



**Manitoba  
Dental  
Association**

# **2025 Annual Report**



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*Dr. Daron Baxter*

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## Mission

The MDA is dedicated to the interests of the public through the regulation of Dentists and Dental Assistants in Manitoba. The MDA provides guidance to the public and its members with the goal of delivering quality oral healthcare, an essential component of general health, for all.

## Vision

The best interest of the public is the best interest of the profession.

## Values

**Ethical:** Upholding the public interest by promoting honesty, fairness, and integrity in our profession.

**Transparent:** Facilitating openness and trust with all stakeholders through clarity of processes.

**Compassionate:** Understanding the public's needs by respectfully listening and engaging in different perspectives to achieve the best possible outcomes.

**Collaborative:** Working together to achieve optimal oral health for all.

**Inclusive:** Unbiased respect for all.



# #1 Strategic Goal Excellence in Learning

At the MDA, we know that learning doesn't stop after graduation. We help Manitoba dentists stay confident, current and supported throughout their careers.

That's why Excellence in Learning is a key focus of our strategic plan—because better learning leads to better care.

- The MDA Committees that contribute to this Goal include:**
- MDA & the Gerald Niznick College of Dentistry Mentorship Program
  - General Practice Study Club
  - Annual Convention Committee "Prairie Lights Conference"
  - Continuing Competency Committee

- In addition the MDA works promote the various Study Clubs that meet our Continuing Competency Bylaw requirements
- Infection Prevention and Control Committee
- Committee on Office Assessment
- CBCT Committee



# #2 Strategic Goal Culture of Community

Dentistry is strong when we're connected. That's why Culture of Community is a key goal—bringing members together, strengthening relationships and supporting the public we serve.

**The MDA inspires member engagement and supports its leadership team:**

- Get involved
- Be heard
- Connect with peers across the province

Whether through committees, events or leadership opportunities—your participation shapes the future of dentistry in Manitoba.

The MDA works on behalf of dentists and patients—speaking up on issues that affect access to care, oral health

policy and the sustainability of dental services in Manitoba:

- Better outcomes for patients
- A fair, informed voice for the profession
- Public trust in dentistry

The MDA relies on strong partnerships with all stakeholders:

- Government
- Educators
- Regulators
- Health partners
- Community organizations

Working together helps advance oral health and support for dentists across the province

The MDA Committees that contribute to this Goal include:

- MDA & the Gerald Niznick College of Dentistry Mentorship Program
- General Practice Study Club
- Annual Convention Committee "Prairie Lights Conference"
- Wellness Committee
- Communications Committee



# #3 Strategic Goal Access to Care

Access to oral health care matters—for patients, providers and communities.

- Prioritize access to care for all Manitobans
- Improve economic sustainability of oral health care
- Increase geographic accessibility of oral health care
- Increase engagement with our Indigenous stakeholders

The MDA Committees that contribute to this Goal include:

- Access to Dental Care in Remote & Northern Communities
- Task Force: Dental Care for Residents of Long Term Care Facilities
- Dental Implant Sub-committee
- Economic Committee
- Wellness Committee

By addressing affordability, sustainability and location—and by working in partnership with Indigenous communities—the MDA is helping ensure oral health care is available, respectful and sustainable for everyone.



# #4 Strategic Goal Public Trust

Trust is the foundation of the dentist-patient relationship—and of a strong profession. That's why public trust is a key focus of the MDA's strategic plan.

- Improving the peer review process ensures fairness, consistency and transparency
- Increasing collaboration with stakeholders strengthens accountability and shared understanding

Public trust protects patients and the integrity of dentistry in Manitoba.

The MDA Committees that contribute to this Goal include:

- Peer Review Committee
- Pharmacological Behaviour Management Committee
- Scope of Practice & Delegation of Duties Committee
- General Practice Study Club
- Annual Convention Committee

“Prairie Lights Conference”

- Continuing Competency Committee
- CBCT Committee
- Registration License Bylaw Review Committee
- Fluoride Strategy Working Group
- Wellness Committee
- Infection Prevention & Control Committee
- Communications Committee



# President's Report

**H**aving finished my term as the 101st President of the Manitoba Dental Association, I can now reflect on the achievements accomplished by the MDA over the past year. Together, MDA volunteers and staff worked tirelessly to address issues important to our members, to our profession and to Manitobans as a whole. With a long and ever-growing list of executive goals, and the constant emergence of new matters of importance to the profession, I'm proud of the job done and the accomplishments made in 2025.

The CDCP has been forefront on the MDA agenda for most of the past three years. Through 2025, the MDA continued to advocate for CDCP policy changes that expand access to care without compromising the existing model of dental care in Canada. New challenges continued to arise throughout the year—from Health Canada's institution of arbitrary lab bill 'maximums', to the continued struggles with preauthorization efficiency—each new challenge was met with a unified, cross-Canada voice that was able to effect positive change.

The MDA Strategic Plan, which is now in its 3rd year, is structured around its core themes of Public Trust, Access to Care, Excellence in Learning,

**The MDA Strategic Plan, which is now in its 3rd year, is structured around its core themes of Public Trust, Access to Care, Excellence in Learning, and Culture of Community.**

and Culture of Community. It has successfully been implemented at the committee level. It provides direction and a framework of thinking and behaviour that will be disseminated down to each MDA member in the coming year. With those themes in mind, this report outlines some of the 2025 MDA activities that address these main themes.

## Public Trust

In 2025, the culmination of the MDA Truth & Reconciliation committee's work has resulted in an action plan that will resonate with Manitobans for decades to come. The primary aim of this project was to help create an environment of culturally safe and appropriate care for First Nations, Inuit and Metis Manitobans. Mandatory cultural sensitivity training for all MDA members will be a part of this plan, and the engagement of indigenous leaders, members of our dental community, and elders was key to the superlative outcome. Involvement of First Nations, Inuit and Metis artists capped the effort with a bespoke and meaningful visual representation of the interconnection between oral health and the various communities and peoples we serve in Manitoba.

The MDA continues to experience increased public scrutiny, and the board

prioritized transparency, accountability, and alignment with the public interest. As one of its executive goals, the peer review process is under thorough review. Modernization and scrutiny of the peer review process is paramount to maintaining public trust.

Part of that trust stems from the MDA's commitment to review and modernize its bylaws. In 2025, the *Bylaw for Delegation of Duties of Non-Registered Personnel* was passed in August helping ensure non-regulated members of dental teams (and their delegating dentists) are given a clear outline of allowable duties. As well, work continued towards the finalization of an updated Registration and Licensing Bylaw which is expected to come into effect in 2026.

Communications is a key element of public trust. With the guidance of the MDA Communication Committee and Relish Communications, the MDA's efforts through 2025 aimed to keep members and the public well-informed on critical issues. The MDA continued to provide accurate, accessible updates on how changes may impact dental practices and patients alike.

## Access to Care

As evidenced by the number of Canadians that utilized CDCP coverage in 2025, the Canadian Dental Care Plan made dental care much more accessible for many Canadians. But the CDCP did continue to raise concerns about excessive administration, arbitrary, unilateral changes imposed by Health Canada, and the concern about the potential deterioration of private, employer sponsored dental insurance plans. In response, the MDA joined with national and regional partners to advocate for a

plan that prioritizes high-quality, patient-centered care without compromising the private dental care model that has existed successfully in Canada for decades.

MDA work with the provincial government continued to address essential issues relating to provincial programming. Advocacy for a new and upgraded EIA contract was undertaken making the case that, with CDCP as first payor, Manitoba's provincial government stood to realize substantial plan savings each year. Work also continued in order to negotiate a renewed Manitoba Health contract for Oral Health Services. While work on these files has progressed frustratingly slowly, the MDA believes renewal of these programs is crucial for Manitobans to continue to access essential oral health services.

Across North America, dental workforce shortages remained a difficult challenge in 2025. Modified training and licensure pathways for Registered Dental Assistants (RDAs) and the continued development of a remote training pathway continued to be a focus of the MDA. The development of the in-office RDA training program continued with next steps to include a 'test class' expected to run in 2026. Once underway, CDAC accreditation can be sought, and access to the NDAEB examination for fully remotely trained dental assisting candidates will follow.

The development of an MDA Suggested Fee Guide remained an important and valued membership service in 2025. Critical to defensible, and reasonable Suggested Fee Guides (for both dentists and patients) is accurate practice data supplied by Manitoba dentists. Participation in economic surveys remains vital to understanding the cost of delivering care and ensuring the long-term sustainability of dental practice as well as the affordability of dental care in Manitoba.

## Excellence in Learning

Continuous learning is essential to professional growth and public safety. The 2025 MDA Annual Convention brought together practitioners, students, and other stakeholders to share knowledge and reconnect. A wide

variety of educational courses and social activities offered an opportunity to learn and reconnect with colleagues.

Alongside our CDA and PTDA counterparts, MDA Board members engage annually in professional development in the form of governance training. This training builds a deep understanding of best governance practices and reinforces it amongst the members of the MDA Board of Directors.

MDA Economic surveys gathered data essential to the development of Suggested MDA Fee Guides. Participation in these surveys remains vital to understanding the cost of delivering care and ensuring sustainability for providers.

## Culture of Community

The sense of community in the Manitoba Dental Association is strong. From some of the MDA's unique programs (such as the General Practice Study Club aimed at new practitioners), to our influential and well-respected Mentorship Program, the MDA has cultivated a supportive environment for all dentists. MDA members continued to engage and support one another and the patients we serve.

The completion of the work by the MDA Truth and Reconciliation Task Force was an important milestone in our organization's evolution. Through the work of this Task Force, partnerships were forged with First Nations, Métis, and Inuit rights-holders resulting in an action plan to address how dentistry in Manitoba can improve on its delivery of culturally safe care. The result will positively impact Manitobans for many years.

The Manitoba Dental Foundation continued its invaluable work to fund oral healthcare for underserved Manitobans. A November 2025 fund-raising event, featuring Chantal Kreviazuk, was a huge success raising thousands of dollars for the MDF's important work. I look very forward to our membership's support of the foundation in their efforts throughout 2026.

In January of this year, the Board elected its next president and chair, Dr. Rodrigo Cunha. His

professionalism and experience have already been invaluable to the work ahead. Dr. Alex Pappas stepped into the vice-president position, bringing his perspectives and expertise to the executive committee. Joining the MDA Board is Dr. Rose Dhillon who was appointed for a 1 year term to fulfill the vacancy left as I transitioned to the non-elected position of Past-President.

To the MDA Board members and public representatives, I'd like to extend a word of thanks. Throughout 2025 your patience, preparation and thoughtful discourse have helped the MDA Board make many decisions crucial to the continued provision of high quality, patient centered care in Manitoba. The MDA is very fortunate to have Ms. Ashley Holtmann and Ms. Andrea Knight as public representatives, and special thanks to Ms. Trina Bourgeois, RDA representative, for her skilled contributions throughout the year. Thank you to the MDA staff—the engine that makes the MDA run—for their work that serves both the public and MDA members. Their support and encouragement have helped make 2025 a year of both progress and success.

To the MDA Presidents who preceded me; the example you set, your expertise and advice have made the path much easier for me to follow. Your dedication was contagious and helped me immeasurably throughout the year. Mr. Rafi Mohammed, our CEO, I offer you a special word of thanks. Your depth of knowledge and historical perspective have been invaluable in navigating this organization through sometimes very difficult circumstances. It's been a privilege working with you all.

I leave the role of MDA President with equal measures of satisfaction and gratitude. Satisfaction for having had the opportunity to lead a team of dedicated volunteers through a year of significant progress and achievement. And gratitude for all I've learned doing it. To every MDA member, volunteer, staff person, and partner who helped make 2025 a year of meaningful progress—a job very well done!

Dr. Jeffrey Hein



# Registrar's Message

**T**he Manitoba Dental Association licenses dentists and registers dental assistants.

## Registration and Licensure

The following charts depict the registration statistics for the 2025 MDA registration year:

Category	
Academic	10
Charitable Purpose	4
Dental Specialist	131
Dentist Educator	3
General Practitioner	700
Non Practicing	97
RDA - Full	1333
RDA - Provisional	57
Student	26
<b>Total</b>	<b>2361</b>

New	
Dentist	78
Assistant	114
<b>Total</b>	<b>192</b>

Incorporations	
New	40
Renewals	634
<b>Total</b>	<b>674</b>

Thank you to Courtney Razmus, Administrator, Registration, Licensing and Corporations, for her continued support of new and existing members during licensing and corporation renewals.

## Peer Review

The Chair of the Committee, Dr. Murray White has provided his report of the activities of this committee during 2025.

The individual Complaints Committees have access to three independently trained investigators to assist the committee members in their reviews.

I would like to acknowledge Dr. White for his continued service, wisdom and dedication as Chair.

I would also like to thank Dr. Ron Tough, Mediation Liaison Officer, who continues to provide important mediation services in the public interest.

## Continuing Competence

Members continue to utilize the online portal for continuing education credit self-submission.

I would like to thank Diane McDonald, Administrator, Continuing Education and Licensing Support, and Linda Berg, Director of Regulatory Programs, for their continued work in administering competency requirements. Also, thank you to Greg Guenther, Director of Member Services and Public Events, who has played an important role in the provision of quality continuing education programmes.

Members are reminded that they are responsible to ensure that any continuing education programme complies with bylaw requirements if they wish to have it recognized for credit.

## Office Assessment

The Chair of the Committee, Dr. Atul Pruthi, has provided his report.

The Committee continues to play a critical role in providing oversight of the Office Assessment process. The office assessment process is managed by Linda Berg. Office assessments for dental facilities that provide sedation have been ongoing. Ms. Berg along with Holly Stusiak have been integral in this significantly important regulatory role. Their efforts in this area are appreciated.

Our sedation auditors, Dr. Chris Cottick, Dr. Roland DeBrouwere, Dr. Kyle Gautier and Dr. Mark Nepon have been crucial in serving as sedation auditors.

## The Fair Registration Practices Act

The MDA has been attending meetings and engaging in discussions with the Fairness Registration Practices Office (FRPO). Ensuring our registration practices are communicated in plain language and developing reporting templates to coordinate information important for the FRPO's mandate has been our primary focus.

## College of Dentistry

The support from Dr. Anastasia Cholakis and the College of Dentistry in addressing regulatory issues of concern to the MDA is greatly appreciated. I look forward to continuing the relationship with the College on matters of regulation affecting both organizations.

## Canadian Dental Regulatory Authorities Federation (CDRAF)

The MDA continues to work with other dental regulatory authorities (DRAs) to maintain processes of fair and consistent registration practices. These principles of licensing adhere to the intergovernmental Agreement on Internal Trade, Mutual Recognition Agreement for the Profession of Dentistry, and the Memorandum of Understanding between Canadian dental regulators.

The Royal College of Dentists of Canada (RCDC) continues to administer the National Dental Speciality Examination (NDSE). In 2025, updates were provided to the CDRAF Board regarding examination development, delivery and outcomes, including continued refinement of specialty Knowledge, Skills and Abilities (KSAs) and validation processes.

CDRAF also continued its work with system partners, including the NDEB, CDAC and ACFD, through its multi-stakeholder working group. This work remains focused on reviewing certification pathways and identifying opportunities to improve fairness, transparency and accessibility for both domestic and internationally trained dentists.

CDRAF's current strategic plan remains in effect through 2026. The CDRAF Board has initiated discussions on the development of the next strategic plan, which is expected to be advanced at the August 2026 Board meeting.

## Delegation of Duties to Non-Regulated Personnel

In 2025, the MDA implemented a bylaw respecting the delegation of duties to non-regulated personnel. This bylaw provides a clear framework for dentists who choose to delegate certain clinical and non-clinical functions within their practices, while reinforcing that the responsibility for patient care remains with the dentist.

As part of this framework, specific training requirements have been established for individuals performing infection prevention and control procedures. Members are responsible for ensuring that appropriate training has been completed and that documentation is maintained within the practice.

Finally, I wish to thank our CEO, Rafi Mohammed. His ongoing support of the Registrar's office and leadership in managing the affairs of the MDA are greatly appreciated.

Respectfully,  
**Dr. Arun Misra**



# Peer Review Committee

**T**he regulation of dentistry and dental assistants in Manitoba is outlined in *The Dental Association Act*. The section entitled “Discipline” describes how Peer Review Committees are formed, the disciplinary actions that may be taken, and how appeals are handled.

It is with great dedication that members of the Peer Review Committees and Investigators gather the necessary information, ask pertinent questions, and arrive at carefully considered decisions for each case. Also of note is the enormous amount of work provided by the MDA’s Mediation Liaison Officer, Dr. Ron Tough, who, on many occasions, is able to resolve issues before they become formal complaints.

An important reference for the committees is the MDA’s *Code of Ethics*. It is consulted repeatedly when committee members are making their decisions. This reference, along with other statutes such as PHIA (*Personal Health Information Act*), PIPEDA (*Personal Information Protection and Electronic Documents Act*), and *The Human Rights Code*, as well as the accepted standards of the profession, allows the Committee to address most situations presented to it.

This year, disciplinary actions were issued against six dentists and no dental assistants. These actions resulted in five Formal Cautions and five Undertakings. One Inquiry Panel was convened, with findings against the dentist involved. On seven occasions, the Committee found in favour of the dentist against whom

the complaint was brought. There was one appeal of a Complaint Committee decision, which was dismissed by an Appeals Committee.

There were twenty-four new cases received in 2025, most of which concerned standard of care. The number of cases received in 2025 was up 14% over the previous year.

The hard work of all committee members and investigators helps maintain the privilege of self-regulation, and for their efforts, I am extremely grateful.

Respectfully Submitted,  
**Dr. Murray White**  
*Chair – Peer Review*



# Continuing Competency Committee

**T**he Continuing Competency Committee began a review of the current bylaw in the spring of 2023. Due to numerous bylaws being reviewed concurrently—the committee was placed on hold until the fall of 2025. Since that time, we have established two subcommittees. The first subcommittee called the “Study Club, Program and Provider Approval Group” will determine the best process for approving study clubs in Manitoba. They are also putting a lot of work into trying to expand our CE provider list by researching what the trends are in the U.S. & Europe as well as looking at medical CE providers.

Another area of research is what type of criteria might be required by the Registrar to approve courses that don’t currently meet the requirements set out in this current bylaw. There are many courses out there that have ADA CERP approval or AGD PACE approval, but

those recognition programs seem to be recognized in North America and not Europe. We have examples of members taking part in extremely well done courses in Europe that were not eligible for CE credit hours, and so the subcommittee is taking a deeper look into that as well.

The second group is a “Working Group” for the Continuing Competency Committee who is reviewing all sections of the bylaw to ensure that the next version is user friendly, includes the number of hours required for dentists with a dual license and also will include a new section for dental therapists. Ideally, the new version of the CE bylaw would address the requirements for all levels of dental professionals, but that is still being determined.

This committee falls under the MDA’s first strategic plan pillar —“Excellence in Learning”. By trying to increase the CE options for members, we are growing skills and strengthening our profession.

Regards,  
**Dr. Neil Wilson**  
*Chair, Continuing Competency Committee*

### Committee Members

- Dr. Neil Wilson – Chair
- Dr. Christine Kveder
- Dr. Karina Gamboa
- Dr. Kelly Regula– MDA Board Rep
- Dr. Nancy Auyeung – CPD representative
- Dr. Rose Dhillon – WDS representative
- Dr. Chris Cottick – MDA Convention Co-chair
- Dr. Hala Salama – MDA Convention Co-chair
- Dr. Sarah Adamson
- Dr. Tejal Makwana
- Dr. Tenna Reeve
- Ms. Terri Sykes- Dental Assistant representative
- Ms. Trina Bourgeois – Dental Assistant representative
- Ms. Sharon Baxter – Public representative
- Linda Berg – MDA Staff Liaison



# Economics Committee

**O**n behalf of the Manitoba Dental Association (MDA) Economics Committee, I am pleased to present our 2025 Annual Report. Over the past year, the Committee has remained focused on providing Manitoba dentists with reliable, data-driven insights to support sound business decision-making, fair fee guide development, and strong advocacy in an evolving healthcare and economic landscape.

Dentistry continues to face a convergence of pressures—rising operating costs, workforce challenges, evolving public programs, and increased administrative complexity. In this environment, access to high-quality economic data has never been more critical. Our work this year has been centered on strengthening that foundation.

## National and Provincial Outlook

The broader economic environment continues to present moderate but persistent challenges:

- Real GDP growth is projected at approximately 1.0–1.3% through 2026, indicating slow economic expansion;
- Inflation (CPI) is expected to stabilize near 1.7%, though cost pressures remain uneven across sectors;
- Employment growth is slowing, while borrowing conditions remain tighter than in previous years.

At the same time, consumer confidence and discretionary spending remain constrained, which directly impacts demand for dental services—particularly elective and higher-value procedures.

- A key finding this year is that:
- Dental practice revenues have remained relatively flat over the past

- 5–6 years, despite consistent annual fee guide increases;
- Profitability has remained resilient, but margins are tightening due to rising input costs;
  - Future revenue growth is projected at approximately 2.8% annually, driven by procedural mix rather than volume increases.

## Practice Cost Pressures & Operations

Staffing continues to be the single largest cost driver with staff costs now exceed 50% of total practice expenses, increasing from prior years. Manitoba has experienced notably higher wage growth compared to national averages. Adding to this, recruitment and retention challenges persist, particularly for:

- Dental assistants
- Hygienists
- Administrative staff

These pressures are contributing to increased reliance on temporary staffing solutions, increase compensation expectations and operational inefficiencies in some practices.

Other Cost Drivers of note are dental supplies. They represent ~6–10% of total expenses and remain relatively stable overall. However, global supply chain shifts and indirect tariffs may increase costs in the near term

## Revenue vs Expense Reality

Average expense-to-gross ratio remains ~60%, with significant variability across practices. Increases in individual cost categories (e.g., supplies) do not proportionally justify equivalent fee increases. Sustainable fee adjustments must consider total cost structure, utilization, and patient affordability

## Fee Guide, Billing & Insurance

Following comprehensive analysis, the Committee recommended a 4.03% overall fee guide increase. This was the 2nd highest increase nationally in Canada. This recommendation reflects rising staff costs, inflationary pressures, national comparators and equally important patient affordability.

Manitoba fee guide increase continues to align with national trends. Our 5-year average increase is 4.64% and 10-year average is 3.67%.

## Billing & Coding Challenges

The Committee continues to address growing complexity in coding of dental services. We have established as a member communication Bulletin articles on Conversation on Codes. This past year our publish conversation on codes focused on scaling and periodontal therapy coding along with what encompasses a unit-based scaling billing. Clarification of billing standards ensure accuracy and defensibility.

Insurance plan limitations and insurers questions on treatment has elevated the administrative burden on office staff and dentists related to claims processing and pre-authorization. Dentist should be ensuring accuracy of all claims submitted to insurers to avoid the potential of delisting.

We continue to encourage dental practice to balance bill in all situations where you are currently allowed to. Mr. Greg Finlayson, MDA Economic Consultant, views balance billing as essential to:

- Maintain the economic viability of your practice
- Help protect patients’ future access to dental care

- » If Canadian dentists lose the right to “balance bill” in the future, many will cease to participate in the CDCP. This will create greater barriers to care for those Manitobans who lack dental insurance
- To help protect the future of dentistry in Canada
  - » Balance billing is necessary to help ensure the maintenance of a health network of private practice clinics across Manitoba (and Canada). Without this, dental care in Canada may eventually devolve into a system similar to that which currently exists in Great Britain

## MDA Economic Surveys – Critical to Our Work

The Economics Committee relies on three core surveys:

1. Procedure Frequency Survey
2. Wage & Salary Survey
3. Expense Survey

These surveys are:

- Fully confidential, administered and aggregated by a third party
- Essential for evidence-based fee guide decisions
- Highly valuable to members, providing benchmarking data

Without strong participation from Manitoba dentists, there is a real risk of losing autonomy in fee setting and economic decision-making. We strongly encourage all members to continue participating.

Finally, the economic landscape for dentistry continues to evolve rapidly. While challenges persist, Manitoba dentists remain well-positioned when supported by accurate data, thoughtful policy, and strong professional collaboration.

The Economics Committee remains committed to ensuring that

members have the tools, insights, and advocacy needed to navigate this environment successfully.

Thank you to the MDA Economic Committee members for their support in making my job as Chair easier and to all members who contributed data and expertise over the past year.

**Dr. Alex Pappas**  
*Chair, MDA Economics Committee*

## Committee Members

- Dr. Alex Pappas – Chair
- Dr. Jeff Hein – USCLS Rep
- Dr. Dominika Jasiewicz-Bialy
- Dr. Dan Zettler
- Dr. Darrin Schramke
- Dr. Rodrigo Cunha
- Dr. Julie Oryniak
- Dr. Rose Dhillon

Strategic Theme	Activities 2025
<b>Excellence in Learning</b>	<ul style="list-style-type: none"> <li>• Publication of “Conversations on Codes” to improve billing accuracy and professional competence</li> <li>• Economic surveys (Procedure Frequency, Wage &amp; Salary, Expense) provide benchmarking tools for continuous learning</li> <li>• Enhances member engagement through participation in confidential surveys Supports evidence-based advocacy on fee guides and economic sustainability</li> </ul>
<b>Culture of Community</b>	<ul style="list-style-type: none"> <li>• Identification of workforce shortages (assistants, hygienists, admin staff) impacting community-based care delivery</li> <li>• Promotes collaborative profession-wide participation in surveys to maintain autonomy</li> <li>• Supports sustainable practice environments, ensuring communities retain access to local dental service</li> </ul>
<b>Access to Care</b>	<ul style="list-style-type: none"> <li>• Analysis of economic pressures (flat revenues, rising costs) that may limit service availability</li> <li>• Strong advocacy for balance billing to maintain patient access and prevent system strain</li> <li>• Warning that removal of balance billing could reduce participation in CDCP, increasing barriers to care</li> <li>• Fee guide recommendations (4.03%) balance affordability and sustainability</li> </ul>
<b>Public Trust</b>	<ul style="list-style-type: none"> <li>• Commitment to transparent, evidence-based fee guide development Promotion of accurate billing and coding practices to ensure defensibility and accountability</li> <li>• Guidance to avoid insurance delisting risks through accurate claims submission Ensures economic policies align with patient affordability and ethical practice standards</li> </ul>



# Truth and Reconciliation Action Plan Task Force

It is an honour to present this annual report on behalf of the Truth and Reconciliation Action Plan Task Force. Over the past year, we have taken meaningful steps toward advancing reconciliation within Manitoba’s oral health system. As a profession, we recognize that oral health is inseparable from total health. We also acknowledge that First Nations, Inuit, and Métis (FNIM) peoples continue to face systemic barriers to accessing culturally safe and equitable care. This Action Plan represents our shared commitment to addressing those inequities with humility, accountability, and sustained action.

This work is deeply personal to me and grounded in lived experience, community relationships, and a collective desire to build a better future. Reconciliation is not a single initiative—it is an ongoing responsibility. I am proud of the progress we have made and grateful to the many partners, Elders, and community members who have guided this journey.

## Establishment of the Task Force

The Task Force was formed in 2024 by the Board of the MDA to guide dental profession’s response to the Truth and Reconciliation Commission (TRC) Calls to Action which included representatives from FNIM communities, MDA members, allied organizations, and Elders. The Task Force Composition included:

- Member Dentists including those who identified themselves as First Nations, Metis, or Inuit
- Dental Assistants including those who identified themselves as First Nations, Metis, or Inuit

- MDA Public Representative
- Senator – Mary Jane McCallum
- Representatives from the following organizations:
  - » Manitoba Dental Hygienists Association
  - » Manitoba Dental Assistants Association
  - » Manitoba Keewatinowi Okimakanak Inc.
  - » Tunngasugit Inc.
  - » Aboriginal Council of Winnipeg
  - » Manitoba Metis Federation
  - » Assembly of Manitoba Chiefs
  - » Southern Chiefs Organization
  - » Indigenous Dental Association of Canada
- Elders
  - » Ron Linklater
  - » Dolly Tinashly
  - » Marcella Vezina
- Artists
  - » JD Hawk
  - » Kale Sheppard
  - » Storm Angeconeb

The Task Force had nine formal meetings held between October 2024 and January 2026. Broad consultation with FNIM organizations and stakeholders took place. Critical to this process was the Integration of community feedback into final recommendations.

The Task Force grounded its work in four core principles: **respect, collaboration, accountability, and equity and access.** These principles ensure that reconciliation efforts are not only aspirational, but operationalized across regulation, practice, and patient care.

Also established were five key goals to guide our action in this process: enhance cultural safety, increase

equitable access to care, collaborate with FNIM Nations and Communities, build educational and professional capacity and advocate for policy change. These goals align directly with TRC Calls to Action (22–24) and the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP).

## The key outcomes of the Task Force work were:

- Developed a **comprehensive Reconciliation Strategy and Action Plan**
- Established the foundation for an **FNIM Oral Health Advisory Circle**
- Advanced planning for **mandatory cultural safety and trauma-informed care training**
- Strengthened partnerships with **FNIM organizations and leadership**

Lastly, I want to emphasize that reconciliation requires sustained effort, openness to learning, and a willingness to change. As a profession, we are committed to walking this path together.

On behalf of the Task Force, I extend my sincere thanks to all who contributed their time, knowledge, and lived experience. Your voices have shaped this work and will continue to guide its evolution. Together, we are building a more equitable, respectful, and inclusive oral health system for all Manitobans.

**Dr. Alan Grant**  
*Chair, Truth and Reconciliation Action Plan Task Force*

Strategic Theme	Activities 2025
<b>Excellence in Learning</b>	<ul style="list-style-type: none"> <li>• Recommended mandatory cultural safety &amp; trauma-informed care training for dental professionals</li> <li>• Building educational and professional capacity aligned with TRC Calls to Action (22–24)</li> <li>• Strengthening leadership through inclusive Task Force representation (FNIM professionals, Elders, organizations)</li> <li>• Enhancing member engagement through reconciliation-focused learning and dialogue</li> </ul>
<b>Culture of Community</b>	<ul style="list-style-type: none"> <li>• Establishment of a multi-stakeholder Task Force including FNIM organizations, Elders, and partners</li> <li>• Creation of an FNIM Oral Health Advisory Circle (planned) to ensure ongoing community voice</li> <li>• Strengthening relationships with Indigenous leadership and organizations across Manitoba</li> </ul>
<b>Access to Care</b>	<ul style="list-style-type: none"> <li>• Core focus on reducing systemic barriers to care for FNIM populations</li> <li>• Advancing equitable access to culturally safe care as a central goal</li> <li>• Emphasis on collaboration with FNIM communities and organizations to improve service delivery</li> <li>• Recognition that oral health is inseparable from overall health, reinforcing integrated care approaches</li> </ul>
<b>Public Trust</b>	<ul style="list-style-type: none"> <li>• Commitment to reconciliation as an ongoing responsibility, not a one-time initiative</li> <li>• Grounding actions in principles of respect, accountability, collaboration, and equity</li> <li>• Alignment with TRC Calls to Action and UNDRIP, reinforcing ethical and regulatory leadership</li> <li>• Transparent engagement with Indigenous partners to strengthen legitimacy and trust in the profession</li> </ul>



# CDA Report

**G**reetings to all of you across our great province. I hope you have all had opportunity to enjoy some winter activities or maybe enjoy a warm weather get-away!

The CDA Board (the Board) held its winter meeting on February 13, 2026. The following report highlights discussions and outcomes from this meeting.

## Government Relations and Policy

### CDA Days on the Hill

CDA conducted a successful Days on the Hill event in late November. I had opportunity to participate in the event led by CDA President Dr. Bruce Ward. Meetings were held with Members of Parliament and senior officials to discuss oral health workforce shortages, dental school capacity and training, and ensuring the Canadian Dental Care Plan (CDCP) works effectively for patients and providers.

During this event, CDA highlighted ongoing workforce challenges across the country and called for targeted measures to improve recruitment, retention and workforce mobility. Concerns were also raised about the impact of CDCP preauthorization requirements on dental school clinical training and patient access to care. CDA advocated for streamlined preauthorization processes, improved government communications regarding coverage and co-payments, and additional support for dental school clinics. CDA also partnered with the Royal Canadian Dental Corps during the event to underscore the connection between oral health, overall health and

operational readiness.

### Canadian Dental Care Plan

Ongoing advocacy issues relating to the CDCP include, but are not limited to:

- Program sustainability and adequacy of program funding and reimbursement fees over time (including alignment with costs and inflation).
- De-insurance monitoring and mitigation
- Dental school advocacy: ensuring adequate clinical training for new dentists.
- Preauthorization process, number of denials, and criteria clarity. There was a win for dentists with improvements around processing times.
- Sun Life audits and clawbacks: ensuring fair processes for dentists.
- Delisting of dentists: separation between SL private business and the CDCP and clear appeal process.
- Commercial lab fee caps: major advocacy win for dentists and their patients. Health Canada has advised CDA in a meeting in January 2026 that they will implement a substantial fee increase effective April 1.
- CDCP data transparency and ongoing data-sharing to support evidence-based refinement.

An update was provided on the CDCP Engagement Network, including meetings held in October and December, which serve as an information-sharing table and forum for advocacy discussions.

### Task Force Updates

The CDA Public Policy Committee continues its work reviewing and updating outdated position statements,

including development of a new statement on pain management and prescribing.

In addition, CDA's Dental Assisting scan has been completed and shared, identifying challenges and solutions across Canada. The CDA-NIHB Sub-Committee continues efforts to improve service coverage and promote the NIHB program to dentists.

### Programs and Digital Services

Work continues on CDA's digital modernization initiatives to enhance claims processing, strengthen security, and ensure compliance with evolving regulatory requirements. The following updates are underway:

- ITRANS 2.0 Implementation: The CDA continues to work closely with software vendors to have dental offices transition to using ITRANS 2.0 to send electronic dental claims.
- CDAnet Modernization: Some dental offices are sending electronic dental claims using an outdated version of the CDAnet standard (v2). CDA is working with dental offices and software vendors towards eliminating these outdated configurations. Usage has now been reduced to less than 3% of total claims, with full elimination targeted for Q2 2026.
- Security Enhancements: Security updates are being implemented for the CDA Practice Support Services website and Secure Send, including the introduction of Multi-Factor Authentication to strengthen system protection.
- Collaboration with CDAnet stakeholders: Discussions are ongoing with the Canadian Life and Health Insurance Association (CLHIA), claims processors and

software vendors on several initiatives including: introducing new usage scenarios for CDAnet functionality, modernizing patient and plan member consent processes, updating the paper claim form, and ensuring service alignment with evolving privacy legislation.

- Secure Send Privacy Impact Assessment: Phase 1 of the Secure Send Privacy Impact Assessment (PIA) has been completed, and the remediation phase is underway. This work includes updating the CDA Services Subscriber Agreement; enhancing documentation related to coordination of processes with CSI and instream; and revising other agreements and documents to ensure alignment with federal and provincial privacy requirements.

## Finances

### 2025 Financial Year-End Forecast

CDA is projecting a slight year-end surplus of \$212,200. Revenue is 0.9% higher than forecast, and expenses are 0.6% lower than forecast. Markets continue to fluctuate due to tariffs and global events; however, the performance continues to be monitored closely.

### 2027 Fee Rate Recommendation

At their October meeting, the Board approved the 2027 membership tiered fee increase, noting that CDA deferred fee increases for the past two years. The proposed increase is expected to generate approximately \$100,000 in additional revenue and will help limit the projected 2027 budget deficit to \$246,400.

Considering the objectives of the Memorandum of Understanding (MOU), continued high inflation, instability in international markets, and a required cash withdrawal related to building renovations, the Board determined that a modest tiered fee increase is necessary to maintain CDA's financial stability.

The following 2027 fee rates will be presented to Corporate Member Voting Representatives for approval at the 2026 AGM:

- \$499.50 for Tier 1 provinces (\$2 or 0.4% increase from the current rate of \$497.50)
- \$454.00 for Tier 2 provinces (\$4 or 0.9% increase from the current rate of \$450.00)
- \$368.50 for Tier 3 provinces (\$6 or 1.7% increase from the current rate of \$362.50)
- \$549.45 for Affiliate Members (\$2.20 or 0.4% increase from the current rate of \$547.25) Plus applicable taxes.

### CDA Building

The Committee was updated on the status of the renovations, noting that they are on budget and on schedule. The project completion date is April 29, 2026.

## Governance

### Selection of the CDA VP and Appointment of the CDA Officers for 2026–27:

The Board selected CDA Board member, Dr. Marc Mollot from Manitoba, as

CDA Vice-President for 2026–27, subject to his election as a Director at the CDA AGM on April 24, 2026.

The Board also appointed Dr. Kirk Preston to the position of CDA President and Dr. Jason Noel to the position of CDA President-Elect for 2026–27, subject to their election as Directors at the CDA AGM on April 24, 2026.

### CDA Meetings/ Joint Conventions

Please note the dates of future CDA joint annual conventions including:

- 2026 CDA AGM April 24 in Toronto
- 2026 Joint Convention with the Manitoba Dental Association – April 17–18, 2026, in Winnipeg, MB
- 2027 Joint Convention with the Ontario Dental Association Annual Spring Meeting – May 6–8, 2027, in Toronto, ON. Note that in 2027, CDA will also celebrate its 125th anniversary and the ODA its 160th anniversary.
- 2028 Joint Convention with the Dental Association of Prince Edward Island – August 9–12, 2028, in Charlottetown, PEI

Because the MDA is a corporate member of the CDA, as MDA members we all together benefit from the work of the CDA. Why an Association? In addition to the many products, services, and practise supports offered by the CDA, the simpler answer is, 'We are always better together than alone.' I have observed that in Manitoba we understand this very well.

If you have any questions related to the CDA, or just want to chat, please feel to reach out to me anytime.

Respectfully Submitted,  
**Dr. Marc Mollot**  
mmollot@cda-adc.ca



# Pharmacological Behaviour Management Committee

**T**his committee is currently on hiatus. We began a comprehensive review of the bylaw in 2024, making some good progress on reviewing the currently modalities. As I am in my final term as Chair, I will leave the work on finishing this review and a potential rewrite of the bylaw to my successor. For all members, I apologize greatly for the delay however it is of utmost importance that this rewrite

encompasses both access to care and safety for Manitobans. I would like to thank the following committee members (some who have been on this committee for 10+ years) for volunteering their time and sharing their expertise in the interest of patient safety:

Dr. Hamideh Alai-Towfigh, Dr. Shaun Corbett, Dr. Chris Cottick (outgoing member), Dr. Roland DeBrouwere, Dr. Kyle Gauthier, Dr. Jim Ksionzyk, Dr. Mark Nepon (outgoing member),

Dr. Cameron Norrie, Dr. Mark Thevenot, and Dr. Arun Misra for his sage advice.

This committee is relevant to the MDA's Strategic Plan in two areas: #3 Access to Care and #4 Public Trust.

Regards,

**Dr. Tony Krawat**  
*Chair, Pharmacological Behaviour Management Committee*



# Convention Committee

**T**he 2025 MDA convention was held at the Winnipeg Convention Centre April 11th and 12th. The convention committee prepared and delivered another enjoyable and educational program. Led by the permanent staff of the MDA, Greg, Linda, Holly, Courtney, Theresa, Diane, Gail and Rafi, the convention committee was able to deliver a solid convention program for 303 dentists, 317 RDA's 157 RDH, as well as 250 students from dental, dental assisting, hygiene and assorted support staff and team members. The theme was Goba Connection and speakers came from across the world from Australia to South America to Europe with a broad diversity of topics for the entire dental team including administrative staff. The trade show was a bustling place for connection and commerce, well attended and wide ranging. The puppy pen sponsored by Just 4 Kids Dental was a great destressor for attendees. The weekend started with a great keynote from Todd Williams speaking on Team Dynamics and concluded with the elegant President's gala on Saturday evening with entertainment by the Big City All Star Band.

The Convention Committee continues to work year-round to prepare the coming year's event and to try to plan further into the future to ensure a timely and topical convention lineup for years to come. Greg Guenther continues to work tirelessly to shepherd our convention and to strengthen our new branding of The Prairie Lights Dental Convention. A Coast to Coast to Coast theme is planned for 2026 to reflect Manitoba's central location geographically and spiritually in Canada as the Canadian Dental Association will join with MDA for a joint convention.

The 2026 Prairie Lights Dental Convention will be held in conjunction with the CDA annual Convention April 16-18 2026 at the Winnipeg Convention Centre in beautiful post winter downtown Winnipeg.

The committee consists of: Dr's Hala Salama and Chris Cottick Co Chairs

## Convention Committee Strategic Plan Update

The convention Committee continues to implement the goals of the MDA strategic plan through linking our members with the goals of *excellence in learning, culture of community* and

through ensuring a robust ongoing indigenous engagement by continuing to emphasize truth and reconciliation and cultural awareness activities.

**Dr. Chris Cottick and Dr. Hala Salama**

## Committee Members

Dr. Gagan Mangat  
Dr. Stephanie Van Den Bosch  
Dr. Raj Bhullar  
Dr. Phong Luong  
Dr. Sasha Goolcharan  
Janet Neduzak – RDA Rep  
Tess Peter – MDAA Rep  
Valerie Olivier – CDHM Rep  
Lee Hurton – MDHA Rep  
Speaker Selection Committee  
Dr. Dave Kindrat  
Dr. Paresh Shah  
Dr. Jose Viquez  
Key Volunteers  
Sina Allegor-Sacco  
Dr. Sandy Mutchmor  
Nancy Mutchmor  
Greg Guenther – MDA Staff Liaison



# Communications Committee

**A**s I look back on 2025, our first full year working with Relish Ideas, I am confident that we made the right decision in partnering with their team. After a year of transition in 2024, this past year allowed us to find our footing and begin to see the results of a thoughtful, research-driven approach to communications.

One of the most visible developments was the introduction of a refreshed brand identity for the Manitoba Dental Association, including a new corporate tagline, “Public Trust. Excellence in Care,” along with updated branding for the Manitoba Dental Foundation as it celebrated its 10th anniversary. These changes represent more than a visual update, they reflect how we want to be understood by the public and the trust we are working to build with Manitobans.

While much has evolved, the core goals of the Communications Committee remain unchanged. Our work continues to be guided by the strategic plan, with a strong emphasis on strengthening public trust.

The early part of 2025 focused on listening and learning. Through our work with Probe Research, we developed marketing personas to better understand Manitobans with lower levels of oral health and trust in dentistry. This work, combined with

interviews with a diverse group of MDA members, helped shape a three-year marketing and communications strategy that provides clear direction for the years ahead.

Throughout the year, we maintained a consistent presence across our social media channels. It has been encouraging to see that content centred on real people and authentic stories continues to resonate most strongly. The “Unique Smile” campaign, in particular, generated high engagement and reinforced the value of connection and relatability in our messaging.

We delivered several campaigns over the year, including Sugar Smart, Oral Health Month, a summer family-focused campaign, and the fall “Unique Smile” initiative. During Oral Health Month, we aligned with the “A Healthy Smile Starts Here” theme from the Canadian Dental Association and made a focused effort to reach BIPOC, Indigenous, and newcomer communities. This included interviews in Filipino and Cree on NCI Radio.

Our sponsorships continued to provide meaningful opportunities to engage with communities across Manitoba. We maintained our partnership with the Manitoba Junior Hockey League, expanded opportunities for clinic engagement and school outreach, and continued our support of the Children’s Festival through Tooth Fairy Saturday.

We also introduced a new partnership with the Manitoba Children’s Museum, allowing us to connect with families through interactive and educational programming.

Another highlight was having Relish attend the MDA conference to capture photo and video content, including interviews with dentists and dental assistants. This marks the beginning of a valuable content library that will support future recruitment and outreach efforts.

We also responded to emerging challenges. Early in the year, increasing anti-fluoride sentiment prompted targeted advertisements and an article in the *Municipal Leader*. This work supported municipal decision-makers and reinforced the importance of community water fluoridation through clear, evidence-based messaging.

Looking ahead to 2026, our work will continue to be guided by the three-year strategic plan. We will build on the YourManitobaDentist.ca platform as a central hub for public education, maintain strong social media engagement, and ensure consistent implementation of our refreshed brand through a formal audit. In addition, Relish will develop a focused fluoride communications strategy informed by Canadian Dental Association research.

Strategic Theme	Activities 2025
<b>Culture of Community “targets”</b>	Culture of Community remains central to our work. Member engagement continues to be strong, with more volunteers than available roles. In-depth interviews with MDA members revealed a desire for expanded educational outreach and stronger community connections. Initiatives such as Tooth Fairy Saturday, the oral cancer screening event, and partnerships with community organizations like Healthy Smile, Happy Child have strengthened our presence and built meaningful connections with Manitobans. Building on this momentum, we hope to expand the oral cancer screening initiative to Brandon, MB in the fall of 2026.
<b>Access to Care “targets”</b>	Access to Care is about more than availability, it is also about invitation and engagement. Campaigns such as Oral Health Month and family-focused summer programming were intentionally designed to reach culturally diverse and newcomer communities, Indigenous audiences, and residents outside Winnipeg. By tailoring messaging and outreach to these groups, we help ensure that more Manitobans feel included, informed, and empowered to seek care.
<b>Public Trust “targets”</b>	Public Trust remains at the core of our work. The brand refresh included a colour shift from green to blue, symbolizing trust. Campaigns like “Your Smile is Unique. So Is Your Dental Care” emphasize empathy, understanding, and evidence-based guidance. Our proactive response to misinformation, especially regarding fluoride, and our focus on personalized messaging reflect the ongoing need to protect the public while strengthening the profession.

In closing, 2025 has been a year of steady progress and important groundwork for the future. I would like to thank Relish Ideas for their partnership, as well as the members of the Communications Committee, MDA staff, especially Greg Guenther, and the MDA Board for their continued support.

I would also like to note that 2026 will be my first full year as Chair of

the Communications Committee. I am grateful for the guidance and support of our previous Chair, Richard Santos, who helped ensure a smooth transition and positioned the committee for continued success as we move forward. I welcome your questions and feedback.

Respectfully submitted  
**Dr. Darryll Iwaszkiw**

### Committee Members

- Dr. Darryll Iwaszkiw – Chair
- Dr. Hans Stasiuk
- Dr. Ken Hamin
- Dr. Huma Sharief – MDA Board Rep
- Dr. Richard Santos – departing chair
- Dr. Jerry Baluta – departing committee member
- Debra Fehr – Relish Agency Rep
- Greg Guenther – MDA Staff Liaison



# Mentorship Committee

**W**e had another successful year for Mentorship. We really enjoy working with a program that has such an incredible foundation and such strong support behind it. We continue to hold the meetings off campus and we are still faced with rising food costs. Leaving campus has added an extra level of excitement for the participants by increasing the space to mingle and intermix, helping to make the students feel more like colleagues. We believe the added benefit of sharing a meal together, outweighs the extra costs involved. The students are also able witness the existing camaraderie between the mentors and speakers helping to model and foster future relationships.

We visited the college on two occasions to meet with the students and introduce ourselves. This allows us time to explain the importance of the program, our expectations, and the benefits gained by participating to the fullest. We also engage the returning students for any comments and/or suggestions for improvements from their perspective as well as discussing with the acting Dean of Academics, Dr. John Perry, for any feedback the college may wish to express.

We met with the IDDP students on May 26, 2025.

We met with each of the 4 dentistry classes separately on August 18, 2025.

We recruited 15 GP and specialist dentists to mentor the D1 class, as well as asking 5 of our existing mentors

for the D3 class to take on additional mentees from the International Dentist Degree Program (IDDP). Our mentors must work for at least 5 years and be in good standing with the MDA prior to being accepted to the program by the MDA executive.

We would like to thank everyone past and present who has helped to create such an incredible program. It is truly unique and enviable. We look forward to next year and are working to continually uphold the high standard of the Mentorship Program.

**Drs. Michelle Jay and Carolyn Robertson**

## 2025–26 Lecture and Workshop Series

Date	Event	Venue
August 21st	Welcome to the Profession Dinner	St. Charles CC
September 18th	D1 Mentor & Student Speed Dating • Mentor/Mentee Relationships Expectations – (Dr Dieter Schonwetter presenting)	Piazza de Nardi
October 23rd	ALL Classes Event D1-D2-D3-D4 • D1 Managing Finances in Dental School – (Dr Daron Baxter, Dr Murad Zaman) • D2 Introduction to Patient Management, Clinic from an Instructor’s Perspective – (Dr Jerry Baluta) • D3 Applying for a Specialty, Why is it Right for Me? – (Dr Rodrigo Cunha, Dr Tim Dumore, Dr Shima Gharib, Dr Hoda Hosseini, Dr Jeff Bassey) • D4 Gems from an Office Manager. What to ask when applying for a job – (Mr. Gary Paige RDA/Office Manager & Mr. Ryan Savage Lawyer Taylor McCaffrey)	RBC CC
January 29th	D3 & D4 Winter Session • Organized Dentistry – Dr Marc Mollot	RBC CC
February 5th	D1 & D2 Winter Session • D1 4th Year Retrospective – (four D4 students) • D2 Social Media – Dr Sunny Viridi	RBC CC
April 18th	Convention Lunch • D1, D2, D3, D4 Real Life Stories (with time for discussion) – (Dr Ron Tough, Dr Murray White, Dr Anita Glockner)	RBC CC
May 28th	Mentorship Graduation Dinner	St. Charles CC

Strategic Theme	Activities 2025
<b>Excellence in Learning “targets”</b>	<ul style="list-style-type: none"> <li>• Connecting Students with “Senior” Dentists creating mentorship relationship early.</li> <li>• We engage our MDA members with the opportunity to “give back” to the college and the profession by taking the role of mentors.</li> <li>• Annual scheduled PD sessions to assist students as they progress through their college years. We offer a variety of topics and presenters each year.</li> <li>• Continuing partnership and growth with the UMB College including the addition of Indigenous Mentors that are now accessible to any of the students.</li> <li>• We ensure graduating students are aware of the strong CE opportunities they can access in MB once they enter the workforce. Examples include: General Practice Study Club – Wpg Dental Society &amp; numerous other study clubs</li> </ul>
<b>Culture of Community</b>	<ul style="list-style-type: none"> <li>• The Mentorship program has worked to ensure a broad diversity of accessible mentors taking into account gender—ethnicity—rural and urban professionals— &amp; specialists as part of the overall mentor group.</li> <li>• We do have a number of mentors that continue to stay with the program for two terms (8 years). They are well respected and sought after as mentors.</li> <li>• This program maintains a strong relationship with the UMB Dr. Gerald Niznick College of Dentistry. We maintain an excellent working relationship with Dr. John Perry.</li> <li>• Each year we host the Welcome to the Profession Dinner for first year students and D1 Mentors. This event also includes the following supporters of the program: Scotiabank – CDSPI – WDS – UMB Alumni Association</li> </ul>
<b>Access to Care “targets”</b>	<ul style="list-style-type: none"> <li>• New for 2025/26: We now have dedicated Indigenous Mentors Dr. Karen Sedor and Dr. Alan Grant who have graciously made their time available to not only Indigenous students, but any student who wishes to engage and discuss, seek guidance for the area of Indigenous oral healthcare.</li> </ul>



# Infection Control Committee

**T**he Infection Prevention & Control Committee met once in 2025 to complete its first review of the IPC document released in 2022. The second version was made available to members in April 2025 on the MDA website. Thank you to the committee for their commitment to patient safety and volunteering their time to review this important document in 2024–2025. A special thank you to Linda Berg for being steadfast in supporting this committee.

The work of the IPC committee is most relevant to the MDA Strategic Plan’s item #4—Public Trust. By protecting the public we help strengthen the profession. We also contribute to pillar #1—Excellence in Learning through the introduction of new IPC standards and continued revision to meet industry standards.

Regards,  
**Dr. Scott Leckie**  
*Chair, Infection Prevention & Control Committee*

- Committee Members**  
Dr. Amirali Ghodousi  
Dr. Daniel Kolt  
Dr. Domingo Zuniga  
Dr. Huma Shareif – MDA Board representative  
Dr. Kyle Fraser – CDHM representative  
Dr. Nooriko Boorberg – College of Dentistry representative  
Ms. Kathy Purves  
Ms. Tabatha Blais



# Dental Assistant Bylaw Review Committee

**T**his is a relatively new committee, first coming together in late 2024 to begin a review of the *Registration and Certification Bylaw for Dental Assistants*. One of the key issues the committee is trying to address is barriers to licensure for dental assistants. The committee has identified two concerns—internationally trained dentists who would like to license as a registered dental assistant and domestically trained dental assistants who do not pass the National Dental Assistant Examining Board exam. While these two areas may have some influence on trained dental assistants leaving clinical practice, these are

not the only reasons for the extreme shortages in this profession. As the committee continues its review of the current bylaw, they will make a coordinated effort to make recommendations to the Board on easing any barriers for assistants trained in Manitoba, Canada and elsewhere to join the profession. The MDA’s Strategic Plan is supported by this committee under two pillars—#2“Culture of Community”—Stronger Together—by engaging numerous stakeholders for the bylaw review. The third pillar—“Access to Care” is critically important. Without adequate staff support it is difficult to run a practice and provide dental services.

Regards,  
**Dr. Terrence James**  
*Chair, Dental Assistant Bylaw Review Committee*

- Committee Members**  
Dr. Alex Pappas – MDA Board representative  
Dr. Amanda Huminicki  
Dr. Daron Baxter  
Ms. Heather Brownlee – Member, Manitoba Dental Assistants Association  
Ms. Navroop Randhawa  
Dr. Rohit Sharma



# General Practice Study Club Committee

**T**he General Practice Study Club (GPSC) continues to be a vital resource for dentists within their first five years of practice. By providing high-quality, barrier-free educational opportunities and a dedicated networking platform, the GPSC remains committed to supporting the next generation of practitioners as they navigate the transition into the dental profession.

## Programming & Highlights

The definitive highlight of our 2025 calendar was the GPSC Retreat at Clear Lake held over the September Long Weekend. The combination of clinical learning and social connection in such a premier setting resonated deeply with our members, reinforcing the immense value of in-person collaboration and peer support.

## Community Support & Mentorship

The GPSC is a testament to the generosity of the greater dental community, which continues to show incredible support by sharing

knowledge with the next generation. We extend our sincere gratitude to the following individuals who donated their time and expertise to lecture this year: Dr. Jeff Hein, Dr. Katie Chung, Dr. Rob Mintenko, Dr. Kevin Vint, Dr. Kurt Scherle, Dr. Jeff Bassey, Dr. Ryan Howard, Dr. Victor Le, Dr. Katie Davidson, Dr. Ana Schettini, and Dr. Hoda Hosseini

Their dedication ensures our members have access to the mentorship and practical insights necessary for clinical growth.

## Committee Leadership

Our committee remains the driving force behind these initiatives. This year, we share our sincere gratitude with Dr. Karen Rosolowski as she steps down from her role as Chair; her guidance has been instrumental in the club's success. We are pleased to announce that Dr. Harrison Katz has stepped into the position of Chair, with Dr. Noelle Verry moving into the role of Vice-Chair. We also continue to appreciate the invaluable operational support provided by Greg Guenther who is the glue that holds us together.

## Looking Ahead

As we move into 2026, the GPSC remains focused on expanding our reach and refining our programming to meet the evolving needs of new graduates. We look forward to another year of growth, learning, and meaningful professional connection.

### Dr. Harrison Katz

*Chair, General Practice Study Club*

### Committee Members

Dr. Harrison Katz – Chair  
 Dr. Noelle Verry – Vice Chair  
 Dr. Jessica Carswell  
 Dr. Lori Simoens  
 Dr. Robin Szmadyla  
 Dr. Jackie Samborski  
 Dr. Michael Porco  
 Greg Guenther – MDA Staff Liaison

Strategic Theme	Activities 2025
<b>Excellence in Learning “targets”</b>	<ul style="list-style-type: none"> <li>• Bridging the Experience Gap: Our curriculum focuses on high-yield clinical skills that are often limited in a university setting, allowing new graduates to transition from supervised students to confident, autonomous practitioners.</li> <li>• Barriers to Entry Removed: By offering lectures free of charge, we ensure that high-quality, evidence-based education is accessible to all recent graduates, regardless of the financial pressures associated with starting a career.</li> <li>• Hands-on Clinical Proficiency: Our in-person sessions provide tactile, supervised experience with new materials and techniques, ensuring that “excellence” is not just theoretical but translates into actual clinical competence. These sessions also enable new graduates to work with specific brand materials and gain relationships with said representatives.</li> <li>• Digital Accessibility: We maintain live online lectures, allowing busy new associates to engage with subject matter experts in real-time from any location, fostering a habit of lifelong learning.</li> </ul>
<b>Culture of Community</b>	<ul style="list-style-type: none"> <li>• Facilitating Multi-Generational Mentorship: By integrating experienced dentists as facilitators in our sessions, we create a unique space for intergenerational knowledge transfer. This allows new graduates to gain “real-world” perspective and clinical wisdom that complements their recent academic training.</li> <li>• Regional Inclusion and Outreach: Our expansion into free rural lectures ensures that the professional community remains cohesive across all geographies. This outreach prevents professional isolation for remote practitioners and ensures a unified culture of excellence statewide.</li> <li>• Strengthening Professional Bonds and Stakeholder Collaboration: Through the collaboration of new graduates, seasoned facilitators, and educational partners, we strengthen the professional fabric of the dental community, fostering a culture where members at all stages feel invested in the collective success of the profession.</li> </ul>
<b>Access to Care “targets”</b>	<ul style="list-style-type: none"> <li>• Enhancing Clinical Efficiency for High-Needs Populations: New graduates often work in public health clinics or as associates in high-volume practices. By bridging the “experience gap” through our CE, we help these dentists become more efficient, allowing them to treat a larger volume of patients safely and effectively.</li> </ul>
<b>Public Trust “targets”</b>	<ul style="list-style-type: none"> <li>• Upholding Clinical Competency Standards: By providing high-level CE at no cost, our committee ensures that the most recent graduates—who treat a significant portion of the public—maintain a standard of care that is consistent with current evidence-based practices and safety protocols.</li> <li>• Demonstrating Professional Self-Regulation: The existence of a dedicated committee for new graduates signals to the public and the government that the dental profession is proactive and committed to the rigorous, ongoing development of its members</li> </ul>



# Manitoba Dental Association Wellness Committee

**B**y advancing wellness initiatives, the MDA is helping foster a healthier, more resilient dental profession—strengthening both practitioner well-being and the care provided to Manitobans.

## Supporting the MDA Mission

Supporting the well-being of dental professionals is an important part of the Manitoba Dental Association’s mission to promote public well-being and maintain the public’s trust in the dental profession while advancing high-quality oral healthcare. The Wellness Committee was established to strengthen professional resilience, promote early access to confidential supports, and foster a culture of wellness within the dental profession. Ensuring the health and well-being of dental professionals not only benefits practitioners themselves but also enables them to provide the high-quality care the public deserves, which is essential for maintaining public trust in the profession.

## Strategic Alignment

The Committee’s work aligns with key themes of the MDA Strategic Plan. Central to this work is a focus on preventing professional and personal crises through resilience-building and early intervention, recognizing the unique pressures associated with dental practice. By increasing awareness of available supports and encouraging members to seek assistance early, the Committee aims to help practitioners

address challenges before they escalate, while supporting long and sustainable careers in dentistry.

## Committee Activities

During 2025, the Committee reviewed wellness program models implemented in other jurisdictions, including the British Columbia Dental Association’s Dentist Wellness Program, as well as initiatives in Saskatchewan and other provinces. These reviews provided valuable insight into approaches that support practitioner wellness through confidential counselling services, peer support networks, and education focused on professional resilience.

The Committee is actively seeking collaborative opportunities with organizations such as Doctors Manitoba to evaluate how components of the physician wellness program model could be adapted to enhance and inform the development of a future MDA wellness program.

Recognizing the importance of both immediate action and thoughtful program development, the Committee adopted a dual-track approach: increasing awareness of existing supports, including the Member Assistance Program, while continuing development of a framework for a comprehensive wellness program.

The Committee will continue refining the proposed framework, engaging potential partners, and developing recommendations for the MDA Board of Directors as this initiative progresses. Through these efforts, the Association aims to strengthen supports

for members, promote a culture of professional resilience, and help ensure that Manitoba’s dental profession remains well positioned to provide high-quality care to the public.

## Acknowledgment

I would like to extend my sincere thanks to the members of the MDA Wellness Committee for their dedication, thoughtful input, and collaborative spirit throughout the year. The development of a wellness initiative for the profession is an important undertaking, and the commitment shown by committee members to advancing this work reflects a shared recognition of the value of supporting the well-being and resilience of our colleagues. Their engagement, insight, and willingness to contribute their time and expertise have been instrumental in moving this initiative forward.

Submitted by  
**Dr. Tom Colina**

## Committee Members

Dr. Tom Colina – Chair  
Dr. Roberta Krawat  
Dr. Craig Fedorowich  
Dr. Suzanne Carriere  
Trina Bourgeois – MDA Board & RDA Rep  
Dr. Adrienne Leslie Toogood – MB Psychology Association  
Michael Tyler - CDSPI

Strategic Theme	Activities 2025
<b>Excellence in Learning “targets”</b>	The committee undertook an in-depth analysis of wellness program models from a range of jurisdictions, including the British Columbia Dental Association and several other provincial organizations. Their findings show that leading approaches to wellness go well beyond crisis intervention, emphasizing proactive and preventive strategies designed to sustain long-term well-being for practitioners. The committee is dedicated to increasing awareness of the wellness resources currently available, while also empowering members to manage professional stress proactively. In addition, there is a focus on developing educational initiatives that build resilience and support members’ overall health and success throughout their careers.
<b>Culture of Community</b>	The committee is advancing both awareness of existing supports and development of a structured wellness program framework through a dual-track approach. Efforts are underway to boost member engagement in health and wellness activities that foster resilience and professional connection. This includes considering an annual wellness event with educational sessions and wellness activities, as well as partnering with wellness organizations to promote member participation in health initiatives. Active participation in partnership initiatives strengthens collegiality, enhances sharing of best practices, and builds unity among dental professionals. These collaborations foster supportive relationships, reduce isolation, and empower members to contribute to shared wellness goals, helping create a resilient and connected professional community.
<b>Access to Care “targets”</b>	The committee has explored potential partnerships, including discussions with Doctors Manitoba, to assess whether elements of the physician wellness program model could support development of an MDA wellness program. By promoting practitioner/practice sustainability and addressing factors such as stress and burnout, this work supports a stable dental workforce and continued access to oral healthcare services for Manitobans.
<b>Public Trust “targets”</b>	Supporting practitioner well-being contributes directly to maintaining public trust in the dental profession. By encouraging resilience-building and early access to confidential support pathways, the committee’s work helps ensure dental professionals remain healthy, engaged, and able to sustain the high standards of care expected by Manitobans.



# Task Force on Access to Dental Care in Northern and Remote Communities

**A**ccess to and delivery of oral health care can present unique needs across the different regions of Manitoba. The Task Force on Access to Dental Care in Northern and Remote Communities was established to identify barriers, determine oral health needs, and support the development of practical strategies to improve access to dental care for Manitobans living in northern and remote regions.

## Supporting the MDA Mission

The work of the Task Force supports the Manitoba Dental Association’s mission to serve the public through regulation, guidance, and the advancement of quality oral healthcare. By focusing on access challenges in northern and remote communities, the Task Force aims to contribute to broader efforts to support oral healthcare for all Manitobans, particularly those facing geographic, workforce, and systemic barriers to care.

## Strategic Alignment

The Task Force’s work aligns most directly with the MDA Strategic Plan under Access to Care, particularly in relation to geographic accessibility, workforce sustainability, and attention to the communities. Its work also reflects Culture of Community through collaboration among members and

stakeholders, Public Trust through thoughtful discussion grounded in the public interest, and Excellence in Learning through consideration of education and training approaches that may support workforce development.

## Committee Activities

In the initial meetings of 2025, the Task Force reviewed and refined priorities related to improving access to dental care in northern and remote Manitoba communities. This included revisiting an earlier priorities document developed by the Task Force, which identified key areas for action such as advocacy and relationship-building with Indigenous communities, training oral health team members from within communities, support for community-based prevention initiatives, and strengthening infrastructure in community dental clinics. The Task Force considered how these priorities remain relevant and where they may need to be updated to reflect current realities and future opportunities.

Understanding current barriers affecting access to care across Manitoba’s northern and remote regions began with discussion with practitioners. These discussions highlighted the importance of developing practical recommendations, recognizing the limits of available resources, and maintaining a

grounded and flexible approach to the work. Members noted encouraging developments, including the expansion of University of Manitoba dental externship opportunities in rural and remote settings.

The Task Force reviewed the MDA bylaw respecting delegation of duties to non-regulated personnel to better understand its possible impact on access to care in remote communities, including supervision requirements for dental therapists, continuity of service delivery, patient safety considerations, and the realities of implementing regulatory changes in underserved settings.

Workforce development and training accessibility continue to be important areas of focus. The Task Force reviewed hybrid remote education models for dental assisting as a possible approach to strengthening recruitment and retention in rural and remote Manitoba. At the same time, practical concerns related to internet access, technology, and other barriers that may affect participation in remote communities need to be considered. In addition, the Task Force considered broader advocacy and government relations matters, including issues related to the Regulated Health Professions Act, the Canadian Dental Care Plan, and inequities in oral health care affecting Indigenous communities.

## Looking Ahead

In 2026, the Task Force will aim to develop practical strategies and recommendations to realize the priorities highlighted in discussions this past year. This will include reviewing the MDA Truth and Reconciliation Action Plan to understand its objectives in improving Indigenous oral healthcare in Manitoba. The Task Force looks forward to work closely with the MDA and the TRC committee to align with the principles of reconciliation and delivery of care.

I would like to sincerely thank the members of the Task Force on Access to Dental Care in Northern and Remote

Communities for their time, insight, and continued commitment to this work. Their willingness to share their experience and perspectives has been invaluable in helping move these discussions forward. Improving access to care in northern and remote communities is a complex and important challenge, and the engagement of Task Force members has been essential to supporting the Association’s work in this area.

Submitted by  
**Dr. Daron Baxter**

*Chair, Task Force on Access to Dental Care in Northern and Remote Communities*

## Committee Members

- Dr. Daron Baxter – Chair
- Dr. Wally Mah
- Dr. Karen Sedor
- Dr. Anis Sabat
- Dr. Judy Zetaruk
- Dr. Ken Safiniuk
- Dr. David Ho
- Dr. Christina Atallah
- Dr. Jim Ksionyk
- Meghan Ostlund – Registered Dental Assistant
- Kerri Mae Murray – Public Representative

Strategic Theme	Activities 2025
<b>Excellence in Learning</b>	<ul style="list-style-type: none"> <li>• Hybrid remote education models for dental assisting;</li> <li>• Community-based workforce training (local recruitment);</li> <li>• Rural/remote externship expansion (University of Manitoba);</li> <li>• Workforce development aligned to access challenges.</li> </ul>
<b>Culture of Community</b>	<ul style="list-style-type: none"> <li>• Hybrid remote education models for dental assisting;</li> <li>• Community-based workforce training (local recruitment);</li> <li>• Rural/remote externship expansion (University of Manitoba);</li> <li>• Workforce development aligned to access challenges.</li> </ul>
<b>Access to Care</b>	<ul style="list-style-type: none"> <li>• Identifying barriers in northern &amp; remote communities;</li> <li>• Addressing geographic and workforce gaps;</li> <li>• Regulatory review (delegation, supervision, continuity of care);</li> <li>• Strengthening clinic infrastructure &amp; service delivery models;</li> <li>• Government advocacy &amp; stakeholder collaboration.</li> </ul>
<b>Public Trust</b>	<ul style="list-style-type: none"> <li>• Public interest and patient safety at the forefront;</li> <li>• Evidence-informed regulatory decision-making;</li> <li>• Addressing inequities in Indigenous oral health care;</li> <li>• Alignment with Truth &amp; Reconciliation principles;</li> <li>• Transparent engagement with practitioners and communities.</li> </ul>



**Manitoba  
Dental  
Association**