



Volume 2, Issue 3 - October 2013

COUNCIL'S CHRONICLES

FROM THE PRESIDENT'S PEN

Commitment, innovation, sustainability...these are three of the CMLTA's eight [Core Values](#).

The CMLTA is constantly looking to improve program service delivery. Increasingly, like everywhere else in our world, this involves taking further steps into the electronic age.



Some recent and future enhancements include:

- Email distribution of 2014 MLT Practice Permits and official tax receipts – hard copies will no longer be mailed.
- Continuing Competence Program (CCP) activity logs may be completed online.
- If selected for a 2014 CCP compliance audit, Members can complete the process online and documentation can be scanned and submitted electronically to the College. I have already heard from some Members that feel that the compliance audit is a burden; happily those who have been through an audit almost unanimously say, 'That was not so bad, what was I so worried about?' and now with an online process the compliance audit will be even easier.
- The October strategic planning session of Council will focus discussions around improving two-way communication with regulated Members. It is foreseeable that a large portion of that discussion will include electronic solutions given that Members are geographically dispersed across the province.

[Background information about strategic planning: The CMLTA has an on-going practice of strategic planning in a continuous cycle of quality improvement. It is common for Council to revise the strategic plan every

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NOMINATIONS

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AWARD OF DISTINCTION

DEADLINE: June 1, 2014

[Click here for details](#)

AWARD OF MERIT

DEADLINE: June 1, 2014

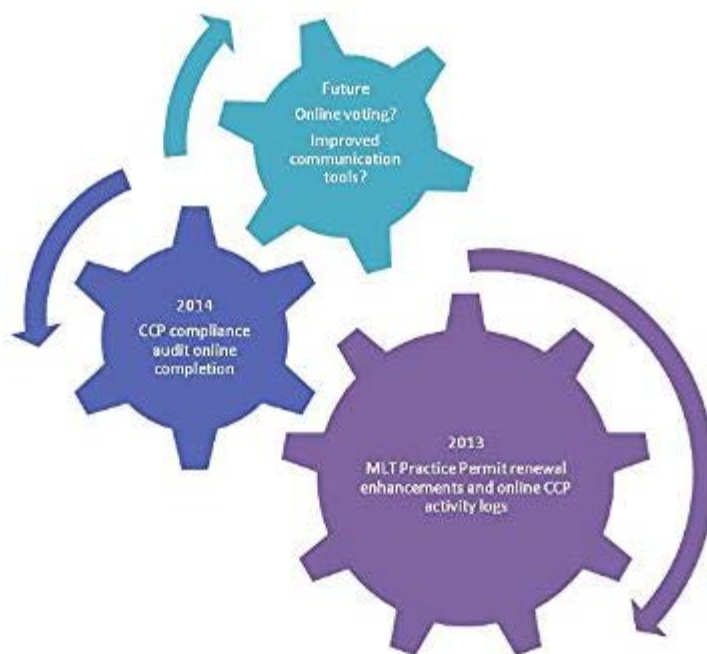
[Click here for details](#)

BURSARY AWARD

DEADLINE: December 31, 2013

three years, but Council also reviews the progress and status of each initiative and tweaks the plan as necessary at each meeting. The CMLTA is completing year two of the current strategic plan and all indications are that many ambitious projects will be completed on time and on budget.]

While legislation may determine the CMLTA's function and programs, the CMLTA Council and staff are always aware that it is CMLTA Members who are most directly affected by those programs. The [Executive Director's Exchange](#) in this issue of *The Commentator* discusses the value proposition for CMLTA Members. The CMLTA continually strives to foster excellence not only in professional practice (as stated in our [mission](#)), but also to foster excellence in the CMLTA's program delivery.



As an aside . . . I would like to discuss the CCP compliance audit for just a moment. We heard some Members at the Annual General Meeting say, "Why does the College audit us? Don't you trust us to be professional?" The CCP compliance audit is mandated by the *Health Professions Act*, so there really is no choice about participating in the compliance audit. But I think the underlying principles are more important than the government mandate. MLTs are a group of people like any other; and this means that we are for the most part, a group of honest, hard working professionals, some of whom occasionally make mistakes or bad decisions. But we probably also have some people within our profession who consciously make bad decisions and do not act as professionals. A compliance audit is not a perfect method to find these people; it is just one tool that is available to regulatory Colleges. Consider this, if you are going for surgery, would you want your surgeon's regulatory College to 'trust' that he is up-to-date on the latest surgical techniques? Or your child's dentist or the RN who is providing palliative care to your mom? I challenge you to view a CCP compliance audit as another opportunity to demonstrate your professionalism, rather than a questioning of your integrity or an inconvenience. And yes, I have been audited!

MEETING HIGHLIGHTS

College Council convened on Saturday, June 22, 2013 for a regularly scheduled Council meeting. The following are highlights from the meeting:

- Approved Bylaw amendments for presentation to regulated Members at the September 28, 2013 Annual General Meeting.
- Archived the Professional Development Certificate Program in recognition of the regulatory-only focus of the College and less than one percent of Members accessing the Program.
- Endorsed the CSMLS position statement *Support for Regulation: Medical Laboratory Assistants (MLAs)*.
- Approved online MLT Practice Permits and tax receipts beginning September 15, 2013 (2014 renewal season).
- Approved online document submission for the Continuing Competence Program compliance audit beginning January 1, 2014.
- Approved the development of a video presentation for public and MLT student access.

College Council convened on Saturday September 14, 2013 for a regularly scheduled Council meeting. The following are highlights from the meeting:

- Approved revisions to the Council finance policies to provide all Councillors with broader financial oversight.
- Discussed pro-rating of annual MLT Practice Permit dues and affirmed current practices (e.g. 50% for initial or reinstating Members applying after July 1 and graduates of MLT training programs applying within four years).
- Supported Public Members of Council to contact Minister of Health to review MLA regulation.
- Endorsed development of an online voting system for 2014.

QUESTIONS TO COUNCIL

Member Question: What type of supervision is required for regulated Members of the College? Is there any supervision requirement for MLT students in the practicum phase of their training? Are there any ramifications if the level of supervision is not adhered to?

College policy specifies the level of supervision required for regulated Members dependent upon the type of MLT Practice Permit issued by the College. The College defines three types of supervision:

- **Direct** supervision is defined as a regulated Member with an appropriate practice permit is **physically present** and available to assist and/or consult.
- **Indirect** supervision **with reasonable access** is defined as a regulated

Member with an appropriate practice permit is **available** for consultation and is able to **return** to the worksite within a reasonable time to assist.

- **Indirect** supervision is defined as a regulated Member with an appropriate practice permit is **available** for consultation.

The College determines the appropriate MLT Practice Permit and the adequate level of supervision as dictated by College policy.

Example #1: An MLT student waiting to challenge the CSMLS certification examination or awaiting examination results is issued an MLT Provisional Practice Permit and must practice under direct supervision until they provide evidence to the College of CSMLS certification.

Example #2: An individual returning to professional practice after a 12 year absence from the profession is issued an MLT Conditional Practice Permit pending the completion of refresher coursework and MLT hours, and must practice under indirect supervision with reasonable access.

Professional liability insurance (PLI) only covers a regulated Member performing tasks as outlined in the CSMLS Competency Profile and practicing under the terms, conditions, and limitations stipulated by her or his MLT Practice Permit. PLI would be void if there is a complaint of unprofessional conduct and the individual is performing tasks outside of the prescribed Competency Profile and/or not abiding by the conditions on her/his MLT Practice Permit.

MLT students in the practicum year of their formal education are not considered regulated Members of the College; therefore, the College does not retain jurisdiction over the professional activities of these individuals. The employer is responsible for MLT students during this phase of their formal training and all risk/liability is assumed by the employer.

Member Question: The College has \$1,000,050 so why does Council not spend this money on an AGM or provide professional development opportunities for Members?

The College had a \$165,000 deficit in 2008 due the unanticipated rise in the number of complaints of unprofessional conduct. As a result of this financial position and the risk and liability it posed for the organization, Council dedicated itself to building both College reserve funds for operational expenses and a conduct contingency fund. As leading practice and as recommended by the auditor, the College targeted to build the operational reserve funds to cover a minimum of six months of operational expenditures (~\$750,000) and a conduct contingency fund in the amount of \$300,000. It has taken five years to build the College financial reserves to this level and achieve financial stability. However, there seems to be the misconception among Members that Council can use these reserve funds for any College program, service, or activity, such as a Professional Development Forum and Annual General Meeting for Members. This is far from the truth and in fact, Council only through a formal motion can allocate operational reserve funds to offset unanticipated operational expenses (e.g. power surge which blows all computers, servers, etc.) and conduct contingency funds to offset

investigation or legal costs attributed to complaints of unprofessional conduct. Council cannot use these reserve funds for any other purpose. Perhaps Members should acknowledge the diligence of Council to volunteer their time to secure the College financial position and the right to self-regulation for MLTs.

Member Question: Since the ASMLT handed over a profitable organization to the ACMLT and this is the former-associations' money, shouldn't it be used for Member services?

The Director of the Health Professions Unit of Alberta Health advised when all former-associations became Colleges under the *Health Professions Act* (HPA), the revenue/assets from one entity simply transferred to the other. This was the expectation of the government. The organizations that chose to operate as a dual College-Association (which the ASMLT did not) had to apply under section 27 of the HPA to the Minister of Health for any accumulated assets to be divided. In reality this was really "moot-point" as the government expected all Colleges to be financially self-sustaining so it was irrelevant who held the money. Alberta Health also advised that the government viewed the ASMLT and all association Members as simply stakeholders and not shareholders, so they were not entitled to any of the revenue/assets of their professional bodies. Although public protection is a government-directed responsibility, it became the professionals' financial burden.

A review of the ASMLT/ACMLT financial records revealed that the Association/College spent some of its unearned revenue (membership dues/fees collected in the fall) in advance of the upcoming membership year for which dues/fees were collected to cover the financial shortfalls. The CMLTA now has substantial financial reserves so it does not spend the unearned revenue in advance of the upcoming membership year, but rather it financially sustains the College over the course of the new registration year. The former would not be a practice supported by accountants or Generally Accepted Auditing Standards (GAAS), but the ASMLT could not pay its bills without doing so. The ASMLT was not considerably profitable and it was the College which started to build substantial reserves on the advisement of the auditor and the practice of other Colleges already under the HPA. The ASMLT had a deficit of \$7,573 in 2001 and capital assets of \$14,511 which ultimately resulted in a transfer of \$6,938 to the ACMLT.

Member Question: The College offered Member services at one time and is now taking away all benefits for regulated Members. What do Members receive for paying annual dues?

The College has articulated to Members the value proposition of a self-regulating body and the benefits regulated Members receive. The most significant privilege of self-regulation is the College is governed by MLTs elected to Council by the Members. In electing colleagues and co-workers to Council, one is not supporting individuals to advance their own self-serving professional interests, but rather a body of MLTs to act in the best interests of the College and to govern in accordance with the *Health Professions Act* and the *Medical Laboratory Technologists Profession*

Regulation. The government also ensures elected MLTs are implementing policy, programs, and services in the best interests of patient safety and public protection by appointing Public Members to Council. The loss of self-regulation is always a risk and if this occurs, not only would the College be governed by individuals who are far-removed from the profession, but it is foreseeable annual MLT Practice Permit dues could increase by a minimum of \$150 in the first year to cover government administrative costs.

Member Question: MLTs are professionals and do not need the College to oversee their continuing competence and professional development. Why is the College spending money on the compliance audit?

The CMLTA must establish and enforce annual mandatory continuing education in the format and structure the government of Alberta has directed. The College cannot simply do away with the Continuing Competence Program (CCP) and the annual compliance audit as the College must report annually to the Minister of Health on the number of Members audited and the compliance demonstrated by Members. Regulated Members should acknowledge Council is legally bound and tasked with a CCP and annual compliance audit, and in an effort to streamline processes and make Member compliance easier, enhancements are added to the existing framework of the program annually. The alternative is Members are bound to an old, out-dated program with no improvements nor expansion of the CCP Competency Profile to incorporate new areas of expertise and practice of regulated Members. It seems to be forgotten in the development of the CCP and Competency Profile that Member feedback was solicited and included in the final program as approved by Alberta Health, and Member feedback is continually incorporated into the program each year. There are some aspects of the CCP the CMLTA simply cannot change, such as the annual self-assessment and development of a Learning Plan for each upcoming registration year; however, there is room for improvement in other areas if Members choose to participate and get involved.

Member Question: Can the College still have an AGM and provide other education and professional development events to Members?

When ASMLT Members voted to become a self-regulated profession thereby creating the ACMLT, there was much debate over whether to become a strictly regulatory body or a combined regulatory College and association. In hindsight, perhaps it would have been an easier transition if the decision had been made 10 years ago to create a regulatory-only College; however, Council and the Members at that time made decisions based on the information they had before them ... just as the current and recent Council Members have been making the difficult decision to pursue a regulatory-only role as the best resolution for the College and for Albertans. If Members are appealing to Council to host and support a Professional Development Forum and AGM (which is not an HPA mandate) they are in effect asking their elected body to act in direct conflict with the legislated mandate of the organization. Member services by necessity will always be the second priority for a combined regulatory College and

professional association and that does not match the passion our Members have expressed for these services. The passion and energy of Members should be focused on the professional organization that currently offers these services - the CSMLS.

College Council welcomes all questions and comments. Please email info@cmlta.org. Responses will be emailed and published.

EXECUTIVE DIRECTOR'S EXCHANGE

What's In It For Me? (Value Proposition)

The CMLTA is often contacted by regulated Members who say "What's in it for me? I do not see the value of paying dues each year as the CMLTA does not offer any Member benefits".

If an individual is expecting the CMLTA to offer an online education course, provide discounted group insurance, or organize a ski trip, one will feel dismissed and cheated . . . and rightfully so! However, the CMLTA does not promote the organization as offering membership services of this nature, but rather only fulfilling its legislated obligations pursuant to the *Health Professions Act* (HPA) to ensure patient safety and public protection. Even with a focus and commitment to safeguard the public at large, the CMLTA provides value to regulated Members which is often overlooked.

By the mere nature of self-regulation, Members of the profession are invested and need to be involved in the CMLTA by engaging in Council and Committee activities. Although the government dictates the general parameters and boundaries of registration, continuing competence, and professional discipline as set out in the HPA, it is MLTs who truly determine how specific programs and services will be implemented and delivered to Members. MLTs are not powerless in this process, but have the capacity to set the future direction of the CMLTA through its mission and vision, strategic initiatives, decision making, and communication efforts to both regulated Members and the general public.

It may be easier to appreciate both the intrinsic and tangible value of the CMLTA if one pictures an environment without it. In the absence of the CMLTA and the enforcement of provincial standards, the following would not exist:

- No minimum entrance to practice requirements, including formalized education and CSMLS certification
- No mandatory continuing education
- No mechanism or authority to report to unprofessional behavior, acts, or omissions
- No standards of practice and moral expectations for the profession
- No protection against frivolous or vexatious complaints

If all of the aforementioned were not present in the workplace, this could translate into an MLT workforce with a number of individuals who are

incompetent, unskilled, unsafe, lacking knowledge of new techniques/methodologies, and potentially unethical . . . daunting propositions laden with risk and liability as MLTs routinely take over bench work for others. Although this may seem a remote possibility as self-regulation currently has a strong foothold in the healthcare setting, like any privilege, self-regulation can be taken away by the government. Furthermore, if MLTs are not formally recognized under the HPA or some other statute as professionals, the status and privileges associated with a recognized profession also would not exist, such as comfortable salary and a reasonable degree of work autonomy.

Even if one cannot see the true value of self-regulation and professional advantage the CMLTA affords MLTs, at the very least they should not diminish the role and impact of the CMLTA on patient safety and the advancement of the profession. If one demeans the CMLTA, they in turn devalue themselves, their colleagues, the profession, and the importance of skilled, safe, and ethical laboratory healthcare services for the general public, including their family and friends.

2014 DUES NOTICE

September 15-October 31: \$560 (early bird discount)

November 1-30: \$610 (regular dues)

December 1-31: \$735 (regular dues plus processing fees)

All voluntary renewals will continue as hard-copy (MLA & Associate = \$160, Retired = \$75)

COMPETENCE AND PROFESSIONAL DEVELOPMENT DIALOGUE

New for 2013, the College has developed an online interactive Continuing Competence Program (CCP) activity log for Members to record the information necessary to validate learning activities used toward the completion of Learning Objectives.

This new format prompts Members to input and save all essential information for each learning activity as reported on a completed Learning Plan. If an individual does not input all information required for a specific learning activity, the program identifies the missing data fields. The online format also allows for the upload of required supporting documentation and attachments if necessary for an identified learning activity. Accordingly, in the event a Member is randomly selected for a CCP compliance audit, the online CCP activity log can be submitted electronically for 2013 and all subsequent years.

Update My CCP Activity Log is available through the secure Member login of the College website.

RENEWAL INFORMATION

You check patient results and verify for accuracy prior to reporting. Extend this same practice to yourself and verify your information entered during your online MLT Practice Permit renewal.

The College has identified several inconsistencies and discrepancies in Member renewal documents which were likely due to Member data entry error. When completing the online 2014 MLT Practice Permit renewal, the College advises you to please review your reported information for accuracy.

PROFESSIONAL DISCIPLINE AND CONDUCT CONSIDERATIONS

The *Health Information Act* and the “Need to Know Principle” by Elaine Fitzgibbon

The *Health Information Act* (HIA) controls how health information is collected, used, and disclosed. It provides individuals with the right to request access to health records in the custody or under the control of custodians, and provides custodians with a framework within which they must conduct the collection, use, and disclosure of health information. As a Medical Laboratory Technologist, you may work for a custodian who grants you access to health information systems to do your job. At the same time you may wonder why there are so many restrictions on how you use health information. If you work for a custodian, you are known as an “affiliate” under the HIA. Affiliates may only use health information in accordance with their duties to the custodian. This means you can only collect, use, or disclose health information when it is essential to do your job and as authorized by your employer.

In an electronic system, accessing or looking up health information is considered a use. For example you should not look up diagnostic results as a favor to relatives and friends.

Patients trust that custodians and their affiliates will keep their health information confidential. Relationships with health care providers are built on the assurance that the information will only be used by or disclosed to authorized persons or to others with the patient’s permission.

Monitoring of your accesses to electronic health records is routine and audits of Netcare and lab systems are carried out on a regular basis. Individuals who suspect their record is being viewed by an unauthorized person can request that Alberta Health carry out a Netcare audit. For example, a Calgary Medical Office assistant lost her job and was fined \$10,000 after she was discovered to have viewed the health record of her lover’s ill wife on several occasions (April 2007). In December 2011, a pharmacist was fined \$15,000 for posting prescription medication on Facebook. A physician who accessed Netcare inappropriately using his colleague’s Netcare login sessions led to an Office of the Information and Privacy Commissioner (OIPC) investigation of the complaint (H2011-IR-004). The physician’s actions were reported to the College of Physicians

and Surgeons of Alberta (CPSA), and following their investigation the CPSA ordered the physician to take an ethics course, suspended her for 60 days, placed her on probation for six months, and fined her \$22,232.59 to cover the College's investigation cost.

If you have questions about appropriate use of health information contact your organization's privacy officer, or the OIPC.

Resources

- *H2011-IR-004*
- *H2009-IR-003 & F2009-IR-001*
- *News Release on Masking issued May 15, 2008*
- *News Release December 6, 2011 regarding prosecution under HIA*
- *Netcare Know Your Rights section of website*
<http://www.oipc.ab.ca/pages/HIA/NetcareKnowYourRights.aspx>

References

- *OIPC* www.oipc.ab.ca
- *Health Information a Personal Matter a Practical Guide to the Health Information Act*
- *Health Information Act (HIA) Guidelines and Practices Manual*
- *Health Information Act* <http://www.oipc.ab.ca/pages/HIA/ReadAct.aspx>

REGULATORY COLLEGE VS. PROFESSIONAL SOCIETY

As a medical laboratory professional, you have an obligation to your patients to continually provide the most accurate and efficient laboratory service. You also have an obligation to yourself to continually develop your skills to be the most competent professional you can be. Fortunately for you, there are two organizations established to help you fulfill these responsibilities, your regulatory College and your professional society.

Each organization, the College and the society, has a different role to play in your career. The regulatory body or CMLTA is established with the patient in mind. The CMLTA exists to protect the public's safety when it comes to your work in the laboratory. They do this by setting minimum entrance to practice standards and ensuring each Member meets these standards; monitoring and enforcing annual professional development and continuing education requirements for Members; and addressing potential complaints about a regulated practicing Member's unprofessional, incompetent or unsafe behavior.

As your professional society, the CSMLS was established with you, the professional, in mind. We advocate on behalf of the profession and offer education to help you comply with professional development requirements set by your regulatory College. We also encourage your contribution to the medical laboratory community through volunteer opportunities within

the organization.

Belonging to your professional society can help you move through your career, whether you are just starting out or are well-established. The CSMLS provides unique networking and learning opportunities through conferences and online discussions. Being a national society, the CSMLS keeps you current on the news of the industry from all over the country. You can also take advantage of member exclusive discounts on education, conference fees, and everyday services such as couriers and airfare.

The CMLTA and the CSMLS, your regulatory body and your professional society respectively, have important roles in your career and active engagement in both helps you achieve your personal and professional goals.

Submitted by the CSMLS Communications Team

THE TOMORROW PROJECT

Cancer impacts the lives of all Albertans – 1 in 2 men will develop cancer in their lifetimes and 1 in 3 women will receive a cancer diagnosis. One in four Albertans will die of cancer.

Alberta Health Services is home to the *Tomorrow Project*; the largest health research project undertaken in Alberta. Its' goal is to find out more about the causes of cancer and other health conditions so researchers will be able to develop better strategies to improve our health in the future. To achieve this goal, the *Tomorrow Project* needs to enroll 50,000 Albertans between the ages of 35-69 who have not previously had cancer (except non-melanoma skin cancer).

Please visit www.in4tomorrow.ca or call 1-877-919-9292 (toll free) to register or for more information. Just one hour of your time could make a significant impact and may lead researchers to find out why some people get cancer and others do not.

The *Tomorrow Project* is funded and supported by the Alberta Cancer Foundation, Alberta Innovates – Health Solutions (Alberta Cancer Prevention Legacy Fund), Alberta Health Services and the Canadian Partnership Against Cancer.

*Cancer Surveillance: 2008 Report on Cancer Statistics in Alberta. Edmonton: Surveillance and Health Status Assessment, Alberta Health Services, 2010.

We Did It Again!

One Mission – Your Health

With thanks to our amazing employees, DynaLIFE is once again proud to have been named one of Canada's Best Managed Companies.



Photo credit: Dave Tensing

Together we make a difference in people's lives through excellence in medical laboratory testing, diagnostics and customer care



AWARD RECIPIENTS

The College awarded Professional Development Certificates to the following Members:

- Jacqueline Beach
- Joanne Brisbois
- Hilda Gaal
- Joy Kolody
- Sandra Thiessen

The College also recognizes the following recipients of the College Student Endowment Awards:

- Daranee Tang, NAIT MLT program
- Kelsey Clark, NAIT MLA program
- Trang Nguyen, UofA MLS program

The College of Medical Laboratory Technologists of Alberta (CMLTA) is a recognized leader in the regulation and governance of medical laboratory services. As a trusted partner in healthcare regulation, the CMLTA acknowledges self-regulation is a privilege and endeavors to enhance public protection and patient safety, promote high standards for professional practice, and contribute to the overall wellness of Albertans. The CMLTA protects the public by regulating Medical Laboratory Technologists (MLTs) and fostering excellence in professional practice.

The Commentator e-newsletter is the CMLTA's primary communication vehicle and is distributed

February, May, and October. It provides MLTs and the public with current and timely information about CMLTA programs, services, and topics relevant to MLTs and which may have an impact on the healthcare continuum.

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