Activity Report
2022
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Mission, Vision and Guiding Principles

Mission

CDAC assesses oral health education programs and facilities to determine accreditation status

Vision

CDAC is a globally recognized leader in accreditation standards and processes

Guiding Principles

- Collaborate with all stakeholders
- Embrace diversity and inclusion
- Be ethical and trustworthy
- Act with integrity
- Innovate for excellence
Report from the Chair

The reporting period from 2022 has been one like no other in the Commission’s 32-year history. Our operations continued to be impacted by the effects of the COVID-19 pandemic as we continued our work primarily through the virtual environment. Once again, we saw record numbers of accreditation survey visits completed. And, by year’s end we hope to have completed our transition to an independent CDAC with a new governance structure and funding model.

Thank you, Dr. Rihal

All accreditation survey site visits continued using the Interim Virtual Reporting System (IVRS) developed (and supported by) by former CDAC Chair, Dr. Amarjit Rihal. The use of this technology has allowed us to continue to meet our mandate to the high standards for which we are known. Despite having completed his ‘extended’ term as Chair, he oversaw shipping and receiving of equipment, was the main trouble shooter for any software glitches and ensured the virtual visits went smoothly. He was an important resource for the Governance Review Steering Committee as we navigated the waters towards independence with our many stakeholders. Without his historical knowledge, technical expertise, and quiet yet tireless commitment, it would have been very difficult to ‘keep the lights on’ at CDAC. Thanks are not enough!

Hybrid Model Working Group

Based on the results of a quality assurance survey of the IVRS system, a working group was struck to investigate the feasibility of developing and implementing a Hybrid Model for future Accreditation Site Visits. Thank you to Drs. Mel Schwartz and Blaine Cleghorn, Ms. Amilia Peskir and Ms. Leslie Riva for their contributions and input. The group reviewed the virtual site visit model to determine if there were components of the IVRS that could be incorporated into a hybrid model without compromising the integrity of the site visit and subsequent survey report. They also explored the possibility of cost savings that could be realized using a hybrid model.

The IVRS had many advantages, including eliminating the need to travel for both staff and surveyors. Virtual course interviews and interviews with faculty members or program administrators worked well. For many surveyors, the hyperlinked floor plan with 3-D zoomable images of the facility was a positive attribute of the IVRS. Many respondents from the post IVRS survey questionnaire reported this technology allowed a full view of the entire facility that was not always possible during an in-person visit; others found it difficult to follow. However, observation of clinical care, patient chart review and faculty and student forums were three areas where the virtual environment presented challenges. In these cases, the ability of the IVRS to mimic the richness of the data gathered through in-person was less than ideal. Further, there was a significant burden on staff resources to handle shipping and receiving and support for the setup and utilization of the electronic equipment and software. Added to this was the challenge of conducting survey visits across multiple time zones. As a result, the human resources required for virtual visits were nearly double that for in-person site visits.
The number of external survey team members varies according to program or facility type but is the same for both IVRS and traditional site visits. Taking all this into account, the Working Group concluded that the HR costs required to manage virtual visits, coupled with the logistical challenges involved that would be involved to manage a hybrid model would likely off-set any cost savings related to travel and accommodation for a hybrid model.

The following are recommendations from the Working Group:

1. Establish a training program for new surveyors and/or include experienced surveyor on site visits. This should allow staff to join remotely to provide support as needed. While it would not necessarily reduce the number of hours required by staff each day, it would significantly reduce their need to travel with a concomitant reduction in expenses (travel time and cost). CDAC staff would be required to be on-site for the following:
   a. New programs/facilities
   b. Established programs/facilities with concerns identified by staff from previous visits or pre-survey documentation
   c. Fully virtual accreditation site visits could be limited to health facilities, as these are often accredited through other sources.

2. Provide a virtual floor plan in the pre-survey documentation in advance of the survey visit. This has the potential to reduce the amount of time needed for a tour on-site, allowing the on-site surveyor(s) to view only those areas where there might be some questions or concerns. However, the floor plan links must be clearly labelled as to the type of room (e.g., closed-room operatory, graduate student seminar room) and/or its use. This would allow the survey team member to view at their own pace, prior to the scheduled visit.

3. Maintain the use of a secure online program (e.g., MS Teams) for document sharing and editing. Consideration should be given to training surveyors not familiar with the program(s) and/or the shared editing functions.

**Dental Assisting Workforce Challenges**

The Canadian Dental Association and the Canadian Dental Assistant Association have identified a significant crisis in human resource supply. In 2019, 36% of dental offices had vacant dental assistant positions. Over the course of the last decade, the ratio of new certified dental assistants to new dentists entering the workforce has decreased by more than half, from more than 3:1 to almost 1:1.

One of the ways to alleviate this shortage will be to develop and promote new online certified dental assisting curriculum. This is expected to improve access to dental assisting programs, particularly for those living in rural and remote areas, or who are already part of the untrained dental sector workforce.
It is important the CDAC stay involved in these discussions as there will be impacts on educational requirements and programming. We strongly support these initiatives but also recognize there will likely be an increased number of *Requests for Enrollment Increase/Program Update* as well as *Applications for a New Program Survey*. 2023 is expected to be a very busy year for the Dental Assisting Accreditation Review Committee and staff.

**Transition to an Independent CDAC**

Simultaneous with regular operations, the Governance Review Steering Committee, chaired by Dr. Arun Misra, worked tirelessly to develop a new governance structure and funding model as CDAC moves toward independence from the Canadian Dental Association. The Final Report and Recommendations will be presented at the November 14th annual meeting for approval by the Commission. As Chair, I wish to thank all members of the committee for their hard work, ability to ‘think outside the box’ and commitment to ensuring long term success of our organization. If approved, the November 2022 annual meeting will be the last for the Commission as it is currently constituted.

Finally, and on behalf of all previous Chairs, I would like to thank the army of dedicated survey team members from all three professions, the committee members and chairs who gladly gave of their time and expertise to ensure CDAC was always able to meet is mandate by ensuring ongoing excellence in the education of oral health professionals in Canada. Thank you to our hard-working, dedicated, highly professional staff for continuing to ‘keep the lights on’, and for their expert guidance on my journey of learning. Kudos to you all!

**CDAC Staff and Operations Report**

This has been a very busy year for staff. Prior to 2020, accreditation survey visits were completed by June, allowing staff adequate time to prepare reports for the annual November CDAC meetings. With the increased staff time required for virtual survey visits coupled with an increased number of survey visits, the last survey was completed at the end of September this year.

On top of normal operations, staff supported the Governance Review Steering Committee with over 14 presentations and meetings with stakeholders and stakeholder groups; preparation of several drafts for a new funding model, and meetings with legal counsel to facilitate development of service and asset agreements essential for our transition to independence.

We welcomed two new staff members this Spring - Tracy Jean and Yara Ghaddar. They are very welcome additions to our team! Tracy and Yara support all accreditation activities and event planning.
In July, the Chair and staff participated in a 2 day in-person team building and strategic planning session. The impact of the new governance model on future operations was discussed and an internal communication strategy was developed. Upon approval of the 2023 Budget, we plan to hire an administrative assistant to support all Board activities, in addition to supporting the work of the Executive Director and the Director of Operations. An operational reporting chart and job titles and outlines of expectations were designed to align with the proposed new governance model for CDAC. (See below)

New Staff Organizational Chart (Independent CDAC)
Updating Accreditation Requirements

Dental Hygiene and Dental Assisting

The Dental Hygiene accreditation requirements review working group, and the Dental Assisting accreditation requirements review working group, supported by CDAC staff, have been working diligently for the past two years on reviewing and updating accreditation requirements.

Following several working group meetings, we are now entering the last phases of the review process.

Proposed updated accreditation requirements will be reviewed one last time by the working groups before circulating to the communities of interest for comment. Since this will occur in 2023, within the new CDAC structure, comments received will be reviewed by the ‘new’ CDAC Standards Review Committee.

Included in the revised accreditation requirements is wording pertaining to cultural safety and Equity, Diversity, and Inclusion.

Revised accreditation requirements for Dental Hygiene and Dental Assisting programs are expected to be effective January 1, 2024.

Dentistry (DDS/DMD)

The process to review and update the DDS/DMD accreditation requirements will begin in 2023.

Completed 2022 Survey Visits

DDS/DMD and Specialty Programs

University of Manitoba
- DMD
- Oral and Maxillofacial Surgery
- Orthodontics
- Periodontics
Dental Hygiene Programs

University of Manitoba
Algonquin College
Collège Boréal
College of New Caledonia
Canadian National Institute of Health
La Cité
Oulton College
Vancouver Community College

Dental Assisting Programs

CBBC Career College
CBBC Career College – Distance Delivery Program (NEW)
CDI College – Calgary
CDI College – Edmonton
College of the Rockies
Durham College (Limited Survey Visit)
KDM Dental College – Calgary
KDM Dental College – Edmonton
Risio Institute for Digital Dental Education – Distance Delivery Program (NEW)
Sprott Shaw College (NEW)
University of Saskatchewan
Oulton College
Vancouver Community College
Vancouver Community College – Distance Delivery Program

Dental Services

Eastern Health Regional Integrated Health Authority
Sunnybrook Health Sciences Centre

Dental Residency Programs

Sunnybrook Health Sciences Centre
Université Laval
Commission and Committee Members

Commissioners

Dr. Debora Matthews, Chair
Ms. Sina Allegro-Sacco
Dr. Ross Anderson
Dr. Nancy Auyeung
Dr. Arlynn Brodie
Dr. Blaine Cleghorn
Ms. Caroline Daoust
Dr. Peter Doig
Ms. Dorothy Dziunikowski
Dr. Christopher Fennell
Dr. Paul Major

Ms. Alicia Marshall
Ms. Amilia Peskir
Dr. James Posluns
Dr. James Richardson
Dr. Amarjit Rihal
Ms. Leslie Riva
Dr. Mel Schwartz
Ms. Alexandra Sheppard
Ms. April Slotsve
Ms. Diane Thériault

Dentistry Accreditation Review Committee

Dr. Peter Doig, Chair
Dr. Nancy Auyeung
Dr. Blaine Cleghorn
Ms. Caroline Daoust
Dr. Christopher Fennell
Dr. Paul Major

Dr. Debora Matthews
Dr. James Posluns
Dr. James Richardson
Dr. Amarjit Rihal

Dental Hygiene Accreditation Review Committee

Ms. Alexandra Sheppard, Chair
Dr. Arlynn Brodie
Ms. Saadia Choudhry
Ms. Kim Haslam
Ms. Dorothy Dziunikowski
Dr. Christina Heidinger
Ms. Breanne Moran
Ms. Amilia Peskir
Ms. Diane Thériault

Dental Assisting Accreditation Review Committee

Ms. Leslie Riva, Chair
Ms. Sina Allegro-Sacco
Dr. Patricia Allewell
Ms. Robyn Brown
Ms. Tina Brenton
Ms. Alicia Marshall
Ms. Robin McKay Ganshorn
Ms. April Slotsve
Health Facilities / Internships Accreditation Review Committee

Dr. Mel Schwartz, Chair
Dr. Ross Anderson
Dr. Constantine Batsos
Prof. Mary Bertone

Dr. Chris Lee
Dr. Veenu Mittal
Dr. Erin Watson

Documentation Committee

Dr. James Richardson, Chair
Dr. Craig Fedorowich
Dr. Susan Sutherland
Ms. Jennifer Tewes

Nomination Committee

Dr. Mel Schwartz, Chair
Ms. Amilia Peskir
Dr. Amarjit Rihal

Finance Committee

Ms. Diane Thériault, Chair
Dr. Nancy Auyeung
Dr. Chris Lee
Dr. Debora Matthews
Ms. April Slotsve

Governance Review Steering Committee

Dr. Arun Misra, Chair – Canadian Dental Assisting Regulatory Authorities
Ms. Caroline Daoust – Canadian Dental Regulatory Authorities Federation
Dr. Christopher Fennell – Public member
Dr. Jim Lai – Association of Canadian Faculties of Dentistry
Ms. Diane Thériault – Federation of Dental Hygiene Regulators of Canada
Ms. Susan vander Heide – National Dental Assisting Examining Board
Dr. Debora Matthews (Non-voting) – CDAC Chair
Dr. Amarjit Rihal (Non-voting) – Past CDAC Chair
Mr. Frédéric Duguay (Non-voting) – Director, CDAC