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## Spring 2010 Workshops on Changes to the MRT Scope of Practice and Authorized Acts

As reported in the Fall 2009 edition of *Insights*, the amendments to the *Medical Radiation Technology (MRT) Act* include a new Scope of Practice Statement which better reflects the current practice of medical radiation technologists (MRTs) in Ontario and additional Controlled Acts authorized to MRTs.

In response to this significant change, the College will need to revise both the CMRTO Essential Competencies and Comprehensive Guidelines. This project will begin later this year and will involve stakeholders and members through a consultative process.

In addition to amending the MRT Act, the *Regulated Health Professions Statute Law Amendment Act, 2009*, amends a number of others Acts in Ontario including the *Regulated Health Professions Act, 1991* (RHPA) and the *Healing Arts Radiation Protection Act, 1980* (HARP Act). Many of the amendments do not come into force until proclamation. The College will keep members informed of the date these changes come into force once the government has announced the date of proclamation.



The College's Registrar, Linda Gough, will be presenting a number of workshops on changes to the MRT scope of practice and authorized acts for College members and students in MRT programs at locations around the province:

<b>Barrie:</b>	Thursday, April 8, 7-9 pm
<b>Hamilton:</b>	Wednesday, April 21, 7-9 pm
<b>London:</b>	Thursday, May 6, 7-9 pm
<b>Oshawa:</b>	Thursday, April 15, 7-9 pm
<b>Ottawa:</b>	Thursday, May 13, 7-9 pm
<b>Sudbury:</b>	Monday, May 17, 7-9 pm (this session will also be a live webcast)
<b>Timmins:</b>	Monday, April 26, 7-9 pm
<b>Thunder Bay:</b>	Monday, May 3, 7-9 pm
<b>Toronto:</b>	Monday, April 19, 7-9 pm
<b>Toronto:</b>	Thursday, April 22, 7-9 pm
<b>Windsor:</b>	Wednesday, May 5, 7-9 pm
<b>Webinar:</b>	Monday, May 17, 7-9 pm

A letter with the locations of the workshops has been sent to all members and is available on the CMRTO website.

## Professional Liability Insurance

Professional liability insurance is an important part of practice for health care professionals. In fact, the majority of regulated health professions in Ontario are required to carry such insurance.

Although not yet in force, a new requirement set out in the Health Professions Procedural Code of the RHPA (section 13.1) will shortly oblige MRTs to carry professional liability insurance.

In summary, Section 13.1 says that "No member of a College in Ontario shall engage in the practice of the health profession unless he or she is personally insured against professional liability under a professional liability insurance policy or belongs to a specified association that provides the member with personal protection against professional liability."

Section 13.1 also requires a member to comply with the requirements for professional liability insurance specified by the College in either regulation or by-law. It is anticipated that proposed by-laws related to this section of the Code will be circulated to members this summer.

Once the section comes into force, a member failing to carry professional liability insurance can be found by the Discipline Committee to have committed an act of professional misconduct.

## CIHI Medical Radiation Technology Database Report

Over the past few years, the College has been working on initiatives with both the Canadian Institute for Health Information (CIHI) and the Ministry of Health and Long-Term Care of Ontario to support health human resource planning.

Early this year CIHI released the 2008 Medical Radiation Technology (MRT) Database report. The MRT database provides information on the supply of MRTs in both regulated and non-regulated jurisdictions in provinces across Canada. It also provides details on the demographic characteristics, education, certification, employment and practice characteristics of MRTs for the year 2008.

Thanks to the excellent response from our members (more than 90%), this comprehensive report has been developed and released.

When the College first began collecting this information in 2008, members provided it to us on a voluntary basis. However, as a result of changes to the *Regulated Health Professions Act (RHPA)* made by the *Health System Improvements Act, 2007*, it is now a requirement of members to provide this information to the College.

To access the CIHI Medical Radiation Technology Database Report, please visit [www.cihi.ca](http://www.cihi.ca).

## Professional Practice: Providing MRT services for patients with disabilities

MRTs have a long tradition of professional patient-focused care and have always believed that all patients are entitled to the same high standard of care, regardless of their abilities or disabilities.

Many of you may currently be involved in discussions and training at your workplace regarding the Accessibility Standards for Customer Service under the

*Accessibility for Ontarians with Disabilities Act, 2005* (AODA). Public sector organizations including hospitals are required to comply with these standards, aimed at removing and preventing barriers for people with disabilities.

The standards under the AODA apply to public sector organizations (as designated in the regulations) and will eventually be mandatory in the private sector as well. MRTs also have standards and guidelines that relate to patient care generally which apply when providing service to a patient with a disability.

The CMRTO Standards of Practice set out the expectations of professional practice for MRTs. Essential Competency five deals specifically with an MRT's relationship with his or her patients and states as follows;

"Medical radiation technology is a health care profession that has patient care as its main concern. M.R.T.s must be able to accept the patient's autonomy and the right of the patient, or the patient's substitute decision maker, to refuse service. M.R.T.s must treat all patients with dignity and respect. M.R.T.s must maintain clear and appropriate professional boundaries in the M.R.T.-patient relationship. M.R.T.s must have the knowledge, skills and judgment to avoid placing patients at unnecessary risk of harm, pain or distress. M.R.T.s must be able to provide appropriate responses to the patient's inquiries about procedures and related issues. M.R.T.s must understand how, and act, to protect the confidentiality of all professionally acquired information about patients."

Some of the indicators of this competency that may relate to providing health care to patients with disabilities include:

MRTs must:

- provide clear and understandable information to the patient, or the patient's substitute decision maker, prior to, during and after treatment, using an interpreter, if necessary
- give the patient, or the patient's substitute decision maker, an opportunity to ask questions
- provide the patient, or the patient's substitute decision maker, with answers to his or her questions within the scope of the MRT's responsibility

- make modifications to procedures based on the patient's physical, medical and/or emotional status/needs
- explain to the patient when and where the MRT might touch him/her and why

The CMRTO Code of Ethics also speaks to an MRT's responsibility to his or her patients and sets out ethical principles and indicators:

MRTs act in the best interest of their patients by:

- respecting the dignity, privacy and autonomy of their patients
- treating all patients equitably, regardless of race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, marital status, same sex partnership status, family status, disability or type of illness
- providing individualized, comprehensive and safe treatment during examinations or therapy sessions, taking into account the patient's particular physical and emotional needs, values, and cultural background



And the CMRTO's touching and communication principles help MRTs achieve the high standards of integrity and effectiveness that should be part of MRTs' pattern of care for patients:

#### *Communication principles for Medical Radiation Technologists*

- Talk before you touch
- Treat each patient as an individual
- Never assume
- Reserve judgement
- Speak directly to the patient
- Maintain confidentiality
- Create a safe environment

#### *Touching principles for Medical Radiation Technologists*

- Assume nothing
- Maintain the patient's dignity
- Show respect for the patient
- Respect the patient's space
- Do not hurt the patient
- Touch only where necessary
- Respect cultural diversity
- Get the patient's consent
- Remember patients can change their mind

Members may also wish to review the following CMRTO's publications, which are available from the College's website:

- What You Must Know About... Health Care Consent Act
- What You Must Know About... Sexual Abuse

For more information about the AODA please visit [http://www.e-laws.gov.on.ca/html/statutes/english/elaws\\_statutes\\_05a11\\_e.htm](http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_05a11_e.htm)

The Ministry of Community and Social Services website also has information on the AODA and information to help individuals provide services for people with

disabilities – please visit <http://www.mcass.gov.on.ca/en/mcass/index.aspx>.

## Cost of Mandated Government Initiatives

We have commented a number of times, in Insights and the annual report, about the heavy human and financial burden placed on the College in responding to requests by the provincial government and agencies such as the Health Professions Regulatory Advisory Council (HPRAC) for information or input with policy and legislation development affecting the profession.

Often the need for our engagement on these matters comes under very tight time constraints and requires outside support and consultation with our elected and appointed Council and you as College members yourselves.

For example, over the past year we have been addressing the implementation of the *Health System Improvements Act* (which required us to put the public register online, amend our by-laws with respect to the register, change the Complaints Committee to the Inquiries, Complaints and Reports Committee, change the College's processes related to complaints, inquiries and reports, and revise and republish the majority of the College's publications *What you must know about ...*). We have also been working with HPRAC by commenting on the Critical Links report which recognized the role of MRTs within the health care system and the Ontario Ministry of Health and Long-Term Care on sections of Bill 179 - An Act to amend various Acts, related to regulated health professions and certain other Acts which proposed changes to MRTs' current scope of practice and authorized acts. At the same time, we had to prepare for an extensive audit required by the Fairness Commissioner appointed under the *Fair Access to Regulated Professions Act* to confirm that our registration practices are "fair, objective, transparent and impartial". In addition, we finished the second year of collecting health human resource data from members and provided data to the MOHLTC's Health Professions Database and the Canadian Institute for Health Information.

The financial cost of this work in 2009 was over \$280,000. The implementation of the government initiative, the *Health System Improvements Act*, cost the College \$320,000 over the two year implementation period. The demands of these and other requirements have been such that we have fallen behind on some strategic initiatives from Council for other activities due to limited resources (fiscal and human), although in response to feedback from College members as indicated on the online services survey results, we did implement credit card payments and online member renewal.

Nevertheless, it is critical for the College to provide detailed input into legislative initiatives because of their long-term impact on our profession and the public and for us to continue to meet our legislative obligations in a professional manner.

The financial cost of these and other demands will be considered during Council's annual review of College fees at its next meeting in the spring.

### Call for Peer Assessors for the Quality Assurance Program

The College is currently seeking MRTs from all specialties who are interested in conducting peer assessments as part of the Quality Assurance Program.

Peer assessors from a variety of practice settings and geographical areas of the province are needed. Peer assessors will be trained by the College to conduct (face-to-face and by telephone) practice assessments of members as required under the College's Quality Assurance Program.

Individuals selected as peer assessors will be compensated for each assessment performed on the basis of a competitively established fee. They will also be reimbursed for travel expenses. It is anticipated that each assessor will conduct 2-6 assessments per year. Assessor training will commence in the fall of 2010.

Qualified candidates will:

- understand health care regulation in Ontario and protection of the public interest
- be a member in good standing of the College
- be currently employed as an MRT with five years experience working in the profession in Ontario
- be willing to undergo training in the process/tools and undergo an assessment during pilot testing
- demonstrate excellent communication skills (written and verbal), competence in practice, and an ability to evaluate others
- submit three references to demonstrate recognition by peers

If you are interested in applying, please submit your resume to the College by April 16, 2010 to the attention of Lori Boyd, Director of Policy.

### Suspended Members

The following are the people whose certificates of registration were suspended between November 1, 2009 and February 28, 2010, for failure to pay their fees in accordance with section 24 of the Health Professions Procedural Code.

A person whose certificate of registration has been suspended is not a member of the College unless and until the suspension is removed.

<b>13301</b>	<b>Eunice Bueno</b>
<b>12982</b>	<b>Shobha Lee</b>
<b>13511</b>	<b>Sonal Mistry</b>
<b>11102</b>	<b>Gregory Jason Perkins</b>
<b>13472</b>	<b>Edward Rigaux</b>
<b>12771</b>	<b>Francois Theriault</b>
<b>13385</b>	<b>Kamaljit K. Thind</b>

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The mission of the CMRTO is to serve and protect the people of Ontario through self-regulation of the profession.

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