BOARD MEETING
Friday, 24 November 2017

Terminal City Club
837 West Hastings St. Vancouver, B.C.
“Skidmore Room”

MINUTES

The meeting commenced at 8:35 am

In Attendance
Dr. Don Anderson, President
Dr. Susan Chow, Vice-President
Dr. Patricia Hunter, Treasurer
Dr. Deborah Battrum
Dr. Doug Conn
Dr. Dustin Holben
Dr. Andrea Esteves
Dr. Michael Flunkert
Mr. Terry Hawes
Mr. Oleh Ilnyckyj
Ms. Cathy Larson
Ms. Sabina Reitzik
Dr. Masoud Saidi
Dr. Mark Spitz
Mr. Neal Steinman

Regrets:
Ms. Dorothy Jennings

Staff in Attendance
Mr. Jerome Marburg, Registrar & CEO
Mr. Greg Cavouras, General Counsel
Ms. Nancy Crosby, Manager of CEO’s Office
Dr. Chris Hacker, Director of Professional Practice & Deputy Registrar
Ms. Roisin O’Neill, Director of Registration and HR
Dr. Peter Stevenson-Moore, Dental Policy Advisor
Ms. Leslie Riva, Sr. Manager, CDA Certification and QA
Ms. Marife Sonico, Administrative Assistant, Registrars Office
Ms. Anita Wilks, Director of Communications
Ms. Carmel Wiseman, Policy Development & Deputy Registrar
Mr. Dan Zeng, Director of Finance and Administration
1. **Call Meeting to Order and Welcoming Remarks**

   The President welcomed everyone and informed that the agenda for the day is packed and reminded the group of the CEO evaluation happening at 2:30pm.

2. **Please see Item 9 of *In Camera* agenda**

3. **Consent Agenda**

   a. Approve Agenda for 24 November 2017 *(attachment)*
   b. Approval of Board Minutes of 23 September 2017 *(attachment)*
   c. Reports from Committees *(attachments)*

   Dr. Susan Chow advised that she will not be reporting on Bylaw 2 (agenda item 15) and instead Dr. Peter Lobb will be presenting that agenda item to the Board.

   The President noted that under item 13, the first motion on changes to the awards policy will not be put forward to the Board.

   Two new business items were put forward:
   - Douglas College’s Dental Assisting Program
   - Update on the Dental Learning Centre

   **MOTION: Conn/Holben**

   *That the items on the Consent Agenda for the 24 November 2017 Board meeting be approved.*

   Carried

4. **Business Arising from the Consent Agenda**

   There was no business arising from the consent agenda.

5. **First Nations Cultural Safety Course – Follow Up**

   The Registrar reported that he and a few other Board members have completed the course. He shared that he found it very valuable, and further encouraged the rest of the Board to take the course, consistent with one of our strategic plan objectives and
the Declaration of Commitment to Cultural Safety and Humility that the Board signed in March 2017.

6. Executive Limitation Reports

CDSBC Governance policy requires that the CEO report regularly on matters identified by the Board through a series of Executive Limitations policies. This is one of the ways the Board discharges its oversight obligations without delving into operational issues. The CEO routinely submits these reports to the Board.

- EL2: Treatment of Public *(attachment)*
- EL3: Registration, Certification and Monitoring *(attachment)*
- EL5: Financial Planning/Budgeting *(attachment)*
- EL6: Financial Condition and Activities *(attachment)*
- EL8: Asset Protection *(attachment)*
- EL9: Compensation & Benefits *(attachment)*

There were no questions regarding the reports included in the board package.

7. Deputy Registrar Report *(attachment)*

Dr. Chris Hacker gave a quick summary of the complaints statistics and indicated that staff holidays and a decreased number of Inquiry Committee meetings usually result in slightly skewed data for this quarter. He highlighted the in-person meeting with the Inquiry Committee that took place 17 November which they found to be valuable and allowed for more relevant conversations (as opposed to the usual teleconference meetings).

Dr. Hacker also mentioned that there are a number of files that have been moved out of province for investigation by another College. He explained that if a complaint is made against a registrant with an apparent conflict of interest, the complaint is moved to another College in another province for investigation. The number of these out-of-province investigations varies. Currently there are about 4 or 5 in various stages.
8. **Management Report** *(will be sent electronically)*

Mr. Marburg submitted a written report on behalf of the staff and management of the College. He cited that the management report is a constantly evolving piece and asked the Board to put forward their suggestions on the format, if any.

This concludes the open portion of the meeting. The meeting ended at 9:02 am.

The remainder of the meeting will be held in camera, per Section 2.15 (9) of the College Bylaws under the *Health Professions Act*. 
# AGENDA

## A. Description of Agenda Items

<table>
<thead>
<tr>
<th></th>
<th>Description of Agenda Items</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Call Meeting to Order and Welcoming Remarks</td>
<td>Anderson</td>
</tr>
<tr>
<td>2</td>
<td>Please see Item 9. of <em>In Camera</em> agenda</td>
<td>Anderson/Marburg</td>
</tr>
</tbody>
</table>

## 3. CONSENT AGENDA

<table>
<thead>
<tr>
<th></th>
<th>Description of Agenda Items</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Approve Agenda for 24 November 2017 <em>(attachment)</em></td>
<td>Anderson</td>
</tr>
<tr>
<td>b</td>
<td>Approval of Board Minutes of 23 September 2017 <em>(attachment)</em></td>
<td>Anderson</td>
</tr>
<tr>
<td>c</td>
<td>Reports from Committees <em>(attachments)</em></td>
<td>Anderson</td>
</tr>
<tr>
<td></td>
<td>MOTION: That the items on the Consent Agenda for the 24 November 2017 Board meeting be approved.</td>
<td>Anderson</td>
</tr>
</tbody>
</table>

## 4. Business Arising from Consent Agenda

*Note: Questions, if any, arising from Consent Agenda must be forwarded to the Chair at least 3 business days prior to Board meeting*

<table>
<thead>
<tr>
<th></th>
<th>Description of Agenda Items</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Business Arising from Consent Agenda</td>
<td>Anderson</td>
</tr>
</tbody>
</table>

## 5. First Nations Cultural Safety Course – Follow Up

<table>
<thead>
<tr>
<th></th>
<th>Description of Agenda Items</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>First Nations Cultural Safety Course – Follow Up</td>
<td>Marburg</td>
</tr>
<tr>
<td>A.</td>
<td>Description of Agenda Items</td>
<td>Presenters</td>
</tr>
<tr>
<td>----</td>
<td>-----------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>6.</td>
<td>Executive Limitation Reports:</td>
<td>Marburg</td>
</tr>
<tr>
<td></td>
<td>• EL2: Treatment of Public <em>(attachment)</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• EL3: Registration, Certification and Monitoring <em>(attachment)</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• EL5: Financial Planning/Budgeting <em>(attachment)</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• EL6: Financial Condition and Activities <em>(attachment)</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• EL8: Asset Protection <em>(attachment)</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• EL9: Compensation and Benefits <em>(attachment)</em></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Deputy Registrar Report <em>(attachment)</em></td>
<td>Hacker</td>
</tr>
<tr>
<td>8.</td>
<td>Management Report <em>(attachments)</em></td>
<td>Marburg</td>
</tr>
</tbody>
</table>

This concludes the open portion of our meeting.

The remainder of the meeting will be held in camera, per Section 2.15 (9) of the College Bylaws under the *Health Professions Act*. 
CDSBC Committee Report to Board
For Public Agenda

Committee Name: Audit Committee and Finance & Audit Working Group
Submitted by: Mr. Terry Hawes, Chair
Submitted on: November 8, 2017
Meeting Frequency:
- 16 May 2017
- 13 September 2017 – Video Conference
- 18 October 2017
- 2 November 2017
- February 2018 (TBA)

Matters Under Consideration:
- 2018-2019 Budget (Operating and Capital)
- Ongoing review of Expense reports of Board/Committee and staff

Committee Objective For 2017-2018:
- as above

Progress and Timeline to Completion:
- Budget to be ‘Approved’ November 24, 2017
- Expenses Reports is an ongoing matter

Challenges to Timeline:
- N/A

Work in Progress:
- Formulation of controls and systems relative to capital budget projects
- Review accounting policies and reporting with auditors relative to practice inspection, criminal records checks and consultants fees

Regulating dentistry in the public interest
• Review D&O Insurance, Indemnification, and Advancement, integration with Bylaws
• Bylaw update as required by the Bylaw Working Group
• Create policy as to Unrestricted Net Assets in terms of level, transfers and management
• Mind Map of CDSBC – provincial, national, international
• Financial Reporting – format, style and content (statement of financial position, segmented funds)
• BCDA Fee Agreement – 2018 forward
• Executive Limitation reports – review and updating
• Appointment of Auditor for 2018, financial statements standard and format, receipt of reporting letter and supplementary documents from Auditor
• Risk Analysis, monitoring – material litigation
• Integration of the Strategic Plan with the Budget
• Interim financial reporting and accounting processes/policies, detailed reporting of Fund expenditures
• Review previous GST opinion on Rental Income
CDSBC Committee Report to Board
For Public Agenda

Committee Name: CDA Advisory Committee
Submitted by: Ms. Wendy Forrieter, Chair
Submitted on: 24 November 2017
Meeting Frequency: This Committee has not met since the last Board meeting

Matters Under Consideration:
Further discussion about the Bylaws that relate to CDAs

Statistics/Report

Future Trends

Progress and Timeline to Completion:
CDSBC Committee Report to Board
For Public Agenda

Committee Name: CDA Certification Committee
Submitted by: Ms. Bev Davis, Chair
Submitted on: 24 November 2017
Meeting Frequency: This Committee has not met since the last Board meeting

Matters Under Consideration:
Further discussion about the Bylaws that relate to CDAs

Statistics/Report

Future Trends

Progress and Timeline to Completion:

Regulating dentistry in the public interest
CDSBC Committee Report to Board
For Public Agenda

Committee Name
Ethics Committee

Submitted by
Dr. Kenneth Chow, Chair

Submitted on
27 October 2017

Meeting Frequency
6 March 2017 (Article 5 Subcommittee)
5 April 2017
25 April 2017 (Article 5 Subcommittee)
29 August 2017

Matters Under Consideration:
1. Bylaw 12 Advertising and Promotional Activities Amendment was passed by the Board at its September 2017 meeting and has been filed with the government.

2. Third Party Billing Position Statement sent out for Public Consultation. Once feedback reviewed will report back to the Board.

3. Article 5 Review – Subcommittee to meet to discuss next steps to capture parts of Article 5 that are necessary and where and in what format they should appear. Article 5.07 (h) (iii) (c) - Directly or indirectly yield profits to any controlling lay group, persons, firms, or corporations; this will need to be discussed further.

4. Corporatization and Corporate Structures – Awaiting analysis of the data being collected regarding corporate share structures. This may assist in dealing with Article 5.07 (h) (iii) (c).

Committee Objective
For 2017-2018:
Finalize the Third Party Billing Position Statement.

Progress and Timeline to Completion:
2018

Challenges to Timeline:
None.
CDSBC Committee Report to Board
For Public Agenda

Committee Name: Governance Committee
Submitted by: Dr. Susan Chow, Chair
Submitted on: November 2017
Meeting Frequency: Next meeting scheduled for November 23, 2017

Matters Under Consideration:

- Finalizing the agreement between the board and external legal firm (Eileen Vanderburg) regarding the Repository of the current and past registrar employment files as instructed by the Board in Feb 2017.

- Assisting the President in launching the Registrar/CEO evaluation with the HR consultant (Seonaid Charlesworth) per Board decision in June 2017.

- Preliminary Discussion of the feedback of the draft Bylaw part 4 pertaining the Governance committee.

- Review and discuss the process of the NDEB examiners appointments.

- Discussing policy regarding the committee only session of the College committee.

- Together with the Registrar/CEO, leads the development of the Registrar/CEO’s annual goals and objectives, for recommendation to the Board (GM 11.4.1.b).

- Compensation Review of the Registrar/CEO following the Evaluation GM25.5.
Progress and timeline to Completion:

Registrar/ CEO evaluation will be presented in Nov Board meeting

Repository of employment files of the current and past registrars is underway

We will be presenting recommendations on all other items in February 2018.
CDSBC Committee Report to Board
For Public Agenda

Committee Name: Inquiry Committee
Submitted by: Dr. Greg Card, Chair
Submitted on: 31 October 2017
Meeting Frequency: From 31 August 2017, the date of the last report, until 31 October 2017, the Inquiry Committee as a whole met on the following dates:

- 03 October 2017

Inquiry Committee Panels met on the following dates:

- 05 October 2017
- 18 October 2017
- 23 October 2017

In addition, a Panel of the Inquiry Committee meets weekly electronically to review new complaints received and direct how each new file is to be handled (normally through investigation or early resolution).

Matters Under Consideration: Between 01 September 2017 and 31 October 2017, Inquiry Committee Panels received information and gave directions regarding files involving 20 dentists and 1 certified dental assistant under review. The files had been referred to a Panel because they were complex; the registrant has asked to meet with a Panel; the registrant is a member of the either the CDSBC Board or a College Committee; or for consideration of proposals from registrants regarding complaint dispositions.

Statistics/Report: 30 files were opened and 14 files were closed between 01 September 2017 and 31 October 2017.
Future Trends

It appears that the number and complexity of complaints received over the last few months has increased. This has resulted in the number of complaints received in the last two months being greater than those files closed. It is expected that a number of these more complex files will be closed over the next two Inquiry Committee meetings.
CDSBC Committee Report to Board
For Public Agenda

Committee Name  Nominations Committee
Submitted by  Dr. David Tobias, Chair
Submitted on  8 November 2017
Meeting Frequency  The Committee met in person on 11 September and conducted a teleconference on 23 October 2017

Matters Under Consideration
Under the Governance Manual, the Nominations Committee will become the Awards Committee. For this reason, the Bylaws Working Group asked the committee to review sections of the CDSBC Bylaws that relate to the Awards Committee. The committee has submitted their feedback which includes expanding the awards program purpose, updating the role of the Certificate of Appreciation at the awards ceremony and clarifying the criteria of the Honoured Member award.

As a result of that review, the Committee recommends that CDSBC’s Awards Policy be updated to make the policy consistent with the new bylaw. At the same time, the Committee identified some smaller changes to the Awards Policy that would assist in the administration of the policy. The committee has made a board submission regarding the changes to the awards policy.

The Committee reviewed the submitted list of volunteers eligible for awards and the list of recommended award winners was finalized. The Committee is pleased to submit its recommendations to the Board for your consideration.

The annual awards ceremony will take place on Thursday, 8 March 2018 at 6 pm. It will be held again at the Fairmont Waterfront Hotel, Mackenzie Ballroom. Board members are strongly encouraged to attend the ceremony to meet and celebrate the outstanding individuals who work so diligently on its behalf.

Statistics/Report  N/A
Future Trends

None

Progress and Timeline to Completion:

N/A

The role of the Nominations Committee is to administer the College’s awards program; this is done on an annual cycle. The Committee’s list of recommended award winners is submitted to the Board for approval at the last meeting of the calendar year and is included here. The awards are presented at a formal ceremony each March.
CDSBC Committee Report to Board
For Public Agenda

Committee Name                  Quality Assurance Committee
Submitted by                    Dr. Ash Varma, Chair
Submitted on                    24 November 2017
Meeting Frequency
The QA Committee has not met since the last Board meeting. Next meeting 7 December 2017. The QA Working Group met on 28 September and 27 October 2017. Next meeting date 8 December 2017.

Matters Under Consideration
At the December meeting the QA Committee will be reviewing the PDC course submissions. Additionally the Board has tasked the Committee to review the RCDSO Guidelines for Implants.

The QA Working Group continues to work on development of the improved QA program. The group will be meeting 8 December to begin preparing the draft proposal for presentation to the Board.

Statistics/Report               n/a

Future Trends                   n/a

Progress and Timeline to Completion:
Draft program and recommendations to be sent to the Board for review for the February 2018 meeting

Quality Assurance Working Group consists of:

Mr. Paul Durose
Dr. Alex Hird
Dr. Andrea Esteves
Ms. Shelley Melissa, CDA
Dr. Ash Varma, Chair
Dr. David Vogt
# CDSBC Committee Report to Board

**For Public Agenda**

<table>
<thead>
<tr>
<th>Committee Name</th>
<th>Registration Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitted by</td>
<td>Dr. Alexander Hird (Chair)</td>
</tr>
<tr>
<td>Submitted on</td>
<td>8 November 2017</td>
</tr>
<tr>
<td>Meeting Frequency</td>
<td>14 September 2017</td>
</tr>
<tr>
<td>Matters Under Consideration</td>
<td>Bylaw review: committee is preparing feedback on relevant bylaws and policies, and on proposed new framework for registration categories. Updating policy for Summer Student Practitioner Program to be clearer with respect to students applying from programs other than UBC.</td>
</tr>
<tr>
<td>Statistics/Report</td>
<td>No registration applications reviewed by Committee since last Report to Board.</td>
</tr>
<tr>
<td>Future Trends</td>
<td>Registration/regulation of Dental Therapists – review is pending as we understand.</td>
</tr>
<tr>
<td>Progress and Timeline to Completion</td>
<td>Developing Policy for Summer Student Practitioner Program (SSPP) - currently at 75%, anticipate completion by next Board Meeting. Feedback to Bylaws Review Working Group – report was 90% complete on 30 September, expect submission to BRWG by next Board Meeting.</td>
</tr>
</tbody>
</table>
CDSBC Committee Report to Board for Public Agenda

Committee Name: Sedation and General Anaesthetic Services Committee
Submitted by: Dr. Tobin Bellamy, Chair
Submitted on: 24 November 2017
Meeting Frequency: 27 February 2017
10 April 2017
19 June 2017
18 September 2017
20 November 2017

Matters Under Consideration

The teaching of Pediatric moderate sedation during a short course format has been reviewed. 2 motions will be presented to the board this meeting. Grandfathering of registrants who sedate children will need to be refined further.

We are attempting to define (and create criteria) for the mentor/mentee relationship during the teaching of Multi-drug oral sedation.

A working group on Pediatric Sedation is continuing to evaluating the current document to make sure that Pediatric Moderate Sedation Standards are appropriate.

A working group on Deep Sedation and General Anaesthesia is working on the revision of the Deep Sedation and the General Anaesthetic Services Standards and Guidelines.

Statistics/Report

Since the last Board Meeting, four Registration of Qualifications applications were received, two were approved. Currently three are awaiting approval at the next Sedation Committee Meeting.

Two general anaesthetic office tri-annuals were approved. Six deep sedation office tri-annual was approved.

One deep sedation facility is in the tri-annual inspection process. No general anaesthetic offices are in the tri-annual inspection process.

Two new general anaesthetic offices are in the inspection process. Two new deep sedation facilities are in the inspection process.

Annual self-assessments are sent to a rota of the Committee for approval. Fifteen are currently being reviewed.
Committee Objective
For 2017-2018:

The committee hopes to start initial self-assessments of Moderate IV sedation facilities in 2018.

We hope to have a grandfathering process for pediatric moderate sedation completed in early 2018. This will complete the review of pediatric sedation in a short course format.

Progress and Timeline
to Completion:

The review of the deep sedation and general anesthetic standards are progressing well and the subcommittee hopes to have a draft to the committee in 2018.

We continue to review ACLS and its alternative for sedation in BC. We hope to have some course criteria by the end of 2018.
POLICY EL 2: TREATMENT OF THE PUBLIC

With respect to interactions with the public, the Registrar shall not cause or allow conditions, procedures, or decisions which are unfair, unreasonable or disrespectful.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Use forms that elicit information for which there is no clear necessity. Forms collect only the information required.</td>
</tr>
<tr>
<td>2</td>
<td>Use methods of collecting, reviewing, transmitting, or storing information that fail to protect against improper access to the material elicited. CDSBC has secure document storage facilities for all hard copies. Confidential shredding is used throughout the office for destruction of documents with sensitive information when those documents are slated for destruction. Electronic files are protected by industry standard firewalls and end-point security hardware and software.</td>
</tr>
<tr>
<td>3</td>
<td>Fail to operate facilities with appropriate accessibility and privacy. CDSBC offices are accessible to any of those staff who require access. Premises are alarmed and monitored. Keypad security is maintained for main office and Suite 103 entry. Private offices and meeting spaces are available and used when required to maintain privacy.</td>
</tr>
</tbody>
</table>
POLICY EL 2: TREATMENT OF THE PUBLIC

With respect to interactions with the public, the Registrar shall not cause or allow conditions, procedures, or decisions which are unfair, unreasonable or disrespectful.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
</table>
| 4      | Fail to establish with members of the public a clear understanding of what may be expected and what may not be expected from the College, including the processes it employs in adjudicating public complaints. | Registrar reports compliance. Details are included in complaints and discipline reports tabled at the Board meeting by the Deputy Registrar.  

The CDSBC website contains helpful information about complaints, including a designated "news feed" on the homepage, a complaints form, and a detailed description of the complaints process. A new public-friendly BC Health Regulators video that explains how health colleges investigate complaints has been added to the site.  

Members of the public who contact the College about how to make a complaint or about the complaint process are provided with information promptly. Work is almost complete to improve the existing "online" complaint process to help people resolve potential complaints themselves and to lodge a complaint otherwise. The updated online complaints form should be active very soon.  

Beginning March 2016, complainants and registrants about whom a complaint has been made are asked to complete an exit survey upon the closure of the file. This one-year pilot project has been extended for another year. |
| 5      | Fail to adjudicate complaints as expeditiously as possible. | We have made significant progress in this area over the past few years. Over the last few years, more complaint files have been closed than opened; however in recent months, the volume and complexity of new complaints have started to rise. |
POLICY EL 2: TREATMENT OF THE PUBLIC

With respect to interactions with the public, the Registrar shall not cause or allow conditions, procedures, or decisions which are unfair, unreasonable or disrespectful.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Fail to deal with public inquiries as expeditiously as possible. All inquiries from the public are dealt with as expeditiously as possible. The Director of Communications, in consultation with the Registrar/CEO, responds to media inquiries as quickly as possible.</td>
</tr>
<tr>
<td>7</td>
<td>Fail to employ alternate dispute resolution where appropriate. CDSBC resolves approximately 95% of all complaints through consensual dispute resolution. CDSBC has deployed resources to place more emphasis on early resolution through appropriate dispute resolution techniques. With the reduction in the backlog of complaints, staff dentists continue to try to resolve complaints quickly after a formal complaint is received if the matter is appropriate for early resolution.</td>
</tr>
</tbody>
</table>

Respectfully Submitted By:

Jerome M. Marburg
Registrar and CEO

Date: 6 Nov 2017
**POLICY EL 3: TREATMENT OF REGISTRANTS**

With respect to interactions with registrants, the Registrar shall not cause or allow conditions, procedures, or decisions which are unfair, unreasonable or disrespectful.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Use forms that elicit information for which there is no clear necessity.</td>
<td>Forms (both paper and electronic) collect only relevant/statutory information needed for registration. Personal assurance of registration staff and review of Registrar/CEO are evidence of compliance.</td>
</tr>
<tr>
<td>2 Use methods of collecting, reviewing, transmitting, or storing information that fail to protect against improper access to the material elicited.</td>
<td>CDSBC database is secured with password protection and is located on internal servers behind firewall and industry standard end-point protection. Access to said database is restricted to only those persons requiring access for their job functions. Physical files are kept in locked cabinets wherever personal or sensitive information is present. Registrant files are kept electronically, storing the paper version on-site for one year.</td>
</tr>
<tr>
<td>3 Fail to register applicants as expeditiously as possible.</td>
<td>Application process generally is completed within 2-3 weeks unless extenuating circumstances present. Online registration/application process is expected to be launched by the end of the calendar year. It was delayed due to other IT projects.</td>
</tr>
<tr>
<td>4 Fail to establish with registrants a clear understanding of what may be expected and what may not be expected from the College, including the processes it employs in adjudication of public complaints.</td>
<td>The College communicates its expectations for registrants in a variety of ways, such as publications (electronic and print), through courses and presentations. Our newest course, More Tough Topics (about informed consent and other topics that can lead to complaints) was launched as an online course in Spring 2017. Planning is also underway for a joint course with the BCDA for new registrants which is scheduled for a June 2018 launch. We have published summaries of individual complaint files over a three-year period to help educate registrants and the public about the types of complaints received and how they are resolved; summaries for two additional years will be published this fall.</td>
</tr>
</tbody>
</table>
# POLICY EL 3: TREATMENT OF REGISTRANTS

With respect to interactions with registrants, the Registrar shall not cause or allow conditions, procedures, or decisions which are unfair, unreasonable or disrespectful.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Over the last number of years, the College has closed more complaint files than it has opened with the result that the inventory has been significantly reduced. In March 2016 we introduced an exit survey pilot project for registrants and complainants. Registrants who are the subject of a complaint are invited to complete an exit survey upon the closure of the complaint. This project has been extended for a second year. The results will be used to improve the complaints process.</td>
</tr>
<tr>
<td>6</td>
<td>The Complaints team facilitates solutions directed by the Inquiry Committee on files where concerns have been identified.</td>
</tr>
<tr>
<td>7</td>
<td>All inquiries, whether from registrants or members of the public, are responded to promptly. When a prompt response is not possible, persons are informed of this fact and when a response may be expected.</td>
</tr>
<tr>
<td>8</td>
<td>Communications materials support the strategic plan and makes use of new communications tools where appropriate. Although most communication with registrants is electronic, the College uses other methods when warranted. In support of the policy development framework developed in 2016, we are hosting a series of &quot;listening sessions&quot; with registrants and stakeholders. To improve transparency, we are adding a forum to the website to share comments from registrants and the public in response to public consultations. The College is responsive to trends or issues as they arise.</td>
</tr>
</tbody>
</table>
POLICY EL 3: TREATMENT OF REGISTRANTS

With respect to interactions with registrants, the Registrar shall not cause or allow conditions, procedures, or decisions which are unfair, unreasonable or disrespectful.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Propose registration fees to the Board without a clear rationale. All registration fees are tied to budget and budgeting process over which the Board has oversight and through which the Board and Audit/Finance Committee are consulted. The annual report includes a detailed graphic breakdown to illustrate how registrant fees are allocated to the various functions.</td>
</tr>
</tbody>
</table>

Respectfully Submitted By:

Jerome M. Marburg
Registrar and CEO

Date: 6 Nov 2017
POLICY EL 5: FINANCIAL PLANNING/BUDGETING

Due Date: Quarterly - May, Sep, Dec, Feb

Financial planning for any fiscal year shall not deviate materially from Board's Ends priorities, risk fiscal jeopardy, or fail to be derived from a business plan.

Further, without limiting the scope of the foregoing by this enumeration, the Registrar shall not plan in a manner that:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Risks the organization incurring those situations or conditions described as unacceptable in the Board's policy Financial Condition and Activities.</td>
<td>Registrar/CEO reports compliance per EL 6 report.</td>
</tr>
<tr>
<td>2. Fails to include credible projection of revenues and expenses, separation of capital and operational items, cash flow, and disclosure of planning assumptions.</td>
<td>Monthly financial statements, forecast, and Budget are evidence of compliance.</td>
</tr>
<tr>
<td>3. Fail to maintain a contingency reserve.</td>
<td>Registrar/CEO reports compliance per EL 6 report, and as evidenced in financial statements.</td>
</tr>
</tbody>
</table>

Respectfully Submitted By:

Jerome M. Marburg
Registrar and CEO

Date: 21 Oct 2017
**POLICY EL 6: FINANCIAL CONDITIONS AND ACTIVITIES**

**Due Date:** Quarterly - May, Sep, Dec, Feb

With respect to ongoing financial condition and activities, the Registrar shall not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Board priorities established in Ends policies.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
</table>
| 1 | Expend more funds than have been received in the fiscal year to date unless the debt guideline (see 2 below) is met.  
  CDSBC does not debt finance. Financial statements reported monthly show that expenditures do not exceed revenues. |
| 2 | Indebt the organization in an amount greater than 5% of the annual revenue.  
  CDSBC does not debt finance. |
| 3 | Use any contingency reserves except as authorized by an extraordinary motion of the full Board.  
  No transfers are undertaken without a Board motion. No contingency reserves have been utilized since last report. |
| 4 | Fail to report to Board at the earliest opportunity the amount by which any item in the approved operating or capital budget is forecasted to exceed the budget for a category.  
  Monthly financial statements are reviewed with the Board Officers and variances are discussed. Monthly financial statements are also shared with the Audit Committee and Finance & Audit Working Group, and the latest financial statements are received at each Audit Committee and Finance & Audit Working Group meeting. Financial statements are tabled at each Board meeting showing performance against budget. Staff report any item in the approved operating or capital budget that is forecasted to exceed the budget of any category, in the notes to the variances or verbally at the Board meeting. |
POLICY EL 6: FINANCIAL CONDITIONS AND ACTIVITIES

Due Date: Quarterly - May, Sep, Dec, Feb

With respect to ongoing financial condition and activities, the Registrar shall not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Board priorities established in Ends policies.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Registrar/CEO reports compliance. Authorize the payment of any item that was included in the approved operating or capital budget in an amount that will exceed the approved budget for that category by more than 50,000.</td>
</tr>
<tr>
<td>6</td>
<td>Registrar/CEO reports compliance. All payroll obligations are being met. Per the update to the Board at its June meeting, server hosting in the Cloud is not a viable option and is cost-prohibitive. Therefore, it was decided to shift the budget categories. New servers were purchased and expenses will be incurred for server replacement related planning and installation. This does not impact the overall budget, but the IT capital expenditure and the IT restricted fund are expected to exceed the $25,000 limit. Fail to obtain authorization from Board before committing the College to any operating or capital expenditure not included in the approved operating or capital budget that exceeds $25,000 or that creates or increases a cash flow deficiency for the current fiscal year.</td>
</tr>
<tr>
<td>7</td>
<td>Registrar/CEO reports compliance. All payroll obligations are being met. Fail to settle payroll and debts in a timely manner.</td>
</tr>
</tbody>
</table>
POLICY EL 6: FINANCIAL CONDITIONS AND ACTIVITIES

Due Date: Quarterly - May, Sep, Dec, Feb

With respect to ongoing financial condition and activities, the Registrar shall not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Board priorities established in Ends policies.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Allow tax payments or other government ordered payments or filings to be overdue or inaccurately filed.</td>
</tr>
<tr>
<td>9</td>
<td>Acquire, further encumber or dispose of real property.</td>
</tr>
<tr>
<td>10</td>
<td>Fail to aggressively pursue receivables after a reasonable grace period.</td>
</tr>
</tbody>
</table>

Respectfully Submitted By:

[Signature]

Jerome M. Marburg
Registrar and CEO

Date: 24 Dec 2017
### POLICY EL 8: ASSET PROTECTION

**Due Date:** Annually - December

The Registrar shall not allow the College's assets to be unprotected, inadequately maintained or unnecessarily risked.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Fail to insure against theft and casualty losses to at least 80% replacement value and against liability losses to Board members, staff and the organization itself in an amount greater than the average for comparable organizations. Registrar/CEO reports compliance. Following is a general summary of the main policies in place. In addition, all CI's carry required CDSPI insurance. Theft - The property policy protects against theft (property coverage is on a replacement cost basis). There is also crime coverage in place that would cover against theft as well. The distinction between the two: the crime policy is designed to cover against theft of money (currency, cheques, money orders etc.) and securities. Casualty - the commercial general liability policy protects the Board, staff (including volunteers) and the organization from liability arising from bodily injury or property damage to a third party. The commercial general liability policy protects against liabilities arising out of bodily injury and property damage. There is also the non-profit organization liability policy that protects the liabilities of the Board, staff (including volunteers) and the organization itself. This is more commonly referred to as the Directors and Officers policy and offers protection for the following: Directors and Officers Liability: Covers liabilities arising out of the activities of governing the organization. Employment Practices Liability: Covers liabilities from employment related claims (wrongful dismissal, sexual harassment, failure to promote, etc.). Professional Liability: covers negligent act, negligent error or negligent omission committed or alleged to have been committed by the insured in the performance of Professional Services (regulatory activities).</td>
</tr>
<tr>
<td>2</td>
<td>Subject property and equipment to improper wear and tear or insufficient maintenance. All equipment is on appropriate maintenance schedules. Staff are made aware of proper use and care expectations.</td>
</tr>
</tbody>
</table>
POLICY EL 8: ASSET PROTECTION

Due Date: Annually - December

The Registrar shall not allow the College's assets to be unprotected, inadequately maintained or unnecessarily risked.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Unnecessarily expose the organization, its Board or staff to claims of liability. Registrar/CEO reports compliance.</td>
</tr>
<tr>
<td>4</td>
<td>Make any purchases or award any contract: (a) wherein normally prudent protection has not been given against conflict of interest; (b) of over $25,000 without having obtained comparative prices and quality. Orders shall not be split to avoid these criteria. Registrar/CEO reports compliance.</td>
</tr>
<tr>
<td>5</td>
<td>Fail to take reasonable steps to protect intellectual property, information and files from loss or significant damage. CDSBC secures all physical files. All electronic files are routinely backed up, with historical tape backups spanning multiple years held off-site. Critical files and configuration parameters are backed up and stored off-site as well. IT systems have built-in redundancies and daily local backups to disk.</td>
</tr>
<tr>
<td>6</td>
<td>Fail to implement the auditor's recommendations with respect to financial internal controls. Registrar/CEO reports compliance.</td>
</tr>
</tbody>
</table>
POLICY EL 8: ASSET PROTECTION

Due Date: Annually - December

The Registrar shall not allow the College's assets to be unprotected, inadequately maintained or unnecessarily risked.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>All cheques are signed in compliance with this policy.</td>
</tr>
</tbody>
</table>

Fail to ensure the following cheque signing authorities: A) two signatures for cheques up to $25,000 from the following: President, Vice-President, Treasurer, Registrar, Deputy Registrar, Director of Registration and HR, Director of Communications. B) two signatures for: (i) cheques over $50,000 of an unbudgeted item - one from each of the following two groups: i) President, Vice-President or Treasurer; ii) Registrar, Deputy Registrar, Director of Registration and HR, or Director of Communications; (ii) cheques over $25,000 of a budgeted item - two signatures from the following: President, Vice-President, Treasurer, Registrar, Deputy Registrar, Director of Registration and HR, or Director of Communications. With the exceptions that: ii) The Registrar, Deputy Registrar, Director of Registration and HR, or Director of Communications, shall not act as a signing officer for an expense that they have approved. iii) No individual shall be a signing officer for a cheque of which they are the payee.
POLICY EL 8: ASSET PROTECTION

Due Date: Annually - December

The Registrar shall not allow the College’s assets to be unprotected, inadequately maintained or unnecessarily risked. Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Invest or hold operating capital in insecure instruments or bonds of less than AA rating at any time, or in non interest-bearing accounts except where necessary to facilitate ease in operational transactions. Registrar/CEO reports compliance.</td>
</tr>
<tr>
<td>9</td>
<td>Fail to establish appropriate procedures governing the confidentiality, disclosure, safekeeping and eventual disposition of all records over which the Board has jurisdiction. CDSBC is embarking on an electronic records management project which includes an updated set of file plans and records retention and disposal policies and procedures. All current records are retained and secured/ backed up as per statements above.</td>
</tr>
<tr>
<td>10</td>
<td>Fail to protect title and ownership of the College building and equipment. Registrar/CEO reports compliance.</td>
</tr>
</tbody>
</table>

Respectfully Submitted By:

Jerome M. Marburg
Registrar and CEO

Date: 9 Nov 2007
**POLICY EL 9: COMPENSATION AND BENEFITS**

**Due Date:** Annually - End October

With respect to employment, compensation, and benefits to employees, consultants, contract workers, the Registrar shall not cause or allow jeopardy to fiscal integrity or to public image.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Change his or her own compensation and benefits.</td>
</tr>
<tr>
<td>2</td>
<td>Establish current compensation and benefits which deviate materially from: A. the geographic or professional market for the skills employed (for employees, consultants, and contract workers). B. the compensation and benefits provided by other similar organizations for similar services. C. the Board directive to compensate employees at P.75 as determined by market survey data provided to the Registrar by competent external consultants.</td>
</tr>
<tr>
<td>3</td>
<td>Create compensation obligations over a longer term than revenues can be safely projected, in all events subject to losses in revenue.</td>
</tr>
<tr>
<td>4</td>
<td>Establish or change benefits so as to provide a less than basic level of benefits to all full time employees, though differential benefits to encourage longevity are not prohibited.</td>
</tr>
<tr>
<td>5</td>
<td>Allow any employee to lose pension benefits already accrued from any foregoing plan.</td>
</tr>
<tr>
<td>6</td>
<td>Fail to pay the premiums for existing insurance for committee and Board members.</td>
</tr>
</tbody>
</table>
POLICY EL 9: COMPENSATION AND BENEFITS

Due Date: Annually - End October

With respect to employment, compensation, and benefits to employees, consultants, contract workers, the Registrar shall not cause or allow jeopardy to fiscal integrity or to public image.

Further, without limiting the scope of the foregoing by this enumeration, he or she shall not:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Response/Report</th>
</tr>
</thead>
</table>

Respectfully Submitted By:

Jerome M. Marburg  
Registrar and CEO

Date: 9 Nov 2017
Quarterly Report

Registration and Certification

1 August 2017 – 31 October 2017

Prepared for the Board
Overview

The Registration/Certification Team, consisting of the Director of Registration & HR, the Senior Manager, CDA Certification and Quality Assurance and four support staff, are responsible for all aspects of registration of dentists and certification of certified dental assistants. It is also responsible for the CDA Certification Committee, CDA Advisory Committee, Registration Committee, Quality Assurance Committee and the Quality Assurance CE Subcommittee.

The following represents a statistical breakdown of the activity in these areas for the period 1 August 2017 – 31 October 2017 inclusive.

Where available, the previous year’s statistics for the same period (1 August 2016 – 31 October 2016) are provided in brackets.

Continuing Education
Dentists & Certified Dental Assistants

Continuing education credit submissions are received electronically and by mail and applied to each registrant’s Transcript of Continuing Education. Of the more than 10,000 registrants, 3356 have their three-year cycle ending 31 December 2017.

In late August or early September, transcripts are mailed to all registrants with unfulfilled cycles ending that year.
## DENTIST STATISTICS

Practising Dentists - 3637

### NEW REGISTRATIONS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Registrations issued (includes Specialists)</td>
<td>41</td>
<td>48</td>
</tr>
<tr>
<td>Restricted to Specialty Registrations issued</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Academic Registrations issued</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Limited Registrations issued:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Armed services or government</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>- Education</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>- Post-graduate</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>- Research</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>- Student practitioner</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>- Volunteer</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Temporary Registrations issued</td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>Non-practising Registrations issued</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

### GENERAL

<table>
<thead>
<tr>
<th></th>
<th>12</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfers from Non-practising to Practising</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>Transfers from Practising to Non-practising</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Lapsed</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Reinstated</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>Resigned/Retired</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>Retired (annual $50 fee)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Deceased</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>
## CDA STATISTICS

Practising CDAs - 6042

### NEW CERTIFICATIONS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Practising Certifications issued</td>
<td>65</td>
<td>50</td>
</tr>
<tr>
<td>Temporary Certifications issued</td>
<td>36</td>
<td>106</td>
</tr>
<tr>
<td>Temporary-Provisional Certifications issued</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Limited Certifications issued</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Non-practising Certifications issued</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

### GENERAL

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfers from Non-practising to Practising</td>
<td>16</td>
<td>9</td>
</tr>
<tr>
<td>Transfers from Temporary to Practising</td>
<td>148</td>
<td>139</td>
</tr>
<tr>
<td>Transfers from Temporary-Provisional to Practising</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Transfers from Limited to Practising</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Lapsed</td>
<td>40</td>
<td>33</td>
</tr>
<tr>
<td>Reinstated</td>
<td>34</td>
<td>41</td>
</tr>
<tr>
<td>Resigned/Retired</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Retired (annual $25 fee)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Deceased</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

---

### Module designations granted

- **Orthodontic Module** – 4 (5)
- **Prosthodontic Module** – 4 (11)
- **Dental Radiography Module** 15 (16)

### CDA Assessments

Initiated assessments:
- 17 (24)

Certification issued as a result of assessment:
- 12 (11)
Complaints Team Report

01 September 2017 – 31 October 2017
Overview

As at 31 October 2017, the Complaints Team was handling 208 active files. The Chart at Tab A captures the breakdown by age of the open complaint files as of that date.

In this reporting period the number of files older than a year remains the same. The following table compares the number of files that are over one year of age:

<table>
<thead>
<tr>
<th>Date</th>
<th>Number of Files</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 May 2017</td>
<td>40 files</td>
</tr>
<tr>
<td>31 August 2017</td>
<td>41 files</td>
</tr>
<tr>
<td>31 October 2017</td>
<td>52 files</td>
</tr>
</tbody>
</table>

The number of files two years or older also remains the same for this report. The following table compares files over two years of age:

<table>
<thead>
<tr>
<th>Date</th>
<th>Number of Files</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 May 2017</td>
<td>2 files</td>
</tr>
<tr>
<td>31 August 2017</td>
<td>2 files</td>
</tr>
<tr>
<td>31 October 2017</td>
<td>3 files</td>
</tr>
</tbody>
</table>

The Chart at Tab A indicates the average file age of the open files is 245 days. The following table compares the average file age of open files:

<table>
<thead>
<tr>
<th>Date</th>
<th>Average File Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 May 2017</td>
<td>239 days</td>
</tr>
<tr>
<td>31 August 2017</td>
<td>245 days</td>
</tr>
<tr>
<td>31 October 2017</td>
<td>262 days</td>
</tr>
</tbody>
</table>

Telephone Calls

Between 01 September 2017 and 31 October 2017, the complaints support staff received:

- 82 calls from members of the public inquiring about making a complaint regarding their dentist;
- 53 calls from dentists and dental office staff regarding complaint issues;
• 52 calls from registrants and complainants regarding their open files; and
• 100 miscellaneous inquiries.

Long-standing Complaints

There are many reasons a file may take an extended period of time to resolve, including:

• difficulty in obtaining reports and records;
• multiple patients involved;
• complexity of the issues;
• the registrant’s health;
• staff resources available;
• the involvement of legal counsel; and
• legal proceedings.

Complaints Received

Between 01 September 2017 and 31 October 2017, the College opened 30 complaints. In the same three-month period in the previous fiscal year, the College opened 29 complaints.

The Chart at Tab B includes the number of complaint files opened and closed by month for 01 September 2017 to 31 October 2017.

The Chart at Tab C include files opened by month so far this fiscal year over last fiscal year. 123 files were opened from 01 March 2017 to 31 October 2017, compared to 110 files this time last fiscal year.

Of the 30 complaints received between 01 September 2017 and 31 October 2017, 24 (80%) were from patients or family members of a patient.

Closed Complaints

The Complaints Team continues to target the older files in the system.

The Chart at Tab D sets out the age of files on closing between 01 September 2017 and 31 October 2017. The College closed 14 files during that period. 10 files were closed in under a year. Between 01 September 2016 and 31 October 2016, the College closed 20 files, 10 of which were closed in under a year.
The majority of files are closed because the allegations are unsubstantiated or can be resolved by agreement. The most common treatment issues found on closing are:

- recordkeeping (30%)
- diagnosis and treatment planning (20%)
- informed consent (17%)

Complaints to the Ombudsperson

The Ombudsperson for the Province of British Columbia accepts complaints/inquiries regarding professional associations and regulators, including CDSBC.

Between 01 September 2017 and 31 October 2017, there were no complaints or inquiries received by the Ombudsperson regarding CDSBC.
TAB A
Open Files Aging Report

As of October 31, 2017
Average File Age (days): **262**

<table>
<thead>
<tr>
<th>Age</th>
<th>File #</th>
<th>Opened</th>
<th>Days</th>
<th>Dentist/CDA</th>
<th>Complainant</th>
<th>Investigator</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 3M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>45</td>
</tr>
<tr>
<td>3 - 6M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>43</td>
</tr>
<tr>
<td>6 - 12M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>68</td>
</tr>
<tr>
<td>12 - 18M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>36</td>
</tr>
<tr>
<td>18 - 24M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13</td>
</tr>
<tr>
<td>24 - 36M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>&gt; 36M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>208</strong></td>
</tr>
</tbody>
</table>
File Breakdown By Month

01-Sep-2017 to 31-Oct-2017

- **Opened**: 30
- **Closed**: 14
- **HPRB Disposition**: 1

### September
- Opened: 10
- Closed: 8
- HPRB Disposition: 1

### October
- Opened: 20
- Closed: 6
- HPRB Disposition: 0

Printed: Thursday, November 02, 2017
# Age of Files on Closing

Files Closed between 01-Sep-2017 and 31-Oct-2017

<table>
<thead>
<tr>
<th>Age of Files (Days)</th>
<th>Number of Files</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 90</td>
<td>1</td>
</tr>
<tr>
<td>91 - 225</td>
<td>3</td>
</tr>
<tr>
<td>226 - 365</td>
<td>6</td>
</tr>
<tr>
<td>365+</td>
<td>4</td>
</tr>
</tbody>
</table>

*Printed: Thursday, November 02, 2017*
November 2017 Management Report (Public)

TABLE OF CONTENTS
REGISTRAR AND BOARD OFFICER MEETING..........................................................1
MEDIA: CBC/ DR. STEVEN KRIEGER........................................................................1
HELPING PATIENTS MAKE INFORMED CHOICES ABOUT THEIR DENTAL (AND HEALTH) PROVIDERS.............................................................2
PRINCE GEORGE LISTENING SESSION...................................................................3
BC HEALTH REGULATORS (BCHR) MEETING .........................................................3
COMMISSION ON DENTAL ACCREDITATION OF CANADA (CDAC) AGM ..................4
VOLUNTEER APPRECIATION NIGHT ...................................................................4
EXECUTIVE DIRECTORS AND REGISTRARS 21 NOVEMBER 2017.........................5

REGISTRAR AND BOARD OFFICER MEETING
Board officers Dr Don Anderson, Dr. Susan Chow and Dr. Patricia Hunter met with Registrar/CEO Jerome Marburg on 3 November to confirm the agenda for the November board meeting, review the status of projects such as revisions to the CDSBC Bylaws, and discuss the subject of the February board workshop.

MEDIA: CBC/ DR. STEVEN KRIEGER

CBC’s Go Public program has reported on developments on the Dr. Steven Krieger case since first profiling one of his patients in fall 2016. The reporter was aware that the College was pursuing disciplinary action against the registrant and requested to be advised when it was made public. We did so following the publication of the Inquiry Committee’s consent order on our website; shortly thereafter CBC included it in its local news broadcast and online story.

We declined CBC’s request for an interview because we were unable to provide more information than what was already published on our website, but we did provide them with, which they published:
HELPING PATIENTS MAKE INFORMED CHOICES ABOUT THEIR DENTAL (AND HEALTH) PROVIDERS

President Don Anderson and senior staff met with Dr. Mike Racich about his new book “The Basic Rules of Being a Dental Patient.” This book gives patients information to empower them in their interactions with dentists. It sparked a conversation about the need to build understanding among patients about what dentists do, and how they can be active and informed participants in their own oral healthcare. (There is a video interview with the author on the Canadian Dental Association website.)

Anecdotally, and through the listening sessions, we have heard that patients don’t know, for example, that they can request to see the same dentist when they visit a dental office. Possible solutions could include a patient resource kit.

The concept that healthcare is more effective when patients understand what to expect from their healthcare providers is not specific to dentistry. For example, at least three health regulators, including CDSBC, have produced information for patients on this topic:

- “Patient-Physician Relationship: What to Expect” (College of Physicians and Surgeons of BC)
- “What to expect from your chiropractor?” and “Patient’s charter of rights” (College of Chiropractors of BC)
- “Building the dentist/patient relationship” (College of Dental Surgeons of BC)

Staff recommended that this initiative be forwarded to the BC Health Regulators Group, because it could gain more traction as a joint message from all the health colleges – and
because there may be more resources available (this item is not budgeted for CDSBC in the 2018/19 year).

PRINCE GEORGE LISTENING SESSION

The final listening session of 2017 was held at the Prince George Conference and Civic Centre on 15 November. This event almost didn’t take place because of a snowstorm outside Prince George, resulting in delayed and cancelled flights. As a result of the bad weather, the College group was smaller and the event started behind schedule. However, the Prince George group was one of the most engaged we have experienced and were willing to stay even after the official end time.

This event was facilitated by Dr. Chris Hacker, Deputy Registrar and Director of Professional Practice. The discussion topics and presenters are listed below:

- The decline of public trust (ethics) / President Don Anderson
- CDSBC Bylaw Part 2 – College Board / Dr. Peter Lobb of the Bylaws Working Group
- The business of dentistry and corporate structures / Registrar/CEO Jerome Marburg

16 participants completed the evaluation form:

- 100% agreed (75% strongly agreed) that they had adequate opportunity to express their views.
- 93% agreed (69% strongly agreed) that there was adequate opportunity for participants to exchange views and learn from each other
- 93% agreed (69% strongly agreed) that CDSBC demonstrated a commitment to listening

The full report, including all participant comments and the evaluation results, will be published on the website.

BC HEALTH REGULATORS (BCHR) MEETING
9 November

This meeting included a presentation by staff in the Professional Regulation and Oversight Branch of the Ministry of Health. They have undertaken a review of the websites of each of the 23 health colleges. The objective of the presentation was to reflect on the role of college websites in serving the public interest, and specifically, to
ask how college websites can be used to strengthen each regulator’s relationship with the public. To this end, Ministry staff are developing performance measures to determine not only whether the websites are in compliance with the requirements of the Health Professions Act, but how effectively they serve the public interest.

Areas of particular interest are:

- **Language**
  Includes use of plain language, whether languages other than English are used, and accessibility
- **Design**
  Public-focused content, responsive design (optimized for the device being used, i.e. mobile, tablet, desktop), use of images
- **Navigation**
  Effective wayfinding, including how easily a user can navigate and orient themselves around a website
- **Headings**
  Consistent use of terminology across college websites, specifically for items that are critical to the public protection mandate

Ministry staff gave a follow-up presentation to the BCHR communicators and offered to share their findings and observations.

**COMMISSION ON DENTAL ACCREDITATION OF CANADA (CDAC) AGM**
Leslie Riva, Senior Manager of CDA Certification and Quality Assurance, attended the CDAC Dental Assistant Committee meeting and the AGM 18-20 November as a representative of the NDAEB Board. At the AGM Leslie was appointed Chair of the Dental Assistant Committee for a three-year term.

**VOLUNTEER APPRECIATION NIGHT**
The College hosted a reception for members of the Board, committees, working groups and staff (and their guests) on 24 November at the Terminal City Club. This annual event, formerly known as the President’s Holiday Reception, is held to acknowledge and celebrate the many contributions of the College’s approximately 100 volunteers over the past year.
EXECUTIVE DIRECTORS AND REGISTRARS 21 NOVEMBER 2017

Several staff members attended a preview presentation by Edelman and Associates on their global study on trust. The presentation is posted to the portal as 0007a Edelman And Associates Presentation: .