

20



A N N U A L R E P O R T

CMLTA

COLLEGE OF
MEDICAL LABORATORY
TECHNOLOGISTS
OF ALBERTA

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.

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's Message

The challenge with writing this message for 2020 is that pretty much everything I could say about 2020 has already been said. Words and phrases such as *unprecedented*, *new normal*, and *pivot* have become cliché at this point. Instead, I want to take this opportunity to give thanks. Thank you to the medical laboratory professionals working tirelessly behind the scenes. Whether your work is directly related to COVID-19 testing or not, your work has a profound impact on Albertans' health, and you deserve recognition for that.

Thank you to my fellow volunteers on the CMLTA Council, Legislation Sub-Committee, and Finance/Audit Sub-Committee. You helped to continue the vital work of volunteering for the College while also dealing with the pandemic's professional and personal challenges. Thank you to the CMLTA staff who managed to transition operations from in-person to virtual spaces and continued the core functions of the College. Of course, there were challenges, hiccups, and course corrections along the way, but that's 2020 for you!

We can't choose the times we live through, but we can choose what we do with our time. Looking back at my second year as President and my third and final year as Councilor, I can't say I would have chosen to go through the challenges I did during my tenure. Still, I believe that they've shaped me into a better professional and equipped me to deal with more than I imagined when I first signed up as a volunteer. I'm grateful for my time at the CMLTA. I hope that we continue to engage and inspire a strong group of Regulated Members willing to step forward and continue to support the necessary work of self-regulation. It's a privilege that I hope we as a profession never take for granted.

A colleague of mine recently shared this idea from an article written by Simon Sinek:

“

To think of 2020 as “bad” and “over” ignores the fact that the impact of things that began or grew in 2020 live on and we will be still dealing with them in 2021. I find it healthier not to think of 2020 as a bad year, but rather that it had more behind days than we would like. And, I look forward to 2021 having many more ahead days.

I feel optimistic about what lies ahead. Not in a naïve way, as I know, there are also challenges ahead, but rather, with both eyes open. I am confident that the College is in good hands and will continue to protect and serve the public, patients, and our Regulated Members. Thank you for the opportunity to serve and be a part of this important work. I wish you all a healthy 2021, with many more ahead days than behind.

Valentin (Tino) Villatoro

2020 CMLTA President

Public Members' Report

The CMLTA staff and council have approached the necessary changes of 2020 with adaptability, organization, and positivity. Although the remote format has been quite challenging, the public members were impressed with everyone's participation and presence at the meetings. There is a lot of healthy discussion on key issues. In addition, the openness and transparency between the Executive Director, the staff, and council has continually improved.

The staff's hard work this past year should not go unnoticed. They quickly adopted a new remote protocol for council meetings, communicated the new format effectively, and have made adjustments along the way by responding to feedback from council members. We are particularly proud of the College staff for bringing the importance of MLA regulation to the attention of the health ministry. Although not finalized yet, it is one more goal to check off the list from our strategic planning session in 2019. The staff at the CMLTA continue to impress with their willingness to tackle the College's goals.

Another group who deserve a huge thank you are the regulated members. It is MLT's selfless dedication to their work during this pandemic that has kept the province moving forward. Their work, although we do not often see it on the front lines, has been crucial to keeping us all safe.

With legislative changes, we are looking forward to welcoming some new public members to council. We are hoping to see continued government support for the role of Public Members to evolve from simply attending regular Council meetings to also include participation on appropriate committees or ad hoc tasks regularly assigned to Regulated Council members. We are hopeful that the transparency and openness which we have made great efforts to establish these past years, will continue to grow with our newest members as well.

Submitted by:

Domingo Chavez, Kate Perala, and Aaron Zelmer

CMLTA Overview

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 *Medical Laboratory Technologists Profession Regulation* and profession-specific Schedule 11 coming into force, Medical Laboratory Technologists (MLTs), or CMLTA Regulated Members, were authorized to 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.

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.

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 2020 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 18 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 2020:

- As per the HPA and the *Medical Laboratory Technologists Profession Regulation*, council approved refresher education programs for re-entry to practice requirements.
- During the COVID-19 pandemic, the CMLTA was able to transition so all operations could be performed remotely, without any delays in service.
- CMLTA Council approved emergency application procedures should the Alberta Government require former MLTs to return to the workforce due to the pandemic.
- The CMLTA partnered with the Centre for Race and Culture and held an online workshop titled "Understanding and Addressing Unconscious Bias."

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;
- (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 provided 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

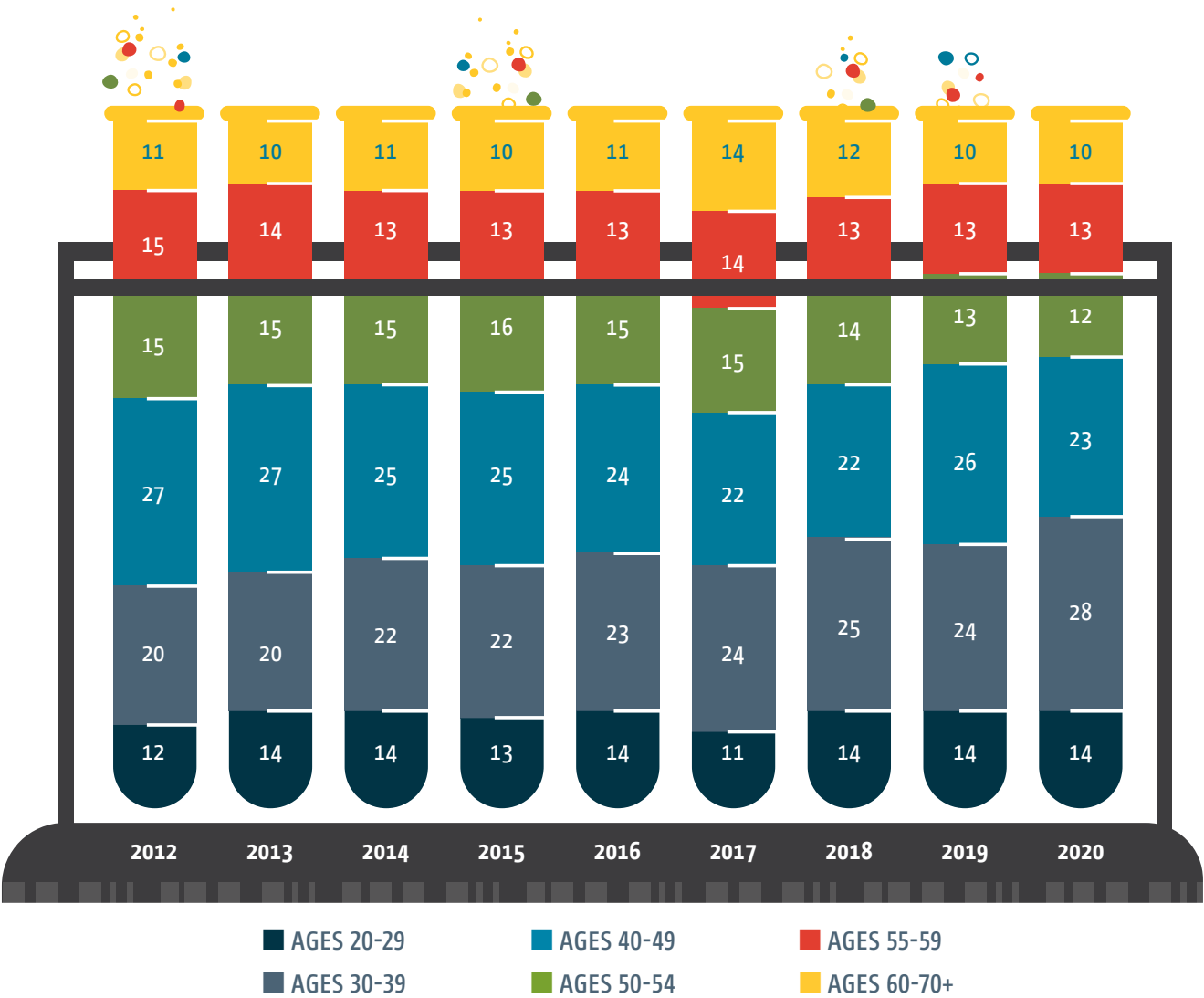
NAIT discontinued its Cytotechnology Program in 2018, leaving only two programs in Canada (The Michener Institute in Ontario and SIAST in Saskatchewan).

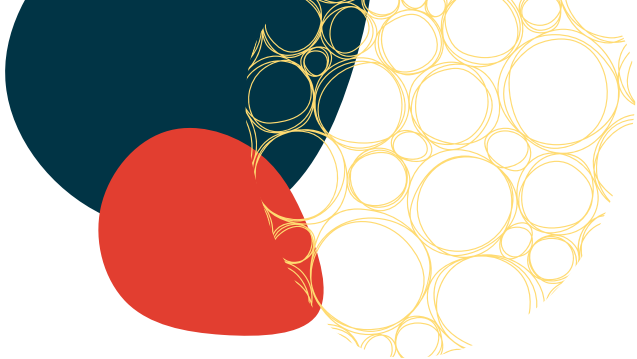
THE FOLLOWING TABLE SUMMARIZES REGISTER DATA FOR THE PAST FIVE REGISTRATION YEARS.

DESCRIPTION/REGISTER	2020	2019	2018	2017	2016
General MLT	2227	2269	2309	2301	2304
Conditional	0	15	31	24	17
Registered under section 8 of the MLT Regulations	41	43	43	42	43
Restricted to Area of Practice	27	58	n/a*	n/a*	n/a*
Diagnostic Cytology	73	81	82	83	83
Clinical Genetics	50	51	50	47	47
Provisional	61	61	52	66	63
Courtesy Register	0	0	0	0	0
TOTAL CMLTA MEMBERS	2479	2578	2567	2567	2577

* Data was not separated from general MLT for these years.

THE FOLLOWING TABLE SUMMARIZES AGE DEMOGRAPHIC DATA FROM 2012 TO 2020 IN THE MEDICAL LABORATORY PROFESSION (VALUES ARE EXPRESSED AS PERCENTAGES).





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 post-secondary 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.

THE FOLLOWING TABLE SUMMARIZES APPLICATION DATA FOR THE PAST FIVE YEARS.

TYPE OF APPLICATION	2020	2019	2018	2017	2016
Renewal	2432	2441	2443	2435	2440
Initial	117	119	112	115	119
Alberta Trained	12	18	8	8	5
New Graduates from Canadian Accredited MLT Training Program	79	82	73	75	78
Out of Province	4	7	15	13	24
Out of Country	22	12	16	19	12
Reinstatement	20	18	24	19	23
Alberta Trained	12	11	22	16	17
Out of Province	2	5	1	1	4
Out of Country	6	2	1	2	2
Applications Denied	2	0	0	1	0
Registration Application Decision Appeals to Council	0	0	0	0	0

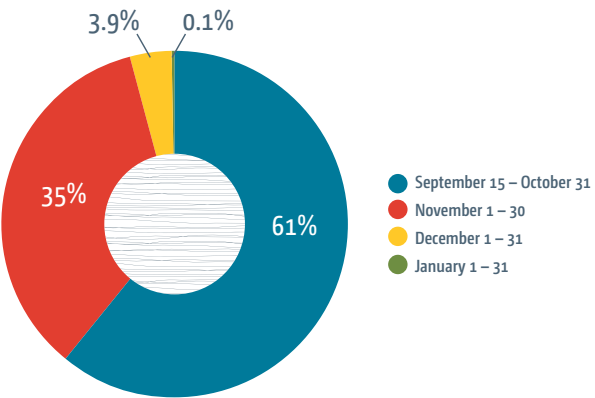
RENEWAL

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.

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.

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 another 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.

THE FOLLOWING TABLE SUMMARIZES THE SUBMISSION DATE FOR THE RENEWAL OF 2020 REGISTRATION AND MLT PRACTICE PERMITS.



THE FOLLOWING TABLE SUMMARIZES REASONS FOR THE NON-RENEWAL OF REGISTRATION AND AN MLT PRACTICE PERMIT FOR THE LAST FIVE YEARS.

DESCRIPTION	2020	2019	2018	2017	2016
Extended Leave (<i>educational, long term disability, parental, etc.</i>)	18	8	6	11	9
Cancelled (<i>No communication, non-payment of annual dues</i>)	23	26	15	17	14
Left the MLT Work Environment	19	24	21	20	22
Moved	31	16	34	37	24
Retired	61	48	54	54	55
Deceased	3	2	1	2	1
TOTAL	155	124	131	141	126

Pursuant to section 31(1) of the *Health Professions Act*, all applicants have a formal appeal process. It 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 2020, 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, and also enforce 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. MLTs are able 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 that 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 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 number 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.

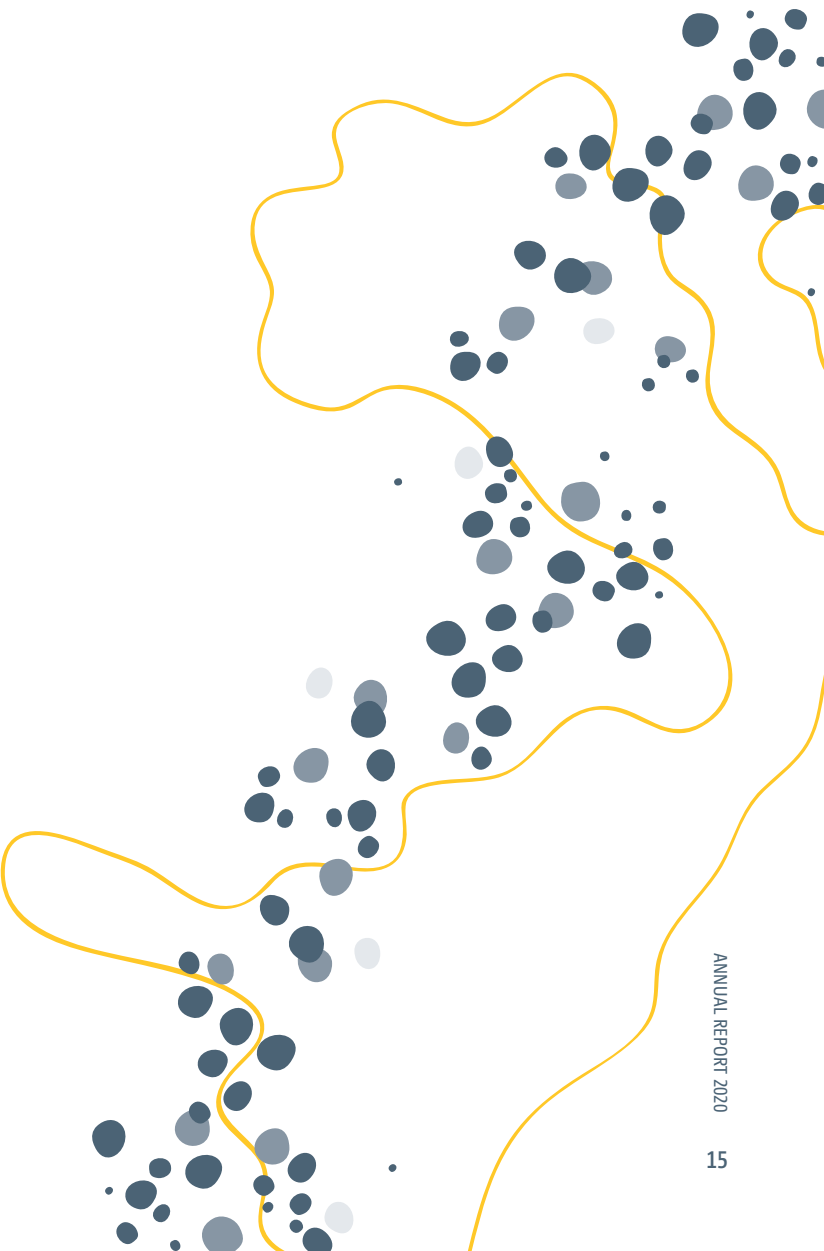
Selected individuals must participate and submit evidence of continuing education and professional development activities, including documentation and/or evidence of learning for one to five previous years of professional practice. The CMLTA instructs individuals to retain copies of all CCP documentation, 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.

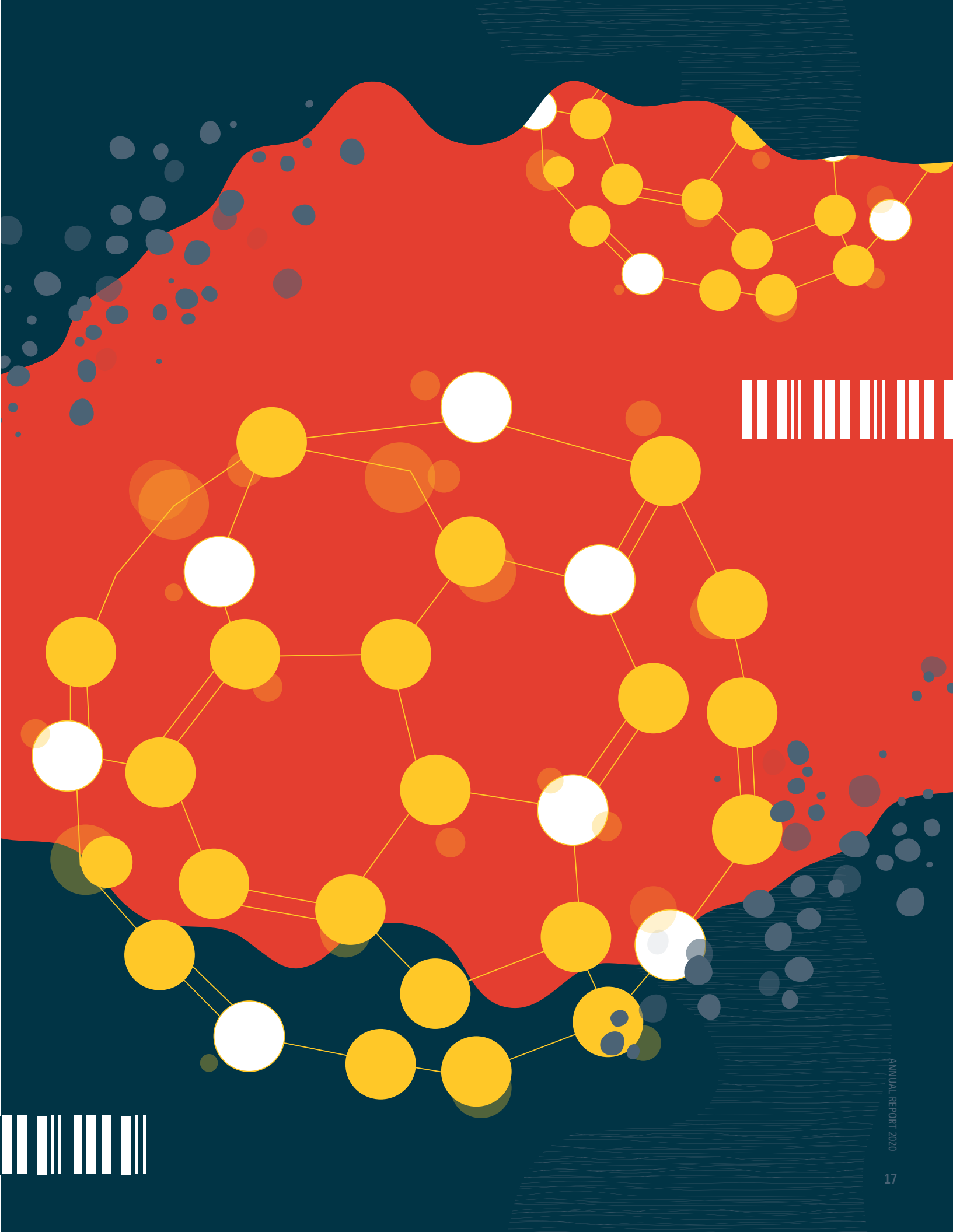


THE FOLLOWING TABLE SUMMARIZES COMPLIANCE AUDIT STATISTICS FOR THE CONTINUING COMPETENCE PROGRAM FOR 2016 – 2020.

DESCRIPTION	2020	2019	2018	2017	2016
Number audited	206	238	227	238	335
Percent audited (rounded)	8.5%	10%	10%	10%	14%
Successful audits	205	234	227	234	335
Submitted on or before deadline	198 (96%)	231 (99%)	224 (99%)	217 (93%)	335 (100%)
Submitted after deadline	8 (4%)	3 (1%)	3 (1%)	17 (7%)	0
Successful audits on initial submission	202	232	224	232	331
Successful audits after remedial work and resubmission	3	2	3	2	4
Number forwarded to Complaints Director for non-compliance	0	0	0	0	0
Deferred* until return to MLT practice required	0	4	0	3	0
Cancelled audits	1	0	0	1	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 or a complaint of unprofessional conduct may be initiated.



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 2020. 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, 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.

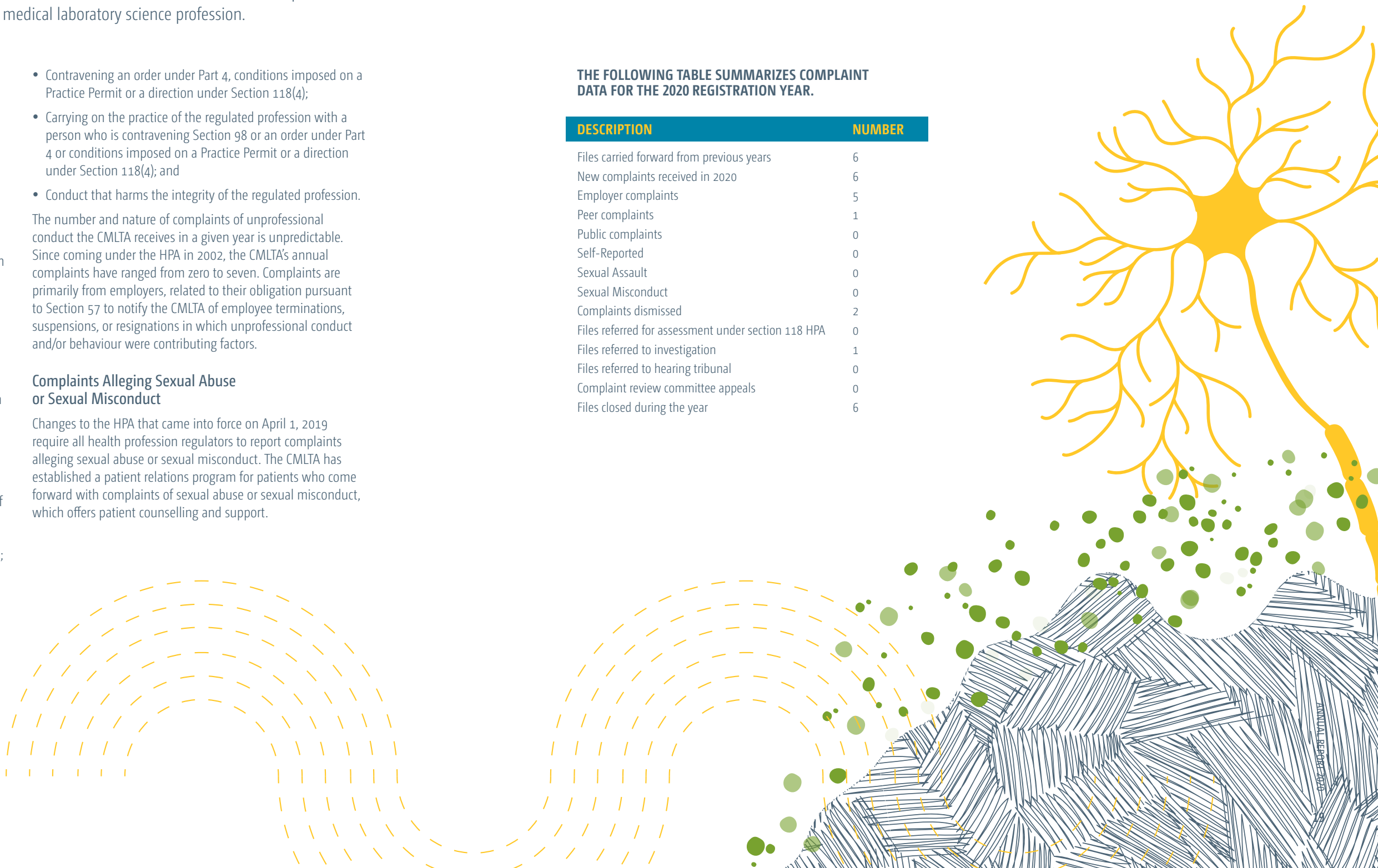
The number and nature of complaints of unprofessional conduct the CMLTA receives in a given year is unpredictable. Since coming under the HPA in 2002, the CMLTA's annual complaints have ranged from zero to seven. Complaints are primarily from employers, related to their obligation pursuant to Section 57 to notify the CMLTA of employee terminations, suspensions, or resignations in which unprofessional conduct and/or behaviour were contributing factors.

Complaints Alleging Sexual Abuse or Sexual Misconduct

Changes to the HPA that came into force on April 1, 2019 require all health profession regulators to report complaints alleging sexual abuse or sexual misconduct. The CMLTA has established a patient relations program for patients who come forward with complaints of sexual abuse or sexual misconduct, which offers patient counselling and support.

THE FOLLOWING TABLE SUMMARIZES COMPLAINT DATA FOR THE 2020 REGISTRATION YEAR.

DESCRIPTION	NUMBER
Files carried forward from previous years	6
New complaints received in 2020	6
Employer complaints	5
Peer complaints	1
Public complaints	0
Self-Reported	0
Sexual Assault	0
Sexual Misconduct	0
Complaints dismissed	2
Files referred for assessment under section 118 HPA	0
Files referred to investigation	1
Files referred to hearing tribunal	0
Complaint review committee appeals	0
Files closed during the year	6



2020 FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 2020
AND INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS

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, 2020, 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, 2020, 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 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, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit 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 College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- 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 conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the 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 27, 2021

Bruce MS Mahon Professional Corporation

Chartered Professional Accountants

Statement of Revenues and Expenditures

Year Ended December 31, 2020

	2020	2019
REVENUE		
Membership fees	\$ 1,183,525	\$ 1,214,625
Interest	86,837	112,447
Recoveries, advertising and other	1,200	57,654
	1,271,562	1,384,726
EXPENSES		
Salaries, wages and other employment costs	\$ 593,660	\$ 389,258
Rent and common area costs	140,695	152,115
Computer and website	92,852	66,704
Legal fees	74,115	104,421
Amortization	60,261	46,371
Office	58,554	37,891
Stakeholder engagement	50,347	-
Council and subcommittees	45,683	47,506
Bank and credit card charges	31,926	35,712
Consulting fees	31,732	53,102
Accounting and audit fees	26,289	21,288
Conduct	17,078	31,302
Publications	11,844	7,285
Postage and copying	9,604	9,077
Continuing competence	8,085	5,501
Insurance	7,767	6,325
Deputy registrar	4,688	3,680
Telephone	3,710	3,839
Registrar	3,227	3,256
Registration	95	10,482
	1,272,212	1,035,115
EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES FROM OPERATIONS	(650)	349,611
OTHER (EXPENSES)		
Loss on disposal of equipment	(4,825)	-
EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES	\$ (5,475)	\$ 349,611

Statement of Changes in Net Assets

Year Ended December 31, 2020

	2019 BALANCE	DEFICIENCY OF REVENUE OVER EXPENSES	TRANSFERS	2020 BALANCE
UNRESTRICTED	\$ 1,389,653	\$ 59,611	\$ (116,674)	\$ 1,332,590
INTERNALLY RESTRICTED				
Invested in equipment	130,580	(65,086)	16,674	82,168
Operating reserve	2,000,000	-	-	2,000,000
Conduct contingency reserve	1,000,000	-	(750,000)	250,000
Capital asset reserve	-	-	1,000,000	1,000,000
Special legal reserve	500,000	-	-	500,000
Renovation and relocation reserve	150,000	-	(150,000)	-
Patient relations program reserve	60,000	-	-	60,000
	3,840,580	(65,086)	116,674	3,892,168
	\$ 5,230,233	\$ (5,475)	\$ -	\$ 5,224,758

	2018 BALANCE	DEFICIENCY OF REVENUE OVER EXPENSES	TRANSFERS	2019 BALANCE
UNRESTRICTED	\$ 1,724,257	\$ 395,982	\$ (730,586)	\$ 1,389,653
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
	\$ 4,880,622	\$ 349,611	\$ -	\$ 5,230,233

Statement of Financial Position

December 31, 2020

ASSETS	2020	2019
CURRENT		
Cash	\$ 1,537,037	\$ 1,514,954
Accounts receivable	1,725	4,575
Prepaid expenses	73,133	32,536
	1,611,895	1,552,065
INVESTMENTS (Note 3)	4,852,089	4,770,372
EQUIPMENT (Note 4)	82,168	130,580
	\$ 6,546,152	\$ 6,453,017

LIABILITIES AND NET ASSETS

CURRENT		
Accounts payable and accrued liabilities	\$ 240,056	\$ 20,682
Wages payable	86,588	89,702
Deferred membership fees (Note 5)	994,750	1,112,400
	1,321,394	1,222,784
NET ASSETS		
Unrestricted	1,332,590	1,389,653
Internally restricted (Note 6)	3,810,000	3,710,000
Invested in equipment	82,168	130,580
	5,224,758	5,230,233
	\$ 6,546,152	\$ 6,453,017

COMMITMENTS (Note 7)

CONTINGENT LIABILITY (Note 8)

On Behalf of Council

Signed by:

Sally Abou-Zeki
President

Danielle Marchand
Council Member

Statement of Cash Flows

Year Ended December 31, 2020

	2020	2019
OPERATING ACTIVITIES		
Excess (deficiency) of revenue over expenses	\$ (5,475)	\$ 349,611
Items not affecting cash:		
Amortization	60,261	46,371
Loss on disposal of equipment	4,825	-
	59,611	395,982
Changes in non-cash working capital:		
Accounts receivable	2,850	(4,075)
Accounts payable and accrued liabilities	219,374	(13,078)
Deferred membership fees	(117,650)	(13,550)
Prepaid expenses	(40,597)	(12,405)
Wages payable	(3,114)	(19,877)
	60,863	(62,985)
Cash flow from operating activities	120,474	332,997
INVESTING ACTIVITIES		
Purchase of equipment	(16,674)	(20,585)
(Purchase) of investments	(81,717)	(99,399)
Cash flow used by investing activities	(98,391)	(119,984)
INCREASE IN CASH FLOW	22,083	213,013
Cash - beginning of year	1,514,954	1,301,941
CASH - END OF YEAR	\$ 1,537,037	\$ 1,514,954

NOTES TO FINANCIAL STATEMENTS

1. PURPOSE OF THE COLLEGE

College of Medical Laboratory Technologists of Alberta (the "College") is constituted under the *Health Professions Act*. The College is a not-for-profit organization and accordingly, is exempt from payment of income taxes.

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 (ASNPO). 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. Significant items subject to such estimates include the settlement value of contingent liabilities and the estimated life of capital assets.

Comparative figures

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

3. INVESTMENTS

	2020	2019
Term deposits with interest rates ranging from 1.60% to 1.70%, which matured between Feb 24, 2020 and March 16, 2020	\$ -	\$ 1,975,185
Guaranteed investment certificates with interest rates ranging from 0.70% to 3.33% (2019 - 1.50% to 3.33%), maturing between February 1, 2021 and February 19, 2026 (2019 - January 5, 2020 to February 19, 2026).	4,736,849	2,714,798
Accrued interest receivable	115,240	80,389
	\$ 4,852,089	\$ 4,770,372

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

4. EQUIPMENT

	Cost	Accumulated amortization	2020 Net book value	2019 Net book value
Computer equipment	\$ 42,006	\$ 18,253	\$ 23,753	\$ 14,109
Computer software	134,756	84,880	49,876	103,636
Office equipment	70,168	61,629	8,539	12,835
	\$ 246,930	\$ 164,762	\$ 82,168	\$ 130,580

Amortization of equipment provided in the current year totaled \$60,261 (2019 - \$46,371).

5. DEFERRED MEMBERSHIP FEES

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

	2020	2019
Balance, beginning of year	\$ 1,112,400	\$ 1,125,950
Less amounts recognized as revenue in the year	(1,112,400)	(1,125,950)
Plus amounts received related to the following year	994,750	1,112,400
BALANCE - END OF YEAR	\$ 994,750	\$ 1,112,400

6. NET ASSETS - INTERNALLY RESTRICTED

In fiscal 2020, Council approved one new internally restricted fund and the associated transfers from unrestricted net assets and between the existing internally restricted funds. The funds in all internally restricted accounts can only be expended upon approval by Council.

The following funds are internally restricted and have been established by Council for the purposes stated below:

The Unrestricted reserve accounts for the College's operations and administrative activities. The College's accumulated surpluses and deficits from year to year are added to and subtracted from the Unrestricted reserve.

The Invested in Equipment reserve reports the assets, liabilities, revenue and expenses related to the College's equipment.

The Operating reserve is established to provide for continued operations for eighteen months if there are unexpected interruptions in cash flow or unexpected expenses.

The Conduct Contingency reserve is intended to provide funds to cover the cost of discipline issues including appeals above the amount in the annual operating budget.

The Capital Asset reserve may be used to cover the cost of any future capital asset purchases.

The Special Legal reserve will provide funds to meet the cost of any legal issues not covered by insurance.

The Patient Relations Program reserve was created to ensure the College can fund the requirement to pay for treatment and counselling for patients who have experienced sexual abuse or sexual misconduct by members.

7. COMMITMENTS

The College has an operating lease with respect to its office premises which expires July 31, 2030 and a copier lease that expires in 2023. There is also a contract to support a new member database that expires December 31, 2021. The premises lease provides for payment of utilities, property taxes and maintenance costs. Future estimated contractual payments as at December 31, 2020, are as follows:

2021	\$	170,371
2022		129,768
2023		125,628
2024		124,248
2025 and thereafter		731,203
	\$	1,281,218

8. CONTINGENT LIABILITY

During the fiscal 2018 year, a former employee instituted proceedings against the College regarding amounts claimed to be owed. The claim seeks damages of \$792,642. Legal advice obtained as at the time the financial statements were prepared indicated that a range of settlement amounts are possible. The College has accrued \$200,000 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, 2020.

(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. COVID-19

In March 2020, the World Health Organization declared a global pandemic due to the novel coronavirus (COVID-19). The situation is constantly evolving, and the measures put in place are having multiple impacts on local, provincial, national and global economies.

Management is uncertain of the effects of these changes on its financial statements and believes that any disturbance may be temporary; however, there is uncertainty about the length and potential impact of the disturbance.

As a result, we are unable to estimate the potential impact on the College's operations as at the date of these financial statements.

OTHER ACTIVITIES

NATIONAL MEDICAL LABORATORY TECHNOLOGISTS WEEK

The Alberta Government formally recognized MLTs and their important role in healthcare by declaring the week of April 26 National Medical Laboratory Technologists Week.



ALBERTA FEDERATION OF REGULATED HEALTH PROFESSIONS

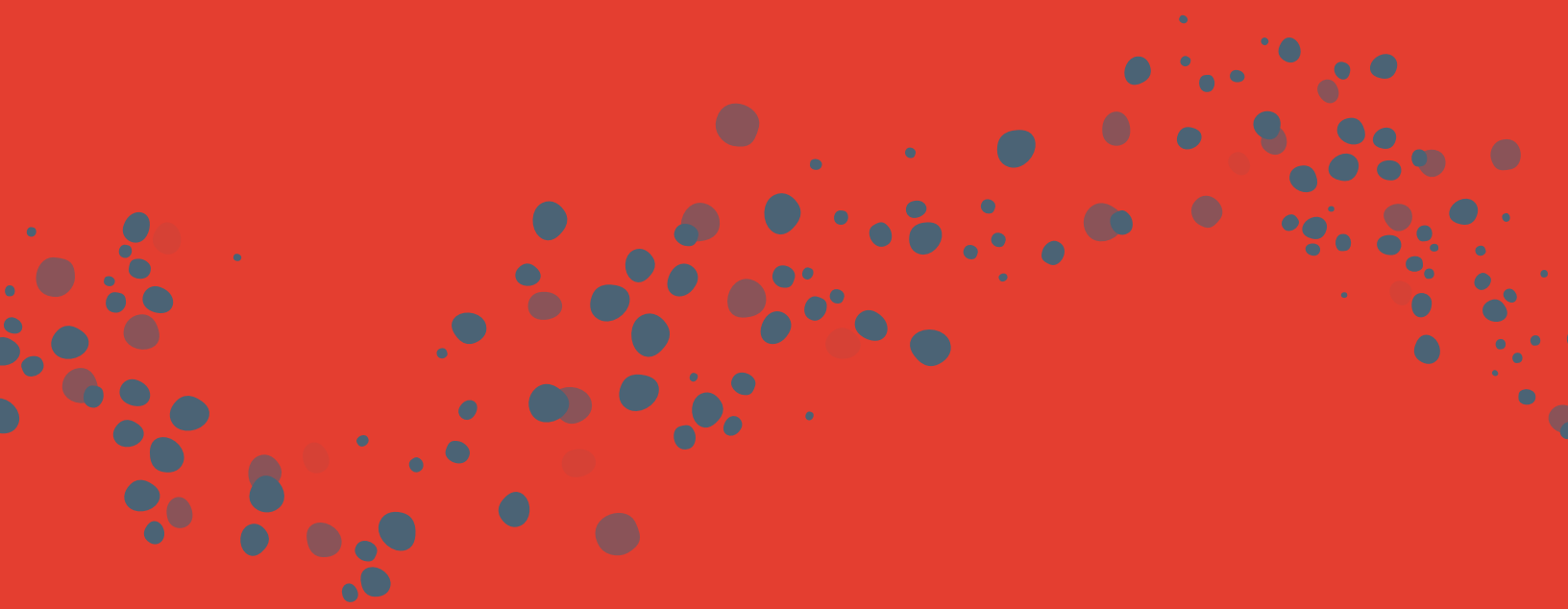
The CMLTA has been a member of the Alberta Federation of Regulated Health Professions (AFRHP) since 2005. As a voluntary member-based organization, the AFRHP is made up of 29 regulatory healthcare Colleges in the province. Independently, each college is a public body created by government to oversee 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, which introduced “permit-on-permit” 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 has more information available at www.camlpr.org.



College of Medical Laboratory Technologists of Alberta
301-9426 51 Avenue NW Edmonton, AB T6E 5A6

P 780-435-5452 **TF** 1-800-265-9351 **F** 780-437-1442
info@cmlta.org