January 27, 2011

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# Annual Report 2010

#### **President's Report**



The Manitoba Dental Association has functioned for 127 years providing both the regulatory and membership services for the dentists of Manitoba. We are empowered by the Province of Manitoba to carry out the requirements of *The Dental Association Act.* The MDA has balanced these duties in a professional manner consistently fulfilling both mandates. There are changes forthcoming to our dual core mandate as a result of the "Regulated Health Professions Act of Manitoba". This means that in the future there will be a clear separation between the regulatory activities and the membership services. The Task Force on the Future of Organized Dentistry is discussing the issues involved and in consultation with the membership will make recommendations on how this statutorily mandated change can be best achieved. This is an issue that the membership will be kept updated and informed in order to make the transition as easy as possible. The regulatory body of dentists will be called *The College of Dentists of Manitoba*. As a regulator, The College

Dr. Betty Dunsmore

will be responsible for licensing and regulating dentists and dental assistants and the protection of the public. The membership services body will retain the name The Manitoba Dental Association and this Association will continue to provide important services to dentists.

The Task Force on Better Relations was struck in 2008 to review the causes of the non-supportive relationship that exists between the Alumni (UMDAA) and the Profession (MDA) towards the Faculty of Dentistry. The committee consists of representatives of the MDA, the Faculty of Dentistry, Students and Grad Students, and the Alumni Association. The Committee made its report this past year. This report provides an overview of the issues and recommendations, both with respect to the changes by the Faculty and initiatives by the Alumni and the Profession, as the basis for improving the relationship between them. The report was accepted by the MDA, the Faculty and the Alumni. The Faculty reports that relationships are improving both with the present students and Alumni. Our profession will benefit from strong relationships between MDA, the Faculty of Dentistry, and the Alumni.

The MDA continues to work with the Faculty of Dentistry on assisting with sustaining some key programs provided by the Centre for Community Oral Health (CCOH) that improve access to dental care for underserved and high risk populations. Information from CCOH on program revenue and expenses is being reviewed based on predetermined criteria designed to ensure accountability to our members for any disbursements.

Licensing and registration of dentists in Manitoba is an important function of the MDA. In April 2010, a Mutual Recognition Agreement was signed by all provincial dental regulators to continue our long history of interprovincial mobility for dentists.

The issue of registration and licensing of dentists from unaccredited training programs is one that involves both the Federal and Provincial Governments and the national and the provincial organizations.

In Manitoba, the Fairness Commissioner has held numerous meetings with all professions regulated in the province on the intents of *The Fair Registration* Practices Act and the implementation of that Act by the Office of the Fairness Commissioner. A significant emphasis is on the registration and licensing of dentists from unaccredited training programs. There has not yet been an evaluation of our registration and licensing practices but discussions with representatives from their Office have been positive and encouraging.

The MDA is working with the Fairness Commissioner's office to ensure information on our website is in plain language. Efforts are being made to meet the Fairness Commissioner's requirements for reporting on our registration and licensing activities.

Continued.....page 6

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"We strive to make suggested fees relevant to the economics of practicing dentistry in Manitoba while maintaining fairness to the public. "

### **Economics Committee**

The Economics Committee is focused on reviewing and making recommendations relevant to the economics of practicing dentistry in Manitoba.

Our work includes the development of Specialists' and General practitioner's fee guides on an annual basis. We strive to make suggested fees relevant to the economics of practicing dentistry in Manitoba while maintaining fairness to the public. We recommend that every practitioner consider their own situation and develop fees that reflect the circumstances of their own practices. The Committee is actively involved in considering patterns in Dentistry Human Resources so that the profession will be better prepared to meet the demands of a changing population as well as the needs of Manitoba dentists through time.

The Economics Committee is well represented by all areas of the province, having both urban and rural representation. We receive excellent advice from our Economic Consultant, Mr. Michael Loyd.

The Committee has recommended a 3.49% increase to the 2011 Specialist and General Practice Fee Guides. Due to very notable disparities between our Paediatric Dental Fee Guide and those in other provinces we have made recommendation of an increase to this guide of 9.5%.

Dental services provided north of the 53<sup>rd</sup> parallel will have a 10% higher fee, on both Specialist and General practice fees, to account for the higher costs or practicing in Northern Manitoba.

> Dr. Murray White Chair

#### **Peer Review**

A review of the written complaints received and investigated by the Peer Review Committee of the MDA over the past year shows a total of 28 complaints, the <u>lowest number</u> since the statistic has been recorded by the MDA. Five of the 28 complaint decisions were appealed.

There were 5 formal cautions given and no inquiry panels were held this year. One license was voluntarily surrendered to the Registrar.

A total of \$10,129.36 was refunded to 6 complainants.

I wish to offer my sincere thanks to the volunteer members of this hard-working committee. Without their diligence and hard work, meeting the requirement of self-regulation would not be possible for our profession.

Respectfully, Dr. Jean Bodnar, Chair

### **Third Party Committee**

The Third Party Committee of the MDA exists to represent the interests of Manitoba Dentists (and of patients) to the third party in the relationship (the plan benefit administrator). Individual dentists may sometimes ask the committee for guidance in dealing with insurance companies.

The Committee may meet with plan administrators at either their request or the MDA's. The goal is to have dialogue to promote the smooth functioning of the prepaid dental benefits system which has helped so many Canadians achieve better oral health than previous generations.

The Ad Hoc Third Party Committee

is comprised of a representative of the Third Party Committee, one of the Economics Committee and a member of the Dental Consultants Association. It may meet with individual dentists and benefits plan consultants to attempt to resolve areas of concern in the application of fees and procedure codes and the interpretation of benefit plan contracts.

This year in June, members of the ADHOC Third Party Committee met with representatives of Manitoba Blue Cross (MBC). MBC was concerned with the possible inappropriate use of procedure codes by two general practitioners.

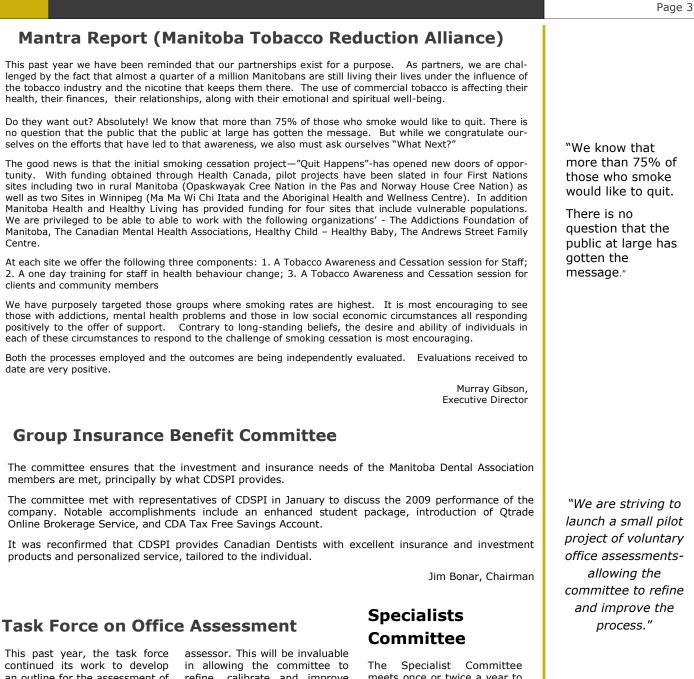
The Committee consulted dental

texts and two periodontists (one a dental plan consultant) Manitoba Blue Cross and the dentists involved were advised as to the appropriate use of the codes involved.

In November, members of the ADHOC Third Party Committee met with two Manitoba prosthodontists. This was to hear their concerns about their specialist fee guide. The issue was how a plan administrator was using the guide to determine patients' benefits. The Committee plans to meet with the company involved in the new year.

> Dr. Kardy Solmundson Chair

The Third Party Committee may meet with plan administrators at either their request or the Manitoba Dental Association's request.



continued its work to develop an outline for the assessment of a dental office. We are currently in the process of developing a series of Critical Thinking Documents, and plan to inform and educate the members of the project. Further information will be released in the coming months.

We are striving to launch a small pilot project, of voluntary office assessments, perhaps by summer. We expect to then evaluate the response from the offices as well as from the assessor. This will be invaluable in allowing the committee to refine, calibrate and improve the process of office assessments.

As mentioned last year, this is being developed as a quality assurance program, designed to provide resources and promote continuing competency among the membership.

Robert Fraser, Chair

The Specialist Committee meets once or twice a year to discuss topics that pertain to Specialist issues. Some of the previous discussions have revolved around: portability of licence; MDA advertising; fees; accreditation of specialists from outside Canada etc.

Due to no new issues being brought forward, the Committee has not met since 2009.

Thank you Dr. Jack Lipkin, Chair

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Dr. Joel Antel

"As the MDA transitions into separate regulatory and membership services organizations, the Communication Committee will strive to be a conduit for information from and to the Task Force On The Future Of Organized Dentistry. "

**Trust Your Dentist** 

Good For You

Good For Life

## **Communications Committee**

I would like to thank all involved on the communication committee and various subcommittees for their efforts this past year as well as those who have participated in the various meetings and events.

The continuing focus of the MDA communication program is the public image of the profession with an eye to challenges by others to our traditional role, dental office busyness and reducing the number of communication related problems encountered by dentists.

Utilizing various media and messaging, the program serves to protect the image of the profession and support the efforts of individual dentists. An appreciation for the value of the services we provide and the resulting dental health grows as the communication program informs the public, stimulates and supports discussions between dentists and patients and presents dentistry as the trusted profession that it is.

Evaluation and refinement of our communication program is a continual process. The coming year will see a move away from attempts to align with national messaging. Collaboration at the national level has accurately identified trust and value as a primary issue. National efforts to build on this finding have waivered and strayed. Our up and running "trust and value" messaging has been both tested and proven. National research has shown that Manitoba dentists lead the country in holding the public trust and the value seen in what we do.

#### This past year has seen some important projects continue and new ones come to fruition.

• The regulatory arm of the MDA has released guide-

lines for soft tissue examinations. This is an example of how well aligned an organization can be. The communication committee worked with the registrar to produce a video demonstration and still photos to accompany the printed and online text of the guidelines. The external communication program includes television ads promoting the importance of an examination by a dentist and demonstrating, within the confines of a TV ad, some aspects of the soft tissue examination. The internal communication program includes a poster for dental office/operatory display explaining what makes up a dental check up, including a soft tissue examination. There will be an opportunity at the MDA annual meeting for dentists and team members to have and observe a soft tissue examination.

- The First Free Dental Visit program was launched to the profession at the 2010 MDA convention and to the public during dental health month, April 2010.
- The MDA was a sponsor of the Safeway Provincial Curling Championships held in Steinbach this past February.
- The Winnipeg Sun published an 8-page supplement entitled "Your Dental Options" with content and editorial control provided by the MDA through the Communication Committee.
- The MDA Communication Committee continued involvement in the Healthy Smile Happy Child program.
- Pilot program testing of the Oral Health School Curriculum Program, a

curriculum for K to 6 students, is scheduled for this fall/winter with roll out planned for April 2011.

- Once again the MDA had a successful sponsorship and tent at KidFest (Children's Festival) providing dental screenings for more than 300 children.
- Another set of Town Hall Meetings was held this year. We hope to continue this valuable vehicle for the flow of information back and forth between the Manitoba Dental Association and it's members.
- Advertising efforts in the spring and fall included a mix of television, transit bustails, retail ad bars, radio and internet and on -line advertising promoting "Primacy of the Dentists" and directing consumers to the MDA website.

#### Task Force On The Future Of Organized Dentistry

As the MDA transitions into separate regulatory and membership services organizations. The Communication Committee will strive to be a conduit for information from and to the Task Force On The Future Of Organized Dentistry. The recently established Research Subcommittee of the Communication Committee has begun the process of measuring Manitoba dentists' needs and wants of their new member service organization.

As Manitoba dentists we need to have the awareness of the benefits we derive from the MDA necessary to guide the development of the most suitable new association. There are current services with obvious benefits and some with

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#### **Employment and Income Assistance Committee**

Three active GP's meet every three weeks to go through all the files that need special approval and dentist input. The budget allotted to this government program is limited. We receive many requests for treatment that fall outside of the program's parameters. Examples are numerous hours of scaling, custom-fitted crowns, posterior endos, etc. There is a dollar limit to restorative treatment, which cannot be increased on individual patient basis. Please plan treatment within this limit. For removal of 8's please consider planning the removal of only symptomatic or pathologically involved teeth. Prophylactic removal of asymptomatic impacted wisdom teeth

for example, contributes little to the current well-being of the patient which is the overriding concern of the program. When requesting extra units of scaling, please provide current dated radiographs and any extra information that can help us assess the case. As more dentists are using digital radiography, we have had many nondiagnostic images sent to us printed on normal paper. Please consider sending your radiographic images printed on photo paper for clarity.

**2010 STATISTICS**- November 1, 2009 to October 31, 2010

There were 278 cases received in total. Of those, 67 were approved, 148 were approved and reduced. The latter consisted of 141 cases of reduced scaling units and 7 cases of reduced extraction fees. Fifty cases were denied and 13 cases were pending more information.

Thank you to all the dentists who take the time to treat patients on this program.

Dr. Christine Lachance-Piché

"Prophylactic removal of asymptomatic impacted wisdom teeth for example, contributes little to the current wellbeing of the patient which is the overriding concern of the program."

### **National Dental Examining Board**

The National Dental Examining Board (NDEB) is responsible for the establishment and maintenance of the examinations which provide a national standard for the practice of dentistry in Canada. Dentists who receive NDEB Certificates are eligible for licensure in all Canadian dental regulatory jurisdictions.

To grant NDEB certificates, the NDEB administers two exams to graduates of Canadian Faculties of Dentistry: the Written Exam, a multiple-choice exam which assesses knowledge of clinical dental sciences, and the Objective Structured Clinical Exam (OSCE), a station type exam which assesses clinical judgment through review and application of clinical information and materials. Graduates of accredited American dental programs and as of March 2010, graduates of programs accredited by the Australian Dental Council, are also eligible to write these exams.

The Exams, along with the processes of the Commission on Dental Accreditation, verify that new graduates are competent to enter general dental practice. In 2010, pass rates for Canadian graduates were about 95% with about 650 successful candidates. Pass rates for American graduates were about 85% with about 150 successful candidates.

The year 2010 was the last year that the NDEB assisted with the Association of Canadian Faculties of Dentistry with the Eligibility Exam. It was written by graduates of non-accredited dental programs as an entrance requirement for the two-year Qualifying for Degree Completion Programs in Canadian dental faculties. In 2010, over 460 candidates took the Eligibility Exam of whom about 70 were accepted into programs.

The NDEB also assists the Association of Canadian Faculties of Dentistry develop the Eligibility Exam. It is written by graduates of non-accredited dental programs as an entrance requirement for two year Qualifying or Degree Completion Programs in Canadian Faculties. In 2009, over 620 candidates took the eligibility exam of whom about 70 were accepted into programs.

In 2011, the NDEB will start the new Equivalency Process, as directed by the Canadian Dental Regulatory Authorities. It will allow graduates of nonaccredited dental programs a different avenue by which to obtain an NDEB certificate. The process consists of three assessments:

- The Assessment of Fundamental Knowledge, comprised of 300 multiple choice questions. This will also replace the Eligibility Exam.
- The Assessment of Clinical Skills consisting of 12 simulated requirements performed in a clinical setting.
- The Assessment of Clinical Judgment which assesses diagnosis, radiology and treatment planning in a case-based format.

After successful completion of the Equivalency Process, participants will be eligible to take the same written exam and OSCE as Canadian graduates. Unsuccessful participants will be eligible to apply for admittance to the existing two-year degree completion programs. The Equivalency Process has had over 1300 individuals apply to start the Assessments.

Information on NDEB exams and assessments, including released versions of recent exams can be found on the web at <u>www.ndeb.ca</u>.

> Dr. Melanie Wood NDEB Past -President

" In 2011, the NDEB will start the new Equivalency Process, as directed by the Canadian Dental Regulatory Authorities. It will allow graduates of non-accredited dental programs a different avenue by which to obtain an NDEB certificate."

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# **President's Report** (continued)

Also, relevant for dentists trained in unaccredited programs is the development of a national equivalency process. The process was initiated by the regulators and developed by the National Dental Examining Board (NDEB). The first applicants will begin the process in the coming year. A candidate who is successful at the three stage didactic and clinical examinations will be eligible to take the NDEB written and OSCE (Objective Structured Clinical Exam) examinations that are required by graduates from accredited training programs.

In reviewing the activities of the MDA for 2010 it must be stressed that the Association can only function through the coordinated efforts of the MDA staff, (Ross McIntyre, Rafi Mohammed, April Delaney and Donamae Hilton and welcome to our new Membership Services Director, Linda Berg), our Registrar, Dr. Marcel Van Woensel, and many volunteers who chair and sit on the many committees of the MDA. The dedicated efforts of the many volunteers, both dentists and members of the oral health team are very much appreciated. It is through their hard work that the committees provide the MDA Board with the background information and recommendations on which they base many of their decisions. It is obvious when you read all the Annual Reports that the organization is very dependent on the work done by these many volunteers facilitated by the MDA staff.

In conclusion I wish to acknowledge the 42 years that Ross McIntyre has served as the Executive Director of the Manitoba Dental Association. He has worked for the dentists of Manitoba with dedication, good humor and patience. I would like to wish him all the best as he retires from the MDA. He will be greatly missed.

> Dr. Betty Dunsmore President

### **Free First Visit Committee**

The Free First Visit Program was officially launched on April 1, 2010. This is a three year program intended to raise awareness of the importance of a first visit and to establish dental homes for young children in this province. The Canadian Dental Association recommends a first visit by 12 months of age. The rationale is based primarily on the argument that it establishes a preventive practice for the caregiver with long-term benefits for the child. This strategy may be an effective method to ensure children remain cavity-free, as age is a significant determinant of Early Childhood Caries (ECC).

The FFV program is an important step in addressing the problem of ECC in Manitoba where children in some communities have staggering rates of decay and many require rehabilitative dental surgery under general anesthesia.

Over 255 dentists have registered with this program since it was launched. Each time a dentist provides a Free First Visit a tracking form is completed and submitted to the MDA. As of December 20, 2010 records indicate that 1663 children have benefited from this important public service. The following table provides some other preliminary highlights.

| Free First Visit                 |                   |
|----------------------------------|-------------------|
| Number of Children Seen          | 1663              |
|                                  |                   |
| Mean Age*                        | 27.5 ± 9.4 months |
|                                  |                   |
| Sex                              |                   |
| Males                            | 859 (52.6%)       |
| Females                          | 775 (47.4%)       |
| Place of Residence*              |                   |
| Winnipeg                         | 789 (61.5%)       |
| Brandon                          | 84 (6.6%)         |
| Other                            | 409 (31.9%)       |
| Signs of Early Childhood Caries* |                   |
| Yes                              | 182 (18.5%)       |
| No                               | 800 (81.5%)       |
| Child had Dental Benefits*       | 1284 (77.2%)      |
|                                  |                   |

\*preliminary calculation based upon available submitted & completed tracking form fields

Your Manitoba Dental Association's Free First Visit Program Committee would like to thank dentists and staff for participating in this important program and for opening their offices as dental homes for many young children in the province.

Drs. Jacobs, Lekic, Schroth, & Stein

"I wish to acknowledge the 42 years that Ross McIntyre has served as the Executive Director of the Manitoba Dental Association. He has worked for the dentists of Manitoba with dedication, good humor and patience. I would like to wish him all the best as he retires from the MDA."

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#### Communications Committee (continued)

comparison of practicing in an environment without them. There are also some motherhood issues, such as affiliations with other groups, to evaluate and consider. Knowledge and information will be needed to make these assessments. The Communication Committee is the MDA's tool for providing that information.

#### The Branding Working Group

The CDA through the BWG has conducted national research. Their conclusion is that the public's trust of dentists and how they perceive the value of dental services are issues to be addressed. Their research shows the importance of good communication with our patients, providing information to encourage good decisions about the care they receive and who they choose to provide that care. In the BWG words, value is shown, trust is earned.

benefits hidden without the Their findings further validate the direction chosen for the MDA program. Our call to action, Talk to your dentist (communication) Trust your dentist (trust) Good for you, Good for life (value) is on target. Their research confirms our effectiveness and success, having found Manitoba dentists rank among the highest in the country in the public's perceived value in the services we provide and our having earned their trust.

> The BWG budget precludes providing the economies of scale one might expect from pooled national resources. The CDA board of directors has designated additional funding to augment the communication programs in all tier one provinces (smaller/higher CDA dues per member) except Manitoba.

> Your representatives on national issues are aware of the process and politics that has led to Manitoba's exclusion. The Com

munication Committee will work with the MDA board and the CDA board member from Manitoba for change, so that your money in the national budget is used on behalf of all Canadian dentists including those in Manitoba.

The Communication Committee will work with the MDA board ... so that your money in the national budget is used on behalf of all Canadian dentists including those in Manitoba.

> Dr. Joel Antel Chair

"The Communication Committee will work with the MDA board... so that your money in the national budget is used on behalf of all Canadian dentists including those in Manitoba."



Don't Forget to Register for the 127th MANITOBA DENTAL ASSOCIATION ANNUAL MEETING

& CONVENTION—Thursday, January 27 to Saturday, January 29, 2011

Registration Deadline is January 12, 2011





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Dr. Peter Doig

"The new membership model links membership in the CDA to membership in each provincial member services organization. Membership in the CDA will require membership in a provincial dental association and CDA benefits will be offered to members only."

## **Canadian Dental Association Report**

The CDA has spent 2010 ensuring that it provides indispensible value for the dentists of Canada by concentrating on its two areas of focus, **knowledge** and **advocacy**.

The CDA identified a number of "priority one" projects in 2011. The electronic jcda.ca, a new electronic platform of clinical and scientific information, is a knowledge focused priority project. The first phase of the new electronic knowledge strategy involved the creation of the jcda.ca website. Phase 2 will be the creation of an electronic library and Phase 3 will be the development of a social media strategy to utilize social media to provide a knowledge base for dentists and the public.

The 2011 advocacy focus priority project was a proactive campaign on access to care with an emphasis on early childhood caries and senior's oral health care. The CDA maintains an advocacy strategy at all times. Specific actions for the year's priority project involve meetings with MPs and policy makers at the CDA Days on the Hill, meeting with select MPs at other times of the year, maintaining a close working relationship with Canada's National Dental Officer and utilising advertisements in the Hills Times newspaper. The CDA also monitors media reports and responds to media reports and requests for information.

The Branding Working Group was the third priority project of the CDA for 2011. The BWG has begun the development of creative materials and the CDA has agreed to a continuation of funding for the BWG to further develop the internal communications programs and external branding components. The CDA has also committed to finance the translation of the marketing components into French. A fund has been set aside by the CDA to help Tier 1 provinces with media buys to implement the components of the BWG campaign.

The CDA continues to provide ITRANS to the dentists of Canada as a membership service. The CSI Advisory Group continues to monitor the operations of CSI and the high tech market space to advise the CDA on the operation of CSI/ITRANS. In November CSI achieved a milestone by processing 1,000,000 claims in one month for the first time. CSI is the largest handler of dental claims in Canada.

The Dentistry Canada Fund dissolution is almost complete. Most of the funds of DCF have been transferred to other charitable endeavours identified by DCF donors. The CDA has designated its library fund to the creation of a new electronic library and has donated the CDA Fund to About Face a charity involved in the treatment of facial deformities.

In April 2011, the new CDA membership model will come into effect. The new model will help ensure an increase in membership in the CDA by bringing in all the members of the Ontario Dental Association into the CDA. The new model will also result in a lower per member fee to the provincial Corporate Members. These two effects of the new membership model will result in a lower income for the CDA in the future, however the CDA understands the financial implications of the new membership model and has adjusted their finances over the past two years to be 2011 ready. This has allowed the CDA to rebuild its reserves to an acceptable level to ensure its financial stability.

The CDA continues to focus its actions in the areas of **knowl**edge and advocacy to provide value to the members of the CDA and all dentists in Canada while serving the Canadian public by remaining the experts in and advocates for oral health care.

> Respectfully, Dr. Peter Doig

### **Selection Committee**

The Selection Committee of the University of Manitoba Faculty of Dentistry provided the following statistics for the 2010-2011 admission cycle:

- 268 applications
- 90 interviews in total
- Incoming class consists of 26 Manitobans & 3 Out of Province students
- Incoming AGPA was 3.89
- Average DAT was 21.86

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### **Registrar's Report**

The Dental Association Act regulates dentistry and dental assisting in the Province of Manitoba. Our primary role is to ensure that appropriate dental services are provided to the public by formally educated, licensed, or registered dental care providers.

Currently we license dentists, register intra-oral dental assistants and review dental nurse therapists' credentials who graduated from Wascana Institute (SIAST 1975-88).

A review of all existing regulatory procedures, bylaws and Codes is occurring to assure they reflect the current regulatory expectations of society.

#### **Registration and Licensure**

During 2010, changes to both bylaws were approved by the Board for new dentist registrants (a requirement for a Canadian jurisprudence course); license renewals (valid certificate in CPR for licensure in 2012) and prescribing rights for dental interns and residents.

This year 39 dentists and 116 dental assistants were newly registered and licensed/certified with the MDA. There are currently 647 dentists and 1124 dental assistants licensed in the Province of Manitoba.

#### <u>The Regulated Health Pro-</u> <u>fessions Act</u>

As mentioned in the last report, it may be some time before regulations are developed to replace *The Dental Association Act.* A review of policies, practices and bylaws of the MDA is ongoing to make the regulatory transition as simple and seamless as possible. Activities and terms of reference for existing committees are being reviewed to align with expectations of *The Act.* New committees are being formed to manage additional obligations. Potential options for assessing continuing competence and assuring quality have been proposed by the Taskforce on Office Assessment.

The Taskforce on the Future of Organized Dentistry in Manitoba has been developing dentistry and dental assistant's position on scope of practice and reserved acts based on a public interest analysis.

#### <u>The Fair Registration Prac-</u> tices Act

The MDA has been attending meetings and engaging in discussions with representatives of the Fairness Commissioners Office. Ensuring our registration practices are communicated in plain language and developing reporting templates to coordinate information important for the Commissioner's work has been the primary focus of our discussions.

#### <u>Canadian Dental Regulatory</u> <u>Authorities Federation</u> (CDRAF)

A new pathway for dentists educated in unaccredited dental training programmes – the national equivalency process - has been developed by the NDEB at the request of the regulators. Funding for the project is supplied by the Federal government.

A reciprocal recognition agreement between Commission on Dental Accreditation of Canada and the Australian Dental Council will allow dentists who graduate after 2010 to be eligible for licensure in either country. Australian graduates will need to complete the NDEB examination like their Canadian and American counterparts.

#### Peer Review Committee

The Chair of the Committee has provided her report and the statistical information about the activity of the Committee can be accessed in that report. The Board has approved funding additional support for the Complaints Committee volunteers to assist in their investigation

# Guidelines for Soft Tissue Examinations.

Guidelines for soft tissue examination and adjunctive diagnostic tests have been approved by the Board and are available at the website. Included with the guidelines is supporting information.

The MDA is also investigating guidelines for oral appliances in the management of sleep apnea; infection control and Botox.

#### Faculty of Dentistry

I would like to express my appreciation to the Dean, Dr. Anthony Iacopino, for his support in addressing regulatory issues. His support of the need for and communication about effective regulatory policies will in the long term benefit both the Faculty and the profession. In 2010, representatives of the regulatory authority have participated in the interview process for all new Faculty positions.

> Dr. Marcel Van Woensel Registrar



Marcel Van Woensel

" A new pathway for dentists educated in unaccredited dental training programmes – the national equivalency process - has been developed by the NDEB at the request of the regulators. "

### **Hospital Services Committee**

The Hospital Services Committee continues its mandate of involvement, development and activity in areas associated with Manitoba dentist's activities in hospitals and NFA facilities.

Meetings have begun to review the requirements for hospital privileges for those in general dental practice throughout the province. We have had several meetings with Manitoba Health where, with assistance from Mr. Paul Knapp of iTrans, work has begun on coordinating for electronic billing to Manitoba Health through software providers.

The Implant subcommittee has met several times over the past year to review applications for coverage under the program. Unfortunately, the subcommittee resigned this past summer due to concerns in regards to the provincial government's use of the program. At this time further applications are being held until a solution to concerns is found. A positive meeting was held with the Minister of Health and we are awaiting her response in addressing the concerns of the Committee.

Meetings are planned in regards to updating the Manitoba Health Fee Schedule.

Respectfully submitted, Dr. Lee McFadden, Chair

# **Continuing Education Committee**

The Continuing Education Committee overseas the provision of continuing education for dentists in Manitoba and reviews appropriateness for continuing education programs as they relate to MDA Continuing Education By-Law.

The Committee is constantly reviewing trends in dental education and in conjunction with Winnipeg Dental Society and University of Manitoba Faculty of Dentistry to apply those that are appropriate to a selection of upcoming courses.

Respectfully, Dr. Keith Levin Chair

## The Manitoba Cleft/Dysplasia Program

This program provides dental care under the auspices of Manitoba Health for eligible children. To be registered for benefits under the Manitoba Cleft/Dysplasia program an individual must have a valid MHSC # and have a repaired cleft lip and/or palate or a significant orofacial dysplasia.

Patients must be registered before their 18th birthday. Examination for registration in the plan can be arranged by calling 204-787-2516. To maintain coverage patients must have a valid dental exam at least once a year.

Implant coverage for insured individuals is determined by a committee of the Manitoba Dental Association.

Treatment plans over \$500.00 must be approved by the dental director.

Complex oral surgery, prosthodontic, and orthodontics must be carried out by the respective specialist billing to Manitoba Health. Cindy Bonneteau, Nurse Clinician PH: 787-2207

Sheryl Clark, Claims PH: 787-4882

Howard Cross, Dental Director PH: 787-25616

"The Committee is constantly reviewing trends in dental education and in conjunction with Winnipeg Dental Society and University of Manitoba Faculty of Dentistry to apply those that are appropriate to a selection of upcoming courses."

### **Oral Health Team Committee**

The Oral Health Team Committee continued discussions with its associated groups to update the Scope of Practice for Dental Assistants and Dental Therapists. As stated previously, any reference to Dental Hygienists has been removed and an overview of Dental Hygienists Competencies will be attached as an appendix to the Scope of Practice.

Due to the separation of Dental Hygiene from the Scope of Practice, the Oral Health Team Committee has been disbanded. In its place the MDA has formed two new committees—the Scope of Practice Committee and the Oral Health Advisory Group.

The Scope of Practice Committee will focus on the duties of auxiliaries under the jurisdiction of the MDA.

The Oral Health Advisory Group will be a forum for discussion between all groups involved in the Oral Health field including Dental Hygiene and Dental Technicians. The new committees will meet in early 2011.

Dr. Carmine Scarpino Chair

#### **Student Mentorship Program**

The Mentorship/Student Advisorv Committee co-hosts meetings and social events for dental students and volunteer mentors of the profession in partnership with the Faculty of Dentistry and the Manitoba Dental Students' Association. This year we were pleased to have welcomed Mrs. Linda Berg, Membership Services Director of the MDA to the committee. The MDA's Mentorship Program provides dental students with a unique opportunity to develop a relationship with members of the profession who can offer advice, provide a window into dental practice in Manitoba, share experiences and give career guidance.

The dental profession as a whole also gains tremendously from the program. As an important component of the MDA's Recruitment and Retention Strategy, the mentorship program matches students from rural Manitoba with rural practicing dentists. This strategy has proven to be very successful. Within the past 5 years over 20 graduating dental students have accepted associateships in rural Furthermore, the practice. retention of dental graduates across the province has increased over that period due to the influence of local mentors. We have also found the program to be successful in reducing the stress levels of new members of our profession, contributing to the development of a high standard of ethical and professional conduct by new graduates. In addition, the program has increased the successful pairing of associate/partners with owner dentists and improved the recognition of members of the value of participating in organized dentistry.

The Student Mentorship/ Advisory Committee has developed a series of twelve topics delivered over the four vears of dental school. These topics are presented in lecture-style to the students through various guest speakers that serve to provide participants with a guide for discussions between students/dentists in pairings and larger groupings. Students and mentors are encouraged to meet outside the formal parts of the program. This may include visits to the mentors private practice, lunch and attending continuing education and social events.

The Mentorship Program has a vast cadre of mentors from diverse background and experience. The common denominator in all mentors is their passion for giving back to their profession and making sure that the profession of dentistry in Manitoba is strengthened with each graduating class. Mentorship can be seen as a nurturing process that fosters growth and development in the protégé: we believe it is an investment in our profession. Dentistry in Manitoba is better as a whole because of the active participation of committed members who volunteer their time and talent to the success of the Mentorship Program.

> Dr. Amarjit Rihal & Dr. Cory Sul Co-Chairs

"The Oral Health Advisory Group will be a forum for discussion between <u>all groups</u> involved in the Oral Health field including Dental Hygiene and Dental Technicians."

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#### Manitoba Dental Association

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# **Annual Meeting & Convention**

126<sup>th</sup> MDA Annual Meeting and Convention

This was the first meeting since Dr. Billy Kettner's retirement as Chair of the Convention. I had some large shoes to fill but hopefully over time I will be able to present aspects of the convention that will uniquely reflect the dental profession of Manitoba.

The 2010 meeting theme "Winter Games" was a parallelism to the Vancouver 2010 Games and the kindling of energy and enthusiasm that enshrined Canada was evident at this convention. Our gold medal athletes included speakers James Robbins, Betsy Reynolds, Dr. Meredith August, Dr. Ken Malament, Dr, Patrick Wahl, and Dr. Anthony Iacopino.

New in 2010 were the Clinical and Research Presentations by Manitoba dentists. This was a resounding success both from the quality of the presentation and also for the positive feedback from the attendees.

Of course the Olympic spirit also embraced the festive instinct in us all, and we were able to provide a party atmosphere worthy of any Olympic Games. The Friday night social had our very own MDA Winter Games. This year, Mandibular Black was back and we hosted a party of Olympian proportions. Capping off our social calendar was the President's Gold Medal Gala, featuring the Danny Kramer Event Band- this was solid gold dancing all the way.

The numbers for the convention reached the gold meter mark - we had over 2000 registrants! Finally, I would like to extend my personal gratitude to members of the convention committee who worked tirelessly in putting together another successful event.

Dr. Tim Dumore

# The Future: Never Better

### President's Gala Dinner & Dance

Saturday, January 29, 2011–6:30 PM

**1st floor – Winnipeg Convention Centre** 

In addition to acknowledging the contribution of valued volunteers, this year's program includes a tribute to Ross McIntyre who is retiring after 40+ years at the helm of the Manitoba Dental Association.

Join your friends for this wonderful evening of fine dining and entertainment!

To reserve your tickets, call the

Manitoba Dental Association office

at 988-5300

Tickets: \$100.00 per person

**Dress: to impress!** 

Featuring: the Danny Kramer Event Band

