



**MANITOBA ASSOCIATION OF
REGISTERED RESPIRATORY THERAPISTS**

ANNUAL REPORT 2022

CONTENTS

04 Greetings

05 Mission and Vision
Strategic Priorities

06 Registrar's Report
Internal Operations

08 External Operations

11 Demographics

18 Committee Reports

19 Governance
Governance Committee

20 Licensure
Registration & Audit Committee

22 Public Safety
Complaints Committee
Investigation Committee
Discipline Committee

23 Financial Statements



MANITOBA ASSOCIATION OF REGISTERED RESPIRATORY THERAPISTS

“EXEMPLARY DELIVERY OF RESPIRATORY CARE IN MANITOBA”

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GREETINGS!

An Annual Report is an opportunity to reflect on the past year and provide you with a summary of our activities and accomplishments. It is our pleasure to present to you the MARRT Annual Report for the year 2022. As we look back on the past year, we are proud of the progress and accomplishments we have made to ensure the safety and quality of healthcare services for our community and recognize the ongoing work that lies ahead.

The MARRT Strategic Plan continued to act as the compass for the MARRT, guiding us to achieve the intended goals of the organization. During the year, we continued to work diligently to oversee compliance with healthcare regulations, standards, and guidelines and we continued to collaborate with our partners in healthcare to promote and advocate for better health outcomes for the public. Collaboration with our respiratory therapy (RT) partners across Canada has remained strong and the jurisdictions push each other to practice to the potential that best supports the needs of the community.

Our efforts have resulted in a number of positive outcomes including the revision of policies and procedures providing greater clarity for Registered Respiratory Therapists (RRTs) and addressing improvements that impact quality assurance including taking steps to recognize the unique needs of Manitobans. We are committed to the journey of learning and reconciliation with our Indigenous Peoples and acknowledge this as an ongoing process that will be approached with open minds and hearts. The MARRT is reminded of this commitment when we read our land acknowledgment as we start all meetings and gatherings.

The MARRT has been preparing for the transition to the Regulated Health Professions Act (RHPA) for many years. We are pleased that in September 2022, we were advised that we are now in the queue for transition to fall under the RHPA.

As we emerged from the need to refocus our energies on the pandemic, we face continued challenges and embraced this as an opportunity for learning and growth. We remain committed to our mission of ensuring the safety, quality, and efficacy of healthcare services, and we are confident that our strategic initiatives will enable us to achieve our goals and will continue to invest in the MARRT to ensure that we remain at the forefront of healthcare regulation. Moving forward, we are confident that our efforts will continue to make a positive impact on the healthcare landscape in Manitoba.

Thank you for your commitment to the profession of respiratory therapy and your continued support and trust in the MARRT.

Cory Campbell, RRT, FCSRT, B.A.
MARRT President

Deborah Handziuk, MEd, EdPsych
MARRT Executive Director Registrar

MISSION & VISION

MISSION STATEMENT

“The Manitoba Association of Registered Respiratory Therapists regulates the practice and continuing competency of respiratory therapists to ensure the safe delivery of care.”

VISION STATEMENT

“Exemplary delivery of respiratory care in Manitoba”

MARRT is authorized by The Registered Respiratory Therapists Act C.C.S.M. c. R115. The role of MARRT is to self-regulate the practice of Respiratory Therapy and govern the members of MARRT to protect the public.

MARRT’s legal obligation is to protect the public through the regulation of licensed and registered respiratory therapists. This includes setting standards of practice, developing members’ continuing education competency requirements and addressing complaints involving MARRT members.

The business of MARRT is conducted in accordance with the law and member approved bylaws. The MARRT bylaws can be viewed under the “Our Profession” tab. The Board of Directors consists of Registered Respiratory Therapists, as elected by MARRT members, and two public members, as appointed by the Government of Manitoba.

MARRT STRATEGIC PRIORITIES

2020-2023

LEGISLATION

- Separation of Association - **Complete**
- Inquire with Manitoba Government to adopt RHPA Complaint Process - **Complete**
- Development of new Code of Ethics & Standards of Practice - **In progress**
- RHPA- Complete public consultation & submit final draft of Reserved Acts to Manitoba Government - **In progress**
- Inquire- Name Change - **Complete**
- Implement operational and governance aspects of the RHPA related to regulations & CCP - **In progress**

QUALITY ASSURANCE PROGRAM

- E-Volve CCP Program Development - **In progress**
- Governance - **Ongoing**
- Communication & Education - **Ongoing**
- Program Implementation - **Ongoing**
- Maintenance & Monitoring of Program - **Not yet started**

REGISTRAR'S REPORT

As 2022 progressed, despite the ongoing pandemic, restrictions were slowly lifted and there were some shifts to pre-pandemic practices. Meetings remained virtual and it was only midway through the year that we saw the very slow and cautious return of the occasional in-person meeting and limited travel. Regardless of this, the work of the MARRT continued and adapted as needed throughout the year. Maintaining the trust of the public and ensuring practices that were safe remained at the forefront of all decisions. Amidst all the stress and tragic outcomes resulting from the COVID-19 pandemic were also opportunities to revisit practices, policies, and requirements and at times, we were pushed to view situations from a different perspective. With the protection of the public as our priority and remaining open to continuous improvement, we approached our partnerships with MARRT's regulatory counterparts and stakeholders, Shared Health, and the Government of Manitoba in a harmonious and collaborative manner.

I. INTERNAL OPERATIONS

a. Continuing Competency Program (CCP):

At the core of continuing competency is the need to ensure that respiratory therapists are practicing in a manner that demonstrates the safe and competent delivery of services in all required areas for the profession of respiratory therapy. The MARRT made the decision to delay implementation of the new CCP process originally planned for implementation in 2023, to a launch date of January 2024. Upon full review of the process previously developed, a more streamlined approach was created that still focuses on achieving the intended goal of supporting the self-directed learning process to ensure currency and relevance in the daily practice of respiratory therapy and to in turn, provide quality assurance. The approach will include the identification of a respiratory therapist quality or area of practice that is directly related to the core and clinical competencies identified in the National Competency Framework. The respiratory therapist will develop a learning statement with goals and related objectives necessary to achieve the desired outcomes. This plan will be required at the beginning of each calendar year. Once the goals have been achieved for that particular year, the respiratory therapist will be required to self-reflect and explain how these objectives improved their delivery of safe and effective respiratory care.

All aspects of the CCP plan will be recorded in an electronic log to be located in the registrant's MARRT profile. This will support consistency of the information being recorded, create a central location for the information, and it will be available for review by the MARRT, should it be required. To support the process, a brief presentation of the plan will be made at the AGM in May 2023. Additional presentations will be made in the following months to assist respiratory therapists in fully understanding the process and the rationale for continuing competency. Using the SMART approach of specific, measurable, attainable, relevant and time bound the revised CCP approach to quality assurance will assist the MARRT in upholding the mandate of protection of the public.

b. Internationally Educated Healthcare Professional (IEHP):

During the 2022 year, the MARRT received several inquiries from Internationally Educated Health Professionals (IEHPs); however, none of them proceeded to the application stage. There was a total of 15 inquiries from IEHPs and each involved several email communications. The IEHP Access Hub, operating under grant funds within the University of Manitoba, serves as a centralized location to provide guidance to IEHPs seeking licensure for the following regulated health professions:

- Audiology
- Occupational Therapy
- Pharmacy
- Physiotherapy
- **Respiratory Therapy**
- Speech and Language Pathology

Collaborative efforts with the Access Hub have focused on increasing awareness of the profession of respiratory therapy, educational requirements, and the process to become licensed in Manitoba.

In addition, the MARRT presented to a group of IEHPs through Manitoba Start with the plan to continue these presentations. The MARRT will continue to review its processes, communication, and language used to ensure clarity and inclusion throughout while ensuring that all those licensed to practice respiratory therapy meet the practice standards of the Canadian health care system. Through its accountability to the Fair Registration Practices Office (FRPO), to ensure information is clearly conveyed, the MARRT has committed to revising the application manual for all those pursuing a respiratory therapy license in Manitoba.

c. Public Accountability:

The Criminal Record Check (CRC) and Vulnerable Sector Check (VSC) policy was approved by the BOD for the 2022 license year and following the license renewal period of that year, was revised to the L-11 Criminal Record & Abuse Registry Checks policy. The revisions more closely reflected all the checks registrants were required to submit for the 2022 – 2023 license renewal.

The 2022 – 2023 license renewal period closed at the end of January 2022. All respiratory therapists seeking a license effective February 1, 2022, were mandated to undergo this process. This substantially increased the workload for the license review process as all CRC and VSC's, Child Abuse, and Adult Abuse Registry Checks received had to be reviewed and uploaded to the Member's MARRT profile. The actual application and subsequent approval from the related organizations were at times, delayed due to the pandemic. In several cases, this impacted on the ability for registrants to receive their documents in a timely manner or at all. Recognizing that the MARRT made the decision to implement these requirements in the midst of a pandemic, requiring all registrants to provide completed checks by a specific date, the MARRT implemented accommodations that balanced the need to maintain the integrity of the process while also ensuring the availability of Registered Respiratory Therapists to apply their practice skills professionally and safely. Going forward this requirement will remain in place and registrants will be required to submit updated checks prior to the expiration of their existing checks. All respiratory therapists submitted checks that were clear with no negative histories.

d. Regulated Health Professions Act (RHPA):

In September 2022, the MARRT was notified that it is one of five health regulatory bodies next in the queue to transition to the RHPA. The government office responsible for the transition of the health regulatory colleges to the RHPA will complete the transition of the colleges currently in-progress prior to commencing work with the colleges identified in the next group of five.

The provincial unit responsible for the RHPA will advise the MARRT when the actual work will commence. In preparation for the transition, the MARRT revised the Terms of Reference for the Legislative Committee and began review of the Reserved Acts to be considered for application. During 2022, the College of Registered Psychiatric Nurses of Manitoba transitioned to the RHPA. The following colleges are currently under the RHPA:

- College of Audiologists and Speech Pathologists - 2014
- College of Physicians and Surgeons of Manitoba - 2018
- College of Registered Nurses of Manitoba - 2018
- College of Paramedics of Manitoba - 2018
- College of Registered Psychiatric Nurses of Manitoba - 2022

e. **University of Manitoba, Department of Respiratory Therapy**

In August 2022, the Respiratory Therapy program at the University of Manitoba saw its first increase in the number of seats since its inception. The program went from 16 to 20 seats per intake: an increase of four (4) seats per year. There were no changes to the physical space to accommodate the additional four students; however, increased funding was provided for staff positions and equipment. The staffing increases equated to an additional two instructors, one assistant professor and one administrative assistant, all as permanent positions. The value of the additional four seats will be realized in a few years with potentially 20 graduates eligible to challenge the national examination and potentially be licensed to practice. The increased number of Registered Respiratory Therapists will continue to better support Manitobans, particularly as research identifies the impact of long COVID-19 that many are experiencing.

II. **EXTERNAL OPERATIONS**

a. **National Alliance of Respiratory Therapists Regulatory Bodies:**

The National Alliance is comprised of the Board and Council Presidents and the Executive Directors/ Registrars of the self-regulated respiratory therapy jurisdictions in Canada. With Canadian travel still in question, the spring Board meeting remained online.

Jurisdictional Registration Verification Form

To best support labour mobility and to reduce, if not eliminate barriers for registered respiratory therapists to move from one self-regulated jurisdiction to another, a working group re-visited the document used by all the self-regulated jurisdictions in Canada. The intent was to ensure that the language within the document used terminology accepted by all the participating jurisdictions and did not inadvertently result in oversights that could translate into licensure delays and in turn, the ability to provide safe care to those in need. This work carried beyond 2022 and final revisions will be presented for discussion and decision in 2023.

National Competency Framework Entry-to-Practice Review and Update

The National Competency Framework (NCF) is the framework for accredited educational respiratory therapy programs to adhere to, the national examination is developed based on blueprinting of the NCF, and employers expect that all respiratory therapists will be proficient in the entry-to-practice competencies as defined in the framework.

In July of 2022, the Board met in-person to commence work on the revisions to the NCF at the entry-to-practice level. The previous NCF was developed with a validity period of 2016 – 2021 with the intention of reviewing and updating it for 2022 to ensure currency and relevancy. With the onset of the pandemic in spring of 2020, this process was delayed, and the validity period of the framework was extended to 2023. At the July meeting all agreed that the Executive Directors/ Registrars would form the NCF Steering Committee. It was confirmed that:

- a. the entry-to-practice competencies would be reviewed and revised as required,
- b. following a request for proposal process, that CAMPROF Canada would be hired as the consulting firm to guide the review, consultation, and revision process, and
- c. the target date for completion would be the summer of 2023.

This consultation process included input from respiratory therapists across the country including those in Manitoba. The work will continue into 2023 and the updated National Competency Framework for Entry-to-Practice competencies will be released by the fall of 2023.

Simulation as a Form of Educational Assessment

As shared in the previous Annual Report, another NARTRB working group was formed to investigate the use of simulation in the education and achievement of clinical skills together with the need to further explore the impact that COVID-19 had on the education of respiratory therapy students and the use of simulation. The information gathered on the current use of simulation for teaching and evaluation of competencies across RT programs in Canada will help to inform the NARTRB in planning for the next National Competency Framework (NCF).

Standards of Practice and Code of Ethics

The other NARTRB working groups continued their efforts with a focus on a national Standards of Practice and Code of Ethics for respiratory therapists. The NARTRB reviewed the existing standards and the working group commenced work on identified revisions and new standards with the intent of presenting updates to the NARTRB board for discussion and decision in 2023.

Tele Practice (Virtual Practice)

Last year we reported on the increased use of tele practice, often referred to as virtual practice, primarily spurred on by the pandemic. During the 2022 - 2023 license renewal, registrants were asked to respond to two questions:

1. Are you currently engaging in virtual practice within your provincial borders? Yes/No
2. Are you currently engaging in virtual practice across provincial borders? Yes/No

Following are the results of these two questions.

<i>Response</i>	<i>Virtual Practice Question 1</i>	<i>Virtual Practice Question 2</i>
No	297	332
Yes	45	10
Total	334	334

The NARTRB agreed that in order to protect the public and to ensure clarity of processes, it was important that the respiratory therapist be registered by the jurisdiction that the client resides in. Overall, it was determined that the number of respiratory therapists delivering virtual care that cross into other self-regulated jurisdictions was not significant to warrant additional guidelines at this time.

b. Manitoba Alliance of Health Regulatory Colleges (MAHRC):

The work of the MAHRC continued in 2022 with the primary focus on pandemic related issues and concerns while at the same time, seeing the emergence of the other mandates and target items of the Alliance slowly making their way back to the table. The collaborative efforts of this group proved to be beneficial throughout the pandemic and allowed the regulated health professions to speak with one voice when communicating with Shared Health and the government of Manitoba. It was in 2022 that the MAHRC was able to reduce and eventually eliminate the regular COVID related meetings and re-focus on the other strategic priorities of the Manitoba Alliance.

During 2022, the leadership of the Alliance changed due to the retirement of the Chair and Co-Chair. Adam Chrobak, Executive Director Registrar, CMLTM, was elected Chair and I, as the Executive Director Registrar, MARRT, was elected Vice-Chair. This position allowed for participation in meetings and consultations with representatives from the government, the WRHA, and other organizations where examples of the profession of respiratory therapy were incorporated into the discussions. As the year progressed, an Executive Director for the MAHRC was hired, Sophia Ali, and her employment commenced in November 2022. By the end of the year the Alliance was able to open an independent bank account, by-laws were finalized with approval from the Alliance pending, and papers had been filed to apply for incorporation status.

E-learning Module

It is imperative that MARRT members are aware of and always function competently within the described legislation, by-laws, policies, Standards of Practice, and Code of Ethics of the MARRT. The MARRT uses annual e-learning modules with mandatory completion at license renewal time to ensure members remain abreast of the legislation and guidelines governing their practice. These modules are also used as a learning forum for areas that impact on the safety and quality of care of Manitobans.

The MARRT participated in the development of the jurisprudence elearning module Health Equity and Cultural Humility through the MAHRC working group. The intent of the module was to create awareness of one's own biases, whether conscious or unconscious, to introduce inclusive language, and to understand equity, to name a few, and how this understanding can shape the services delivered to Manitobans and the care they receive. The mandate of protecting the public includes that of emotional safety and the module also addressed safety from this perspective.

The module was developed and written by subject matter experts with input from the working group. The scenarios used in the module were developed by the various participating health professions with the intention of providing scenarios that reflect lived experiences in their work life. Completion of the module was required to obtain the Certificate of Completion.

These modules are intended to open the door to ongoing learning and awareness of one's own perspectives and to understand that of those who respiratory therapists provide health care to. Addressing equity, diversity and inclusion is not limited to one module and is instead, a process that allows for insights into oneself, and challenges your beliefs, perspectives, language, and approaches to others. The MARRT supports the ongoing process of learning, particularly as it relates to equity, diversity, and inclusion.

The plan for 2023 was to create a jurisprudence elearning module focusing on Indigenous history and Peoples. Knowing the development of this module will require immense collaboration and consultation with the Indigenous community, and that this will take time, and the delivery method needs further exploration, the MAHRC has not yet identified a completion date. The MARRT will decide independently on a module to be used for the next license renewal period.

Interprofessional Collaboration Working Group

The Interprofessional Collaboration working group was collaborating with the University of Manitoba to develop a survey for all health professionals to gather information on interprofessional collaboration. This has been a slow and detailed project that will continue into 2023 with the intent of having the survey ready to be administered at that time.

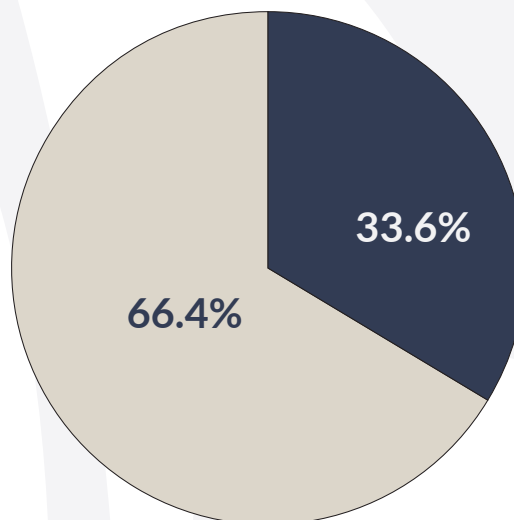
III. DEMOGRAPHICS OF REGISTERED RESPIRATORY THERAPISTS FOR 2022

There was a total of 336 Active Practicing Registered Respiratory Therapists in 2022. Following is data related to the practicing RRTs in Manitoba for the year 2022.

REGISTERED RESPIRATORY THERAPIST BY GENDER

It is important to note that the current Registered Respiratory Therapists Act, C.C.S.M. c.R115 requires that the regulatory body for the profession collect and report on the sex of the professional. The MARRT uses the term gender with the option to select Male or Female and recognizes that male and female do not reflect one's gender but instead, the sex of an individual. The MARRT plans to discuss with the provincial government, the rationale and purpose of collecting data on one's sex and acknowledges the importance of only gathering information that is required and is done so in a respectful and inclusive manner.

Gender	
Female	223
Male	113



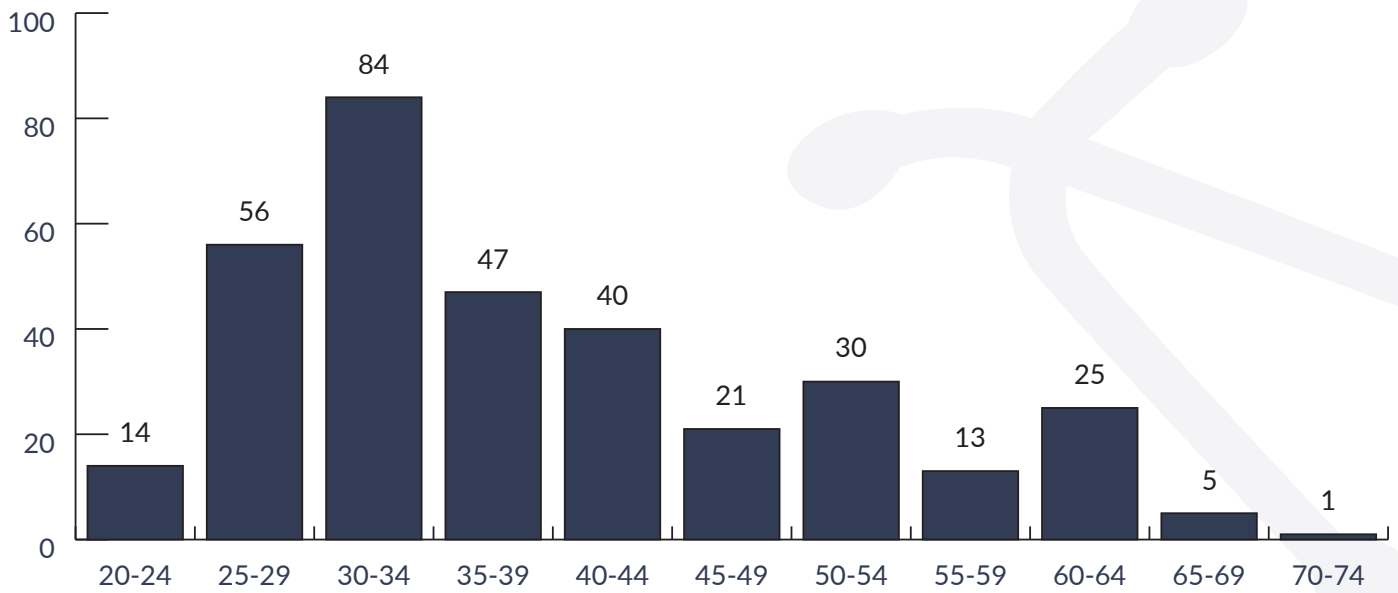
NUMBER OF NEW GRADUATES REGISTERED WITH THE MARRT

A total of 17 Active Practicing licenses with Graduate Respiratory Therapy conditions were issued in 2022. Of this group, 16 graduated from the University of Manitoba and one from Thompson Three Rivers University. Sixteen (16) wrote the CBRC credentialing examination and 15 passed the examination on their first sitting. Upon receipt of the examination results in August 2022, these 15 individuals had the conditions removed from their license.

INCOMING AND OUTGOING REGISTRATIONS

Each year, respiratory therapists choose to relocate to Manitoba or leave the province to practice elsewhere in Canada. During 2022, 12 RRTs sought a license in another province and of those 12, two (2) confirmed they would retain their MARRT license, and one (1) was uncertain. The MARRT registered eight (8) new respiratory therapists from other provinces. The License approval time for a respiratory therapist who is licensed in a Canadian self-regulated jurisdiction is very quick. Providing the applicant has all their documents in order, the approval can take as little as one day. These applications are deemed a priority knowing the applicant has met the requirements for licensure and there is a need for licensed respiratory therapists.

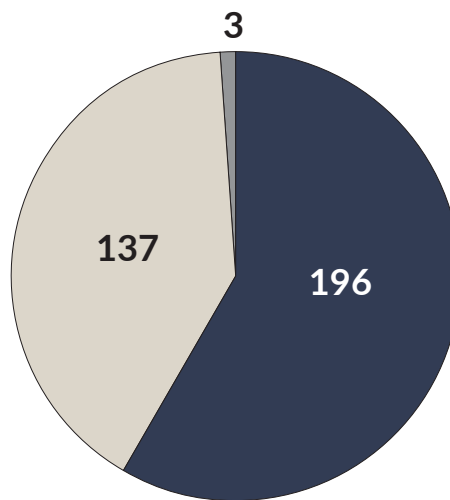
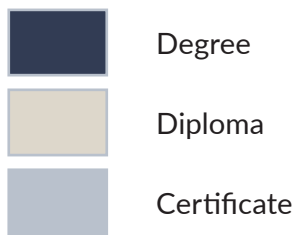
NUMBER OF REGISTERED RESPIRATORY THERAPISTS BY AGE RANGE



MEASURES OF CENTRAL TENDENCY FOR AGE OF REGISTERED RESPIRATORY THERAPISTS

Measure of Central Tendency	Age
Mean	39.4
Median	36
Mode	29

RT CREDENTIALS



EDUCATIONAL INSTITUTION

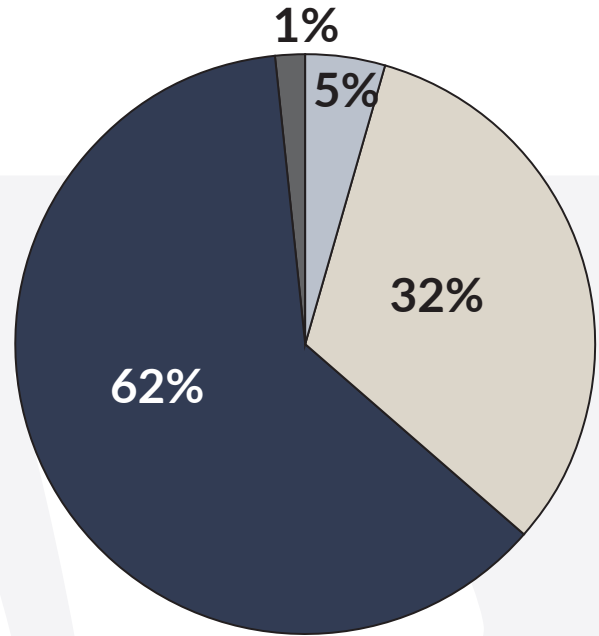
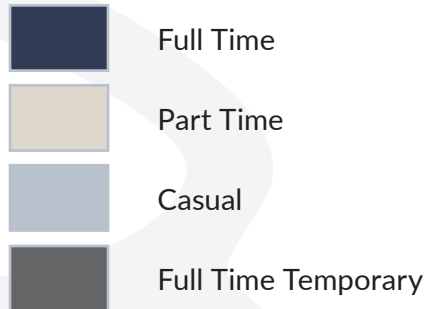
Educational Institution	Number of RRTs per Institution
University of Manitoba - School of Medical Rehabilitation	184
Health Science Centre SORT	83
Southern Alberta Institute of Technology (SAIT)	17
Canadore College of Applied Arts and Technology	8
Thompson Rivers University	7
Algonquin College of Applied Arts and Technology	6
Fanshawe College of Applied Arts and Technology	5
Northern Alberta Institute of Technology (NAIT)	5
La Cité collégiale - Collège d'arts appliqués et de technologie	4
Conestoga College Institute of Technology and Advanced Learning	2
Lake Superior College	2
College of the North Atlantic (CNA)	2
MARRT	1
Vanier College	1
Southwest Virginia Community College	1
Cabot College	1
St. Clair College	1
Northland Community and Technical College	1
College of the North Atlantic	1
PIMA Medical Institute	1
Winnipeg HSC	1
QEII/Dalhousie University, School of Health Sciences	1
Saint John	1
Total	336

EMPLOYMENT

Employment Facility	Number of RRTs per Employment Facility
Health Sciences Centre	124
St. Boniface General Hospital	51
Grace General Hospital	24
Winnipeg Regional Health Authority	19
Keewatin Air Ltd.	13
Seven Oaks General Hospital	9
Misericordia Health Centre	9
Inter-facility Patient Transport	9
Shared Health of Manitoba	8
Brandon Regional Health Centre	8
Other Facility	8
Riverview Health Centre	7
Concordia Hospital	7
Victoria General Hospital	6
University of Manitoba	6
Deer Lodge Centre	5
The Winnipeg Clinic	4
Thompson General Hospital	3
Rana Medical - Winnipeg	2
Brandon Regional Health Authority	2
Medigas Manitoba Ltd.	2
Dauphin Regional Health Centre	2
RANA Respiratory Care Group - Brandon	1
South Eastman Health/Santé Sud-Est Inc.	1
Flin Flon General Hospital Inc	1
Swan River Valley Hospital	1
Selkirk & District General Hospital	1
The Pas Health Complex Inc.	1
Boundary Trails Health Centre	1
Rana Medical - Brandon	1
Total	336

EMPLOYMENT TYPE

Employment Type	Number of RRTs Per Employment Type
Full Time	208
Part Time	108
Casual	15
Full Time Temporary	5
Total	336



LANGUAGE OF SERVICES PROVIDED BY RRTS

All Registered Respiratory Therapists in Manitoba provide services in English. In addition to English, 27 RRTs have declared their ability to proficiently deliver services in the languages identified below.

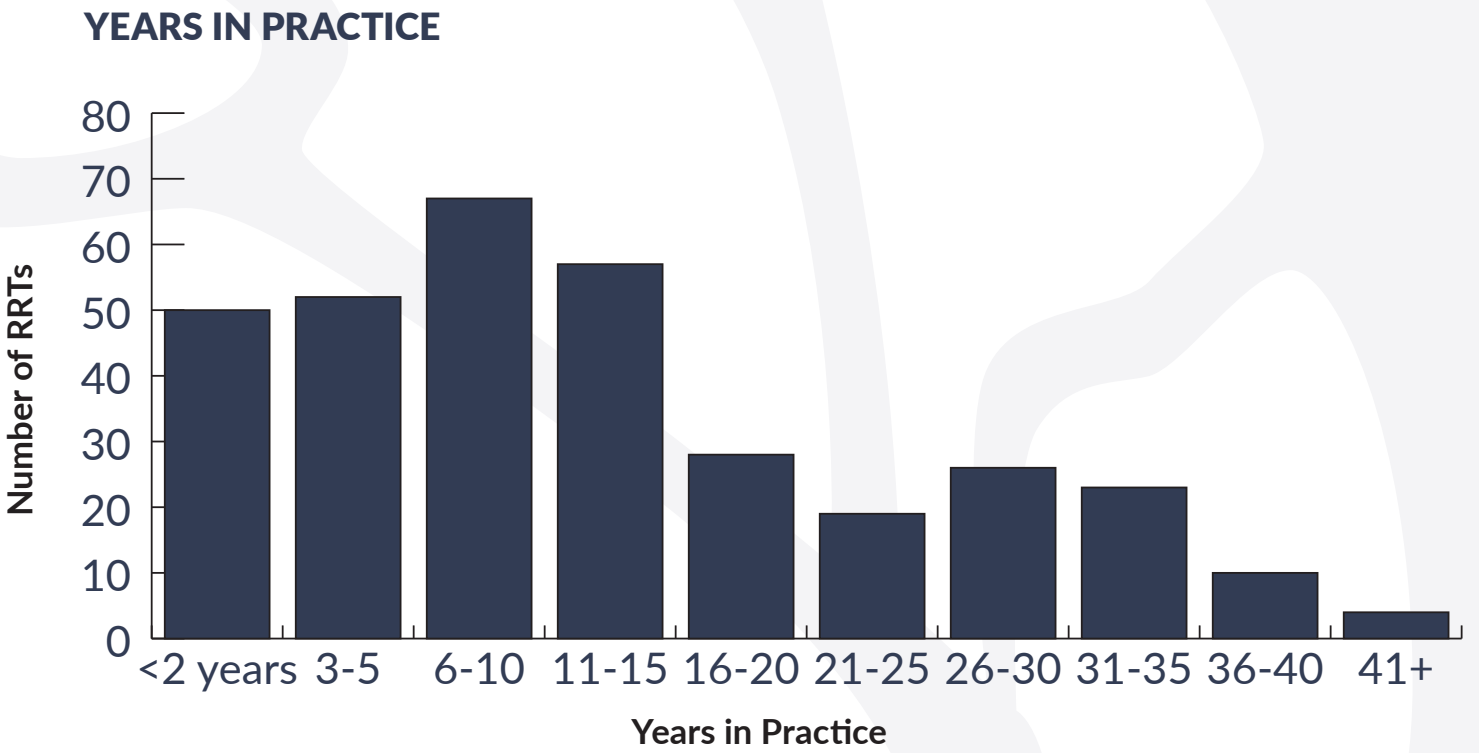
Additional Languages to Provide Services In	Number of RRTs
Amharic	1
Arabic, Amharic	1
Farsi	1
Filipino	1
French	14
French, Twi	1
Hindi, Punjabi	2
Korean	1
Polish	1
Tamil	1
Turkish	1
Visayan, Filipino, Basic Mandarin	1
Visayan, Tagalog	1

PRIMARY PRACTICE

Area of Primary Practice	Number of RRTs Reporting a Primary Practice	Area of Primary Practice	Number of RRTs Reporting a Primary Practice
Acute Care	127	Interfacility Patient Transport	2
Mixed Acute & Chronic	67	Research	2
Adult Care	30	Sleep Lab	1
Pediatric Care	27	Sleep Clinician	1
Chronic Care	12	Urgent Care	1
Pulmonary Function Testing	11	Medical Air Transport	1
Mixed Adult & Pediatric	11	Sleep Disorder Centre	1
Anesthesia	10	Manager	1
Administration	9	PICU, NICU, PSCU, Women's Labour and Delivery	1
Home Care	9	Respiratory outpatient clinic/ Covid testing site	1
Teaching	6	Clinical Administration	1
Sales	3	Pulmonary Rehabilitation	1
Total 336			

SECONDARY PRACTICE

Area of Secondary Practice	Number of RRTs Reporting a Secondary Practice	Area of Secondary Practice	Number of RRTs Reporting a Secondary Practice
Adult Care	67	C/BiPAP setups	1
Mixed Adult & Pediatric	33	Patient Transport	1
Acute Care	29	Neonatal Care	1
Pediatric Care	25	Program Team Manager for Cardiology	1
Mixed Acute & Chronic	24	Administration	1
Chronic Care	18	Research	1
Pulmonary Function Testing	10	COO Emergency Response Services & Chief Allied Health Officer	1
Teaching	7	Neonates	1
Home Care	6	Neonatal	1
Anesthesia	4	Did not report	102
Equipment Servicing	2		
Total 336			



A large, light-colored, stylized tree graphic is positioned on the left side of the page, extending from the top to the bottom. The tree has a thick trunk and several large, rounded branches that spread out towards the right. The background is a light beige color.

COMMITTEE REPORTS

GOVERNANCE

GOVERNANCE COMMITTEE

The Governance Committee is a standing committee responsible for developing by-laws and policies necessary to assist MARRT in functioning within its described Act and Regulations, to address any legislation changes, and to provide guidance to the MARRT operations.

The Committee did not develop any new policies during 2022. However, the following policies were revised:

- a. L-01 Active Practicing License Eligibility
- b. L-03 License Categories/Fee Schedule
- c. L-11 Criminal Record & Abuse Registry Checks

Policy M-01 Prorating of License Fees was dissolved and the information regarding the prorating of license fees was incorporated into policy L-03 License Categories/Fee Schedule.

These policies have been added to the MARRT Policy Manual which can be found on the MARRT website and in the MARRT online Library. In addition, a review of all policies was conducted for formatting and consistency in language to create continuity across all policies.

The Terms of Reference for the Governance Committee were revised and approved by the BODs in 2022.

MARRT Governance Committee

Deborah Handziuk, Chair

Cory Campbell, Ex-Officio

Tanis Crosby, Member

Ian Hay, Member

Jennifer Sambrook, Member

Flora Tolaj, Member

Ayo Olowoyeye, Government Representative

LICENSURE

REGISTRATION & AUDIT COMMITTEE

The Registration & Audit Committee is a standing committee that evolved from the Continuing Competency Program Committee. With the development of new Terms of Reference, the committee expanded its role and is also responsible for ensuring individuals applying for licensure and for license renewal meet all the requirements as described in legislation, by-laws, and policy.

The Registration & Audit Committee is responsible for evaluating license applications brought forward by the Registrar which are primarily that of Internationally Educated Health Professionals (IEHPs) or domestic applications who have completed a Canadian accredited respiratory therapy program who are licensed by a jurisdiction that is not self-regulated. The initial assessment of IEHPs includes the verification of all submitted documents and credentials evaluation to determine whether the applicant meets the requirements that are substantially equivalent to move to the next stage of the application process. If approved, the next stage is the Structured Interview (assesses the applicant's knowledge) and Clinical Skills Assessment conducted by the College of Respiratory Therapists of Ontario (CRTO).

For those domestic applicants who have completed an accredited respiratory therapy program in Canada who are registered by a jurisdiction that is not self-regulated, the committee will review all the documents submitted by the applicant and render their decision as to whether they will be approved for licensure.

The IEHP applicant who was approved in November 2021 to move forward to the interview and assessment phase by the CRTO chose to withdraw their application to the MARRT and has applied for licensure to another regulated health profession in Manitoba. During 2022, the MARRT received 15 inquiries from IEHPs although none of them completed applications for licensure to pursue the profession further. The countries of origin of the interested IEHPs included:

- Kabul, Afghanistan
- Buenos Aires, Argentina
- Colombia
- Ecuador
- Cairo, Egypt
- India
- Shiraz, Iran
- Philippines
- Qatar
- Ariana, Tunisia
- Abu Dhabi, UAE
- USA

MARRT Registration & Audit Committee

Deborah Handziuk, Chair

Cory Campbell, Ex-Officio

Kaitlin King, Member

Carlos Molina, Member

Kelly Neufeld, Member

Randall Kinley, Government Representative

The Registration & Audit Committee also conducted the Continuing Competency Program Audit in April/May 2022. A total of 40 RRTs were audited as follows:

- a. Ten per cent (10%) of active practicing RRTs at the time of the audit were randomly selected using a random generator. There were 317 active practicing registrants at the time of the audit, therefore 32 participants were selected. If an RRT who was audited in 2021 was selected, the random generator process was initiated to select another participant.
- b. The CCP audit is mandatory for any RRT who renewed their license after January 15th. The 2022 - 2023 license renewal proved to be challenging due to the introduction of the requirements for a Criminal Record Check, Vulnerable Sector Check, Adult Abuse Registry Check and Child Abuse Registry Check that coincided with the pandemic. On its own, the acquisition of these documents may have delayed a few renewals due to processing times; however, due to the pandemic that resulted in reduced staffing, suspension of services, and in some locations, the full closure of offices, there were significant delays in acquiring these documents. The Board remained apprised of the delays and determined that late fees would be waived for those individuals who provided receipts to show proof they applied for the checks before the January 15th license renewal deadline. In some cases, the MARRT contacted the RCMP detachments that were closed and explained the need for the checks to support licensure and in turn, be available to care for Manitobans. In those cases, the RCMP made exceptions and received and processed the applications. The eight RRTs who did not apply for their checks prior to January 15th were subjected to the CCP audit. This is a deviation from protocol and the regular process will resume for next year's CCP audit.
- c. Of the 40 RRTs who participated in the CCP audit:
 - a. Six (6) requested an extension to submit their CCP information and all six met the revised deadlines.
 - b. One (1) did not meet the requirements of the CCP audit and they were deficient in meeting the minimum number of required continuing competency hours. This individual was advised and provided with a deadline by which they were required to meet the number of minimum required hours and these hours were not to be applied to the year in which they took place (2022). They were applied to 2021 only.

The Registration & Audit Committee reviewed the CCP Audit requirements with the revisions being finalized in 2023 and the plan to implement them will be January 2024. This approach will provide greater focus to the RRT's learning with the intention of developing a plan and activities that support the identified goals and provide for self-reflection and serve to meet the requirement of quality assurance.

PUBLIC SAFETY

MARRT COMPLAINTS COMMITTEE

The MARRT Complaints Committee is a statutory requirement and it receives and reviews complaints brought against any member. If the committee deems it appropriate, they may attempt an informal resolution. Any complaint that cannot be resolved using this approach or if the member:

- a. Has committed an indictable offense; or
- b. Is guilty of professional misconduct or conduct unbecoming; or
- c. Has demonstrated incapacity or unfitness to practice;

the Complaints Committee must then refer the complaint to the Investigations Chair.

There were two complaints received this year. The Complaints Committee met and subsequently recommended the following:

- a. Complaint #1
 - i. Standards of Practice were not met related to Professional Accountability and Responsibility. Resolution was not met through informal resolution and was forwarded to the Investigations Chair
- b. Complaint #2
 - ii. It was determined that this complaint was not deemed to be a regulatory matter and instead, considered an employment matter. This complaint did not proceed further and was deemed closed.

MARRT Complaints Committee
Deborah Handziuk, Chair
Alana Head, Member
Bill Gibb, Member
Piotr Turon, Member
Flora Tolaj, Member
Randall Kinley, Government Representative

INVESTIGATION COMMITTEE

As a statutory requirement of the Act, the BOD appoints from the directors an Investigation Chair. The Complaints Committee refers matters to the Investigation Chair

- a. after a member has been convicted of an indictable offence; or
- b. is guilty of professional misconduct or conduct unbecoming a member, whether in a professional capacity or otherwise; or
- c. has demonstrated incapacity or unfitness to practice respiratory therapy or is suffering from an ailment which might, if he continues to practice, constitute a danger to the public.

As referenced in the Complaints Committee Report, following an unsuccessful informal resolution, Complaint #1 was forwarded to the Investigations Committee. The matter was investigated and the legal counsel conducting the investigation determined that under Section 34 (a) of the Act, that no further action be taken in relation to the complaint. The complainant did not appeal the decision and the matter was deemed closed.

MARRT Investigation Committee
Tanis Crosby, Chair

DISCIPLINE COMMITTEE

There were no MARRT matters referred to the Discipline Committee during the year 2022.

MARRT Discipline Committee
Kandy Macaulay, Chair
Nora Staunton, Member
Ayo Olowoyeye, Government Representative



FINANCIAL STATEMENTS

STATEMENT OF FINANCIAL POSITION

AS OF DECEMBER 31, 2022

	2022	2021
ASSETS		
CURRENT		
Cash	\$ 215,887	188,883
Cash for reserve funds	43,414	46,004
Interest receivable	1,761	2,731
Prepaid expenses	3,786	4,436
	264,848	242,054
LONG TERM INVESTMENTS (Note 3)	123,582	120,992
	\$ 388,430	363,046
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable	\$ 5,792	2,576
Deferred income	60,186	74,744
	65,978	77,320
NET ASSETS		
General Fund	155,456	118,730
Contingency reserve fund	113,112	113,112
Rhpa fund	53,884	53,884
	322,452	285,726
	\$ 388,430	363,046

STATEMENT OF REVENUES & EXPENSES

YEAR ENDED DECEMBER 31, 2022

	2022	2021
REVENUES		
MARRT dues	\$ 268,898	184,611
EXPENSES		
Honorariums	5,425	5,200
Insurance	2,203	2,845
Interest and bank charges	7,559	5,263
Legal fees	12,768	7,246
Memberships	13,718	17,191
Office and board supplies	4,438	5,507
Professional fees	3,640	3,080
Rental	8,400	7,200
Salaries and wages	140,462	93,532
Training	15,542	5,347
Travel	8,708	-
Website and database	12,328	12,285
	235,191	164,696
EXCESS OF REVENUES OVER EXPENSES FROM OPERATIONS	33,707	19,915
OTHER INCOME	3,019	3,331
Interest income		
EXCESS OF REVENUES OVER EXPENSES	\$ 36,726	23,246

STATEMENT OF CHANGES IN NET ASSETS

YEAR ENDED DECEMBER 31, 2022

	General Fund	Contingency Reserve Fund	RHPA Fund	2022	2021
NET ASSETS - BEGINNING OF YEAR	\$ 118,730	\$ 113,112	\$53,884	\$285,726	\$264,640
EXCESS OF REVENUES OVER EXPENSES	36,726	-	-	36,726	23,246
PRIOR YEARS' RECEIVABLES ADJUSTED	-	-	-	-	(2,160)
NET ASSETS - END OF YEAR	\$ 155,456	\$ 113,112	\$53,884	\$322,452	\$285,726

STATEMENT OF CASH FLOWS

YEAR ENDED DECEMBER 31, 2022

	2022	2021
OPERATING ACTIVITIES	\$ 36,726	23,246
Excess of revenues over expenses		
Item not affecting cash: Prior period adjustment	-	(2,160)
	36,726	21,086
Changes in non-cash working capital:		
Accounts receivable	-	2,160
Interest receivable	970	317
Accounts payable	3,216	(1)
Deferred income	(14,558)	28,274
Prepaid expenses	650	(958)
	(9,722)	29,792
Cash flow from operating activities	27,004	50,878
INVESTING ACTIVITY	(2,590)	(15,908)
Cash for reserve funds		
Long term investments	2,590	(1,992)
Cash flow used by investing activities	-	(17,900)
INCREASE IN CASH FLOW	27,004	32,978
Cash - beginning of year	188,883	155,905
CASH - END OF YEAR	\$ 215,887	188,883
CASH CONSISTS OF:		
Cash	\$ 215,887	188,883

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2022

1. DESCRIPTION OF OPERATIONS

The Manitoba Association of Registered Respiratory Therapists was incorporated in the Province of Manitoba in order to regulate the practice and continuing competency of the respiratory therapists to ensure the safe delivery of care.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of presentation

The financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations (GAAP). Canadian accounting standards for not-for-profit organizations are part of Canadian GAAP.

Revenue recognition

The Association follows the deferral method of accounting for dues. Dues are recognized according to the term of the dues.

Financial instruments policy

Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, financial assets with actively traded markets are reported at fair value, with any unrealized gains and losses reported in income. All other financial instruments are reported at amortized cost, and tested for impairment at each reporting date. Transaction costs on the acquisition, sale, or issue of financial instruments are expensed when incurred.

3. LONG TERM INVESTMENTS

LONG TERM INVESTMENTS	2022	2021
Steinbach Credit Union	123,582	\$ 77,992
Home Trust- GIC	\$ -	\$ 43,000
	\$ 123,582	120,992

The above GIC's are restricted for the use of the reserve funds.

4. RESTRICTED FUND

In 2017 the Board of Directors approved the appropriation of funds for the Contingency Reserve Fund to include amounts for Legal, Operating and Funding of Therapy, the amounts based on a yearly percentage. During 2020, the board approved appropriation of funds for legal in the amount of \$7200.00. In 2021 the board also approved the use of \$7200.00 of the contingency fund to cover some of the current year legal costs as well as \$3500.00 for a Therapy Reserve Fund. There were no allocations in 2022.

As well during the year ended January 31, 2012 the Board of Directors approved the appropriation of funds to provide for a fund relating to the Regulated Health Professional Act in the amount of \$5,500, however paused for 2019.

The restricted funds are secured by the following:

GIC	\$123,582
Cash in the bank	43,414

5. ECONOMIC DEPENDENCE

The Association derives a substantial portion of its revenues from membership dues. Should the membership substantially change its dealings with the Association, management is of the opinion that continued viable operations would be doubtful.



**MANITOBA ASSOCIATION OF
REGISTERED RESPIRATORY THERAPISTS**

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