

Board Meeting  
October 15, 2011  
Agenda Item 3.b.

**BOARD MEETING**  
**Friday, May 27, 2011–10:00 a.m.**

**Fairmont Waterfront Hotel**  
**900 Canada Place Way, Vancouver BC**  
**Mackenzie 1 Room**

**MINUTES**

---

The meeting commenced at 10:15 a.m.

**In Attendance**

Dr. Bob Coles, President  
Dr. Peter Stevenson-Moore, Vice President  
Dr. David Tobias, Treasurer  
Dr. Lonny Legault  
Ms. Julie Johal  
Mr. Dan De Vita  
Mr. David Pusey  
Dr. Jonathan Suzuki  
Mr. Richard Lemon

Dr. Scott LeBuke  
Dr. Erik Hutton  
Dr. Thomas Kirk  
Ms. Patricia Gerhardi  
Mr. Anthony Soda  
Dr. Eli Whitney  
Dr. Patricia Hunter  
Ms. Elaine Maxwell

**Staff in Attendance**

Ms. Heather MacKay, Registrar  
Ms. Betty Richardson, Director of Operations  
Ms. Carmel Wiseman, Director of Complaints  
Ms. Nancy Crosby, Sr. Assistant to the Registrar  
Ms. Sandra Harvey, Manager of Regulation

**1. Call Meeting to Order and Welcoming Remarks**

**2. Consent Agenda**

- a. Approve Agenda for May 27, 2011
- b. Approval of Board Minutes of February 26, 2011



**Motion:**

That the items on the Consent Agenda for the May 27, 2011 Board meeting be approved.

**Carried**

**3. Strategic Planning Session Follow-up**

Board members received a summary of the February strategic planning session with key points. This summary document will inform the Board, Elected Officers and staff going forward. This report confirms that CDSBC is on the right track with respect to prioritizing and communicating issues.

The Board charged the Executive to discuss the summary in detail and come back with a draft strategic plan and present it to the Board in October.

**Motion**

That we file this report with the two suggested changes, as an accepted draft document.

**Carried**

**4. Code of Ethics–Principles**

Dr. Ken Chow, Chair of the Ethics Committee, attended as guest presenter.

Dr. Chow thanked the Board for their support and empowering the Ethics committee to work on updating the Code of Ethics.

The Core Values were presented to the Board and approved in May 2010. The next phase was to work on principles that expand on these Core Values. These principles are designed to address expectations for practice from an ethical perspective for dentists and CDAs. The Ethics Committee is asking the Board to pass the principles as outlined. It is expected that other documents addressing specific ethical expectations will flow out of the Core Values and Principles document.

**Motion:**

That the 'Code of Ethics – Principles' be approved as appended.

**Carried**



## 5. CDSBC Projects - Update

The Registrar provided an update of CDSBC's projects.

- Communications Strategy Workshop

CDSBC is looking at ways of communicating more effectively with registrants. A senior communications consultant has been hired to develop a communications plan with the Executive.

- Infection Control Guidelines

CDSBC continues to work with the College of Dental Hygienists of BC in updating the Infection Control guidelines. A draft document is currently being circulated to the Infection Control working group. This draft will then be sent to a larger group for consultation after feedback from the working group has been incorporated. The goal of the working group is to ensure that any Infection Control guidelines proposed are reasonable and evidence-based. Their aim is to have a document ready for review by the Board in October.

- Revision to Minimal & Moderate Sedation Guidelines

Good progress has been made in the last few months by the Minimal & Moderate Sedation working group. A first Draft will be going to the Sedation Committee in the Fall and then to the Board shortly thereafter.

- Dental Recordkeeping Course

The Dental Recordkeeping course was launched at the 2011 PDC. Feedback on the course was very positive. CDSBC will be presenting this course again at TODS in October.

## 6. Dermal Fillers–Update

Dermal fillers are not a Schedule 1 medication and their use is not currently part of the scope of practice of general dentists. Several general dentists have requested that CDSBC consider allowing the administration of dermal fillers as part of the scope of practice of a general dentist. It was previously decided that further information was required prior to making that decision. A group of dentists with expertise in the area were asked to investigate the issue and provide recommendations to the Board with respect to a policy on this issue. Currently only Oral and Maxillofacial Surgeons with appropriate education from an accredited



institution are authorized to provide dermal fillers. This is decided on a case-by-case basis by the CDSBC Registration Committee.

A group of three Oral and Maxillofacial Surgeons, two of whom administer dermal fillers and one who does not, were asked to research the issue and give some recommendations to the Board with respect to a policy on the administration of dermal fillers by general dentists.

The Board accepted the group's recommendation that dermal fillers are technically challenging and carry a significant enough risk of adverse effects, and are therefore not to be included in the scope of practice of general dentists at this time. The Board accepted that dentists could potentially attain the competencies to safely administer dermal fillers, but decided that until further research can be completed into the education and experience required for their competent administration, dermal fillers remain outside the scope of practice of dentists.

The only exception to this rule is for dentists who have had training in the use of dermal fillers as part of an accredited specialty program and have received approval from CDSBC. The Board asked the dermal filler working group to conduct further investigation and indicated that the issue will be reconsidered when further recommendations have been received.

**Motion:**

That dermal fillers remain outside the scope of practice of dentistry unless specifically authorized by the CDSBC, based on education within an accredited specialty program.

**Carried**

For the further work required, the dermal filler working group recommended that general dentists be added to the working group to ensure a balanced perspective. The Board agreed with this recommendation and will recruit three general dentists to augment the working group. As soon as the necessary educational requirement has been determined, CDSBC will update the profession.

**Motion:**

That the dermal filler working group add general practitioners to their group for further deliberations.

**Carried**



## **7. Prosthodontic Module Working Group**

Several years ago a grant was given to develop a curriculum for the prosthodontic module. Subsequently, it was identified that there was a need for this module to be updated so a working group was formed. Under the HPA, CDSBC does not have authority to set a curriculum in CDA schools. It is recommended therefore that the working group be disbanded.

### **Motion:**

That the Prosthodontic Module Working Group be disbanded effective May 27, 2011.

### **Carried**

## **8. Governance Review**

The CDSBC Governance Manual is out of date and needs to be reviewed and updated. This will be brought back to the Board in the Fall after some preliminary updating of the current document.

The Registrar will look into retaining a governance consultant to assist with this process.

## **9. Mission Statement**

Board members received the current Mission Statement, along with three suggested changes. Due to time constraints, this item was deferred to the Board meeting in October.

Board members were invited to submit their comments and provide feedback on the current Mission Statement and the suggested changes.

## **10. CDRAF Update**

### **a. CDRAF Executive**

CDSBC's Registrar is now on the CDRAF Executive Committee. This is the first time BC will have representation at the Executive level of the National group and will present an important opportunity to continue to play a strong role in national issues and initiatives.



## **b. Interface Meetings–Update**

“Teamship Guidelines”, which are a set of principles that will act as a guide for joint projects between the CDA and CDRAF, were passed recently.

The next meeting will be in June where some CDRAF and CDA staff will meet to discuss how they will work together on a staff level. It is hoped that a project of mutual interest will be identified at this meeting.

## **c. Board Meeting**

A Board meeting of the CDRAF took place in Ottawa in April. Dr. Bob Coles, CDSBC President, and Ms. Heather MacKay, CDSBC Registrar, attended.

At the meeting, a new governance structure for CDRAF was approved which increases the number of members of the Executive to five, and allows for more flexibility in becoming involved with national initiatives.

Many issues of national interest were discussed, including the Competition Bureau, trends for worldwide labour mobility and issues involving off-shore dental labs.

The next CDRAF Board meeting is in October.

## **11. Patient Relations Committee Update**

Background: The *Health Professions Act* requires that CDSBC have a Patient Relations Committee. Currently the Board serves as this committee. The goal of the Committee is to establish/develop a patient relations program and to promote patient relations that are appropriate.

- CDSBC will conduct a workshop with the Board and other stakeholders in October 2011 to further explore issues related to professional boundaries.
- This workshop is being held the day after the Board meeting. CDSBC is retaining a speaker with expertise in this area. Key stakeholders will also be invited to attend.

The President reminded the Board of the Bylaws pertaining to patient relations. The general approach of CDSBC to this issue is that all healthcare providers must have a professional relationship with any patients they treat.

**The public portion of the meeting adjourned at 2:00 pm**