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CMLTA Foundation Policies

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.

COMMITMENT

We are dedicated to providing excellent service.

OBJECTIVE

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

OPENNESS

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

our actions.

ACCOUNTABILITY

We take responsibility for

RESPECT

We treat others with fairness and dignity.

SUSTAINABILITY

We exercise responsible resource management.

INNOVATION

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

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Introduction

President's Message

Looking back at the work of the CMLTA in 2019, the theme that comes to mind is *change*. Two types of changes emerged through our work: innovation and transformation. "What's the difference?" you may ask. Innovation is finding new ways to improve or change something that already exists, whereas transformation involves doing things differently, evolving from a current level to a different, better state. Thinking of change in this way, I can easily classify the work of Council and the CMLTA in 2019 into the buckets of innovation and transformation.

Council and CMLTA staff were involved in numerous initiatives that were focused on the improvement of current processes. Working within the governance framework of the College, needed revisions were made to update Bylaws and policies to bring them up to current practice. Needed changes were prioritized and tackled throughout the year. This was no small feat and was achieved with the help of the Legislation Sub-Committee and expert outside consultants. A new team of office staff also meant a much-needed review and update of office processes and procedures, along with a complete HR Structure review. This review looked to improve current practice and ensure that the College's HR structure and total compensation were in-line with peers across the province and reflected leading practice. Out of these activities, many opportunities were also identified for larger transformative work, which we recognized would require more time. These opportunities were identified during our strategic planning session, which laid out goals for the next three years to achieve this transformative work.

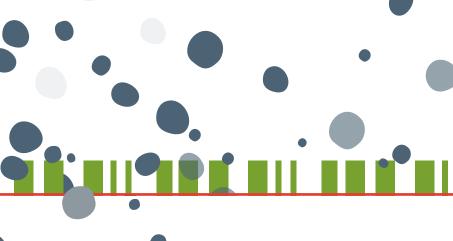
As part of the College's transformation, new committees were struck, and new initiatives were undertaken to change the way we operate. A Finance/Audit Sub-Committee was established in order to improve Council oversight over the College's finances and ensure that appropriate time and training is dedicated to this important task. One of Council's major fiduciary responsibilities is the careful oversight of College finances, so this was a top priority. Council and CMLTA staff also committed to engaging with members differently, by increasing our visibility with members and providing education in relation to the College's mandate. Resources were allotted to engage with regulated members through education sessions about the *Health Professions Act*, Bill 21, and complaints and hearings. Future regulated members were also engaged through the College's participation in the Interprofessional Pathway LAUNCH at the University of Alberta and through an education session offered at the Southern Alberta Institute of Technology.

The College also transitioned to a new membership portal, which was created as an all-in-one system that would replace the previous aging system and handle many of the College's important processes such as registration and renewal, the Continuing Competency Program (CCP), and CCP compliance audits. As many of you know, this transformation was not as seamless as we hoped, but I'm sure anyone working on Connect Care projects across the province can sympathize and understand that even the best-laid plans often go astray.

Work continues as Council, it's various Sub-Committees, and CMLTA staff turn their attention to not just improving but transforming our Bylaws and Policies to better-reflect our governance structure and mandate. We recognize that this will be a multi-year endeavor and are fortunate to have so many engaged volunteers willing to take these tasks on. We are committed to continuing to increase our visibility with membership and engage members with meaningful opportunities to contribute to the self-governance of their profession. As the regulatory landscape continues to shift, we strive to continue to be leaders in professional regulation. We have developed a plan to engage stakeholders in government and other professions to strengthen and grow the role of the College and Medical Laboratory Technologists. We look forward to your input and feedback throughout the year and hope to see you at one of our engagement sessions!

Valentin (Tino) Villatoro

2019 CMLTA President



Change is the law of life, and those who look only to the past and present are certain to miss the future.

-John F. Kennedy

Public Members' Report

2019 was a year of growth for the CMLTA in many ways. Certain accomplishments stand out; particularly the establishment of a finance and audit committee, all the hard work that went into the strategic planning session, as well as the progress that was made creating healthy relationships between the council and all the staff within the college. There were and are still challenges in this relationship however, it appears that despite disagreements, everyone involved is committed to building trust and working together to move forward.

There are a couple areas which we have identified as areas for improvement. First, we believe there is an unnecessary risk in having 6 year term limits for council members. With the serious nature of the challenges we encountered in 2018 in mind, we have concerns about continuity, and feel that this turnover can create an environment where it is easy to slide into complacency. Knowledgeable, experienced members are of great value to the college. The second issue which we feel could be improved would be to include public members in more of the subcommittees. The college has embraced this idea openly however, without approval from the government, we are unable to proceed. We feel that our role, to represent and protect the interests of the public, are diminished in not being able to participate on subcommittees. We appreciate all the hard work done this past year by the ED/R, the staff and all the members of council, especially those who have stepped into leadership roles or roles on subcommittees. Although there is still some room for improvement, we feel confident that the college is moving in the right direction.

Submitted by: Domingo Chavez, Kate Perala, and Aaron Zelmer

CMLTA Overview

- 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.

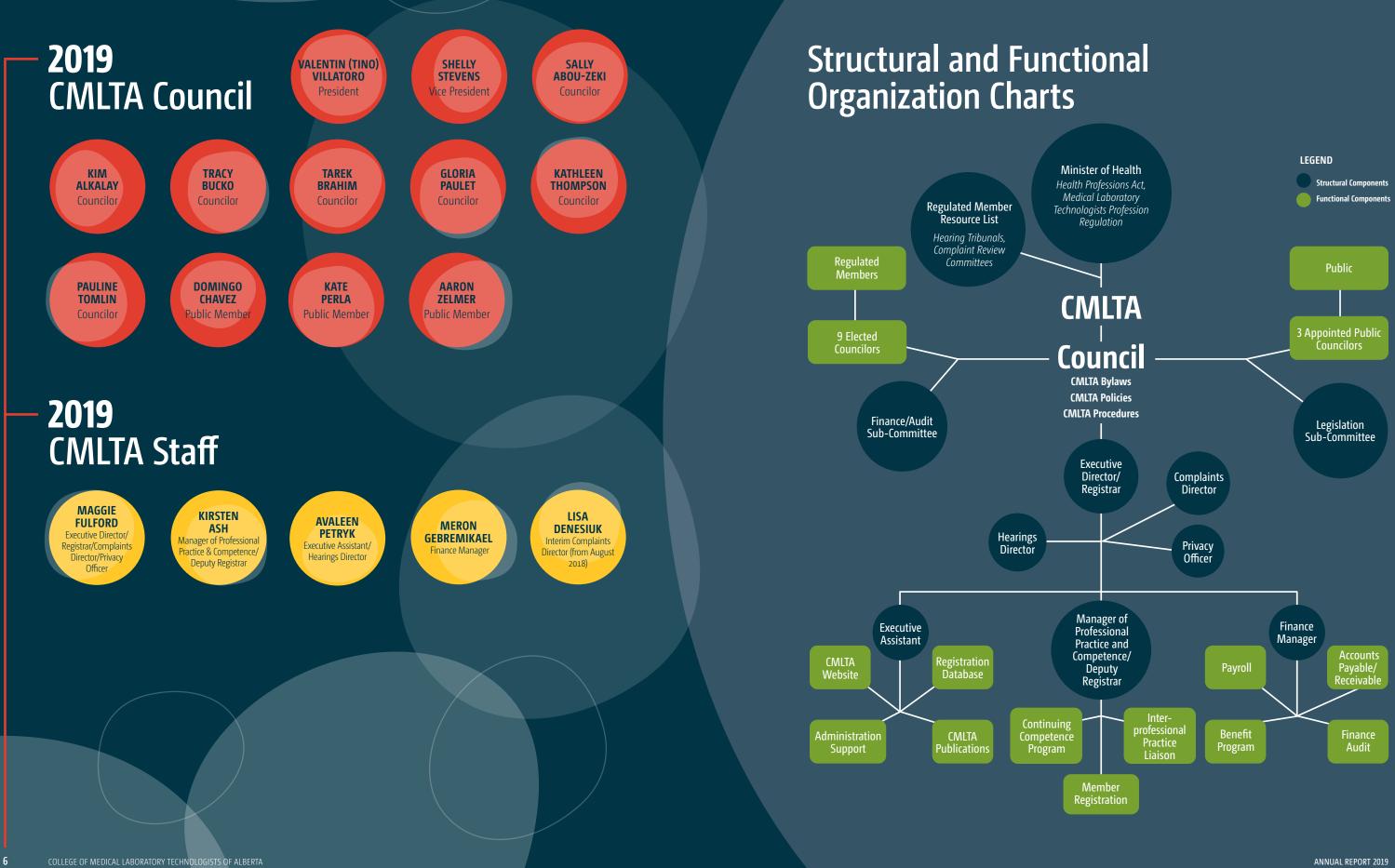
As established by the HPA, the CMLTA protects and serves the public, patients, and Regulated Members by overseeing and guiding the profession through the enforcement and monitoring of regulatory programs and services. The CMLTA maintains professional records on approximately 2,500 Regulated Members. They work in Alberta laboratory hospital facilities (urban and rural), public and private clinical institutions, and research facilities, or 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.



On 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, Medical Laboratory Technologists (MLTs), or CMLTA Regulated Members, were authorized to do one or more of the following:

The CMLTA regulatory functions include:

- Enforcement of standardized entrance to practice requirements for initial and reinstatement applicants, and the annual renewal of registrations and MLT Practice Permits;
- Development, administration, and ongoing enhancement of the Continuing Competence Program (CCP), including a comprehensive and diverse MLT Competency Profile based on the Standards of Practice and reflective of areas of professional practice, plus an annual audit process to systematically assess the integrity of the CCP and to monitor Regulated Members' compliance;
- Establishment and enforcement of *MLT Standards* of Practice, MLT Code of Ethics, Practice Advisory Statements, policies, and guidelines; and
- Adjudication of the professional conduct and behaviour of MLTs via the investigation and/or resolution of complaints of unprofessional conduct.



Governance

The CMLTA Council manages and conducts the activities of the organization. Council 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. Nine elected Councilors (including the President and Vice President) and three Public Members, as appointed by the government in accordance with the *Health Professions Act* (HPA), comprised the 2019 CMLTA Council.

The primary purpose of the CMLTA Council is to fulfill its legislated mandate and mission through ethical, prudent, and innovative means. Council's specific functions 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;
- 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;
- Ensure the public is aware of the role of the CMLTA and represent the best interests of the public in complaints of unprofessional conduct and matters of patient safety;
- 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, and the orientation and mentoring of new Council members.

The CMLTA Council has established the following Committees:

- Legislation Sub-Committee
- Regulated Member Resource List Hearing Tribunals and Complaint Review Committees
- Finance/Audit Sub-Committee

The Legislation Sub-Committee is a working group of the CMLTA Council, comprised of up to nine Regulated Members including the President, Vice President, and 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;
- 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 five 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 20 of this Annual Report for more information on Hearing Tribunals and CRCs. The Finance/Audit Sub-Committee is a working sub-committee of Council comprised of up to five members who may be Regulated Members, public members of Council, or members of the public. This sub-committee assists Council in fulfilling its financial oversight responsibilities concerning auditing and reporting, financial policies, and financial risk management.

The following operational and regulatory changes occurred in 2019:

- The CMLTA launched a new software and records management system, Thentia.
- The CMLTA held four information sessions in Edmonton and Calgary. Topics included "The HPA and You," Bill 21 information, and Complaints & Hearings.
- As per the HPA and the *Medical Laboratory Technologists Profession Regulation*, Council approved MLT programs as a registration requirement and refresher education programs for re-entry to practice requirements.
- Council held a strategic planning session and set the following three goals:
 - Increase CMLTA Visibility
 - Influence
 - Enhanced Governance



Registration of CMLTA Regulated Members

REGISTRATION

Registration and a Medical Laboratory Technologist (MLT) Practice Permit are 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;
- the manufacture of dental appliances or conducting of (ii) 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 (provided in the Medical Laboratory Technologists Profession Regulation), subject to any restrictions:

- General Register (Hematology, Chemistry, Transfusion a) Science, Microbiology, Histology, and individuals with conditions or restrictions on professional practice)
- Diagnostic Cytology Register b)
- Clinical Genetics Register (Cytogenetics and Molecular c) Genetics)
- Provisional Register d)
- Courtesy Register e)

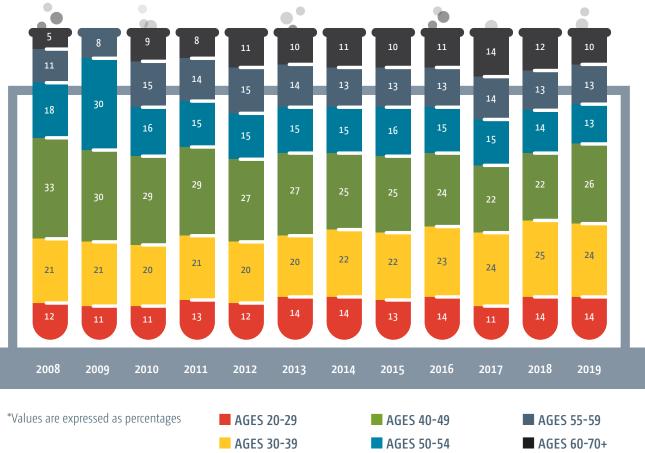
NAIT discontinued its Cytotechnology Program in 2018; however, students already enrolled can complete the program. This leaves only two programs in all of Canada—The Michener Institute in Ontario and SIAST in Saskatchewan.

THE FOLLOWING TABLE SUMMARIZES REGISTER DATA FOR THE 2019 REGISTRATION YEAR.

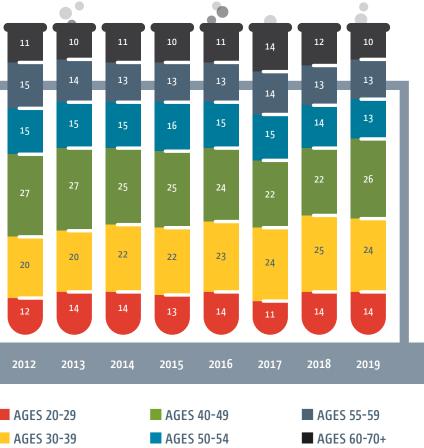
DESCRIPTION/REGISTER	NUMBER
General MLT	2,269
Conditional	15
Registered under section 8 of the MLT Regulations	43
Restricted to Area of Practice	58
Diagnostic Cytology	81
Clinical Genetics	51
Provisional	61
Courtesy Register	0
TOTAL CMLTA MEMBERS	2,578



THE FOLLOWING TABLE SUMMARIZES AGE DEMOGRAPHIC DATA FROM 2008 TO 2019 IN THE MEDICAL LABORATORY PROFESSION.







The CMLTA defines initial registration, reinstatement, and renewal as three discrete and separate application types. All can be completed online and submitted electronically to the CMLTA.



INITIAL REGISTRATION

An initial application collects basic personal information and demographic data (required by the HPA and Alberta Health for its Provincial Provider Registry [PPR]). Alberta Health extracts specific information daily, providing the government with real-time tracking on the total number of practitioners at any given time. An initial application also collects documents that authenticate formal postsecondary education and certification credentials.

REINSTATEMENT

Any individual whose previous registration with the CMLTA has lapsed and is seeking reinstatement of their registration and a license to practice (required for MLT employment) must submit a reinstatement application. It collects basic personal information and demographic data (required by the HPA and Alberta Health for its PPR), as well as documents that authenticate formal post-secondary education and certification credentials. That way, all required documents are on file.

RENEWAL

Current Regulated Members maintaining registration for the upcoming year submit renewal applications. Aside from basic personal information and demographic data (required by the HPA and Alberta Health for its PPR), a renewal application also collects information pertaining to a Regulated Member's Continuing Competence Program.

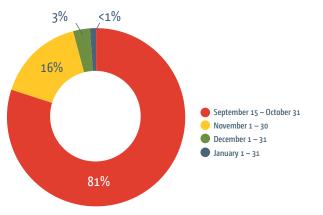
The CMLTA annually updates and revises all three application types to reflect changes in legislation or captured data elements.

THE FOLLOWING TABLE SUMMARIZES APPLICATION DATA FOR THE 2019 MLT REGISTRATION YEAR.

TYPE OF APPLICATION*	NUMBER
Renewal	2,441
Initial	119
Alberta Trained	(18)
New Graduates from Canadian Accredited	
MLT Training Program	(82)
Out of Province	(7)
Out of Country	(12)
Reinstatement	18
Alberta Trained	(11)
Out of Province	(5)
Out of Country	(2)
Applications Denied	0
Registration Application Decision Appeals to Council	0

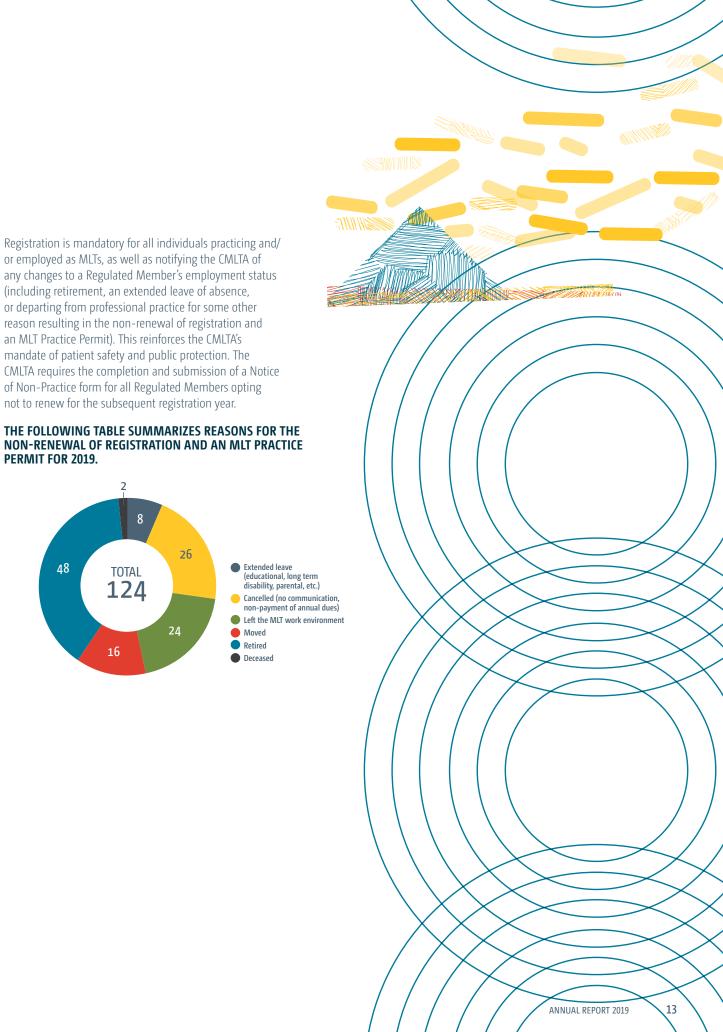
An escalating dues/fees system helps encourage early registration and MLT Practice Permit renewal, ensuring all renewing practitioners are in possession of a valid registration and MLT Practice Permit and can provide evidence of such to employers.

THE FOLLOWING TABLE SUMMARIZES THE SUBMISSION DATE FOR THE RENEWAL OF 2019 REGISTRATION AND **MLT PRACTICE PERMITS.**



Registration is mandatory for all individuals practicing and/ or employed as MLTs, as well as notifying the CMLTA of any changes to a Regulated Member's employment status (including 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). This reinforces the CMLTA's mandate of patient safety and public protection. The CMLTA requires the completion and submission of a Notice of Non-Practice form for all Regulated Members opting not to renew for the subsequent registration year.

NON-RENEWAL OF REGISTRATION AND AN MLT PRACTICE PERMIT FOR 2019.





INTERNATIONALLY EDUCATED MEDICAL LABORATORY TECHNOLOGISTS

In accordance with the Foreign Qualifications Recognition Plan, the CMLTA gathers data and statistics on Alberta Regulated Members educated outside of Canada. In conjunction with Alberta Employment and Immigration, the CMLTA developed 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). Alberta Employment and Immigration and Alberta Health use this data for 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.

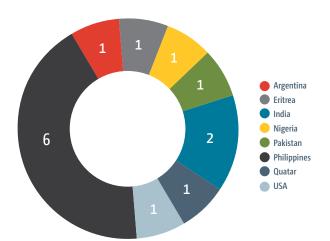
IEMLT registration in Alberta is a two-step process, involving the Canadian Society for Medical Laboratory Science (CSMLS) and the CMLTA. Initially, IEMLTs are directed to the CSMLS for a Prior Learning Assessment (PLA), which involves submitting supporting documentation and the assessment of academic credentials, language proficiency, clinical training, and professional work experience. Depending on how long it takes for an individual to obtain documentation (including original transcripts from the country of formal post-secondary education) and the amount of refresher courses and remedial work required to address deficient competencies, the PLA process can extend two or three years. Most applicants average 18 months.

Once an IEMLT completes the PLA and is granted permission to challenge the CSMLS national certification examination, they are 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*). Before the expiry of the Provisional Practice Permit, the individual must provide evidence of CSMLS certification. Upon receipt of documentation, the IEMLT 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 full-standing registration and MLT Practice Permit.

The CSMLS practices a *three-strike policy* for the number of attempts an individual may challenge the national certification examination. If after two attempts an individual is unsuccessful, they must successfully complete a learning plan before permission to challenge the certification examination for a third time. If unsuccessful after three attempts, an individual must successfully complete an accredited formal MLT training program of study from a recognized Canadian educational institution. This policy also applies to all Canadian-trained MLTs for a transparent, fair, and consistent process. It's in place for all individuals seeking national certification and ensures all practitioners regardless of country of training— can demonstrate a minimum level of competence for all entry-level MLTs.

THE FOLLOWING TABLES SUMMARIZE DATA ON IEMLTS.

COUNTRY OF EDUCATION OF FOREIGN-QUALIFIED APPLICANTS NUMBER OF NEW APPLICATIONS



ESCRIPTION	NUMBER

Number of New Applications Received in 2019	14
Total Number of Applications Open (New and Ongoing from 2018)	0
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: Once applicants submitted all required documentation, applications were processed to a registration decision within 5 business days.



REGISTRATION DECISION

Number of Applicants Not Meeting:			
Educational Standards	0	0	
English Language Proficiency Standards	0	0	
Certification Examination Standards	0	1*	
Minimum Work/Clinical Experience Standards	0	0	
*PROVISIONAL PRACTICE PERMIT			
Registration NOT Issued			
Alternative Class of Registration Issued			

Pursuant to section 31(1) of the *Health Professions Act*, all applicants have a formal appeal process. It states that "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 2019, the CMLTA did not receive requests for appeals from IEMLTs, which is evidence of fair, transparent, timely, and consistent application and registration practices.

Continuing Competence Program

In 2007, the CMLTA launched the Medical Laboratory Technologists' Continuing Competence Program (CCP), in compliance with Section 50 of the *Health Professions Act (HPA)*. We collaborated with Alberta Health, as well as with numerous Medical Laboratory Technologists (MLTs) and health professionals across the province.

The CCP systematically assesses, tracks and encourages the ongoing knowledge, skills, judgments, and attitudes performed by practitioners in the workplace. Every MLT benefits by gaining professional integrity, growing personally, and advancing their career.

Sections 12.2, 12.3, and 12.4 of the *Medical Laboratory Technologists Profession Regulation* provides for an annual review and audit processes to evaluate participation. It also enforces the program with consequences for non-compliance. This legislation sets out the specific CCP requirements a Regulated Member must complete on an annual basis, which includes:

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

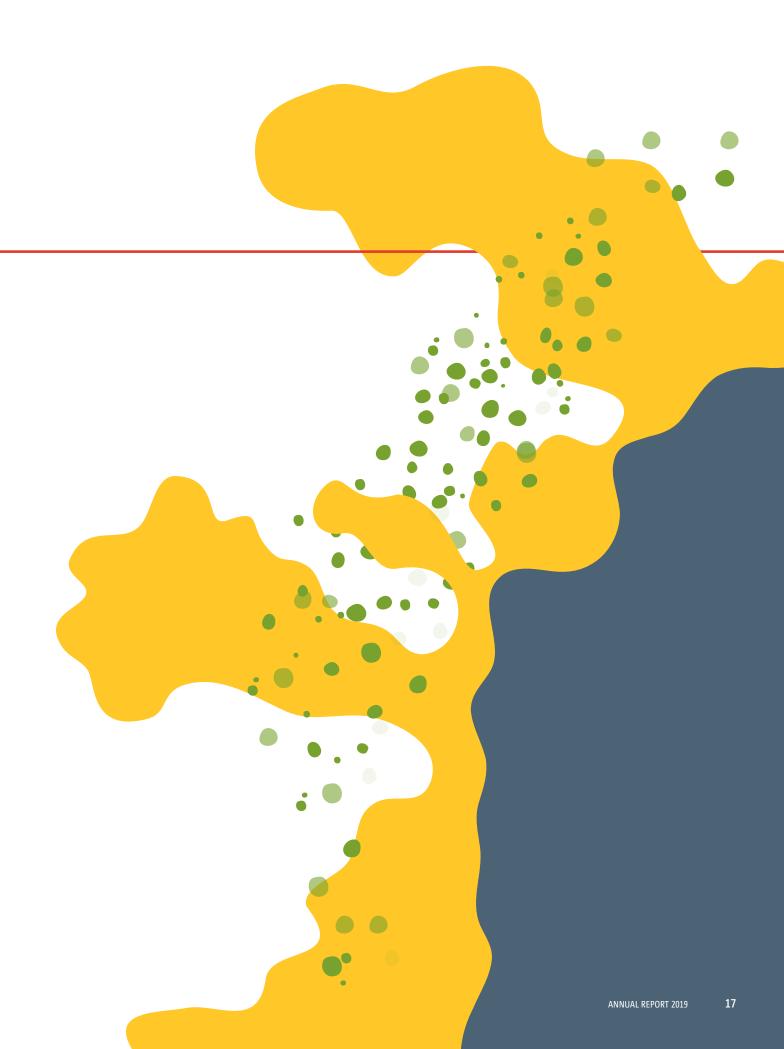
The CMLTA CCP is based on an annual Self-Assessment of Practice. It enables MLTs to recognize specific learning needs, establish a Learning Plan to maintain or develop competence, and ultimately self-direct a learning path to remain current in the profession. A Learning Plan is a contractual agreement with the CMLTA to develop and/or enhance one's professional knowledge, skills, judgments, and attitudes.

Regulated Members create a new Learning Plan outlining a minimum of three (and maximum of six) Learning Objectives

for the upcoming registration year. Over the course of the registration year, individuals document learning activities undertaken to complete their Learning Objectives as identified on a Learning Plan. MLTs must assume personal accountability in professional practice to remain as skilled, knowledgeable, and competent practitioners. Revisions to a submitted Learning Plan are made only when an identified Learning Objective can no longer be completed, due to a change in employer or area of practice, or an extenuating circumstance.

It is important to note the CCP represents *mandatory* continuing education that MLTs must complete annually to satisfy government-based requirements. The CPP is neither inclusive nor representative of all annual learning and professional development voluntarily undertaken by a professional practitioner or mandated by an employer.

Version 4 of the CCP became effective with the 2017 registration and MLT Practice Permit renewal season. The CMLTA recognizes the *Standards of Practice* as the foundational and fundamental doctrine for MLTs—it lends itself to be adapted as an assessment tool for gauging continuing competence within the numerous practice environments of medical laboratory services. CCP Version 4 translates each standard in the Standards of Practice into an Enabling Competency, to be used on the Self-Assessment of Practice. Regulated Members must complete a Self-Assessment of Practice by rating all Enabling Competencies using two Self-Assessment of Practice Statements. Enabling Competencies identified as Developmental/Advancing/ Expanding (DEV) are automatically translated into Learning Objectives, which can then be prioritized by the Regulated Member and included on a new Learning Plan.



CONTINUING COMPETENCE PROGRAM -ANNUAL COMPLIANCE AUDIT

Legislation stipulates regulatory colleges must have an established process to review and evaluate previous and current Regulated Members' compliance with the CCP. The CCP Compliance Audit serves a two-fold purpose: to systematically assess the integrity of the CCP as mandated by Alberta Health, and to monitor the conformance of Regulated Members. To fulfill this mandate, at the beginning of each year, the CMLTA randomly selects a minimum of 10% of Regulated Members from the previous year's registration roster to participate in the Compliance Audit. Participation in the CCP Compliance Audit is a mandatory component of CMLTA registration and annual MLT Practice Permit renewal. As it is an audit of the previous registration year(s), current Regulated Members, and even those no longer registered in Alberta, are eligible.

Individuals selected must participate and submit evidence of continuing education and professional development activities, including documentation and/or evidence of learning for one to five previous years of professional practice. The CMLTA instructs individuals to retain copies of all CCP documentation, including recorded learning activities, for a minimum of five years for this purpose. CCP Compliance Audit participants are instructed to submit required documentation via the Member Login on the CMLTA website: Completed CCP Activity Log, Employer Verification of MLT Employment and MLT Practice Hours, and a Compliance Audit Declaration.

The CMLTA follows a detailed schedule with specified deadlines to ensure timely processing and correspondence with the audited individual. Individuals who disregard the deadlines are charged cumulative late fees. The CMLTA reviews the submitted documentation in conjunction with online annual renewal documents, determining if an individual adhered to the stated Learning Plan, completed the necessary learning activities, and in essence, fulfilled the contractual Learning Plan obligations. This audit process tests the conformance of Regulated Members to defined standards, via the review of objective evidence of learning.

If the individual has submitted satisfactory documentation, a pass letter is emailed. When the CMLTA determines a Compliance Audit is incomplete, the individual will be notified by email of the deficiencies and/or remedial work required to successfully complete the Compliance Audit. Once a Compliance Audit notice has been issued, it remains outstanding on an individual's file until they have complied with the CMLTA request. Individuals are 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.

The CCP Compliance Audit process also allows the CMLTA to evaluate the CCP structure, format, content, and requirements as part of a good governance model. It's a hands-on tool to monitor levels of CCP compliance. The pass rate is a reflection of certain effectiveness of the CCP, so when pass rates fall below targeted levels, the CMLTA examines audit specifics with the intent to revise, improve, or provide the necessary clarification to Regulated Members.

THE FOLLOWING TABLE SUMMARIZES COMPLIANCE AUDIT STATISTICS FOR THE CONTINUING COMPETENCE PROGRAM FOR 2016 - 2019.

DESCRIPTION	2016
Number audited	335
Percent audited (rounded)	14%
Successful audits	335
\cdot Submitted on or before deadline	335 (100%)
Submitted after deadline	0
Number forwarded to Complaints Director for non-compliance	0
Deferred* until return to MLT practice required	0
Cancelled audits	0

* Applicable to only individuals not currently registered with the CMLTA. These individuals have been notified that prior to reinstatement of their registration, all audit requirements must be satisfied. Individuals who communicated to the CMLTA their intent to postpone submission of Compliance Audit documents until they reinstate as a practicing MLT are not subject to penalty payments. Those who neglected to contact the CMLTA will be required to comply with CCP requirements, paying outstanding penalty payments of \$450 before reinstating their registration with the CMLTA.

2017	2018	2019
238	227	238
10%	10%	10%
234	227	234
217 (93%) 17 (7%)	224 (99%) 3 (1%)	231 (97%) 3 (1%)
0	0	0
3	0	4
1	0	0



Complaints and Discipline

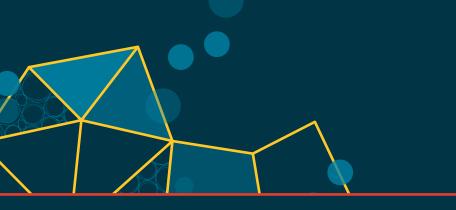
Pursuant to Part 4 of the *Health Professions Act (HPA)*, this section highlights the complaints of unprofessional conduct the CMLTA received in 2019. It includes the current status and/or final disposition of complaints against regulated practitioners of the medical laboratory science profession.

The HPA defines unprofessional conduct, whether or not 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. Since coming under the HPA in 2002, the CMLTA's annual complaints have ranged from zero to seven. Complaints are primarily from employers, related to their obligation pursuant to Section 57 to notify the CMLTA of employee terminations, suspensions, or resignations in which unprofessional conduct and/or behaviour were contributing factors.



THE FOLLOWING TABLE SUMMARIZES COMPLAINT DATA FOR THE 2019 REGISTRATION YEAR.

Files carried forward from 2017 1	
New complaints received in 2019 6	
Employer complaints 3	
Peer complaints 2	
Public complaints 0	
Complaints of sexual abuse 0	
Complaints of sexual misconduct 0	
Self-Reported 1	
Complaints dismissed 0	
Files referred for assessment under section 118 HPA 0	
Files referred to investigation 2	
Files referred to hearing tribunal 1	
Complaint review committee appeals 0	
Files closed during the year4	

FOR THE YEAR ENDED DECEMBER 31, 2019 AND INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS

Financial Statements

ANNUAL REPORT 2019

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Independent Auditor's Report

To the Members of College of Medical Laboratory Technologists of Alberta

OPINION

We have audited the financial statements of College of Medical Laboratory Technologists of Alberta (the College), which comprise the statement of financial position as at December 31, 2019, and the statements of revenues and expenditures, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the College as at December 31, 2019, and the results of its operations and cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO).

BASIS FOR OPINION

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

RESPONSIBILITIES OF MANAGEMENT AND THOSE CHARGED WITH GOVERNANCE FOR THE FINANCIAL STATEMENTS

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

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

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

AUDITOR'S RESPONSIBILITIES FOR THE AUDIT OF THE FINANCIAL STATEMENTS

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

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- made by management.
- conditions may cause the College to cease to continue as a going concern.
- financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

Edmonton. Alberta March 21, 2020

perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error,

• Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the

• Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures

• Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or

• Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the

Bruce MS Mahon Professional Corporation Chartered Professional Accountants

Statement of Revenues and Expenditures Year Ended December 31, 2019

	201	9 2018
REVENUE		
Membership fees	\$ 1,214,62	5 \$ 1,199,025
Interest	112,44	7 82,379
Recoveries, advertising and other	57,65	4 1,500
	1,384,72	6 1,282,904
EXPENSES		
Salaries and wages	\$ 389,25	8 \$ 567,351
Rent and common area costs	152,11	5 139,788
Legal fees	104,42	1 102,749
Computer and website	66,70	4 43,782
Consulting fees	53,10	2 2,441
Council and subcommittees	47,50	6 32,445
Amortization	46,37	1 16,052
Office	37,89	1 40,849
Bank and credit card charges	35,71	2 42,292
Conduct	31,30	2 39,634
Accounting and audit fees	21,28	8 23,088
Registration	10,48	2 9,284
Postage and copying	9,07	7 13,038
Publications	7,28	5 7,042
Insurance	6,32	5 5,837
Continuing competence	5,50	1 840
Telephone	3,83	9 3,766
Deputy registrar	3,68	0 685
Registrar	3,25	6 1,787
	1,035,11	5 1,092,750
EXCESS OF REVENUE OVER EXPENSES FROM OPERATIONS	349,61	1 190,154
OTHER (EXPENSES)		
Loss on disposal of equipment		- (2,198)
EXCESS OF REVENUE OVER EXPENSES	\$ 349,61	1 \$187,956

Statement of Changes in Net Assets Year Ended December 31, 2019

	2018 BALANCE		REVENUE KPENSES	т	RANSFERS		2019 BALANCE
UNRESTRICTED	\$ 1,724,258	\$	395,982	\$	(730,586)	\$	1,389,654
INTERNALLY RESTRICTED							
Invested in equipment	156,365		(46,371)		20,586		130,580
Operating reserve	2,000,000		-		-		2,000,000
Conduct contingency reserve	1,000,000		-		-		1,000,000
Renovation and relocation reserve	-		-		150,000		150,000
Special legal reserve	-		-		500,000		500,000
Patient relations program reserve	-		-		60,000		60,000
	3,156,365		(46,371)		730,586		3,840,580
	\$ 4,880,623	\$	349,611	\$	-	\$	5,230,234

	2017 BALANCE	EXCESS OF R OVER EX		TR	RANSFERS		2018 BALANCE
UNRESTRICTED	\$ 1,650,710	\$	206,206	\$	(132,658)		\$ 1,724,258
INTERNALLY RESTRICTED							
Invested in equipment	41,957		(18,250)		132,658		156,365
Operating reserve	2,000,000		-		-		2,000,000
Conduct contingency reserve	1,000,000		-		-		1,000,000
	3,041,957		(18,250)		132,658		3,156,365
	\$ 4,692,667	\$	187,956	\$	-	9	\$ 4,880,623

Statement of Financial Position

December 31, 2019

ASSETS	2019	2018
CURRENT		
Cash	\$ 1,514,954	\$ 1,301,941
Accounts receivable	4,575	500
Prepaid expenses	32,536	20,131
Investments (Note 3)	4,770,372	4,670,973
	6,322,437	5,993,545
EQUIPMENT (Note 4)	130,580	156,366
	\$ 6,453,017	\$ 6,149,911

LIABILITIES AND NET ASSETS			
CURRENT			
Accounts payable and accrued liabilities	\$	20,681	\$ 33,759
Wages payable		89,702	109,579
Unearned membership fees (Note 5)		1,112,400	1,125,950
		1,222,783	1,269,288
NET ASSETS			
Unrestricted		1,389,654	1,724,258
Internally restricted		3,840,580	3,156,365
		5,230,234	4,880,623
	\$	6,453,017	\$ 6,149,911

CONTINGENT LIABILITY (Note 8)

COMMITMENTS (Note 7)

On Behalf of Council

Signed by:

Valentin Villatoro Danielle Marchand President Council Member

Statement of Cash Flows Year Ended December 31, 2019

OPERATING ACTIVITIES Excess of revenue over expenses Items not affecting cash: Amortization of equipment Loss on disposal of equipment Changes in non cash working capital: Accounts receivable Accounts payable and accrued liabilities

Unearned membership fees

Prepaid expenses

Wages payable

Cash flow from operating activities

INVESTING ACTIVITIES

Purchase of equipment Decrease (increase) in investments

Cash flow used by investing activities

INCREASE (DECREASE) IN CASH FLOW

Cash - beginning of year

CASH - END OF YEAR

28 COLLEGE OF MEDICAL LABORATORY TECHNOLOGISTS OF ALBERTA

2019	2018	
\$ 349,611	\$ 187,956	
46,371	16,052	
-	2,198	
395,982	206,206	
(4,075)	200	
(13,078)	7,549	
(13,550)	5,875	
(12,405)	(1,379)	
(19,877)	39,332	
(62,985)	51,577	
222.007	257 702	
332,997	257,783	
(20,585)	(132,658)	
(99,399)	(665,306)	
(119,984)	(797,964)	
213,013	(540,181)	
1,301,941	1,842,122	
 \$ 1,514,954	\$ 1,301,941	

Notes to Financial Statements

1. PURPOSE OF THE COLLEGE

College of Medical Laboratory Technologists of Alberta (the "College") is a not-for-profit organization which became a self-regulating profession under the *Health Professions Act* on March 1, 2002.

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. SIGNIFICANT ACCOUNTING POLICIES

Basis of presentation

The financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations (ASNFPO). 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 estimated and collection is reasonably assured.

Membership revenue is recognized as revenue in the year to which the membership fees relate. Interest revenue is recognized as it is earned.

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.

Donated services

The work of the College is dependent on the voluntary service of many individuals. The fair value of donated services cannot be reasonably determined and are therefore not reflected in these financial statements.

Investments

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

Equipment

Equipment is stated at cost or deemed cost less accumulated amortization and is amortized over its estimated useful life on a declining balance basis at the following rates:

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

The College regularly reviews its equipment to eliminate obsolete items.

Equipment acquired during the year but not placed into use are not amortized until they are placed into use.

Financial instruments policy

Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, financial assets with actively traded markets are reported at fair value, with any unrealized gains and losses reported in income. All other financial instruments are reported at amortized cost, and tested for impairment at each reporting date. Transaction costs on the acquisition, sale, or issue of financial instruments are expensed when incurred.

Cash and cash equivalents

Cash and cash equivalents consist of cash balances with banks.

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 period. These estimates are reviewed annually and adjustments are made to income as appropriate in the year they become known.

Comparative figures

Certain comparative amounts have been reclassified to conform to the current year's presentation.

3. INVESTMENTS

Term deposits with interest rates ranging from 1.60% to 1.70% Feb 24, 2020 and March 16, 2020

Guaranteed investment certificates with interest rates ranging 1.50% to 3.33%, maturing between January 5, 2020 and Feb 2

Accrued interest receivable

The cost of the investments plus accrued interest receivable approximates their market value.

4. EOUIPMENT

	Cost	Accumulated amortization	2019 Net book value	2018 Net book value
Computer equipment	\$ 38,399	\$ 24,290	\$ 14,109	\$ 15,081
Computer software	196,415	92,779	103,636	125,241
Office equipment	79,361	66,526	12,835	16,044
	\$ 314,175	\$ 183,595	\$ 130,580	\$ 156,366

Amortization of equipment provided in the current year totaled \$46,371 (2018 - \$16,052).

5. UNEARNED MEMBERSHIP FEES

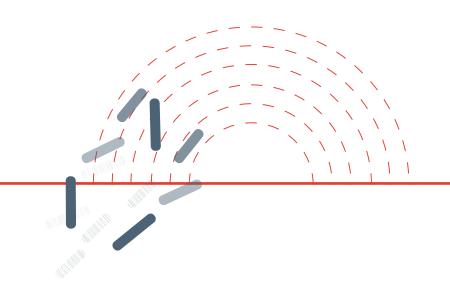
Membership fees are collected in advance of the year to which they relate.

Balance, beginning of year

Less amounts recognized as revenue in the year

Plus amounts received related to the following year

BALANCE - END OF YEAR



	2019	2018	
%, maturing between	\$ 1,975,185	\$ 1,940,596	
g from 19, 2026	2,714,798	2,689,739	
	80,389	40,638	
	\$ 4,770,372	\$ 4,670,973	

	2019	2018
\$	1,125,950	\$ 1,120,075
	(1,125,950)	(1,120,075)
	1,112,400	1,125,950
\$	1,112,400	\$ 1,125,950

6. NET ASSETS - INTERNALLY RESTRICTED

In fiscal 2019, Council approved three new internally restricted funds and the associated transfers from unrestricted net assets. The funds in all internally restricted accounts can only be expended upon approval by Council.

7. COMMITMENTS

The College has a long term lease with respect to its premises and a copier lease. There is also a contract to support a new member database. The premises lease provides for payment of utilities, property taxes and maintenance costs. Future estimated contractual payments for the next five years as at December 31, 2019, are as follows:

2020	\$ 165,560
2021	127,685
2022	127,685
2023	123,545
2024	122,165
	\$ 666,640

8. CONTINGENT LIABILITY

During the fiscal 2018 year, a former employee instituted proceedings against the College regarding amounts claimed to be owed. The College has contested this claim. Neither the possible outcome nor the amount of possible settlement can be foreseen, therefore, no provision has been recognized in the financial statements.

9. FINANCIAL INSTRUMENTS

The College is exposed to various risks through its financial instruments and has a comprehensive risk management framework to monitor, evaluate and manage these risks. The following analysis provides information about the College's risk exposure and concentration as of December 31, 2019.

(a) 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 rate risk, interest rate risk and other price risk. The College is mainly exposed to interest rate risk.

(b) Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. The College is exposed to interest rate risk primarily through its fixed-rate investments. The College manages this exposure through its investment policies and procedures.



(c) Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The College considers that it has sufficient funds available to meet current and long-term financial needs.

(d) Credit risk

Credit risk arises from the potential that a counter party will fail to perform its obligations. The College is exposed to credit risk from its accounts receivable. At any time, the College does not have any significant receivables that would have an impact on the overall operations of the College.

Unless otherwise noted, it is management's opinion that the College is not exposed to significant other price risks arising from these financial instruments.

10. 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. As a voluntary member-based organization, the AFRHP is made up 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, AFRHP members promote leading practice initiatives to foster public awareness and professional accountability of its practitioners. AFRHP members have established networks nationally and internationally, developing a communal body of shared knowledge and expertise 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). CAMLPR's purpose is to provide leadership and a forum where MLT regulators can collaborate, discuss, and respond to national regulatory challenges and opportunities. They exchange information about regulatory trends, leading practices, policy, and legislation. CAMLPR strives to unify processes, encouraging consistency and standardization for the MLT profession across Canada.

On June 9, 2011, the group—including Alberta, Manitoba, New Brunswick, Nova Scotia, Ontario, Quebec, and Saskatchewan formalized CAMLPR as a national not-for-profit corporation (Newfoundland joined in 2015). They signed a Memorandum of Understanding (MOU), necessitated by the 2009 amendments to the Canadian Free Trade Agreement (formerly known as the Agreement on Internal Trade), which introduced "permit-onpermit" recognition and provincial mobility for MLTs between regulated provinces. The MOU ensures all regulated MLTs have common entrance to practice competencies, regardless of the initial province of registration. From a national perspective, this contributes to patient safety and public protection. The MOU also standardizes the release of Regulated Member information (registration history, continuing education/competence

compliance, and professional misconduct) between regulated provinces. Other developments include the introduction of national MLT Standards of Practice and MLT Code of Ethics, and most recently, working together to select the Health Standards Organization/Accreditation Canada as the third-party provider of accreditation services for MLT educational training programs across Canada. Incorporated in 2018. CAMLPR now has a website (www.camlpr.org).

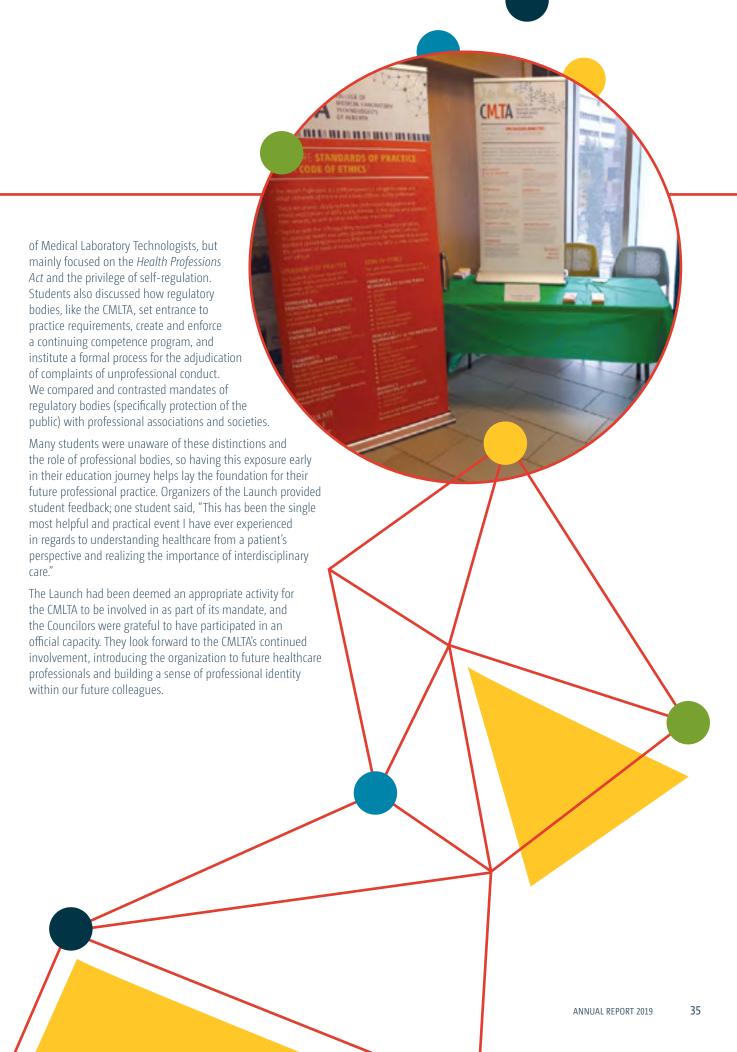
INTERPROFESSIONAL LAUNCH: INTRODUCING STUDENTS TO HEALTH **PROFESSION REGULATION.**

In September 2019, Councilors Pauline Tomlin and Shelly Stevens (Vice President) had the honour of representing the CMLTA at the University of Alberta Interprofessional Learning Pathway Launch. "The Launch," as it's known at the University, happens every September as a three-hour learning session that inspires health professions' students on their journey of learning how to work collaboratively. Often, it's their first exposure to how their unique profession fits in the healthcare system. Students begin to understand a patient's role on a healthcare team, and learn how interprofessional communication, coordination, and collaboration affect care. The Launch typically includes students from Medical Laboratory Science, Medicine, Nursing, Nutrition, Occupational Therapy, Pharmacy, Physical Education, Physical Therapy, Radiation Therapy, and Speech Language Pathology.

Over 900 students, divided into small interprofessional groups, rotated through learning activities that included case studies and discussions with patients and regulatory bodies. The student groups were given 35 minutes to interact with over 23 professional organizations, each with their own booth. Regulatory bodies, professional associations, and societies are invited each year, to highlight professional standards of practice and how they support ethical, safe, and patient-centered care. Students engaged with these organizations, exploring how their profession works alongside other professions and how the foundational principles of each organization impacts collaborative practice (like standards of practice, code of ethics. etc.).

The CMLTA represented its regulatory body to convey the work performed on behalf of the public, patients, and Regulated Members. Discussions began with a background about the role

the CMLTA to be involved in as part of its mandate, and the Councilors were grateful to have participated in an official capacity. They look forward to the CMLTA's continued professionals and building a sense of professional identity within our future colleagues.





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