

# Trends in Complaints and Reports



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Since 1994, there have been a total of 40 complaints and reports made about College members.

*At times, RDs ask me about the nature of complaints made to the College and what happens to them. What follows is a retrospective on complaints and reports received by the College and a highlight of trends since 1994. This information is complemented by an article about College investigations prepared by Dean Benard, the College's Investigator and Case Manager (page 6).*

Complaints and reports come from a variety of sources: the public, RDs, colleagues, and employers (Table 1). Some reports are made by RDs themselves, either through the annual declaration on their renewal form or voluntarily because they believe they did something that others may perceive as unprofessional or unethical.

Table 1 Source of Complaint/Report	Number
Public	13
Dietitian	2
Employer (mandatory reports upon termination or suspension)	14
Self-report	3
Registrar	8 (5 were related to non-compliance with QA program requirements)
<b>TOTAL</b>	<b>40</b>

## REGISTRAR'S ROLE

As Registrar, I make formal reports to the Executive Committee when I have reason to believe that an RD has committed an act of professional misconduct or is incompetent. When an investigation is needed, which involves getting access to information and interviewing people, I make a recommendation for the appointment of an investigator. The investigator's report is presented to the Executive or Complaints Committee, depending on the case.

Since 1994 (the College was created in December 1993), there have been a total of 40 complaints and reports (Table 1, above). Six of the reports made to the College did not go forward to the Executive Committee because it was the Registrar's belief that the information gathered did not support the notion that the RD had committed an act of professional misconduct or was incompetent.

## NATURE OF THE COMPLAINTS AND REPORTS

In the history of the College, there have been only two matters taken to a discipline hearing. In both matters, the RDs admitted professional misconduct. Presently, there is one matter awaiting a Fitness to Practice Hearing to determine whether the RD is incapacitated to the extent that the public's interest would be served if she received some structured assistance or supervision or other action.

Table 2, below, shows the nature of complaints and reports handled by the College since 1994. Note that the total for issues is higher than the 40 complaints and reports received because there are often multiple issues raised within one complaint or report.

<b>Table 2: Nature of complaints and reports since 1994</b>	<b>Frequency</b>
Standard of care — concerns about assessments and treatments	12
Conduct related to relationships and communications including patient/RD professional boundary issues	12
Documentation/charting	6
Other conduct — driving offence, failing to report, practicing while suspended and falsifying a document	6
Compliance with the QA program obligations	5
Workload related issues	5
Breach of confidentiality — accessing the electronic record of patients who were not the RDs' client and inadvertent breaches of confidential information	4
Conduct related to misleading or biased information	4
Business practices — concerns about billing, soliciting clients and asking clients to invest in the business	2
Fitness to practice	1

### TRENDS

Table 3, below, shows a sustained increase in the number of reports and complaints since 2003. Particularly, there has been an increase in the number of complaints and reports from long-term care facilities: 7 since 2002, but 3 in 2007

alone. Only two complaints from the long term care sector were from family members and were about standards of care. Workload and relationship issues were factors underpinning the other complaints and reports.

A reason for the increase in complaints or reports is that dietitians are more aware of their mandatory reporting obligation. Members of the public do not frequently complain about RD services.

### TRANSPARENCY

The College is pleased to share aggregate data about complaints and reports. We use the experiences from RDs who have been the subject of complaints and reports as well as information from our practice advisory service to inform activities such as the development of education materials for RDs. The *Regulated Health Professions Act* (RHPA) specifically prevents any information about complaints and reports from being shared unless the matter results in a finding of professional misconduct or a term, condition or limitation has been put on the RD's certificate of registration. When there is a finding, by law, the College must record it on the public Register of Dietitians, and must also publish a summary of the discipline matter and the findings in the College newsletter or annual report.

### HEALTH SYSTEM IMPROVEMENT ACT

The RHPA has been amended by the *Health System Improvement Act* to change the way health professions Colleges in Ontario handle complaints and reports. The authorities and responsibilities for handling complaints and reports will be combined into a new *Investigations Complaints and Reports Committee*. The changes will come into force in June 2009. Over the next year, we will publish information to inform the public and RDs about the new processes, timelines, and transparency provisions required by law.

**Table 3: Trend showing a growing number of complaints and reports since 2003**

0	1	0	0	5	1	1	5	6	8	7	6
1994-1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007