





The ADA&C is now operating under the name College of Dental Surgeons of Alberta (CDSA).
This name will become official when Alberta's Health Professions Act is amended.

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## PRESIDENT'S REPORT



2022 was a year of continued transitions for dentistry in Alberta. Beginning with a name change consistent with the new single mandate of the organization, the regulator began operating as the College of Dental Surgeons of Alberta (CDSA). This name will become official upon modifications to the *Health Professions Act* (HPA) and related regulations.

Early 2022 saw the tail end of the omicron wave of COVID-19 and subsequent easing of many restrictions across the country. Despite the increased transmissibility of the latter COVID variants, the CDSA's Standard of Practice on Infection Prevention & Control proved effective at preventing transmission of the COVID virus in clinical

dental settings. Building upon this success, the College adopted a revised Standard of Practice which blended the existing standard with the dentally-relevant sections of the Government of Alberta's Reusable & Single-Use Medical Devices Standards to keep dentistry in Alberta at the forefront of IP&C across the nation.

The CDSA is grateful to government and the public of Alberta for the excellent public members appointed to the council. Together, we spent much time this year building our knowledge and skillsets at regulatory excellence, including the development of our new mission, vision, values, and goals. These guiding documents set the direction for all regulatory activities and decision making and are at the core of the culture of the regulator. We take the new approach of co-governance seriously and believe it is the right direction for regulation of health professions.

Following liability coverage gaps brought in by the insurance market which occurred as a result of the COVID pandemic, the CDSA instituted a mandatory professional liability insurance plan to protect the public. 2022 marked the first full year of the plan. The plan performed better than expected, confirming its viability and reinforced the foresight of the decision to directly handle this important segment of public protection. Now proclaimed HPA changes from Bill 46 reinforced the mandate of council to continue the plan.

Like many regulators, the CDSA experienced an increase in complaint volume. Previous years' planning and recruitment efforts allowed the professional conduct department to comfortably handle this volume change. It is a testament to the quality of the individuals working in this challenging area that the conclusion of files is seeing improved effectiveness and timeliness.

complete by the end of the calendar year, with a firm divestment date consistent with Bill 46. The CDSA will continue to collaborate with the ADA in those areas allowed under the act.

I would like to thank the CDSA members who elected me to council, and the Council itself for the privilege to serve as President this year. I would also like to thank the administrative staff of the CDSA for their unwavering commitment to the organization and its essential public protection duties which they carry out with diligence and integrity. Most importantly, I would like to thank my family for their patience and understanding during all the travel and latenight meetings required to fulfill my College roles.

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Dr. Lee Darichuk President, Alberta Dental Association & College



# ADA&C MISSION, VISION, & GOALS

### MISSION

The ADA&C gives leadership to the dental profession on professional regulations and member services. It provides the public with information and services to ensure that Albertans receive safe, appropriate, ethical, and quality dental care as an integral part of general health.

### VISION

Albertans recognize and regularly use dental services as key components of their primary health care. The dentist-patient relationship is seen as central to the ongoing health of Albertans. Albertans trust their dentists, and view them as the leaders in the delivery of the most advanced, evidenced-based, and caring dental services. Dental practices are considered a vital part of Alberta communities, and dentists are active contributors to community life.

The ADA&C upholds the public trust of dentists, and preserves the integrity of the relationship of dentists with government, service care providers, supporters of dental services, and the business community.



### GOALS

- Optimizing dental health services for all Albertans through governance leadership in the profession that ensures safe, appropriate, and ethical oral health care.
- Effective and efficient resolution of problems regarding dental health services provided by dentists; with patients, dentists, government, industry, and other health professionals.
- In cooperation with patients, dentists, government, industry, other dental organizations and health professionals, the Alberta Dental Association and College supports effective resolution of health-care delivery issues to ensure that the public does not receive unsafe, inappropriate, or unethical oral health services.

- Effective communication and collaborative relationships with dentists, the public, government, industry, other dental organizations, and health professionals.
- Promotion of excellence in the delivery of dental health services.
- Positioning of dentists and dental services with all stakeholders as trustworthy, competent, and responsive to the personal wellness of Albertans.
- Effective monitoring and support of continuing competence and capacity to practice of Alberta dentists.

### ABOUT US

The College of Dental Surgeons of Alberta (CDSA) registers dentists and ensures that the dental health of Albertans is advanced through safe, available, quality and ethical dental services.

### OUR MISSION

To lead the profession via governance in a manner that protects and serves public interest.

### **OUR VISION**

To provide excellence in regulation while upholding the public interest and setting professional standards.

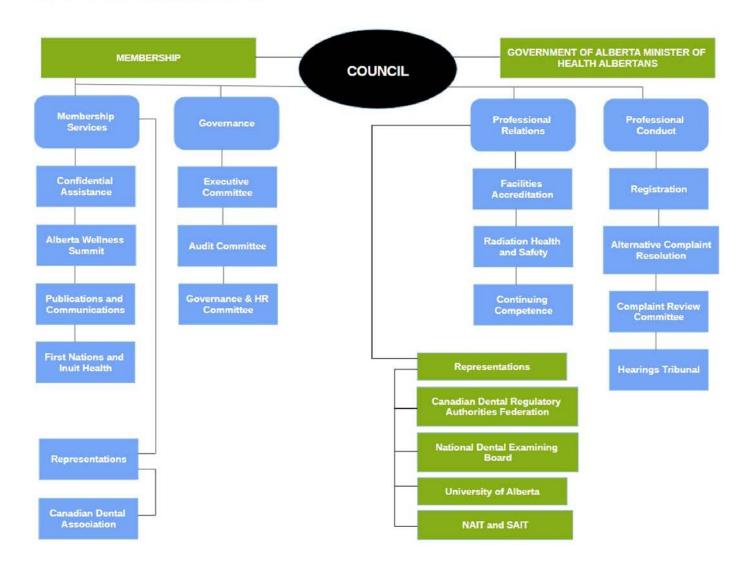
### **OUR CORE VALUES**

Integrity Respect Compassion Fairness Transparency

### OUR GOALS

- Quality health services for Albertans that ensures safe, appropriate, and ethical health care in-line with CDSA's core values.
- Further the trusted relationship between the profession and the public, as well as other stakeholders.

# STRUCTURE



# HEALTH PROFESSIONS ACT & GOVERNANCE

Alberta's Health Professions Act (HPA) provides the dentists in Alberta the privilege of selfregulation with significant public involvement. The Council recognizes the responsibility to govern the dental profession in a manner that is transparent to and serves the interests of the public and of its regulated members, while always fulfilling its statutory responsibilities under the HPA.

The Council carries out this responsibility by developing regulations, standards of practice, a code of ethic, bylaws, and a policy governance model that adheres to the HPA regarding the responsibilities related to registration, competence, practice monitoring, and complaint resolution.

The past few years, Council has been refocusing the strategic goals and objectives of the organization to align with current and upcoming legislative requirements.

In June 2022 the Alberta Dental Association and College (ADA&C) began operating under the name College of Dental Surgeons of Alberta (CDSA). This important name change aligns with the focus of a single College role as required by Bill 46. The name change will become official when the HPA is amended.

For most of its 115-year history, the Alberta Dental Association and College was known as the Alberta Dental Association. On December 31, 2001, when the Health Professions Act was proclaimed the Alberta Dental Association transitioned into the Alberta Dental Association and College. The removal of Association from the organization's name represents a significant shift in its focus and important change to function, as the CDSA focuses solely on regulatory matters.

#### Council Governance and Committees

There are several committees that assist Council in their governance goals.

The Executive Committee is created under the Bylaws as a Committee of Council to facilitate the work of Council. It meets between council meetings and may make recommendations to Council. The Executive Committee identifies issues of importance to the College and recommends issues for the consideration of Council. The Council has four meetings scheduled per year, and additionally meets as required.

There are two other Committees of Council. The Audit Committee is primarily responsible for the financial reporting, information systems, risk management, and internal controls of the college that are vested in management and overseen by Council. The Governance and Human Resources Committee is responsible for reviewing governance that will enhance the effectiveness of the College. The Governance and Human Resources Committee assists the Council in fulfilling its obligations related to human resource matters.

The Council defines the strategic goals and objectives of the organization (policies and protocols) while the Chief Executive Officer and the administrative team are responsible for the operation of the policies and protocols, including developing and implementing results. The HPA sets out requirements for certain committees for areas such as Competence, Registration, Dental Facilities Accreditation, Complaints Review, and Hearing Tribunals. The Complaints Review and the Hearing Tribunals committees are required to have 50% public member representation appointed by the Government of Alberta.

The College has committees that are standing committees for the continuance of competent practice related to specific restricted activities; Sedation, Facial Esthetic Therapies and Adjunctive Procedures, and Unforeseen Events.

### Legislative Changes

Bill 46: The Health Statutes Amendment Act, 2020 (No. 2) was passed by the Legislative Assembly with exceptions on December 9, 2020.

Council, administration, and membership are committed to working together in a collaborative and respectful manner to achieve the ultimate goal of developing and implementing a focused mandate for the College with emphasis on protecting and serving the public interest as well as upholding the public's trust in the dental profession by establishing, monitoring, and enforcing the standards for registration, professional practice and conduct, standards of practice, and continuing competence for the dental profession in Alberta.

Bill 49: Labour Mobility Act was passed in December 2022, with proclamation awaiting the accompanying regulations.

We have been reviewing and updating our registration policies and processes to ensure that there are fewer barriers by creating a consistent approach to recognizing other provincial credentials.

### Ombudsman's Review

The College regulates Alberta Dentists in a manner that protects and serves the public interest. We promote transparency and openness. From time to time, the Ombudsman of Alberta contacts the College regarding concerns they receive about processes at the College.

The College welcomes the Ombudsman's input and dialogue to improve our processes to nurture regulatory and system excellence.

In the 2022 reporting period, the College welcomed the Ombudsman's Early Resolution process. As a result of this process, a determination was made that the decision of the College's Complaints Review Committee was administratively fair.

Further, the Ombudsman's Office concluded that the complainant was regularly notified of the status of the investigation, the complainant declined an interview, the investigation was thorough, and the College's decision to conduct a 6-month website audit was reasonable.

## COUNCIL

### **Executive Committee**

Dr. Lee G. Darichuk President, Calgary District

Dr. G.S. (Mintoo) Basahti Past President (Non-voting)

Dr. Troy A. Basarab President-Elect, Southern District

Ms. Nickolletta (Nikki) Sandie Executive Public Member

### Directors

Dr. B.A. (Brant) Alfaro Edmonton District

Dr. Michael E. Piepgrass Northern District

Dr. Nathaniel D. Podilsky Edmonton District

Dr. Neil E. Strembiski Central District

Dr. C.B. (Colin) Wiebe Calgary District

### **Public Members**

Mr. Terrence Bayrock

Ms. Barbara Chipeur

Ms. Scarlett Crockatt

Ms. Shari LaPerle

# NEW COUNCIL MEMBERS



### DR. BRANT ALFARO

Dr. Alfaro received his BSc and DDS degree from the University of Alberta, graduating from Dental school in 1988. He then completed the General Practice Hospital Residency (GPR) at the U of A Hospital in 1989. From there, Dr. Alfaro has been in private practice in Edmonton's west end. He continues his full time practice to this day.

Dr. Alfaro has been active in the dental community throughout his career. He served on the EDDS for nine years, being President in 2013. The highlight was stewarding the EDDS's 100th year anniversary celebrations. He has also been active in numerous dental organizations including Spear Study Clubs, AACD, ITI, Dawson Academy and others. He is currently active with the College, serving on the Hearing Tribunal Committee, and with the National Dental Examining Board.

Charitable contributions include participating in a Dental Mission in Nicaragua with Dentistry for All. He has also served on advisory boards with The Mustard Seed and Catholic Social Services.

Dr. Alfaro is married to his wife of 29 years, Niki. He has 3 children; Tori, Aidan, and Garin. In his spare time, he stays active playing hockey, curling, skiing, cycling, and trying to golf.





### Dr. Nathaniel Podilsky

Dr. Podilsky was born in North Battleford Saskatchewan. He graduated from the University of Saskatchewan dental school in 1982. He was first an associate at a practice in Calgary. Between the years of 1984 to 2000 he owned or managed eleven dental office in the province of Alberta. Dr. Podilsky took his advanced training in esthetics at the Las Vegas Institute of Cosmetic Dentistry and the American Academy of Cosmetic Dentistry between the years of 2000 and 2005. Here he grew his passion

for Cosmetic dentistry and his independence from dental insurance.

Dr. Podilsky pursued implant training from Dr. Carl Misch and is a member of the International Congress of Oral Implantologists and the American Academy of Implant Dentistry. Dr. Podilsky has been an active member of the American Academy of Cosmetic Dentistry for over twelve years. Currently, he has built a new dental centre in downtown Edmonton, in the ICE District. He privately mentors dentists on implants, esthetics and the business of dentistry. Dr. Podilsky also runs a monthly Spears Study Club in Edmonton.

At this stage in Dr. Podilsky's dental career and with 41 years of dental and business experience, he would like to represent the dentists from Edmonton and all the dentists from Alberta by serving on Council. He believes that the College has strong leadership now and that changes are slow but progressing in the right direction.

The Alberta dentist is under constant threat with new regulations, new government controls, new tax laws, new economic conditions, new and more competition, rising overhead costs, new corporate dental groups, high staff wages, lack of enough dental manpower (assistants, hygienists, receptionists), lack of adequately trained auxiliaries and expanded services of nondentists. Each dentist must be a professional and a businessperson. The business of running a mini-hospital like business is becoming increasingly more complex and daunting.

I believe that dentistry has a bright future ahead and I believe with strong leadership at the ADA&C and Council, the Alberta dentist can overcome some of the current obstacles. I would be honored to represent the membership in promoting our interests and to helping to try to make dentistry better in Alberta.





### Dr. Colin Wiebe

Hi, I am Colin Wiebe, and I am an incoming council member for the Alberta Dental Association and College (ADA&C). I am Alberta born and Canadian trained for both my dentistry (U of A) and periodontal specialty (UBC). I have had experience as a hospital dentist (Royal University Hospital in Saskatoon), general dentistry (Williams Lake, BC), full-time professor (University of British Columbia), and my current practice of periodontics at South Calgary Periodontal Group since 1998.

I have worked stints as an instructor in Northern Alberta and Saskatchewan student clinics. have co-authored over 30 research papers in dental and medical journals, and served as an examiner for the Royal College of Dentists in Periodontics. I believe this gives me a wide variety of experiences to be able to relate to a wide range of practitioners.

I have been very fortunate to have been able to combine my interests of travel, dentistry, service and family. I have enjoyed being a dental volunteer in Ecuador, Nicaragua, China, Nepal and Haiti. Currently, I am providing volunteer dental services in Ethiopia and lecturing at the dental school in Rwanda through HOPEthiopia.

I previously enjoyed Ironman triathlons and ultramarathon trail running and continue to participate in Master's swimming and commuting year-round by bicycle. My wife Patty and I have two daughters who are both in university, one studying mathematics and the other criminology. With our daughters being off in university and a new periodontal associate joining South Calgary Periodontal Group, this gives me time to commit to organized dentistry.

My interest in a council position is to contribute to improving the profession of dentistry, particularly at this key time as we move forward with the separation of the College and Association. I have a particular interest in developing strategies to help resolve patient complaints, to earn the respect of the public for the profession, to reduce the load on dentists and College staff, and to demonstrate to the government that dentistry is well governed and should remain a self-governing profession. I recognize that self-governance is a privilege, not a right, and as other professions are apparently in jeopardy of losing that privilege, I want to clearly demonstrated that dentistry deserves to retains it.

My approach is to get involved with needs at the entry level. For example, last summer I volunteered administering COVID-19 vaccinations with the Okaki Native Medical Clinic and AHS at the request of the College. Another example is publishing a research article (Sterilization of Ceramic Sharpening Stones, J Can Dent Assoc 2017;83:h11) to investigate the alleged (i.e. unassessed) risks stated by the hygienist association who was banning chairside sharpening by hygienists. When faced with problems, we can choose to complain and endure, or we can take calm but focused action and help come up with solutions. This latter option is the approach I would take when tackling problems for our licensing body.

The dental profession in Alberta is self-regulated through the College. The Council is composed of equal numbers of regulated members elected by dentists and public members appointed by Alberta's Minister of Health.

PUBLIC MEMBERS' REPORT

Both the public and the regulated directors of the College work toward the goals of protecting the public, adhering to statutory requirements, developing and fostering appropriate professional standards, and providing quality care to Albertans. Public members engage fully on subcommittees, task forces, hearing tribunals, complaint review committees, appeal panels, and in decision making at regularly scheduled meetings of Council.

This was the last year of a combined College and Association. Starting in 2023 the College will operate as the College of Dental Surgeons of Alberta (CDSA) and the Association will continue as the Alberta Dental Association (ADA). Public members will continue to serve on the Council of the College of Dental Surgeons of Alberta.

In 2022 the CDSA successfully implemented a Professional Liability Insurance Plan for Alberta dentists. Protection of the public is ensured through this mandatory insurance plan.

Public members have effectively contributed to the achievement of the goals set out for the College under the *Health Professions Act* of Alberta. We are pleased to report that the work has been in the public interest and promoted the dental health of Albertans.

Ms. Nickolletta (Nikki) Sandie, Mr. Terrence Bayrock, Ms. Barbara Chipeur, Ms. Scarlett Crockatt, Ms. Shari LaPerle



# REGISTRATION & RENEWAL OF PRACTICE PERMITS

#### General Dentist

To apply for registration as a general dentist in the province of Alberta, an applicant must provide a copy of the National Dental Examining Board of Canada (NDEB) certificate.

### **Dental Specialist**

To apply for registration as a dental specialist in the province of Alberta, an applicant must provide a copy of the National Dental Examining Board of Canada-National Dental Specialty Examination (NDEB NDSE) certificate.

### General Dentist and Dental Specialist

To apply for registration as both a general dentist and dental specialist in the province of Alberta, an applicant must provide a copy of the National Dental Examining Board of Canada (NDEB) certificate and the National Dental Examining Board of Canada-National Dental Specialty Examination (NDEB NDSE) certificate.

### The Health Professions Act outlines nine nationally recognized dental specialties:

#### Dental Public Health

Dental public health specialists focus on improving the dental health of populations rather than individuals. They principally serve the community through research, health promotion, education, and group dental care programs.

#### Endodontics

Root canal therapy is the most common procedure performed by endodontists. But that's not all they do. Their specialty encompasses the diagnosis, prevention, and treatment of nerve and tissue diseases and injuries.

### Oral Medicine and Pathology

Dentists sometimes send specimens to specialists in the area of oral medicine and pathology. These specialists rely on clinical, radiographic, microscopic, and biochemical examinations to establish a diagnosis. They focus on the nature and nonsurgical management of diseases and disorders that affect oral structures.

### Oral and Maxillofacial Surgery

Oral and maxillofacial surgeons diagnose and surgically treat disorders, disease, injuries, and defects impacting the functional and esthetic aspects of the mouth, head, and neck. For example, they can extract wisdom teeth or broken teeth, treat temporomandibular joint disorders, or place dental implants and bone grafts.

### Oral and Maxillofacial Radiology

Oral and maxillofacial radiologists help diagnose and treat diseases and disorders of the craniofacial complex through the use of imaging technologies such as X-rays, CT scans, and MRIs.

### Orthodontics and Dentofacial Orthopedics

Orthodontists are trained to diagnose, prevent, and treat dental and facial irregularities, for both functional and esthetic reasons. Treatment options include the use of dental braces, retainers, spacers, and other devices.

### Pediatric Dentistry

Pediatric dentists provide preventive and therapeutic oral health diagnosis, care and consultative expertise for infants and children through adolescence, including those with special care needs. They receive training on handling the fears or anxieties of some children.

#### Periodontics

Periodontists focus on the diagnosis, prevention, and treatment of diseases and conditions that affect the bones and gums or that lead to loose or lost teeth. They help maintain the health, function, and esthetics of these structures and tissues. Periodontists also place dental implants.

### Prosthodontics

Prosthodontists are trained to diagnosis, restore and ensure oral function, comfort, appearance, and health by the restoration of the natural teeth or the replacement of missing teeth (e.g. bridges, dentures, implants).





# REGISTRATION STATISTICS

2022 membership year.

REGULATED **DENTISTS**: 2,938

General Dentists: 2,560 Dental Specialists: 329 Volunteer Registration: 4

NEW REGISTRANTS AS OF DECEMBER 31, 2022: 161

General Dentists: 154

General Dentists & Dental Specialist: 1

**NEW REGISTRATIONS INCLUDING APPLICATIONS: 164** 

Canadian Dentists: 23

International Dentists: 66

**REGISTRATION APPEALS: 0** 

**NEW GRADUATES: 75** 

**NEW SPECIALIST REGISTRATIONS: 23** 

Periodontology: 4 Prosthodontist: 1

**PROFESSIONAL CORPORATIONS: 2.803** 

**EDUCATION & RESEARCH: 59** 

Education & Research: 31

Graduate Students: 25

Education & Research Residents: 3

# CONTINUING COMPETENCE

Council and the Competence Committee of the College continues to review the program requirements for Continuing Education in terms of the accountability that is required under the Health Professions Act and the Dentists Profession Regulation. The Continuing Competence requirement is 60 program credits over a two-year period (e.g., January 1, 2022 to December 31, 2023). Continuing Competence requirements must be met prior to registration renewal at the end of the two-year term. If a member has not met their required program credits amount they may apply for a 60-day extension for the two-year term. If the member has not met the required program credits amount they are removed from the register and their right to practice dentistry in Alberta is withdrawn until they obtain the required credits.

In January of 2020, the College moved toward self-reporting for continuing education. Regulated members are responsible for submitting their continuing education hours. Dentists must submit verification by the provider as this is mandatory or no program credits are given. Credits are granted based on one hour of lecture time equals one credit time. It is the member's ethical responsibility to ensure that all reporting of continuing education is accurate. Failure to do so may constitute unprofessional conduct and may result in disciplinary action by the College.

In addition to existing Self-Directed Education, January 2022 saw the introduction of Regulatory Directed Education. Regulatory-directed learning is a process in which dentists take mandatory education courses implemented through motions by Council, Standards of Practice, or compliance with the Health Professions Act (e.g., Resuscitation, and Sexual Abuse and Sexual Misconduct).

Self-Directed Learning is a process in which dentists take the initiative, with or without the help of others, in accessing their learning needs, formulating learning goals, and identifying resources for learning, choosing and implementing appropriate learning strategies.

Sources where dentists may obtain courses, lectures, or equivalents that are recognized for continuing education credit, subject to limitations are outlined in the Continuing Competence/Education Program Requirements - Updated January 2022. To obtain program credits, a regulated member may undertake professional development activities such as attendance at a dental-related scientific or clinical course designed to enhance the professional development of dentists; attendance at a dentistry-related approved study club; receipt of fellowship by examination; completion of a graduate or postgraduate specialty program; publication of a research paper in a peer-refereed journal; self-directed study and other activities approved by Council, the Chief Executive Officer, or the Competence Committee.

# PRACTICE VISITS

Practice visits are part of the Health Professions Act and the Dentists Profession Regulation. The College conducts practice visits as part of the Continuing Competence Program as directed by Council. The visitations are designed to assist dentists in the guidance and implementation of the Standard of Practice: Infection Prevention and Control Standards and Risk Management for Dentistry, Standard of Practice: Minimal and Moderate Sedation Deep Sedation and General Anaesthesia in Non-Hospital Dental Practice, along with other SOPs, Guides, and the Code of Ethics.

2022 Continuing Competency and Practice Visits A total of 140 practice visits were completed from January to December 2022.

# DENTAL FACILITIES ACCREDICATION

All non-hospital surgical facilities and dental surgical facilities where deep sedation and/or general anaesthesia are used in dental treatment must be accredited by the College. This process involves application, completion of a questionnaire and an inspection to ensure compliance with the Standard of Practice: Minimal and Moderate Sedation Deep Sedation and General Anaesthesia in Non-Hospital Dental Practice. This process is separate from that required by the College of Physicians and Surgeons of Alberta (CPSA).

Accreditation is required by law in Alberta in the HPA, Dental Surgical Facility Accreditation Regulation, and the Health Facilities Act, and is carried out by the Dental Facilities Accreditation Committee. The College carries out the responsibilities of accreditation (as outlined in the HPA, Schedule 7) by:

- · establishing a Dental Facilities Accreditation Committee:
- · establishing the power and authority of the Dental Facilities Accreditation Committee to accredit facilities: and
- · allowing for decisions of the Dental Facilities Accreditation Committee to be appealed to Council.

Dental Surgical Facility Accreditation Regulation requires Council to approve and publish standards for dental surgical facilities, and requires regulated members working in accredited facilities to comply with those standards. Section 12(1) of Schedule 7 of the HPA requires that a dental surgical facility be accredited before a regulated dentist provides dental surgical services to the public within the facility.

# 2022 DENTAL FACILITIES ACCREDITATION STATISTICS

TOTAL ACCREDITED **FACILITIES:** 35

Total Cases (Procedures) Provided in Accredited Facilities in 2022: 43,687

DFAC **ACTIVITIES** 

> Extended Accreditation: 6 Accreditations Outstanding: 6 New Facilities Accredited: 1

ONE FACILITY LEFT THE PROGRAM IN 2022.



### COMPLAINTS RESOLUTION

The College is the dental regulatory authority for Alberta. The College administers all complaints about Alberta dentists within the authority granted by legislation from the Government of Alberta. The main legislation is the Health Professions Act.

The public interest is forefront in the complaints process. All regulatory matters balance protecting the public and ensuring fairness to a dentist.

The complaint process is designed to review a complaint and determine if:

- · resolution is appropriate and if so, the complainant and dentist can resolve the conflict directly:
- the Complaints Director can assist in resolving the conflict;
- further investigation is warranted;
- the complaint should be dismissed; or
- the complaint should be referred to a hearing.

If a complaint matter is referred to a hearing:

- a hearing is held where witnesses, including the complainant, can be present and may give evidence;
- hearings are open to the public and the date of a hearing is published on the its website;
- the purpose of the hearing process is to determine if the dentist has engaged in unprofessional conduct. The hearing process is focused on the conduct of the dentist and not financial compensation for the complainant;
- · each hearing tribunal includes two public members who are appointed by the Lieutenant Governor in Council. Government of Alberta and two dentists: and
- if a hearing tribunal determines that a dentist has engaged in unprofessional conduct, a summary of the decision is posted on the College's public website.

Dentists are encouraged to address treatment concerns with their patients early so that both have an understanding of what the issues are in order to inform future practice while addressing the needs of the particular patient. Where formal complaints are made to the College, dentists and complainants are encouraged by the Complaints Director, or with the assistance of the Complaints Director, to work together to resolve the complaint.

The College encourages resolution of advertising complaints. Through collaboration with the Professional Conduct Department, such efforts are often successful in reaching a resolution. Notification of a complaint encourages members to review their advertising to ensure compliance with the Health Professions Act and the Code of Ethics.

# 2022 COMPLAINTS STATISTICS

CATEGORY	TOTAL	TREATMENT COMPLAINTS	ADVERTISING COMPLAINTS	SEXUAL ASSAULT/ SEXUAL MISCONDUCT
Complaints carried over from previous years and open as of January 1, 2022	214	208	1	5
New complaints 2022	152	150	1	1
Complaints concluded 2022	159	153	1	5
Complaints carried over to January 1, 2023	207	205	1	1

### **BREAKDOWN OF COMPLAINTS**

Complaints referred to hearing Dentists referred	5	5 5	0	0
to hearing Hearings conducted	4	3	0	1
Hearings partly or completely closed to public	0	o	0	o
Hearing decision appeals	1	1	0	0
Requests for review by Complaint Review Committee	7	6	1	o
Reviews completed by Complaint Review Committee	5	4	ī	o
Members accessed for incapacity	0			

# PATIENT RELATIONS PROGRAM

The College receives and investigates all allegations of sexual abuse and sexual misconduct about members of the profession. The College has established a Patient Relations Program which includes measures for preventing and addressing sexual abuse and sexual misconduct towards patients by members of the profession. Specifically, the Patient Relations Program includes:

- mandatory educational training and guidelines for all members of the profession;
- mandatory educational training of all employees, Council, public and member tribunal members:
- the publication of a Standard of Practice: Sexual Abuse and Sexual Misconduct which all members of the profession must abide by;
- information on its public website regarding the process for making a complaint to College about sexual abuse or sexual misconduct by a member of the profession towards a patient:
- · a publicly accessible three module education resource on its website called Protecting Patients from Sexual Abuse and Misconduct which was developed by the Alberta Federation of Regulated Health Professionals; and
- information on its public website and contact information for specialized sexual abuse and sexual misconduct support services located throughout Alberta.

The College also publishes information on its website with respect to findings of unprofessional conduct by members of the profession based in whole or in part on sexual abuse or sexual misconduct in accordance with the Health Professions Act.

In addition to the above, the College continues to provide funding for treatment or counselling for eligible patients who have alleged sexual abuse or sexual misconduct by a member of the profession.

Processes have been put in place to ensure access to funding in accordance with the Funding for Treatment and Counselling Regulation, which came into effect on June 2, 2021. This regulation outlines requirements relating to the eligibility, administration, and cessation of funding.

In 2022, the College modified their processes to ensure even greater access to funding and transparency to resources for patients who have alleged sexual abuse or sexual misconduct by members of the profession.

### SEDATION

Dentists offering sedation must adhere to the requirements outlined in the Standard of Practice: Minimal and Moderate Sedation Deep Sedation and General Anaesthesia in Non-Hospital Dental Practice. This Standard of Practice applies to all dentists who are administering sedation in a dental practice, Non-Hospital Surgical Facility or Dental Surgical Facility.

Deep Sedation and General Angesthesia in Non-Hospital Dental Practice replaces the former Standard of Practice: Dental Facilities Accreditation and is the standard of practice for administration of sedation with respect to dental surgical services in Alberta in accordance with Section 4 of the Dental Surgical Facility Accreditation Regulation.

Sedation is a pharmacologically-induced, minimally to moderately depressed level of consciousness that retains the patient's ability to independently and continually maintain an airway and respond to physical stimuli and verbal command. Specifically, the Minimal and Moderate Sedation section of the Standards of Practice applies to:

- dental practices where sedation is administered:
- · dentists who administer sedation:
- · dentists who administer Modalities 1 through 8 in a dental practice that is within or part of a nonhospital dental practice; and
- clinical personnel who provide surgical or sedation support to dentists administering sedation.

Minimal and Moderate Sedation consists of eight modalities of sedation and is divided into eight sections representing the eight modalities. The modality determines the physical equipment and personnel requirements of the dental setting, the training requirements of the dentist administering the sedation, and the clinical personnel assisting the dentist. The requirements for each modality, when used separately or in combination by a dentist in a non-hospital dental practice, must be met.

### SEDATION

#### The modalities are:

Modality 1: Nitrous Oxide Sedation for patients 12 years of age and older

Modality 2: Nitrous Oxide Sedation for patients under 12 years of age

Modality 3: Oral Sedation for patients 12 years of age and older

Modality 4: Oral Sedation for patients under 12 years of age

Modality 5: Oral Sedation with Nitrous Oxide Sedation for patients 12 years of age and older

Modality 6: Oral Sedation with Nitrous Oxide Sedation for patients under 12 years of age

Modality 7: Parenteral (intravenous only) Sedation for patients 12 years of age and older

- Single Drug IV (7S [Benzodiazepine])
- Two Drug IV (7F [Benzodiazepine with Fentanyl])

Modality 8: Parenteral (intravenous only) Sedation for patients under 12 years of age

- Single Drug IV (7S [Benzodiazepine])
- Two Drug IV (7F [Benzodiazepine with Fentanyl])

### DGA Deep Sedation/General Anaesthesia

- · Patients 12 years of age and older
- · Patients under 12 years of age

The College issues a permit based on the level of competency achieved for all dentists providing Modality 5 through Modality 8 described by this Standard. This permit is specific to the dentist and expires December 31 of the calendar year.

The College issues a permit to a dentist who has successfully completed an educational program in the administration of deep sedation and/or general anaesthesia that has been authorized by Council. This permit is specific to the dentist and the accredited dental surgical facility and expires December 31 of the calendar year.

Where more than one modality of sedation is administered (including pre-sedation) at a single appointment, a dentist may only assess a fee for the highest modality administered at that appointment.

An Unforeseen Event must be reported to the Chief Executive Officer of the College. An Unforeseen Event is if a patient's response to sedation results in:

- death within the dental office or within 10 days of the sedation procedure;
- · depression beyond the level of sedation intended;
- entry of the patient into levels of deep sedation;
- · general anaesthesia; or
- an unanticipated event results in the need for transfer of the care of the patient to another provider, a dental surgical facility, a non-hospital surgical facility or hospital.

# 2021 SEDATION STATISTICS

Dentists are required to register annually specifying modality of sedation administered.

REGISTRATION	#
Modality 1: Nitrous Oxide Sedation for patients 12 years of age and older	130
Modality 2: Nitrous Oxide Sedation for patients under 12 years of age	1150
Modality 3: Oral Sedation for patients 12 years of age and older	1305
Modality 4: Oral Sedation for patients under 12 years of age	40
Modality 5: Oral Sedation with Nitrous Oxide Sedation for patients 12 years of age and older	625
Modality 6: Oral Sedation with Nitrous Oxide Sedation for patients under 12 years of age	34
Modality 7: Parenteral (intravenous only) Sedation for patients 12 years of age and older	
Single Drug IV (7S – [Benzodiazepine])	108
Two Drug IV (7F – [Benzodiazepine with Fentanyl])	170
Modality 8: Parenteral (intravenous only) Sedation for patients under12 years of age	
Single Drug IV (8S – [Benzodiazepine])	13
Two Drug IV (8F – [Benzodiazepine with Fentanyl])	22
DGA Deep Sedation/General Anaesthesia	
Patients 12 years of age and older	32
Patients under 12 years of age	20

### **Permit Modality & Number Issued**

5,6,7s,7f	1
5,6,7f,8f	1
5,7s,7f,8s,8f*	1
5,7f*	2
7f	2
7f,8f*	2
5,6,7f*	3
5,6,7f	4
5,7s,7f*	4
5,6,7f,8f*	6
7s	8
7s, 7f	8
5,6	10
5,6,7s,8s,8f*	12
7f	13
5,7s	22
5,7s,7f	52
5,7f	62
5	448
DGA 12 years of age and older	12
DGA under 12 years of age	0
DGA 12 years of age older and under	r 20

<sup>\*</sup>combined number for the same dentist providing different modalities (Minimal and Moderate Sedation Deep Sedation and General Anaesthesia)

# FACIAL ESTHETIC THERAPIES & ADJUNCTIVE PROCEDURES

The Standard of Practice: Facial Esthetic Therapies and Adjunctive Procedures applies to dentists who are administering Schedule 1 drugs such as neuromodulators (e.g. Botulinum Toxin Type A), dermal fillers, other agents (injected and/or topical), and adjunctive nonsurgical and/or surgical therapies used to provide comprehensive therapeutic and esthetic oral and maxillofacial treatment for the restoration of a patient's appearance in form and function, or to enhance their appearance, or both.

The College issues a certificate to each dentist indicating the year of member authorization and effective date, which is valid indefinitely. Certificates are based on the level of competency achieved for all dentists providing the levels of treatment described in the Standard. The College maintains a list of approved programs at each level. Oral and Maxillofacial Surgeons may provide any procedures, if their training encompassed said therapeutic procedures. Dentists may not provide any of these procedures without a certificate.

Level 1: Applied Anatomy Review and Introduction to Neuromodulators (Level 1 does not authorize the dentist to provide any patient treatment)

Level 2: Basic Neuromodulators - Upper Face and Bruxism Treatment

Level 3: Advanced Neuromodulators - Mid-Face and Lower Face/Neck Regions and Myofascial Pain and Dysfunction Treatment

#### Level 4:

- 4a Dermal Fillers Basic Facial Dermal Fillers
- 4b Dermal Fillers Advanced Facial Dermal Fillers
- 4N Neuromodulators for Deep Muscles of Mastication

Level 5: Advanced Non-Surgical Esthetic Procedures

# OF DENITICES

Level 6: Advanced Surgical Esthetic Procedures

### DENTISTS REGISTERED AND WHO HOLD CERTIFICATES TO ADMINISTER FACIAL ESTHETIC THERAPIES AND ADJUNCTIVE PROCEDURES

LEVEL OF CERTIFICATION	# OF	DENTISTS	
Level 1: Applied Anatomy Review and Introduction to Neuromodulators (Level 1 does not authorize the dentist to provide any patient treatment)		791	
Level 2: Basic Neuromodulators: Upper Face and Bruxism Treatment	0	728	
Level 3: Advanced Neuromodulators: Mid-Face and Lower Face/Neck Regions and Myofascial Pain and Dysfunction Treatment		205	
Level 4: 4a – Dermal Fillers: Basic Facial Dermal Fillers	0	69	
Level 4: 4b – Dermal Fillers: Advanced Facial Dermal Fillers:		35	
Level 4: 4N – Neuromodulators for Deep Muscles of Mastication:	0	21	
Level 5: Advanced Non-Surgical Esthetic Procedures		19	
Level 6: Advanced Surgical Esthetic Procedures		18	

# RADIATION HEALTH & SAFETY

Since July 1997, the College has had the honor of providing registration services to owners of diagnostic Xray equipment and class 3b and 4 lasers installed or operated owned by Alberta Health Services.

Health and Safety Act (OHS) Act and OHS Codes to incorporate Alberta's radiation protection laws. On December 1, 2021 the new OHS Act and OHS Codes were proclaimed and the Radiation Protection Act and Regulation were repealed. The College continues as an Authorized Radiation Health Registration Agency, designated with certain roles and responsibilities under the Occupational Health and Safety Act.

On June 30, 2022 Health Canada released the revision of Radiation Protection in Dentistry - Safety Code 30. This code provides consistency across Canada by outlining the owner responsibilities, facility requirements and goals of a Quality Assurance

The College maintains the database of all registered radiation equipment within dental be displayed in all facilities. The College monitors the existence of a Quality Control

Program and the mandatory use of personal dosimetry services in all facilities.

### 2022 RADIATION HEALTH & SAFETY STATISTICS

Active facilities certified: 1577 1329 Active owners registered:

Pieces of active equipment certified

excluding lasers: 7707

Class 3b or Class 4 lasers:

Suspended or cancelled registrations/certificates:



# PROFESSIONAL LIABILITY INSURANCE PROGRAM

The Professional Liability Insurance Program (PLIP) was created by an act of Council and took effect for all members on January 1st, 2022. The Health Professions Act specifically gives Council the authority to govern "the minimum coverage and type of insurance required to be carried."

Including the base coverage with regulated members' practice permit guarantees that every registered member has the minimum amount of coverage required by Council to protect the public in the event of injury resulting from the dental negligence or wrongdoing of its members.

The program is also structured to indemnify current, former, and retired members as well as members' professional corporations, volunteers, and dental students.

The PLIP is administered by Lloyd Sadd Insurance Brokers; an Alberta commercial insurance broker, and Victor Canada; an expert in professional liability insurance in Canada since 1964. The program's risk is diversified amongst eight different insurance companies, specifically: Arch, Aviva, Berkley, Beazley, Chubb, Everest, Temple, XL, and Lloyds of London.

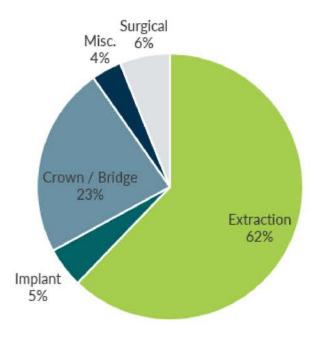
In addition to the \$2 million in base coverage that is included with a members' practice permit, an additional \$23 million in excess coverage is available through Lloyd Sadd Insurance Brokers, or a broker of a dentists choice.

Regulated members reported 143 incidents to Lloyd Sadd in the first year of the PLIP, which averages out to just over 12 per month. The College expects that approximately 90% of these will be closed with no claim paid out. The type of incidents and claims reported are as expected, with approximately 60% of incidents involving extractions with restorative dentistry making up the majority of the rest.

Our insurance Manager, Victor Canada closed 18 claims in the first 12 months of the program with 125 claims and incidents open at year end.

The College is provided an anonymized, generic update of incidents and claims monthly. The College is not privy to any specific information and are only provided with the date the incident was reported and/or closed, the type of incident; whether a claim was paid; any expenses incurred; and whether the insurance manager, Victor Canada, has placed any reserves against future claims on the paid premiums.

### Claims/Incidents by Type



# COMMUNITY ASSISTANCE FUND

The Community Assistance Fund is administered by the Edmonton Community Foundation. The intent of the Fund is to enhance the quality of life for those living in Alberta by supporting programs that assist people who face barriers in accessing oral health services. The Community Foundation has worked with funding partners in other centers to identify agencies which are able to use the funds within the fund's intent. Grants are allocated from annual earnings only. This fund will continue into perpetuity and will be transferred to the newly incorporated Alberta Dental Association January 1, 2023.

The following is the fund update for year-end 2022:

Balance, beginning of 2022	\$294,591.82
Donations received	\$400.00
Net investment income	(\$9,087.57)
Grants	(\$10,260.00)
Operating expenses	(\$2,152.97)
Balance, end of 2022	\$273,491.28
Available to Grant in 2023	\$22,252.00

Summary Financial Statements of

# ALBERTA DENTAL ASSOCIATION & COLLEGE

(OPERATING AS COLLEGE OF DENTAL SURGEONS OF ALBERTA)

Year ended December 31, 2022



KPMG LLP 2200, 10175 - 101 Street Edmonton, AB T5J 0H3 Telephone (780) 429-7300 Fax (780) 429-7379 www.kpmg.ca

### INDEPENDENT AUDITORS' REPORT

To the Members of Alberta Dental Association & College

### Opinion

The summary financial statements of Alberta Dental Association & College (the Entity), which comprise:

- the summary statement of financial position as at December 31, 2022
- the summary statement of operations for the year then ended
- · the summary statement of changes in fund balances for the year then ended
- and related note

are derived from the audited financial statements of Alberta Dental Association & College as at and for the year ended December 31, 2022 (the audited financial statements).

In our opinion, the accompanying summary financial statements are consistent, in all material respects, with the audited financial statements, in accordance with the criteria disclosed in Note 1 in the summary financial statements.

### Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditors' report thereon, therefore, is not a substitute for reading the Entity's audited financial statements and the auditors' report thereon.

The summary financial statements and the audited financial statements do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial statements.



### Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria disclosed in Note 1 in the summary financial statements.

### Auditors' Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards 810, Engagements to Report on Summary Financial Statements.

Chartered Professional Accountants

Edmonton, Canada May 24, 2023

### **ALBERTA DENTAL ASSOCIATION & COLLEGE**

(OPERATING AS COLLEGE OF DENTAL SURGEONS OF ALBERTA)

Summary Statement of Financial Position

December 31, 2022, with comparative information for 2021

<u>9</u>	2022	2021
Assets		
Current assets:		
Cash and cash equivalents	\$ 4,047,245	\$ 24,277,058
Accounts receivable	310,233	475,638
Investments	22,362,649	202,486
Prepaid expenses	481,575	176,626
	27,201,702	25,131,808
University of Alberta - student loan fund	30,927	30,927
Capital assets	7,822,627	7,935,574
		11555155
	\$ 35,055,256	\$ 33,098,309
Liabilities and Fund Balances		
	\$ 4,730,029 10,539,407	\$ 10,255,585
Current liabilities: Accounts payable and accrued liabilities Deferred membership and other fees	\$	\$ 4,635,636 10,255,585 4,055 14,895,276
Current liabilities: Accounts payable and accrued liabilities Deferred membership and other fees Current portion of capital lease obligation	\$ 10,539,407	\$ 10,255,585 4,055
Current liabilities: Accounts payable and accrued liabilities Deferred membership and other fees Current portion of capital lease obligation  Fund balances:	\$ 10,539,407	\$ 10,255,585 4,055 14,895,276
Current liabilities: Accounts payable and accrued liabilities Deferred membership and other fees Current portion of capital lease obligation	\$ 10,539,407	\$ 10,255,585 4,055
Current liabilities:     Accounts payable and accrued liabilities     Deferred membership and other fees     Current portion of capital lease obligation  Fund balances:     Invested in capital assets     Internally restricted     Externally restricted	\$ 10,539,407 15,269,436 7,822,627	\$ 10,255,585 4,055 14,895,276 7,931,519 2,045,485 98,750
Current liabilities:     Accounts payable and accrued liabilities     Deferred membership and other fees     Current portion of capital lease obligation  Fund balances:     Invested in capital assets     Internally restricted	\$ 10,539,407 15,269,436 7,822,627 2,486,830	\$ 10,255,585 4,055 14,895,276 7,931,519 2,045,485 98,750
Current liabilities:     Accounts payable and accrued liabilities     Deferred membership and other fees     Current portion of capital lease obligation  Fund balances:     Invested in capital assets     Internally restricted     Externally restricted	\$ 10,539,407 15,269,436 7,822,627 2,486,830 154,231	\$ 10,255,585 4,055 14,895,276 7,931,519 2,045,485

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OCC	accompany	VIIIU HOU	- LU	Summary	IIIIaiiciai	Statements.

On behalf of the Board:										

### **ALBERTA DENTAL ASSOCIATION & COLLEGE**

(OPERATING AS COLLEGE OF DENTAL SURGEONS OF ALBERTA)

Summary Statement of Operations

Year ended December 31, 2022, with comparative information for 2021

	2022	2021
Revenue:		
Membership fees	\$ 10,288,800	\$ 9,893,950
Professional corporation fees	394,937	384,100
Registrations	296,200	222,700
Other income	686,117	800,459
Documents	89,178	80,085
Investment income	285,086	55,804
	12,040,318	11,437,098
Expenditures:		
Council and Committee	829,074	710,630
Events, Contributions and Awards	1,617,563	1,284,921
General Administration	6,427,226	5,557,534
Marketing and Communications	128,652	470,562
Professional Conduct	1,296,986	1,314,000
Programs and Services	157,030	178,225
	10,457,531	9,515,872
Excess of revenues over expenditures	\$ 1,582,787	\$ 1,921,226

See accompanying note to summary financial statements.

### **ALBERTA DENTAL ASSOCIATION & COLLEGE**

(OPERATING AS COLLEGE OF DENTAL SURGEONS OF ALBERTA)

Summary Statement of Changes in Fund Balances

Year ended December 31, 2022, with comparative information for 2021

	ca	Invested in apital assets	Internally restricted	Externally restricted	Unrestricted	2022	2021
Balance, beginning of year	\$	7,931,519	\$ 2,045,485	\$ 98,750	\$ 8,127,279	\$ 18,203,033	\$ 16,281,807
Excess of revenue over expenditures		(490,519)	(524,724)	55,481	2,542,549	1,582,787	1,921,226
Purchase of capital assets		381,627	n	n	(381,627)	3.77	:7
Transfers		-	966,069	-	(966,069)	) <del>-</del> -	:=
Balance, end of year	\$	7,822,627	\$ 2,486,830	\$ 154,231	\$ 9,322,132	\$ 19,785,820	\$ 18,203,033

See accompanying note to summary financial statements.

### ALBERTA DENTAL ASSOCIATION & COLLEGE

(OPERATING AS COLLEGE OF DENTAL SURGEONS OF ALBERTA)

Note to the Summary Financial Statements

Year ended December 31, 2022

### 1. Basis of presentation:

Management is responsible for the preparation of the summary financial statements. The summary financial statements are comprised of the summary statement of financial position as at December 31, 2022 and the summary statements of operations and changes in fund balances for the year then ended, and do not include any other schedules or a summary of significant accounting policies. The summary statement of financial position and summary statements of operations and changes in fund balances are presented with the same amounts as the audited financial statements.

