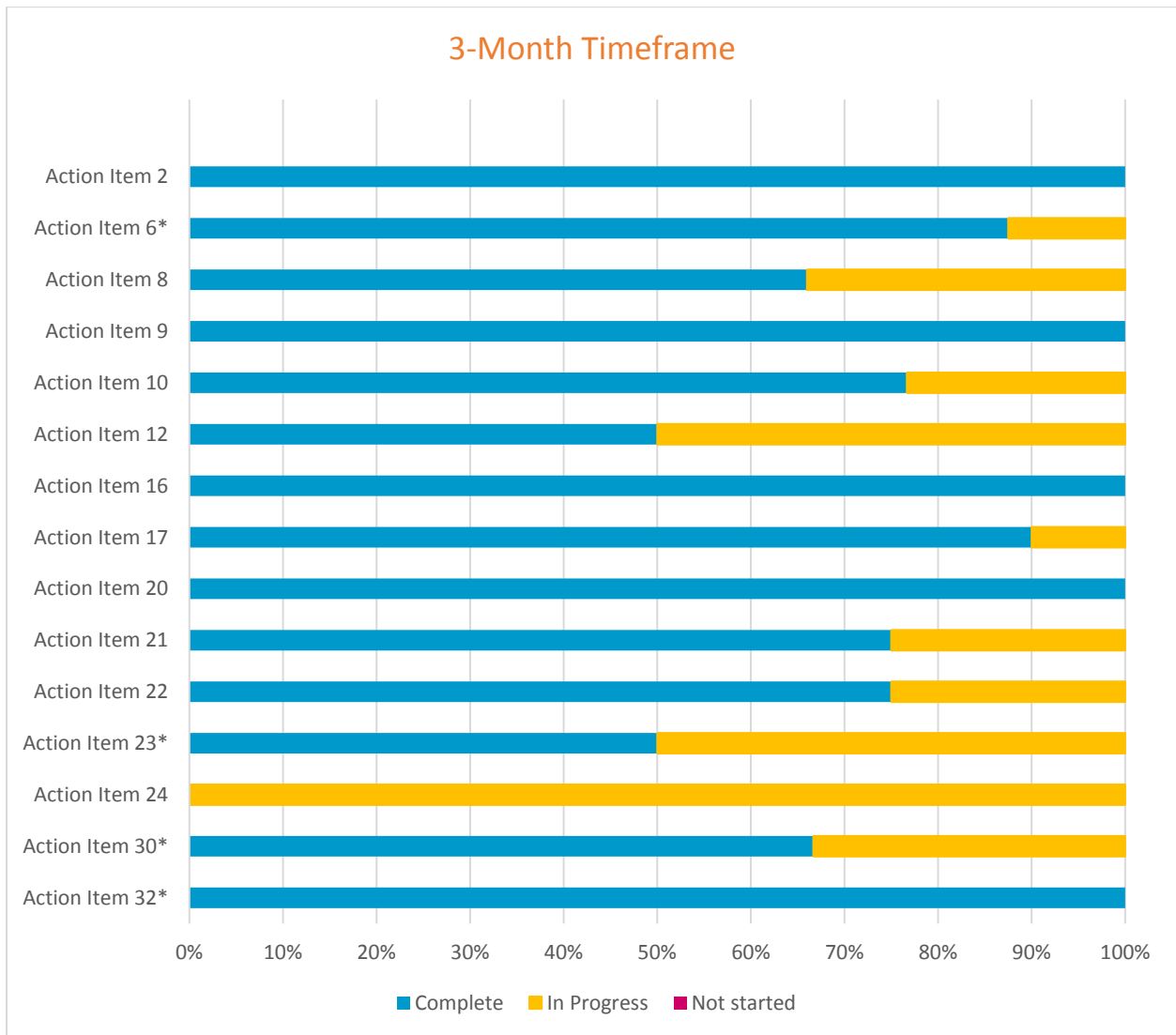


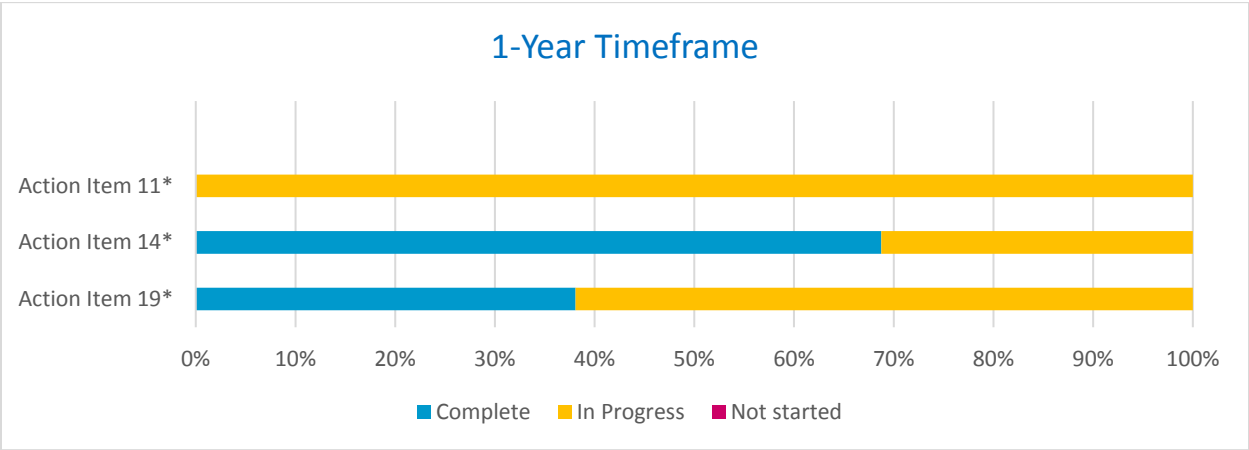
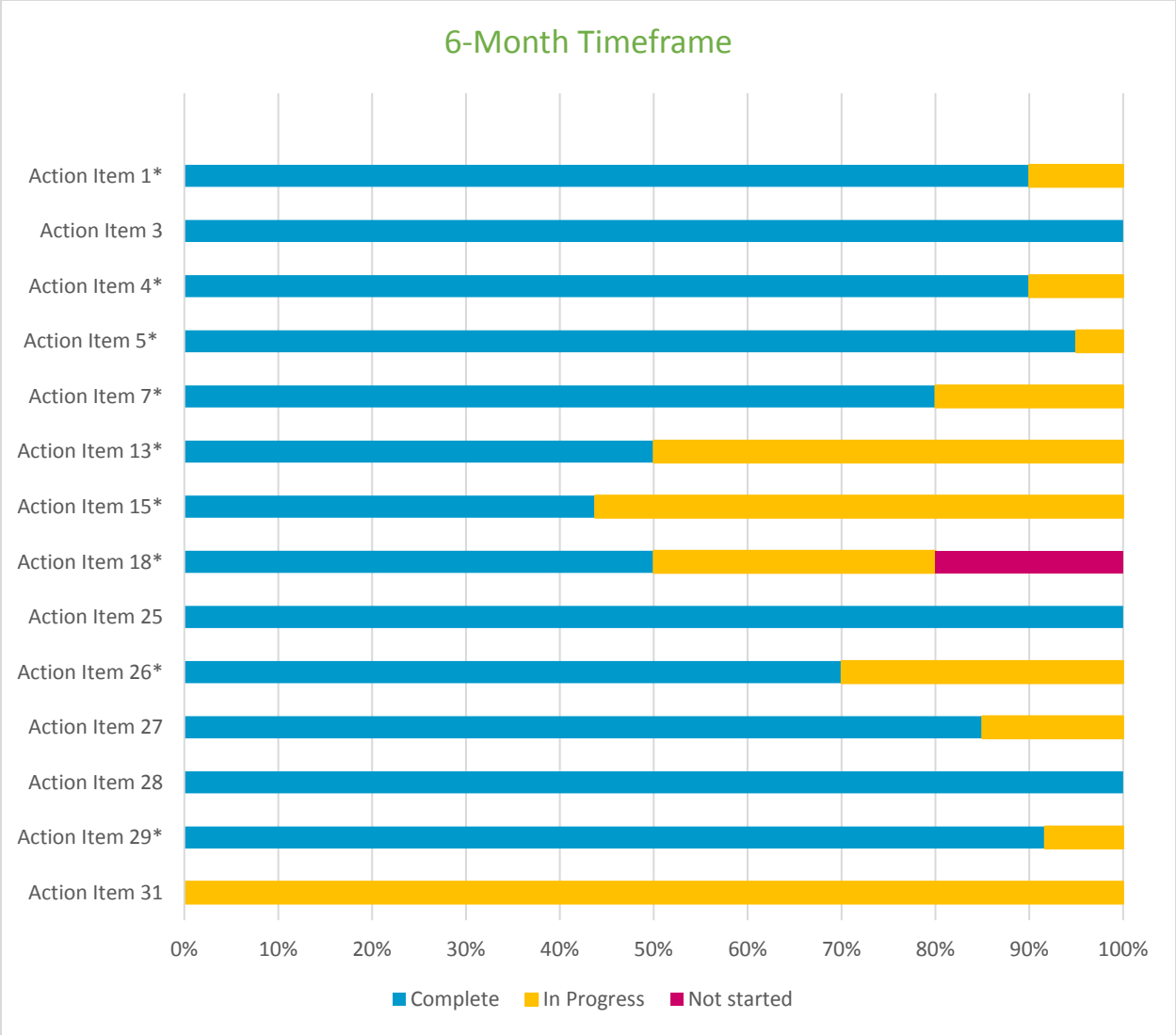


Action Plan Progress Report

June 2020

This report shows the College’s progress on the Action Plan. The action items are organized according to the 3-month, 6-month and 1-year milestones indicated in the Action Plan. For each action item, there are pie-charts demonstrating the progress on the main actions required to meet the proposed outcome.





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3-MONTH TIMEFRAME

ACTION ITEM 2 – Governance

Progress:



Main Actions:



Amend Bylaw Part 2 to add three-year ineligibility period from the time registrants have held board officer position or committee chair position with a representative organization until they can stand for election to the College board.



Update nomination materials to reflect new eligibility requirements for nomination to the Board.

ACTION ITEM 6 – Board Meetings

Progress:



Main Actions:



Revise our current storage of motions to include tracking of decisions made by the Board



Develop a process to track actions and monitor work streams arising from board meetings

ACTION ITEM 8 – Engagement

Progress:



Main Actions:







Promote public engagement and provide public access to board meetings and materials

ACTION ITEM 9 – Audit

Progress:



Main Actions:




-  Renew commitment and adherence, by the Board, to the College’s procurement policies
-  Procure outside financial auditor to support Audit Committee
-  Commit to independence of the Audit Committee from Board influence
-  Determine the need for the Finance and Audit Working Group

ACTION ITEM 10 – Governance

Progress:



Main Actions:


-  Determine process for and conduct a governance review
-  Implement process to support cultural change
-  Promote trust by including senior staff participation in board discussions and evaluation of board effectiveness

ACTION ITEM 12 – Standards


Progress:




Main Actions:

- 

Conduct an inventory of all standards and guidance documents and supporting material.

- 

Reorganize content so that all standards contained in College documents are listed in one place for the public and registrants to access.

- 


Replace the term 'policy' in favour of standards and guidance as it relates to practice documents.

ACTION ITEM 16 – Engagement


Progress:



Main Actions:

- 

Finalize the policy for public and registrant participation at board and annual general meetings. This policy welcomes public participation at board meetings and the AGM and endeavors to create an environment in which members of the public feel comfortable and are able to ask relevant questions at an appropriate time.

- 

Implement the Public and Registrant Participation at CDSBC board meetings and Annual General Meeting policy (a public Q&A session will be a standing item on board meeting agendas, at AGMs the public will be able to participate with questions or comments)

ACTION ITEM 17 – Engagement

Progress:



Main Actions:



Continued efforts to engage registrants to enhance their understanding of regulation.



Recalibrate the College’s relationship with the BCDA and other representative organizations

ACTION ITEM 20 – Fees

Progress:



Main Actions:



Provide clear information about fee breakdown on the website and in the annual report.



Review and enhance the way fees are presented in the annual report to be clear that whether or not a dentist is a member of the BCDA, a fee equivalent to that amount is collected, provided the Board and the BCDA execute a written agreement.

ACTION ITEM 21 – Fees

Progress:



Main Actions:



Board will immediately resolve that within 3 years, the College will discontinue collection of a fee from registrants that is equivalent to the membership fee of the BCDA membership fee.



Remove Bylaw Section 3.10 that provides authority for the College to collect fees as an agent for an association, defined as the CDA or the BCDA.

ACTION ITEM 22 – Committees

Progress:



Main Actions:



Review of committee structure to include Standards and Guidance Committee mandated to develop, maintain and review standards of practice and professional ethics that reflect up to date practice and legislation.



Review of committee structure to include a Patient Relations Committee.



Provide clarity to registrants and the public about what is a standard and what is guidance.



Initiate a process to re-codify documents to clarify which are standards and which are guidance.

ACTION ITEM 23 – Standards

Progress:



Main Actions:



Establish a plan to deliver an accountable, managed process for the development, revision and review of all College standard and guidance documents.



Establish staff support for this process.

ACTION ITEM 24 – Standards

Progress:



Main Actions:



Address inconsistencies of style, taxonomy and formatting in the College’s standards and guidance documents with a clear focus on defining what is a standard and what is guidance.



Initiate change to the College’s public facing resources to improve access and clarity of our standards and guidance.

ACTION ITEM 30 – Risk Management

Progress:



Main Actions:



Review and simplify reports from the staff to the Board to ensure the Board knows that its strategic objectives are being delivered, that the organization’s resources are sufficient and effectively deployed and whether performance is improving or declining.



Include KPIs and develop a corporate risk register.



Discontinue the executive limitation reports.

ACTION ITEM 32 – Board

Progress:



Main Actions:



The Board will renew its commitment to refining its role, reforming its committees, and to addressing its relationship with its registrants and their representative body, and realizing the aspirations of governance in the Strategic Plan.



The Board will take steps to rebuild trust among its members.

6-MONTH TIMEFRAME

ACTION ITEM 1 – Governance

Progress:



Main Actions:



Amend Bylaw Part 2 that addresses composition of the Board, including title, number and appointment of board officers.



Determine competency and eligibility requirements for election including content of mandatory workshop for individuals wishing to run for election.



Identify and cease activities that reinforce the concept of 'membership' and volunteerism in favour of activities tied to public protection and supportive of professional regulation.

ACTION ITEM 3 – Governance

Progress:



Main Actions:



Amend Bylaw Part 2 (College Board) and Part 4 (College Committees) to address the impact of an open or upheld complaint on a registrant's ability to stand for election, be acclaimed to the Board, be appointed to a committee, sit on the Board or sit on a committee.

ACTION ITEM 4 – Governance

Progress:



Main Actions:



Amend Bylaw Part 2 (College Board) and Part 4 (College Committees) that addresses the impact of an open complaint on a registrant's ability to sit on the Board and sit on a committee.

ACTION ITEM 5 – Committees

Progress:



Main Actions:



Amend Bylaw 4 to address committee structure and composition



Restructure committees to meet the recommendations and to be compliant with the *Health Professions Act*.

ACTION ITEM 7 – Risk Management

Progress:



Main Actions:




Replace the current executive limitation reports with a formal risk register that is developed by staff, overseen by the Audit Committee and reported to the Board.

ACTION ITEM 13 – Board member conduct


Progress:



Main Actions:

- 

Update the Board Member Conduct Agreement to capture expectations regarding the autonomy of the complaints process from undue influence from the Board.

- 


Update Bylaw Part 2 and Part 4 to disallow board member involvement in Inquiry and Discipline proceedings and all regulatory committees

ACTION ITEM 15 – Complaints feedback


Progress:




Main Actions:

- 


Re-evaluate what information the College needs to collect to inform process improvements that would enhance the patient experience.

- 

Consider and develop new opportunities to collect input from complainants at the start and mid-way through the complaints process, as well as when the complaint file is closed.

- 

Take advantage of existing opportunities to collect and document feedback from the public, i.e. calls and correspondence received by the complaints team.

- 


Review and enhance survey tool that is used when a complaint is closed


ACTION ITEM 18 – CDAs and Dental Therapists


Progress:





Main Actions:

- 

Change the nomenclature to be able to use a single term – registrant – to refer to all 3 types of health professions we regulate.
- 

Encourage the participation of dental therapists in College activities, including development of standards.
- 

Incorporate the CDA experience and knowledge into all College activities, including committee participation and within operations to promote a collaborative team-based approach.
- 

Incorporate CDAs and dental therapists in expert working groups.
- 


Promote participation of CDAs and dental therapists in decision-making roles by moving to competency-based requirements for board members.


ACTION ITEM 25 – Complaints Process


Progress:



Main Actions:

- 

Inquiry Committee implement the application of a risk assessment framework at intake to determine prioritization of direction for investigation.
- 

Reassess the intake process to consider the complaints team applying the risk assessment tool to expedite receipt of the complaint by the Inquiry Committee in cases of higher risk complaints.
- 


Continuous review and improvement of the risk assessment framework to ensure a wider range of matters are considered at the Inquiry Committee initial triage and that it is focused on immediate risk of harm to patients from the continued practice of the registrant.


ACTION ITEM 26 – Complaints Process


Progress:





Main Actions:

- 

Increase independence of the Inquiry Committee in making its own decisions.
- 

Initiate change to monitoring program to increase robustness and consistency.
- 

Review and determine areas to improve data collection on effectiveness of remedial approach to resolving complaints.
- 

Initiate development of a remedy to address busyness of the Inquiry Committee that is preventing it from giving all complaints a thorough and objective assessment.
- 


Amend Bylaw Part 4 to address committee structure and composition to remove requirement for a board member to be on the Inquiry Committee.


ACTION ITEM 27 – Complaints Process

Progress:



Main Actions:

- 

Develop indicative target times for each stage of the complaints process to allow the College to measure its own performance and to identify where resources are needed or where performance is improving or getting worse.
- 




Continued discussions regarding increased resources as and where needed.

ACTION ITEM 28 – Complaints Process

Progress:



Main Actions:




-  All levels of the complaints and discipline process including the weekly complaints team meeting and the IC meetings will provide minutes that properly document reasons for decisions.
-  The memos to the IC will contain reasons for any recommendations
-  All Discipline decisions will contain reasons, including IC orders resolving a citation.

ACTION ITEM 29 – Risk Management

Progress:



Main Actions:



-  Develop and implement a formal risk register which can be assessed periodically by management, the Audit Committee and the Board.
-  Develop process for identifying, assessing, escalating and managing organizational risks to the risk register.
-  Discontinue use of executive limitation reports to the Board.

ACTION ITEM 31 – Data management

Progress:



Main Actions:

-  Determine a process, using the strategic plan as a framework, for refining and improving measurement of the College’s impact on outcomes for patients and the public. Going forward, this will be incorporated into the College’s strategic planning process.
-  Build understanding of the College’s impact on outcomes for patients and the public through the development of a process to collect information on how the College’s activities.


1-YEAR TIMEFRAME

ACTION ITEM 11 – Board member conduct


Progress:




Main Actions:

- 

Identify, through a needs assessment in the area of data collection and performance management, what data we generate in performing our operational processes, what data we need to evaluate those processes and where the gaps are.

- 

Ensure the College has capacity and expertise to analyze and report on performance data in a meaningful way.

- 


Review and simplify data reports to ensure that strategic objectives are being delivered, that the organization's resources are sufficient and effectively deployed, and determine whether performance is improving or declining.

ACTION ITEM 14 – Engagement


Progress:




Main Actions:

- 


Deliver on the outcomes identified in the 2019-21 Strategic Plan as defined in Goal #2

- 

Actively engage the public and patients in decision-making while being mindful of equity and diversity

- 

Assess our stakeholder relationships and develop strategy that encompasses our partners (such as educators and other regulators), students, the professionals we regulate, patients and the public.

- 

Collaborate with, and act as a resource to, other health regulators about CDSBC's experience in meeting the standards of good regulation and delivering on this Action Plan

ACTION ITEM 19 – Engagement

Progress:



Main Actions:



Actively promote collaborative relationships with the other dental colleges through ongoing engagement