

### CMRITO's Complaints Process Frequently Asked Questions

The College of Medical Radiation and Imaging Technologists of Ontario (CMRITO) is the regulatory body for medical radiation and imaging technologists (MRITs) in the province of Ontario.

As regulated health professionals, CMRITO registrants are accountable to their patients and the public to provide safe, effective, and ethical medical radiation and imaging technology services.

The following information is meant to help members of the public understand the College's complaints process.

### Who are CMRITO registrants and what services do they do?

CMRITO registrants are qualified medical radiation and imaging professionals who use ionizing radiation, electromagnetism, and soundwaves to produce diagnostic images of a patient's body or who administer radiation to treat patients for certain medical conditions, such as cancer.

The images acquired by CMRITO registrants are used by other authorized health professionals to make a diagnosis. Diagnostic imaging services that registrants may provide include:

- X-ray
- CT (computed tomography) scanning
- mammography
- fluoroscopy
- MRI (magnetic resonance imaging)
- nuclear medicine
- ultrasound (general, cardiac, and vascular)

CMRITO registrants may only perform procedures ordered by a physician or other authorized health professional. For diagnostic imaging procedures, this "order" is often called a requisition. A patient will most likely receive an order from their family doctor, a specialist, or an emergency room physician, although other regulated health professionals are also authorized to order certain procedures in certain circumstances.

### I have a concern about the way I was treated by an MRIT. What can I do?

If you feel a CMRITO registrant has not treated you in a professional manner, you may wish to:

- discuss your concerns directly with the registrant, their supervisor, or the health professional who ordered your diagnostic or therapeutic procedure
- contact the hospital's Patient Relations Department, if the incident occurred at a hospital
- contact facility management, if the incident occurred at a community surgical and diagnostic centre or a cardiology clinic
- contact the police, depending on the nature of your concern

Whether or not you pursue any of the options above, you can always contact the CMRITO – the regulatory body for the medical radiation and imaging technologist who performed your diagnostic or therapeutic procedure.

If you feel your complaint should be investigated by the College, you must submit a formal complaint in writing (by mail or email).

If you would like assistance, CMRITO staff are available by phone to take a statement for you that you can review and sign.

### I have decided to submit a complaint to CMRITO. What should the complaint include?

A formal complaint should include:

- a statement that explicitly states that you are making a complaint against a registrant
- the name(s) of the registrant(s) involved (if known to you)
- a description of your specific concern(s), including:
  - the date and time the incident occurred
  - the location where the incident occurred (i.e. the name of the hospital, community surgical and diagnostic centre, or cardiology clinic)
  - the patient's name, if you are not the patient
  - as many details about the incident as possible
  - your name, mailing address, telephone number, email address, and communication preference (either mail or email)

If you do not know the name of the registrant who performed your procedure, do not worry. This is common. Since patients are issued a requisition for a procedure, not referred to a specific medical

radiation and imaging technologist, they may not have a record of the name of the individual who performed the procedure. CMRITO staff can assist you in identifying the CMRITO registrant who performed the procedure, if you consent to proceed with CMRITO's complaints process.

Once a complaint is received, CMRITO will send you a formal letter that includes a consent form that must be signed and returned to proceed with the complaint. This form authorizes the release of the complainant's (or patient's) personal health information to CMRITO to assist with the investigation. It also confirms that you understand that CMRITO will notify the registrant involved and provide them with a copy of the complaint.

### The incident happened many years ago. Can I still file a complaint with the CMRITO?

There is no time limit on filing a complaint, but it is a good idea to file a complaint as soon as possible after the incident occurs. The earlier a complaint is filed, the more likely that relevant documentation, medical information, and witnesses will be available.

If, however, the registrant involved in the incident was not a registrant of the CMRITO when the incident occurred, the CMRITO does not have the jurisdiction to investigate.

The CMRITO only has jurisdiction to investigate complaints received about CMRITO registrants. As a result, if a complaint is received about conduct that occurred before an individual became a registrant, that complaint cannot be investigated in accordance with the complaints process set out in the *Regulated Health Professions Act, 1991*.

For example, the CMRITO commenced regulating diagnostic medical sonography on January 1, 2018. Effective January 1, 2019, registration with the CMRITO was mandatory for an individual to practise as a diagnostic medical sonographer in Ontario and to apply soundwaves for diagnostic ultrasound. If the incident pre-dates the time the individual became a registrant of the CMRITO, the College cannot investigate that complaint.

### I am unsure about my concern. Can you let me know if my concern is valid?

The role of CMRITO staff is to assist complainants and registrants in understanding the CMRITO's complaints process and to offer administrative and advisory support to the ICR Committee. As a result, CMRITO staff are not able to advise complainants about the validity of their complaint. However, CMRITO staff can explain the common types of complaints received by the College and can review the Standards of Practice with you.

Each year, the CMRITO reports on its activities to the Minister of Health, the public of Ontario, and its registrants in the form of an Annual Report. The Annual Report also includes an overview of the kinds

of complaints the CMRITO receives, organized by Practice Standard. You can view the Annual Reports on our website here.

### Do I need a lawyer to file a complaint?

No. As a complainant, you do not need a lawyer to participate in the complaints process, although you may retain one if you choose.

While CMRITO staff can assist you in understanding the process used by the ICR Committee in investigating complaints, they cannot provide you with legal advice.

# I do not want the registrant to know that I have filed a complaint against them. Will they see the complaint?

Yes. The CMRITO is legally required to send a copy of any complaint received to the registrant identified as being involved within 14 days of the date on which the complainant is confirmed. In cases where the complainant knows the name of the registrant involved, the confirmation date is the date on which the complainant's consent form is received. If the name of the registrant is unknown, the confirmation date is the date on which the registrant is identified (with the complainant's consent to do so).

### Why can't I remain anonymous?

The complaints process requires the complainant to be named. This is because the complainant and the registrant are both parties to the complaints process. While the CMRITO does accept anonymous information, that information is not considered a formal complaint. An individual who provides an anonymous report to CMRITO is not a party to the review of that information. They are therefore not provided with updates and are not advised of the outcome.

# *I have submitted a written complaint to the College and returned a signed consent form. What happens next?*

Once a formal complaint is received, if the name of the registrant is unknown, CMRITO staff work with the facility to identify the registrant involved in the incident. Once the registrant involved in the complaint is identified, they are provided with the opportunity to respond to the complaint in writing. They have 30 days to do so. An extension may be granted. When the registrant's response is received, it may be provided to the complainant for comment and reaction.

Once these documents are collected, the file is referred to the ICR Committee who directs the investigation of the complaint. This could include requesting additional information from the facility, the parties, and/or witnesses.

The ICR Committee may also decide not to investigate a complaint because it is frivolous or vexatious. Before doing so, the ICR Committee is required to provide the parties with the opportunity to make submissions.

The investigation of complaints takes time. According to the RHPA, complaints must be concluded within 150 days. If the 150-day deadline is not met, the CMRITO is required to send a notice to the complainant and the registrant. Another notice is required to be sent if the complaint is not concluded within 210 days. Any concerns regarding a delay can be sent to the Health Professions Appeal and Review Board (HPARB), an independent body.

The information gathered during the investigation is carefully reviewed by the ICR Committee. The ICR Committee will consider the seriousness of the issues raised, along with any previous decisions made involving the registrant.

Based on this information, the ICR Committee decides what action to take.

The complainant and the registrant each receive a copy of the ICR Committee's decision and reasons.

### How does the ICR Committee decide on the appropriate outcome?

First, the ICR Committee considers whether to refer allegations of professional misconduct to the Discipline Committee or whether some other action is appropriate.

In deciding on the appropriate outcome, the ICR Committee completes a risk assessment. This involves considering whether the allegations raise a "risk of harm" and, if so, the level of risk involved. The various risk levels, and their corresponding outcomes, are set out in the table below.

No Risk	Minimal Risk	Low Risk	Moderate Risk	High Risk

Risk of Harm	Definition	Outcome	Public
None	If there is no risk harm, the registrant's actions were appropriate.	No action	No
Minimal	If there is a minimal risk of harm, the registrant's actions were appropriate and/or facts cannot be verified and disputed facts cannot be resolved.	No action	No

Low	If there is a low risk of harm, there is no conduct that is serious in nature, there is no indication of a pattern of conduct, and the conduct at issue is unlikely to have a direct impact on patient care, safety, or the public interest. However, there is an opportunity for the registrant to improve their practice.	Advice, recommendations, and/or reminders	No
Low	If there is a low risk of harm, there is no indication of a pattern of conduct and the conduct at issue is unlikely to have a direct impact on patient care, safety, or the public interest. The registrant demonstrates insight and reflection and agrees to improve their practice.	Remedial Agreement	No
Moderate	If there is a moderate risk of harm, there is a significant concern about the registrant's conduct or care of the patient. The registrant needs to upgrade their skills or change their practice. If the concern is remedial, it is best addressed through education. Given the risk of harm to patient care, safety, or the public interest, timely improvement is required.	Specified Continuing Education and Remediation Program (SCERP)	Yes

Moderate	If there is a moderate risk of harm, there is a single egregious episode or a pattern of conduct that can have a direct impact on patient care, safety, or the public interest. The registrant is capable of improvement, and the conduct is best addressed through advice. Although timely improvement is needed, there is no need to act to remove or restrict a registrant's right to practice the professional of medical radiation technology.	Oral Caution	Yes
Moderate	If there is a moderate risk of harm, the conduct reflects a significant concern about a registrant's conduct or care that can have a direct impact on patient care, safety, or the public interest. The registrant is required to upgrade their skills to address the concern.	Acknowledgement & Undertaking	Yes
High	If there is a high risk of harm, the conduct reflects a serious concern regarding significant issues in the registrant's misconduct, including sexual abuse or incompetence. The concern(s) raised by the conduct warrant(s) referral and the evidence is sufficient to support the referral.	Referral to Discipline	Yes

As you can see from the table, the more serious outcomes are designated as "public" by the legislation that governs CMRITO's complaints process and are required by law to be posted to a registrant's public register profile where they remain indefinitely.

### What happens at a discipline hearing?

If specified allegations are referred to the Discipline Committee, the committee holds a hearing. Hearings are open to the public. Complainants may be asked to testify at the hearing.

At the hearing, a panel of the Discipline Committee will consider the allegations, hear evidence, and determine the facts of the case. The Panel will decide whether the allegations are proven based on the evidence, determine if the registrant committed an act or acts of professional misconduct or is incompetent, and determine the appropriate penalty.

Only the Discipline Committee has the power to make a finding of professional misconduct or incompetence against a registrant.

## *I expected my complaint to be referred to the Discipline Committee for a hearing, but it wasn't. Why?*

The reasons for each decision are unique and are set out in the written decision issued by the ICR Committee. Matters referred to the Discipline Committee involve serious allegations of professional misconduct or incompetence that represent a high risk of harm.

#### I don't agree with the ICR Committee's decision. What can I do?

Both the complainant and the registrant have a right to request a review by HPARB if they disagree with the decision of the ICR Committee.

HPARB is an independent adjudicative agency that reviews the decision to ensure that the investigation of the complaint was adequate, and that the decision was reasonable.

Requests for review must be received within 30 days of the date on which the complainant and the registrant were advised of the Committee's decision. Information about how to request a review is set out in the letter that accompanies the Committee's decision.

# *My* complaint involves allegations of sexual abuse. *Am* I eligible for funding for therapy and counselling?

If your complaint includes an allegation of sexual abuse, you may be eligible for funding for therapy and counselling.

Funding is administered by the CMRITO's Patient Relations Committee. The Patient Relations Committee advises Council on the patient relations program and other matters related to enhancing the relationship between the public and registrants. The Committee also administers the CMRITO's program for funding for therapy and counselling for eligible persons (eligibility requirements are set out in legislation).

The CMRITO is required to provide funding for therapy and counselling under Ontario's *Regulated Health Professions Act, 1991*. Successful applicants can use the funding to see a therapist or counsellor of their own choosing. Certain restrictions do apply.

If you would like more information, wish to apply for this funding, or require other assistance, please contact the CMRITO.

# *I am considering filing a lawsuit. Can the information collected during the investigation of my complaint be used in court?*

No. Information obtained through College processes is not admissible in a civil proceeding.

### Are there things that the ICR Committee cannot do?

The Committee cannot:

- · award financial compensation
- make a registrant apologize
- investigate complaints that are outside its jurisdiction
- · investigate anonymous complaints

### *My* complaint is about a diagnostic procedure, but not about the actions of a CMRITO registrant. Who should I contact regarding my concerns?

If your concern does not involve the actions of a CMRITO registrant but rather the administrative processes or policies at the registrant's place of employment, the issue is outside the jurisdiction of the College. This means that the College does not have the legal authority to investigate your concern.

If your concern involves the administrative processes or policies of a hospital, you may wish to contact the hospital's Patient Relations Department or its equivalent. You may also wish to contact the Patient Ombudsman.

If your concern involves the administrative processes or policies of a clinic (also known as a "community surgical and diagnostic centre") in Ontario, you can contact the centre directly or the Patient Ombudsman. A listing of community surgical and diagnostic centres is available online through the Ministry of Health's Integrated Community Health Services Centres Program.

If your concern involves the collection, use, or disclosure of your personal health information, you may wish to contact the Information and Privacy Commissioner of Ontario.

CMRITO staff often receive information from members of the public who wish to file a complaint about a radiologist. CMRITO does not regulate radiologists. A radiologist is a medical doctor who specializes in diagnosing and treating disease. A radiologist reads/interprets images taken during a diagnostic procedure and makes a diagnosis. Surgeons and other medical specialists rely on a radiologist's report to help determine a course of treatment for their patients.

If your complaint is about a radiologist, you can register your concern with the College of Physicians and Surgeons of Ontario (CPSO).

CMRITO staff are available by phone and email to assist members of the public in understanding the processes used by the ICR Committee to investigate complaints regarding the conduct of medical radiation and imaging technologists. For more information, please contact a member of our Professional Conduct Team at 416.975.4353, 1.800.563.5847 or by email at professionalconduct@cmrito.org.

