



2017 ANNUAL REPORT

AGM May 24th 2018

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NOTICE

THE 78th ANNUAL GENERAL MEETING OF THE NOVA SCOTIA ASSOCIATION OF MEDICAL RADIATION TECHNOLOGISTS

Notice is hereby given to the membership of the Nova Scotia Association of Medical Radiation Technologists that the 78th Annual General Meeting of the Association will be held Thursday, May 24th, 2018 1730-1930 at Halifax Regional Library BMO Room in Halifax, Nova Scotia. Those in attendance (physically or via video-conference) are reminded that they are not eligible to vote at the AGM if they are not registered active members of the Association.

The following pages contain the Annual Reports of the Executive and the committees of the NSAMRT. Please bring your own copy of the Annual Report with you to the AGM. The report is available in electronic format on the NSAMRT website and will be displayed electronically during the annual meeting.

The financial report and budget will follow in a subsequent package.



Megan Brydon, BHSc RTNM
President, NSAMRT

AGENDA

Nova Scotia Association of Medical Radiation Technologists

78th Annual General Meeting

May 24th, 2018

17:30 – 19:30

Halifax Regional Library, Halifax, NS

1. Call to Order & Roll Call of Executive Council
2. President's Welcome and Approval of Agenda
3. Approval of Minutes NSAMRT 77th AGM
4. Business Arising from the Previous Minutes
5. Annual Reports
 - 5.1 Executive Council
 - 5.1.1 President's and Executive Director's Report
 - 5.1.3 CAMRT Director's Report
 - 5.1.4 Registrar's Report
 - 5.1.5 Volunteer Coordinator's Report
 - 5.2 Member Services Committee Reports
 - 5.2.1 Education Committee Report
 - 5.2.2 Communications Committee Report
 - 5.3 Regulatory Committee Reports
 - 5.3.1 By-Laws Committee Report
 - 5.3.2 Credentials Committee Report
 - 5.3.3 Nominations Committee Report
 - 5.3.4 Policy and Procedures Committee Report
 - 5.3.5 Professional Conduct Committee Report
 - 5.3.6 Fitness to Practice
 - 5.4 Finances
 - 5.4.1 Treasurer's Report
 - 5.4.2 2018-2019 Budget
 - 5.4.3 Income Statements
6. New Business
 - 6.1 Election Ratification
 - 6.2 Appointment of Auditors
7. 79th Annual NSAMRT AGM location
8. Adjournment

NSAMRT EXECUTIVE COUNCIL AND COMMITTEE CHAIRS 2017-2018

Executive Director/Registrar

Julie Avery, MHA, BHSc, RTNM, CTIC julieavery@nsamrt.ca

Executive Council

President – Megan Brydon MSc(c), BHSc, RTNM meganbrydon@nsamrt.ca

Vice President – Chrissy Gamache BHSc, RTR chrissygamache@nsamrt.ca

CAMRT Director – Jonathan Bower BHSc, RTNM jonathan.bower@nshealth.ca

Treasurer – Dave McAloney, BMRSc, RTT davemcaloney@nsamrt.ca

Secretary- Nicole Deveau, RTR nicoledeveau@nsamrt.ca

Member-at-Large – Stephanie Schofield RTR stephanieschofield@nsamrt.ca

Volunteer Coordinator – Cory McNeil BHSc, RTNM, CTIC corymcneil@nsamrt.ca

Member Services Committee Chairs

Education – Shawna Baughman RTR, shawnabaughman@nsamrt.ca

Communications – Chrissy Gamache BHSc, RTR chrissygamache@nsamrt.ca

Regulatory Committee Chairs

By Laws – Brandon Hardy BHSc, RTNM, brandonhardy@nsamrt.ca

Credentials – Lisa Bonin BHSc, RTNM lisa.bonin@nshealth.ca

Nominations – Chris Rodgers RTT, chrisrodgers@nsamrt.ca

Policy and Procedures – Julie Avery MHA, BHSc, RTNM, CTIC julieavery@namrt.ca

Professional Conduct – Kelly Lawrence RTR kellylawrence@nsamrt.ca

NOMINATIONS TO THE NSAMRT EXECUTIVE COUNCIL

The NSAMRT has the following positions to fill:

2 Executive Council Positions – Two Year Terms

This year there were five (5) nominations for executive council positions. Election via electronic vote occurring in April-May 2018. Successful candidates will be notified and results of the election will be ratified at the 78th AGM, Thursday May 24th 2018.

PRESIDENT'S REPORT AND EXECUTIVE DIRECTOR REPORT



Growing, learning and sharing was the theme of 2017. Reflecting on the achievements and challenges of the past year, we can't help but be excited about the future and ongoing transformation of the NSAMRT. As the NSAMRT continues to mature as an organization, we are learning and adopting improved practices for workflow. By investing in several initiatives that have brought us into a modern,

digital work environment, we sometimes fail to remember just how labour intensive these processes used to be.

Now fully onboard with the SharePoint platform, sharing and editing documents across the executive, as well as working committees, has been simplified - saving immeasurable redundancies and extra work. Housing these core organizational materials in this manner has also helped to improve our organization's memory, something we've struggled with in the past. Growth in this area will be instrumental in supporting ongoing learning for new members of the Board and committees.

Moving the majority of committee and Board meetings to a webinar platform has allowed the development of meaningful and productive interactions with executive and committee members from across the province. This less centralized concentration of resources has enabled the NSAMRT to facilitate outreach, gather feedback from members about the MRT profession, and include a broad spectrum of voices in the development of our foundational documents such as Standards of Practice, Code of Ethics and the Continuing Professional Development Program.

All of these work-process changes are part of transitioning from an operational executive board, to a policy board. The NSAMRT will continue to exist in a combined operational/policy format, however the majority of operations now fall under the Executive Director portfolio. Burn-out and succession planning were key items identified as risk for the ever committed volunteer base of the NSAMRT. Having a dedicated Executive Director is essential in mitigating volunteer burnout, representing MRTs in critical national and provincial conversations, and guiding the organization through transformational leadership changes.

With the launch of our Facebook page, we are excited to have a modernized, up-to-date method of sharing information with members and the public. This has been a long time coming,

and should prove to be a valuable vehicle for information sharing in a meaningful, timely way. Please take a moment to follow us on [Facebook](#) and review the [NSAMRT social media](#) policy and position statement in reference to appropriate and professional expectations of use.

Supporting learning of our members continues to be a priority of the NSAMRT. This year, a successful fall education and volunteer education event was delivered as a kick off to MRT week. In addition, the pilot combined Atlantic Medical Radiation Technologists Conference in April saw attendees from many sites across Nova Scotia and the Atlantic provinces, in person and via webinar. The intention is that this collaborative educational opportunity will rotate throughout the Atlantic Provinces in years to come, providing an opportunity for networking across regions and modalities. NSAMRT intends to continue to grow educational opportunities for members, enabling MRTs to learn and share information from each other while controlling costs of participation. In 2017-18 all education events were offered for free.

It has been five years since Bill 70 received Royal Assent. In that time, there have been many substantial changes in health provision and organization across the province, including governing political party, the advent of the amalgamated Nova Scotia Health Authority and new Essential Services legislation. The NSAMRT continues to communicate with government regularly and have been informed that our regulations are next on the work plan to be reviewed by the government. When review of our regulations begins, this will signal the forthcoming full transition to the Nova Scotia College of Medical Imaging and Radiation Therapy Professionals.

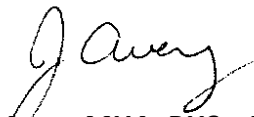
Looking forward, 2018-19 promises to be a year of continued momentum for NSAMRT, strengthening the voice of MRTs at National and Provincial tables, informing decision and change makers about the essential and exceptional role we play in the health and wellness of Nova Scotians and beyond.

Once again, we want to thank the tireless efforts of our volunteers and committee chairs for a record year of work and effort. You've shown up in every possible way to share in the establishment and creation of our essential foundation for the future. Many thanks.



Megan Brydon, BHSc RTNM

President, NSAMRT



Julie Avery MHA, BHSc, RTNM, CTIC

Executive Director, NSAMRT

2017 in REVIEW

NSAMRT's 2015-17 [strategic plan](#) had four broad initiatives identified. Included is a snapshot of some of the 2017 activities and their alignment with the four broad initiatives of the strategic plan with a few shared in greater detail below.

Marketing and Communication	Develop an Operational Framework	Sustainability	Enhance Research Capacity
<ul style="list-style-type: none"> • Social Media Policy • Launching Facebook • Adoption of Go-To-Meeting for videoconferencing • Collaboration with NBAMRT for SOP • Collaboration with Atlantic Provinces for conference • Collaboration with NSSDMS for fall education • Lunch and Learns supported across the province • Website updated regularly • Site Champions • In process of updating MOU and bilateral agreements with CAMRT 	<ul style="list-style-type: none"> • Continuing Professional Development Program • Standards of Practice • Code of Ethics • Selection of HSO as accreditation body for educational programs • Developing written process for IEMRT applicants • Ongoing development of policy and position statements as need is identified 	<ul style="list-style-type: none"> • Strategic Plan 2018-2020 • Board Orientation Manual • New Registration Platform RFP • Provincial payroll deduction • New awards program • Adoption of SharePoint for communication and document storage • Adoption of Go-To-Meeting for videoconferencing • Move to new office location 380 Bedford Hwy • Annual site visits • Creation of volunteer co-ordinator position on the Board • Volunteer education -privacy 	<ul style="list-style-type: none"> • Research incorporated into CPD Program • Foundational Documents of NSCMIRTP based on best evidence

Health Standards Organization (HSO) Accreditation

Graduating from an accredited program is one of NSAMRT's base criteria for licensure as a MRT. In February of 2016, Canadian Medical Association (CMA) notification was sent out stating CMA was withdrawing from accreditation of educational programs effective February 2018. This gave NSAMRT, along with many other regulatory bodies, 2 years to develop a new option for accreditation. Most of the affected regulators do not have the financial or human resource capacity to develop and run their own accreditation process so they collaborated with national certification bodies such as CAMRT to identify a solution. CAMRT and the Alliance of Medical Radiation Technologist Regulators of Canada (AMRTRC) were leaders on this project. In 2017 [Health Standards Organisation \(HSO\)](#) was selected as the successful organization to accredit educational programs in medical radiation technology, sonography, medical laboratory, paramedicine, cardiology technology, orthoptics and clinical perfusion. NSAMRT, as a member of AMRTRC, has been involved in the selection of HSO and will continue to remain actively involved in the development of HSO's accreditation framework which will roll out in 2020.

Standard of Practice and Code of Ethics

Looking forward to college proclamation to the Nova Scotia College of Medical Imaging and Radiation Therapy Professionals (NSCMIRTP) base documents such as Standards of Practice (SOP) and Code of Ethics (COE) are required. As NBAMRT and NSAMRT have very similar legislation we decided to collaborate on the SOP documents. In 2017 the Professional Conduct Committee (PCC), along with NBAMRT, took on the task of doing an environmental scan and developing a rough draft document. NSAMRT then posted a request for interest and selected a

consultant to build upon this rough draft to create a professional document. iComp Consulting was the successful proposal. Leanne Worsfold has been acting as our consultant and working with the PCC as well as other MRTs and Sonographers who have volunteered to give input into the document. The finalized SOP and COE is expected in spring 2018.

2018-2020 Strategic Plan

As NSAMRT continues to develop as a regulatory college our strategic focus needs to be reviewed. In Jan. 2018 proposals for a facilitator were reviewed and Stephanie Coldwell from Coldwell and Associates was selected to assist us in drafting our next strategic plan. A survey was created and sent out to NSAMRT members, Sonographers and stakeholders for feedback. This information was used to help inform our strategic goals. Board members, committee chairs and NSSDMS spent Feb. 24th with Stephanie Coldwell brainstorming to define our purpose and goals for the next three years. The completed strategic plan is expected in spring 2018.

Fair Registration Practice Act (FRPA)

FRPA is a provincial Act that regulators must comply with when licensing individuals from other jurisdictions in Canada or applicants that are internationally educated. In 2017 this ACT was amended. NSAMRT is compliant with the ACT but requires policy development in this area to demonstrate process and rationale to Fair Registration Practices Nova Scotia. NSAMRT is currently updating any exceptions to portability of license from one regulatory jurisdiction to another within Canada to ensure MRTs licensed in Nova Scotia meet the minimum education requirements as set by the National Competency Profile.

Atlantic MRT Leaders Accord

The presidents of the Atlantic Associations have been meeting for 5 years to share ideas and resources. This year the Atlantic Conference and the SOP with NBAMRT have illustrated how this group can work to pool resources both on a formal and informal level. With Newfoundland and PEI soon having new Acts passed all four provinces will be regulated and have some combination of regulation and association. Recognizing the changing landscape a new MOU for the group is being drafted including a new name to better reflect the purpose and membership of the group. What was the Atlantic President's Group is now the Atlantic MRT Leaders Accord.

NSAMRT Provincial Input

In addition to FRPA there have been several other pieces of legislation/guidelines/policy brought forth in 2017 that NSAMRT has been asked to give feedback on. This has included;

- Medical Assistance in Dying Act
- Adult Capacity and Decision-making Act
- Workers Compensation Board and policy re presumptive PTSD
- Cancer Care Nova Scotia- Palliative Care Competencies
- New Act for Nova Scotia Nursing Regulator
- NSHA- Policy on Proof of Licensing
- Amendment to Nursing Scope of Practice as it relates to giving Naloxone

CAMRT DIRECTOR'S REPORT

CAMRT 2017



2017 was a year in which the CAMRT saw tremendous growth in all areas of its key strategic goals. Under the leadership of CAMRT President Karen Fader and the CAMRT Board of Directors, the staff at CAMRT has diligently progressed the goals and objectives of the organization. Most of all, the dedication and hard work of CAMRT member volunteers has allowed for growth in the areas of: Transforming Education, Evolving Practice, Quality of Care, Evidence and Research and Membership Value.

Transforming Education

Competency Profiles

- The CAMRT has begun a process to review its competency profiles. As previously reported, this work will bring the format of role descriptions with related competencies into better alignment with the CanMEDS profile.

Entry to Practice Certification

- The 2017 transition to computer-based writing of the exam has been successful with no major issues identified.

Accreditation of education programs

- After a great deal of coordination and collaboration, we are pleased to share that we have reached critical mass for the Equal Canada Allied Health Education Accreditation Program with Accreditation Canada. This means that a sufficient number of National Associations and provincial regulators have signed-up with Equal Canada to meet our contractual obligations.
- Transition activities between CMA and Accreditation Canada are currently underway; expected to be complete December 2017.
- Accreditation Canada will officially take over accreditation services on February 1, 2018.

CPD Programs

- *Full length courses*
 - Introduction to Research was released fall 2017 in the new PDF format.
 - Full length courses in development for 2018 include PET/MR and Breast Imaging 1 & 2.
 - There are to be course updates to Dosimetry 1 and 2. Dosimetry 1 will be ready to be re-released in 2018. The release for updated Dosimetry 2 is TBD.
 - Imaging Breast Pathology was re-released in the new enhanced PDF format.

Quick Self Studies

- Three new quick self-study courses were released in 2017, the most recent being Life Cycle of the Breast.
- Three QSS courses are being updated: Basic Microbiology (to be renamed Infectious Diseases), Complementary and Alternative Medicine in Cancer Care, Lung Cancer.
- Several QSS are in development for 2018: Brachytherapy, Stereotactic Radiosurgery, IR related pathologies & MR in radiation therapy.

Webinars

- Nine new webinars were released in 2017. The top 3 attended webinars for 2017, to date are: Chest Pathology, Patient Communication and Patient Safety Culture. All webinars also remain available for members at all times as virtual content on the website.
- Virtual Conferencing: 19 recordings have been posted from the CAMRT-OAMRS AGC.

Certificate Programs

- Breast Imaging Certificate Update: Two new breast imaging courses are currently under development to replace Mammography 1 and 2.
- CIR introduced vascular anatomy pre-requisite as of January 2018.
- A Needs Assessment is being performed for two new certificate programs:
 - 1. OR Radiography
 - 2. Bone Mineral Densitometry
- In response to a motion made at the 2017 AGM to investigate the development of a bone mineral densitometry specialty certificate for technologists that meets or exceeds all the requirements for all provincial, territorial and national BMD accreditation programs.

Evolving Practice

Advanced Practice

- *Advanced Practice in Radiation Therapy*
 - The APRT(T) Certification Pilot came to a close in the Spring of 2017. All three of the pilot candidates successfully completed the APRT certification process in the spring of 2017. For the profession of radiation therapy, formal certification is important as it establishes an agreed standard for advanced practice that is recognized across the country. The APRT(T) Certification Process is now officially open and the first cohort of candidates is scheduled to begin in February 2018.
- *Advanced Practice in Medical Imaging*
 - Discussions continue with a number of possible pilot sites across the country. Additionally, APMI has been presented at conferences to generate support among physician groups.

Leaders Program

- The CAMRT Leaders program is scheduled to take place in Toronto, ON in March 2018.

Leadership Development Institute

- The CAMRT LDI continues to be a popular and welcome program with those who attend. The annual event will be held June 15-17, 2018 in Ottawa.

Quality of Care

Best Practice Guidelines

- CAMRT's Best Practice Guidelines (BPGs) continue to be a noted value to our members. CAMRT's Best Practice Guidelines (BPGs) continue to move forward with new guidelines currently in development, as well as scheduled reviews of existing guidelines established as part of the sustainability process.
- Plans for 2018 include plans to update the BPG website, and the addition of several new BPGs.

Choosing Wisely Canada

- CAMRT with its Choosing Wisely committees have been busy the past few months developing recommendations, conducting literature reviews and putting recommendations into the accepted Choosing Wisely format.
- Once approved by the CAMRT Board, recommendations will be sent to external stakeholders within the MRT community for comment. Following this review, selected recommendations will be sent to Choosing Wisely for a final review before they are incorporated into the Choosing Wisely Canada website.

Evidence + Knowledge

Research Grant

- The 2017 CAMRT Research Grant was awarded to Harinder Grewal, RTNM, CTIC of the Joint Department of Medical Imaging (JDMI) in Toronto. The topic for the project is “Consensus-Based Development of Image Quality Assessment Criteria for Technologist Peer Review”.

New Fellowship Model

- CAMRT has launched a new model for fellowship. The flexibility of the new model allows for MRTs to demonstrate their accomplishments and excellence over a diverse range of activities. Details can be found on the CAMRT website.

Membership Value

Member Satisfaction & Engagement

- Affinity Programs: We will be adding 3 new member discount programs to our suite of offerings in 2018. These include the Canadian Automobile Association (CAA); the National Bank; and Local Hospitality

Advocacy and Government Relations

- *HEAL*
 - Our CEO was voted co-chair of HEAL in the spring of 2017. In this leadership role, Francois has the opportunity to exercise more influence over the discussions taking place at the table and on the actions that result from the collaboration. HEAL will be moving to revitalize its approach “The Canadian Way” to establish some more practical asks. CAMRT has offered its support in this exercise.
- *Isotope Supply*
 - We continue to participate in the Canadian Multi-Stakeholder working group. There of no new developments of note to report.

Relations with International Organizations

- *ISRRT*
 - CAMRT is offering support to ISRRT for the upcoming Trinidad conference in 2018. A call for nominations has been received for the elections to the board of the ISRRT. We have initiated the internal process to identify CAMRT returning and new candidates.
- *RAD-AID*

- The first CAMRT sponsored RAD-AID Fellow, Anne-Marie Lugossy, completed her one month mission in Arusha (in Northern Tanzania) in March 2017.
- Two further missions are upcoming, one to Kenya for 2018 (Kim Rans, RTT of Alberta) and one to Tanzania in late 2017 (Fellow, TBD).

Other Activities

Conferences & Events

- CAMRT has planned a number of collaborative events to take place in 2018. Specialty events
- CANM-CAMRT (**March 23-24**): A fully-integrated event with technologists and physicians co-presenting each session.
- CIRA-CAMRT (**May 31-Jun 2**): A vastly expanded technologist program (double) in 2018 thanks to the additional volunteers and expertise of CAMRT
- CARO-COMP-CAMRT (**Sept. 10-15**)
SMRT (Monthly **throughout 2018**): A regular webinar series for technologists working in MRI.
- *Radiological Technology Roadshow*
 - The program is being developed under the theme of “Sports Injury and Trauma Radiology” and includes both CAMRT sponsored speakers and directed topics, as well as regional/local topics and speakers.
- *Regional events*
 - As the provincial organizations pursue their planning for 2018, we are working together to determine how the CAMRT can best support their events.
 - CAMRT providing a speaker to support Atlantic Provinces joint conference in 2018
 - CAMRT is collaborating with OTIMROEPMQ to present speaker Dany Laveault from the University of Ottawa.
 - CAMRT collaborating with Alberta on the delivery of an event for medical radiation technologists, sonographers, and neuro electrophysiologists from Alberta
- *Annual Governance Forum (AGF)*
 - **May 14-18, 2018.** The AGF will be held in Ottawa at the Marriott Hotel and will not only bring together the Board of Directors, National Network and Advisory Councils, but will also include our AGM and the CAMRT Celebration of Excellence Reception for award winners and guests.

As always the CAMRT would like to thank all the dedicated volunteers who give their time and effort in support of their profession.

Respectfully Submitted,

Jonathan Bower BHSc, RTNM
CAMRT Director, Nova Scotia



REGISTRAR'S REPORT

As of Dec. 31st 2017 there are 578 active registrants with the Nova Scotia Association of Medical Radiation Technologists (NSAMRT). This is a decrease of 20 from 598 at 2017 year's end but consistent with the 579 as of Dec 31st 2016. NSAMRT had 48 new applicants and 49 resignations and lapsed registrants through 2017 which are broken down in the registration renewal chart.

Registration Renewal Chart

New Applicants 2017	#2017/#2016	Resignations/Lapsed License 2017 (12/49 are lapsed)	
AIT	7/12	Retirement	13
International	1/0	Maternity/Parental	10
Non-AIT Canadian	3/unknown	Left Jurisdiction	4
NS Grad	15/12	Medical	3
Reinstatement	19/9	Unknown	10
2 nd Discipline	3/unknown	Other (PACs, Sonography, No Work, School)	9

There were a total of 621 active licenses with 43 MRTS being licensed in two disciplines.

Active Membership by Type of License

Discipline	# First License	# 2 nd License	License Totals
RTR	421	2	423
RTT	76	1	77
RTNM	75	1	76
RTMR	6	39	45

Work continues to improve on our online registration/renewal process. The current platform cannot adequately address the requirements NSAMRT must meet as a regulator. As of the writing of this report NSAMRT had recently selected Guild as our new registration platform that will better address the needs of the public, members and other stakeholders. It is expected to go live in the summer of 2018. This will allow time for NSAMRT to work with the platform prior to renewal season.

It is important to remind all our membership that accurate information is essential to the proper running of your Association, and may be a legal requirement of the College. Please ensure your personal information, Name, Address, Date of Birth and Licensing numbers for both the NSAMRT and Canadian Association of Medical Radiation Technologists (CAMRT) are all correct. If you are currently using a different name in practice than what you are registered

under, or if any of your contact information has changed please contact NSAMRT at info@nsamrt.ca to update your information.

Collection and correlation of dues collected via payroll deduction went smoothly for 2018 renewals. An opt in option was added for payroll deduction this year with 415 opting in, 86 opting out and 77 not eligible as of Jan 1, 2018. Work is ongoing to identify ways to improve this process and NSAMRT hopes to address the lag time between collection of information and communication with the employers to enable up to date lists for the first pay period in the New Year.

We continue to work with the Human Resources department of the Nova Scotia Health Authority to ensure they have accurate reports to cross reference our registered members with their employee lists to ensure that all employed technologists across the province are registered. We are currently working with them to review their draft policy on proof of licensure to ensure both NSHA and NSAMRT policies will support the planned changes in registration/renewal at NSAMRT.

Registrants who did not renew their license have been removed from active status with the NSAMRT and the CAMRT. These registrants no longer have personal liability insurance and must apply for reinstatement in order to practice. If you are retiring or taking a Leave Of Absence, we ask that you please complete the resignation form (www.nsamrt.ca). If you do not complete the resignation form and choose to reinstate in the future you will be subject to an additional \$100 lapsed member fee. This fee was adopted to recover costs of tracking and determining if lapsed members were still working in the province. All new and returning members must complete the full registration process *before* returning to practice. Practicing as an unregistered MRT is in violation of provincial law and is subject to prosecution and penalty under the Medical Radiation Technologists Act cited as R.S.N.S., 1967 Chapter 180.

In keeping with our policy of public transparency and to assist employers in ensuring their employees are active, currently licensed MRT's, the names of all registered members are posted on the [association website](#), and updated regularly throughout the year. When the new registration platform goes live it is anticipated that active registrants list from the registration platform will be linked to the website and be update in real time.

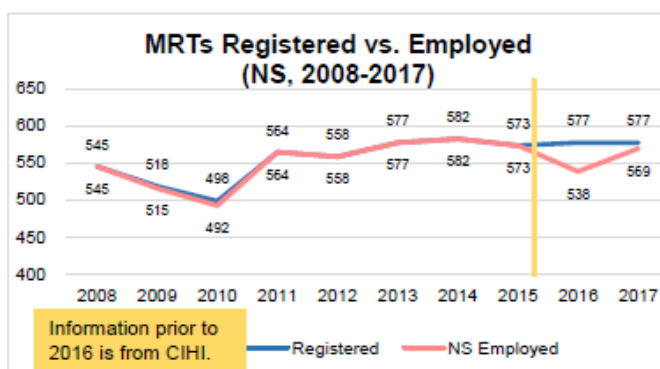
Respectfully Submitted,
Julie Avery BSc, MHA, RTNM, CTIC
NSAMRT Registrar

DRAFT: Nova Scotia's Provincial MRTs Profile, 2017

Data Source: Nova Scotia Association of Medical Radiation Technologists

Supply

- In 2017, 577 MRTs were registered to practice in Nova Scotia.
- The total number of registered MRTs stayed the same over a one year period; there were 577 MRTs in 2016.



- This reflects an outflow¹ of 48 MRTs and an inflow of 48 MRTs.
- The location of graduation for all 2017 Registrants (577):
 - 58.4% (337) graduated from Nova Scotia.
 - 38.5% (222) graduated in other provinces.
 - 3.1% (18) were internationally educated.
- There were 48 new registrants in Nova Scotia in 2017:
 - 50.0% (24) were graduates from Nova Scotia.
 - 47.9% (23) were graduates from other provinces.
 - 2.1% (1) were internationally educated.

Age & Experience

- Average age of MRTs in 2017 was 42.4 years. This is an increase from 42.3 in 2016.
- Age profile of the MRT:
 - Younger than 35 years: 31.9% (184) vs. 31.4% (181) in 2016.
 - 35-49 years: 34.1% (197) vs. 36.7% (212) in 2016.
 - 50 years and older: 34.0% (196) vs. 31.9% (184) in 2016.

2017 BY THE NUMBERS

Number of MRTs registered in NS in 2017: 577. No change from 2016

Proportion of registered MRTs employed: 98.6%

Number of MRTs who did not re-register (outflow): 48

Number of new and returning MRT registrants (inflow): 48

Number of MRTs over the age of 55 that did not re-register: 15

Age profile of MRTs:

- Average age: 42.4
- <35 years old: 31.9%
- 35-49 years old: 34.1%
- >50 years old: 34.0%

Experience profile of MRT workforce:

- < 5 years: 23.0%
- 6-30 years: 58.7%
- > 30 years: 18.3%

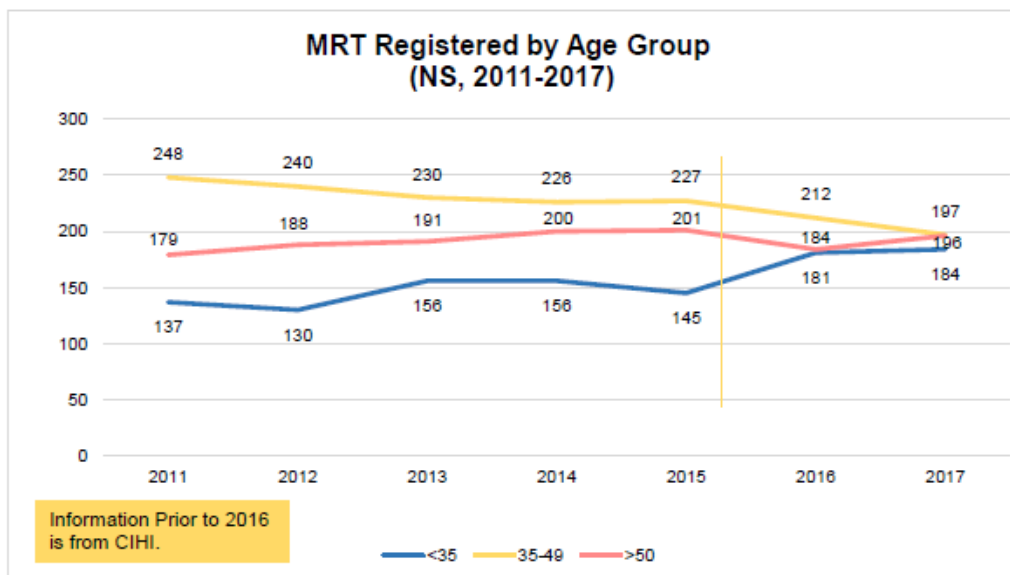
Proportion of MRTs in permanent full time positions: 74.5%

Proportion of MRTs in permanent part time positions: 12.8%

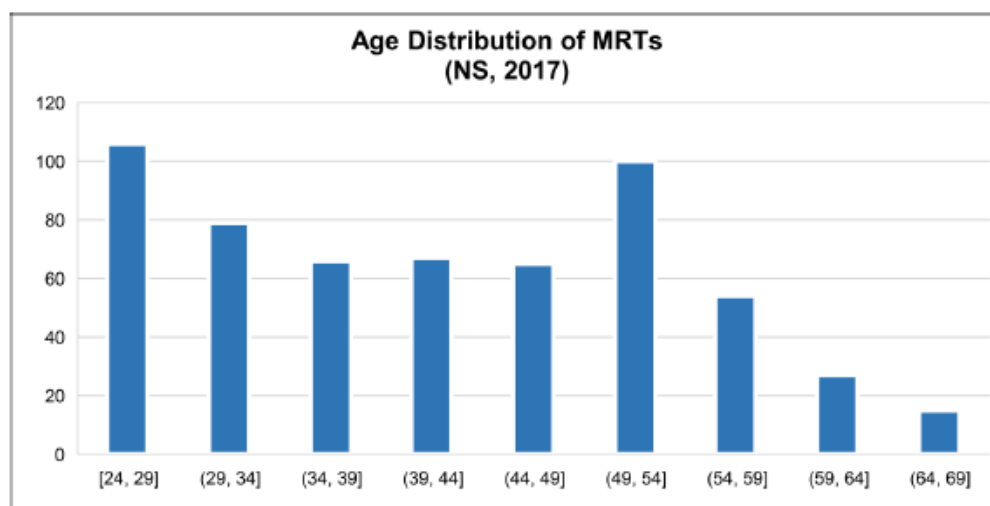
Questions regarding this Provincial Profile can be directed to:
 Scott Luff
 Research and Statistical Officer 3
 Health Workforce Planning and Regulatory Affairs
 NS Department of Health and Wellness
 E-mail : scott.luff@novascotia.ca

¹ Inflows and outflows are calculated based on the Canadian Institute for Health Information's definitions of these terms, which is as follows:
 The term "inflow" refers to the number of registrants entering the profession in a jurisdiction. This includes new graduates, those migrating from another Canadian jurisdiction or foreign country, and those returning after an extended leave from the profession. The term "outflow" refers to the number of registrants leaving the profession in a jurisdiction. This includes those exiting the profession, those migrating out and registering in another Canadian jurisdiction or foreign country, and those going on extended leave from the profession. CIHI, Regulated Nurses Report—2013
 Note: The time period is for one year preceding the registration closing date. The date range for this profile is: January 1, 2017 to December 31, 2017

DRAFT: Nova Scotia's Provincial MRTs Profile, 2017



Note: Bin 24-29 includes members under the age of 24. Bin 64-69 includes members over the age of 70

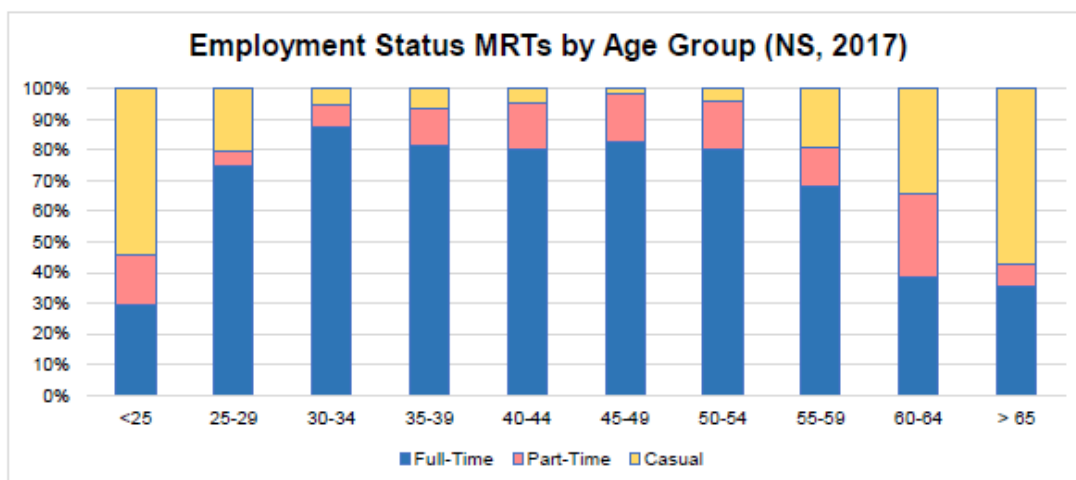


- Experience profile of the MRT workforce:
 - 0-5 years of experience: 23.0% (131) vs 21.7% in 2016.
 - 6-30 years of experience: 58.7% (334) vs. 54.6% in 2016.
 - More than 30 years of experience: 18.3% (104) vs. 23.7% in 2016.

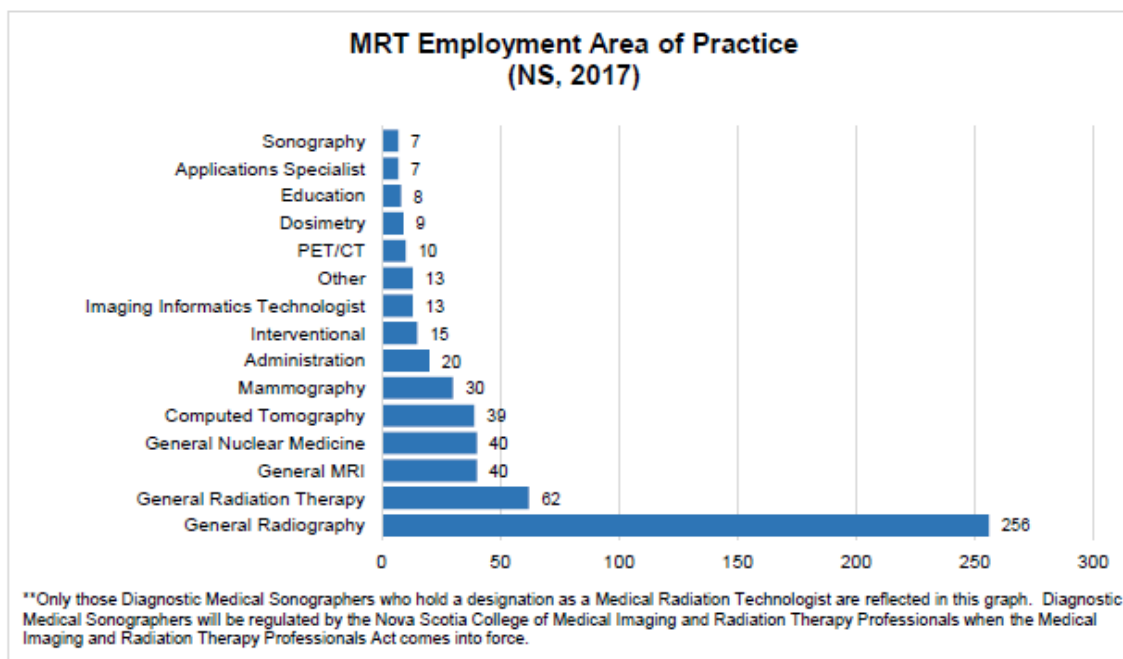
DRAFT: Nova Scotia's Provincial MRTs Profile, 2017

Employment

- Of the 577 MRTs registered in 2017, 98.6% (569) were employed at the time of registration.
- Of the 569 MRTs employed in 2017:
 - 74.5% (424) were working permanent full time positions.
 - 12.8% (73) were working permanent part time positions.
 - 12.7% (72) were working in casual positions.



- The graph below shows the Areas of Practice reported by MLTs who registered in Nova Scotia in 2017:



Student Report

As of Sept 2017 there are 63 student members composed of 40 RTR and 23 RTNM students.

In 2017 students were given 3 opportunities to write their exams. In September 2016 a computer system was trialed successfully and exams are now delivered online through exam centers. This change in exam delivery means NSAMRT is no longer involved in proctoring exams or arranging writing centers.

Exam results only indicate province exam was written in not province where education received. This means if an individual attend a program in Ontario but wrote their MRT exam in Nova Scotia they would be listed under Nova Scotia results not Ontario results. The results for those who challenged the exam in Nova Scotia are below. CAMRT's annual report gives national exam results for each year.

January 2017 saw one Canadian Educated student successfully challenge the MRI exam.

May 2017 saw thirteen Canadian Educated students successfully challenge the Radiation Technology exam and nine Canadian Educated students successfully challenge the Nuclear Medicine exam.

September 2017 two Canadian Educated MRTs successfully challenged the Magnetic Resonance exam as a 2nd license and one Internationally Educated student unsuccessfully challenge the Radiation Technology exam.

January 2018 one Canadian Educated student unsuccessfully challenged the Nuclear Medicine exam and one Internationally Educated student unsuccessfully challenge the Radiation Therapy exam.

CONGRATULATIONS TO ALL SUCCESSFUL CANDIDATES.

Respectfully Submitted,
Julie Avery BSc, MHA, RTNM, CTIC
NSAMRT Registrar

VOLUNTEER COORDINATOR REPORT

Our volunteers have been working hard this past year on the many projects within the NSAMRT, ranging from our annual fall education session, a new collaborative Atlantic conference, our newly launched social media presence, and to our developing standards of practice. My first year on the board has been focused upon communicating with our volunteers, and learning how I can best perform this role.

In an effort to communicate with our membership more effectively, we have been using 'Site Champions'. These volunteers help to locally circulate pertinent info regarding NSAMRT news, in addition to our typical e-Blasts and website updates. Unfortunately, not all areas of the province were well represented, and I have been actively recruiting Champions to fill gaps within our more rural regions. We currently have 20 Champions across the province, having added additional volunteers within the South Shore, South West and Annapolis Valley regions improving our geographical diversity.

Most of our committees have had single member changeover, with replacements being found shortly after vacancy being declared. At present we currently have vacancies on the following committees:

- Communications -Radiation Therapy
- Finance -Public
- Fitness to Practice- Nuclear Medicine / Sonography
- Professional Conduct -Nuclear Medicine

In addition to these member vacancies, Fitness to Practice is seeking a new chair to head the committee. Though we are currently building a reserve of volunteers, individuals who have expressed interested in doing more with the NSAMRT, they do not fulfill the discipline makeup desired for these committees. While my goal was to fill vacancies with already engaged volunteers, a call of volunteers will be necessary in the near future. If you are interested in becoming a volunteer as a site champion, committee member or for a working group for a specific special project please contact me at corymcneil@nsamrt.ca.

Growing the skills of our volunteers is important, particularly in areas that directly relate to NSAMRT business. Two directly related educational opportunities were provided in 2017, a Governance Workshop and a Privacy Workshop. The Governance Workshop was offered on October 4th, 2017 with guest speaker Karen Stone providing insight toward good governance as we work toward becoming a self-regulating college. This opportunity was open to all members of the NSAMRT, not just volunteers. This session served as a test, to see how we perform

providing content via live attendance and simultaneous electronic meeting format, as we try to be more geographically inclusive.

The NSAMRT has recently moved toward using tools like Office 365, OneDrive and SharePoint to conduct our business. These new tools help prevent knowledge loss with volunteer turnover and help us be more efficient, but they also open up new risks within our digital world. With this in mind a limited enrollment hands-on Privacy Workshop was offered November 4th, 2017. The NSAMRT was able to accommodate all volunteers who expressed interest in attending.

Our volunteers have varied backgrounds with many skillsets outside of their primary profession. As we grow as an organization, it is important we pair people where they will thrive based on these skills. My 2018 goal as Volunteer Coordinator is to develop a skillset matrix to assess competencies of incoming and current volunteers. From this information we will be able to better utilize our volunteers based on their strengths and work on providing opportunities for them to learn new skills.

I would like to personally thank all of our committee chairs, committee members, site champions and other volunteers within the NSAMRT. We are an association that runs on volunteers and we would not be able to achieve what we have without our past and present volunteers. Again, if you would like to volunteer with the NSAMRT please contact me at corymcneil@nsamrt.ca, I am certain we can match you with a fulfilling opportunity.

Respectfully Submitted,



W. Cory McNeil, BSc, BHSc, RTNM, CTIC

EDUCATION COMMITTEE REPORT

Chair: Shawna Baughman RTR

Members:

Erin Lushman U/S
 Chrissy Gamache RTR
 Michael Lelievre RTR
 Jennifer Taylor RTNM, RTMR
 Hannah Connolly RTNM
 Natasha McMaster RTT
 Brianna Sutherland (Student rep Nuc Med)
 Nicole MacMullin (Student rep Nuc Med)
 Christina Kelly (Assisted with 2017 Education Session)

Meeting Dates:

April 6th, 2017	Sept 21st, 2017
June 17th, 2017	Oct 19th, 2017

Achievements:

- Implementation of the new awards program and application form
- Revision of education session feedback form
- Successful fall education session
- Funded 6 lunch and learn events

Concerns/Issues:

- Education Chair stepping down in the spring/recruitment for replacement

Current Work:

- Budget
- Lunch and learn report
- Organization of education committee files and manual

Future Work:

- Awards program marketing and advertising to encourage members to apply or nominate
- Hold lunch and learns and education days

Respectfully Submitted,
Shawna Baughman RTR
Education Committee Chair

COMMUNICATIONS COMMITTEE REPORT

Chair: Chrissy Gamache RTR

Members:

Krista MacInnis RTR
 Becky-Anne Brydon (Public)
 Amy Munroe RTR
 Krista Simpson U/S
 Nichole Smith RTNM
 Natasha McMaster RTT
 Sara Goode U/S

Meeting Dates:

Feb, March, Oct, Nov, Jan, Feb

Achievements:

- NSAMRT's Facebook and LinkedIn pages were launched on January 31st, 2018
- Three major documents were created this year – Social Media Strategy, Social Media Crisis Management Plan and the Social Media Policy.
- Many e-blasts and blog updates have gone out to the membership.
- MRT Week Ads were placed in the Chronicle Herald as well as an online newspaper in an effort to attain a greater reach.

Concerns/Issues:

- We are in need of a Radiation Therapy rep, as Natasha steps down.
- Proper training/resources for managing social media platforms.

Current Work:

- Ensuring the College website is 100% ready for proclamation.
- Creating content for use on the Facebook page and drafting responses for PR use.

Future Work:

- Improved MRT/Sonography week ads
- Social Media Advertising

Respectfully Submitted,

Chrissy Gamache BHSc, RTR

Communications Committee Chair

BY-LAWS COMMITTEE REPORT

Chair: Brandon Hardy BHS, RTNM, CRPA(R)

Members:

Megan Brydon BHSc, RTNM

Colleen Keoughan RTR, RDMS, RDCS, CRGS, CRCS-AE

Greg MacLean BSc, RTNM, RTMR

Jonathan Murphy BHSc, RTNM

Sherry Chauder RTR, RDMS, CRGS

Meeting Dates: March 25, 2017

Achievements: The committee has revised the current version (18) of the Bylaws to incorporate all feedback received from the McInnes-Cooper legal team.

Concerns/Issues: none.

Current Work: The draft bylaws document is not complete as it awaits recommendations from the legal team on the following matter;

Suggestion 21: Add a section to the by-laws approving a code of ethics and standard of practice

The By-laws team felt that this was unnecessary as it is located in the Act.

Future Work: The committee has a near complete document prepared in draft 18 of the Bylaws. The committee will continue to await any future guidance on insertions or deletions from the Board and legal team.

Respectfully Submitted,

Brandon Hardy BHS, RTNM, CRPA(R)

By Laws Committee Chair

CREDENTIALS COMMITTEE REPORT

Chair: Lisa Bonin RTNM

Members:

Chrissy Gamache RTR

Anna Steeves U/S

Rebecca Jessome RTNM, RTMR

Julie Avery RTNM

Jack Chisholm RTT

Katie Perro RTR

Meeting Dates:

February 9, 2017

April 5, 2017

September 13, 2017

October 11, 2017

Achievements:

- Submission of a complete, first version of the CPD document to the Board (Fall 2017)
- Refinement of CPD registrant reference material: FAQ, Research Rubric, Sample Credit Profile, Quick Reference Guide (Summer 2017)
- Preparation of a handout for registrants attending site visits (Spring 2017)
- Email responses to all registrants with concerns regarding site visits and CPD (Summer 2017)
- Tabulation of registrants' CPD concerns, committee meeting for discussion and amendments, as necessary (Fall 2017)
- Creation of Registrant Feedback and Committee Revision (with descriptive rationale) document for distribution at Town Hall (Fall 2017)
- Representation at The Canadian Information Centre for International Credentials (CICIC) Seminar for collaboration regarding credential assessment of immigrants (Spring 2017)

Concerns/Issues:

- Need for Sonographer and general public representatives on committee

Current Work:

- Drafting of summary and quick reference documents regarding CPD

Future Work:

- Developing credentialing review processes and standards for Sonographers

Respectfully submitted,

Lisa Bonin BHSc, RTNM

Credentials Committee Chair

FITNESS TO PRACTICE COMMITTEE REPORT

Chair: Stephanie Schofield RTR

Members:

Bev Barrios RTR

Jeremy Myshrall RMR

Thomas Ashford RTT

Nina Reddick RTR

Meeting Dates:

Oct 3, 2017 (teleconference)

Achievements:

This was an inaugural meeting to introduce members and to discuss the committee's purpose.

Concerns/Issues:

A new chair is needed, as well as US and NM representation.

Current Work:

Developing hearing process. Using available models as guidelines to have committee review.

Future Work

Continue to develop processes for hearing fitness to practice issues.

Respectfully submitted,
Stephanie Schofield RTR
Fitness to Practice Chair

NOMINATIONS COMMITTEE REPORT

Chair: Chris Rodgers RTR; Julie Avery RTNM

Members:

Jennifer Sperry RTNM

Chris Rodgers RTR

Shaun Naugle RTT

Meeting Dates:

March 2017

Achievements:

Recruited for and successfully filled board vacancies/election for 2017

Advertised and recruited for upcoming board vacancies (2 positions) for 2018 election.

Concerns/Issues:

Committee TOR need to be reviewed for membership requirements.

Current Work:

2018 Election process

Future Work:

Develop written processes for nomination and election of board members to increase organizational memory and assist incoming chairs and committee members in fulfilling responsibilities of committee in a consistent transparent manner each year.

Respectfully Submitted,

Julie Avery RTNM

Nominations Chair

POLICY AND PROCEDURE COMMITTEE REPORT

Chair: Julie Avery RTNM, CTIC

Members:

Susan Delaney RTR

Nicole Deveau RTR

Sara Goode DMS

Jennifer Kressbauch DMS

2017-18 Meeting Dates:

May 31st

Sept. 12th

Nov. 1st

Dec. 13th

Achievements:

The policy committee has been working hard to generate the required policies to help NSAMRT run the organization in a consistent and transparent manner. This year they have completed and signed into effect:

16 policies

1 position statement

Concerns/Issues:

The principle concern of the committee is identifying an individual willing to chair committee or join the committee with goal of becoming chair after a year of membership.

Future Work:

The policy committee has completed all policies they were working on so are now in process of identify work plan for 2018. The Committee hopes to complete approximately a dozen policies/position statements in 2018. In particular they hope to develop processes and policies to cover privacy breaches, and to cover criminal records checks and vulnerable sectors check.

Respectfully Submitted,

Julie Avery RTNM, CTIC

Policy and Procedure Chair

PROFESSIONAL CONDUCT COMMITTEE REPORT

Chair: Kelly Lawrence RTR

Members:

Amanda Boyd RTMR , RTNM
Jennifer Carey (NB) RTR
Lynsey Davey RTR, RTMR
Erica Fraser ARDMS

Jenny Jones RTNM (resigned)
Burt Langille RTR
Louise Lewis U/S (resigned)
Cory McNeil RTNM, RTMR
Raymond Wright RTT

Meeting Dates:

- January 31/17 (video-conference)
- May 6/17 (in person)
- September 6/17 (video-conference)
- November 9/17 (video-conference)
- December 12/17 (video-conference)
- February 1/18 (video-conference)

Achievements:

- Developed a draft Standard of Practice document.
- A consultant was hired to write the SOP. We have been working with Leanne Worsfold from iComp Consulting. The Standard of Practice document is coming along nicely and should be completed soon.

Concerns/Issues

- We lost a member representing Nuclear Medicine from the Halifax area. It would be ideal to fill this spot with someone from Nuclear Medicine from somewhere other than Cape Breton as we have one already.

Current Work

- Standard of Practice document

Future Work

- In the spring we will start working on processes for hearings and discipline.

Respectfully Submitted,
Kelly Lawrence RTR
Policy and Procedure Chair

2017-18 FINANCE COMMITTEE REPORT

Committee Chair: Dave McAloney, BSc(MRS), RTT

Members:

Megan Brydon, MSc(c), BHSc, RTNM (Past Treasurer/President)

Julie Avery BSc, MHA, RTNM, CTIC(Executive Director)

Kelly Maloney RTNM (Past Treasurer)

Diana Sheppard BSc, DHSc, RTR, CBI

Meeting Dates:

March 15th 2017

May 8th 2017 –teleconference

May 15th 2017

Oct 16th 2017- teleconference

Achievements:

The NSAMRT finance committee was able to build upon our current fiscal operations during the 2017-18 fiscal year. Among the general duties of reviewing and approving expense claims the finance committee was also able to complete multiple financial reviews and analysis of proposed budget expenses. This includes;

- office rental
- office supplies (document storage)
- communications (video conference platform)
- Salaries and wages.
- registration platform with the addendum of a continuing professional development module included

In the process of costing out the RFP for the registration platform it became apparent that NSAMRT's policy for reserve funds needed to be updated as the special projects fund cap is inadequate to allow for larger one time projects.

Concerns/Issues:

The finance committee lost their public member this year. It has been noted that it is difficult to recruit a public member and we are currently attempting to fill this position. If anyone knows an accountant that may be interested in sitting on the committee please contact info@nsamrt.ca . The time commitment is reasonable as the finance committee meets in person only a couple of times each year with the remainder of meetings being held electronically.

There is still some difficulty predicting expenses related to proclamation of the NSCMIRTP. Once we become proclaimed and based documents are processes of NSCMIRTP are developed our costs should become more stable.

Current Work:

The finance committee still continues to work on consistent financial reporting practices to demonstrate fiscal stability and transparency. We now follow reporting practices that align with our audited statements by MNP. Pathfinders has provided us with more accurate financial statements as they are now aligned with our budget and reporting practices. The finance committee recommends dues rates remain stable as current revenue covers projected expenses and is updating reserve policy to keep in line with needs of organization.

Future Work:

As stated above the finance committee will continue to improve our reporting practices to improve stability and transparency. In the coming year finance committee would like to decrease current percentage transaction fee being levied for credit card transactions as we are paying above industry standards. This expected to be resolved with the adoption of the new registration platform. Finance committee would also like to develop an investment policy for reserve funds of the organization.

Respectfully submitted,

Dave McAloney BSc(MRS), RTT
NSAMRT Treasurer

Minutes

**Nova Scotia Association of Medical Radiation Technologists
77th Annual General Meeting
June 3rd, 2017
13:00 – 15:00
Rodd Grand Hotel, Yarmouth, NS**

Bourinot's rules of order followed.

1.0 Call to Order & Roll Call of Executive Council

1.1 Regrets from J. Bower, 30 Voting Members Present

1.2 President's Welcome

Welcomed distinguished guests Brad Fitzgerald and planning committee
Brian Baxter, Chris Topham, Past Presidents of NSAMRT, President of CAMRT
Karren Fader, Committee Chairs and committee members and Life member
Dorothy Archibald

2.0 Approval of Agenda NSAMRT 76th AGM

Motion: Melissa Sponagle

Seconded: Karren Fader

Amended 6.3 CPD update (Chrissy Gamache)

Motion carried

3.0 Approval of the NSAMRT 75th AGM Minutes

Motion Greg MacLean

Seconded Cory McNeil

All in favor motion carried

4.0 Business Arising

No business arising from minutes.

5.0 New Business

5.1 Annual Reports

1. Annual Reports

Motion to approve reports: Dorothy Archibald

Seconded: Kelly Maloney

5.1 Executive Council

5.1.1 President's Report: presented by Megan Brydon

Some highlights:

Moving forward our executive director will now be working 30hrs/week

An integration of business and membership

Purchase of document storage and sharing platform

Supporting education and raising member profiles

Atlantic Conference for MRT's: Summerside, PEI April 27-28, 2018

Theme: "Self Care to Patient Care"

Facebook Page coming

Regulations are next to go to legislature

T. Munro: Will there be changes to the regulations based on the time frame when they were proposed to now, is there a plan to deal with that?

M. Brydon: We know that even before the regulations are looked at there are changes to the style and approach by the provincial government. Our legal counsel, McInnes Cooper, has experience with these changes with other health groups. We are confident with their direction we will be able to make the necessary changes.

5.1.2 Executive Director's Report: Presented by Julie Avery

Some Highlights:

16 Site visits and lots of engagement from the membership around feedback on the draft of the new CPD requirements

Currently searching for a new registration platform and CPD portfolio management system

Standards of Practice document is near complete and working with New Brunswick to share costs with expectation of hiring consultant in fall and final document next spring

Recently adopted SharePoint for document storage, email and document sharing and collaboration. Will improve communication and security of information.

Have finalized minimum data set with department of Health and Wellness.

We will be able to better understand the demographics of our registrants. An initial report was included in the annual report.

T. Munro: Will you be anticipating a need for Pathfinder's or have you had that conversation yet?

J. Avery: We have not had that conversation but Pathfinders is concerned as we are their employer. This would be an executive council's decision; Megan would you like to speak to that?

M. Brydon: Currently we use Pathfinders for registration and managing financial transactions. With a new registration platform, we will have access to a database allowing us to directly find the data without having to ask someone else to do it, so more hands on. This will not change everything Pathfinders does for us but it will change our ability to access information.

J. Avery: One issue around access is if you need a registration card, we currently require Pathfinders to produce it. If the one person who handles our file is off sick then it does not get done. If we move away from pathfinders we will still need someone for accounts payable and receivable. We can do registration amongst ourselves but not the finances.

J. Williamson: Is NS health doing payroll deduction?

J. Avery: Currently yes all NS health employers are participating. In the fall we will be making one change, when you register it will be an **Opt IN** choice for you to select. Not eligible if casual. You must select the option for payroll deduction if you do not you will have to pay NSAMRT directly when you register.

J. Williamson: This saves money?

J. Avery: This saves thousands of dollars in credit card and processing fees.

K. Fader: Is the database information we collect set by the healthcare regulation group?

J. Avery: Yes, aggregate only non-identifying, will not be able to identify an individual person, there can be no less than 5 in a data set.

M. Brydon: Julie was able to sit at this provincial working group with the Department of Health and Wellness to discuss the data that would be collected to avoid identification of sub specialties.

M. Brydon: Are there any questions regarding the remainder of the reports, excluding finance?

K. Fader: Since so much time has passed since we passed in our regulations in 2013, has there been thought about the amount of work required to bring the regulations up to current standards?

M. Brydon: Yes, working with legal counsel and anticipating lots of work will have to be done to refresh and to update the newer organizational staff.

J. Avery: An advantage to the delay it has given us time to consider the document more thoroughly.

Motion to accept the member service and regulatory committee reports

Motion: Will Creene

Seconded: Karren Fader

All in favor motion carried.

5.1.3 CAMRT Director's Report

5.1.4 Registrar's Report

5.2 Member Services Committee Reports

5.2.1 Education Committee Report

5.2.2 Communications Committee Report

5.3 Regulatory Committee Reports

5.3.1 By-Laws Committee Report

5.3.2 Credentials Committee Report

5.3.3 Nominations Committee Report

5.3.4 Policy and Procedures Committee Report

5.3.5 Professional Conduct Committee Report

5.4 Finances

5.4.1 Treasurer's Report: Presented by Dave McAloney

K. Fader: We have \$40 000 in unallocated funds, as a non-profit organization should we be spending this money? Or investing? Are there areas that we should be spending money on that we are currently not?

M. Brydon: The change in dues rate has changed how we do business, but we still have some historical apprehension about spending money. Now with a larger budget, we are able to be more proactive in how we allocate and use money. This year was a big transition for us, with staff and an increased budget and we are learning. We have initiatives that we will be investing in, but haven't yet. This is a thought process change about investing in our members but also trying to be cost effective. One area we have invested in is consultants to fill a knowledge gap. An area we want to invest more in is education of our board and committee members. For instance, sending people to CAMRT leadership workshops and extend the ½ day committee sessions to more members. More money brings more considerations for sure.

K. Fader: It is a misconception that fiduciary responsibility is just financial.

M. Brydon: Right, it is actually all value for the organization.

T. Hatfield: So people are thinking, you increased the dues and now there is all this money

M. Brydon: True, our projections were higher than the costs, and we have increased Julie's FTE. We also had some savings that predate the dues increase. We have several items where the funds are earmarked including registration platforms, software etc. We also are continuing to contribute to our contingency funds.

J. Avery: Also our contingency fund must go to at least \$250 000. Most of the money currently in this fund was from prior to the dues increase.

T. Hatfield: I just want you to know what some people are thinking.

M. Brydon: It's good to say these things. It takes time for us to vet the SharePoint and platform and purchases, RFP and selection process before we make such significant investments.

J. Avery: We are starting to identify the gaps in the committee chairs and how we can invest in them. For example if we identify the need to send the treasurer to a financial course this makes sense. These things are not in their wheelhouse. They need support. We are learning the needs first before we spend the money.

C. McNeil: Are there other ways to improve efficiencies, like what was done with the credit card fees?

M. Brydon: We can save time with payroll deduction which is a great help, we can eliminate time and money that Pathfinders will need for this process.

K. Hitchman: Last year our dues were increased but they were rolled back, we didn't pay the original amount?

M. Brydon: Originally the call was based on fulltime ED and a few other items, and there a significant amount of feedback. We came back to the table and asked "what was the bare minimum of dues increase that we needed, and identified the "must haves"." Also, when the Sonographers join that will be extra members (and dues) that we did not have before, and how can we build that into our projections. So the dues rate was adjusted and divided over 2 years.

K. Hitchman: So there is another increase this year?

M. Brydon: No. Absolutely not. There was a rumor that our dues were increasing but it is NOT the case, it may be from New Brunswick which started phase 1 of a dues increase.

K. Fader: Under revenue where is the extra \$10000 for miscellaneous?

M. Brydon: Combined lines, revenue from vendor from events and NSSDMS for website (college) which they have paid for half of.

Post-AGM note*** This was a misstatement. The NSSDMS contributed the funds for the website in the previous year. In fact, \$7682.00 of this income was based on the profit share agreement the NSAMRT had with the CAMRT in hosting the 2016 CAMRT AGC.

M. Sponagle: We have invested in refresher programs for radiography and nuclear medicine but is there a plan for the other modalities?

M. Brydon: Nationally not a lot of interest but there are products out there that fill the gap. That does not mean we are opposed or not interested in the future.

J. Avery: We were approached by Alberta, for someone interested in MRI refresher. This is a niche we may be able to help with at some point, however our priority must be getting ready for proclamation, there is lots of work to be done and there is only so many volunteers and so many hours.

M. Brydon: If anyone is looking for a thesis project...

5.4.2 2017-2018 Budget

5.4.3 Income Statements

Motion to accept the Treasures Report and 2017-18 Budget

Motion Patrick Bernard

Seconded Nicole Smith

All in favor motion carried

6.0 Additional Business

6.1 Election Ratification

Only 1 nomination for president and 3 for the 3 vacant positions, no vote required.

Acclamation of positions.

Elected

Megan Brydon as President

Cory McNeil and Nicole Deveau and Dave McAloney as executive members

Motion to accept the acclamation: Kim Hitchman

Seconded: Chrissy Gamache

All in favor, motion carried.

NSAMRT received a refund from simply voting as no election was held.

6.2 Appointment of Auditors

Motion to accept MNP as the financial reviewers 2017-18

Motion: Mellissa Sponagle

Seconded: Dorothy Archibald

All in favor motion carried

6.3 CPD updates

Lots of feedback not finished. Please send all feedback by Aug 31st to info@nsamrt.ca

Lots of research and work being done on this. The 30+ page document should be available by the fall education day. Great feedback and engagement.

6.4 78th Annual NSAMRT AGM location: TBD, in NS.

6.5 Acknowledgements

6.5.1 Thank you to Krista MacInnis and Paul Menhennett outgoing executive members.

6.5.2 Karren Fader thanked Megan and Julie and the executive for the work they have done.

7.0 Adjournment

2:25pm

Motion to adjourn Cory McNeil

Seconded Kim Hitchman

Respectfully Submitted,

Stephanie Schofield

NSAMRT Town Hall Meeting

November 4, 2017 Dartmouth, NS

In attendance- 42 voting members

Introductions and Thanks- Megan Brydon, President of the NSAMRT, welcomed everybody and introduced the Executive Council

Update and presentation- Julie Avery followed with an update on the NSAMRT with a PowerPoint presentation. This covered primarily registration, including the new registration platform, and upcoming CPD processes with the implementation of the NSMIRTP

Introductions and Thanks- Megan Brydon, President of the NSAMRT, welcomed everybody and introduced the Executive Council

Update and presentation- Julie Avery followed with an update on the NSAMRT with a PowerPoint presentation. This covered primarily our new office space, registration, including the new registration platform, regulation status, new social media presence, CPD updates, Standards of practice and code of ethics, proposal for a new strategic plan and status of a free Atlantic Conference in 2018. The PowerPoint with speaking notes can be viewed on the NSAMRT website under [updates](#).

There were discussions between the members and the executive pertaining to the process involved when a member is non-compliant with registration or CPD following the Dec 31st deadline. The employer is contacted to bring awareness to any delinquent members and an email is sent to the member(s) as well. Concern was expressed regarding the delivery of notification for dues renewal. In an effort to minimize the volume of emails, it was decided to combine the notice of registration with the Education Day email. It was noted, however, that this resulted in people not realizing it was also the renewal of dues notice. It was decided that, moving forward, notice of dues renewal will be sent out as an independent email in order to avoid further confusion. It was also mentioned, that with the implementation of the new registration platform, automated reminder emails will be generated to the members through the system.

Respectfully Submitted,



NSAMRT Site Visits 2017

Throughout May & June, 2017, Julie Avery, Executive Director of NSAMRT, and a member of the NSAMRT executive council visited clinical sites across the province. The intent of the visits was to have an opportunity to talk with as many technologists and therapists as possible. One of the main topics of discussion was the proposed CPD program. NSAMRT received great feedback and we have created a document to share with members on themes identified and how feedback was addressed and incorporated into the CPD program. The full program draft is located on the website under updates for members to review.

We visited the following clinical sites

- *Aberdeen Regional Hospital*
- *Amherst Regional Hospital*
- *Cape Breton Regional*
 - *DI*
 - *Cancer Center*
- *Cobequid Health Center*
- *Colchester Regional Hospital*
- *Dartmouth General Hospital*
- *Halifax Infirmary*
- *IWK Health Center*
- *NS Cancer Center – Halifax*
- *South Shore Regional Hospital*
- *Stadacona*
- *St. Martha's Regional Hospital*
- *Valley Regional Hospital*
- *Victoria General Hospital*
- *Yarmouth Regional Hospital*

We also offered teleconferencing to the following sites:

- *Buchanan Memorial*
- *Eastern Shore Memorial*
- *Glace Bay*
- *Guysborough Memorial*
- *Hants Community*
- *Inverness Consolidated*
- *Musquodoboit Valley Regional*
- *New Waterford*
- *Northside Harbour View*
- *Sacred Heart*
- *St. Mary's Memorial*
- *Strait-Richmond*
- *Twin Oakes Memorial*
- *Victoria County*

Registrant Feedback on CPD Program and Credentials Committee Adjustments/Rationale

NSAMRT would like to thank everyone that shared their feedback through emails and site visits. The credentials committee identified the main themes in the feedback received and wanted to share with the members how each of these concerns were addressed and the rationale for how they were addressed. This is a living program and will continue to change with time. Feedback is always welcomed and encouraged from members. Please send any you may have to info@nsamrt.ca

1. 30 credit requirement every two years is too much

- The Credentials Committee completed extensive research into a variety of literature as well as several other professional Associations and Colleges across Canada. It was determined that our format is in keeping with the other examples and is broad in scope, fair and attainable for its registrants. 30 credits/2yrs is one the lowest requirements of all the Canadian MRT CPD programs.

2. Casual/Part Time workers should not have to earn the same 30 credits/2yrs

- The Continuing Professional Development (CPD) Program will be mandated, by law, for all NSCMIRTP registrants, regardless of hours worked. It is imperative that the public be assured that every technologist, therapist and sonographer under the NSCMIRTP is upheld to the same practice standards.

3. Registrants in rural areas do not have the same opportunities/can't get 30 credits/2yrs

- There is no denying CPD will be easier to attain for some and harder for others. The program was designed with all registrants in mind. It is broad enough so that even registrants with many limitations (travel, finances etc) will be able to attain the necessary 30 credits every 2 years. Please see the attached example demonstrating the possible credit earning activity of one such registrant over a two year cycle.

4. Registrants on a leave of absence (LOA) should not have to maintain CPD

- If a registrant resigns prior to beginning a LOA, credit earning activity will not be required during the period they are on leave. If/when a registrant reinstates, required credits will be prorated for the remainder of the cycle.

- If, however, a registrant maintains their licensure throughout a LOA, they must adhere to the required CPD like all other registrants.

5. Difficult to attain credits in my field (PACS, Applications, Managers, Educators etc..)

- Credits do not have to be earned from discipline specific activity alone. The program is broad enough to include many educational activities that could pertain to your practice. Applications for credit approval are also available for activities not found on our suggested lists.

6. Preceptorship is undervalued. There should also be a value for a lead preceptor role.

- This has been adjusted from 3 credits if >35hrs to now 1 credit every 8 hours of direct supervision of a student. A max of 15 credits is also in place. A lead preceptor may add 1 credit per year.

7. CPR and eLearning courses should count for credits

- CPR recertification has been added as an accepted credit earning activity. E-Learning courses were already accepted for CPD credits. Refer to chart for values.

8. Attending a conference (vendor/healthcare/professional) should be treated the same

- All conferences are now being treated the same and credit values adjusted to 1 credit = 1 hour of lectures, with a max of 20 credits.

9. Organizing a lecture shouldn't be the same credits as a full day of training

- A rubric has been created for determining the appropriate credit value, based on time and effort, in regards to organizing/developing any kind of educational activity.
- The half day/full day training has been increased from 1/2 to 2/4 credits respectively.

10. Volunteering on a committee should be worth more

- This has been increased for both Professional and Hospital-based committees. Please see chart for values. It was agreed however, the commitment typically required for a hospital-based committee was measurably less and is therefore reflected in the credit earning value.

11. Published/Rejected articles should be worth more

- All articles submitted to a peer reviewed journal now have a credit value of 15. The committee reserves the right to determine if full credit value is warranted for rejected articles/papers, based on the feedback/rejection letter the registrant receives from journal.

12. Scientific poster should be worth more

- This item has been increased from 2 credits to 5 credits, with a max of 10.

13. 3 credit hour courses should be worth more

- This item has been increased from 10 credits to 15 credits, with a max of 15. The quick self-study courses were not adjusted as they take an average of only a few hours to complete.

14. Lab demonstrator: should be worth more vs should not be credit earning at all

- This item has been increased from 1 credit to 2 credits per course. Although it is a paid position, it is a weekly commitment and informative. Therefore, it remains a valid credit earning activity.

15. Software/equipment/vendor training/applications should be credit earning

- This was always a credit earning activity, but the values for half day/full day training, workshops etc have been increased from 1/2 credits to 2/4 credits respectively, with a max of 30.

Other items adjusted upon review include:

- reading a journal article (was max of 3, now max of 5)
- lunch and learns/rounds (was max of 5 now max of 10)
- a full literature review/meta-analysis (now 10 credits, max 20)
- accessing webinars, podcasts, eLearning courses etc (now 1 credit=1hour watched, max of 15).

Rubrics have also been created to help determine the appropriate credit value for the wide array of research activities, CPD development activities as well as requests for credit approval of new activities.

Registrants are also reminded that the CPD Program is a "living document". It will be reviewed annually and revised as necessary. Registrant feedback is always welcomed and taken into consideration.

Example CPD Portfolio

This is an example of how a MIRTP might achieve the required 30 CPD credits assuming the MIRTP has all the following listed limitations. It is unlikely any MIRTP in the province of Nova Scotia is facing all of these limitations simultaneously.

- No ability to volunteer on work place committees
- No student preceptorship
- No access to LMS which offers free online courses
- All credits must be at no financial cost
- No ability to travel

Given the limitations set for this example CPD program, many of the credits are video based. Numerous credits which are general in scope have been selected, but all MIRTPs can choose to select items more specific to their interests. I located free electronic educational webinars covering topics such as informatics, radiation therapy, radiography, nuclear medicine, MRI, education and management allowing for MIRTPs to tailor their CPD program to their needs. In addition it is expected that most MIRTPs will have access to other free CPD activities which can be included as credits towards their required credits. These credits will likely make an individual's CDP portfolio more varied than this example one, with more CPD credits earned from work related activities. A few examples of other likely sources of CPD credits include, but are not limited to;

- Preceptoring students
- Lunch and learns
- LMS courses
- Fall Education Seminar
- Vendor sponsored education covering technology/medication changes
- Radiology research days
- Research activities that meet CPD requirements
- Peer Review processes associated with work

In addition many MIRTPs will have accessed education that has costs and/or travel associated with the activity that can be counted towards CPD including but not limited to;

- Conferences
- Courses
- Volunteering with a professional body

Example CPD Portfolio: Credits were spaced over 24 month period but does not have to be.
Credits can be earned anytime during the defined reporting period.

Date	Activity	Credits	Proof
Nov 2017	Read a journal article	1	Upload Article
Dec 2017	Volunteered as Site Champion for NSAMRT for 2017	2	Listed with NSAMRT as volunteer
Jan 2018	Nothing	0	N/A
Feb 2018	Delivered informal Q&A session with cardiac unit re proper prep for MIBI and MUGA exams (this could be education of proper PACs usage for nurse, or CT prep etc)	2	Date/Time/Location # attendees Announcement of event
March 2018	Webinar Adolescent Imaging BCAMRT	1	Link
April 2018	Every Doctor Makes Mistakes Ted Talks	1	Link
May 2018	CPR Recertification	2	Certification Uploaded
June 2018	Compassion Fatigue and Visualizing the Data Explosion Ted Talks	1	Link
July 2018	Implementation of CRT System - Medatronic	1	CME Credits
Aug 2018	Read journal article	1	Upload Article
Sep 2018	Reducing Patient Exposure -Nuclear Cardiology –Short Self Study CAMRT	2	CME Credits from CAMRT
Oct 2018	Aunt Minnie case reviews (4)	1	Screen shot last page
Nov 2018	Nothing	0	N/A
Dec 2018	Was volunteer as Site Champion for NSAMRT for 2018	2	Listed with NSAMRT as volunteer
Jan 2019	PACs Webinars (pick own topic assume you listen to 2 one hour talks)	2	Link
Feb 2019	Webinar Professionalism BCAMRT	1	Link
March 2019	Nothing	0	N/A
April 2019	Present interesting cases, or patient care issues, or process failures etc... to targeted audience of MRTs, nurses, administration etc..	2	Date/Time/Location # attendees Announcement of event
May 2019	Read a journal article	1	Upload Article
June 2019	Transforming Healthcare for Children and Families Ted Talks	1	Link
July 2019	11 places to get free CME credits in Diagnostic Imaging (pick own topic assume you listen to 2 one hr talks)	2	CME credits
Aug 2019	11 places to get free CME credits in Diagnostic Imaging (pick own topic assume you listen to 2 one hour talks)	2	CME credits
Sep 2019	Aunt Minnie case reviews (4)	1	Screen shot last page
Oct 2019	Radiation Protection of Patients- audio recording	1	Link