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the Sentinel

A publication of the College of Dental Surgeons of British Columbia for dentists and certified dental assistants

Adolescents and Consent

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Is Your Contact Information Current?



he concepts of informed consent and patient confidentiality can be complicated when the patient is an older child or adolescent. In B.C., there is no age of consent for treatment and children and adolescents have the right to be consulted about decisions concerning their health care. In this article, we discuss some of the key considerations practitioners must be aware of when treating adolescents.

Many dentists have adolescent patients who have "grown up" in their practices. As a child becomes older, it is important to reconsider and revise the approach to consent, treatment and patient communication accordingly.

The *Infants Act* says that children (anyone under the age of 19) can consent to their own health care if they are capable.

But when is a child considered to be capable? This is a judgment call and it is up to the healthcare provider to decide on the capability of each patient to make decisions about their own care. The law considers children to be capable if they understand the need for medical treatment, what the treatment involves and the benefits and risks of having, or not having, the treatment.

Like adults, capable minors and adolescents are entitled to confidentiality. Again, professional judgment is required in each situation and the consent of the adolescent is required before confidential

The chart is a confidential record that should not be released to a family member or guardian without the adolescent's approval.

information can be relayed to a parent, other family member or guardian. Do not assume that consent is given based on familiarity with the patient or parents.

Dentists should speak with adolescents about their right to confidentiality and the importance of open communication.

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President's Report Dr. Ash Varma

Signing off as President

When I first started as President two years ago, my vision was that CDSBC would continue to build our presence at the provincial and national levels – and I feel confident we have done that.

Reflections

There are other accomplishments I want to point out. The transition from the *Dentists Act* to the *Health* Professions Act was virtually painless. That said, it took a great deal of work behind the scenes, and was the single biggest focus for the College Board and staff during my presidency. We also helped the Study Club Alliance bring the Sirona Learning Centre to fruition. We continued to increase the profile of the College throughout the province at component societies and conferences. We made substantial repairs and improvements to the College Place building in Vancouver without impacting our renewal fees.

Members of the Board have worked together to create an even stronger understanding of their roles and responsibilities, which is evident in the way they establish and monitor policies.

Another key achievement was increasing our presence and involvement at the national level. This is where issues like labour mobility and the registration

I am proud to have led an organization that is responsive to the needs of the profession and the public.

of foreign-trained dentists are addressed – and B.C. must be there to help shape the policies and initiatives that affect our profession.

Connecting with Dentists and Certified Dental Assistants

Thank you to the dentists and CDAs of B.C. for your support. Having the opportunity to speak with you directly was the best part of this job. It has been a real privilege for me to have served as your President. As my term as CDSBC President draws to a close, I take great comfort knowing that I am leaving the College in exemplary hands with the new elected officers, the incoming Board, and the continued support of our Registrar and her outstanding staff. I am proud to have led an organization that is responsive to the needs of the profession and the public. I know we will continue to be accountable and transparent in everything we do.

As for me, even though I'll be stepping down as President, I remain as committed as ever to the College and plan to continue my involvement with this great organization.

continued from front cover

The patient history should be updated at every visit, including questions about smoking, the use of street drugs and birth control.

It may not always be easy for the dentist to ask lifestyle related guestions because of personal feelings they may have about the child or teenager's choices and behaviour. This can be even more difficult when there is an established relationship with the family. Doing so is critical, however, because as with any patient, building an open and honest relationship can influence the treatment provided. For instance, prescribing antibiotics to a female teenager could impact the efficacy of birth control pills. And the use of street drugs could have serious interactions with a variety of medications used in the dental office.

Costs, insurance coverage and payment for treatment is another area that needs to be discussed when treating a consenting child or adolescent. Pre-emptive measures may be appropriate, including a discussion with the patient and, with the patient's permission, the parents, about how costs will be covered.

In closing, all discussions should be documented in the patient chart in sufficient detail, including the information presented, questions asked by the patient and the decision reached. Conversations about costs, treatment options and alternatives, risks and benefits, outcomes and complications should all be noted. As with all other information pertaining to the consenting adolescent, the chart is a confidential record that should not be released to a family member or guardian without the adolescent's approval.

If you have questions about consent and confidentiality for adolescent patients, contact CDSBC at 604-736-3621 or toll free at 1-800-663-9169.

New CE Video: *Tough Topics in Dentistry* Eligible for 3 Credits

Dental practitioners deal with difficult situations every day and the answers are almost never black and white.

Filmed live at the 2009 PDC, *Tough Topics in Dentistry* features five scenarios encountered in today's dental practice, such as domestic violence, teens and substance abuse, and confidentiality. Each scenario is discussed live in a TV news format by the Registrars of CDSBC and the Royal College of Dental Surgeons of Ontario, with participation from our studio audience.

Professional boundaries and requirements for informed consent are other must-know topics covered in this interactive video. The DVD is three hours long, broken into 20-minute segments. A brief posttest, available at **www.cdsbc.org**, can be submitted to CDSBC for 3 CE credits. To order your free copy of the DVD, phone CDSBC.



IN BRIEF Clarifying the 365-day Rule

The College has seen an increase in the number of calls about the 365-day Rule. In order for a dental hygienist to provide dental hygiene services to a patient, that patient must have been examined by a dentist within the previous 365 days and the dentist must have provided the dental hygienist with appropriate instructions for the provision of hygiene services (restricted activities).

Note that no further examination is required within the 365 days, unless the dentist or dental hygienist considers it necessary. For more information see CDSBC Bylaw 8.12 available at www.cdsbc.org/bylaws.

Requirements for Owning a Dental Practice

CDSBC has been asked to clarify the requirements for owning a dental practice. Only dentists who hold either **full** registration or **restricted to specialty** registration with CDSBC may own a dental corporation in B.C. (CDSBC Bylaw 11.02 and Section 43.1 of the *Health Professions Act*). A non-practising dentist who wishes to apply for a temporary exemption must submit a request to the CDSBC Registrar.

Upcoming Board Meeting

The next public CDSBC Board meeting will be held on Saturday, September 18, 2010 in the Sutton Place Hotel in Vancouver (Second Floor, Chateau Belair). If you plan to attend an upcoming College Board meeting as an observer, please RSVP by email to Nancy Crosby at ncrosby@cdsbc.org.

Board Highlights from the May 7, 2010 Board meeting are available at www.cdsbc.org/board_meetings.

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Registrar's Report Heather MacKay

Code of Ethics Under Revision

The Ethics Committee is leading an initiative to update the CDSBC Code of Ethics to make it more modern and relevant to practitioners and to the public. The goal is to update the language and approach – but not to change the basic principles that are already embodied in the current Code. A decision was made by the Committee early in the process that the Code for CDSBC would be a set of principles rather than a list of specific rules and requirements.

The first task was to review the codes of ethics of other related organizations. There are recurring themes, particularly among health regulators where the focus is on protection of the public. Regulatory bodies are expected to have a code of ethics that is obligatory in nature – i.e. adherence by registrants is expected.

Professional associations, on the other hand, have codes of ethics that tend to be more aspirational-based, where the professional is expected to strive to uphold the duty, trust, honour and integrity of the profession. In this case, the focus is on trying to be the best professional possible as opposed to setting minimum expectations for conduct.

Both types of codes are based on principles that encompass life and health, competent care, patient autonomy, practice preferences, aesthetic values, and cost. In reviewing the codes of ethics of other related organizations, it became clear that a set of core values would set the foundation for the principles of ethics for the profession. To this end, the Committee proposed a set of core values (see article below) to the Board that it believes forms the basis for the ethical expectations for dentists and CDAs. These core values were accepted by the Board in May.

The next step in the revision of the Code of Ethics will be to develop principles to guide the ethical conduct of dentists and CDAs in B.C. We will, of course, keep dentists and CDAs informed as this process unfolds.

Core Values Underpin Code of Ethics

C ore values represent a guide of ethical behaviour and are the foundation from which ethical principles are derived. The core values listed below were approved by the Board and will form the basis of the revised CDSBC Code of Ethics.

Autonomy

Understand and respect patients' rights to make informed decisions

based on their personal values and beliefs.

Beneficence

Maximize benefits and minimize harm for the welfare of the patient.

Compassion

Act with respect, sympathy and kindness to all patients while addressing their concerns and alleviating their pain.

Fairness

Treat all individuals, patients, colleagues and third parties without prejudice or discrimination in a just and equitable manner.

Integrity

Be truthful; behave with honour and decency while upholding professional standards.

Complaint Summary

The patient alleged that she received substandard care from a dentist who had restored her tooth. She began to experience severe pain in an upper right molar two months after having a filling placed. Radiographs taken by a subsequent treating dentist revealed residual caries in the recently restored tooth. One year later, the patient had the tooth extracted due to ongoing severe pain, coupled with a lack of financial resources to have the tooth restored.

The dentist responded that the patient refused to have a full exam and radiographs at the initial appointment so he simply restored the tooth that was causing symptoms. The dental records he provided lacked any detail about what had been discussed with the patient before providing treatment.

The CDSBC Complaint Investigator met with the dentist to discuss the apparent lack of appropriate diagnosis, treatment planning and informed consent, as well as a general inadequacy of documentation. The dentist acknowledged he had proceeded with treatment as requested by the patient without a full dental exam and without fully discussing all of the options. He also acknowledged not fully informing the patient of the risk of proceeding with treatment without radiographs.

The Inquiry Committee accepted the Complaint Investigator's recommendations that the dentist review requirements for informed consent and attend a records management, diagnosis and treatment planning course.

Board Election Results

Ballots were counted at CDSBC on May 20 by a team of eight volunteer scrutineers, all of whom are practising dentists and certified dental assistants. The newly elected Board members began their terms on July 1, 2010.

Elected Officers

- President Dr. Bob Coles (acclaimed)
- Vice President Dr. Peter Stevenson-Moore (acclaimed)
- Treasurer Dr. David Tobias (acclaimed)

Dentist Board Members

Vancouver Electoral District – Dr. Patricia Hunter (elected) Fraser Valley Electoral District – Dr. Erik Hutton (acclaimed)

Vancouver Island Electoral District – Dr. Thomas Kirk (acclaimed)

Southern Interior Electoral District – Dr. Scott LeBuke (acclaimed)

North Electoral District – Dr. Lonny Legault (acclaimed)

Certified Specialist Representative – Dr. Jonathan Suzuki (acclaimed)

Faculty of Dentistry Rep, UBC – Dr. Eli Whitney

CDA Board Members

Ms. Elaine Maxwell (elected)

Ms. Leslie Riva (elected)

New Director of Complaints



C armel Wiseman has been appointed to the position of Director of Complaints.

In this senior role, Carmel will oversee CDSBC's responsibilities for regulation in the areas of professional conduct and discipline. This will include overseeing the legal and process requirements for registration and complaints cases that are put forward to the Health Professions Review Board. With the addition of Carmel, the Complaints Department has an ideal blend of legal and dental expertise. Her skills will complement those of the three dentist Complaint Investigators on her team. She and the Complaint Investigators are supported by four Complaint Officers.

Carmel's experience in professional regulation is extensive. She worked as a professional conduct lawyer at the Law Society of BC and her more recent responsibilities included policy development in regulation and privacy.

Carmel is a strong believer in maintaining a process that is fair to dentists and certified dental assistants, while fulfilling the requirement of accountability to the public. "As a health regulator, we have the gift of public trust," she says.

Earn CE at Your Desk

Registration Open for Live Webinar Series

Stay current about new developments in dentistry by registering for webinars being offered by CDSBC and the Royal College of Dental Surgeons of Ontario. This pilot project uses technology to explore new options for learning.

A WEBINAR IS:

A webinar is a presentation, lecture, workshop or seminar that is transmitted live over the Internet. Webinars are interactive – they allow people to share, receive and discuss information in real time.

Why choose the Webinar Series:

- Fast Get right to the heart of the matter in one hour.
- Convenient No time out of the office.
- Easy All you need is a computer with Internet access.
- Interactive You can ask questions in real time, so no post-test is required.
- Cost effective \$100 per webinar or \$200 for all three.
- CE credits Participation in each webinar is worth one CE credit.

TOPICS AND DATES

Oral Bisphosphonate Use and the Prevalence of Osteonecrosis of the Jaw

Learn the latest on this fast-changing topic.

1000

Friday, September 24 9-10 am PST

Registration deadline: September 14

Changing the Architecture of Bone

Critical information for anyone interested in implants.

Friday, October 29 9-10 am PST

Registration deadline: October 19

Acute Pain Control: Use of Opioids in Dentistry

What you need to know about pain control.

Friday, November 26 9-10 am PST

Registration deadline: November 16

HOW TO REGISTER

Complete the registration form distributed with this issue of the *Sentinel* or go to www.cdsbc.org/webinar_series.

College Honours Outstanding Contributions

The College honoured 11 individuals for their contributions to dentistry and the organization at the CDSBC annual awards ceremony on April 15.

The Distinguished Service Award, CDSBC's highest award given this year, was handed to public member Robbie Moore. This award recognizes outstanding and broad contributions to the profession of dentistry in B.C. and to the College over a sustained period of time. Moore, who works as the Director of People Services at Menno Home and Hospital in Abbotsford, has volunteered with CDSBC for more than 20 years. Four Awards of Merit, which recognize significant contributions that have had an impact on the practice or the profession of dentistry through involvement with CDSBC, were presented to:

- Jonathan Adams, dentist, Victoria
- Elli Cox, certified dental assistant, Vancouver
- Michael Henry, certified specialist in oral and maxillofacial surgery, Coquitlam
- Richard Kramer, certified specialist in pediatric dentistry, Vancouver

One Special Group Award was presented to members of the Study Club Alliance of BC in recognition of their work to transform the aging dental clinic at College Place into a state-of-the-art teaching and learning facility:

- Susan Chow, dentist, Vancouver
- Robert Elliott, dentist, Prince George
- Chris Hacker, dentist, Vancouver
- Don MacFarlane, dentist, Vancouver
- Craig Naylor, dentist, Vancouver
- Mark Norris, dentist, Vancouver

For more information about the 2010 awards recipients, view the event program at www.cdsbc.org/ awardsprogram.

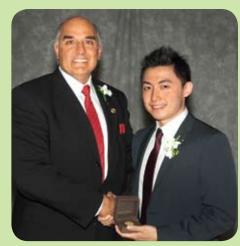


CDSBC Award Recipients Back row (L-R):

Dr. Jonathan Adams, Dr. Michael Henry, Dr. Craig Naylor, Dr. Ash Varma (President), Dr. Robert Elliott, Dr. Mark Norris, Mr. Robbie Moore

Front row (L-R):

Ms. Heather MacKay (Registrar), Dr. Chris Hacker, Dr. Susan Chow, Dr. Richard Kramer, Dr. Don MacFarlane, Ms. Elli Cox, Dr. Myrna Halpenny (event MC)



Gold Medal Winner

President Ash Varma presented Dr. Arthur Lau with the CDSBC Gold Medal at the UBC Faculty of Dentistry graduation luncheon on June 1. The medal is awarded to the graduating student with the most outstanding record in their course of study. Arthur is planning to work as an associate in a dental practice in the Lower Mainland.

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CDAs in Practice



Sandra Harvey Manager of Regulation

In this new column, Sandra Harvey, CDA, provides answers to the most commonly asked questions about the role of certified dental assistants in the dental office.

Q. What should I do if the dentist asks me to provide a dental service I am not comfortable providing?

A. Is the service one that CDAs are allowed to provide under the Bylaws, and if yes, do you have the knowledge, skill and competency to perform the service safely and effectively?

A CDA may only perform a service if it is permitted under the Bylaws. (For a complete explanation of how CDA services are governed under the Bylaws, please see A Guide to CDA Services, available at www.cdsbc.org /cda_services.) Performing a service not permitted could put the patient at risk and both the dentist and CDA would be in contravention of the Health Professions Act. The only course of action in this situation is to let the dentist know immediately that you cannot proceed with this request.

If the service is within the scope of what a CDA may provide according to the Bylaws, but you feel you don't have the knowledge, skill and competency to perform it safely and effectively, it is your responsibility to notify the dentist that you are not able to perform the service. You should talk to the dentist about how to gain this competency. This could be achieved by first watching the dentist or another experienced CDA providing the service, practising on models if possible, followed by practising in a controlled environment under the guidance and direction of someone who has the competency.

You will be ready to perform the service on a patient only when you and the dentist agree that you have gained the required knowledge and skill to do so safely and effectively.

Regulating dentists and certified dental assistants in the public interest.

The *Sentinel* is published by:

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Readers' questions, comments and content suggestions for the *Sentinel* are welcome and may be forwarded to the Editor, c/o the College.

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The Sentinel and other communications circulated by the College are the primary sources of information about regulation for dentists and certified dental assistants in B.C.

Dentists and CDAs are responsible for reading these publications to ensure they are aware of current standards, policies and guidelines.

Is Your Contact Information Current?

D entists and CDAs: you have a professional responsibility to ensure CDSBC has your current address, phone number and email address or fax number. There are four ways to change your contact information:

- www.cdsbc.org (dentist & CDA login)
- Email info@cdsbc.org
- Call 604-736-3621 (toll free in B.C. 1-800-663-9169)
- Fax 604-734-9448 (toll free in B.C. 1-866-734-9448)