2005-2006
ANNUAL REPORT

Content

This report covers the activities of the College from September 1, 2005 to August 31, 2006.

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The College has the following objects:

1. To regulate the practice of the profession and to govern the members in accordance with the health professions Act, this Code and the *Regulated Health Professions Act, 1991* and the regulations and the by-laws.

2. To develop, establish and maintain standards of qualifications for persons to be issued certificates of registration.

3. To develop, establish and maintain programs and standards of practice to assure the quality of the practice of the profession.

4. To develop, establish and maintain standards of knowledge and skill and programs to promote continuing competence among the members.

5. To develop, establish and maintain standards of professional ethics for the members.

6. To develop, establish and maintain programs to assist individuals to exercise their rights under this Code and the *Regulated Health Professions Act, 1991*.

7. To administer the health profession Act, this Code and the *Regulated Health Professions Act, 1991* as it relates to the profession and to perform the other duties and exercise the other powers that are imposed or conferred on the College.

8. Any other objects relating to human health care that the Council considers desirable.

*(Health Professions Procedural Code, s.3)*
2005 Council (to December 31, 2005)

President: George Paraskevopoulos, RDT
Vice-President: Wilhard Barth, RDT
Secretary-Treasurer: George McFadden (to October 2005)
Members:
- Sushma Bahal
- Mark Behar-Bannelier, RDT
- Kevin Doucette, RDT
- John (Jack) Dudley
- Farah Khayre
- Jill Langford, RDT
- Rekha Lakra (from October 20, 2005)
- Watson Slomke
- John Tak, RDT
- Devinder Walia
- Adela Witko, RDT

2006 Council (from January 1, 2006)

President: George Paraskevopoulos, RDT
Vice-President: Mark Behar-Bannelier, RDT
Secretary-Treasurer: Rekha Lakra
Members:
- Sushma Bahal (to March 2006)
- Wilhard Barth, RDT
- Kevin Doucette, RDT
- Murthy V.S. Ghandikota
- Farah Khayre
- Jill Langford, RDT
- Ataul Haq Malick (from March 23, 2006)
- John Tak, RDT
- Melanie Toolsie
- Devinder Walia
- Adela Witko, RDT

Staff

Registrar: Emily Cheung
Manager, Registration & Administration: Hardeep Matharu
Executive Assistant: Karen Smythe (January – July, 2006)
Administrative Assistant: Beverley Spencer (to October 14, 2005)
Paula Orava (January – July, 2006)
REPORTS FROM COMMITTEES

Executive Committee

Report for the Period from September 1, 2005 – August 31, 2006

<table>
<thead>
<tr>
<th>September – December 2005</th>
<th>January – August 2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair: George Paraskevopoulos, RDT</td>
<td>Chair: George Paraskevopoulos, RDT</td>
</tr>
<tr>
<td>Members: Wilhard Barth, RDT</td>
<td>Members: Mark-Behar Bannelier, RDT</td>
</tr>
<tr>
<td>John (Jack) Dudley</td>
<td>Rekha Lakra</td>
</tr>
<tr>
<td>Jill Langford, RDT</td>
<td>Melanie Toolsie</td>
</tr>
<tr>
<td>George McFadden</td>
<td>Adela Witko, RDT</td>
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</table>

The role of the Executive Committee is defined in the Health Professions Procedural Code, Schedule 2 to the Regulated Health Professions Act and the bylaws of the College.

The Committee is responsible for managing the affairs of the College. Except for making, amending or revoking a regulation or by-law, the Committee may exercise the duties of Council with respect to matters that require attention between meetings of the Council. It approves appointment of investigators to investigate reports of illegal practices and of professional misconduct and incompetence of individual members. It also considers reports referred by the Quality Assurance Committee.

Listed below are some of the key activities undertaken by the Executive Committee in the 2005-2006 financial year:

1. Development of an investment policy for Council approval.
3. Together with the Registration Committee, reviewed and recommended amendments to the Registration and Examination Regulations to accommodate the provisions of the Mutual Recognition Agreement (MRA) signed with other provincial regulators.
4. Approved a policy on mailing publications on behalf of other organizations.
5. Reviewed and recommended for Council approval the proposed Regulation on Notice of Meetings and Hearings.
6. Developed a staff vacation entitlement policy.
7. Reviewed and recommended for Council approval the MRA revised on November 5, 2005 to include the College of Dental Technologists of Alberta as one of the signatories.
8. Participating in the Medical Devices Program Review conducted by Consulting and Audit Canada (CAC) to examine the effectiveness of the Medical Devices Program of Health Canada.
10. Participated in Ministry of Training, Colleges and Universities’ Career and Training Fair;
11. Gave approval for the College to participate in the Ministry of Health and Long-Term Care’s Allied Health Human Resources Database (AHHHRDB) Pilot Project;
15. Recommended for Council consideration College submissions to the Minister of Health and Long-Term Care in regard to HPRAC’s report on “Regulations of Health Professions in Ontario: New Directions”.
16. Held liaison meetings with the Association of Dental Technologists of Ontario (ADTO) and George Brown College Centre for Health Sciences.

17. Supported the President and the Registrar to the meetings of the Canadian Alliance of Dental Technology Regulators (CADR) and discussions with Medical Devices Bureau of Health Canada regarding the safety of dental devices and materials imported from unregulated jurisdictions.

18. Approved submission of a funding proposal to the Ministry of Citizenship and Immigration for development of distance education programs to help internationally trained technicians upgrade their skills/knowledge in order to qualify for the College's registration examinations. Unfortunately, for the second time, the Ministry decided not to support the proposal despite absence of programs to assist internationally trained technicians.

The Executive Committee also approved investigation on reports of illegal practices and reports on members. During the year, it successfully prosecuted in the Provincial Court Angelo De Luca and World Dental Laboratories for offering dental technology services while not qualified and for operating a dental laboratory without a supervising dental technologist or dentist. It reviewed and approved appointment of investigators to investigate two alleged professional misconduct cases. Both cases are still in progress. The Committee also received reports on inappropriate advertising of eight members. Three members were given written advice. The remaining cases were dismissed.
In accordance with the *Health Professions Procedural Code*, the Registration Committee reviews applications for registration referred by the Registrar, who may
- have doubts on whether an applicant meets the registration requirements;
- be of the opinion that terms, conditions or limitations should be imposed on a certificate of registration; or
- propose to refuse the application.

During the year, the Registration Committee reviewed
- two international candidates’ application to sit the registration examination. One was directed to sit the Eligibility Examination, another was asked to upgrade.
- one application for General Certificate re-instatement. Decision is pending submission of more information from the applicant.

Other activities of the Committee included
- approval of a policy on issue of display certificates;
- recommendation for Council approval a schedule for increase to examination fees;
- consideration to offer off-site written examinations;
- working with the Executive Committee on amendments to the Registration and Examination Regulations; and
- review of international candidates’ credential assessment processes.

The Complaints Committee investigates complaints received by the College regarding the conduct or competence of members. The Committee disposes every complaint according to processes stipulated in the *Health Professions Procedural Code* which ensures procedural consistency and fairness to both the complainant and the member subject to the complaint. The role of the Committee is mainly investigative. It may resolve cases by:

1. requiring the member to appear before the panel of the Committee to be cautioned;
2. referring the matter to the Executive Committee for incapacity proceedings;
3. referring professional misconduct or incompetence to the Discipline Committee for a hearing;
4. taking other action deemed necessary and consistent with the spirit of the *Regulated Health Professions Act*.

During the year under review, the College received 4 formal complaints, all filed by members. Of these complaints, 2 relate to alleged breach of laboratory supervision standards, the other 2 relate to alleged offer of discounts and/or offer of incentives to induce business. One case was dismissed. The panels of the Committee are still deliberating on disposition of the other three cases.
The Quality Assurance Committee continued to carry out its statutory responsibility to

- ensure that members participate in the Quality Assurance Program;
- review the professional development profiles of members; and
- appoint peer assessors to conduct on-site evaluation of members.

The Committee actively pursued introduction of "Core Competencies" as a component of the Quality Assurance Program. Dental Technologists are expected to demonstrate their knowledge and/or skills in areas essential to their practice. Three "Core Competencies": infection control, jurisprudence and ethics governing dental technology practice and record keeping had been identified.

By the end of the calendar year 2009, members are expected to have successfully completed upgrading in "Infection Control". At the recommendation of the Committee, Council approved a budget of $20,000 to pay for development of a Jurisprudence and Ethics Handbook for dental technologists.

The Committee offered one-on-one personal assistance to individual members who had difficulty understanding and attending continuing education and/or upgrading activities. During the year, a consultant attended these members' practices to offer remedial assistance at the members' expense.

The Patient Relations Committee is mandated by the Regulated Health Professions Act to develop and implement a patient relations program to educate members and College staff to prevent sexual abuse and/or harassment of patients while receiving dental technology service. The Committee is also to administer the fund for therapy and counseling for persons found to have suffered abuse by dental technologists.

The Patient Relations Committee held a meeting in March 2006 to review the patient relations program and to explore means to improve on communication with members and the public.
Discipline Committee
Report for the Period from September 1, 2005 – August 31, 2006

**September – December 2005**
Chair: John Tak, RDT
Members: Michael Corrigan, RDT
         Alan David, RDT
         Farah Khayre
         Watson Slomke

**January – August 2006**
Chair: Farah Khayre
Members: Wilhard Barth, RDT
         Ataul Haq Malick
         John Tak, RDT

The Discipline Committee is responsible for hearing allegations of professional misconduct and/or incompetencies of dental technologists referred by the Complaints Committee and the Executive Committee.

During the period under review, there had not been any referral. The Discipline Committee did not hold any hearings. Two public members on the Committee attended the Federation of Regulatory Health Colleges' Disciplinary Hearing Workshop to prepare themselves for possible future hearings.

Fitness to Practice Committee
Report for the Period from September 1, 2005 – August 31, 2006

**September – December 2005**
Chair: John Tak, RDT
Members: Sushma Bahal
         Mark Behar-Bannelier, RDT

**January – August 2006**
Chair: John Tak, RDT
Members: Wilhard Barth, RDT
         Farah Khayre
         Ataul Haq Malick

The Fitness to Practice Committee is responsible for receiving referrals from the Executive Committee on allegations concerning the capacity of a dental technologist to continue to practise.

According to the definition of the *Health Professions Procedural Code*, incapacity means that the member is suffering from a physical or mental condition that makes it desirable in the interest of the public that the member no longer practises or that the member's practice be restricted.

The Committee did not hold any hearings in the past twelve months.
The accompanying summarized statement of financial position and statement of operations are derived from the complete financial statements of the College of Dental Technologists of Ontario as at August 31, 2006 and for the year then ended on which we expressed an opinion without reservation in our report dated November 30, 2006. The fair summarization of the complete financial statements is the responsibility of the College's management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the condensed financial statements.

In our opinion, the accompanying summarized financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

The summarized financial statements do not contain all disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that this statement may be not appropriate for their purposes. For more information on the College's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

Toronto, Ontario
November 30, 2006

SUMMARIZED STATEMENT OF OPERATIONS
YEAR ENDED AUGUST 31, 2006

<table>
<thead>
<tr>
<th>Revenue</th>
<th>2006</th>
<th>2005</th>
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<tbody>
<tr>
<td>Registration and examination fees</td>
<td>505,888</td>
<td>480,353</td>
</tr>
<tr>
<td>Investment income</td>
<td>22,043</td>
<td>28,609</td>
</tr>
<tr>
<td>Other income</td>
<td>31,497</td>
<td>32,344</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td><strong>559,428</strong></td>
<td><strong>541,306</strong></td>
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<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and benefits</td>
<td>247,274</td>
<td>220,496</td>
</tr>
<tr>
<td>Other</td>
<td>347,003</td>
<td>353,732</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>594,277</strong></td>
<td><strong>574,228</strong></td>
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</tbody>
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<thead>
<tr>
<th>Deficiency of revenue over expenses before deducting the following (34,849)</th>
<th>(32,922)</th>
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</thead>
<tbody>
<tr>
<td>Misappropriated funds</td>
<td>94,527</td>
</tr>
<tr>
<td>Deficiency of revenue over expenses for the year</td>
<td><strong>(129,376)</strong></td>
</tr>
</tbody>
</table>

Complete financial statements are available upon request from the office of the Registrar.