



Annual Report 2009/10



CDSBC

College of Dental Surgeons
of British Columbia

Annual Report

March 1, 2009 to February 28, 2010

About the College

The College of Dental Surgeons of British Columbia registers, certifies and regulates dentists and certified dental assistants in the public interest.

College of Dental Surgeons of British Columbia

500 – 1765 West 8th Avenue, Vancouver, BC V6J 5C6

Tel: 604-736-3621 Fax: 604-734-9448

Toll Free Tel (in B.C.): 1-800-663-9169

Toll Free Fax (in B.C.): 1-800-734-9448

www.cdsbc.org

Publication Date: June 2010

Table of Contents

President's Report	3
Registrar's Report	4
Public Member's Report	7
Committee Reports	8
Board 2009/10	11
Staff 2009/10	12
Committees	13
Auditor's Report and Financial Statements	15

President's Report



The past year marked an important milestone in dentistry when dentists and certified dental assistants became regulated under the *Health Professions Act* (HPA) in April.

Under the HPA and new College Bylaws, our

governing Council was renamed the Board and its members were appointed by government to hold office until July 1, 2010. In keeping with the added transparency of regulation under the HPA, all Board meetings are open to the public unless there is a specific reason to hold all or part of the meeting "in camera".

The composition of the Board continued unchanged with the exception that the two CDA positions will be filled by election rather than appointment.

From a governance perspective, we focused the past year on the development of our Board. Our goal is to ensure that the Board is following best practices, is maximizing the value of its members and is functioning at optimum performance.

Our strategy involved working with a governance consultant to create documents that delineate the roles, responsibilities and expectations of the Board and Board members. The main document is a *Board Procedures Policy*. The Policy supplements the existing *Governance Policy Manual* and outlines the role of the Board, the relationships between the Board and CDSBC management and the Registrar, and specifies Board meeting content and procedures.

A *Code of Ethics and Business Conduct for Board Members* will be signed annually at the Board orientation. This Code of Ethics provides principles for the ethical and

business conduct of CDSBC's Board and Elected Officers. Two other documents were developed to explain the requirements and expectations of Board members with respect to the governance of CDSBC and their involvement as leaders of the organization. A job description will now be provided to all Board members, and to dentists and CDAs when they request Board election nomination forms to ensure they understand the time commitment involved and the role they will be expected to play before they become involved.

In early 2010, we initiated a process for the Board to evaluate its performance and are committed to undertaking this every year.

There were also changes to CDSBC committees as a result of transition to the HPA, with the most notable being those that relate to the complaints process. The previously known Practice Standards and Professional Conduct Committees have been combined and renamed as the Inquiry Committee. The previously known CDSBC Inquiry Committee has become the Discipline Committee. The Health Professions Review Board is a newly established, independent body, appointed by government to review complaint and registration decisions made by CDSBC. The College is also required to have a Patient Relations Committee, the purpose of which is to prevent professional misconduct, including that of a sexual nature. This role is fulfilled by the CDSBC Board.

Other notable Committee changes include the establishment of a CDA Certification Committee as a separate entity from the Registration Committee, which exclusively reviews registration matters for dentists. More information about our committees, including a volunteer application form, can be found on our website, cdsbc.org.

CDSBC continued to communicate with CDAs, dentists and other stakeholders. During the fiscal year, we travelled to participate in a number of meetings. These included

presenting to the BCDA's annual meeting of Component Society CE Coordinators; attending other component society meetings across the province to discuss CDSBC activities and issues; and participating in a variety of national meetings to ensure that B.C. has a voice in regulatory matters that affect all provinces.

For the first time, we hosted the fall meeting of the Canadian Dental Regulatory Authorities Federation in Vancouver and concluded with a mandate to develop clinical practice resources for the profession. We also presented and had a booth at the Thompson Okanagan Dental Society's fall meeting and were actively involved in the Pacific Dental Conference.

Ongoing collaboration with key stakeholder groups, provincially and nationally, continues to be a priority. We liaise regularly with the BC Dental Association and the Certified Dental Assistants of BC. College representatives sit on a number of external committees, including those affiliated with the UBC Faculty of Dentistry. We also regularly present to students about their responsibilities as professionals, including CDSBC's practice and conduct expectations.

In closing, I would like to acknowledge the support and contributions of my fellow Board members – dentists, CDAs and public members – and CDSBC Committee volunteers. It is the spirit of collegiality between us that has made it possible for CDSBC to have achieved all that it has in the past year.

Sincerely,



Ash Varma, DMD
CDSBC President

Registrar's Report



Health Professions Act

As the regulatory body for dentistry, the College of Dental Surgeons of BC is responsible for establishing and maintaining professional standards of oral health care, ethics and competence. The single biggest focus for the College over the past year has been the transition to the *Health Professions Act*, Dentists Regulation and CDSBC Bylaws.

Although the day-to-day practice of dentists and certified dental assistants was not significantly affected by the transition, there were some key changes. For dentists, the change to the *Health Professions Act* saw the definition of a scope of practice based on the concept of restricted activities. There were also changes to the categories of dentist registration, formerly known as licensing.

For CDAs, their work is defined more broadly under the new legislation and is no longer guided by a simple list of duties. In addition, CDAs are no longer licensed but certified by the College and they renew their certification annually.

These are some of the key changes that CDSBC communicated to dentists and CDAs over the past year, through presentations, printed and electronic publications, and via the CDSBC website.

Registration and Renewal

The CDSBC Bylaws contain a requirement for "currency of practice," meaning that in order to work in B.C., dentists and CDAs must maintain current practice in dentistry, which includes dental education, dental research and the provision of clinical care. Dentists need 900 hours of continuous practice over

three years while CDAs need 600 hours. This requirement is being phased in over two years.

New Registrations: 2009/10

Figures in parentheses refer to the 2008/09 year

Dentists	Certified Dental Assistants
216 (131)	403 (496)

Licences Issued

Dentists		
Active (GP)	Specialists	Non-Practising
2700 (2652)	332 (330)	148 (143)

Certified Dental Assistants			
Active	Temporary	Limited	Non-Practising
5956 (5564)	225 (283)	19	498 (541)

Complaints

CDSBC uses a framework that is common to all health professions regulated under the *Health Professions Act* (HPA) to investigate and resolve complaints. The complaints process includes the use of alternate dispute resolution (ADR) mechanisms and remediation as potential approaches to protect the public while improving practitioner conduct and practice.

Although an increase in the number of complaints along with added steps to the process expected under the HPA led to a longer average time to resolve complaints, the majority of complaints continue to be resolved through an ADR process. While there are many possible resolutions to a complaint, the ADR process often leads to an agreement with the dentist or CDA for remediation and ongoing monitoring.

Agreements have included attending study clubs, taking part in customized remedial courses and other measures, including periods of monitoring, to ensure the issues regarding the standards of care and/or professional conduct of the dentist or CDA have been addressed and the public is protected over the long term. The agreements are in writing, and the registrants are always given the opportunity to take them away and review them (with legal counsel if they wish) before signing.

The past year saw a decrease in telephone calls and an increase in written complaints received by the complaints team. The number in parentheses indicates figures from the previous year.

Telephone Calls	Written Complaints
456 (465)	206 (146)

The main clinical issues mentioned by the complainants were:

- diagnosis and treatment planning
- prosthodontics – fixed
- operative
- endodontic

As in past years, non-clinical issues such as patient relations, informed consent and billing were significant factors in many complaints.

CDA Services

Under the CDSBC Bylaws, the role that a certified dental assistant plays is no longer guided by a simple list of duties; instead, CDAs perform “services” as delegated or authorized by a dentist. These services are based on restricted activities under the HPA Regulations. Both the CDA and the dentist must be confident that the CDA has received the necessary training and education and is fully competent in each service they perform.

To help dentists and CDAs understand this change, CDSBC distributed a new quick-reference document titled *A Guide to CDA Services*. The *Guide* includes charts that outline the services that a CDA in each class of certification

can perform, as well as those that must be delegated or authorized and supervised by a dentist.

Quality Assurance

The Quality Assurance Committee updated the document *Continuing Education Requirements* to give dentists and CDAs a better understanding of this program and to provide more clarity about what types of learning are eligible for credit. This document was distributed to all dentists and CDAs in summer 2009.

Infection Control

CDSBC is working closely with the College of Dental Hygienists of BC to facilitate the establishment or adoption of Infection Control Guidelines as a reference for dental practitioners. Each College selected three representatives in the areas of practice, education and research to serve on this working group. They include three dentists, a CDA, two hygienists and a physician whose area of expertise is infection control.

The revised guidelines about infection control will be evidence-based and referenced. The working group is obtaining other documents that meet those criteria, with the intent to create guidelines that satisfy all government and public requirements and are workable for dentists.

Ethics

The Ethics Committee is in the process of updating the Code of Ethics. The new document is not intended to change the underlying principles found in the current code. Rather, the intent is to create a principle-based code with clear expectations for conduct for dentists and CDAs in B.C. The Committee is expected to present the core values that will form the basis of the new Code of Ethics at the May 2010 Board meeting.

Internationally Trained Dentists – Funding and Project Update

All 10 provincial regulatory bodies agreed on the principles and criteria to be used as the basis for developing a national process for the assessment of internationally trained general dentists. CDSBC and the Royal College of Dental Surgeons of Ontario collaborated to submit a funding application to the federal government on behalf of the Canadian Dental Regulatory Authorities Federation (CDRAF) to develop this process. The federal government approved the application and will provide \$780,000 towards this project.

College Place Update

In the spring of 2009, the Joint Venture hired a firm to perform a condition assessment on College Place. The assessment report identified damage to the building resulting from water ingress. Their report indicated that work was required to protect the external structure of the building and to prevent future damage. Reparation began in the fall of 2009 and is expected to be finalized by late spring 2010.

When the renovations are complete, the building will have not only greater longevity but also a more contemporary appearance that will add value to this significant asset. CDSBC owns 70 per cent of the building and has been able to finance the project with reserve funds without any additional cost to dentists and CDAs.

Communications

The CDSBC website was updated to coincide with April 3, 2009 transition to the HPA. The new site has a clean and professional design that is easier to navigate. The site also features the new documents and forms (including application packages) that are available for download.

One of the College's key touch points with dentists and CDAs takes place at the annual Pacific Dental Conference. In 2009, CDSBC offered an information session that addressed topics like informed consent, adolescent patients and consent, physical abuse and patient-practitioner boundaries. This session was videotaped and released at the 2010 PDC as a continuing education opportunity for dentists and CDAs.

In the summer of 2009, and with the transition to the HPA, the timing was right to refresh the visual identity of the College. The result is a new logo that reflects the modern and professional character of the organization. It gives CDSBC a strong and unique identity that respects the history of the profession and symbolizes the integrity and trust that are inherent in an organization whose mandate is to protect the public.

I'd like to thank the members of the CDSBC Board and Committees for the contributions they made to the College in the past year. I also want to recognize the staff of CDSBC who interact with dentists, CDAs and members of the public every day and whose work effectively translates the policies into action.



Heather MacKay
Registrar

Public Member's Report

It has been a privilege to serve on the first Board of the College of Dental Surgeons of British Columbia (CDSBC). I am proud to say that I have become part of an organization that is truly committed to setting standards for the provision of professional, quality oral health care to the citizens of the province.

This is the first year that dentists and certified dental assistants became regulated under the *Health Professions Act* (HPA). The CDSBC undertook a wide variety of activities to make this transition as smooth as possible, ensuring that the interests of key stakeholders were considered in the process. Changes in registration/renewal procedures, and a new complaints framework, along with changes in committee structures/mandates, were just some of the projects undertaken and completed in a timely and professional manner.

Under the leadership of President Ash Varma, much progress was made in moving the Board toward a proper "governance" model with clearly delineated roles/responsibilities. Transparency is a key requirement under the HPA and in the new CDSBC Bylaws and is embedded in all the new documentation and processes that have been created. In addition, I was very pleased that the general public now has the ability to access Board meetings.

From a public representative's perspective, effective communication is vital in ensuring transparency across all the College's activities. Significant improvements to the CDSBC website plus the introduction of a variety of other communication pieces have greatly assisted in the delivery of our messages to all stakeholders in this transitional year.

The CDSBC has a well-functioning Board of dentists, certified dental assistants and public members who are dedicated to ensuring the public interest in all the College's programs and services. Coupled with a talented staff and strong leadership, the CDSBC is working hard to meet and exceed its obligations as the regulator for the profession in British Columbia.



Richard Lemon

Committee Reports

Audit

This committee assists the Board in its oversight of financial reporting and other disclosures of CDSBC. The Committee also reviews and reports on the adequacy of internal controls.

The Committee selected Smythe Ratcliffe as auditors for CDSBC.

Certified Dental Assistant (CDA) Advisory

The Committee addresses CDA regulatory issues, provides updates to the Board and liaises with the Certified Dental Assistants of British Columbia (CDABC), the member service organization.

The Committee held two meetings this year primarily regarding the work of the Prosthodontic Module Working Group (PMWG). The PMWG has continued to review and propose amendments to the module and has reported back to the CDA Advisory Committee for further direction and clarification of the parameters of their Terms of Reference. These issues have been referred to the Board as appropriate.

The Committee also accepted the Proposed Guidelines for the Orthodontic Module and agreed that the document be filed for future reference and that the minutes of this meeting reflect that the Committee was satisfied all schools presently offering this module are meeting the requirements of the College.

The CDA Advisory Committee, along with members of the CDA Certification Committee, CDA educators, CDSBC Board Members, and members of CDABC were also invited to participate in a presentation about CDA regulation under the *Health Professions Act*.

CDA Certification

The CDA Certification Committee was created under the *Health Professions Act* and CDSBC Bylaws that were brought into effect on April 3, 2009. This committee has replaced the CDA Licensure Sub-committee under the *Dentists Act*.

In the past fiscal year this committee has met three times for the purposes of considering refunds for late renewal reinstatement fees (2), Continuous Practice Proposals (8), as well as orientation and to acquaint Committee members with certification requirements and changes made under the *Health Professions Act* and CDSBC Bylaws.

Discipline

Created under the HPA and CDSBC Bylaws, this committee replaces what was known as the Inquiry Committee under the *Dentists Act*.

The Committee formally investigates the conduct of any current or former registrant when the investigation of a complaint identifies a serious problem or when the complaint cannot be resolved through mediation or by a peer review committee. The Discipline Committee meets in panels and is similar to a court proceeding and more formal than meetings of the Inquiry Committee.

No discipline hearings were initiated or conducted during the fiscal year.

Ethics

The role of this committee is to review the standards of professional ethics, including the provisions within the CDSBC Bylaws regulating advertising and promotional activities and to recommend changes to the Board. It oversees communication with dentists and certified dental assistants concerning advertising and promotions that do not fall within the Code of Ethics.

The Committee is currently in the process of reviewing the current Code of Ethics with a view to creating an updated version under the *Health Professions Act*. To that end, the Committee reviewed the codes of ethics of other regulatory bodies and professions, and identified the core values upon which a revised Code of Ethics for dentists and CDAs should be based as a first step in the process.

Inquiry

This Committee came into effect as part of CDSBC's transition to the *Health Professions Act* and CDSBC Bylaws. It replaces the former Practice Standards and Professional Conduct Committees.

In 2009/10, the Inquiry Committee considered 41 matters that were resolved with no further action required. The Committee also considered 10 matters in which it requested the registrant to undertake remedial activities to address the issues identified in the complaint.

Nominations

The Nominations Committee ensures that all elected CDSBC Board positions are filled following the close of nominations, and oversees the College's awards program.

The Committee spent considerable time reviewing and revising the process for the nomination and selection of award candidates. The Committee agreed to host a reception to be held during the 2010 Pacific Dental Conference for the award recipients and their friends and families.

The Committee's recommendations for the 2010 Awards, which were accepted by the Board, were as follows:

Distinguished Service Award

Mr. Robbie Moore

Award of Merit

Dr. Jonathan Adams

Ms. Elli Cox

Dr. Mike Henry

Dr. Richard Kramer

Special Group Award:

Study Club Alliance:

- o Dr. Susan Chow
- o Dr. Robert Elliott
- o Dr. Chris Hacker
- o Dr. Don MacFarlane
- o Dr. Craig Naylor
- o Dr. Mark Norris

Quality Assurance

The Quality Assurance Committee (QAC) is responsible for reviewing the standards of practice, other than sedation and general anaesthetic standards, and recommending changes to those standards as appropriate, and for administering and maintaining the Quality Assurance program in accordance with the CDSBC Bylaws. The Committee also develops and recommends policies to the Board concerning guidelines for continuing education (CE) requirements with the objective of promoting competence and professionalism at all stages of a dentist's or a CDA's career.

The Committee reviewed CE course eligibility submissions that had policy implications, and considered CE credit appeals. These submissions were received from the CE Subcommittee, which also reviewed and accepted study club applications during the fiscal year.

As in prior years, the Committee reviewed the Pacific Dental Conference course program to determine which courses had significant intellectual or practical content related to the practice of dentistry and/or management of the dental practice and thus were eligible for credit.

Two revised documents were circulated for consultation with various stakeholders and subsequently approved by the Committee and the Board: *Continuing Education Requirements* and *Dental Recordkeeping Guidelines*, both of which were distributed to all dentists and CDAs. The Committee Chair and Registrar also led a workshop with CE coordinators from dental component societies.

The QAC is keen to continue to build the QA program incorporating self-directed components to allow registrants to proactively address their own continuing education and competency.

CDSBC and the QAC have also identified the need to research a new approach to identify, review and develop clinical practice resources for dentists and CDAs. This project is ongoing.

Registration

The Registration Committee reviews dentist registration requirements, applications for registration with unique circumstances, appeals for reinstatement of registration and appeals with respect to annual registration renewal reinstatement fees. The Committee met once during the fiscal year for orientation and to acquaint committee members with registration requirements and changes made under the *Health Professions Act* and CDSBC Bylaws.

Sedation and General Anaesthetic Services

The Accreditation Committee makes recommendations to the Board concerning guidelines and requirements for registrants who provide general and conscious sedation anaesthetic services independent of hospitals. Committee members inspect and certify dental offices and facilities where such services are provided. A working group of the Committee is in the process of revising the standards and requirements for minimal and moderate sedation.

This past year, the committee inspected 10 dental facilities offering deep sedation and general anaesthetic services. There are currently 15 fully authorized dental facilities in B.C. offering general anaesthetic services and 15 offering deep sedation services.

Board 2009/10

CDSBC is governed by an 18-member Board that includes 10 dentists, two certified dental assistants and six public members appointed by the provincial government.

Elected Officers

Dr. Ash Varma, President
Dr. Bob Coles, Vice-President
Dr. Peter Stevenson-Moore, Treasurer

Dentists

Dr. Susan Chow
Dr. Karl Denk
Dr. Lonny Legault
Dr. Michael MacEntee
Dr. Bob McDougall
Dr. Jonathan Suzuki
Dr. Chiku Verma

Certified Dental Assistants

Ms. Leslie Riva
Ms. Lane Shupe

Public Members

Ms. Leona Ashcroft
Mr. Victor Bowman
Mr. Dan De Vita
Mr. Paul Durose
Ms. Deborah Folka
Mr. Richard Lemon



Back row, L – R: Mr. Victor Bowman, Dr. Bob McDougall, Dr. Jonathan Suzuki, Dr. Chiku Verma

Middle row, L – R: Dr. Susan Chow, Mr. Richard Lemon, Mr. Dan De Vita, Dr. Karl Denk, Mr. Paul Durose, Ms. Leslie Riva, Ms. Lane Shupe

Front row, L – R: Ms. Deborah Folka, Dr. Peter Stevenson-Moore, Ms. Heather MacKay, Dr. Ash Varma, Dr. Bob Coles, Dr. Michael MacEntee

Missing: Ms. Leona Ashcroft, Dr. Lonny Legault

Staff 2009/10

Rochelle Blaak
Continuing Education Coordinator (on leave since Sept/09)

Janice Campbell
Sirona Learning Centre Coordinator

Nancy Crosby
Senior Assistant to Registrar

Karen England
Administrative Assistant, Operations

Karl Gray
Information Support System Technician (until April/09)

Sandra Harvey
Manager of Regulation

Sharron Hussey
Complaint Officer (since July/09)

Elmira Jasarevic
Complaint Officer

Janet Khong
Meeting Coordinator (until Sept/09)

Heather MacKay
Registrar

Cathy McGregor
Complaint Investigator

Elizabeth Milne
CDA Certification Assistant

Debbie Minton
Receptionist

Joanne Norgaard
Complaint Officer

Tory Norgren
Dentist Registration Assistant/FOI Coordinator

Diana Nuss
Dentist Registration Coordinator (until April/09)

Alex Penner
Complaint Investigator

Betty Richardson
Director of Operations

Lena Ross
Communications Coordinator

Anne Scales
Continuing Education Coordinator (until June/09)

Garry Sutton
Complaint Investigator

Sonia Visconti
Administrative Assistant to the Registrar (since Feb/10)

Karen Walker
Administrative Assistant, Regulation

Margot White
Director of Policy Development & Communications

Betty Wiebe
Accounting Manager

Anita Wilks
Manager of Communications

Committees

Audit

Mr. Mehmud Karmali, Chair
Dr. Bob McDougall
Dr. Robert Rosenstock
Ms. Heather MacKay, *Registrar*
Ms. Betty Richardson, *Director of Operations*
Ms. Karen England, *Committee Administrative Assistant*

CDA Advisory

Ms. Leslie Riva, Chair
Ms. Nadine Bunting, Vice-Chair
Ms. Alison Brown
Ms. Kim Burroughs (*until Nov. 2009*)
Dr. Karl Denk
Mr. Dan De Vita
Ms. Susanne Feenstra
Dr. Bob McDougall
Ms. Shelley Melissa (*since Nov. 2009*)
Ms. Pat Taylor
Ms. Sandra Harvey, *Manager of Regulation*
Ms. Karen Walker, *Committee Administrative Assistant*

CDA Certification

Ms. Rosie Friesen, Chair
Ms. Leona Ashcroft
Mr. Victor Bowman
Ms. Bev Davis
Ms. Shannon Hislop
Dr. Alex Lieblich
Ms. Leslie Riva
Ms. Sandra Harvey, *Manager of Regulation*
Ms. Karen Walker, *Committee Administrative Assistant*

Discipline

Dr. Don Anderson, Chair
Mr. Gordon Adams
Ms. Leona Ashcroft

Ms. Linda Bartz
Ms. Pam Beatty
Mr. Victor Bowman
Dr. Josephine Chung
Dr. Karl Denk
Mr. Paul Durose
Dr. Chris Hacker
Dr. Myrna Halpenny
Dr. Erik Hutton
Dr. Robert Leung
Ms. Elaine Maxwell
Ms. Heather MacKay, *Registrar*
Ms. Nancy Crosby, *Committee Administrative Assistant*

Ethics

Dr. Ken Chow, Chair
Mr. Paul Durose
Dr. Leetty Huang
Dr. Gail Landsberger
Mr. Richard Lemon
Dr. Bob McDougall
Ms. Lane Shupe
Dr. Peter Stevenson-Moore
Dr. Brian Wong
Ms. Heather MacKay, *Registrar*
Ms. Sandra Harvey, *Manager of Regulation (since Jan. 2010)*
Ms. Nancy Crosby, *Committee Administrative Assistant*

Inquiry

Dr. John Carpendale, Chair
Dr. John Gercsak, Vice-Chair
Ms. Nadine Bunting
Dr. Greg Card
Ms. Lynn Carter
Dr. Bob Coles
Ms. Deborah Folka
Mr. Rick Lemon
Mr. Robbie Moore
Ms. Marlane Paquin

Mr. Bill Phillips
Dr. Mike Racich
Dr. Arnold Steinbart
Dr. Scott Stewart
Dr. Jonathan Suzuki
Ms. Heather MacKay, *Registrar*
Ms. Elmira Jasarevic, *Committee*
Administrative Assistant

Nominations

Dr. Ash Varma, Chair
Dr. Jim Brass
Ms. Deborah Folka
Dr. Myrna Halpenny
Ms. Marlane Paquin
Dr. Robert Rosenstock
Ms. Margot White, *Director of Policy*
Development and Communications
Ms. Lena Ross, *Committee*
Administrative Assistant

Patient Relations

All Board members

Quality Assurance

Dr. David Tobias, Chair
Ms. Catherine Baranow
Mr. Paul Durose
Ms. Deborah Folka
Dr. Bill Liang
Dr. John Nasedkin
Ms. Sylvia Stephens
Dr. Chiku Verma
Mr. David Vogt
Dr. Jim Yeganegi
Ms. Heather MacKay, *Registrar*
Ms. Sandra Harvey, *Manager of Regulation*
(since Oct. 2009)
Ms. Nancy Crosby, *Committee*
Administrative Assistant

Registration

Dr. Peter Stevenson-Moore, Chair
Ms. Lynn Carter
Mr. Dan De Vita
Dr. Warren Ennis
Dr. Alex Hird

Dr. Jonathan Suzuki
Ms. Heather MacKay, *Registrar*
Ms. Sandra Harvey, *Manager of Regulation*
Ms. Tory Norgren, *Committee*
Administrative Assistant

Sedation and General Anaesthetic Services

Dr. David Sowden, Chair
Dr. Martin Aidelbaum
Dr. Tobin Bellamy
Dr. Brian Chanpong
Dr. Gerald V. Goresky
Dr. Geoff Grant
Dr. Michael Henry
Dr. James Kim
Mr. Gordon McConnell
Dr. Mike Melo
Dr. Chris Zed
Ms. Heather MacKay, *Registrar*
Ms. Sonia Visconti, *Committee*
Administrative Assistant

**COLLEGE OF DENTAL SURGEONS OF
BRITISH COLUMBIA**

**Consolidated Financial Statements
February 28, 2010**

AUDITORS' REPORT

TO THE MEMBERS OF COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA

We have audited the consolidated statement of financial position of College of Dental Surgeons of British Columbia as at February 28, 2010 and the consolidated statements of operations, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the College's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these consolidated financial statements present fairly, in all material respects, the financial position of the College as at February 28, 2010 and the results of its operations, changes in its net assets, and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

The financial statements as at February 28, 2009 and for the year then ended were audited by another firm of auditors who expressed an opinion without reservation on those statements in their report dated April 8, 2009.

Smythe Ratcliffe LLP

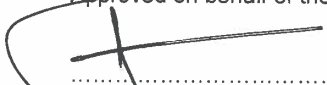

Chartered Accountants

Vancouver, British Columbia
April 30, 2010

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA
Consolidated Statement of Financial Position
Year End February 28

	2010	2009
Assets		
Current		
Cash	\$ 4,080,675	\$ 5,464,146
Short-term investments (note 5)	4,237,955	3,387,579
Accounts receivable	75,470	102,791
Prepaid expenses	70,493	77,765
	8,464,593	9,032,281
Loan Receivable (note 6)	290,000	300,000
Capital Assets (note 7)	4,039,318	2,962,449
	\$ 12,793,911	\$ 12,294,730
Liabilities		
Current		
Accounts payable and accrued liabilities	\$ 905,999	\$ 433,453
Deferred revenue	3,780,982	4,319,450
Current portion of obligation under capital lease (note 8)	32,391	28,888
	4,719,372	4,781,791
Obligation Under Capital Lease (note 8)	93,422	45,888
	4,812,794	4,827,679
Net Assets		
Cumulative unrestricted surplus from operations	1,437,484	2,655,874
Invested in capital assets	3,913,505	2,887,673
Internally restricted reserves (note 9)	2,630,128	1,923,504
	7,981,117	7,467,051
	\$ 12,793,911	\$ 12,294,730

Approved on behalf of the Board:


..... President

..... Treasurer

See notes to consolidated financial statements.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA
Consolidated Statement of Operations
Year Ended February 28

	2010	2009
		(note 3)
Revenues		
License fees and permits	\$ 8,355,373	\$ 8,238,615
Rental	465,263	503,973
Registration fees	337,827	351,699
General	135,021	115,935
Interest and miscellaneous	70,094	224,750
	9,363,578	9,434,972
Grant to British Columbia Dental Association	4,786,698	4,631,578
	4,576,880	4,803,394
Expenses		
Salaries and benefits	1,863,846	1,887,612
General and administrative (schedule)	689,676	615,653
Consulting fees	348,371	205,288
Building occupancy costs	213,193	315,156
Meetings and travel	171,768	199,992
Director fees	146,367	153,007
Committees	68,399	84,396
Legal fees and related costs	64,085	75,253
Amortization	150,955	155,702
	3,716,660	3,692,059
Excess of Revenues over Expenses before Project Expenses	860,220	1,111,335
Project Expenses (note 9)		
Information technology	136,340	117,851
Internationally Trained Dental Specialist Process	105,827	33,331
Health Professions Act transition	103,987	20,894
College Place Dental Clinic redevelopment	0	250,000
	346,154	422,076
Excess of Revenues over Expenses	\$ 514,066	\$ 689,259

See notes to consolidated financial statements.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA

Consolidated Statement of Changes in Net Assets Year Ended February 28

	Cumulative Unrestricted Surplus from Operations	Invested in Capital Assets	Internally Restricted Reserves	2010	2009
Balance, Beginning of Year	\$ 2,655,874	\$ 2,887,673	\$ 1,923,504	\$ 7,467,051	\$ 6,777,792
Excess (deficiency) of revenues over expenses	0	(150,955)	665,021	514,066	689,259
Transfers					
For capital asset purchases	(1,182,390)	1,182,390	0	0	0
For capital assets disposed of	36,704	(36,704)	0	0	0
For capital lease repayment	(31,101)	31,101	0	0	0
Expenses funded from internally restricted reserves (note 9)	1,153,726	0	(1,153,726)	0	0
Interest allocated to internally restricted reserves (note 9)	(30,329)	0	30,329	0	0
For internally restricted reserves	(1,165,000)	0	1,165,000	0	0
Net change for the year	(1,218,390)	1,025,832	706,624	514,066	689,259
Balance, End of Year	\$ 1,437,484	\$ 3,913,505	\$ 2,630,128	\$ 7,981,117	\$ 7,467,051

(note 9)

See notes to consolidated financial statements.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA

Consolidated Statement of Cash Flows

Year Ended February 28

	2010	2009
Operating Activities		
Excess of revenues over expenses	\$ 514,066	\$ 689,259
Items not involving cash		
Loss on disposal of asset	36,704	0
Amortization	150,955	155,702
	701,725	844,961
Changes in non-cash working capital		
Accounts receivable	27,321	(262,096)
Prepaid expenses	7,272	(5,233)
Accounts payable and accrued liabilities	472,546	(11,835)
Deferred revenue	(538,468)	961,761
	(31,329)	682,597
Cash Provided by Operating Activities	670,396	1,527,558
Financing Activities		
Purchase of short-term investments	(850,376)	(337,579)
Proceeds from loan receivable	10,000	0
Repayment of capital lease	(31,101)	(32,852)
Cash Used in Financing Activities	(871,477)	(370,431)
Investing Activity		
Purchase of capital assets	(1,182,390)	(61,092)
Inflow (Outflow) of Cash	(1,383,471)	1,096,035
Cash, Beginning of Year	5,464,146	4,368,111
Cash, End of Year	\$ 4,080,675	\$ 5,464,146

See notes to consolidated financial statements.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA

Notes to Consolidated Financial Statements

Year Ended February 28, 2010

1. OPERATIONS

College of Dental Surgeons of British Columbia (the "College") was formed to protect the public interest in matters relating to dentistry. The College is governed by the *Health Professions' Act* as of April 3, 2009 and prior to April 3, 2009, the College administered the *Dentists' Act*.

The College is a not-for-profit organization established under the *Dentists' Act of 1900* and is exempt from income tax under Section 149 of the *Income Tax Act*.

2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements have been prepared in accordance with Canadian generally accepted accounting principles for not-for-profit organizations and include the following significant accounting policies.

(a) Capital assets

Capital assets are recorded at historical cost. Amortization is provided over the estimated useful lives of the assets using the declining-balance basis at the following annual rates:

Building	5 %
Office furniture and equipment	10%
Computer and office equipment	20%
Leasehold improvements	10%
Assets under capital lease	20%

Tenants' improvements are amortized using the straight-line basis over the term of the lease. Additions during the year are amortized at one-half the annual rates.

(b) College Place Joint Venture (the "Joint Venture")

The College accounts for its 70% interest in the Joint Venture using the proportionate consolidation method. Under this method, 70% of the Joint Venture's assets, liabilities, revenues and expenses are included in these financial statements. All intercompany transactions have been eliminated.

(c) Leases

The College records leases that transfer substantially all the risks and benefits of ownership to the College as capital leases. The related equipment is capitalized at its fair market value at the time of acquisition and is amortized at the same rates as purchased equipment. An obligation is also recorded, for the present value of future lease payments, which is reduced as lease payments are made after accounting for the inherent interest portion.

Lease payments for leases that are not capital in nature are expensed.

2. SIGNIFICANT ACCOUNTING POLICIES (Continued)

(d) Use of estimates

The preparation of financial statements in conformity with Canadian generally accepted accounting principles 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. Significant estimates include the rates of amortization and valuation of accounts receivable. Management believes the estimates are reasonable; however, actual results could differ from those estimates and could impact future results of operations and cash flows.

(e) Net assets

The College segregates its net assets into the following categories:

(i) Invested in capital assets

Invested in capital assets represents cumulative amounts spent on capital assets, net of amounts amortized less any outstanding debt used to finance capital assets additions. The balance in this account is not available for spending unless the College were to sell its capital assets.

(ii) Internally restricted reserves

Internally restricted reserves represent amounts set aside for future projects determined by the College's Board.

(iii) Cumulative unrestricted surplus from operations

Cumulative surplus from operations represents cumulative excess of revenues over expenses since inception, net of amounts recorded in the above categories.

(f) Revenue recognition

License fees and permits are recognized as revenue in the fiscal year to which they relate. Deferred revenue represents such amounts received in advance of the year to which they relate.

Registration fees are recognized as revenue when received.

General revenues include incorporation fees. Incorporation fees are recognized as revenue when payment is received. The College receives lease revenue through its 70% interest in the Joint Venture. Revenue from rental of facilities is recognized when the services are provided and collection is reasonably assured. The College recognizes interest revenue based on the passage of time according to the terms of the instrument giving rise to the revenue.

2. SIGNIFICANT ACCOUNTING POLICIES (Continued)

(g) Financial instruments

All financial instruments are classified as one of the following: held-to-maturity, loans and receivables, held-for-trading, available-for-sale or other financial liabilities. Financial assets and liabilities held-for-trading are measured at fair value with gains and losses recognized in operations. Financial assets held-to-maturity, loans and receivables, and other financial liabilities are measured at amortized cost using the effective interest method. Available-for-sale instruments are measured at fair value with unrealized gains and losses recognized and reported as a change in net assets. Any financial instrument may be designated as held-for-trading upon initial recognition.

The College continues to follow the Canadian Institute of Chartered Accountants' Handbook Section 3861, "Financial Instruments - Disclosure and Presentation".

3. COMPARATIVE FIGURES

Certain of the comparative figures have been reclassified to conform to the current year's presentation.

4. FINANCIAL INSTRUMENTS

The College classifies its cash and short-term investments as held-for-trading and measures them at fair value. Accounts receivable are classified as loans and receivables and recorded at amortized cost, which approximates fair value. The loan receivable is classified as held-to-maturity and recorded at amortized cost. Financial liabilities include accounts payable and obligation under capital lease, and are classified as other financial liabilities and carried at amortized cost, which approximates fair value.

(a) Credit risk

The College's financial assets that are exposed to credit risk consist of cash, accounts receivable, loan receivable and short-term investments. The risk associated with cash and short-term investments is minimized to the extent that cash and short-term investments are placed with major Canadian financial institutions. The risk associated with accounts and loan receivable is minimized given the small number of parties owing amounts to the College and its history of collecting substantially all of its outstanding receivables within 30 days.

(b) Interest rate risk

Interest rate risk consists of two components:

- (i) To the extent that payments made or received on the College's monetary assets and liabilities are affected by changes in prevailing market interest rates, the College is exposed to interest rate cash flow risk.
- (ii) To the extent that changes in prevailing market rates differ from the interest rates on the College's monetary assets and liabilities, the College is exposed to interest rate price risk.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA
Notes to Consolidated Financial Statements
Year Ended February 28, 2010

4. FINANCIAL INSTRUMENTS (Continued)

(b) Interest rate risk (continued)

The College is not exposed to significant interest rate price or cash flow risk on its financial instruments due to the short-term maturity of those items, and the loan receivable is recorded at amortized cost.

5. SHORT-TERM INVESTMENTS

Short-term investments are comprised of guaranteed investment certificates held at a chartered bank. The investments earn interest at 0.55% and bank prime rate less 1.80% (2009 – 3.00%) per annum and mature within one year.

6. LOAN RECEIVABLE

The amount is due from Study Club Alliance of BC. The loan bears interest of 3.00% per annum and is secured by a general security agreement granting a security interest in all the present and after acquired personal property of the borrower. The repayment terms are as follows: \$20,000 during 2010; \$24,000 during 2011; and \$32,000 each year from 2012 to 2020. The outstanding balance of the loan and any outstanding interest shall be repaid in full by November 1, 2020.

7. CAPITAL ASSETS

	Cost	Accumulated Amortization	Net Book Value	
			2010	2009
Land	\$ 1,223,550	\$ 0	\$ 1,223,550	\$ 1,223,550
Building	3,869,276	1,728,136	2,141,140	1,095,255
Office furniture and equipment	668,043	493,846	174,197	177,055
Computer and office equipment	520,412	377,788	142,624	169,882
Leasehold improvements	1,147,006	941,393	205,613	186,224
	7,428,287	3,541,163	3,887,124	2,851,966
Assets under capital lease	173,877	21,683	152,194	110,483
	\$ 7,602,164	\$ 3,562,846	\$ 4,039,318	\$ 2,962,449

Net assets invested in capital assets are calculated as follows:

	2010	2009
Capital assets, net of accumulated amortization	\$ 4,039,318	\$ 2,962,449
Amounts funded by capital lease	(125,813)	(74,776)
	\$ 3,913,505	\$ 2,887,673

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA
Notes to Consolidated Financial Statements
Year Ended February 28, 2010

7. CAPITAL ASSETS (Continued)

Change in net assets invested in capital assets is calculated as follows:

	2010	2009
Deficiency of revenue over expenses from continuing operations		
Amortization of capital assets	\$ (150,955)	\$ (155,702)
Loss on disposal of capital asset	(36,704)	0
	\$ (187,659)	\$ (155,702)
Net change in invested in capital assets		
Purchase of capital assets	\$ 1,182,390	\$ 61,092
Repayment of capital lease obligation	31,101	32,852
	\$ 1,213,491	\$ 93,944

8. OBLIGATION UNDER CAPITAL LEASE

Future payments required under capital lease are as follows:

	2010	2009
2009	\$ 0	\$ 36,138
2010	0	19,663
2011	52,557	19,663
2012	33,347	14,748
2013	54,073	0
Total minimum lease payments	139,977	90,212
Amount representing interest at 9.50% per annum	(14,164)	(15,436)
Present value of minimum capital lease payments	125,813	74,776
Current portion of obligation under capital lease	(32,391)	(28,888)
	\$ 93,422	\$ 45,888

9. INTERNALLY RESTRICTED RESERVES

The contingency reserve was established in 2007 for unanticipated or unbudgeted expenses that are consistent with the objectives of the College under Section 4 of the *Dentists' Act* (Section 16 of the *Health Professions Act*, after the College is designated under the Act, effective April 3, 2009). Use of this reserve requires approval from two-thirds of the College's Board. Interest is allocated to the reserve at the rate earned on the College's investments.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA
Notes to Consolidated Financial Statements
Year Ended February 28, 2010

9. INTERNALLY RESTRICTED RESERVES (Continued)

The additional internally restricted reserves were established between 2008 and 2010.

Internally restricted reserves are comprised of:

	March 1, 2009	Expenses	Transfers in	Transfers	Interest	February 28, 2010
Contingency reserve	\$ 1,065,580	\$ 0	\$ (234,979)	\$ 125,119	\$ 30,329	\$ 986,049
Information technology reserve	382,149	(136,340)	0	0	0	245,809
Health Professions Act transition reserve	229,106	(103,987)	0	(125,119)	0	0
Internationally Trained Dental Specialist Process reserve	246,669	(105,827)	0	0	0	140,842
Office furniture renovations reserve	0	0	65,000	0	0	65,000
Building Project Fund	0	(807,572)	2,000,000	0	0	1,192,428
	\$ 1,923,504	\$ (1,153,726)	\$ 1,830,021	\$ 0	\$ 30,329	\$ 2,630,128

10. JOINT VENTURE ACCOUNTING

The Joint Venture was formed to own and operate the property situated at 1765 West 8 Avenue. The title to this property is held in trust by 1765 West 8 Avenue Holdings Ltd. for the Joint Venture. The Joint Venture provides premises for the College and the other 30% participant in the Joint Venture, the College of Pharmacists of British Columbia. The Joint Venture also rents space in the building to third parties.

The College accounts for its 70% interest in the Joint Venture using the proportionate consolidation method. Under this method, the College records 70% of the assets, liabilities, revenues and expenses of the Joint Venture as if they were transacted directly by the College. Transactions between the College and the Joint Venture are eliminated.

The following summarizes the financial position and results of the Joint Venture:

	2010		2009	
	Entire Amount	College's 70%	Entire Amount	College's 70%
Land and building	\$ 4,806,701	\$ 3,364,691	\$ 3,312,579	\$ 2,318,805
Other assets	558,640	391,048	310,890	217,623
Liabilities	(1,039,783)	(727,848)	(334,240)	(233,968)
	\$ 4,325,558	\$ 3,027,891	\$ 3,289,229	\$ 2,302,460

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA

Notes to Consolidated Financial Statements

Year Ended February 28, 2010

10. JOINT VENTURE ACCOUNTING (Continued)

	2010		2009	
	Entire Amount	College's 70%	Entire Amount	College's 70%
Rental revenues from third parties	\$ 767,164	\$ 537,015	\$ 815,496	\$ 570,847
Rental revenue from the College	265,755	186,029	223,738	156,617
Amortization expense	(94,356)	(66,049)	(87,624)	(61,337)
Other expenses	(443,315)	(310,321)	(450,223)	(315,156)
	\$ 495,248	\$ 346,674	\$ 501,387	\$ 350,971

11. RESERVE MANAGEMENT

The College considers its capital under management to be comprised of its net assets. The College's objective when managing its net assets is to safeguard the entity's ability to protect the public in matters relating to dentistry. In respect of cash and short-term investments, the College purchases highly liquid, short-term investment-grade securities held at major Canadian financial institutions with an investment grade rating of AAA or better and cash is held in interest-bearing accounts.

There have been no changes to the College's approach to capital management during the year.

COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA
Consolidated Schedule of General and Administrative Expenses
Year Ended February 28

	2010	2009
		(note 3)
Printing and publications	\$ 283,704	\$ 118,236
Office	216,322	222,652
Equipment repairs and maintenance	74,968	42,014
Loss on disposal of asset	36,704	0
Staff development	32,902	55,745
Professional fees	25,692	32,299
Miscellaneous	19,384	144,707
	\$ 689,676	\$ 615,653

See notes to consolidated financial statements.

