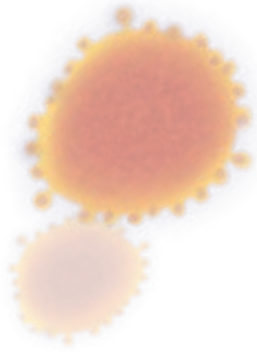




College & Association of
**Respiratory
Therapists**
of Alberta

Annual Report
2020



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About this Report

This report is for the reporting period of April 1st, 2019 to March 31st, 2020. It is produced for the benefit of all of our stakeholders including: the people who receive health services from regulated members, the public, the Minister of Health, the Alberta provincial government, our regulated members and employees, approved education programs, public and private industry. We hope that readers will make use of the information and perspectives provided within this report, and see them as an invitation to further dialogue with the CARTA Council.

We continue to engage in constructive discussions, we seek to adapt and develop solutions based on what we learn, and we aim to contribute to, and succeed in, value creation for people with the goal of providing exceptional corporate social responsibility.

This annual report is submitted to the Minister of Health in a form acceptable to them, and contains the information requested by the Minister pursuant to *Sec. 4* of the *Health Professions Act*. This report also includes the independent auditor's report created in accordance with Canadian Accounting Standards for Not-for-Profit Organizations (ASNPO).

The College and Association does not establish professional fees for health care services rendered, or have an authorization under *Sect. 27* of the *Act* to establish professional fees. The activities of the College and Association do not include collective bargaining. This is performed by the Health Sciences Association of Alberta which is the organization certified as the official bargaining agent on behalf of Respiratory Therapists working in the public sector for Alberta Health Services.

The College and Association is a corporation under the authority of the *Act*, and registered with Alberta Corporate Registries. The organization was originally incorporated as the Alberta Society of Respiratory Therapists on August 23rd, 1971. Our provincial corporate access number is 500064191 with August 23rd being our anniversary date. We operate as a not-for-profit entity in accordance with the *Federal Income Tax Act* and are exempt from charging the Goods and Services Tax to our regulated members fees or services. Council reviewed and approved of this report at a virtual meeting on August 24, 2020.



About Respiratory Therapy



“The Respiratory Therapy profession consists of a diverse professional population who collaborate with other members of the health care team to deliver optimal patient care.”

Respiratory Therapists use the protected title Registered Respiratory Therapist together with the professional designation “RRT” as identified in *Schedule 26* of the *Health Professions Act*. Regulated members provide a wide variety of diagnostic and therapeutic services of exceptional quality to individuals suffering from lung or heart problems, as well as an assortment of related disorders.

These services are provided in acute care hospitals, extended care facilities, clinics, laboratories, and clients’ private residences. Regulated members provide health services in a wide variety of public and private clinical practice settings and are also actively engaged in the stabilization and transportation of critically injured patients. Regulated members actively leverage existing and emerging technologies to provide patients with access to exceptional quality care experiences.

About CARTA

The College and Association of Respiratory Therapists of Alberta is a provincial regulatory body dedicated to delivering value added services to the public and to members practising in the healthcare industry. Our primary focus is to protect the public by providing our members the resources they require to effectively serve Alberta communities.

The following Practice Statement for the Respiratory Therapy profession is identified in *Schedule 26 of the Health Professions Act*:

“In their practice, Respiratory Therapists do one or more of the following: provide basic and advanced cardio-respiratory support services to assist in the diagnosis, treatment and care of persons with cardio-respiratory and related disorders, and provide restricted activities authorized by the regulation”

Legal Services

DERRICK PAGENKOPF PROFESSIONAL CORPORATION
Suite 487, 1811 4th Street SW
Calgary, Alberta T2S 1W2

THOMAS P. O’LEARY
Dentons Canada
850 2nd St SW
15th Floor, Banker’s Court
Calgary AB

Independent Auditor

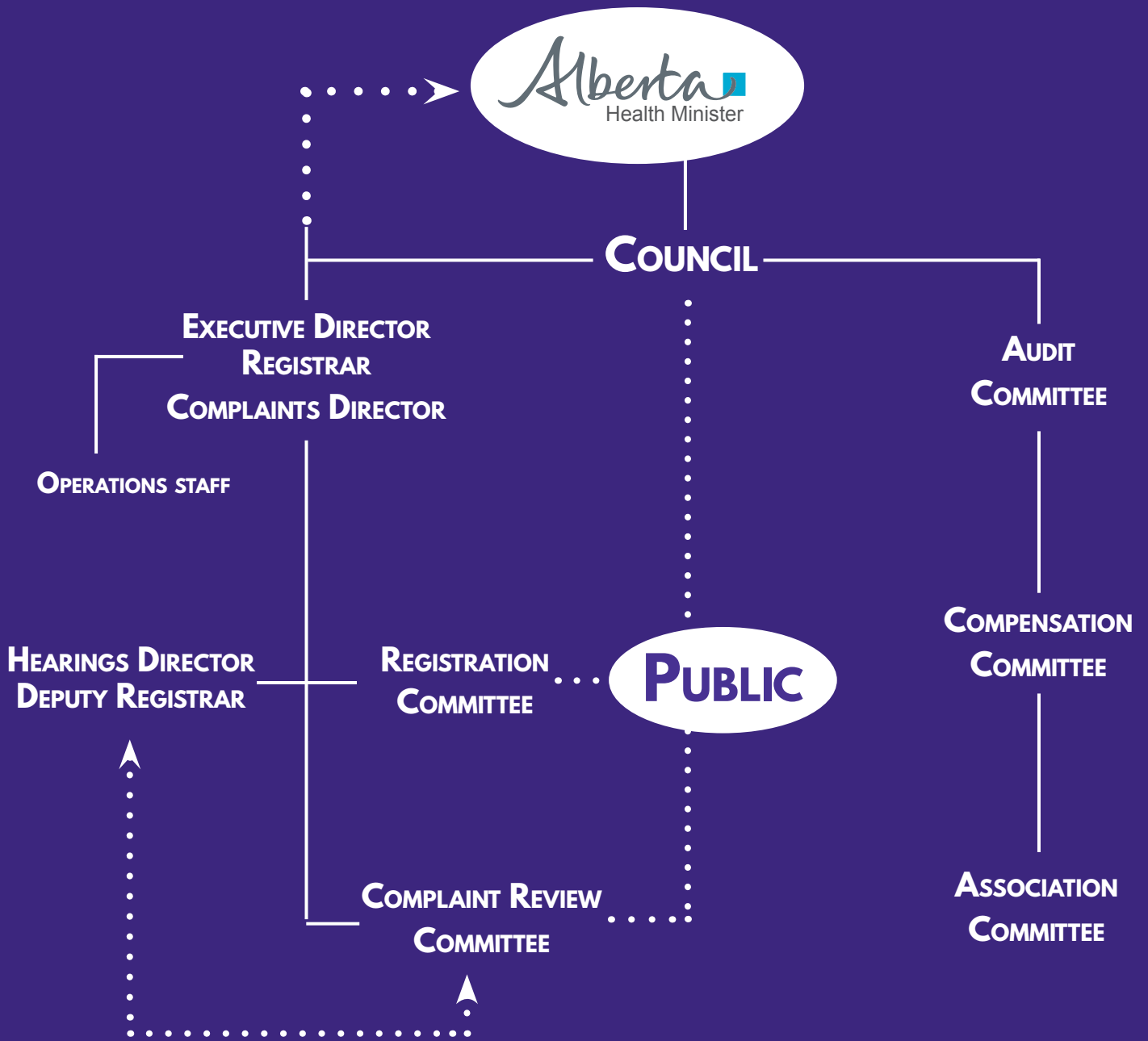
MAHMUD KHALFAN
KHALFAN CHARTERED PROFESSIONAL ACCOUNTANTS
Chartered Professional Accountants
1701 Centre St NW #601,
Calgary, AB

Banking

ATB FINANCIAL
Calgary North Hill
217 16th Ave NW,
Calgary AB

BANK OF NOVA SCOTIA
101 8120 Beddington BLVD NW
Calgary AB

Organization Flow Chart



..... Indirect Report
 _____ Direct Report

Corporate and Social Responsibility

Corporate Social Responsibility (CSR) is defined as an organization's commitment to operating in an economic, social and environmentally sustainable manner, while recognizing the interests of its stakeholders, including; regulated members, business partners, local communities, the environment and society at large. CSR goes beyond activities such as volunteer-ism and charity. Organizations such as CARTA who practice CSR develop policies, procedures and programs in areas such as: employee relations, community development, environmental stewardship, marketplace practices, transparency of processes and accountability. The following are some of the CSR practices CARTA has been actively engaged in this year:

OUR OFFICES

- We use computer monitors that are the most energy efficient and position them to minimize glare and employee eye fatigue;
- Our office chairs are sourced for their ergonomic design so that employees are comfortable as well as properly supported when sitting while at work;
- We lease office space in a Building Owners and Managers Association (BOMA) certified building which is highly energy efficient and meets or exceeds extensive environmental practice standards.

OUR ORGANIZATION

- Our web-site is a source of electronic truth which also reduces the need for paper records and reports, with the exception of those specifically required, such as the hard-copy of this report submitted to the Minister of Health;
- We securely cross-shred and destroy office paper documents. This makes recycling easier while ensuring privacy is protected;
- CARTA actively participates in the Building Paper, Electronic Recycling Program created by Green Calgary. We also use recharged ink cartridges for our office printers;
- We are committed to transparency about our business practices as well as our regulatory responsibilities and publish our social responsibility activities in this annual report.

OUR REGULATED MEMBERS & EMPLOYEES

- Our employees enjoy the use of building exercise facilities and safe secured parking facilities;
- Our employees routinely participate in building security, fire and evacuation practices and drills;
- Many of our regulated members volunteer their time and services for a variety of professional, community, sport, cultural and education events throughout the year in the province;
- We value the contributions made by our employees to an innovative profession and treat them with respect consistent with all Labour and Occupational Health and Safety Legislation.

OUR COMMUNITY

- We continue to source products and services from providers in our supply chain who treat us fairly and with integrity. We look for suppliers who respect our vision and mission, and we look to be fiscally responsible stewards of our regulated member's limited resources;
- When possible we source 80% to 100% recycled paper products that possess the trademark of the not-for-profit Forest Stewardship Council indicating that the wood used to make the product is well managed according to strict environmental, social and economic standards.

OUR FUTURE

To become a leader in regulation while protecting the environment.

Council Members



Karrie Whalen RRT BSc
President
Term Ends 2020
President Elect
Term Ends 2020
Edmonton



Melissa Morrison RRT
Secretary
Term Ends 2020
Calgary



Patricia Beckham RRT
Director At Large
Term Ends 2020
Edmonton



Candice Keddie RRT
Director At Large
Term Ends 2021
Edmonton



Sarah Bieganek RRT BSc MA
Director at Large
Term Ends 2020
Edmonton



Meredith Patey RRT
Director At Large
Term Ends 2023
Calgary



Holly Champney RRT
Director at Large
Term Ends 2023
Red Deer

Public Members



Angelina Bakshi
P Eng MBA CSR-R FBE
Public Member
Term Ends 2020
Edmonton



Dr. Raja Singh
PhD MSc MBBS BSc
Public Member
Term Ends 2021
Calgary



Larry Loven
BSc BID CMC
Public Member
Term Ends 2020
Edmonton

Administration



Bryan Buell
RRT BGS CTAJ
Registrar
Executive Director
Complaints Director
Calgary



Gerald Spence
RRT CTAJ
Deputy Registrar
Hearings Director
Calgary

Committee Members

CARTA Registration Committee

Chairperson- Mr. Jeffery Ung, RRT Calgary

Members

Ms. Dolores Michelin, RRT Calgary

Ms. Judy Duffett-Martin, RRT Calgary

Mr. Will Cunnington, RRT Calgary

Mr. Travis Eremko, RRT Calgary

Preliminary Investigations conducted by IRISS Integrated Risk Investigations Security Solutions

CARTA Competency Committee is the registration committee

CARTA Hearing Tribunal Committee

Hearing Director:

Gerald Spence, RRT Calgary

Panel Members:

George Verghese RRT, Cardston

Shannon Foster RRT, Edmonton

Linda Sheen RRT, Edmonton

Lisa Lem RRT, Edmonton

Dolores Michelin RRT, Calgary

Nicholas Castle RRT, Calgary

Gregory Hind RRT, Calgary

Timothy Gill, RRT, Grande Prairie

Micheline Courtney RRT, Calgary

Linda Tymchuk RRT, Edmonton

Catherine Johansen RRT, Medicine Hat

Travis Eremko RRT, Calgary

Amy Whitney RRT, Calgary

Connie Kadey RRT, Drumheller

Mission

Protecting the public through quality regulation of the practice of Respiratory Therapy.

Vision

Promoting excellence in Respiratory Therapy through regulation, education and member support.

Values

Integrity, respect, accountability, ethics and practice excellence.



Governance

Under the authority of the *Health Professions Act*, the Council is responsible for governing the profession in the public interest. An important aspect of governance is the responsibility the Council has to act as a stakeholder in the development of regulation in the province, development of profession specific Standards of Practice and Codes of Ethics, as well as create and amend corporate by-laws to support the mandate in accordance with the *Act*.

The Council also directs and regulates the profession, establishes, maintains and enforces standards for registration and continuing competence, and approves programs of study and education courses for purposes of registration requirements.

To achieve these objectives the Council has representation on a variety of organizations involved in matters related to professional regulation which include: the Canadian Board for Respiratory Care Incorporated (CBRC), the Committee on Accreditation for Respiratory Therapy Education (CoARTE), and the National Alliance of Respiratory Therapy Regulatory Bodies (NARTRB). To fulfill its governance mandate and uphold regulatory excellence, the Council maintains membership in; the Council on Licensure Enforcement and Regulation, the Alberta Federation of Regulated Health Professionals, and the Alberta Foundation of Administrative Justice.

The Council executes its duties by integrating governance best practices in: transparency, appropriate disclosure, regulated member engagement, and broad based stakeholder consultation. These best practices are the basis by which the regulatory body actively participates with the other members of the NARTB. Leveraging the economies of scale with our regulatory counterparts from other provincial jurisdictions, we are able to optimize value for the patient, client and resident populations served by regulated members throughout the country.

The Council has built a strong governance team and sustains a knowledge-based governance strategy by exploring tactics to effectively manage change in today's operating environment. Additionally, it employs techniques to create continued growth and success, while developing resources to remain effective and meet regulated members' needs.

The decision making model that the Council incorporates is based on pragmatic consensus. Council routinely considers the value proposition as it relates to its legislative mandate when making business decisions. Reflecting the characteristics of the Respiratory Therapy membership, assumptions are frequently challenged by the Council in an attempt to be innovative and responsive to a rapidly changing health care environment. In this regard, stakeholders look towards the Council for leadership.

President's Report



Karrie Whalen RRT BSc

“Challenging Situations Can Lead You To Transformational Experiences.”

Wesam Fawzi

I write this report with pride of the engagement, collaboration and participation of the College and Association of Respiratory Therapists of Alberta (CARTA) council members all in the common goal of protection of the public. We met a total of five times using a variety of meeting venues and methods.

Council approved the Health Standards Organization and Accreditation Canada education program accreditation services to support the Council education approval process.

We proudly hosted an education day in conjunction with our 2019 Annual General Meeting. The focus was educating the membership on common complaints received, questions about professional practice presented by CARTA legal counsel, an update on our patient relations program and consultation on amendments to the respiratory therapists professional regulation, standards of practice and code of ethics. The information was thought provoking and well received by those in attendance.

In November we were proud to host our national regulator colleagues for the fall business meeting and annual general meeting of the National Alliance of Respiratory Therapy Regulatory Bodies (NARTRB). As part of the fall business meeting, a strategic planning session took place. Discussions began to plan for the next iteration of the national competency framework to set entry to practice requirements. I was nominated and accepted to be a national client representative for the NARTRB on the Health Standards Organization program council table.

In knowing that our membership would need further education related to protecting patients from sexual abuse and misconduct, council worked to ensure it was mandatory prior to registration renewal. In the end, from our work with the other Alberta Regulatory Colleges through the Alberta Foundation of Regulated Health Professions (AFRHP), council decided on a two part education plan. Members were required to read a document titled *Understanding Bill 21* and *Act to Protect Patients* and pass an exam with a 100% accuracy based on the content. Part two of the education plan required members to watch a 60 minute video produced by the AFRHP, Sexual Abuse and Misconduct Education for Health Professionals.

With goals being set for 2020, COVID-19 had other plans and launched the world into a global pandemic. We watched in Alberta as cities and countries across the world began struggling with the care of COVID-19 patients. Our profession immediately came together in different venues to work together to create plans for how to best care for the public in what could be very trying times. The Respiratory Home Care Association, made up of private industry, created a hotline for smaller centers to use to efficiently set up patients who need home oxygen home and minimize delays in discharge. This is only one example and the work done provincially to ensure all patients received the best care possible. Overall, I am proud to report how Registered Respiratory Therapists stepped up and worked together to ensure all Albertans were to receive the best of care.

As we watched COVID-19 reach our province, and with the Public Health Emergency enacted, council moved quickly to approve the opening of our courtesy registrar. Despite being in the beginning of a pandemic, council came together with short notice to motion and approve the launch of the CARTA courtesy register.

I am fortunate to be able to serve as President for another term beginning October 2020.

Respectfully submitted,

Karrie Whalen B.Sc, RRT
President

Public Members' Report



Angelina Bakshi
P Eng MBA CSR-R FBE
Public Member
Edmonton



Dr. Raja Singh
PhD MSc MBBS BSc
Public Member
Calgary




Larry Loven
BSc BID CMC
Public Member
Edmonton

This past year was marked by a great sense of unity in the organization. CARTA council and staff experienced a year marked by the need to demonstrate leadership as a College and Association to members, employers, health authorities and all Albertans.

As public members, we are pleased to report that we have observed proactive consultation and impactful action with the respiratory professionals that Council represents. As part of our duty to Albertans, we are encouraged by the financial health of CARTA as it is also the responsibility of Council. We are pleased to report that this responsibility has been discharged well. Not only is CARTA's financial position strong, but the responsiveness of CARTA staff in providing information allowed us to review the finances with relative ease.

Consistent with last year, pre-emptive preparation, notification and consultation with CARTA membership about upcoming proposed legislative changes continue. With the impending proclamation of the Fair Registration Practices Act, Council took steps to engage with its members and make the necessary changes to support the act, showing the spirit of engagement Council strives towards in all areas. This engagement extended to the formulation of a patient relations program in preparation for regulatory changes by the government pertaining to Bill 21: An Act to Protect Patients.

CARTA engaged collaboratively with other colleges, further highlighting its leadership position both locally in Alberta, and nationally. For example, CARTA hosted the strategic planning, business and annual general meetings of the National Alliance of Respiratory Therapy Regulatory Bodies. Another example was working with the



College of Paramedics of Alberta on developing an industry survey of practice for the development of a future palliative care competency profile. The nature of collaboration requires careful thought and willingness to work together, as demonstrated by these examples.

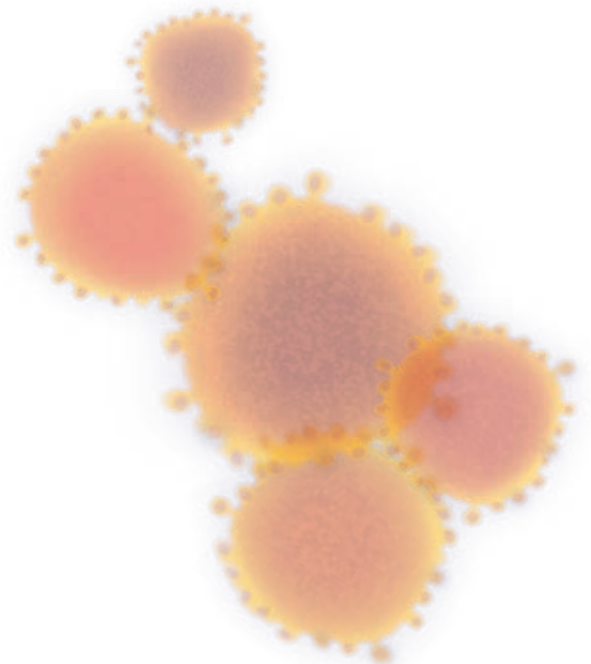
A highlight of the year was the annual general meeting held in October 2019, which we were privileged to attend. As in years past, while in attendance, we had insightful conversations with members about their work and current challenges.

A significant global event occurring at the conclusion of this annual reporting period was, of course, the COVID-19 pandemic, which was accompanied by a provincial response in Alberta. In response to the pandemic, Council engaged in several initiatives on a modified timeline. As an example, Council had previously started due considerations about the digital future and impacts to the profession last year. During the COVID-19 pandemic response, this journey was accelerated, with emphasis on maintaining high standards and being proactive, while continuing to serve members and patients. In another example, access to public and secure web-site pandemic response plan resources for the membership was fast-tracked. CARTA also launched the Courtesy Register to help in the COVID-19 pandemic response plans, and worked alongside Alberta Health Services, Alberta Health and Respiratory Homecare Association of Alberta, Provincial Health, and Health Canada regarding pandemic response elements. Collaborative approaches regarding access to personal protective equipment, safety procedures, ventilator development, and the health and well-being of both professionals and patients, became a key theme.

Indeed, carefully monitoring the evolving situation and practices beyond our provincial borders further exemplified the collaborative and united nature of Council, and we as public members were privileged to be actively consulted as things progressed.

Looking ahead, the pillars of optimism, financial strength, and importance of engagement are apparent within CARTA as the pandemic continues to unfold.

As representatives of the people of Alberta, we carry out our role in the spirit of engaging with others throughout our own communities and throughout the province, in order to keep up to date with public interests. We are delighted to work alongside Council and are pleased that our insights and recommendations are given thoughtful consideration. Transparency and trust enable this relationship to respond for the best interests of the public and respect of the profession.



Registrar's Report



Bryan Buell RRT BGS CTAJ

Thank-you for all the work that every regulated member performs! It is an exciting time to be a front-line worker on the firing line of the novel corona virus Covid-19 pandemic response. Respiratory therapists are active this year and no more so than the last two months prior to the reporting period for this report.

I have had the distinct pleasure of being embedded with the Respiratory Homecare Association of Alberta hosting telephone conference meetings three days a week. The continuous topic of discussion was the sourcing of sufficient quality personal protective equipment after all supply chains were destroyed by the provincial and federal governments as well as the military of the People's Republic of China. The experience identified many opportunities for continuous improvement on behalf of the provincial operations center operated by the provincial government.

We were very busy processing applications for provisional registration and collaborated with both approved programs in Alberta to be able to add applicants to the provisional register and issue a number of conditions to reconcile any gaps in competency acquisition during their educational program. While doing that we also launched the courtesy register to increase human resource capacity to be able to respond to any surges of infection rates throughout the province.

On March 1st, 2020 the *Fair Registration Practices Act* went into force and is now law. The four principles required by all regulatory

bodies when making registration decisions are to be transparent, objective, impartial and procedurally fair. All regulatory bodies will be required to provide information about eligibility for registration and the registration processes to applicants and potential applicants in a clear understandable manner. Interim registration decisions with respect to an application for registration must be made within six months. There must also be a process for internal review or appeal for registration or interim registration decisions.

The government appointed a Fairness Commissioner for Newcomers who will have the authority to audit regulators to confirm their processes comply with the four basic principles. The impact of this legislation will be added costs for the regulatory bodies. These additional costs now created by the provincial government will have to be collected through increases in fees most notably application and assessment fees.

The legislation was created to help government work with professional licensing bodies to streamline, simplify and accelerate foreign credential recognition. This will prove to be challenging as the current wait time for the international Qualification Assessment Services operated by the Alberta Labour Ministry is 6 months. The regulatory body has no control over processing times and as such foreign applicants will be very anxious to have our internal registration process expedited. In most cases this isn't possible because we have to assess the competencies that the individual applicant possesses rather than assess the method by which they obtained the competencies.

In respiratory therapy this proves to be very challenging when technology and the rate of change is considered. Very few jurisdictions have access to the technology that we enjoy in our practice in Alberta and as such an applicant may be able to demonstrate that they can setup a mechanical ventilator but won't be able to prove that they can monitor it the way Alberta RRTs monitor ventilator waveform analysis etc.

Fortunately, our registration committee is very experienced in clinical practice as well as in assessing competencies of applicants. In preparation for the new legislation we

have enhanced information on our web-site to meet the transparency principle, revised our decision letter so that it is more formal and fully complies with the Lisbon Convention on credential recognition. In addition, we monitor our processes with timestamps for every major requirement of the applicant meeting the application requirements of the *Regulation*. Our current process is highly responsive and very robust. We rapidly make decisions, long before the six-month maximum legislated requirement.

Our internal controls are equally as robust to ensure fairness in initial decision-making and responding to any appeals requests. We have always conducted ourselves in this manner and as such the new legislation has minimal impact on our registration decision-making processes.

We continue to actively participate on the College of Physicians and Surgeons Pulmonary Function and Sleep Diagnostic Testing advisory committees on accreditation. We have contributed to changing the accreditation standards which enhance patient access to safe health services while ensuring the laboratory environment is safe and implements best practices for testing services.

We continue to actively engage the Alberta Health Services professional practice council and have contributed to a program called “Fun Facts”, which informs respiratory therapists about their obligations pursuant with the *Act* and *Regulation*. Through the Alberta Federation of Regulated Health Professions we attended multiple electronic health record Connect Care steering committee meetings to guide the successful launch that started last November.

This very large project will expand to all parts of the province and help improve the quality of care as well as assess costs associated with care. Digital transformation in our practice is not going away and I encourage all members to maintain currency in their digital practice as well as their clinical practice.

This year on the labor mobility file we were able to facilitate movement to and from our jurisdiction pursuant with the Canada Free Trade Agreement, formerly known as the

Agreement on Internal Trade in Canada. Typically our office processes applications within five to ten business days depending on the time it takes the applicant to submit all of the required information.

New this year and as part of satisfying our good character requirement of the *Regulation* we have asked applicants to provide a recent criminal records check conducted within the previous ninety days as required by recently amended legislation. This additional aspect of good character has increased processing time but has not created any significant delays in processing applications to meet the six-month time frame as required by the Fair Registration Practices Act.

Unfortunately, we encountered a problem involving a registration applicant from Saskatchewan where there was some interference initiated by the Labour Mobility Coordinator from that province. Decisions involving applications for registration are expected to be objective, free of any bias and fair. It could be argued that such interference constituted the introduction of a reasonable apprehension of bias into the decision-making process by the registrar. To remedy the situation the Registrar consulted with the Council, Ombudsman’s Office and Fair Registration Practices Commissioner. The result was to provide the Labor Minister with a letter indicating that any such future interference by any Labor Mobility Coordinator will not be tolerated by the registrar and will result in a complaint to the Ombudsman’s Office. I consider the matter now disposed and anticipate there will not be any further interference on future registration decisions.

In conclusion, this year has been marked by significant legislative change which increases operational expenses and may increase future registration fees (the tax on work). We will continue to embrace such challenges and also continue to operate as a low cost leader in managing provincial regulatory affairs.

Respectfully Submitted

Bryan Buell RRT, BGS, CTAJ,

Executive Director/Registrar/Complaints Director

Membership and Registration

Regulated members of the College and Association have successfully completed an approved program of study as well as successfully completed an examination approved by the Council. Alternatively, some members are admitted into the College and Association as substantially equivalent based on a detailed assessment of the competencies they possess from their education and work experience.

The data presented in this report illustrates a membership that has been growing to accommodate future anticipated workforce needs as a result of an aging work force demographic, while respecting an individual's career objectives related to work-life balance. The Council takes pride in supporting and engaging work experience for regulated members where legislated obstacles or barriers are minimized or eliminated.

This creates an environment where innovation and creativity are nourished, enabling them to achieve clinical excellence while protecting the public. We are very proud of the positive day-to-day interactions our regulated members have with patients and clients. We believe that Registered Respiratory Therapists are a profession made up of patient or client choice!

CARTA receives applications for registration pursuant with the *Health Professions Act*. Applicants are notified by the Registrar when a completed application has been received or advised of what remains outstanding for an application to be considered. Applicants are added to one of three registers if they meet the requirements of the Regulation.

If an applicant does not meet the requirements their application is referred to the registration committee for review. The committee considers all written and verbal representations made by the applicant before carefully making a decision with respect to the application. If the applicant is not issued a practice permit they are advised regarding what is required to become registered. The protocols used by the registration committee are consistent with the 2010 Lisbon Convention on Credential Recognition.

Unsuccessful applicants are also advised of their legal right to request a review by CARTA Council. Applicants wishing to do so must make the request in writing which includes reasons for the request. The Council appoints a panel to adjudicate the request which will provide reasons for any decision not to issue a practice permit.

March 1st 2020 the Government of Alberta Enacted the *Fair Registration Practices Act* which specifies that *a regulatory body has a duty to carry out registration practices that are transparent, objective, impartial and procedurally fair*. The legislation also obligates regulatory bodies to be fully compliant with all domestic trade agreements

Mandatory Reading Requirement

This annual activity mandated by the Council has proven to be quite well received with members who appreciate council guidance on professional development activities that align with the College's mandate to protect the public interest. Previously council has mandated reading on handbooks such as Occupational Health and Safety Hazards and Controls, Disruptive behaviour in the healthcare workplace, Patient safety Competencies, Documentation and most recently Protecting Patients from Sexual Abuse and Sexual Misconduct. Future topics under consideration include Understanding the Complaints Process, Infection Prevention and Control Protocols.

Provincial Jurisprudence Education

Council is exploring the possibility of implementing a mandatory exercise of successful completion of provincial jurisprudence education content. Such education would include basic information related to professional practice for Respiratory Therapists in the province. Topics would include mandatory registration, assessing incapacity of regulated members, cooperating with investigators during investigations, standards of practice, code of ethics, regulation requirements for entry to practice and registration renewal, mandatory liability insurance coverage details, minimum language proficiency requirements, obligatory reporting of unprofessional conduct as defined by the *Health Professions Act*. In addition to understanding Occupational Health and Safety obligations of regulated members etc.

Continuing Competency Audit Process

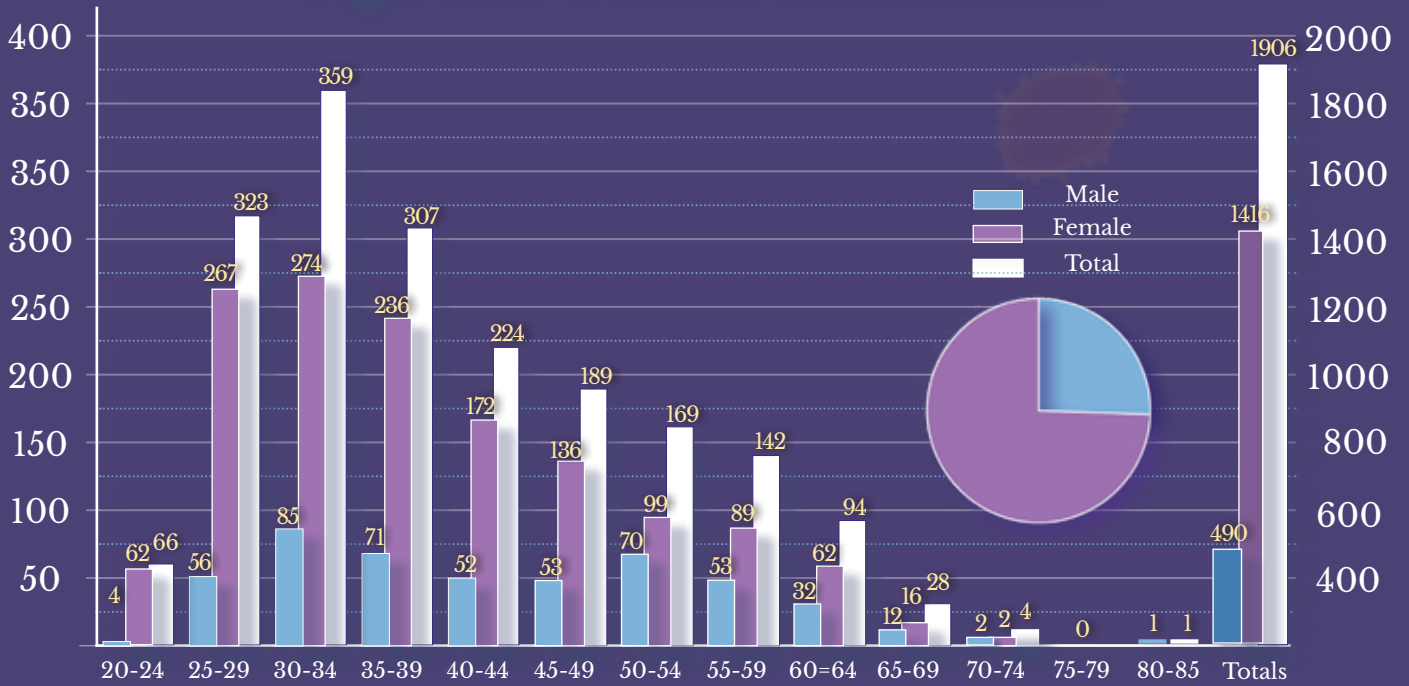
Members renewing their registration are randomly selected to verify their submissions of continuing competency hours. Each year approximately five per cent of the membership are audited. In some limited circumstance the Deputy Registrar will select some regulated members who report hours that appear to be outliers in the data such as reporting the 4 year practice hour total as 1 year only or continuing competency hours that when added to the practice hours vastly exceed what a typical total for a full time equivalent would be. This approach helps to maintain current and accurate data for the entire population of regulated members.

Interviews with Registration Committee

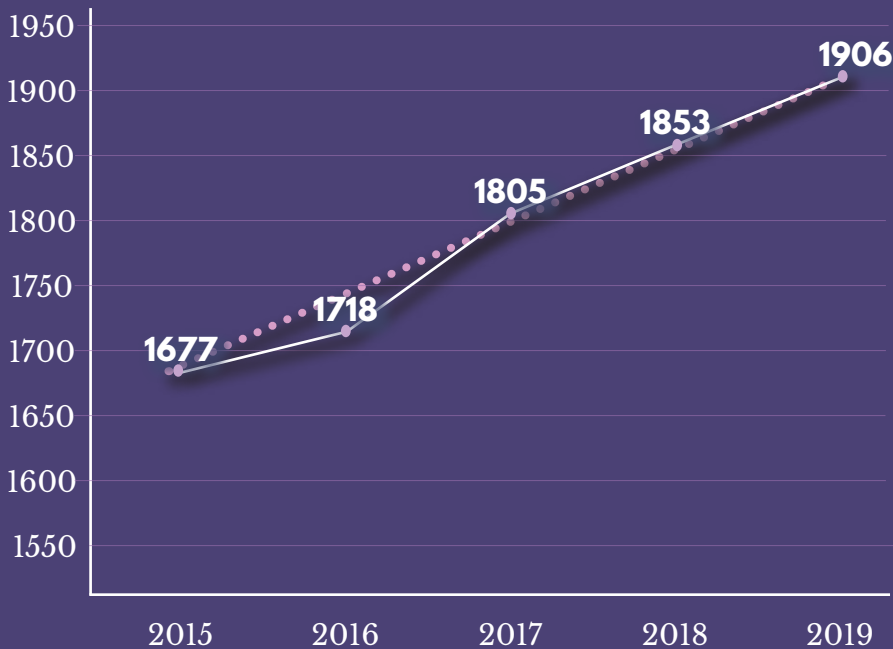
Once again we are pleased to report that all regulated members were fully compliant with submitting their audit forms to the Deputy Registrar and nobody was referred to the registration committee for further review. In response to regulated member input at the leadership network meeting last October we are exploring the feasibility of developing a mobile telephone application for regulated members to track their continuing competency activities more conveniently. It is quite possible that an app will be available for regulated member use for the 2018 registration renewal and beyond.

Demographics

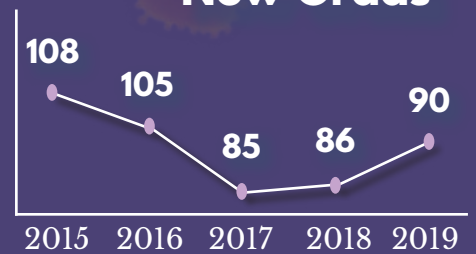
Age and Gender Distribution



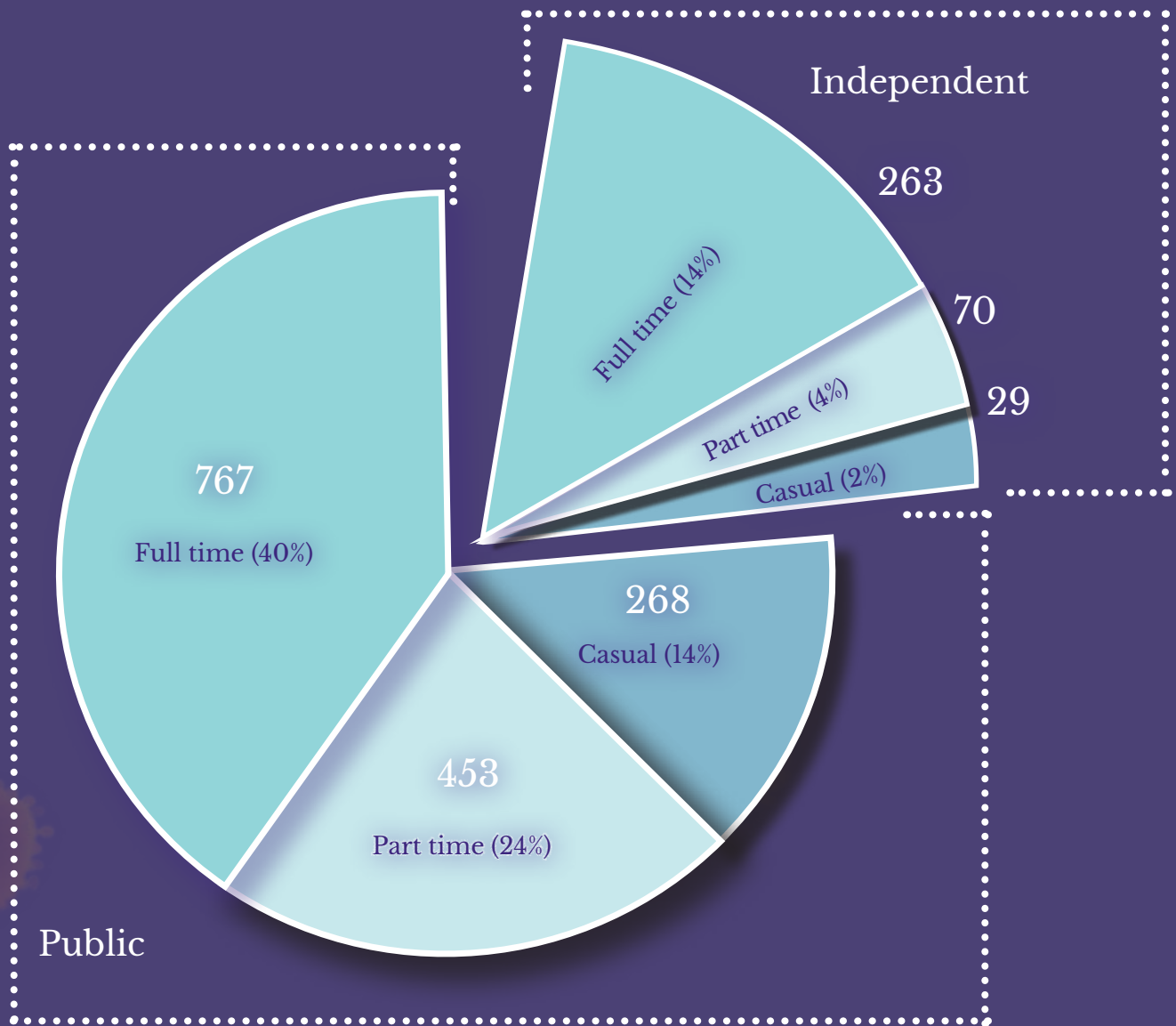
Membership Growth



New Grads



Percent working in Sector by type



Approved Examination and Education

Council Approved Examinations

Council recognizes authority pursuant with *section 3(1)(f)* of the *Act*. The Council focuses on the principles of transparency, fairness, objectivity, validity and reliability of the approved examination produced by any service provider. The Council recognizes the prescribed examination for registered respiratory therapists created by the Canadian Board for Respiratory Care (CBRC) as well as the National Board for Respiratory Care (NBRC) in the United States of America.

The decision to recognize of the NBRC registered respiratory therapist examination was originally made by the Alberta Health Disciplines Board in 1988. The registration committee has monitored the examination blueprint of the examination to make certain the knowledge domains measured are comparable to the CBRC respiratory therapist examination blueprint. The knowledge domains of the two examinations are not identical but they do meet the Canadian Free Trade definition of a high level of commonality (in excess of being 80% equivalent). The knowledge domain is essential elements of competency.

The July 2019 CBRC examination was administered without incident by Yardstick Assessment Strategies. The results of the examination and passing scores for the initial writers were all determined to be within acceptable psychometric standards.

The January 2020 examination was administered without any examination, scoring or reporting issues. The results of the examination and passing scores for the initial writers were all determined to be within acceptable psychometric standards.

Council Approved Education Programs

Section 3 of the *Act* requires the College to establish standards for registration that include approving programs of study. Currently the Council recognizes most but not all accredited education programs in Canada and the United States of America. The Council relies heavily but not exclusively on accreditation services provided by the Committee on Accreditation in Respiratory Therapy Education (CoARTE) and the new Health Standards Organization-Accreditation Canada accreditation services in Canada and the Council on Accreditation in Respiratory Care (CoARC) in the United States of America.

A number of Canadian programs not approved by the Council include the following, all campuses of College Ellis in Quebec, the College of the North Atlantic Qatar campus, College Valleyfield in Quebec, and St Clair College in Windsor Ontario. Most of the Colleges not recognized have not produced enough graduates who have successfully completed the approved examination to warrant approval by the Council.

The College of the North Atlantic respiratory therapy program ceased to exist two years ago and the Southern Alberta Institute of Technology assisted that school previously to help those students still enrolled in programming to become eligible for the approved examination. This project is now completed and it is possible Newfoundland may restart the program again in the future.

The Council also does not recognize the diploma or bachelor's degree program at Independence University in Utah as we are unable to confirm the clinical competencies graduates acquire from that program. The program at Independence University was formerly known as the California College of Health Sciences. After multiple requests made to the school for information the school failed or refused to cooperate with our registration committee.

Substantial Equivalency

Graduates from education programs not approved by the Council may apply for registration through substantial equivalency. Applicants are referred by the registrar to the registration who consider applicants on a case by case basis. The registration committee assesses the competencies the applicant possesses and not how they acquired the competencies. The committee also considers the currency of the competencies but considering the same time frame we recognize currency for registration renewal e.g. practice hours in the previous four years and professional development activities in the preceding two years.

The following are **Council Approved Education Programs** for purposes of application of the Regulation.

- Algonquin College of Applied Arts and Technology;
- Canadore College of Applied Arts and Technology;
- Cegep de Chicoutimi;
- Cegep de L' Outaouais;
- Cegep de Sherbrooke;
- Cegep de St- Foy;
- College de Rosemont;
- Community College of New Brunswick Dieppe;
- Conestoga College Institute of Technology and Advanced Learning;
- Dalhousie University School of Health Sciences;
- Fanshawe College of Applied Arts and Technology;
- La Cite Collegiale-College darts Appliques et de Technologie;
- Michener Institute of Applied Health Sciences;
- New Brunswick Community College Saint John;
- Northern Alberta Institute of Technology;
- Southern Alberta Institute of Technology;
- Southern Alberta Institute of Technology Newfoundland Campus;
- Thompson Rivers University;
- University of Manitoba School of Rehabilitation Medicine;
- Vanier College



Disciplinary Complaints



CARTA remains focused on fairness when conducting business activities and most importantly when receiving, management of and ultimately disposing complaints filed alleging unprofessional conduct by regulated members. We are noticing some trends whereby members of the public inquire to be able to file anonymous complaints about the practice of regulated members and are not really interested in the principles of natural justice related to fairness involving administrative justice. Most of these inquiries occurred early after the declaration of emergency by the provincial government in response to the novel Corona virus pandemic.

Complaints Received

The complaints director received a total of 6 complaints alleging unprofessional conduct all but one of the complaints was investigated. The complaint not investigated involved a medical condition of the regulated member. Pursuant with *section 55(2)(a)* of the *Act* the complaints director encouraged the employer(complainant) and the investigated person communicate with each other to resolve the complaint. They arrived at a satisfactory understanding involving the regulated member agreeing to have certain conditions placed on their practice permit until such time that evidence exists that the condition was no longer required.

Investigations Conducted

Five investigations were conducted pursuant with *section 55(2)(d)* of the *Act*. The first investigation involved a complaint from a regulated member about the practice of another regulated member practicing in a independent pulmonary function laboratory involving multiple infractions of the

standards for pulmonary function laboratories involving, calibration, infection prevention control, record keeping security and the quality of pediatric testing. The investigated complaint was referred to a hearing tribunal by the complaint director.

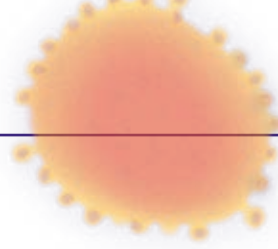
The second investigation involved a complaint from an employer about a regulated member practicing in the hyperbaric oxygen therapy service. It was alleged that the regulated member permitted prohibited potentially flammable items attached to the patient into the hyperbaric oxygen chamber. The investigation found that fortunately there was no harm experienced by the patient. The investigated complaint was referred to a hearing tribunal by the complaint director.

The third investigation involved a complaint from a former employer of a regulated member alleging unprofessional conduct in the performance of their work duties and insufficient record-keeping. The investigation also uncovered patients criticizing the regulated member in the performance of their duties. The complaints director referred the investigated matter to a hearing tribunal.

The fourth investigation involved a complaint from an employer after terminating the investigated person for conduct in the opinion of the employer to be unprofessional conduct. The matter was investigated and after reviewing the investigation report pursuant with *section 55(2) (a1)* of the *Act* the complaints director proposed to the complainant to investigated person to attempt to resolve the complaint.

The fifth investigation involved a complaint from a student enrolled in a council approved program alleging inappropriate conduct by a regulated member. The investigation is ongoing at the end of this reporting period.





Hearings

Three hearing tribunals were carried over from the previous reporting period and were convened during this reporting period.

During the first hearing the investigated person admitted to being in error of unprofessional conduct for inappropriate (sexual) online communication with their co-workers who were registered respiratory therapists and other regulated health professionals. The investigated person agreed to pay a fine of \$10,000 and \$18,000 in costs related to the investigation and hearing as well as agreeing to actively participate in group and individual counselling and provide two reports.

The second hearing involved a provisional regulated member who admitted through an agreed statement of facts to unprofessional conduct by failing to complete an employer's probationary period using improper clinical judgment and skill in the provision of health services to multiple patients.

The third hearing involved a regulated member who admitted through an agreed statement of facts to unprofessional conduct by failing to document care provided to patients and failing to comply with employer's policy and procedures, making errors in judgement and skill in the provision of professional services to patients. The regulated member agreed to successfully complete a university course in professional ethics, pay a fine of \$500 and pay \$8000.00 for investigation and hearing costs.

The fourth hearing involved a regulated member who agreed to unprofessional conduct through an agreed statement of facts. They also agreed to complete refresher courses in pulmonary function testing for pediatric patients, equipment used in pulmonary function testing and quality control. The regulated member also

agreed to pay \$10,000 for cost associated with the investigation and hearing.

The fifth hearing involved a regulated member who executed an agreed statement of facts but would not admit to unprofessional conduct. The hearing tribunal panel considered facts in the matter and found the investigated person in error of unprofessional conduct.

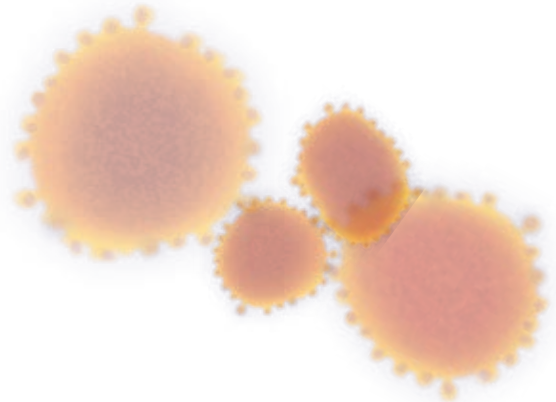
The hearing tribunal ordered the investigated person to pay a fine of \$500, two thirds of all costs up to a maximum of \$10,000 dollars, their practice permit was suspended for thirty days and a condition was placed on their practice permit that they required direct supervision when placing any patient into the hyperbaric oxygen chamber until such time the member demonstrated they were competent to the employer.

Requests for Review

No requests for review by the complainant or investigated persons of any of the five hearing tribunal decisions were received by the hearing director.

Incapacity Assessment

There were no incapacity assessments of regulated members requested by the complaint director during the reporting period this year.



Outstanding Preceptor Award and Public Member Recognition



President Karrie Whalen RRT presented the Outstanding Preceptor Award to Shauna Woods RRT

Shauna Woods RRT

Congratulations to Shauna Woods RRT who was nominated for an outstanding preceptor award! Shauna was nominated by a third-year student from the Northern Alberta Institute of Technology (NAIT) who had an exceptional clinical pulmonary function rotation at the Royal Alexandra Hospital in Edmonton. Recipients of the award receive a plaque for recognition and a \$500 allocation (no cash equivalent is issued) which is to be used towards payment of registration or tuition fees for continuing competency or professional development activities.

The outstanding preceptor award is presented to a regulated member who helps students optimize their learning in the clinical practice setting. The criteria for the recipient of the award include the following:

- *be a current CARTA member in good standing who works in an environment that provides clinical experiences for students;*
- *be a Registered Respiratory Therapist, currently preceptoring in a clinical setting, who exemplifies the qualities of an outstanding preceptor through elevation of the student's learning experience and their understanding of the practice of Respiratory Therapy;*
- *have directly supervised the nominator for at least 1 full clinical shift prior to nomination;*
- *not be a CARTA Council member, CARTA employees, or a SAIT/NAIT employee.*

Dr. Raja Singh, Public Member

Public member Dr. Raja Singh PhD received a CARTA team jacket presented by president, Karrie Whalen RRT. It is tradition that public members receive a team jacket after serving on council after their first year of their three-year term of appointment by the Health Minister. The inaugural team jacket presentation was originally presented to Patrick Litwin RRT at the 1998 Annual General Meeting by then president, Gerald Spence and the tradition has continued ever since.

The team jacket is a symbol of service to protecting the public through regulation of the profession. The team jacket is also presented to the Outstanding Service Award recipients for their service to protecting their patients, protecting the public, service to the profession and service to their community.



Dr. Raja Singh was presented with a CARTA team jacket.

Outstanding Therapist Recognition

Diane Gauvreau RRT, MEd

Ms. Diane Gauvreau is a faculty member and former associate chair at the Northern Alberta Institute of Technology (NAIT) respiratory therapy program. She was unable to attend the annual general meeting (AGM) to receive her award, however, her employer organized an event where the registrar was able to attend the event in November and present the framed certificate and team jacket she would have received at the AGM.

Diane graduated from the NAIT in 1984 and began her career at the bedside of patients at the Misericordia Hospital. She received promotions to intensive care supervisor and assistant manager over time and after nine years she then became a faculty member at NAIT in 1993. Throughout her distinguished twenty-six year career at NAIT she held a variety of roles including faculty member and associate chair of the respiratory therapy program.

She helped the program maintain full accreditation status and also introduced multiple iterations of the entry to practice competency profile for Respiratory Therapists. Diane's distinctive excellence in teaching patient assessment competencies will always be valued. She has taught over 1,200 students these competencies throughout her career as well as portraying leadership, compassion and dedication.



Steve Avramovic RRT

Thirty years ago Steve Avramovic began his career like most young RRTs in shiftwork covering acute care, ICU, NICU, and outpatients in Medicine Hat. He was placed into a leadership position early in his career for displaying leadership in developing preventative medicine and rehabilitative programs. Steve was one of the few RRTs at that time to train in polysomnography and received a certificate in cardiac exercise specialty from the Hammons Heart Institute.

He later moved his family to Vermillion to pursue community respiratory practice in a rural setting.

Upon arrival he noticed significant discrepancies in support and wages compared to Medicine Hat. Not only was Vermillion not unionized, but the entire former east central zone did not have any union representation for allied health professionals in 1999! The operational leaders were not interested in fair treatment for allied health professionals and preferred to continue to loosely follow an AUPE out-of-scope model.

Once again Steve displayed leadership not only for his respiratory therapy counterparts in the zone, but for all allied health professionals. He contacted the labor relations office, assembled a local membership, and coordinated a vote which ultimately resulted in allied health becoming unionized with HSAA.

Steve made significant contributions to community care in respiratory therapy. Steve's approach to preventative and rehabilitative respiratory medicine was such a success in the former east central authority that his model of care was endorsed provincially and remains the standard of care for rural community Respiratory Therapists today.

Independent Auditor's Report

To the Members of College and Association of Respiratory Therapists of Alberta

Opinion

We have audited the financial statements of College and Association of Respiratory Therapists of Alberta (the College), which comprise the statement of financial position as at January 31, 2020, and the statements of revenues and expenses, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at January 31, 2020, and the results of its operations and cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO).

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the College in accordance with ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matters

The financial statements for the year ended January 31, 2019 were audited by another professional accountant who expressed an unmodified opinion on those financial statements on June 7, 2019.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with ASNPO, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. *(cont'd)*

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

June 29, 2020

Mahmud Khalfan

Khalfan Professional Corporation

Chartered Professional Accountants

601, 1701 Centre St NW,

Calgary, Alberta, T2E 7Y2,

Phone: (403) 265-TAXS(8297)

Fax: (866) 431-9320

Statement of Financial Position

ASSETS

Current	2020	2019
Cash and cash equivalents	\$ 65,498	\$ 341,153
Short-term investments - restricted (Note 5)	154,920	90,105
Short-term investments	1,065,095	686,176
Interest receivable	6,652	5,927
Prepaid expenses	20,572	15,721
	\$ 1,312,737	\$ 1,139,082
Capital Assets (Note 6)	13,947	10,199
Intangible Assets (Note 7)	17,200	21,517
Long Term Investments (Note 5)	545,080	609,895
	\$ 1,888,964	\$ 1,780,693

LIABILITIES

Current	2020	2019
Bank indebtedness (Note 8)	\$ 4,790	\$ 3,376
Accounts payable and accrued liabilities	13,555	19,541
Payroll liabilities	6,210	5,916
Wages payable	11,512	3,370
Unearned revenue (Note 9)	152,178	192,189
	\$ 188,245	\$ 224,392

NET ASSETS

	2020	2019
Unrestricted	\$ 969,572	\$ 824,585
Restricted (Note 10)	700,000	700,000
Invested in capital assets	31,147	31,716
	1,700,719	1,556,301
	\$ 1,888,964	\$ 1,780,693

The accompanying notes are an integral part of these financial statements

Statement of Revenue and Expenses

Revenue	2020	2019
Membership	\$ 800,748	\$ 772,840
Cost Recovery - conduct	49,519	13,000
Interest	29,025	24,742
Web Advertising	1,350	3,300
Other	1,141	1,899
	\$ 881,783	\$ 815,781
Operating Expenses	2020	2019
Investigations and conduct (Note 12)	\$ 165,471	\$ 215,142
Accommodations, travel and parking	36,013	38,318
Professional Development (Note 11)	24,427	9,363
Meals	11,376	15,263
Speakers	-	12,075
Memberships	10,502	6,425
Printing and design (Annual Report)	9,532	8,872
Consulting, supplies and other	4,868	2,670
Telephone	2,364	2,657
Awards, certificates and diplomas	1,875	2,405
	\$ 266,428	\$ 312,596
Administration Expenses	2020	2019
Wages and benefits	\$ 277,241	\$ 273,656
Advertising, promotion and website	60,803	58,123
Rent	45,764	46,083
Amortization of intangible assets	19,917	20,635
Professional fees	18,716	18,926
Interest and bank charges	18,087	17,566
Office and general	14,758	21,349
Memberships and subscriptions	7,917	6,592
Amortization of capital assets	4,213	3,440
Insurance	2,725	2,033
Training	796	6,490
	\$ 470,937	\$ 474,893
	\$ 737,365	\$ 787,489

The accompanying notes are an integral part of these financial statements

Financial Report

EXCESS OF REVENUE OVER EXPENSES	\$ 144,418	\$ 28,292
OTHER INCOME (EXPENSES)		
Gain or (Loss) on disposal of assets	-	(927)
Excess of revenue over expenses	\$ 144,418	\$ 27,365

NET ASSETS	Unrestricted	Restricted	Invested in Capital Assets	2020	2019
BEGINNING OF YEAR	\$ 824,585	\$ 700,000	\$ 31,716	\$ 1,556,301	\$ 1,528,936
Excess of revenues over expenses	168,548)	-	(24,130)	144,418	27,365
Investment in capital assets	(23,561)	-	23,561	-	-
END OF YEAR	\$ 969,572	\$700,000	\$ 31,147	\$ 1,700,719	\$ 1,556,301

The accompanying notes are an integral part of these financial statements

Statement of Cash Flow

Operating Activities	2020	2019
Cash receipts from membership dues and cost recovery	\$ 810,400	\$ 852,744
Cash paid to suppliers and employees	(714,221)	(749,522)
Interest received	28,300	25,855
Other cash receipts	2,346	5,050
CASH FLOW FROM OPERATING ACTIVITIES	\$ 126,825	\$ 134,127

Investing Activities	2020	2019
Purchase of capital assets	\$ (7,961)	\$ (2,779)
Purchase of intangible assets	(15,600)	(20,400))
Purchase of investments	(378,919)	220,791
CASH FLOW FROM (USED BY) INVESTING ACTIVITIES	\$ (404,480)	\$ 197,612

INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS \$ (275,655) \$ 331,739

CASH - BEGINNING OF YEAR \$ 341,153 \$ 9,414

CASH - END OF YEAR \$ 65,498 \$ 341,153

The accompanying notes are an integral part of these financial statements

Notes

1. NATURE OF ORGANIZATION

The College and Association of Respiratory Therapists of Alberta (“the College”) is a self-governing professional organization established for the certification and governance of respiratory therapists in Alberta. It is a not-for-profit organization and as such is not subject to federal or provincial taxes under *section 149(1)* of the *Income Tax Act*.

2 BASIS OF PRESENTATION

The financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO) on a going concern basis that assumes that the College will be able to realize its assets and discharge its liabilities in the normal course of business.

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Cash and cash equivalents

Cash and cash equivalents include amounts on deposit with financial institutions, bank overdrafts that can fluctuate from being positive to overdrawn, and term deposits that mature within three months from the date of acquisition. Cash and cash equivalents include restricted cash on deposit with financial institutions.

Revenue recognition

The College recognizes its revenue on a deferral basis and earns most of its revenue from fees to its members and advertising. Revenue is recognized when fees are collected or collection is reasonably assured.

Restricted grants are recognized on a deferral basis and recognized as revenue in the year the related expenses are incurred.

Short-term investments

The College reports its investments at cost and consists of the cash value of guaranteed investment certificates. Short-term investments consist of guaranteed investment certificates with maturities of less than 12 months. Long-term investments consist of guaranteed investment certificates with maturities of greater than one year. Cost approximates market value.

Volunteer contributions

Volunteers contribute a significant number of hours per year to assist the College in carrying out its service delivery activities. Due to the difficulty of determining their fair value, contributed services are not recognized in the financial statements.

Capital assets

Purchased capital assets are recorded at cost. Amortization is recorded at the following rates and methods, which have been established by estimates of useful lives. Assets with a declining balance, that have additions during the current year, are amortized at one-half their normal rates, and no amortization is taken in the year of disposition.

Computer hardware	45% declining balance
Furniture	20% declining balance
Office Equipment	20% declining balance

The accompanying notes are an integral part of these financial statements

Notes

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Intangible assets

Purchased intangible assets are recorded at cost. Amortization is recorded at the following rates, which have been established by estimates of useful lives as follows:

Website	3 years straight line method
Computer software	2 years straight line method

Financial instruments

Financial assets and liabilities are measured initially at fair value. Subsequent measurement is at amortized cost. Changes in fair value are recognized in net income.

Financial assets measured at amortized cost consist of cash, term deposits, GIC investments and accounts receivable.

Financial liabilities measured at amortized cost consist of the bank overdraft, accounts payable, accrued liabilities and wages payable.

The College assesses impairment of all its financial assets measured at cost or amortized cost. When there is an indication of impairment, the College determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the year. If so, the College reduces the carrying amount of any impaired financial assets to the highest of: the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets; and the amount expected to be realized by exercising any rights to collateral held against those assets. Any impairment loss is recognized in the statement of revenues and expenses.

Measurement uncertainty

When preparing financial statements according to Canadian accounting standards for not-for-profit organizations, management makes estimates and assumptions that affect the reported amounts of revenues and expenses during the year, the reported amounts of assets and liabilities at the date of the financial statements, and the disclosure of contingent assets and liabilities at the date of the financial statements. Management bases their assumptions on a number of factors including historical experience, current events, actions that the College may undertake in the future, and other assumptions believed reasonable under the circumstances.

Material measurement uncertainties include estimates of useful lives of capital assets and impairment of long lived assets and accrued liabilities. Actual results could differ from the estimates; the resolution of these uncertainties will be determined by future events.

4. SHORT TERM INVESTMENTS

The short term investments consist of guaranteed investment certificates maturing within one year earning interest of .35% to 2.9% (2019- .35% - 2.6%). The cost approximate the market value.

The accompanying notes are an integral part of these financial statements

Notes

5. RESTRICTED INVESTMENTS

The use of these investments are restricted - see note 10. The short-term investments consist of guaranteed investment certificates maturing within one year earning interest of 0.35% to 2.1%. Investments consist of guaranteed investment certificates, with various maturity dates from April 2020 to May 2022, earning interest of 1.25% to 2.9% per annum. The cost approximates the market value.

	2020	2019
Long-term investments - Restricted	\$ 545,080	\$ 609,895
Short term investments - Restricted	154,920	90,105
	\$ 700,000	\$ 700,000

6. CAPITAL ASSETS

			2020	2019
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Computer hardware	\$ 17,173	\$ 10,815	\$ 6,358	\$ 2,178
Furniture and equipment	23,832	16,243	7,589	8,021
	\$ 41,005	\$ 27,058	\$ 13,947	\$ 10,199

7. INTANGIBLE ASSETS

	2020	2019
Website	\$ 100,701	\$ 85,101
Computer Software	580	580
	101,281	85,681
	(84,081)	(64,164)
Accumulated amortization	\$ 17,200	\$ 21,517

8. BANK INDEBTEDNESS

The College has a credit card with a limit of \$25,000 and an annual interest rate 19.99%. The College pays the outstanding balance of the credit card at the end of each month. As at January 31, 2020 the balance was \$4,790 (2019- \$3,376).

The accompanying notes are an integral part of these financial statements

Notes

9. UNEARNED REVENUE

Membership dues are collected in January, February and March for the period of April 1 to March 31. As at January 31, two months of the services have not been provided for the membership dues and is deferred.

	2020	2019
Deferred Revenue - Memberships	\$ 148,503	\$ 188,851
Deferred Revenue - New Grads	3,675	3,3385
	\$ 152,178	\$ 192,189

10. RESTRICTIONS ON NET ASSETS

With respect to the net assets of the College; funds will be reserved specifically for the following amounts and purposes:

\$350,000 for business continuation purposes in the event of a public health emergency such as an influenza pandemic or other such event that could potentially jeopardize normal day to day business operations for an extended time-frame;

\$200,000 for maintenance of a psychometrically reviewed competency profile for entry to practice into the profession;

\$150,000 for maintenance of a psychometrically reviewed registration examination practice into the profession

11. PROFESSIONAL DEVELOPMENT

	2020	2019
Conduct committee	\$ 20,023	\$ 6,926
Executive Director	2,172	1,734
Council committee	1,670	120
Deputy Registrar	562	583
	\$ 24,427	\$ 9,363

12. INVESTIGATIONS AND CONDUCT

	2020	2019
Investigations into conduct	\$ 100,761	\$ 109,005
Legal fees associated with conduct hearings	64,710	106,137
	\$ 165,471	\$ 215,142

The accompanying notes are an integral part of these financial statements

Notes

13. LEASE COMMITMENTS

The College has entered into the following leases:

- 1) In July 2015, a five year lease for storage requiring annual lease payments of \$1,860 plus GST.
- 2) In November 2015, a six year lease for office premises and storage requiring monthly lease payments of \$1,688 (which increased to \$1,781 in November 2019) plus GST.
- 3) Additional operating costs are also payable. Operating costs for the current year were \$20,000. The following consists of the remainder of the lease payments:

2021	\$	22,147
2022		16,029
	\$	<u>38,176</u>

14. FINANCIAL INSTRUMENTS

The College can be exposed to various risks through its financial instruments. The College's financial instruments in the statement of financial position consist of cash, accounts receivable, marketable securities, accounts payable and accrued liabilities. It is management's opinion that the College is not exposed to significant credit, currency, interest rate, liquidity, or market risk arising from these financial instruments. The fair value of these instruments approximate their carrying value.

Credit risk arises from the potential that a counter party will fail to perform its obligations. The College's main credit risks relate to its accounts receivable.

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The College is exposed to this risk mainly from its accounts payable.

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk: currency risk, interest rate risk and other price risk. The College is mainly exposed to interest rate risk, as described above. Market risks are managed by the application of an approved investment policy that restricts the nature of the investments held.

Subsequent to year end, the College's credit, liquidity and market risk have increased due to the possible delays in the collection of funds from customers.

Notes

15. COMPARATIVE FIGURES

In the prior year comparatives, some of the figures on the statement of operations have been reclassified to conform with the current year's presentation. Figures for the January 31, 2019 year-end were audited by another professional accountant.

16. SUBSEQUENT EVENTS

On March 17, 2020, the Government of Alberta declared a public health emergency in response to the Covid-19 pandemic. The global pandemic has disrupted economic activities and supply chains. Although the effect of the Covid-19 pandemic is expected to be temporary, given the dynamic nature of the circumstances, it may have an impact on some of the revenue streams and expenses of the College.

The College is closed for public access however continues to function remotely and continues to provide services to employers, members, the public, Alberta Health and the Chief Medical Officer of Health's office. The overall financial impact of this pandemic on the College cannot be reasonably estimated at this time.

The accompanying notes are an integral part of these financial statements

Management Discussion of Finances

Management's Discussion and Analysis of Financial Statements

2019-20 was another year where the organization acted as stewards of the financial resources and realized a modest surplus (\$144,418) after all business was conducted during the fiscal year. Our primary revenues remain to be membership including applications for registration, interest from low risk investment certificates, conduct cost recovery associated with paying orders for investigation and hearing costs and web-site advertising. There was no educational symposium this year and as such no revenues were realized.

Our largest cost remains to be administrative expenses with wages and benefits for employees followed by conduct investigation and hearing costs, web-site, promotion and advertising being the major expenses. Of our administrative expenses insurance is increasing. Insurance rates are reflective of general industry increases and not any added risks associated with our business or organizational practices.

Many of our administrative expense increases are associated with provision of our core business services to members and this reflects an organic net growth in membership. We are pleased to note that from a 2019 survey conducted by the Alberta Federation of Regulated Health Professions the \$425.00 practice permit fee is the third lowest in the province amongst all regulated health professions and the lowest for an organization with our size in membership.

You will note that our operating expenses (\$266,428) were significantly lower than the year previous with further opportunity for improvement in performance with respect to complaint investigations and hearing. Our Hearings Director has been scheduling back to back hearings on the same day or consecutive days in attempt to contain hearing tribunal and legal costs.

Professional development expenses were higher this year and were associated with education for our hearing tribunal professional members as well as administrative justice education for council members who convene appeals of both disciplinary hearings as well as registration decisions. With no symposium this year there were no speaker costs.

Our dependence on some volunteerism by council and committee members continues to serve us well. This is our 19th consecutive year of realizing a modest surplus in our business operations for which we can all be proud.

Special acknowledgement should be paid to our bookkeeper, Ms. Lynda Baker. We are very grateful for all of her efforts to help manage internal controls regarding finances on behalf of regulated members.

2020 AGM AGENDA

Annual General Meeting of the Regulated Members of the College and Association of Respiratory Therapists of Respiratory Therapists of Alberta

Proposed Agenda (*subject to change*)

TO BE HELD VIRTUALLY VIA ZOOM

1. 2019-01 Declaration of quorum pursuant with the corporate bylaws *section 5.6.1.*
2. 2019-02 Introduction of Current Council Members and Past Presidents in attendance.
3. 2019-03 Appointment of Scrutineers to count on all voting matters.
4. 2019-04 Approval of Meeting Agenda Items.
5. 2019-05 Announcement of the Outstanding Service Award Recipient.
6. 2019-06 Receipt of the Minutes of the 2019 Annual General Meeting of Regulated Members.
7. 2019-07 Business arising from minutes of 2019 Annual General Meeting.
8. 2019-08 To receive the Report of the Directors and Officers for the year ending March 31st, 2020 including the Independent Auditors Report for the fiscal year ending January 31st, 2020.
9. 2019-09 To Discuss recent legislative amendments impacting the profession
10. *Bill 30* movement from self-regulation to shared regulation & more private health care.
11. *Fair Registration Practices Act* (paramount legislation).
12. *Labour Mobility Act* (paramount legislation).
13. *Health Professions Act* possible amendment to separate Association activities from College.
14. 2019-10 Announcement of Outstanding Preceptor Award Recipients.
15. 2019-11 Council Election Results for three directors at large.
16. 2019-12 Discuss other Business as Properly Brought Before the Meeting.

