

IN THE MATTER OF A COMPLAINT AGAINST JAMES TASKO,  
BEING A MEMBER OF  
THE SASKATCHEWAN COLLEGE OF RESPIRATORY THERAPISTS

BETWEEN:

THE PROFESSIONAL CONDUCT COMMITTEE,  
established pursuant to *The Respiratory Therapists Act*

-and-

JAMES TASKO

---

**DECISION**

---

HEARD BY: CANDI THOMPSON, RRT – Chairperson  
KIANA ATRCHIAN, RRT  
ROBERT FRIEDRICH (Public Representative)

COUNSEL FOR THE PROFESSIONAL  
CONDUCT COMMITTEE

MERRILEE RASMUSSEN, K.C.

COUNSEL FOR THE DISCIPLINE  
COMMITTEE

AMANDA M. QUAYLE, K.C.

**INTRODUCTION**

- [1] A discipline hearing was held on December 19, 2022, before the Discipline Committee (the “Panel”) of the Saskatchewan College of Respiratory Therapists (the “SCRT”) to hear a Formal Complaint concerning James Tasko (the “Respondent”) dated August 3, 2022, as required by Section 29 of *The Respiratory Therapists Act*, SS 2006, c R-22.0002 (the “Act”). The discipline hearing proceeded by video conference by consent of the parties.

- [2] At all times material to the complaint against him, the Respondent was a member of the SCRT.

## THE COMPLAINT

- [3] Counsel for the Professional Conduct Committee filed the Notice of Hearing dated November 18, 2022, with the Formal Complaint, at the hearing.

- [4] The Formal Complaint states<sup>1</sup>:

... James Tasko, a member of the Saskatchewan College of Respiratory Therapists, is alleged to be guilty of professional misconduct, contrary to section 24 of *The Respiratory Therapists Act*, by engaging in conduct that is harmful to the best interests of the public or the members of the SCRT, tends to harm the standing of the profession and/or is a breach of Section 21 of the SCRT's Regulatory Bylaws, which requires members to comply with the SCRT Code of Ethics, in the following circumstances:

1. On or about May 12, 2021:
  - (a) you attended at the home of an oxygen patient of C.H. in Saskatoon, Saskatchewan and advised the patient that you were not vaccinated against Covid-19 and did not plan on getting vaccinated and that the Covid-19 vaccine was not a real vaccine; and/or
  - (b) after leaving the patient's home you sent texts to the patient containing content contrary to the then current medical recommendations concerning Covid-19 and/or contrary to the SCRT's position statement dated April 6, 2021.

## NOTICE OF HEARING

- [5] The Respondent did not appear at the discipline hearing.
- [6] Counsel for the Professional Conduct Committee filed an Acknowledgment of Service at the hearing that was signed by the Respondent acknowledging service on November 19, 2022 of the Notice of Hearing dated November 18, 2022, with Formal Complaint.
- [7] Pursuant to section 29(11) of the Act, if the member whose conduct is the subject of the hearing fails to attend the hearing, the Discipline Committee, on proof of service of the Notice of Hearing and Formal Complaint, may proceed with the hearing in the member's absence.
- [8] The Panel found that the evidence filed by the Professional Conduct Committee establishes that the notice requirements set out in section 29(1) of the Act had been met. Having been

---

<sup>1</sup> Names of third parties in the Formal Complaint have been changed to initials.

properly served, but having failed to appear, the Panel proceeded with the hearing in the Respondent's absence as permitted by section 29(11) of the Act.

## EVIDENCE

- [9] An Agreed Statement of Facts was entered into by the parties on or about September 23, 2022, and was, with the consent of the parties, provided to the Panel in advance of the hearing. The Agreed Statement of Facts was filed at the hearing and constituted the sole evidence submitted at the hearing. It provided as follows<sup>2</sup>:

### INTRODUCTION

1. This Agreed Statement of Facts and Documents is jointly submitted by the Professional Conduct Committee of the Saskatchewan College of Respiratory Therapists (the "College") and James Tasko, a Member of the College (the "Member"). It relates to a complaint from [REDACTED], dated May 14, 2021. A copy of the complaint is attached as **Exhibit A**.
2. The parties hereby agree that the contents of this Statement are proven and can be accepted by the Discipline Committee as evidence.

### JURISDICTION

3. James Tasko has been a member of the College since March 25, 2009. During the period of time to which the complaint relates, the Member was employed by C.H. to provide professional services to home oxygen patients. He is not currently licensed to practice.
4. Membership in the College, and the conduct of members, is governed by *The Respiratory Therapists Act* (the "Act") and the Bylaws made pursuant to the Act, which bylaws include a Code of Ethics (the "Code"). As a self-regulating profession, the College is authorized by the Act to discipline its members for failure to adhere to the requirements of the Act or Bylaws.
5. Pursuant to section 26 of the Act, the Professional Conduct Committee (the "PCC") is required to investigate allegations of professional misconduct and/or professional incompetence received in the form of a written complaint and, on the completion of its investigation, to make a written report to the Discipline Committee (the "DC") recommending that either the subject matter of the complaint be referred for a discipline hearing or that no further action be taken.

### FACTS

---

<sup>2</sup> Names of third parties in the Agreed Statement of Facts have been changed to initials, and information relating to the identity of third parties in the Agreed Statement of Facts has been omitted.

6. On May 12, 2021, the Member attended at the home of a home oxygen patient. She asked the Member if he was vaccinated for COVID-19 and he responded that he was not and that he didn't plan to get vaccinated. The Member told the patient that the COVID vaccine was not a "real" vaccine. He sent text messages to the patient afterwards with content contradictory to then-current medical recommendations and contrary to the College's vaccination position, which had been emailed to all members of the College of [sic] April 6, 2021. A copy of the College's statement is attached as **Exhibit B**.
7. A copy of the complaint was provided to the Member and he was asked to provide a written response by letter dated May 27, 2021 from the College. A copy of the letter is attached as **Exhibit C**.
8. The Member provided a written response to the complaint dated June 24, 2021. A copy of the response is attached as **Exhibit D**.
9. The Member was interviewed by S.D., Chair of the PCC, and legal counsel for the PCC. The Member acknowledged in that interview that he was asked if he was vaccinated for COVID-19 and that he answered he was not and didn't plan on it. He also acknowledged that a conversation ensued with the patient about the pros and cons of the COVID vaccination. As well, he acknowledged that he sent links to articles by text to the patient.
10. The Member provided the PCC investigation with a list of what he described as independent news sites relating to information concerning COVID, which were the sources of the information he provided to the patient on May 12, 2021 and thereafter. The email he sent with this list to S.D., Chair of the PCC, is attached as **Exhibit E**.
11. The PCC attempted to resolve the complaint by consent, as authorized under the Act, but the Member did not respond to the proposed resolution.
12. On the completion of its investigation, the PCC reported to the Discipline Committee and recommended a hearing. A copy of that report is attached as **Exhibit F** and includes the formal complaint that the Discipline Committee must hear and determine.
13. The Member is no longer working as a respiratory therapist.
14. The Member and the PCC acknowledge that the Discipline Committee is properly constituted and has jurisdiction to hear and determine the formal complaint.

## CONCLUSION

15. The Member acknowledges that his interaction with the home oxygen patient was contrary to the Code of Ethics, compliance with which is required by the College's Regulatory Bylaws, and therefore constitutes professional misconduct, contrary to section 24 of *The Respiratory Therapists Act*, as alleged in the formal complaint.
16. The Member pleads guilty to the formal complaint as set out in the report by the PCC to the Discipline Committee.

## CONDUCT DECISION

- [10] Upon consideration of the evidence and given the admission of guilt by the Respondent, the Panel is satisfied the Respondent is guilty of professional misconduct, contrary to Section 24 of the Act, by engaging in conduct that is harmful to the best interests of the public or the members of the SCRT, tends to the harm the standing of the profession, and is a breach of Section 21 of the SCRT's Regulatory Bylaws, which requires members to comply with the SCRT Code of Ethics.
- [11] The SCRT emailed a position statement on vaccine hesitancy to its members, including the Respondent, on April 6, 2021, in response to the surge of COVID-19 cases in both Saskatchewan and the rest of Canada. That position statement confirmed that as licensed members of the SCRT each member has the responsibility to:
  - (1) Differentiate between one's personal beliefs regarding immunization and the scientific evidence supporting vaccine effectiveness; any anti-vaccine messaging is contrary to education that members receive as a Respiratory Therapist; and
  - (2) Address misinformation and, decrease the risk of vaccine preventable diseases by providing scientific based advice when discussing vaccination in the delivery of care.
- [12] The Respondent's misconduct was in direct contravention of these responsibilities owed to the SCRT, his patient, and the public. It was very concerning to the Panel that such misconduct occurred in the patient's home where she was a captive audience, and then continued afterwards through personal text communications sent to the patient by the Respondent.
- [13] The SCRT has a responsibility to serve and protect the public by ensuring that members practice ethically and safely. This includes the provision of accurate and scientifically based information on vaccines. By failing to follow the SCRT's direction to members, the Respondent failed to serve and protect his patient and diminished the standing of the profession in the public. Such misconduct is of significant concern to the Panel. The Panel strongly denounces such conduct by any of its members.

## PENALTY DECISION

[14] Included in the Agreed Statement of Facts signed by the parties on September 23, 2022 was a joint submission on penalty, which provided as follows:

1. The Respondent shall receive a formal reprimand;
2. As the Respondent is currently not licensed to work as a respiratory therapist, if he wishes to obtain a licence to return to the practice of respiratory therapy he must:
  - (a) Provide proof of successful completion of the NAIT course titled IPHE201- Professionalism and Ethics for Healthcare Professionals, or an equivalent course proposed by the Respondent and approved in writing by the Professional Conduct Committee at the Respondent's own cost; and
  - (b) Pay costs to the SCRT in the amount actually incurred with respect to these proceedings as certified by the Registrar of the College.

[15] In considering the appropriate sanction to be imposed, the Panel acknowledges and has taken guidance from the judicial decision of *Camgoz College of Physicians and Surgeons of Saskatchewan* (1993), 114 Sask R 161, and the following factors relevant to the imposition of disciplinary sanctions:

1. Specific deterrence of the respondent to curtail any future breaches;
2. General deterrence of other members of the profession;
3. Rehabilitation;
4. Punishment;
5. Isolation;
6. Denunciation;
7. The need to maintain the public's confidence in the profession's ability to self-regulate;
8. Aggravating factors; and
9. Mitigating factors.

[16] The Panel views the misconduct at issue as a serious matter. The penalty ordered should protect the public and enhance public confidence in the ability of the SCRT to regulate its members. This is achieved through a penalty that not only maintains the public's confidence but also addresses specific and general deterrence.

[17] The Respondent is a former member of the SCRT. Accordingly, expulsion, suspension, and/or imposing conditions of practice are not available to the Panel as possible sanctions.

[18] Given the nature of the Respondent's misconduct, as well as the Respondent's failure to respond to a proposed consent resolution such that a discipline hearing was required, it is appropriate that the Respondent receive a formal reprimand, and if he wishes to return to practice as a respiratory therapist that he first receive additional training on professionalism and ethics directed at healthcare professionals, and pay the costs of these proceedings.

[19] With the objectives of the denunciation, specific deterrence, general deterrence, and maintenance of public confidence in the ability of the SCRT to self-regulate in mind, and

given that the Respondent is a former member of the SCRT, the Panel endorses the parties' joint submission on penalty in this case.

### **ORDER AS TO PENALTY**

[20] The Panel hereby orders as follows:

1. The Respondent shall receive a formal reprimand;
2. If the Respondent wishes to obtain a licence to return to the practice of respiratory therapy he must:
  - (a) Provide proof of successful completion of the NAIT course titled IPHE201- Professionalism and Ethics for Healthcare Professionals, or an equivalent course proposed by the Respondent and approved in writing by the Professional Conduct Committee at the Respondent's own cost; and
  - (b) Pay costs to the SCRT in the amount actually incurred with respect to these proceedings as certified by the Registrar of the College.

Dated this 22<sup>nd</sup> day of December, 2022.

---

Candi Thompson, RRT – Chairperson

---

Kiana Atrchian, RRT

---

Robert Friedrich (Public Representative)

given that the Respondent is a former member of the SCRT, the Panel endorses the parties' joint submission on penalty in this case.

### **ORDER AS TO PENALTY**

[20] The Panel hereby orders as follows:

1. The Respondent shall receive a formal reprimand;
2. If the Respondent wishes to obtain a licence to return to the practice of respiratory therapy he must:
  - (a) Provide proof of successful completion of the NAIT course titled IPHE201- Professionalism and Ethics for Healthcare Professionals, or an equivalent course proposed by the Respondent and approved in writing by the Professional Conduct Committee at the Respondent's own cost; and
  - (b) Pay costs to the SCRT in the amount actually incurred with respect to these proceedings as certified by the Registrar of the College.

Dated this 22<sup>nd</sup> day of December, 2022.

---

Candi Thompson, RRT – Chairperson

---

Kiana Atrchian, RRT

---

Robert Friedrich (Public Representative)

given that the Respondent is a former member of the SCRT, the Panel endorses the parties' joint submission on penalty in this case.

#### ORDER AS TO PENALTY

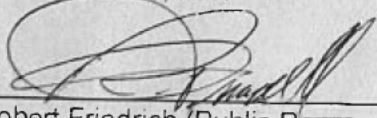
[20] The Panel hereby orders as follows:

1. The Respondent shall receive a formal reprimand;
2. If the Respondent wishes to obtain a licence to return to the practice of respiratory therapy he must:
  - (a) Provide proof of successful completion of the NAIT course titled IPHE201- Professionalism and Ethics for Healthcare Professionals, or an equivalent course proposed by the Respondent and approved in writing by the Professional Conduct Committee at the Respondent's own cost; and
  - (b) Pay costs to the SCRT in the amount actually incurred with respect to these proceedings as certified by the Registrar of the College.

Dated this 22<sup>nd</sup> day of December, 2022.

\_\_\_\_\_  
Candi Thompson, RRT – Chairperson

\_\_\_\_\_  
Kiana Atrchian, RRT

  
\_\_\_\_\_  
Robert Friedrich (Public Representative)