

2024 ANNUAL REPORT



TABLE OF CONTENTS

INTRODUCTION

President’s Message.....	4
Public Members’ Report 2024.....	6
Background Information	
• CMLTA Overview.....	7
• CMLTA Council and Staff	8
• Structural and Functional Organization Chart	9
GOVERNANCE	10
REGISTRATION OF CMLTA REGULATED MEMBERS.....	12
CONTINUING COMPETENCE PROGRAM.....	16
COMPLAINTS AND DISCIPLINE	20
FINANCIAL INFORMATION	23
OTHER ACTIVITIES	34

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 Métis (“May-tee”).

TREATY 7 LAND ACKNOWLEDGMENT (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”), Tsuut’ina (“Soo-tin-ah”) and Stoney Nakoda First Nations, as well as the Métis.

TREATY 8 LAND ACKNOWLEDGMENT (NORTHERN)

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

We acknowledge the many First Nations, Métis, and Inuit whose footsteps have marked these lands for generations. We are grateful for the traditional Knowledge Keepers and Elders who are still with us today, and for 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.

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.

PRESIDENT’S MESSAGE

It was an honour and a privilege to be the CMLTA’s president for 2024. With 14 years of MLT experience and three years of CMLTA Council experience, I accepted this leadership role with a clear understanding of the responsibility it requires. Professional regulation is a legal requirement and only valid CMLTA registration allows for use of MLT title. I, along with the whole of the CMLTA Council, acknowledge the importance of regulation and title.

2024 was the first year implementing the CMLTA’s newest strategic plan, which lays out six goals for the College: member education, future-proofing of professional regulation, internal relationships, member relationships, visibility, and regulatory excellence. I am proud to share some of the steps we took this year towards these goals.

The CMLTA’s legislative mandate is professional regulation and protection of the public to ensure MLT’s provide safe, competent, and ethical healthcare services. The CMLTA upheld this mandate in 2024 by updating the Continuing Competence Program (CCP).

This change updates the CMLTA’s approach towards monitoring professional learning and growth and allows for improved flexibility. The learning plan changed from requiring three pre-planned learning activities to one pre-planned goal and two learning activities, ensuring MLTs can be open to learning opportunities occurring within the year.

With this change, the required documentation for learning activities has been updated to include reflective practice, requiring MLTs to thoughtfully describe what they gained from the learning activity, rather than having to choose between limiting and pre-created criteria. These updates to the CCP also ensure the program remains inclusive for licensed MLTs practicing in a multitude of areas both in and outside of mainstream healthcare with the ability to provide descriptions for professional roles, practice settings, and intended service users (patients, clients, students, employees etc.). This is a significant change from the previous method and reflects the CMLTA’s understanding of all the ways an MLT can receive education and experience throughout a licensed year.

The CMLTA leads as an example of a functional Council taking pride in its commitment to healthy organizational culture. CMLTA’s education opportunities—including a series of webinars—were well attended, earning positive feedback from members. One member left a wonderful voicemail in response to our Two-Eyed Seeing webinar, describing the significant impact of the webinar’s key messages. This webinar and others are still available on the CMLTA website in the Resources section. The CMLTA Podcast also continues; this easy-to-digest content can be included as part of a learning plan.

Council receives continued education on the key aspects of good governance, team building, review and updating of internal policy, and fiscal responsibility. With a strong financial risk management policy, 2024’s review of internal finances allowed for the continuation of the current fee schedule with no increase.

In 2025, I hope to see continued engagement with CMLTA’s educational opportunities as I will continue to attend and use them in my own learning plan. I am also excited to continue to contribute to the regulation of our profession with my volunteer role on the CMLTA’s finance/audit sub-committee.

Thank you for your continued dedication to accurate and reliable laboratory results, of which 85% of clinical decisions are the basis of diagnosis and treatment of Alberta’s public.

Marie Grabowski

Marie Grabowski, MLT
2024 CMLTA President

“

2024 was the first year implementing the CMLTA’s newest strategic plan, which lays out six goals for the College: member education, future-proofing of professional regulation, internal relationships, member relationships, visibility, and regulatory excellence. I am proud to share some of the steps we took this year towards these goals.

PUBLIC MEMBERS’ REPORT 2024

As public members, we take our responsibility to represent Albertans’ perspectives seriously. We commend the CMLTA Council for their dedication to ensuring Albertans receive competent and ethical medical laboratory services. We also extend our gratitude to the regulated members of Council for including and educating public members in this vital work.

We welcomed three new public members to Council in 2024. Since their orientation, where they learned more about their roles on Council, these new members have effectively blended with the rest of the team. They have also been involved in decision-making from their very first meeting.

Council prioritized public input by involving public members in sub-committees and allocating a budget to recognize their contributions, emphasizing transparency and accountability. These actions demonstrate to us Council’s commitment to ensuring the public is represented in all aspects of the CMLTA’s work.

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.

In 2024, the CMLTA started working on its new strategic planning initiatives by providing webinars to more than 250 regulated members on topics like reflective practice, workplace stress, communication, and the Continuing Competence Program. Onboarding sessions were also provided for graduates of Alberta medical laboratory science programs.

The CMLTA continues to work towards cultural competence by providing education on how MLTs can answer the Truth and Reconciliation Commission of Canada’s 94 Calls to Action. In support of this important work, the CMLTA hosted a webinar on “Two-Eyed Seeing,” which refers to the interweaving of Western and Indigenous worldviews, as well as another presentation focused on understanding and addressing bias.

We have full confidence in the organizational skills, communication, and capabilities of the CMLTA staff and Councillors in fulfilling the organization’s mandate. We extend our gratitude to the Council, staff, and regulated members for their unwavering commitment to supporting Albertans on their health journey and for their willingness to embrace our feedback and participation on the CMLTA Council.

- DOMINGO CHAVEZ**
- ALISSA HARDING** *(term began Oct. 2024)*
- SAJID KHAN** *(term began Sept. 2024)*
- PATRICIA PALECHUK** *(term began Sept. 2024)*

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 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 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’s 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 CMLTA 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, policies, and guidelines; and
- Adjudication of the professional conduct and behaviour of MLTs via investigation and/or resolution of complaints of unprofessional conduct.

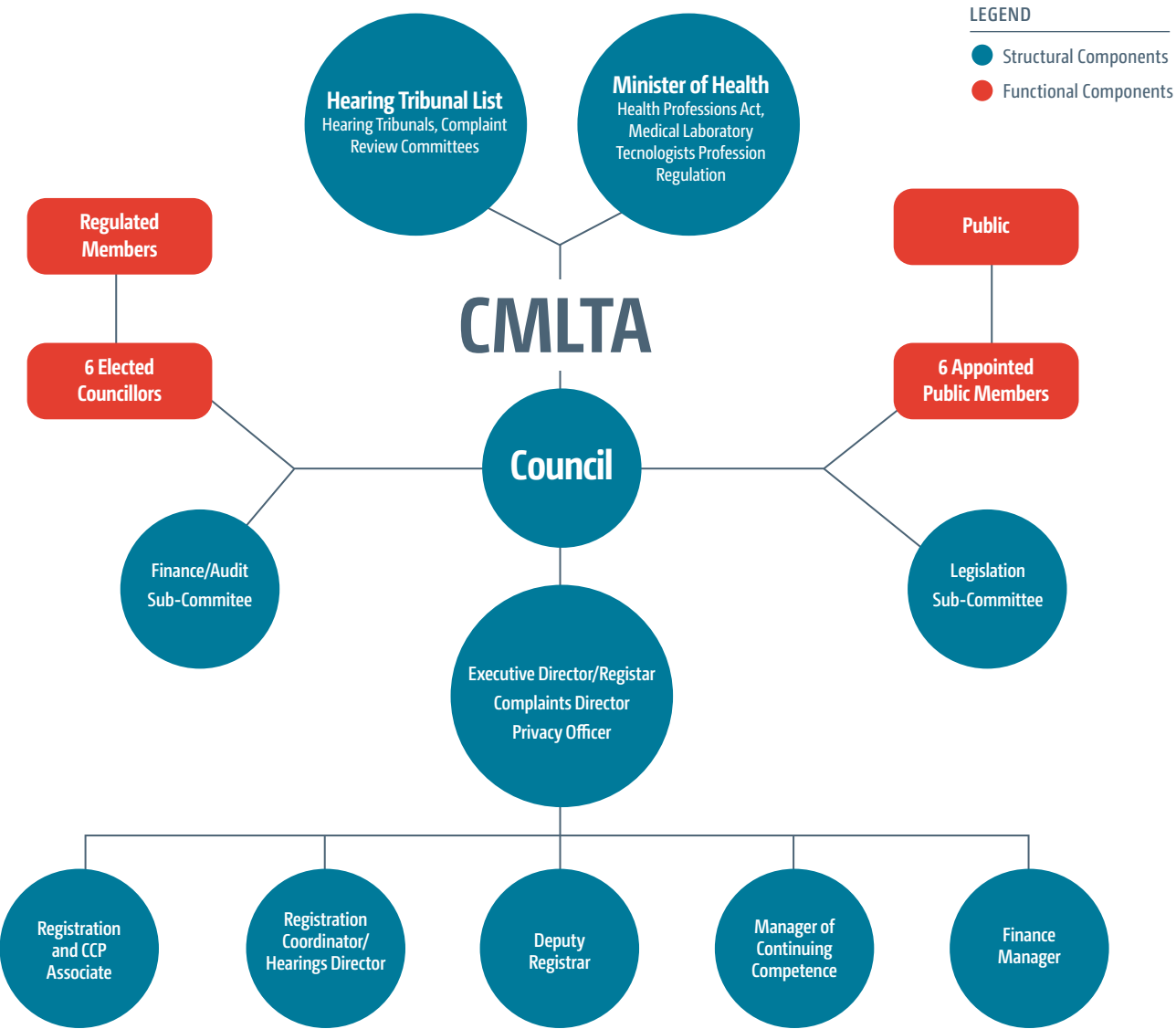
2024 CMLTA COUNCIL

- MARIE GRABOWSKI, President
- JESSICA WIEBE, Vice President
- HARPREET BAWA, Councillor
- EUGENE CHEUNG, Councillor
- DEANNA FAIST, Councillor
- MEGAN PARRISH, Councillor
- DOMINGO CHAVEZ, Public Member
- ALISSA HARDING, Public Member
- SAJID KHAN, Public Member
- PATRICIA PALECHUK, Public Member

2024 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, 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 2024 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

The Legislation Sub-Committee is a working group of the CMLTA Council, composed 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 20 for more information about Hearing Tribunals and CRCs.

The Finance/Audit Sub-Committee is a working sub-committee of Council composed 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 following operational and regulatory changes occurred in 2024:

- Council began working on initiatives from the approved 2024-2027 Strategic Plan.
- Council approved revisions to the CMLTA Finance Policies.
- Council approved the pardoning of applicants applying after September 1, 2024 from participating in the 2024 Continuing Competence Program (CCP) as the CMLTA transitions to version 5 of the CCP.
- The CMLTA implemented version 5 of the CCP for 2025.

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), and intend to undertake one or more of the following:

- Providing 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/or
- Supervising regulated members who provide professional services to the public.

Applicants are registered on the appropriate register as provided for in the MLT 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 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.

Description/Register	2024	2023	2022	2021*	2020
General MLT	2426	2399	2431	2295	2227
Conditional	0	0	0	0	0
Registered under section 8 of the MLT Regulation	31	32	37	40	41
Restricted to Area of Practice	12	12	12	27	27
Diagnostic Cytology	73	77	76	76	73
Clinical Genetics	57	55	60	50	50
Provisional	91	95	123	68	61
Courtesy Register	0	1	0	0	0
TOTAL CMLTA MEMBERS	2519	2566	2563	2507	2479

* 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 2015 to 2024.

	Age 20 - 29	Age 30 - 39	Age 40 - 49	Age 50 - 54	Age 55 - 59	Age 60 - 70+
2015	13%	22%	25%	16%	13%	10%
2016	14%	23%	24%	15%	13%	11%
2017	11%	24%	22%	15%	14%	14%
2018	14%	25%	22%	14%	13%	12%
2019	14%	24%	26%	13%	13%	10%
2020	14%	28%	23%	12%	13%	10%
2021	14%	29%	22%	11%	13%	11%
2022	10%	31%	22%	12%	14%	11%
2023	13%	31%	21%	11%	13%	11%
2024	14%	31%	22%	11%	11%	11%

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

The 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 who is seeking reinstatement of their registration and a license to practice (required for MLT employment) must submit a reinstatement application. This application 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, ensuring all required documents are on file.

RENEWAL

Current regulated members intending to maintain registration for the upcoming year submit renewal applications. In addition to the basic personal information and demographic data, the 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.

The following table summarizes application data for the past five years.

Under section 31(1) of the HPA, 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.”

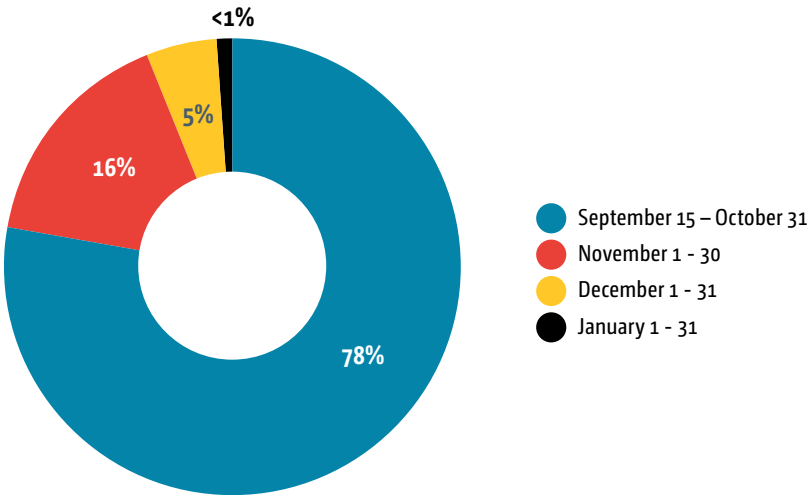
In 2024, the CMLTA did not receive requests for appeals, which is evidence of fair, transparent, timely, and consistent application and registration practices.

An escalating dues and 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 pie chart on the next page summarizes the submission dates for the renewal of 2024 registration and MLT Practice Permits.

Type of Application	2024	2023	2022	2021	2020
RENEWAL	2434	2412	2403	2433	2432
INITIAL	133	135	137	115	117
Alberta Trained	31	11	6	6	12
New Graduates from Canadian Accredited MLT Training Programs	89	86	100	76	79
Out-of-Province Trained	9	10	13	11	4
Out-of-Country Trained	31	28	18	21	22
REINSTATEMENT	29	42	23	41	20
Alberta Trained	19	27	12	33	12
Out-of-Province Trained	3	11	7	2	2
Out-of-Country Trained	7	4	4	6	6
APPLICATIONS DENIED	0	3	0	0	2
REGISTRATION APPLICATION DECISION APPEALS TO COUNCIL	0	0	0	0	0

SUMMARY OF THE SUBMISSION DATES FOR THE RENEWAL OF 2024 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	2024	2023	2022	2021	2020
Extended leave (educational, long-term disability, parental, etc.)	25	36	*	22	18
Cancelled (no communication, non-payment of annual dues)	21	27	*	95	23
Left the MLT work environment	30	11	*	14	19
Moved	24	16	*	30	31
Retired	63	66	*	47	61
Deceased	0	1	*	0	3
TOTAL	163	157	150	208	155

*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 CMLTA CCP is a self-directed professional development program that allows the CMLTA to monitor ongoing knowledge, skills, judgments, and attitudes voluntarily undertaken by medical laboratory technologists (MLTs) (HPA, RSA 2000, c H-7). Along with ensuring MLTs meet standards in the provision of professional services to the public, the CCP provides benefits to the individual MLT, such as professional integrity, personal growth, career advancement, and the increased utilization and application of knowledge, skills, judgments, and attitudes in a professional capacity (HPA, RSA 2000, c H-7).

In response to regulatory, legal, and ethical expectations, the CCP has evolved to serve the public interest best. Now that Bill 46 is in force, the CCP is outlined in the CCP Standard of Practice. The CCP Standard of Practice applies to all MLTs regardless of role or job title and outlines the framework, timeline, audit process, and consequences of non-compliance with the CCP. The following is the CMLTA Standard of Practice for the Continuing Competence Program:

1. All MLTs on the General, Diagnostic Cytology, Clinical Genetics, and Provisional registers must complete a self-directed continuing competence program on an annual basis that includes:
 - a. A self-assessment
 - b. A learning plan
 - c. An activity log
2. The CCP must be completed on an annual basis in accordance with the Continuing Competence Manual which is approved by the Council of the CMLTA.

3. All MLTs must complete their CCP for the current year before they can renew their practice permit for the upcoming year.
4. All MLTs must participate in an audit of their CCP when selected to do so.
5. If an audit of an MLT’s CCP finds them to be in non-compliance with the requirements set out in the CCP Manual, the MLT must complete one or more of the following within a specific time period as directed:
 - a. Complete outstanding continuing competence requirements.
 - b. Complete additional learning activities.
 - c. Provide relevant information or evidence of continued learning and competence.
6. If an MLT fails to meet the requirements of section 5 of this Standard of Practice as directed or within a specific time period, the following actions may be taken as appropriate:
 - a. The MLT may be fined.
 - b. The matter may be referred to the Complaints Director as a complaint of unprofessional conduct.

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 the mandatory continuing education MLTs must 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.

CONTINUING COMPETENCE PROGRAM VERSION 5

Since the current CCP Version 4 had been used and unchanged since September 15, 2016, the CMLTA began reviewing and updating the CCP 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 their knowledge, skills, judgment, and attitudes to their professional practice daily, improving public safety in Alberta.

The CMLTA implemented Version 5 of the CCP in September 2024 for the 2025 renewal season.

CCP ANNUAL COMPLIANCE AUDIT

The CCP Compliance Audit is a tool that monitors the conformance of Regulated Members and is used to review and improve the current CCP. The CMLTA randomly selects up to 20% of Regulated Members from the previous year’s registration roster to participate in the audit. All those who are notified must participate in the audit, which will remain outstanding on an individual’s file, restricting MLT registration and annual practice permit renewal until the individual has successfully complied with the request.

MLTs are notified by email that they have been selected for the CCP Audit. If there are extenuating circumstances preventing an individual from complying with the CCP Audit and its specified deadlines, the CMLTA must be notified immediately to avoid escalation to a potential complaint of professional misconduct.

Within the initial CCP Compliance Audit notice email, the MLT will see details regarding the audit process. The MLT is no longer required to submit their self-assessment, learning plan, and activity log as those requirements were submitted during the previous renewal season. The CMLTA also no longer requires MLTs to complete a Verification of MLT Practice Hours form or a declaration.

The CMLTA will review and render the audit complete or incomplete based on the self-assessment, learning plan, and activity log. If found incomplete, the CMLTA will request the MLT complete outstanding requirements, complete additional learning activities, and/or provide relevant information or evidence of continued learning and competence within a specific period of time. If the CCP audit is still incomplete after the subsequent deadline, the MLT may be fined, and/or the matter may be referred to the Complaints Director as a complaint of unprofessional conduct.

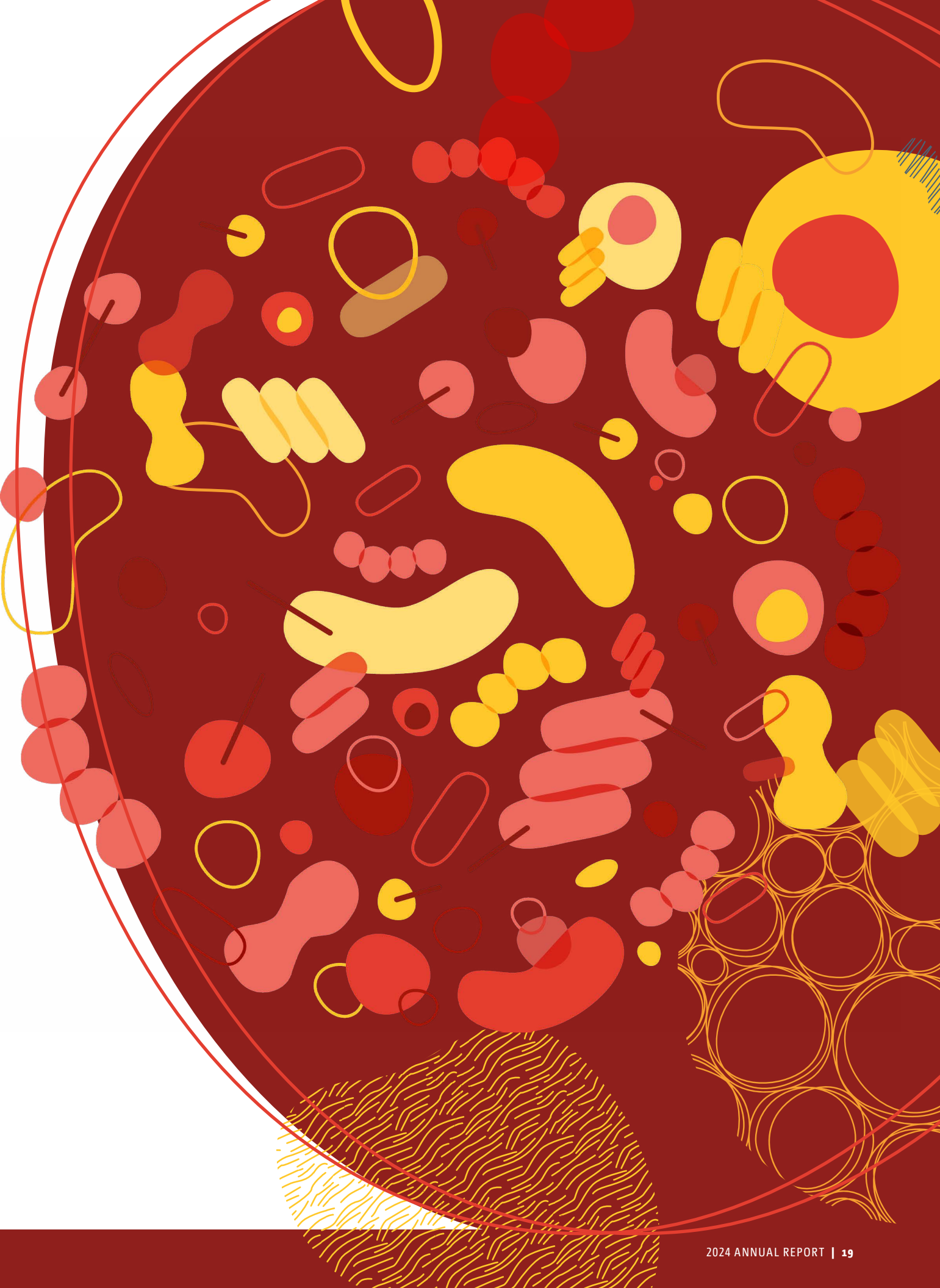
Beyond a hands-on tool to monitor levels of CCP compliance, the CCP Compliance Audit process also allows the CMLTA to evaluate the CCP structure, format, content, and requirements as part of a good governance model. The pass rate is a reflection of certain effectiveness of the CCP, so when it falls below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

The following table summarizes Compliance Audit statistics for the Continuing Competence Program for 2017 - 2024.

Description/Register	2024	2023	2022*	2021	2020	2019	2018	2017
Number audited	251	252	-	240	206	238	227	238
Percent audited (rounded)	10%	10%	-	10%	8.5%	10%	10%	10%
Successful audits	251	252	-	239	205	234	227	234
Submitted on or before deadline	233 (93%)	241 (96%)	-	232 (97%)	198 (96%)	231 (99%)	224 (99%)	217 (93%)
Submitted after deadline	1 (<1%)	11 (4%)	-	7 (3%)	8 (4%)	3 (1%)	3 (1%)	17 (7%)
Successful audits on initial submission	234 (93%)	242	-	236	202	232	224	232
Successful audits after remedial work and resubmission	18 (7%)	10	-	3	3	2	3	2
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	0	4	0	3
Cancelled audits	0	0	-	1	1	0	0	1

* 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.



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 2024. 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 dishonourable, 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 a 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 cooperate 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 cooperate 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 to comply 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/or
 - 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 2024 registration year and the previous four years.

Description	2024	2023	2022	2021	2020
Files carried forward from previous years	4	8	3	6	6
New complaints received in 2024	5	6	13	5	5
Employer complaints	5	5	10	5	4
Peer complaints	0	1	3	0	1
Public complaints	0	0	0	0	0
Self-reported	0	0	0	0	0
Sexual assault	0	0	0	0	0
Sexual misconduct	0	0	0	0	0
Complaints dismissed	2	5	1	2	2
Files referred for assessment under section 118 HPA	0	0	0	0	0
Files referred to investigation	0	6	6	0	0
Files referred to hearing tribunal	0	1	0	0	0
Complaint review committee appeals	0	0	0	0	0
Files closed during the year	5	7	5	8	6



2024

FINANCIAL STATEMENTS

ENDED DECEMBER 31, 2024

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, 2024, 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, 2024, 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 22, 2025

Bruce MS Mahon Professional Corporation
Chartered Professional Accountants

STATEMENT OF FINANCIAL POSITION

YEAR ENDED DECEMBER 31, 2024

	2024	2023
ASSETS		
CURRENT		
Cash	\$769,781	\$730,830
Prepaid Expenses	\$30,702	\$34,896
	\$800,438	\$765,726
INVESTMENTS (NOTE 3)	\$5,103,041	\$5,201,177
EQUIPMENT (NOTE 4)	\$47,294	\$73,338
	\$5,977,818	\$6,040,841
LIABIILTIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$43,092	\$45,245
Wages payable	\$50,770	\$60,113
Deferred membership fees (Note 5)	\$942,500	\$941,775
	\$1,036,362	\$1,047,133
NET ASSETS		
Unrestricted	\$1,084,162	\$1,110,370
Invested in equipment	\$47,294	\$73,338
Internally restricted (Note 6)	\$3,810,000	\$3,810,000
	\$4,941,456	\$4,993,708
	\$5,977,818	\$6,040,841

COMMITMENTS (Note 7)

ON BEHALF OF COUNCIL

Signed by:
Jessica Wiebe, 2025 President
Domingo Chavez, Public Member

STATEMENT OF REVENUES AND EXPENSES

YEAR ENDED DECEMBER 31, 2024

	2024	2023
REVENUE		
Membership and administration fees	\$1,012,125	\$1,069,710
Investment income	\$234,935	\$209,233
	\$1,247,060	\$1,278,943
EXPENSES		
Salaries, wages and other employment costs	\$679,755	\$592,571
Rent and common area costs	\$132,409	\$136,002
Computer and website	\$75,037	\$73,175
Council and subcommittees	\$66,142	\$68,583
Stakeholder engagement	\$60,689	\$363,080
Conduct	\$48,810	\$43,944
Office	\$32,167	\$34,036
Consulting fees	\$31,423	\$60,313
Staff education	\$30,231	\$32,984
Continuing competence	\$27,326	\$19,489
Amortization	\$26,044	\$25,672
Bank and credit card charges	\$22,650	\$21,808
Insurance	\$21,892	\$15,219
Accounting and audit fees	\$20,116	\$29,378
Publications	\$9,284	\$13,309
Postage and copying	\$6,619	\$7,494
Legal fees	\$4,329	\$12,988
Telephone	\$4,164	\$3,240
Registration	\$225	\$1,708
Losses on disposal of equipment	-	\$1,643
	\$1,299,312	\$1,556,566
DEFICIENCY OF REVENUE OVER EXPENSES	(\$52,252)	(\$277,623)

STATEMENT OF CHANGES IN NET ASSETS

YEAR ENDED DECEMBER 31, 2024

	UNRESTRICTED	INVESTED IN EQUIPMENT	INTERNALLY RESTRICTED (NOTE 6)	2024	2023
BALANCE AT BEGINNING OF THE YEAR	\$1,110,370	\$73,338	\$3,810,000	\$4,993,708	\$5,271,331
Excess of revenue (expenses) for the year	(\$26,208)	(\$26,044)	-	(\$52,252)	(\$277,623)
BALANCE AT END OF THE YEAR	\$1,084,162	\$47,294	\$3,810,000	\$4,941,456	\$4,993,708

STATEMENT OF CASH FLOWS

YEAR ENDED DECEMBER 31, 2024

	2024	2023
OPERATING ACTIVITIES		
Deficiency of revenue over expenses	(\$52,252)	(277,623)
Items not affecting cash:		
Amortization	\$26,044	\$25,672
Loss on disposal of equipment	-	\$1,643
	(\$26,208)	(\$250,308)
Changes in non-cash working capital:		
Accounts payable and accrued liabilities	(\$2,152)	(\$2,580)
Deferred membership fees	\$725	(\$53,325)
Prepaid expenses	\$4,194	(\$1,118)
Wages payable	(\$9,343)	\$10,528
	(\$6,576)	(\$46,495)
Cash flow used by operating activities	(\$32,784)	(\$296,803)
INVESTING ACTIVITIES		
Purchase of equipment	-	(\$23,518)
Net sale (purchase) of investments	\$71,735	(\$179,129)
Cash flow from (used by) investing activities	\$71,735	(\$202,647)
INCREASE (DECREASE) IN CASH FLOW	\$38,951	(\$499,450)
Cash - beginning of year	\$730,830	\$1,230,280
CASH - END OF YEAR	\$769,781	\$730,830

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. 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 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-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 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

	2024	2023
Guaranteed investment certificates with interest rates ranging from 1.42% to 5.50% (2023 - 1.35% to 5.50%), maturing between January 6, 2025 and December 11, 2028 (2023 - January 29, 2024 and December 8, 2026)	\$4,841,590	\$4,909,198
Canadian mutual funds	\$5,709	\$79,101
Accured interest receivable	\$282,742	\$213,478
	\$5,130,041	\$5,201,777

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

4. EQUIPMENT

	COST	ACCUMULATED AMORTIZATION	2024 NET BOOK VALUE	2023 NET BOOK VALUE
Computer equipment	\$60,464	\$38,970	\$21,492	\$32,450
Information systems	\$61,950	\$36,148	\$25,802	\$36,860
Office equipment	\$69,584	\$69,584	-	\$4,028
	\$191,996	\$144,702	\$47,294	\$73,338

Amortization of equipment provided in the current year totaled \$26,044 (2023 - \$25,672).

5. DEFERRED MEMBERSHIP FEES

The prior year deferred membership fees of \$941,775 have been included in the 2024 membership income on the Statement of Revenues and Expenses. The College collected \$942,500 of deferred membership fees during fiscal 2024 which will be included in the 2025 membership income.

NOTES TO FINANCIAL STATEMENTS

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.

	2024	2023
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 commitments for 2025. Future estimated contractual payments as at December 31, 2024, are as follows:

2025	\$162,745
2026	\$139,209
2027	\$139,209
2028	\$139,209
2029 and thereafter	\$220,414
	\$800,786

8. 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 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 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.

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.

STAFF DEI INITIATIVES

In 2024, CMLTA staff initiated the Diversity, Equity, and Inclusion (DEI) Committee to build DEI practices into all facets of our work. We believe that this practice is essential in achieving our mandate of public protection and value the visible and invisible unique qualities and perspectives of the public we serve, the members we regulate, and the staff we count on to complete our regulatory work. The committee developed a DEI vision and mission statement and, in 2025, intends to conduct a DEI environmental scan, create a comprehensive toolkit, and provide education on DEI related topics for staff, council, and regulated members.

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 and the Council on Licensure, Enforcement, and Regulation. The sessions provided insight into innovation and best practices in registration, continuing competence, discipline, DEI, and truth and reconciliation.

WEBINARS

The CMLTA hosted the following webinars in 2024:

- Two Eyed Seeing - Presented by Len Pierre, CEO, Len Pierre Consulting

Two Eyed Seeing (2ES) refers to the interweaving of western and Indigenous worldviews. This webinar helped Indigenous and non-Indigenous participants develop or enhance their ability to interchange their professional lenses to better understand and support Indigenous peoples and programs. 2ES is about learning and integrating Indigenous knowledge and values into frameworks of professional philosophy, policy, and practice.
- Reflective Practice for Health Professionals - Presented by Ruth Duggan, Occupational Therapist.

This webinar discussed the benefits and challenges of reflection in and on professional growth. It explored a variety of ways to use reflection to explore our professional and educational needs and foster a process of continual improvement in our practice.
- Stressed in the Lab - Facilitated by Dr. Rosina Mete, Director of Faculty at Yorkville University

Participants learned about the impact of stress and examined strategies to increase their coping skills and develop new perspectives. The webinar also highlighted the importance of addressing mental health to ensure ethical and professional behaviour.

- Healthy Communication - Facilitated by Dr. Rosina Mete, Director of Faculty at Yorkville University

Participants learned how to engage in meaningful discussions with peers at the workplace and learned about applicable CMLTA Standards of Practice regarding communication. Participants learned skills to de-escalate situations, present clear communication, and move away from assumptions within professional and personal situations.
- Understanding and Addressing Bias - Presented by the Centre for Race and Culture

The training addressed the hidden and unconscious biases we all have that enter our subconscious, thus affecting how we act, who we hire, how we treat patients, and how we operate in our organizations.

PODCASTS

The CMLTA Podcast is intended to help listeners understand the regulation of MLTs in Alberta. Topics discussed in 2024 include: the Refresher Program, the Patient Relations Program, Jurisprudence, PLI Coverage, CCP v5, volunteering on Council, Labour Mobility, and Fitness to Practice.

The CMLTA Podcast can be found here: <https://open.spotify.com/show/5qYdwYamDKgvv0AGqIHc8n?si=6e379cb3e31a4488>



**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 | cmlta.org

