 1991* (MRT Act) as a new specialty is just the first step with

respect to the regulation of diagnostic medical sonography in Ontario in the public interest. In order to fully achieve the goal of regulating diagnostic medical sonography in Ontario in the public interest, it is essential that the CMRTO become the "College of Medical Radiation and Imaging Technologists of Ontario" and that the governing legislation prohibit a person who is not a member of the College from using the title "diagnostic medical sonographer" and/or holding themselves out as a person qualified to practise in Ontario as a diagnostic medical sonographer. The legislation that repeals and replaces the MRT Act – the *Medical Radiation and Imaging Technology Act* – received Royal Assent in December 2017 and is still awaiting proclamation.

CMRTO respectfully requests that the *Medical Radiation and Imaging Technology Act, 2017* (MRIT Act) be proclaimed in force as soon as possible in order to improve transparency to the public by changing the CMRTO's name to the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO), and the name of the profession to medical radiation and imaging technology to better reflect all five specialties providing medical radiation and imaging services to patients in Ontario. The CMRTO has been preparing for the name change and improved transparency to the public by building a new website that will be easier for the public to navigate and find the essential public protection tools available to them through CMRITO.

I look forward to continuing to work with you and your team in 2019 with respect to this important public protection initiative.

Sincerely,



Linda Gough, MRT(R), MPA  
Registrar & CEO

*Encls. CMRTO Dashboard Q4: January 1 – December 31, 2018  
CMRTO Cost of Sonography Regulation (2017 – 2018)  
CMRTO Communications, Stakeholder List  
CMRTO Communications to members and sonography applicants, Eblast Statistics  
CMRTO Webinar Statistics  
CMRTO Communications and activity regarding the regulation of diagnostic medical sonographers, August 1, 2017 to January 4, 2019 and attachments*

*CC: Ms. Alison Henry, Director, Health Workforce Regulatory Oversight Branch, Strategic Policy and Planning Division, Ministry of Health and Long-Term Care*

*Mr. Thomas Custers, Manager (Acting), Regulatory Oversight and Performance Unit, Health Workforce Regulatory Oversight Branch, Strategic Policy and Planning Division, Ministry of Health and Long-Term Care*

March 29, 2019



College of  
Medical Radiation  
Technologists of  
Ontario

Ordre des  
technologues en  
radiation médicale  
de l'Ontario

The Honourable Christine Elliot, MPP  
Deputy Premier and Minister of Health and Long-Term Care  
10<sup>th</sup> Floor, Hepburn Block  
80 Grosvenor Street  
Toronto, ON M7A 2C4

CIRCULATED AT MEETING

OF MAR 29 2019

COUNCIL  
ITEM# ..... 6diii.....

Dear Minister:

**Re: Support for modernizing the governance of health regulatory colleges in Ontario and request for proclamation of the *Medical Radiation and Imaging Technology Act, 2017***

The Council of the College of Medical Radiation Technologists of Ontario (CMRTO) has reviewed the College of Nurses of Ontario's submission to you dated January 8, 2019, regarding its vision for modernizing regulatory governance in Ontario. We are writing to you to express the CMRTO's support for Vision 2020, and to inform you of steps that CMRTO has already taken to modernize its governance framework within its existing legislation.

CMRTO believes that the proposed reforms are based on solid evidence, and will improve the governance of health regulatory colleges, enhance the protection of the public, and inspire greater public trust in the regulation of health professionals. In fact, CMRTO has already taken steps to reduce the size of our Council, and to reduce the proportion of professional members in order that our Council is comprised of an equal number of public and professional members.

We would also welcome the legislative change necessary for health regulatory colleges to implement more of the reforms outlined in CNO's submission. In particular, we support:

- Reducing the size of College Councils
- Increasing the proportion of public members on College Councils to 50%
- Appointing (not electing) professional members of College Councils on the basis of competencies
- Eliminating the requirement for an Executive Committee
- Removing the obligation for Council members to form part of the panels of statutory committees
- Remunerating all Councillors equally

In 2017, CMRTO received direction from the Ministry of Health and Long-Term Care to regulate diagnostic medical sonographers to ensure that patients undergoing diagnostic ultrasound examinations in Ontario are protected from unqualified practitioners – the last news release is attached for your review. CMRTO now regulates five specialties of medical radiation and imaging technology, and almost 11,000 medical radiation and imaging technologists.

In bringing in a new specialty and almost 4,000 diagnostic medical sonographers, and in preparation for the proclamation of the *Medical Radiation and Imaging Technology Act, 2017*, the CMRTO Council reviewed its governance framework and By-laws. Council also considered best practice in the governance of health regulatory colleges and how to improve the protection of the public. The By-law achieves this through:

- Reducing the number of elected professional Councillors from 8 to 7, the minimum number in the legislation, while adding a specialty
- Having an equal number of public and professional members on Council – 7 and 7
- Changing the elected Faculty Councillor to a competency based appointment for the Academic Councillor

CMRTO was able to achieve these changes to its Council composition within its existing legislation as there exists a range in the number of professional and public Councillors, and these changes are currently being implemented.

We note that the CMRTO has always remunerated its professional Councillors at the same rate as its public Councillors.

CMRTO respectfully requests that the *Medical Radiation and Imaging Technology Act, 2017*, be proclaimed in force as soon as possible in order to improve transparency to the public by changing the CMRTO's name to the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO), and the name of the profession to medical radiation and imaging technology to better reflect all five specialties providing medical radiation and imaging services to patients in Ontario. The MRIT Act received Royal Assent in December 2017 and we have been preparing for the name change and improved transparency to the public by building a new website that will be easier for the public to navigate and find the essential public protection tools available to them through CMRITO.

Please do not hesitate to contact our Registrar & CEO if you have any questions. Our College would welcome the opportunity to be consulted as you move forward with these reforms and looks forward to the proclamation of the MRIT Act in the very near future.

Yours sincerely

Wendy Rabbie,  
President

Linda Gough,  
Registrar & CEO

Copy: Helen Angus, Deputy Minister of Health and Long-Term Care  
Patrick Dicerni, Assistant Deputy Minister of Strategic Policy and Planning  
Allison Henry, Director of Health Workforce Regulatory Oversight



## Update on CMRTO's Regulation of Diagnostic Medical Sonographers

Toronto, January 3, 2019 – The College of Medical Radiation Technologists of Ontario (CMRTO) is pleased to announce that it now has the authority to ensure that patients undergoing diagnostic ultrasound examinations in Ontario are protected from unqualified practitioners. Effective January 1, 2019, diagnostic medical sonographers in Ontario must be registered with the CMRTO to be legally authorized to practise the profession and apply soundwaves for diagnostic ultrasound to patients.

"We are delighted that the Ontario government has extended the public protection framework by regulating diagnostic medical sonographers under the Regulated Health Professions Act," says Linda Gough, CMRTO Registrar & CEO, "making the regulatory framework consistent for all five specialties of medical radiation technology including radiography, radiation therapy, nuclear medicine, magnetic resonance and now, diagnostic medical sonography."

Over the past year, CMRTO staff, Council and committee members worked hard to ensure the smooth and seamless integration of diagnostic medical sonographers. As of January 2, 2019, more than 3,867 certificates in diagnostic medical sonography have been issued. Those members' names and practice information are now available on the Public Register on [www.cmrto.org](http://www.cmrto.org). Any member of the public as well as employers of diagnostic medical sonographers can easily check the registration status of their diagnostic medical sonographer. A further 212 individuals have been approved for registration, while approximately 400 applications in the specialty of diagnostic medical sonography are currently being processed. As a result, CMRTO now regulates 10,720 medical radiation technologists and diagnostic medical sonographers by making sure that they are qualified to practice, maintaining their competence, and practicing safely, effectively and ethically.

The Medical Radiation and Imaging Technology Act received Royal Assent in December 2017 and is now awaiting a proclamation date. Once it comes into force, this Act will improve transparency to the public by changing the CMRTO's name to the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO), and the name of the profession to medical radiation and imaging technology, to better reflect all five specialties providing medical radiation and imaging services to patients in Ontario.

For further information, please contact [communications@cmrto.org](mailto:communications@cmrto.org), or call 416.975.4353 or 1.800.563.5847.



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CIRCULATED AT MEETING

OF MAR 29 2019



Alliance of Medical Radiation and Imaging  
Technologists Regulators of Canada

Alliance des organismes de réglementation  
des technologues en radiation et en imagerie  
médicale du Canada

COUNCIL

ITEM# .....TCV.....

**NEWS RELEASE**

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FOR IMMEDIATE RELEASE – March 20, 2019: Toronto, Ontario

## **NEW NAME, NEW STATEMENT OF PURPOSE, AND NEW OFFICERS**

The Alliance has exciting news about our name. We now are the **Alliance of Medical Radiation and Imaging Technologists Regulators of Canada**, officially approved by the Director of Corporations Canada on March 15, 2019. We have added “Imaging” to Medical Radiation Technologists to recognize that diagnostic medical sonographers are now being regulated, or are close to being regulated, with medical radiation technologists in a number of jurisdictions in Canada.

Our purpose statement has also been revised as follows:

**“To bring together organizations that have legislative authority of a province or territory of Canada for regulating the practice of medical radiation and imaging technologists.”**

AMRITRC also has the pleasure to announce the election of its officers for the 2019-2020 year:

**Linda Gough**, President (Registrar & CEO, College of Medical Radiation Technologists of Ontario)

**Pree Tyagi**, Vice-President (Registrar & CEO, Alberta College of Medical Diagnostic and Therapeutic Technologists)

**Julie Avery**, Secretary-Treasurer (Executive Director, Nova Scotia Association of Medical Radiation Technologists)

Linda Gough returns as President for a fourth term, along with Julie Avery, who has been re-elected for a third term as Secretary-Treasurer. New to an officer position is Pree Tyagi, elected as Vice-President. Alain Crompt, the Alliance's first President, who had been serving as Vice-President, announced his retirement from his role as Director General, Ordre des technologues en imagerie médicale en radio-oncologie et en électrophysiologie médicale du Québec, effective June 1, 2019. It is with sincere gratitude that we thank Alain for his contributions to the Alliance over the past eight years; it simply won't be the same without him, but we wish him all the best.

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AMRITRC's members are regulators of medical radiation and imaging technologists across Canada. These regulators are responsible for ensuring safe, quality, professional, ethical and competent imaging and radiation therapy services in the jurisdictions that regulate medical radiation technologists (MRTs) and diagnostic medical sonographers (DMSs): Alberta, New Brunswick, Nova Scotia, Ontario, Quebec, and Saskatchewan. All six current provincial MRT and DMS regulators are members of AMRITRC.

Incorporated on September 28, 2011, AMRITRC a national not-for-profit organization, supported by an Executive Coordinator and an administrative team. Please see the 2018 Annual Activity Summary for more information about AMRITRC.

To find out more about AMRITRC or its members, please go to [www.amritrc.ca](http://www.amritrc.ca).

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For more information, please contact:

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