

## We asked, you answered

### Registrant Survey on Complaints & Discipline

In August, we invited all registrants to complete a short survey from QWorkshops about CDSBC's complaint and discipline process. The results were used to help shape the agenda for the Registrant Information Session on 14 October 2015.

Thank you to the 866 registrants who responded to the survey. Many of you also provided thoughtful and insightful comments, which were used to ensure that we address your most pressing questions and concerns at the information session. All responses were anonymous.

Below are the highlights and key themes emerging from the survey.

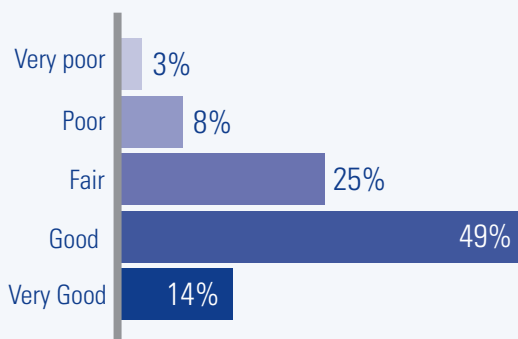
## Survey Highlights\*

### Demographics:

Dentists (or dental therapists<sup>†</sup>): **72%** of respondents

CDAs: **28%** of respondents

Under the *Health Professions Act*, CDSBC's duty is to serve and protect the public. How would you rank CDSBC's performance in meeting this mandate?



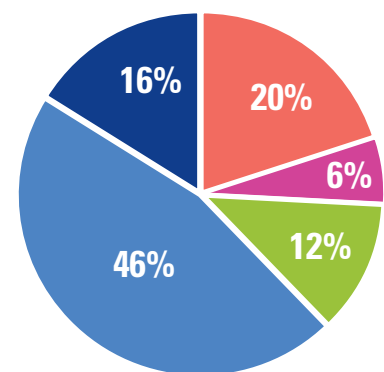
*63% of respondents think the College's performance in meeting its mandate is either "good" or "very good"*

Does not equal 100% because results have been rounded.

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### All districts were represented:



- District 1 (Fraser Valley)
- District 2 (North)
- District 3 (Southern Interior)
- District 4 (Vancouver)
- District 5 (Vancouver Island)

<sup>†</sup>Included with dentists to preserve the anonymity of the 7 dental therapists

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### Have you been the subject of a complaint in the past three years?

- 19% have been the subject of a complaint
- 81% have not been the subject of a complaint

### Of those who have received a complaint in the past three years:

- 81% feel the process was thorough
- 75% feel that complaint investigators treated them respectfully
- 68% felt the resolution was reasonable

### Key themes regarding complaints

**The majority of respondents (82%) do not have any specific comments or questions about the College's complaints and discipline process.**

#### Those who do have comments or questions want to understand...

- how the process works and what to expect
- why it takes so long to resolve complaints
- why the College doesn't dismiss/resolve "frivolous" complaints faster
- how the College handles complaints from one professional against another

**Mostly, registrants want a fair and transparent process.**

### Other topics/areas of concern identified by respondents:

More than 40 topic areas were raised. The top three were:

1. Boundaries
2. Advertising
3. Corporate dentistry

### Which of the following communications mediums is most important to you?

*(highest to lowest, based on weighted average)*

1. Consultation on policy
2. Email publications
3. Continuing education opportunities
4. Website
5. Print publications
6. Information sessions
7. Face-to-face presentations

*\*Not a scientific survey as registrants self-selected to participate. Not all respondents answered all questions.*

## Questions emerging from the survey

### Why doesn't CDSBC dismiss frivolous and/or vexatious complaints more quickly?

We do so as quickly as possible but we have to take the time to determine whether there is merit to the complaint. The complaints that we receive vary in quality, and a poorly worded complaint still has the potential to raise a real concern. It sometimes requires several conversations to clarify the

issue, and the dentist's response to the initial complaint will help us determine whether a complaint is trivial or vexatious.

Our process for investigating and resolving complaints must meet the standards set by the Health Professions Review Board (HPRB). What a dentist believes to be a trivial or vexatious complaint may not be viewed as such by the HPRB.

### Why has the complaint against me dragged on for so long?

We understand the anxiety and stress registrants can feel when they are the subject of a complaint. There are now seven dentist complaint investigators working to close complaint files, and an eighth staff dentist who oversees ongoing monitoring and the wellness program. We are closing more complaints than we open and have

nearly eliminated the backlog of complaints. As of 30 September, the number of open complaints was 228 – significantly lower than in previous years – and the average age is down to 10 months. Only 19 complaints are more than two years old.

### **I heard that the complaint process is really a witchhunt and that CDSBC is being totally unfair to the dentists it investigates. What is going on?**

The complaints process has integrity. It is fair and objective. The approach is not punitive. Most importantly, we take a remedial approach to resolving complaints and when a concern is identified, our objective is to help the dentist improve their practice through education.

### **I don't think my complaint was handled fairly because it was about one thing but the investigator was "digging" into something else. What can I do?**

If a complaint investigator is looking into a complaint and comes across something else that raises concerns about a dentist's practice, the investigator cannot ignore it. Two common examples are poor dental recordkeeping and obtaining informed consent, both of which can normally be addressed fairly easily.

But if you feel that your complaint was truly mishandled, or that you were poorly treated by the investigator, you have the option to contact the Registrar/CEO or the

CDSBC Board through the President. You always have the option to get legal advice.

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*... when a concern is identified, our objective is to help the dentist improve their practice through education.*

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### **How does CDSBC handle complaints from one dentist against another? What happens if a dentist encourages a patient to make a complaint about another dentist?**

A dentist who has concerns about another dentist's practice should contact their colleague to discuss their concerns. It is never wise to rely on a patient's version of events without getting the other dentist's perspective. A good example is the patient who reports faulty treatment by a previous dentist, when in fact the patient was non-compliant, refusing to come in for follow up care or skipping appointments.

If a patient does raise concerns about how another dentist has treated them, you should recommend that they speak to the dentist directly, as the vast majority of issues can be resolved this way. If that is not possible, you or the patient can call CDSBC's practice advisor, who can offer advice and assistance to

registrants and patients. In fact, CDSBC estimates that several hundred potential complaints are avoided each year just by our staff speaking to concerned callers.

If – after having gone through this process – you continue to have serious concerns about the care delivered by another dentist, then it is appropriate to file a complaint with CDSBC.

### **Is the complaints process run by dentists or by lawyers?**

Dentists. There are dentists at every level of the process. A majority (15 of 24) of the members of the Inquiry Committee are dentists. (This is the committee that is responsible for accepting complaints, for overseeing the investigation, and for directing how a complaint will be resolved. For more information, see *How a Complaint is Resolved* on the next page.)

Each complaint about dentistry that is accepted by the Inquiry Committee is assigned to one of our staff dentists. That dentist shares the preliminary results of their investigation with the other staff dentists at the weekly meeting, before finalizing analysis for decision by the Inquiry Committee.

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*Note: the term "dentist" is used here rather than "registrant" because the vast majority of complaints involve dentists.*

## How a Complaint is Resolved

The steps outlined below are for general information only. Exceptions may apply.

### Complaints Process

(normally confidential)

#### Step 1

CDSBC Receives a Written Complaint

CDSBC investigates all complaints related to the conduct or competence of dentists, dental therapists and certified dental assistants.

Complaints that are trivial, frivolous, vexatious or made in bad faith are dismissed.

#### Step 2

Preliminary Evaluation

The complaints team conducts a preliminary evaluation and recommends one of three options for consideration by the Inquiry Committee\*:

- (a) dismissal (e.g., purely financial matters)
- (b) early resolution (e.g. relatively simple complaints)
- (c) investigation (and assignment to a Complaint Investigator)

The complaints team includes 8 dentists.

#### Step 3

Inquiry Committee\* Review

The Inquiry Committee reviews the complaint and decides next steps, if any.

The Inquiry Committee consists of dentists, certified dental assistants, and members of the public.

#### Step 4

Investigation

If not dismissed or resolved through early resolution, the next step is investigation. The Complaint Investigator gathers all relevant information and prepares a report for resolution.

This step may include telephone conversations, in-person interviews, and gathering of dental records, X-rays, models, and more.

The complaint letter is forwarded to the registrant, who has the opportunity to respond. The registrant's response is also provided to the complainant.

*\*For simplicity, the terms Inquiry Committee and Discipline Committee are used here to refer to either panels or meetings of the whole committee*

**Discipline Process**  
(normally public)

**Step 5**

Complaints Team Prepares Report with Recommendations

The complaints team reviews the summary report and recommendations for resolving the complaint. Resolution options include:

- (a) close the complaint with no action taken, or with some recommendations/best practice advice; or
- (b) ask the registrant to sign an agreement to take certain steps to improve their practice (such as taking certain courses to improve skills) or to be mentored by another registrant for a period of time.

A report summarizing the complaint, investigation and recommendations for resolution is prepared for the Inquiry Committee.

This is a collaborative process with the registrant. The registrant has the opportunity to discuss any concerns identified and the proposed resolution. The registrant:

- can agree, or
- can provide an alternative resolution proposal for the Inquiry Committee to consider (and can ask for a meeting with a panel of the Inquiry Committee.)

Each complaint is reviewed at a weekly complaints team meeting. The process is overseen by the Inquiry Committee, ensuring that there are multiple dentists reviewing each complaint file.

**Step 6**

Inquiry Committee Decision

The Inquiry Committee receives the report and recommendations for resolution and makes its decision.

The majority of complaints are resolved at this stage. Complaints only proceed if the registrant asks to appear before the Inquiry Committee, or if the Committee directs that a citation be issued against the registrant.

**Remedial not Punitive**  
If concerns about a registrant's practice are identified, CDSBC takes a remedial and collaborative approach to resolving those concerns. All complaints resolved without a citation happen by consent.

**Step 7**

Inquiry Committee Directs the Registrar to Issue a Citation

Citations are issued in the rare instances where an issue is serious, an agreement cannot be reached, and/or the registrant has not responded to the complaint.

A citation is a formal document that lists the allegations against the registrant and provides notice that there will be a public hearing before the Discipline Committee.

Less than 2% of complaints reach the discipline stage. Even after a citation is issued, the registrant can make a proposal to the Inquiry Committee to resolve the citation.

**A Committee-driven Process**

The Inquiry Committee gives direction and decides how each complaint will be resolved.

In the event that a complaint proceeds to a discipline hearing, the Discipline Committee will determine the resolution.

## Download

your copy of the new

*Dental Radiography Standards & Guidelines*

at [www.cdsbc.org/dental-radiography](http://www.cdsbc.org/dental-radiography)

## New *Dental Radiography Standards & Guidelines* Approved by the Board



### Does CDSBC have your current contact information?

Registrants have a professional responsibility to ensure CDSBC has your current address, phone number and email address.

To update your information, log in to your online account and make any changes under "Manage Account."

Update your account by logging in at [www.cdsbc.org](http://www.cdsbc.org)

The draft document that was posted for consultation earlier this year has been approved by the Board, with revisions that arose from comments received during the consultation period. An appendix has been added to make it easier for practitioners to access the highlights of one of the three source documents on which it is based (*SEDENTEXCT Evidence-Based Guidelines on Cone Beam [CBCT] for Dental and Maxillofacial Radiology*).

The new *Dental Radiography Standards & Guidelines* is a principle-based document that captures the existing expectations including:

1. How to protect the public from being exposed to radiation unnecessarily; and
2. When a dentist takes an image, s/he is responsible/accountable for everything in the field of view. If the dentist cannot interpret the image, it must be referred to someone who can. The principles contained within *Dental Radiography Standards & Guidelines* apply to all radiography and not only to CBCT.

*Dental Radiography Standards & Guidelines* is available on the website at [www.cdsbc.org/dental-radiography](http://www.cdsbc.org/dental-radiography) and in the professional practice section of the CDSBC Library at [www.cdsbc.org/cdsbc-library](http://www.cdsbc.org/cdsbc-library).

## Discipline Activities

The *Health Professions Act* requires CDSBC to publish reports of discipline activities and penalties against its registrants. A full list of complaints and discipline notices is available at [www.cdsbc.org/complaint-discipline-notices](http://www.cdsbc.org/complaint-discipline-notices).

### Dr. Bobby Rishiraj

A panel of CDSBC's Discipline Committee has made adverse findings against oral surgeon Dr. Bobby Rishiraj of Kamloops B.C. The panel characterized Dr. Rishiraj's conduct as incompetence.

The panel's decision follows a hearing concerning allegations that Dr. Rishiraj did not adhere to the College's sedation standards. Dr. Rishiraj admitted to some of the allegations during the course of the hearing.

A penalty hearing was held on 24 August 2015 and the subsequent penalty decision will be posted when available. For more information about this case and to read the full discipline panel decision, please visit [www.cdsbc.org/bobby-rishiraj](http://www.cdsbc.org/bobby-rishiraj)

## Introducing the 2015/16 CDSBC Board



*Back (left to right): Dr. David Tobias, Dr. Hank Klein, Dr. Jan Versendaal, Mr. David Pusey, Dr. Erik Hutton, Mr. Samson Lim, Dr. Ben Balevi, Dr. Eli Whitney, Dr. Pamela Barias, Dr. Dustin Holben, Ms. Sherry Messenger. Front: Dr. Mark Spitz, Dr. Chris Callen, Ms. Melanie Crombie, Mr. Jerome Marburg (Registrar/CEO), Ms. Elaine Maxwell, Mr. Richard Lemon. Absent: Mr. Dan De Vita, Ms. Julie Johal.*

### Board Officers

Dr. David Tobias, President  
Dr. Erik Hutton, Vice-President  
Dr. Hank Klein, Treasurer

Dr. Eli Whitney  
(University of British Columbia  
Faculty of Dentistry)

### Dentist Board Members

Dr. Jan Versendaal  
(District 1: Fraser Valley)  
Dr. Mark Spitz  
(District 2: North)  
Dr. Chris Callen  
(District 3: Southern Interior)  
Dr. Ben Balevi  
(District 4: Vancouver)  
Dr. Dustin Holben  
(District 5: Vancouver Island)  
Dr. Pamela Barias  
(Certified Specialist)

### Certified Dental Assistants

Ms. Elaine Maxwell  
Ms. Sherry Messenger

### Public Members

Ms. Melanie Crombie  
Mr. Dan De Vita  
Ms. Julie Johal  
Mr. Richard Lemon  
Mr. Samson Lim  
Mr. David Pusey

Learn more about CDSBC's Board  
at [www.cdsbc.org/cdsbc-board](http://www.cdsbc.org/cdsbc-board)

## Boundaries Policy Update

The Board is making revisions to the draft policy, *Boundaries in the Practitioner-Patient Relationship*, in response to the feedback from registrants. The draft policy was posted for consultation until 30 September but the key changes under consideration are:

1. Publication as a guideline (highly recommended) and not as a standard (mandatory).
2. Advising registrants on how to avoid conflicts, without defining specific conflict relationships.

The Board directed the College to continue to work with other health regulators on boundary issues.

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## College Calendar

**14 October 2015**

### Registrant Information Session on Complaints & Discipline

5:30pm - 8:30pm

SFU Morris J. Wosk Centre for  
Dialogue - Asia Pacific Hall  
580 W. Hastings Street, Vancouver

Log in at [cdsbc.org](http://cdsbc.org) to register.

**22 October 2015**

### Overview of CDSBC's Minimal/ Moderate Sedation Standards

6:00pm - 6:50pm

Hosted by: Thompson Okanagan  
Dental Society

Delta Grand Okanagan Resort  
1310 Water Street, Kelowna

Register at [todsmeeting.com](http://todsmeeting.com)

For more information and to  
register for a CDSBC event visit:  
[www.cdsbc.org/events](http://www.cdsbc.org/events)

**27 October 2015**

### "Trust me, I'm a dental professional"

5:00pm - 8:30pm

Victoria Conference Centre  
(Saanich Room)  
720 Douglas Street, Victoria

Log in at [cdsbc.org](http://cdsbc.org) to register.

**28 November 2015**

### CDSBC Board Meeting

9:00am

Hyatt Regency Hotel  
655 Burrard Street, Vancouver

To attend as an observer,  
RSVP to [ncrosby@cdsbc.org](mailto:ncrosby@cdsbc.org)  
by 20 November.