



Dr. Darryl Smith

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Embracing and Managing Change

Although I have been thinking about my first President's Column for quite a while, I was still unsure about what topic to focus on. Then one evening, I became engrossed in the documentary *An Inconvenient Truth*, by former U.S. vice-president Al Gore, and I saw many parallels between the future of dentistry and the environment. Coincidentally, environmental stewardship and dentistry have been equal passions throughout my life.

So how does global climate change relate to the dental profession? There are many people within dentistry who are resistant to change and believe the best direction forward for the profession is to maintain the status quo. Similarly, some people don't believe that global warming is a problem and think society can simply continue on its current course. I believe modern society has become far too complex to adopt such 'status quo' strategies in any domain. The dental profession must take a strong leadership role on issues of importance and manage change in a way that is not disruptive for our members.

Nowhere has change been moving so rapidly in modern society than with electronic and digital technologies. The health care community is no exception and it is currently working on the implementation of an Electronic Health Record (EHR) for all Canadians. There has been some debate about dentistry's appropriate level of involvement in this project. Some dissenting voices believe that the EHR is simply too much trouble, that governments don't want dentistry to be involved or that the EHR is only about saving money in the publicly funded health system, to list but a few criticisms.

In my mind, these arguments are not valid. I believe the primary goal of an EHR is to achieve the best possible health outcomes for our patients. Dentists must be as fully involved as our medical colleagues. If this does not happen, my

fear is that dentistry may be seen as a 'second-class' provider of care in the eyes of the public or government.

Dentistry must have all the necessary tools to allow us to participate fully in the EHR. These tools include more than just having access to computers and the Internet. Information exchange requires a common vocabulary for treatment with a coding system that allows for easy billing, a detailed treatment record and similar diagnostic terms.

Most importantly, there must be a willingness from members of our profession to embrace change, because the starting point for such a project begins in the practitioner's office with our patient charts. Moving to a true electronic patient record with various digital components such as radiographs, photographs, charts, diagnoses and treatment notes, will require a high level of standardization. If this health record is to be transferable, we require the same language and coding system within our various dental management software programs.

Fortunately CDA, in collaboration with the national specialty and provincial dental associations, is positioning dentistry so it can be integrated within the EHR project. In March, CDA brought together members of the profession for a 2-day forum to ensure that the current project revising the Uniform System of Codes and List of Services (USC&LS) will simplify billings and provide the necessary level of detail for the EHR. CDA will also be convening a similar forum dedicated to the EHR in the coming months. Creating and supporting other electronic communication tools such as ITRANS, which allow CDA members to take advantage of digital technology with minimal impact on procedures at the dental office front desk, is another example of how to effectively manage change.

My role, the role of CDA and of its corporate members is to encourage debate to achieve consensus on how to facilitate change within the profession, in order to ensure Canadians receive the best care possible for all of their health needs. Maintaining the status quo can have its own set of consequences, because a society or profession that fails to change or evolve risks being left behind.

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