College of Medical Laboratory Technologists of Ontario

MANDATORY REPORT

Mandatory reports are an essential process for ensuring public protection as they enable the College to consider matters about Medical Laboratory Technologist (MLT) conduct, competence, and capacity. This form is for employers, facility operators, or health professionals who are reporting an MLT to the College because a registrant's practice was impacted through termination, suspension, or restriction of privileges.

Mandatory reports must be sent to the College within 30 (thirty) days of the concern.

The Health Professions Procedural Code, being Schedule 2 of the *Regulated Health Professions Act, 1991* (RHPA), sets out the conditions under which a mandatory report is to be made:

- Section 85.1 refers to the reporting of sexual abuse of a patient.
- Section 85.2 refers to reporting by facilities of incompetence, incapacity, and sexual abuse.
- Section 85.5 refers to reporting by employers who terminates, or intend to terminate, revoke, suspend, or restrict the privileges of a regulated health professional.

If you wish to report a concern that is outside of the conditions list above, please see the CMLTO's Online complaint form.

CMLTO acknowledges that mandatory reports contain sensitive information. CMLTO maintains privacy and confidentiality in alignment with its privacy policy and the requirements listed in the RHPA. Detailed information is required to support CMLTO and its Statutory Committees in their decision-making.

Section 1: Reporter Information

Reporter's name:

Employer/Facility name:

Address:

Telephone: Email:

Section 2: MLT Information

Name of MLT:

CMLTO Registration Number:
(if unknown, consult the Public Register)

Work Address of MLT:
(*If different than the Reporter's*)

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Section 3: Concern Type & Details

Concern Type

The MLT was, or was intended to be: -Select an option-

Concern is related to:	☐ Incompetence	☐ Incapacity	☐ Sexual Abuse	☐ Professional Misconduct
Applicable Concern Date:				
Concern being reported: *(i.e., privacy breach, inappropriate comments, incorrect resulting)*				
Description of facts related to the concern: *Please include as much detail as possible and attach/send relevant documents (i.e., letters, minutes, submissions).* Max 1250 characters. Additional documents can be sent by email to **professionalconduct@cmlto.com**				

By signing this form, I understand that I am submitting a mandatory report to the College and believe I have met all applicable requirements.

Signature

Date

Submit & email form

Or save and email to professionalconduct@cmlto.com

CMLTO staff may contact you if further information is required.
If you require any assistance, please do not hesitate to contact the Professional Conduct department by email at professionalconduct@cmlto.com.