



2024 **ANNUAL REPORT**

ALBERTA COLLEGE OF MEDICAL DIAGNOSTIC AND THERAPEUTIC TECHNOLOGISTS



**PUBLIC CONFIDENCE IN RECEIVING
SAFE, COMPETENT, AND ETHICAL
DIAGNOSTIC AND THERAPEUTIC CARE
FROM REGULATED PROFESSIONALS.**

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AS A REGULATOR, WE ENSURE REGISTRANTS PROVIDE SAFE, COMPETENT, AND ETHICAL DIAGNOSTIC AND THERAPEUTIC CARE TO ALBERTANS BY:

- Administering legislation, including the *Health Professions Act* (HPA), the *Medical Diagnostic and Therapeutic Technologists Profession Regulation* (MDTT Profession Regulation), and the *Health Professions Restricted Activity Regulation* (HPRAR).
- Approving programs of study, education courses, and certification exams that meet registration requirements.
- Registering applicants who meet our education, training, and competency requirements.
- Requiring annual practice permit renewal.
- Setting and enforcing practice and conduct standards.
- Addressing complaints about our registrants' professional conduct.
- Providing expertise and direction on registrants' practice, and regulatory and health policy.
- Administering a mandatory Continuing Competence Program (CCP).
- Maintaining an online public register so anyone can verify a registrant's registration and practice permit status in real-time.
- Providing regulatory education to help registrants understand and comply with their professional obligations.

ABOUT THE COLLEGE

The Alberta College of Medical Diagnostic and Therapeutic Technologists (the College) is a regulator established under Alberta's HPA and the MDTT Profession Regulation with the mandate to protect the public.

To this end, the College provides regulatory oversight and guidance to our registrants, empowering them to deliver safe, competent, and ethical care.

The College regulates two umbrella groups: medical radiation technologists (MRTs), which have four specialties, and electroneurophysiology technologists (ENPs). Additionally, the College is actively working with the government to eventually regulate Alberta's diagnostic medical sonographers (DMSs).

A Council made up of selected registrants and public members appointed by the provincial government governs the College. Council chooses the Registrar and CEO, who manages the organization's staff and operations.

There are regulators for medical diagnostic and therapeutic technologists in provinces throughout Canada.

1 MAGNETIC RESONANCE TECHNOLOGISTS

MRT(MR)

Magnetic resonance technologists use magnetic resonance imaging technology to produce extremely clear, detailed images of a patient's tissues and organs to detect and identify soft tissue issues and disease processes.

2 RADIATION THERAPISTS

MRT(T)

Radiation therapists are involved at every level of radiation therapy for cancer treatment, from planning to administering therapeutic doses, with a focus on patient care and monitoring of well-being.

3 NUCLEAR MEDICINE TECHNOLOGISTS

MRT(NM)

Nuclear medicine technologists administer radioactive substances to obtain images and data that reveal how the patient's body functions to help with health diagnoses and assess treatment response.

4 RADIOLOGICAL TECHNOLOGISTS

MRT(R)

Radiological technologists produce images of body structures through common procedures such as general X-rays, mammography, and computed tomography (CT), and assist in the operating room.

5 ELECTRONEUROPHYSIOLOGY TECHNOLOGISTS

ENP

Electroneurophysiology technologists record the electrical activity of the brain to help diagnose abnormalities such as epilepsy and stroke, test the response of the nervous system to stimulation, and monitor the spinal cord during surgery.



DIAGNOSTIC MEDICAL SONOGRAPHERS

We also have a roster of DMSs awaiting regulation.

DMSs use specialized imaging equipment to create visual images, including general, obstetrical, cardiac, vascular, and musculoskeletal, to assist in medical diagnosis and treatment.

LEADERSHIP REPORT

OUR REGULATORY ROLE

Our College is dedicated to safeguarding public health and ensuring that all registrants adhere to the highest professional standards. We emphasize regulatory compliance and continuous improvement, regularly reviewing government policies, and refining our policies to remain aligned with industry advancements.

We actively engaged in national and provincial discussions on critical issues such as workforce challenges, technological advancements, and the integration of artificial intelligence in healthcare.

We strengthened our governance framework through updates to Council and committee roles, enhanced succession planning, and the introduction of policies that prioritize fairness and transparency.

This year brought significant growth and transformation as we navigated evolving regulatory challenges while maintaining our commitment to high standards, accountability, and public protection. Our focus has been on strengthening governance, enhancing operational efficiencies, and adapting to emerging industry needs.

STRATEGIC GOALS & PRIORITIES

This year, our strategic plan guided key advancements in audit procedures, registrant compliance, and policy clarity. Notable achievements included significant updates to the CCP, the implementation of a structured five-year review cycle for educational programs, and the enhancement of verification measures for registrants. We also refined our bylaws to facilitate smooth Council transitions and mitigate potential conflicts of interest.

To enhance accessibility and knowledge-sharing, we transitioned from Annual Symposiums to more frequent Regulation Education Sessions. Additionally, in May, we successfully migrated our website to a new platform, addressing outdated technology issues and improving user experience.

CHALLENGES & LESSONS LEARNED

Alberta's healthcare system is undergoing significant restructuring, and we have closely monitored these changes to ensure our regulatory framework remains aligned with government directives. While there were no substantial modifications to the HPA impacting the College, we maintain an active role in discussions with Alberta Health and other key stakeholders.

The increasing complexity of complaints and professional conduct cases necessitated additional resource allocation. These challenges underscored the importance of not only proactive financial planning and adaptive governance, but also of agility and collaboration in navigating an evolving regulatory landscape.

FINANCIAL OVERVIEW & RESOURCE STEWARDSHIP

Our financial performance exceeded expectations this year, driven by disciplined expenditure management and strong investment returns. Strengthened financial oversight has improved clarity in decision-making, while monthly reviews and detailed reporting mechanisms ensure we remain agile and responsive to evolving fiscal needs.



GUIDED BY OUR STRATEGIC PLAN, WE MADE MEASURABLE PROGRESS IN MULTIPLE AREAS OF REGULATORY EXCELLENCE.

LOOKING AHEAD: FUTURE VISION & STRATEGIC DIRECTION

Looking ahead, we will continue refining our regulatory oversight to uphold the highest standards of ethical and professional practice. Strengthening policies to support internationally educated professionals remains a key focus, as does collaborating with the province to modernize healthcare regulations and align educational and practice standards with broader system reforms.

With anticipated legislative changes on the horizon, we remain vigilant in tracking developments to proactively address any impacts on our registrants.

Our ongoing commitment is to maintain professional integrity, enhance public trust, and navigate a dynamic regulatory landscape with agility and foresight.

ACKNOWLEDGMENTS & APPRECIATION

We extend sincere gratitude to our staff, Council and committee members, and stakeholders for their continued dedication and impact. Their efforts ensure that we continue to uphold the highest regulatory and professional standards. We also acknowledge the healthcare professionals we regulate, whose expertise and commitment to public health and safety are invaluable. We look forward to another year of meaningful progress and innovation together.

Steve DeColle, MRT(MR)
Council Chair

Lyndsay Arndt
Registrar/CEO

PUBLIC MEMBERS' REPORT

As representatives to Council appointed by the provincial government, we are committed to representing the public's views on key College decisions and strive to make a lasting, positive difference to the organization. We are proud to contribute to ensuring that Albertans receive safe, competent, and ethical care from the professionals we regulate.

After several public members' terms finished earlier in the year, three new members starting three-year terms were welcomed to their first Council meeting in November.

INTERNAL AND EXTERNAL PROGRESS

Steady improvement through regular reviews and updates of bylaws, policies, and finances is necessary to ensure regulatory progress. Changes were made to improve succession planning for Council's Chair, Vice Chair, and other leadership roles. A series of bylaw updates, such as shorter officer term limits and smaller quorums, allow flexibility in Council composition to allow business to proceed when necessary. Regular budget reviews and adjustments contribute to organizational progress.

Focusing on the current healthcare landscape, Council continues actively monitoring government messaging and legislative updates to evaluate for any impact on the College. These include the Foreign Credential Committee, Modernization of Alberta's Primary Care System, professional liability insurance, and other relevant topics.

We remain hopeful that the increased collaboration with the government regarding the future regulation of sonographers will see positive results soon.

WITH GRATITUDE

Thank you to the registrants for your unwavering professionalism and service. Your strength amidst health system challenges continues to impact your patients and colleagues positively. We admire your empathy and skill.

We also appreciate the registrants dedicating their time to enhance our regulatory processes. Your contributions to our committees and Council are essential for proper regulation.

As public members, we are pleased to confirm that the College has met its regulatory obligations to ensure the safety of Albertans. We are genuinely excited about the current regulatory progress and the possibilities that lie ahead.

Elaine Andrews
Public Member

John Liu
Public Member

Tammy McCorkell
Public Member

Nickolletta (Nikki) Sandie
Public Member

OUR PEOPLE

MEMBERS OF COUNCIL

Elaine Andrews, Public Member
Mary Buzzing, ENP
Steve DeColle, MRT(MR), Chair
John Liu, Public Member
Jason Livingstone, MRT(R), Vice Chair
Tammy McCorkell, Public Member
Nickolletta (Nikki) Sandie, Public Member
Samuel See, MRT(T)
Adwait Trivedi, MRT(NM)
Livia Vitaterna, MRT(R)

SELECTION COMMITTEE

Steve DeColle, MRT(MR)
Gillian Graham, MRT(T)
Abbi Langedahl, MRT(R), Chair
John Liu, Public Member
Jatinder Sahota, MRT(R)

COMPETENCE COMMITTEE

Joy Boldt, ENP
David Buehler, MRT(T), Chair
Ayman Darwish, MRT(R)(MR)
Karly Fraser, MRT(T)
Melissa Grzeszczak, MRT(MR)
Joyce Kreckwitz, MRT(NM)
Angie Sarnelli, ENP
Jennifer Smith, MRT(NM)
Sonja Waeckerlin, MRT(R)

REGISTRATION COMMITTEE

Stacey Adams, MRT(R)
Janelle Duquette, MRT(T)
Abbi Langedahl, MRT(R), Vice Chair
Michelle Luong, MRT(NM)
Susan McGregor, ENP
Cynthia Palmaria, MRT(T)
Martin Sherriff, MRT(MR), Chair

MEMBERSHIP LIST

Jade Borylo, MRT(R)
Marlene Chambers, MRT(R)
Brian Chwyl, MRT(T)
Robynn Corkish, MRT(MR)
Melinda Dolhan, MRT(R)
Alefiyah Gulamhusein, MRT(NM)
Michelle LeGrandeur, MRT(R)
Christy McIntyre, MRT(NM)
Kelly Sampson, MRT(T)

As of December 31, 2024



STAFF

Lyndsay Arndt
Registrar & CEO, Complaints Director
Carolyn Black
Director, Communications
Judy Clarke, RDH, BScDH
Director, Registration & Privacy Officer
Rahul Das
Manager, IT Operations

Adrienne Hislop
Manager, Corporate Services,
Hearings Director
Linda O'Hara, MRT(R)
Director, Education and Competence
Michelle Wolf
Manager, Registration and Complaints

2024 HIGHLIGHTS

ENHANCING ORGANIZATIONAL INTEGRITY WITH CLEAR POLICIES

The College made significant strides in strengthening our organizational framework by developing and implementing comprehensive policies.

The transition from Nominations Committee to Selection Committee signals a shift toward a more structured and engaged process for evaluating and recommending leadership candidates to Council, supporting fair and consistent governance practices. In parallel, new succession planning policies for Council leadership roles help ensure continuity, promote consistency, and address potential knowledge gaps over time.

We developed a Professional Conduct Manual and a Hearings Manual, each containing dozens of policies and procedures that uphold our regulatory obligations and support our commitment to transparency and accountability. At least three key policies and procedures were implemented ahead of schedule, demonstrating our focus on operational excellence and proactive compliance. These updates establish a clear, consistent framework to guide professional conduct and support fair, informed decision-making.

Ongoing efforts have been made to strengthen registrant policies to ensure alignment with ethical and professional standards, including requirements around good character and fitness to practice. We also examined the existing mandatory registration policy and plan to revise its content in 2025.

REGULATORY EDUCATION SESSIONS ON PRIVACY & CONSENT

We hosted regulatory education webinars in spring and fall 2024 to help registrants understand privacy and regulatory obligations.

Hundreds of registrants joined sessions featuring Alberta's Information and Privacy Commissioner, Diane McLeod, who discussed accountability under the *Health Information Act* and the application of the *Personal Information Protection Act* (PIPA). The session received a 96% satisfaction rate.

Jason Kully, a partner at Field LLP, led a session on consent, informed consent, and documentation—highlighting practical guidance for emergency and incapacitated patient situations. These webinars help empower registrants to uphold patient rights with care, compassion, and legal clarity.

Registrants may claim session time toward their Continuing CCP requirements.

COLLEGE WEBSITE REDESIGNED

In May, the College launched its redesigned website, which has a modern, dynamic look and reorganized content to enhance user experience.

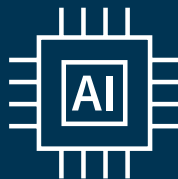
A standout feature is the revamped Applicants section, which simplifies the process for new graduates, applicants from other Canadian jurisdictions, and internationally educated professionals. A new “Find Your Application Route” tool helps applicants quickly identify the best path to registration.



NEW POLICIES FOR COUNCIL
SUCCESSION PLANNING



REDUCED MANDATORY
CCP LEARNING HOURS



ADOPTED AI TOOLS TO
INCREASE PRODUCTIVITY



REMOVED STUDENT
MEMBERSHIP FEE

LEVERAGING TECHNOLOGY

The College achieved a key milestone by implementing Microsoft Teams and SharePoint for collaboration and project management. By the end of the year, all staff were using Teams daily, with most making regular use of its apps and tools. Council members accessed Teams for relevant communications and updates. This transition significantly reduced the volume of Council-related emails and ensured that all documents were securely stored and organized within Teams.

AI tools like Microsoft CoPilot, ChatGPT, and others helped streamline various activities, saving time and increasing department productivity.

We also continued to strengthen IT security protocols to protect registrant and organizational data. This smooth technology adoption has enhanced operational efficiency and created a more connected, productive work environment.

RENEWAL UPDATES CREATE A MORE EFFICIENT EXPERIENCE

Notable upgrades were made to the 2025 Renewal process to improve the registrant experience, reduce frustration, and support professional accountability. Based on registrant feedback, we redesigned the Renewal form to be clearer and more user-friendly. Registrants can now easily view their practice hours from the past four years.

We shifted from requiring a supervisor's signature to a streamlined declaration process for Additional and Enhanced Authorizations, reducing delays. Randomized audits will verify compliance and maintain integrity.

PRE-AUTHORIZED DEBIT PROGRAM LAUNCHED

After multiple requests, the College launched a Pre-Authorized Debit (PAD) Program to offer registrants a more flexible Renewal payment option. PAD allows registrants on the General/Temporary register to pre-pay the upcoming year's Renewal fee in six monthly payments of \$75.

Participation in the program's second intake increased by 50%, reflecting strong uptake. PAD subscribers must still complete their annual Renewal within the required timelines.

Following direction from the Minister of Health, all registrants must obtain their own personal Professional Liability Insurance (PLI) by January 1, 2025. PLI offers protection against legal costs from lawsuits and College conduct proceedings.

CONTINUING COMPETENCE PROGRAM REVIEW STREAMLINES REPORTING

Following a comprehensive five-year review of the CCP, we made updates to better support registrants in their ongoing professional development.

The refreshed CCP reduces mandatory learning hours and allows for streamlined reporting on a new, user-friendly platform.

To encourage compliance, a \$150 CCP levy was introduced in 2024 for those who do not complete their CCP requirements on time. This aims to reduce the number of incomplete submissions.

REMOVAL OF STUDENT FEES

As of August 1, the \$100 student fee was eliminated. This change encourages post-secondary students to join the College without facing financial barriers. The impact on revenue is expected to be neutral, as most students transition to full registration after completing their programs.



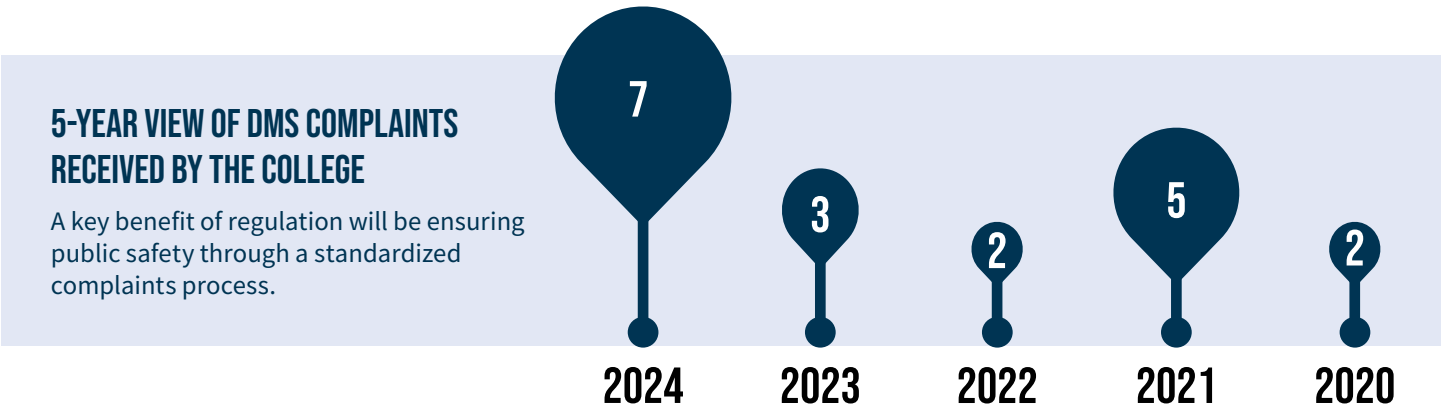
IN 2024, THE GOVERNMENT RENEWED ITS COLLABORATION WITH THE COLLEGE TO REGULATE ALBERTA'S DIAGNOSTIC MEDICAL SONOGRAPHERS (DMS).

DIAGNOSTIC MEDICAL SONOGRAPHERS

Regulation of the profession will take effect once DMSs are included in the amended MDTT Profession Regulation and HPRAR. DMSs play a critical role in the diagnostic care and management of patients by applying ultrasound imaging. Regulation will ensure that DMSs in Alberta receive comprehensive training before entering the profession and remain up to date through annual professional development. The public will have access to a registry listing all registered DMSs, including their permit status and any practice conditions. Additionally, a fair and transparent complaints process will be implemented to uphold professional standards.

COMPLAINTS AND CONCERNS

Until DMSs are regulated, the College has no authority to address concerns regarding practice or complaints of unprofessional conduct. However, members of the public occasionally contact us. Seven complaints were received by the College this year. The most serious were two complaints with allegations of sexual abuse or sexual misconduct. The remaining complaints related to communication, competence, social media usage, and other issues. Complainants were provided resources and directed to contact applicable organizations, such as the relevant facility, Alberta Health Advocates, Sonography Canada, and the College of Physicians and Surgeons of Alberta. We also recommended that they notify the Minister of Health of their concerns.



DMSs decided to pursue regulation through the College.

2013

Alberta Health declared its support for DMS regulation through the College.

2014

2016

The HPA was amended to provide the pathway for assurance of public protection, leading to greater public awareness and confidence in what DMSs practice. The College drafted and presented the amended MDTT Profession Regulation to Alberta Health.

The College continues to request that the Alberta Government officially allow DMSs to be regulated through our college.

2017
-
2023

2024

The College and the Alberta government renewed efforts to complete the steps necessary for DMS regulation.

PROFESSIONAL CONDUCT

The College manages complaints of unprofessional conduct regarding its registrants as part of its mandate to protect the public under the HPA. The HPA grants regulatory colleges the authority to enforce ethical conduct and standards of practice.

As per Part 4 of the HPA, the College has the authority to resolve complaints, investigate or appoint investigators, seek expert advice, dismiss trivial or vexatious complaints, and take other actions. The College follows the principles of procedural fairness while remaining transparent and accountable to the public. We take an education-based approach when resolving complaints; however, in some instances, remedial or disciplinary action is necessary.

COMPLAINT DISPOSITION DURING 2024

Complaints carried forward from previous year	2
New complaints received	16
Total Complaints	18
Dismissed	4
Resolved informally	3
Total Closed Complaints	7
Assessed under Section 118	0
Subject matter expert review	0
Resolved informally	1
Under investigation	9
Referred to a hearing	0
In decision phase	0
Decisions appealed	1
Decisions changed upon appeal	0
Implementing Hearing Tribunal orders	0
Total Open Complaints	11

COMPLAINTS BY STANDARD OF PRACTICE*

Standard 1.0 Provision of Patient Care/Services	31%
Standard 2.0 Professional Accountability	43%
Standard 3.0 Professional Roles	13%
Standard 4.0 Practice Management	0%
Standard 5.0 Protection of Patients from Sexual Abuse and Sexual Misconduct	13%
Standard 6.0 Continuing Competence Program	0%

**A complaint may involve more than one Standard of Practice*



OF PROFESSIONAL FEES
WERE SPENT ON CONDUCT
IN 2024



PATIENT RELATIONS PROGRAM

According to the HPA, the College is required to establish a Patient Relations Program that includes measures for preventing and addressing incidents of sexual abuse and sexual misconduct by registrants towards their patients.

The Patient Relations Program is designed to support patients who have experienced sexual abuse or sexual misconduct by providing funding for treatment or counselling.

The key components of the Patient Relations Program include:

- Education for registrants on the prevention of sexual abuse and sexual misconduct.
- Training for College staff regarding sexual abuse and sexual misconduct.
- Assistance in directing individuals to appropriate resources.
- Funding for treatment for patients who have experienced sexual abuse or sexual misconduct.

To be eligible for funding, a patient must fulfill the following criteria:

- A complaint must be filed against a registrant of the College, and it must meet the definition of sexual abuse or sexual misconduct.
- The individual must qualify as a patient as defined by the Standards of Practice.

	Related to sexual abuse	Related to sexual misconduct	Total
Complaints	1	0	1
Patients accessing funding	0	0	0
Funds disbursed in 2024	\$0	\$0	\$0
Total Funds Disbursed Since Inception of Program	\$4,408.69	\$0	\$4,408.69

COMPLAINTS AGAINST DIAGNOSTIC MEDICAL SONOGRAPHERS

See the Diagnostic Medical Sonographer section of this report.

2023-2024 CYCLE

CCP BY THE NUMBERS

2694

CCP participants

47

Audits completed

32

Average CCP hours submitted

2%

Percentage of registrants selected for audit

CONTINUING COMPETENCE

The College administers the CCP as mandated by the HPA to help our registrants maintain and enhance their professional capabilities.

Registrants use a self-assessment tool aligned with the Standards of Practice to create a personalized learning plan and document their learning activities, including a self-reflection on how each activity impacts their professional practice.

FIVE-YEAR CCP REVIEW & REFRESHED PROGRAM

The College reviews the CCP at least every five years, with the most recent review conducted in 2024. This review included an evaluation of the platform and governing documents, such as the Regulations, Standard of Practice 6.0, related policies, and the CCP manual. Additionally, the College assessed audit outcomes from the past five years and examined practices from other regulatory organizations.

Registrants surveyed about the 'My CCP' platform shared concerns about the platform's navigability, issues with document uploads, an overly complex progress tracking system, and a desire for a more intuitive design.

As a result of the review, a key decision was made to value the quality of learning over the quantity of learning. Therefore, the minimum required learning hours were reduced from 24 to 12 hours per year. The College also developed a more streamlined and user-friendly 'My CCP' platform on 'My Profile'.

The refreshed CCP cycle launched on October 1, 2024.

COMPLIANCE

On September 13, 2024, a CCP Audit on the 2023/2024 CCP cycle took place.

The CCP Committee audited the reflective practice of 47 selected registrants. The audit's results are shared in the table below.

2023-2024 CCP AUDIT RESULTS

Randomly selected	38
Directed by Registrar	12
Total Registrants selected/directed for audit	50
Cancelled/deferred audit	1
Did not submit reflective practice review for audit	2
Total Registrants Audited by Committee	47
Satisfactory audit results	28
Satisfactory, with feedback audit results	7
Total Registrants with satisfactory audit results	35
Unsatisfactory audit results	12
Total Registrants with unsatisfactory audit results	12
Outstanding audits as of December 31, 2024	2

REGISTRATION STATISTICS

Registrants

		Dec. 31, 2024		Dec. 31, 2023	
General		Registrants	Total	Registrants	Total
Radiological technology	• Single Specialty	1889	1925	1834	1867
	• Multiple Specialty	36		33	
Radiation therapy	• Single Specialty	246	248	243	244
	• Multiple Specialty	2		1	
Nuclear medicine technology	• Single Specialty	293	305	292	304
	• Multiple Specialty	12		12	
Magnetic resonance technology	• Single Specialty	267	316	262	307
	• Multiple Specialty	49		45	
Electroneurophysiology technology	• Single Specialty	48	48	51	51
	• Multiple Specialty	0		0	
A. Total General Registrants			2842	2773	
Temporary					
Radiological technology			9	9	
Radiation therapy			0	0	
Nuclear medicine technology			2	2	
Magnetic resonance technology			1	0	
Electroneurophysiology technology			1	2	
B. Total Temporary Registrants			13	13	
Total Registrants (A+B)			2855	2786	

Students*

	Dec. 31, 2024	Dec. 31, 2023
Radiological technology	66	50
Radiation therapy	32	36
Nuclear medicine technology	4	0
Magnetic resonance technology	1	9
Electroneurophysiology technology	0	0
Total Students	103	95

*non-regulated

Applications and Registrations		
Renewal	2024	2023
Practice permits renewed	2679	2607
Practice permits cancelled	0	0
Permits resigned	154	156
Courtesy register	0	0
Applications		
New Graduates	<ul style="list-style-type: none"> Alberta program 119 Out-of-province 31 	125 9
Labour Mobility	17	21
Non-Labour Mobility	18	29
Returning to Practice	80	87
Total Applications	265	271
Registrations		
New Graduates	<ul style="list-style-type: none"> Alberta program 119 Out-of-province 31 	125 9
Labour Mobility	17	21
Non-Labour Mobility	18	29
Returning to Practice	80	87
Total Registrations	265	271

Practice Permits with Conditions		
Enhancements	2024	2023
Ictal SPECT injection	11	11
CT and contrast media	133	127
Intraoperative monitoring (ENP)	9	9
Needle authorization	1	1
Venipuncture	699	676
Breast ultrasound	44	37
Automated breast ultrasound	44	38
Bladder ultrasound	40	35
MR in radiation therapy	15	5
Quantitative CT	2	2
Medication administration	716	651
Enhanced GI fluoroscopy	23	17
Total practice permits with enhancements	1737	1609
Practice permits with restrictions		
Practice activity restriction	10	13
Compliance restrictions	27	25
Total practice permits with restrictions	37	38

SUBSTANTIAL EQUIVALENCY PATHWAY

The Registrar and Registration Committee are responsible for making decisions regarding applications that do not meet the College's mandatory registration requirements. These applications are referred for a Substantial Equivalence Assessment (SEA).

The SEA determines if the applicant's education, professional experience, and clinical practice are comparable to the competencies required for an MRT or ENP in Alberta.

APPLICATION PROCESSING TIME

In 2024, the College processed SEA registration applications in as little as 1 day and up to 71 days after receiving a complete application. The main factor delaying a complete application is the time it takes for the College to receive all required documents from applicants, educational institutions, and other third parties. Once an application is complete, processing time depends on reviewing documents for critical gaps, verifying information, and contacting references. The application is then sent to the Registrar or Registration Committee for review and a decision.

Applications and Decisions

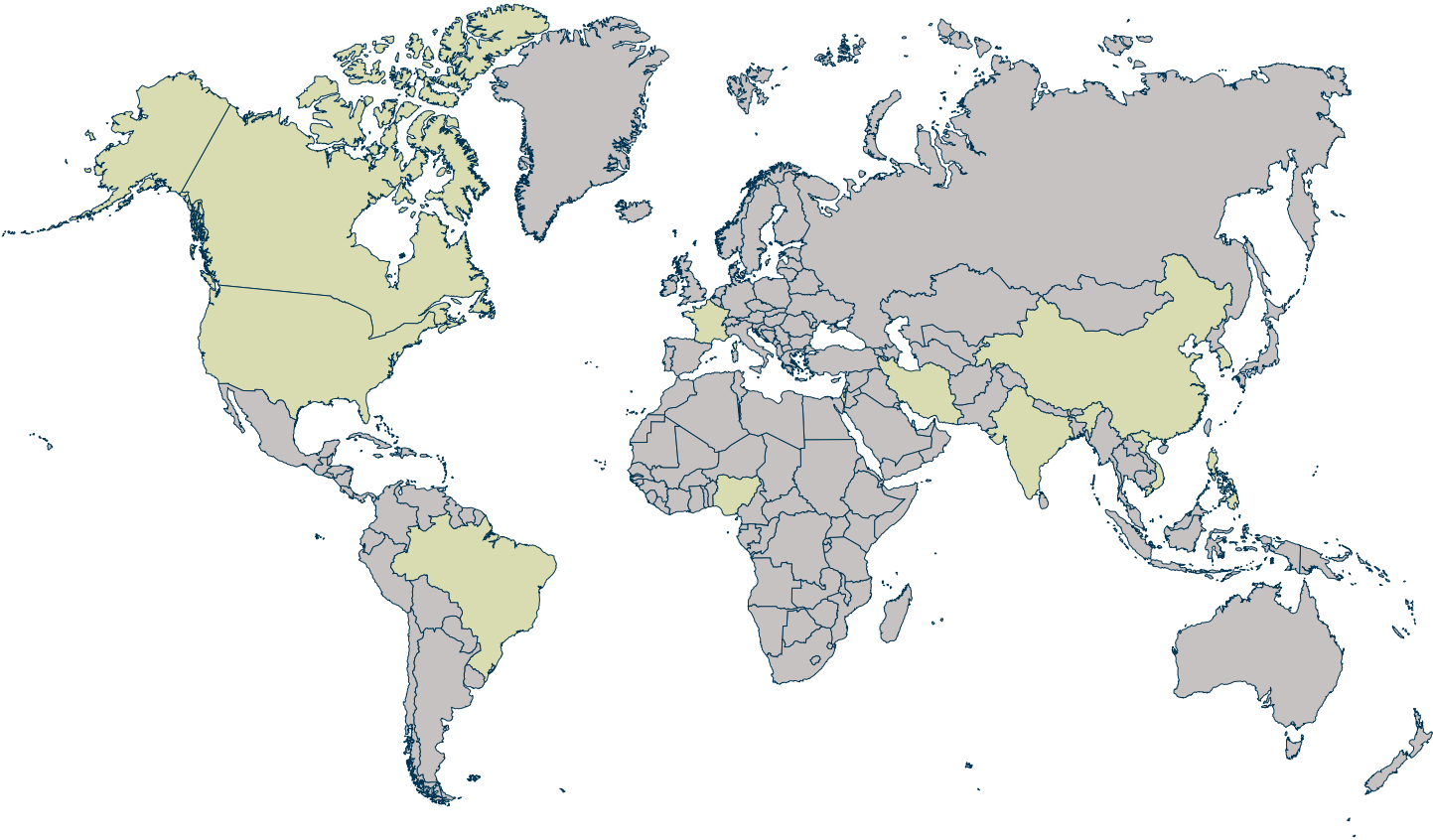
	Applications	Approved	Deferred*	Refused
2024				
New application – non-labour mobility applicant	1	0	0	1
Returning to practice	1	0	1	0
New applicant: Internationally Educated Applicant (IEA)	18	2	16	0
Total	20	2	17	1
2023				
IEAs who applied in 2023 and whose registration was deferred until requirements were met in 2024	0	5	0	0
Total	0	5	0	0

**Deferred applications require applicants to fulfill additional requirements, including proof of passing the Certification Examination and completion of the online courses.*

SUBSTANTIAL EQUIVALENCY PATHWAY

COUNTRY OF QUALIFYING EDUCATION

	Specialty	Applicants
Canadian educated applicants	Radiological technology	2
Philippines	Radiological technology	5
India	Radiological technology	2
	Radiation therapy	1
Brazil	Radiological technology	1
France	Radiation therapy	1
Korea	Radiological technology	1
Iran	Nuclear medicine technology	1
Israel	Radiological technology	1
Nigeria	Radiological technology	2
People’s Republic of China	Radiation therapy	1
United States of America	Radiation therapy	1
Vietnam	Magnetic resonance technology	1
Internationally educated applicants		18
Total		20



INDEPENDENT AUDITOR'S REPORT

To the Council of Alberta College of Medical Diagnostic & Therapeutic Technologists

Opinion

We have audited the financial statements of Alberta College of Medical Diagnostic & Therapeutic Technologists (the College), which comprise the statement of financial position as at September 30, 2024, and the statements of operations, 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 September 30, 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
February 13, 2025

RSM Canada LLP
Chartered Professional Accountants

STATEMENT OF FINANCIAL POSITION

September 30, 2024

	2024	2023
ASSETS		
CURRENT		
Cash	\$ 667,835	\$ 492,687
Accounts receivable	–	684
Prepaid expenses	38,615	34,851
	706,450	528,222
RESTRICTED CASH AND LONG-TERM INVESTMENTS (Note 3)	1,530,490	1,466,404
LONG-TERM INVESTMENTS (Note 4)	373,935	228,732
TANGIBLE CAPITAL ASSETS (Note 5)	57,517	59,957
	\$ 2,668,392	\$ 2,283,315
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 33,318	\$ 48,218
Unearned revenues (Note 6)	379,232	328,398
	412,550	376,616
NET ASSETS		
Invested in tangible capital assets	57,517	59,957
Internally restricted (Note 7)	1,530,490	1,466,404
Unrestricted	667,835	380,338
	2,255,842	1,906,699
	\$ 2,668,392	\$ 2,283,315

LEASE COMMITMENTS (Note 9)

APPROVED BY THE COUNCIL



Steven DeColle, MRT(MR)
Chair



Jason Livingstone, MRT(R)
Vice Chair

See notes to financial statements

STATEMENT OF OPERATIONS

Year Ended September 30, 2024

	2024	2023
REVENUES		
Professional fees	\$ 1,290,664	\$ 1,264,473
Investment income (Note 8)	216,245	102,459
Professional conduct recoveries	–	969
Other income	–	25,382
	1,506,909	1,393,293
EXPENSES		
Human resources	719,030	756,940
Operating	280,686	289,003
Professional conduct	60,277	124,565
Regulatory functions	54,088	145,926
Provincial and national affiliations	21,911	26,862
Amortization of tangible capital assets	21,774	25,173
Amortization of intangible capital assets	–	24,735
	1,157,766	1,393,204
EXCESS OF REVENUES OVER EXPENSES	\$ 349,143	\$ 89

STATEMENT OF CHANGES IN NET ASSETS

Year Ended September 30, 2024

	Unrestricted	Invested in Tangible Capital Assets	Internally Restricted (Note 7)	2024	2023
NET ASSETS - BEGINNING OF YEAR	\$ 380,338	\$ 59,957	\$ 1,466,404	\$ 1,906,699	\$ 1,906,610
Excess of revenues over expenses	370,917	(21,774)	–	349,143	89
Invested in tangible capital assets	(19,334)	19,334	–	–	
Transfer to internally restricted fund	(64,086)	–	64,086	–	
NET ASSETS - END OF YEAR	\$ 667,835	\$ 57,517	\$ 1,530,490	\$ 2,255,842	\$ 1,906,699

See notes to financial statements

STATEMENT OF CASH FLOWS

Year Ended September 30, 2024

	2024	2023
CASH PROVIDED BY (USED IN):		
OPERATING ACTIVITIES		
Excess of revenues over expenses	\$ 349,143	\$ 89
Items not affecting cash:		
Amortization of tangible capital assets	21,774	25,173
Amortization of intangible capital assets	–	24,735
Gain on disposal of investments	(3,233)	(32,301)
Unrealized gain on investments	(166,320)	(29,202)
	201,364	(11,506)
Changes in non-cash working capital:		
Accounts receivable	684	(361)
Prepaid expenses	(3,764)	44,152
Accounts payable and accrued liabilities	(14,900)	20,035
Unearned revenues	50,834	(13,698)
	32,854	50,128
	234,218	38,622
INVESTING ACTIVITIES		
Purchase of tangible capital assets	(19,334)	(76,369)
Purchase of investments	(103,337)	(259,871)
Proceeds on disposal of investments	91,165	192,133
Reclassification of restricted cash and investments	(27,564)	32,794
	(59,070)	(111,313)
INCREASE (DECREASE) IN CASH	175,148	(72,691)
Cash - beginning of year	492,687	565,378
CASH - END OF YEAR	\$ 667,835	\$ 492,687

See notes to financial statements

NOTES TO FINANCIAL STATEMENTS

Year Ended September 30, 2024

1. NATURE OF OPERATIONS

Alberta College of Medical Diagnostic & Therapeutic Technologists (the “College”) is a not-for-profit organization established under the Health Disciplines Act on June 15, 1983 and continued under the Health Professions Act on May 1, 2005. The College collects professional fees as the regulatory body for medical radiation technologists and electro-neurophysiology technologists in Alberta. The College is self-governing and provides services to the members. The College exists so that the public is assured of receiving safe, competent, and ethical diagnostic and therapeutic care by a regulated professional.

As a not-for-profit organization under the Income Tax Act (Canada), the College is not subject to federal or provincial income taxes.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

These financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations. Significant accounting policies observed in the preparation of the financial statements are summarized below.

Cash

Cash is defined as cash on hand and cash on deposit, net of cheques issued and outstanding at the reporting date.

Restricted cash and investments

Restricted cash and investments consists of cash funds, equities, income trusts and bonds which have terms that range up to 10 years from the date of acquisition for purposes as described in Note 7.

Long-term investments

Long-term investments consists of equities and income trusts which are initially recognized at cost and subsequently re-measured at fair value at each reporting date. Long-term investments also consists of bonds and fixed income investments. Unrealized gains or losses on re-measurement are recognized in the statement of operations.

Tangible capital assets

Tangible capital assets are recorded at cost less accumulated amortization. Tangible capital assets are amortized over their estimated useful lives on a straight-line basis over the following periods:

Furniture and fixtures	5 years
Computer equipment	3 years
Leasehold improvements	5 years

When conditions indicate a tangible capital asset is impaired, the carrying value of the tangible capital asset is written down to the asset’s fair value or replacement cost. The write down of the tangible capital asset is recorded as an expense in the statement of operations. A write-down shall not be reversed.

Revenue recognition

The College follows the deferral method of accounting for contributions. Contributions, including grants, are included in revenue in the year in which they are received or receivable, with the exception that contributions to fund a specific future period’s expenses are included in revenue in the period the expenses are incurred.

Professional fees and student fees are collected for the calendar year. The College records a deferral of revenue for the portion of fees that covers the period subsequent to year end.

Investment income is comprised of interest and dividends from cash, short-term investments and long-term investments, gains on disposal of these investments and unrealized gains. Investment income revenue is recognized on an accrual basis.

(continues)

NOTES TO FINANCIAL STATEMENTS

Year Ended September 30, 2024

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Contributed goods and services

The College receives a substantial amount of volunteer time and effort as well as donated goods to carry out its activities. Due to the difficulty in determining the fair value of these contributed amounts, they have not been recognized in these financial statements.

Financial instruments

Measurement

Financial instruments are financial assets or financial liabilities of the College where, in general, the College has the right to receive cash or another financial asset from another party or the College has the obligation to pay another party cash or other financial assets.

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

The College subsequently measures all its financial assets and financial liabilities at amortized cost, except for restricted long-term investments in equity instruments that are quoted in an active market which are measured at fair value at each reporting date.

Financial assets measured at amortized cost include cash, accounts receivable, restricted cash and investments and long-term investments, excluding equity instruments.

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

The College recognizes the regular purchases and sales of financial assets when the College becomes a party to the contractual provisions of the financial instrument.

Impairment

Financial assets measured at cost or amortized cost are tested for impairment, at the end of each year, to determine whether there are indicators that the asset may be impaired. The amount of the write-down, if any, is recognized in operations. The previously recognized impairment loss may be reversed to the extent of the improvement, directly or by adjusting the allowance account. The reversal may be recorded provided it is no greater than the amount that had been previously reported as a reduction in the asset and it does not exceed original cost. The amount of the reversal is recognized in operations.

Use of estimates

The preparation of these financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amount of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period.

3. RESTRICTED CASH AND INVESTMENTS

Restricted cash and investments is comprised of the following:

	2024	2023
Restricted cash	\$ 52,430	\$ 24,866
Bonds bearing interest from 1.50% per annum to 3.50% per annum maturing between June 2026 and June 2033	627,781	750,566
Equity and fixed income funds	850,279	690,972
	\$ 1,530,490	\$ 1,466,404

Restricted cash and investments have been designated for specific programs as described in Note 7. Equity and fixed income funds are recorded at fair value and have an original cost of \$599,626 (2023 -\$563,665).

NOTES TO FINANCIAL STATEMENTS

Year Ended September 30, 2024

4. LONG-TERM INVESTMENTS

	2024	2023
Bonds bearing interest from 1.50% per annum to 3.50% per annum maturing between June 2026 and June 2033	\$ 373,935	\$ 228,732

5. TANGIBLE CAPITAL ASSETS

	Cost	Accumulated amortization	2024 Net book value	2023 Net book value
Furniture and fixtures	\$ 64,566	\$ 26,103	\$ 38,463	\$ 49,758
Computer equipment	87,073	78,386	8,687	5,198
Leasehold improvements	14,522	4,155	10,367	5,001
	\$ 166,161	\$ 108,644	\$ 57,517	\$ 59,957

6. UNEARNED REVENUES

Unearned revenues consist of professional fees received on a calendar basis but related to a subsequent period.

	2023	Contributions received	Revenue recognized	2024
Professional fees	\$ 328,398	\$ 1,341,498	\$ 1,290,664	\$ 379,232

7. INTERNALLY RESTRICTED NET ASSETS

The Internally Restricted Net Assets Fund is reserved to cover unexpected expenses incurred by professional conduct disciplinary actions, to ensure that the College is stable and viable, and to ensure compliance with the Health Professions Act and the Medical Diagnostic and Therapeutic Technologists Profession Regulation. In 2024, the College combined the Treatment and Counselling Fund, Professional Conduct Contingency Fund, Stabilization Fund and Regulatory Risk-Management Fund into the Internally Restricted Net Assets Fund. During fiscal 2024, the Board approved the transfer of \$64,086 (2023 - nil) from unrestricted net assets to internally restricted net assets.

8. INVESTMENT AND OTHER INCOME

	2024	2023
Unrealized gain on investments	\$ 166,320	\$ 29,202
Dividends	47,432	42,579
Interest	16,301	14,346
Gain on disposal of investments	3,233	32,301
Management fees	(17,041)	(15,959)
	\$ 216,245	\$ 102,469

NOTES TO FINANCIAL STATEMENTS

Year Ended September 30, 2024

9. LEASE COMMITMENTS

The College is committed under an operating lease for the rental of the Edmonton office. The operating lease expires September 2027.

Future minimum aggregate lease payments to expiry of the lease will be approximately as follows:

2025	\$	80,826
2026		80,826
2027		80,826
		<hr/>
	\$	242,478
		<hr/>

10. RISK MANAGEMENT

The College is exposed to various risks through its financial instruments. The following provides information about the College’s risk exposure and concentration as of September 30, 2024.

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. Accounts receivable are generally the result of services to members. The College does not believe it is subject to any significant credit risk.

Liquidity risk

Liquidity risk arises from the possibility that the College might encounter difficulty in settling its debts or in meeting its obligations related to financial liabilities. It is management’s opinion that there is no significant liquidity risks as of September 30, 2024.

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. Senior management and the Council, in consultation with investment advisors, review the College’s investments and establish a diversified investment mix in order to earn the best possible return at an acceptable level of risk.

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. In seeking to minimize the risks from interest rate fluctuations, the College manages exposure through its normal operating and financing activities.

Unless otherwise noted, it is management’s opinion that the College is not exposed to significant other price risks arising from these financial instruments. There has been no change to the College’s risk exposure in the current year.

RECOGNIZING AND ENGAGING WITH OUR STAKEHOLDERS IS ESSENTIAL TO BUILDING LONG-TERM RELATIONSHIPS AND DRIVING MUTUAL SUCCESS

- Accreditation Canada Council and Committees
- Alberta Federation of Regulated Health Professions
- Alberta Health
- Alberta Labour and Immigration
- Alberta Ombudsman
- Alliance of Medical Radiation and Imaging Technologists Regulators of Canada
- Canadian Association of Electroneurophysiology Technologists
- Canadian Association of Medical Radiation Technologists
- Canadian Board of Registration of Electroencephalograph Technologists
- Canadian National Network of Medical Radiation and Imaging Technologists
- Fairness for Newcomers Office
- Ministry of Jobs, Economy and Trade
- Northern Alberta Institute of Technology Advisory Committee
- Office of the Information and Privacy Commissioner
- Provincial Diagnostic Imaging Advisory Committee
- Sonography Canada
- Southern Alberta Institute of Technology Advisory Committee
- University of Alberta Radiation Therapy Program Advisory Committee



Alberta College of Medical Diagnostic and Therapeutic Technologists

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