

MDA Bulletin

WINTER 2024
Volume 44, Issue 4,
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a Joyous New Year!*

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2024-2025 Lecture Dates
(For Grad Years 2020/21/22/23/24)

- Jan 21 An Overview of Dental Codes | Dr. Jeff Hein | ZOOM
- Feb 7 Periodontics Lecture | Dr. Katie Chung | ZOOM
- Mar 1 Orthodontics Lecture | Dr. Rob Mintenko
Brandon, MB
- Mar 17 Oral Pathology | Dr. Mohamad Kadhim
TBC Winnipeg, MB
- May 3 Suture Lecture & Hands-on Session
Maxillo Winnipeg Team

Watch for 2024/25 GPSC Lecture Details in our
MDA Weekly Updates.

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Save the Dates for 2025

- Feb 28 Dr. Sergio Quaresma : CMHR
- Mar 28 Speaker TBC : CMHR

Register at:
WinnipegDentalSociety.org

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MDA Bulletin



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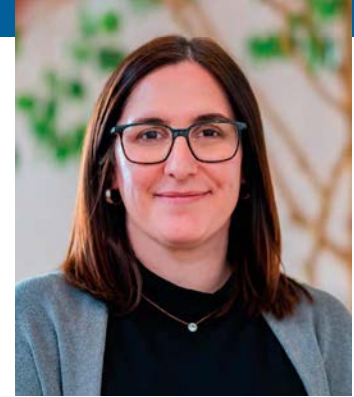
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ON THE COVER:

Assiniboine Park, Winnipeg, Manitoba
Photo by **Dr. Alex Zimmer**, MDA Member



PRESIDENT'S MESSAGE

As the holiday season fast approaches, winter has finally arrived in Manitoba. We enjoyed an extended fall season this year but the Parkland area was given the chance to try-out winter a bit before other areas of the province. Today, as I write this on my third Snow Day of the season, the view outside the window is certainly a winter wonderland.

As I wrap up my term as the 100th President of the Manitoba Dental Association (MDA), I want to take a moment to reflect on the past year and extend my heartfelt thanks to all of you for your ongoing support, engagement, and commitment to the profession. This final message of 2024 is a chance to look back at some highlights and to express my deep gratitude for the collective efforts that have made this year so successful.

A Year of Advocacy and Collaboration

One of the major endeavours of this year has been our shared work in advocating on the Canadian Dental Care Plan (CDCP). We've seen progress at both the federal and provincial levels, and I'm incredibly grateful to all of you who have played a role in this important work. Whether you made contact with your local Members of Parliament, participated in surveys, or helped spread the word amongst colleagues, your efforts have made a significant impact. Together, we've helped bring attention to the need for dental care that is accessible and sustainable to Canadians and our profession can be proud of the consistent voice we presented to patients, government and the public.

In early 2025, we'll be sharing more details about the MDA's updated strategic plan. This will outline how we plan to continue building on the progress we've made in advocacy, regulation, and

professional development. I encourage you to stay tuned, as your feedback will continue to play a vital role in shaping the direction of our work moving forward.

I encourage members to read the Registrar's Report as work continues to review the framework of numerous MDA bylaws. This work aims to modernize and respond to needs around registration and licensing of dentists and registered dental assistants as well as other areas which will help strengthen the dental workforce in Manitoba.

Advocacy at the Provincial Level

Our advocacy work at the provincial level continues to gain momentum. Throughout 2024, we've been engaging with the provincial government on a variety of issues, including dental therapy regulation and the scope of practice for dentists. We've been working hard to ensure that proposed changes to these areas are based on solid evidence and, most importantly, prioritize and contribute to the health and safety of the public.

We've also been addressing issues related to Employment and Income Assistance (EIA) and hospital dentistry programs. These conversations are crucial for ensuring that dental care remains accessible to all Manitobans, especially those who face financial barriers. The MDA's advocacy team has made strides and looks forward to continuing this momentum into 2025.

Advancing Truth and Reconciliation

As a profession, we must always be mindful of our role in addressing broader issues that impact patient care, and I'm proud of the work the MDA has done in this area. This year marked the first

meetings of our Task Force on Truth and Reconciliation, a group dedicated to exploring how we can create a more inclusive and culturally sensitive dental profession. This initiative is vital for ensuring that we provide not only the highest standard of care but also care that is respectful of all communities. The Task Force will continue to meet in the coming year, and I look forward to the meaningful work ahead.

Addressing Dental Team Shortages

One of the ongoing challenges we've faced is the shortage of dental professionals. This issue is being felt across the province, and the MDA is committed to finding innovative solutions. We're exploring ways to train Registered Dental Assistants (RDAs) remotely, as well as developing a human resource demand model to help strengthen our advocacy efforts with the government. Additionally, we're reviewing the RDA Registration and Licensing Bylaw to consider all pathways to licensure, which could help address the workforce shortage and ensure that dental care remains accessible to all Manitobans.

Gratitude for Dr. Arun Misra

I would like to extend a special thank you to Dr. Arun Misra, the Registrar of the MDA, for his leadership, professionalism, and dedication to navigating the complexities of regulating dentistry in the public interest. Dr. Misra's guidance has been invaluable this year, particularly as we faced an increasingly complex regulatory environment. His efforts extend beyond Manitoba, where he has played a prominent role in national organizations such as the Canadian Dental Regulatory Authorities Federation, the Canadian Dental

Accreditation Commission, and the Royal College of Dentists of Canada. Through his work at the national level, Dr. Misra has helped to ensure that Manitoba's regulatory landscape remains aligned with the best practices in the country. I am personally grateful for his steady leadership and for the entire MDA regulatory team, whose commitment to public trust and professional excellence is second to none.

A Heartfelt Thank You to the MDA Board and Executive Committee

I also want to express my sincere thanks to the MDA Board, particularly our public representatives, whose dedication and commitment to public trust have been pivotal this year. Your leadership and thoughtful contributions have helped guide the MDA's work and ensure that we're staying true to our strategic goals and our mandate.

A special thank you goes to our Executive Committee – Dr. Scott Leckie and Dr. Jeff Hein – whose support has been invaluable throughout my term. Their experience and collaboration have been key in navigating the many challenges and opportunities we've faced, and I have been so lucky to have their shoulders to lean on.

Thank You to the MDA Team

Finally, I want to thank the entire MDA staff for their hard work and dedication this year.

I'd especially like to give a personal shout-out to Rafi Mohammed, whose expertise and guidance have been instrumental in helping me navigate the many issues and challenges we've faced. Rafi's professionalism and insight have been an invaluable resource, and I am deeply appreciative of his support throughout my term as President.

Looking Ahead

Organized dentistry is a team sport and as I conclude my time as President, I'm filled with pride in all that we've accomplished together. There are too many to name, but the support I received from past, present, and future practitioners across the country will not be forgotten. In many ways, I feel this position was the ultimate mentorship program. The work we've done this year has laid a strong foundation for future success, and I'm excited to see where the MDA goes in the years to come. I know that, with your continued involvement, the MDA will continue to grow and thrive as we work toward ensuring that dental care in Manitoba remains accessible, equitable, and of the highest quality.

Thank you once again for the privilege of serving as your President. It has truly been an honor, and I look forward to continuing to work with all of you in the future. 🌱

HEATHER BROWNLEE, RDA
PRESIDENT, MDAA



MDAA PRESIDENT'S MESSAGE

Dear RDAs,

As the holiday season approaches, it's hard to believe that 2024 is coming to a close. The Manitoba Dental Assistants Association (MDAA) has been busy wrapping up the year and planning exciting events for 2025.

Mark your calendars for your first virtual-person Annual General Meeting (AGM) on April 10, 2025, held in conjunction with the Manitoba Dental Association (MDA) Convention.

MDAA continues to advocate for Registered Dental Assistants (RDAs) to increase our presence as integral dental team members and expand our skill set.

In November, MDAA represented Manitoba in Ottawa at the Canadian Dental Assistants Association (CDAA) kickoff celebration for their 80th anniversary. We're thrilled that CDAA will be hosting a celebration in Winnipeg, coinciding with the MDA Convention and we hope you can attend.

As we head into the holiday season, I'd like to extend warm wishes to you and your loved ones. May you have a joyous holiday season and a happy, healthy New Year. 🌱

Best Regards,

Heather Brownlee, RDA
President, MDAA



REGISTRAR'S MESSAGE

Fostering Collaboration in Dental Regulation: Highlights from the CDRAF

This summer, the Manitoba Dental Association (MDA) had the pleasure of hosting other dental regulatory bodies from across Canada. The Canadian Dental Regulatory Authorities Federation (CDRAF) is an organization that fosters collaboration and consistency of approach and supports best practices in dental regulation in Canada. These meetings brought together leadership from over 22 different organizations to help map out strategies for meeting the needs of the Canadian public's interest now and into the future.

Discussions over these two days were wide-encompassing, but there are a few highlights which may be of particular interest to dentists in Manitoba:

1. The Commission on Dental Accreditation of Canada

(CDAC) is the body responsible for accrediting dental, dental specialty, dental residency, dental hygiene and dental assisting education programs in Canada. CDAC went under a significant governance change in 2022 when it separated from the Canadian Dental Association and became an independent entity.

The CDRAF has a representative on its 11-person Board of Directors and is collaborating with CDAC on a new funding model and on promoting greater transparency, particularly in accreditation reports and budgets.

2. National Competency Standards for the Beginning General Dentist in Canada:

A working group developed by the CDRAF consisting of representatives from various stakeholders developed a framework of Knowledge, Skills and Abilities (KSAs) for a beginning dental practitioner

in Canada. These KSAs have been approved by the Boards of the National Dental Examining Board of Canada (NDEB), the Association of Canadian Faculties of Dentistry (ACFD) and the CDAC. CDRAF formally requested CDAC to include the KSA document in its Accreditation Standards for DDS/DMD programs.

3. Dental Anesthesia:

CDRAF recently recognized dental anesthesia as a dental specialty. Increasing shortages of medical anesthesiologists have left many dental patients too low on the priority list and unable to access urgently needed care. The Royal College of Dentists of Canada, which is the body responsible for administering the National Dental Speciality Examination, is developing an examination that will assist regulatory bodies in the registration and licensure of Dental Anesthesiologists. CDAC has circulated draft dental anesthesia standards that are anticipated to be approved by early next year.

4. Remote Healthcare:

Another important topic is the development of regulatory standards and guidance related to the provision of remote healthcare, such as teledentistry. The CDRAF has created a working group to identify issues of risks to patients and the public related to oral health care provided remotely. The working group will recommend next steps in determining risk mitigation strategies to the CDRAF Board.


5. Academic Licensure Practices:

The CDRAF Board also discussed at length academic licensure practices.

Most, if not all, Canadian faculties of dentistry face extreme challenges in attracting general dentists and specialists for full-time positions. At this time, provinces have variations in pathways for internationally-trained dentists that provide for academic licensure. Over the years, the MDA has developed a progressive licensure pathway for academics. While this matter is controversial in some jurisdictions, I have recommended that all regulators review their by-law requirements and further consider changes in pathways for this licensure class.

6. Oropharyngeal Cancers:

Discussion also took place about the important role dentists can play in helping to detect and prevent oropharyngeal cancers. The COVID-19 pandemic showed the beneficial role dentists can provide in vaccine administration. There may be a day when we use that gained experience to assist in saving lives by prescribing or administering HPV vaccinations.

The CDRAF's core function is to create and maintain a forum for the exchange of information regarding regulatory trends, policy, and legislation. I had the privilege of serving as Chair of the organization over the past twelve months and thus have seen firsthand the unique role this organization plays in the profession of dentistry and its ongoing efforts to achieve optimal oral health for all members of the public in a safe, effective, and respectful manner. I welcome all members to learn more about the CDRAF and its activities by visiting its website at www.cdraf.org. 



Your journey starts here.

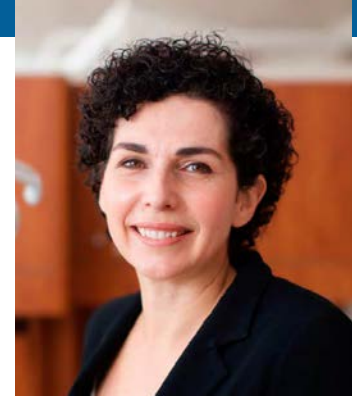
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DEAN, DR. GERALD NIZNICK COLLEGE OF DENTISTRY,
RADY FACULTY OF HEALTH SCIENCES, UNIVERSITY OF MANITOBA



DEAN'S MESSAGE

Dear Colleagues,

As 2024 draws to a close, I want to take a moment to reflect on some extraordinary accomplishments over this past year.

In the educational realm, for the second year in a row, our dental hygiene and dental students' pass rates on their respective national board exams were 100 per cent. This fall, we launched our first-ever dental student rural private practice rotation in Dauphin with great success.

Our dental hygiene students participated in clinical rotations in Churchill and private practice observerships in Winnipeg. Our collaboration with the First Nations and Inuit Health Branch of Indigenous Services Canada (FINHB) continues strong and we expect 10 more of our students to travel to Northern and Remote communities, by the end of the academic year. We believe that these additional clinical experiences will better prepare our learners for their careers, and we wish to thank all the dentists and dental hygienists that made these experiential opportunities possible.

On the research side, the college surpassed, yet again, for the fourth year in a row, its previous year's annual research funding. We also had the highest number of dental students registering in the BScDent program, with a significant portion of the second-year class now participating in research. On a provincial front, Dr. Devi Atukorallaya was in the news with the opening of the new fish research facility and her studies identifying the morphogenetic mechanisms of craniofacial organ development, including the aetiology of human structural birth defects in on teleost fish. On the national front, Dr. Bob Schroth was awarded a very competitive Canadian Institutes of Health Research Applied Public Health Research Chair, with his research ranked in the top 11 per cent in its field in Canada.

Beyond our educational and research endeavours, however, we are, as a college, committed to giving back to our community. We have now introduced service learning in the dental curriculum. This includes all aspects of approved volunteer activities, and our learners have accepted this challenge with enthusiasm. I believe that you may see many of them volunteering for the upcoming MDA Convention! In October, our faculty oral pathologists, residents, undergraduate students and staff, under the leadership of Dr. Vimi Mutalik, organized and performed more than 100 oral cancer screening exams at a pop-up clinic in the Brodie Centre and raised awareness about oral cancer. We also celebrated the 25 years of our collaboration with the Winnipeg School Division busing program that facilitates the provision of free oral healthcare services to children in need. We sincerely appreciate the support of our two new sponsors, the Dr. Alfred E Deacon Medical Research Foundation and the Cholakis Dental Group, so we can continue to offer the Cholakis Dental Group: Kids Dental Outreach Program in the years to come.

I would be remiss if I did not comment on an amazing Homecoming event this year that brought together alumni from across the decades, with special reunions for the Dentistry Classes of 1984, 1981, 1999 and 1974, as well as the Dental Hygiene Classes of 1974, 1999 and 2014. It was wonderful to witness the camaraderie and pride that still connect us all to our college. The spirit and legacy of our graduates are foundational to our community and continue to inspire our current students and faculty.

In September, we were also thrilled to announce a landmark gift from Dr. Gerald and Reesa Niznick, whose exceptional generosity will enhance our students' educational experience and strengthen the clinical training that we offer.

Dr. and Mrs. Niznick's contribution is a significant boost to our Dental Clinic Campaign. Their support is a testament to the impact our alumni can have, helping us reach an impressive milestone. Our fundraising campaign is well underway, with more announcements coming soon.

Our biggest challenge as 2024 comes to a close, is the unintended impact of Canadian Dental Care Plan (CDCP) on our patient supply. The majority of our patients coming to our dental clinics are CDCP eligible and many of them have postponed treatment in anticipation of full CDCP coverage. Some have decided to move their care to dental offices closer to home. This, coupled with the challenges of predeterminations that opened on November 1st, the necessity to submit our records by mail, the Canada Post strike and the operational complexities of navigating a new plan has reduced the patient supply at the college. I am reaching out to you, my colleagues, with an appeal to consider referring to the college, patients who cannot afford private practice fees for oral healthcare services or CDCP patients who cannot afford the balance billing fees. This can be accomplished by filling out our referral forms at: <https://umanitoba.ca/dentistry/referral-form>.

Our mission to "educate our learners to be skilled, evidence-informed, collaborative, and caring oral health professionals and advocates, partnering with and serving our diverse community" is always top of mind for me. As a community we need to ensure the next generation of oral healthcare providers can enter the profession with the tools they need to be serve the people of Manitoba and Canada.

Please accept my thanks for your continued support and my best wishes for a Healthy and Happy 2025! 🍀

142ND MDA ANNUAL CONVENTION

ON PURPOSE... WITH PURPOSE



KEYNOTE SESSION WITH TODD WILLIAMS

In today's dynamic landscape, individuals – whether they are customers, clients, or patients – are seeking more than just superior products and services. They are drawn to the personal commitment, passion, and responsibility that drive those delivering their care. Patients want assurance that their care team is not just fulfilling a role, but actively choosing to serve with dedication and purpose. They want to know their providers are showing up on purpose, with purpose.

Harnessing the individual and collective purpose of every team member is an indispensable element of achieving and maintaining top-tier success. It's what propels us beyond the competition, sharpens our vision for the future, and equips us to thrive amidst the evolving landscape of dentistry. Most importantly, it renews our passion to deliver care that is not only highly professional but deeply personal.

In this engaging and thought-provoking session, you will:

- Discover what patients truly desire and how to consistently exceed their expectations.
- Learn how to reconnect with and articulate your personal purpose in a way that resonates with patients.
- Debunk traditional beliefs about first impressions, and understand why genuine personal connection now matters more than ever.
- Challenge the status quo on patient satisfaction metrics, revealing the deeper truths behind impactful care.
- Explore the vital role of team alignment in achieving peak performance and delivering care that sets you apart.

By the end of this session, you'll be equipped with the tools and insights to elevate both your team and your patient care – ensuring that every interaction is driven by purpose and excellence.

"There are few people in the world that truly live and breathe authenticity fully. Todd Williams puts love up front in all aspects of life. At the same time he is supremely gifted in being able to see through the complexities of the human experience and meet people where they are at that moment.

My life, and the lives of my team, are exponentially better having experienced Todd's work."

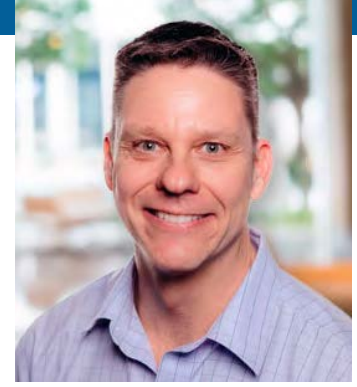
- Royce Brown, CEO, AdventHealth Lake Wales

[CLICK HERE
TO READ
TODD'S BIO](#)



April 11 & 12, 2025 | RBC Convention Centre Winnipeg
REGISTRATION OPENS JANUARY 2025

DR. JEFF HEIN, DMD
CHAIR, ECONOMICS COMMITTEE
VICE PRESIDENT, MDA



CONVERSATION ON CODES

Survey Data

It happens often that Manitoba dentists are asked to provide their opinions, give feedback or complete a survey of one sort or another. The data collected in these dentistry-related surveys is anonymous to Economics Committee members, and is handled with the strictest protections to ensure your data is both secure and confidential. In 2024, Manitoba dentists were asked to complete an Office Overhead Survey (June), a short, online ‘State of Dentistry’ opinion survey (September), and the ever-valuable WDS Staff Wage Survey (also September).

For the first time since the onset of COVID, the MDA Economics Committee has new, relevant and – most importantly – statistically significant data upon which to base a Suggested Fee Guide increase recommendation to the MDA Board of Directors.

This year, the committee, as in the past, was able to base its recommendation on factual data, and not rely on anecdotal reports and predictions. This is of utmost importance because factual data is key to our autonomy.

Without data, the Economics Committee cannot justify its recommendations to the media, the public, MDA members, the government or the Canadian Health and Life Insurance Association (CHLIA). And, without justification based on facts, dentistry may lose the privilege of developing its own Suggested Fee Guides, leaving the determination of appropriate dental fees to an outside body. This has never been more important – the advent of the Canadian Dental Care Plan (CDCP) has emphasized this.

Your survey participation has helped ensure our continued autonomy – so

to each of you that completed these surveys in 2024 I say a genuine “Thank you!”. I urge you to continue your excellent participation in coming years – it makes a difference.

As this is my last article written as chairperson of the MDA Economics Committee, I wish to also extend a sincere word of thanks to the committee members with whom I’ve served – both past and present. Your hard work and considered, sometimes passionate opinions have always been valuable to the process. And to Dr. Alex Pappas, incoming Economics Committee chairperson, I wish the very best of luck! You are well positioned to lead the MDA Economics Committee going forward, and you have a committee stacked with talent. 🌱

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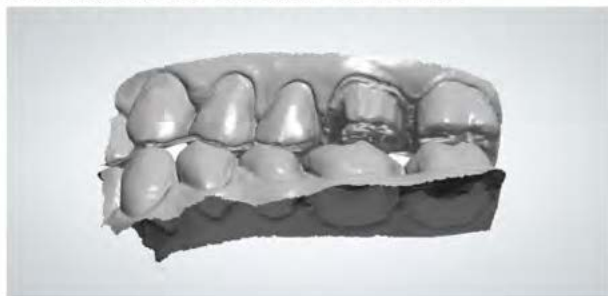
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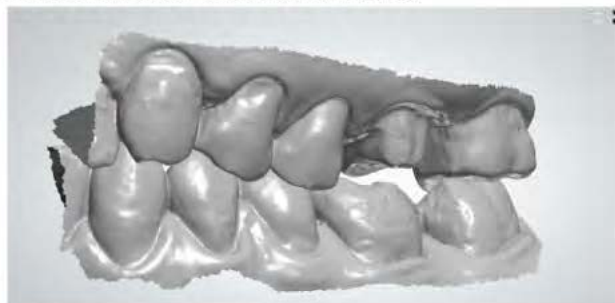
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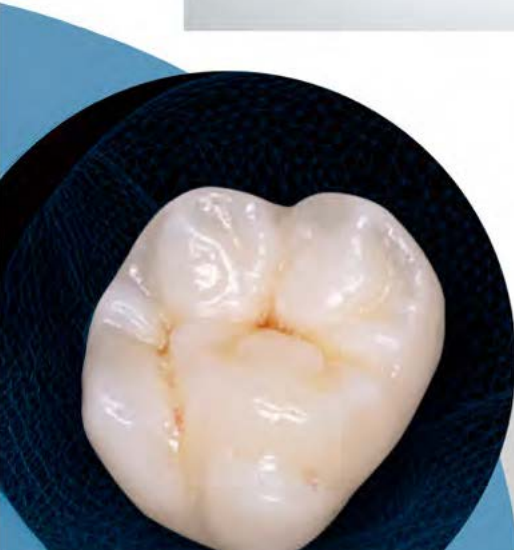
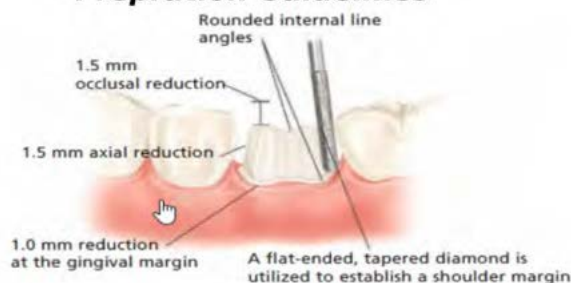
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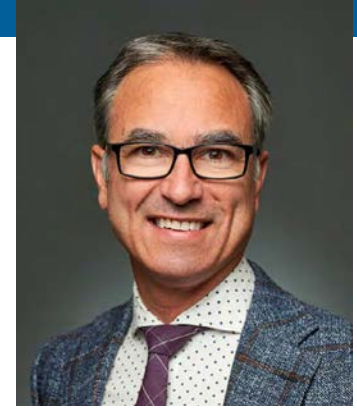


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Preparation Guidelines





CANADIAN DENTAL ASSOCIATION MESSAGE

Greetings to everyone as we hunker down in preparation for a cool and crisp prairie winter. I recently attended a wonderful Manitoba Dental Foundation (MDF) event at the WAG-Quamajuq featuring acclaimed musician historian Mr. John Einarson. John carried us all on a journey highlighting the impact of Manitoba musicians through the ages. Music is clearly a part of the cultural fabric of our province. Bravo John! Bravo MDF!

Canadian Dental Association Board

At a recent Board meeting, Dr. Joel Antel and the Board welcomed new members, Dr. Janice Stewart,

nominated by the Dental Association or Prince Edward Island (DAPEI), and Dr. Matthew Moore, nominated by the New Brunswick Dental Associations.

CDA ITRANS Celebrates 20 Years of Service for Canadian Dentists

Two decades ago, CDA launched CDA ITRANS — a groundbreaking claims service that has transformed dental practice operations across Canada. The claims service moved claims transmissions from the phone lines to the internet, continuing the transformation of dental practice operations across Canada.

Government Relations and Public Policy Work

CDA Update on the Canadian Dental Care Plan (CDCP).

Following release of the alternate pathway on July 8, there has been an increase in provider participation. As of September, 20,577 providers are participating, and 645,311 patients are receiving care, and these numbers continue to grow. A recent PULSE survey indicated that the majority of dentists plan to continue to participate in CDCP.

Key CDCP advocacy accomplishments were noted that have resulted in changes to the program to address key concerns. They include simplifying the terms and conditions providers agree to, improving what treatments will be covered for eligible patients, the ability to balance bill with CDCP coverage rates of 80-90%, a 7% increase to the 2024 CDCP fee guide, and a program funding increase from \$5 billion to \$13 billion. The government has also agreed to consult with regulators before conducting onsite verifications and confirmed that unilateral changes will not be imposed on dentists.

The National Communications and Public Relations campaign with Edelman Global Advisory (EGA) that was launched in spring 2024 has ended with its goal of improving communications to patients and raising the awareness of misconceptions about the plan. Key media relations stories and opinion editorials (op-eds) resulted from this initiative. Additional advocacy work related to the proposed capital gains tax



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Your Canadian Dental Association Board is:

- Dr. Joel Antel, President
- Dr. Bruce Ward, President-Elect
- Dr. Kirk Preston, CDA Vice-President

Board Representatives:

- Dr. Mélissa Gagnon-Grenier, Northwest Territories, Nunavut & Yukon
- Dr. Ray Grewal, British Columbia Dental Association
- Dr. Jerrold Diamond, Alberta Dental Association
- Dr. Brian Baker, College of Dental Surgeons of Saskatchewan
- Dr. Marc Mollot, Manitoba Dental Association
- Dr. Lesli Hapak, Ontario Dental Association
- Dr. Janice Stewart, DAPEI
- Dr. Stuart MacDonald, Nova Scotia Dental Association
- Dr. Jason Noel, Newfoundland & Labrador Dental Association
- Dr. Matthew Moore, New Brunswick Dental Society

legislation, student loan forgiveness, Indigenous issues and the Non-insured Health Benefits program, health human resources, plastics registry regulations, and sugar reduction (stop marketing to kids) will continue.

CDA's new Advocacy Working Group will meet with federal government officials during its "Days on the Hill Event" on October 21-22. In addition, consultations continue with senior government officials highlighting issues related de-insurance, health human resource challenges and misconceptions about the program.

CDA's new Public Policy Committee is now fully operational with the objective of providing advice to the CEO. Its first task is prioritizing and reviewing CDA's position statements and policy priorities and collaborating with Choosing Wisely Canada on a dentistry list and toolkit on antimicrobial resistance.

CDA 2024 Environmental Scan

A communications plan has been developed to support the dissemination of the 2024 CDA Environmental Scan to dentists. The intent of the plan is to share the insights of the scan and socialize the scan more broadly with Canadian dentists through both their Provincial and Territorial Dental Associations (PTDA) and CDA.

A wealth of data is contained in the scan. It is valuable for the CDA for policy development and future planning but also may be helpful for dentists seeking a source for data useful in ongoing practice planning and management.

The Canadian Dental Leaders Forum

New Terms of Reference for the Canadian Dental Leaders Forum (CDLF) were ratified. This positive change will see CDA Board members attending national leadership meetings along with the PTDA's when hosted by CDA. I had the pleasure of attending the first meeting following this updated format on October 19, 2024 along with President Dr. Daron Baxter and VP Dr. Jeff Hein, as well as our CEO Mr. Rafi Mohammed.

CDA Meetings/Joint Conventions

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

- 2025 Joint Convention with the Newfoundland & Labrador Dental Association August 27-30, 2025, St. John's, NL (Come and join me!!)
- 2026 Joint Convention with the Manitoba Dental Association, April 17-18, 2026, Winnipeg, MB
- 2027 Joint Convention with the Ontario Dental Association Annual Spring Meeting, May 10-15, 2027, Toronto, ON
- 2028 Joint Convention with the Dental Association of Prince Edward Island, August 9-12, 2028, Charlottetown, PEI


The next CDA Annual General Meeting is set for May 2, 2025 in Toronto.

In 2027, CDA will be celebrating its 125th anniversary in Ottawa.

The CDLF serves as a platform for addressing matters that are crucial to the future of the profession and the association sector that transcend the scope of any one member's mandate. These will be largely pan-Canadian in scope.

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 free to reach out to me anytime at mmollot@cda-adc.ca. 



From left: Dr. Marc Mollot; MDA Vice President Dr. Jeff Hein; MDA President Dr. Daron Baxter; and MDA CEO Mr. Rafi Mohammed during the Canadian Dental Leaders Forum Meeting, October 19.



Dr. Charlene Solomon

Prosthodontist BChD,
MScDent, MChD, FRCD (CA)

...that partial denture design can impact periodontal health?

A removable partial denture (RPD) is a simple, non-invasive, and economical treatment option for partially edentulous arches where dental implants are not indicated or not planned. As with any type of prosthesis, one treatment goal is to support and maintain optimal periodontal health. A fundamental principle for partial denture therapy is that the design must foresee the periodontal implication of the individual components.

What are the key considerations for optimal periodontal health?

Preprosthetic Periodontal Evaluation Phase:

The periodontal examination of a patient for any type of prosthetic treatment is important for the prognosis and success of treatment. This should include assessment of periodontal status, gingival biotype, functional and static occlusion and mobility of teeth. Soft tissue grafts may be needed where there is a lack of attached gingiva around abutment teeth. It is therefore key to diagnose any periodontal conditions that could either compromise fabrication of a new prosthesis or further compromise pre-existing periodontal conditions.

Dental Plaque Scores:

As with any type of prosthesis, there is a risk of increased plaque accumulation with an increased caries risk.

Plaque accumulation is higher on abutment teeth where the clasp assemblies are seated. Special hygiene techniques and tools are needed to keep plaque scores low to zero.

As regards partial denture designs, it should be simplistic and minimalistic, only covering

hard and soft tissues where needed. Minimize potential food impaction with reduced embrasure spaces between minor connectors and natural teeth. Always consider guide planes and proximal contact recontouring to minimize embrasure spaces. Keep major connector margins 5-6mm away from free gingival margins as per the selected framework design.



Effect of RPD on Tooth Mobility:

RPD's are associated with increased mobility of abutment teeth that may be due to increased biomechanical forces or increased plaque accumulation causing an inflammatory response with affecting supportive tissues. A rigid metal based partial denture that is tooth supported has a less negative impact on the abutment teeth compared to a tissue supported acrylic-based RPD.

Distal Extension (DE) RPD's:

Due to the differences in displacement characteristics between teeth and denture bearing tissues, we want to reduce any unnecessary stress on the abutment teeth which often involves the bicuspid.

The rotational movement around abutment teeth in DE cases should be

accommodated within the RPD design; if not, this can result in tooth mobility. Always use a stress breaking clasp assembly of which 3 types exist: RPI (rest, proximal plate and I-bar), RPA (rest, proximal plate and Akers clasp) and a combination wrought wire clasp assembly.



Impression Technique:

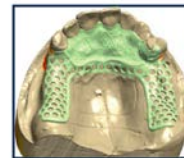
The altered cast (AC) impression technique results in less movement on the distal extension base when compared to conventional impression techniques. This is because the tissues are recorded with selective pressure similar to a functional impression and this reduces displacement of the distal denture base during function and mitigates the potential effect of a rotational movement around the distal abutment. Can a lower distal extension RPD be fabricated without an AC impression technique? Yes, it saves the clinician chair time, but why risk the implications of not doing an AC? Empirical evidence suggests that without an AC impression, relining procedures are needed sooner than anticipated. And depending on the quality and quantity of the denture bearing tissues, the Kennedy Class I or II RPD design may need more than simply a stress breaking clasp assembly.

What if the distal abutment has an existing Class I mobility:

Again, use a stress breaking clasp assembly and choose an altered cast impression technique with close post-insertion monitoring. An I-bar retainer in the RPI design or a flexible wrought wire with RPA and combination clasp assemblies are more favourable for periodontally compromised teeth.

Major Connectors and Fewer Teeth:

If only 1 bicuspid or only canines remain as abutment teeth in the maxilla: Always use full palatal coverage to reduce stress on the abutment and/or anterior teeth.



Recall Appointments:

Periodic recall appointments help identify early diagnosis of periodontal breakdown and to review and/or reinforce denture care procedures. Routine evaluation of the occlusion, clasp assembly integrity and stability of the overall prosthesis framework is key for improved long-term prosthetic and periodontal treatment success.



For more information about this topic and related courses, please visit the website or scan the QR code using your phone's camera.

**DR. ADNAN SHAH, BSc, BDS, MDS (UK), FRACDS (AUSTRALIA),
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FDSRCP (GLASGOW), FRCDC (CANADA). DIPLOMATE ABOMS.**
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DEPARTMENT HEAD, DENTAL DIAGNOSTIC AND SURGICAL SCIENCES,
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TRANSFORMING LIVES WITH TEMPOROMANDIBULAR JOINT REPLACEMENT: A CASE FOR BROADER ACCESS UNDER MANITOBA HEALTH

Introduction

Temporomandibular Joint (TMJ) disorders can severely affect a patient's quality of life, especially in advanced cases where conservative treatments fail. In this article, we present a case of a 50-year-old female patient who, after years of debilitating TMJ dysfunction and pain, underwent a total temporomandibular joint replacement. This is the first case performed of total joint replacement (TJR) of the TMJ in Manitoba. Her case highlights the transformative potential of TJR in restoring function and reducing pain, and raises the need for this procedure to be more widely accessible through Manitoba Health for those who need it.

Case Presentation

Patient Overview:

A 50-year-old female with a longstanding history of bilateral TMJ pain and dysfunction. The patient experienced progressive symptoms over the years, with conservative and prior surgical treatments providing minimal relief. Her condition culminated in excruciating pain and a severely limited mandibular range of motion.

Failed Conservative and Surgical Management:

The patient underwent multiple conservative therapies including physiotherapy, splint therapy, and medications, but saw no significant improvement. Previous surgical interventions also failed to alleviate her symptoms leading to end stage temporomandibular joint disorder, leaving her unable to perform basic functions such as eating and speaking comfortably.

Total Joint Replacement Procedure:

Given her lack of response to previous treatments, and the fact that her condition was linked to a motor vehicle accident, the Oral and Maxillofacial Surgery (OMFS) graduate program team at the University of Manitoba,

led by Professor Adnan Shah, pursued alloplastic TJR, which was fortunately covered under Manitoba Public Insurance (MPI). This procedure involved the insertion of a stock-fitted prosthetic joint, designed to replace the severely damaged bilateral TMJs.

Outcome and Impact on Quality of Life

Postoperatively, the patient's pain resolved, and her mandibular range of motion improved significantly. On six month post-surgery review her maximum mouth opening increased dramatically, enabling her to chew, speak, and perform daily functions with ease. Most importantly, the TJR restored her overall quality of life, allowing her to return to a pain-free, functional lifestyle.

Discussion

The Value of Alloplastic TMJ Replacement:

TJR is a well-established procedure for managing end-stage TMJ disease, with evidence supporting its effectiveness in reducing pain, improving mandibular function, and enhancing patients' quality of life. The technique has evolved significantly, with modern alloplastic materials offering long-term durability and safety. Studies have shown that TMJ replacements can have survival rates exceeding 90% over 10 years, and patient satisfaction rates of over 80%.

Current Barriers to Access in Manitoba:

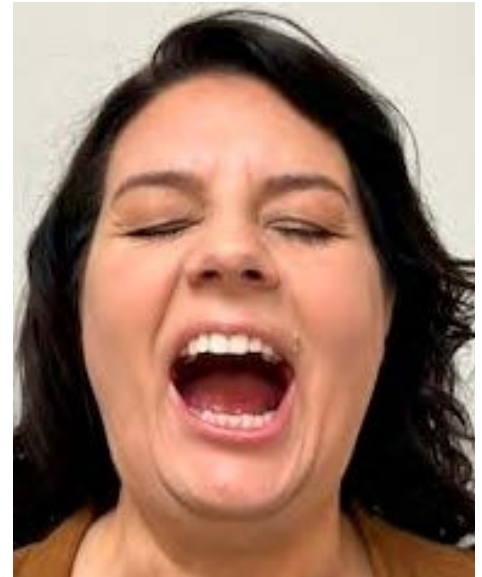
While this patient was fortunate enough to have her TJR covered by Manitoba Public Insurance (MPI) due to the trauma from a car accident, many other patients with similar conditions are left without access to this life-changing surgery. The lack of coverage under Manitoba Health for non-trauma-related cases forces us to refer patients to out-of-province hospitals, a process that is paradoxically supported by Manitoba Health. This creates unnecessary delays and burdens for patients, despite the fact that the surgery could be performed locally with proper funding.



Restricted mouth opening with excruciating pain



Pre-surgery mandibular range of motion



Post-surgery six months mandibular range of motion



Intra-operative view of TJR in-situ



Intra-oral occlusion six month post-surgery

Call to Action

We strongly advocate for Manitoba Health to reconsider its position on TJR coverage. The benefits of TJR in improving a patient's quality of life, as demonstrated by our patient's case, are comparable to, if not greater than, other procedures such as hip or knee replacements, which are routinely covered under the provincial healthcare system. TJR not only relieves debilitating pain but also restores essential functions like speaking and eating—fundamental aspects of daily living. Expanding coverage to include medically necessary TJRs would allow more patients to access this crucial surgery without needing to travel out of province. With the growing demand for TJR procedures, both locally and internationally, Manitoba has the opportunity to lead in improving patient care for TMJ disorders.

Conclusion

This case underscores the transformative potential of TJR for patients with end-stage TMJ disease. By improving access to this procedure, Manitoba can ensure that more patients have the opportunity to regain pain-free function and improve their overall quality of life. It will also ensure training in this essential sub-specialty of the future Oral and Maxillofacial Surgeons in the province. It is time to remove the barriers preventing patients from accessing the care they need close to home. 🌱

References

- Mercuri, L. G. (2024). Alloplastic temporomandibular joint replacement – past, present, and future: “Learn from the past, prepare for the future, live in the present.”
- Thomas S. Monson. *British Journal of Oral & Maxillofacial Surgery*, 62(1), 91–96. <https://doi.org/10.1016/j.bjoms.2023.10.014>



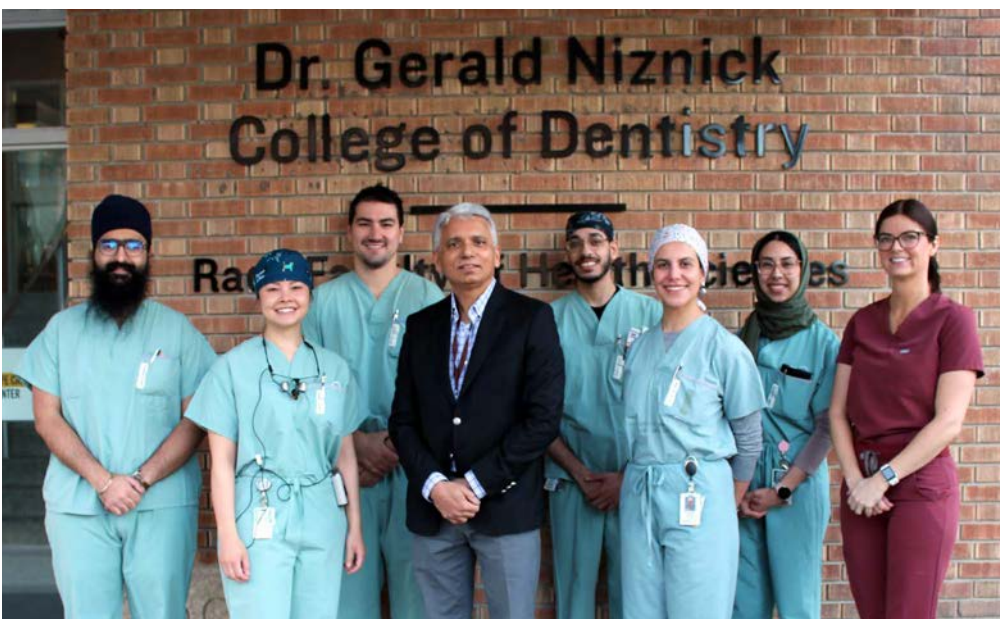
Lateral Cephalogram with the TJR



PA Mandible view



Six month post-surgery panoramic x-ray with bilateral TJR in place



The Surgical Team:

**OMFS Residency Program
University of Manitoba**

(from left)

Dr. Ramneek Grover

Dr. Meagan Brown

Dr. Brayden Patterson

Dr. Adnan Shah

Dr. Mina Hanna

Dr. Asmaa Rachid

Dr. Saba Raeisi

RDAs Kelsey-Lane Morissette



BRANDON MOTHER GETS HER LIFE BACK AFTER TJR SURGERY

Since 2013, Kindra Finley lived with temporomandibular disorder (TMD) pain. She finally found relief over eleven years later with the help of a Manitoba Oral and Maxillofacial Surgeon and educator. It began with a car accident that resulted in her vehicle rolling over in January 2013. At first, she thought she came out relatively unscathed with minor bumps, bruises and a chipped tooth.

Finley shares, “I was a little banged up but okay overall. I was thankful. I went to a family dentist to get my chipped tooth looked at, but I was unable to open my mouth. He gave me a PAN (panoramic dental x-ray). When he reviewed the scans, he refused to fix the tooth and said that there was a much bigger problem that needed to be addressed regarding the TMJ (temporomandibular joint). Thank goodness he was wise and professional enough to investigate the whole mouth before proceeding to fix my chipped tooth.”



Finley, six months post-op

After a follow up with a Brandon-area oral surgeon, she was placed on a soft food diet, pain medication and further monitoring. When the pain persisted and with her inability to fully open her mouth, Finley was scheduled to have her first of many oral surgeries a little over a year after her injury. During surgery, they discovered that the joint and cartilage were not salvageable due to the severity of the damage from the accident. Her jaw muscles also atrophied after thirteen months of limited mobility in the mouth. The best they could do was to clean up the site and prescribe steroid injections until they could find a treatment that could help.

Over the next few years, Dr. Adnan Shah researched innovative methods to finally bring some relief to Finley. She was still living with pain, no longer able to eat most foods, stopped driving and even activities that caused jarring motions of the jaw joint, such as jogging were too excruciating to perform. It was getting progressively difficult to talk. The joint was continuing to deteriorate. They needed a more aggressive approach, and Finley trusted Dr. Shah to try any available treatment to give her some relief. After numerous surgeries that involved taking tissue from her abdomen to autotransplant to the TMJ failed to fix her issues, Shah put on his scholarly hat. He dug deep to research and reviewed international cases.

“I was hopeful and appreciated Dr. Shah’s persistence in helping me to restore some normalcy into my life. When they used tissue first from the left side and then the right side of my

abdomen to try to rebuild the joint, I was cautiously optimistic. Unfortunately, the procedures did not work,” says Finley.

By 2018, her “new normal” was affecting Finley’s quality of life and mental health. While Dr. Shah continued looking for ways to bring Total Joint Replacement (TJR) to Manitoba, Finley’s movement became increasingly restrictive. Her neck and head would seize up, sleeping was uncomfortable, talking was painful, and her diet consisted mainly of soups and yogurts. Even the involuntary reflex of yawning was excruciating.

Finley recalls this period as “rough”. “I never wanted to be a burden to family and friends. They have been so supportive, but I could not participate in activities with them. They would try always try to accommodate my soft foods diet when going out to eat. My kids even felt guilty eating pizza in front of me. They would want to stay home with me when I was in too much pain to go out. I did not want that for them and insisted they live their lives, enjoy activities and family gatherings. The social isolation took a toll and became more pronounced as I avoided going out to run errands for the fear of running into acquaintances. I worked in customer service, so I knew a lot of people. At that point, I could only open my mouth as wide as 15 millimeters and could not talk...five minutes maximum before it became too difficult. I could not move my head and neck and just lived in chronic pain. My injury was mostly invisible, and people could not understand.”

Shah was preparing to bring the TJR surgery and a qualified team to Manitoba to treat Finley. This surgery would be a first in the province. However, that is where the headache extended to dealing with coverage of the medical procedure. If Finley's recollections are correct, "coverage was denied as our public health care system did not consider this a joint replacement but a voluntary dental procedure.

Notably, Johns Hopkins Medical Center defines temporomandibular joints as "two joints that connect your lower jaw to your skull."

Because it was Finley's 2013 vehicle accident that caused the joint damage, Dr. Shah helped Finley advocate with our provincial public insurer with much debate between the injured and the insurer. With gratitude in her voice, Finley says, "they covered part of the

surgery, but the surgery could not have been done without in-kind services provided by Dr. Shah and the medical and dental team he assembled. Had this issue not started with my accident, then I could not have had this surgery. He helped me advocate for my care."

TMD can develop due to various circumstances unrelated to vehicular accidents, so this option is not available to most. TMD can also contribute to a host of other medical issues and a steep decline in one's mental health. With that, Finley wants to speak up.

Kindra Finley: mom, accident survivor, patient and now advocate. "It took six years from the identification of a possible solution to my years of physical and emotional pain to finally get my joint replaced. I am considered "lucky" because it was caused by a car accident. I had an alternate route to pursue

coverage for this treatment. Sadly, there is a barrier to access for most. I am here and want to help create access to this surgery that has improved my overall health. I have my life back, and others with severe TMD should have the chance to reclaim their lives."

Eight months after being the first patient to receive TJR in Manitoba, what does having one's life back mean to Kindra Finley? "Immediately after surgery, recovery was ten weeks of my jaw being wired shut and prescriptions for a lot of pain medications. Today, I am no longer taking pain medication, and I can open my mouth to 35-38 millimeters. My sleep is amazing, I drive, I can go running if I wanted to, and I am regaining my confidence. My kids have their mom back. We can eat pizza together again. We even have a snowboarding trip booked. I feel great." 🌱



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MCINTYRE

Ross McIntyre served the Manitoba Dental Association (MDA) for 42 years. He led the Association with his positive and cheerful demeanor, always with a smile, and his “Never Better!” attitude. Ross worked with many MDA Presidents and they share their fondest memories of Ross as the Executive Director of the MDA, and, more importantly, as their friend.

Dr. Robert Baker, 1981-1982

Ross made the task for each President of the MDA a positive, memorable experience as he was always prepared, and made sure each President felt they were in charge.

Ross, as Executive Director, worked hard to keep the MDA relevant by highlighting Manitoba’s care of its patients and dentists. His positive attitude everyday to everyone will be missed. Thank you Ross for your friendship.

Dr. Gene Solmundson, 1982-1983

I served as President of the MDA from 1982-1983 and had the immense pleasure of working with Ross in his role of Executive Director of the MDA. With Ross’ 48 years of service of the MDA, he was a pillar of the organization and invaluable to each of us as dental presidents, who served much shorter terms. Ross was an exceptional resource on virtually everything! He was a logistical wizard, and knew how to get things done. He was professional, organized, efficient, punctual and an integral member of all important programs and projects. His financial background was a huge asset to the skillset he brought forth, but his rich experience, attitude, dedication and interpersonal skills is what truly set him apart. He was always available for me as president, or any of our executive team, to support and advise.

An intangible that was truly invaluable to each of us, was Ross’ mental roll-a-dex...Ross always knew who to request a meeting with, in the government or otherwise, to move projects and initiatives forward. He was a perfect blend of fun and serious, he was tough when he had to be and he was always fair. If he was sharing bad news, he’d deliver it with a sincerity and smile that made it not only more palatable, but often seeming much better than it actually was, a true Ross gift! Ross brought his

“never better” attitude to work and his dedication was second to none. I didn’t know him to ever take a sick day and I bet you can count on one hand his total missed days over decades of work.

One of the projects that was most meaningful to us in our joint collaboration was developing and advocating for the provincial Children’s program, which eventually secured government funding. Collaborating with Ross professionally was a unique circumstance and an experience that I will always cherish. How many have an opportunity to contribute to the advancement and betterment of dentistry, accomplish meaningful work and collaborate professionally alongside their best friend and brother-in-law? We did. What a privilege and unique opportunity... one I will carry with me.

Dr. John Dillon, 1983-1984

Ross was a unique individual, who had the ability to work with all the many and different Presidents of the MDA over his years as Executive Director. He always made you feel he was glad to see you and that he valued your opinion. He would always look you in the eye and give you his full attention.

In a job where the road can be rocky at times, he had the ability to remain on good terms with everyone he worked with. I truly never heard anybody say anything bad about him.

In my year as President I got the chance to contrast his people skills with his counterparts in other provinces. Some, by their attitude and approach, would let you know that they were the real head of their Association and the President for that year was tolerated. Others had their group of favourites and “ruled” through them. Ross was never like that, he was a true professional and, in my year, made me look better and more competent than I had a right to.

I will miss him and I’m glad I knew him and could call him a friend.

Dr. Leslie S. Allen, 1985-1986

Ross McIntyre is my friend. We met when we were in High School. We were Teammates of the University of Manitoba Bison’s Football Team in their first year. Recently Ross had organized a

group of us to celebrate the 60th year of the original Bisons. As usual, when Ross undertook a task you knew it would be and was an outstanding event.

In 1968, I graduated from Dental School and joined my father, Dr. Harvey Allen, and Dr. Sam Borden in their Practice. A few days before that my father, then President of the MDA, arrived home for dinner later than he normally would. He then began to tell us how he had just interviewed a young man who would fill the position of the first Executive Director of the MDA. That young man was Ross McIntyre. The point that helps distinguish Ross McIntyre is that Ross had not mentioned my name or his brother-in-law Gene Solmundson's name when applying for the position. The fact that Ross chose to be evaluated on his own merits described the makeup of this young man. From there, he led the Association to be the wonderful organization that it is today.

Ross' desire to represent the MDA in the best possible light by his undetering care and concern for both the dentists in Manitoba and the Association representing them was always evident and of utmost importance to him. His most endearing traits and characteristics of honesty, warmth, caring, and, of course, his sense of humor made him the very special person he was.

He made everyone feel they were the only person in the room when he spoke with you, and always respectful of what you had to say as important. His actions describe my friend.

Dr. Orville M. Heschuk, 1986-1987

The MDA struck gold when Ross McIntyre decided to take on the challenge of being secretary treasurer of the MDA in 1968. Serving the association for 42 years has to be an excellent testament, to the quality and proficiency of his work. His unflappable and unobtrusive demeanor left his staff and board members full of confidence that his choices, solutions, and expertise were the answers they were seeking on many occasions. I was very appreciative and a benefactor of all his counsel and mentoring during my term as president of the MDA.

After 42 years at the helm, I would say, there was little doubt that things were "never better" with the state of dentistry in the role played by the MDA, and I dare say Ross may have said that himself, and if he did it was one time there is no ambiguity he spoke the truth.

Dr. Kenneth R. Skinner, 1987-1988

I first met Ross over 65 years ago when his family moved to Winnipeg. They were neighbours across our back lane. As a friend Ross was kind, attentive and supportive.

In the professional part of our relationship he was terrific, always a step ahead on every issue. He provided strategies, facts and in the moment help and again support. No suggestion was too much work or not worth considering. The number of evening and weekend meetings and travel on behalf of the MDA for all those years must have been difficult for Ross and his family.

Overall his greatest gift was his positive attitude. From the "never better" response greeting to the warm goodbye, he lifted up the person with whom he was dealing. Thank you Ross for all of your many contributions.

Dr. Garry Austman, 1988-1989

My favorite memories of Ross happened in the years I was on the Board, eventually on the Executive, including the presidency, and the many many meetings we attended together. Despite having to make weighty decisions, and solve innumerable problems, Ross' welcoming smile and positive approach made the round

trip from Steinbach something I looked forward to, instead of something to dread. Somehow, he had a knack of being able to handle the various personalities of the dentists attending, and bring issues into focus, showing leadership while making the others feel that they were doing the leading! When we went to national meetings it was evident that Ross had the respect of his counterparts and dentists from other provinces as well. Looking back, I can not think of one time that Ross wasn't "himself". Always organized, always cheerful, always respectful, always wise, and of course, "Never better".

Dr. Martin G. Dveris, 1989-1990

He was an extraordinary person whose warmth, kindness, intelligence and enthusiasm was shared with everyone he met. He taught me so much about organized dentistry and was a fabulous resource guiding me through the Office of President, as he did for all of us with his incredible knowledge and sense of humour.

Ross, rest in peace, thank you for the privilege of sharing your light with me. You are in a place that will always be "never better!"

Dr. Marshall D. Peikoff, 1990-1991

Ross and I go way back to our days at U of M playing 6 man football followed by the Manitoba Bisons in 1962-63. Ross was well known for his upbeat personality – he always responded with his standard "never better".

Working with Ross was a pleasure. Meetings were fun but always well organized and controlled. His impeccable morality kept the MDA at the pinnacle of respectability both locally and across Canada.

It was both an honour and a pleasure to have worked with Ross.

Dr. Heinz Scherle, 1992-1993

I was fortunate to be able to work with Ross while serving on the Board and various committees of the MDA. It did not take long to see that Ross was very dedicated to the profession and loved his work. In dealing with any issues that arose, he quickly was able to get to the important parts, and his guidance and views were well thought out. He was always a positive and upbeat individual, as he always said he was "never better". Spending time and working with Ross was a pleasure and he made people around him better. He helped me a great deal in my involvement with organized dentistry and other dental groups. He will not be forgotten.

Dr. Jan S. Brown, 1993-1994

When I became president of the MDA, Ross and I had been good friends for 25 years. My appreciation for his abilities rose during my time on the MDA Board and as president. Ross was very "even keeled" and had a total grasp of the present state of dentistry, provincially and nationally, as well as an appreciation of the future direction of the profession. He was an exceptional advisor and always encouraged full discussion of the issues by all Board members. During my active years in dentistry, he mentored and to a degree orchestrated the ascension of two MDA presidents to become CDA presidents. He was respected by his peers and all those he met.

Dr. Barry M. Rayter, 1996-1997

I met Ross 60 years ago at a wedding. We started a conversation that evening and our friendship was born. For 60 remarkable years, Ross embodied kindness and positivity, lighting up the lives of everyone around him. Our weekly conversations, where we shared everything from dreams to daily challenges, were part my

regular routine. He had an extraordinary ability to uplift spirits and inspire joy, always finding the silver lining in every situation.

His birthstone, the opal, reflects the vibrant and spirited nature he carried within him. Like the gem, he was unique and brilliant, shining brightly even in difficult times. It's bittersweet that he departed this world in the same month he was born, but his legacy of warmth and compassion will forever reside in my heart.

I'll cherish every laugh, every piece of advice, and every memory we created together. His kindness was rare, and his positive outlook on life was contagious.

Thank you, dear friend, for a lifetime of beautiful moments. You will be missed immensely.

Dr. Nicholas C. Fedorowich , 1997-1998

While I have stated that I have had many mentors, there are only a few that come to mind immediately. Ross, of course is one of them. My guidance in organized dentistry started with the Hospital Dentistry Committee, just prior to Lee McFadden's and my meeting with Manitoba Health. His comments... on reflection, were not instruction...And that was his sauce! That guidance continued through my time...there was never an ultimatum or even firm direction, rather a statement or question to ponder... though there was one time, near the end of my term, that Ross made the comment, "You could always tell that a President's term was nearing it's end, they were becoming opinionated!". A touch of sarcasm perhaps, or frustration...or maybe just honesty. From that, I now perceive the challenges of an intelligent, astute, knowledgeable, and experienced leader, keen in the growth of our profession, that had no franchise.

Dr. Murray White, 1998-1999

My wife Coral and I were deeply saddened when we heard of Ross' passing and extend our condolences to Anne and his family. He truly was one of a kind.

I always will appreciate his mentorship during my time as President and in general. He was always there to make the Presidents of the MDA look good whether it was on the local or national stage. He was the voice of reason and is pretty much single handedly reasonable for the modern state of organized dentistry in Manitoba. Which continues to serve the dentists of Manitoba so well.

He was a true Winnipegger and Manitoban who embraced each of the seasons to the fullest. He was known for his commitment to our annual MDA Convention and it being held in January. He reasoned that this was a good time to hold the convention because we had a captive audience in the winter.

But what I think might truly show the essence of the man, was that on occasion I would see Ross on a local outdoor rink playing a little pick-up hockey with his son Tim and grandson Reid. It showed just how much he enjoyed life.

Thanks for the memories.

Dr. Philip Poon, 1999-2000

I was fortunate to have known and worked with Ross for many years. He was a wonderful mentor, always providing sage advice with positivity. Ross made our many meetings fun and enjoyable. His impact on dentistry in Manitoba was enormous, from advocating for legislation allowing dentists to incorporate, to preventing managed care. I also witnessed first hand how Ross was respected nationally. I will miss his counsel and friendship greatly.

Dr. James Bonar, 2002-2003

Ross was calm and steady, always providing sage advice to his Presidents to allow them to make sound decisions. Ross said to me, "You've had a great year as President, if it involved no surprises or controversy". Ross' mentorship and guidance allowed Presidents and the MDA Board to function at a high level with ethics being paramount. His common refrain "never better" was an attitude that those around him were able to absorb and ultimately achieve their best outcomes. We were all "better" for having known him.

Dr. Leon Stein, 2003-2004

Working with Ross McIntyre was an absolute pleasure for me while serving on the MDA. He was always available, polite and extremely organized. His positivity and vision was infectious. Nobody worked harder than Ross and he would always make time for an early morning or late evening meeting as needed. During meetings a topic could be discussed at great length going back and forth with varying opinions and Ross would usually sum it up in one or two sentences and with a voice of reason before it went into the minutes. Ross was logical and concise and no one was better for dentistry in Manitoba.

One comment I will always remember by Ross was the day before I was going to become President he told me I would do well and he would make sure I would not falter. Working with Ross was always comfortable and he would always look for solutions and avoid problems. Another moment I will never forget is when Ross was in the hospital a number of years ago I sent him something to cheer him up and he phoned me at the office the next morning to thank me and how much he appreciated the gift and only sounding as always never better.

Ross had one of the most memorable influences on me of anyone I have ever met in dentistry. I learned from him by how he related to our members and how he would listen and take the time to interact.

I will always remember Ross professionally and as a friend and he should never be forgotten.

Dr. Peter Doig, 2004-2005

It is with heartfelt sadness that I learned of the passing of Ross.

I will always be grateful to Ross for identifying a young dentist from Dauphin as a potential leader. Ross helped me overcome my initial reluctance to get involved in organized dentistry and shepherded me onto the MDA Board. From that point on, he was my invaluable mentor and advisor, as I rose through organized dentistry becoming the President of the MDA and, finally, the CDA.

Ross was an intelligent and skillful manager. His command of the operations of the MDA, his development of leaders and the support he gave them, resulted in Manitoba having far more influence on the national scene that its numbers would justify.

I will always remember his "never better" salutation and I know the world and the dental community is a better place because Ross was in it.

Dr. Leland McFadden, 2005-2006

I remember at the first of my weekly President's meetings with Ross being surprised that rather than him leading and directing the meeting, as the Executive Director, he would take direction from me as the President. A scary proposition given his knowledge and experience. Of course, as the President I never

had to worry as I always knew he wouldn't let me stray where we shouldn't go.

I recall at my first national meeting we had an issue that we felt needed to be addressed. Because of other commitments Ross was going to be late in arriving at the meeting. By the time he had arrived I was starting to feel a bit intimidated to stand up and present Manitoba's concern and wondered if I should just take a pass. Ross just said no, we need to let everyone know Manitoba's position. And, as everyone knows, because of Ross' stature in organized dentistry, the opinion of the MDA always mattered.

Finally, Ross was awarded, I believe by the PEI Dental Association, an honorary dentist. When he was then honored by the Royal College of Dentists of Canada we hoped that when Ross practiced dentistry, he would do so as a specialist.

Dr. Lori Stephen-James, 2006-2007

Working with Ross was a wonderful experience. At national meetings, it was evident he was respected and well-liked. He was knowledgeable and experienced in all aspects of organized dentistry. When Ross spoke, everyone listened.

He greeted everyone at the MDA office with a smile and a warm greeting. Ross ensured members knew they were an integral part of the dental community. During my presidency, he ensured I was informed and capable, quoting, "every President seems to be the right person for the time they are in office". Truly, Ross was the guiding force and mentor. However, what gained the most of my admiration, was his love for his family. Rest well.

Dr. Marcel Van Woensel, 2007-2008

Ross McIntyre was fun. It was one of his gifts to the world. While I believe it was his natural state of being, he understood it as the most effective way to build a community, move an issue and motivate people.

My favourite conversations with Ross were about family. He would glow when talking about past adventures with his kids and the mischief he was plotting with his grandchildren. His love and respect for Anne was clear even when talking about an otherwise mundane activity.

He was unique among the leaders that I have known. While few would accuse me of being fun, I try to incorporate his positivity and joy into my everyday life. Never better, indeed. Rest in peace.

Dr. Patricia Kmet, 2008-2009

Ross McIntyre touched hundreds of lives with his many years heading the MDA and each of us has our own memory of him. I first met Ross as a new 1987 graduate. I was looking for employment and called the MDA asked to speak with the executive director, "Mr. McIntyre". He indicated to me his name was Ross and then he very gently steered me away from a position that he thought would not be a good fit for me! He was right.

In 2008-2009 I had the good fortune to see Ross in action as I began my MDA presidency. My line to Ross throughout the year was, "Ross, I can't do this" to which he replied, "Yes, you can Pat" and I did!

During my term I observed Ross to be a skilled statesman, navigator and a diplomatic negotiator on behalf of all Manitoba's dental concerns. He completed his tasks respectfully and tactfully along with his "never better" attitude! At the MDA he created a culture of inclusivity, positivity and camaraderie sprinkled with a little bit of humour. I will always be grateful to him.

After my term and years later whenever I bumped into Ross he always had a kind word to say and with that "twinkle" in his eye he would remind me that he knew, "I could do it!"

My condolences go out to Anne and his family.

Dr. Alexander Mutchmor, 2009-2010

It was immediately apparent to anyone fortunate enough to work with Ross on the MDA Board of Directors, or on any of its many committees, that he embodied all the qualities that made him an exceptional CEO. His dedication and commitment were unwavering, and he had a unique ability to keep a group focused and on track with their responsibilities and projects. I can't imagine how much more challenging my term as President of the MDA would have been without his guidance, positive attitude, and sense of humor.

Two particular memories stand out to me from my times spent with Ross outside of MDA committees and activities. The first takes me back to the spring of 1983. I had just graduated from the University of Manitoba's Faculty of Dentistry, but unlike most of my classmates, I had not yet secured a position to begin my dental career. Ross reached out to me and spent an entire day driving me around southeastern Manitoba, introducing me to rural practice opportunities. While I ultimately found a position in northwestern Ontario, I'll never forget his generosity in offering his time and assistance, unsolicited and without hesitation.

The second memory is a special one: an afternoon spent fishing on Lake of the Woods with Ross and his grandson, Connor. It was a joy to witness the bond between them and to see how proud Ross was of his family. The happiness and pride he had for them were undeniable.

Ross was an exceptional human being, and we are all the richer for having known him.

Dr. Elizabeth Dunsmore, 2010-2011

Ross welcomed me to the MDA board in 2004 and patiently orientated me to all aspects of the Board procedures and acronyms. He was very generous and kind as he mentored me over the next six years in the workings of organized dentistry. Ross operated with a calm demeanour, mixed with his humour, and his positive "never better" attitude. He had the ability to work well with many different personalities and encouraged free and open discussions so that all issues were fully considered.

Ross worked hard in the best interests of the profession of dentistry both provincially and nationally. At the national level, it was very obvious that he had the respect of the staff members of the other Provincial Associations and Colleges and that they valued his opinion. He was the affable senior statesman. I have the distinction to be the last MDA president to have served with Ross. (I don't think it was working with me that led to his decision to retire???)

I know that Anne & his family were very important to him & his desire to have more time to spend with them was a big factor in his decision to retire. It was my privilege to dedicate my President's Ball to Ross and honour the 42 years that this incredible man served the dental profession in Manitoba and nationally. 🌱

DR. KRISTIN YONT, DMD
BENSON HENRY INSTITUTE
SMART CERTIFIED HEALTHCARE PRACTITIONER
MIND BODY TEACHER



MINDFULNESS, COMPASSION AND SELF-COMPASSION A SECRET WEAPON FOR STRESS MANAGEMENT IN DENTISTRY

If you think that this article is going to eliminate all your stressors in the dental office, you should turn the page. Trust me, even if I could transport you to a quiet tropic island with a tiki bar it would eventually have its fair share of stressors like...my glass is empty, I am getting hungry, I do not have ANY cell service to scroll through social media (stressor!), the sun is going down, the bugs are coming out, and I am getting cold. See! Stress is a part of life and honestly moderate intermittent stressors are actually good for us as they enhance our resilience, build courage, and foster growth. There are many ways to metabolize stress more effectively as I have discussed in past articles, but this discussion introduces a few more simple skills to, connect to Self and others, build resilience, and live from a happier and healthier place.

One of the ways that we can mitigate the effects of stress as dentists is through practicing **mindfulness, compassion and self-compassion**.

Mindfulness is the ability to pay attention to the present moment with curiosity and openness, without being distracted by thoughts, emotions or judgments.

Compassion is the feeling of empathy and kindness for others who are suffering or in need, and the motivation to help them or relieve their pain.

Self-compassion is the extension of compassion and kindness to oneself to relieve our own suffering, especially when facing difficulties, failures or shortcomings.

We gravitate toward other people's kindness, and when we let ourselves, we can instinctively respond to others' needs with compassion. Knowing this we might assume that self-compassion – being caring and kind towards ourselves – must be as natural as breathing.¹ Unfortunately, this is not the case in our highly competitive world where so many strive to be superior or highly ranked, leading to sense of disconnection, isolation, separation and a lack of fulfillment, because we sharply evaluate ourselves according to our perceived worldly successes.

Contemporary culture makes it hard for many of us to have compassion for ourselves, which is showing up through an epidemic of anxiety, depression, burnout, relationship troubles,

lack of motivation, and persistent aggression and criticism towards others. For those of you with an alternative mindset that believe compassion and self-compassion is too tender, soft and weak, it is time to get with the program and see what science is actually telling us about its fierce courage and wisdom.

When we lack self-compassion, we are less self-accepting, less self-tolerant, more judgemental, and less kind to ourselves. It turns out that judging ourselves harshly, feeling ashamed, and trying to hide our imperfections is really stressful¹, because the Self identifies this as threatening and launches an inner attack that engages our stress response!² And we now know that stress is an inflammatory disease that leads to hundreds of diseases reducing our health span.³

Compassion and self-compassion are not the same as pity, sympathy or self-indulgence. Pity is a feeling of sorrow or sadness for someone else's misfortune, but it often involves a sense of distance or superiority. Sympathy is a feeling of concern or understanding for someone else's situation, but it may not involve a desire to help or a recognition of common humanity. Self-indulgence is a tendency to give in to one's own desires or impulses, without considering the consequences or the needs of others, like calling in sick for work to go skiing because you think you need a self-care day! **Beware:** there are many advertising campaigns out there from companies portraying their products as self-care initiatives when they are really unhealthy indulgences. Drinking 60 grams of sugar in one sitting is not self-care. This drives me bananas!!!

Compassion and self-compassion are more than just feelings; they are also actions. They involve acknowledging one's own and others' suffering, offering support and comfort, and taking steps to alleviate or prevent further harm. Compassion and self-compassion can help us cope with stress by reducing negative emotions, enhancing positive emotions, increasing resilience and well-being, and improving relationships.

Some of the benefits of mindfulness, compassion and self-compassion for dentists are:

- They can help us deal with patient complaints in a constructive and empathetic way, without taking them personally or

becoming defensive. Mindfulness allows us to apply our minds appropriately to stressful situations allowing us to respond rather than to react habitually.

- They can help us cope with staff shortages and work overload, by prioritizing tasks, delegating responsibilities, and asking for help when needed, or creating a better culture within the dental office via top-down leadership.
- They can help us manage our finances and business operations, by setting realistic goals, planning ahead, and seeking professional advice when necessary.
- They can help us lead and collaborate with our team members and colleagues, by fostering trust, respect, and cooperation, and resolving conflicts peacefully.
- They can help us prevent and recover from work burnout, by balancing our personal and professional lives, taking care of our physical and mental health, and engaging in self-care activities that nourish our body and soul.

To cultivate mindfulness, compassion and self-compassion, we can practice some simple exercises, such as:

- Breathing deeply and mindfully, focusing on the sensations of the breath in the body, and letting go of any thoughts or worries.
- Doing a loving-kindness meditation, in which we repeat positive phrases for ourselves and others, such as “May I be happy, healthy, and peaceful” or “May you be free from suffering and pain”. For those of you who think that I have gone off the deep end or that I live on the dark side of the lunatic fringe, I challenge you to watch the Ted Talk that was recording in Vancouver from Dan Harris called: *“The Benefits of Not Being a Jerk to Yourself”*.
- Writing a compassionate letter to ourselves, in which we express kindness, understanding, and encouragement for our challenges and struggles, and remind ourselves of our strengths and values. No, I have not lost my mind here – it works.
- Practicing gratitude, by noticing and appreciating the good things in our lives, such as our family, friends, patients, achievements, and opportunities.
- Performing acts of kindness, by doing something nice or helpful for someone else, such as giving a compliment, sending a card, or making a donation.

Mindfulness, compassion, and self-compassion have been transformative for me, as they have helped me cope with the challenges and stressors of being a dentist, a business owner, and a human being. They have also enabled me to feel happier, connect more deeply with my patients, my staff, my colleagues, and myself, and to create a positive and supportive work environment. I am passionate about sharing these skills and practices with others, especially dental professionals, who often face high levels of burnout, anxiety, and dissatisfaction. 🙏

¹ Jinpa T. *A Fearless Heart* 2015

² Neff K. *Fierce Self-Compassion* 2021

³ Fricchione G.L., Ivkovic A., Yeung, A.S. *The Science of Stress: Living Under Pressure* 2016

About Dr. Kristin Yont

In addition to co-owning her practice in downtown Calgary, Dr. Kristin Yont, DMD, has worked with the Calgary Flames NHL team for 26 years and is currently the lead dentist within the medical team. She is also very experienced in Forensic dentistry.

Dr. Yont is one of only three practitioners in Canada who is accredited to teach the SMART Program from the Benson Henry Institute for Mind Body Medicine at Massachusetts General Hospital. The Stress Management and Resiliency Training Program is designed to help participants regain control and build resilience through a variety of mind body principles and self-care interventions, leading to reduced medical symptoms and vulnerability to disease and to enhanced wellness and quality of life.

Dr. Yont is an avid speaker and runs workshops, retreats, and programs for dental professionals. She also works with universities, healthcare associations, corporations, and business leaders to implement wellness initiatives for their organizations. She has recently completed the Compassion Cultivation Training from Stanford University and is now enrolled in an Inner MBA program that focuses on building consciousness leadership.

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D.M.D.



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HEART OF GOLD: THE IMPACT OF MANITOBA MUSICIANS

Our Manitoba Dental Foundation (MDF) celebrated a marvellous fundraising event entitled “Heart of Gold: The Impact of Manitoba Musicians” featuring internationally acclaimed music historian, author, educator and curator John Einarson at the Winnipeg Art Gallery (WAG)-Qaumajug on Nov. 15.

The evening began at 7 pm, attendees were greeted with delicious appetizers and

two complimentary glasses of wine in the main hall of the gallery. It was a fabulous opportunity to socialize and renew and establish new acquaintances in casual and comfortable surroundings.

John began his incredibly informative, knowledgeable and passionate presentation in the theatre at 8:30. The depth and breadth of his intimate knowledge and anecdotes about a broad spectrum of Manitoba musicians current and historical who represented multiple genres, languages and communities was truly inspiring. John illustrated through music clips and documentation the immense impact of Manitoba musicians on international music was highly disproportionate to our population.

The audience was enamoured with his extensive presentation that included a Q&A session. Those in attendance returned to the main hall for refreshments and a delightful, delicious array of desserts. The evening ended around 11pm.

The spectacular array of appetizers and desserts were prepared and served by WOW Hospitality. The WAG-Qaumajug staff were outstanding in the setup of the room and the AV requirements.

Sincere appreciation to Scotiabank, the main sponsor of the evening. We are grateful to both Henry Schein and LS Properties also generous sponsors of this event. Thank you to McNaught Cadillac and Andrew Peller Limited for their continued support of our MDF. 🍷



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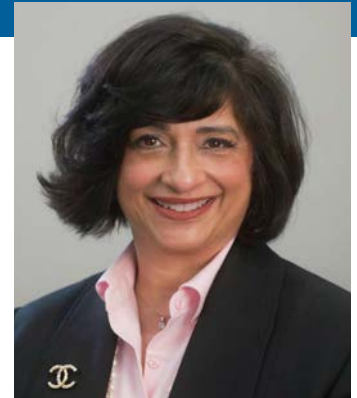
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JACKIE JOACHIM
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CREATING A SUCCESSFUL STRATEGIC PLAN

It is that time again when everyone starts talking about planning for a new year. As much as it may seem overdone, it is a necessary evil. So, the big question - do you have a plan laid out for the new year? Do you know your priorities and goals?

If your plan is practice growth, scaling in 2025 will require a strategic approach, combining preparation, execution and follow-through. Owners of a practice, or even if you are an associate planning for ownership, are leaders. Good leaders prepare for annual, strategic planning and that success hinges on both clarity of vision and disciplined execution.

Strategic planning is often thought of as a single activity, but it should be viewed as an ongoing process. Even though it may change throughout the year, it is important to give yourself a starting point to at least start the year on the right foot. After all, the strategic plan is a representation of

your vision intended to create and drive positive change and transformation.

So where does one begin? Best place to start this exercise is by assessing the current year. Review key stats like the number of new patients, production versus collections, production per operatory, production per day. Look at data driven analytics such as per cent of hygiene, average fee per patient, expenses as a percentage of production. Determine if and how your current results are linked to past investments and how your strategic decisions are creating a return on investment (ROI). Review the contributions of yourself and every team member to the success of the practice. Is everyone working towards the expected goals of the practice? Does everyone know what is expected of them? Most importantly, does everyone, including the owner, show up giving their best?

Once this inventory has been taken, next key step is to consider external factors. This is something often overlooked by owners because the focus is usually on getting patients booked and maintaining production at a certain level. Using external data to anticipate potential disruptions to your day to day, such



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as economic shifts, technological advancements, and policy adaptations helps you prepare for uncertainty. Covid certainly taught all of us the importance of developing contingency plans to allow one to pivot when necessary. The key to a good plan is to consider your long-term vision and set goals that will guide your actions. But be careful, choose no more five goals to focus on. The last thing you want to do is to overwhelm yourself and set your team up for stress or worse, failure.

Now that I have mentioned your team, please collaborate with them. Encourage members to contribute ideas and insights. Let the team engage in planning as well. You may craft the framework, but they can certainly help in breaking down the steps needed to execute and achieve your goals. One person alone cannot achieve success. Have you ever seen one player win a game? As an example, the Boston Celtics now have the most championships in NBA history. While Jayson Tatum may be the best player on the team, there is no way he can possibly play by himself and still achieve the victories.

Creating a strategic plan is worth investing time into. While it may seem tedious, it will ensure financial stability and help increase the ability to weather unexpected challenges. It gives you the opportunity to diagnose the various areas of practice that have a direct impact on profitability. Taking the time to also consider how your team factors into the practice's profitability and prosperity is always critical.

Some final thoughts on strategic planning. While the process involves setting annual and quarterly priorities, establishing key

performance indicators and aligning resources to meet goals, it is also something that should be reviewed on a regular basis. Celebrate wins and identify what is not working so you can adjust. Most importantly, please remember the plan is not set in stone! The important thing is to create a plan that will be the launching point for a successful year.

Remember to review your plan with a trusted advisor for feedback and an outside perspective. We can all fall victim to being caught in the weeds. An objective set of eyes can help one avoid being influenced by emotions, fears, and other biases. A second set of eyes can help avoid pitfalls and improve business practices. Outside eyes will bring a fresh perspective to your practice, as they are not encumbered by the habits of your management and staff.

Finally, please do not be so hard on yourself! I hate to break it to you, but your year will not go exactly as you planned. Life happens and unexpected things come up. But that is ok. Having your road map will help you pick up where you left off or reevaluate your priorities and goals. Remember, every bit of progress counts. Creating a plan for your year is a smart decision that will help you get closer to and achieving your goals. 🌱

Jackie Joachim has 30 years of experience in the industry as a former banker and now the Chief Operating Officer of ROI Corporation. Please contact her at: Jackie.joachim@roicorp.com or 1-844-764-2020.

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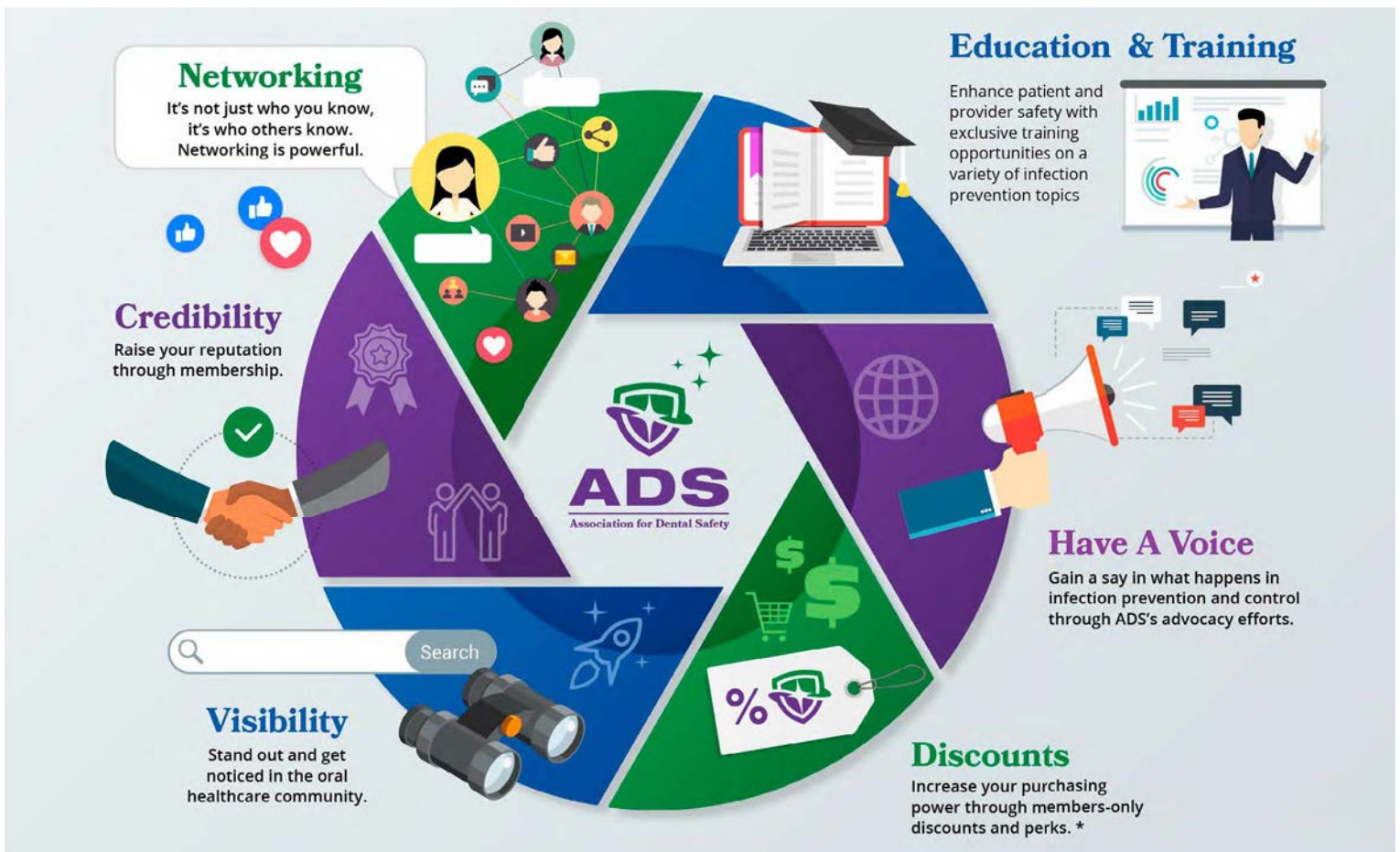
NL Dental Association

The Manitoba Dental Association, in partnership with the Association for Dental Safety (ADS) (formerly known as OSAP), offers its members access to ADS membership at a discounted rate starting January 2024:

- Individual annual membership: **\$32.50 + GST**
- Office annual membership (up to 10 staff*): **\$275.00 + GST**

* For more than 10 staff, please contact the MDA. Send an email to lberg@manitobadentist.ca to discuss a package that can work for you.

ADS Member Benefits



InfoBites - Each Monday, receive an email highlighting late-breaking infection prevention and safety news

Infection Control in Practice (ICIP) - Six times per year, receive an educational publication featuring real-life scenarios with checklists. ICIP is worth up to 6 CE credits per person annually

The Safest Dental Visit™ Toolkit - Utilize carefully assembled resources to help ensure the safe and infection-free delivery of oral healthcare to all

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Education & Training - Receive discounts for Boot Camp, Annual Conference, workbooks, online courses, and products. Access past Annual Conference PowerPoint presentations

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Member Certificate - Download a printable certificate verifying your ADS membership to display in your office

Member Directory - Search for ADS Members located near you or who share similar interests

Recognition - Earn infection control awards and serve on ADS committees

OBITUARIES



Dr. Joseph Slogan, BA, DDS

February 15, 1931 -
November 3, 2024

Dr. Joseph Slogan passed away peacefully on Sunday morning, November 3, 2024 at Selkirk Regional Health Centre with family by his side.

Dad will be lovingly remembered by his three children, Mark (Sandra), Patti (Clark) Saunders and Jamie (Zobeida); his grandchildren, Christina (Ian) Irwin, Dennis, Kiana and Skylar; great-granddaughters, Mila and Maive who he adored as they brought much joy and happiness to him; brother Steve Hawchuk (Esther) and numerous nieces and nephews.

Dad was predeceased by his wife Mary, parents, George Slogan and Tekla Hawchuk, siblings, Stephanie (Graham Morrison), Walter (Nellie) and Bill Slogan.

Dad was born at Sandwich (Windsor) Ontario on February 15, 1931. He had moved with his mother and stepfather to Malartic, Quebec in 1937, and then they settled at the farm at East Selkirk area in 1938 where he was raised and when not doing his chores and studying, he spent a lot of time with his best friend Peter Chanas.

Dad received his elementary education at Patapun School. He attended Happy Thought School and then graduated from Selkirk High School in 1949, where he was on student council, editor of the year book and wrote for the local newspaper. After attending United College for one year, he attended the University of Manitoba (U of M) where he graduated with a Bachelor of Arts degree majoring in psychology in 1952. While at the U of M he was active in debating and model parliaments. In order to pay for his education, he enjoyed working at the Selkirk Mental Hospital during the summer breaks.

As dentistry was not offered in Manitoba at the time, Dad was accepted to the Faculty of Dentistry at the University of Toronto and received a Doctor of Dental Surgery degree in 1956. He was president of his class, the Dental Student Council and served on the Students' Advisory Council for the University.

During Dad's time at school, he was awarded several scholarships and awards, highlighted by receiving the Richardson Scholarship upon graduating from highschool. Upon graduating from Dentistry, he received the Wallace Seccombe Memorial Award for highest standing in preventative dentistry and the Harold Keith Box Silver Medal in periodontology.

Dad was a Licentiate of the Royal College of Dental Surgeons of Ontario and a member of both the Ontario and Detroit District

Dental Societies. In 1957, he began practicing in Winnipeg and in 1960 opened his practice in Selkirk where he practiced for 45 years until his retirement in 2002. He was elected to the Board of Directors of the Manitoba Dental Association and served as chairman of the Public Relations Committee among others. He was also active in promoting for a children's dental health plan in Manitoba. In 1985 he was made a Fellow of the Academy of Dentistry International.

Dad was active in community affairs and served on the Council of the Manitoba Historical Society, he is a past president of the Selkirk Chamber of Commerce. He was an Advisory Board member of the Holy Family Nursing Home for seven years and was active in several other community organizations. He was a former President of the Holy Eucharist Ukrainian Catholic Church Council in Selkirk and in 1966, was made a Fellow of the Royal Society of Health, London, England.

Active in the Ukrainian Community, Dad served as national vice-president on the Praesidium of Ukrainian Canadian Committee and was elected to the World Congress of Free Ukrainians. He served as president and vice-president of the Federation of Ukrainian Professional and Business Clubs of Canada and is a past-president of the Ukrainian Professional and Business Club of Winnipeg.

Dad was active during his school years in debating representing the University of Toronto in national and international debating tournaments. He had been active in politics, serving in many capacities including president of the University of Toronto Progressive Conservative Association, National President of the Progressive Conservative Student Federation in 1954. He had served on the Provincial Councils in Ontario and Manitoba and on the National Council of the Progressive Conservative Party of Canada as well as on the local Associations.

Dad had run for parliament five times, first in 1953 at the age of 22. He served as a Member of Parliament representing Springfield (Manitoba) Constituency for three terms from 1958 to 1965. Serving on the House of Commons Committees on Finance, External Affairs, Indian Affairs, Northern Affairs and Tourism and Health and Welfare. His work included serving on the Special Committee on Research and on investigating the uranium Industry. He was one of the moving forces that brought the Whiteshell Nuclear Research Centre to Manitoba. He was also instrumental in having the federal government take over Lower Fort Garry from the Hudson's Bay Company and making it into a national historic park. He served with the Canadian Parliamentary delegation to the United Nations in 1960 where he participated on the Human Rights Committee. In 1964, he was a parliamentary delegate to the NATO conference in Paris, during which time he visited the Canadian Armed Forces in France and Germany.

In business, Dad was one of the founders and executive vice-president of Settlers Savings and Mortgage Corporation prior to its sale. He was also part owner of Paddlewheel

Riverboats Ltd., the Gray Line bus tours bringing the double decker buses to Winnipeg and part owner of the M.S. Lord Selkirk cruise ship amongst being involved in other family businesses.

Among all of Dad's achievements, family was still the most important. In 1958, he met our mother, Mary Hrynchysyn, at her place of work, she was a legal secretary and he was a client. They were married in 1960. Mark was welcomed in 1961, Patti in 1964 and Jamie in 1971. Dad and Mom were always there to support us. We enjoyed many family vacations throughout Canada, often wherever the Canadian Dental Association Conventions were being held and throughout the USA eventually settling in Florida as their winter home. Our parents travelled worldwide, including China, Thailand, India and Europe. After our Mom's passing, Dad was thrilled to travel to Ukraine meeting many relatives some who resided in our family's villages.

Dad always kept busy around the house and yard tending to his flowers and fruit trees which gave hours of enjoyment. In the fall, he would harvest the fruit and make his wine which he happily offered to anyone that would come by to visit. He enjoyed duck and goose hunting with his friends and later involved Mark and Jamie.

For the last 20 years, Dad enjoyed spending his retirement in Grand Cayman. Where we came to visit in the winter months and he would travel back to his favourite place, his home in Selkirk to spend his summers with family and friends. As a result of declining health from dementia, he moved back to Selkirk. During visits, family were struck by his sense of humour and his storytelling remained strong.

In lieu of flowers, those wishing to honour his memory may donate to the Alzheimer Society of Manitoba, Selkirk Regional Health Centre Foundation, Manitoba Lung Association or a charity of one's choice.

The family extends gratitude to the Comforts of Home - Care and all the caregivers that attended to him which enabled Dad to remain in his home, the paramedics, emergency ward, Medicine 3 and palliative care at Selkirk Regional Health Centre for their kind, compassionate and excellent care of our Dad and Father Walter Dudych for his spiritual guidance.



Ross Hawken McIntyre

October 19, 1940 -
October 26, 2024

Ross was born in Toronto and enjoyed his childhood in Orillia. He especially loved his summers in Muskoka with his family, Clair (father), Dorothy (mother) and three brothers, Terry, Rob and David (deceased). When he moved to Winnipeg in 1959, he finished grade 12 at Kelvin High School where he would meet some of his lifelong friends. After graduation, he attended University of Manitoba, majoring in Economics and English while playing for the Bisons Football team.

The McIntyre Circus began when he and Anne were married in 1966. They went on to have three children, Meredith, Timothy and Alix. Joining the show along the way were Karen, Mark, Mike and Ross' greatest loves, his grandchildren, Connor, Tegan and Reid.

He joined the Manitoba Dental Association in 1968 as Secretary Treasurer and then served as Executive Director until his retirement 42 years later. Ross would often comment on how much he loved his job and valued the relationships he made over the years. He was proud of the part he played in shaping and moving dentistry forward in Manitoba.

He was a truly unforgettable presence—he had an uncanny gift for lifting spirits, always quick to offer a kind word or clever joke. His positivity was infectious, and his kindness left an indelible mark. He leaves us with cherished memories, and though he may be gone, his “Never Better” spirit will live on in all of us forever.

He always said if he could do two things differently, it would be to meet Anne earlier in life and to eat more doughnuts. He lived life with the philosophy to “have good big fun while we're on this planet”.

Honorary pallbearers, Gene Solmundson, Les Allen, Fred Cadham, Ian Morrison, Lyle Edwards, Brian Bjorklund, Skuli Sigfusson, Duncan McCaig and Rafi Mohammed

He truly appreciated Dr. Candace Bradshaw always being there for him, providing excellent care and friendship.

The family would also like to thank Dr. Barry Cohen and Dr. Carol Ann Hitchon.

A celebration of his life will be planned for a later date.

Flowers are gratefully declined. Donations can be made in Ross' name to the Manitoba Dental Foundation manitobadentalfoundation.ca or Manitoba Camping Association, Project Sunshine mbcamping.ca



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