2023 ANNUAL REPORT



AGM AGENDA

September 24th, 2023, TCU Place, Saskatoon, SK, 1-3 p.m.

- 1:00 Welcome and Introductions Gord Gillespie
- 1:05 Outgoing Presidents Welcome Dr. Bazylak

1:10 - Guest Presentation – Dr. Bazylak to introduce guests.

- CDSPI Paul Batho
- College of Dentistry Dr. Walter Siqueira

Professional Report Submissions

- CDA
- NDEB
- Economics
- 1:45 AGM Call to Order Gord Gillespie

Approval of Agenda

Adopt 2022 AGM Minutes

Adopt Consent Items - PCC, Discipline, Governance, Finance, Human Resources, Chair Report, Quality Assurance, Advertising Review, and Continuing Education and Learning.

- 1:50 Incoming Presidents Welcome Dr. Thiessen
- 1:55 Service Award Presentation Drs. Bazylak & Thiessen
- 2:15 Registrar Remarks Dr. Zimmer
- 2:20 Executive Director Remarks Jaime Korczak
- 2:25 Adopt Audit Report Curt Wagner, Partner, MNP
- 2:35 Approval of 2022 Audit Report
- 2:45 Question and Answer
- 3:00 Adjournment

COLLEGE OF DENTAL SURGEONS OF SASKATCHEWAN

AGM MEETING MINUTES 2022

September 27, 2022, 8:15 PM Virtual Via Teams

Call to order—Gord Gillespie, Chair

In Memoriam—Dr. Gerald Uswak

Dr. Robert "Bob" Kinniburgh, December 21, 2021, age 77 years Dr. Lawrence Reimer, January 23, 2022, age 68 years

Motion to Approve the 2022 AGM AGENDA and 2021 AGM Minutes

Dr. Mike Prestie Dr. Kevin Saganski CARRIED

Update from Curt Wagner, MNP, Auditors

Review of the 2021 Audited Financial Statements, y/e December 31, and explanation of the independent auditor's report. Revenues stable year after year. Expenses stable as well. Slight decrease in overall bottom line, in 2020 a loss of \$12K, and in 2021 a loss of \$48K. Overall stability.

Motion to adopt the 2021 Audited Financial Statements

Nancy Croll Dr. Michael Koskie CARRIED

President (Past) Dean Zimmer—Outgoing Remarks

Recent CDSS annual convention this past week, and thanks to Jason Korte for his efforts in planning the event.

Reminder of the mandate of the CDSS. The CDSS is the dental regulatory body that regulates dentists, by the Minister of Health of the Government of Saskatchewan via the Dental Disciplines Act (1997). The Government delegates through legislation the responsibility of the CDSS to license and regulate dentists in Saskatchewan in the public interest.

The CDSS must remain humble and cognisant of the Vision, Mission, and Values to maintain this privilege of self regulation in dentistry.

The CDSS is one of the last joint regulation and association organizations in Canada. Also providing membership support in the public interest. The membership support and services provided by the CDSS are similar and comparable to other services provided by associations in Canada.

The one membership support service that CDSS is less able to provide is a local advocacy voice, relying more on regional district societies or national Canadian Dental Association to fulfil that requirement. Enabling a healthy public by regulating healthy dentists. Status update to CDSS management operations:

Jerod Orb departed the CDSS mid June 2022. As an interim measure, our council Chair was appointed to the role. Since then, with the assistance of a HR Consulting firm, we have been standardizing administrative and human resource policies, reviewing job descriptions and workflow processes, as well as reaffirming the reporting structure to ensure we align regulatory functions to the Registrar to the former CEO position. We expect to present findings to the HRCC Committee in October with a recommendation taking place at fall council meeting.

This review has enabled a reduction of the number of staff positions required in the CDSS office. We will relay the new structure and contact information to the membership once all is finalized and approved by Council.

Council accomplishments over the last year:

- Recommitting to the development and update of standards of practice.
- Development of a Code of Ethics
- Progress in the redevelopment of the CDSS Regulatory Bylaws
- Progress in updating the licensing requirements.
- Redevelopment of the public side of the CDSS website
- Survey of the membership regarding regulatory and member support services
- Continued improvements to council governance
- Continuing to forward the organization as a leader for the profession in the province

Dr. Zimmer's involvement with the CDSS for 17 years on both committees and council has afforded many learning experiences and friendships made. Thanks to council and CDSS staff colleagues. Much confidence in the incoming CDSS council, lead by Dr. Aaron Bazylak, has the character and leadership to serve the CDSS well into the future.

Dr. Mike Prestie—Economics Committee Update

From survey done in 2018 compared to today, uptick in expenses likely due to Covid, but overall respectable. Survey responses are still lacking, which makes it difficult to have a full overview. The wage survey was just sent out. The economy is what it is right now, we have to accept it.

NOTE: Unfortunately, it was missed that Dr. Maureen Tynan passed away.

President Dr. Aaron Bazylak—Incoming Remarks

Welcome to all.

Quote from Babe Ruth, "The way a team plays as a whole, determines its success". Dentistry is a team sport. Every member of this team is important for a successful treatment outcome.

The CDSS is a team as well. With the support of the community, our governing partners, our members we maintain the privilege of self-regulating our profession.

Together with our great team, vision and goals with ensure the positive momentum and progress that has been started from past president's that have had the privilege of working with.

This is based on a strong foundation of inclusiveness, transparency, open communication, and collaboration. Here are a few goals and initiatives for a positive movement forward:

- Continue to expand upon the relationship between CDSS and the membership of our dentists and specialists in the Province of Sask
- Strive towards sharing ideas and opinions and expertise with one another
- To continue our ongoing relationship with the CDA, other national organizations and associations
- To expand and strengthen our relationships with our Provincial MLAs and Federal MPs.
- To expand our collaborative efforts on safe, reasonable, and effective dental regulation between our diverse provinces and territories
- To continue to ensure non-biased research and investigations for safe implementations of potential new and emerging dental technology and new treatment modalities
- To continue our public outreach campaigns

To outgoing President Zimmer, thank you for the many years of service to the CDSS, especially this past year. Time and again you've demonstrated the leadership style abilities and values that we all should strive towards.

Welcome new councilor, Dr. Erika Ridgway, and new public representative Mr. Gord Wyatt.

To returning councillors and committee members, welcome, let's get to work.

To management team, thank you for your leadership and guidance, and to the CDSS staff, thank you for your continuing hard work during these transition times.

In closing to quote Mohammad Ali, "Service to others is the rent you pay for your room here on Earth".

Meeting adjourned.

College of Dental Surgeons of Saskatchewan Financial Statements December 31, 2022

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For the year ended December 31, 2022

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To the Members of College of Dental Surgeons of Saskatchewan:

Management is responsible for the preparation and presentation of the accompanying financial statements, including responsibility for significant accounting judgments and estimates in accordance with Canadian accounting standards for not-for-profit organizations. This responsibility includes selecting appropriate accounting principles and methods, and making decisions affecting the measurement of transactions in which objective judgment is required.

In discharging its responsibilities for the integrity and fairness of the financial statements, management designs and maintains the necessary accounting systems and related internal controls to provide reasonable assurance that transactions are authorized, assets are safeguarded and financial records are properly maintained to provide reliable information for the preparation of financial statements.

The Council is composed primarily of Members who are neither management nor employees of the Organization. The Council is responsible for overseeing management in the performance of its financial reporting responsibilities, and for approving the financial information included in the annual report.

MNP LLP, an independent firm of Chartered Professional Accountants, is appointed by the Council to audit the financial statements and report directly to the Members; their report follows. The external auditors have full and free access to, and meet periodically and separately with, both the Council and management to discuss their audit findings.

September 24, 2023

Jaime Korczak - Executive Director

To the Members of College of Dental Surgeons of Saskatchewan:

Opinion

We have audited the financial statements of College of Dental Surgeons of Saskatchewan (the "Organization"), which comprise the statement of financial position as at December 31, 2022, and the statements of operations, changes in net assets, cash flows and the related schedules for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at December 31, 2022, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Saskatoon, Saskatchewan

Chartered Professional Accountants

College of Dental Surgeons of Saskatchewan Statement of Financial Position

As at December 31, 2022

	2022	2021
Assets		
Current		0.070.044
Cash and cash equivalents Accounts receivable <i>(Note 3)</i>	2,448,935 40,882	2,870,244 15,744
Investments (Note 4)	238,988	184,313
Prepaid expenses	12,997	34,423
	2,741,802	3,104,724
Tangible capital assets (Note 5)	23,967	28,544
	2,765,769	3,133,268
Liabilities		
Current		
Accounts payable and accruals (Note 6)	79,055	101,500
Deferred revenue (Note 7)	1,701,826	1,831,200
	1,780,881	1,932,700
Commitments (Note 8)		
Net Assets		
Unrestricted	984,888	1,200,568
	2,765,769	3,133,268
Approved on behalf of the Council		
Director		

Statement of Operations For the year ended December 31, 2022

	2022 Budget (Unaudited)	2022	2021
Operating Revenue (Schedule 1) SOHP Revenue (Schedule 2)	2,291,000 -	2,287,504 273,408	2,258,994 213,900
	2,291,000	2,560,912	2,472,894
Expenses			
Amortization	-	13,644	11,784
Bank charges	-	3,401	3,001
Consultants	225,000	188,172	187,048
Council meetings	200,000	161,023	189,746
Credit card charges	80,000	67,509	76,663
Grants	300,000	340,090	277,458
Insurance	20,000	20,543	19,256
Legal	75,000	27,840	59,195
Mediation/legal recoveries	-	(77,487)	(31,121)
Membership fees	5,000	3,623	6,974
Miscellaneous	-	1,700	42
Office equipment	140,000	108,717	130,341
Office supplies	35,000	50,151	61,222
Other meetings	150,000	158,666	39,094
Postage	10,000	7,500	3,390
Professional fees	30,000	34,465	45,238
Rent	150,000	139,273	131,677
Salaries, benefits, staff recruitment, and severance	828,000	1,003,700	890,963
Scientific session	-	11,693	-
Sponsorship and public relations	30,000	129,469	145,872
Telephone	15,000	5,170	9,161
	2,293,000	2,398,862	2,257,004
SOHP Expenses			
Audio visual	-	2,567	6,063
Bank charges	-	6,264	7,752
Consultant	-	146,473	179,450
Entertainment	-	17,009	124
Hotel, gala, committee and hospitality	-	119,381	2,469
Presenters	-	49,060	29,522
Printing, scanning and office	-	28,572	93,653
Promotion	-	3,916	2,960
	-	373,242	321,993
	2,293,000	2,772,104	2,578,997
		2,112,104	
Deficiency of revenue over expenses before other items	(2,000)	(211,192)	(106,103)
Other items	7 500	40 750	0.400
Investment income Realized and unrealized (losses) gains on investments	7,500 5,000	13,753 (18,241)	9,423 48,413
	·		
	12,500	(4,488)	57,836
Excess (deficiency) of revenue over expenses	10,500	(215,680)	(48,267)

The accompanying notes are an integral part of these financial statements

Statement of Changes in Net Assets For the year ended December 31, 2022

	2022	2021
Net assets, beginning of year	1,200,568	1,248,835
Deficiency of revenue over expenses	(215,680)	(48,267)
Net assets, end of year	984,888	1,200,568

The accompanying notes are an integral part of these financial statements

Statement of Cash Flows

For the year ended December 31, 2022

	2022	2021
Cash provided by (used for) the following activities		
Operating		
Deficiency of revenue over expenses	(215,680)	(48,267)
Amortization	13,644	11,784
Realized and unrealized losses (gains) on investments	18,241	(48,413)
	(183,795)	(84,896)
Changes in working capital accounts Accounts receivable	(25,138)	69,362
Prepaid expenses	21,426	(17,605)
Accounts payable and accruals	(22,445)	(50,336)
Deferred revenue	(129,374)	(28,757)
Deletted levellue	(129,374)	(20,757)
	(339,326)	(112,232)
Investing		
Investing Purchase of investments	(216,558)	
		64 220
Proceeds on disposal of investments	143,642	64,238
Purchase of tangible capital assets	(9,067)	(26,658)
	(81,983)	37,580
Decrease in cash resources	(421,309)	(74,652)
Cash resources, beginning of year	2,870,244	2,944,896
Cash resources, end of year	2,448,935	2,870,244

For the year ended December 31, 2022

1. Incorporation and nature of the organization

College of Dental Surgeons of Saskatchewan (the "Organization") was incorporated by an act of the Saskatchewan Legislature as the association for the dental profession to protect the public interest in matters relating to dentistry through regulation of the practice of dentistry and governance of its members. It is a not-for-profit entity under the Income Tax Act and therefore is not subject to either federal or provincial income taxes.

2. Significant accounting policies

The financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and include the following significant policies:

Revenue recognition

The Organization follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Investment income is recognized as revenue when earned.

All types of member fees are recognized as revenue in the year which they relate.

Contributed services

Members contribute their time to the Organization to assist in its activities. Contributed services are not recognized in the financial statements due to the difficulty of determining their fair value.

Cash and cash equivalents

Cash and cash equivalents include balances with banks and short-term investments with maturities of three months or less.

Tangible capital assets

Purchased tangible capital assets are recorded at cost. Contributed tangible capital assets are recorded at fair value at the date of contribution if fair value can be reasonably determined.

Amortization is provided using the the following methods at rates intended to amortize the cost of assets over their estimated useful lives. It is the Organization's policy to record amortization at one-half of the annual rate in the year of acquisition.

	Wethod	Rate
Computer equipment	declining balance	55 %
Equipment	declining balance	20 %
Leasehold improvements	straight-line	10 years

Long-lived assets

Long-lived assets consist of tangible capital assets.

When the Organization determines that a long-lived asset no longer has any long-term service potential to the Organization, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations. Write-downs are not reversed.

Termination benefits

The Organization recognizes the expense for contractual termination benefits based on the lump sum payments handed out this year amounting to a total of \$191,921 (2021 - nil). These termination benefits were paid out and expensed within the fiscal year.

For the year ended December 31, 2022

2. Significant accounting policies (Continued from previous page)

Financial instruments

The Organization recognizes financial instruments when the Organization becomes party to the contractual provisions of the financial instrument.

Arm's length financial instruments

Financial instruments originated/acquired or issued/assumed in an arm's length transaction ("arm's length financial instruments") are initially recorded at their fair value.

At initial recognition, the Organization may irrevocably elect to subsequently measure any arm's length financial instrument at fair value. The Organization has not made such an election during the year.

The Organization subsequently measures investments in equity instruments quoted in an active market at fair value. Fair value is determined by published price quotations. All other financial assets and liabilities are subsequently measured at amortized cost.

Transaction costs and financing fees directly attributable to the origination, acquisition, issuance or assumption of financial instruments subsequently measured at fair value are immediately recognized in deficiency of revenue over expenses. Conversely, transaction costs and financing fees are added to the carrying amount for those financial instruments subsequently measured at cost or amortized cost.

Financial asset impairment

The Organization assesses impairment of all its financial assets measured at cost or amortized cost. The Organization groups assets for impairment testing when available information is not sufficient to permit identification of each individually impaired financial asset in the group. Management considers whether the issuer is having significant financial difficulty in determining whether objective evidence of impairment exists. When there is an indication of impairment, the Organization determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the year.

The Organization reduces the carrying amount of any impaired financial assets to the highest of: the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets at the statement of financial position date; and the amount expected to be realized by exercising any rights to collateral held against those assets.

Any impairment, which is not considered temporary, is included in current year deficiency of revenue over expenses.

The Organization reverses impairment losses on financial assets when there is a decrease in impairment and the decrease can be objectively related to an event occurring after the impairment loss was recognized. The amount of the reversal is recognized in deficiency of revenue over expenses in the year the reversal occurs.

Measurement uncertainty

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period.

Accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary. Amortization is based on the estimated useful lives of tangible capital assets.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in deficiency of revenue over expenses in the periods in which they become known.

For the year ended December 31, 2022

3. Accounts receivable

4.

5.

6.

		2022	202
		40,882 -	8,000 7,744
		40,882	15,744
		·	·
		2022	202
		37,956 201,032	184,31 -
		238.988	184,31
	×		<i>val</i> 15,58
45,979 21,915	38,970 6,323	7,009 15,592	15,58 9,28
23,066	21,700	1,366	3,67
90,960	66,993	23,967	28,54
		2022	20
		72,270	94,37
		485 1,047	- 2,31
		485	- 2,31 4,81 101,50
	21,915 23,066	45,979 38,970 21,915 6,323 23,066 21,700	40,882

7. Deferred revenue

Deferred revenue consists of monies received in relation to annual license fees, registration fees, corporate permits and fee guides that relate to the subsequent fiscal year. Recognition of these amounts as revenue is deferred to periods when the specified revenue is earned. Changes in the deferred revenue balances are as follows:

	2022	2021
Balance, beginning of year	1,831,200	1,859,957
Amount received during the year	1,701,826	1,831,200
Less: Amount recognized as revenue during the year	(1,831,200)	(1,859,957)
Balance, end of year	1,701,826	1,831,200

8. Commitments

The Organization leases office space under an operating lease expiring June 2023, having a base rent of \$10,225 per month (annually - \$122,700). The Organization committed to paying various operating leases for office equipment expiring April 2023 and April 2024, which are included in the office equipment expense account on the statement of operations, having quarterly payments of \$3,307 (annually - \$13,228). The Organization also entered into a new office lease commencing from November 2023 - October 2033, having a base rent of \$5,425 per month (annually - \$65,102).

9. Financial instruments

The Organization, as part of its operations, carries a number of financial instruments. It is management's opinion that the Organization is not exposed to significant interest, currency, credit, liquidity or other price risks arising from these financial instruments except as otherwise disclosed.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk. The Organization is not exposed to interest rate risk at the end of December 31, 2022.

Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices, whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The Organization's investment in publicly-traded securities and mutual funds expose the Organization to price risk as this investment is subject to price changes in an open market due to a variety of reasons including changes in market rates of interest, general economic indicators and restrictions on credit markets.

10. Comparative figures

Certain comparative figures have been reclassified to conform with current year presentation.

11. Budget information

During the 2022 year, the Council approved its operating budget for 2022 based on planned expenses and sources of expected revenue relating to the 2022 year. The budget balances have been attached for information purposes only and are unaudited.

College of Dental Surgeons of Saskatchewan Schedule 1 - Schedule of Operating Revenue For the year ended December 31, 2022

	2022 Budget (Unaudited)	2022	2021
Operating Revenue			
Access to care	5,000	9,000	4,000
Annual license fees	2,100,000	2,101,613	2,085,525
Corporate fees	20,000	17,900	19,500
Corporate permits	90,000	92,400	88,200
Fee guides	30,000	24,600	25,000
Fundraising	5,000	3,600	4,400
Other recoveries	1,000	1,209	5,929
Penalty and interest	-	200	400
Radiation safety binders	10.000	9,337	1,140
Registration fees	30,000	27,645	24,900
	2,291,000	2,287,504	2,258,994

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College of Dental Surgeons of Saskatchewan Schedule 2 - Saskatchewan Oral Health and Continuing Education Revenue For the year ended December 31, 2022

2022	2021
45,644	141,732
	51,501
79,682	20,667
273,408	213,900
-	45,644 148,082 79,682



2022 Audit Findings

Report to Council and the Finance Committee December 31, 2022

Curt Wagner, CPA, CA T: 306.664.8250 E: curt.wagner@mnp.ca





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Overview

We are pleased to submit to you this Audit Findings Report (the "Report") for discussion of our audit of the financial statements of College of Dental Surgeons of Saskatchewan (the "Organization") as at December 31, 2022 and for the year then ended. In this report we cover those significant matters which, in our opinion, you should be aware of as members of Council and the Finance Committee.

As auditors, we report to the members on the results of our examination of the financial statements of the Organization as at and for the year ended December 31, 2022. The purpose of this Report is to assist you, as members of Council and the Finance Committee, in your review of the results of our audit.

This Report is intended solely for the information and use of Council and the Finance Committee and management and should not be distributed to or used by any other parties than these specified parties.

We appreciate having the opportunity to meet with you and to respond to any questions you may have about our audit, and to discuss any other matters that may be of interest to you.

Engagement Status

We have substantially completed our audit of the financial statements of the Organization which has been carried out in accordance with Canadian generally accepted auditing standards and are prepared to sign our Independent Auditor's Report subsequent to completion of the following procedures:

- Receipt of the signed management representation letter;
- Discussion of subsequent events with Council and the Finance Committee;
- Council and the Finance Committee's review and approval of the financial statements.

No significant limitations were placed on the scope or timing of our audit.

Independent Auditor's Report

We expect to have the above procedures completed and to release our Independent Auditor's Report shortly after it is approved by Council.

Our Independent Auditor's Report will provide an unmodified opinion to the membersof the organization. A draft copy of our proposed Independent Auditor's Report has been provided as additional materials to this report. The matters disclosed in the Independent Auditor's Report are discussed further in the relevant sections of the Report.

Audit Reporting Matters

Our audit was carried out in accordance with Canadian generally accepted auditing standards, and included a review of all significant accounting and management reporting systems, with each material year end balance, key transaction and other events considered significant to the financial statements considered separately.

Significant Audit, Accounting and Reporting Matters

Area		Comments
	Changes from Audit Service Plan	There were no deviations from the Audit Service Plan previously presented to you.
	Final Materiality	Final materiality used for our audit was \$95,000 for December 31, 2022, and \$95,000 for December 31, 2021.
69	Identified or Suspected Fraud	While our audit cannot be relied upon to detect all instances of fraud, no incidents of fraud, or suspected fraud, came to our attention in the course of our audit.
	Identified or Suspected Non-Compliance with Laws and Regulations	Nothing has come to our attention that would suggest any non-compliance with laws and regulations that would have a material effect on the financial statements.
	Matters Arising in Connection with Related Parties	No significant matters arose during the course of our audit in connection with related parties of the Organization.
	Going Concern	Nothing has come to our attention that would suggest the use of the going concern assumption is not appropriate.
	Auditor's Views of Significant Accounting Practices, Accounting Policies and Accounting Estimates	The application of Canadian accounting standards for not-for-profit organizations allows and requires the Organization to make accounting estimates and judgments regarding accounting policies and financial statement disclosures.

Area		Comments
	Auditor's Views of Significant Accounting Practices, Accounting Policies and Accounting Estimates (continued from previous page)	As auditors, we are uniquely positioned to provide open and objective feedback regarding your Organization's accounting practices, and have noted the following items during the course of our audit that we wish to bring to your attention.
		The accounting policies used by the Organization are appropriate and have been consistently applied.
	Financial Statement Disclosures	The disclosures made in the notes to the financial statements appear clear, neutral and consistent with our understanding of the entity and the amounts presented in the financial statements.
P	Significant Deficiencies in Internal Control	While our review of controls was not sufficient to express an opinion as to their effectiveness or efficiency, no significant deficiencies in internal control have come to our attention.
P	Matters Arising From Discussions with Management	There were no significant matters discussed, or subject to correspondence, with management that in our judgment need be brought to your attention. We would like to formally acknowledge the cooperation and assistance we received from
		management and staff of the Organization.

Significant Risk Areas and Responses

Significant Risk Area	Response and Conclusion
Other revenue Risk that revenue transactions are missed due to transactions for programs not being recorded in the general ledger and thus risk that revenue and A/R are not complete.	Subsequent receipts testing was performed and revenue was substantively tested, which included reviewing and agreeing to approved rates.
Other revenue Risk that other revenue is not appropriately recorded, as less consistent items.	Substantively tested with a high risk assessment to address risk.
Conference revenue Risk that conference revenue has not occurred.	Substantively tested with a high risk assessment to address risk.
Membership/license fees Risk that membership fees are recognized before the fiscal year to which the revenue relates and thus a risk that A/R is overstated and does not exist or deferred revenue is understated.	Membership documentation was reviewed for the period to determine what period the fees related to and determine of the membership fees were consistent with the Council's approved rates.
Membership/license fees Risk that membership dues may not be invoiced.	Proof in total analytic was performed over membership dues based on the number of members per the clients database. Thus helping address the risk of whether or not revenue was complete.
Payroll Risk that employees are paid for time not worked or at rates that have not been previously approved.	Tested key management team members as key items to ensure properly stated. Remaining payroll was tested at a low risk factor.
Marketable securities	Marketable securities were confirmed with the bank.
Risk that equity investments are not valued at fair value as per the FI policy.	
Unauthorized journal entries are recorded Risk of fraud.	Tested manual journal entries to ensure they were recorded properly and are appropriately stated.

Other Areas

Area	Comments
Auditor Independence	We confirm to Council and the Finance Committee that we are independent of the Organization. Our letter to Council and the Finance Committee discussing our independence is included as part of the additional materials attached to this report.
Management Representations	We have requested certain written representations from management, which represent a confirmation of certain oral representations given to us during the course of our audit. This letter, provided by management, has been included as additional material to this report.
Summary of Significant Differences	A few significant differences were proposed to management with respect to the December 31, 2022 financial statements. A summary of significant differences has been included with this report.
Other Information	Pursuant to our responsibilities under Canadian generally accepted auditing standards, we are required to review other financial and non-financial information included in documents containing the financial statements and our auditor's report thereon. We review these documents for the purpose of ensuring their content does not contradict information derived from our audit procedures. We request you provide a draft of this information prior to issuing it in its final form, to help facilitate our timely review of the information.

Summary of Significant Differences

Significant Adjusted Differences

Differences Noted	Items Affected	Statement position	of financial	Stateme	nt of operations
To adjust Retained Earnings to closing balance PY.		\$ -		\$	5,786
To record CY amortization expense		\$	(13,644)	\$	13,644
To record PCC remuneration from May 2022 to December 2022 as per client at July 6, 2023		\$	(14,800)	\$	14,800
To true up investments		\$	(12,271)	\$	12,271
To adjust December 2022 Visa Fees paid in January 2023 in order to show payable in 2022.		\$	(33,746)	\$	33,746
Total Adjusted Difference			\$	80,247	

Significant Unadjusted Differences

Differences Noted	Statement of financial position	Statement of operations
Possible cut off error related to 2022 professional fees holdback	\$ (12,600)	\$ 12,600
To record 2023 license revenue as deferred	\$ (12,913)	\$ 12,913
To record remainder of MNP fee accrual	\$ (6,450)	\$ 6,450
Uncorrected opening differences	\$ 19,836	\$ (19,836)
Total Unadjusted Differences (Income Effect)		\$ 12,127

We appreciate having the opportunity to meet with you and respond to any questions you may have about our audit, and to discuss any other matters that may be of interest to you.

Sincerely,

Chartered Professional Accountants

To the Members of College of Dental Surgeons of Saskatchewan:

Opinion

We have audited the financial statements of College of Dental Surgeons of Saskatchewan (the "Organization"), which comprise the statement of financial position as at December 31, 2022, and the statements of operations, changes in net assets, cash flows and the related schedules for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at December 31, 2022, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Saskatoon, Saskatchewan

Chartered Professional Accountants

September 24, 2023

MNP LLP 119 4th Ave South Suite 800 Saskatoon, Saskatchewan S7K 5X2

To Whom It May Concern:

In connection with your audit of the financial statements of College of Dental Surgeons of Saskatchewan (the "Organization") as at December 31, 2022 and for the year then ended, we hereby confirm to the best of our knowledge and belief, the following representations made to you during the course of your audit.

We understand that your audit was made in accordance with Canadian generally accepted auditing standards. Accordingly, the audit included an examination of the accounting system, controls and related data, and tests of the accounting records and such other auditing procedures as you considered necessary in the circumstances, for the purpose of expressing an opinion on the financial statements. We also understand that such an audit is not designed to identify, nor can it necessarily be expected to disclose, misstatements, non-compliance with laws and regulations, fraud or other irregularities, should there be any.

Certain representations in this letter are described as being limited to matters that are material. An item is considered material, regardless of its monetary value, if it is probable that its omission from or misstatement in the financial statements would influence the decision of a reasonable person relying on the financial statements.

Financial Statements

- 1. We have fulfilled our responsibilities, as set out in the terms of the audit engagement letter dated July 17, 2023, for the preparation and fair presentation of the Organization's financial statements in accordance with Canadian accounting standards for not-for-profit organizations. We believe these financial statements are complete and present fairly, in all material respects, the financial position of the Organization as at December 31, 2022, and the results of its operations and its cash flows, in accordance with Canadian accounting standards for not-for-profit organizations.
- 2. All transactions have been recorded in the accounting records and are reflected in the financial statements, and are reported in the appropriate period.
- 3. We acknowledge that we are responsible for the accounting policies followed in the preparation of the Organization's financial statements. Significant accounting policies, and any related changes to significant accounting policies, are disclosed in the financial statements. The selection of accounting policies is appropriate in accordance with the requirements of Canadian accounting standards for not-for-profit organizations, and are applied consistently throughout the financial statements.

- 4. All significant judgments made in making the accounting estimates have taken into account all relevant information of which we are aware.
- 5. The selection and application of the methods, assumptions and data used in making the accounting estimates are consistent and appropriate.
- 6. The assumptions relevant to accounting estimates and disclosures appropriately reflect our intent and ability to carry out specific courses of action on behalf of the entity.
- 7. Disclosures related to accounting estimates, including disclosures describing estimation uncertainty, are complete and are reasonable in the context of Canadian accounting standards for not-for-profit organizations.
- 8. No subsequent event requires adjustment to the accounting estimates and related disclosures included in the financial statements.
- 9. We are aware of and concur with the contents and results of the attached journal entries prepared by you, and accept responsibility for the financial statement effects of the entries.
- 10. We believe the effects of those uncorrected financial statement differences aggregated by you during the audit are immaterial, both individually and in the aggregate, to the financial statements taken as a whole. A summary of these differences has been attached as Appendix A to this written representation.
- 11. Related party relationships and transactions have been appropriately accounted for and disclosed in accordance with the requirements of Canadian accounting standards for not-for-profit organizations.
- 12. All events or transactions that have occurred subsequent to the balance sheet and for which Canadian accounting standards for not-for-profit organizations require adjustment or disclosure have been adjusted or disclosed appropriately in the financial statements.
- 13. All plans or intentions that may affect the carrying value or classification of assets and liabilities are appropriately reflected in the financial statements in accordance with Canadian accounting standards for not-for-profit organizations.
- 14. All liabilities, both known and contingent, requiring recognition or disclosure in the financial statements in accordance with the requirements of Canadian accounting standards for not-for-profit organizations have been adjusted or disclosed as appropriate.
- 15. All outstanding and possible claims, whether or not they have been discussed with legal counsel, have been disclosed to you and are appropriately reflected in the financial statements.
- 16. All assets, wherever located, to which the Organization had satisfactory title at the year-end, have been fairly stated and recorded in the financial statements. The assets are free from hypothecation, liens and encumbrances, except as noted in the financial statements. We have disclosed the nature and carrying amounts of any assets pledged as collateral. All assets of uncertain value, and restrictions imposed on assets, are appropriately reported in the financial statements.

- 17. All aspects of laws, regulations or contractual agreements, including non-compliance, are appropriately reflected in the financial statements.
- 18. All cash accounts have been appropriately recorded in the financial statements and all terms and associated conditions have been disclosed to you in full. We have provided you with the most current banking agreements.
- 19. Investments in marketable securities are appropriately recorded in the financial statements in accordance with the requirements of Canadian accounting standards for not-for-profit organizations. All events or circumstances giving rise to impairments are reflected in the financial statements.
- 20. Accounts and contributions receivable are correctly described in the records and represent valid claims as at December 31, 2022. An appropriate allowance has been made for losses from uncollectible accounts and for costs or expenses that may be incurred with respect to sales made or services rendered.
- 21. All charges to tangible capital assets represent capital expenditures. No expenditures of a capital nature were charged to operations of the Organization. Depreciation of property, plant and equipment has been recorded according to our best estimates of their useful lives. All events or circumstances giving rise to impairments are appropriately reflected in the financial statements.
- 22. Revenue has been recognized only where sales have been made and items delivered, or services rendered, and the amounts have been collected or are collectible. Revenues do not include any amounts arising from consignment sales or from any other transaction from which the Organization is not entitled to the proceeds.
- 23. We have identified all financial instruments, including derivatives, and hedging relationships. These have been appropriately recorded and disclosed in the financial statements in accordance with the requirements of Canadian accounting standards for not-for-profit organizations.

Information Provided

- 1. We have responded fully to all inquiries made to us and have made available to you:
 - A complete record of all financial records that are relevant to the preparation and presentation of the financial statements, related data and minutes of the meetings of council members and board of directors held throughout the year to the present date as well as summaries of recent meetings for which minutes have not yet been prepared;
 - Additional information that you have requested from us for the purpose of your audit;
 - Unrestricted access to persons within the entity from whom you determined it necessary to obtain audit evidence.
- 2. We acknowledge management's responsibility for the design, implementation and operation of controls that have been designed to prevent and detect fraud.
- 3. We have assessed the risk that the financial statements may be materially misstated as a result of fraud, and have determined such risk to be low.

- 4. Where the impact of any frauds or suspected frauds, and non-compliance or possible non-compliance with laws and regulations, has a material effect on the financial statements, we have disclosed to you all known significant facts relating thereto, including circumstances involving management, employees having significant roles over controls, and others. We have made known to you any allegations of fraud or suspected fraud communicated by employees, former employees, analysts, regulators and others. The effects of such events, if any, are properly presented in the financial statements.
- 5. We have disclosed to you all deficiencies in the design or operation of internal controls over financial reporting of which we are aware.
- 6. We have disclosed to you all aspects of laws, regulations or contractual agreements that may affect the financial statements, including non-compliance.
- 7. We have disclosed to you the identities of all related parties to the Organization and all related party relationships and transactions of which we are aware.
- 8. We have no knowledge of side agreements (contractual or otherwise) with any parties that have not been disclosed to you.
- 9. The previous year's representation letter dated June 9, 2022 is still applicable to the prior year's financial statements, and no matters have arisen that require restatement of those financial statements.
- 10. There are no discussions with your firm's personnel regarding employment with the Organization.

Other Information

1. We have informed you of all the documents containing other information that comprise our annual report. The final version of our annual report will be provided to you when they are available, prior to their issuance, with sufficient time to complete the necessary procedures to satisfy your responsibilities in relation to other information.

Professional Services

- 1. We acknowledge the engagement letter dated July 17, 2023, which states the terms of reference regarding your professional services.
- 2. We are not aware of any reason why MNP LLP would not be considered independent for purposes of the Organization's audit.

Sincerely,

College of Dental Surgeons of Saskatchewan

Signature

Title

College of Dental Surgeons of Saskatchewan Year End: December 31, 2022 Adjusting Journal Entries Date: 01/01/2022 To 31/12/2022

Number	Date	Name	Account No	Reference	Debit	Credit	Recurrence	Misstatement
1	31/12/2022		3560	BK-BD		5,785.88		
1	31/12/2022	Office Supplies	5115	BK-BD	5,785.88			
		To adjust Retained Earnings to						
		closing balance PY.						
2	31/12/2022	Leasehold Improvement- Accum Amorti	1910	BK-P. 1		2,307.97		
2		Computer Equip - Accum Amort	1925	BK-P. 1		8,571.60		
2		Equipment - Accum Amort	1940	BK-P. 1		2,764.35		
2	31/12/2022	Amortization Expense	5037	BK-P. 1	13,643.92			
		To record CY amorortization expense						
3	31/12/2022	Accounts Payable	2200	BK-BE		14,800.00		
3	31/12/2022		5010	BK-BE	14,800.00	,		
		T 1500 % (
		To record PCC remuneration from May 2022 to December 2022 as per client a	t luly 6, 2023					
			touly 0, 2020					
5	31/12/2022	RBC Dominion (C/S)	1700	В		252,075.00		
5		RBC Dominion (C/S)	1700	В	8,217.92			
5		RBC Mutual fund	1701	В	218,591.03			
5		Unrealized Gain re:Inv	1702	В		17,558.70		
5		Unrealized Gain re: Investments	1705	B B	29,737.69	5 450 00		
5 5		Dividend income Change in unrealized gains (Loss)	4205 5710	В	18,240.86	5,153.80		
5	51/12/2022		5/10	J	10,240.00			
		To true up investments						
6	31/12/2022	Accounts Payable	2200	BB. 4		33,746.40		
6	31/12/2022	Credit Card Charges	5042	BB. 4	33,746.40			
		To adjust December 2022 Visa Fees paid in January 2023 in order to show payab	le in 2022.					
		1			0.40 700 70	0.40 700 70		
					342,763.70	342,763.70		
		Net Income (Loss)	-215,679.55					

Preparer Mr. 02/08/2023	Detailed JE 15/08/2023	Supervisory CMW 25/08/2023	
Peer	Тах	Admin	
		TB1	

College of Dental Surgeons of Saskatchewan Year End: December 31, 2022 Reclassifying Journal Entries Date: 01/01/2022 To 31/12/2022

7 31/12/2022 Bipling 3999 FS 2.00 7 31/12/2022 Bink charges 5640 FS 0.07 7 31/12/2022 Travel expenses 5660 FS 0.07 To round FS 2.07 2.07 Net Income (Loss) -215,679.55							Number
7 31/12/2022 Surplus 3560 FS 2.00 7 31/12/2022 Bank charges 5648 FS 0.07 7 31/12/2022 Travel expenses 5660 FS 0.07 To round FS	2.00		FS	999	Rounding	31/12/2022	
31/12/2022 Travel expenses 5660 FS 0.07 To round FS 2.07 2.07		2.00	FS	3560	Surplus	31/12/2022	
To round FS 2.07 2.07	0.07	0.07	FS FS	5648 5660	Bank charges	31/12/2022	
2.07 2.07	0.07		10	3000			
					To round FS		
Vet Income (Loss) -215,679.55	2.07	2.07					
				Net Income (Loss) -215,679.55			
$\overline{\mathbf{v}}$				▼			

Preparer	Detailed	Supervisory	
MK 03/08/2023	JE 11/08/2023	CMW 25/08/2023	
Peer	Tax	Admin	
		TDO	

September 24, 2023

Council and Finance Committee College of Dental Surgeons of Saskatchewan 201-1st Avenue South 1202 The Tower at Midtown Saskatoon, Saskatchewan S7K 1J5

Dear Council and Finance Committee Members:

We have been engaged to audit the financial statements of College of Dental Surgeons of Saskatchewan (the "Organization") as at December 31, 2022 and for the year then ended.

CAS 315 *Communication With Those Charged With Governance* requires that we communicate with you matters that are significant to our engagement. One such matter is relationships between the Organization and its related entities or persons in financial reporting oversight roles at the Organization and MNP LLP and any affiliates ("MNP") that, in our professional judgment, may reasonably be thought to bear on our independence. In determining which relationships to report, the Standard requires us to consider relevant rules and related interpretations prescribed by the appropriate professional accounting body and applicable legislation, covering such matters as:

- (a) Holding a financial interest, either directly or indirectly, in a client;
- (b) Holding a position, either directly or indirectly, that gives the right or responsibility to exert significant influence over the financial or accounting policies of a client or a related entity;
- (c) Personal or business relationships of immediate family, close relatives, partners or retired partners, either directly or indirectly, with a client or a related entity;
- (d) Economic dependence on a client; and
- (e) Provision of non-assurance services in addition to the audit engagement.

We are aware of the following relationships between the Organization and MNP that, in our professional judgment, may reasonably be thought to bear on our independence. The following relationships represent matters that have occurred from January 1, 2022 to the date of this letter.

An employee of MNP is contracted to complete the bookkeeping for the Organization for the 2022 fiscal year.

Appropriate safeguards were in place to protect our independence including the following:

- The bookkeeping employees had no management decision making authority;

- All work prepared by the bookkeeping employees were reviewed and approved by the Organization and conducted under the direction of the Organization;

- The audit team was completely separate from the bookkeeping team; and
- An independent peer review of the audit engagement was completed by a Risk Partner.
We hereby confirm that MNP is independent with respect to the Organization within the meaning of the Rules of Professional Conduct of the Chartered Professional Accountants of Saskatchewan as of the date of this letter.

This report is intended solely for the use of Council and Finance Committee, management and others within the Organization and should not be used for any other purposes.

We look forward to discussing with you the matters addressed in this letter as well as other matters that may be of interest to you, if so requested. We will be prepared to answer any questions you may have regarding our independence as well as other matters.

Sincerely,

Chartered Professional Accountants

MADE 🖗 CANADA

And proud of it!

At MNP we're proud to be the national accounting, consulting and tax firm that is 100% Made in Canada.

Our history defines who we are and our approach to business. Being a Canadian firm has helped shape our values, our collaborative approach, and the way we work with our clients, engaging them every step of the way.

We have a unique perspective. Our decisions are made here – decisions that drive Canadian business and help us all achieve success — and we know the impact that our choices have on the cities and towns we call home.

Throughout our six decades of work, we've seen our communities are more than just a place we do business in. They're a place where our families live, play, and thrive, and we work to make them the best places they can be.

Being 100% Canadian is something we wear proudly. This country provides us with great opportunities, and we're here to help our clients seize the opportunities so we can create a brighter future for the generations to come.

Wherever business takes you

<image/>
Wherever business takes you MNP.ca



PRESIDENT'S REPORT – DR. AARON BAZYLAK

Hello friends! Thank you for taking the time to be a part of the Annual General Meeting for the College of Dental Surgeons of Saskatchewan 2023. Thank you to everyone who has worked hard to put this in-person meeting together.

This has been a great year for the CDSS. This has been an eventful year for the CDSS. A time to get back together with colleagues and focus on what really matters most. In this report I would like to highlight a few initiatives, developments, and achievements that have occurred over this past year as there were much too many to mention here.

The ending of 2022 and the beginnings of 2023 proved to be filled with the excitement of new opportunities and the active reorganization of the CDSS continuing the evolution of a healthy organization. This turned out to be a very important transition time. The CDSS was faced with many familiar faces moving on to other endeavours, but this allowed for the opportunity to forge a strong path forward. During this phase we were proud to promote Ms. Jaime Korczak as the Executive Director of the CDSS. Along with our Council Chairperson Mr. Gord Gillispie, Jaime was able to reconfigure the entire staffing model at the CDSS office including hiring a new talented team . This also materialized into a literal reconfiguration of the CDSS office with renewing our lease with the Midtown Tower in Saskatoon and overseeing a long overdue remodeling upgrade of the office suite itself. Further along this pathway past CDSS President and long serving Council member Dr. Dean Zimmer was appointed by Council as the interim Acting Registrar. In addition to the multitude of important day to day registrar duties Dr. Zimmer will also be preparing a comprehensive report with his experience to use as a main reference to Council to completely evaluate all aspects of the position and look towards beginning a well informed permanent registrar search and hiring process slated to begin in February 2024. Thank you Dean for taking on this big challenge! Most recently Mr. Gord Gillispie's contract for Chairperson of the CDSS was extended for another full year term. Your expertise and guidance will be very important for the next year.

Throughout this entire transition process it was great to see how everyone on Council banded together as a cohesive team to keep the CDSS on solid footing through uncertain times. It is my pleasure to have been working alongside my Executive team of Dr. Derek Thiessen as President-Elect and Dr. Mike Fowler as Vice-President. Thank you for all of your time and energy you both put into these difficult positions this past year. I know the CDSS will be in great hands this following year. Joining them will be Dr. Raj Bhargava, who brings his many years of experience and insights, being voted in by Council as the new Vice-President. Congratulations!

One of the biggest developments in my 20 years of practicing dentistry was the surprise introduction of a nationwide Canadian Dental Benefit (CDB) in December 2022. This coalition federal government announcement in intended to help low income Canadians access dental care when they might have to go without. Since this announcement the CDSS has been working closely with all other Provincial Dental Regulators and Associations alongside the Canadian Dental Association to hopefully positively influence and help shape the future of this plan. Countless meetings have occurred and continue to occur across this country via video conferencing and in-person models, when feasible. I was fortunate to attend meetings in Toronto and Winnipeg this past year as President

where the CDB was the foremost topic of the agendas. The meetings in Winnipeg were in conjunction with the CDA AGM and saw the instating of Dr. Heather Carr from Nova Scotia as the new President of the CDA. At this time the CDSS was honoured to appoint Dr. Brian Baker again as our Saskatchewan representative on the CDA Board. Thank you Brian for all of your hard work on our behalf.

During this past year I was fortunate to continue to strengthen the positive working relationship between the CDSS and the University of Saskatchewan College of Dentistry through many meetings with Dr. Walter Siqueira. Not only are they responsible for educating the future dentists of this country but also dental assistants, dental hygienists, and now dental therapists! This is such an immense responsibility that I know Dr. Siqueira and his team will continue to excel with.

Having strong working relationships with other regulating bodies, educational institutions, and all levels of government is very important to establish for an organization like the CDSS. I was fortunate to hold meetings with a federal Member of Parliament, Mr. Corey Tochor on multiple occasions to discuss nationwide oral health topics and initiatives as well as a Member of our Legislative Assembly, Mr. Ken Cheveldayoff who provided provincial government insights. These were important to establish a relationship and an open line of communication with our provincial and federal leaders. There is much more work left to occur in this department. Of special note, the CDSS was honoured to have our then Provincial Minister of Health Mr. Paul Merriman join all of CDSS Council at the Dakota Dunes in June 2023 to be a part of a roundtable discussion and question and answer session. This was most beneficial. A continued positive working relationship with the Health Ministry is very important for the CDSS in my opinion. With a new Minster of Health, Mr. Hindley Everett, taking over this portfolio this brings another opportunity for relationship building for the CDSS.

After many years of research, development, and consultations in 2023 the CDSS Council brought forth a comprehensive Standard of Care outlining the educational pathway for members to begin providing neuromodulator treatments to their patients. It was ratified by Council vote after a final membership peer review and comment period, which lead to some very thoughtful final adjustments. It was recently announced by our Acting Registrar that July 1, 2024 is the target date to begin these treatments in Saskatchewan. In addition to this new Standard, our Standards Committee is constantly reviewing and updating all of our other Standards of Care to bring them in line with current developments and protocols. Recent research and development have occurred to many Standards which include: Long Term Care Management, Temporomandibular Joint Disorder Management, Good Character, Snoring and Sleep Apnea, Infection Prevention and Control, and Sedation, to name a few. Thank you to everyone who has contributed their expertise to these important endeavours.

The CDSS is strengthened as it sits upon the pillars of our committees. Thank you very much to all of our committee Chairpersons and their respective committee members who have worked so tirelessly for the CDSS over this past year. Job well done indeed. These include the statutory committees of Discipline, Professional Conduct and Executive (Governance, Finance, Human Resources) as well as the many other council committees and subcommittees including: Quality Assurance (Advertising Review), Professional Practice Standards, Nominations, Public Engagement, SHA Committees, Continuing Education and Learning, Awards, and Economics. In addition, I would also like to thank all of our representatives who represent CDSS with the CDA, NDEB, College of Dentistry (Faculty, Executive, Undergraduate, Curriculum Review, Admissions and Senate). Furthermore, as one of the goals of the CDSS for financial transparency and overall efficiency we established an ad hoc committee tasked with an overall evaluation of all existing committees. The goal to develop a comprehensive report to Council of researched recommendations to streamline our committee structures to a smaller and more manageable level.

Thank you to the fantastic team we had this past year as elected and appointed Council members. In addition to the Executive and Management team I previously mentioned I would like to also thank our Council members: Dr. Raj Bhargava, Dr. Bil Hussain, Dr. Michael Koskie, Dr. Drew Krainyk, Dr. Jay Lalli, Dr. Erika Ridgway, Dr. Kevin Saganski, Dr. Wes Thomson, Mr. Don Robinson, Mr. Gord Wyatt, and Ms. Nancy Croll who left Council in June as a long serving public representative. You will be missed Nancy. We were pleased to have Ms. Silvia Martini join us as the most recently appointed public representative.

I appreciate all of the hard work and dedication that was put in this past year. It was my honour to be a part of such a wonderful cohesive team. I look forward to working with many of you again this upcoming year in my position as Past-President. To those of you who will be moving on to other endeavours beyond serving on the CDSS, we will miss you. Thank you all for the trust and support in allowing me to serve this past year as President of the College of Dental Surgeons of Saskatchewan.

Yours truly, Aaron Bazylak

REGISTRAR'S REPORT - DR. DEAN ZIMMER

An introduction, I am a graduate of the University of Saskatchewan College of Dentistry 1999 and a practicing general dentist in my hometown of Regina. I have been a participant with the CDSS since 2005, serving on committees, the Council, and as President, and as of June 2023, have now been appointed to serve as Acting Registrar in the interim. In an acting capacity, the Council has determined the focus of the appointment: to define and clarify the role and time commitments of the Registrar position within the current organizational structure; to progress the update of the regulatory bylaws; and to align the regulatory processes, policies, and standards to the decisions of Council.

Registration and Licensing

In 2022, 576 dentists registered with active licensure (503 general dentists, 65 specialists, and 8 academic). In 2023 (as of August 31), 591 dentists registered with active licensure (517 general dentists, 64 specialists, and 10 academic)

Currently, of the 591 dentists, 82 are international graduates.

Professional Conduct, Discipline, and the Complaint Process
In 2022, 47 Professional Conduct Investigations – 38 patient complaints and 9 advertising concerns.
38 patient complaints – 22 no further action, 22 consent to conditions, 3 to be completed.
9 advertising concerns – 3 no further action, 6 consent to conditions.

In 2023 (as of August 31), 49 Professional Conduct Investigations – 41 patient complaints and 8 advertising concerns. 41 patient complaints – 7 no further action, 6 consent to conditions, 28 to be completed.

- 8 advertising concerns 1 no further action, 1 consent to conditions, 6 to be completed.
- In 2022, no Professional Conduct Referrals for a Discipline Hearing.

In 2023, no Professional Conduct Referrals for a Discipline Hearing.

Standards

In 2022, 8 standards and guidelines were approved or updated by Council, including the Code of Ethics Standard and Sedation Standard.

In 2023, 4 standards and guidelines were approved or updated by Council, including the Advanced Facial Esthetic Therapies and Adjunctive Considerations Standard.

Regulatory News

During this past year, amendments and updates have been made to the Dental Disciplines Act and the Health Information Protection Regulations.

I would like to acknowledge the ongoing efforts of all Committee members and Council members who serve significant hours, and often without recognition, for all of their contributions to the public, the registrants, the College, and the profession.

Lastly, I would like to commend the CDSS Executive Director Jaime Korczak, Council Chair Gord Gillespie, and the CDSS team of Jessica Gunn, Lisa Cassidy, and Meagan Fraser for their dedication to the CDSS and their initiative, diligence, efforts, and professionalism in all their obligations to the public and registrants. The culture of the CDSS has been one of self awareness and self improvement, and the Council and CDSS staff will continue to identify and strategize any necessary improvements.

As always, the CDSS is a dental regulatory body, that regulates dentists by the rights of the Minister of Health, Government of Saskatchewan, via the Dental Disciplines Act 1997. This is to say, the Government delegates, through legislation, the responsibility to the CDSS to license and regulate dentists in Saskatchewan in the public interest.

Dr. Dean Zimmer

EXECUTIVE DIRECTOR'S REPORT- JAIME KORCZAK

For the CDSS, the 2022 year proved to be a very challenging, and yet an exciting one, in many ways. While my tenure as Executive Director only began in November of 2022, I have had the honour and the privilege of being apart of this great organization since 2021. Together, working alongside our Chairman, Gord Gillespie as he stepped in as Interim CEO in June of 2022, we toughed out changes in staff, implemented new HR policies, and reviewed our expenditures. As a result, I am pleased to report that the CDSS is moving forward with a fresh, modern approach for our members, while maintaining the traditional and reverential aspects of a regulatory body, keeping public protection at the core. Some key highlights to report:

- Staffing:
 - While we said goodbye to six CDSS staff in 2022, we were pleased with the addition of three new employees who have assumed those six roles, by end of the same year: Jessica Gunn, Licensing & Renewal Coordinator, Meagan Fraser, Communications & Marketing Specialist, and Lisa Cassidy, Coordinator of Professional Standards and Complaint Process. The four of us have become a tightknit team, reshaping the CDSS, and supporting the office, council and members, along the way.
 - In June 2023 we saw the appointment of Dr. Dean Zimmer, as Acting Registrar. Dean is a long-serving member of the CDSS, serving on many committees and council, wherein I had the privilege of working with him in 2021/22 while he was President. Dean brings a detailed, level-headed, modern approach to the regulatory aspect of the CDSS. We are grateful for his insight and direction.
- Saskdentists website:
 - Online Renewals--November 1, 2022, the new online renewal system was launched to members.
 Ease of submission and member access to licensing information, along with database accuracy, were the key goals of this system. The feedback was extremely positive from members. We are now able to receive accurate, up-to-date information direct from members, in real time.
 - CE Self-Submission--March 2023, the new online CE self-submission was launched to members.
 Once again, ease of submission, accuracy and turnover of CE credits were the goals, with great success. Again, feedback has been very positive since implementation.
 - Registrants--March 2023, a revision and update to the Registrants page on the website to allow for ease of application for new registrants to the CDSS.
 - Standards Page--May 15, 2023, the Professional Standards are now linked on the *public side* of the Saskdentists website, under the Public Protection tab.
 - COMING SOON: we are currently in test mode of the new *member portal side* of the Saskdentists website. This project was a long time coming, which we are very excited about. Stay tuned for more details on this launch!
- Member Benefits:
 - Communications—reaching our members with pertinent and timely information is of our utmost importance. We have implemented a banner of "*In the Public Interest*", capturing regulatory news and updates to standards, as well as "*On Your Behalf*", detailing member benefit news, committee nomination requests, and other general updates.
 - Upcoming Continuing Education opportunities were frequently shared to members, along with organization of the upcoming Sask Oral Health Conference in September 2023! Check out the CE tab on the website for upcoming opportunities.
 - As a reminder, we are in partnership with PAR Consultants in Saskatoon and Regina, as well as the MAP (Member Assistance Program), under CDSPI. Please reach out for more details if you are not familiar with these programs.
 - Newsletter—we are pleased to provide our members with a high quality, free quarterly newsletter containing timely articles and updates from the CDSS.
 - We are also currently working on some other exciting partnerships which will allow our members to save money in this trying, inflationary market. Stay tuned!
- Finance:

- We are currently in the process of streamlining our bookkeeping and finances at the CDSS. Part of this is sharpening our pencils when it comes to expenses, maintaining fiscal responsibility for our members.
- December 2022 saw the renegotiation of another ten-year office lease at Midtown Tower for the CDSS office, which allowed us to negotiate lower rates and a generous subsidization from Midtown of some much needed and substantial tenant leasehold improvements. Renovations were completed in August 2023. Please stop by the CDSS office at anytime to say hello!
- By the request of council, a full financial audit by MNP is currently underway for the 2022 fiscal year.
- College of Dentistry/Sask Oral Health Professionals:
 - We have further strengthened our relationship with the College of Dentistry, by meeting frequently with the College Dean, Dr. Walter Siqueira, to discuss pertinent issues and initiatives between our organizations.
 - White Coat Ceremony--we are pleased to be a part of the White Coat Ceremony by sponsoring the coats for the second-year students, with attendance by some of our staff and council. Plus, a rousing and encouraging speech by our President, Dr. Aaron Bazylak. We look forward to this annual event.
 - Conference volunteers/first-year dental students—a call for volunteers was sent out to the College of Dentistry for the 2023 Sask Oral Health Conference, with the CoD graciously supporting the idea for first year dental students to participate! We truly hope this becomes a long-standing tradition going forward between our two great organizations.
 - A quarterly update will also be provided by Dean Siqueira to the members by way of a regular feature in our newsletter, coming soon!
 - Dr. Zimmer and I also remain in regular contact with our Sask Oral Health Professional counterparts (Hygienists, Assistants, Therapists, Denturists), with bi-annual formal meetings, and informal touch points throughout the year.
- Canadian Dental Care Plan/Government Relations
 - 2022 was a busy year for the Provincial-Territorial-Dental-Associations (PTDA) with the announcement by the Federal Government of a Federal Oral Healthcare Plan. The interim launch of the *Canada Dental Benefit* in December 2022 has since allowed for ~315,000 children under the age of 12 to be subsidized for access to care. This plan will continue until the launch of the Canada Dental Care Plan.
 - For the past year, each provincial ED/CEO has met monthly together under the direction of the Canada Dental Association (CDA), to strategize and cohesively work together on what is best outcome for patients and dentists under the new Canada Dental Care Plan (CDCP). A unified GR/PR campaign was agreed upon and launched in summer 2023, sharing unique messaging on our respective social media channels. This is to educate government officials and the public on the importance of oral health care.
 - CDA has worked tirelessly behind the scenes, meeting with Federal government officials, including, Federal Health Minister, Hon. Jean Yves Duclos, to discuss with them the impending CDCP.
 - Plans for the CDCP are fluid and constantly changing, so we will strive to update our members as things develop. Please take advantage of the toolkits shared with our members for educating staff and the public on the Canada Dental Benefit.

• President Bazylak and I met with local MP, Corey Tochor, for discussion on the CDCP. As well, meetings were held with former Health Min. Paul Merriman virtually, as well as in person, at the June council meeting held at the Dakota Dunes Resort. We are pleased to have a great relationship with our Provincial Government officials and look forward to working closely with the recently appointed Health Minister, Hon. Everett Hindley, in the years to come.

These are just a few key highlights of some initiatives and projects we have undertaken in the past 10 months. As I write this down, I am strengthened by how much we have accomplished and look forward to where we go from here.

In closing, I wish to thank Dr. Aaron Bazylak for leading the way this past year as President. This was a challenging year of transition at the CDSS, which he graciously took the lead in the decisions we made. I truly enjoyed our trips to Toronto and Winnipeg this past year for CDA meetings, and our frank discussions on the important and maybe not-so-important matters (like pets, hunting and music).

Thank you, too, to the CDSS Staff, Dr. Dean Zimmer, and Council for their support and guidance, with a big congratulations to our incoming President, Dr. Derek Thiessen—it's going to be a great year! And lastly, a heartfelt thank you to our members for their patience and positive feedback. I love hearing good things about our staff, that you appreciate the open communication, enjoyed a CE course you attended, or have general questions. This helps us continuously improve our systems for you, the members. And if I can leave you with one request—please submit your nomination for council at the next election, vote, or volunteer for a committee. Your voice can shape the future of the CDSS!

Respectfully submitted, Jaime Korczak

CHAIR'S REPORT – GORD GILLESPIE

Like no other, 2022 was a year.....

... To reflect on the challenges COVID brought to the world and remember the challenging conditions our registrants worked under while safely serving the public. A sincere Thank You for your patience and support of Council and Management under such trying and uncertain circumstances.

...Filled with optimism as we moved away from most COVID protocols and developed a "new normal" clinic routine within our profession.

...Dedicated to a "back to basic" approach where a review of Regulatory Bylaws, the Dental Disciplines Act as well as internal policies, procedures, standards and day to day practices was undertaken to ensure we continue to meet our obligation to safely serve the public while balancing our commitment to provide guidance, assistance and support to our registrants.

.....That saw a complete restructuring of our administration functions in the organization to fulfil our regulatory obligations within the Registrars role, while consolidating, enhancing and expanding our membership services functions within the role of the Executive Director.



.....Thankfully 2022 is behind us!

Thank you to each and everyone one of you – the dedicated and talented professionals that have committed to safely serving the public in its need for oral healthcare. It is a privilege to be play a minor role in your organization.

All the very best wishes for good health and great happiness to you and your families.

Gord Gillespie ICD.D Council Chair

SERVICE AWARDS

50 YEARS

Don Johnson

45 YEARS

Harold Weiss Garnet Packota

40 YEARS

YUNG TIM CHUNG FRANK KOWBEL LOREEN LARSON WILLIAM (BILL) MOYER

35 YEARS

RAJ BHARGAVA ADRIENNE GALLAGHER CARMEN GILLIES CHRISTOPHER HAUNSPERGER FLOYD PUCHALA CAMERON ROBERTS ROBIN SLOWENKO CURTIS STARK

30 YEARS

MICHELE ACKERMAN L. SHAUN BRAKSTAD THOMAS CARLSON MICHAEL ROSENHEK

25 YEARS

KRISTIN GOOS MELINDA KLASSEN DENISE KOEBERLIN KURT OLAFSON CAROLYNN OLEKSYN CRAIG OSTER MIKE PRESTIE PARVIZ YAZDANI



EXECUTIVE COMMITTEE REPORTS

GOVERNANCE COMMITTEE

The objectives of the CDSS Governance Committee are as follows:

- i) Foster and promote excellence in Council governance.
- ii) Refine, monitor, and conduct annual Council elections.
- iii) Guide Council appointed Committees in the execution of their duties as may be required from time to time.
- iv) Guide Statutory Committees in the execution of their duties as may be required from time to time.
- v) Review the Colleges policies and processes for identifying, assessing, managing, preventing, and mitigating risk to ensure their appropriateness.
- vi) Develop and review a risk framework that defines the type and levels of risk the organization faces within the primary risk categories of business continuity, regulatory compliance and the organization's reputation.
- vii) Act as liaison with the organization's legal counsel.

As such, the committee has spent considerable time over the past twelve months developing, refining, updating, and implementing several important CDSS policies. These specifically include modernizing and streamlining the election process through a revitalized Election Policy and mitigating risk to the public and college membership through a yet-to-be approved Criminal Record Check Policy. The Governance Committee has also begun the framework for the CDSS Whistleblower Policy to promote transparency.

As I move on as Chair of the Governance Committee, I am confident that it is in good hands with Dr. Mike Fowler assuming 2023-2024 Chair responsibilities.

I would like to personally thank Council's newest member and member of the Governance Committee, Mrs. Silvia Martini. Mrs. Martini was appointed to Council as a public representative this past spring, and brings with her a wealth of governance experience and knowledge that will be an asset to this committee going forward. I would also like to thank Mr. Gord Gillespie, council chair whose experience and knowledge keep our committees running at maximum efficiency. Finally, I would like to thank Mrs. Jaime Korczak and her team in the College office. Their exceptional work behind the scenes is truly appreciated.

Respectfully submitted,

Derek Thiessen, DMD President-Elect, CDSS



As it turned out this past year term was a very busy and productive one for the HR team.

Firstly, I would like to thank all of the members of this committee who contributed their time, experience and expertise towards achieving many positive steps along the way to a very stable CDSS.

The first main order of business was to promote Ms. Jaime Korczak permanently into the position of Executive Director of the CDSS. She previously was in the position of Executive Assistant, being an integral part of the CDSS main office group and time and time demonstrated the leadership abilities that were needed to become our Executive Director.

The HR group was then tasked by Council to find a person that could replace Dr. Uswak as the CDSS Registrar. After many meetings and an interview process the HR Committee made the recommendation to Council for Dr. Dean Zimmer to be hired as an Interim Registrar. In addition to carrying out all regular duties of Registrar, a report is to be made to Council by Dec 31, 2023 outlining a comprehensive system of processes, procedures, and policies to develop a framework for the terms of a permanent Registrar position. This work will form the basis of a new registrar search and hiring, with a posting date of February 1, 2024.

The HR group, under the direction and support of Council, renewed the contract term for Mr. Gord Gillespie as Chairperson for the CDSS for another year term starting on September 1, 2023.

As Chairperson of the HR Committee I thank everyone on this committee for their hard work and dedication over the last 12 months as well as all of CDSS Council for their support and guidance.

Yours truly, Aaron Bazylak

FINANCE COMMITTEE

Comparative Income Statement

- 1. Overall expenses down, honorariums still accounting for approximately 120K in expenses, this will be addressed with the ad hoc CRC committee in restructuring honorariums for committee and sub-committee members.
- 2. Promoting the Profession Fund has been created to replace the old Sask. Dental Fund, giving CDSS complete control over allocation of these funds.
- 3. Revenue from SOHC (conference) has not been collected as of July, accounting for the decrease in posted revenue to date.

Balance Sheet

- 1. Capital assets being depreciated annually.
- 2. Finance committee suggests a 1 million cashable GIC (current rate offered 5.2% for 1 year). Moved by Don Robinson, Seconded by Wes Thomson. Will send for council approval.
- 3. Management suggests freezing fees for the 2024 year due to in office savings (salaries specifically).

4. Currently holding approximately 50% of yearly operating expenses in cash. Will want to continue this trend for unforeseen expenses (staff severance, potential legal expenses, etc.).

Office Renovations

- 1. Returned to floor 12 in Midtown early August. Planning an open house the Thursday prior to the October council meeting.
- 2. Quoted for project \$249K, actual was 246K. 21K in unforeseen overages relating to asbestos management, and fire rating sin-reactions for HVAC), we are petitioning midtown to cover some or all of this cost.
- 3. Midtown to be reimbursing us for leaseholds, total net cost to the CDSS should be \$113K.

Audit Update (MNP)

1. No concerns for MNP yet, but also no recommendations. This process is ongoing and we will await further recommendation from MNP upon completion of the audit.

2024 Budget Pre-work

- 1. Management to review Schedule 1 and report to the Finance committee in October to review any proposed changes.
- 2. Salary bands and band movement policies for CDSS staff to be revised based on 2022 benchmarks and accounting for inflation.

Accounting System Software

- 1. Currently using SAGE. \$1900/year cost. Is not a user friendly system, and poorly integrates with our banking systems.
- 2. Considering change to Quickbooks. \$1000/year cost, but will have an up front fee of \$3-4K to switch and import all old records. This process will take 6-8 weeks to complete. Ideally have completed prior to 2024 memberships fee collection.
- 3. Motion made to switch systems from SAGE to Quickbooks by Mike Fowler, Seconded by Wes Thomson. This motion will be presented to Council for approval.



STATUTORY COMMITTEE REPORTS

PROFESSIONAL CONDUCT COMMITTEE

The Professional Conduct Committee (PCC) continues to operate under the mandate of the Dental Disciplines Act.

The Professional Conduct Committee is a Statutory Committee required under the Dental Disciplines Act (The Act) Section 28(1-3), stating each association shall establish a Professional Conduct Committee. In addition, as required under The Act Section 15 (2.f.i) and 15 (2.f1) each association can make bylaws to prescribe procedures for the review, investigation and disposition of complaints by the PCC or the mediation of complaints alleging that a member is guilty of professional misconduct or professional incompetence.

The PCC includes Registrants of the CDSS as well as a member of the public. Tin the 2023 calendar year, the Professional Conduct Committee has welcomed Lisa Cassidy as the Coordinator of the Professional Standards and Complaints Process. She has done a phenomenal job in all aspects.

The PCC continues to work closely with the Advertising Review Committee as well as the Quality Assurance Committee. The PCC relies on the expertise and analysis of both of these committees to aid in its decision making.

The PCC investigates and provides a written report on all complaints that are forwarded to it by the Registrar of the College of Dental Surgeons of Saskatchewan. Following the review of each case, the PCC will address the concern in a manner addressed in Section 29 (3).

In 2022 there were 47 complaints made to the Registrar of the College of Dental Surgeons of Saskatchewan. Of those complaints, 47 were forwarded to the PCC for further investigation. 9 of the forwarded complaints involved advertising violations and 38 involved clinical care. Of the 47 case investigations, 22 were deemed to require no further action and 21 were resolved with the CDSS Registrant signing a confidential consent to conditions. The remaining 4 investigations are still ongoing.

As of July 31, 2023 there have been 43 Complaints made to the Registrar in 2022. 42 of these complaints have been forwarded to the PCC for further evaluation. Of these cases, 36 involve clinical care and the remaining 6 involve advertising violations. The investigation has been completed for 8 complaints. There have been 4 cases that were deemed to require no further action and 4 were resolved with the CDSS Registrant signing a confidential consent to conditions.

The CDSS continues to evaluate its processes in order to best serve its mandate. The PCC will evaluate these processes as they are impacted by the recent amendments to the Dental Disciplines Act.

The Professional Conduct Committee encourages all Registrants to stay up-to-date with any updates from the Registrar or the PCC in any CDSS Correspondence. The PCC Continues to see a number of cases related to the following areas:

- 1. Documented Informed Consent for all procedures
- 2. Proper coding based on the USC&LS descriptors, especially as it relates to examination codes



Thank you to all the members of the PCC who dedicate enormous amounts of their time, experience, and knowledge to help ensure that this vital role of the CDSS is executed.

Respectfully submitted, Dr. Drew Krainyk, Chair

DISCIPLINE COMMITTEE

Nothing to report.



STANDING COMMITTEE REPORTS

PROFESSIONAL STANDARDS COMMITTEE

Nothing to report.

QUALITY ASSURANCE COMMITTEE

2023 has been a very busy year for the Quality Assurance Committee. The committee consists of seven practicing dentists who are tasked with investigating Professional Conduct Committee cases at the request of the registrar, Dr. Dean Zimmer.

The committee has performed many assessments for the Professional Conduct Committee in 2023. During the investigation process, the committee reviews the the complaints from patients, the member's response to the complaint, all patient records, and radiographs pertaining to the case. The committee then deliberates the specifics of each case through group emails and reports back to the Professional Conduct Committee with a summary of the case.

The QAC also continues its service to members by overseeing and supervising the very active Sterilizer Monitoring Program through both in-house and third-party spore testing. The chair of the committee are informed of any and all positive test results conducted by the University of Saskatchewan Monitoring Service. It continues to be a timesensitive and time-consuming process. The committee recommends that all members review the infection control guidelines to ensure that, in the event of a positive spore test, proper protocols are followed. I would like to extend a special thank you to Dr. Wes Thomson for overseeing the Sterilization Monitoring Program.

I would like to thank Dr. Paul Louie, Dr. Louie Kriel, Dr. James Dessouki, Dr. Kevin Saganski, Dr. Kristin Goos and Dr. Raj Bhargava for their hard work and dedication to their roles on the committee. I would also like to extend a special thank you to Lisa Cassidy for all of her hard work on committee matters.

Dr. Stéfan Piché, Chair, Quality Assurance Committee

ADVERTISING REVIEW COMMITTEE

The primary objective of the CDSS Advertising Standard (AS) is to protect the public from inaccurate, misleading, ambiguous, or non-objectively verifiable. The Advertising Review Committee (ARC) does not seek out non-compliant advertising, and instead relies on CDSS registrants and members of the public to submit advertising that they believe may violate the Advertising Standard.

As of August 31, 2023, the Advertising Review Committee has reviewed 8 advertising complaints on behalf of the PCC and 72 proposed advertisements submitted by CDSS Registrants.

As a reminder, AS 5 states that all CDSS licensed members, regardless of their position within a practice or corporation, are responsible for any communication or advertising that has a bearing on their practice. Earlier this year current and past members of the ARC, in consultation with the Professional Conduct Committee (PCC) and CDSS Administration made significant revisions to the AS to bring the document more in line with current social media advertising methods. These revisions were passed by CDSS council at the end of March. The current version of the AS is available on the CDSS website.

The revised AS now defines Internal Advertising (typically within a practice and to patients of record) and External Advertising (intended to attract patients and promote treatments), and outlines which category any given advertisement falls into. External Advertisements must comply with the entirety of the AS, whereas Internal Advertisements need only to comply with Section 17 of the AS.

Mandate:

The Advertising Review Committee (ARC) is a council committee and is a sub-committee of the Quality Assurance Committee (QAC). Subject to the Dental Disciplines Act (The Act) Section 15 (2)(o) and CDSS Proposed Regulatory Bylaw 3.10, the ARC is to regulate advertising by its members by implementing the current CDSS Advertising Standard (AS).

Objectives:

The ARC, at the request of PCC, council or the registrar shall:

- a) review and investigate advertising concerns and complaints and provide a written report to the PCC.
- b) preview CDSS registrant draft advertising and provide a written report back to the registrant.

The ARC recommends that all CDSS registrants that are actively advertising:

- 1. Ensure that they themselves, their staff, and or agents who are responsible for such advertising duties, read, familiarize, and understand the Advertising Bylaws and Standard.
- 2. Preview all draft advertisements themselves prior to submission to the ARC.
- 3. Submit those draft advertisements to the ARC for evaluation and pre-approval prior to distribution.

Please feel free to contact the ARC with any questions or concerns that you may have.

Thank you to Lisa Cassidy for (among countless other things) managing and organizing all aspects of Advertising Review. And thank you to ARC volunteers Drs. Harold Weiss, Josh Marshall, Hilary Stevens, Sok Sun, and Bilawal Hussain for your time, efforts, and commitment to the profession of dentistry.

Respectfully submitted,

Dr. Kevin Saganski, Chair, Advertising Review Committee

CONTINUING EDUCATION & LEARNING (CEL) COMMITTEE

The Continuing Education and Learning (CEL) Committee is a sub-committee of the Quality Assurance Committee and is tasked with setting and upholding the continuing education standards required for licensure. The standard can be found on the member's side of the CDSS website.

The year 2022 marked the return of an in-person Saskatchewan Oral Health Conference (SOHC), held September 22-

24 in Regina. As with 2019, registration was free for all CDSS members. There were 27 speakers, 34 sessions, 55 trade show vendors and 616 dentists and allied professional registered. The 2023 SOHC will be conducted in partnership with the Canadian Association of Public Health Dentistry, September 22-24 at TCU Place in Saskatoon. An online self-submission portal was launched in Spring 2023. This allows for faster turnaround time for transcripts.

Respectfully submitted,

Dr. Kevin Saganski, Chair, Continuing Education & Learning Committee

ECONOMICS COMMITTEE

So I am the bearer of bad news.

Let's start with the topics we have no control over.

The world economy and the Canadian economy is threatening to fall into a recession at a time when inflation is resisting all the increases the bank of Canada has thrown at it.

This creates the challenge of our practices becoming more expensive to operate at a time when our patients will have less disposable income which makes fee increases a razors edge between slowing demand and missing out on possible production.

The Canadian Dental Care Program is still in the works. The current situation where the \$650 benefit for children under 12 in the appropriate family income brackets will change to a more traditional set up. There are rumours that this will happen in June 24.

Our committee and the CDSS council are both awaiting details as there has been no information passed on from the Federal government in regards to how the program will be run, how the patients will be verified to be in the program, the method for the dentists and dental providers to be reimbursed, as well as the fee structure for the program.

We have participated with the federal government when information has been asked. Our economic consultants, Impact Consulting, have been hired to work with the government, the CDA, and other entities to aid in development of the program. Even having a presence in the room is not getting us any information as soon as we would like.

The federal government is fast tracking dentists who want to immigrate to Canada. There is a new policy, hopefully getting some results, that will also allow dental allied staff to be fast tracked as well. This will affect our dentist to patient ratio but hopefully will bring in staff to fight the nationwide shortage.

In Saskatchewan, our patient to dentist ratio has fallen to where we are behind NFLD and PEI. This is better for our patients as they have better access to care but does bring in competitive challenges between practices. This by no means is as bad as for example, downtown Vancouver or Toronto, but it is new for us.

Now for some things we can control, and need help. Our demographics in regards to practice ownership is changing. There are fewer principal dentists and significantly more associates. It is part of the business at this point and will continue to be. This is not what the Econ Committee wants to control, but the participation in the economic survey. With this change in practice ownership, as in fewer principles, we are missing the hygiene(and therapy) production that is not submitted with an associate survey. While we are getting a normal amount of surveys returned, the number of owner surveys returned is going down. That means the hygiene and therapy numbers will not be as predictive as they could be, the expense to gross ratio will also have doubts to its predictive power. These two shortcomings have a huge affect on our ability to gauge the business of dentistry in Saskatchewan and adjust the fee

guide in the best way possible. This does not mean what is being done is wrong, but the confidence in our decisions is not as definitive as it could be. In these challenging economic times we need information on staff wages, office expenses, and office production.

So, the Econ committee and the CDSS council ask for participation. We need participation increases in all surveys but in particular the procedure frequency report that comes out in January and it will be our turn for the full Econ survey, including expenses, this spring. If you can have your practice/company financials ready for early May, that would be great. If you are an associate, perhaps ask your principal dentist/ owner if you can share the information as if you were an owner, or just encourage your principal dentist to participate.

At the time this report was written, there was a call for more members to participate in our committee. These spots were not filled yet but hopefully by the time this AGM is taking place, or shortly after.

Submitted on behalf of the Economics committee, By Mike Prestie

Report to the College of Dental Surgeons of Saskatchewan

September 2023



www.ndeb-bned.ca

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Introduction

The National Dental Examining Board of Canada (NDEB) was established by an Act of Parliament in 1952. The Act makes the NDEB responsible for the establishment of qualifying conditions for a national standard of dental competence for general practitioners, for establishing the qualifying conditions for national standard certificate of qualifications for dental specialists, for establishing and maintaining an examination facility to test for these national standards of competence, and for issuing certificates to dentists who successfully meet these national standards.

Governance

Board Members

The NDEB Board comprises 12 members. Each provincial Dental Regulatory Authority appoints one member, and two members are appointed by the Commission on Dental Accreditation of Canada (CDAC). There is also a public representative appointed to the Board. The Board meets twice a year and other times as needed.

In April 2023, the Board welcomed a new representative from the Royal College of Dental Surgeons of Ontario, Dr. Noha Gomma.

Current Board Members			
Amarjit Singh Rihal, President	Manitoba		
Jim Richardson, Past President	British Columbia		
Stefan Haas-Jean, Vice President/Treasurer	Quebec		
Mintoo Basahti	Alberta		
Stefan Piche	Saskatchewan		
Noha Gomma	Ontario		
Andrew Rowe	New Brunswick		
Alan Robinson	Prince Edward Island		
Tanya Cook	Nova Scotia		
Sneha Abhyankar	Newfoundland		
Debora Matthews	CDAC Representative		
Jim Posluns	CDAC Representative		
Jan Sheppard Kutcher	Public Representative		

Table 1

The NDEB currently has seven standing committees. Each standing committee reports to the Board.



At the Interim Board meeting on May 13, 2023, elections were held to fill vacant positions on the By-laws Committee, Executive Committee, and Finance and Audit Committee. Dr. Mintoo

Basahti was appointed as a member of Executive Committee and Finance and Audit Committee, and Dr. Andrew Rowe was appointed to the By-laws Committee.

Finance

During the May 2023 Interim Board Meeting the Board approved the 2023-24 budget and a new fees schedule was adopted. The new fee schedule effective July 1, 2023, includes a reduction in the NDECC fee from \$9000 to \$8000, and a reduction in the Clinical Skills and Situational Judgement components from \$4500 to \$4000.

Recommended Examiners

The NDEB maintains a list of examiners recommended by the provincial Dental Regulatory Authorities, Canadian Faculties of Dentistry, Canadian Forces Dental Service, Royal College of Dentists, and the Dental Council of New Zealand. Examiners may be asked to participate in question development or selection workshops, the administration and/or evaluation of the NDECC, or to work as a content expert and assist in the construction of examination questions.

The NDEB has recently developed Terms of Reference for Examiners to assist in this process.

The following is a list of CDSS recommended examiners and activities which they have participated in in 2023.

Last Name	First Name	Activities
Berthiaume	Rhonda	January and June 2023 NDECC Evaluation sessions
Bumbac	Jamie	January, March and September 2023 NDECC Evaluation sessions
Churchill	Stacie	January and June 2023 NDECC Evaluation sessions
Friesen	Blaine	January, March and June 2023 NDECC Evaluation sessions
Fuchs	Dennis	NDECC Examinations, NDECC Evaluation sessions, Chief Examiners meeting, CDRAF Multi-Stakeholder Working group meeting, NDECC Protocol and Prototype Workshops
Goos	Kristin	January, March, June and September 2023 NDECC Evaluation sessions
Graham	Todd	September 2023 NDECC Evaluation session
Haunsperger	Chris	January and September 2023 NDECC Evaluation session
Klassen	Melinda	January, March, June and September 2023 NDECC Evaluation sessions
Markewich	Leonard	January, March and September NDECC Evaluation sessions, July 2023 NDECC Exam
Meyers	Craig	March, June and September NDECC Evaluation sessions, April 2023 Virtual OSCE Standard Setting, May, August 2023 NDECC Exams
Morrow	Casmeara	June 2023 NDECC Evaluation session

Piche	Stefan	January, June and September 2023 NDECC Evaluation sessions, August 2024 Board Video Conference, May 2023 Interim Board Meeting, April 2023 Board Video Conference
Roberts	Cam	March and June 2023 NDECC Evaluation sessions
Torrie	Heather	January, March and September NDECC Evaluation sessions
White	Kristin	January, March, June and September 2023 NDECC Evaluation sessions
Woo	Doug	January, March, June 2023 NDECC Evaluation sessions, February 2023 ACJ Selection workshop, April 2023 Virtual OSCE Standard Setting, May 2023 AFK Selection Workshop, June 2023 AFK Final Review, July 2023 NDECC exam
		Table 0

Table 2

Strategic Priorities

The NDEB current strategic plan identifies four key result areas: transition to electronic exam delivery, review the Equivalency Process blueprint, strengthen communication with stakeholders, and manage risk. The NDEB continues to make progress in obtaining the goals outlined in the strategic plan.

Transition to Electronic Delivery

The NDEB has a long-term plan to transition each of its paper-based examinations to electronic delivery. The conversion began with the DSCKE in 2018, and the NDEB has continued to transition examinations to the online platform. The NDEB has completed its transition to electronic delivery in 2023 with the delivery of the first Virtual OSCE.

Equivalency Process Blueprint Review

The NDEB has completed its review of the Equivalency Process. Over the last several years activities have been undertaken to support this review. A public notice was circulated in early 2021 outlining the changes to the Equivalency Process. Vision 2022: The Future of the Equivalency Process was a multi-step plan for introducing changes to each component of the Equivalency Process while maintaining the fairness and validity of the examinations.

Strengthen Communication with Stakeholders

The NDEB continues to work on strengthening communications with its stakeholders. Over the last year, communication has been focussed on education and addressing misinformation about NDEB processes.



The NDEB is working on engagement with groups that represent internationally trained dentists and organizations that support their integration into the profession. Through virtual and in-person meetings the NDEB is providing opportunities for these organizations to ask questions and express their comments and concerns about the NDEB processes. In addition, the NDEB continues to use post examination surveys to gain feedback on specific examinations. The response rate for the first NDECC and Virtual OSCE post-exam surveys indicate that candidates are taking advantage of the opportunity to be heard.

In June of 2023, the NDEB published a new web page "Are you Considering Canada". The page is intended to address some of the gaps identified by the NDEB in the information dentists have when considering pursuing a career in dentistry in Canada. It also works to correct misinformation about the length of time and cost of the NDEB process for graduates of non-accredited dentists looking to be certified by the NDEB.

Manage Risk

The NDEB continues to review and update its risk register.

Beyond 2024

The NDEB is in the initial stages of developing a new strategic plan which will assist the NDEB in maintaining a high level of exam development and delivery while keeping page with and adopting to rapid changes in the health-care environment.

Examinations and Certification

Certification in general dentistry

Obtaining NDEB certification means that an individual has demonstrated that they meet the competencies required of a beginning dental practitioner in Canada. The Dental Regulatory Authorities (DRAs) in Canada rely on the NDEB certificate as evidence that a potential licensee has met the national standard.

NDEB Certification: General Dentistry

Certified 2022	
Canada accredited dental program including degree completion programs	513
Other accredited dental programs	321
Candidates who completed the NDEB Equivalency Process	135
Total	969

In 2023 the Written Examination and OSCE were replaced with the Virtual OSCE. The Virtual OSCE is a summative examination that assesses the problem solving and critical decision-making skills required of beginning dental practitioners in Canada. Examination items are based on the knowledge, skills, and abilities of beginning dental practitioners in Canada. The Virtual OSCE will be the national standard of competence for dentists in Canada.

During the first administration of the Virtual OSCE, there were technical issues with the exam platform. The issues included slow response time within the platform and in some cases a loss of connectivity. The NDEB took steps to troubleshoot the issues during the exam window. After careful consideration, it was determined that in some centres, the contingency plan for administering the Virtual OSCE would be implemented to avoid the same issues occurring in Part 2 of the examination. The contingency plan involved offering the examination in PDF format on the laptops so that the radiographs and photographs would be of the same quality as those of the electronic platform.

The NDEB and its exam platform provider launched an investigation into the issues with it to determine the cause of the technical issues.

The Virtual OSCE is the latest NDEB examination to be delivered electronically. Over the last two years, we have successfully administered 14 examinations using our electronic platform. With the knowledge gleaned from those administrations, the NDEB undertook a number of provisions in preparation for the first administration of the Virtual OSCE. This included a simulated test completed in the NDEB office, infrastructure and Wi-Fi capabilities were confirmed and tested at all examination sites prior to exam day, and load testing was performed by the provider with more than the anticipated number of NDEB candidates.

March Virtual OSCE Statistics

Year	# of Candidates	% Pass
March 2023	720	88

Table 4

Equivalency Process

Graduates of non-accredited dental programs who want to be certified as general dentists in Canada must successfully complete the NDEB Equivalency Process or an accredited Qualifying/Degree Completion Program prior to being eligible for participation in the Certification Process. The Equivalency Process includes three examinations, the Assessment of Fundamental Knowledge (AFK), Assessment of Clinical Judgement (ACJ), and the NDECC.

Passing standards

Since the release of the first set of NDECC results, the NDEB has faced criticism about the difficulty of the exam and the high failure rate. Our stakeholders have raised concerns about changes in the fairness and validity of the NDECC. Despite these challenges, the NDEB is committed to ensuring that the NDECC continues to provide an accurate and reliable

assessment of dental competence that is in line with the expectations of a graduate of a Canadian dental program.

NDECC Pass Rates				
Historical Pass Rates - NDECC				
	# of Candidates	% Pass Clinical Skills Component	% Pass Situational Judgment Component	% Pass Overall
2022	379	40	43	16

Table 5

Historical pass rates for the Equivalency Process can be found on the NDEB website.

Equivalency Process Applications

The NDEB continues to receive over 1500 applications to the Equivalency Process each year. Applicants who have received their dental education in India, Iran, Pakistan, and Egypt account for three quarters of the applicant pool in 2022.

Equiva	lency	Process	Appl	ications

Year	Total
2022	1685
2021	1586
2020	1619
2019	1824
Table	e 6

With the consistent level of applications received annually, credential verification times have increased. Over the last year, several steps have been implemented to reduce verification times.

The NDEB has also implemented an appointment system for applicants to assist in understanding the required documents. Applicants who would like to speak to a credential verification specialist can book an appointment online for a 30-minute consultation. Since the implementation of this system the NDEB has seen a reduction in "incomplete" applications.

Access to Examinations and Timelines

Since 2020, the NDEB has seen an increase in the time it takes for many candidates to complete the Equivalency Process. This is the result of many factors including reduced testing capacity during the pandemic, increased applications, limitations in seats for computer-based

examinations, and the cancellation of compromised examinations, such as the 2021 AFK, which was the subject of a misconduct investigation.

For the November 2023 ACJ, capacity has been increased by 150 seats by using two electronic delivery models. Additionally, more NDECC clinical skills only seats have been added to the 2023 calendar. The NDEB will continue to explore ways to increase testing capacity.

Dental Specialty Core Knowledge Examination

In the fall of 2022, the NDEB requested that the Commission on Dental Accreditation consider revising the admission requirements for the DSATPs to remove the requirement for the DSCKE. In early 2023 the NDEB was notified that CDAC updated the admission requirements to remove the DSCKE. As a result, the last DSCKE will be administered in September 2023.

National Dental Specialty Examination

The National Dental Specialty Examination (NDSE) is the examination required for registration as a specialist in Canada. The first NDEB NDSE was administered in September 2020. The examination is delivered electronically at locations across Canada and in the US.

Over the last year, the NDEB has been working closely with the Royal College of Dentists of Canada (RCDC) to transition the NDSE back under the RCDC umbrella. The June 2023 NDSE was the last NDSE to be administered by the NDEB.

The NDEB and RCDC have been collaborating to ensure a smooth transition and positive exam experience for candidates in 2024. The RCDC will be launching a website solely dedicated to the NDSE. In October 2023, this website will contain the examination protocols, eligibility requirements, examination fees, application process, and other relevant information. In addition, the RCDC plans to hold virtual information sessions to provide additional information about the 2024 examination.

Pass rates for the NDSE over the last three years can be found in the following table. June 2023 results are not available.

NDSE Pass Rates

Pass Rates by Year					
		2020	2021	2022	
Graduates of Canadian Programs	Number of test takers	86	85	98	
	Pass rate %	92	89	78	
Graduates of American programs	Number of test takers	56	77	70	
	Pass rate %	86	68	66	
Total	Number of test takers	142	162	168	
	Pass rate %	89	79	73	
	Table 7				

NDEB NDSE Certification

Program	Total Certified
Canada accredited programs	224
US accredited programs	144

Table 8

M:\REPORTS\Reports to other organizations\2023\Report to CDSS September 2023.docx



The Canadian Dental Association (CDA) Annual Activities Report May 2022–April 2023



1815 Alta Vista Drive, Ottawa, Ontario, K1G 3Y6 Tel: 1-866-788-1212 reception@cda-adc.ca | www.cda-adc.ca



Message from the CEO

The Canadian Dental Association (CDA) is pleased to present this report on activities completed between May 1, 2022, and April 30, 2023.

By all measures, this has been a year of change, growth and evolution. The CDA has increased its impact on oral health policy federally and this will have tangible benefits for Canadian dental professionals and families alike for generations to come.

This activities report outlines how CDA navigated through this exceptional year. It explains the steps CDA took to expand its:

- knowledge and other supports to the dental community;
- > policy reach at the national level;
- advocacy efforts when responding to social issues;
- practice support service offerings to dentists; and
- > projects and initiatives in areas of focus.

CDA is proud to have played a leading role in working closely with the federal government as a trusted partner to help launch Canada's first-ever interim Canada Dental Benefit (CDB) in December 2022. The CDB provides dental care coverage for households with an annual income of less than \$90,000, and is a temporary measure to provide coverage for children under age 12 from uninsured families with low and middle incomes. The CDB is expected to support up to 500,000 children in Canada to help get access to the dental care they need.

Launching the CDB was a major benefit for patients without private insurance, and especially for those from lower income households or from marginalized groups in Canada. But launching the CDB is only the beginning of the larger Canadian Dental Care Plan (CDCP).

Throughout 2022-23, CDA engaged with a variety of groups in the dental profession to gather perspectives on how the federal government could help improve access to dental care for Canadians. Our discussions included consultations with representatives from provincial and territorial dental associations (PTDAs), other oral health organizations, and individual dentists from coast to coast to coast. Through a combination of virtual conversation series and in-person discussions, CDA worked diligently with PTDAs to develop a series of recommendations that form the foundation of our policy paper <u>Bridging the Financial Gap in</u> <u>Dental Care: Building a sustainable and effective federally funded program</u>. This paper serves as a policy roadmap for the federal government as it seeks to enhance access to dental care for all Canadians. As the federal government works towards fully implementing a dental care program for households with incomes under \$90,000 by 2025, CDA's message and focus will remain on ensuring viable approaches the government can take to narrow the gaps in access to dental care, while minimizing disruptions for the majority of Canadians who already have dental coverage through employer-sponsored benefits.

Along with members of the CDA Board of Directors, I continue to be amazed at CDA's response to our rapidly changing environment. Moving from the continued public health response within an evolving COVID-19 context, to the rapid mobilization and collaboration to respond to the federal investments in dental care, while maintaining key practice support services for Canada's dentists, the entire CDA team has demonstrated a commitment to excellence on behalf of the dental profession. As such, I would like to extend my sincerest gratitude to our dedicated staff, committee and working group volunteers, community stakeholders, and our Board of Directors who all play an integral role in CDA's success.

CDA will continue to serve as the unified voice speaking for the dental community in Canada. We will continue to use our unique position to advance dentists' priorities and keep the oral health of all Canadians at the forefront of national policy conversations.





Dr. Aaron Burry Chief Executive Officer



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Overview

About CDA

Founded in 1902, and representing the dental profession across Canada, the Canadian Dental Association (CDA) is a trusted brand and source of information for and about the dental profession, on national and international issues. CDA is a federally incorporated not-for-profit organization whose corporate members are Canada's provincial and territorial dental associations (PTDAs). CDA represents over 21,000 practising dentists from coast to coast.

Each provincial and territorial dental association that is a Corporate Member of CDA has one (1) elected Board representative who acts as a representative of the PTDA and serves as a liaison between the PTDA and CDA. The three northern territories have a single representative on the CDA Board. Dentists access CDA programs and benefits through membership in their Corporate Member PDA.

The Association des chirurgiens dentistes du Québec (ACDQ) is currently not a Corporate Member of CDA. Since 2008, Quebec-based dentists can access CDA programs and benefits as CDA Affiliate Members.

Mission

The CDA is the national voice for dentistry dedicated to the promotion of optimal oral health, an essential component of general health, and to the advancement and leadership of a unified profession.

Vision

- A Healthy Public
- A Strong Profession
- A United Community

Prioritizing Goals of Canadian Dentists

Provincial and territorial dental associations, faculties of dentistry, dental regulatory authorities and specialty groups each have their own goals to achieve. CDA connects all stakeholders across the dental profession, prioritizing the goals of CDA's Corporate Members and through these organizations Canadian practising dentists.

Corporate Members, dentists and dental and health care stakeholder groups benefit from CDA every day. CDA works with Corporate Members and stakeholder groups to discuss professional issues at the national level and to identify potential solutions for a range of issues impacting dentistry, oral health, small business relations, and more.

CDA Primary Areas of Focus

CDA's three primary areas of focus include **Knowledge**, **Advocacy** and **Practice Support Services**. CDA also offers a range of programs, such as the Dental Aptitude Test (DAT) and the CDA Seal Program, and other services to support the dental profession in meaningful ways.

Knowledge

CDA captures, analyses, and organizes information to create knowledge about oral health and the dental profession. This knowledge is used to support CDA's advocacy and practice support activities, and is disseminated to CDA Corporate Members, their member dentists, and to key stakeholders.

Advocacy

CDA lobbies the federal government on issues facing the dental profession in Canada and the oral health of Canadians. CDA's primary advocacy tools include government relations, media relations, and public education. In addition, CDA communicates with regulators and insurance companies to advocate for dentists and to help ensure they are treated fairly and can provide the quality care they are trained to provide to their patients.

Practice Support Services

CDA provides a range of practice support services and programs, which help ensure that dentists are efficient, secure and compliant with applicable regulations when sending e-claims, e-referrals and patient records electronically.


CDA Board of Directors (May 2022-April 2023)



Dr. Lynn Tomkins President



Dr. Mark Bochinski Alberta



Dr. Heather Carr President-Elect



Dr. Dana Coles Prince Edward Island



Dr. Jason Noel Newfoundland and Labrador



Dr. Bruce Ward British Columbia



Dr. Joel Antel Vice-President



Dr. Viktor Dorokhine NWT, Nunavut, and Yukon



Dr. Kirk Preston New Brunswick



Dr. Aaron Burry Chief Executive Officer



Dr. Brian Baker Saskatchewan



Dr. Stuart MacDonald Nova Scotia



Dr. LouAnn Visconti Ontario



Dr. Marc Mollot Manitoba



Ongoing Management of COVID-19 Pandemic

The Canadian Dental Association (CDA) continued to manage the effects of the COVID-19 pandemic on the dental profession throughout 2022-23.

CDA's <u>COVID-19 Response Team</u>, which was established at the onset of the pandemic in 2020, brought together the CDA leadership and senior staff. The Team has been led by Dr. Aaron Burry, CDA CEO, who is also a dental public health specialist.

Over the last year, CDA continued to monitor the impact of the prolonged pandemic and participated in key discussions with Health Canada and the Public Health Agency of Canada (PHAC) and encouraged the flow and exchange of information between CDA Corporate Members on pandemic-related issues impacting the dental profession.

CDA continued to participate in the Health Professional Forum of the Chief Public Health Officer (CPHO) of Canada. This Forum provided opportunities for input into the annual report of the CPHO and into the development of future initiatives of PHAC. Aside from the wealth of information this Forum has provided, CDA's participation in the Forum has allowed us to raise the awareness of PHAC on the importance of oral health data and the need for government support towards the collection of such data.

Advocacy:

CDA uses its national voice strategically to raise issues and concerns facing dentistry. As part of its advocacy efforts, CDA liaises directly with a range of federal government departments, including the Department of Finance, Health Canada, Indigenous Services Canada, PHAC, Employment and Social Development, as well as members of the House of Commons, Senate and Prime Minister's Office.

CDA works diligently to ensure that oral health remains a recognizable and significant public health issue. We inform key decision-makers about matters that directly impact dentistry and the oral health of our population. CDA has been extremely active in 2022-23 to help explain the ongoing challenges faced by dentists and their oral health teams not only due to the many disruptions brought about by the COVID-19 pandemic, but also to continue advocating for the oral health of all Canadians.

Dr. Lynn Tomkins, CDA President, and Dr. Aaron Burry, joined other oral health stakeholders in a roundtable discussion on June 16, 2022. The discussion was organized by federal Health Minister Jean-Yves Duclos and was a chance for CDA to shape federal commitments outlined in Budget 2022.

The budget committed to enhancing access to dental care and addressing access issues that impact uninsured Canadians. In a candid roundtable discussion, Dr. Tomkins made a point of highlighting CDA's concerns and questions about language contained in the budget documents. Dr. Tomkins indicated that "while we fully support efforts by all levels of government to improve Canadians' oral health, we're concerned that the timeline previously announced may be exceedingly ambitious given the complexity of this issue."

"While we fully support efforts by all levels of government to improve Canadians' oral health, we're concerned that the timeline previously announced may be exceedingly ambitious given the complexity of this issue."

- Dr. Lynn Tomkins, CDA President





CDA's advertising campaign in the Hill Times in 2022

Noting costing work done by the Parliamentary Budget Officer, Dr. Tomkins committed CDA to undertaking the following actions to realize the government's budget commitments in practical, feasible ways, including:

- working to narrow the gap for underserved populations' access to dental care;
- ensuring that there are minimal disruptions for Canadians who already have dental coverage; and
- collaborating with government about new and expanded dental proposals.

Supporting the launch of the Canadian Dental Benefit

On December 1, 2022, CDA helped launch the Canada Dental Benefit (CDB). In essence, the CDB marks the first phase of the Canadian Dental Care Plan (CDCP), which will provide dental coverage for households that earn less than \$90,000 a year for children under age 12.



The CDB:

- Provides eligible parents and guardians with direct, tax-free payments of up to \$650 per child per year;
- Provides a maximum of \$1,300 per child over the next two years; and
- Is available for two periods, (i) for care between Oct 1, 2022, and June 30, 2023, and (ii) for care between July 1, 2023, and June 30, 2024.

Dr. Lynn Tomkins, CDA President, joined Prime Minister Justin Trudeau and Minister of Families, Children, and Social Development Karina Gould at Western University in London, Ontario. Dr. Tomkins explained how early dental care for children is vital to ensure they have a lifetime of good oral health. She underscored the importance of the CDB and how it will pave the way for children across the country to receive the oral healthcare they need and deserve.

"Starting today, many parents can get their kids the proper dental care they need, without worrying about the bill. We will always be there for families who need it most, when they need it most, and we will keep working to deliver much-needed relief now, as we build an economy that works for all Canadians."

- The Rt. Hon. Justin Trudeau, Prime Minister of Canada



Government Gouvernemen of Canada du Canada





Photo credit: Adam Scotti, Office of the Prime Minister



The CDB is only the beginning. Over the coming months, coverage will expand to include people under 18, seniors, and people with disabilities. The goal is to have all eligible Canadians covered by the CDCP by 2025.

Canada



CDA Federal Budget Advocacy:

CDA was actively engaged in the 2022 federal budget and put forward a series of recommendations to help guide the federal government as they establish spending for 2022:

- 1. Support dentists and access to dental care as Canada transitions to life post-COVID, including:
 - **a.** continued access to the necessary cost effective N95 respirators and gloves to provide the safest possible environment for patients and staff;
 - **b.** moving forward on implementing the immediate expensing provisions in Budget 2021 for small business capital costs, with changes to ensure the provision:
 - i. is retroactive to March 2020 when dentists began making capital improvements and purchases to meet new infection control guidelines;
 - ii. benefits dentists who own the premises on which their office is located, in addition to those who lease their office space; and
 - iii. doesn't discriminate against dentists who run their offices as partnerships or sole proprietorships (as opposed to incorporated small businesses)
 - c. maintaining small business supports to sectors still suffering from the economic impacts of COVID-19, such as dental offices still operating at reduced capacity.
- 2. Commit to supporting a detailed Parliamentary study on improving dental coverage for Canadians, to be completed within the first year of the new Parliament. Such a study should:
 - **a.** look at ways of ensuring access to dental care for Canadians not already covered by employer-based plans or other publicly-funded programs;
 - **b.** should follow a framework of dental care in Canada continuing to be largely delivered by dentists in private settings; and
 - **c.** should focus on proposed programs that have a minimal impact on the majority of Canadians who pay for dental care via employer-provided plans.
- 3. Invest an additional \$600 million over the next five years in transfers to provinces and territories to support the maintenance and expansion of their publicly funded dental care programs. Priority would be placed on serving populations with specialized needs (seniors, children, low-income, Indigenous, racialized, and Canadians with disabilities), public health education and prevention programs, and where required ensuring adequate payment for services that reflect the current costs of dental care treatment in that Province, which have increased as a result of COVID-19. This new investment, combined with the portion of the Canada Health Transfer dedicated towards dental services provided in a hospital setting, would bring the federal contribution to publicly-funded dental care programs in-line with its contribution to services provided under the Canada Health Act (roughly 22%).
- 4. Move forward immediately with putting into place new front-of-package nutritional labelling as well as with legislation to restrict food and beverage marketing to children (such as previous bill S-228 in the 42nd Parliament) to help reduce sugar consumption by Canadians, a leading cause of tooth decay.
- 5. Given the unique oral health challenges faced by seniors in care facilities and the importance of oral health to overall health, ensure that any new national standards developed for long-term care facilities include a standard relating to oral health that includes:
 - **a.** An oral health assessment by an appropriately trained and licensed/registered health professional upon admission and annually thereafter;
 - **b.** Beginning as soon as possible after admission, a referral process to a dentist for examination, diagnosis and treatment planning;
 - c. A daily mouth care plan that is implemented by appropriately trained staff; and
 - **d.** Suitable infrastructure to support the appropriate delivery of needed care by the oral health care team.



Celebrating Successes:

CDA's advocacy efforts were successful in producing several key outcomes, including:

- The budget has reiterated a long-standing federal government commitment, most recently contained in ministerial mandate letters in December 2021, to develop a National School Food Policy and explore how more Canadian children can receive nutritious food at school.
- For the first time in history, final standards for long-term care for seniors include references to oral health.
- The Standing Committee on Indigenous and Northern Affairs has recommended that an oral health investment strategy be created to improve the oral health of indigenous communities. Additionally, the committee stated that the Government of Canada work with First Nations and Inuit partners and relevant stakeholders to review dental benefits provided under the Non-Insured Health Benefits program to ensure that coverage for procedures is comparable to other dental programs, such as the federal public service dental care plan, and that the approval process for procedures is also comparable to similar programs.
- As part of the Stop Marketing to Children coalition, CDA advocated for the government to move forward with
 proposed regulations requiring front-of-package nutrition labelling for food and beverage products, as well as
 restrictions on the commercial marketing of food and beverages to children. The Minister of Health's mandate
 letter contains instructions to move forward on both fronts, and the front-of-package nutrition labelling has
 begun to roll out with full implementation by 2026.
- Working with the federal government on a phased roll-out plan of federal investments in dental care to ensure a final plan is well thought out, and takes into account the expertise of Canadian dentists

CDA Recommendations for the 2023 Federal Budget:

Reflecting ongoing areas of advocacy, CDA submitted the following recommendations to the Department of Finance's 2023 pre-budget consultations.



Recommendation 1: That the government move forward with implementing the Canada Dental Benefit to enhance access to dental care for Canadian children under age 12.



Recommendation 2: That the government consult and collaborate with all relevant stakeholders, particularly dentists, on the development of a longer-term federally funded dental care proposal.



Recommendation 3: That the government act on CDA's recommendations to the House of Commons Standing Committee on Indigenous and Northern Affairs with respect to the accessibility and administration of the Non-Insured Health Benefits (NIHB) program.

Recommendation 4: That the government invest \$15 million over the next three years to support federal, provincial, and territorial oral health organizations with public awareness, patient education, and member support activities.



Recommendation 5: That the government implement the remaining measures from Canada's Healthy Eating Strategy to promote healthy eating habits amongst Canadians.



Recommendation 6: That the government ensure all large-scale federal health related surveys, including the Canada Health Measures Survey and Canadian Community Health Survey, regularly include an oral health component.



Recommendation 7: That the government support the oral health sector in addressing critical human resource challenges and staff shortages.



Recommendation 8: That the government expand the Canada Student Loan Forgiveness Benefit to include dentists and other oral health care professionals.



Days on the Hill:

As part of ongoing engagement with Members of Parliament (MPs), Senators, and senior government officials, CDA organizes and participates in the annual Days on the Hill events in Ottawa. The events normally include a series of meetings between these government representatives and dentistry's leadership and advocacy committee volunteers.

Due to the ongoing COVID-19 pandemic and Parliament sitting in a virtual/hybrid format, CDA's Advocacy Committee conducted the Days on the Hill meetings virtually. A total of 33 meetings took place, including with the Minister of Health and the Deputy Leader of the Official Opposition, as well as with many members of the House of Commons Health and Finance Committees. MPs were found to be highly engaged in their discussions with CDA representatives and Days on the Hill was a great success.

The progress of <u>women in dentistry</u>; the growing <u>shortage of dental assistants</u> and its impact on the delivery of care; the need for <u>federal investments in dental care</u>; and the importance of good oral health for those in <u>long-term care</u> <u>facilities</u> topped the CDA's topics of discussion with parliamentarians.



CDA's 2022 Days on the Hill leave-behind materials and Social Media Campaign, which feature key recommendations on the top issues facing dentistry and the oral health of Canadians.



Days on the Hill 2022 CDA Returns to Parliament Hill



(L. to r.): Dr. Aaron Burry, CDA CEO, Dr. Lynn Tomkins, CDA President, the Honourable Jean-Yves Duclos, Minister of Health.



(L. to r.): Dr. Lynn Tomkins, Jagmeet Singh, Leader of the New Democratic Party (NDP), Dr. Aaron Burry.



(T. to b.): Adam Chambers, Conservative MP for Simcoe North, Dr. Christopher Rohinson, CDA Advocacy Committee, Dr. Michael Sullivan, CDA Advocacy Committee, Dr. Daniel Albert, CDA Advocacy Committee.



(T. to b.): Dr. Nancy Auyeung, CDA Advocacy Committee, Dr. Sanjukta Mohanta, CDA Advocacy Committee, Sonia Sidhu, Liberal MP for Brampton South.



(Top. to bottom): Dr. Debort Matthews, CDA Advocacy Committee, Dr. Heather Carr, CDA Presidem-Elect, Dr. Daniel Alber, CDA Advocacy Committee, Carol Hughes, NDP MP for Algoma-Manitoulin-Kapaksasing



(Top to bottom): Dr. Debora Matthews, Dr. Joel Antel, CDA Vice-President, Dr. Heather Carr, CDA President-Elect Senator Patti LaBoucane-Benson.

Dr. Daniel Albert, CDA Advocacy Com



Advocacy Issues in 2023

Going forward in 2023, CDA will continue communicating with key government officials, spotlighting our key advocacy initiatives, including:

- To help ensure that a federal dental plan is well executed and thought out, and that it fills the necessary gaps in oral health care for Canadians.
- To help ensure that Indigenous oral health is not left behind and that government enact the recommendations shared by CDA at the Standing Committee on Indigenous and Northern Affairs in 2022.
- To work with the federal government on an action plan to assist with dental staff labour shortages as well as to support recruitment of dentists to rural and remote areas.
- To help ensure Canada's ability to track long-term trends in the oral health of Canadians through the collection of proper oral health research and data.

A Timed Approach: CDA Responds to Federal Government Considering New Federal Dental Program

March 2022: On March 22, 2022, the federal Liberal and New Democratic Party (NDP) parties announced a "confidence and supply" agreement, with the NDP agreeing to support the Liberal government on confidence votes until 2025 in exchange for a commitment on certain policies, including elements of a national dental care program.

April to July 2022: In the 2022 Federal Budget, the Liberals committed an investment of \$5.3 billion over the next five years towards providing access to dental care for low-income Canadians. CDA issued a statement, applauding this historic investment. Over the summer months, CDA began consulting with key oral health stakeholders through our virtual conversation series to hear how the federal investment can best be applied to improve the oral and overall health of underserved Canadians.

August 2022: Subsequently, on August 30, CDA issued a <u>news release</u> and published our <u>What We Heard Report</u>, which summarizes feedback from dentists and other oral health stakeholders from across Canada. These conversations provided an opportunity to draw from the expertise of dentists and the oral health care sector in Canada to help inform CDA's ongoing collaboration with the federal government. The series involved over 20 virtual conversation sessions across provinces, including sessions held with speciality representatives such as pediatric dentists, dentists specializing in care to persons with disabilities, dentists specializing in geriatric dentistry, and public health dentists. CDA shared the report outcomes with Parliamentarians, including Health Minister, Jean-Yves Duclos, the Deputy Leader of the Official Opposition, Candice Bergen, and NDP Health Critic, Don Davies.





September 2022: On September 13, 2022, the federal government released details on phase one of its plan to enhance access to dental care for Canadians. This meant that households earning less than \$90,000 will receive up to \$650 to help pay for dental visits by children under age 12. CDA issued a <u>news release</u> noting that allocating additional funding to enhance access to dental care for underserved Canadians echoes our long-standing recommendations to the federal government. CDA reiterated that as the federal government moves forward with the design and delivery of a permanent program, it should ensure that any new initiatives do not disrupt access to dental care for the large majority of Canadians who already have dental coverage through employer-provided health benefits.

"We are pleased to see that the government is taking a phased approach to this complex issue, which will allow time to consult and collaborate with all relevant stakeholders on a long-term solution. This is a once-in-a-generation opportunity to make a big difference for the oral health of millions of Canadians, and it is imperative that we all work together and get this right."

- Dr. Lynn Tomkins, CDA President

October to November 2022: This plan was introduced to Parliament in Bill C-31, and CDA was called to <u>testify</u> in front of the Standing Committee on Health, and the Senate Standing Committee on National Finance, to share expertise on the topic. The legislation was passed into law on November 18. CDA issued a <u>news release</u>, applauding the government for providing oral health care to children in need. CDA stressed that although Canadians visit the dentist on a regular basis, children continue to have high rates of oral disease. More than six million Canadians each year avoid visiting the dentist because of cost. Even though every province and territory in Canada has a publicly funded dental program for children, these programs vary from jurisdiction to jurisdiction, leaving significant gaps in oral health care for low-income families.

December 2022: On December 1, 2022, Dr. Lynn Tomkins, CDA President, was invited to participate in a press conference with the Prime Minister of Canada to announce the official launch of the Canada Dental Benefit. This took place in London, Ontario at the Schulich School of Medicine and Dentistry. At a second event in Ottawa, Dr. Aaron Burry, CDA CEO, joined Minister of Health Jean-Yves Duclos and Minister of National Revenue Diane Lebouthillier at a pediatric dental office.



Prime Minister Justin Trudeau and Karina Gould, Federal Minister of Families, Children and Social Development, held a media conference at Western University in London, Ontario, on December 1 to launch the interim Canada Dental Benefit (CDB). CDA President, Dr. Lynn Tomkins, was invited to bring remarks at this historic event. Also in attendance were Dr. Lisa Bentley, Ontario Dental Association President; Dr. Brock Nicolucci, ODA President-Elect; and Dr. Olaf Plotzke, President of the Canadian Society for Disability and Oral Health (CSDH).





February 2023: Since the launch of the CDB, CDA has advocated that the second phase of the program should be easy to access, not interfere with current employer-provided coverage, allow dentists and patients the flexibility to decide treatment needs, and fill the necessary gaps in current oral health care for Canadians. On February 28, CDA issued a <u>news release</u> and published <u>Bridging the Financial Gap in Dental Care: Building a sustainable and effective federally funded program</u>.

This policy paper outlines principle-informed recommendations about how the federal government's investment in dental care can best serve Canadians. These recommendations aim to increase knowledge and expertise within the dental community, while addressing a broader set of challenges facing Canadians in accessing and achieving the best oral health care.

The policy paper was developed in consultation with Canadian dentists, PTDAs, as well as the general population through surveys conducted by Abacus Data. It reflects a national viewpoint, is meant to serve as a roadmap for the federal government as it seeks to enhance access to dental care for all Canadians and will guide CDA's advocacy efforts for 2023. Download the policy paper in English or French, or read it on the CDA Website.

"We look forward to continued collaboration with Health Minister Jean-Yves Duclos, and his federal colleagues, to develop an approach that will narrow the gaps in access to dental care, while minimizing disruptions for those Canadians who already have dental coverage."

- Dr. Lynn Tomkins, CDA President

Key Recommendations:

- A Federally funded program should promote the delivery of dental care primarily through the existing network of dental offices, supplemented by public clinics, as needed.
- 2. Public dental care programs should remain a payer of last resort, after any privately funded coverage.
- **3.** A federally funded program must be designed to complement and improve the care that Canadians have through existing federal, provincial and territorial programs.
- 4. Program design should ensure that administrative procedures do not impact or delay the provision of care to patients.
- 5. The federal government should address human resource challenges and staffing shortages in the oral health sector.
- 6. Any federal dental care formula should ensure the cost of treatment provided to patients is fully covered.





In addition to funding access to care for vulnerable Canadians, CDA believes that the federal government should develop a comprehensive federal oral health strategy that addresses a broader set of challenges facing Canadians' oral health.

Oral Health Human Resources:

Staff shortages in dentistry are prohibiting practices from meeting patient demand, creating a bottleneck in dentistry's pandemic recovery, and has been exacerbated by the broader labour market challenges in health care and other professions resulting from the COVID-19 pandemic. Many challenges that dental practices face in the short term relate to staffing issues. Practices need to think creatively not only about staff recruitment, but also staff retention.

Labour shortage cycles take time to resolve. CDA has been monitoring this issue for some time and is working with a range of stakeholders to better understand the complex issues at play and to work on initiatives in the months and years ahead. Innovative solutions will be required to meet the current and future workforce challenge in dentistry specifically and in health care in general.

CDA is uniquely positioned to assess and forecast estimates on the supply of dentists and demand for dental care in the coming years, which directly impacts the dental auxiliary labour market. Although the current shortage relates mostly to dental assistants, there are indications that shortages could impact dental hygienists and other dental office staff as well. Five possible areas of intervention include:

- immigration
- compensation
- training and skills development
- recruitment, and
- retention.

CDA, in collaboration with the Canadian Dental Assistants' Association (CDAA) submitted a funding application to Employment and Social Development Canada's Sectoral Workforce Solutions program with an aim of addressing the human resource challenges faced by dental offices, particularly the labour shortage of dental assistants.

Over the last year, CDA participated in studies undertaken by the House of Commons Standing Committee on Health of Canada's Health Workforce, as well as the House of Commons Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA) on Labour Shortages and Working Conditions within the Care Economy. Submissions were provided to both committees, and CDA was also invited to appear before the HUMA Committee and provide testimony on the current labour shortages facing the dental



sector. In a final report released by the HUMA Committee, two of CDA's recommendations were published including that the Government of Canada:

- work with the provinces, territories, and other stakeholders to promote the alignment of educational and training opportunities in health care and other care economy sectors with future skills and labour needs; and further, that it consider supporting a wide range of strategies to make training in care-related fields more accessible, including through online learning, flexible training options such as microcredentials, and upskilling options for workers already in the care economy; and
- consider offering additional permanent residency pathways to temporary foreign workers with in-demand skills or experience, including in the care economy and in skilled trades.



CDA Advocacy Successes: A Timeline

CDA Advocacy Successes from 2018 to 2023.

CDA'S Place in a Changing World

The breadth and pace of global change has tested everyone over recent years. CDA has been more active in its response to broader social issues and global events, and their impacts on Canadians. Here are a few examples:

- The CDA expresses solidarity with the Government of Canada in condemning the invasion of Ukraine
- The CDA extends condolences to the Royal Family on the passing of Her Majesty Queen Elizabeth II
- The CDA honours those who have served and continue to serve our country today on Remembrance Day
- The CDA acknowledges the devastating loss of life caused by earthquakes in Turkiye and Syria, and encourages Canadians to lend their support as best they can



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Knowledge:

Corporate Communications:

CDA captures, organizes and disseminates information about oral health and the dental profession to CDA Corporate Members and their member dentists and to key stakeholders. Over the last year, CDA has captured and shared timely and relevant information about key issues affecting the dental profession and the oral health of Canadians through its corporate communications vehicles, as outlined below.

CDA Corporate Communications Snapshot



A snapshot of CDA's key communications activities during May 2022 to April 2023.

<u>CDA Essentials magazine</u> has featured information related to CDA's work during the pandemic, Q&As with Dr. Aaron Burry about federal dental care, summaries of CDA's other advocacy efforts, and a range articles on clinical, technological and other areas of interest for the dental profession. Between May 2022 and April 2023, 6-English and 6-French editions of CDA Essentials magazine were published.



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Journal of the Canadian Dental Association (JCDA.ca): Canada's only peer-reviewed dental journal, JCDA.ca is an open access publication that publishes original research articles indexed in Medline, Journal Citation Reports and Science Citation Index. Between May 2022 and April 2023, JCDA.ca published the following eight original research articles.





Online

Printable PDFs



<u>CDA Oasis</u> featured topics for clinical support, the latest information on COVID-19 impacting the dental profession, with numerous videos about mental health and wellness, clinical topics, and key dentistry-related events across Canada. Between May 2022 and April 2023, CDA produced 50 blog/video posts garnering nearly 40,000 impressions and 20 days of video views. Below is a roundup of video discussions held during the last year.

CDA thanks all interviewees for participating in these key discussions. If you would like to have a discussion that would be of interest to the Canadian dental community, please contact <u>publications@cda-adc.ca</u> with brief details, photos and/or web links to be considered.

Discussions in alphabetical order:

- 3D Ultrasound System May Lead to Risk-Free Diagnosis of Dental Disease
- CDA Annual General Meeting 2022
- CDA Publishes Landmark Policy Paper as Roadmap for Federally Funded Dental Care
- CDA Survey and Tracking <u>Results: October 2022</u>
- Celebrating International Women's Day 2023:The Vital Role of Female Leadership in Dentistry
- Co-Learning Opportunities During the Pandemic
- > COVID-19 Tracking: Wave 10 Results are in
- > Cybersecurity for the Holidays
- > Cybersecurity Mini-Workshop:
 - Workstation Security
 - Network Security
 - Disaster Plannina
 - Mobile Device Security
 - Remote Work
 - Security Policies
 - Password Security
 - Incident Management
 - Encryption
- > Days on the Hill 2022
- Dental Hive: A Staffing Solution for Dentists by Dentists
- Dr. Lynn Tomkins Recaps CDA's Days on the Hill 2022

- > Environmental Sustainability in Dentistry
- Federal investment in dental care: the story so far
- > Future Possibilities of Teledentistry
- > HPV Vaccination in the Dental Office
- Introducing ONCOllab: a new oral care guide for cancer care teams
- > Introducing the Lyle Best Humanitarian Award
- Latest CDA Survey Results and Tracking Now Available
- Maximizing Staff Retention and Recruitment in the Office
- National Day for Truth and Reconciliation and Orange Shirt Day 2022
- Oasis Highlights 2022
- Opioid vs. Opioid-Free Analgesia after Surgical Discharge
- Oral Health for Seniors: Patient Management and Helpful Resources
- Preventing Antimicrobial Resistance Together
- <u>Ready, Set, Launched: CDA</u> <u>Secure Send Mobile App</u>
- Registration Now Open for the NBDS Conference and Trade Show 2022
- Should Parents be Allowed in the Operatory?
- Study Shows Al-Controlled Sedation Method as Safe as Manual Injections

- The Growing Threat of Cybercrime: <u>How to Fight Phishing</u>
- > The Management of Root Perforations
- The Pierre Fauchard Academy: Initiatives that Grow and Promote the Dental Profession
- The Role of Dentists in the Diagnosis of Hypertension
- Tobacco Intervention for Dental Practitioners
- Transforming Dentistry: The Rise and Near Demise of Dentistry at Western University (Podcast)
- Transforming Dentistry:The Rise and Near Demise of Dentistry at Western University (Video)
- U of T Study Contributes to Major Change in U.S. Guidelines for Pneumonia Prevention in ICU
- Understanding and Managing Burnout in Dentistry
- Understanding the Pathogenesis of Molar Hypomineralization
- > WHO Adopts Global Strategy on Oral Health
- > Why Good Posture in Dentistry is Important
- World Antimicrobial Awareness Week: <u>A Message from the Deputy Chief</u> Public Health Officer of Canada





CDA Newsletter: The CDA Newsletter features items from all of CDA's communications vehicles/publications, including the videos and web posts, journal and magazine articles, and the latest content from CDA's website and social media channels in one convenient location. Powered by rasa.io – artificial intelligence (AI) technology that recommends articles to read based on topics that interests readers the most, are featured in the curated section of the newsletter. The more users open and click through to articles in that section, the more the technology will learn and customize content to their reading preferences over time. Between May 2022 and April 2023, CDA issued 48 English and 48 French editions of the weekly CDA Newsletter.

CDA's Media Monitoring email: Produced in-house 5 days/week, the CDA Media Monitor compiles news stories from a wide range of sources on what the media is saying about dentistry in Canada and around the globe, the COVID-19 pandemic, topics aligned with CDA's advocacy efforts and trends pertaining to overall health, the environment and technology.

CDA on social media: Over the last year, CDA was actively engaged on its social media channels, including Facebook, Twitter and Instagram. In 2022, CDA also began showcasing its posts on LinkedIn. Followers on all channels received regular updates and important information in their newsfeed about dentistry from a national perspective, COVID-19, as well as general information to encourage oral health maintenance and the importance of prevention.

Between May 2022 and April 2023, CDA issued 1,116 social posts on its Facebook, Twitter, Instagram, and LinkedIn accounts (in English and French). Additionally, CDA partnered with the FDI World Dental Federation to mark World Oral Health Day (March 20).

Overall, CDA's social posts achieved an engagement rate of 6.18% on Facebook, 2.52% on Twitter, 2.8% on LinkedIn, and 0.71% on Instagram. Engagement rates are metrics that track how actively involved the target audience is with content. Engaged consumers interact through "likes," comments and social sharing. CDA engagement rate on Facebook and Twitter is above average.

Top Social Media Posts per Channel:

Facebook: September 10, 2022





CDA Website: CDA's website (<u>www.cda-adc.ca</u>) offers important information about oral health care management and prevention to the public. The Practice Support Services (PSS) section of CDA's website is dedicated to members of PTDAs that are Corporate Members of CDA and to CDA Affiliate Members, which includes practice support services and tools, patient communication materials, and more.



Environmental Scan: CDA regularly performs an Environmental Scan which helps identify key trends and issues that are currently impacting dentistry or are expected to impact the profession in the future. It is one of the top products for PTDAs across the country, and offers an analysis of the political, economic, social, and technological environment, as well as the health and dentistry environment.

Three key environmental factors are impacting dentistry in the short term:

- The continuing impacts of the COVID-19 pandemic on Canadian dentistry, from both the ongoing functionality and evolution of dental practices and from the public's gradual return to pre-pandemic dental habits
- 2. The investment by the federal government in dental care for lower-income Canadians without dental insurance. This is a watershed moment in Canadian dentistry that will radically change the course of oral health care delivery.
- 3. The global and Canadian economies are in a major slowdown and retraction, with several ongoing turbulent challenges, including inflation and interest rates being much higher than seen in several decades.

These will continue to influence the evolution of Canadian dentistry, causing major disruptions across the entire environmental scanning spectrum. More than ever, political, economic, and health care factors will have a major impact on how dentistry and the oral health care sector adapts and evolves in Canada over the next few years.



In the past, the Environment Scan report identified and ranked dentistry megatrends for the coming years. However, for the 2023 edition, the scan reflects the limitations, uncertainty and extreme volatility in all key health, political, economic, social, and technological indicators. It identifies key supply and demand factors that will directly or indirectly impact Canadian dentistry in the short term. A key element of the scan is showcasing and organizing a variety of data from Canadian sources to help inform knowledge-based decision making. On top of the major environmental factors indicated above, some other key factors directly or indirectly impacting Canadian dentistry:

- Annual dental visitation rates are still below pre-pandemic levels
- Severe and worsening staffing shortages in dentistry and dental offices, as well as the entire health care system in general.
- Dental market consolidation to continue at an increased pace.
- Government priorities for health care system sustainability.
- Employment levels, interest rates, inflation, household spending, debt levels and savings rates all factor into the rate of economic recovery.
- Workplaces have changed considerably and some of those changes will be permanent.
- Potential redesign of employers' benefits plans as a result of federal public investments.
- Mental health issues affecting the profession and large segments of the general population.
- Digital disruptors will continue to create a paradigm shift and Canadians are adopting digital solutions and forming new, longer-term habits, such as online booking and virtual visits.





Consumer and public opinion research: CDA continues to work closely with Abacus Data, a leading public opinion research firm, to track public opinion and behavioural trends related to current issues facing dentistry in Canada. This research provides valuable insight about the ongoing trends and information about how Canadians are adjusting their dental visitation patterns due to a variety of factors including:

- the ongoing COVID-19 situation;
- worsening economic conditions;
- the impact of inflation; and
- changes in employer dental benefits status.

With the ground-breaking federal investments in dental care announced in Budget 2022, this public polling is instrumental in gaining a better understanding of the public's reaction towards this initiative, and to dive into specific areas, for example, issues surrounding their use of the Canadian Dental Benefit for children under 12, the first phase of the federal government's approach to dental care. An additional benefit of this research is that it enhances CDA's ability to collect timely data that is not available elsewhere on eligibility factors such as income levels and availability of private insurance and monitor how these change over time.

CDA has facilitated several presentations of the Abacus survey results to Corporate Member PTDAs and other dental stakeholders. The aim is to provide data to better support advocacy priorities, and to help anticipate changes and factors impacting oral health care demand over the coming months. With the emergence of the Omicron variant, economic downturn, and federal public investments in dental care, this proved to be a valuable service. CDA will continue this important data initiative throughout 2023 and will modify survey questions to add new elements with more extensive customization to gain a better understanding of many key public factors related to dental care use in Canada.





Practice Support Services:

CDA provides a suite of electronic Practice Support Services to help dentists run their practices, and ensure that they remain efficient, secure and compliant when sending e-claims, e-referrals and when sharing patient records electronically. These practice support services include:

- CDAnet;
- CDA Digital ID;
- CDA ITRANS Claims Service;
- CDA Secure Send; and
- CDA Practice Support Services website.



CDAnet and CDA ITRANS Claims Service: Conceived by CDA and its Corporate Members, and developed with member resources over 30 years ago, CDAnet and CDA ITRANS Claims Service remain an enduring membership benefit success of CDA. When dentists join a dental office, one of the first tasks they will be asked to do is subscribe to CDAnet and to the CDA ITRANS Claims Service—the widely accepted standard in Canada for transmitting dental benefit claims.

With these services, electronic claims cut the wait time for patients to receive reimbursements from weeks to days. Patients are also advised of the benefit payable immediately with CDAnet, which enables dentists who accept assignment of benefits to collect the exact amount of the uninsured portion while the patient is still at the office.

Most carriers process claims immediately and increasing numbers are also immediately processing predeterminations and accepting coordination of benefits claims electronically. CDA's "Made in Canada" system is a member benefit that comes at no additional cost to dentists. It has many advantages over systems in other countries, including the United States, such as:

- Dentists can see CDAnet claims sent and insurance responses on CDA's Practice Support Services website in real time excellent for troubleshooting claims issues.
- ITRANS 2.0, the latest version of ITRANS that further reduces privacy risks, eliminates ITRANS network slowdowns, and enables dental office software vendors to automatically update to the details for insurance companies accepting CDAnet claims received a significant updated in 2022. The latest ITRANS 2.0 software now automatically replaces the CDA Digital IDs before they expire. This feature will reduce downtime and the need for offices to periodically turn their attention to this activity.
- Certain carriers now accept X-rays and other documents electronically from dentists with CDAnet/ITRANS.

Other CDAnet highlights: Over the past year, CDA has significantly strengthened CDAnet with investments in technical tools for dental office software vendors, working with claims processors to help them process more claims electronically and renewing the CDAnet agreements with claims processors for their continued participation.

New dental office software vendors are being certified and we hope to attract vendors of specialist software so the dental specialty community can also benefit from CDAnet.

In Q1 2022, updated CDAnet messaging standards came into effect. Key changes include removing binary gender from CDAnet messages to ensure inclusivity and technical changes for claims processors that will enable more secondary benefit claims to be transmitted electronically.

CDA Secure Send: CDA Secure Send is an easy, simple-to-use system that allows dentists to exchange patient documents with anyone in a secure fashion. Thousands of dentists across the country subscribe to this service.



Dental offices are also becoming more aware of the legal obligation to adhere to privacy regulations. CDA Secure Send is also used by several organizations, approved by CDA Corporate Members, who have a need to exchange documents securely with dentists.

CDA Secure Send safeguards the confidentiality of patient data when sending patient information, such as X-rays, electronically. It is connected to CDA's directory of dentists, so senders can search for dentists by name, specialty or location. Dentists can use CDA Secure Send as their practice's preferred method of sharing patient files with other general practitioners, specialists and with patients.

CDA Secure Send Subscriptions: Dentists can use CDA Secure Send by signing up on <u>www.cda-adc.ca/securesend</u>. By March 23, 2023, over 13,400 dentists have subscribed to the service in over 9,600 offices. Growth continues to be driven by privacy requirements and an increased awareness of cybersecurity threats.

CDA Secure Send Mobile App: Last year, CDA initiated the development of a mobile app for CDA Secure Send. This app:

- allows dentists to take a picture using their phone and securely send it to a colleague while meeting privacy and recordkeeping requirements;
- provides another platform for quickly accessing Secure Send messages; and
- allows dentists to use Biometrics to access their accounts.

A video tutorial has been created on how to use the new mobile app. Promotional materials, including an a CDA Secure Send brochure, social media graphics, a variety of newsletter and magazine ad sizes, have been supplied to CDA Corporate Members to co-brand and disseminate to member dentists, as deemed appropriate.

The English version of the new CDA Secure Send mobile app became available in April 2022 as a free download from the iOS & Android app stores.

Brochure



Social Media Campaign



Advertising templates





Redevelopment of PSS Website: In late 2020, CDA initiated user experience (UX) work which involved strategy, testing and design to help create a more seamless experience for dentists using the PSS website. The UX work was completed in 2021 and web development has already started. The redeveloped PSS website will bring together all CDA information in one convenient location, making it easier for dentists to access critical information. CDA anticipates this project will be complete by the end of 2023, and will keep Corporate Members and stakeholders informed of next steps.

Dental Benefits Issues: Over the last year, the CDA Dental Benefits Committee continued to work towards implementing the Strategy for the Management of the Relationship between Dentistry and the Insurance Industry, which was approved by the CDA Board in 2020.

Part of this strategy focuses on the need to better educate dentists and patients about dental benefits and the way they are intended to function. As such, the Committee has been working on developing education materials for patients and dentists which will be rolled out over the next year. The committee continues to address issues with individual insurance companies that are brought to its attention by PTDAs. Gathering significant additional information for review, and obtaining/providing clarifications with a carriers involves perseverance, which may mean that resolving issues takes longer than hoped.

To complement the work of the Committee, CDA staff has been working with the Extended Healthcare Professional Coalition (EHPC), an organization that groups nine associations who are engaged in government relations activities that highlight value of the health care services delivered by professionals whose services are privately paid as well as advocacy work related to the health benefit industry. CDAs work with EHPC has resulted in an increased willingness by EHPC members to push back against content in public education material published by the Canadian Life and Health insurance Association which conflicted with dentistry's positions on health benefits.

Uniform System of Coding and List of Services (USC&LS): In 2022-23, work on the USC&LS has been focused on coding issues that could expose dentists who have tried to provide accurate statements of services rendered on patients' claims to punitive actions by insurance companies. In turn, this could cause plan members not to receive the benefit they are entitled to under their plan.

Progress has been made towards the development of the electronic-first USC&LS publication process. For the first time this year, purchasers of the USC&LS have received additional electronic files which simplify system updates while minimizing opportunities for errors.

ISO/TC 106 Dentistry: Two years after the COVID-19 pandemic struck, the 2022 annual meeting of ISO/TC 106 followed a hybrid format which allowed both in-person and remote participation. The Canadian delegation joined the meeting virtually, but next year, the meeting will be held in-person only.

Part of the work of the ISO/TC 106 is to manage and maintain the ISO Dental Vocabulary, which involves the harmonization and abbreviation of dental codes, and developing terminology for forensic orodental data. This year, CDA accepted becoming the host of the Secretariat of ISO/TC 106/SC3 Terminology, which is under contract by the Standard Council of Canada.

In addition to working on an amendment to the ISO Dental Vocabulary, ISO TC 106:

- develops standards for designating tooth development stages to support forensic identification;
- classifies tooth restoration preparation to facilitate the selection of restorative materials; and
- maintains active liaisons with ISO/TC 215 Health Informatics and ISO TC 272 Forensic Sciences.

Thanks to the involvement of experts from 31 participating countries, ISO/TC 106 is also working on 45 standards related to:

- terms and definitions;
- performance, safety, and specification requirements of dental products; and
- clinically relevant laboratory test methods.



Mental Health and Wellness:

CDA is committed to continue supporting the mental health and wellness of individuals and their families in the dental community. CDA regularly promotes mental health and wellness resources via our corporate social media channels, Help Desk service, and on the CDA website. In particular, CDA has been promoting CDSPI's <u>Members' Assistance</u> <u>Program (MAP)</u>, which provides a variety of resources to help individuals deal with life's challenges.



Free counselling, referral and information service for dentists, dental office employees, and their families.

As part of their commitment to give back to the dental community, CDSPI sponsors a no cost insurance program as well as MAP provided by LifeWorks that offers short-term counseling, referrals, information and support systems for your physical, emotional and mental wellbeing. This is free for dentists, their staff and families, and dental students.





Workplace Mental Health & Wellness for Oral Healthcare Professionals

Mental Health in the Workplace: Safeguarding mental health and overall wellness is crucial for building resilience, maintaining a positive outlook, and improving our relationships with others. Prioritizing self-care activities such as exercise, mindfulness, and socializing can have a positive impact on our mental and physical health. By investing in our well-being, we can lead happier, more fulfilling lives and achieve our goals with greater ease.

During the height of the pandemic, CDA's COVID-19 Practice Recovery Task Force had been focused on <u>The Working</u> <u>Mind</u> a short course on mental health in the workplace, from the Mental Health Commission of Canada (MHCC). The Working Mind is an evidence-based program designed to promote mental health and reduce the stigma around mental illness in the workplace. By reducing stigma and discrimination, the course helps organizations create a culture that fosters greater awareness and support for mental health among employees, managers, and employers.





The Task Force's work culminated in a customized course called, *The Working Mind: Workplace Mental Health & Wellness for Oral Health Care Professionals.* The course is now available in both an in-person format and a virtual format, and in a dentist version and an office staff version. CDA continues to work closely with Corporate Member PTDAs to determine how this course could potentially be integrated into their membership offerings. In 2023, CDA is developing in promotional materials in partnership with the MHCC about the course. Once completed, these materials will be shared with PTDAs and other sponsoring organizations.



The course outline of The Working Mind: Workplace Mental Health & Wellness for Oral Health Care Professionals

CDA Strengthens Commitment to Diversity, Equity, and Inclusion

CDA recognizes how critical it is to support diversity and inclusion across Canada. In March 2023, CDA became an employer partner with the Canadian Centre for Diversity and Inclusion (CCDI).

The CCDI was founded in 2014 by Michael Bach and is run by diversity and inclusion practitioners. CCDI is a forwardlooking social organization with research and learning woven into its DNA, tracing how people identify alongside demographic trends within the Canadian workplace to move employers from diversity to inclusion. It focuses on giving employers practical and sustainable solutions to help them create a truly inclusive workplace.





CDA's partnership offers the opportunity for all Corporate Members to take advantage of this membership at no cost to their organizations. The following is a list of benefits that associations will experience by becoming members:

- Unlimited access to live and interactive webinars for you and any of your colleagues
- Unlimited attendance to CCDI Community of Practice events (held across Canada in the spring and fall)
- 15% discount on fee-based services like consulting, workshops and training
- Registration for the Canadian Certified Inclusion Professional certification program
- Public recognition on the CCDI website
- Use of the CCDI brand on your organization's website and other materials

Prestige CDA Programs and Other Areas of Work:

As part of its scope of work, CDA also operates prestige programs and provide key resources for the public and dentists. We are dedicated to providing up-to-date information on issues that affect oral health and the practise of dentistry.

Policy and Position Statements: CDA develops Position Statements that are aimed at providing clarification on issues when there are divergent points of view.

CDA currently has 27 position statements that are reviewed on a five-year timetable. To date, two SharePoint sites have allowed for collaborative editing and commenting on the position statements during review periods. However, since SharePoint will no longer be available, CDA is exploring alternative options and best practices to host this key activity in one central location to ensure that all statements are updated and reviewed in a timely manner to ensure a consistent review process.

The Scientific and Clinical Affairs Committee is currently working on a new position statement on current considerations of restorative materials to replace the position statement on Amalgam. The Committee is also reviewing various position statements pertaining to fluoride to ensure consistency in language. CDA will communicate new/revised position statements, once finalized.

Currently, CDA has official position statements on the following topics, which are available on the CDA website.

- Access to Oral Health Care for Canadians
- > Adoption of New or Existing Technologies by Dentists
- Position and Consideration on the Association between Periodontal Disease and Systemic Disease
- > Continuing Dental Care
- > Dental Amalgam
- > Dental Patients with Total Joint Replacement (Consensus Statement)
- > Delivery of Oral Health Care
- Early Childhood Caries
- > First Visit to the Dentist
- > Fluoride
- > Fluoride Varnish Programs
- > Infant Feeding and Healthy Dental Development
- Junk Food and Child Health
- Use of Latex in Dentistry
- Oral Appliance Therapy for Snoring and Obstructive Sleep Apnea

- Oral Health Care Standards for Residents in Long-Term Care in Canada
- > Oral Jewelry
- Pit-and-Fissure Sealants
- Prevention of Infective Endocarditis
- Prevention of Traumatic Oral/Maxillofacial Injuries
- Provincial Funding of Hospital-Based Dental Services and Post-Graduate Dental Education
- Sweeteners in Medication
- Tobacco Cessation
- Smoking and Vaping
- > Teeth Bleaching
- Water Fluoridation
- X-Radiation in Dentistry
- Official position statements of the Canadian Dental Association (as of March 2023)





The Dental Aptitude Test (DAT) Program: The Dental Aptitude Test (DAT) Program is provided by CDA to assist dental schools in selecting first-year students. Dental schools use scores from the DAT in making admissions decisions.

As a result of the pandemic and other factors, the DAT has been transitioned to a computer-based test that is administered in professional testing centres across Canada and the USA. The new-format DAT was launched in March 2022 and candidates have been able to register for the DAT and take the DAT on the day of their choosing since then. CDA continues to improve the DAT experience as more experience is gained in this test format.

The Manual Dexterity Test is currently not available. However, in 2023 CDA will be looking at how to re-invigorate this aspect of candidate testing in the new, post-pandemic world.



How candidates take the DAT has completely changed in 2022. Click the image to watch a video that provides an overview of the changes. See the **DAT Candidate Guide** for complete information.

CDA Seal Program: The CDA Seal Program continues to independently validate specific oral health benefit claims made by the manufacturer of an oral health product. <u>CDA Seal</u> and its accompanying statement are found on products that have successfully completed the CDA review process. For Canadian consumers and dentists, the CDA Seal provides reassurance that a specific oral health product can improve an individual's oral health in the ways claimed by the manufacturer.





Relationships with Manufacturers and Trends: Staff continue to build on the relationships with the manufacturers and find ways to collaborate and promote oral health. During 2022-23, 12 new manufacturers/inventors have requested information about the CDA Seal program and have expressed interest in further discussion. In particular, one manufacturer has successfully earned the CDA Seal for a Hydroxyapatite children's toothpaste. CDA has also noticed an increased interest about the CDA Seal program from natural health companies who create natural products and vitamins.

Products that Earned the CDA Seal: Currently, 88 products carry the CDA Seal. Between May 1, 2022, to April 30, 2023, CDA awarded the Seal to 8 products.



Celebrating 50 Years: 2022 marked the CDA Seal's 50th anniversary. For half a century, the CDA Seal, with its signature logo, has reassured the public that products will improve their oral health and meet the rigorous standards of CDA. First introduced in 1972, the CDA Seal was part of a public education program when fluoridated toothpastes were new on the market. Toothpaste without fluoride didn't have any therapeutic oral health benefits, and after extensive studies, data showed that fluoridated toothpaste helped to prevent cavities.

Today, the CDA Seal also plays an important role in the daily interactions dentists and their teams have with patients. With a variety of oral health care products available on the market, the CDA Seal helps dental professionals make informed product recommendations so that patients are sure to meet their individual oral health needs and goals.





The bottom line—when wondering about which oral health product to choose, or if you are in doubt about whether claims made on a product are genuine, look for products that have the CDA Seal. Any claim listed in the Seal Statement are going to deliver results. To mark the 50th anniversary, CDA provided a promotional package to PTDAs. This included a variety of print ad sizes, dental office posters, social media, and more.

Quebec Affiliate Membership Campaign: The Association des chirurgiens dentistes du Québec (ACDQ) is currently not a Corporate Member of CDA. However, since 2008, Quebec-based dentists can access <u>CDA programs and</u> <u>membership benefits</u> as CDA Affiliate (individual) Members by joining or renewing.

CDA ran its annual campaign for <u>affiliate membership</u> in Quebec from September 2022 to April 2023. The campaign included a magazine insert and brochure, organic and social media advertising, an email marketing series, Google ads and a letter from the CDA President—all of which provided a more comprehensive overview of the <u>benefits</u>, programs and services of CDA membership.

By March 16, 2023, 474 Affiliate members renewed their membership and 53 new members joined. CDA's goal is to achieve 575 Affiliate Members for the year and looks forward to continuing to serve Quebec-based dentists.



Dental Career Options: Launched in 2020, and developed by leaders in Canadian dentistry, <u>dentalcareeroptions.ca</u> is a website dedicated to help dental students and early practising dentists fully understand the career options that are available to them throughout their professional lives.

This website aims to help graduating students and early practising dentists achieve the best start to their careers. CDA continues to promote this website in its newsletter and on social media.





Other CDA Projects:

CDA Awards: In 2022-23, the CDA Board has instituted a new CDA Mentorship Advancement Award. CDA Corporate Members and stakeholder organizations were invited to submit nominations for consideration. CDA will be presenting its first Mentorship Advancement Award in April 2023 at the CDA's President's Dinner, which will be held in person, and in conjunction with the CDA Annual General Meeting (AGM) in Winnipeg, Manitoba.

At this year's AGM, we proudly celebrated and announced our 2022–23 award recipients in the following categories:



The Medal of Honour

Recipient: Dr. John O'Keefe

The Medal of Honour is the highest award the CDA bestows. It's awarded to a dentist to recognize a lifetime of outstanding service and professional achievement that's greatly impacted the dental community, profession, and society as a whole.





Honoured Member Award

Recipients: Mr. Claude Paul Boivin and Dr. Richard Price

This award is bestowed upon dentists and non-dentists for their contribution to the dental community, profession, or the oral health of Canadians over a sustained period of time. These contributions can be at the corporate, academic, special society, commission, council, or committee level. Contributions at a national level are especially valued for this award.



The Distinguished Service Award Recipient: Dr. William Hettenhausen

The Distinguished Service Award recognizes outstanding contributions made to the dental profession, community, or oral health of Canadians on a larger level. It's presented for either a year or multiple years of noteworthy service.







The Award of Merit

Recipients: Dr. Tom Breneman, Dr. Michael Sullivan and Dr. Mary Ann Wiseman

The Award of Merit recognizes an individual who has (or individuals who have) served in an outstanding capacity in the governing of the CDA over a period of time, or who has/have made impactful contributions to the dental community, profession, or oral health of Canadians. Service contributions include serving at least two full terms on the former CDA Executive Council and/ or Board of Directors, and/or on a CDA project, as well as services elsewhere in organized dentistry.







Mentorship Advancement Award

Recipients: Dr. Eric Hatfield (posthumously) and Dr. Stewart Gillies

The Mentorship Advancement Award recognizes dentists or dentist-led groups who have improved the sense of community among Canadian dentists through volunteer mentorship and shared learning. Recipients may be involved in fostering and supporting mentorship opportunities, strengthening dental community action, and/or bringing dentists together to share ideas with the intent on enhancing the community of health professionals who care about their patients.

Special Friend of Canadian Dentistry

Recipient: Dr. Leslie Winston

The Special Friend of Canadian Dentistry Award is given to an individual or organization who is from outside the dental profession, in appreciation for their support or service to Canadian dentistry.



SMILES



DIRECT Dental

Oral Health Promotion Award

Recipients: Dr. Jerry Baluta, Dr. Frances Power, Smiles 4 Canada and Direct Dental

The Oral Health Promotion Award recognizes individuals or organizations who have made efforts to improve the oral health of Canadians by promotions. These can include efforts such as creating public health policy or supportive environments, encouraging community action, developing personal skills, or increasing the awareness of preventing oral diseases and disorders.





A Strong Organization:

Governance Review: CDA is committed to ongoing improvements and is in the process of implementing recommendations from its governance review. Following a solicitation of Request for Proposals (RFPs) from external consultants in April 2021, Dr. Jane Cooke-Lauder with Bataleur Enterprises Inc. was selected to conduct the review and to assist CDA with its implementation. In July 2022, a Governance and Nominating Committee (GNC) was struck, comprised of members of the CDA Board of Directors and Chaired by CDA's President-elect, Dr. Heather Carr to oversee its implementation.

The GNC is working rapidly in a compressed timeline to address the recommendations with the goal of ensuring that CDA has the right structures in place for the future. This includes updating current governance and administrative practices, developing policies and committee terms of reference, which provide clarity and transparency about the work of CDA for staff, CDA Board members, our Corporate Members and volunteers.

Other Operational Changes: In early 2022, CDA begun an executive search process, following the announcement of the retirement of Chief Executive Officer (CEO) Mr. Joel Neal in November 2021. Executive search firm Boyden was selected to conduct the search in February 2022, with the support of an Executive Search Committee.

On June 25, 2022, CDA was pleased to announce that Dr. Aaron Burry had been appointed to the position of CEO following an extensive search process. Dr. Burry joined CDA in 2017, having served in the position of Deputy CEO for four years and Interim CEO for several months. While at CDA, Dr. Burry was instrumental in leading CDA's emergency response to the COVID-19 pandemic and most recently, CDA's response to the federal government announcement of proposed investments in dental care.

Prior to joining CDA, Dr. Burry spent over 25 years at the City of Ottawa leading large departments and held a cross appointment with Ottawa Public Health as the Chief Dental Officer. Dr. Burry graduated from Dalhousie Dental School in 1986 and maintained a full-time practice until 1993. Dr. Burry practised dentistry on a part-time basis up until January 2023. He holds a Master of Business Administration (MBA) and a Master of Health Administration (MHA) and is a certified specialist in Dental Public Health.



Appendix A

CDA Committees, Task Forces and Working Groups:

CDA has the unique privilege and opportunity to bring together subject matter experts to discuss clinical and practice issues facing the profession. Through its many committees, task forces, working groups and involvement with international bodies, CDA:

- collects, analyzes, and communicates information to help dentists make informed decisions about the delivery of patient care; and
- strengthens and promotes idea sharing to the benefit of the profession.

New! Following its meeting of June 2022, the CDA's Board of Directors reviewed and updated its committee structure to include five Board committees and a working group:

- ▶ The Governance and Nominating Committee
- ▶ The Finance and Audit Committee
- ► The Executive Committee
- ► The Awards Committee
- ▶ The CEO Performance Management Sub-Committee
- The Strategic Planning Working Group

Upcoming: CDA is looking at creating operational committees and time-bound working groups that act in an advisory capacity to CDA staff to conduct the work of the association. CDA is working towards the implementation of this new committee structure starting in late April 2023, which will significantly streamline the number of CDA committees. CDA thanks all our volunteers for their time and commitment to help advance CDA's areas of work and the oral health of Canadians.

CDA Voting Representatives:

CDA's voting representatives are dentists licensed or otherwise registered to practise dentistry in a province or territory who are members of a CDA Corporate Member (listed below). Each CDA Corporate Member selects their voting representative(s).

Each CDA section (listed below) representing specialists, the military and academic community also appoints one voting representative who must also be a dentist licensed or otherwise registered to practise dentistry in a province or territory who is a member of a CDA Corporate Member or a CDA Affiliate Member.

CDA Corporate Members:

- Alberta Dental Association and College (College of Dental Surgeons of Alberta)
- British Columbia Dental Association
- College of Dental Surgeons of Saskatchewan
- Dental Association of Prince Edward Island
- Manitoba Dental Association

CDA Sections:

- Canadian Dental Specialties Association
- Association of Canadian Faculties of Dentistry
- Royal Canadian Dental Corps

- New Brunswick Dental Society
- Newfoundland and Labrador Dental Association
- Northwest Territories and Nunavut Dental Association and Yukon Dental Association
- Nova Scotia Dental Association
- Ontario Dental Association



Dental Stakeholders:

CDA maintains strong relationships with all dental stakeholders in Canada and internationally by ensuring ongoing dialogue with the leadership of the various national dental groups, including the Canadian Dental Specialties Association (CDSA) and the national dental specialty organizations, the Canadian Dental Regulatory Authorities Federation (CDRAF), the Association of Canadian Faculties of Dentistry (ACFD), the Canadian Association for Dental Research (CADR), the National Dental Examining Board of Canada (NDEB), the Royal College of Dentists of Canada, the Federal Ministry of Health, the Royal Canadian Dental Corps (RCDC), the Canadian Association of Hospital Dentists (CAHD), the Commission on Dental Accreditation of Canada (CDAC) and the Federation of the Canadian Dentistry Student Associations (FCDSA), the FDI World Dental Federation (FDI), the American Dental Association (ADA), and CDSPI.

CDA has ongoing communications with other organizations that impact the delivery of oral health care, such as the Dental Industry Association of Canada (DIAC) and the Canadian Life and Health Insurance Association (CLHIA) and remains in regular contact with the Canadian Dental Hygienists Association (CDHA) and the Canadian Dental Assistants Association (CDAA).

Health Care Stakeholders:

CDA maintains strong links with the health care community in Canada, including the Canadian Medical Association (CMA) and the Canadian Pharmacists Association (CPhA).

CDA is a member of many health coalitions including the Health Action Lobby (HEAL), the Canadian Coalition for Public Health in the 21st Century (CCPH21), the Canadian Health Leadership Network (CHLnet), the Canadian Coalition for Action on Tobacco (CCAT), the Extended Healthcare Professionals Coalition (EHPC), and the Stop Marketing to Children Coalition (M2K). CDA also collaborates with the Canadian Patient Safety Institute (CPSI), the Canadian Institute of Health Information (CIHI), the Standards Council of Canada (SCC), the Canadian Standards Association (CSA) and Canada Health Inforway (CHI).

CDA works closely with the Assembly of First Nations (AFN) and its NIHB caucus in making representations to the federal government on health and oral health services.