

College Update

Spring 2019

Patient-centred Care and the Business of Dentistry: Updates

We recently updated the practice standard *Patient-centred Care and the Business of Dentistry*.

The updates to this foundational ethical document reflect current business realities and reinforce expectations for situations where more than one practitioner may be providing care.

The most substantial change was the inclusion of a statement disallowing a markup on goods and services provided by a third party.

The updates include the addition of concepts from the old code of ethics

(Article 5 of the *Dentists Act*) that were not captured in any of CDSBC's current requirements for dentists. The document has also been restructured to improve clarity.

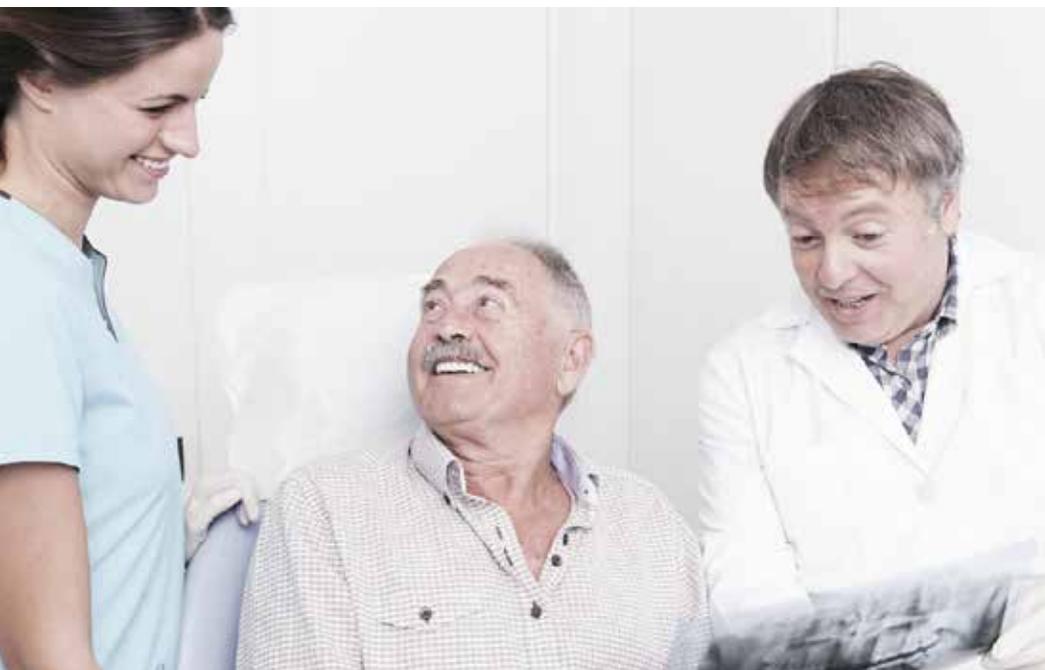
These updates have enhanced the document's relevance to both dentists and patients. They were informed by the consultation process, as well as concerns raised by registrants, other members of the dental team, and by government.

Clear communication with patients remains a vital component of the patient/dentist relationship.

Continuing change in healthcare

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practices and public expectations will mean that this document will require ongoing updates by the Ethics Committee in order to stay relevant.

The key changes — and the rationale for each — are highlighted on the next two pages.

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Updates to *Patient-centred Care and the Business of Dentistry*



The key changes to this foundational document are highlighted below, along with the rationale behind the change. To see the changes in context, please refer to the full document at www.cdsbc.org/pccbod.

If you have any questions about this document or the recent additions, please contact Dr. Peter Stevenson-Moore, Dental Policy Advisor, at psm@cdsbc.org or 604-736-3621.

The dentist must act in the patient's best interest.

Rationale: *This is more clearly stated than in the earlier version. Because dentists have technical expertise and access to information that patients do not, patients must be able to trust that the dentist is acting in their best interest at all times.*

The dentist will only provide care for which there is a clinical indication.

Rationale: *Patients must be able to trust that the dentist is providing treatment that is necessary and in their best interest.*

The treating dentist must complete an appropriate examination, provide a diagnosis, a treatment plan, an estimate of cost, and obtain informed consent from the patient before proceeding with treatment or overseeing treatment that is appropriately delegated.

A dentist who assumes responsibility for an existing treatment plan must reassess the patient to ensure that the proposed treatment is appropriate and necessary. If the treatment plan is altered, the dentist must update the patient and obtain informed consent.

Rationale: *Informed consent must always be obtained before any treatment begins. If one practitioner has assessed a patient and has developed a treatment plan, subsequent practitioners are responsible for ensuring that they have appropriately assessed the presenting condition and obtained the patient's informed consent before moving ahead with treatment.*

Regardless of practice arrangements, third parties must not prescribe or direct treatment for a patient, or otherwise compromise the autonomy of the treating dentist.

Rationale: *Corporate or other management systems or structures that exist in a practice setting must not influence decisions being made at the dentist/patient interface. Incentives offered to dentists for the use of certain services or products must not be allowed to influence treatment selection to the detriment of the patient.*

If the treatment option selected includes treatment that is of a type or complexity that is outside of the dentist's usual practice, a referral to an appropriate colleague must be offered without expectation of material or financial gain.

Appropriate referrals at no cost will be provided by the dentist when necessary to ensure the safe and competent delivery of appropriate care.

Rationale: *Dentists should be aware of their own limitations and should only provide treatments for which they are adequately educated and trained. If not, a referral to a practitioner with the required competency or competencies must be offered. Any referral for financial gain is not acceptable.*

Dentists are accountable for the work that they deliver to patients, but must not guarantee the success of operations, appliances, or treatment. They must inform patients of the possible risks associated with treatment or the failure to undertake treatment.

The patient can expect that dentists will use their best efforts to provide the expected standard of care. The patient should be aware that treatment success and durability is dependent on variable factors and that no treatment is guaranteed.

Rationale: *This is adopted from the old code of ethics (Article 5 of the Dentists Act) as it had not been included when CDSBC came under the Health Professions Act. It has been slightly expanded to include the patient perspective.*

Dentists will refer laboratory work to a dental laboratory or other third party entity that will, in their opinion, provide the appropriate service for the patient. The dentist will ensure that the materials used in the fabrication of dental components and the components themselves meet CSA (Canadian Standards Association) guidelines and/or satisfy Health Canada requirements.

The patient can expect that laboratory procedures performed on their behalf will be accomplished competently, and that appropriate materials and techniques were used in completing the restoration(s).

Rationale: *There is a risk of harm to the patient if/when substandard materials are used.*

Dentists must appropriately charge patients and dental plans for goods and/or services provided by a third party. It is inappropriate for a dentist to add a markup on third party fees.

The patient should have confidence that neither they nor their dental plan will be charged inflated or hidden fees.

Rationale: *Following public consultation, the Board approved a position statement that prohibits the addition of a fee mark-up when there is no value added. This includes lab fees.*

College of Dental Surgeons of BC Strategic Plan 2019-22

Our Vision

- Public protection
- Regulatory excellence
- Optimal health

Our Mission

The College of Dental Surgeons of BC protects the public and promotes health by regulating dentists, dental therapists and certified dental assistants. It does so by establishing, monitoring and enforcing the safe, competent and ethical practice of dentistry in B.C.

Our Mandate

The College of Dental Surgeons of BC serves and protects the public, regulating dentists, dental therapists, and certified dental assistants by:

- Setting requirements for certification, registration, standards of practice and ethics
- Establishing requirements for, and monitoring, continuous competency
- Investigating and resolving complaints

Our Values

The College of Dental Surgeons of BC demonstrates trustworthiness and promotes professional excellence by being:

- Ethical, open and transparent
- Fair and accountable
- Respectful and courteous
- Objective and evidence-informed
- Inclusive and embracing the principles of diversity, cultural safety and humility
- Patient-centred and engaged with the public
- Committed to the highest level of public awareness

Effective 1 March 2019 through 28 February 2022

Our Goals and Initiatives

Goal 1

Improve outcomes for the public through clearly stated standards of competence and conduct for dentists, dental therapists and certified dental assistants

Initiatives

We will do this by:

- developing and maintaining patient-centred standards and guidance that are clear, consistent, enforceable and up-to-date
- establishing effective and timely board review and oversight of standards and guidance

Goal 2

Identify and strengthen productive relationships with stakeholders

Initiatives

We will do this by:

- sharing information and consulting broadly with the public and other stakeholders
- actively engaging the public and patients in decision making while being mindful of equity and diversity
- ensuring that we provide relevant and timely information that the public needs to make informed decisions about their health care
- communicating and collaborating effectively with key organizations and stakeholders

Goal 3

Embrace leading regulatory practices to protect the public

Initiatives

We will do this by:

- using data and risk assessment to enhance regulatory effectiveness
- using leading regulatory practices, such as the principles of right-touch regulation¹, to guide strategic decision-making and improve processes
- increasing organizational capacity to anticipate and respond to external forces and future challenges with agility, resilience and openness
- updating and implementing a comprehensive mandatory quality assurance program so that the public is well-served by safe health professionals

¹ Professional Standards Authority, (2015). Right-touch regulation. Available at: www.professionalstandards.org.uk/what-we-do/improving-regulation/right-touch-regulation

Goal 4

Strengthen and clarify governance to support our mandate

Initiatives

We will do this by:

- initiating a governance review to improve our governance model, and identifying and responding to gaps and opportunities
- developing guidelines and procedures to sustain effective relationships within and between Board and staff
- providing support for Board and staff to be knowledgeable and competent in all matters of professional regulation and good governance
- developing and implementing an annual board workplan

Dr. Chris Hacker Appointed Registrar/CEO



Dr. Chris Hacker, Registrar/CEO

He brings more than 35 years of dentistry practice and seven years with the College to this role, both of which contribute to his deep understanding of the complexities of health provision and regulation.

Chris has fulfilled

the duties of Registrar on an acting basis since April 2018. Prior to that, he was Deputy Registrar for the College as well as Director of Professional Practice.

He first joined the College as a Complaint Investigator in 2011 and later took on the role of Policy & Practice Advisor.

Chris has developed and delivered several courses and lectures at dental component societies and for UBC Dentistry students. In his practice years, he was involved in a number of study clubs, is a fellow of national and international academies, was a founding member of the Study Club Alliance of B.C., and continues as an examiner for the National Dental Examining Board.

To get in touch with Chris, you can contact the Registrar's Office at registrarsoffice@cdsbc.org.

The CDSBC Board is pleased to make it official: Dr. Chris Hacker is the College's new Registrar/CEO.

Chris will direct the operations of the College, including the regulatory and policy responsibilities set out in the *Health Professions Act*.

Minister of Health Appoints Public Board Members

In January, the Minister of Health appointed one additional public member and reappointed the eight existing public members to the CDSBC Board.

This brings the current CDSBC Board to a total of 23 members.

The College is pleased to welcome Ms. Shirley Ross to the Board for a one-year term. Currently serving as a member of the Canada-India Maternal Infant Health Project, Ms. Ross is also involved in the Women's

Advisory Committee for the City of Vancouver. She also serves on the board of the College of Physicians and Surgeons of BC.



Ms. Shirley Ross, Public Board Member (Photo: CPSBC)

Reappointed for a two-year term are:

- Dr. Heather Davidson, PhD
- Ms. Dianne Doyle
- Ms. Sabine Feulgen
- Ms. Barb Hambly
- Mr. Oleh Ilnyckyj
- Mr. Carl Roy
- Mr. Neal Steinman
- Dr. Lynn Stevenson, PhD

Meet the rest of the Board at www.cdsbc.org/cdsbc-board.

Two Sedation Updates: Emergency Equipment and Drugs, and Pediatric Sedation Moratorium

Emergency Equipment and Drugs

Registrants who are registered to provide any level of sedation should be aware of the following updates regarding emergency equipment and drugs that was recently made to all three of CDSBC's guidance documents for sedation:

- Minimal and moderate: changes to Section 6, Appendix C and Appendix D
- Deep sedation: changes to Chapter II- Emergency Armamentarium
- General anaesthesia: changes to Chapter II- Emergency Armamentarium

Extension of Pediatric Sedation Moratorium

At its November 2018 meeting, the College Board approved an extension of the Pediatric Sedation Moratorium on new applications to register credentials to provide moderate pediatric sedation (patients 12 years and under) for dentists who have learned the modality in a short-course format.

The extension allows the Sedation Committee to further review the safety of short-course format training for this modality, in light of the fact that moderate sedation procedures for patients 12 years of age and under pose high risks.

Practice Locations and Contact Information Must be Kept Current

Registrants must notify CDSBC of changes to your name, home and work address or other contact information.

Dentists: you are required to provide CDSBC with the practice name and addresses of all practices in which you work, as this is public information that will be reflected on the Registrant Lookup.

Log in to your account to update your contact information at www.cdsbc.org/contact-info

Public Notification

Dr. Ivy Kwok Suen Yu

The Inquiry Committee determined the following to be a serious matter under the *Health Professions Act* (section 39.3).

Dr. Ivy Kwok Suen Yu is registered with the College of Dental Surgeons of BC as a general dentist.

Dr. Yu has signed a Memorandum of Agreement and Undertaking (MAU) with the College acknowledging

concerns with respect to her orthodontic diagnosis, treatment planning and provision of orthodontic treatment.

Resolution

The MAU directs that Dr. Yu:

- consent to a limitation on her practice in that she will not provide any orthodontic services for any patient until she:

- » successfully completes a degree or equivalent qualification from a specialty program in orthodontics and dentofacial orthopedics, and
- » obtains certification as a certified specialist in accordance with CDSBC's Bylaws.

This limitation on Dr. Yu's practice will be included on the College's public register and online Registrant Lookup.

College Calendar

14 March 2019

Close of Nominations for Board Election

Nominations are being accepted for seven positions on the Board. See www.cdsbc.org/election for details. Nominations close at 4:30 pm.

16 May 2019

Board Election

Election packages will be mailed to eligible voters no later than 18 April 2019.

Ballots must be received by 4:30 pm in order to be eligible to be counted.

14 June 2019

Annual General Meeting

SFU Harbour Centre
Joseph and Rosalie Segal
Centre Room (#1420)
515 West Hastings St.
Vancouver, B.C.

The College also visits component societies around the province to connect with registrants. To view and register for upcoming CDSBC events visit: cdsbc.org/events.



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