

2023 ANNUAL REPORT



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 professionals. 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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ALBERTA LAND ACKNOWLEDGMENT

Treaty 6 Land Acknowledgement (Edmonton & Central)

The CMLTA acknowledges Treaty 6 territory, the ancestral and traditional territory of the Cree, Blackfoot, Nakota Sioux ("Na-ko-ta Soo"), Iroquois ("ear-uh-kwaa"), Dene ("Den-nay"), Ojibway ("Oh-jeeb-way") / Saulteaux ("So-toh")/ Anishinaabe ("ah-neesh-ih-NAW-bay"), as well as the Metis ("May-tee").

Treaty 7 Land Acknowledgement (Calgary & Southern)

The CMLTA acknowledges Treaty 7 territory, the ancestral and traditional territory of the Blackfoot Confederacy: Kainai ("Gigh-nigh"), Piikani ("Beh-gun-ee"), Siksika ("Sik-sik-ah"), Tssu T'ina ("Soo-tin-ah") and Stoney Nakota First Nations.

Treaty 8 Land Acknowledgement (Northern)

The CMLTA acknowledges Treaty 8 territory, the ancestral and traditional territory of the Cree, Dene, and Metis.

We acknowledge the many First Nations, Metis, and Inuit whose footsteps have marked these lands for generations, and are grateful for the traditional Knowledge Keepers and Elders who are still with us today and those who have gone before us. As an act of reconciliation and gratitude to those whose territory we reside on or are visiting, we recognize this land.

Introduction

President's Message

As I reflect on 2023, it is evident the year brought both challenges and opportunities for recognizing the vital role of Alberta's laboratories in healthcare. Our province's laboratory system has been in the spotlight on numerous occasions, highlighting the critical importance of laboratory services in a patient's healthcare journey. Despite the challenges, Alberta's laboratories remained resilient and dedicated to delivering high-quality healthcare services for all Albertans. I extend a sincere thank you to all CMLTA members for your unwavering dedication to our profession and the health and well-being of all Albertans.

It is a privilege to write this year's President's message after volunteering on the CMLTA Council for the past four years and being elected to represent regulated members for another three years. This last year marks a significant milestone for the CMLTA as we came to the end of our current Strategic Plan and undertook the responsibility of creating a new Strategic Plan for 2024 to 2027. Through the hard work of the CMLTA Council and the CMLTA staff, we kept public protection at the forefront of our decisions and successfully reached our goals—ending 2023 with accomplishment.

In 2023, we also completed the last of our initiatives from our Strategic Plan and launched our Public Visibility Campaign. From October to December, the campaign increased the CMLTA's visibility with the public and showcased the incredibly important work MLTs do throughout a patient's healthcare journey to keep them safe and provide reliable diagnostic results. The CMLTA continued engaging with members through free educational webinars and our podcast series. For the first time, we also held Blanket Ceremonies in recognition of the National Day for Truth and Reconciliation, honouring the Indigenous Peoples of Alberta and increasing our membership's awareness of Indigenous Peoples' history and experiences.

Another significant milestone for the CMLTA was the research and development of the new Continuing Competence Plan (CCP) format for members. Much work was done to consult with all stakeholders—the public, regulated CMLTA members, and other regulatory

colleges—to develop a CCP that will engage members and have them meaningfully reflect on their practices and how they can maintain a high level of competence while serving Albertans. The CMLTA will proudly implement this new CCP format during the 2025 renewal season.

It has been with great pride that I have participated in the important work of the CMLTA, having the pleasure of collaborating with talented regulated members and remarkable public members—all of whom volunteer their time to these important endeavours.

Looking ahead, we must remain vigilant in our commitment to excellence, recognizing that the challenges facing our profession are ever-evolving. By fostering collaboration, innovation, and a shared sense of purpose, we can continue to uphold the highest standards of public protection and governance—ensuring Albertans receive the safe, effective, and ethical laboratory services they deserve. Your commitment to excellence in self-governance sets the CMLTA apart, and I am confident that together we will continue to raise the standard of healthcare in Alberta. I sincerely thank the CMLTA staff for their dedication to supporting the CMLTA in their governance duties.

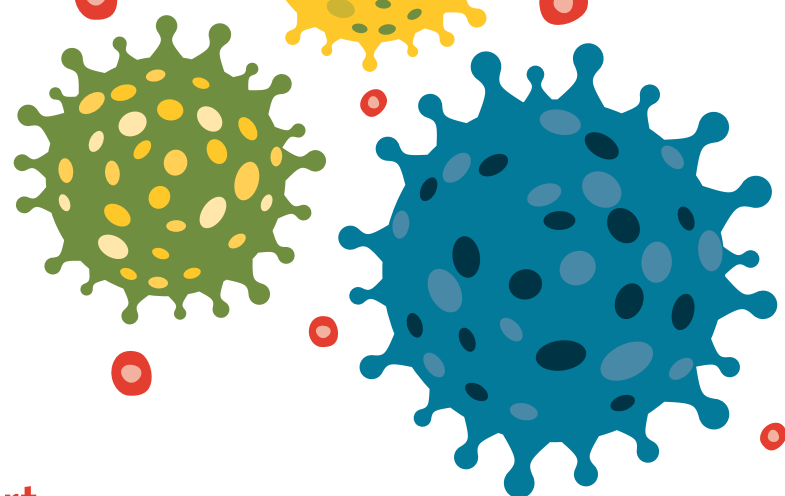
Jessica Wiebe, MLT

2023 CMLTA President

“

By fostering collaboration, innovation, and a shared sense of purpose, we can continue to uphold the highest standards of public protection and governance—ensuring Albertans receive the safe, effective, and ethical laboratory services they deserve.

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Public Members' Report

As representatives of the public interest within the College of Medical Laboratory Technologists of Alberta (CMLTA), we present this report to highlight significant achievements and decisions made by the CMLTA Council during the 2023 period.

Strategic Planning: Council completed the 2020-2023 Strategic Plan, providing a roadmap for the organization's planned development and growth. Included in this plan were key initiatives aimed at enhancing the regulatory framework for medical laboratory professionals in Alberta.

Regulations, Bylaws, Code of Ethics, and Standards of Practice: Council approved revisions to the CMLTA Regulations, Bylaws, Code of Ethics, and Standards of Practice. These revisions reflect the commitment to maintaining the highest standards of professional conduct and practice within the medical laboratory technology profession.

Finance Policies: Council approved revisions to the CMLTA Finance Policies, ensuring sound financial management and transparency within the organization.

Meeting Assessments: Council approved a new meeting assessment tool, an annual board assessment, and a reflection tool for members to assess their performance on Council.

Visibility Campaign: Recognizing the importance of public awareness, Council approved funding for a visibility campaign to promote the role and significance of medical laboratory professionals in Alberta. Albertans saw the campaign more than 20 million times.

Strategic Plan 2024-2027: Council accepted the 2024-2027 Strategic Plan, setting the course for future endeavours and aligning with the evolving needs of the healthcare landscape.

Member Fee Reduction (2024): To support its members, Council approved a member fee reduction for 2024, demonstrating a commitment to accessibility and affordability for regulated professionals.

Continuing Competence Program (Version 5): Council actively engaged with the proposed Version 5 of the Continuing Competence Program, emphasizing ongoing professional development and competence among its members.

Team Building and Truth and Reconciliation: Council members attended the Enoch Pow-wow as part of team-building efforts and a commitment to truth and reconciliation, acknowledging the importance of cultural awareness and inclusivity.

Education Opportunities: Council provided learning to 100 regulated members, focusing on topics such as "Stressed in the Lab? Create Your PPE Personal Protective Exercises" and "Conducting a Blanket Exercise."

Human Resources Policies and Wage Bands: A thorough review of the CMLTA's Human Resources policies and wage bands was conducted to ensure fair and competitive practices within the organization.

As public members, we understand and appreciate the critical role of regulation in the laboratory. Regulation ensures medical laboratory professionals are well-educated, engaged in professional development, and accountable for their practice—ultimately providing Albertans with competent, ethical laboratory services.

We are confident in the organizational skills, communication, and ability of the CMLTA staff and directors to fulfill the mandate of the CMLTA. We thank Council, staff, and the regulated members for their dedication to assisting Albertans on their health journey, as well as their openness to receiving our feedback and participation on the CMLTA Council.

Jennifer Carscallen
Domingo Chavez
Monica St. Dennis
Gary Zeitner

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:

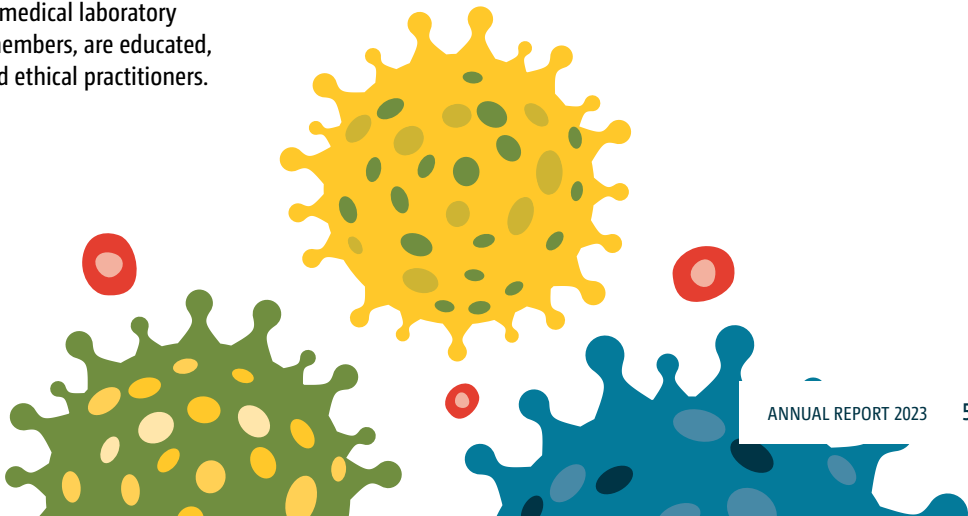
- Collect and analyze biological samples, perform quality control procedures, and communicate results that have been critically evaluated to ensure accuracy and reliability;
- Teach, manage, and conduct research in the science and techniques of medical laboratory technology; and
- Provide restricted 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 who work in urban and rural Alberta laboratory hospital facilities, 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 both in the laboratory environment and 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 professional practice areas, plus an annual audit process to systematically assess the integrity of the CCP and 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.



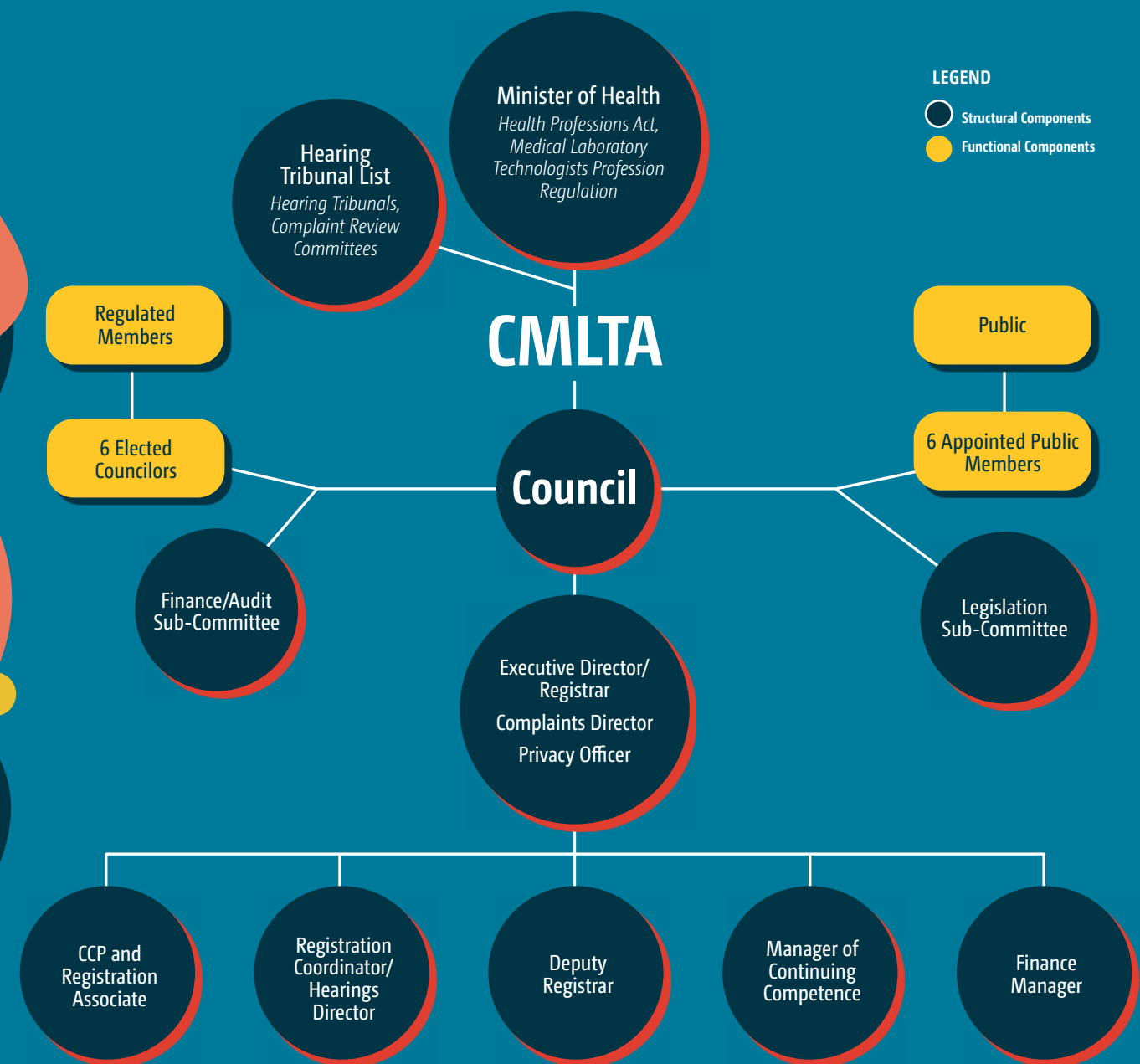
2023 CMLTA Council

Jessica Wiebe, President
Marie Grabowski, Vice President
Eugene Cheung, Councillor
Harpreet Kaur Bawa, Councillor
Megan Parrish, Councillor
Monica St. Dennis, Public Member
Jennifer Carscallen, Public Member
Domingo Chavez, Public Member
Gary Zeitner, Public Member

2023 CMLTA Staff

Maggie Fulford, Executive Director/Registrar/Complaints Director
Kirsten Ash, Deputy Registrar
Natasha Kasongo, Manager of Continuing Competence
Avaleen Petryk, Registration Coordinator/Hearings Director
Meron Gebremikael, Finance Manager
Somarly Siek, Registration & CCP Associate

Structural and Functional Organization Chart



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. Six elected councillors (including the president and vice president) and six public members, as appointed by the government in accordance with the *Health Professions Act (HPA)*, comprised the 2023 CMLTA Council.

The primary purpose of the CMLTA Council is to fulfill its legislated mandate and mission through ethical, prudent, and innovative means. 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 Council's work, and how it will carry out and monitor this 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 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;
- Oversee and practice sound risk management, 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 represents their best interests 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 its 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
- Hearing Tribunal List
- Finance/Audit Sub-Committee
- Council Evaluation Sub-Committee

The Legislation Sub-Committee is a working group of the CMLTA Council, comprised of up to 15 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, the CMLTA Council has appointed 11 regulated members (a minimum of four is required) to the CMLTA Hearing Tribunal List (HTL). These individuals serve on Hearing Tribunals in complaints of unprofessional conduct and on Complaint Review Committees (CRC). Please refer to the Complaints and Discipline report on page 18 for more information about Hearing Tribunals and CRCs.

The Finance/Audit Sub-Committee is a working sub-committee of Council comprised of up to eight 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 Council Evaluation Sub-Committee is a working sub-committee established by the CMLTA Council. Three members will review the current council assessment tool, assess its effectiveness, and make recommendations for modification or change.

The following operational and regulatory changes occurred in 2023:

- Council approved revisions to the CMLTA bylaws, Code of Ethics, and Standards of Practice.
- Council approved revisions to the CMLTA Finance Policies.
- Council approved funding for a visibility campaign.
- Council accepted the 2024-2027 Strategic Plan.
- Council approved a reduction in member fees for 2024.
- The CMLTA resigned from the Canadian Alliance of Medical Laboratory Professionals Regulator.
- Council accepted the proposed Version 5 of the Continuing Competence Program.

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:

- Professional services directly to the public;
- Conducting laboratory tests that are used by other regulated members to provide professional services directly to the public;
- Teaching the practice of a regulated profession to regulated members or students of the regulated profession; and
- Supervising regulated members who provide professional services to the public.

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

- General Register (hematology, chemistry, transfusion science, microbiology, histology, and individuals with conditions or restrictions on professional practice)

- Diagnostic Cytology Register
- Clinical Genetics Register (cytogenetics and molecular genetics)
- Provisional Register
- Courtesy Register

The Michener Institute of Education in Ontario offers the only cytotechnology program in Canada.

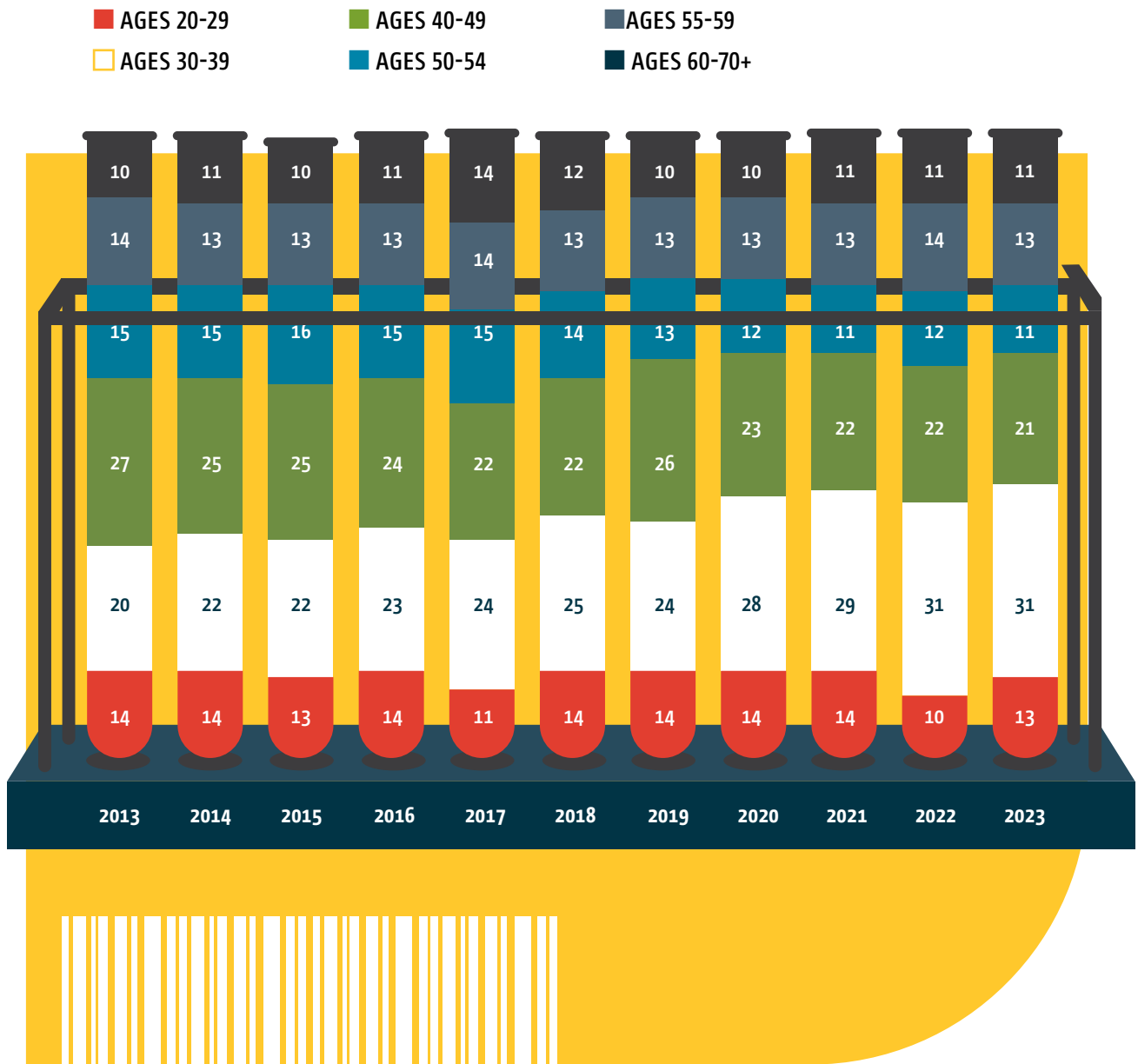
The following table summarizes register data for the past five registration years. The numbers will not add up to the total as those issued a provisional practice permit are eventually moved to either the general, diagnostic cytology, or clinical genetics register in the same year.

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

DESCRIPTION/REGISTER	2023	2022	2021*	2020	2019
General MLT	2399	2431	2295	2227	2269
Conditional	0	0	0	0	15
Registered under section 8 of the MLT Regulations	32	37	40	41	43
Restricted to Area of Practice	12	12	27	27	58
Diagnostic Cytology	77	76	76	73	81
Clinical Genetics	55	60	50	50	51
Provisional	95	123	68	61	61
Courtesy Register	1	0	0	0	0
TOTAL CMLTA MEMBERS	2566	2563	2507	2479	2578

* Data up to Dec. 10, 2021, as database changes were made at the end of the year.

THE FOLLOWING TABLE SUMMARIZES AGE DEMOGRAPHIC DATA FROM 2013 TO 2023 IN THE MEDICAL LABORATORY PROFESSION (VALUES EXPRESSED AS PERCENTAGES).



The CMLTA defines initial registration, reinstatement, and renewal as three distinct and separate application types. All can be completed and submitted online 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, to provide the government with real-time tracking of the total number of practitioners at any given time. The 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 licence 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	2023	2022	2021	2020	2019
Renewal	2412	2403	2423	2432	2441
Initial	135	137	115	117	119
Alberta trained	11	6	6	12	18
New graduates from Canadian accredited MLT training program	86	100	76	79	82
Out-of-province trained	10	13	11	4	7
Out-of-country trained	28	18	21	22	12
Reinstatement	42	23	41	20	18
Alberta trained	27	12	33	12	11
Out-of-province trained	11	7	2	2	5
Out-of-country trained	4	4	6	6	2
Applications Denied	3	0	0	2	0
Registration Application Decision Appeals to Council	0	0	0	0	0

RENEWAL

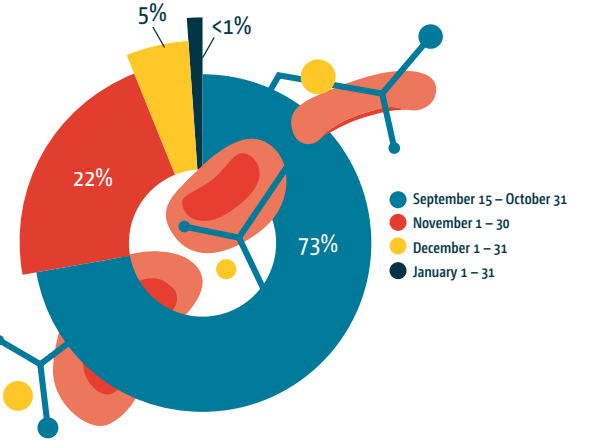
Current regulated members maintaining registration for the upcoming year submit renewal applications. Aside from basic personal information and demographic data (required by the HPA and Alberta Health for its PPR), a renewal application collects information about a regulated member’s Continuing Competence Program.

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

Under 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 2023, the CMLTA did not receive requests for appeals from IEMLTs, which is evidence of fair, transparent, timely, and consistent application and registration practices.

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

THE FOLLOWING TABLE SUMMARIZES THE SUBMISSION DATES FOR THE RENEWAL OF 2023 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 professional practice departure 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 REASONS FOR THE NON-RENEWAL OF REGISTRATION AND AN MLT PRACTICE PERMIT FOR THE LAST FIVE YEARS.

DESCRIPTION	2023	2022	2021	2020	2019
Extended leave (educational, long-term disability, parental, etc.)	36	*	22	18	8
Cancelled (no communication, non-payment of annual dues)	27	*	95	23	26
Left the MLT work environment	11	*	14	19	24
Moved	16	*	30	31	16
Retired	66	*	47	61	48
Deceased	1	*	0	3	2
TOTAL	157	150	208	155	124

*Due to changing registration systems, specific reasons for the non-renewal of the 2022 registration year cannot be obtained.

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)*. The College collaborated with Alberta Health and 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* provide 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 annually, which include:

- (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 with the attributed activities to be undertaken to achieve the set goals; and
- (c) A completed Learning Plan from the previous registration year documenting 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 that timeframe, 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 MLTs complete annually to satisfy government-based requirements. The CCP 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 VERSION 5

Since the current CCP Version 4 had been used and unchanged since September 15, 2016, the CMLTA began its investigation on CCPs in 2021. Following an extensive review, potential CCP model research, and the collection of survey/focus group feedback from members, the CCP Version 5 was proposed and approved by Council in December 2023. The CCP Version 5 utilizes the C.A.R.E model, which incorporates prospective and retrospective (reflective) components.

- **CREATE:** MLTs reflect on their current/anticipated professional practice environment, CMLTA Standards of Practice, and Code of Ethics. They then assess and create a Learning Plan in an area in which they would like to advance their current knowledge, skill, judgment, and attitude.
- **ACT:** Throughout the registration year, MLTs participate in various learning opportunities (some planned and some unplanned) that impact their professional practice and the public.
- **REFLECT:** After participating in Learning Activities, MLTs reflect on the learning experience and identify key takeaways and their impacts on professional practice and service users.
- **ENACT:** The goal of the CCP is for MLTs to not only identify ways to improve their professional practice but also identify and apply the knowledge, skill, judgment, and attitude to their professional practice daily, improving public safety in Alberta.

The CMLTA aims to implement Version 5 of the CCP during the 2025 renewal season.

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's purpose is two-fold: to systematically assess the integrity of the CCP as mandated by Alberta Health and 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.

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. For this purpose, the CMLTA instructs individuals to retain copies of all CCP documentation, including recorded learning activities, for a minimum of five years. 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, the CMLTA emails a pass letter. If a Compliance Audit is determined incomplete, the CMLTA will notify the individual 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 FOLLOWING TABLE SUMMARIZES COMPLIANCE AUDIT STATISTICS FOR THE CONTINUING COMPETENCE PROGRAM FOR 2016 - 2023

DESCRIPTION	2023	2022*	2021	2020	2019	2018	2017	2016
Number audited	252		240	206	238	227	238	335
Percent audited (rounded)	10%		10%	8.5%	10%	10%	10%	14%
Successful audits	252		239	205	234	227	234	335
• Submitted on or before deadline	241 (96%)		232	198 (96%)	231 (99%)	224 (99%)	217 (93%)	335 (100%)
• Submitted after deadline	11 (4%)		7	8 (4%)	3 (1%)	3 (1%)	17 (7%)	0
Successful audits on initial submission	242		236	202	232	224	232	331
Successful audits after remedial work and resubmission	10		3	3	2	3	2	4
Number forwarded to Complaints Director for non-compliance	0		0	0	0	0	0	0
Deferred** until return to MLT practice required	0		0	0	4	0	3	0
Cancelled audits	0		1	1	0	0	1	0

* No audit due to a new member management system.

** 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 are reinstated 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.

Beyond a hands-on tool to monitor levels of CCP compliance, 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. The pass rate is a reflection of certain effectiveness of the CCP, so when it falls below targeted levels, the CMLTA examines audit specifics with the intent to revise, improve, or provide the necessary clarification to regulated members.

PRACTICE HOUR AUDIT

Each year, all individuals undergoing a CCP Compliance Audit are also required to participate in a Practice Hour Audit. As all practice hours submitted to the CMLTA are self-reported, this audit verifies that the individual complied with the minimum currency hour requirement of 900 hours in the past four years.

Although the Practice Hour Audit has always been a component of the CCP Compliance Audit, 2021 was the first year that the CMLTA tracked the success of this audit separately from the CCP Compliance Audit.

THE FOLLOWING TABLE SUMMARIZES THE PRACTICE HOUR AUDIT STATISTICS FOR 2021 - 2023.

DESCRIPTION	2023	2022*	2021
Number audited	252		240
Percent audited (rounded)	10%		10%
Successful audits	252		239
• Submitted on or before deadline	241		232
• Submitted after deadline	11		7
Successful audits on initial submission	247		238
Successful audits after resubmission	5		1
Number forwarded to Complaints Director for inaccurate hours submission	0		0
Cancelled audits	0		1

* No audit due to a new member management system

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 2023. 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 each year is unpredictable. Since coming under the HPA in 2002, the CMLTA's annual complaints have ranged from zero to 13. 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 2023 registration year.

DESCRIPTION	NUMBER
Files carried forward from previous years	8
New complaints received in 2023	6
Employer complaints	5
Peer complaints	1
Public complaints	0
Self-reported	0
Sexual assault	0
Sexual misconduct	0
Complaints dismissed	5
Files referred for assessment under section 118 HPA	0
Files referred to investigation	6
Files referred to hearing tribunal	1
Complaint review committee appeals	0
Files closed during the year	7



2023

Financial Statements

YEAR ENDED DECEMBER 31, 2023

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, 2023, and the statements of revenues and expenses, 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, 2023, 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 23, 2024

Bruce MS Mahon Professional Corporation

Chartered Professional Accountants

Statement of Revenues and Expenses

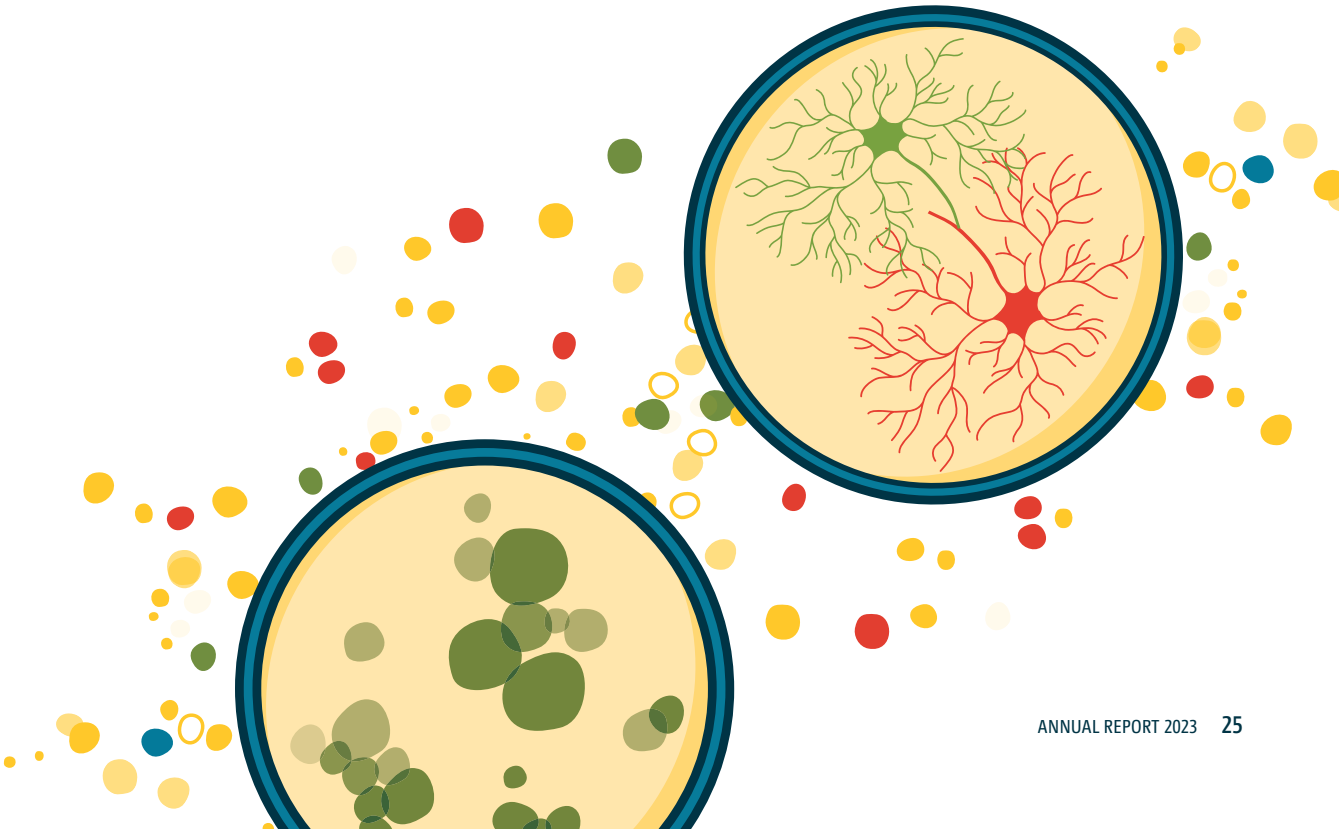
Year Ended December 31, 2023

	2023	2022
REVENUE		
Membership fees and administration fees	\$ 1,069,710	\$ 1,052,463
Investment income	209,233	107,130
Recoveries and other revenue	-	750
	1,278,943	1,160,343
EXPENSES		
Salaries, wages and other employment costs	\$ 592,571	\$ 578,101
Stakeholder engagement	363,080	50,400
Rent and common area costs	136,002	129,368
Computer and website	73,175	58,746
Council and subcommittees	68,583	53,406
Consulting fees	60,313	32,510
Conduct	43,944	2,261
Office	34,036	26,641
Staff education	32,984	8,829
Accounting and audit fees	29,378	18,660
Amortization	25,672	19,721
Bank and credit card charges	21,808	23,776
Continuing competence	19,489	5,161
Insurance	15,219	14,039
Publications	13,309	10,736
Legal fees	12,988	9,042
Postage and copying	7,424	8,083
Telephone	3,240	3,868
Registration	1,708	1,658
Losses on disposal of equipment	1,643	-
	1,556,566	1,055,006
EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES FROM OPERATIONS	\$ (277,623)	\$ 105,337

Statement of Changes in Net Assets

Year Ended December 31, 2023

	UNRESTRICTED	INVESTED IN EQUIPMENT	INTERNALLY RESTRICTED (NOTE 6)	2023	2022
Balance at beginning of the year	\$ 1,384,194	\$ 77,137	\$ 3,810,000	\$ 5,271,331	\$ 5,165,994
Excess of revenue (expenses) for the year	(250,308)	(27,315)	-	(277,623)	105,337
Purchase of equipment	(23,516)	23,516	-	-	-
Balance at end of the year	\$ 1,110,370	\$ 73,338	\$ 3,810,000	\$ 4,993,708	\$ 5,271,331



Statement of Financial Position

December 31, 2023

ASSETS	2023	2022
CURRENT		
Cash	\$ 730,830	\$ 1,230,280
Prepaid expenses	34,896	33,778
	765,726	1,264,058
INVESTMENTS (Note 3)	5,201,777	5,022,648
EQUIPMENT (Note 4)	73,338	77,136
	\$ 6,040,841	\$ 6,363,842
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 45,245	\$ 47,826
Wages payable	60,113	49,585
Deferred membership fees (Note 5)	941,775	995,100
	1,047,133	1,092,511
NET ASSETS		
Unrestricted	1,110,370	1,384,194
Invested in equipment	73,338	77,137
Internally restricted (Note 6)	3,810,000	3,810,000
	4,993,708	5,271,331
	\$ 6,040,841	\$ 6,363,842

COMMITMENTS (Note 7)

On Behalf of Council

Signed by:

Marie Grabowski **Jessica Wiebe**
 2024 President 2024 Vice President

Statement of Cash Flows

Year Ended December 31, 2023

	2023	2022
OPERATING ACTIVITIES		
Excess (deficiency) of revenue over expenses	\$ (277,623)	\$ 105,337
Items not affecting cash:		
Amortization	25,672	19,721
Loss on disposal of equipment	1,643	-
	(250,308)	125,058
Changes in non-cash working capital:		
Accounts receivable	-	4,275
Accounts payable and accrued liabilities	(2,580)	7,912
Deferred membership fees	(53,325)	5,800
Prepaid expenses	(1,118)	(15,227)
Wages payable	10,528	368
	(46,495)	3,128
Cash flow from (used by) operating activities	(296,803)	128,186
INVESTING ACTIVITIES		
Purchase of equipment	(23,518)	(71,785)
Purchase of investments	(179,129)	(94,984)
Cash flow used by investing activities	(202,647)	(166,769)
DECREASE IN CASH FLOW	(499,450)	(38,583)
Cash - beginning of year	1,230,280	1,268,863
CASH - END OF YEAR	\$ 730,830	\$ 1,230,280

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 notfor-profit organizations. The significant accounting policies are as follows:

Revenue recognition

Membership revenue is recognized in the year to which the membership fees relate. Administration fees are recognized in the year to which the related service is provided.

Investment income is recognized as it is earned.

Conduct recoveries and other revenue are recognized when the amount is established and collection is reasonably assured.

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.

Cash and cash equivalents

Cash and cash equivalents consist of cash balances with banks.

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%
Information systems	30%

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

The College initially measures its financial assets and liabilities at fair value. Subsequent measurement is at amortized cost.

Financial assets measured at amortized cost consist of cash, accounts receivable and long term investments.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities, and wages payable.

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

Use of estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-forprofit 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 estimated lives of capital equipment. Actual results could differ from these estimates.

Comparative figures

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

3. INVESTMENTS

	2023	2022
Guaranteed investment certificates with interest rates ranging from 1.35% to 5.50% (2022 - 0.65% to 4.60%), maturing between January 29, 2024 and December 8, 2026 (2022 - January 5, 2023 and October 2, 2025).	\$ 4,909,198	\$ 4,455,380
Canadian equities	-	348,576
Canadian mutual funds	79,101	68,390
Accrued interest receivable	213,478	150,302
	\$ 5,201,777	\$ 5,022,648

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

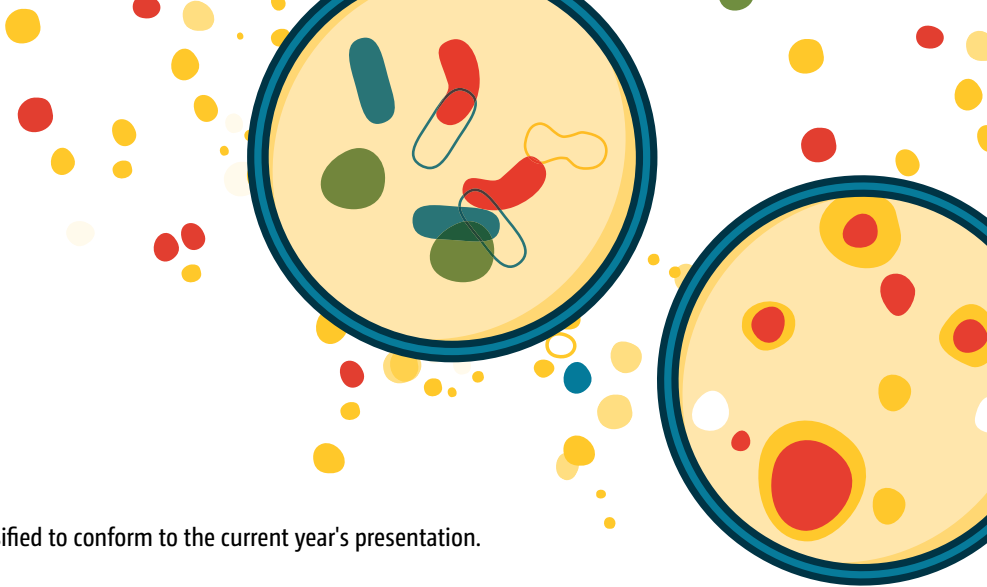
4. EQUIPMENT

	Cost	Accumulated amortization	2023 Net book value	2022 Net book value
Computer equipment	\$ 60,462	\$ 28,012	\$ 32,450	\$ 19,443
Information systems	61,950	25,090	36,860	52,658
Office equipment	69,584	65,556	4,028	5,035
	\$ 191,996	\$ 118,658	\$ 73,338	\$ 77,136

Amortization of equipment provided in the current year totaled \$25,672 (2022 - \$19,721).

5. DEFERRED MEMBERSHIP FEES

The prior year deferred membership fees of \$995,100 have been included in the 2023 membership income on the Statement of Revenues and Expenses. The College collected \$941,775 of deferred membership fees during fiscal 2023 which will be included in the 2024 membership income.



6. INTERNALLY RESTRICTED ASSETS

The following funds have been established by Council for the purposes stated below. The funds in all internally restricted accounts can only be expended upon approval by Council.

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. Amortization expense and losses on disposals of equipment are subtracted from this fund. Equipment purchases in the year are transferred to this fund from the Unrestricted reserve.

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.

	2023	2022
Operating reserve	\$ 2,000,000	\$ 2,000,000
Conduct Contingency reserve	250,000	250,000
Capital Asset reserve	1,000,000	1,000,000
Special Legal reserve	500,000	500,000
Patient Relations Program reserve	60,000	60,000
	\$ 3,810,000	\$ 3,810,000

7. COMMITMENTS

The College has an operating lease with respect to its office premises which expires July 31, 2030. The premises lease provides for payment of utilities, property taxes and maintenance costs. There are also various software contracts with terms that range from 1 to 3 years. Future estimated contractual payments as at December 31, 2023, are as follows:

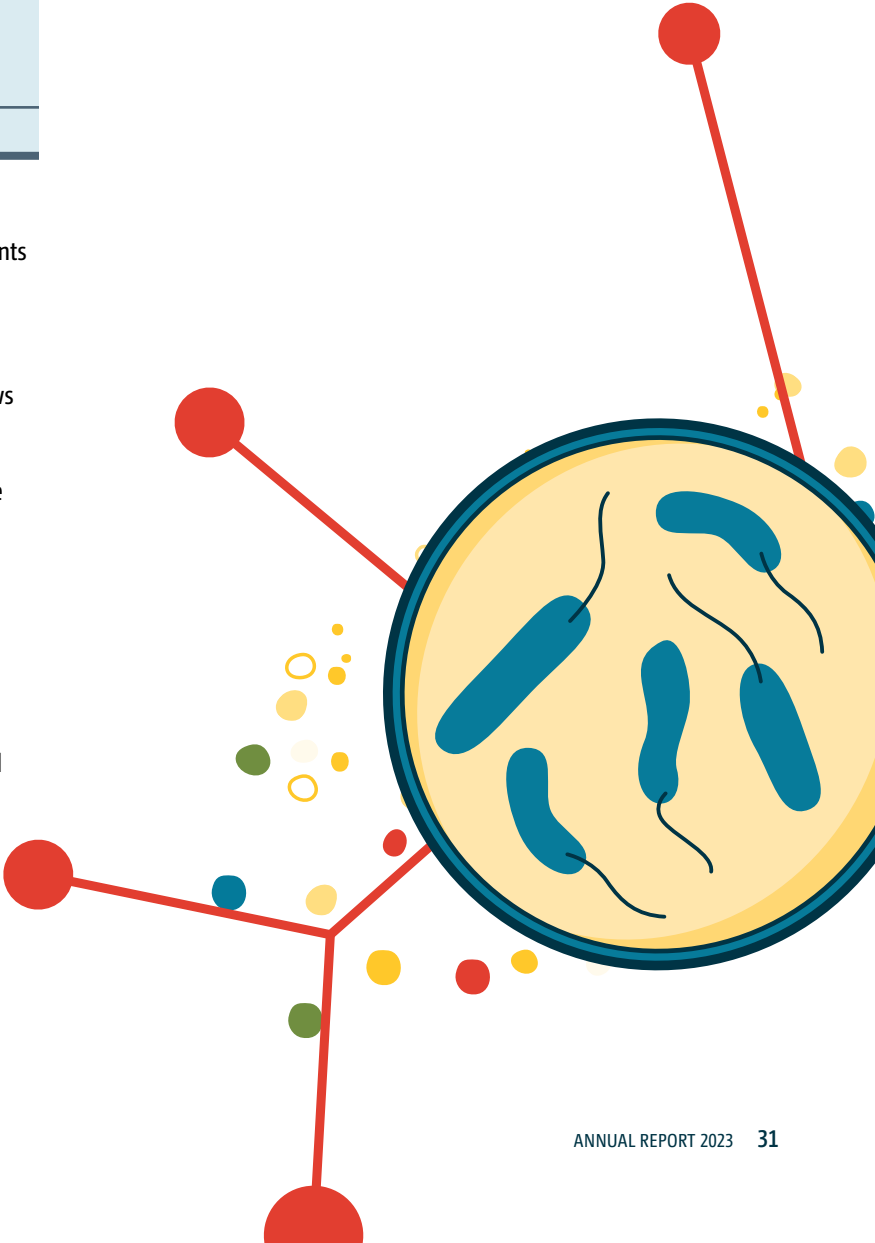
2024	\$ 162,737
2025	145,818
2026	142,802
2027	142,802
2028 and thereafter	368,905
	\$ 963,064

9. FINANCIAL INSTRUMENTS

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

- (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 fixedrate 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 is exposed to this risk mainly in respect of its accounts payable and accrued liabilities and wages payable. The College considers that it has sufficient funds available to meet current and long-term financial needs.
- Unless otherwise noted, it is management's opinion that the College is not exposed to significant other price risks arising from these financial instruments.



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 30 regulatory healthcare colleges in the province. Independently, each college is a public body created by the 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 college. Find additional information regarding the AFRHP: www.afrhp.org.



INTERPROFESSIONAL LAUNCH: INTRODUCING STUDENTS TO HEALTH PROFESSION REGULATION

Each year, the University of Alberta’s Interprofessional Learning Pathway Launch invites regulatory bodies and professional associations to participate, enabling health professional students to start their collaborative learning journey. More than 1,100 students rotated through activities in small interprofessional groups during the full-day event. Discussions centered on how regulatory bodies like the CMLTA set entrance to practice requirements, create and enforce a continuing competence program, and institute a formal process for the adjudication of complaints of unprofessional conduct.

COMMITMENT TO TRUTH AND RECONCILIATION

Over the past year, the CMLTA remained dedicated to truth and reconciliation through educational initiatives aimed at fostering cultural awareness. The CMLTA collaborated closely with the organization “They Build Bridges” to offer learning opportunities for staff, council members, and associates. The CMLTA Council delved into the history of Indigenous Peoples in Canada, and both staff and Council members attended the Enoch Cree Nation Pow-wow to deepen their understanding and appreciation of Indigenous culture. Members actively participated in blanket exercises in Edmonton and Calgary, contributing to heightened awareness and a better understanding of the historical and contemporary experiences of Indigenous Peoples.



VISIBILITY CAMPAIGN

In the fall of 2023, the CMLTA launched its first-ever visibility campaign to help Albertans understand the role of the CMLTA and how it protects Albertans using the services of Medical Laboratory Technologists. The CMLTA worked closely with local marketing agency, Adverb Communications, to develop the “Rules Rule” campaign. Legislation and regulations that create the CMLTA’s public protection mandate were simplified into plain language “rules”—making it more accessible and digestible to viewers. Albertans saw the campaign over 20 million times through a variety of advertising channels, including traditional and connected television, TVs in medical centers across the province, and online through social media and digital display. See the campaign video and message at www.rulesrule.ca.

ATTENDANCE AT EDUCATIONAL CONFERENCES

To ensure we keep up with the best practices in regulation, members of the CMLTA staff and council attended annual education conferences provided by the Canadian Network of Agencies for Regulation (CNAR) and the Council on Licensure, Enforcement, and Regulation (CLEAR). The sessions provided insight into innovation and best practices in registration, continuing competence, discipline, diversity, equity and inclusion, and truth and reconciliation.



CMLTA Vice President, Marie Grabowski (centre) with CMLTA staff, Somarly Siek (left) and Kirsten Ash (right).



CMLTA COLLEGE OF
MEDICAL LABORATORY
TECHNOLOGISTS
OF ALBERTA

College of Medical Laboratory Technologists of Alberta

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