

ANNUAL REPORT 2025

New Frontiers



College of
Midwives
of Alberta

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OUR MANDATE

The College of Midwives of Alberta (CMA) ensures public safety and enhances public trust and confidence in midwives by regulating the practice of midwifery in accordance with *the Health Professions Act, Midwives Profession Regulations, the CMA's Standards of Practice and Competence, Code of Ethics and Bylaws*. The CMA upholds the minimum standard of practice and competencies expected of all midwives registered to practice in Alberta.

OUR VISION

Through regulatory excellence, we will inspire trust and confidence in Midwifery Care for all childbearing families in Alberta.

OUR MISSION

As the regulatory body, the CMA supports Registered Midwives as they provide safe, competent, ethical, compassionate and evidence-informed midwifery care to diverse populations in any practice setting (community, hospital and home).

Land Acknowledgement

This land currently called Alberta is where the College of Midwives of Alberta (CMA) is situated, since colonialism. Long before our time, this land was the ancestral, traditional home to many Indigenous Peoples. CMA wishes to acknowledge and honour: the 45 First Nations of people who were part of Treaty 6,7,8 signings, the Treaty 10 signings with the Metis Nations, and the Indigenous peoples, their elders past and present, who draw their ancestral lines from this land. Their history, language and culture have and will continue to influence this community. CMA honours Indigenous midwives past and present, as being integral to Indigenous Culture."

New Frontiers

In Alberta, as Primary Care Providers, Registered Midwives provide safe, competent, ethical, compassionate and evidence-based midwifery care to diverse populations in a variety of settings. The College of Midwives of Alberta is with Registered Midwives every step of the way.

The theme of our 2025 Annual Report is NEW FRONTIERS

In this issue, we will share NEW:

- Activities we have embarked on
- Events that have happened for us
- People we have met and NEW connections made
- Programs and initiatives we are working on
- Ways in which midwives work
- Changes we have integrated into our systems



Change is inevitable, and the profession of midwifery is evolving and changing to meet client needs and new professional trends.

Our Team

CMA Council – Registered Midwives



Joy Maxwell
Chair



Heather Wanjala
Vice-Chair



Megan Lalonde



Tina Henry



Deborah Mpofu

CMA Public Members



Kirk Harline



Andrea LaRochelle



Cathy Cornfield



Melanie Bekevich



David Crocker

CMA Staff



Sharon Prusky
Registrar/Executive Director



Juliana Cunha
Deputy Registrar/Hearing Dir.



Shireen Mathew
Finance Director/Admin Assist.



Theresa Barrett
Complaints Director

CMA Council Chair Report

Use of NEW CMA Bylaws

Council formed the NEW Executive Committee, which usually meets one week ahead of each Council Meeting; Joy as Chair, Heather as Vice-Chair and Cathy as the Public Officer.

In 2025, I was NEW to the Chair position: Thank you to Marianne King, who served in this position for the two previous years.

Council Midwifery Member Changes:

Marianne stepped down as Council Chair at our June 2025 Council Meeting, and I settled into my NEW position then.

Heather Wanjala (Martin) became our NEW Council Vice Chair in June as well. Many Thanks to Kayla Blinkhorn who served as Council Vice Chair for two years.

Cathy Cornfield became our first and NEW Public Officer, as CMA initiated their recently developed Bylaws and started conducting regular Executive Committee Meetings.

To compliment our existing Registered Midwife Council Members, CMA also welcomed NEW Registered Midwife Members: Tina Henry, from the central part of Alberta and Debbie Mpofu, from the northern part of Alberta - Ft McMurray. Both Tina and Debbie suggest NEW and fresh perspectives and ideas to Council.

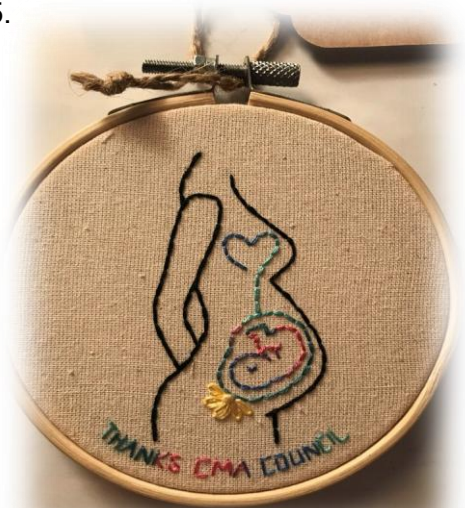
Tina and Debbie bring the Registered Midwife compliment to five on Council.

Council Public Member Changes:

After almost three full terms (8.5 years), Council sadly said goodbye to David Crocker. David brought such great management expertise to Council as well as a good dose of common sense. David stepped away from Council and CMA in December 2025.

Chelsea Cabaj also completed her second term in October of 2024 and stepped down, leaving an open position until June of 2025. Dustin Schinbein also left our Council early in 2025.

NEW Public Members: Council welcomed Andrea LaRoche to the table in June of 2025. Andrea is a Conflict Communication specialist and brings that experience to Council. We wish Andrea well as she settles into her NEW Public Member role. With Andrea, our Public Member Council compliment is at three, two short of the full number. Andrea joins Cathy Cornfield and Mel Bekevich on Council.



CMA Council Chair Report

A potential NEW Public Member, Kirk Harline, was introduced to Council via AB Health Professions Regulation Workforce Branch Unit and the Legislature late in 2025 and we hope he will become an integral member of the CMA Council in 2026

Council met five times in 2025, with one Special Meeting. From our Bylaws, we tried the NEW Ordinary Resolution and conducted email votes on a few matters in between regular Council Meetings. This process worked well, so that projects could move along and Council would simply ratify the email vote at the next Council Meeting.

Council Strategic Planning Committee and Finance and Audit Committees – Combined forces until more Council Members are available.

CMA has embarked on a search for a Strategic Planning facilitator, with hopes of having an in-person Strategic Planning facilitated session in early 2026. Council Members David Crocker, Mel Bekevich, Cathy Cornfield and Tina Henry formed this committee. I attend the Council Committee meetings as I can.

In 2025, Council was able to reduce registrant practice permit fees a second time, by \$275 as the CMA Investment Fund to cover Hearings and Professional Conduct has reached its goal and professional conduct expenses are less than expected. Council plans to continue reducing Practice Permit fees as conditions allow, as part of a promise to the CMA registrants who built the Investment Fund.

This combined committee also discussed many ideas for the Investment Fund and how to best describe and manage the relationship among the Investment Fund, the Hearing, Complaints and Professional conduct organizational expenses and the registrant practice permit fees. A draft policy is underway.

Council Standards and Codes Committee:

2025 signaled the year to review the CMA Code of Ethics, according to CMA policy and NEW Bylaws.

CMA Council Chair Report

This Council Committee got to work and reviewed the existing Code of Ethics, brought forward ideas for change, discussed each section and recommended two things to Council:

1. Substantive changes were not warranted
2. Final Changes will be made after the NEW Bill 13 has been introduced and understood by CMA Council.

Committee members are David Crocker, Megan Lalonde and Heather Wanjala

Council Appointment Committee:

This committee was needed briefly for two Council registered midwife positions in 2025 (Tina and Debbie). There were no other nominations, so both Tina and Debbie got in by acclamation.

Sincerely, Joy Maxwell, RM

Chair, CMA Council



Annual Public Members Report

The College of Midwives of Alberta includes public members on Council to ensure Albertans' perspectives are reflected in its work. Public members hold full voting rights and contribute meaningfully to decision-making, governance, and committee activities.

The current public members on Council are Cathy Cornfield, Melanie Bekevich, Andrea LaRoche, and we are pleased to welcome Kirk Harline who has just been appointed to CMA.

Cathy Cornfield is a retired pharmacist. In addition to serving on Council, she contributes to the Executive Committee and the Standards and Codes Committee. Recently her work on Council has included submissions to the CMA newsletter and advocacy work related to inconsistencies in midwife privileging across hospitals. Preserving meaningful birthplace options whether it be in a hospital, birthing center or at home is one of the ways that public members advocate for families in Alberta.

Melanie Bekevich has a strong background in communications and strategic planning. She brings this experience to her work on the Finance and Audit Committee and the Strategic Planning Committee. Through the Strategic Planning Committee, Melanie contributed to the planning of an in-person event focused on the CMA's three-year goal of operating as a focused, high-performing regulator that delivers clear, efficient, and credible regulation within a complex and evolving healthcare system.

Andrea LaRoche is a specialist in conflict communication, supporting families and individuals as they navigate challenging relationships. Her experience will be especially valuable in initiatives aimed at making the CMA complaints process easier to understand and navigate. Updating the complaints page on the CMA website is an initiative Andrea is working on in order to help resolve concerns before they progress to a complaint.

Kirk Harline is a senior finance leader with more than 40 years of experience in the financial sector. We welcome Kirk to Council and look forward to his contributions, including his participation on the Finance and Audit Committee and the Strategic Planning Committee.

We look forward to continuing to represent the interests of the public in 2026 and beyond.

Registrar Report

Registrar:

The Registrar focusses on all aspects of legislation and regulation pertaining to registered midwifery practice. The Registrar oversees the management of registration, competence and professional conduct within the college.

Registration

OSCE Session Development: due to a NEW precedent in increased applications for registration from Internationally-educated Midwives, CMA responded to the volume with hosting one of the competence assessments for candidates - OSCEs (Objective Structured Clinical Evaluations). This required partnering with the Mount Royal University (MRU) Health Sciences Learning Center (HSLC), the first time since 2021, to offer midwifery scenarios to assess candidate competence at various aspects of midwifery practice in Alberta. The current OSCE scenarios are rebuilt from the previous sets some ten years ago, complete with standardized patient scripts, facilitator (tech staff) guides and examiner scenarios and marking guides. There is also an updated OSCE Candidate Handbook and OSCE Examiner Policy, equipment and supply lists. After the first pilot OSCE session, CMA plans to offer OSCEs a few times a year with their NEW partner at MRU.

NEW TMU IEMPBP Program:

Toronto Metropolitan University has developed a NEW Bridging Program for Internationally-educated Midwives, (IEMPBP) with the purpose of providing bridging education and clinical training for future midwives residing in many parts of Canada. This Bridging Program first cohort has three Alberta residents. To assist with this NEW program and an opportunity to bring more midwives to Alberta, CMA developed an Affiliation Agreement with the TMU Program and developed 3 Student agreements for clinical placements to take place in Alberta with CMA registrant preceptors. These students will start their clinical placements in early 2026.

Competence

The NEW PDPs (Professional Development Plans), despite piloting and careful adherence to the Standards of Practice around Continuing Competence, fell short of the mark on user uptake, ease of completion, etc. A NEW version will be developed in 2026. The plan is to develop a PDR (Professional Development Record), a much simpler and more straightforward form that still meets all the requirements of the Continuing Competence Standard of Practice.

The other NEW exciting news relates to the NEW Advanced Practice Authorizations that CMA Council has now approved. Please see the Competence Committee Report for details on advanced practice opportunities for midwives.

Registrar Report

Professional Conduct

There is a NEW trend amongst clients and others whereby there is increasing unhappiness and frustration with health care providers; the profession of midwifery is one of the targets. Client expectations of midwives and the therapeutic relationship formed between clients and their midwives is slowly being eroded, as some clients do not appear to regard their own respectful actions or words as important. Some clients have become demanding, not taking responsibility for their care and the result has been a significant increase in formal complaints submitted to the CMA.

Midwives are approaching CMA with questions around which Standards of Practice address disrespectful clients, clients who are not taking responsibility or accountability for their words or actions and clients who do not accept the limitations of the midwifery scope of practice. This has prompted a CMA review of the Standards of Practice, Competencies and the Code of Ethics focusing on the framework for a healthy therapeutic midwife/client relationship. Three midwifery tools appear to provide ways to balance the midwifery relationships with clients:

1. The initial visit and intake into care communication
2. Clear communication of expectations of both clients and midwives in therapeutic relations and
3. Documentation of all encounters with clients on the part of the midwife.

Professional Practice Questions:

As usual, there is communication to CMA regarding many aspects of midwifery professional practice. While the main theme still relates to Standard of Practice 12 When Clients Request Care Against Midwifery Recommendations, other items and issues are raised. NEW Registrant issues related to managing client care that exceeds the scope of midwifery, working in solo practice, communication and conflict between midwives, interprofessional relations, Royal Alexandra Hospital In House Midwifery Program future, lack of midwifery privileges, and midwives sending clients for assessment to hospitals without Midwifery Privileges, to name a few.

Registrar Review of Documents:

Code of Ethics (2019), with the Standards and Codes Council Committee,

CMA Standards of Practice and Competence: how stillbirth and neonatal death in community settings and planned delivery by midwives are addressed.

Executive Director Report

The Executive Director (ED) oversees, enacts and manages key CMA Processes; both Council and Operational Activities

CMA still has the same staff: Sharon, Juliana and Shireen, with Theresa Barrett, contracted in the Complaints Director role. Appreciation and thanks to each of them, as they do their jobs in exceptional fashion. We are a small but mighty crew!

A NEW temporary/contract position was approved by Council: Policy Writer Position – Competence Committee. This position has been filled.

I conducted orientation for 4 (four) NEW Council Members in 2025; two Registered Midwives (Tina Henry and Debbie Mpofu) and two Public Members (Andrea LaRochelle and Shane Parker).

I was also interviewed by an investigative reporter from the Guardian Magazine publication. This reporter had done a series of articles exposing a worldwide cult of people who are making money from naïve pregnant individuals, presenting themselves as antiestablishment well-meaning facilitators of pregnancy and birth.

This cult is responsible for a number of birthing people deaths and baby deaths, including right here in Alberta. I was interviewed to validate the public information the reporter had found in her research. The cult facilitator in question is well-known to the CMA.

Internal Activities

CMA Registrant Management System – Pontem Innovations

2025 saw several NEW changes to the system:

Practice Permit Renewal processes: this NEW 8 step process for Renewal was instituted for November of 2025. This involved designing an instruction manual, and integrated directions. Most of the steps worked out well.

The push back and unprecedented communication around CMA Professional Development Plans at Annual Registration Renewal sparked the need for CMA Staff to develop a NEW Policy – Respectful Organization, to address negative behavior from registrants towards staff. This policy, along with the NEW Staff Wages and Yearly Compensation Policy and the NEW COLA (Cost of Living Adjustment) Policy are added to the existing CMA Human Relations Suite of policies.

HIROC Interface – international students requesting to do clinical placements in Alberta. HIROC supported professional liability insurance if students are enrolled in an international midwifery education program AND were under the direct supervision of a CMA registrant supervisor. Subsequently, a number of US-based midwifery education programs were not able to support clinical placements after US federal law changes related to Canadian students.

Executive Director Report

NEW!! Successful Proposal Grant Funding

CMA was successful on obtaining grant funding on two (2) Midwifery Workforce Projects: Data Informs Workforce Project (integrating a CIHI – Canadian Institution of Health Information midwifery data set into the CMA registration system) and PLEA Program Enhancement Project (Prior Learning Assessment) Program).

We look forward to working with Alberta Health on these two projects, slated to begin in early 2026. This is NEW territory for CMA, as CMA has never engaged in grant funding searches or work and looks forward to this NEW aspect of CMA work.

CMA is also partnered with MRU Continuing Professional Development Department and the MRU Bachelor of Midwifery Department to pilot a Midwifery Bridging Program, thanks to the same AB Health Midwifery Strategy Initiative funding.

External Partners – Midwifery

PMAO/PCA (Primary Care Alberta): Since CMA published the Restricted Activities Policy, CMA has worked with the PMAO (Provincial Midwifery Administration Office) to align the list of what midwives can do with the procedure processes within AHS hospital facilities. CMA encourages midwives to work to their entire scope of practice, if possible. There have been discrepancies between the Restricted Activity list and the



Procedures list and the two groups are working towards making the lists align well.

CMA also worked with the PMAO to produce a client information document regarding transfer situations from community/home into hospital for birth. This document was a result of a recommendation from a previous AHS Quality Improvement incident, generated within the health care system.

AAM – Alberta Association of Midwives:

This year was the first time CMA retained a Government Relations group – Alberta Counsel, to assist the CMA in advancing some items and issues to various MLAs and Ministers. This was a NEW Frontier for CMA, as we worked with AAM (Alberta Association of Midwives) on respective messaging for the Health Ministers (Acute Care and Primary Care).

Executive Director Report

This was the first year where midwifery hospital privileges are scarce and negotiation is needed. It seems counter-productive to have Alberta Health provide \$11 million for increasing the midwifery workforce, when privileges for registered midwives are almost non-existent.

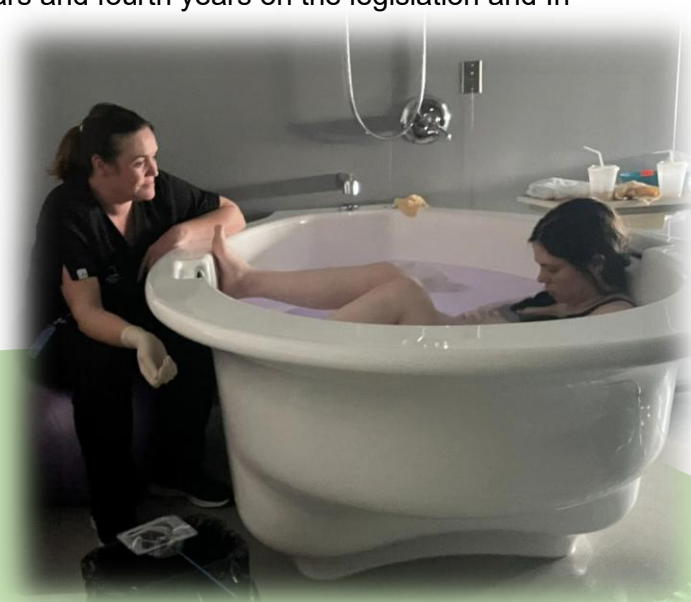
MRU BMid Program:

2025 marked the 10th year anniversary for the first graduating class from the MRU BMid program. This year saw a big celebration. CMA was an active participant on that memorable evening.

The Registrar continues to present to the first years and fourth years on the legislation and In governance documents pertaining to the midwifery profession.

External Partners – Professional

CMRC (Canadian Midwifery Regulator's Council) I serve on the board for this national council. I also serve as chair for the CMRE (Canadian Midwifery Regulatory Examination) committee. I am also a member on the CMRC Professional Practice Committee and the Indigenous Pathways to Midwifery committee, NEWly formed to address this emerging need. Our Deputy Registrar sits as a member of the CMRC Registration Affairs committee.



I was also fortunate to be able to attend the CNAR (Canadian Network of Agencies for Regulation), as the Annual Conference was held in Calgary in October. The NEW topic was the use of AI in regulation, so now CMA has a NEW draft Policy on AI Use, using a principle-based approach.

November 2025, the Biennial CAM Conference (Canadian Association of Midwives) was also held in Calgary. I attended to make connections and build relationships and achieved that goal amidst a wide array of midwifery practice, professional and work life topics. This was a very valuable conference, as I brought back important information on the trends and barriers facing midwives in Canada.

I am a member of the CAMed Accreditation Council as the CMRC Representative. NEW accreditation standards were introduced to Canadian Midwifery Education Programs in 2025. As the Council representative, we reviewed the McMaster Midwifery Education Program for accreditation.

Executive Director Report

This process provides an excellent framework for future requests from Indigenous groups requesting accreditation for their Midwifery Education Programs.

AFRHP: CMA had received multiple benefits being a member of “the Federation” (Alberta Federation of Regulatory Health Professions). I sit on the Board for the Federation and participate in many of the interest groups: EDI, Continuing Competence (CCIG), Virtual Care Interest Group (VCIG). Our Deputy Registrar participates on the following AFRHP interest groups: Communication, Hearing Directors, and Registration. Meanwhile, our Complaints Director finds the PCIG (Professional Conduct Interest Group) to be of particular value.

Two key Federation projects CMA was involved in were the Integrated Complaints Framework project and the grouped Counselling and Treatment Fund feasibility study. CMA values the regular monthly innovative sharing meetings in addition to the regular Board meetings.

Respectfully submitted,
Sharon Prusky, BN, Med,
Registrar and Executive Director

Registration Committee Report

The Registration Committee of the College of Midwives of Alberta (CMA) is established under the Health Professions Act, the Fair Registration Practices Act and the Labour Mobility Act. The Committee's role is to help ensure Alberta's registration process is fair, transparent, and t while supporting the safe entry to practice of qualified midwives.

Throughout 2025, the Committee met regularly to review applications, assess registration pathways, monitor supervision and learning plans, and make registration decisions. The Committee also continued to refine its decision-making practices and procedures to promote efficiency and transparency.

A major achievement in 2025 was the implementation of the CMA's New Registrant Management System. The New System improved the experience for registrants and applicants through clearer navigation, automated reminders and more efficient renewal and application processes. The CMA website was also updated to provide clearer and more comprehensive information, helping users better understand the registration process.

The number of practicing midwives in Alberta remained stable in 2025. At the same time, the CMA saw an increase in applications from internationally educated midwives, reflecting growing interest in practicing in Alberta. Three applications were declined in 2025 following careful review. No appeals of registration decisions were received during this reporting period.

The CMA also supported the launch of Toronto Metropolitan University's Internationally Educated Midwives Bridging Program. During the year, the CMA established a streamlined registration pathway for eligible graduates who successfully complete the program and the Canadian Midwifery Registration Examination (CMRE). These graduates may enter practice as Provisional Registrants under supervision, increasing access to registration while maintaining public protection.

Another significant milestone was the approval of funding to strengthen the Prior Learning Experience Assessment (PLEA) program. This project will enhance Alberta's registration pathway for internationally educated midwives. The CMA also contributed to the development of a midwifery bridging program proposal led by the Mount Royal University, which will help future applicants as they transition into practice.

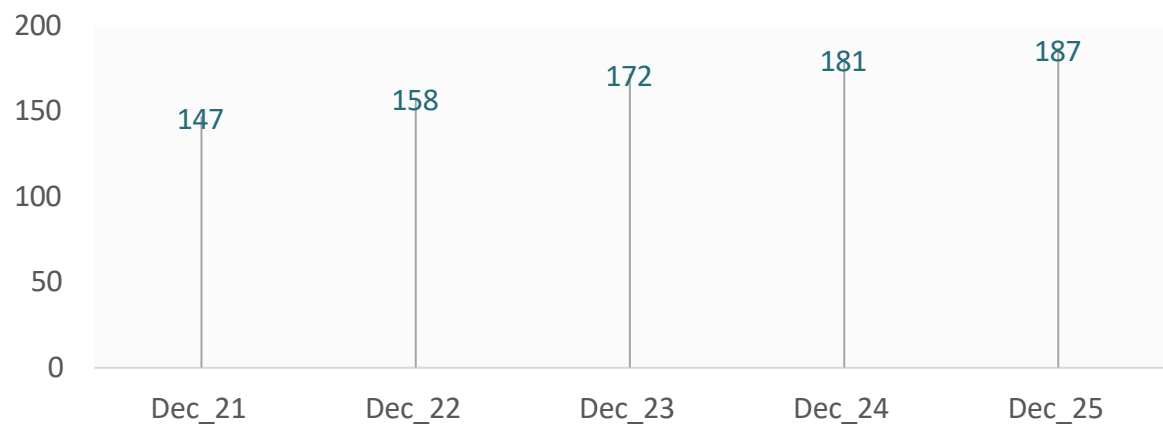
In 2026, the Registration Committee will focus on implementing PLEA improvements, responding to increasing applicant demand, and continuing to strengthen registration processes while maintaining Alberta's standards for safe and competent midwifery practice.

Thank you to all Registration Committee members, staff, and external partners for their continued commitment and thoughtful contributions throughout the year.

Submitted by Juliana Cunha, Deputy Registrar

Registration Committee Report

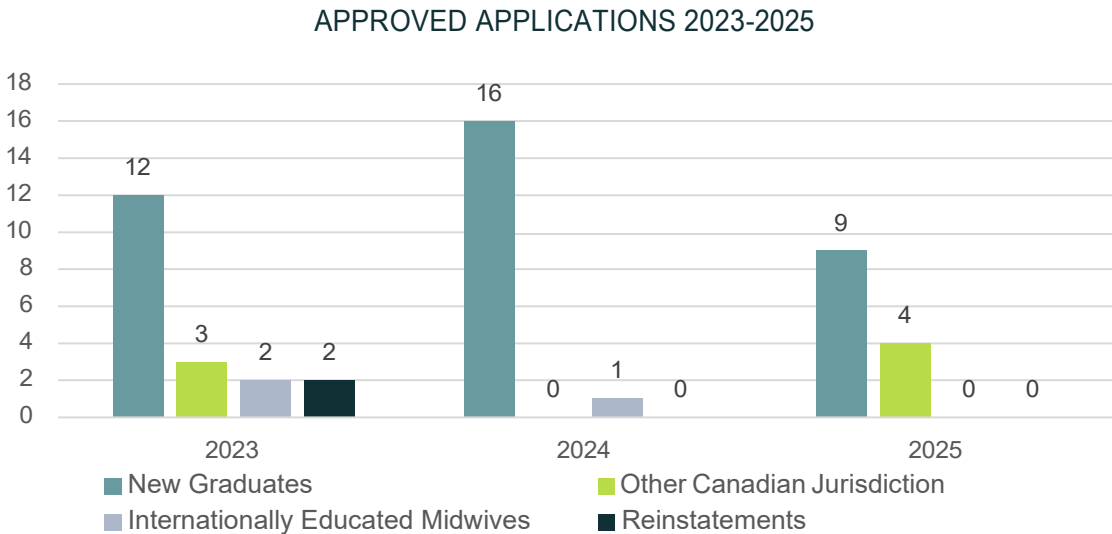
CMA ACTIVE REGISTERED MIDWIVES 2021 - 2025



CMA REGISTRANTS 2021 - 2025

	2022	2023	2024	2025
General Registrants	140	145	155	167
General Registrants New Registrants	17	25	25	20
Provisional Registrants	1	2	1	0
Courtesy Registrants	0	0	0	0
Total Active	158	172	181	187
Inactive	25	20	27	25
Students	37	37	40	44
Total Registered	220	229	248	256

Registration Committee Report



* Does not include student applications

APPLICATION RECEIVED FOR REGISTRATION

	2022	2023	2024	2025
New Graduates	15	12	16	9
Other Canadian Jurisdictions	5	4	0	5
Internationally Educated Midwives	2	2	11	7
Reinstatements	0	2	0	0
Total	22	20	27	21

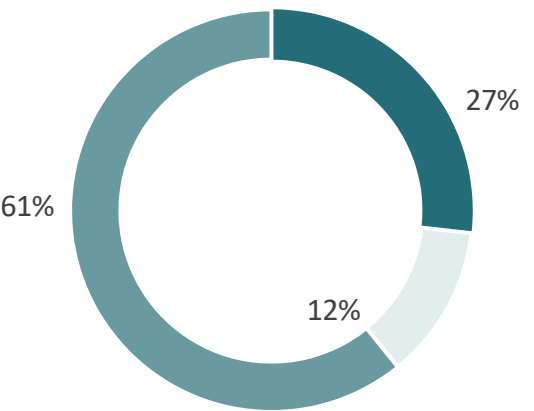
212 Total Registered Midwives

187 Practicing
Registered Midwives

~ 3.2%
Growth since December 2024

3 Cancellations in 2025

Registration Pathways



- Internationally Educated Midwives
- Canadian Registered Midwives
- Canadian New Graduates

167
General

20
New
Graduates

0
Provisional

27 Midwives who self-identify as Indigenous

Competence Committee Report

Competence is defined as an effective combination of knowledge, skills, experience and judgement required of a registered midwife to practice safely and ethically in a designated role or setting.

The CMA expects registrants to maintain their competence throughout their midwifery careers. Based on the Continuing Competence Program, developed last year, the Competence Committee has moved into the details of programming.

This year, Competence Committee had four members: Beth Larsson, Myself, Anna Gimpel and Lisa Cowdery. Later Lisa doubled as our very capable Policy Writer. Beverly Sinnema went off the committee in 2025, expecting her their child.

What's NEW with Competence Committee?

The big NEWs with Competence Committee is the writing and publishing of the CMA Advanced Practice Policy, Guidance documents and three NEW Advanced Practice Activity Authorizations:

Prescribing Uterotonics for Induction and Augmentation

Prescription of Controlled Drugs and Substances for Midwives

Point of Care Ultrasound for Obstetrics (POCUS OB)

Advanced Practice Activities are those which CMA registrants can choose to add to their midwifery practice or not. They are beyond Entry-to-Practice Competencies and determined to be areas where an advantage to midwifery practice and client care is a priority.

Competence Committee designed the Advanced Practice Activities Policy, using the HPRAR (Health Professions Restricted Activities Regulation, 2023) Section 35.

This HPRAR section outlines specific activities for midwives which require extra education and training. Some of the activities in the Section 35 are named; others are embedded within the descriptions in Section 35. Competence Committee developed more than a dozen examples of advanced practice activities from the HPRAR.

Once the policy was written, with the help of the contracted Policy Writer, Competence Committee then embarked on writing the NEW Guidance to the Profession documents listed above. They researched available education courses addressing the activity, evaluated the coursework, determined a safe skill performance level and designed an application form for registrants to complete.

CMA Council then reviewed the draft Guidance documents and approved them after a number of discussions and debates.

Competence Committee Report

By late 2025, a large number of interested registrants had taken the related coursework, completed the Guidance document review (indications, contraindications, settings where the activity can take place, documentation, facilitation of learners, communication with other providers) and applied for advanced authorization on the activities from CMA. This application process was integrated into the CMA Registrant Management System, where each advanced authorization is listed and added to individual registrant practice permits. A defined process is also established with PMAO to add these advanced authorization by registrant, to each hospital facility privileging list. While not all of these CMA advanced authorizations have been approved in all AHS settings, many have. This result allows clients to receive care faster, more efficiently and effectively in many circumstances, saving the health care system money.

Competence Committee continues work on additional Advanced Practice Guidance documents, with plans to publish more in 2026.

2025 also saw Competence Committee drafting a Safe Workload for Midwives document; which has taken careful thought, consideration of metrics, styles of providing midwifery care; it is hope this document will be published in 2026.

Respectfully submitted,

Kayla Blinkhorn, Chair



Professional Conduct Report

CMA registrants are accountable to legal, ethical and professional standards. The conduct process deals with allegations of unprofessional conduct, as defined by the HPA. In the event that a registrant practices below the standard, the CMA can investigate formal complaints and take disciplinary action when necessary. Investigations are governed by fairness of process, including disclosure to the registrant and the complainant about who has been interviewed and what information was provided. The Complaints Director uses a variety of tools in measure to resolve both concerns and complaints that are submitted to the CMA.

Theresa Barrett is contracted as the CMA Complaints Director, in addition to being a practicing midwife.

Reportable Topics:

1. In addition to the Complaints Report on the next pages, the areas of Section 118 of the HPA, related to fitness to practice or incapacity did not have any case reported.
2. No funds were dispersed for treatment and counselling, as there were no sexual abuse of misconduct cases in 2025.

NEW Frontiers in Professional Conduct

Professional Conduct saw a few NEW Frontiers in 2025.

Firstly, CMA hit a NEW total for the number of complaints received in a year; 2025 saw 28, most of them coming in from October to December.

Secondly, CMA received a first-time request to strike a CRC (Complaint Review Committee). This NEW situation required CMA to review and revise the policy around Complaint Reviews. The process to complete the CRC will take place in the 2026.

Thirdly, a Concern/Complaint Decision Tree is in the idea stage for the CMA website – Complaints Page. This is hopefully one way in which additional information around what constitutes a formal complaint can be conveyed and allowances for additional options for conflict resolution can be addressed.

Fourthly, a NEW contract was made with an Alternate Complaints Director (Megan Murray, a CMA Registrant) in 2025. This was done to assist with the number of complaints CMA has to manage and also for situations where the Complaints Director may have a conflict of interest with any registrants named in a complaint.

Fifthly, both the Registrar and the Complaint Director attended a Conflict Management Workshop hosted by AFRHP by the College of Psychologists of Alberta to learn more about this kind of Concern coming from clients and other providers towards CMA registrants. This was extremely helpful for managing CMA cases.

Complaints Director Report

The College of Midwives of Alberta (CMA) is responsible for protecting the public by ensuring registrants meet the legal, ethical, and professional standards established under the Health Professions Act (HPA). The complaints process provides a fair and transparent mechanism for reviewing complaints about a registrant's conduct or practice. When complaints are raised, the College may review the matter, investigate formal complaints, and take action when necessary. The process is designed to be fair to both complainants and registrants. The Complaints Director has a range of tools available under the HPA to address concerns and resolve complaints in the public interest.



Complaint Trends and Complexity

Complaint trends have changed over time. Between 2019 and 2022, most complaints were about clinical care provided during pregnancy, labour, and birth. In 2023 and 2024, complaints began to include a wider range of concerns, such as documentation, communication, and professional behavior. By 2025, many complaints involved several different issues rather than a single concern. While clinical care continued to be an important part of many complaints, investigations increasingly required review of documentation, communication, professional conduct, and continuity of care.

While the number of complaints has increased over time, the most significant change has been the growing complexity. Investigations now often involve reviewing several aspects of practice, including clinical care, documentation, communication, and professional conduct. As complaints become more complex, investigations may require more records, additional interviews, and a broader review of available information before a decision can be made. This helps ensure decisions are fair, transparent, and consistent with the College's responsibilities under the Health Professions Act.

2025 At A Glance

Reportable Topics: Incapacity and sexual abuse or sexual misconduct

No matters related to fitness to practice or incapacity under section 118 of the Health Professions Act were reported to the College in 2025.

The College also received no reports of sexual abuse or sexual misconduct. No applications for treatment and counselling funding were received in 2025, and no funds were disbursed. The College contributed \$10,000.00 to the fund during the reporting year to ensure resources remain available should they be required in the future.

Complaints Director Report

New Frontiers in Professional Conduct

The College received a record 27 complaints in 2025, the highest number since complaint tracking began in 2019.

In addition, the College received its first request for a Complaint Review Committee to review a dismissed complaint, marking the first use of this legislated review process within the College's complaints framework.

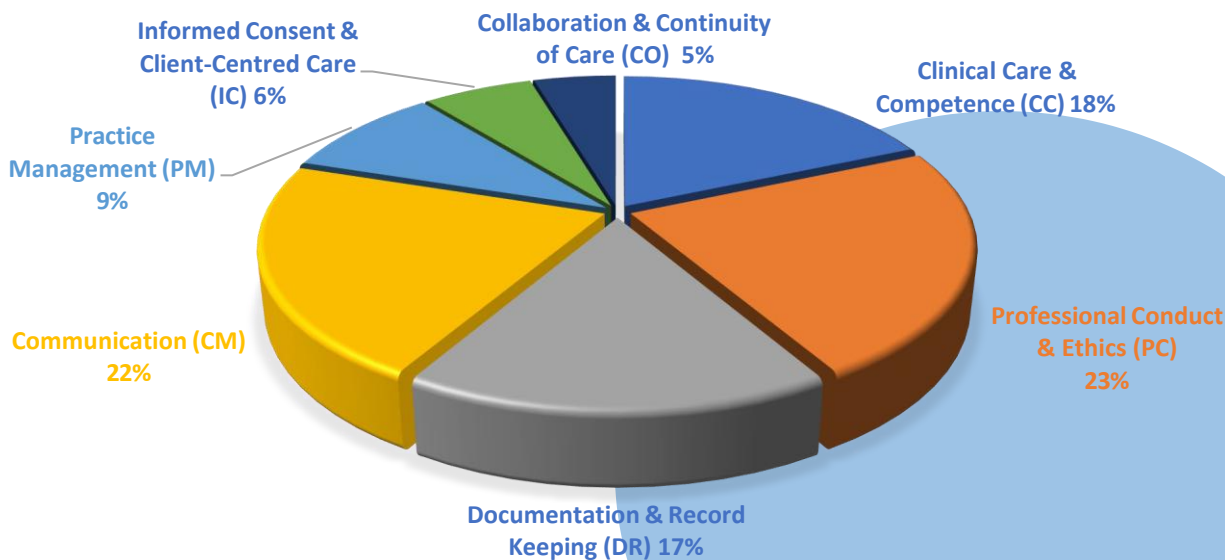
While complaint volume increased in 2025, a higher number of complaints does not necessarily indicate a decline in practice standards. Increased awareness of the complaints process among clients and healthcare professionals also contributed to increased reporting. Each complaint was reviewed on its individual merits.

It is also important to note that not all complaints proceeded to a formal investigation. Some concerns were resolved at an early stage, while others did not move forward because there was insufficient information or evidence to support further action.

Nature of Complaints Received (2025)

Complaints received in 2025 commonly engaged multiple complaint themes. Professional Conduct & Ethics and Communication were the most frequently identified themes, while Clinical Care & Competence and Documentation & Record Keeping remained prominent throughout complaint investigations. This reflects the increasingly multifaceted nature of complaints, where a single complaint often engages several professional obligations.

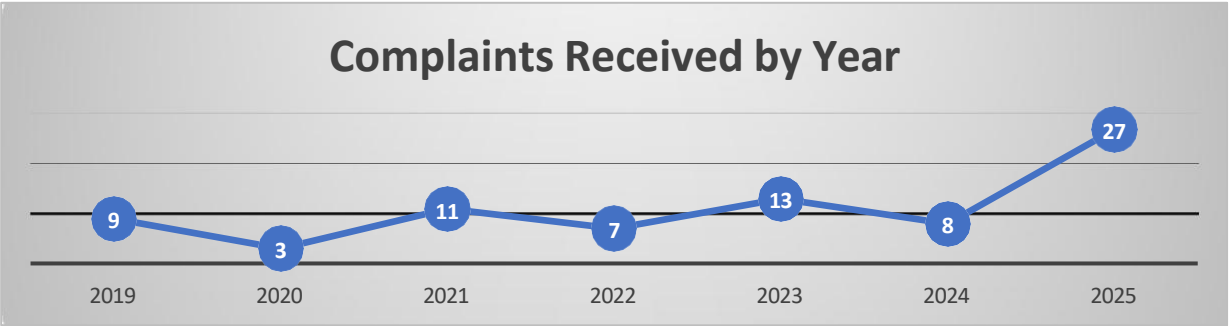
NATURE OF COMPLAINTS - 2025



Complaints Director Report

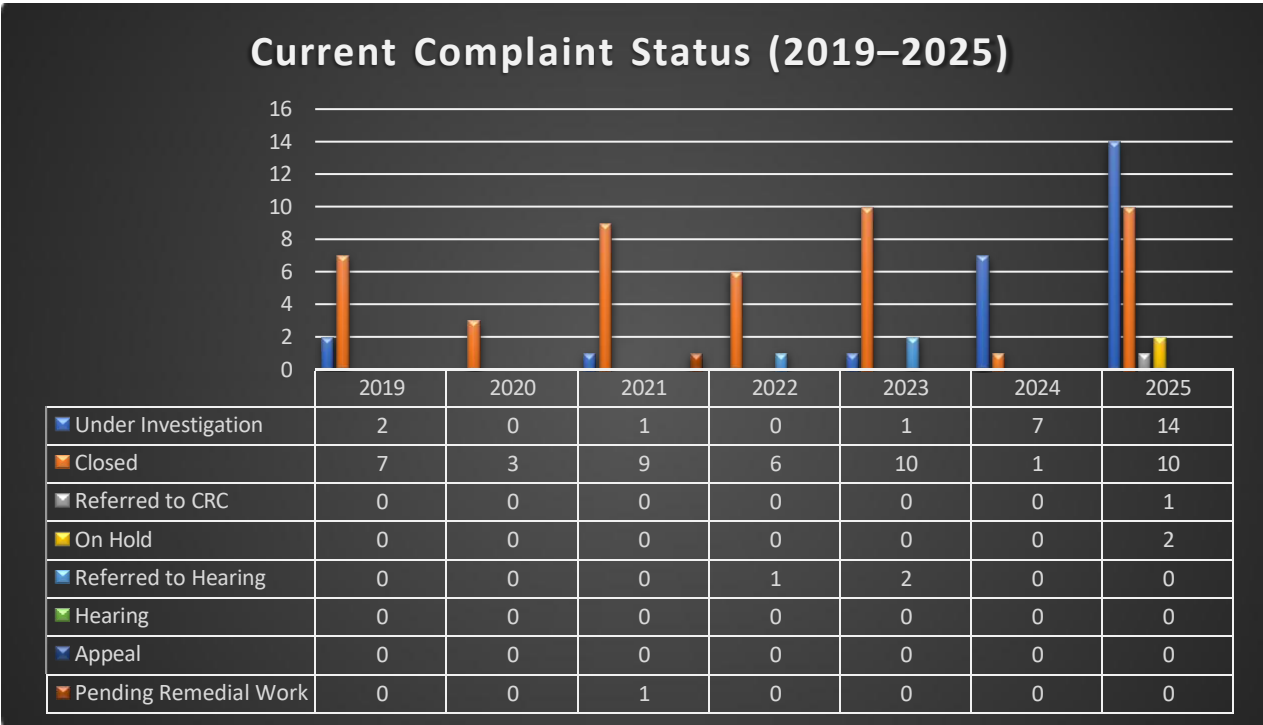
Complaint Activity (2019–2025)

While the College continued to conclude complaints each year, the number of active investigations at year-end also increased. This reflects not only the increase in complaint volume but also the growing complexity of complaints, many of which involve multiple allegations, extensive documentation review, numerous participants, and enhanced procedural fairness requirements.



Current Complaint Status

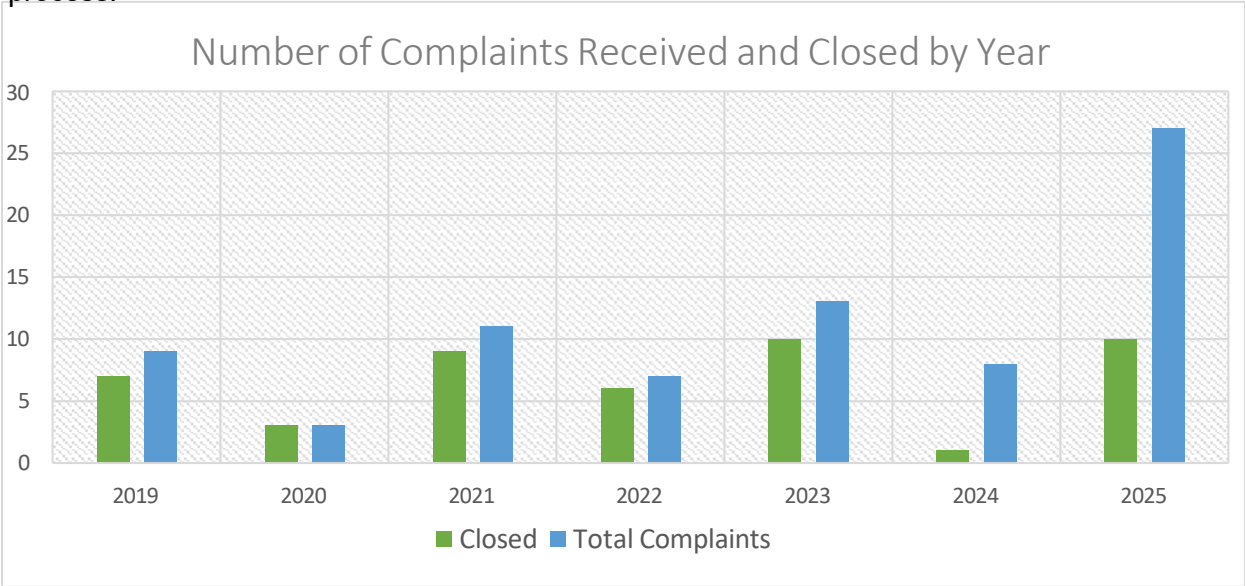
As of December 31, 2025, complaint files remained at various stages of the complaints process. While most active matters were under investigation, others had progressed to Complaint Review Committee review or other procedural stages. .



Complaints Director Report

Number of Complaints Received and Closed by Year

The College continued to conclude complaints each year while managing an increasing number of new complaints. Differences between complaints received and complaints closed in a given year reflect the time required to complete investigations and ensure a fair and thorough review process.

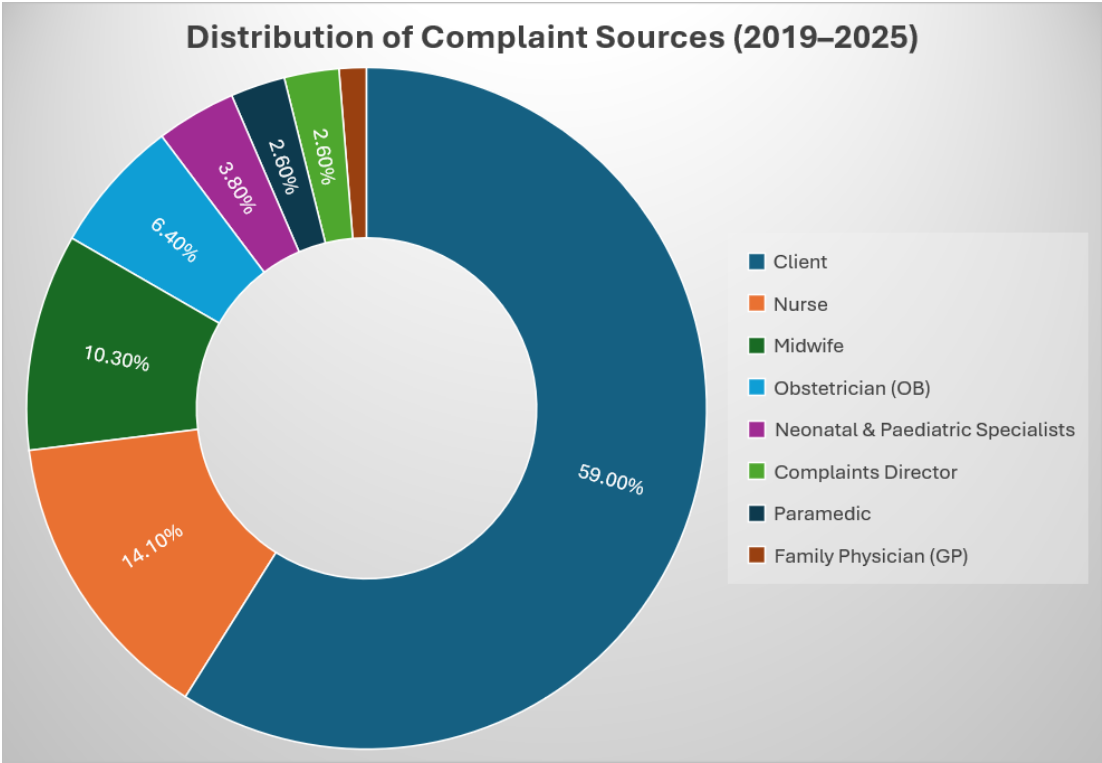


Complaint Sources

Clients remained the most common source of complaints received by the College throughout the reporting period, followed by nurses and other regulated health professionals.

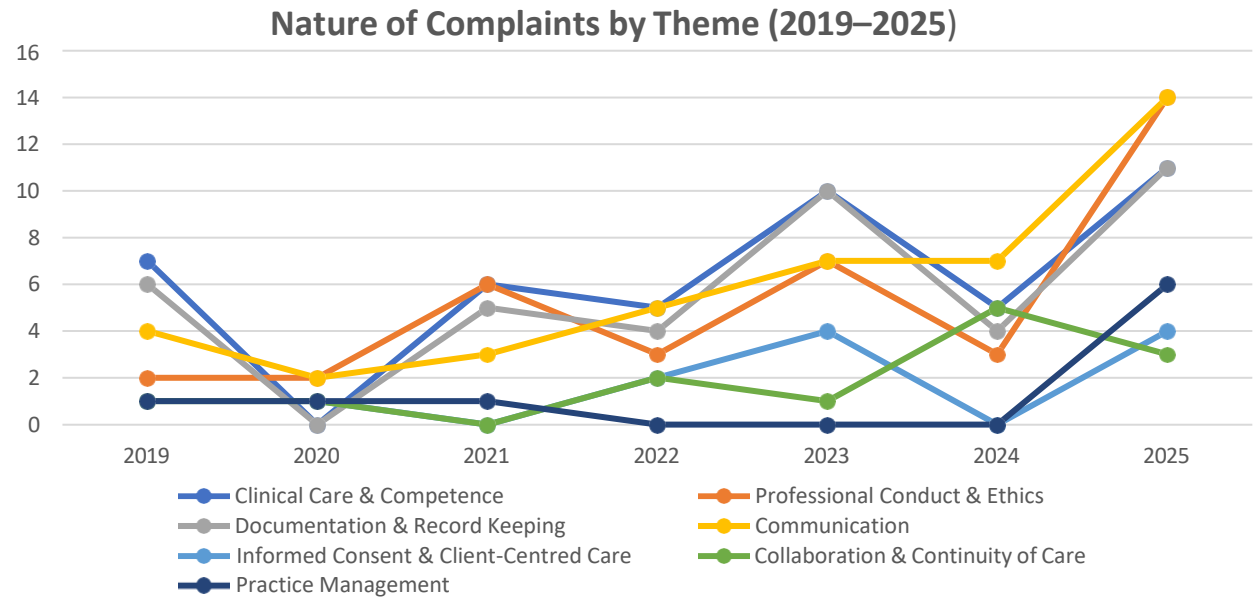
Complaint Source	2019	2020	2021	2022	2023	2024	2025	Total
Client	5	3	9	3	9	5	12	46
Nurse	2	0	0	1	0	2	6	11
Midwife	0	0	1	1	3	1	2	8
Obstetrician	1	0	0	0	0	0	4	5
Neonatal & Paediatric Specialists	0	0	1	1	0	0	1	3
Complaints Director	1	0	0	0	0	0	1	2
Paramedic	0	0	0	0	1	0	1	2
Family Physician	0	0	1	0	0	0	0	1
Total Complaints	9	3	11	7	13	8	27	78

Complaints Director Report



Emerging Themes and Trends (2019–2025)

Analysis of complaint themes over time highlights several notable trends in the nature of concerns brought forward to the College.



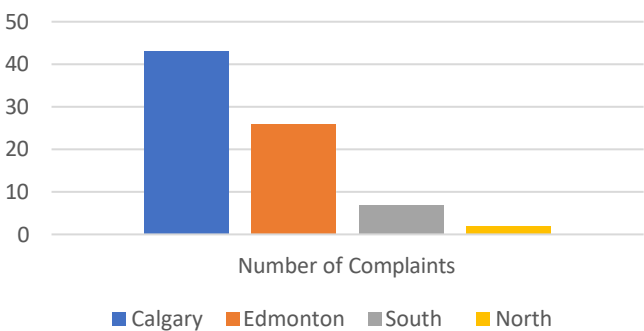
Complaints Director Report

Emerging Themes and Trends (2019–2025)	
Theme	Trend Over Time
Documentation & Record-Keeping	Increasingly important across complaint investigations; frequently associated with other complaint themes.
Professional Conduct & Ethical Conduct	Greater prominence over time, particularly in complaints involving professional interactions and public trust.
Communication	Consistently engaged throughout the reporting period and commonly linked with other complaint themes.
Clinical Care & Competence	Remained a consistent feature of complaints across all years, particularly in pregnancy, labour, birth, and postpartum care.
Termination & Continuity of Care	Emerging theme in recent years, particularly in 2024–2025.

Complaint Distribution by Zone

The Calgary Zone accounted for the greatest proportion of complaints received during the reporting period, followed by Edmonton, South, and North Zones.

Complaint Distribution by Zone (2019–2025)



Looking Ahead

As complaint volumes and complexity continue to evolve, the College remains committed to fair, timely, and transparent complaint processes that support public protection and accountability. The experiences of 2025 highlighted new areas of growth and learning for the complaints process, including increased complaint volume and the College's first Complaint Review Committee request. The College will continue to refine its processes and resources to respond effectively to emerging challenges and opportunities.

CMA Staff

Juliana Cunha

Juliana serves the CMA in multiple roles, including Deputy Registrar, Hearings Director, and Communications Coordinator. As Deputy Registrar, Juliana manages and supports all aspects of registration, including application processing, assessments, annual renewal, policy development, and regulatory reporting. As Hearing Director, she coordinates CMA hearings and supports the process to ensure hearings are organized, fair, transparent, and conducted in accordance with regulatory requirements. She is also responsible for CMA communications and website content, ensuring information for applicants, registrants, and the public is clear, accurate, and up to date.



Shireen Mathew

Shireen serves the CMA as both Finance Director and Office Administrator, contributing significantly to the organization's financial health, administrative infrastructure, and member services.

As Finance Director, Shireen works closely with the Executive Director, the Finance and Audit Committee, and the CMA Investment Specialist. She leads the development of the annual budget, monitors income and expenditures, oversees all financial transactions, and plays a key role in the preparation and coordination of the Annual Audit. She also supports investment planning and oversight to ensure responsible stewardship of CMA's financial resources.



CMA Staff

Her finance-related duties also extend to managing the registrant management system, including invoicing, practice permit fees, and related reporting. She oversees internal financial controls and helps ensure compliance with policies and procedures.

Beyond finance, Shireen manages a range of organizational functions, including human resources, internal policy writing, and new registrant (NR) interviews and surveys, which support CMA's strategic planning and member engagement. She also monitors Google Reviews and other public platforms to ensure that the organization maintains a professional and accurate public presence.

On the direction of Council, the ED and the Office Administrator researched and developed a CMA Policy and protocol for any type of Google Review coming to the CMA. The goal created was/is to enhance education and relations with anyone who writes a Google Review about the CMA and for the public in general.

In her Office Administrator role, Shireen fields all incoming communications—phone calls, emails, and texts—and directs them to the appropriate staff members. She also oversees the CMA's operational infrastructure, including contracts, proposals, and supplies.



Audited Financial Statements and Financial Information

CMA continues to work with **Lloyd Sadd Consulting Inc.** for its investments and with **Dwayne Vinck** for its annual financial audit. The College remains financially accountable for the funds it receives and is committed to responsible stewardship, transparency, and sound financial management to ensure resources are used effectively in support of its mandate and members





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