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Call for Nominations

The What, Why and How of Professional Regulation

A Call to Action

Why Every Drop Counts



College of Medical Laboratory Technologists of Manitoba

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College of Medical Laboratory Technologists of Manitoba
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FAREWELL TO COUNCIL MEMBERS



Farewell to Tannu Sayed

Tannu Sayed was first elected to the CMLTM Council in 2017 with her term starting January 2018 for a two-year term. Tannu agreed to extend her term for an additional year as Council was transitioning to the new three-year terms.

In 2019, Tannu agreed to be the Council Chair and held the position until the end of her Council term December 31, 2020.

During her time with CMLTM, Tannu was excited and eager to learn about board governance and how CMLTM regulates the medical laboratory technology profession. Tannu quickly became an effective and efficient Council Chair.

CMLTM staff and Council would like to express our sincerest gratitude for all of your hard work and contributions to CMLTM. You will be missed.

Thank you, Tannu! We wish you all the best in your future endeavors.



Farewell to Sandy Brooks

Sandy Brooks was first elected to the CMLTM Council in 2014 with her first two-year term starting January 2015, and was re-elected for a second two-year term in 2016. Sandy was asked to extend her term on Council for two additional years. Even though Sandy had retired from her MLT practice by that point, she willingly agreed to serve two more terms on Council.

Sandy has been an active participant on Council, serving as the Council Secretary since she was first elected for the 2015 term. In her role as the Council Secretary, she has maintained the Council meeting minutes, CMLTM Newsletter, and has been an active participant at all Council meetings.

CMLTM staff and Council would like to express our sincerest gratitude for all of your hard work and contributions to CMLTM. You will be missed.

Thank you, Sandy! We wish you all the best in your future endeavors.

FAREWELL TO COMMITTEE MEMBERS



Farewell to Tracey Pronyk-Ward

2020 has been a challenging year for everyone. CMLTM Council and Committees continue to work remotely. Unfortunately, and understandably, the pandemic and work-related issues have added stress to some of the Committee members and their ability to serve on the CMLTM Committees.

Tracey Pronyk-Ward has served as the Board of Assessors (BOA) Chair since 2016 and has decided to step down as the BOA Chair. Thankfully, Tracey has agreed to stay on the BOA as a Committee member, and we are grateful to retain her experience.

Registrants may not be aware, but the terms of reference for CMLTM committees have term limits for its Committee members. A number of the BOA members have been serving for a number of years, and unfortunately will be reaching, have reached, or have exceeded the term limits. Though we would hate to see them go, new volunteers are always needed for CMLTM Committees and Council. If you are interested in serving on the Board of Assessors, please contact [Janelle Baril](#).

FAREWELL TO PUBLIC REPRESENTATIVES



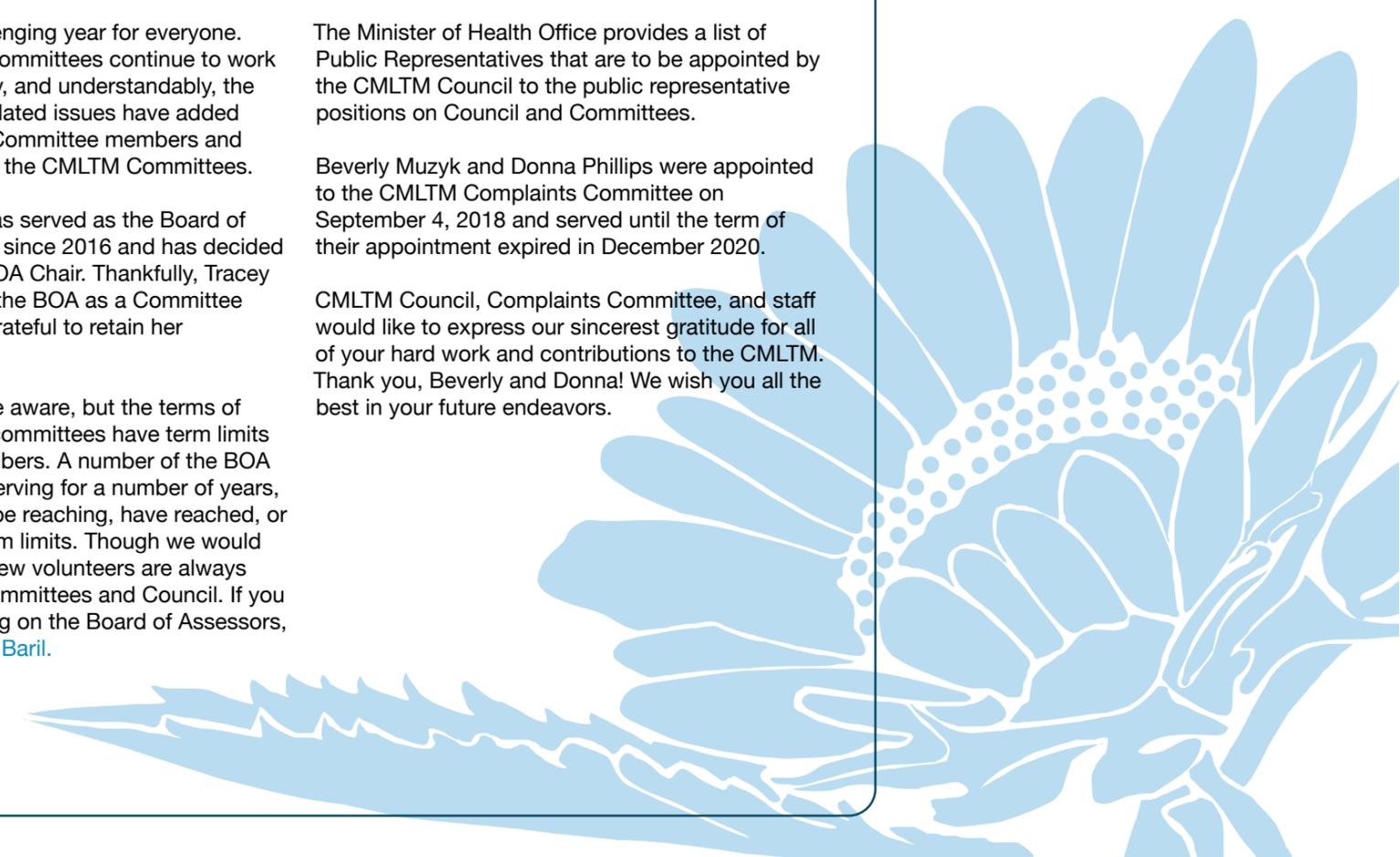
Farewell to Beverly Muzyk and Donna Phillips

The Minister of Health Office provides a list of Public Representatives that are to be appointed by the CMLTM Council to the public representative positions on Council and Committees.

Beverly Muzyk and Donna Phillips were appointed to the CMLTM Complaints Committee on September 4, 2018 and served until the term of their appointment expired in December 2020.

CMLTM Council, Complaints Committee, and staff would like to express our sincerest gratitude for all of your hard work and contributions to the CMLTM. Thank you, Beverly and Donna! We wish you all the best in your future endeavors.

Thank you for all the hard work you have given the CMLTM over the years! Words can never express our appreciation for the CMLTM volunteers.



CMLTM'S COMMITMENT TO TRUTH AND RECONCILIATION

The Truth and Reconciliation Commission (TRC) Report published 94 "Calls to Action" urging all levels of government (federal, provincial, territorial, municipal, and aboriginal) to work together to change policies and programs to repair harm caused by the residential schools, and move forward with reconciliation. CMLTM can be considered an extension of the Manitoba provincial government. The broader project of reconciliation also belongs to all Canadians as individuals.

In 2019 CMLTM Council created a TRC Working Group (WG) composed of CMLTM volunteers, a Council representative, and staff support.

The WG reviewed all 94 Calls to Action and identified 5 that fit within the mandate of CMLTM.

The WG has created a CMLTM Action Plan to determine specific actions CMLTM can take to address the 5 Calls in the Report and monitor progress on each action. Some actions are easy to complete, and others will take more dedication and time to achieve.

One example is listed below:
Recently, all registrants should have received a link to a quick survey inquiring about Indigenous heritage.

This was in response to TRC Action 23 which states:

We call upon all levels of government to:
i. **Increase the number of Aboriginal professionals working in the health field**

CMLTM needed to establish how many practitioners of Indigenous ancestry that we currently have as a first step.

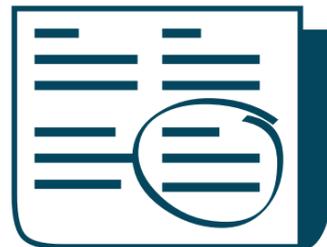
CMLTM received responses from 327 practitioners. This represents about 32% of the membership. The results indicate that 12.5% of practitioners identified being of Indigenous heritage.

CMLTM will be adding a question to the application and renewal forms in an effort to gather further information and monitor progress.

The 2016 census reported that 18% of the population in Manitoba was indigenous. The goal now is to look for ways to increase the current 12.5% to mirror the 18% of the population. The WG will develop strategies to move us forward on this initiative.

Actions completed in 2020 include: providing an introductory cultural safety session to Council, and providing an introductory cultural safety session to registrants at the 2020 AGM.

PROVISION OF INACCURATE OR MISLEADING INFORMATION



The COVID-19 pandemic has put unprecedented strain on our health system, and health care professionals have been at the forefront of that response for over a year. Vaccination efforts continue through eligibility criteria set by government in accordance with best evidence and available vaccine supply.

The Manitoba Alliance of Health Regulatory Colleges has developed the following guidelines for each College's regulated members. Health professionals hold positions of leadership and trust within the health system and the community. It is critical that health care professionals provide accurate information when accessing the vaccine. Falsely representing oneself, or encouraging others to do so, in order to obtain faster access to the vaccine is not consistent with holding a position of trust.

Professional responsibilities of a regulated health professional during this pandemic also include:

- Honesty in disclosing any symptoms, risks factors and COVID-19 exposure, and taking appropriate action to ensure clients are not put at risk.
- Remaining aware of and adhering to public health guidance on PPE and infection control.
- Providing information about COVID, vaccination, and infection control measures in your practice, and in any public domain, including on social media, that is consistent with public health guidance and evidence.

Health professionals are expected to practise in accordance with the standards, practice expectations, practice directions, and Code of Ethics. This includes expectations to demonstrate professional behaviours and act as a role model with regard to observing public health measures that contribute to public safety, including vaccine eligibility.

Any reports of misconduct that are brought to the College's attention may be subject to further investigation or steps to ensure accountability.

CONTINUING COMPETENCY PROGRAM AUDIT NOTICE

The Continuing Competency Committee has agreed to audit registrant portfolios this year.

The Continuing Competency Program policy requires that a minimum of 20% of CMLTM Active: Practicing registrants be audited per year. This translates to roughly two hundred (200) registrants. Three (3) audits are held per year, with approximately seventy (70) registrants being audited at a time.

Using a random number generator, the CMLTM's administrative assistant selects all 200 registrants at the beginning of the year and divides into three groups.

In light of the ongoing pandemic, the Continuing Competency Committee granted an additional two (2) weeks to the notice period (six weeks total) to submit the portfolio requirements. The audit period for this year is January 1st, 2021 to December 31st, 2021.

The first audit notice was sent January 4th, 2021 to the first eighty (80) registrants and all portfolios were received by the due date of Tuesday February 16th, 2021. At this point in time, half of the portfolios have been audited. The auditor is on track to finish all portfolios by the beginning of March.

The second audit notice was sent March 14th, 2021. Please check your e-mail (and junk folder). If you have received a notice of audit, please note that the deadline is Friday, April 30th, 2021.

REQUIRED RECORDS CHECKS FOR REGISTRATION AND 2022 RENEWAL

As you are aware, CMLTM began making it a requirement for all registrants to submit the following record checks under the RHPA. The record checks must be updated every 5 years. Those who submitted their record checks in 2015 were required to submit new record checks for their 2021 renewal.

- Criminal Record Check (with vulnerable sector check)
- Child Abuse Registry Check
- Adult Abuse Registry Check

However, due to the pandemic the CMLTM Council had decided to defer the requirement to submit updated record checks until the 2022 renewal deadline, November 15, 2021.

You can check to see when your record checks expire on the "Required Documents" section (3rd page) of the online renewal form once you have logged into the [Member Portal](#) of the [CMLTM website](#).

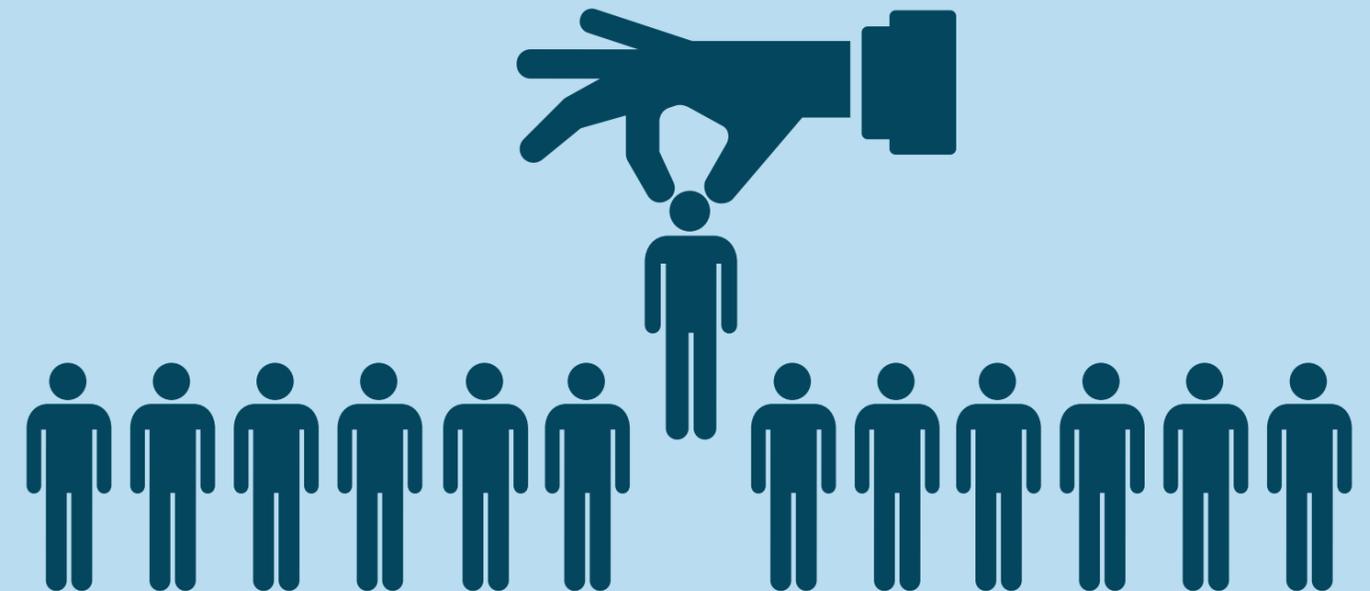
If you receive your record checks before the renewal season and wish to submit them early, you can submit them online. Please remember to use the "+" symbol to add a new record. If you used the Winnipeg Police Services (WPS) online criminal record check you will need to "share" your results with the College of Medical Laboratory Technologists of Manitoba. WPS will send your results directly to CMLTM and we will update your files. CMLTM will not accept any record checks with a "VOID" watermark.

All practicing members will be required to update the record checks (new record checks for all four checks) every five years. For the years between submissions members will still need to self-declare any criminal convictions. The record checks submitted must be current at the time of renewal or application (valid for 6 months from the date they are issued as per [BOA-16](#)). Please remember to expect at least 2-6 weeks for requests to be processed. If you are required to submit finger prints for an extensive criminal/vulnerable record check, the process will be further delayed.

Please apply for your record check well in advance to ensure you have the required documents in time for renewal or application.

For further information regarding the records checks and where to get them, as well as what you might need to apply and the fees necessary, [please review this document that CMLTM has prepared with all the necessary information](#).

CALL FOR NOMINATIONS



CMLTM will be sending out the call for nominations email soon. The email will include links to the nomination forms that will be posted on the CMLTM website.

There will be one vacant Council seat in Winnipeg and one vacant Council seat in the rural district (outside of Winnipeg). These positions commence after the 2021 CMLTM annual General meeting, September 25, 2021 with a term of January 2022 to December 31, 2024.

The CMLTM Council is a very important part of the governance and regulation of the practice of medical laboratory technology in Manitoba. CMLTM provides orientation, education, and support to all Council members to help them as they serve on Council.

If you are interested, or if you know of someone that you think would be interested in being on Council, please consider being nominated or contact the CMLTM office at 204-231-0311 or by e-mail.

Serving on Council is an excellent way to truly understand the responsibilities of professional self-regulation and how CMLTM operates to meet these obligations. It is also a great way to give back to your profession. Service on the CMLTM Council and Committees are eligible professional development activities toward your professional portfolio.

Please consider helping to serve your College.

*Kamran Bashir, MLT
Nominations Committee Chair
CMLTM*

THE WHAT, HOW AND WHY OF PROFESSIONAL REGULATION

Michael Jean David, MLT

Introduction

Just before I was allowed to begin my career as a medical laboratory technologist (MLT), I was welcomed by a number of membership fees taken by organizations such as the Manitoba Association for Medical Laboratory Sciences (MAMLS), a union, and the College of Medical Laboratory Technologists of Manitoba (CMLTM). While MAMLS membership is optional, union and CMLTM memberships are mandatory. And I quickly found out that this was a frustration that I shared with many of my colleagues.

In my quest for justification and professional development (trying to hit two birds with one stone), I volunteered to take various positions in all of these organizations through the years. I am currently serving on the CMLTM Council, and, in this article, I would like to share my findings about the CMLTM so far. What is the purpose of the CMLTM? How does the CMLTM serve its mandate? And lastly, why pay fees to the CMLTM?

What

Each of the organizations that I have mentioned serve their own respective purposes, and it can be difficult to distinguish which one is responsible for what without taking the time to really understand each of them. The MAMLS serves to advocate for our profession in our province. The Canadian Society for Medical Laboratory Scientists (CSMLS) serves the same purpose as MAMLS, except it has a broader national scope. Unions advocate for their members, who come from a broader range of professions (not just MLTs), about labour-related matters. And CMLTM serves to protect the public via the regulation of its professionals. In my experience, I find that there are times when members become frustrated with these organizations because of some issues that are beyond their scope. Understandably, these frustrations, are aggravated every time the fees increase.

How

Would you be comfortable having an unlicensed surgeon operate on you? Or perhaps would you want to live in a place where anyone can become a police officer, and can exercise all of their powers without regulation? What about having anyone perform a crossmatch on your loved one?

Some professions have become regulated because their members perform reserved acts that can potentially cause considerable harm. This is all for public protection, and regulatory bodies fulfill this mandate via four main spheres: standards of practice, entry to practice, continuing education, and enforcement. CMLTM has the Council, the Board of Assessors, the Continuing Competency

Committee, the Complaints Committee, the Inquiry Committee, and the CMLTM staff for these purposes. In this sense, it can be argued that regulatory bodies indirectly serve their members by increasing the public's trust in the professionals through the performance of these functions.

As a self-regulated profession, our reputation depends on how we uphold our mandate. This privilege is a social contract where the government entrusts the public protection mandate to us as a profession. This can be taken away if we do not fulfill this mandate as it is not a right that we are entitled to. As a member of CMLTM, a self-regulated profession, you can participate in this cause by volunteering in our committees or by running for a Council position. You may find it to be a cause-worthy and enlightening experience. In doing so, you can help uphold the public's trust towards the competence of MLTs. On the other hand, critiquing our very own regulation, without doing anything about it, ultimately hurts our reputation as a profession.

Why

While the other organizations that I have mentioned earlier serve their members directly, CMLTM serves the public. Yet we owe the dues to CMLTM, and the public does not. This has been a difficult question that had intrigued me for a long time. Why is the cost of regulation borne by its registrants, when regulation is focused on public interest? And this is true for almost all of the regulated professions as far as I know. Upon consideration of the alternative however, if this was not the case, all of us will be paying for the regulation of all the regulated professions in our province as we are members of the public as well. That would arguably be a more impractical and costly alternative than what we currently have now right now.

What if we just forget about self-regulation, disband the CMLTM (assuming that is something that we can just do), and let the government take care of our professional regulation? Would that save us from having to pay our regulatory fees? Looking at how other countries regulate their professionals can be enlightening in this regard. In the Philippines, medical technologists and other regulated professionals still pay their government for their regulation separate from their taxes. This illustrates that whether self-regulated or not, there is still no free ticket to practicing a regulated profession. Another, geographically closer, example would be the regulation of real estate agents in British Columbia. They used to enjoy the benefits of self-regulation, but their government took that privilege away from them. They still must pay their regulatory dues; except, in this case, they remit it to their government.

You must have noticed that I have written that self-regulation, such as what we have with CMLTM, is a privilege and that there are benefits to it. By self-regulating, we (rather than government bureaucrats) get to set and enforce our own rules and standards in collaboration with our public representatives. Flexibility, responsiveness, and continuous monitoring comes with doing this by ourselves. You may want to ponder on how long it takes for certain governmental services to get back to you. A larger unit (e.g., the government) has more priorities than a smaller one (e.g., the CMLTM), and our concerns will have to compete over other governmental priorities.

Another benefit, which I alluded to earlier, is the prestige and reputation of being associated with a regulated profession. It might have been a long time now, but do you still remember how you felt the first time you became a licensed MLT? This is a title that is legally protected, meaning no one else can use it in our province without registering with the CMLTM. Also, it might be worth repeating that this status and public trust depends on how well we regulate our profession, so it will be good to consider volunteering for our CMLTM.

Conclusion

Self-regulation is a concept that requires a higher level of understanding, and arguably, it is a topic that we need to spend more time on. Congratulations on taking a step towards your greater understanding of something that is relevant to you as a regulated professional! We have only scratched the surface in this article. Feel free to reach-out to the CMLTM if you have any questions, and perhaps they can be addressed in future articles.



References:
Maciura, J. (2021). Basic Canadian National Certified Investigator and Inspector Training: Principles of Administrative Law. The Council on Licensure, Enforcement and Regulation, Nicholasville, KY, United States.

Board Member Training: Introduction for Regulatory Governance Program. (2021). Council on Licensure, Enforcement and Regulation, Nicholasville, KY, United States.

A CALL TO ACTION

Jennifer Zelmer, President and CEO of Healthcare Excellence Canada

To everyone committed to the pursuit of healthcare excellence:

Healthcare Excellence Canada is a new organization with a relentless focus on improving healthcare, with – and for – everyone in Canada, connecting the power of people and evidence. It's about shaping the future of healthcare quality and safety. Together.

Working with many of you as the Canadian Patient Safety Institute and Canadian Foundation for Healthcare Improvement, we achieved a **LOT**. Hundreds of teams and thousands of people in every province and territory helped to move the dial on patient safety and healthcare quality. But there is much more to do. Unintended harm in the health sector is the third leading cause of death in Canada, and there are gaps in patient experience and outcomes, care team well-being, and value.

So we teamed up to create a new organization with greater capacity to support our partners. We promise to work with you to deliver measurable, widespread and lasting improvement in patient safety and all the dimensions of healthcare excellence. Together, we are more than a single organization. We are a movement of people across the country committed to patient safety and quality – staff, Board members, coaches and faculty; patient and essential care partners; health and social service providers; governments; and many other people and organizations.

Never has this work been more important. Even before the pandemic, Canada faced persistent challenges achieving safe, high-quality healthcare for all, and COVID-19 has surfaced gaps in both care and equity. It is also shining a light on creative, highly effective responses to needs, and we have an opportunity to expand the reach of these proven innovations so more people can benefit.

In starting to talk to people across the country to explore their priorities and how we can work together, we are hearing:

- Be bold in actions to change the system
- Be clear and focused about our purpose
- Look to the future
- Strengthen diversity and inclusivity
- Share expertise and guide others
- Be agile and move quickly

In the meantime, many familiar CPSI and CFHI programs will continue in 2021 and 2022 as new programs are rolled out. Across our work, we will seek to emphasize equity and inclusion, patient, family, and caregiver partnership, as well as supporting the people who work in healthcare.

I invite you to join us. Because we believe everyone in Canada deserves excellent healthcare. And we are not there yet.

Explore ways we can work together here.

Sign up for our newsletter to learn about news and upcoming opportunities.

Follow us on social media.

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WHEN EVERY DROP COUNTS

Article provided by Choosing Wisely Manitoba & Choosing Wisely Canada, Grace laboratory pictures provided courtesy of Theresa Wiwchar, Shared Health, Laboratory Director



The Health Science Centre Winnipeg and Grace Hospital become first hospitals to receive national Using Blood Wisely Designation.

As a vital and lifesaving resource, protecting Canada's blood supply has never been more important due to the urgent care needs and constraints related to COVID-19.

That's why over 120 hospitals are participating in the Using Blood Wisely campaign, a national initiative to reduce inappropriate red blood cell transfusions. This campaign challenges hospitals to conduct a spot audit of recent red blood cell transfusion to see how they compare to national appropriateness benchmarks.

Only a few months following the official launch of the national campaign, two Manitoba Hospitals have achieved the Using Blood Wisely Designation. Health Sciences Centre (HSC) is the largest hospital in Manitoba and is the provincial tertiary care centre, serving patients from Manitoba, Northwestern Ontario, and Nunavut. The Grace Hospital is a 251-bed facility that supports patients from all areas of Winnipeg and surrounding communities. Both hospitals are recognized for their significant achievements in meeting national appropriateness benchmarks for reducing inappropriate red blood cell transfusions.

"These designations are an exciting achievement for all levels of health care, from leadership to front line staff," says Dr. Charles Musuka, Medical Director, Transfusion Medicine, Shared Health. "We are so grateful for the hard work and dedication of all clinical and laboratory staff in Manitoba. This is a testament to their commitment to providing the best possible care for patients and best practices in Manitoba."

HSC and Grace Hospital accelerated efforts with the campaign in response to anticipated blood shortages in the province. With support from the Shared Health Transfusion Medicine Program, Best Blood Manitoba, and Choosing Wisely Manitoba, the hospitals teamed up to implement their first transfusion stewardship project - Appropriate Inpatient Red Blood Cell Utilization in Manitoba. This provincial clinical practice change implemented a new set of guidelines that optimizes laboratory and clinical processes to assess the appropriateness of each unit transfused in the inpatient setting.

HSC and Grace Hospital are the first sites to achieve the designation in Canada, and more Manitoba hospitals are in the process of applying.

"We would like to congratulate all clinical and laboratory staff from Health Sciences Centre and Grace Hospital that made this a success. Their dedication and hard work have made these designations possible for Manitoba." – Petr Kresta, Chief Operating Officer, Diagnostic Services, Shared Health.

When every drop counts, it takes a concerted effort to safeguard Canada's blood supply. Choosing Wisely Canada and Canadian Blood Services would like to thank participating hospitals for their pursuit of best practices in transfusion medicine and collective efforts to deliver safe, quality, and appropriate care.



Manitoba's Transfusion Stewardship Team & HSC Leadership & Lab Staff

Newsletter Policy

The College of Medical Laboratory Technologists of Manitoba is responsible for distributing current information about services or relevant information to the membership. This is done through a newsletter which will be distributed electronically or through the mail.

The Council is Responsible for Reviewing All Submitted Content

The College is not responsible for any opinions expressed in the newsletter and nor are they responsible for the accuracy of the content published. The information presented in the newsletter can not be reprinted without the written consent of the Registrar/CEO

