



# 2016

## ANNUAL REPORT



## VISION

We are a recognized leader in the regulation and governance of medical laboratory services. As a trusted partner in healthcare regulation, we enhance public protection and patient safety, promote high standards for professional practice, and contribute to the wellness of Albertans.

## MISSION

We protect the public by regulating Medical Laboratory Technologists and fostering excellence in professional practice.

## CORE VALUES

We recognize self-regulation is a privilege and in our endeavours to earn and retain the trust of Albertans, we act according to the following set of core values:

### Integrity

*We adhere to the CMLTA's Code of Conduct.*

### Accountability

*We take responsibility for our actions.*

### Commitment

*We are dedicated to providing excellent service.*

### Respect

*We treat others with fairness and dignity.*

### Objective

*We are fair, unbiased, and impartial in our decisions.*

### Sustainability

*We exercise responsible resource management.*

### Openness

*We are accessible, approachable, transparent, and clear in our actions.*

### Innovation

*We build on successful ideas, and explore and implement new ideas.*



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# INTRODUCTION

## PRESIDENT AND EXECUTIVE DIRECTOR'S MESSAGE

**A**n overview of 2016 brings to light some of the most noteworthy activities in the College of Medical Laboratory Technologists of Alberta (CMLTA). Namely, the CMLTA officially changed the organization's name, dedicated resources to the enhancement of the existing programs and services (specifically the Continuing Competence Program), created and implemented new processes to support initial and reinstating applicants, and invested significant resources into the investigation of third-party accreditation services for MLT training programs in Canada.

When the former Alberta College of Medical Laboratory Technologists divested itself of all membership services and became a strictly regulatory entity in 2012, it also changed its name to the CMLTA to clearly delineate itself from the former organization. The CMLTA received endorsement from the Minister of Health in 2012 to operate as the CMLTA; however, it was not until May 27, 2016 with the proclamation of Bill 41 the *Health Professions Amendment Act*, that the legislation was updated and the name change became official. The CMLTA has retired the ACMLT acronym and operates in all capacities under the new moniker.

The CMLTA Continuing Competence Program (CCP) was first introduced in 2006 with mandatory participation implemented in 2007. Since that time, the CMLTA has published four versions of the CCP, each based on the original format, but with significant revisions and enhancements. The most recent

CCP version adopts a new format incorporating the new 2016 CMLTA Standards of Practice as a core element. The CMLTA set out to create a broader Competency Profile for the CCP with enduring applicability and endless scope. In its pursuit, the CMLTA recognized the Standards of Practice as the foundational and fundamental doctrine for MLTs and as such, adopted the CMLTA Standards of Practice as the basis for the new Competency Profile and annual self-assessment.

The annual MLT Practice Permit renewal process has been automated since 2009 with continual improvements each year. In 2016 the CMLTA introduced electronic applications (including the documentation submission process) for all initial and reinstating applicants. The electronic process requires all documentation to be uploaded and submitted as one complete package and this ultimately aides in expeditious processing of the application and the issuance of a registration and MLT Practice Permit. The electronic application process also lends itself to simplified document control and management.

One other item of significance in 2016 is the announcement of the Canadian Medical Association (CMA) divestment of the responsibility for assessing and accrediting health education programs by February 1, 2018. CMA accreditation will continue to operate during this time; scheduled accreditation will continue; however, new applications will not be accepted. This decision made it necessary for the CMLTA to collaborate with

other regulators across Canada to find a replacement and a suitable accreditation solution.

This report can be viewed or downloaded in its entirety at [www.cmlta.org/home/about/publications-2/](http://www.cmlta.org/home/about/publications-2/) or alternatively a copy may be requested at [info@cmlta.org](mailto:info@cmlta.org).

The contents of this Annual Report were developed under the direction of, and approved by, CMLTA Council. The information and data contained in the Annual Report reflects CMLTA activities from January 1 to December 31, 2016 inclusive.



**APRIL HILLMAN** MLT  
CMLTA 2016 PRESIDENT



**LORI KMET** MLT, BSc (MLS), MBA  
EXECUTIVE DIRECTOR/REGISTRAR/  
COMPLAINTS DIRECTOR





## PUBLIC MEMBERS' REPORT

**T**he College of Medical Laboratory Technologists of Alberta (CMLTA) is the regulatory body for the profession of medical laboratory technology in Alberta. The CMLTA is required by legislation to fulfill its obligations that arise under the *Health Professions Act* (HPA).

As part of the HPA, Public Members are appointed by government and also have responsibilities under that same legislation. Our primary concern is for patient safety and public protection.

We are inspired by the team and Executive Director at the CMLTA who each day work diligently to protect and serve the public, patients, and Regulated Members. They do so by setting minimum entrance to practice requirements, creating and enforcing a Continuing Competence Program (CCP), and instituting a formal disciplinary process for complaints of unprofessional conduct. The CMLTA regulates and guides the profession to ensure Medical Laboratory Technologists (MLTs) are safe, ethical, competent, and professional practitioners.

We especially want to acknowledge those MLTs who we know are similarly concerned with public safety and maintaining the high standards of their profession. We have the distinct pleasure of seeing first hand the commitment to the profession by not only meeting requirements set by the CMLTA, but also through various volunteer efforts that Regulated Members participate in. These efforts are truly needed and appreciated, and we are well-served by them.

As Public Members, we can attest that MLTs, other healthcare professionals, and indeed the general public, are well-served by Council, committee members, and CMLTA staff. The CMLTA and its Regulated Members are dedicated to the provision of superior healthcare services to Albertans, and we acknowledge and commend the efforts we have observed.

**KENNETH GALL**

PUBLIC MEMBER 2016

**IRA GOLDMAN**

PUBLIC MEMBER 2016

## CMLTA OVERVIEW

**O**n March 1, 2002, the College of Medical Laboratory Technologists of Alberta (CMLTA) became the second self-regulating profession under the *Health Professions Act* (HPA) with the coming into force of the *Medical Laboratory Technologists Profession Regulation* and profession-specific Schedule 11 pursuant to the HPA. As per Schedule 11, Medical Laboratory Technologists (MLTs), or CMLTA Regulated Members, do one or more of the following:

- *Collect and analyze biological samples, perform quality control procedures and communicate results that have been critically evaluated to ensure accuracy and reliability;*
- *Teach, manage and conduct research in the science and techniques of medical laboratory technology; and*
- *Provide restricted activities authorized by the regulations.*

The CMLTA protects and serves the public, patients, and Regulated Members by overseeing and guiding the profession through the enforcement and monitoring of regulatory programs and services as established by the HPA. The CMLTA maintains professional records on more than 2,500 Regulated Members who work in Alberta laboratory hospital facilities (both urban and rural), in public and private clinical institutions, in research facilities, and teach the profession of medical laboratory science to future practitioners of the profession. All Regulated Members must demonstrate and maintain specialized skills, knowledge, judgments, and attitudes to

perform medical laboratory procedures in both the laboratory environment or at a patient's bedside. The CMLTA's oversight and regulatory role is one measure to ensure MLTs who conduct laboratory tests (including analysis, reporting, and interpretation), instruct the practice of medical laboratory science, or supervise other Regulated Members are educated, skilled, knowledgeable, competent, and ethical practitioners.

The CMLTA regulatory functions include:

- Enforcement of standardized minimum entrance to practice requirements for initial applicants and the annual renewal of registrations and MLT Practice Permits;
- Development and administration of the Continuing Competence Program, including a comprehensive and diverse MLT Competency Profile reflective of areas of professional practice and an audit process to monitor compliance;
- Establishment and enforcement of *MLT Standards of Practice*, *MLT Code of Ethics*, policies, and guidelines; and
- Adjudication of the professional conduct and behavior of MLTs via the investigation and/or resolution of complaints of unprofessional conduct.

### 2016 CMLTA COUNCIL

**APRIL HILLMAN**  
PRESIDENT

**DARCY GARA**  
PAST PRESIDENT

**KAREN MATEJKA**  
PRESIDENT ELECT

**CHRISTINE CHOMA**  
COUNCILOR

**JASDEEP HAZRAH**  
COUNCILOR

**CANDACE HEATHER**  
COUNCILOR

**GLORIA PAULET**  
COUNCILOR

**SHELLY STEVENS**  
COUNCILOR

**DAN WOODS**  
COUNCILOR

**KEN GALL**  
PUBLIC MEMBER

**IRA GOLDMAN**  
PUBLIC MEMBER

### 2016 CMLTA STAFF

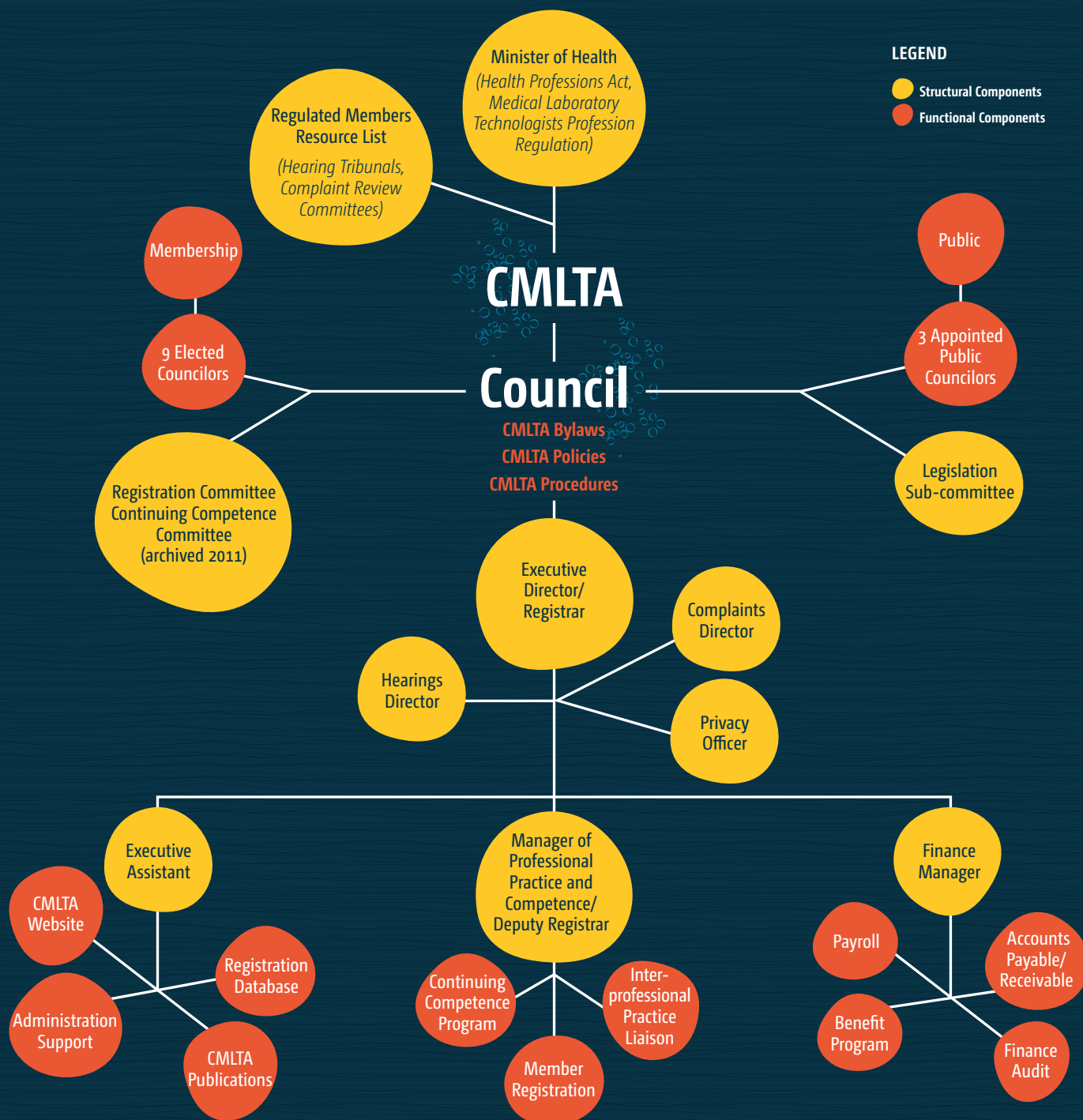
**LORI KMET**  
EXECUTIVE DIRECTOR/REGISTRAR/  
COMPLAINTS DIRECTOR/PRIVACY OFFICER

**LARISSA FADISH**  
DEPUTY REGISTRAR/MANAGER OF  
PROFESSIONAL PRACTICE AND COMPETENCE

**AVALEEN PETRYK**  
EXECUTIVE ASSISTANT/HEARINGS DIRECTOR

**SHARON SEMENIUK**  
FINANCE MANAGER

# STRUCTURAL AND FUNCTIONAL ORGANIZATION CHARTS





# GOVERNANCE

The CMLTA Council manages and conducts the activities of the organization and exercises its rights, powers, duties, and privileges to ensure regulatory compliance in all areas, specifically registration, continuing competence/professional development, and the formal adjudication of complaints of unprofessional conduct. The 2016 CMLTA Council was comprised of nine elected Councilors (including the President, President-Elect, and Past President) and two Public Members as appointed by the government in accordance with the *Health Professions Act* (HPA). The HPA requires the CMLTA to have three Public Members; however, Alberta Health has not yet replaced a Public Member from 2014.

The primary purpose of the CMLTA Council is to fulfill its legislated mandate and mission through ethical, prudent, and innovative means. The specific functions of Council are to:

- Articulate the CMLTA's vision, mission, and core values;
- Develop a viable strategic plan to achieve the vision, mission, and core values;
- Define the work of Council, and how Council carries out and monitors its work;
- Support, monitor, and evaluate the Executive Director/Registrar to ensure a high level of competence and organizational performance;
- Provide effective fiscal management by ensuring that financial viability of the organization is ongoing, resource utilization is aligned with the CMLTA mission and priorities, and the assets of the CMLTA are protected and cared for;

- Ensure oversight and sound risk-management practices, enforce compliance with all relevant legislation, and develop policies and systematic methods to direct the CMLTA's operations;
- Raise public awareness of the role of the CMLTA and represent the best interests of the public;
- Monitor the roles and performance of committees to ensure they execute delegated work; and
- Organize Council to ensure effective and efficient operations, including the assessment of Council's own performance, the development and implementation of succession plans, the orientation and mentoring of new Council members, and continuity of experience and leadership within Council.
- Draft new policies, protocols, and processes as per the direction of Council;
- Align CMLTA communications with current policy; and
- Interpret the HPA and the *Medical Laboratory Technologists Profession Regulation* for the purpose of application and revision of policy regarding registration, continuing competence, and complaints of unprofessional conduct.

Pursuant to Section 15 of the HPA, Council has appointed seven Regulated Members (a minimum of four is required) to the CMLTA Regulated Member Resource List (RMRL). These individuals serve on Hearing Tribunals in complaints of unprofessional conduct and on Complaint Review Committees (CRC). Please refer to the report on Complaints and Discipline on page 18 of this Annual Report for more information on Hearing Tribunals and CRCs.


The CMLTA Council archived the Registration Committee and Continuing Competence Committee in 2011 as they are optional committees pursuant to the HPA. The primary role of the Registration Committee was to develop and recommend policy and guidelines for Council consideration for applicants falling outside standard registration parameters, specifically individuals registering via the Substantial Equivalence (SE) provision as provided for in Section 8 of the *Medical Laboratory Technologists Profession Regulation*. Over a five-year period, the Registration Committee developed a detailed and well-structured process to evaluate (SE) applicants that can be applied consistently and transparently to all individuals seeking MLT registration and who are not eligible for national certification with the Canadian Society for Medical Laboratory Science.

The CMLTA Council has established the following Committees:

- Legislation Sub-Committee
- Regulated Member Resource List – Hearing Tribunals and Complaint Review Committees

The Legislation Sub-Committee is a working group of the CMLTA Council comprised of nine Regulated Members including the President-Elect, Past President, and other volunteer members at large. The purpose of this group is to:

- Review and recommend revisions (in consultation with the Executive Director/Registrar and CMLTA legal counsel) to CMLTA Bylaws, policies, and documents for Council consideration and approval;



The Continuing Competence Committee (CCC) worked in conjunction with Alberta Health to create the Continuing Competence Program (CCP), including the Medical Laboratory Technologists' Competency Profile. The CCP is a systematic means of assessing the ongoing knowledge, skills, judgments, and attitudes of professional practitioners, and method to determine the level of expertise and competence in the workplace. The CCP and Competency Profile were reviewed, revised, and enhanced regularly to reflect changes in the current practice of MLTs, and also to incorporate new areas of practice such as biochemical genetics. Over an eight-year period, the expertise of the CCC resulted in a comprehensive CCP and Competency Profile that can be adapted to a multitude of areas of professional practice of MLTs. The CMLTA regularly solicits feedback from all Regulated Members, educators, and employers to determine relevancy, currency, and applicability of the CCP. This safeguards patient safety and public protection whereby ensuring MLTs are competent in their provision of laboratory services to Albertans.

In addition to the metamorphosis and advancement of CMLTA doctrine and policy to the extent that dedicated committees were deemed unnecessary, the CMLTA also experienced difficulty in securing Regulated Members to volunteer and serve on both of these committees. The Legislation Sub-Committee currently provides recommendations to Council in matters of registration and continuing competence as needed. However, in the event significant registration and/or CCP revisions necessitate a dedicated working group, the CMLTA Council can resurrect the Registration and/or Continuing Competence Committee.

The following regulatory changes occurred in 2016:

- On May 27, 2016 the organization's former name of the Alberta College of Medical Laboratory Technologists was officially changed in legislation to the College of Medical Laboratory Technologists of Alberta.
- CMLTA Council developed a new Continuing Competence Program based on the CMLTA *Standards of Practice* and *Code of Ethics*, including a new annual self-assessment format.
- CMLTA Council approved the development and implementation of online initial and reinstatement applications. The annual MLT Practice Permit renewal process has been online since 2009.
- CMLTA Council approved revisions to the annual online registration and MLT Practice Permit renewal process, including enhancements to the jurisprudence examination.





# REGISTRATION OF CMLTA REGULATED MEMBERS

**R**egistration and a Medical Laboratory Technologist (MLT) Practice Permit is mandatory for all individuals employed as MLTs. Pursuant to Section 46 of the *Health Professions Act* (HPA), a person must apply for registration if they meet the requirements of section 28(2) for registration as a Regulated Member, and intend to provide one or more of the following:

- (i) professional services directly to the public;
- (ii) the manufacture of dental appliances or conducting of laboratory tests that are used by other Regulated Members to provide professional services directly to the public;
- (iii) food and nutrition professional services that are used by other Regulated Members and individuals to provide services directly to the public;
- (iv) the teaching of the practice of a regulated profession to Regulated Members or students of the regulated profession; and
- (v) the supervision of Regulated Members who provide professional services to the public.

Applicants are registered on the appropriate register as provided for in the *Medical Laboratory Technologists Profession Regulation*, subject to any restrictions:

- a) General Register (Hematology, Chemistry, Transfusion Science, Microbiology, Histology, and individuals with conditions or restrictions on professional practice)
- b) Diagnostic Cytology Register

- c) Clinical Genetics Register (Cytogenetics and Molecular Genetics)
- d) Provisional Register
- e) Courtesy Register

**Figure 1** summarizes register data for the 2016 registration year.

The CMLTA's annual registration and Medical Laboratory Technologist (MLT) Practice Permit renewal process ran concurrently with the annual submission of documents in compliance with the Continuing Competence Program (CCP). The CMLTA renewal process is online and captures member demographics for both Alberta Health and its Alberta Provider Directory (ABPD) Source Uptake Project, and the Canadian Institute for Health Information (CIHI) and its Health Human Resources Databases Development Project (HHRDDP) which includes statistics on MLTs from across Canada. The HHRDDP addresses information gaps through the development of national, supply-based databases and reporting systems for five regulated health professions: MLTs, Pharmacists, Physiotherapists, Medical Radiation Technologists, and Occupational Therapists. The effective management of health human resources requires access to accurate, comparable, and timely data on medical professionals; therefore, the CMLTA continued to invest significant resources in 2016 to further modify the existing database and processes. CIHI terminated the data sharing agreement with the CMLTA on December 2, 2016 but will continue to collect aggregate supply information.

**Figure 2** summarizes application data for the 2016 MLT registration year.

The CMLTA mandate of patient safety and public protection is reinforced with mandatory registration for all individuals employed and practicing as MLTs. If an MLT is considering retirement, an extended leave of absence, or departing from professional practice for some other reason, resulting in the non-renewal of registration and an MLT Practice Permit, it is an individual's responsibility to notify the CMLTA. There were 126 Regulated Members from the 2015 registration year that did not renew their 2016 registration and MLT Practice Permit.

**Figure 3** summarizes reasons for the non-renewal of registration and an MLT Practice Permit for 2016.

**Figure 4** summarizes age demographic data for the 2016 registration year and also includes historical years to highlight trends in the medical laboratory profession (note: values are expressed as percentages).

**Figure 1:** Register data for the 2016 registration year

DESCRIPTION/REGISTER	NUMBER
<b>Register</b>	
General MLT	2,310
Conditional	22
Substantial Equivalence Route to MLT Registration (SE)	43
Diagnostic Cytology	83
Clinical Genetics	47
Provisional	72
Courtesy Register	0
<b>TOTAL CMLTA MEMBERS*</b>	<b>2,577</b>

\* Includes full standing practice permits, provisional practice permits, conditional practice permits, and successful SE applicants.

**Figure 2:** Application data for the 2016 MLT registration year

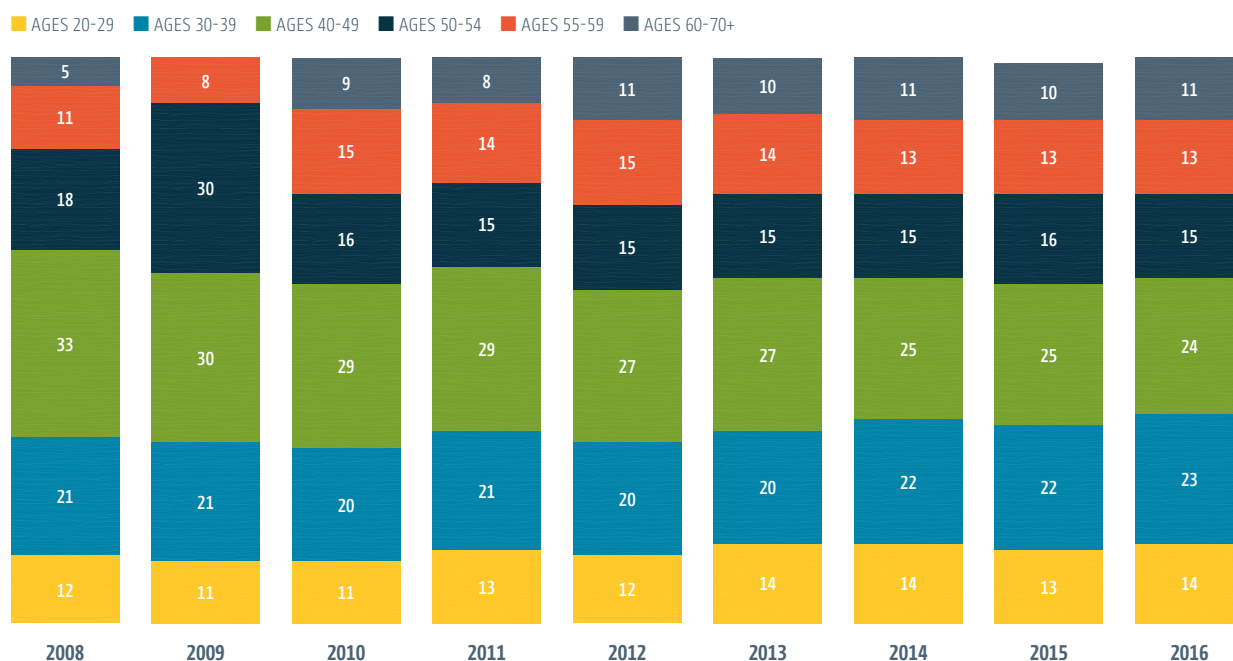
TYPE OF APPLICATION*	NUMBER
<b>Renewal</b>	2,440
<b>Initial</b>	119
New Graduates from Canadian Accredited MLT Training Program	(78)
Out of Province	(24)
Out of Country	(12)
SE:	
Approved	0
Denied	0
In Process	0
Withdrawn	0
<b>Reinstatement</b>	23
Out of Province	(4)
Out of Country	(2)
<b>Applications Denied</b>	0
<b>Registration Application Decision Appeals to Council</b>	0

\* Total number of applications for 2016 registration and MLT Practice Permits was 2577.

**Figure 3:** Reasons for the non-renewal of registration and an MLT Practice Permit for 2016

DESCRIPTION	NUMBER
Extended Leave (educational, long term disability, parental, etc.)	9
Cancelled (No communication, non-payment of annual dues)	15
Left the MLT Work Environment	22
Moved	24
Retired	55
Deceased	1
<b>TOTAL</b>	<b>126</b>

**Figure 4:** Age demographic data for the registration years 2008–2016  
(Note: values are expressed as percentages)





## INTERNATIONALLY EDUCATED MEDICAL LABORATORY TECHNOLOGISTS

In accordance with the Foreign Qualifications Recognition Plan (FQR Plan) the CMLTA gathers data and statistics on Alberta Regulated Members educated outside of Canada. The CMLTA worked in conjunction with Alberta Employment and Immigration to develop a standardized reporting template to accurately capture key elements related to the assessment and licensing of foreign-qualified applicants or Internationally Educated Medical Laboratory Technologists (IEMLTs). Various government departments such as Alberta Employment and Immigration and Alberta Health, use this data to support ongoing improvements to the foreign qualification assessment system for IEMLTs including:

- Identifying information resources on specific countries and qualifications which may support professional regulatory organizations in the assessment of foreign credentials;
- Developing appropriate “bridge to licensure” programs to assist foreign-qualified applicants to meet the minimum entrance to practice standards in Alberta;
- Implementing strategic support services for immigrants during the registration/licensing process; and
- Supporting a system-wide discussion and sharing of information on leading practices related to foreign qualification assessment, approaches, and procedures.

Registration as an IEMLT in Alberta is a two-step process which involves the Canadian Society for Medical Laboratory Science (CSMLS) and the CMLTA. Initially IEMLTs are directed to the CSMLS to undergo a Prior Learning Assessment (PLA) which involves the submission of supporting documentation and the assessment of academic credentials, language proficiency, clinical training, and professional work experience. Depending upon the length of time an individual requires to obtain documentation (including original transcripts from the country of formal post-secondary education) and the number of refresher courses and remedial work required to address deficient competencies, the PLA process can extend 2-3 years, averaging 18 months for most applicants.

Once an IEMLT has successfully completed the PLA and is granted permission to challenge the CSMLS national certification examination, an individual is eligible to apply for a one-year registration and MLT Provisional Practice Permit with the CMLTA pursuant to Section 9 of the *Medical Laboratory Technologists Profession Regulation*. Prior to the expiry of the Provisional Practice Permit, an individual must provide evidence of CSMLS certification and 900 MLT practice hours. Upon receipt of this documentation, an individual is upgraded to a full-standing registration and MLT Practice Permit on the appropriate register. If an applicant has successfully challenged the CSMLS certification examination prior to applying for MLT registration with the CMLTA, an individual can apply for a one-year registration and MLT Conditional Practice Permit to obtain the 900 MLT professional practice hours required in the initial registration year.

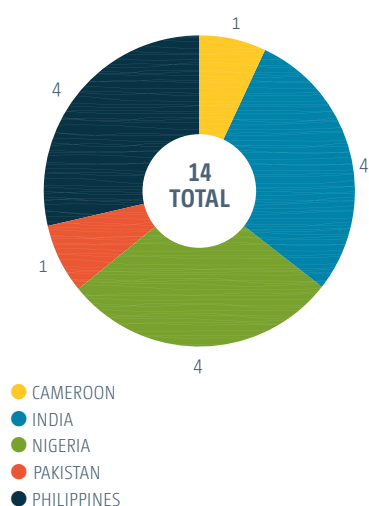
In 2014 the CSMLS instituted a *three-strike policy* in regard to the number of attempts an individual has to challenge the national certification examination. If an individual is unsuccessful after three attempts, they must successfully complete an accredited formal MLT training program of study from a recognized Canadian educational institution before permission to challenge the certification examination is granted for a fourth time. This policy also applies to all Canadian trained MLTs to ensure a transparent, fair, and consistent process is in place for all individuals seeking national certification and that all practitioners regardless of country of training, can demonstrate a minimum level of competence for all entry level MLTs.

**Figures 5 and 6** summarize data on IEMLTs representing figures validated by both the CMLTA and the CSMLS.

Pursuant to section 31(1) of the *Health Professions Act*, all applicants have a formal appeal process which states “*an applicant whose application for registration is accepted subject to conditions or whose registration is deferred or whose application is refused by the registrar, registration committee, or competence committee may, within 30 days after being given a copy of the decision, request a review by the council in accordance with subsection (3).*” Furthermore, section 31(3) states “*a request for review must be in writing, set out the reasons why the applications for registration should be approved with or without conditions, and be given to the registrar, who must give a copy of the request to the Council.*” In 2016, the CMLTA did not receive any requests for appeals from IEMLTs which is evidence of fair, transparent, timely, and consistent application and registration practices.

**Figure 5:** Data on IEMLTs representing figures validated by both the CMLTA and the CSMLS

#### COUNTRY OF EDUCATION OF FOREIGN QUALIFIED APPLICANTS



#### APPLICATIONS

Number of New Applications Received in 2016	11
Total Number of Applications Open (New and Ongoing from 2015)	14
Total Number of Applications Processed to a Registration Decision	14
Number of Applicants Meeting Minimum Initial Registration Requirements	14
Number of Applicants NOT Meeting Minimum Initial Requirements	0

**NOTE:** All applications were processed to a registration decision within 5 business days once all required documentation was submitted by the applicants.

**Figure 6:** Data on IEMLTs representing figures validated by both the CMLTA and the CSMLS

#### REGISTRATION DECISION

##### Number of Applicants Not Meeting:

Educational Standards	0	0
English Language Proficiency Standards	0	0
Certification Examination Standards	0	7*
Minimum Work/Clinical Experience Standards	0	14†

\* Conditional Practice Permit

† Conditional Practice Permit

REGISTRATION NOT ISSUED
ALTERNATIVE CLASS OF REGISTRATION ISSUED

**NOTE:** No applicants were issued full standing registrations without provisions and/or conditions as they did not initially meet all educational, language, certification, and work/clinical experience standards. Fourteen (14) applicants were issued an alternative class of registration. Two (2) applicants from 2015 have been upgraded to full standing registration on the appropriate register as they have met the MLT practice hour requirements. Applicants upgrading from an alternate class of registration to a full standing MLT Practice Permit have the ability to practice without limitations/conditions. One (1) applicant from 2015 did not renew for 2016 and canceled their registration as they did not secure MLT employment. Eleven (11) new applicants from 2016 were issued an alternative class of registration which spans two registration years (2016 and 2017) as their registration and MLT Practice Permits are valid for one full year from the date of issue. Three (3) of these applicants have upgraded to a full standing MLT Practice Permit and it is anticipated the remaining eight (8) will upgrade to full standing status on the appropriate register in 2017 prior to the expiration of their alternative class of registration.



# CONTINUING COMPETENCE PROGRAM

The CMLTA developed and administered the Medical Laboratory Technologists' Continuing Competence Program (CCP) in 2007 in compliance with provisions set out in Section 50 of the *Health Professions Act* and Sections 12.2, 12.3, and 12.4 of the *Medical Laboratory Technologists Profession Regulation*. The aforementioned legislation authorized the implementation and application of program-specific parameters, annual review and audit processes to evaluate participation, and the enforcement of the program with consequences for non-compliance. The CCP was a collaborative partnership between Alberta Health and the CMLTA, with contributions from numerous Medical Laboratory Technologists (MLTs) from across the province.

Legislation dictates that it is mandatory for all MLTs to participate in the CMLTA's standardized ongoing competence program. All MLTs must assume personal accountability in professional practice to remain skilled, knowledgeable, and competent practitioners. The CCP is a systematic means of assessing the ongoing knowledge, skills, judgments, and attitudes of practitioners, and a method to determine the level of expertise and competence actually performed in the workplace. There are many benefits for the individual MLT, including professional integrity, personal growth, career advancement, and the increased utilization and application of knowledge, skills, judgments, and attitudes. The CCP represents the minimum mandatory continuing

education an MLT is required to complete on an annual basis to satisfy government-based requirements. It is neither inclusive nor representative of all annual learning and professional development voluntarily undertaken by a professional practitioner.

The *Medical Laboratory Technologists Profession Regulation* sets out the specific requirements for the CCP which a Regulated Member must complete on an annual basis. This legislation provides for an annual review and evaluation (e.g. Compliance Audit) which includes:

- (a) A Self-Assessment based on the Competency Profile developed by the CMLTA indicating the areas where continuing competence activities are to be undertaken by a Regulated Member in the next registration year;
- (b) A written Learning Plan that sets out the continuing competence goals of the Regulated Member for the next registration year and the continuing competence activities to be undertaken by the Regulated Member during that year to achieve the continuing competence goals; and
- (c) A completed Learning Plan from the previous registration year documenting the competence activities that were completed.

The CCP ran concurrently with the annual registration and MLT Practice Permit renewal process from September 15 to December 31, 2015 and resulted in the simultaneous submission of dues/fees, demographics, completed Learning Plans for 2015, Self-Assessments of Practice, and new Learning Plans for the 2016

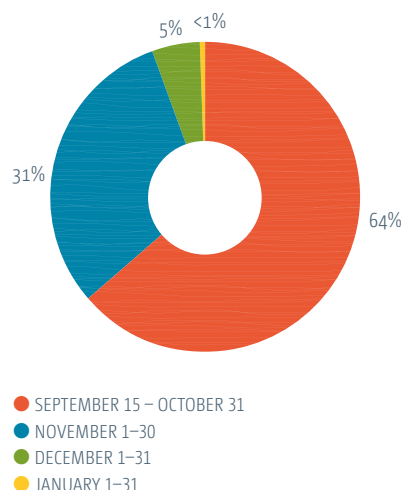
registration year. This annual process also required the successful completion of a jurisprudence examination. Jurisprudence is the study of the theory, philosophy, and science of a body of laws, and also encompasses the discretion, foresight, exercise of good judgment, common sense, and even caution in the professional practice of an MLT. The jurisprudence examination is updated and revised each year in consultation with other regulated health professions, legal counsel, and numerous stakeholders to highlight changes in legislation (HPA, privacy, labor relations, etc.) and to ensure practitioners have an understanding of the legally binding doctrines relevant to their professional practice.

During the online renewal process the CMLTA also collected data elements for the Canadian Institute for Health Information (CIHI) Health Human Resources Database Development Project (HHRDDP) which captures national demographics and statistics on Canadian MLTs.

**Figure 7** summarizes the submission date for the renewal of registration and MLT Practice Permits. The renewal season for the 2016 registration year commenced September 15, 2015. The CMLTA utilized an escalating fee system to encourage early registration and MLT Practice Permit renewal in an effort to ensure all renewing practitioners were in possession of valid registrations and MLT Practice Permits prior to January 1, 2016. Although individuals can choose to renew up to December 31 of a given registration year, the CMLTA advises Regulated Members to allow for a four-week processing time due to the volume of renewals.



**Figure 7: Percentage of 2016 Registration and MLT Practice Permit Renewals**



The CMLTA introduced several revisions and enhancements to the CCP for the 2016 registration and MLT Practice Permit renewal season.

Enhancements and revisions for 2016 included the following:

1. **Self-Assessments and Learning Plans**

The CMLTA recognizes the *Standards of Practice* as the foundational and fundamental doctrine for MLTs which lends itself to be adapted as an assessment tool for gauging continuing competence within the numerous practice environments of medical laboratory services. In 2016, during its pursuit to create a broader Competency Profile with enduring applicability and endless scope, the CMLTA Council approved the adaptation of the *Standards of Practice* as the basis for the new Competency Profile. The adaption of the CMLTA *Standards of Practice* into

the MLT Competency Profile and the new CCP V4.0 involved contributions from CMLTA staff, Council, volunteers, and other stakeholders.

Changes to the CCP were communicated to all Regulated Members in advance of implementation via detailed email blasts, website updates, and the quarterly newsletter so they could familiarize themselves with the upcoming CCP effective September 15, 2016 for the 2017 registration year. The resultant CCP V4.0 primarily reflected changes to the Competency Profile and ultimately, the annual Self-Assessment of Practice. In addition, effective with V4.0, Regulated Members were no longer required to create specific statements to act as Learning Objectives. Instead Regulated Members identified Enabling Competencies (adapted *Standards of Practice*) as Developmental/ Advancing/Expanding (DEV) through completion of the Self-Assessment of Practice, and after being prioritized by the individual, were automatically converted into Learning Objectives to be included on a new Learning Plan.

2. **Online Compliance Audit**

Along with the launch of the online CCP Activity Log, the CMLTA instituted a process to accommodate the electronic submission of CCP Compliance Audit documents, such as certificates of completion and official coursework transcripts. Commencing in 2014, Regulated Members were able to submit their CCP Activity Log, supporting documentation for learning activities, the Compliance Audit

declaration, and employer verification of MLT employment and MLT work hours through a secure Regulated Member portal. Improvements made to the online process support a well-functioning system as there were no Regulated Member concerns or criticisms regarding the online CCP Compliance Audit process.

3. **Completed Learning Plan Requirements**

The increased awareness and utilization of the online CCP Activity Log by Regulated Members resulted in a duplication of recording Learning Outcomes on a completed Learning Plan. Often Regulated Members input all the data elements required for the CCP Activity Log into their Learning Outcome (on a completed Learning Plan) and were also prompted to enter similar information into their online CCP Activity Log. CMLTA Council supported revisions to the required elements for completed Learning Plans and Regulated Members now only have to indicate whether Learning Objectives have been met (minimum of three) or have not been met.

**NOTE:** The CMLTA received three written requests to change Learning Plans throughout 2016 due to changes in Regulated Members' areas of practice and responsibility. All requests were approved by the CMLTA. The CMLTA also received several requests from Regulated Members to change their Learning Plans due to the cancellation or postponement of a selected learning activity. All of these requests were denied, but the Regulated Members were provided guidance on attaining alternate learning activities to ultimately complete their chosen Learning Objective. The CMLTA received other informal requests to modify Learning Plans to include learning opportunities which were unknown at the time a 2016 Learning Plan was created and submitted to the CMLTA. All these requests were denied, but individuals were encouraged to participate in any learning activities deemed to be valuable and applicable to professional practice, regardless of applicability to a Learning Plan.



## CONTINUING COMPETENCE PROGRAM — ANNUAL COMPLIANCE AUDIT

To ensure the integrity of the CCP, legislation stipulates that regulatory Colleges must have an established process for the review and evaluation of previous and current Regulated Members' compliance with the CCP. To fulfill this mandate, at the beginning of each year, the CMLTA randomly selects a minimum of 10 percent of Regulated Members from the previous year's register to participate in the CCP Compliance Audit to provide documentation and/or evidence of learning for one to five previous years of professional practice. The CMLTA instructs Regulated Members to retain copies of all CCP documents, including their documented learning activities, for a minimum of five years for this purpose. Participation in the CCP Compliance Audit is a mandatory component of CMLTA registration. As it is an audit of the previous registration year(s), even individuals not currently registered or practicing as MLTs in Alberta are required to participate.

It should be noted that once a Compliance Audit notice has been issued, it remains outstanding on an individual's file until the individual has complied with the CMLTA request. Individuals were made aware that extenuating circumstances preventing compliance within the specified timelines must be communicated immediately to the CMLTA to avoid escalating fines and a potential complaint of unprofessional conduct.

For the 2016 Compliance Audit, 335 Regulated Members (~14%) were randomly selected to participate in the audit. Initial audit notices, detailing

the documentation requirements and the stipulated timelines, were sent via email and registered mail to selected individuals indicating that submission of Compliance Audit documentation must be fulfilled via online programming only.

The online programming guided Regulated Members through the submission process which included the following audit requirements:

- Completed 2015 CCP Activity Log – containing documented learning activities as reported on a 2015 completed Learning Plan and (if applicable) supporting documentation for learning activities as indicated on the *Documentation Guidelines for Learning Activities*.
- Employer Verification of MLT Employment and MLT Practice Hours form. (The CMLTA will accept an alternate record provided it contains all the information requested on the CMLTA standard form.)
- Compliance Audit Declaration.

The CMLTA reviewed and examined an individual's submitted Compliance Audit documentation and determined whether the individual had complied with the mandated elements of the CCP. If the CMLTA determined the submitted documentation to be satisfactory, a pass letter was issued. If the CMLTA determined the submitted documentation to be incomplete, a letter outlining deficiencies and/or remedial work required to successfully complete the audit was issued.

Four (4) individuals submitted written requests for extensions to the CCP Compliance Audit deadline. Three (3) requests met the requirements to be granted extensions and one (1) request

was denied as the individual was actively engaged in professional practice.

Fifteen (15) individuals were contacted to provide follow-up on submitted audit documents. Ten (10) of these were regarding the Verification of MLT Employment and Practice Hours form which has been attributed to uploading anomalies. Five (5) individuals were contacted to revise their online CCP Activity Logs to provide outstanding requirements. All individuals complied with the CMLTA's requests and deadlines.

This was the first year that all audited individuals submitted their Compliance Audits in advance of the stipulated deadline. It was also the second consecutive year where the CMLTA did not issue fines related to late submissions.

While the percentage of audited individuals only increased by two, the actual number of Compliance Audits increased by 65. This equated to a 25 percent increase in the audits performed in 2016 versus 2015. This increased workload impacted CMLTA staff significantly and prompted Council to consider whether the ultimate goal of 20 percent to be audited annually was even feasible or provided any relevant statistical data. An environmental scan of regulated health professions in Alberta and Medical Laboratory Technologist Colleges across Canada revealed most regulatory bodies audit fewer than 20 percent of practitioners. With this information in mind, the CMLTA contracted a psychometric firm to conduct an independent review of the CMLTA's audit process and the number of individuals randomly selected to participate in the audit each year, and also to evaluate whether these practices are consistent with other regulatory authorities and in alignment with standardized

statistical sampling principles. Council reviewed the consultant's report and concluded a minimum 10% of eligible Regulated Members to be audited annually commencing with the Compliance Audits conducted in 2017. This figure was consistent with other regulatory counterparts and provided statistically relevant sampling data to draw accurate conclusions about the general MLT population.

**Figure 8** summarizes Compliance Audit statistics for the Continuing Competence Program for 2011–2016.

**Figure 8:** Compliance Audit statistics for the Continuing Competence Program for 2011–2016

DESCRIPTION	2011	2012 (2013 PRELIMINARY)**	2013 (ACTUAL)	2014	2015	2016
Number Audited	125	178	178	243	270	335
% Audited (rounded)	6%	8%	8%	11%	12%	14%
Number with Successful Initial Audit (pass)	111	155	155	218	248	320
Number Requiring Remedial Work	12	23	23	20	22	15
Reasons for Remedial Work:						
Failure to Submit Documentation	6	9	9	9*	11	0
Incomplete Documentation	6	14	14	11	11	15
Number Forwarded to Complaints Director for Non-Compliance	0	0	1	0	0	0
Extenuating Circumstances	2	0	0	0	0	0
Cancelled Audits	0	0	0	0	0	0

\* All individuals formally notified the CMLTA of their current non-practicing status and desire to postpone submission of Compliance Audit documents until they reinstate as a practicing MLT. These individuals are aware that prior to reinstatement, all audit requirements must be satisfied.

\*\* In an effort to maintain transparency, commencing with the 2013 Annual Report, the CMLTA transitioned from reporting Compliance Audit statistics pertaining to the applicable registration year to those results obtained in the year for which the Annual Report reflects. For example, the 2014 results were based on the 2014 CCP Compliance Audit; however, the participants were drawn from the 2013 registration roster.

# COMPLAINTS AND DISCIPLINE

This section highlights the complaints of unprofessional conduct the CMLTA received in 2016. It includes the current status and/or final disposition of complaints against regulated practitioners of the medical laboratory science profession. The information contained in this section is pursuant to Part 4 of the *Health Professions Act* (HPA).

The HPA defines unprofessional conduct, whether or not it is disgraceful or dishonorable, as the following:

- Displaying a lack of knowledge of or lack of skill or judgment in the provision of professional services;
- Contravention of the HPA, a *Code of Ethics*, or *Standards of Practice*;
- Contravention of another enactment that applies to the profession;
- Representing or holding out that a person was a Regulated Member and in good standing while the person's registration or practice permit was suspended or cancelled;
- Representing or holding out that person's registration or Practice Permit is not subject to conditions when it is or misrepresenting the conditions;
- Failure or refusal to comply with the requirements of the Continuing Competence Program, or to co-operate with a competence committee or a person appointed under Section 11 undertaking a practice visit;
- Failure or refusal to comply with a request of or co-operate with an inspector or a direction of the registrar made under Section 53.4(3);
- Failure or refusal to comply with an agreement that is part of a ratified settlement, or with a request of or co-operate with an investigator, or to undergo an examination under Section 118, or a notice to attend or a notice to produce under Part 4;
- Contravening an order under Part 4, conditions imposed on a Practice Permit or a direction under Section 118(4);
- Carrying on the practice of the regulated profession with a person who is contravening Section 98 or an order under Part 4 or conditions imposed on a Practice Permit or a direction under Section 118(4); and
- Conduct that harms the integrity of the regulated profession.

The number and nature of complaints of unprofessional conduct the CMLTA receives in a given year is unpredictable. In its first six years under the HPA, the CMLTA received less than one complaint per year, but in 2010 there was a dramatic increase in the number of complaints which leveled off the following year resulting in an average of two to four complaints per year. One of the contributing factors resulting in the increase in 2010 was employer awareness and compliance with Section 57 of the HPA and an obligation to notify the CMLTA of employee terminations, suspensions, or resignations in which unprofessional conduct and/or behavior were contributing factors. More recently, the number of complaints the CMLTA receives annually has leveled off.

Figure 9 summarizes complaint data for the 2016 registration year.

## HEARING TRIBUNAL SUMMARY

A Hearing Tribunal made a finding of unprofessional conduct against Mr. Pierre Poirier (CMLTA/CSMLS #0045206) who contravened the *Health Professions Act* (HPA), the CMLTA *Standards of Practice*, the CMLTA *Code of Ethics*, and Alberta Health Service workplace violence policy by displaying grossly inappropriate and deliberate behavior over a significant period of time that presented a serious breach to the recognized and required workplace and personal behaviors for Regulated Members of the profession of medical laboratory technology. The Regulated Member admitted to the unprofessional conduct and signed an Admission of Unprofessional Conduct and a Joint Submission Regarding Penalty in conjunction with the CMLTA. The Hearing Tribunal ordered immediate cancellation (effective the date of the hearing on August 6, 2016) of Mr. Poirier's CMLTA registration and MLT Practice Permit, fines in the amount of \$2,000.00, publication of the Hearing Tribunal orders (including Mr. Poirier's name on the CMLTA's website and newsletter), and notification of the Minister of Justice and Solicitor General in accordance with section 80(2) of the HPA. Also of importance is Mr. Poirier agreed in his signed Admission of Unprofessional Conduct that he will not, at any time in the future, seek reinstatement of his registration and MLT Practice Permit.

**NOTE:** The case summary is high-level to protect the identity of those parties affected by Mr. Poirier's behavior and actions.

**Figure 9:** Complaint data for the 2016 registration year

DESCRIPTION	NUMBER	EXPLANATION
Files Carried Forward From 2015	0	
New Complaints Received in 2016	3	
Employer Complaints	3	
Peer Complaints	0	
Public Complaints	0	
Complaints Dismissed	1	One complaint dismissed as insufficient evidence of unprofessional conduct.
Files Referred for Assessment Under Section 118 HPA	0	
Files Referred to Investigation	2	One complaint currently under investigation.
Files Referred to Hearing Tribunal	1	
Complaint Review Committee Appeals	0	
Files Closed During the Year	2	

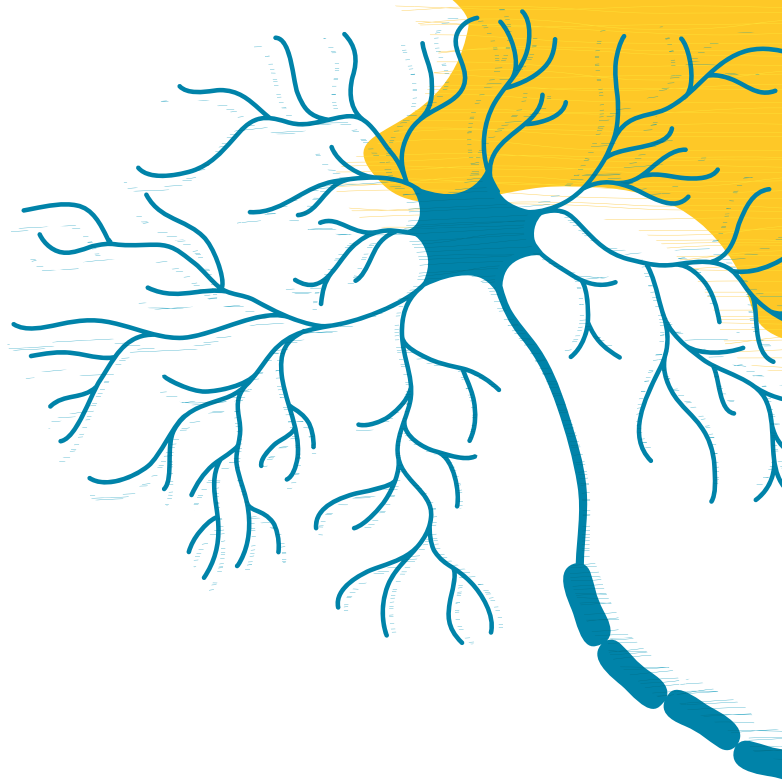






# FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2016  
AND INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS



# INDEPENDENT AUDITOR'S REPORT

To the Members of **College of Medical Laboratory Technologists of Alberta (CMLTA)** (formerly Alberta College of Medical Laboratory Technologists):

We have audited the accompanying financial statements of **College of Medical Laboratory Technologists of Alberta** which consist of the statement of financial position at December 31, 2016, and the statements of changes in net assets, operations, and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

## MANAGEMENT'S RESPONSIBILITY FOR THE FINANCIAL STATEMENTS

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations 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.

## AUDITOR'S RESPONSIBILITY

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## OPINION

In our opinion, the financial statements present fairly, in all material respects, the financial position of **College of Medical Laboratory Technologists of Alberta** as at December 31, 2016, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

**YAREMCHUK AND ANNICCHIARCO LLP**  
**CHARTERED ACCOUNTANTS**

Edmonton, Alberta  
March 4, 2017

## STATEMENT OF FINANCIAL POSITION

ASSETS	2016	2015
<b>Current Assets:</b>		
Cash	\$ 1,413,979	\$ 525,988
Guaranteed investment certificates	4,097,308	4,498,463
Accounts receivable	2,935	500
Prepaid expenses	16,408	18,156
Total current assets	5,530,630	5,043,107
<b>Equipment (Note 3)</b>	50,839	47,015
<b>TOTAL</b>	<b>\$ 5,581,469</b>	<b>\$ 5,090,122</b>
<b>LIABILITIES AND NET ASSETS</b>		
<b>Current Liabilities:</b>		
Accounts payable and accrued liabilities	\$ 78,692	\$ 69,996
Unearned membership fees	1,296,305	1,290,490
Total current liabilities	1,374,997	1,360,486
<b>Net Assets:</b>		
Invested in equipment	50,839	47,015
Internally restricted (Note 4)	3,000,000	3,000,000
Unrestricted	1,155,633	682,621
Total net assets	4,206,472	3,729,636
<b>TOTAL</b>	<b>\$ 5,581,469</b>	<b>\$ 5,090,122</b>

APPROVED BY COUNCIL:



**APRIL HILLMAN** MLT  
CMLTA 2016 PRESIDENT

## STATEMENT OF CHANGES IN NET ASSETS

	Invested in Equipment	Internally Restricted (Note 4)	Unrestricted	2016	Total 2015
Balance at beginning of the year	\$ 47,015	\$ 3,000,000	\$ 682,621	<b>\$ 3,729,636</b>	\$ 3,039,547
Excess of (expenses) revenue for the year	(20,869)	-	497,705	<b>476,836</b>	690,089
Purchase of equipment	24,693	-	(24,693)	-	-
<b>Balance at end of the year</b>	<b>\$ 50,839</b>	<b>\$ 3,000,000</b>	<b>\$ 1,155,633</b>	<b>\$ 4,206,472</b>	<b>\$ 3,729,636</b>

## STATEMENT OF OPERATIONS

	2016	2015
<b>Revenue:</b>		
Membership fees	\$ 1,380,285	\$ 1,502,635
Interest	44,624	47,624
Advertising, processing fees and other	7,931	9,462
<b>TOTAL REVENUE</b>	<b>1,432,840</b>	<b>1,559,721</b>
<b>Expenses:</b>		
Amortization	20,869	22,911
Annual general meeting	184	12,902
Bank and credit card charges	50,284	49,807
Communications	513	-
Computer and website	25,811	25,229
Conduct - net of recoveries of \$2,000 (2015 - NIL)	50,408	27,483
Continuing competence	25,245	10,743
Council	37,096	25,020
Deputy registrar	4,032	4,011
Insurance	5,990	6,742
Office	15,062	12,347
Postage and copying	13,822	13,694
Professional fees	25,336	24,192
Publications	4,222	4,582
Registrar	3,465	3,971
Registration	9,184	7,113
Rent and common area costs	138,358	136,029
Salaries and benefits	520,154	477,359
Telephone	5,969	5,497
<b>TOTAL EXPENSES</b>	<b>956,004</b>	<b>869,632</b>
<b>EXCESS OF REVENUE FOR THE YEAR</b>	<b>\$ 476,836</b>	<b>\$ 690,089</b>



## STATEMENT OF CASH FLOWS

	2016	2015
<b>OPERATING ACTIVITIES:</b>		
<b>Cash from operations:</b>		
Excess of revenue for the year	\$ 476,836	\$ 690,089
Item not involving cash for operations - amortization	20,869	22,911
	497,705	713,000
<b>Increase (decrease) in non-cash working capital balances related to operations:</b>		
Accounts receivable	(2,435)	(300)
Prepaid expenses	1,748	(2,097)
Accounts payable and accrued liabilities	8,696	(7,275)
Unearned membership fees	5,815	(115,220)
Net cash from operating activities	511,529	588,108
<b>INVESTING ACTIVITIES:</b>		
Purchase of equipment	(24,693)	(21,125)
Decrease (increase) in guaranteed investment certificates	401,155	(1,643,601)
Net cash from (used in) investing activities	376,462	(1,664,726)
<b>INCREASE (DECREASE) IN CASH DURING THE YEAR</b>	887,991	(1,076,618)
<b>CASH AT BEGINNING OF THE YEAR</b>	525,988	1,602,606
<b>CASH AT END OF THE YEAR</b>	\$ 1,413,979	\$ 525,988

# NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2016

## 1. PURPOSE OF COLLEGE:

The College regulates the practice of medical laboratory technology in a manner that protects and serves the public interest. In fulfilling this role, the College establishes, maintains and enforces standards for registration and continuing competence, standards of practice and a code of ethics for the profession and investigates and acts on complaints.

## 2. ACCOUNTING POLICIES:

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations. The significant accounting policies are as follows:

### Revenue recognition:

The College follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably assured.

Membership revenue is recognized in the year to which the membership fees relate. All other revenue is recognized when the activity to which the revenue relates to has been presented or completed. Conduct recoveries are recognized when received.

Interest revenue is recognized as it is earned.

### Donated services:

The work of the College is dependent on the voluntary service of many individuals. Since these services are not normally purchased by the College and because of the difficulty of determining their fair value, donated services are not recognized in these financial statements.

### Guaranteed investment certificates:

Guaranteed investment certificates are stated at the purchase amount plus accrued interest.

### Equipment:

Equipment is stated at cost. Amortization is provided using the declining balance method at the following annual rates:

Computer hardware	30%
Computer software	50%
Office equipment	20%

### Financial instruments:

The College initially measures its financial assets and liabilities at fair value.

The College subsequently measures all its financial assets and financial liabilities at amortized cost.

The College's financial instruments measured at amortized cost consists of cash, guaranteed investment certificates,

accounts receivable and accounts payable and accrued liabilities.

Financial assets measured at amortized cost are tested for impairment when there are indicators of impairment. The amount of the write-down is recognized in net income. Any previously recognized impairment loss may be reversed to the extent of the improvement, directly or by adjusting the allowance account, provided it is no greater than the amount of impairment recognized previously. The amount of the reversal is recognized in net income.

### Cash and cash equivalents:

Cash and cash equivalents consist of balances with banks and short-term investments with maturities that can be readily converted to cash.

### Use of estimates:

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. These estimates are reviewed annually and adjustments are made to income as appropriate in the year they become known.

### 3. EQUIPMENT:

The major categories of equipment and related accumulated amortization are as follows:

	COST	ACCUMULATED AMORTIZATION	NET BOOK VALUE	
			2016	2015
Computer hardware	\$ 25,109	\$ 16,093	\$ 9,097	\$ 10,222
Computer software	143,034	124,189	8,845	18,440
Office equipment	77,430	54,533	22,897	18,353
	\$ 245,654	\$ 194,815	\$ 50,839	\$ 47,015

### 4. NET ASSETS - INTERNALLY RESTRICTED:

By resolution of Council, funds have been internally restricted as follows:

	2016	2015
Operating reserve	\$ 2,000,000	\$ 2,000,000
Conduct contingency reserve	1,000,000	1,000,000
TOTAL	\$ 3,000,000	\$ 3,000,000

The funds can only be expended upon approval by Council.

### 5. LEASE COMMITMENT:

The College has committed to the rental of business premises under a lease agreement expiring July 31, 2020. The minimum monthly rent payable is \$6,800.

The College is also responsible for its proportionate share of common area costs.

### 6. FINANCIAL INSTRUMENTS:

The College is exposed to risk on certain financial instruments as follows:

#### Credit Risk:

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The College is exposed to credit risk on accounts receivable. In order to reduce its risk, the College has adopted credit policies which include the analysis of the financial position of debtors and the regular review of their credit limits. The College also provides for doubtful accounts based on the estimated realizable value of the accounts receivable.

#### Market Risk:

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.

#### Interest Rate Risk:

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The College is exposed to interest rate risk on guaranteed investment certificates. The fixed-rate instruments subject the College to a fair value risk.

### 7. INCOME TAX STATUS:

The College is a not-for-profit organization within the meaning of the *Income Tax Act* (Canada) and is exempt from income taxes.



# OTHER ACTIVITIES



## ALBERTA FEDERATION OF REGULATED HEALTH PROFESSIONS

The CMLTA has been a member of the Alberta Federation of Regulated Health Professions (AFRHP) since 2005. The AFRHP is a voluntary member-based organization comprised of 29 regulatory healthcare Colleges in the province. Independently, each College is a public body created by government to oversee Alberta's regulated health professions and protect the public by implementing, administering, and enforcing healthcare legislation. Collectively, members of the AFRHP promote leading practice initiatives to foster public awareness and professional accountability of its practitioners. AFRHP members have established networks nationally and internationally, and have developed a communal body of knowledge, expertise, and information sharing to advance the operations of each individual College.



## CANADIAN ALLIANCE OF MEDICAL LABORATORY PROFESSIONALS REGULATORS

The provincial regulators of Medical Laboratory Technologists (MLTs) formed the *Canadian Alliance of Medical Laboratory Professionals Regulators* (CAMLPR). The purpose of CAMLPR is to provide leadership and a forum where MLT regulators can collaborate, discuss, and respond to national regulatory challenges and opportunities. This includes the exchange of information regarding regulatory trends, leading practices, policy, and legislation. On June 9, 2011, the group, including Alberta, Manitoba, New Brunswick, Nova Scotia,

Ontario, Quebec, and Saskatchewan formalized the creation of CAMLPR as a national not-for-profit corporation (Newfoundland joined in 2015). CAMLPR strives to unify processes across Canada to ensure consistency and standardization for the MLT profession where possible. The group signed a Memorandum of Understanding (MOU) necessitated by the 2009 amendments to the Agreement on Internal Trade (AIT) which introduced "permit-on-permit" recognition and provincial mobility for MLTs between the regulated provinces. The MOU ensures all regulated MLTs have common entrance to practice competencies regardless of the initial province of registration, and ultimately contributes to patient safety and public protection from a national perspective. The MOU also standardizes the release of Regulated Member information between the regulated provinces in matters relating to registration history, continuing education/competence compliance, and professional misconduct. Other developments include the introduction of national Standards of Practice and most recently in 2016 a Code of Ethics for MLTs.



## ACCREDITATION OF MLT TRAINING PROGRAMS

Accreditation is a process that ensures educational programs are delivering quality education and producing graduates that meet pre-defined national standards of entry-to-practice competence. The national accreditation process is essential to the certification and licensure of allied health professionals in Canada. The national certifying organizations rely on the accreditation status to provide graduates of accredited programs access to their certifying

examinations. The provincial regulatory bodies rely on the accreditation process as a standard to approve the educational programs; therefore, enabling graduates to be issued a practice permit and license to practice in the profession. Accreditation serves to protect the interest of the public by defining standards for educational programs and ensuring compliance with those standards within Canada. The goal of accreditation is to ensure an educational program complies with established standards set by the respective professions. Accreditation is a valid assessment of academic quality and clinical integration of students in preparation for competent, safe, and effective entry level practice in the regulated profession. As an external review process, accreditation provides the benchmark for continuous quality improvement and excellence in education.

For many decades the Canadian Medical Association (CMA) Conjoint Accreditation Services has provided accreditation services for a number of health science professions in Canada. The CMA oversees the accreditation process of allied health programs under the guidance of Conjoint Accreditation Services which provides the administrative services, and two committees responsible for governance and operation, respectively the Committee on Conjoint Accreditation (CCA) and the Committee on Program Accreditation (COPA). The Assembly of Health Science Professions, with representation from the nine professions and their regulators, served as an advisory group to the CCA. The CMLTA has been an accreditation sponsor since 2008 and has served on the Assembly of Health Science Professions as well as participated in

onsite accreditation inspections at various Alberta educational institutions.

On January 22, 2016, the CMA announced that it will divest itself of responsibility for assessing and accrediting health education programs by February 1, 2018. CMA Accreditation will continue to operate during this time; scheduled accreditation will continue; however, new applications will not be accepted. In order to maintain a standard of quality for the entry-to-practice health science professions in Canada, a replacement to the CMA accreditation services is required.

The Allied Health Program Accreditation Working Group (AHPAWG) is a not-for-profit working group representing the Canadian Association of Medical Radiation Technologists, Canadian Association of Physician Assistants, Canadian Society of Cardiology Technologists, Canadian Society of Clinical Perfusion, Canadian Society of Ophthalmic Medical Personnel, Paramedic Association of Canada, Sonography Canada, The Canadian Orthoptic Society, the Alliance of Medical Radiation Technologists of Canada, and the Canadian Association of Allied Health Programs. This AHPAWG encompasses 11 allied health disciplines, and collectively 132 active related accredited education programs, including the Southern Alberta Institute of Technology (SAIT), the Northern Alberta Institute of Technology (NAIT), and the University of Alberta. The purpose of this group is to engage a third-party organization to establish and implement a new process for the accreditation of Canadian allied health education programs and to replace the current CMA Conjoint Accreditation Services before February 1, 2018.

Currently the regulatory bodies for Alberta, Manitoba, New Brunswick, Newfoundland, Nova Scotia, Ontario, Saskatchewan, and Quebec and the membership associations for British Columbia and Prince Edward Island joined the AHPAWG and are collectively working together to find an accreditation solution for the educational programs of healthcare professionals in Canada. The AHPAWG sent out an RFP in 2016 and is currently reviewing proposals for accreditation services. Consensus on a new accreditation model will be reached in early 2017.







**College of Medical Laboratory Technologists of Alberta**  
301-9426 51 Avenue NW Edmonton, AB T6E 5A6  
**PHONE** 780-435-5452 **TOLL FREE** 1-800-265-9351  
**FAX** 780-437-1442 **EMAIL** [info@cmlta.org](mailto:info@cmlta.org) **WEB** [cmlta.org](http://cmlta.org)