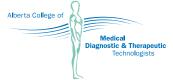
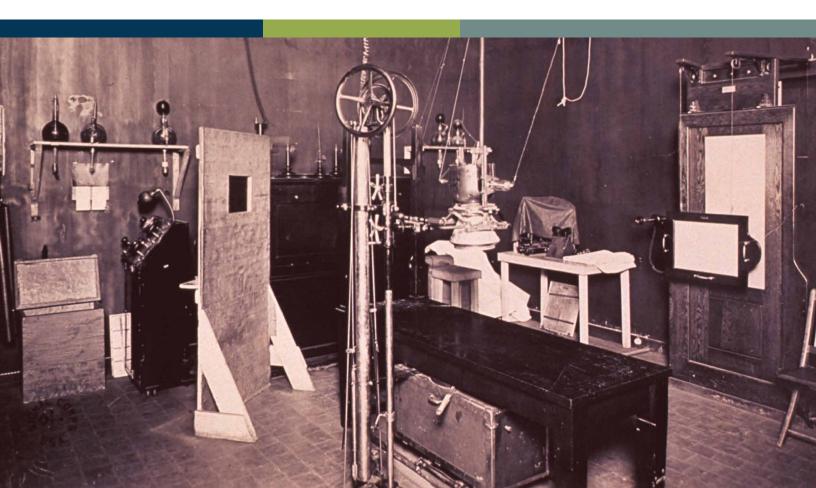


# **2019 Annual Report**

Alberta College of Medical Diagnostic and Therapeutic Technologists

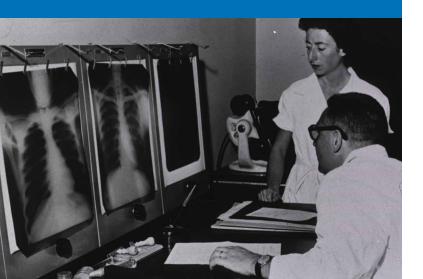






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## **Strategic Plan Achievements**

In 2019, we began implementing our three-year strategic plan, which we developed to set the College's direction and help us determine the priorities for our programs and activities. We've included key achievements from the year throughout this annual report, indicated by icons that illustrate which of the three strategic areas they represent.



**Purpose:** Ensure that members provide medical diagnostic and therapeutic services consistent with College standards and legislated requirements.



**Capacity:** Fulfill our duty to protect the public through strengthening College capacity and effectiveness.



**Culture:** Connect and inspire members to instill and foster commitment to both the public and the practice of their profession.

## **Annual Report Theme**

The images in this report demonstrate the progress in providing medical diagnostic and therapeutic care to patients. The images presented together on a page may not necessarily show the same type of equipment or procedure, but the contrast between the two is meant to represent the ever-evolving landscape of all the specialties we regulate.

All historical images are courtesy of the U.S. National Library of Medicine except the image on page 22, which is courtesy of the Library of Congress, Prints & Photographs Division, [LC-B2- 4619-5].

The modern images on page 1, 4, 7, 14 and 23 are from Adobe Stock. The modern images on page 2, 6, 8, 10, 15 and 22 are from our own catalogue.

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The Alberta College of Medical Diagnostic and Therapeutic Technologists exists so that the public is assured of receiving safe, competent and ethical diagnostic and therapeutic care by a regulated and continually advancing profession.

# **About the College**

Albertans demonstrate trust that medical radiation technologists (MRTs) and electroneurophysiology technologists (ENPs) are able to regulate themselves in the public interest by granting the professions the privilege of self-regulation through the Alberta College of Medical Diagnostic and Therapeutic Technologists (the College).

With this privilege and trust comes accountability. MRTs and ENPs are accountable for the quality of their patient care and the medical diagnostic and therapeutic services they provide. Individual technologists, by embracing this accountability, are the core of self-regulation.

The College, as a regulatory body established under the *Health Professions Act* (HPA), provides regulatory oversight and guides technologists in meeting their accountability for quality care. Our primary purpose is to protect and serve the public interest. Patient health, safety and care underpins everything we do.

#### As a regulator we:

- Administer Alberta healthcare legislation, including the HPA and the Medical Diagnostic and Therapeutic Technologists Profession Regulation (the Regulation).
- Register only MRTs/ENPs who meet our education, training and competency requirements.
- · Require annual practice permit renewal.
- Set and enforce practice and conduct standards.
- Administer a mandatory continuing competence program.
- Maintain a website with a live member register so that patients can verify their practitioner's registration status and practice limitations in real time.
- Address complaints about our members' conduct.
- Provide expertise and direction on regulatory and health policy.
- Promote awareness of MRT/ENP professions.

To help members achieve regulatory requirements, we:

- Promote practice and patient care excellence.
- Provide/support professional development and interdisciplinary collaboration opportunities.
- Provide tools to help them interpret and apply the College's key foundational documents, including the HPA, the Regulation and our Standards of Practice and Code of Ethics.



Our first annual Membership Meeting replaced the more formal Annual General Meetings of the past and allowed us to engage more with our members, who attended both in person and online.

The College is governed by an elected board of directors that we call Council, comprised of MRTs and ENPs and three members of the public appointed by the province. Our public members help ensure Albertans' interests are represented and protected by providing public perspective into Council discussions and policy decisions. The College's daily operations are managed by our Registrar and CEO and a small office team.

### The professions we regulate

MRTs and ENPs are highly technical medical specialists who play a pivotal role in healthcare by providing sophisticated, targeted and highly effective medical diagnostic and therapeutic services through the use of sophisticated technology and by providing safe and effective patient care.

**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.

**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.

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

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

**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.

**Diagnostic medical sonographers** (DMS) perform imaging procedures including general, obstetrical, cardiac, vascular and musculoskeletal imaging. Alberta Health is currently amending the Regulation under the HPA, which will direct the College to regulate DMS within Alberta.

### **Message From the Leadership**

Healthcare professionals serve the public by adhering to their College's regulatory requirements and continually advancing their skills and knowledge, which in turn advances the profession as a whole. The images in this annual report represent the ways that medical diagnostic and therapeutic professionals have served Albertans and continue to evolve.

The cusp of this decade, 2019 was also year of many new initiatives that have set in motion changes that will define the College's next evolution as a professional regulator. We embarked on our first year of executing our first strategic plan, which brought a sharpened focus on our purpose, our capacity and our culture. In this context, the College reached out and engaged with stakeholders, particularly our members across the spectrum of practice unique to this multi-modality College. Key points of engagement that stand out in 2019 occurred in reviewing our Standards of Practice, providing regulatory education and dialogue with our decision-makers, holding a staff and Council retreat to focus on diversity and inclusion, creating a Decision-Making Tool to help guide members in determining appropriate and safe practice using the College's key foundational documents, and holding our first online membership meeting.

With a view to continued evolution, these engagement processes were designed to identify future professional trends and better understand what is important to our stakeholders, gain insights into what our stakeholders know about the College and how they have learned about the organization, gather opinions about the College's current communications tools and services, and determine how we can refine them to meet our audiences' needs. This generative dialogue continues to strengthen and shape our capacity for progress, agility and efficiency.





The College also implemented a Patient Relations Program, which includes measures for preventing and addressing sexual abuse and sexual misconduct by College members towards their patients. The Patient Relations Program strives to support patients who are the victims of sexual abuse or sexual misconduct by regulated members. In addition, we collaborated with other health Colleges to create a learning module for members to understand, prevent and protect patients from sexual abuse and sexual misconduct.

The leadership appreciates our regulated members across Alberta who deliver diagnostic and therapeutic services in nuclear medicine technology, radiation therapy, electroneurophysiology technology, radiological technology and magnetic resonance technology, as well as our colleagues in diagnostic medical sonography. We also gratefully acknowledge the visionary direction and leadership of our Council, the commitment, drive and creativity of our staff, and the generous assistance of our many partners.

Strengthened by the work we've accomplished in 2019, the College upholds public trust in our professions. Looking forward, the College continues to work actively on many emerging issues related to the regulation of the profession and on public protection. This annual report serves as the College's public account of our continued evolution as a responsible contributor to Alberta's healthcare system.

### Sincerely,



Omer Hussein, MRT(R) Council President



Pree Tyagi, MBA Registrar and CEO

## **Public Members' Report**

# Public members serve the public by providing independent and objective input to Council.

The HPA gives Albertans a strong voice in healthcare regulation by requiring a balanced voice between the public and professional members on all college councils. The public members examine issues through a "public interest filter" that is independent of the members of the profession. As public members, we bring expertise in business, finance, law, governance, education and human resources to our work on Council and Council committees. We participate fully in the business and debate at Council meetings that address the College's issues, plans, concerns and aspirations.

In 2019, the College began executing our first three-year strategic plan, which embodies our commitments to our mandate and will guide our work going forward. We also continued our journey of compliance with Bill 21: *An Act to Protect Patients*. Both these initiatives will continue to strengthen the performance of the College as a professional organization dedicated to serving the interest of patients and their families. It is our pleasure to report that the College has, for another year, worked effectively to fulfill our responsibilities as designated by the HPA.

We would like to extend a heartfelt thanks to members of the profession who volunteer on Council and committees for their dedication and hard work to uphold their duty of public protection.

It is both an honour and a privilege for us to represent the public and to serve the College.

Respectfully submitted,

Terence Bunce, John Jossa and Wilma Slenders

### **Council**

Under the HPA, the Council of the College is responsible for upholding the public interest through the responsible governance of the College and our activities. The Council consists of three public members who are appointed by the Government of Alberta and eight regulated members who are elected by the membership.

Kelly Sampson, MRT(T)

Council President (until June 2019)

Omer Hussein, MRT(R)

Council President (July 2019 - present)
Council Vice President (until June 2019)

Steve DeColle, MRT(MR) Council Vice President (July 2019 - present)

Gail Astle, MRT(R)
Council Member

Jessica Cherwick, ENP Council Member Michael Piva, MRT(T)

Council Member

Cristene van Schagen, MRT(R)

Council Member

Laurie Walline, MRT(NM)

Council Member

Terence Bunce Public Member

John Jossa Public Member

Wilma Slenders Public Member

### **College Staff**

Pree Tyagi, MBA Registrar and CEO; Complaints Director

Alefiyah Gulamhusein, BSc, MRT(NM), CTIC Director, Education and Competence

Ugie Ifesi, MHSc, MRT(NM) Director, Policy and Practice; Privacy Officer

Katie Patterson Communications Officer

Adrienne Hislop Executive Assistant; Hearings Director

Michelle Wolf Registration and Complaints Coordinator

Naadiya Rauf Administrative and Registration Associate

Colin MacPhail Manager, Communication and Member Engagement (until April 2019)

Ranjit Hunjan Registration Coordinator (until March 2019)

### **Committees**

The work of the Council is supported by its Finance and Audit Workgroup, Governance Workgroup and Nominations Committee.

The College also has three standing regulatory committees: the Registration Committee, the Competence Committee, and the Hearings Tribunal/ Complaints Review Committee.

### **Highlights of 2019**

### **Standards of Practice**

The Standards of Practice represent the expected minimum level of performance for regulated members and reflect delivery of high-quality, effective, safe and ethical care to patients. These Standards are mandatory for all regulated members of the College across all contexts of professional practice.

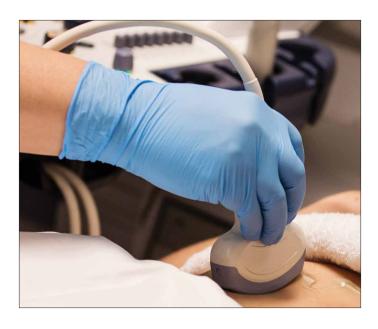
The 2019 revision of the Standards of Practice was anchored with an Advisory Group representing all five specialties and an environmental scan that included a review of comparators, as well as feedback and consultation from the Advisory Group, government and other external stakeholders. The 2019 edition of the Standards of Practice came into effect on September 1, 2019, thereby repealing previous Standards.

### **Gender neutrality**

The College has implemented a gender neutrality policy through the following initiatives:

- Eliminating gender-identifying words in the terms of describing people. We have discontinued the use of he or she and have replaced them with gender neutral language, such as they, in places where the gender of the person is unknown. This will be seen in registration applications, decisions and reasons and any other College communication.
- Applicants and members applying for registration with the College can now identify within three gender categories: male, female and X.

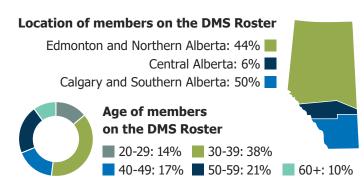




### **Diagnostic Medical Sonographers Roster**

Diagnostic medical sonographers (DMS) have been asking for the privilege to self-regulate for decades in Alberta and across Canada. In 2016, the HPA was amended to include DMS to be regulated through the College. We are waiting for the provincial government to amend the *Medical Diagnostic and Therapeutic Technologists Profession Regulation* (the Regulation), which will make it mandatory for DMS to be registered with the College in order to be legally authorized to practice diagnostic medical sonography in Alberta.

Professionals currently practicing diagnostic medical sonography in Alberta can volunteer to be added to our DMS Roster, and a large number of them have already done so. Being on the roster will expedite their registration with the College once the Regulation has been amended.



### **Council changes**

On July 1, Omer Hussein, MRT(R), became President of Council, while Steve DeColle, MRT(MR) took on the role of Vice President. We would like to thank Kelly Sampson, MRT(T), the outgoing President, for her many years of dedicated service on Council.

#### Bill 21: An Act to Protect Patients

Protecting patients from sexual abuse and sexual misconduct is of paramount importance to the College and we support this legislation. The College continued to take action in 2019 to ensure compliance with Bill 21, which came into force in late 2018. We developed a guide to help regulated members understand these amendments to the HPA as an interim step while the Alberta Federation of Regulated Health Professions (AFRHP) worked on creating a comprehensive online module to be released in early 2020. We consider this learning essential for our members and will recommend they all complete this course.

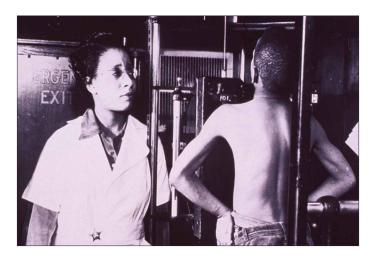
We also implemented a Patient Relations Program that includes measures for preventing and addressing sexual abuse and sexual misconduct by College members towards their patients and for supporting patients who have experienced sexual abuse or sexual misconduct by a member.

### **Conversations with the College**

On September 12, Council, committee members, complaints investigators, hearing tribunal members and College staff attended Regulatory Education Day to learn more about our function and responsibilities as a regulator. The following day, Council and staff participated in activities with a focus on diversity, inclusion and productivity, including presentations on putting passion to work and indigenous awareness and engagement, a smudging ceremony and a Blanket Exercise.

### **Student presentations**

The College has an outreach program to inspire students to get involved in their profession. College staff went to classrooms of students in magnetic resonance, radiological technology, nuclear medicine, diagnostic medical sonography and radiation therapy at NAIT, SAIT and University of Alberta. They delivered presentations and held conversations about the legislative framework, the importance of self-regulation and practicing the profession.





### **Decision-Making Tool**

The College undertook a project with the goal of finding ways to assist regulated members integrate regulatory requirements and principles into their practice. The Decision-Making Tool is the result of a comprehensive process that included consultation with a panel of regulated members and experts.

The final product includes a series of questions to guide a regulated member in determining if a specific activity is appropriate and safe for them to perform. It refers to the College's key foundational documents, including the HPA, the Regulation, Standards of Practice, Code of Ethics and competency profiles. There is both a print version and an interactive online version. We released the Decision-Making Tool in 2019 and plan to promote it more heavily in 2020.

### **CONNECT 2019**

Our annual conference was held in Edmonton on May 10 and 11. CONNECT 2019 was presented in partnership with the CAMRT and brought together over 450 diagnostic and therapeutic professionals including technologists, students, employers and industry from across Canada to learn and share knowledge of the five currently regulated specialties of the College as well as diagnostic medical sonography. The event featured over 30 educational sessions and was well received by attendees.

### **Membership Meeting**

Our first annual Membership Meeting, which took place on May 11 during CONNECT 2019, replaced the more formal Annual General Meetings of the past. This new format allowed us to engage more with our members while still sharing important information and updates. We also live-streamed the meeting online, allowing members across the province to attend the meeting virtually if they weren't able to attend in person.



We developed annual internal reports to give Council information on the College's current state of technology and IT security.

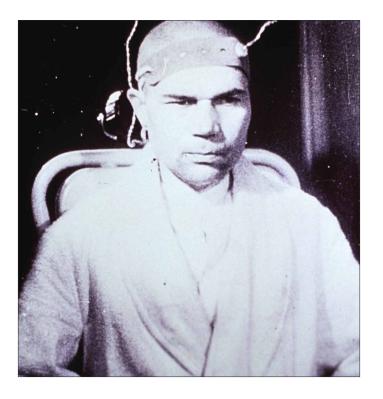
# Registration

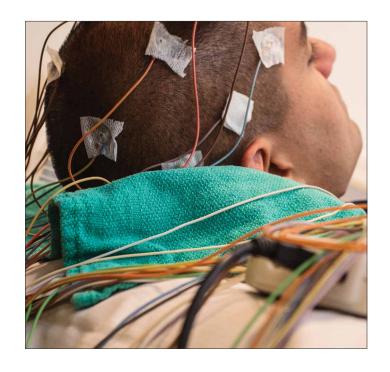
The College is responsible for adopting competencies and setting criteria that everyone applying to the College must meet to qualify for initial registration and to maintain their registration on an annual basis.

	Applications		Registrations		
	2019	2018	2019	2018	
New graduates					
Alberta programs	108	96	108	96	
Out of province programs	3	5	3	5	
Practitioners from other provinces	26	32	26	32	
Internationally educated practitioners	2	6	2	6	
Alberta practitioners returning to practice	98	139	98	139	
Total applications and registrations	237	278	237	278	



The Registration Committee met eight times in 2019 to assess a total of 20 applications for registration referred by the Registrar.





Regulated members	2019	2018
Single specialty		
Radiological technology	1683	1670
Radiation therapy	215	216
Nuclear medicine technology	254	248
Magnetic resonance technology	165	233
Electroneurophysiology technology	48	49
Total regulated members with single specialty	2365	2416
Multiple specialties		
Radiological/magnetic resonance	37	39
Nuclear medicine/magnetic resonance	7	7
Radiation therapy/magnetic resonance	0	0
Radiological/magnetic resonance/nuclear medicine	1	1
Total regulated members with multiple specialties	45	47
Total regulated members on the courtesy register	0	0
Total practice permits renewed	2410	2427
Total practice permits cancelled/ resigned	122	87

Non-regulated members	2019	2018
Single specialty		
Radiological technology	122	121
Radiation therapy	15	14
Nuclear medicine technology	20	27
Magnetic resonance technology	15	19
Electroneurophysiology technology	2	3
Total non-regulated members with single specialty	174	184

Total regulated members with multiple specialties	1	6
Total non-regulated members	175	190

Practice permits with conditions	2019	2018
Ictal SPECT injection	13	13
CT and contrast media	97	91
Intraoperative monitoring	6	8
Needle authorization	2	1
Venipuncture	576	572
Breast ultrasound	35	27
Automated breast ultrasound	22	20
Bladder ultrasound	19	20
Prostate ultrasound	6	6
MR in radiation therapy	1	1
Quantitative CT	1	1
Medication administration	509	438
Enhanced GI fluoroscopy	7	7

Total practice permits with enhancements	1294	1185
Total practice permits with		

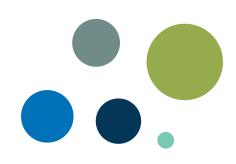
Total practice permits with restrictions	9	24
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### Age of members









### **Place of education**







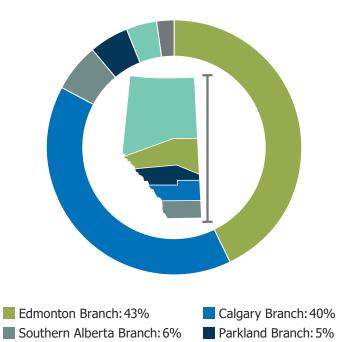
Alberta: 69%

Canada: 27%

International: 6%

ENP Branch: 2%

### **Members by Branch**



### **Members by specialty**



Peace Country Branch: 4%

### **Registration Committee**

The Registration Committee is responsible for making decisions regarding applications for registration referred to it by the Registrar.

The Registration Committee is a statutory body consisting of regulated members. In 2019, the committee met eight times to assess applications as follows:

- Nine applications were deferred to successful completion of other requirements such as providing proof of language proficiency and successfully challenging the entry-to-practice exam.
- Four applications for extensions so as to meet registration requirements were approved.
- Two applications for extensions so as to meet registration requirements were denied.
- One application for registration was approved with conditions.
- Four practice permits were approved with conditions.





### **Application processing time**

The Registration Committee continues to provide registration decisions within a minimum of two weeks and a maximum of 10 weeks from the time a completed application is received. This time frame is affected primarily by the length of time required to receive all the documentation required to consider an application complete. Once an application is complete, it is forwarded to the next Registration Committee meeting. Every effort is made to accommodate applicant requests for expediting this process.

### **Committee members**

Martin Sherriff, MRT(MR) (Chair)	Michelle Luong, MRT(NM)
Jennifer Brown, MRT(R)	Susan McGregor, ENP
Janelle Duquette, MRT(T)	Linda O'Hara, MRT(R)
Abbi Langedahl, MRT(R)	Cynthia Palmaria, MRT(T)
Nikolay Lopatik, MRT(R)	Lamees Wahab, MRT(NM)

### **Applications reviewed**

An overview of applications reviewed by the Registration Committee is provided below.

Specialty	Reviewed	Country of qualifying education (number of applicants)
Radiological technology	12	Australia (2), Nigeria (3), Republic of the Philippines (6), Zambia (1)
Magnetic resonance technology	0	
Nuclear medicine technology	1	Republic of the Philippines (1)
Radiation therapy	1	Japan (1)
Electroneurophysiology technology	6	Canada (5), United States of America (1)
Total	20	

# **Continuing Competence**

The College administers the Continuing Competence Program (CCP), as mandated by the HPA, to help our members maintain and enhance their professional capabilities.

The program, which runs from September 1 to August 31 of the following year, helps the College assess, support and ensure competent practice and continued professional learning and development.

### **Program requirements**

To renew their practice permit each year, members must, through the mandatory online My CCP platform, complete a reflective practice review that includes:

- Self-Assessment of Practice
- · Personal Learning Plan
- CCP activity records outlining and reflecting on a minimum of 24 hours of learning (for members registered for a complete cycle)

Members use a self-assessment tool, the framework of which is aligned with the Standards of Practice, to develop a personal learning plan for the current CCP cycle. Within the cycle, at least one learning objective must be met through a learning activity. Members are also required to document their learning activities to include a self-reflection on how the activity will impact or has impacted their professional practice.



CONNECT 2019 brought together over 450 diagnostic and therapeutic professionals including technologists, students, employers and industry from across Canada.

### **CCP** compliance

Member CCP compliance is monitored by the College's Competence Committee. Each fall, the committee audits a random selection of members' reflective practice reviews. In 2019, 199 members were selected for audit, and this confirmed that members were compliant with the program. The College will continue to monitor the audit sample size to ensure it adequately represents our membership.

### **Committee members**

Kathy Dudycz, MRT(R) (Chair) Arlene Holland, MRT(R)

Joy Boldt, ENP Amanda McCrea, MRT(MR)

David Buehler, MRT(T)

Jennifer Petrohay, MRT(NM)

Heather Gaunt, MRT(T) Lisa Roorda, MRT(MR)

Patty Hermanutz, MRT(R) Matthew Scott, MRT(T)



We revised and updated our Standards of Practice and added a new standard area, Standard 5.0: Protection of Patients from Sexual Abuse and Sexual Misconduct.

			CCP cycle		
	2014/15	2015/16	2016/17	2017/18	2018/19
Number of CCP participants (approximate)	2272	2314	2323	2349	2463
Percentage selected for audit (%)	9	10	10	10	8
Number with directed audits from Registrar/Competence Committee	_	_	15	7	4
Number selected for audit	204	231	235	242	199
Cancelled audits	4	2	6	4	3
Number audited	200	229	229	238	196
Number with successful initial audit	192	213	205	194	179
Number requiring remedial work	8	16	24	44	15
Number forwarded to complaints director for non-compliance	0	0	0	0	0
Average number of CCP hours submitted	39.2*	38.1	42.2	41.12	36.4

\*Calculation based on online submissions only for 2015

# **Professional Conduct and Complaints**

The College receives and manages complaints against our regulated members as part of our mandate to protect the public under the HPA. In order to allow health colleges fulfill this mandate, the HPA grants us the authority to enforce ethical conduct and standards of practice to protect the public's health and well-being. As per Part 4 of the HPA, the College has the authority to attempt to resolve complaints, investigate or appoint investigators, seek the advice of experts, dismiss the complaint (if trivial or vexatious) or take other actions allowed under the HPA. The College follows the principles of procedural fairness in our processes while remaining transparent in our processes and accountable to the public.

We take an education-based approach when resolving complaints; however, in some instances, remedial or disciplinary action is necessary.

### **Complaints**

(DMS): 1*	
Source:  • Public: 0  • Employers: 4  • Public against a diagnostic medical sonographer	5
Number of new complaints in 2019	
Number of complaints carried over from 2018	13

Number of complaints dismissed	1
Number of complaints closed	7
Number of complaints referred to hearings	0
Number of complaints appealed	0
Number of complaints still open	10
Regulated members dealt with under Section 118, incapacity assessments	0
Complaints addressed through an Alternative Complaints Resolution (ACR) process	0
Total	18



We developed a guide to help regulated members understand and comply with Bill 21, which addresses sexual abuse and sexual misconduct towards patients by regulated members.

# **Patient Relations Program**

Under the HPA, the College must have a Patient Relations Program that includes measures for preventing and addressing sexual abuse and sexual misconduct by College members towards their patients. The Patient Relations Program also strives to support patients who have experienced sexual abuse or sexual misconduct by regulated members.

The College provides funding for treatment or counselling for patients who have experienced sexual abuse or sexual misconduct by a regulated member.

	Related to sexual abuse	Related to sexual misconduct	Total	
Number of complaints	0 against regulated members	0	0	
Complaints	1 against DMS*			
Number of patients that accessed the fund	0	0	0	
Amount of money dispersed	0	0	0	



We adopted the AFRHP's recommended framework for publication for hearings and discipline decisions to display transparency and accountability.

\*The College received one complaint from a patient against a diagnostic medical sonographer (DMS).

Although in the future DMS will be regulated by the College pursuant to the HPA, the *Medical Diagnostic and Therapeutic Technologists Profession Regulation* (the Regulation) has not yet been amended by government to include DMS in our register categories. The College maintains a roster of individuals who have volunteered to be listed on the Alberta DMS Roster to facilitate their future self-regulation through the College.

The College dismissed this complaint as the current regulatory framework does not allow us to address complaints against DMS as they are not "regulated members." Based on the amendments made to the HPA in 2016, we have requested the provincial government to amend the Regulation to allow the College to address complaints against DMS.

## **College Awards**

The College is proud to recognize the dedication and professionalism of our members. Through the awards program, we recognize these achievements.

### **Student awards**

**Scholastic Awards** 

**Dr. Marshall Mallett Scholastic Award in Radiological Technology:**Julie Berube, MRT(R)

Scholastic Award in Nuclear Medicine Technology: Michelle Luong, MRT(NM)

Scholastic Award in Magnetic Resonance Technology:

Jeremy Armstrong, MRT(MR) and Brenna Haycock, MRT(MR)

Scholastic Award in Radiation Therapy: Malcolm Laraque, MRT(T)

Scholastic Award in Electroneurophysiology:

Dalia Chehayeb, ENP



For this year's
Branch Education
Day, presentations
in Edmonton were
broadcast online
to sites across
the province.

### **Leadership Awards**

Student Leadership Award in Radiological Technology:

Erin O'Brien

Student Leadership Award in Magnetic Resonance Technology:

Terra Hovde

Student Leadership Award in Nuclear Medicine Technology:

Cameron Grant

**Student Leadership Award in Radiation Therapy:** Teryn Nelson

**Student Research Award** 

"Natural Alternatives as Oral Contrast Agents for MRI": Angela Nowlan, Eric Grehan, Lauren Smith, Sara Armani, Serena Morrill, Claire Roper

### **Technologist awards**

**George C. Hall:** Wendy Read, MRT(T)

**Herbert M Welch Memorial Award:** 

Francoise Ternovoy, MRT(R)

Professional Excellence in Leadership Award:

Jaylene Watson, MRT(R)

**Professional Excellence in Patient** 

Care: Frieda Veld, MRT(R)

**Excellence in Professional Collaboration:** Katie Kaminski,
MRT(R), Christina Paterson, DMS,
Michelle Benoit, MRT(R)

**Joan Graham Award:** Linda Wollenberg, MRT(R)

**Tokens of Appreciation** 

Kelly Sampson, MRT(T) Council President

Jennifer DiNucci, MRT(MR)
Council Member

Wendy Read, MRT(T)
Nominating Committee Chair

### **Stakeholder Collaboration**

The College seeks and seizes opportunities to collaborate with stakeholders, the public, government, regulators, academia, employers and associations.

Alberta Federation of Regulated Health Professions (AFRHP)

- Executive
- Complaints Director Working Group
- Continuing Competence Interest Group
- Hearings Director Interest Group
- Registration Interest Group

Alberta Health

Alberta Ombudsman

Alliance of Medical Radiation Technologists Regulators of Canada

Canadian Association of Electroneurophysiology Technologists



We developed an annual internal report to give Council information on operational compliance with our purpose of protecting the public.

Canadian Association of Medical Radiation Technologists

Canadian Board of Registration of Electroencephalograph Technologists

MRT National Network

**NAIT Advisory** 

Office of the Information and Privacy Commissioner

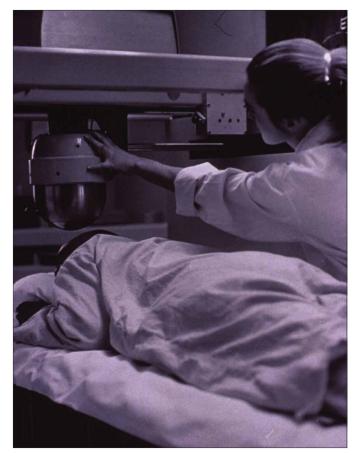
Provincial Diagnostic Imaging Advisory

SAIT Advisory

Sonography Canada

University of Alberta Radiation Therapy Program Advisory





### **Independent Auditor's Report**

# To the Members 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, 2019, 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, 2019, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

#### 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 the 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 those 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 Canadian accounting standards for not-for-profit organizations, 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.

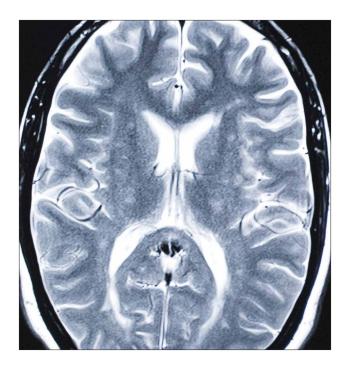
In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or 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.

# RSM Alberta LLP

Edmonton, Alberta March 13, 2020 Chartered Professional Accountants

# **Statement of Financial Position**

### **September 30, 2019**

	2019	2018
ASSETS		
CURRENT		
Cash	\$ 401,531	\$ 205,485
Restricted cash and investments (Note 3)	666,992	633,915
Accounts receivable	21,555	31,838
Prepaid expenses	24,427	24,309
	1,114,505	895,547
LONG-TERM RESTRICTED INVESTMENTS (Note 3)	755,303	659,274
LONG-TERM INVESTMENTS (Note 4)	16,890	60,015
TANGIBLE CAPITAL ASSETS (Note 5)	23,824	19,719
	<b>\$ 1,910,522</b>	\$ 1,634,555
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 42,360	\$ 17,410
Deposits	1,300	1,300
Deferred contributions (Note 6)	305,354	302,307
	349,014	321,017
NET ASSETS		
Invested in tangible capital assets	23,824	19,719
Internally restricted (Note 7)	1,422,295	1,293,189
Unrestricted	115,389	630
	1,561,508	1,313,538
	<b>\$ 1,910,522</b>	\$ 1,634,555

LEASE COMMITMENTS (Note 9)

APPROVED BY THE COUNCIL

Omer Hussein, MRT(R)

President

Steven DeColle, MRT(MR)

Vice President

# **Statement of Operations**

### Year Ended September 30, 2019

	2019	%	2018	%
REVENUES				
Professional fees	<b>\$ 1,158,803</b>	86.47	\$ 1,139,542	83.93
Professional development of members	98,687	7.36	119,473	8.80
Investment and other income (Note 8)	82,661	6.17	98,651	7.27
	1,340,151	100.00	1,357,666	100.00
EXPENSES				
Human resources	578,364	43.16	608,622	44.83
Operating	304,924	22.75	293,135	21.59
Regulatory functions	102,680	7.66	188,684	13.90
Professional development of members	81,121	6.05	79,964	5.89
Provincial and national affiliations	19,117	1.43	14,558	1.07
Amortization	5,975	0.45	5,971	0.44
	1,092,181	81.50	1,190,934	87.72
EXCESS OF REVENUES OVER EXPENSES	\$ 247,970	18.50	\$ 166,732	12.28

### **Statement of Cash Flows**

### **Year Ended September 30, 2019**

	2019	2018
CASH PROVIDED BY (USED IN):		
OPERATING ACTIVITIES		
Excess of revenues over expenses	\$ 247,970	\$ 166,732
Items not affecting cash:		
Amortization	5,975	5,971
Gain on disposal of short-term investments	(13,933)	(10,150)
Unrealized gain on investments	(26,398)	(15,751)
	213,614	146,802
Changes in non-cash working capital (Note 10)	38,162	(18,444)
	251,776	128,358
INVESTING ACTIVITIES		
Purchase of tangible capital assets	(10,080)	(16,764)
Purchase of investments	(794,872)	(657,588)
Proceeds on disposal of investments	749,222	599,259
	(55,730)	(75,093)
INCREASE IN CASH	196,046	53,265
Cash - beginning of year	205,485	152,220
CASH - END OF YEAR	\$ 401,531	\$ 205,485

# **Statement of Changes in Net Assets**

**Year Ended September 30, 2019** 

			Internally Restricted (Note 7)				7)
	Unrestricted	Invested in Tangible Capital Assets	Member Education Fund		Purpose Initiatives Fund		Professional Conduct Contingency Fund
NET ASSETS - BEGINNING OF YEAR	\$ 630	\$ 19,719	\$ 93,789	\$	80,000	\$	520,000
Excess (deficiency) of revenues over expenses	253,945	(5,975)	_		_		-
Transfers	(129,106)	-	46,106		-		66,000
Invested in tangible capital assets	(10,080)	10,080	-		-		-
NET ASSETS - END OF YEAR	\$ 115,389	\$ 23,824	\$ 139,895	\$	80,000	\$	586,000

	Inter	nally	Restricted (Note			
	Stabilization Fund		Regulatory Risk- Management Fund	Total Internally Restricted	2019	2018
NET ASSETS - BEGINNING OF YEAR	\$ 489,400	\$	110,000	\$ 1,293,189	\$ 1,313,538	\$ 1,146,806
Excess (deficiency) of revenues over expenses	_		_	-	247,970	166,732
Transfers	(49,000)		66,000	129,106	-	_
Invested in tangible capital assets	_		_	_	_	_
NET ASSETS - END OF YEAR	\$ 440,400	\$	176,000	\$ 1,422,295	\$ 1,561,508	\$ 1,313,538

### **Year Ended September 30, 2019**

#### 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 and continually advancing profession.

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 equity funds and bonds which have terms that range up to 10 years from the date of acquisition for purposes as described in Note 7.

#### Short-term and long-term investments

Short-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. Unrealized gains or losses on remeasurement are recognized in the statement of operations. Short-term investments also consists of fixed income investments with a maturity date of less than one year.

Long-term investments consists of fixed income investments with a maturity date of more than one year.

#### 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
Telephone equipment 5 years
Database 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.

#### 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.

#### 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 of Financial Instruments

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.

### **Year Ended September 30, 2019**

# 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

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 short-term and 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, restricted cash and accounts receivable.

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

#### **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. Significant estimates included in these financial statements are the valuation of accounts receivable, the estimated useful life of tangible capital assets for the purpose of calculating amortization and accrued liabilities. Actual results could differ from these estimates.

#### 3. RESTRICTED CASH AND INVESTMENTS

Restricted cash and investments is comprised of the following:

	2019	2018
Current Restricted Cash and Investments		
Restricted cash	\$ 61,318	\$ 129,734
Equity funds	605,674	504,181
	666,992	633,915
Long-Term Restricted Investments		
Bonds bearing interest from 1.50% per annum to 3.70% per annum maturing between December 2020 and December 2028	755,303	_
Bonds bearing interest from 1.50% per annum to 3.70% per annum maturing between December 2020 and June 2027	_	659,274
	\$ 1,422,295	\$ 1,293,189

Restricted cash has been designated for specific programs as described in Note 7.

#### 4. LONG-TERM INVESTMENTS

	2019	2018
Pands at amortized sect		
Bonds, at amortized cost,		
bearing interest from		
1.50% per annum		
to 3.70% per annum		
maturing between		
December 2020 and		
June 2027	\$ 16,890 \$	60,015

### **Year Ended September 30, 2019**

#### 5. TANGIBLE CAPITAL ASSETS

	Cost	Accumulated amortization	2019 Net book value	2018 Net book value
Furniture and fixtures	\$ 88,204	\$ 85,351	\$ 2,853	\$ 4,203
Computer equipment	63,073	52,621	10,452	14,782
Telephone equipment	17,923	7,404	10,519	734
Database	91,277	91,277	_	_
Leasehold improvements	13,869	13,869	_	
	\$ 274,346	\$ 250,522	\$ 23,824	\$ 19,719

#### 6. DEFERRED CONTRIBUTIONS

Deferred contributions represent contributions received for a specific purpose which have not been expended at year end.

	2018	Contributions received	Revenue recognized	2019
Professional fees	\$ 302,307	\$ 1,161,850	\$ 1,158,803	\$ 305,354

#### 7. INTERNALLY RESTRICTED NET ASSETS

#### **Member Education Fund**

The Member Education Fund, formerly established as the Provincial Conference Fund, will be used for future member education expenditures.

### **Purpose Initiatives Fund**

The Purpose Initiatives Fund was established to provide for special projects undertaken to support and expand on issues related to the 'Purpose' developed by the Council and described in Council policy.

### **Professional Conduct Contingency Fund**

The Professional Conduct Contingency Fund was established to provide for unexpected legal and administrative costs arising from professional conduct disciplinary matters.

### **Stabilization Fund**

The Stabilization Fund was established to provide for unexpected costs relating to maintaining the stability and viability of the College.

### **Regulatory Risk-Management Fund**

The Regulatory Risk-Management Fund was established to provide for unexpected costs of ensuring the College's compliance with the Health Professions Act and the Medical Diagnostic and Therapeutic Technologists Profession Regulation.

#### 8. INVESTMENT AND OTHER INCOME

	2019	2018
Unrealized gain on investments	\$ 26,398	\$ 15,751
Interest and dividends	23,067	17,503
Rental	15,600	6,844
Gain on disposal of short-term investments	13,933	10,150
Other	3,163	5,076
Investigation recovery	500	43,327
	\$ 82,661	\$ 98,651

### Year Ended September 30, 2019

#### 9. LEASE COMMITMENTS

The College is committed under operating leases for the rental of the Edmonton office and various office equipment. The operating leases expire September 2022 and January 2021 respectively.

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

2020	\$ 67,680
2021	66,941
2022	66,572
	\$ 201,193

# 10. NET CHANGES IN NON-CASH WORKING CAPITAL ITEMS

	2019	2018
Accounts receivable	\$ 10,283	\$ 4,986
Prepaid expenses	(118)	(5,427)
Accounts payable and accrued liabilities	24,950	(23,041)
Deposits	_	1,300
Deferred contributions	3,047	3,738
	\$ 38,162	\$ (18,444)





#### 11. RISK MANAGEMENT

The College's financial instruments consist of cash, restricted cash, short-term investments, accounts receivable, long term-investments, accounts payable and accrued liabilities.

### (a) 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.

#### (b) 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 the financial liabilities. It is management's opinion that there is no significant liquidity risks as of September 30, 2019.

#### (c) 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.

#### (d) Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The College is exposed to interest rate risk arising on its interest bearing assets.



### **Volunteers**

Volunteers bring a diversity of experience, skill and inspiration to the College. Thanks for your reliable and unwavering contributions.

Stacey Adams, MRT(R) Linda Alaeddine, MRT(R) Kelsey Antoniuk, MRT(MR) Gail Astle, MRT(R) Laura-Ann Aube, MRT(R) Joanne Austen, MRT(R) Nancy Babineau, MRT(R) Tunde Bodi, MRT(R) Joy Boldt, ENP Jennifer Brown, MRT(R) David Buehler, MRT(T) Terence Bunce Marlene Chambers, MRT(R) Jessica Cherwick, ENP Jeff Christenson, MRT(R) Brian Chwyl, MRT(T) Steven DeColle, MRT(MR) Amanda Dion, MRT(MR) Oleksandra Dobrotvorska. MRT(R) Melinda Dolhan, MRT(R) Nadia Dube, MRT(R) Katarzyna Dudycz, MRT(R)

Janelle Duquette, MRT(T)

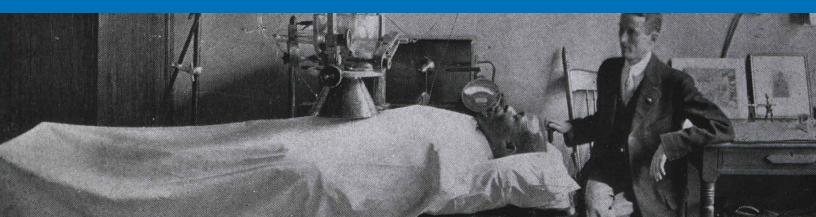
Raegan Ells, MRT(R) Mariya Flaman, MRT(R) Anastasia Gasheva, MRT(R) Heather Gaunt, MRT(T) Caitlin Gormley, MRT (R) Gillian Graham, MRT(T) Holly Grant, MRT(R) Sherry Gulayets, MRT(R) Lori Headington, MRT(R) Patty Hermanutz, MRT(R) Mary Claire Hetesi, MRT(R) Arlene Holland, MRT(R) Omer Hussein, MRT(R) Amanda Jacques, MRT(T) Krysta Jenkins, MRT(R) Natalia Jokovski John Jossa Shirley Kelemen, MRT(NM) Devon Klein, MRT(R) Natasha Konjolka, MRT(R) Teela Kowalchuk, MRT(R) Abbi Langedahl, MRT(R) Samie Le

Jason Livingstone, MRT(R) Nikolay Lopatik, MRT(R) Lisa Lovean, MRT(R) Carmen Lowry, MRT(R) Michelle Luong, MRT(NM) Amanda McCrea, MRT(MR) Susan McGregor, ENP Christy McIntyre, MRT(NM) Gina McRae, MRT(R) Fiona Mitchell, MRT(T) Bano Mughal, ENP Darren Oczkowski, MRT(MR) Linda O'Hara, MRT(R) Wanda Olson, MRT(R) Cynthia Palmaria, MRT(T) Jennifer Petrohay, MRT(NM) Jodie Piercey, MRT(NM) Michael Piva, MRT(T) Louise Rainey, MRT(NM) Wendy Read, MRT(T) Lisa Roorda, MRT(MR) Jatinder Sahota, MRT(R) Kelly Sampson, MRT(T)

Angie Sarnelli, ENP
Matthew Scott, MRT(T)
Martin Sherriff, MRT(MR)
Wilma Slenders
Jade Stadelman, MRT(R)
Cristene van Schagen, MRT(R)
Lamees Wahab, MRT(NM)
Krystal Wall, MRT(R)
Laurie Walline, MRT(NM)
Jaylene Watson, MRT(R)
Leanne Wurban
Leane Young, MRT(R)

### **DMS Advisory**

Teresa Goldsack, MRT(R)
Helene Hamilton
Mona Hoekstra
Ellen Johnstone, MRT(R)
Shane Kessel
Denise MacIver
Victoria Sarban
Lorrie Scherer
Thomas Strain





The Alberta College of Medical Diagnostic and Therapeutic Technologists exists so that the public is assured of receiving safe, competent and ethical diagnostic and therapeutic care by a regulated and continually advancing profession.

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