QAP Review: Engagement Strategy V2

December 16, 2016

**Purpose:** Involve a diverse group of interested parties in developing and reviewing proposed updates to CDSBC’s Quality Assurance Program, to help ensure the program both serves and protects the public, and is responsive to professional realities.

**Objectives:**
- Inform all registrants that this review is occurring, motivations for the review, how to get involved, what the Working Group has heard, and how input is being considered in next steps
- Involve a limited and diverse group of people in helping to review key issues and inform proposed updates to the QAP
- Provide robust notice and accessible opportunity for all registrants and stakeholders to provide feedback on the draft QAP
- Publish a revised QAP that responds to the Board’s mandate to the QA Committee and the input received during engagement efforts

**Develop**
- Fall 2016 to Summer 2017
  - Inform registrants and stakeholders, ongoing
  - Initial targeted consultations
  - Draft updates to QA program
  - Plan and prepare for consultation on draft QAP

**Discuss**
- Fall 2017 to Spring 2018
  - Notify registrants and stakeholders
  - Consultation on draft QAP
  - Input analysis and acknowledgement

**Publish**
- Fall 2018
  - Communicate and implement policy
  - Evaluate engagement and learn
Table of Contents

Milestones Calendar ................................................................................................................. 3
Direction on Engagement from the Working Group ................................................................. 5

A. DEVELOP .............................................................................................................................. 6
   1. Inform registrants and other key stakeholders, in an ongoing way ..................................... 6
   2. Initial, Targeted Consultation ......................................................................................... 7
   3. Draft updates to QA program ......................................................................................... 13
   4. Plan and prepare for consultation phase ........................................................................ 15

B. DISCUSS ............................................................................................................................. 17
   5. Notify registrants and stakeholders ............................................................................... 17
   6. Registrant and stakeholder consultation ....................................................................... 18
   7. Analysis of all feedback received .................................................................................. 21

C. PUBLISH .............................................................................................................................. 24
   8. Communicate and implement policy ............................................................................. 24
   9. Evaluate and learn .......................................................................................................... 25

D. Review ................................................................................................................................ 26
   10. Assess policy relevance ............................................................................................... 26

Key Messages ............................................................................................................................ 28
### Milestones Calendar

See the attached Excel spreadsheet for detailed workplan.

<table>
<thead>
<tr>
<th>DEVELOP</th>
<th>Fall 2016</th>
<th>Winter 2017</th>
<th>Spring 2017</th>
<th>Summer 2017</th>
<th>Fall 2017</th>
<th>Winter 2018</th>
<th>Spring 2018</th>
<th>Summer 2018</th>
<th>Fall 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Inform registrants and stakeholders, ongoing (page 8)</td>
<td>'We are reviewing the QAP’</td>
<td>'What we have done, are doing, will do’</td>
<td>'What we have done, are doing, will do’</td>
<td>'Please provide feedback on the draft QAP’</td>
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<tr>
<td>2. Initial targeted consultations</td>
<td>Listening Session #1 Planning for targeted engagement</td>
<td>Listening Session #2 Webinar #1 Focus groups #1-#3: CDAs, specialists, dental therapists PDC</td>
<td>Listening Session #3-#4 Webinar #2 Focus groups #4-#5: CE providers / presenters, patients Stakeholder meetings: BCDA, CDABC</td>
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<tr>
<td>3. Draft updates to QA program (page 16)</td>
<td>Identify key issues for discussion</td>
<td>Summarize what's been learned</td>
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<td>Consider input Draft QAP</td>
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<td>4. Plan, prepare for consultation (page 18)</td>
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<td>Prepare for consultation</td>
<td>Prepare for consultation</td>
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<td>DISCUSS</td>
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<tr>
<td>5. Notify registrants and stakeholders (page 20)</td>
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<tr>
<td>6. Consultation on draft QAP (page 21) Perhaps to be held in early 2018</td>
<td>'Please participate’ 'This is what we did’ 'This is what we heard’ Online feedback Listening Session #5 Webinars #3 &amp; #4</td>
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<tr>
<td>7. Input analysis &amp; acknowledgement (page 24)</td>
<td>Begin analysis Summarize input Thank participants</td>
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<tr>
<td>8. Finalize QAP</td>
<td>Modify QAP in response to input Finalize QAP Finalize QAP</td>
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<tr>
<th>PUBLISH</th>
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<tbody>
<tr>
<td>8. Communicate and implement policy (page 27)</td>
<td>Post online Newsletter update Promotion during license renewal</td>
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<tr>
<td>9 Evaluate engagement and learn (page 28)</td>
<td>QA working group meeting Share results</td>
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</tbody>
</table>
Direction on Engagement from the Working Group

- Be sure registrants know the College is going through this process, and why we are doing this

- Hear diverse views, including registrants that don't typically participate, the public, representative group of CDAs, CE providers, etc.

- Reach registrants through their existing trusted relationships such as professional associations and opinion leaders

- Support focused and informed input

- High quality process to enable a high quality outcome

- Use a range of engagement approaches, with an emphasis on face-to-face

Successful engagement on the QAP review is:

- Someone engaged should be able to explain the why we are doing this

- Registrants feel the process includes them, that their opinion is important,

- Can't predetermine the outcome, we are flexible and responsive

- Evidence that opinions have been sought early on in the process

- Hear new ideas

- Move forward and implement, or have a time frame on what changes might look like. Make some changes, not wait 5 years to do so

- Growing numbers of practitioners that participate in groups that support each other’s learning. Study clubs. Or online.

- People want to achieve their professional growth.

- Lots of information coming out of the registrants, so that we understand 'who gets' why the QAP exists and why we are working on it, the need for the program

- Get new ideas from registrants on how to modify the program.
A. DEVELOP

DEVELOP a policy draft through research, targeted consultation, and analysis

1. Inform registrants and other key stakeholders
2. Initial, targeted consultation: who is engaged, methods of engagement, what topics
3. High level communication to registrants and stakeholders
4. Plan and prepare for consultation phase: defining success, products of the engagement, who is engaged, timing, costs, engagement process, team, etc.

1. Inform registrants and other key stakeholders, in an ongoing way

**Purpose**
Let registrants know that you are tackling this policy issue, offer your working definition of the problem the QA Working Group is trying to address, and describe what stage your process is at.

**Timing**
Fall 2016 to spring 2017

**Key activities**
Work with CDSBC staff to communicate high-level messages to registrants and stakeholders about your efforts, including:
- Newsletter updates
- CDSBC social media postings
- Website page for QAP review
- Update letters and phone calls as appropriate
- One-on-one discussions in person or by phone

Remember that people are busy, so it’s critical to highlight why registrants may be interested in the issue, and use graphics or other compelling elements as appropriate.

Tip: use a graphic timeline of your policy development work to help stakeholders understand what’s happened already and what’s still to come.
2. Initial, Targeted Consultation

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Early input will support better quality policy, because the draft can be responsive to the ideas and concerns of people impacted by the policy</th>
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<tr>
<td>Timing</td>
<td>Fall 2016 to May 2017</td>
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</table>
| Key activities | 2a. **Who.** Identify desired participants, including those who people who are directly impacted by the issue and have a range of perspectives, as well as those who have relevant expertise  
2b. **How.** Plan to get input in ways that are time and resource efficient for your committee and the participants  
2c. **What.** Identify discussion topics that will help your Working Group understand the range of ways to define the problem, the possible solutions, and explore intended and unintended consequences of various approaches. |

| Engagement methods | • Listening Sessions hosted by CDSBC, which QA is one topic of a few  
• Webinars for registrants and stakeholders who are unable to attend other opportunities  
• Focus groups to understand views of specific groups such as: CDAs, specialists, dental therapists, CE presenters and course providers, and the public  
• Stakeholder meetings with BCDA and CDABC  
• PDC March 9-11, CDSBC booth  
• One on one interviews as appropriate |

2A. **Who will you engage?**

Develop a comprehensive list of people and organizations that are affected by the issues. See the image below to help you get started.

Divide your list into those you want to engage at this initial step to help develop the draft policy, and those who you want to engage later for feedback on the draft.

Some central questions to consider when mapping stakeholders:

- Who is involved and affected by the issues?
- Who will need to implement any policy that is developed?
- Who needs to be involved, and in what proportion, to ensure the results of the engagement are credible to the Board, registrants and other stakeholders?
Even at this early stage, make a specific plan for what contact details and demographic information you will capture from participants of your policy development efforts. Determine who will be responsible for managing this information and where it will be stored.

The QA Working Group may ask participants for the following information about themselves:

- Postal code
- Professional role: dentist, CDA, specialist
- Years of practice: 0-5 years, 6-10 years, 11-15 years, 16-20 years, 25+ years
- Gender: male, female, prefer not to answer
- Email address

Your contact list is a highly valuable resource for keeping stakeholders informed about your effort, directly inviting people to share their views during your consultations, and providing an update at the end to let people know about the results of your efforts.

Figure 1: CDSBC Stakeholders

The Working Group has explored publishing at the end of the engagement a list of names of all the known participants. If this will be done:

- Survey participants (if a survey is held) should be given a choice about whether to identify themselves (with information about how and why the names will be used)
- All participants should be emailed in advance of publishing the list, giving them an option to opt-out.
2B. How will you engage?

The **purposes** of engagement at this stage are to:
- Uncover key issues
- Explore options, and
- Consider a range of views

Key activities include:

i. **Listening Sessions** hosted by CDSBC, in which QA is one topic of a few issues
   a. The **purpose** is to get input on key issues being considered by the Working Group at the time of the event
   b. **Discussion questions** may evolve along with the state of work being done by the Working Group
   c. **Results** will be considered along with other forms of input, by the QA Working Group
   d. **Dates:**
      i. Fall 2016: Listening Session #1 Victoria November 3
      ii. Winter 2017: Listening Session #2 late January/early February
      iii. Spring 2017: Listening Sessions #3 and #4

ii. **Interactive webinars** for registrants and stakeholders who are unable to attend other opportunities. See the webinars hosted by the College in April 2016 as an example.
   a. Host one webinar **twice** in a two week period to reach a broad group on one set of issues, in winter 2017
   b. **Invitations** should give people 5 weeks notice, emphasize the value they would gain by participating (have an opportunity to help shape how we support high quality practice), ask for RSVP, and reach out through:
      i. Broadcast invitations through CDSBC newsletter, website, and social media
      ii. Personal invitations to the leadership of all the component societies and other active registrant groups, as well as any others whose input would be valuable and/or who could spread the word (and would be provided short email to customize for sending to their network).
   c. The **85 minute webinar agenda** could be as follows:
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
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</table>
| 10 min| • Welcome. Why CDSBC is reviewing the QAP  
• What the QAP Working Group has done, is doing and will do  
• Who the QAP WG has heard from so far, and what key themes have emerged  
• Agenda for today  
• Poll: who is participating (geography, role) |
| 5 min | • Brief overview of the key issues you would like feedback on  
• Charge the group with thinking critically about the issues, such as: consider the intended and unintended consequences of various approaches, strengths of approach, issues not yet considered, etc. |
| 15 min| Topic 1  
• 5 min presentation  
• 10 min discussion, via voice and text, in response to discussion question posed on slide |
| 15 min| Topic 2 |
| 15 min| Topic 3  
• Open discussion for Q&A, time to explore other issues, post slide of other topics the WG is wrestling with currently |
| 5 min | • Overview of next steps |

iii. **Focus groups** of 8 to 12 participants to understand views of specific groups about issues of importance to them. Two Working Group members and one staff person might attend each focus group.

a. **Logistics**: Select date, time, location, catering and WG representatives for the focus groups

b. Consider **participant diversity** in each group. For example, diversity in age, gender, geography of practice, number of years of practice, or other important considerations. Draw on CDSBC registrant database to assist with invitations.

c. Invite **participants** at least four weeks in advance of the focus group. Include why the College is reviewing the QAP, what the purpose of the focus group is, and what participants might gain by being involved (a chance to help shape the QAP, etc.).

d. **Groups** to speak with may include:
i. CDAs
ii. Specialists
iii. Dental therapists: attend an existing meeting
iv. CE presenters and course providers

iv. **Patients through an existing health care advisory group**, targeting demographically diverse members of the public. Contact Vancouver Coastal Health’s Community Engagement Advisory Network to reach out to Vancouver-based and/or BC-wide patients (newsletter goes out twice a week)

v. **Association and stakeholder meetings** in spring 2017 to share the Working Group’s current thinking and get feedback from key stakeholders
   a. BCDA
   b. CDABC
   c. BC Health Regulators
   d. Plus Registrar to provide updates to contacts at the BC Ministry of Health

vi. **PDC on March 9-11 at the CDSBC booth.**
   a. One Working Group member per shift to inform visitors about the QA effort and get feedback through an interactive board (visitors use sticky dots to indicate their views on key aspects of the QA update) or iPad survey

vii. **One on one interviews** as appropriate, led by Working Group members
   a. Consider how records of these meetings will be kept and how results will be shared with other WG members
2C. What will you engage on?
For more structured engagement such as a focus group, webinar, or listening session, prepare a **handout** to help participants understand the purpose of the policy, what you’ve learned so far, and what you’d like to discuss.

Your group’s work will be evolving, and it’s likely that the best issues for engagement will change over time and in response to whom you are talking to. **Possible issues** to consider as the focus of your discussions include:

- Defining Quality
- Administration of QAP
- Content of CE
- Hands on learning
- Study Clubs
- Role of online courses
- Self-assessment
- Culture of excellence

**Structure** your conversations in a way that briefly shares what you know, followed by lots of time to hear from the person(s) you are engaging. One approach is cover the following (in approximately one hour):

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 min</td>
<td>Welcome. What the Board has tasked your Working Group to do. High level description of WG’s current and upcoming work on this policy issue.</td>
</tr>
<tr>
<td>5 min</td>
<td>Brief overview of the key issues you would like feedback on (with handout).</td>
</tr>
</tbody>
</table>
| 40 min | (If group is quite small, ask participants which issues they’d like to talk about first) Walk through each important issue, asking for input, suggestions and other considerations. Consider exploring:  
- Ways to define the problem  
- Possible solutions  
- Considerations of the intended and unintended consequences of various approaches  
Take detailed but unattributed notes. |
| 10 min | Participant advice or other issues that they’d like to share. |

Results of all engagement from this stage should be considered along with your research and the College’s mandate.
## 3. Draft updates to QA program

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Integrate your research, engagement and Working Group discussions into a proposed QA program.</th>
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</thead>
<tbody>
<tr>
<td>Timing</td>
<td>Spring to summer 2017</td>
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</table>
| Key activities | Analyze input received  
Draft updates to the QAP with rationale for major changes |

Draft the updates to the QAP by addressing the following elements, and more:

- CDSBC authority to establish and require a QAP
- Definitions of key terms that could have multiple interpretations
- Analysis of the issue and proposed policy
- Stakeholder engagement activities and summary of input received
- Connection to Strategic Plan
- Timing of when policy should come into effect
- Staff and committee time to implement and enforce policy
- Recommendations to the Board
Drafting Good Policy
Adapted from CLEAR April 2016 Webinar Introduction to Regulatory Governance clearhq.org

Policy Writing
Policy development should be approached with pragmatism and temperedness, as the results will impact the behaviours of dental health practitioners and their patients. The process must be rigorous, principled and consistent.

- Identify the need. What are the issues at stake? What is to be accomplished?
- Review enabling legislation from the BC Government (regularly) so you know that you are within CDSBC’s authority
- Consider 4 key questions:
  1. What is the public interest? Is a policy necessary to prevent or correct a threat of public harm?
  2. Who is affected? There are always two sides of the story, and understanding who is affected and in what ways, will help to create awareness of unintended consequences. A rigorous policy-writing process will help you minimize unintended consequences.
  3. What will be the costs and benefits? Consider not just financial costs, but also the burden placed on registrants or patients.
  4. Who needs to be consulted? Ensure you involve the people directly impacted by the issues and those with specialized knowledge.

- Use this Policy Drafting Manual to ensure your drafting process is objective and consistent.

Drafting Considerations
- Language should be understandable to your intended readers, registrants and patients. Avoid technical or legalistic language.
- Avoid words that have multiple interpretations (e.g. using "rigorous" would result in an unclear standard)
- Use clear standards (e.g. avoid "as soon as possible" or "if it's appropriate" as it could be interpreted differently by different people)
- Provide clear definitions (e.g. for the purposes for this policy "completed" means the following). Include a definition section in the policy
- Avoid vague language
- Consider enforcement. How difficult will this be to practically enforce? CDSBC regulations should speak to the public, the registrants, and investigators. What do they need to know in order to understand when the policy has been contravened?

Avoiding Problems
Do not, in your policy development process:
- Repeat or change the law. There is a difference between interpreting and changing
- Delegate authority to another body
- Reference the rules of an association or other body, without including them directly in your policy
- Use unclear standards. Everyone should know what is, or is not, prohibited conduct
- Unnecessarily burden CDSBC or registrants
### 4. Plan and prepare for consultation phase

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Develop a detailed plan for getting input from a wide range of registrants about the draft QAP.</th>
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<tbody>
<tr>
<td>Timing</td>
<td>Spring to summer 2017</td>
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<tr>
<td>Key activities</td>
<td>Define what success looks like, who you want to hear from, timing, resources, process and responsibilities for implementation. &lt;br&gt;Also plan in detail about what information you want to collect from participants and how you will analyze this information.</td>
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</table>

All your work to date will help you plan your consultation on the draft QAP.

- **Success**: Define what success looks like from the perspective of your Working Group, the QA committee, CDSBC Board, registrants and other key stakeholders. What information can you capture to help determine if you met the consultation goals?

- **Product**: What do you do you want to produce at the end of your consultation? A database of responses, increased trust, understanding of a proposed policy, etc. Stay focused on your desired products while planning your consultation.

- **People**: Who specifically are you trying to involve? Use your stakeholder lists from step 2 and refer to step 5 for ideas on how to reach these people.

- **Timing**: Remember that everything always takes longer than you think, especially since your committee is made up of volunteers! Consider: Is there a deadline? What holidays need to be avoided? What other events or processes could influence the timing of the process?

- **Cost**: Do your available resources match stakeholder and/or CDSBC expectations of the kind of consultation needed? Be specific about what you can do and what it will achieve.

- **Process**: How will you receive input from registrants and stakeholders? CDSBC usually enables participants to provide comments in a number of ways, including:
  - Email
  - Online surveys
  - Written submissions

In a few circumstances, your committee may determine that additional efforts are appropriate, such as:
- Hosting discussions with component societies, specialist groups, industry associations, etc.
- Presenting at a meeting or conference, along with paper surveys filled out on the spot
- Webinar
- Workshops for registrants

- **Team**: Who has responsibility for the major tasks? What can be successfully delegated to others? Do those responsible have the capacity and skills to carry out their roles?

- **Input**: What input do you want to collect, and who will analyze it? See Step 7.
5. Notify registrants and stakeholders

**Purpose**

Proactively advise diverse registrants, in a manner suited to the target audiences, about the opportunity to provide feedback on the revised QAP.

**Timing**

Fall 2017

**Key activities**

Develop a notification plan and promote your consultation.

“*If no one comes to the party, why bother hosting?*”

Notification is one of the most critical steps for a successful consultation process. It takes significant effort to communicate this opportunity in a way that is noticed and acted upon by your target audience.

Work with CDSBC staff to develop a notification plan. Consider:

- What are you asking people to do? (“What is this consultation about?” and “how do I share my views?”)
- What will motivate them to participate? (“What’s in it for me?” or “how can my contribution make a difference?”)
- What might get in the way of participation and how will you address this?

Promote the consultation using any number of ways, including:

- Adding it to the policy section of CDSBC website
- Promoting it on CDSBC website homepage
- Publishing a notice about it in CDSBC e-newsletter
- Promoting it through CDSBC social media channels
- Direct email campaigns
- Encouraging dental organizations to share the opportunity
When drafting your messages, consider that registrants and stakeholders told CDSBC that they want to know the motivation for the policy, what you’ve learned, and what stage the policy development is at. Consider how to best communicate this information.

**What would be the most effective ways for CDSBC to keep you informed about policy initiatives?**

![Bar chart showing the results of the April 2016 CDSBC Survey](chart.png)

*Figure 2: Results of April 2016 CDSBC Survey; “What would be the most effective ways for CDSBC to keep you informed about policy initiatives?”*

### 6. Registrant and stakeholder consultation

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Get input on the proposed QAP from a range of stakeholders.</th>
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<tbody>
<tr>
<td><strong>Timing</strong></td>
<td>Fall 2017</td>
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<tr>
<td><strong>Key activities</strong></td>
<td>Support informed feedback on the aspects of the policy that are values-based, controversial, or involve a choice among many possible solutions. Provide input opportunities that are convenient and attractive to registrants and stakeholders.</td>
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</tbody>
</table>

Your draft QAP is now opened up to broad consultation with registrants, dental and other health organizations and the general public.

Typically, CDSBC consultation is typically open for 60-days. Remember to find ways to acknowledge the input received, such as posting a summary of the input, or a thank-you form letter sent by email to everyone who provided their email address.

The key elements for success in this step are:
6A. **Who.** Hearing from diverse voices, in a quantity commensurate with the impact the proposed policy will have

6B. **What.** Supporting informed feedback on the aspects of the policy that are values-based, controversial, or involve a choice among many possible solutions

6C. **How.** Providing input opportunities that make it easy for your target audience to get involved

When planning this stage, also create a plan for how you will analyze all the input captured (see Step 7), because this may impact what you ask participants to share.

### 6A. Hear from diverse voices

Build on previous efforts to be specific about who you hope will share their views on the draft policy. Consider what might motivate each group to participate, and the best way to inform them of the opportunity.

Invitations to participate should include CDSBC’s motivation for the policy, what’s been learned so far, and a clarification of the current stage of policy development.

### 6B. Support useful and informed feedback

Provide concise, easy-to-read and balanced background information about any complex or nuanced areas of the policy. Provide links to these materials in your communications and as temporary elements of the policy draft.

Provide a short video to introduce the issue and opportunity to engage.

Consider highlighting particular items you’d like feedback on, as well as asking for overall comments. Focus respondents on the aspects of the policy that are:

- Values-based
- Controversial
- Involve a choice among many possible solutions, or
- Significant change from the previous QAP

### 6C. Provide easy-to-get-involved input opportunities

Think about your target audience and what input methods would be most accessible to them.

The College can accept input in a number of ways, including:

i. Email to consultation@cdsbc.org with the policy subject in the subject line
ii. Online survey
iii. Written letter mailed to CDSBC Board c/o Registrar's Office
iv. Webinar to accompany the above options to increase understanding of the proposal and provide opportunity for questions

v. Possible meetings held with key constituencies, with note-takers to capture discussions

Provide the following information on your consultation webpage at cdsbc.org:
- What is this consultation about? (Include links to background information)
- How can my contribution make a difference?
- How you can get involved

Remember to acknowledge input received in a timely way, usually by emailing a thank-you form letter to everyone who provided their email address.

How would you most like to provide input on a draft CDSBC policy issue?

- Online survey
- CDSBC-led session at conference or event
- Webinar (live meeting online)
- In-person meeting dental/specialty association
- Participate in a focus group
- Paper survey
- In-person workshop
- "Town hall" phone meeting
- Other

Figure 3: Results of April 2016 CDSBC Survey; “How would you most like to provide input on a draft CDSBC policy issue?”
### 7. Analysis of all feedback received

| Purpose | Understand the input received and prepare to consider it during the next round of QAP development. |
| Timing | Fall 2017 – spring 2018 |
| Key activities | 7A. Plan. Develop a plan for what you will capture, who and how it will be captured, how it will be analyzed and how the analysis will be used  
7B. Gather. Collect, and ensure someone is responsible for saving all the input.  
7C. Synthesize input by themes and/or trends.  
7D. Communicate results to committee, Board, and if possible, post on the CDSBC website. |

Each Working Group member is responsible for understanding what’s been shared during the consultation phase. The Working Group may choose to review all feedback received by CDSBC, or in cases of high volume of responses, select a committee member to work with staff to summarize what’s been submitted.

#### 7A. Create a plan
While planning how you will consult, it is also a good time to develop a plan for analysis including:

- **What you will capture.** Quantitative and/or qualitative information (see the table below), demographics of participants, contact information, etc.
- **Who will capture it.** Staff or committee member?
- **How it will be captured.** Emails copied to one document or saved individually, online survey with results automatically put in a spreadsheet,
- **How it will be analyzed.** Will everything be read by everyone? Will the input be analyzed for themes or patterns?
- **How will the analysis be used.** Who will read the input analysis – committee, Board, public? Will the analysis be used by this or other committees in the future who are working on related issues?
Table 1 Types of Input

<table>
<thead>
<tr>
<th></th>
<th>Quantitative Input</th>
<th>Qualitative Input</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What</strong></td>
<td>Information that can be measured and written down with numbers</td>
<td>Descriptive information, not numerical in nature</td>
</tr>
<tr>
<td><strong>Analysis</strong></td>
<td>Analyzed by numerical comparisons and statistical inferences</td>
<td>Analyzed by looking for themes and trends in what was said (and sometimes by who)</td>
</tr>
<tr>
<td><strong>Pros and Cons</strong></td>
<td>Easy to gather and report, but often does not leave room for learning things you were not expecting</td>
<td>Rich input as well as ability hear what’s important to each participants, but requires more resources for analysis</td>
</tr>
<tr>
<td><strong>Collection</strong></td>
<td>Closed questions, like:</td>
<td>Open ended questions, like:</td>
</tr>
<tr>
<td></td>
<td>• Multiple-choice</td>
<td>• About a specific topic</td>
</tr>
<tr>
<td></td>
<td>• Ranking or prioritization</td>
<td>• Detailed comments to explain quantitative choices</td>
</tr>
<tr>
<td></td>
<td>• Likert scale (rate 1-5)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>At an event: counting instances of something or number of participants</td>
<td>At an event: reports of small group discussions, plenary Q&amp;A, etc.</td>
</tr>
</tbody>
</table>

**7B. Gather**
Collect insights, information, and ideas through your online, in-person and mail-based consultation methods. Ensure someone is responsible for saving all the input received from each consultation method.

**7C. Synthesize**
As a team or individuals look for patterns like:
- Overall themes (topics) and trends (directions) of participant input
- Important but less frequently mentioned ideas (gems)
- Best ideas according to specific criteria set by your committee
- Any preference or distinctions according to important participant variables (e.g. profession, geography, gender)

**7D. Communicate**
Share what you learned with all members of your committee and the Board. When possible, share with participants a high level analysis, and possibly post this high level analysis on the CDSBC website.
Closing the Loop & Following Through
Take the time to congratulate your committee on what they have achieved, but don’t lose momentum.

Here are some tasks that typically require your attention after participant input is received and the final draft policy has gone to the Board:

a. Thank those who have helped you, both online and offline.

b. Keep any promises made; do you need to send out any information?

c. Brief CDSBC Board and Executive about the committee’s work and the input you received.

d. Report back to those who have taken the time to participate. This may take the form of an email update, newsletter story, and/or social media update.

**People must be informed about the decision and about how their input was used as part of the decision.** If CDSBC Board chooses an approach different than many registrants and other stakeholders recommended, it is essential that participants are informed why another option was chosen.

e. Post a summary of your policy development efforts on the CDSBC website, including an overview of input received. For an example, see the Province of BC’s consultation hub http://engage.gov.bc.ca/govtogetherbc/your-voice-your-impact/

f. Meet as a committee to debrief your efforts and document your lessons learned. Share a summary of your learnings with the Board and all committee Chairs and Vice-Chairs, to help build CDSBC capacity for effective and efficient policy development.

g. Collect and inventory all materials, input and lessons learned in one place. Send a copy to your supporting CDSBC staff member(s).
C. PUBLISH

PUBLISH, communicate and implement the approved policy.

8. Communicate policy
9. Evaluate engagement efforts and learn

In this phase, CDSBC staff take over responsibility for the policy, working to:

- Communicate the policy
- Implement the policy

The Working Group (and committee’s) main responsibility in this stage is to evaluate their process, that is, how they developed the policy.

8. Communicate and implement policy

Work with CDSBC communication staff to develop a plan for supporting registrant awareness, understanding and compliance of the QAP.

It is particularly important at this stage to “close the loop” and inform participants how their input was considered (if it has not yet already been done).

**Tip:** “Closing the Loop” with people who shared their views with your committee can be as straightforward as: this is what we heard, this is what we did, and this is why we made our decisions.

*Remember that people need to know their input was carefully considered, or they are unlikely to respond to the next request for participation.*

Implement Policy

About two months after a CDSBC policy is approved then announced, it comes into effect.

During the life of a policy, CDSBC staff proactively communicates about the policy and offers any necessary training opportunities to increase understanding and compliance.
9. Evaluate and learn

Evaluation is a way to learn from experience. Your policy development process can be evaluated:

- At any point by monitoring the activities throughout the consultation process (formative evaluation), which is particularly useful for making necessary adjustments to your research and consultation efforts
- After the consultations have concluded and policy has been finalized (summative evaluation)

CDSBC is committed to rigorous, principled and consistent policy development. Please take the time to reflect on your efforts, to both help the members of your committee and the organization as a whole gain insight into what works, what should not be repeated and where innovations are required.

At the end of your policy development efforts, meet with your team to discuss your work and consider:

- How successful were our efforts?
- What could we do better?
- What did we learn?

Tip: See the Appendix for an evaluation template that can be used to structure a committee meeting about evaluation.
D. Review

REVIEW the policy for relevance as required.

10. Assess policy relevance

This section is outside of the scope of an engagement plan for the Working Group and is included for information purposes only.

This phase is an opportunity to step back and consider how well a policy is working. A review actively considers the views of people closely involved with the policy including staff involved in implementation and complaints, and individuals directly impacted by the policy.

10. Assess policy relevance

Each policy committee has responsibility to review the CDSBC policies delegated by the Board to their committee.

Your policy review should consider:

- Is the policy having the intended impact? Do outcomes of the policy vary across stakeholders and/or over time?
- Is the policy being complied with? If not, what evidence is available to substantiate this?
- Are people clear about their roles and responsibilities in the implementation of the policy?
- Are there any barriers to compliance, particularly at an operational level?
- Is the policy consistent with other CDSBC rules, policies, directives, guidelines and procedures?
- Are there any legal changes that impact the policy?

After assessing the policy relevance, the committee may recommend one of four options to the Board:

i. **Retire the policy.** The policy is no longer relevant, effective or appropriate. After making the decision to retire the policy, CDSBC actively communicates this information to registrants and stakeholders.

ii. **Maintain the policy.** The policy is functioning as intended. No action required.

iii. **Moderately revise the policy.** Aspects of the policy are successful and relevant, but other aspects require some change. The Committee then:
• Identifies areas for revision
• Undertakes any necessary research or discussion
• Makes changes to the policy
• Submits the revised policy to the Board
• Notifies registrants and stakeholders of the change

iv. **Significantly revise the policy.** Aspects of the policy are successful and relevant, but other aspects require significant change. The committee then:

  • Identifies areas for revision
  • Returns to Step 6 and follows the CDSBC policy development process

Policy is only as good as its implementation. A robust, consistent and principled development process will help ensure fair, practical and effective policy.

Regular review will help ensure the policy remains relevant and appropriate.
APPENDIX

Key Messages

Why is the College reviewing the QA Program at this time?

CDSBC’s goal for the QAP is to support continued professional improvement and responsibility, led by registrants with the support of the College

- Every successful company invests in their people. QA is an important opportunity for the College to support registrants to engage themselves in career-long hands-on learning and professional collaboration to achieve improved patient outcomes.
- Under the Health Professions Act, CDSBC has the power and duty to oversee the practice of its registrants in order to protect public safety, such as through the quality assurance program.

It’s responsible to review any program from time to time

- It’s responsible to review the QA program from time to time. Society, technology and best practices are changing, just because we’ve done it one way for a while, doesn’t mean it’s working as well today as it could.
- We are aiming towards a program that is objective, credible, inclusive, and administratively realistic.

An opportunity to improve the effectiveness of the QA program

- Experts say that CE is not assurance of continued practitioner competence.
- We all aren’t very good at seeing our own drawbacks. What kind of objective professional feedback would be most useful to increase professional learning?
- Should there be more hands on learning? Other types of learning? Etc.

This is an opportunity to address the small amount of substandard registrant behaviour

- Opportunity to address issues that typically lead to the complaints that are received (infection control, record keeping, patient dentists)
- Most registrants take their competence seriously, but some do take advantage of the system, asking for credits for unrelated courses, or for courses they didn’t attend

This effort will help the College stay ahead of any mandated changes

- CDSBC is responsible under HPA to have a QAP
- By reviewing the QAP now, CDSBC is staying ahead of the curve, avoiding interventions from BC Gov’t or another authority; we know it is a priority in BC government’s mind, although not mandated.
- Research so far tells us that there is a wide range of different approaches to quality assurance across jurisdictions and professions.

We want to hear from registrants, the QA Committee will carefully consider your input

- We would like to hear from you. This is one of a number of consultative opportunities we are hosting. Your opinions are valued. Your participation is vital. Your input will have an impact on the review process.