

2022 ANNUAL **REPORT**



Mission Statement

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 regulated professionals.

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Guiding Values

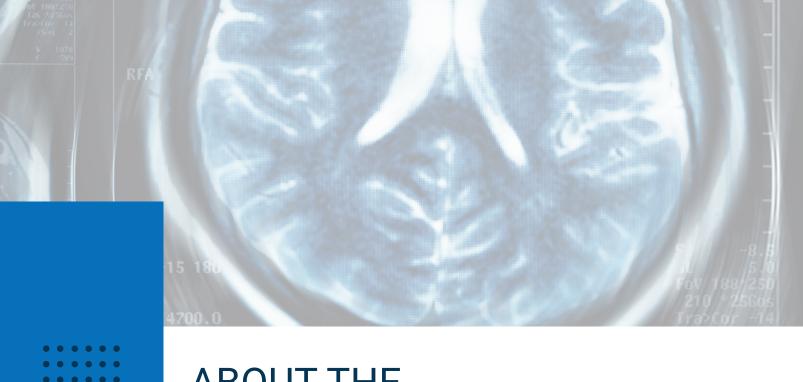
Integrity: We act with respect, fairness and honesty.

Accountability: We are responsible for our decisions and actions.

Transparency: We build a culture of trust by being open and clear in our processes, decisions and actions.

Professionalism: We establish and maintain standards to ensure that the practice of our members upholds the trust of the public in the profession.

Collaboration: We foster relationships and consider the perspective of all stakeholders.



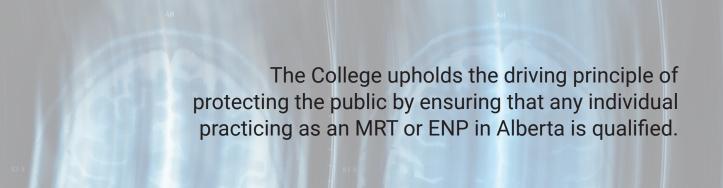
ABOUT THE COLLEGE

The Alberta College of Medical Diagnostic and Therapeutic Technologists (the College) is a regulatory body established under Alberta's Health Professions Act (HPA) to protect the public.

The College regulates five distinct professions under two umbrella groups: medical radiation technologists (MRTs) and electroneurophysiology technologists (ENPs). The College will also regulate Alberta's diagnostic medical sonographers (DMSs) when Alberta amends the Medical Diagnostic and Therapeutic Technologists Profession Regulation (the Regulation) to reflect the changes made to the HPA in 2016.

The foundation of our work is ensuring patient safety. To ensure this, the College provides regulatory oversight and guides registrants in meeting their accountability for providing safe, competent and ethical care.

The College is governed by a Council composed of regulated members of the College and members of the public appointed by the provincial government. The Council selects the Registrar and CEO who manages the organization's staff and operations.



Professions we regulate

Medical radiation technology (MRT) includes four specialties:

- 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.

Electroneurophysiology technology (ENP) includes one specialty:

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 sonography will become a regulated health profession in Alberta once the Regulation has been amended to reflect the changes made to the HPA in 2016. Diagnostic medical sonographers perform imaging procedures including general, obstetrical, cardiac, vascular and musculoskeletal imaging.

Our role

As a regulator, we ensure members provide safe, competent, and ethical diagnostic and therapeutic care to Albertans by:

- · Administering Alberta healthcare legislation, including the HPA and the Regulation.
- Approving programs of study, education courses and certification exams for the purposes of registration requirements.
- Registering only MRTs and ENPs who meet our education, training and competency requirements.
- Requiring annual practice permit renewal.
- Setting and enforcing practice and conduct standards.
- Administering a mandatory continuing competence program.
- Maintaining a website with a live public register so that patients can verify their practitioner's registration status in real time.
- Addressing complaints about our members' professional conduct.
- Providing expertise and direction on members' practice as well as on regulatory and health policy.
- Helping members achieve regulatory requirements by providing professional development opportunities and tools to help them interpret and apply the College's key foundational documents.

MESSAGE FROM THE **LEADERSHIP**

The only consistency in healthcare is change.

We first want to acknowledge and appreciate the professionals who deliver diagnostic and therapeutic services to Albertans including radiological technology, electroneurophysiological technology, magnetic resonance technology, radiation therapy, and nuclear medicine technology. What you've endured over the last few years has been remarkable, and we commend your ability to educate and adapt to better serve the public.

Change is also the hallmark of the College's work in recent years, with legislation continuing to drive projects at the highest level.

The Health Statutes Amendment Act, 2020 (No. 2) (aka Bill 46) required significant adjustments to our foundational documents. The Act refined the College's focus to regulatory work only and prohibited it from carrying out association-oriented functions. For example, an update was made to the College's Bylaws to prepare for the next phase of Bill 46's implementation, which required the development of new or amended college regulations, standards of practice, and bylaws.

In 2023, regulatory requirements on Restricted Activities and the framework surrounding the Continuing Competence Program will be moved from the profession's Regulation into our Standards of Practice. While not introducing new registrant requirements, it will allow the government and the College to make future updates more quickly and easily.

Due to the same Act, the College's Branches focused on education and networking were dissolved in July as they fell out of the scope of a regulator. We greatly appreciate the work of the volunteers and organizers over the many years the Branches operated. May their work continue to benefit those who participated.

Due to the dissolution of Branches, new regulatory education content was developed to meet the registrant's needs, focusing on online accessibility and applicability. Four Learning Modules were released on crucial topics: Patient Consent, Social Media and Professionalism, Professional Communication, and Professional Boundaries. The virtual, twice-yearly Regulatory Education Symposiums continued to grow in attendance with much praise for its subject-matter experts and relevant local presenters.

New work began to meet the requirements of the Health Professions (Protecting Women and Girls) Amendment Act, 2022 (Bill 10) regarding female genital mutilation (FGM). FGM, or female circumcision, involves the illegal practice of partial or complete removal of external female genitalia for non-medical reasons. Health regulatory colleges are required to implement new Standards of Practice to remove health professionals from practice who are convicted of facilitating, offering, or performing FGM. There are also requirements regarding education for registrants to better support those who may have undergone FGM.

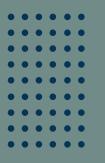
As for College leadership, Chair Omer Hussein released the mantle in November after four diligent years. We are grateful for his leadership during a transformative term that significantly altered the College's activities and leadership composition. Chair Steve DeColle, MRT(MR), and Vice Chair Michael Piva, MRT(T), were appointed in November. Steve served as Vice Chair for four years. Michael was nominated to Council in 2018 and was Chair of the Nominations Committee.

Another significant leadership change was the resignation of Registrar and CEO Pree Tyagi in January 2023. Pree was a forward-thinking, right-touch regulator that moved the College towards substantial advancements in strategic direction, operational management, and governance. The College extends our sincere appreciation for her decade of service and our best wishes for her future career and personal aspirations. At the time of this writing, a search process is being led by a subcommittee of the College's Council, the Registrar and CEO Selection Workgroup.

As you read this report, we hope you acknowledge the substantial work completed in the public interest, and thank, as we do, those involved: Council members, Committee participants, volunteers, staff, and consultants. They have made all this possible.

Steve DeColle, MRT(MR) Council Chair

Pree Tyagi, MBA Registrar and CEO



MEMBERS OF COUNCIL

Registrants



Steve DeColle, MRT(MR) Council Chair (as of Nov. 2022) Vice Chair (until Nov. 2022)



Laurie Walline, MRT(NM)



Michael Piva, MRT(T) Vice Chair (as of Nov. 2022)



Omer Hussein, MRT(R) Council Chair (until Nov. 2022)



Gail Astle, MRT(R)



Cristene van Schagen, MRT(R) (until June 2022)



Mary Buzzing, ENP (as of July 2022)

Public Members



Non-Voting Member

Pree Tyagi, MBA Registrar and CEO



Terence Bunce



John Liu



Samantha Georgsen



Wilma Slenders

A college's council is accountable for upholding the public interest through the responsible governance of the college and its activities.

Public Members' Report

Strain in the health care system impacts all those working within it, and 2022 was no exception.

To the MRTs and ENPs who persist in their professionalism while performing invaluable service to Albertans, we acknowledge and thank you. We admire your resilience in working through the third year of the COVID-19 pandemic and accompanying health system challenges. You make a tremendous impact every day in the lives of your patients with your compassion, skill, and expertise.

We also extend appreciation to those registrants who uphold professional regulatory processes through their volunteerism. The diligent work of those who participate on our many regulated committees and Council improves the profession year after year.

As public members of Council, we're proud to report that the College continues to meet multiple challenges confidently, optimistically, and with an eye to the future.

Work continues on compliance with government regulations to refine the College's focus on public protection, including public representation and competency-based Council appointments. Members with in-depth knowledge, expert skills, and diverse perspectives are invaluable to the decision-making process.

Amendments to the Health Professions Act and other legislation continued to guide significant

projects during the year. Until now, the frameworks for the College's Restricted Activities and Continuing Competence Program were set out in the Regulation. In 2023, those frameworks will be removed from the Regulation and added to our Standards of Practice. As a result, the College is developing and consulting with registrants on a revised Standard 2.3 on Restricted Activities and a new Standard 6.0 on the Continuing Competence Program. Another update to the Bylaws to align with these amendments is also in process.

Bill 46 has helped shape our focus on being the province's regulator of diagnostic and therapeutic professionals. The responsibility of being a regulator has helped us define and hone our mission of ensuring Albertans receive safe, competent, and ethical care by the professionals we regulate. It is a job we are honoured to contribute to alongside our regulated Council Members. We also acknowledge that it would not be possible to carry out our mission without all the hard-working and upstanding professionals that are part of our College, who carry out this mission every day in their workplaces across Alberta.

Looking forward to 2023, we're focused on our continued responsibility of bringing the public's perspective to the decision-making process.

Terence Bunce, Samantha Georgsen, John Liu, and Wilma Slenders



STAKEHOLDERS VOLUNTEERS AND STAFF

Stakeholders

Accreditation Canada Council and Committees

Alberta Federation of Regulated Health Professions:

- Complaints Process Working Group
- **Communications Interest Group**
- Continuing Competence Interest Group
- Hearings Director Interest Group
- Registration Interest Group
- Legislative and Regulatory Affairs Committee
- **Executive Committee**
- Bill 46 Collaboration Committee (Committee led by Alberta Health to prepare for the implementation of Bill 46 and act as a conduit to the AFRHP)

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 Northern Development

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

Special interest workgroups for regulatory excellence and resource efficiencies:

- Alberta College of Combined Laboratory and X-Ray **Technologists**
- College of Respiratory Therapists of Alberta
- College of Medical Laboratory Technologists of Alberta

University of Alberta Radiation Therapy Program Advisory Committee

Making a positive difference in public protection and the practice of the professions regulated through the Alberta College of Medical Diagnostic and Therapeutic Technologists.

Volunteers

Stacey Adams, MRT(R)

Gail Astle, MRT(R)

Tunde Bodi, MRT(R)

Joy Boldt, ENP

David Buehler, MRT(T)

Mary Buzzing, ENP

Nancy Cadman, MRT(R)

Marlene Chambers, MRT(R)

Dalia Chehayeb, ENP

Jeff Christenson, MRT(R)

Robynn Corkish, MRT(MR)

Ayman Darwish, MRT(R)(MR)

Steven DeColle, MRT(MR)

Oleksandra Dobrotvorska,

MRT(R)

Melinda Dolhan, MRT(R)

Nadia Dube, MRT(R)

Janelle Duquette, MRT(T)

Raegan Ells, MRT(R)

Patricia Feuchter, MRT(MR)

Caitlin Gormley, MRT (R)

Gillian Graham, MRT(T)

Lori Headington, MRT(R)

Omer Hussein, MRT(R)

Natasha Konjolka, MRT (R)

Abbi Langedahl, MRT(R)

Jason Livingstone, MRT(R)

Nikolay Lopatik, MRT(R)

Carmen Lowry, MRT(R)

Michelle Luong, MRT(NM)

Anastasia Machinski, MRT(R)

Susan McGregor, ENP

Colleen McHugh, MRT(R)

Christy McIntyre, MRT(NM)

Bano Mughal, ENP

Cynthia Palmaria, MRT(T)

Jodie Piercey, MRT(NM)

Michael Piva, MRT(T)

Louise Rainey, MRT(NM)

Lisa Roorda, MRT(MR)

Jatinder Sahota, MRT(R)

Matthew Scott, MRT(T)

Martin Sherriff, MRT(MR)

Alexandra Sowrey, MRT(R)

Jade Stadelman, MRT(R)

Adwait Trivedi, MRT(NM)

Cristene van Schagen,

MRT(R)

Laurie Walline, MRT(NM)

Jaylene Watson, MRT(R)

College staff

Pree Tyagi, MBA Registrar and CEO; **Complaints Director**

Judy Clarke, RDH, BScDH (as of Mar. 2022)

Director, Registration;

Privacy Officer

Ugie Ifesi, MHSc, MRT(NM)

(until Mar. 2022)

Director, Policy and Practice;

Privacy Officer

Linda O'Hara, MRT(R)

Director, Education and Competence

Carolyn Black (as of Sept. 2022)

Manager, Communications

Rahul Das

(as of Apr. 2022)

Regulatory Associate

Adrienne Hislop

Manager, Corporate Services;

Hearings Director

Katie Patterson

(until Aug. 2022)

Communications Officer

Naadiya Rauf

(until May 2022)

Administrative and Registration

Associate

Michelle Wolf

Manager, Registration and

Complaints



Responding to Bill 46

Amendments to the Health Professions Act (HPA) introduced by Bill 46, the Health Statutes Amendment Act, 2020 (No. 2), require that the College only carry out professional regulatory duties in the public interest and prohibit the College from carrying out association and member services functions. The College took many steps in 2022 to comply with this new legislation:

- Branches were dissolved as of July 1, 2022.
- Associate membership was discontinued on January 1, 2022. This membership category also includes honorary life membership.
- Developing Standards of Practice regarding Restricted Activities as these regulatory requirements are moving out of the Regulation and into our Standards.
- Updating Standards of Practice regarding the Continuing Competence Program as the program's framework is being removed from Regulation and added to our Standards.

More details about these changes can be found on the College's website (acmdtt.com/bill46). The College will continue to review operations and implement changes related to Bill 46 in 2023.

Responding to Health Professions (Protecting Women and Girls) Amendment Act

The Health Professions (Protecting Women and Girls) Amendment Act, 2022 (formerly Bill 10) better protects the health and safety of women and girls by strengthening existing laws that ban female genital mutilation (FGM). FGM, or female circumcision, involves the partial or complete removal of external female genitalia for non-medical reasons and can cause persistent health issues.

Key to the Act, it amends the HPA to remove health professionals from practice who are convicted of facilitating, offering, or performing FGM. It also requires health profession regulatory colleges to implement new Standards of Practice on education, awareness, prevention, and sensitivity for registrants to better support those who may have undergone FGM. The College is developing this Standard to have in place for the May 2023 deadline.



Council Changes

This marked the first year Council members were not elected but were selected and appointed based on specific attributes and competencies. Appointments based on competencies ensure that Council comprises a diverse group of people with a wide range of expertise and skills, a depth of knowledge, and different perspectives. This methodology clarifies the Council member's role of public service rather than registrant representation. An appointment process also supports succession planning, which is essential to effective governance.

There were some significant changes on Council this year. Chair Omer Hussein, MRT(R), stepped down in November due to other commitments. Omer has held the position since July 2019. Appointed as Chair was Steve DeColle, MRT(MR), and Michael Piva, MRT(T), was appointed Vice Chair. Steve's experience as Vice Chair since 2019 will serve him well in his new role. Michael was nominated to Council in 2018 and was formerly Chair of the Nominations Committee. Both terms end on June 30, 2024.

Council Supports Alberta Associations for MRTs and ENPs

The development of new associations is another result of Bill 46's impact on Alberta's health regulators, where association-oriented activities had to be discontinued. Bill 46 allows for a one-time transfer of funds between the College and associations that would assume this role.

The Council granted \$60,000 in one-time funding to establish two new Alberta associations. The Alberta Medical Radiation Technologist (MRT) Association and the Alberta Society of Electroneurophysiology Technologists (ENPs) plan to support their members by advocating for the profession, continuing education, and associated services. Each association received \$30,000 from College reserves.

Through this funding, the College hopes to assist these new associations towards a sustainable non-profit structure and future success.

Continuing to Adapt Due to COVID-19

Continuing Competence Program requirements for 2021-22 were adjusted again due to the pandemic.

For every month registered, registrants typically must complete the equivalent of two hours of learning. In recognition of time spent learning and updating their skills in a rapidly changing COVID-19 environment, registrants were automatically granted one learning hour per month.

The remaining hour and other CCP requirements remain unchanged, including self-assessment, development of a learning objective, completion of a learning activity, and self-reflection.



Regulatory Education Symposiums

In the second year of hosting Regulatory Education Symposiums, the events continued to evolve to meet registrants' needs. The two free virtual events share how regulation weaves into everyday practice. Symposium sessions are carefully mapped to the College's foundational documents, such as the Standards of Practice and Code of Ethics. They may be used to comply with the registrant's Continuing Competence Program requirements.

From attendee feedback, the May 14 Spring event featured shorter presentations and was attended by 278 people. Topics included interfacility transfers in diagnostic imaging, how medical technologists impact patients and families, intergenerational trauma, and the College's Continuing Competence Program. The post-event survey showed that the presentations were received positively and met learning needs.

Attendance for the October 22 Fall event topped 419. The featured session was a two-hour workshop on 'Diversity and Inclusion' with Michael Bach, CCDP/AP, the founder of the Canadian Centre for Diversity and Inclusion (CCDI) and CEO of CCDI Consulting. Two other sessions were equally popular: 'Patient Fetal and Gonadal Shielding During Diagnostic Imaging Exams' with Andrea Kadar and David Hatch and 'Surveying the Landscape: First Nations, Métis and Inuit Cancer Resources in Radiation Therapy' with Kari Osmar and Tracey Lundstrom.

Learning Modules Boost Understanding

The College continues to commit resources to regulatory education to enhance registrant understanding of how health regulation ties into their everyday practice.

The four Learning Modules released this year are part of a series created in collaboration with three other colleges. The current modules are Patient Consent, Social Media and Professionalism, Professional Communication, and Professional Boundaries. Each module is tied to the College's foundational documents, from the Standards of Practice and Code of Ethics to legislation like the Health Professions Act and Medical Diagnostic and Therapeutic Technologists Profession Regulation. Registrants may claim up to four learning hours per module for their Continuing Competence Program.

College Office Downsized

With the College's office lease expiring, the Council took the opportunity to consider multiple options to best meet the organization's current and future needs. A decision was made to significantly reduce costs by moving to a smaller and appreciatively modern office space. Fortunately, this space was found on the same floor in the current location, thus keeping the same mailing address and eliminating associated expenses. The space has a more efficient floor plan and several multi-use areas to host in-person and virtual meetings. A much-needed modernization in video-conferencing capabilities supports the organization's desire to reduce travel costs and increase Alberta-wide participation in a hybrid environment. The move was completed in late October.

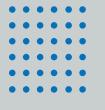


Document Management and Digitization Project

The College moved to online, cloud-based registration in 2021 but maintained thousands of paper registration files from previous years. A project to digitize these files to align with a paper-light office philosophy and to facilitate a more efficient office relocation was completed in mid-2022.

Treatment and Counselling Fund Established

Council established a Treatment and Counselling Fund to meet the legislated requirements of supporting patients who have experienced sexual abuse or sexual misconduct by a registrant.



REGISTRATION STATISTICS

Registrants	2021	2022
Single specialty		
Radiological technology	1657	1725
Radiation therapy	226	236
Nuclear medicine technology	252	269
Magnetic resonance technology	205	261
Electroneurophysiology technology	49	50
Total registrants with single specialty	2389	2541
Multiple specialties		
Radiological/magnetic resonance	32	28
Nuclear medicine/magnetic resonance	7	8
Radiation therapy/magnetic resonance	0	0
Radiological/magnetic resonance/ nuclear medicine	1	1
Total registrants with multiple specialties	40	37
Total registrants on the courtesy register	0	0
Total practice permits renewed	2409	2509
Total practice permits cancelled/ resigned	161	178

Practice permits with conditions	2021	2022
Ictal SPECT injection	11	11
CT and contrast media	111	119
Intraoperative monitoring	6	9
Needle authorization	1	1
Venipuncture	607	642
Breast ultrasound	36	34
Automated breast ultrasound	27	36
Bladder ultrasound	30	30
Prostate ultrasound	6	5
MR in radiation therapy (CCI)	1	4
Quantitative CT	3	2
Medication administration	561	592
Enhanced GI fluoroscopy	19	19
Total practice permits with enhancements	1419	1504
Total practice permits with restrictions	6	6

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 renew their registration on an annual basis.

	Applic	ations	Regist	rations
	2021	2022	2021	2022
New graduates				
Alberta programs	108	104	108	104
Out of province programs	4	13	4	13
Practitioners from other provinces	24	28	24	28
Internationally educated practitioners	4	18	4	9
Alberta practitioners returning to practice	104	101	104	101
Total applications and registrations	244	264	244	255

Non-regulated members	2021	2022
Single specialty		
Radiological technology	122	55
Radiation therapy	15	31
Nuclear medicine technology	20	1
Magnetic resonance technology	15	15
Electroneurophysiology technology	2	0
Total non-regulated members with single specialty	174	102
Total non-regulated members with multiple specialties	1	0
Total non-regulated members	175	102



Registration Committee Report

The Registration Committee is a statutory committee consisting of registrants which makes decisions on registration applications referred from the Registrar.

In 2022, the committee met nine times to assess applications as follows:

- 1 application for registration was denied.
- 17 applications were asked to show successful completion of other requirements, such as proof of language proficiency or the entry-to-practice exam.

Application Processing Time

The Registration Committee provides registration decisions within a minimum of two weeks and a maximum of 13 weeks from the time a completed application is received.

This time frame is affected primarily by the time it takes to receive all necessary documentation to consider an application complete.

Completed applications are reviewed at the next available Registration Committee meeting.

Every effort is made to accommodate applicant requests to expedite the process.



Country of qualifying education (number of internationally trained applicants)

Philippines (5)

United States of America (4)

South Africa (2)

United Kingdom (2)

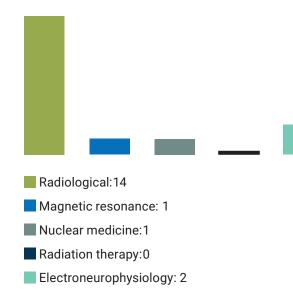
Hong Kong, the People's Republic of China (1)

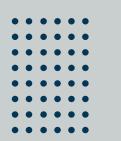
India (1)

Israel (1)

New Zealand (1)

United Arab Emirates (1)





Committee Members

Martin Sherriff, MRT(MR), Chair

Abbi Langedahl, MRT(R), Vice Chair

Stacey Adams, MRT(R)

Nancy Cadman, MRT(R)

Janelle Duquette, MRT(T)

Patricia Feuchter, MRT(MR)

Nikolay Lopatik, MRT(R)

Michelle Luong, MRT(NM)

Susan McGregor, ENP

Cynthia Palmaria, MRT(T)

Louise Rainey, MRT(NM)

DIAGNOSTIC MEDICAL SONOGRAPHERS



The College continues to prepare for the coming regulation of Alberta's thousands of Diagnostic Medical Sonographers (DMSs). DMSs perform imaging procedures, including general, obstetrical, cardiac, vascular, and musculoskeletal imaging.

Diagnostic medical sonography will become a regulated health profession in Alberta when the Medical Diagnostic and Therapeutic Technologists Profession Regulation (the Regulation) is amended by the Alberta government to reflect the changes made to the HPA in 2016 to include diagnostic medical sonographers (DMSs) as part of the College.

A voluntary Roster of about 1000 Alberta Diagnostic Medical Sonographers continues to be maintained by the College. The roster is intended to simplify the notification process and eventual registration of DMSs.

Complaints and Concerns

The HPA provides that DMSs will be regulated through the College after Alberta Health has amended the College's Regulation.

Until that point, the occupation remains unregulated and, therefore, the current regulatory framework does not allow the College to address complaints about them.

When complaints are received, complainants and their legal counsel are advised accordingly.



Two complaints against DMSs were received this year and indicated concerns regarding facility oversight rather than regarding the sonographer's behaviour.

Path to Regulation Sonographers made a decision to pursue regulation through the College.

Alberta Health declared its support of the regulation of DMSs through the College.

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 Regulation to Alberta Health.

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



CONTINUING COMPETENCE

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

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

Program Requirements

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

- Self-Assessment of Practice
- Personal Learning Plan
- CCP activity records outlining and reflecting on a minimum number of hours of learning

Pandemic Impacts

Registrants are typically required to complete two hours of learning for every month in which they are registered in the general register. Due to the COVID-19 pandemic, that requirement was adjusted for the 2021-22 CCP cycle, as it was in the previous cycle. The adjustment reduced the requirement to one hour of learning for every month they held general registration during the cycle for a minimum of 12 required hours. Registrants were then automatically granted one more hour for each month of registration in recognition of the time they spent managing, adapting, and updating their skills during the COVID-19 pandemic.

The other requirements of the CCP remained unchanged for 2021-22. Registrants use a selfassessment 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. Registrants must also document their learning activities to include a self-reflection on how the activity has or will impact their professional practice.

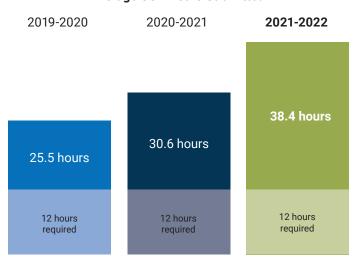
Compliance

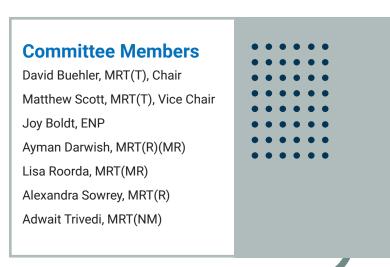
The Competence Committee ensures that registrants comply with the CCP requirements and monitor CCP components to accurately reflect current needs to enhance the provision of professional services.

The CCP Audit takes place every October where the committee audits a random selection of registrants' reflective practice reviews. The 2022 CCP Audit was also affected by the COVID-19 pandemic through a decision to select fewer registrants than usual.

		CCP Cycle				
	Ooi Oyele					
	2019-2020	2020-2021	2021-2022			
	Pandemic im	pacted cycles				
Average CCP hours submitted	25.5	30.6	38.4			
CCP participants	2397	2432	2509			
Percentage (%) selected for audit	2%	2%	4%			
Audits directed from Registrar/Competence Committee	0	0	1			
Selected for audit	45	55	100			
Cancelled audits	2	6	3			
Audited	43	49	98			
Successful initial audit	39	45	53			
Requiring remedial work	4	4	44			
Forwarded to Complaints Director for non-compliance	0	0	0			

Average CCP Hours Submitted







PROFESSIONAL CONDUCT

Professional Conduct and Complaints

The College receives and manages complaints against its registrants as part of its mandate to protect the public under the Health Professions Act (HPA). To fulfil this mandate, the HPA grants regulatory colleges 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. The College follows the principles of procedural fairness in its 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

/
9
16

Complaints dismissed		6		
Complaints closed		4		
Complaints referred to hearings		1*		
Hearings open to the public	0			
Hearings closed to the public	1*			
Complaints appealed				
Complaints still open				
Open complaints	4			
Managed under Section 118, incapacity assessments	1			
Complaints addressed through an Alternative Complaints Resolution (ACR) process				
Total		16		



*Complaint referred to a hearing

At the time of this Annual Report's development, a hearing is under way for a registrant accused of sexual abuse.

This hearing was closed to the public on the basis of sections 78(1)(a)(iii) and 78(1)(a)(iv) of the HPA.

Patient Relations Program

As per the HPA, the College must have a Patient Relations Program that includes measures for preventing and addressing sexual abuse and sexual misconduct by registrants towards their patients.

The Patient Relations Program supports patients who have experienced sexual abuse or sexual misconduct by registrants by providing funding for treatment or counselling.

The Patient Relations Program includes:

- Education for registrants on prevention of sexual abuse and sexual misconduct
- · Training for College staff on sexual abuse and sexual misconduct
- Assistance in directing individuals to appropriate resources
- Funding for treatment for those patients that have experienced sexual abuse or sexual misconduct

For a patient to be eligible for funding:

- A complaint must be made regarding a registrant of the College, and must meet the definition of sexual abuse or sexual misconduct.
- They must be 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	1	0	1
Funds dispersed	\$4,235.44	\$0	\$4,235.44



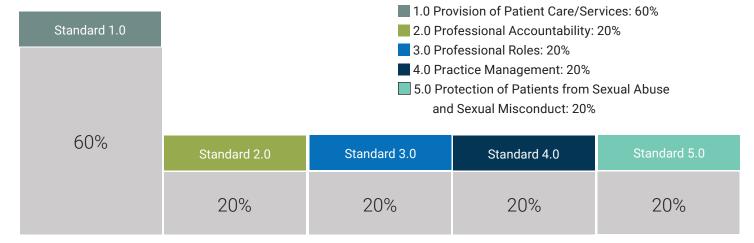
Complaints against Diagnostic Medical Sonographers

The HPA provides that DMSs will be regulated through the College after Alberta Health has amended the College's regulations. Until that point, the occupation remains unregulated and, therefore, the current regulatory framework does not allow the College to address complaints about them.

When complaints are received, complainants and their legal counsel are advised accordingly

Two complaints against DMSs were received this year and indicated concerns regarding facility oversight rather than regarding the sonographer's behaviour.

Complaints by Standard of Practice*



^{*}A complaint may involve more than one Standard of Practice.



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, 2022, 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, 2022, 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.

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 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 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.

RSM Canada LLP

Chartered Professional Accountants Edmonton, Alberta March 1, 2023

Statement of Financial Position – September 30, 2022

	2022	2021
ASSETS		
CURRENT		
Cash	\$ 502,635	\$ 513,764
Restricted cash and investments (Note 3)	832,191	783,963
Accounts receivable	323	1,729
Prepaid expenses	79,003	29,415
	1,414,152	1,328,871
LONG-TERM RESTRICTED INVESTMENTS (Note 3)	829,241	760,634
LONG-TERM INVESTMENTS (Note 3)	-	67,949
TANGIBLE CAPITAL ASSETS (Note 4)	8,761	16,004
INTANGIBLE CAPITAL ASSET (Note 5)	24,735	50,326
	\$ 2,276,889	\$ 2,223,784
LIABILITIES AND NET ASSETS		
CURRENT		
Accounts payable and accrued liabilities	\$ 28,183	\$ 22,474
Deposits	-	775
Unearned revenues (Note 6)	342,096	305,529
	370,279	328,778
NET ASSETS		
Invested in tangible and intangible capital assets	33,496	66,330
Internally restricted (Note 7)	1,661,432	1,737,532
Unrestricted	211,682	91,144
	1,906,610	1,895,006
	\$ 2,276,889	\$ 2,223,784

LEASE COMMITMENTS (Note 9)

APPROVED BY THE COUNCIL

Steven DeColle, MRT(MR)

Chair

Michael Piva, MRT(T)

Vice Chair



Statement of Operations – Year Ended September 30, 2022

	2022	%	2021	%
REVENUES				
Professional fees	\$ 1,203,040	99.89	\$ 1,171,103	82.99
Investment and other income (Note 8)	1,267	0.11	177,831	12.60
Conduct hearing recoveries	-	-	62,147	4.40
	1,204,307	100.00	1,411,081	99.99
EXPENSES				
Human resources	674,185	55.98	658,914	46.70
Operating	344,863	28.64	328,311	23.27
Regulatory functions	123,215	10.23	110,510	7.83
Amortization of intangible capital assets	25,591	2.12	19,620	1.39
Provincial and national affiliations	17,661	1.47	23,047	1.63
Amortization of tangible capital assets	8,498	0.71	9,099	0.64
Conduct hearing costs	1,190	0.10	_	-
Bad debts	-	_	68,644	4.86
	1,195,203	99.25	1,218,145	86.32
EXCESS OF REVENUES OVER EXPENSES FROM OPERATIONS	9,104	0.75	192,936	13.67
OTHER INCOME				
Gain on disposal of tangible capital assets	2,500	0.21		
EXCESS OF REVENUES OVER EXPENSES	\$ 11,604	0.96	\$ 192,936	13.67

Statement of Changes in Net Assets - Year Ended September 30, 2022

						Internally	y Res	stricted (Note 7)
			Unrestricted		Invested in Tangible and Intangible Capital Assets	Treatment and Counselling Fund		Professional Conduct Contingency Fund
NET ASSETS - BEGINNING OF YEAR		\$	91,144	\$	66,330	\$ 112,500	\$	678,936
Excess (deficiency) of revenues over expenses			45,693		(34,089)	_		-
Utilization of stabilization fund			76,100		-	-		_
Invested in tangible and intangible capital assets			(1,255)		1,255	-		-
NET ASSETS - END OF YEAR		\$	211,682	\$	33,496	\$ 112,500	\$	678,936
	Inte	rnally	y Restricted (Not	e 7)				1
	Stabilization Fund		Regulatory Risk- Management Fund		Total Internally Restricted	2022		2021
NET ASSETS - BEGINNING OF YEAR	\$ 435,096	\$	511,000	\$		\$	\$	1,702,070
Excess (deficiency) of revenues over expenses	_		-		-	11,604		192,936
Utilization of stabilization fund	(76,100)		_		(76,100)	_		_
Invested in tangible and intangible capital assets	_		-		_	-		-
NET ASSETS - END OF YEAR	\$ 358,996	\$	511,000	\$	1,661,432	\$ 1,906,610	\$	1,895,006

Statement of Cash Flows - Year Ended September 30, 2022

	2022		2021
CASH PROVIDED BY (USED IN):			
OPERATING ACTIVITIES			
Excess of revenues over expenses	\$ 11,604	\$	192,936
Items not affecting cash:			
Amortization of tangible capital assets	8,498		9,099
Amortization of intangible capital assets	25,591		19,620
Gain on disposal of investments	(4,519)		(2,220)
Gain on disposal of tangible capital assets	(2,500)		-
Unrealized loss (gain) on investments	46,586		(135,386)
	85,260		84,049
Changes in non-cash working capital:			
Accounts receivable	1,406		10,885
Prepaid expenses	(49,588)		1,138
Accounts payable and accrued liabilities	5,709		(47,308)
Deposits	(775)		(181)
Unearned revenues	36,567		(4,027)
	(6,681)		(39,493)
	78,579		44,556
INVESTING ACTIVITIES			
Purchase of tangible capital assets	_		(13,305)
Purchase of intangible capital assets	_		(35,821)
Purchase of investments	(89,119)		(126,429)
Proceeds on disposal of investments	74,726		112,332
Proceeds on disposal of tangible capital assets	1,245		-
Reclassification of cash to restricted cash and investments	(13,817)		119,574
	(26,965)		56,351
INCREASE IN CASH	51,614		100,907
Cash - beginning of year	513,764		412,857
CASH - END OF YEAR	\$ 565,378	\$	513,764
CASH CONSISTS OF:			
Cash	\$ 502,635	\$	513,764
Cash transferred to restricted cash and investments	 62,743	-	
	\$ 565,378	\$	513,764

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 and bonds which have terms that range up to 10 years from the date of acquisition for purposes as described in Note 8.

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 straightline basis over the following periods:

Furniture and fixtures 5 years Computer equipment 3 years Telephone equipment 5 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.

Intangible capital asset

The intangible capital asset is comprised of database costs that are being amortized on a straightline basis over their estimated useful life of three years.

When conditions indicate an intangible capital asset is impaired, the carrying value of the intangible capital asset is written down to the asset's fair value or replacement cost. The write down of the intangible 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.

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.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

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.

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, accounts receivable and long-term investments in bonds.

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

The College's financial assets measured at fair value at each balance sheet date include a portfolio of equity investments with quoted shares/units in an active market.

The College accounts for regular purchases and sales of financial assets using trade date accounting.

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:

	2022	2021
Current Restricted Cash and Investments		
Restricted cash	\$ 117,558 \$	40,998
Equity and fixed income funds	714,633	742,965
	832,191	783,963
Long-Term Restricted Investments		
Bonds bearing interest from 1.50% per annum to 3.75% per annum maturing between		
June 2024 and June 2032	829,241	828,583
	\$ 1,661,432 \$	1,612,546

Restricted cash and investments have been designated for specific programs as described in Note 7. Equity funds are recorded at fair value and have an original cost of \$659,504 (2020 - \$584,268).

TANGIBLE CAPITAL ASSETS

	Cost		Accumulated amortization		2022 Net book value		2021 Net book value	
Furniture and fixtures	\$ -	\$	-	\$	-	\$	600	
Computer equipment	77,633		71,455		6,178		10,511	
Telephone equipment	17,923		15,340		2,583		4,893	
	\$ 95,556	\$	86,795	\$	8,761	\$	16,004	

INTANGIBLE CAPITAL ASSET

	Cost	Accumulated amortization	2022 Net book value	2021 Net book value
Database	\$ 76,771	\$ 52,036	\$ 24,735	\$ 50,326

6. UNEARNED REVENUES

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

	2021		Contributions received		Revenue recognized		2022	
Professional fees	\$ 305,529	\$	1,214,225	\$	1,203,040	\$	316,714	
Branch deposits	_		25,382		-		25,382	
	\$ 305,529	\$	1,239,607	\$	1,203,040	\$	342,096	

Due to amendments to the Health Professions Act introduced by Bill 46, the College's branches were dissolved on July 1, 2022. As per College bylaws and branch policy any funds remaining in the branches' accounts upon their dissolution were returned to the College. The Council decided to financially support the requests of the two new provincial associations. More information on this will be published in the College's annual report.

7. INTERNALLY RESTRICTED NET ASSETS

Treatment and Counselling Fund

The Treatment and Counselling Fund was established to meet the legislated requirements of paying for treatment and counselling for patients who have experienced sexual abuse or sexual misconduct by a regulated member.

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 will be used to meet continuing operational expenses in the event of unforeseen business interruptions.

Regulatory Risk-Management Fund

The Regulatory Risk-Management Fund will be used to uphold ACMDTT's regulatory mandate as required by the Government of Alberta.

INVESTMENT AND OTHER INCOME

	2022	2021
Dividends	\$ 44,272	\$ 40,200
Sublease income	13,700	12,200
Gain on disposal of short-term investments	4,519	2,220
Interest	1,347	1,496
Other income	76	_
Advertising	-	2,050
Management fees	(16,061)	(15,721)
Unrealized (loss) gain on investments	(46,586)	135,386
	\$ 1,267	\$ 177,831

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 July 2027 and September 2024, respectively.

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

2023	\$ 79,418
2024	79,240
2025	80,826
2026	80,826
2027	 80,826
	\$ 401,136

10. RISK MANAGEMENT

The College's financial instruments consist of cash, restricted cash, restricted short-term investments, longterm restricted 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, 2022.

(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

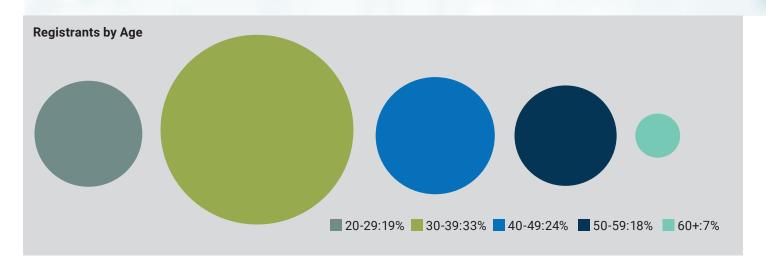
Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. In seeking to minimize the risks from interest rate fluctuations, the College manages exposure through its normal operating and financing activities.

Unless otherwise noted, it is management's opinion that the College is not exposed to significant other price risks arising from these financial instruments.



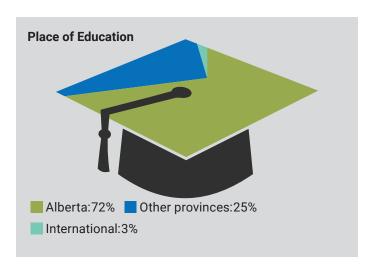
STATISTICS

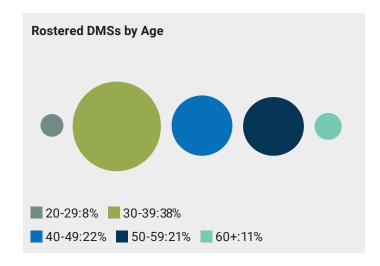




Registrants by Specialty







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 regulated professionals.

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