

*Protecting  
the Public  
and Guiding  
the Dental  
Profession*

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**RCDSO**

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*New Standards of Practice Approved*

## Level II Dental Assistants Now a Reality

*At the May 1999 meeting of the RCDSO Council, a document entitled "Standards of Practice of the Profession Relating to the Performance of Intra-Oral Procedures Other than Controlled Acts by Third Parties" was approved.*

This innovative way of dealing with the issue of "assigning of intra-oral procedures" now makes it possible for dentists to assign a wide range of procedures to appropriately qualified persons. Dental assistants with Level II qualifications now can perform most of the intra-oral procedures for which they have been trained.

This method of dealing with the "assigning" issue was made possible by the passage of the *Red Tape Reduction Act* by government earlier this year. This legislation



allows Colleges to deal with matters that formerly required the authority of a "regulation" by other means such as through College 'by-laws' and 'standards of practice'.

*continued on page 13 ...*

# Good News From the College

*I have some good news! I will begin with the best news first. Our Council has approved another reduction in the fee for your annual certificate (licence fee).*

This is the fifth year in succession that Council has reduced this fee. The annual fee for all members holding general, academic, specialty or education certificates of registration will be reduced from the current \$1075.00 to \$975.00 commencing for the year 2000.

## Quality Assurance Program

At our last Council meeting, Dr. Randy Lang and Dr. Eric Luks pointed out that there were very few safeguards to protect our members from the consequences of an unfavourable office assessment.

I am pleased to report that Council has now agreed to let the Quality Assurance Committee develop additional safeguards and appeal mechanisms to insure the fairness of the Quality Assurance Program.

I am confident that Dr. Lang and Dr. Luks and the Quality Assurance Committee, with the assistance of Dr. Don McFarlane, will produce a quality assurance regulation that will:

- help protect the public; and
- help guide the profession.

## Renewal Certificates

I am also pleased to report that we have received many positive responses regarding the "Renewal Certificate" which you have recently received. It is an attractive certificate and I hope you will proudly display it in your office.

## Unregistered Dentists

The College continues to investigate and prosecute unlicensed or unregistered dentists who are practising dentistry illegally. It is a real

problem because people are reluctant to come forward and help prosecute these illegal practitioners who often inflict a great deal of harm.

## Discipline Matters

Beginning with this issue of *Dispatch*, the part dealing with discipline matters will be of a detachable nature. Mr. Victor Braney, a public member of Council and Dr. Minna Stein both suggested that our publication could be more "user-friendly" and left in our waiting rooms if the discipline matters could be "pulled out".

## Alternate Dispute Resolution

At our retreat in January, members addressed a number of concerns. One of these concerns was the lack of formalized mediation process for complaints at the RCDSO. With the dedicated efforts of Dr. Richard Filion, Council member for District 3; Mr. Irwin Fefergrad, Director of Hearings and Investigations; and Dr. Minna Stein, we now have a "pilot project" for alternate dispute resolution (ADR) in place. Our goal is to report on the results of the "pilot project" to Council its March, 2000 meeting. An article detailing this new initiative can be found in this issue of *Dispatch*.

## Standard Forms

The College is also working to develop a standard Medical History Form and a series of Dental Consent Forms. Once finalized, the forms will be available for members to use if they wish.



Thomas McKean, DDS - President

President's Message

**Co-insurance**

The Executive Committee has established a "fact finding" study with respect to co-insurance. The chair is Dr. Malcolm Yasny. Please forward your thoughts, opinions and advice on this matter to his attention.

**Appointments**

On behalf of Council, I take great pleasure in announcing that Mr. Irwin Fefergrad is the new Deputy Registrar of the RCDSO. Mr. Fefergrad's appointment was as a result of a unanimous motion that was approved at the May 1999 Council Meeting. I am also please to report that at the same meeting, Mr. Paul Harrison,

CMA, Director, Finance and Administration, was also appointed to serve as Treasurer of the College.

In closing, I look forward to meeting and speaking with all of you at your local society meetings.

If you ever have any questions or concerns with respect to the RCDSO, please feel free to call me anytime.

Sincerely,



Dr. T. W. McKean

*Change-Over Dinner*

# Outgoing Council and Committee Members Honoured



From left to right: Dr. Martin Shelley, Dr. Richard Speers, Ms. Carol Smith, Dr. Victor Kreuger, Dr. Katharine Zettle, Dr. Redvers Warren, Dr. Dianne Carruthers, Dr. Marcel Paiement, Dr. Lynn Tomkins, Dr. Roch St. Aubin, Mr. Jerome Zwicker, Dr. Dorothy McComb and Dr. Peter Markle.  
Not shown: Dr. Mac Balfour, Dr. David Banting, Dr. James Fawcett, Dr. B. Carol Janik, Dr. Allan Katchky, Dr. Karen Kaukinen, Dr. Wilhelm Oudshoorn and Dr. Brian Waters.

*Outgoing Council and Committee members were recently honoured for their hard work and dedication during the 1997 – 1999 term. President Dr. Tom McKean and Registrar Dr. Minna Stein presented each with a beautifully framed service award.*

# Registrar's Report

## Professional Practice

The Registration area of the College continues to be busy. In November of last year, renewal notices were sent out to 6,951 members of the College. Most members paid their annual renewal fees on time. In January, however, letters went to approximately 400 members whose fees had not been paid, or whose fees arrived after the December 15<sup>th</sup> deadline. Ultimately, in March of this year, 21 members had their Certificates of Registration suspended due to non-payment of fees. Furthermore, five individuals had their Certificates of Registration automatically revoked, since their suspension for non-payment of annual fees continued for two years.

From November 1998 to May 7, 1999, the College received 76 applications for general and specialty certificates of registration. Ethics and jurisprudence course and evaluations were conducted in January and April, and a one-day course was held for graduating students at the Faculty of Dentistry at the University of Toronto in May. In total, 209 individuals attended these programs. Very soon, we can welcome these new members to the College.

The process to renew the 465 facilities that administer i.v. sedation, deep sedation or general anaesthesia continues. Eighteen initial inspections and 49 re-inspections have been carried out since January of this year. Diane Lewis, a registered nurse who does this on our behalf, conducted these visits.

## Professional Liability Program (PLP)

Risk management is an area that continues to be stressed by the Professional Liability Program of the College. Ms. Cecelia Turner, Manager of the Professional Liability Program and Dental Claims Advisor, Dr. Judith Purvs, continue to address dental groups on the topic of risk management.



Minna H. Stein, DDS, MEd

## College Web Site

Our web site has been on-line since mid-April. I am very pleased to report that we have already had 18,500 hits, or visits, to the site. If you have any comments about the College site, please contact Cathy Legedza, Manager, Communications and External Relations at (416) 961-6555, toll-free at 1-800-565-4591, or via e-mail at [clegedza@rcdso.org](mailto:clegedza@rcdso.org).

## 6 Crescent Road

Our Council has engaged an engineering company to inspect the building we own at 6 Crescent Road (at Rosedale Subway Station and Yonge Street). We will be spending considerable money to repair a leaky roof, a leaky basement and to upgrade the fire prevention system.

## Date of Next Council Meeting

The next regular meeting of RCDSO Council will take place on November 11 and 12, 1999, in Toronto at the Inn on the Park (Leaside Room), 1100 Eglinton Avenue East.

Council meetings are open to the public with the exception of *in camera* sessions. Members of the profession and the public are invited to attend. Seating is limited and those wishing to attend are asked to notify the College at (416) 961-6555, or 1-800-565-4591 from outside the Toronto calling area.

# 338<sup>th</sup> Council Meeting

*Council met on May 13 and 14, 1999 at the Inn on the Park Conference Centre in Toronto. The following are highlights of the meeting at which Council:*

- Adopted the document respecting a “code of conduct” for Council members;
- Approved the “Standards of Practice of the Profession Relating to the Performance of Intra-Oral Procedures, other than Controlled Acts, by Third Parties”;
- Agreed that the proposed Quality Assurance Regulation be amended and reconsidered at the November 1999 meeting;
- Authorized an additional tribute in memory of the former Registrar, the late Dr. Kenneth Pownall;
- Expanded the “invited guest” list for Council meetings to include the President (or President’s designate) of the nine Ontario specialist societies/associations and the Ontario Association of Dental Specialists;
- Approved the RCDSO Audited Financial Statements for the year ended December 31, 1998 as presented;
- Approved the RCDSO Pension Plan Audited Statements for the year ended December 31, 1998 as presented;
- Approved the appointment of Deloitte & Touche Chartered Accountants to conduct the RCDSO Audit, the RCDSO Pension Plan Audit and the preparation of the Statement of Building Operating Expenses and Property Taxes for the year 1999;
- Appointed Paul Harrison, CMA, Director, Finance and Administration, to the position of Treasurer of the College in addition to his regular duties;
- Directed the College to implement an Alternate Dispute Resolution mechanism for the Complaints process, and to report on the program at the first meeting of Council in the year 2000;
- Approved the annual membership fee for a general, academic or specialty certificate to be \$975.00 commencing in the year 2000;
- Changed the name of the Standing Committee from Finance and Property Committee to Finance, Property and Administration Committee to more accurately reflect the terms of reference and mandate of the committee;
- Amended Section 9 of By-Law No. 1 to add the words “assessor/reviewer” after the word “inspector” in the first sentence;
- Amended Section 4 of by-law No. 1 to allow for Council and Committee meetings to be held by teleconference;
- Re-established the position of Deputy Registrar; and
- Increased the authority of the Professional Liability Program Manager to settle files up to \$35,000 per claim, including party and party costs.

# Reporting Suspicions of Child Abuse

*Ontario's Child and Family Services Act (CFSA) states that dentists have a duty to report suspected cases of child abuse.*

Ontario's *Child and Family Services Act* (CFSA) was proclaimed in November 1985. The Act provides for a broad range of services for families and children, including those who are victims or suspected victims of child abuse or neglect. The main objective of the Act is to promote the best interests, protection and the well-being of children.

The Act states that health care professionals, including dentists, have a duty to report suspected cases of child abuse. The Act is very specific about what constitutes "abuse" for the purpose of professional reporting. A child suffers "abuse" in any of the following circumstances:

- The child has suffered physical harm either inflicted by the person having charge of the child or caused by that person's failure to adequately:
  - care and provide for the child, or
  - supervise and protect the child;
- The child has been sexually molested or sexually exploited by the person having charge of the child, or by another person where the person having charge of the child:
  - knows or should know of the possibility of sexual molestation or sexual exploitation, and
  - fails to protect the child;
- The child requires medical treatment to cure, prevent or alleviate physical harm or suffering, and the child's parent or the person having charge of the child:
  - does not provide the treatment, or
  - refuses to provide the treatment, or
  - is unavailable to consent to the treatment, or
  - is unable to consent to the treatment;
- The child has suffered emotional harm, demonstrated by:
  - severe anxiety, or
  - severe depression, or
  - severe withdrawal, or
  - severe self-destructive or aggressive behaviour, and the child's parent or the person having charge of the child:
    - does not provide services or treatment to remedy or alleviate the harm,
    - refuses to provide such services or treatment,
    - is unavailable to consent to such services or treatment,



## Reporting Suspicions of Child Abuse

- is unable to consent to such services or treatment:
- The child suffers from a mental, emotional or developmental condition that, if not remedied, could seriously impair the child's development, and the child's parent or the person having charge of the child:
  - does not provide treatment to remedy or alleviate the condition,
  - refuses to do so,
  - is unavailable to consent to treatment, or
  - is unable to consent to treatment.

### Professional Confidentiality

The professional's duty to report suspected cases of "abuse" overrides the provisions of any other provincial statute, specifically, those provisions that would otherwise prohibit disclosure by the professional or official. That is, the professional must report abuse even when the information is supposed to be confidential or privileged. (The only exception for "privileged" information is in the relationship between a solicitor and a client.)

### Protection from Liability

Should civil action be brought against a person who made a report, that person will be protected unless he or she acted maliciously or without reasonable grounds for his or her belief or suspicion.

### Penalty for Failure to Report

Failure to report is an offence under the *Child and Family Services Act*. Any professional failing to report suspicions of child abuse is liable on conviction of a fine of up to \$1,000.

### PANDA Program

Included with this mailing of *Dispatch* is a brochure about the PANDA (Preventing Abuse and Neglect through Dental Awareness) Program. This awareness program is international in scope, starting in the United States in the early 1990s. It has since expanded to Israel, Romania and South Africa. The Hamilton Academy of Dentistry introduced the PANDA program into Canada in October 1996.

The program is intended specifically for dentists and members of the dental office staff. It provides education on how to report suspected cases of child abuse and neglect, and then to promote awareness of child abuse prevention. Numerous studies have confirmed that approximately 65 per cent of child abuse cases involve injuries to the head, neck and face – areas easily observed by an oral health care provider.

For more information about the PANDA Program, please contact Dr. Frank Stechey at the Ontario Society of Forensic Odontology, 151 York Boulevard, Suite 202, Hamilton, Ontario, L8R 3M2.

# How can I help you?

*This new feature in Dispatch is designed to provide advice to members on commonly-asked questions that have been directed to Dr. Michael Gardner, the College's Professional Practice Advisor.*

## **Reporting Insurance Fraud Committed by Patients**

The College receives numerous calls from dentists asking how to deal with a patient who has committed insurance fraud. For example, what would you do in the following scenario?

- *A mature woman presents to your dental office as a new patient. She completes the usual questionnaires, which require her name, address and dental insurance information. Treatment proceeds in the customary fashion, and includes the insertion of a post/core and crown. Your office submits claim forms for benefits, and the dental insurance company pays them.*
- *Six months later, the patient returns for a recall appointment. This time, the patient completes forms using a different name.*
- *When questioned regarding this discrepancy, the patient admits that the information she provided as a new patient was incorrect, and that she misled your office by providing her daughter's name and dental insurance information in order to receive benefits to which she was not entitled. She further explains that her daughter's coverage was recently cancelled and, therefore, she has no reason to continue the charade.*

## **What would you do?**

Do you have an ethical responsibility to inform the dental insurance company regarding the improper claim?

What about the patient's right to confidentiality?

Does one take precedence over the other?

Should you dismiss the patient?

## **Professional Practice Advice**

You have an obligation to ensure that the information you provide to the dental insurance company is (to the best of your knowledge) accurate. If you later determine that the information provided was false, misleading or improper, you should make attempts to correct it.

In the above scenario, you should advise the patient that you are obligated to inform the dental insurance company of the inaccuracy of the claims you submitted on her behalf. You should then write the dental insurance company, advising it that when you submitted the claim forms you believed them to be accurate, but that since then you have learned the person you treated is not the same person whose name appears on the claim forms. Being mindful of patient confidentiality, you should limit your letter to those facts.

The dental insurance company, and possibly the police, may decide to conduct an investigation. If they seek further assistance from you, you must ensure that you have adequate authority to release the information. In the absence of a Court order, you would require either the consent of your patient (the consent of the person whom you believed to be your patient is not sufficient) or a search warrant to release the patient's records.



Dr. Michael Gardner, Professional Practice Advisor

**Dr. Gardner can be reached at the College headquarters in Toronto at (416) 961-6555 or 1-800-565-4591.**



With regard to the patient, you should strongly consider dismissal. The patient knowingly provided you with false and misleading information, which resulted in you submitting claim forms that were fraudulent. The dentist/patient relationship now suffers from a complete lack of trust. Furthermore, the patient has involved you in this matter, and now the dental insurance company (and potentially the police) may wonder whether you knew or

ought to have known of the fraud. There is no legal requirement for you to terminate the relationship, but termination would be consistent with the statement that you would never knowingly permit a patient to involve you in such a reprehensible activity. Should you decide that you wish to dismiss the patient, the December 1997 issue of *Dispatch* outlines the proper protocol for doing so.

*We were there*

## ODA Spring Meeting

Once again, the College participated in the ODA's annual spring meeting at the Metro Toronto Convention Centre from April 29<sup>th</sup> to May 1<sup>st</sup>. In addition to staffing a booth, the College offered a seminar in the basics of recordkeeping.

Dr. Minna Stein enlisted a number of her colleagues (Dr. Don McFarlane – Director, Professional Practice; Dr. Patricia Abbey – Manager, Complaints; Dr. Fred Eckhaus –

Manager, Investigations; Ms. Cecelia Turner – Manager, Professional Liability Program and Dr. Michael Gardner – Professional Practice Advisor) to assist with the presentation.

It was “standing room only” at the seminar, which offered an excellent opportunity for members of the dental profession to meet some of the College staff and pick up some valuable pointers on recordkeeping.



Dr. Don McFarlane, Director, Professional Practice (center) and Dr. Michael Gardner, Professional Practice Advisor (left) answer questions at the RCDSO booth during the ODA Spring Meeting.

# Does Your Malpractice Insurance Policy Cover Treatment Rendered Outside Ontario?

*From time to time, inquiries are received from members who intend to take a “hands-on” course outside Ontario. Usually, the course requires the member participant to render dental treatment to an individual.*

Section 3(a) of the malpractice insurance policy stipulates the following coverage and territory:

3.(a) ***This insurance applies only to acts or omissions committed by an Insured in the Province of Ontario***, except that where an Insured is a member of the Canadian Armed Forces, or a Civilian Employee of the Department of National Defence, or a Non-public Fund Employee of a Base or Unit of the Canadian Armed Forces, this insurance also applies to acts or omissions wherever committed, which arise out of the usual or ordinary duties of the insured as a member of the Canadian Armed Forces, or a Civilian Employee of the Department of National Defence, or a Non-public Fund Employee of a Base or Unit of the Canadian Armed Forces, ...

**Treatment rendered outside Ontario** for any reason whatsoever by a member who does not fit within the “except” portion of item 3, **is not covered by the malpractice insurance policy.**

If you need malpractice coverage for the professional services you render outside Ontario, you should consider contacting one or more of the following:

- Peter Curran, Client Manager, Marsh Canada Ltd., 1-800-265-6876
- Service Representative, CDSPI, 1-800-561-9401, ext. 234
- An independent insurance broker of your choice



## How Do I Know if a Current or Prospective Staff Member has HARP Qualifications?

The taking of radiographs in dental offices in Ontario is controlled by the *Healing Arts Radiation Protection (HARP) Act*, and its Regulations. Under this *Act*, the following operator qualifications with regard to patient safety are outlined:

1. No person shall use an x-ray machine for the irradiation of a human being unless he or she has successfully completed a recognized course in radiology safety as a part of the qualifications in his or her specified discipline.
2. A person enrolled in a recognized x-ray safety course may be permitted to operate an x-ray machine while under the supervision of a qualified individual.

Dentists and dental hygienists are deemed to have met the required qualifications by virtue of their training. Dental Assistants and Registered Nurses, however, must have taken appropriate training in x-ray safety in order to take radiographs.

The Regulations made under the *HARP Act* outline a number of programs that are deemed to be acceptable:

- A program or course in dental assisting at a College of Applied Arts and Technology in Ontario;
- A program or course in dental assisting offered by the Canadian Armed Forces; and
- A course in dental radiation safety approved by the HARP Commission.

Other dental assisting programs that have been approved by the HARP Commission as of the date of the publication of this issue of *Dispatch* include:

- Career Canada College (Hamilton, Ottawa, Toronto)
- Clarke College (Belleville, Bancroft, Brockville)

- College of Business Training (Barrie, Sault Ste. Marie)
- Etobicoke Collegiate Institute
- Kingston Learning Centre
- Lorne Park Secondary School (Mississauga)
- Ontario Business College (Belleville, Barrie, Chatham, Kitchener, North Bay, Oshawa, Sault Ste. Marie, Sudbury, Thunder Bay, Windsor)
- Sir Allan MacNab Secondary School (Hamilton)
- Southwestern Medix School (Kitchener)
- Toronto School of Business (Ancaster, Hamilton, London, Mississauga, Newmarket, North York, Oshawa, Pickering, Scarborough)
- Weston Collegiate Institute

### Proof of Qualification

Under the *HARP Act*, one of the responsibilities of the dentist who serves as the Radiation Protection Officer in each dental facility is to ensure that only qualified persons are permitted to take dental radiographs.

Sufficient proof of these qualifications include:

- A transcript showing successful completion of a course in dental assisting that has been approved by the HARP Commission;
- A transcript showing successful completion of an approved course in dental radiology, including an x-ray safety component;
- A certificate from the RCDSO indicating successful completion of the x-ray safety update course taken during the December 1983 – December 1986 period;
- A current ODNA certificate with HARP designation affixed.



## Practice Check

### Safety of Topical Anaesthetic Agents

The lead article in this issue of *Dispatch* lists the intra-oral procedures that can now be assigned to qualified persons, namely Level II dental assistants and, of course, dental hygienists. One of these procedures, “applying topical anaesthetics”, can be performed by Level II dental assistants in five provinces, including Ontario.

In deciding whether or not to use a topical anaesthetic agent for a particular patient, two questions need to be kept in mind:

1. Does the patient have an allergy to any of the constituent ingredients in local anaesthetics? If so, is the topical anaesthetic agent used in the office free of these offending ingredients?
2. Are there any open lesions, abrasions or cuts in the mucous membrane where the topical anaesthetic agent is to be used? If so, excessive absorption of the agent may occur, especially in paediatric patients.

You are reminded that the assigning dentist must be present in the office suite when any intra-procedures are performed by a Level II dental assistant. The dentist is also responsible for ensuring that the intra-oral procedures that are assigned are performed safely and competently. This responsibility includes making sure there are no medical or dental contra-indications prior to assigning certain procedures.



## Practice Check

### Latex Allergies, Dental X-ray Packets & Anaesthetic Cartridges

The College recently received a report of a possible latex allergy experience associated with the taking of dental radiographs.

One manufacturer of dental x-ray film, Kodak Canada Inc., was contacted and the following latex information statement regarding several Kodak Dental Products (including dental x-ray packets and local anaesthetic cartridges) was received:

#### **Kodak Dental Film**

There is no latex present in the EKTASPEED Plus or ULTRA-SPEED intraoral film packets or ClinAsept™ Barriers. Natural rubber is not used as a component in the manufacture of dental film packets.

#### **Cook-Waite™ Anaesthetics**

The diaphragm of the dental cartridge is made of synthetic haloo-butyl isoprene blend and therefore does not contain latex.

The plunger of the dental cartridge is made from solid natural rubber latex which is processed in a manner that removes the agents responsible for latex sensitization and allergic reactions.

The manufacturing process for the solid natural rubber latex coupled with the heat and chemical reactions associated with the vulcanization (curing) of the elastomeric closures reduces the agents to parts per million or less. Almost all of the allergic reactions documented so far are due to medical devices formulated from liquid natural rubber latex, which is not used in the manufacture of cartridge closures.

#### **Other Considerations**

For patients reporting latex hypersensitivity or allergy, it is important to verify that the particular brands of dental film packets and local anaesthetic cartridges used in your practice have similar properties to the above-noted products.

Dentists are also advised to ensure that the film packet holders and/or bitewing tabs used in the office are latex-free and therefore safe to use for these patients.

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## Level II Dental Assistants Now a Reality in Ontario

### Controlled Acts

are defined in the *Regulated Health Professions Act, 1991* as those procedures that pose such a serious threat of harm to patients that they must only be performed by properly trained and qualified regulated health professionals. The *RHPA* also makes it an offence for unregulated health professionals to perform these procedures unless they have been properly delegated by a regulated health professional. Other non-controlled intra-oral procedures that do not meet the above test are deemed to be in the "public domain" and can therefore be performed by non-regulated health professionals.

### Delegation

means the direction, authority or permission given by a dentist to permit a person to perform one or more of the controlled acts that are authorized to dentists under the *Dentistry Act, 1991 (RHPA)*. Such authorization requires regulatory authority and until such time as the appropriate regulation is in place, dentists cannot delegate any of their authorized or controlled acts to anyone. Because two of the core "Level II" procedures, namely the "application of treatment liners with no pulpal involvement" and the "application/removal of matrices and wedges" are considered by the RCDSO to be "controlled acts", these cannot be performed in Ontario by Level II dental assistants until the appropriate regulation is in place.

### Order

means the authorization required by a member of the College of Dental Hygienists of Ontario or the College of Nurses pursuant to their profession-specific *Acts* to permit members of these Colleges to perform their own authorized acts.

### Assigning

means the direction, authority or permission given by a dentist to a person for the performance of an intra-oral procedure other than a controlled act.

### An Overview of the New "Standards of Practice of the Profession" Document

1. The intra-oral procedures listed in the document can be carried out by Level II dental assistants are non-controlled acts, which by definition do not pose any real threat of harm to the public. They can also be performed by dental hygienists.
2. Preventive Dental Assistants who are currently listed with the College can continue to perform the five PDA duties. However, no more PDAs will be listed by the College after December 31, 1999.
3. After January 1, 2000, the qualification for dental assistants to perform Level II intra-oral procedures in Ontario will be NDAEB certificate which must have been obtained by examination. Level II Dental Assistants who obtained their National Dental Assisting Examining Board (NDAEB)

## Level II Dental Assistants Now a Reality in Ontario

certificate without examination prior to December 31, 1999 will also be considered as “qualified persons”.

4. Dental assistants who have obtained Level II or equivalent training in a non-Canadian jurisdiction may be able to enter the system by having their credentials reviewed by the NDAEB. If acceptable, they will be able to take the NDAEB examination.

5. The intra-oral procedures listed in the document can be assigned to dental hygienists and Level II dental assistants. Because of their extensive training and self-regulated status of dental hygienists, it is not necessary for the assigning dentist to be in the office when the procedures are performed or for their work to be checked by the dentist.

6. When the listed intra-oral procedures are assigned to a Level II dental assistant, the assigning dentist must be present in the office suite and ensure, before the patient leaves the offices, that the assigned procedures were safely and competently performed.

The newly-approved “Standards of Practice of the Profession” is outlined below. Once a companion regulation has been approved by government making it “professional misconduct” for dentists to fail to follow ‘standards of practice’ published by the College, the complete version of the document will be sent to all Ontario dentists and interested stakeholders.

## Standards of Practice of the Profession Relating to the Performance of Intra-Oral Procedures Other than Controlled Acts by Third Parties

Under the *Regulated Health Professions Act, 1991*, the *Dentistry Act, 1991*, and the Regulations passed under those *Acts*, members are required to comply with standards published by the College from time to time. The following Standard directs members with respect to the intra-oral procedures (other than controlled acts) which can be performed by others in your practice. The Standard not only provides a list of those intra-oral procedures that you may permit “qualified” persons to perform in your practice but also stipulates who is “qualified” to perform these tasks.

1. In this Standard, “assign” means the direction, authority, or permission given by a dentist to a person for the performance of an intra-oral procedure other than a controlled act.
2. A member may not assign an intra-oral procedure to a person other than pursuant to the provisions of this Standard or another applicable standard.

3. A member may assign one or more of the following intra-oral procedures to a person who has successfully completed a preventive dental assistant program of a College of Applied Arts and Technology in Ontario or other course(s) approved by the Council of the Royal College of Dental Surgeons of Ontario (“P.D.A.”) if the person was listed as P.D.A. by the Royal College of Dental Surgeons of Ontario prior to January 1, 2000, namely,

- (1) application and removal of rubber dam;
- (2) mechanical polishing of the coronal portion of the teeth but not including any instrumentation;
- (3) taking preliminary impressions of the teeth for study models;
- (4) oral hygiene instruction;
- (5) fluoride application.

4. The intra-oral procedures described in paragraph 5 may be assigned to a person who:

## Standards of Practice (continued)

- (a) holds the certificate of the National Dental Assisting Examining Board issued on or before December 31, 2000; or
  - (b) holds a certificate of the National Dental Assisting Examining Board after December 31, 2000 provided that the certificate was issued based upon successful completion of its examination(s); or
  - (c) is a member of the College of Dental Hygienists of Ontario.
5. A member may assign one or more of the following intra-oral procedures to a person referred to in paragraph 4 above:
- (1) application and removal of rubber dam;
  - (2) mechanical polishing of the coronal portion of the teeth but not including any instrumentation;
  - (3) taking preliminary impressions of the teeth for study models;
  - (4) oral hygiene instruction;
  - (5) dietary counselling relative to dentistry;
  - (6) fluoride application;
  - (7) application of materials topically to

Members are reminded that dentists are obligated at all times to maintain the standards of practice of the profession including those published by the College. A member who fails to comply with a standard published by the College or the generally accepted standards of practice of the profession may be acting in a manner that could result in allegations of professional misconduct.

- prepare the surface of the teeth for pit and fissure sealants;
- (8) application of pit and fissure sealants;
- (9) applying topical anaesthetics;
- (10) applying desensitizing agents;
- (11) polishing restorations;
- (12) oral irrigation;
- (13) whitening the coronal portion of the teeth using materials generally available to the public without prescription.



## Standards of Practice (continued)

6. A member who assigns one or more of the intra-oral procedures listed in this Standard is responsible for the performance of the assigned procedure and where the intra-oral procedure is assigned to a person who is not a member of the College of Dental Hygienists of Ontario, the assigning dentist must be present in the office suite while the procedure is being performed and ensure, prior to the patient's discharge, that the procedure was performed safely and competently.

7. A member who assigns an intra-oral procedure listed in this Standard must first ensure that the person who is being assigned the procedure has the qualifications required by this Standard to permit the performance of that procedure and must maintain in his/her office the documentation by which the member established that the person had the required qualifications. This documentation must be available for inspection by a representative of the College, if requested.

## New Senior Staff Appointments

*The RCDSO Council is pleased to announce two new appointments. Mr. Irwin Fefergrad has been appointed as the new Deputy Registrar of the College. Mr. Fefergrad's new title is Director, Hearings and Investigations / Deputy Registrar. Mr. Paul Harrison, CMA, Director, Finance and Administration, was appointed to serve as Treasurer of the College. His new title is Director, Finance and Administration / Treasurer.*

*When the clock strikes midnight*

# Will You Be Ready for the Year 2000?

*When the clock strikes midnight to ring in the new millennium, will your office computer know it is the beginning of the next century? What about the other companies that affect your practice such as third-party payers, suppliers and labs? You should be asking these questions now – not in December!*

There has been much speculation about the effects on computer systems when the year 2000 arrives. It is important to anticipate the potential impact to avoid disrupting patient care and convenience.

## **What is Y2K?**

The Year 2000 (Y2K) issue is the result of a programming practice most prevalent with older mainframe computers. Early data storage was expensive. To save space, some programmers used a six-digit field to indicate date (YY/MM/DD), with only two digits for the year. A system that is not Year 2000-compliant would process January 1, 2000 as 00/01/01, *ie.* January 1, 1900. In most cases, the result would be a computer error.

It is worth checking with your vendors to ensure that schedulers, voicemail systems, billing systems and practice management systems are Year 2000-compliant.

A less obvious problem is the integrated circuits or computer chips found in copiers, fax machines and clinical devices. The impact of any functions that are time or date dependant should be assessed. If you are in doubt, contact the manufacturer.

A third area of concern is the external systems that may affect your practice. These would include environmental control and security systems as well as suppliers and laboratories. You should also contact third-party payers to ask if their systems are Y2K-compliant.

## **Testing Your System**

Do not attempt to test your systems by setting the date ahead to see what happens. Jumping ahead to the year 2000 could cause some immediate problems if your systems have scheduled actions. Unless you are sure of the consequences, it is best to ask your vendor for a testing program.

Start planning now and you will be able to ring in the New Year worry-free.

# Renewal Certificates

*The College has received a very favourable response to the new “renewal” certificates that were recently mailed to all members.*

Some of the certificates, however, were damaged in the mail. If you require a new certificate, or would like additional copies if

you work out of more than one office, please contact Cathy Legedza, Manager, Communications at the College.

## Contact the College by E-Mail

*In addition to contacting the College by telephone and fax, you can now reach the staff via e-mail. Listed below is the College’s Management Team and their e-mail addresses.*

**Dr. Minna Stein**

Registrar

[mstein@rcdso.org](mailto:mstein@rcdso.org)

**Mr. Irwin Fefergrad**

Director, Hearings and Investigations / Deputy Registrar

[ifefergrad@rcdso.org](mailto:ifefergrad@rcdso.org)

**Mr. Paul Harrison, CMA**

Director, Finance and Administration / Treasurer

[pharrison@rcdso.org](mailto:pharrison@rcdso.org)

**Dr. Don McFarlane**

Director, Professional Practice

[dmcfarlane@rcdso.org](mailto:dmcfarlane@rcdso.org)

**Dr. Patricia Abbey**

Manager, Public Complaints

[pabbey@rcdso.org](mailto:pabbey@rcdso.org)

**Dr. Fred Eckhaus**

Manager, Investigations

[feckhaus@rcdso.org](mailto:feckhaus@rcdso.org)

**Ms. Cathy Legedza**

Manager, Communications and External Relations

[clegedza@rcdso.org](mailto:clegedza@rcdso.org)

**Mrs. Cecelia Turner**

Manager, Professional Liability Program

[cturner@rcdso.org](mailto:cturner@rcdso.org)

# Alternate Dispute Resolution

*In January 1999, Council asked College staff to investigate the use of alternate dispute resolution (ADR) in the complaints process and to propose an ADR protocol.*

Staff consulted with over 50 regulatory colleges and professional associations, as well as experts on ADR, prior to developing the rules for the program. On May 12, 1999 the Council adopted these rules for the program. The goal is to report back to Council on the results of this "pilot project" at its March, 2000 meeting. The College began using the Alternate Dispute Resolution process in June.

## **What is ADR?**

It is a non-statutory process for resolving disputes. The complainant and the dentist meet face-to-face in the presence of a facilitator, whose role is assisting the parties in their attempt to resolve the dispute, or to identify and simplify the issue in those cases, which are appropriate. ADR provides a more flexible framework for dealing effectively with issues.

## **How does ADR work?**

- Your annual fees to the College will fund the ADR program.
- The facilitator used for the confidential meeting is an expert in the process of negotiation and has no connection to the College.
- The College, the complainant and the member must be in agreement as to the resolution.
- In the event no agreement is reached, the complaint will proceed in the normal fashion and the Complaints Committee will have no knowledge of the ADR meeting. Any information disclosed during the ADR process cannot be used later.

For more information about ADR, please contact Mr. Irwin Fefergrad, Director, Hearings and Investigations, or Dr. Patricia Abbey, Manager, Public Complaints, at College headquarters at (416) 961-6555 or toll-free at 1-800-565-4591.

