Some dentists have questioned the length of time it takes the College to resolve complaints. Here we address some of the questions – and misconceptions – that have come up.

Q. It seems like complaints are taking longer than ever to close. Why?

A. In fact, the opposite is true. As of February 28, 2015, we have reduced the average age of open complaint files by about six weeks to 10.5 months and closed significantly more complaint files (303) than we opened (280) – despite the fact that the number of complaints against dentists continues to rise.

We have added significant staff resources to the complaints team to reflect the fact that closing complaints quickly is a key priority for the College, as is working through the backlog of older complaints.

Q. Couldn’t the College close complaints faster so dentists can avoid months of stress and worry while the investigation continues?

A. We know it is stressful for any registrant to deal with a complaint. The bottom line is the College today is doing a dramatically better job at resolving complaints – and doing so more quickly than in the recent past.

The Health Professions Act requires that:

- We investigate all complaints received (if they meet the requirements)
- The investigation must be adequate (we must obtain and assess information from all relevant parties)
- The outcome must be reasonable based on a consideration of all evidence

These requirements listed above are set and enforced through the Health Professions Review Board (HPRB). A complainant can appeal any health college decision to dismiss/resolve a complaint.

This is a record any college can be proud of, and it is clear that the complaints process as a whole is more fair and defensible than it used to be. (As an indicator of this, between 1994 and 2009, the College was the subject of 29 appeals or judicial reviews brought by dentists. The College was unsuccessful in 17 of those cases – often attracting harsh criticism from the court – and success was divided in three others.)
New Policy on When It Is – or Is Not – Appropriate to Establish a Practitioner/Patient Relationship

The Health Professions Act and CDSBC Bylaws prohibit professional misconduct of a sexual nature, defined as sexual intercourse or other forms of sexual relations between a practitioner and a patient. Those provisions – which remain in force – impacted dentists who had been treating their spouses and sparked much discussion and debate in recent years.

While the initial focus was on the treatment of spouses, the College recognized that the key issue is not one of sexual conduct, but the broader consideration of when it is appropriate – or not – to enter into a practitioner-patient relationship.

The Board and the Ethics Committee have determined that there are three elements that must be in place in order to ensure treatment is appropriate:
1) objectivity of care by the practitioner;
2) full, free, and informed patient consent; and
3) patient autonomy.

Registrants may not enter into a practitioner/patient relationship that does – or may – compromise any one of the principles of objectivity, consent or autonomy.

These three principles are core values enshrined in the CDSBC Code of Ethics. They can be compromised when treating one’s spouse, close family member, or any other person with whom there is a close personal relationship. A possible exception is where the treatment is minor or emergent and no other practitioner is readily available.

This policy will be published shortly under the CDSBC’s standards and guidelines series.

Online CE Opportunity: CDSBC’s Dental Recordkeeping Course

CDSBC’s online dental recordkeeping course is an interactive, six-module course that discusses strategies to improve recordkeeping and patient care in your dental office, reviews the principles of good recordkeeping, and provides advice on electronic recordkeeping. It covers informed consent, patient privacy and confidentiality, and the key principles for ownership, retention and disposal of records.

The course can be done anywhere and at your own pace. It takes approximately three hours to complete from start to finish, or you can do the course module by module, and your progress will automatically be saved.

CDSBC registrants who complete and pay for the course ($75 for dentists and $35 for CDAs) are eligible to submit for three continuing education self-study credits in the practice management category. www.cdsbc.org/online-ce-dental-recordkeeping

Are Your CE Submissions Accurate?

All registrants have an ethical and professional obligation to make accurate submissions for continuing education activities. Failure to do so could result in serious consequences.

The Quality Assurance Committee has become aware that several dentists and CDAs claimed CE credits – inaccurately or falsely – for courses at dental conference that were, in fact, cancelled. These individuals were contacted by CDSBC and appropriate action was taken.

It is your responsibility to submit your own CE. Asking others to fill in your claim does not absolve you of the responsibility of an inaccurate submission. The Quality Assurance Committee and CDSBC staff will continue to monitor all CE submissions.
Standards & Guidelines for Minimal and Moderate Sedation

Updated Standards & Guidelines for Minimal and Moderate Sedation Services in Dentistry (Non-Hospital Facilities) were published in summer 2014, and are available at www.cdsbc.org/sedation. This document replaces the previous guidelines published in 2008. These new standards contain significant changes and must be read by all registrants who provide minimal or moderate sedation. Most of these changes take effect immediately (with some exceptions that will be phased in). CDSBC will advise registrants of the upcoming changes and what you need to do to be compliant.

All dentists have already received a document highlighting the key changes. It will be distributed to CDAs shortly. The key points are reiterated below:

- Dentists who own facilities where sedation is administered must ensure that their facility is equipped to the current standard.
- Facilities where parenteral (IV) moderate sedation is administered must pass an inspection conducted by CDSBC (inspections will likely begin in late 2015).
- Dentists providing moderate sedation will now be required to maintain certification in Advanced Cardiac Life Support (ACLS) or an appropriate equivalent.
- Dentists who administer moderate sedation must complete no fewer than six hours of continuing education in the area of sedation and/or anaesthesia, during their three-year CE cycle (courses in Basic Life Support do not qualify; ACLS or Pediatric Advanced Life Support are acceptable).
- While moderate sedation dental treatment is ongoing, a minimum of the dentist and either a Registered Nurse or a CDA with appropriate certification must be continuously present, and the third trained member of the sedation team must be immediately available.
- CDAs assisting as the second member of the sedation team in moderate sedation will now be required to hold current DAANCE (Dental Anaesthesia Assistant National Certification Examination), OMAAP (Oral and Maxillofacial Surgery Anaesthesia Assistants Program), or an appropriate equivalent certification.

If you have questions about the standards, please contact Sedation Program Coordinator Krista Fairweather, RN, at sedation@cdsbc.org or 604-736-3621.

Recent Discipline Activities

The Health Professions Act requires CDSBC to publish reports of discipline activities and penalties against its registrants. A full list of discipline activities is available at www.cdsbc.org/public-notification-disciplinary-actions.

Dr. Michal Kaburda – Penalty Decision

A panel of the Discipline Committee has issued a penalty decision against certified specialist Dr. Michal Kaburda of White Rock, who was found to have committed multiple instances of professional misconduct. The Discipline Panel imposed the following penalty on Dr. Kaburda:

- a reprimand;
- immediate suspension from the practice of dentistry for a period of six months;
- he must produce a complete copy of the complainant’s records to CDSBC, and if he does not, his suspension will continue until this requirement is met; and
- payment of a $10,000 fine in addition to $15,083.13 in costs to CDSBC.

Read more at www.cdsbc.org/kaburda-michal.
College Calendar

March 19, 2015

Close of Nominations for CDSBC Election

There are a number of positions available on the 2015/16 CDSBC Board.

The 2015 Notice of Election and Call for Nominations, nomination packages, position descriptions, and more are available at [www.cdsbc.org/election](http://www.cdsbc.org/election). The election will take place on May 21, 2015.

March 23, 2015

Consultation Closes for Bylaws Part 12: Advertising and Promotional Activities


If no substantive issues arise from the consultation, the proposed Part 12 of the CDSBC Bylaws will be filed with the Ministry of Health after the close of the consultation period.

April 2015

Roadshows

The College is delivering the course “Trust me, I’m a dental professional”: Dentistry, ethics, law and the media at three locations in April. More details are available at [www.cdsbc.org/upcoming-events](http://www.cdsbc.org/upcoming-events).

April 10: Surrey (morning)
Hosted by the Fraser Valley Dental Society
Morgan Creek Golf Course
3500 Morgan Creek Way, Surrey
Register through the Fraser Valley Dental Society.

April 23: Nanaimo (evening)
Hosted by CDSBC
Vancouver Island Conference Centre
101 Gordon Street, Nanaimo

April 24: Courtenay (afternoon)
Hosted by the Upper Island & District Dental Society
Crown Isle Golf Resort
399 Clubhouse Dr, Courtenay
For more info and to register, go to [www.uidds.com/register.html](http://www.uidds.com/register.html).

June 5, 2015

2015 AGM and Board Meeting
Friday, June 5, 2015
(8:30-10:00 am)
Vancouver Marriott Pinnacle Downtown Hotel, “Dundarave” Room
1128 West Hastings Street, Vancouver
If you wish to attend, please RSVP to [ncrosby@cdsbc.org](mailto:ncrosby@cdsbc.org) by Friday, May 22, 2015.