The meeting commenced at 10:04 a.m.

In Attendance
Mr. Carl Roy, Chair                  Ms. Cathy Larson
Dr. Richard Busse                  Dr. Mike Melo
Dr. Doug Conn                  Ms. Sabina Reitzik
Dr. Heather Davidson, PhD          Ms. Shirley Ross
Ms. Dianne Doyle                Dr. Lynn Stevenson, PhD
Ms. Barb Hambly                  Dr. Richard Wilczek

Staff in Attendance
Dr. Chris Hacker, Registrar and Chief Executive Officer (CEO)
Ms. Nancy Crosby, Manager of CEO’s Office
Ms. Joyce Johner, General Counsel
Dr. Meredith Moores, Acting Director of Professional Practice
Ms. Leslie Riva, Sr. Mgr. CDA Certification and QA
Ms. Róisín O’Neill, Director of Registration
Ms. Anita Wilks, Director of Strategy and Engagement
Mr. Dan Zeng, Director of Finance and Administration

Invited Guest:
Mr. Gurdeep Bains, Chair, Audit Committee

Preparation of Minutes:
Jessi Connaughton, Raincoast Ventures. Ltd.
Call Meeting to Order and Territorial Acknowledgement

Chair Carl Roy called the College of Dental Surgeons of British Columbia (CDSBC) Board meeting to order at 10:04 a.m. and acknowledged the traditional territory on which the meeting was being held. It was discussed that the CDSBC Board made a commitment to do more of its business in an open meeting, for the sake of transparency to the public and stakeholders.

Chair Roy led the meeting in a roundtable of introductions.

Declarations of Interest and Register of Interests

Dr. Richard Busse and Dr. Doug Conn declared conflicts of interest for Item 14a of the closed agenda, noting they will recuse themselves from this portion of the meeting.

Chair Roy informed that his organization works with a number of dentists over the clinical discipline and in the event that a conflict arises, he will declare a conflict of interest.

1. Approve Agenda for 15 June 2019

RESOLUTION:
It was MOVED (Doyle) and SECONDED (Hambly)
That the Agenda for the November 15, 2019 board meeting be approved as circulated.

CARRIED

2. Approval of Open Minutes for 14 June 2019

RESOLUTION:
It was MOVED (Ross) and SECONDED (Busse)
That the open Board minutes of June 14, 2019 be approved

CARRIED

3. “Governing in the Public Interest” – Presentation (powerpoint attached)

The agenda was varied with Item 3 deferred.

4. Strategic Plan/Action Plan Progress Report

Dr. Chris Hacker, Registrar and CEO, reported that the Minister of Health’s directive, as supported by recommendations from the Cayton Report, require amendments to CDSBC’s Action Plan. Following input from the Board, the Action Plan will be
amended accordingly and posted on the CDSBC website to demonstrate where the College is at in the commitments made to the Ministry of Health.

a. Recommendations for Committee Restructuring (attachments)

Dr. Hacker referred the Board to the Proposed Committee Structure document provided with the agenda package and noted that the proposed structure was drafted following extensive research of best practices. The proposed structure is in accordance with the *Health Professions Act* and also in compliance with recommendations identified in the Cayton Report.

Discussion ensued on the proposed committee restructure, and the following comments were offered:

- The Standards and Guidance Committee and the Patient Relations Committee could be combined into one committee
  - In one Board member’s experience with another regulatory college, this combined committee structure works well
  - The Standards and Guidance Committee has a large task in developing the CDSBC’s Standards and Guidelines, and it would be beneficial to keep those committees separate for the time being
  - The Patient Relations Committee will have an important role in the College’s communications to the public
- The bylaw amendments for committee structure can be drafted in such a way that will allow for flexibility and give discretion to the board to make changes in the future
- The Standards and Guidance Committee will draft the Standards and Guidelines with two separate pieces: a plain language document and a more technical document
- The work of the previous Ethics Committee will be wrapped into the work of the new Standards and Guidance Committee
- A Governance Subcommittee could be considered to help build the Governance Plan moving forward.

**RESOLUTION:**

*It was MOVED (Wilczek) and SECONDED (Busse)*

That the College of Dental Surgeons of British Columbia Board approve the Proposed Committee Structure document and resolve for staff to move forward with drafting bylaw changes consistent with the new committee structure.

**CARRIED**
b. Standards and Guidance Development Framework *(attachments)*

Dr. Hacker informed that the Cayton Report identified CDSBC’s failure to meet three of the five Standards of Good Regulation with regard to Standards and Guidance. The new proposed Standards and Guidance Development Framework process will include systematic methods for identifying new topics and revising existing documents. This process also requires that a committee for Standards and Guidance be established.

During discussion, the following comments were offered:
- The development of CDSBC’s Standards and Guidance must be evidence-based, and should be included in the Standards and Guidance Committee’s Terms of Reference
- The Board’s role as a governing body will be to ensure the right staff are in place to help build the integrity of the College; the Board relies on CDSBC’s staff to review evidence-based sources when compiling the College’s Standards and Guidance
- The Standards and Guidance Committee will have the authority to establish working groups to focus on specific topics; staff will provide the working groups with background and research, and the working group can direct staff to provide more information if required.

**RESOLUTIONS:**

*It was MOVED (Stevenson) and SECONDED (Larson)*

That the College of Dental Surgeons of British Columbia adopts the following resolutions:

To rescind the existing Policy Development Process and approve the attached proposed Standards and Guidance Development Process to be enacted upon bylaw change establishing a Standards and Guidance Committee

To direct the College to temporarily halt any standards and guidance development currently being done by staff, committees, subcommittees and working groups until the new committee structure and development process are established.

*CARRIED*
c. Process for Governance Review *(briefing note attached)*

The Board discussed the necessity to be clear on principles and standards by which the Board is assessing its own function. It was agreed that a governance review can be postponed for the time being.

**RESOLUTION:**
It was MOVED (Ross) and SECONDED (Conn)
That the College of Dental Surgeons of British Columbia Board rescind the request by the Board in June 2019 for staff to recommend a process for a governance review.

**CARRIED**

d. Board/Staff Development Plan – Update on Progress

e. Criteria for Closed Meeting Agenda Items *(Briefing Note attached)*

f. Progress Report on Risk Register *(Briefing Note attached)*

Items 4d, 4e and 4f were opened for discussion, with an acknowledgment that no decisions are required on these items. Joyce Johner, General Counsel, and Anita Wilks, Director of Strategy and Engagement, were recognized for their efforts in providing the information for these items in the agenda package. Chair Roy noted the clear framework provided for when Board discussion should move in-camera. The default for the CDSBC should be to remain open and transparent to all members in keeping with the recommendations of the Cayton Report.

g. Elections/Nominations *(Briefing Note attached)*

Ms. Róisín O’Neill, Director of Registration, informed that the Board election will take place on May 21, 2020. CDSBC staff have been reviewing the elections procedure and are proposing that a Board Composition Matrix that is aligned with the BC College of Nursing Professionals (BCCNP) and the College of Physicians and Surgeons of BC, be incorporated into the new election procedure.

During discussion, the following comments were offered:

- Nominees to the Board will be asked to explain the experiences, skills and perspectives they can bring to the Board based on the Composition Matrix; this will allow CDSBC to transition out of using the Governance Manual
- Caution that the BCCNP has expressed that the Composition Matrix and nomination process can be onerous
The role of the Nominations Committee will need to be flushed out and reflected in the bylaws
The Composition Matrix will help to ensure the governance process itself has a high degree of integrity
Online voting in the next election will allow for a greater response rate and more engagement with College registrants
Clear descriptions of the Board positions, written up as job postings, could ensure that only qualified individuals are nominated for Board roles.

RESOLUTION:
It was MOVED (Ross) and SECONDED (Hambly)
That the College of Dental Surgeons of British Columbia Board direct staff to incorporate a Composition Matrix into the nominations process for Board elections beginning in 2020.

CARRIED

h. Update Relating to Complaints Processes (Briefing Note attached)

Dr. Meredith Moores, Acting Director of Professional Practice, informed that Barb Hambly is no longer a part of the Inquiry Committee as the public board member, and her contributions will be greatly missed. The Inquiry Committee has received in-person training sessions and has been further refining the Risk Assessment Framework. The Inquiry Committee continues to make progress on Items 25, 26 and 28 of CDSBC’s Action Plan, and has added new public members with notable credentials and experience on a range of matters.

5. Reports from Committees (attachments)
- Audit Committee
- CDA Certification Committee
- Discipline Committee
- Inquiry Committee
- Quality Assurance
- Registration Committee
- Sedation Committee

Dr. Hacker referred to the Committee Reports included under Tab 5 of the agenda package, and opened the floor for discussion. It was noted that the Sedation and General Anaesthetic Services Committee is looking at aligning its sedation and general anaesthetic standards document with other dental regulators across Canada. The Committee is also pursuing collaboration with the College of Physicians and Surgeons to understand their standards for sedation and general anaesthesia.
6. **Financial Statements for the Period Ending 30 September 2019** *(attachments)*

Mr. Dan Zeng, Director of Finance and Administration, reviewed the CDSBC Consolidated Statement of Financial Position as of September 30, 2019 report included in the agenda package. It was noted that further discussion on the financial statements will take place during the in-camera portion of the meeting.

3. **“Governing in the Public Interest” – Presentation** *(powerpoint attached)*

The agenda varied to consider Item 3 at this time.

Chair Roy reviewed an overhead presentation titled, “Governing In The Public Interest”, and highlighted the following:

- The CDSBC is a public body that governs in the public interest by consistent application of the *Health Professions Act*
- Public interest means that the public feels trust and protected by all efforts in the CDSBC, and where competing interests are balanced and managed effectively and fairly
- Welfare and safety of the broader public includes:
  - Frame of understanding and holding ourselves accountable
  - Citizens interest
  - Ethical work
  - Open and respectful engagement
  - Outcomes that support healthy communities
  - Implement actions to achieve the organization’s mandate
- Guiding principles include:
  - Everything we do much clearly link to the protection of patients and public
  - The College belongs to the public of BC; dentists do not own the College
  - The Board recognizes and respects the professional staff as trusted partners in public protection
  - Leadership at the board and committee levels is shared between the public and health professionals regulated by the College
  - Transparency is our default position
  - The involvement of patients and the public in college activities is invited and expected
  - A shift in culture is required; this means asking ourselves hard questions and moving away from old ways of thinking.
7. **Invite Public Questions or Comments** *(Action item 8)*

The order of the agenda resumed with Item 7.

Chair Roy noted that it has been requested that questions and comments from the public be provided in advance of CDSBC’s Board meetings, to allow time for the Board to develop robust answers. Questions and comments may still be put forward the day of the meeting.

Ms. Arlene Cearns from the Certified Dental Assistants of BC (CDABC) expressed concern around the Duty to Report process and the way in which these reports have been handled by CDSBC. CDABC members have reported that their concerns have been dismissed, put on hold, or not responded to. There are cases where issues have been addressed, and it has created an untenable work environment for complainants with no protection offered by CDSBC. These concerns result in dental assistants fearing for their livelihood as a result of bringing concerns forward to CDSBC.

Dr. Hacker explained that CDSBC is sensitive to the impacts that can happen following a Duty to Report, and that a specific piece of legislation has been set up to deal with overall competence. He noted the distinction between risk and danger to the public when making reports, and confirmed that CDSBC has a specific process in place to deal with confidentiality in Duties to Report around individual competency.

Ms. Kristine Mulligan, President, CDABC, advised that CDABC has a fact checking process in place before complaints are brought forward to CDSBC. She noted that complaints submitted to the College are brought forward by certified dental assistants and technicians. There is a need to protect the public from uncertified people performing the duties of certified dental assistants.

Jocelyn Johnston, Executive Director, British Columbia Dental Association (BCDA), requested that CDSBC consider ways in which they can engage with BCDA to determine their roles in facilitating healthy communities and ensuring access to care. CDSBC and the BCDA can work together to identify ways they can interact to work in the best interest of the public, and in the best interest of the patients. BCDA welcomes the opportunity for this engagement.

Ms. Mulligan noted that a conflict of interest should have been declared by Ms. Johnston prior to speaking on behalf of the BCDA, as the CDSBC collects fees on behalf of BCDA.

*This concludes the open portion of the meeting.*