

2024 ANNUAL GENERAL MEETING PACKAGE



AGM AGENDA

September 21st, 2024, at the Conexus Art Centre Theatre in Regina, SK.

7:00 a.m. – Welcome, Land Acknowledgement, and Introductions – Gord Gillespie, Chair

7:05 a.m. – President’s Welcome – Dr. Derek Thiessen

7:10 a.m. - AGM Call to Order – Gord Gillespie

- Approval of Agenda
- Adopt 2023 AGM Minutes (included below under 2023 AGM Minutes)
- Adopt Consent Items – Professional Conduct Committee, Discipline Committee, Governance Committee, Finance Committee, Human Resources and Compensation Committee, Quality Assurance Committee, and Advertising Review Committee. (included below under Reports)

7:12 – In Memoriam

- Dr. Jack Junek
- Dr. Lorna Houseman
- Dr. Michael Brough
- Dr. Daniel Salloum

7:15 a.m. - Registrar Remarks – Dr. Dean Zimmer

7:20 a.m. - Executive Director Remarks – Jaime Korczak

7:25 a.m. - Auditors Report – Curt Wagner, Partner, MNP

7:35 a.m. – Adopt Financial Statements and Auditors Report

7:35 a.m. - Question and Answer

7:40 a.m. – Adjournment of Annual General Meeting

7:40 a.m. - Service Award Presentation - Drs. Derek Thiessen & Mike Fowler

8:00 a.m. - Guest Presentation – Jaime Korczak

- 8:00-8:15 Ed Dermit, President & CEO – CDSPI
 - Question and answer
- 8:15-8:30 Dr. Brian Baker - Canadian Dental Association
 - Question and answer

8:30 a.m. – Conclusion and disperse to course rooms

2023 AGM MEETING MINUTES

September 24, 2023, 1:00 PM at TCU Place, Saskatoon, SK

Welcome and Introductions – Gord Gillespie, Chair - 12:57

Outgoing President's Welcome – Dr. Aaron Bazylak

Dr. Bazylak discussed his year as President, which had its challenges but many successes. A highlight included many national meetings with the CDA regarding the Canadian Dental Benefit Plan, both virtually and in person in Ottawa. Some of his other highlights included having Health Minister, Hon. Paul Merriman, attending our June council meeting in person; approval of standards such as the Advanced Facial Esthetic Therapies and Adjunctive Considerations, Long Term Care Resident Guidelines, and others, to ensure the safety and protection of the public. He thanked the CDSS council for all their efforts over the years, Executive Director – Jaime Korczak, Chairman – Gord Gillespie, Acting Registrar – Dean Zimmer, and the CDSS staff for all their hard work put in this year.

Guest Speakers - 1:15

- Paul Batho, CDSPI
- Dr. Walter Siqueira, College of Dentistry, U of S

Call to Order - Gord Gillespie, Chair – 1:50

Approval of Agenda

Moved: Dr. Wes Thomson Seconded: Dr. Kevin Saganski Carried

Adopt 2022 AGM Minutes

Moved: Dr. Raj Bhargava Seconded: Gord Wyatt Carried

Adopt Consent Items - PCC, Discipline, Governance, Finance, Human Resources, Chair Report, Quality Assurance, Advertising Review, and Continuing Education and Learning.

Moved: Dr. Kevin Saganski Seconded: Dr. Raj Bhargava Carried

Incoming President's Welcome – Dr. Derek Thiessen

Dr. Thiessen thanked Dr. Bazylak for his leadership, service and dedication to the CDSS this past year. He also thanked all council members for their commitment to the CDSS council, including departing members, Drs. Bil Hussain, Drew Krainyk, and Jay Lalli who will be missed. Dr. Thiessen congratulated re-elected council members, Drs. Micheal Koskie and Wes Thomson, along with the newest addition to council, Dr. Kabir Viridi. President Thiessen thanked the CDSS senior management, Jaime Korczak, Gord Gillespie and Dr. Dean Zimmer for their guidance throughout many challenges currently facing the regulatory environment and thanked the CDSS staff for their work behind the scenes. Dr. Thiessen's priorities as present include but are not limited to: Hiring a permanent registrar, continue work with the CDA to implement the Federal Dental Care Plan, and working to implementing Policies and Standards to ensure the protection of the public.

Service Award Presentations

Registrar's Remarks – Dr. Dean Zimmer

Executive Director's Remarks – Jaime Korczak

Audit Report – Curt Wagner, MNP

Review of the 2022 Audited Financial Statements - y/e December 31, and explanation of the independent auditor's report. Revenues stable year after year. Expenses stable as well. Overall stability.

Approval of 2022 Audit Report

Moved: Dr. Mike Fowler Seconded: Dr. Wes Thomson Carried

Adjournment – Gord Gillespie, Chair 2:28 Moved: Don Robinson

REPORTS

PRESIDENT'S REPORT – DR. DEREK THIESSEN

Once again summer has blown by far too quickly and we are once again enjoying the newly-branded Saskatchewan Dental Conference. Thank you to everyone who has worked hard to put this together. It has been an eventful, challenging, but rewarding year for the CDSS. In this report I would like to highlight a few initiatives, developments, and achievements that have occurred over this past year as there were much too many to mention here.

My term as President began with more stability in the College office than we had had in the preceding few years. The appointment of Mrs. Jaime Korczak into the Executive Director role has proven to be a wise choice for the organization. Her oversight in the College office and her representation on the national stage has been exemplary.

November 2023 brought with it the first glimpse at the Federal Government's Canadian Dental Care Plan. The plan had been fully developed by the government and Sunlife to this point, without any input from the Provincial and Territorial Dental Associations (PDTAs), and it showed. Our hands were tied by non-disclosure agreements, bureaucratic red tape, and NDP/Liberal political promises, however, over the next seven months Jaime and I worked closely with our provincial counterparts both in-person and via ZOOM to effect meaningful change in the program. I realize the CDCP as it currently sits is far from perfect, but if only you could see its first draft. I am proud of how far the PDTAs were able to move the needle. Having said that, we understand that some members will support the CDCP while others oppose it. The CDSS will continue to advocate on your behalf and support all members, whether or not they utilize the CDCP.

2024 began with celebrations for the 2nd year U of S DMD students at their whitecoat ceremony. I was honoured to bring greetings from the CDSS during this important milestone for our future colleagues. January 2024 was also highlighted by the transition of Dr. Dean Zimmer from an Acting-Registrar role, to that of our permanent Registrar. Dr. Zimmer has accomplished a great deal during his first year in the role and I am confident that this will continue into the future. The CDSS is in good hands with him at the helm.

Early 2024 was accentuated with meetings, many many meetings. Jaime and I traveled to Ontario on a few occasions to meet with the CDA and the PDTAs as well as representatives from Health Canada, including Deputy Minister of Health Stephen Lucas and Minister of Health Mark Holland. We also attended many virtual meetings including with the Conservative Health Critic, Dr. Stephen Ellis. March 2024 was highlighted by our quarterly council meeting in Regina where we were joined by the Honourable Everett Hindley, provincial Minister of Health for a roundtable discussion and question and answer session. This was most beneficial. A continued positive working relationship with the Health Ministry is very important for the CDSS in my opinion.

This past year also brought with it proposed changes by the Provincial Government to the Regulated Health Professionals Act. While it is still in the consultation phase, the CDSS is keeping a close eye on the proposed changes and how to adapt if and when the legislation passes. We will keep you apprised as things develop on this front.

This past spring Mrs. Korczak, Dr. Fowler, and myself had the opportunity to attend the Canadian Dental Association Annual General Meeting and President's installation in Toronto where Dr. Joel Antel became the CDA's President for the 2024-2025 term. We were also pleased to attend the CDA awards luncheon where a few very deserving recipients were recognized for their contributions to dentistry. Please watch for the calls for nomination from the CDSS office, if you know of anyone deserving of such recognition, please nominate them!

The CDSS is strengthened as it sits upon the pillars of our committees. Thank you very much to all of our committee Chairpersons and their respective committee members who have worked so tirelessly for the CDSS over this past year. Job well done indeed. In addition, I would also like to thank all of our representatives who represent CDSS with the CDA, NDEB, College of Dentistry (Faculty, Executive, Undergraduate, Curriculum Review, Admissions and Senate).

Thank you to the fantastic team we had this past year as elected and appointed Council members. Our executive and Management team consists of President-Elect Dr. Mike Fowler, Vice-President Dr. Raj Bhargava, Registrar Dr. Dean Zimmer, Executive Director Mrs. Jaime Korczak, and Council Chair Mr. Gord Gillespie. I would like to sincerely thank this group for their guidance and expertise as we navigated this challenging and unusual year. In addition to the Executive and Management team I previously mentioned I would like to also thank our Council members: Dr. Michael Koskie, Dr. Erika Ridgway, Dr. Kevin Saganski, Dr. Wes Thomson, Dr. Kabir Viridi, Mr. Don Robinson, and Mr. Gord Wyatt. I appreciate all of the hard work and dedication that was put in this past year. It is my honour to be a part of such a wonderful cohesive team.

Finally, I would like to thank our Registrants for their commitment to dentistry in our Province. Your patience, resilience, and patient care through the challenges of the past four years has been commendable. The future of the profession is strong in Saskatchewan.

This would normally be the end of my term as President and the beginning of my term as Past-President, however, due to the change in AGM dates moving forward, it looks like you will be stuck with me for an extra nine months or so. Thank you all for the trust and support in allowing me to serve this past year as President of the College of Dental Surgeons of Saskatchewan.

Yours truly,
Dr. Derek Thiessen, DMD, FPFA
President

REGISTRAR'S REPORT – DR. DEAN ZIMMER

I am pleased to be writing my first Message from the Registrar for the 2023 Annual Report of the College of Dental Surgeons of Saskatchewan (CDSS). I assumed the role of Registrar of the CDSS in an acting capacity in June of 2023.

During the year, the CDSS continued to accomplish the mandate to protect the public by: registering and licensing dentists; ensuring the continuing competence of the registrants and the quality assurance and best practices of the profession; implementing and updating the standards of practicing outlining the expectation to provide quality dental care; and responding to complaints in a consistent manner with improved transparency to achieve a resolution in the public interest.

The Government of Saskatchewan passed Bill 120 The Miscellaneous Statutes (Health Professions) Amendment Act (2023) to standardize certain provisions of the health professions to improve regulator transparency and accountability and provide regulators with the tools they need to fulfill their legal mandate of public protection and maintain public confidence in self-regulation. The CDSS is in the process of amending Bylaws and policies to be inclusive of these changes.

In an acting capacity, the Council has determined the focus of the appointment: to define and clarify the role and time

commitments of the Registrar position within the current organizational structure; to progress the update of the regulatory bylaws; to redevelop the continuing competency and quality assurance program; and to align the regulatory processes, policies, and standards to the decisions of Council.

The culture of the CDSS has been one of self-awareness and self-improvement, and the CDSS staff will continue to identify and strategize any necessary improvements. “Successful change initiatives share two key characteristics: effective persuasion and a clear understanding of organizational change as a long-term, multistep process rather than a singular event.”

I would like to extend a thank you to all of the CDSS Council and committee members. A committed group of individuals giving of their time and effort to serve the public, the college, and the profession. Also, I would like to commend the CDSS management and staff for their dedication to the CDSS and their initiative, diligence, efforts, and professionalism in all their obligations to the public and registrants.

Sincerely,
Dr. Dean Zimmer, DMD
Registrar

EXECUTIVE DIRECTOR’S REPORT- JAIME KORCZAK

As I reflect on my first year as Executive Director of the College of Dental Surgeons of Saskatchewan (CDSS) in 2023, I’m left feeling both proud and hopeful on what was proven to be a challenging and exciting year at the CDSS. Change is never easy, particularly for a 120-year-old organization. But with fresh eyes, new ideas and opportunities, we accomplished what we set out to do: *license and regulate dentists in Saskatchewan in the public interest under the Dental Disciplines Act*. And being that we are currently a dual mandate organization, a renewed focus on advocacy for our members.

The overarching theme for 2023 was the Canadian Dental Care Plan (CDCP). The CDSS President and I spent many additional hours travelling and meeting with our national and provincial counterparts, advocating on this matter. While the chance to voice our concerns was received late, our focus was to ensure that this plan, first and foremost, offers the public greater access to care, and that our dentists’ needs are heard and respected. Although our voices were heard on some aspects, there is still much work to be done.

The financial year saw a successful audit by MNP, and an overall budget surplus (see financials). Licensure fees were also unchanged for the 2023 and 2024 licensing year. We are ever conscious of upholding fiscal responsibility, especially in this heightened inflationary environment.

A few other key highlights in 2023: the signing of another 10-year lease for the CDSS office at the Midtown Tower in Saskatoon with negotiations that included a significant leasehold improvement for a modern refresh of the office interior. Additional updates were made to the license renewal process and CE self submission, the annual Sask Dental Conference was held in September, and we welcomed Dr. Dean Zimmer, CDSS Registrar, to join the other four members of the CDSS team. Thank you, Dean, and the CDSS staff for their dedication in 2023. We may be small, but we can accomplish great things.

We also offer gratitude to those who volunteer their time on council and committees. Thank you to outgoing President in 2023, Dr. Aaron Bazylak, and our current President, Dr. Derek Thiessen. The CDSS could truly not serve in the public

interest and achieve our goals without these individuals. And last, but certainly not least, thank you to the ~600 registrants of the CDSS who's patience and commitment to their profession is evident. We applaud you for reading our eblasts and newsletters for updates on the CDCP this past year. Seeing your willingness and support as we navigated these uncharted waters of the CDCP, we have never been prouder to represent Saskatchewan, "*on your behalf*". Thank you.

Jaime Korczak
Executive Director

SERVICE AWARDS

50 YEARS

MEL GATTINGER
TOR MOKLEBY

45 YEARS

JOHN STEEL

40 YEARS

BRIAN BAKER
GREG KOST
JUDY MONTEITH
CAROL NAGLE
DOUG WOO

35 YEARS

RANDY BERGER
DENNIS FUCHS
EFFIE KUTSOGIANNIS
LEONARD MARKEWICH
CONNIE PAPPAS
MINA PATEL
NORM VANKOUGHNETT

30 YEARS

LEE DEAN
MEENA DUFOUR
CHRISTOPHER GERADTS
TAMARA HARACH
ROBERT PENKALA
MICHELLE REDDEN
MIKE ROSENHEK
JOHN DEAN SEXSMITH
RICHARD TURNBULL

25 YEARS

TODD GRAHAM
TARA KELLEY
NINA MOE
JAMES STEPHENSON
KELL VICZKO
KRISTEN WHITE
DEAN ZIMMER

STANDING COMMITTEE REPORTS

PROFESSIONAL CONDUCT COMMITTEE

The Professional Conduct Committee (PCC) continues to operate under the mandate of the Dental Disciplines Act.

The Professional Conduct Committee is a Statutory Committee required under the Dental Disciplines Act (The Act) Section 28(1-3), stating each association shall establish a Professional Conduct Committee. In addition, as required under The Act Section 15 (2.f.i) and 15 (2.f1) each association can make bylaws to prescribe procedures for the review, investigation and disposition of complaints by the PCC or the mediation of complaints alleging that a member is guilty of professional misconduct or professional incompetence.

The PCC includes Registrants of the CDSS as well as a member of the public. The Professional Conduct Committee is fortunate to have had both Lisa Cassidy and Dayzia Twordik provide administrative direction from the CDSS Office. Their ongoing support and coordination has been paramount to the work of the committee.

The PCC continues to work closely with the Advertising Review Committee as well as the Quality Assurance Committee. The PCC relies on the expertise and analysis of both of these committees to aid in its decision making.

The PCC investigates and provides a written report on all complaints that are forwarded to it by the Registrar of the College of Dental Surgeons of Saskatchewan. Following the review of each case, the PCC will address the concern in a manner addressed in Section 29 (3) of the Dental Disciplines Act.

In 2023, 65 complaints were forwarded to the PCC for further investigation. 9 of the forwarded complaints involved advertising violations and 56 involved clinical care.

As of July 31, 2024 there have been 25 Complaints forwarded to the Professional Conduct Committee by the Registrar in 2024. Of these cases, 23 involve clinical care and the remaining 2 involve advertising violations. The investigation has been completed for 4 complaints. There have been 3 cases that were deemed to require no further action and 1 was resolved with other options in Section 29 (3) of the DDA.

The CDSS continues to evaluate its processes in order to best serve its mandate.

The Professional Conduct Committee encourages all Registrants to stay up-to-date with any updates from the Registrar or the PCC in any CDSS Correspondence. This includes the recently adopted and updated CDSS Standards.

Thank you to all the members of the PCC who dedicate enormous amounts of their time, experience, and knowledge to help ensure that this vital role of the CDSS is executed.

Respectfully submitted,
Dr. Drew Krainyk, DMD
Chair

QUALITY ASSURANCE COMMITTEE

Many Members may not be aware of the composition and roles of the Quality Assurance Committee. The Committee is comprised of six dedicated and conscientious general practitioners from a variety of communities and backgrounds in clinical dentistry. Their roles are to thoroughly review, evaluate and share insights with each other and other CDSS Committees emanating from public complaints directed at Members regarding clinical protocols and their treatment outcomes. This function is much akin to a jury of peers in the legal system. Quality Assurance does not review and adjudicate issues involving alleged advertising misconducts. They also do not pronounce nor deliver discipline recommendations nor sanctions.

Quality Assurance now compiles and supervises Critical Incident Reports from Members and feedback from the Prescription Review Program as secondary roles since Fall 2023. Critical Incidents can be succinctly described as medical emergencies which have arisen in a dental clinical setting whereby external assistance is invited and becomes involved or the patient is immediately directed to an external medical facility for care and attention. These roles and duties are absolutely imperative in a self-governing health profession such as ours. The Public must have a channel to present their concerns.

Respectfully,
Dr. Wes Thomson, DMD
Chair

ADVERTISING REVIEW COMMITTEE

The primary objective of the CDSS Advertising Standard (AS) is to protect the public from inaccurate, misleading, ambiguous, or non-objectively verifiable. The Advertising Review Committee (ARC) does not seek out non-compliant advertising, and instead relies on CDSS registrants and members of the public to submit advertising that they believe may violate the Advertising Standard.

There have been no changes made to the AS since the 2023 AGM. Significant changes were made to the AS earlier in 2023 to address current social media advertising methods, and to clearly categorize all advertising into two broad categories:

Internal Advertising – Communication within a practice and to patients of record.

External Advertising – Used to attract prospective patients to the practice.

When the ARC finds an Internal Advertisement to be in violation of the AS, a request is made to the CDSS registrant to remove or correct the offending content. External Advertisements found to be in violation of the AS are referred on to the Professional Conduct Committee (PCC). In 2023 there were 10 instances of External Advertisements in violation of the AS that were forwarded to PCC. So far in 2024 there have been 3 instances.

Most of the ARC work involves pre-approval of advertising. In these cases, a CDSS registrant submits proposed advertisements to CDSS. The ARC reviews the advertisement and determines compliance or non-compliance with the

AS. A report is sent back to the registrant. The ARC recommends CDSS registrants submit any proposed External Advertisement to the CDSS for pre-approval.

Thank you to CDSS staff members Dayzia Twordik and Lisa Cassidy, as well as ARC members Drs. Harold Weiss and Josh Marshall.

Respectfully submitted,
Dr. Kevin Saganski, DMD
Chair

GOVERNANCE COMMITTEE

The objectives of the CDSS Governance Committee are as follows:

- (i) Foster and promote excellence in Council governance.
- (ii) Refine, monitor, and conduct annual Council elections.
- (iii) Guide Council appointed Committees in the execution of their duties as may be required from time to
- (iv) time.
- (v) Guide Statutory Committees in the execution of their duties as may be required from time to time.
- (vi) Review the Colleges policies and processes for identifying, assessing, managing, preventing, and
- (vii) mitigating risk to ensure their appropriateness.
- (viii) Develop and review a risk framework that defines the type and levels of risk the organization faces
- (ix) within the primary risk categories of business continuity, regulatory compliance and the organization's
- (x) reputation.
- (xi) Act as liaison with the organization's legal counsel.

The committee spent time over the past year implementing several important CDSS policies including the Video Camera & Recording Policy, the CDSS Policy Statement on Violence and Prevention, the Criminal Record Check Policy, and a revitalized election policy which has moved the AGM and council/executive turnover to coincide with the June 7th, 2025, CDSS Council meeting. This required a one-time extension of executive terms to 18 months. The AGM will be held in June as opposed to September starting in 2025.

The CDSS Council is excited to welcome a new Public Representative, Mr. Allan Scholz, we are excited to work with him on council to ensure transparency and give a public perspective to our decision-making process. I would like to thank committee member Dr. Erika Ridgeway for her time and assistance over the past year, Mr. Gord Gillespie, our council chair, whose experience and knowledge keep our committees running at maximum efficiency. Finally, I would like to thank Mrs. Jaime Korczak and her team in the College office. Their exceptional work behind the scenes is truly appreciated.

Respectfully submitted,
Dr. Mike Fowler, DMD
Chair
President-Elect

HUMAN RESOURCES AND COMPENSATION COMMITTEE

The objectives of the Human Resources and Compensation Committee include management, development, evaluation, succession planning, recruitment, and compensation for the CDSS. Additionally, the committee develops human resource policies and handbooks and deals with labor relations issues and compensation policies.

The committee has been meeting quarterly to ensure that the CDSS office and council are running smoothly from a personnel perspective. I would like to commend Ms. Korczak, Mr. Gillespie, and Dr. Zimmer on their oversight in the CDSS office. Jaime has provided some much-needed stability for our organization after a tumultuous past few years. Further solidifying our position was the change from an interim position to a permanent position for Dr. Zimmer as Registrar of the CDSS in January of 2024. As Chairperson of the HR Committee, I would like to thank the members of this committee (Drs. Bhargava, Fowler, and Zimmer, Ms. Korczak, Mr. Don Robinson and Mr. Gord Gillespie) for their hard work and dedication over the last 12 months as well as all of the CDSS Council for their support and guidance.

Respectfully Submitted,
Dr. Derek Thiessen, DMD, FPFA
Chair
President

FINANCE COMMITTEE

The committee is very proud to conclude fiscal year end of 2023 with a balanced budget including a small surplus. This demonstrates an underlying emphasis on financially conscious efficiency and fiscally prudent cost cutting by the committee.

2023 saw the completion of the renovation of the CDSS office space both on time and on budget.

2023 saw an accounting system upgrade to one that is more reliable, user friendly and more economical to update and office share.

2023 saw internal staff restructuring to maximize HR utilization for the CDSS.

2023 saw safe and conservative fiscal investment of CDSS capital to maximize capital account preservation with growth.

2023 saw some dynamics with decline of registrant numbers within the CDSS, CDSS registrant permit fees to encourage compliance of standards to ensure public safety and restructuring of the Annual CDSS Convention due to financial concerns.

2023 saw Finance Committee members perform an outstanding fiduciary duty of monetary management on behalf of all CDSS members to ensure none to minimal registrant fee increases year over year.

2023 saw a successful audit being performed by MNP with minor recommendations that were immediately adopted and integrated on behalf of the registrants.

2023 also saw financial and business recommendations arranged for and recommended to our registrants by Jaime Korczak, our Executive Director. These saw thousands of dollars of savings realized by our registrants.

Finance Committee is very grateful to and would like to thank our key staff personnel on this committee with the bulk of Finance Committee work being completed superbly by Jaime Korczak and Gord Gillespie.

I would like to thank my committee members on Council, Dean Zimmer, Wes Thomson and Gord Wyatt for their

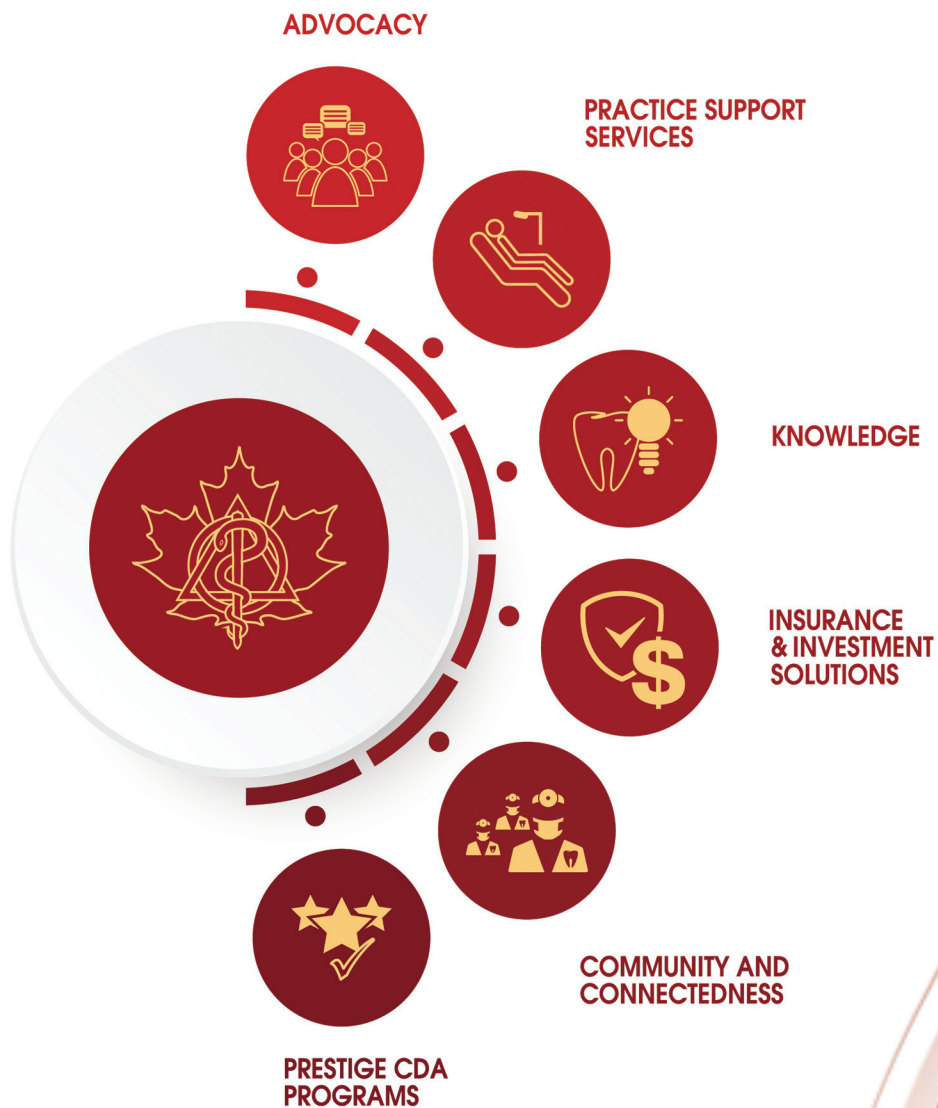
exemplary assistance and attendance with committee workings and meetings.

Respectfully submitted,
Dr. Raj Bhargava, DMD
Chair
Vice President

DISCIPLINE COMMITTEE

Nothing to report.

PARTENERED ORGANIZATION REPORTS



Annual Activities Report

May 2023 to April 2024

1815 Alta Vista Drive, Ottawa, Ontario, K1G 3Y6
www.cda-adc.ca



CANADIAN
DENTAL
ASSOCIATION



A Message from the CEO

The Canadian Dental Association (CDA) is pleased to present this report on activities completed between May 1, 2023, and April 30, 2024. Much has happened during the past year—most notably the launch of the federal government’s Canadian Dental Care Plan (CDCP) in December.

Reflecting on the past year, I am struck by the milestones, accomplishments and learnings that have enabled us lead as Canada’s national voice for dentistry. And in no small way, this has been a result of the commitment demonstrated by the entire CDA team on behalf of the dental profession. As such, I would like to extend my sincerest gratitude to our dedicated staff, committee and working group participants, community stakeholders, and our Board of Directors who all play an integral role in CDA’s success.

Throughout the year, we continuously met with federal policy and decision makers, and worked collectively with the provincial and territorial dental associations (PTDAs) with a shared goal focused on data, facts, and solid advice, so the federal government had the information needed to design an effective CDCP. Our expectation is that this generational opportunity and significant investment in oral health care will improve access to care and spearhead further improvements in the overall health of people living in Canada and those in need for generations to come. Remarkably, that was just one of several critical focus areas in the past year.

Expanding the CDCP

Having launched the Canada Dental Benefit for children under 12 last year, the federal government announced how it will rollout coverage for the CDCP in stages. Although full details will only be released between now and into the Fall of 2024, enrollment began with Canadians aged 87 and above, and will be staggered until all nine million eligible adults are registered, likely by 2025. Discussions around federal reimbursement, co-pays and the administrative aspects of the program continue. We appreciate the hands-on leadership of CDA’s corporate members in the goal of insisting that the CDCP works for patients and the dental offices on whom the success of the program relies upon.

Beyond the CDCP

CDA continued its work to improve the profession and ensure oral health professionals from coast to coast to coast could access world-leading tools and support.

In October, we launched a new [Working Mind](#) partnership with the Mental Health Commission of Canada to empower dental professionals to prioritize their mental well-being while delivering top-notch care. We took principled stands on matters of public policy and worked to increase public awareness about the importance of good oral health practices.



CDA also continued its ongoing efforts to improve Practice Support Services, including Secure Send, CDAnet and ITRANS, so dental offices can be at their best in providing world-class care to patients and devoting less time to back-end administrative tasks.

Looking Ahead: A new Strategic Plan for CDA

The activities undertaken by CDA management and staff are always rooted in, and aligned to, our vision, mission, and values. This year, our Board of Directors has done incredible work to codify these foundational elements of our DNA, as we have worked to develop a first-ever multi-year strategic plan for CDA, which is expected to launch later in 2024.

Over the last year, the leadership of our Board of Directors was instrumental in guiding the development of the strategy through our Strategic Planning Working Group. To ensure a sense of ownership and accountability, this collaborative effort engaged Corporate Members, our Board of Directors, and our staff since last April. Each phase of input received was meticulously considered, leading to the refinement of the draft plan to accurately reflect the valuable insights provided. In a bid for transparency and stakeholder satisfaction, our draft plan was shared with these key stakeholders through an eight-week survey conducted from December to January, revealing a substantial level of support while incorporating recommendations that have improved the clarity and strength of the plan. The elements of this comprehensive plan will serve as essential benchmarks for our Board of Directors, underlining its pivotal role in shaping our organizational trajectory over the next five years.

As CDA continues to play an active role in national conversations about oral health, we will carry forward the learnings of this exceptional year to help the profession continue to level up and increase our impact on Canadians from coast to coast to coast.



Dr. Aaron Burry
Chief Executive Officer



Table of Contents

1. Overview	5
Who We Are	5
Our Mission	5
Our Vision	5
Prioritizing Goals of Canadian Dentists	5
What We Do	5
CDA Board of Directors	6
2. Advocacy	7
3. Knowledge	14
4. Practice Support Services	27
5. Mental Health and Wellness	33
6. Strengthening our Commitment to DEI	34
7. Prestige CDA Programs and Other Areas of Work	35
8. Other CDA Projects	39
9. CDA Transformational Journey	41
CDA Committees, Task Forces and Working Groups	42
CDA Voting Representatives	42
CDA Corporate Members	42
CDA Sections	43
Dental Stakeholders	43
Health Care Stakeholders	43



1. Overview

Who We Are

Founded in 1902, and representing the dental profession across Canada, the Canadian Dental Association (CDA) is a trusted brand and source of information for and about the dental profession, on national and international issues. CDA is a federally incorporated not-for-profit organization whose corporate members are Canada's provincial and territorial dental associations (PTDAs). CDA represents over 21,000 practising dentists from across the country.

Our Mission

The CDA is the national voice for dentistry dedicated to the promotion of optimal oral health—an essential component of general health—and to the advancement and leadership of a unified profession.

Our Vision

- A Healthy Public
- A Strong Profession
- A United Community

Prioritizing Goals of Canadian Dentists

Provincial and territorial dental associations, faculties of dentistry, dental regulatory authorities, and specialty groups, each have specific mandates and objectives that collectively support the dental profession. CDA connects all stakeholders across the dental profession, prioritizing the goals of CDA's Corporate Members, and through the collective actions of these organizations, Canadian practising dentists.

Corporate Members, dentists and dental and health care stakeholder groups benefit from CDA every day. CDA works with Corporate Members and stakeholder groups to discuss professional issues at the national level and to identify potential solutions for a range of issues impacting dentistry, oral health, small business relations, and more.

What We Do

CDA's three primary areas of focus include Knowledge, Advocacy and Practice Support Services. We also offer a range of programs, such as the Dental Aptitude Test (DAT) and the CDA Seal Program, and other services to support the dental profession in meaningful ways.

Advocacy: CDA lobbies the federal government on issues facing the dental profession in Canada and the oral health of Canadians. CDA's primary advocacy tools include government relations, media relations, and public education. In addition, CDA communicates with regulators and insurance companies to advocate for dentists and to help ensure they are treated fairly and can provide the quality care they are trained to provide to their patients.

Knowledge: CDA captures, analyzes, and organizes information to create knowledge about oral health and the dental profession. This knowledge is used for the development of policies that promote optimal oral health and to support CDA's advocacy and practice support activities. We communicate this knowledge also through social media and our other key communications vehicles, such as our print and digital magazine – CDA Essentials, the weekly electronic CDA newsletter, and JCDA.ca – Canada's only peer-reviewed dental journal.

Practice Support Services: CDA provides a range of practice support services and programs, which help ensure that dentists are efficient, secure, and compliant with applicable regulations when sending e-claims, e-referrals, and patient records electronically.



CDA Board of Directors

Each PTDA that is a Corporate Member of CDA has one (1) elected Board representative, who acts as a representative of the PTDA and serves as a key link between the PTDA and CDA. The three northern territories have a single representative on CDA Board. Dentists access CDA programs and benefits through membership in their provincial/territorial association.

The Association des chirurgiens dentistes du Québec (ACDQ) is currently not a Corporate Member of CDA. However, since 2008, Quebec-based dentists can access CDA programs and benefits as CDA Affiliate Members.

CDA Board of Directors (May 2023–April 2024)



Dr. Heather Carr
President



Dr. Joel Antel
President-Elect



Dr. Bruce Ward
Vice-President



Dr. Brian Baker
Saskatchewan



Dr. Mélissa Gagnon-Grenier
Northwest Territories,
Nunavut, and Yukon



Dr. Lesli Hapak
Ontario



Dr. Dana Coles
Prince Edward Island



Dr. Raymon Grewal
British Columbia



Dr. Stuart MacDonald
Nova Scotia



Dr. Jerrold Diamond
Alberta



Dr. Marc Mollot
Manitoba



Dr. Jason Noel
Newfoundland and
Labrador



Dr. Kirk Preston
New Brunswick



Dr. Aaron Burry
Chief Executive Officer



2. Advocacy

CDA’s advocacy efforts ensure that oral health care remains a recognizable and significant public health issue. CDA informs key decision makers about matters that impact dentistry and the oral health of all of Canada’s populations.

CDA uses its national voice strategically to raise issues and awareness around concerns facing the dental profession in the country. As part of its advocacy efforts, we engage directly with a range of federal government departments, as well as members of the House of Commons, the Senate and the Prime Minister’s Office.

Throughout 2023-24, CDA was heavily involved in advocacy at the federal level as the government prepared to launch the Canadian Dental Care Plan (CDCP). We also participated actively in advocating about other issues such as oral health workforce challenges, stop marketing to kids, healthy eating, and quitting smoking.

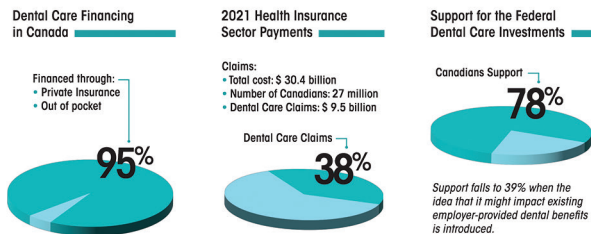
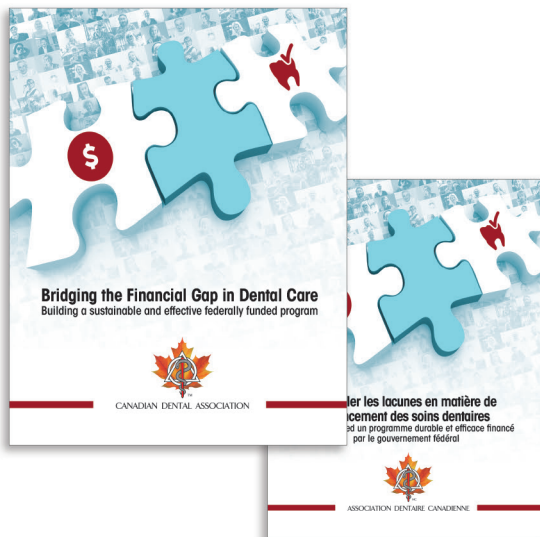
Recent advocacy initiatives are highlighted in the sections below.

CDA Federal Budget Advocacy

Reflecting CDA’s ongoing advocacy on federal investments for oral health in Canada, the federal government released **Budget 2023**, which included the announcement of an additional funding of \$13 billion over five years, starting in 2023-24, and \$4.4 billion ongoing to Health Canada to implement the CDCP.

In its **news release**, CDA applauded the federal government’s continued commitment to improve the oral health of people living in Canada and increase access to dental care for those who need it the most with this historic, once-in-a-lifetime investment. CDA stressed that its policy recommendations from **Bridging the Financial Gap in Dental Care: Building a sustainable and effective federally funded program**, a policy paper released in February 2023, are meant to serve as a roadmap for the federal government as it seeks to enhance access to dental care for all Canadians.

Budget 2023 also included many other priority areas for oral health, including \$250 million over three years and \$75 million ongoing to establish an Oral Health Access Fund that will complement the CDCP by investing in targeted measures to address oral health gaps among vulnerable populations—particularly in rural and remote communities—and reduce barriers to accessing care. Another \$23.1 million was announced to collect data on oral health and access to dental care in Canada, which will inform the rollout of the CDCP.



Key Recommendations of CDA Policy Paper

Any federally funded dental care program or oral health initiative should be designed to:

- be compatible with a holistic approach to oral health that acknowledges the interconnection between oral health and general health and wellbeing.
- promote patient-centred care and a patient’s right to choose their provider.
- prioritize preventative care.
- support the delivery of care primarily through the existing network of dental offices, supplemented as needed by public clinics.

CDA’s key policy recommendations from Bridging the Financial Gap in Dental Care Building a sustainable and effective federally funded program.



Cabinet Shuffle

In the summer of 2023, Prime Minister Justin Trudeau shuffled his Cabinet, resulting in the appointment of new ministers for federal departments that CDA regularly engages with, including Health Canada. Mark Holland, a former Government House Leader, was named the new federal health minister. Following the shuffle, CDA sent congratulatory letters to new federal ministers and met with key ministers and their staff, including Health Minister Holland, to introduce CDA and establish new relationships, while raising awareness around important oral health issues.

CDA on the Hill

In April 2023, CDA organized a Day on the Hill, which included meetings with government officials and parliamentarians to discuss ongoing oral health and advocacy efforts, particularly on the federal dental care plan, which was still in the formulation stages at the time.

During the 2023-24 political year, CDA focused on strategic meetings with leaders and key officials, including the Prime Minister and the Leader of the New Democratic Party (NDP). We held a reception during our Hill Day, which was hosted by all three political parties—Liberal, Conservative and the NDP—and was well attended by key officials.



CDA held multiple meetings with government officials throughout the year.

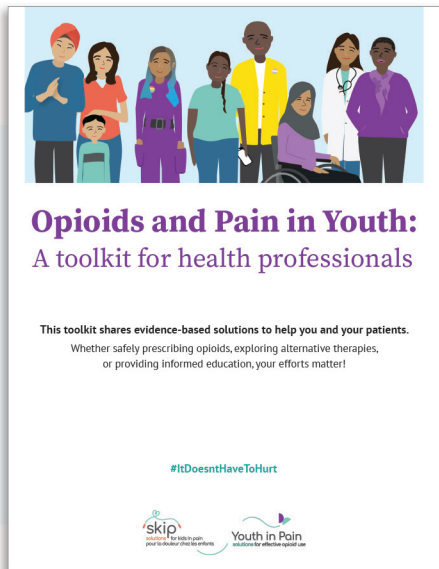


Youth in Pain: Solutions for Effective Opioid Use

CDA, through participation in a national Advisory Group made up of experts, represented the voice of dentists in a Solutions for Kids in Pain (SKIP) project. SKIP is a national knowledge mobilization network on a mission to improve children’s pain management by mobilizing evidence-based solutions through interprofessional coordination and collaboration.

In October 2022, SKIP launched “Youth in Pain: Solutions for Effective Opioid Use”—an 18-month Health Canada funded project—to help transform evidence into action, share knowledge, improve practice, and raise awareness about the use of opioids for pain in youth for both families and health professionals.

One of the outcomes of this project was the publication of *Opioids and Pain in Youth: A Toolkit*. This toolkit was co-produced by SKIP’s six children’s health care institution hubs and their patient partners, and CDA provided essential feedback to improve the ‘acute dental pain’ section of this material.



CDA provided essential feedback to improve the ‘acute dental pain’ section of this SKIP toolkit.

Consultations and Joint Letters:

- In June 2023, CDA submitted a consultation paper to Health Canada regarding restricting food advertising primarily directed at children.
- In October 2023, CDA signed a joint letter from the Stop Marketing to Kids Coalition to Minister Holland, advocating for more restrictions around marketing to kids regulations, specifically, the restriction of point-of-sales marketing.
- In December 2023, CDA signed another joint letter from the Stop Marketing to Kids Coalition to the Treasury Board of Canada, advocating for the timely implementation of more restrictions surrounding marketing to kids regulations.
- In January 2024, Dr. Heather Carr signed a joint letter from the National Tobacco Coalition to Finance Minister Chrystia Freeland, recommending that tobacco taxes be increased, and that the cost recovery fee be applied to both tobacco products and vaping products.
- In January 2024, CDA signed a joint letter from the Extended Health Practitioner Coalition to the Minister of Employment, Workforce Development and Disability Inclusion, recommending that the Canada Student Loan Forgiveness Program be expanded to other eligible health occupations.



Canadian Dental Care Plan (CDCP)

The CDCP is a federal government program that represents a generational opportunity to improve access to care and overall health of millions of Canadian residents who do not have access to dental care.

CDA's objective from the beginning has been to advocate for a plan that benefits all Canadians. We stated from the onset of the CDCP's development that if the federal government gets it right, this new program has the potential to support the oral health and well-being of eligible low-income Canadian residents who face barriers to dental care, as well as empower dentists to focus on what they do best—caring for patients' oral health.

CDA also advocated for a CDCP that would not disrupt Canada's existing oral health care system. This includes safeguarding patients' access to dental care by respecting the current workplace, school, and group dental insurance systems. We advocated for a program that would work with existing federal, provincial, and territorial government dental programs, to ensure patients can get all the care they need.

Since the announcement of additional funding in Budget 2023 towards a federal dental care program, CDA worked closely with provincial and territorial dental associations (PTDAs), as well as directly with the federal government, to help develop and shape the policy parameters around the new program. Given the importance of the issue, CDA undertook significant policy work around the CDCP, including gathering information, conducting surveys, and ensuring that policy papers were submitted to the federal government at the right time and that they were received by the right officials.

The collaborative effort with our PTDA partners involved significant work to consolidate data on oral health across jurisdictions and provide technical submission papers to Health Canada, such as briefing notes on dental service fee guides and de-insurance risk, to help inform the development of the CDCP.

CDA's president Dr. Heather Carr and CEO Dr. Aaron Burry along with other stakeholders were present on December 11, 2023, when the federal government formally announced the phased rollout of the CDCP at a press conference.

Throughout January and February 2024, CDA met with Health Minister Mark Holland, Deputy Health Minister Stephen Lucas, and senior political staff on multiple occasions to advocate on behalf of the dental profession and discuss issues pertaining to the optimal oral health of Canadian residents. In collaboration with PTDAs, we shared critical recommendations that will both improve the CDCP and enhance provider participation in the program. CDA always expressed, in clear terms, that the CDCP will only be successful if dentists are able to provide care under the program for eligible patients.

As CDCP continues to be developed and implemented in 2024, CDA will work with PTDAs and other stakeholders to advocate on behalf of the profession and ensure that the program promotes greater access to oral health care.

Celebrating Success

CDA's advocacy efforts were successful in producing several key outcomes, including:

- CDA has long advocated for targeted investments to improve access to oral health care. The 2023 federal budget included an unprecedented additional funding for the implementation of the CDCP. This additional funding also reflected recommendations found in CDA's most recent policy paper, and it promises to yield long-term gains in oral and overall health.
- Although the CDCP currently still has room for improvements and areas of concerns for dentists, CDA, in collaboration with PTDAs, moved several of the initial policy parameters around the program to make it better, including improving specific coverage elements and a clearer provider agreement, resulting in an improved version that was released in early 2024.
- Through CDA's advocacy efforts, the Non-Insured Health Benefits (NIHB) program has made **vital improvements** to administrative processes for the replacement of select partial removable dentures. Previously, NIHB patients needed providers to submit a pre-determination request to replace partial removable dentures, which often created barriers to care, particularly in remote communities. This change is an important step forward in reducing barriers to oral health care.

CDA will continue to work collaboratively with the Government of Canada by providing evidence-based recommendations and advocating for better oral health care in Canada.



CDA's Recommendations for the 2024 Federal Budget

Reflecting CDA's ongoing advocacy priorities, we submitted the following recommendations to the Department of Finance's 2024 pre-budget consultations:



1. CDA recommends that the federal government support the oral health care sector in addressing human resource challenges and staffing shortages that are impacted by an increasing Canadian population and more Canadians having access to oral health care coverage as the CDCP is implemented.



2. CDA recommends that the federal government extend the Canada Student Loan Forgiveness Benefit to dentists and other oral health professionals coupled with other incentives when choosing to practice in underserved communities.



3. CDA recommends that the federal government support foreign trained dentists by investing in increased education on the requirements for obtaining a license in Canada, investments in gap training, and investments to increase capacity of equivalency exams.



4. CDA recommends that the federal government improve accessibility of the Non-Insured Health Benefits (NIHB) program through improved access to surgical suites, a comprehensive review of the NIHB program, and creating an indigenous oral health investment strategy.



5. CDA and the Indigenous Dental Association of Canada jointly request that the federal government provide funding for cultural safety programs in dentistry.



6. CDA recommends that the federal government take concomitant steps to mitigate the risk of de-insurance of employer-sponsored dental coverage due to the implementation of the CDCP.



7. CDA recommends that the federal government take the necessary steps to establish and maintain processes to ensure that the CDCP is regularly reviewed, continually improved, and appropriately funded.



Advocacy Issues in 2024

In 2024 and beyond, CDA will continue to engage the federal government in efforts to enhance the CDCP. Our objective is to help ensure that the government remains committed to examine the fee grids for 2025 and review the administrative framework of the CDCP. By doing so, the potential for the CDCP to provide access to optimal and barrier-free oral health care for people living in Canada can be achieved. We remain hopeful that the CDCP adopts all our recommendations and look forward to reviewing the program in its entirety when more details are announced over the coming months. Our guiding principles remain that any federally funded dental care program should:



be compatible with a holistic approach to oral health that acknowledges the interconnection between oral health and general health and well-being;



promote patient-centred care and a patient's right to choose their provider;



prioritize preventative care; and



support the delivery of care primarily through the existing network of dental offices, supplemented as needed by public clinics.

Technical Submission Working Group

CDA worked closely with PTDA's to provide administrative, analytical and policy support throughout the year on the Technical Submission Working Group, whose mandate was to obtain and analyze data, study various issues related to the CDCP and inform the federal and provincial governments on technical issues related to the CDCP. The working group released four major technical submissions throughout the year. The final one—a roll-up report of all the documents—was made publicly available via PTDA websites. The Technical Submission Reports included:

- Understanding Dental Services Fee Guides
- De-Insurance Risk and Budgetary Impact
- CDCP Design Options and Data Projections





Canadian Dental Leaders Forum (CDLF)

CDA has been instrumental in organizing and facilitating several meetings of the CDLF, which is a forum comprising of the leadership of CDA and PTDA's. The purpose of this forum is to address matters related to the future of the profession that are outside of the mandate of any one organization. In 2023-24, CDA hosted six meetings of the forum, which focused on providing direction and guidance on the CDCP.



Images from the CDLF meetings held in Toronto last year..

Data Analysis

Since the initial announcement of the CDCP, CDA has been gathering, synthesizing, and interpreting data from various sources in order to better understand and make knowledge-based policy choices. CDA has long standing relationships with Statistics Canada and other data stakeholders and has developed information to help better inform about CDCP and its impact. CDA has other internal data sources that have also been used to inform policy and continues to be a valued source of data and information on oral health. One significant uses of such data was to develop a modelling tool to better inform the inputs and outputs of CDCP projections as well as oral health workforce needs.

Health Workforce Capacity

The current labour shortage cycle will regrettably take far more time to resolve than anyone would like, given its complexity and wide-ranging impact across the services sector. Particularly, health care innovative solutions will be needed to fix this challenge that will only be increased as a result of the CDCP implementation and the knowledge that many regions across Canada will experience significantly reduced labour capacity. As CDA continues to monitor this issue on an ongoing basis, we are working with a range of stakeholders to better understand the complex shifts in the labour force that are not just affecting Canada but global in nature.

In 2023-24, CDA continued collaborating and working with government departments, including Health Canada and Statistics Canada, as well as agencies such as the Canadian Institute for Health Information to initiate workable strategies targeted at improving workforce capacity and our preparation to send an early signal to stakeholders of an impending workforce capacity crisis. As the national voice for dentistry, CDA is uniquely positioned to assess and forecast estimates on the supply of dentists and the demand for dental care in the coming years, which will likely be critical with the expansion of dental care to about 13 million more Canadians through the CDCP.



3. Knowledge

Corporate Communications

Corporate communications is at the heart of CDA’s brand awareness and credibility. Our teams work cohesively to capture and disseminate information about oral health and the dental profession through various tools such as press releases, interviews, marketing materials, and more. In doing this, we ensure that all materials reflect CDA’s brand in a favourable manner. With Corporate Members and their member dentists being our primary audience, CDA strives to ensure that stakeholders receive timely and relevant information about key issues affecting the dental profession and the oral health of Canadians.

As technologies evolve, our communications team is constantly looking for new methods and tools to bridge information gaps between our various audiences. Some of the tactics leveraged in May 2023 to April 2024 to disseminate targeted information to dentists, stakeholders, the media, governments, our employees, and the general public can be seen in the snapshot below.

CDA Corporate Communications Snapshot



A snapshot of CDA’s key communications activities during May 2023 to April 2024.

CDA Essentials magazine

CDA Essentials magazine has featured information related to CDA’s advocacy efforts in the wake of the announcement of the interim Canada Dental Benefit (CDB) and the phased roll-out of the Canadian Dental Care Plan (CDCP) in December 2023. Other CDA Essentials article highlights include features on dental workforce challenges; the burden of burnout on dentists; exploring AI and dentistry; and using person-first language in the dental office. Between May 2023 and April 2024, 6-English and 6-French editions of CDA Essentials magazine were published





Journal of the Canadian Dental Association (JCDA.ca)

Canada's only peer-reviewed dental journal, JCDA is an open access publication that publishes original research articles indexed in Medline, Journal Citation Reports and Science Citation Index. Between May 2023 and April 2024, JCDA.ca published the following eight original research articles:

May 2023

- [Factors Modulating Fallow Period of Aerosol-Generating Dental Procedures in a Clinical Setting](#)

June 2023

- [The Prevalence of Patient Aggression Toward Dental Students at a Canadian University Teaching Clinic](#)

July 2023

- [British Columbia Dentists' Perceptions and Practices Regarding HPV Vaccinations: A Cross-sectional Study](#)
- [The Use of Medically Required Dental Services by Youth with Intellectual/Developmental Disabilities in British Columbia, Canada](#)

October 2023

- [Pattern of Dental Emergencies at a Pediatric Tertiary Care Hospital during the COVID-19 Pandemic: A Retrospective Study](#)

November 2023

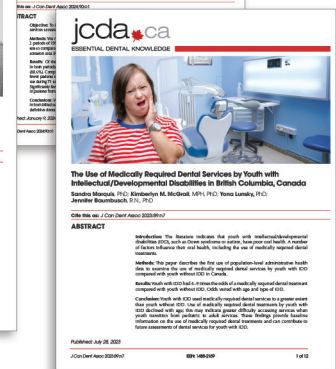
- [Integrating Equity, Diversity, and Inclusion Throughout the Lifecycle of Artificial Intelligence for Better Health and Oral Health Care: A Workshop Summary](#)

January 2024

- [Impact of Delayed Dental Treatment during the COVID-19 Pandemic in an Undergraduate Dental Clinic in Southwestern Ontario, Canada – A Retrospective Chart Review](#)

February 2024

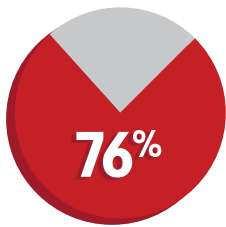
- [Persistent Toothache Despite Multiple Dental-related Treatments: How Could this Be?](#)



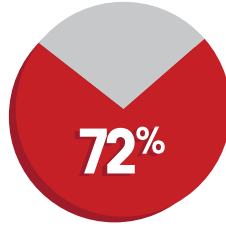


CDA Readership Survey

This survey is conducted every few years as a best practice, to learn more about how Canadian dentists experience CDA knowledge products and to use their feedback to help make improvements to CDA publications. The 2023 readership survey was conducted in October 2023. Top level results include: 76% agree CDA Essentials is a “credible source of information”; 72% are “satisfied or very satisfied” with CDA Essentials content; 81% said CDA Essentials articles are “easy to read” and 74% agreed the “quality of writing” is high in the magazine. A more detailed summary of survey results will be published in CDA Essentials later in 2024.



76%
CDA ESSENTIALS IS “A SOURCE OF CREDIBLE INFORMATION.”



72%
“SATISFIED” OR “VERY SATISFIED” WITH THE CONTENT FOUND IN CDA ESSENTIALS

81% HIGHEST RANKINGS, DESCRIBING CDA ESSENTIALS CONTENT AS “EASY TO READ”

74% HIGHEST RANKINGS, WHEN ASKED TO RATE THE “QUALITY OF WRITING” IN THE MAGAZINE

CDA Oasis

The CDA Oasis Discussions website continues to host discussions on issues that have impact on the dental profession. This year’s series covered a wide range of topics about Artificial Intelligence (AI), FDI World Dental Federation policies, mental health and wellness, clinical issues, and key dentistry-related events in Canada. Between May 2023 and April 2024, CDA produced 52 blog/video posts garnering nearly 150,000 views on the CDA Oasis Discussions website from over 115,000 visitors. CDA’s Vimeo channel received over 36,000 views and 404,000 impressions.

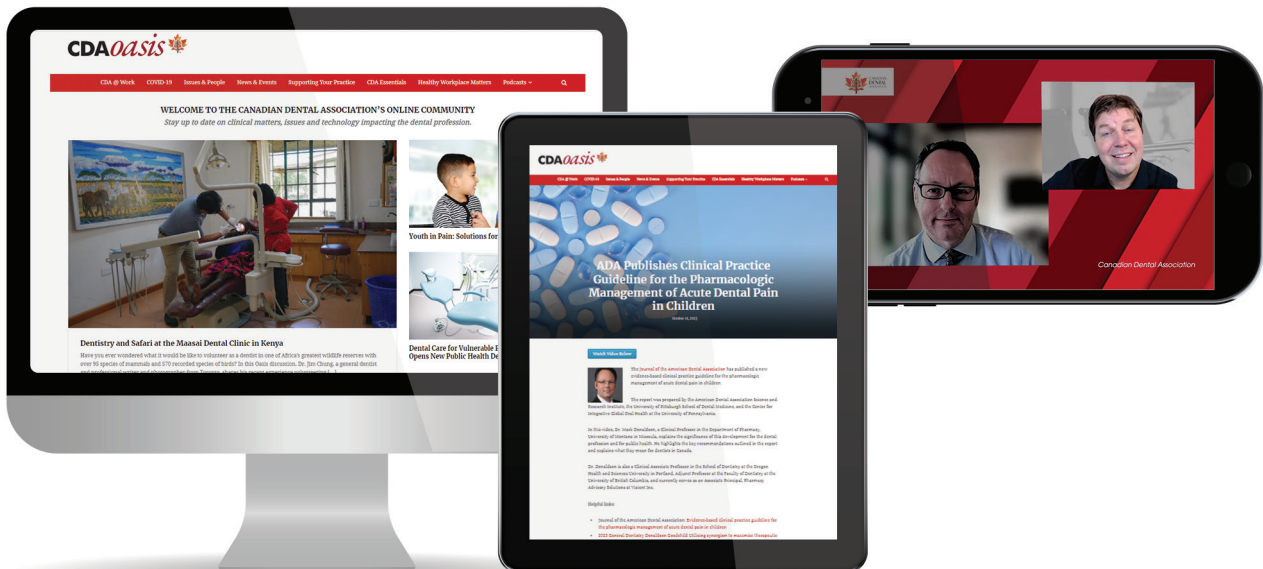
CDA thanks all interviewees who participated in last year’s CDA Oasis Discussions series. If you’re interested in participating in the series to talk about issues that would be of interest to the Canadian dental community, please reach out on publications@cda-adc.ca with brief details, photos and/or web links to be considered. Below is a roundup of video discussions held during the last year.

Discussions in alphabetical order

- [ADA Publishes Clinical Practice Guideline for the Pharmacologic Management of Acute Dental Pain in Children](#)
- [BCDA Hosts Webinar on Positive Workplace Culture](#)
- [Behaviour Management for Pediatric Patients](#)
- [Cannabinoids and the Dental Patient](#)
- [CARDP Annual Scientific Meeting 2023 comes to Montreal](#)
- [CDA Awards 2022-23: Award of Merit](#)
- [CDA Awards 2022-23: Distinguished Service Award](#)
- [CDA Awards 2022-23: Honoured Member Award](#)
- [CDA Awards 2022-23: Medal of Honour](#)
- [CDA Awards 2022-23: Mentorship Advancement Award](#)
- [CDA Awards 2022-23: Oral Health Promotion Award](#)
- [CDA Awards 2022-23: Special Friend of Canadian Dentistry](#)
- [CDA Oasis Podcast: Delivering Care to Indigenous Communities](#)
- [CDA/Abacus Data Survey and Tracking Results: Wave 14](#)
- [Changing How We Talk to Patients about Gum Disease](#)
- [Connecting People and Knowledge for Good](#)
- [Dalhousie University Launches Clinical Trial in Oral Cancer Prevention](#)
- [Dental Care for Vulnerable Populations: Red Deer Opens New Public Health Dental Clinic](#)
- [Dentistry and Safari at the Maasi Dental Clinic in Kenya](#)
- [Does Artificial Intelligence Pose a Security Threat to Dental Offices?](#)



- [Factors Affecting the Value of Your Practice](#)
- [FDI World Dental Federation Policy Statements Update](#)
- [FDI World Dental Federation Policy Statements Update](#)
- [Healthy Workplace Matters: Mental Health Resources](#)
- [How to Become a More Resilient Dentist](#)
- [Introducing Dr. Heather Carr: CDA President 2023-24](#)
- [Introducing the Canadian Oral Health Screening Tool for Seniors](#)
- [Introducing the New Alberta Dental Association](#)
- [Managing Burnout: The Stress Container Model](#)
- [Managing Medically Compromised Patients in the Dental Office](#)
- [Managing Patients on Anticoagulant and Antiplatelet Medication](#)
- [Managing Patients on Bisphosphonates and Other Medications that Increase Osteonecrosis Risk](#)
- [Managing Patients with Diabetes in the Dental Office](#)
- [Managing Patients with Hypertension in the Dental Office](#)
- [Managing Patients with Implanted Cardiac Devices](#)
- [October 15 is National Indigenous Oral Health Day](#)
- [Oral Health Challenges in Indigenous Communities](#)
- [Oral Inflammatory Load and the Prediction of Vascular Function in Young Adults](#)
- [Ensuring Implant Health in the Dental Office](#)
- [Social Media Best Practices for Dentists](#)
- [Southwestern Public Health Launches Mobile Dental Clinic](#)
- [Statistics Canada Reports Rise in Rates of Oropharyngeal Cancer](#)
- [The Future of Geriatric Dentistry](#)
- [The Use of Artificial Intelligence in Dentistry](#)
- [The Working Mind](#)
- [The year that was: CDA Essentials and CDA Oasis highlights 2023](#)
- [Trauma-informed Care in the Dental Office](#)
- [University of Manitoba to Develop Point of Care Strip Test to Detect Periodontal Gum Disease](#)
- [Using Artificial Intelligence to Identify Unknown Dental Implants](#)
- [When Can Dental Care be Provided After a Heart Attack or Stroke?](#)
- [World AMR Awareness Week 2023](#)
- [World Oral Health Day 2024](#)
- [Youth in Pain: Solutions for Effective Opioid Use](#)





CDA Newsletter

Every week, CDA sends out newsletters in both French and English to more than 17,000 subscribers, including CDA staff. The newsletter carries a range of information, curated from multiple sources, including CDA Essentials magazine, CDA Oasis, JCDA and dentistry news stories. From May 2023 to April 2024, we issued 49 English and 49 French editions of the CDA Newsletter. The Newsletter is powered by rasa.io—artificial intelligence (AI) technology that recommends articles to read based on topics that interests readers the most.



CDA's Media Monitor

Produced in-house five days/week, the CDA Media Monitor compiles news stories from a wide range of sources on what the media is saying about dentistry in Canada and around the globe, topics aligned with CDA's advocacy efforts and trends pertaining to overall health, the environment and technology. The CDA Media Monitor is shared internally within the organization and with other key parties, including CDA elected officials and board members, Corporate Members CEOs, their elected officials, and communications staff. It helps stakeholders obtain valuable insights into the reach and influence of discussions about the dental profession.



Media Relations

In the past year, CDA received more than 75 media inquiries. As expected, most of those inquiries were from media channels requesting to know more about CDA's position on the federal government's dental program. Those inquiries led to the publication of multiple stories, including those listed below.

Some examples of stories that featured CDA in the news in 2023-24

- [TikTok Debunked: Oil pulling — what it is and can it really whiten your teeth?](#) Yahoo Style, June 21, 2023
- [Cost, lack of insurance keeping Canadians from seeing the dentist](#), Global News, November 6, 2023
- [First appearance on The Current with Matt Galloway](#), CBC, November 9, 2023
- [Seniors over 87 can apply to join federal dental plan starting next week](#), [The Canadian Press](#), December 11, 2023
- [What do dentists think of Ottawa's new dental care program?](#) Cable Public Affairs Channel (CPAC) (video) December 12, 2023
- [Second appearance on The Current with Matt Galloway](#), CBC, December 12, 2023
- [Canada's dental-care plan to take claims soon, but dentists still waiting on details](#), [The Canadian Press \(Global News\)](#), January 31, 2024
- [1M seniors will qualify for feds dental care plan](#), CTV News, Toronto (video), March 7, 2024



CDA Annual Activities Report (May 2023–April 2024)

CDA issued the following news releases and statements between May 2023 and April 2024. These communications serve as essential tools for keeping our stakeholders informed about significant developments and updates in dentistry. They play a crucial role in maintaining transparency, engaging with dentists, policymakers, and the public, and reinforcing CDA’s commitment to excellence and leadership in the oral health care landscape.

News Releases

- [CDA Reacts to Federal Government’s Phased Rollout of Canadian Dental Care Plan Beginning with Eligible Seniors, December 11, 2023](#)
- [CDA Marks World AMR Awareness Week, November 17, 2023](#)
- [Honouring Our Heroes: CDA’s Tribute to Veterans, November 10, 2023](#)
- [CDA Offers Mouth-Healthy Tips for Halloween, October 30, 2023](#)
- [CDA Partners with Mental Health Commission of Canada to Promote Workplace Mental Health, October 16, 2023](#)
- [CDA Observes the National Day for Truth and Reconciliation, September 29, 2023](#)
- [CDA Welcomes Mark Holland as New Minister of Health, July 26, 2023](#)

Statements and Op-Eds

- [The Canadian Dental Care Program: Dentists’ Recommendations and What Patients Should Know Now, February 12, 2024](#)
- [A Pivotal Moment to Increase Access to Oral Health Care, December 7, 2024](#)

The Canadian Dental Care Program: Dentists' Recommendations and What Patients Should Know Now

Dentists across the country want the CDCP to be a success. Although the federal government has consulted with CDA since the announcement, the program has not incorporated several of CDA's key policy recommendations, such as ensuring that administrative procedures do not impact or delay the provision of care to patients, and ensuring the cost of treatment provided to patients is fully covered. CDA's complete policy recommendations are outlined in our 2023 policy paper *Bridging the Financial Gap in Dental Care*.

The first six months of the program will be limited in its coverage. Many routine treatments will not be available to seniors who need this care the most. Health Canada needs to be clear with patients and providers regarding which services will be covered to avoid confusion.

Canadians should be aware the CDCP does not provide free dental care. Currently, the costs for oral health care under the CDCP for patients are unclear; however, the government has set a fee schedule that uses outdated customary provincial and territorial fee guides. Canadians will not be 100% covered for their treatments and in many cases, will be required to pay out-of-pocket for a portion of their treatment.

Canadians should be able to choose their preferred oral health care provider. Unlike traditional benefit plans, providers must sign up to the CDCP to treat patients. This is unfair to the CDCP and not in alignment with the government's commitment to improve the patient right to see their dentist. However, the federal government must get it right by empowering dentists to focus on what they do best – caring for their patients' oral health.

barriers to access. When surveyed, nearly half of dentists (including Quebec) said they needed more details to make an informed decision about whether to participate in the program. It is anticipated very few dentists will want to commit to any program that does not provide clear terms and conditions. What are CDCP patients supposed to do if their preferred provider does not participate? CDCP patients deserve the same options as Canadians with private insurance, who have access to any dentist who is accepting new patients. As CDA president and a practicing dentist, I know it's critical that the CDCP respects existing dentist-patient relationships and fosters development of new dentist-patient relationships with underserved Canadians. It is vital that participation in the CDCP is simple for providers and patients.

My recommendation for patients is to become fully informed about the CDCP and to ask their dental office if they are planning to participate. Patients are also encouraged to carefully consider the impact of dropping their current dental insurance. Dropping existing coverage will render them ineligible for CDCP.

The CDCP represents a once in a lifetime opportunity to make significant improvement to the oral health outcomes for millions of Canadians. Given such a complex and challenging program to implement, we acknowledge Minister Holland's commitment to continue to improve the plan right up to and after launch. However, the federal government must get it right by empowering dentists to focus on what they do best – caring for their patients' oral health.

Dr. Heather Carr
President
Canadian Dental Association

Pivotal Moment to Increase Access to Oral Health Care

gating principles remain the same, any newly funded dental care program must be:

- compatible with a holistic approach to oral health that acknowledges the intersection between oral health and mental health and well-being;
- patient-centred care and patient right to choose their provider;
- improve preventive care and support the delivery of care primarily through the existing network of dental professionals;
- issue recommendation was that any program should not create a new administrative burden for dentists in which could delay the provision of any patient eligible for or in need of dental care;
- It is not now or never to the benefit of our patients. The program should be designed to meet the needs of the population that has been underserved by the current system.

Canada has a long history of providing dental care to its citizens. However, the current system is not working. The program should be designed to meet the needs of the population that has been underserved by the current system. The program should be designed to meet the needs of the population that has been underserved by the current system.

the CDCP is intended to cost \$13 billion over 5 years which represents a significant investment of public funding. This investment can reduce the burden on the overall health care system. If done right, better access to comprehensive care reduces the risk of public and costly dental procedures. It also allows the dental patient pool to hospital emergency departments, urgent care and reducing the strain on the broader health care system.

A program that allows dentists to focus on what we do best – caring for our patients – provides. Consistent with the best value from the health care system, CDA wants to encourage the most health care providers to participate in the program. CDA's members of the Standing Committee on Health, and all professionals, for understanding the importance of oral health and working to remove barriers to accessing oral health care, we believe the government should to see this program succeed.

Using what we still have, we can still do better. CDA will continue to work with the government and Canadians to see that the CDCP is designed to meet the needs of the population that has been underserved by the current system. Our ability to provide the best care for our patients is our goal and we will continue to work with the government to ensure that the CDCP is designed to meet the needs of the population that has been underserved by the current system.

Le Régime canadien de soins dentaires : Recommandations des dentistes et ce que les patients doivent maintenant savoir

Dr. Heather Carr
Présidente
Association dentaire canadienne

The Canadian Dental Care Program: Dentists' Recommendations and What Patients Should Know Now

Dentists across the country want the CDCP to be a success. Although the federal government has consulted with CDA since the announcement, the program has not incorporated several of CDA's key policy recommendations, such as ensuring that administrative procedures do not impact or delay the provision of care to patients, and ensuring the cost of treatment provided to patients is fully covered. CDA's complete policy recommendations are outlined in our 2023 policy paper *Bridging the Financial Gap in Dental Care*.

The first six months of the program will be limited in its coverage. Many routine treatments will not be available to seniors who need this care the most. Health Canada needs to be clear with patients and providers regarding which services will be covered to avoid confusion.

Canadians should be aware the CDCP does not provide free dental care. Currently, the costs for oral health care under the CDCP for patients are unclear; however, the government has set a fee schedule that uses outdated customary provincial and territorial fee guides. Canadians will not be 100% covered for their treatments and in many cases, will be required to pay out-of-pocket for a portion of their treatment.

Canadians should be able to choose their preferred oral health care provider. Unlike traditional benefit plans, providers must sign up to the CDCP to treat patients. This is unfair to the CDCP and not in alignment with the government's commitment to improve the patient right to see their dentist. However, the federal government must get it right by empowering dentists to focus on what they do best – caring for their patients' oral health.

Dr. Heather Carr
President
Canadian Dental Association



CDA on Social Media

Social media remains one of CDA’s major tools of communication and we have steadily increased engagement on all our platforms year after year, including Facebook, X (Twitter), Instagram, and LinkedIn. Over the past year, we have leveraged social media to not just create awareness and build trust and authority, but to convey key messages in bitesize and drive traffic to our website. Every week, followers on all channels received regular updates and important information in their newsfeed about dentistry from a national perspective, as well as general information to promote oral health maintenance and the importance of prevention.

Between May 2023 and March 19, 2024, CDA issued 844 social posts on its Facebook, X (Twitter), Instagram and LinkedIn channels (in English and French). Additionally, as a strategy to expand our reach and foster meaningful connections with our target audience, we have collaborated with more organizations than we had in the previous years to promote different campaigns on social media as well as through our weekly Oasis Discussions blog and CDA Essentials magazine. Some of those organizations include:

Organization	Campaign
FDI World Dental Federation	World Oral Health Day
CDSPI	CDSPI Member’s Assistance Program
Canadian Society for Disability and Oral Health	CDA co-developed Case Complexity Assessment Tool
Mental Health Commission of Canada	The Working Mind Mental Health Course
The Office of the Chief Dental Officer of Canada	National Oral Health Month (April)
Health Canada	Canada Dental Benefit
Health Canada	Canada’s Food Guide
Pain Canada	National Pain Awareness Week
National Dental Hygienists Association	National Dental Hygienists Week
National Dental Assistants Association	National Dental Assistants Week
Immunize Canada	National Immunization Awareness Week
Wellness Together Canada	Mental Health Week
World Dental Federation	Promotion of the official definition of oral health
Penington Institute	International Overdose Awareness Day
World Heart Federation	World Heart Day
Crown-Indigenous Relations and Northern Affairs Canada	National Day for Truth and Reconciliation
Excellence Canada and Canada Life	Healthy Workplace Month
Lung Cancer Canada	Lung Cancer Awareness Month
World Health Organization	World Antimicrobial Resistance Awareness Week
Alzheimer Society of Canada	Alzheimer’s Awareness Month
Alberta Dental Association British Columbia Dental Association College of Dental Surgeons of Saskatchewan Dental Association of Prince Edward Island Manitoba Dental Association New Brunswick Dental Society Newfoundland and Labrador Dental Association Nova Scotia Dental Association Ontario Dental Association	Pan-Canadian Public and Government Relations Dental Campaign



CDA Annual Activities Report (May 2023–April 2024)

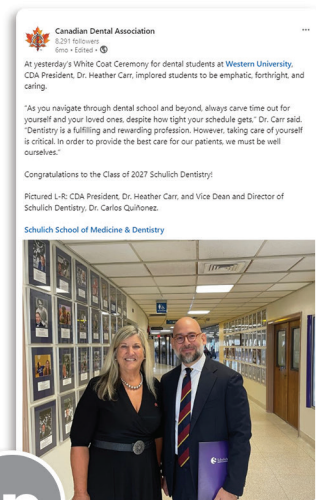
In terms of metrics, CDA’s social posts achieved an average engagement rate of 6.2% on Facebook, 2.5% on X (Twitter), 2.8% on LinkedIn, and 1.2% on Instagram. Engagement rates help us track how actively involved our audiences are with our posts by “likes”, comments and repost. CDA engagement rate on Facebook, X (Twitter) and LinkedIn are well above average by industry benchmarks.



Top Social Media Posts per Channel:



Most engaging Facebook post: October 8, 2023
<https://www.facebook.com/423626133113905/posts/763567812453067>



Most engaging LinkedIn post: September 1, 2023
<https://www.linkedin.com/feed/update/urn:li:share:7103378908896514048/>

Most engaging X post: October 23, 2023
<https://twitter.com/CdnDentalAssoc/status/1716488297529188527>



Most engaging Instagram post: September 1, 2023
<https://www.instagram.com/p/Cwpu0wEOJel/>





CDA Website

CDA’s website (www.cda-adc.ca) continues to offer important information about oral health care management and prevention to dentists and the public. As our primary communication channel, we are prioritizing the look-and-feel of the site to ensure that it is user friendly and speaks to our audiences in the simplest and most coherent manner.

In March 2024, CDA initiated a multi-phased, 12 to 18-month project to look at revamping its website. While the initial phase has just begun, it will entail developing a vision, objectives, and a definition of success; developing a content strategy that will support CDA’s current marketing efforts and digital strategy; mapping the functionality of the CDA website; and developing a governance framework that will guide the maintenance management of the website.

In the last year, our News and Highlights section—which is one of the first spots visitors see on our homepage—was regularly updated with crucial information, particularly news releases and statements.



- Homepage
- CDA Secure Send
- CDAnet
- Temporomandibular Joint Disorder (Fr)
- Practice Support Services Login
- Dental Development
- Dental Aptitude Test
- Practice Support Services
- Bruxism (Fr)
- CDA Services

Total Views



1,401,189

Total Users



535,011

Consumer and Public Opinion Research

CDA’s work with Abacus Data—a leading public opinion research firm—continued in the past year to monitor and track public opinion and behavioural trends related to current issues facing dentistry in Canada. As the COVID-19 pandemic receded from the headlines, CDA turned its research focus to the federal government’s investment in dental care, particularly through the interim Canada Dental Benefit (CDB) and the Canadian Dental Care Plan (CDCP).

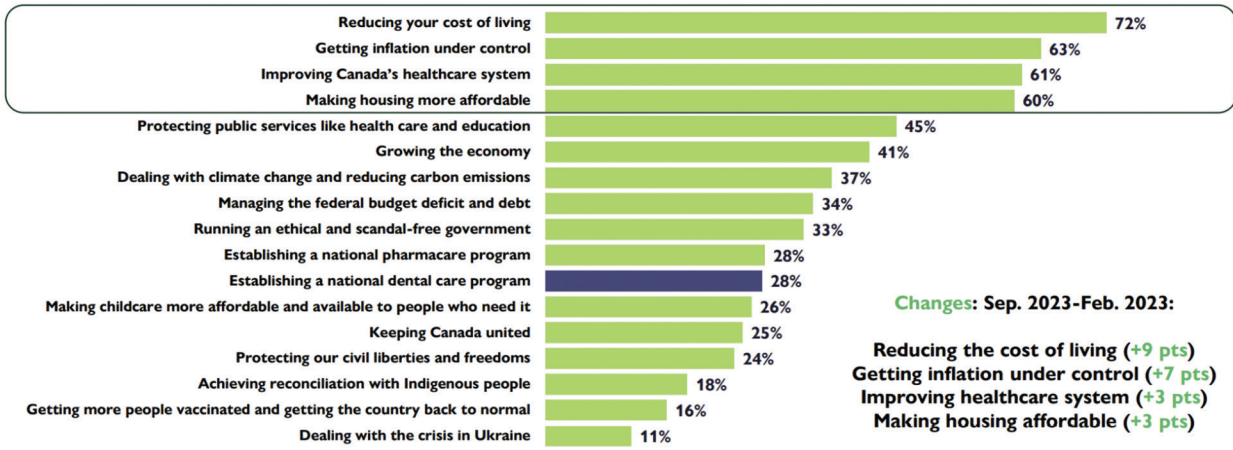
Two Abacus surveys were conducted in June 2023 and October 2023. Both surveys were targeted at Canadians eligible for the CDB and CDCP, employers who offer benefits packages, dentists, and the public. The latest survey aimed to get a sense of the public’s utilization of the CDB and effectiveness of the CDB itself. This survey evaluated:

- the public support for a national dental care program;
- awareness and understanding of the CDB;
- the affordability crisis and how it impacts patients dental care habits; and
- the level of trust and impression of dentists.

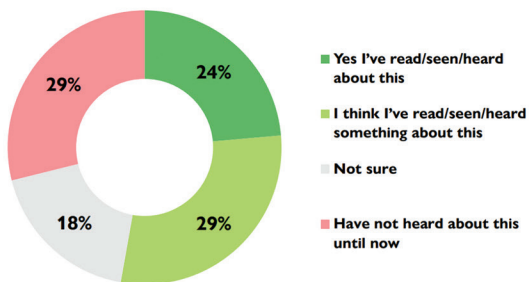


This past year witnessed the biggest dentistry news of our time—which involved the federal investments in dental care. Thus, the importance of this public polling to gain a better understanding of the public’s reaction towards the federal government’s program cannot be overemphasized. CDA shares the findings from these surveys with Corporate Member PTDA’s and other dental stakeholders. The aim is to provide data to better support advocacy and public relations priorities, and to help anticipate forthcoming changes and factors impacting oral health care demand.

Important issues for the federal government to work on



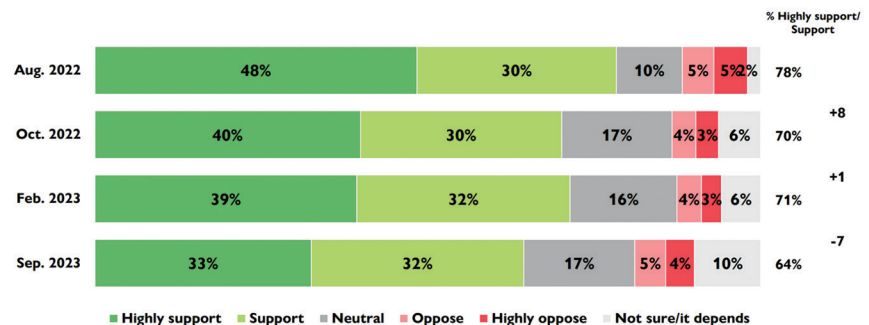
Heard about the first phase of dental investment?



In the fall of last year, the Liberal Government implemented the first part of their proposed federal investment in dental care focusing on coverage for kids under 12 in families with income less than \$90,000.

It pays up to \$650 per child per year for families with under \$70,000 of household income (\$390 per child per year for families with \$70,000 - \$79,999 of household income, \$260 in the \$80,000 - \$89,999 income bracket).

Dental plan for families whose income is less than \$90K





CDCCP Awareness Campaigns and Toolkits

Throughout the summer, CDA and PTDA undertook a strategic public relations initiative in support of government relations, laying the groundwork for targeted advocacy related to the CDCCP. The development of storyboards ensured the dissemination of key messages that aimed for a cohesive and consistent national-level narrative. This concerted effort focused on building public trust, fostering understanding, and cultivating a positive perception among government officials.

The campaign communicated the value and importance of dentistry overall, contributing to the broader objective of advocating for the CDCCP. A well-executed social media strategy played a pivotal role in increasing awareness and education, using digital platforms as an ideal space for impactful storytelling. The strategic use of these platforms aimed not only to preserve dentists as leaders in oral health but also to drive action among a broad audience. This communications approach reflects CDA's commitment to proactive engagement and supports our advocacy efforts.



A national social media campaign ran throughout the summer to help build public trust, foster understanding, and cultivate a positive perception of the dental profession among government officials prior to the official announcement of the Canadian Dental Care Plan.



In December 2023, the federal government initiated a phased approach, sending personalized letters to eligible seniors—organized by age groups—inviting them to apply for the CDCP. Anticipated to start in May 2024, dental care under the CDCP was on the horizon. Health Canada and Sun Life, contracted as the CDCP benefit administrator by the Government of Canada, were slated to issue a collaborative communication in February to oral health care providers. This included those already using Sun Life Direct, those not yet registered, and those not utilizing Electronic Data Interchange, aiming to prepare them for CDCP participation. The online provider portal was scheduled for launch in March 2024.

Responding to these developments, CDA and PTAs proactively engaged in preparations to assist front-line dentists and their teams in better understanding the implications of the federal government program, emphasizing the significance of informed decision-making. Ensuring dentists had the necessary resources to discuss the CDCP with patients—even with limited information available—became a priority.

Two toolkits were developed, which focused on three key areas:

1. Clarifying the details provided by Health Canada to dentists surrounding services/treatments covered, fee schedules, and claims processing.
2. Assisting dentists in gaining a deeper understanding of the implications of participating in the CDCP to inform decisions about their practices.
3. Creating a greater awareness among dentists about how to enroll or opt out of the CDCP, and helping them to educate patients. This involved addressing common questions regarding the nature of “free” dental care, coverage percentages, co-payments, private plans versus the CDCP, and more.

The toolkits featured CDCP practice resources, such as a counter card, customizable messaging for patient communication, a CDCP Office Poster titled “Filling in the Facts,” and materials explaining insured payment schedules. These resources were made available to dentists through their respective PTAs.

Recognizing the need for ongoing communication, CDA established a dedicated webpage to provide updates on the CDCP. This page is regularly updated as more information about the program becomes available from Health Canada.





Communications and Engagement Working Group

In recognition of the shared desire for patient and provider participation in the CDCP and access to timely and necessary dental care, Health Canada, CDA and PTDA's agreed to form a Communications and Engagement Working Group in February 2023. The purpose of the Working Group is to contribute expertise on the development, enhancement, and dissemination of communications for the public and oral health professionals and assist Health Canada with its development of accurate, effective communications. The Working Group consists of PTDA and CDA communications professionals, a senior executive and a dentist who meet regularly as key issues arise.

Participation at PTDA Conventions

Between May 2023 to April 2024, CDA attended four PTDA conventions in person:

- Ontario Dental Association Annual Spring Meeting (May 11–13, 2023), Toronto, Ontario.
- New Brunswick Dental Society Dental Conference and Annual General Meeting (May 25–27, 2023), St. Andrews, New Brunswick.
- Alberta Dental Association Alberta Wellness Summit – joint convention with CDA (June 15–17, 2023), Calgary, Alberta.
- CDA co-hosted the Pacific Dental Conference held in Vancouver, British Columbia, on March 7–9, 2024. The joint convention was another opportunity to connect and engage with dental professionals on a wide range of topics, including the latest advancements in dentistry/technology, expert insights and the CDCP.

CDA had a virtual presence at the following conventions:

- Manitoba Dental Association Convention and Trade Show (April 21–22, 2023), Winnipeg, Manitoba.
- Dental Association of Prince Edward Island Annual General Meeting and Convention (June 8–10, 2023), Woodstock, P.E.I.



CDA participated in PTDA conventions and co-hosted the Alberta Dental Association Alberta Wellness Summit in 2023 and the Pacific Dental Conference in British Columbia in 2024.

CDA promoted PTDA conventions across our social media channels before these events to encourage members to register. We continued with this promotion during the event at the trade show, general meetings and other convention activities held throughout the year. We also leveraged a dedicated page on our website to inform our audiences about [upcoming dental conventions](#).



4. Practice Support Services

CDA provides a suite of electronic Practice Support Services to support dentists in running their practices, and ensuring that they remain efficient, secure, and compliant when sending e-claims, e-referrals and when sharing patient records electronically. These practice support services include:

- CDAnet;
- CDA Digital ID;
- CDA ITRANS Claims Service;
- CDA Secure Send; and
- CDA Practice Support Services website.



CDAnet and CDA ITRANS 2.0 Claims Service

CDAnet and CDA ITRANS remain an enduring membership benefit success of CDA and our Corporate Members for over 30 years. When dentists join a dental office, one of the first tasks they will be asked to do is subscribe to CDAnet and CDA ITRANS Claims Service—the widely accepted standard in Canada for transmitting dental benefits claims.

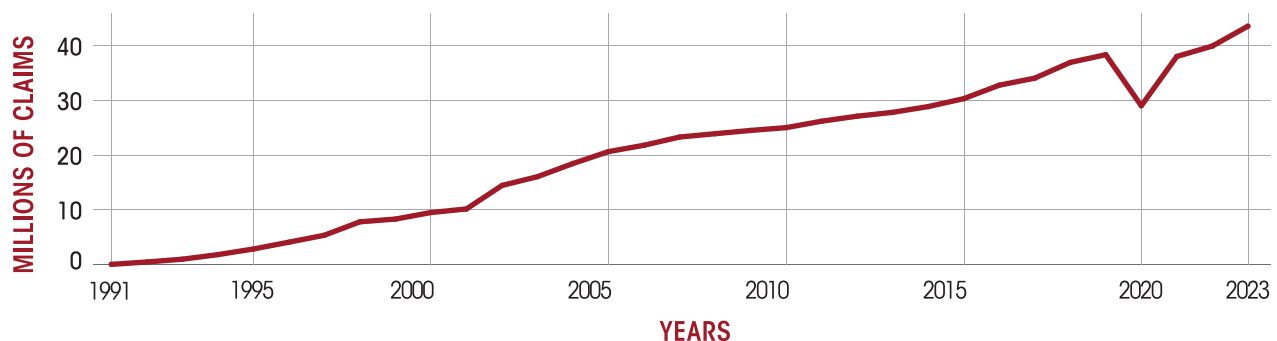
With these services, electronic claims cut the wait time for patients to receive reimbursements from weeks to days. In addition to being convenient and secure, it saves time because dental offices can advise patients of the benefit payable immediately with CDAnet. And for dentists who accept assignment of benefits, they would be able to collect the exact amount of the uninsured portion while the patient is still at the office.

CDAnet has many advantages over systems used in other countries, including the United States, such as:

- Dentists can electronically receive information about a patient’s eligibility for coverage, required pre-determinations, claim errors, and more.
- Dentists can see CDAnet claims sent and insurance responses on CDA’s Practice Support Services website in real time—excellent for troubleshooting claims issues.
- ITRANS 2.0, the latest version of ITRANS, now automates the renewal of CDA Digital IDs, removing an administrative task that could be somewhat disruptive.

Other CDAnet Highlights

In 2023, over 40 million claims were successfully transmitted by dentists and processed by claims processors. The rate of growth in claims in 2023 was over 8.3%, one of the highest on record. See the chart below.





CDAnet V2 Retired

Over a year ago, CDA announced to the claims processing industry that effective February 1, 2024, version 2 of CDAnet—which was introduced in 1994—would be retired and that claims processors still using it would need to move to CDAnet V4 before the V2 retirement date. Since that announcement, CDA worked closely with the seven affected claims processors to successfully meet that February deadline.

What does this mean for dentists? Less configuration and time spent on setting up new insurance companies, and a better chance of sending co-ordination of benefits claims electronically. This will further reduce the number of paper claims dental offices need to deal with, and, if the claims processor supports it, dental offices will see exactly how much is covered from the secondary claim, and immediately collect the co-pay from the patient. CDA is constantly working behind the scenes to make submitting claims as successful and easy as possible.

Supporting Dental Offices and Vendors

As always, there is ongoing interest from dental software providers in adding CDAnet/ITRANS functionality to their software. In 2023-24, two new vendors—Ortho2 and Dentally—were **certified**. Two more vendors are currently working towards certification with an expected completion date in 2024. To be certified, vendors have to certify for all functionality except the attachment transaction, which is optional. However, we have had a lot of interest in the attachment transaction from both vendors and claims processors.

This past year, CDA saw much interest from dental offices wishing to utilize the attachment transaction, which enables dentists to send X-rays and other documents to claims processors electronically. CDA supported several dental software vendors and key claims processors who are currently working on using the attachment transaction.

CDA Digital IDs

In 2021, we identified a software issue that affected CDA Digital IDs—Digital IDs used to secure ITRANS transactions on the Internet. That issue was caused by non-CDA software, and we worked with the claims processing industry to identify a solution. Over the past year, we have been pushing out new ITRANS software and CDA Digital IDs to dental offices using CDAnet/ITRANS.

This project, which has a completion timeline of September 2024, includes new software versions and systems, and is on budget and ahead of schedule.

New ITRANS Features

Software vendors continue to switch offices to ITRANS 2.0, the latest version, to access new features such as the following:

- Automatic replacement of CDA Digital IDs when they come close to expiration.
- Automatic updates of ITRANS 2.0 which in the past year has proven to be effective and reliable and is now being used on a widespread basis.
- As more vendors integrate the ITRANS 2.0 automatic claims processor update feature, office software is automatically updated when a claims processor is added or has new functionality. This removes the hassle of adding claims processors or searching for configuration information.

CDAnet/ITRANS Supporting CDCP Advocacy

Our Practice Support Services staff worked closely with the advocacy team on the Canadian Dental Care Plan (CDCP). We are aware of how daunting it can be to find reliable data on the provision of dental services in Canada. In providing statistical support with de-identified data collected through CDAnet/ITRANS, CDA's advocacy team was given crucial information for understanding the potential impacts of CDCP, helping in their advocacy regarding the CDCP.

Furthermore, CDAnet technical experts at CDA have been liaising with Sun Life for many months on the technical aspects of claim transmission, working to ensure that the implementation of electronic claims for the CDCP align with CDAnet standards and the expectations of dentists.



CDAnet/ITRANS Support

The CDA Practice Support Services Help Desk remained open from 8:00 a.m. to 8:00 p.m. across the country. Most of the calls received are from dental offices, but our Help Desk also serves dental software vendors and claims processors, as needed. Dental offices also access the Help Desk via our chat tool, and our Help Desk agents are experts in the mechanics of sending claims.

IN 2023, CDA PRACTICE SUPPORT SERVICES HELP DESK:



PSS Website

Dentists and their staff use the PSS website to manage their CDA services on a self-serve basis, such as subscribing to CDAnet/ITRANS and retrieving CDA Digital IDs. From February 2023 to January 2024, over 7,200 dental offices subscribed to CDAnet. While 3,103 dental offices unsubscribed, nearly 4,000 dental offices modified their information, such as contact details.

CDA Secure Send

CDA Secure Send enables member dentists to meet their obligations to patient privacy when transmitting patient information out of the dental office, such as for referrals. The significant activity with CDA Secure Send in the past year has been the completion of routine threat and risk assessments including technical security testing, all of which was successful. Several feature enhancements are underway; however, these have been postponed due to the urgent work on the CDCP and the CDA Digital ID projects.

At the time of compiling this report, 68% of dentists across the country (excluding Quebec) had subscribed to CDA Secure Send. In 2023, over 340,000 secure messages were sent with CDA Secure Send, while 60% of the senders of those messages were general dentists.

Specialty of Senders of Secure Messages, 2023.	
Specialty	% of Sent Messages
General Dentist	59.5%
Periodontist	11.2%
Oral Max Surgeon	10.1%
Orthodontist	9.2%
Endodontist	3.9%
Pediatric dentist	3.2%
Oral Max Radiologist	1.2%
Prosthodontist	1.0%
Dental Anesthetist	0.5%
Oral Path-Oral Med	0.2%



Clinical Data on Dentistry in Canada

Thanks to data extractions collected for over 30 years through insurance companies that use CDAnet, CDA has built what is likely the largest database of dental services provided in Canada. CDA continues to invest in initiatives intended to support the growth and value of that database. In the last year, we put efforts towards developing a data governance framework intended to ensure that CDA can maximize the value of its clinical data assets while minimizing the liability attached to the collection and maintenance of such assets.

Additionally, CDA continues to participate in the Dentistry Clinical Reference Group of SNOMED International—a not-for-profit organization that owns, administers, and develops a comprehensive clinical terminology called SNOMED CT—to support the growth and quality improvement of SNOMED CT. This will ensure that when SNOMED CT is implemented in electronics patient records, dentists and their team will have access to quality medical terminology that supports interoperability between computer systems and can automate several in-practice processes.

ISO/TC 106 Dentistry

ISO/TC 106 Dentistry is the Technical Committee of the International Organization for Standardization that is concerned with dentistry. The scope of the Committee is to develop standards in oral health care, including terms and definitions; performance, safety, and specification requirements of dental products; and clinically relevant laboratory test methods, all of which contribute to improved global health.

CDA's participation in the activities of ISO/TC 106 enables Canada to continue to have a voice in the production of international standards that are required to support the practice of dentistry in the country. CDA provides the Committee Manager for TC 106. In 2023, TC 106 met in person for first time since the COVID-19 pandemic hit, and over 250 participants from 18 countries attended the 44 meetings that were held over five days.



CDA supported the participation of the Canadian delegation in TC 106 meetings in Sydney, Australia in 2023.



The following 10 Standards were published in 2023:

- ISO 10394 Dentistry — Designation system for supernumerary teeth
- ISO 24395 Dentistry — Classification of tooth restorations preparation
- ISO 8325 Dentistry — Test methods for rotary instruments
- ISO 4865-1 Dentistry — General requirements of hand instruments, Part 1: Non-hinged hand instruments
- ISO 3630-4 Dentistry — Endodontic instruments — Part 4
- ISO/TR 3630-6 Dentistry — Endodontic instruments — Part 6: Numeric coding system
- ISO TR 20896-2 Dentistry — Digital impression devices — Part 2: Methods for assessing accuracy for implanted devices
- ISO 23298 Dentistry — Test methods for machining accuracy of computer-aided milling machines
- ISO 5139 Dentistry — Polymer-based composite machinable blanks
- TC 106 WG 10: ISO 3990 Dentistry — Evaluation of antibacterial activity of dental restorative materials, luting materials, fissure sealants and orthodontic bonding or luting materials

Also, the following five draft standards were moved to their final stages prior to publishing:

- ISO 6872 Dentistry — Ceramic Materials
- ISO 14356 Dentistry — Duplicating material
- ISO 15098 Dentistry — Dental tweezers
- ISO 19490 Dentistry — Sinus membrane elevator
- ISO 23402-3 Dentistry — Portable dental equipment for use in non-permanent healthcare environment Part 3: Portable suction equipment

This past year, CDA took over the Secretariat of ISO/TC 106 subcommittee on terminology—ISO/TC 106 SC 3 Terminology—with our Chief Knowledge Officer taking the Chairperson role and Manager role.

SC 3 currently has three active working groups, namely:

- WG 1 Harmonization of Dental Codes and Abbreviations;
- WG 2 Dental Vocabulary; and
- WG 5 Terminology for Forensic Orofacial Data.

These working groups are working on the following projects: an amendment to ISO 1942 Dentistry – Vocabulary, a designation system for tooth development stages, and a vocabulary for source conclusion for human identification by dental evidence.

Sustainable Health Systems

In support of the health initiatives of the 2021 UN Climate Change Conference in Glasgow (COP26), CDA monitors the activities of CASCADES—a multi-year capacity building initiative to address health care’s contribution to the climate crisis—and participates in the International Organization for Standardization’s efforts to combat climate change through standards. In recognition of the work CDA is doing in this area, CDA’s Chief Knowledge Officer has been tasked to convene an ad-hoc group of ISO/TC 106 to create a more detailed guideline for the consideration of sustainability and climate change during the development or revision of ISO/TC 106 standards and related documents.

In addition to the work it does with CASCADES and ISO, CDA continues to work with Environment and Climate Change Canada (ECCC) and the Office of the Chief Dental Officer of Canada to support efforts to remain compliant with the requirement of the Minamata Convention on Mercury related to dental amalgam, while ensuring that amalgam remains available for use in situations where no acceptable alternative is available, for example, patients with large cavities and high risk of caries. In 2023-24, this work included the facilitation of the distribution of an ECCC Questionnaire on the Pollution Prevention Planning Notice for Dental Amalgam Waste.



Dental Benefit Issues

This year, the Dental Benefits Committee has finalized two plain language factsheets on dental benefits, one for dentists and another for patients. These factsheets will be provided to Corporate Members for use as they see appropriate. We are leveraging the content in those factsheets to produce a short informative video and social media posts aimed at patient education regarding the importance of understanding their dental benefit plans. The complete package will launch later in 2024.



GST/HST

CDA continues to work with KPMG to ensure that dentists across Canada receive timely and accurate information on GST/HST issues, particularly ongoing developments related to their ability to claim input tax credits (ITCs) when they provide taxable services to patients. Currently, we are cooperating with the Ontario Dental Association in efforts to understand the implications of the recent decision of the Federal Court of Appeal to uphold the Tax Court of Canada decision in *Dr. Kevin L. Davis Dentistry Professional Corporation v. The Queen*. In this case, the Court determined that based on the statutory provisions of the Excise Tax Act, the supply of an orthodontic appliance is a separate zero-rated supply from the exempt supply of orthodontic treatment services.

USC&LS

The Uniform System of Coding and List of Services (USC&LS) is a terminological standard that provides descriptions and codes to represent services offered in dental offices in Canada. Its two main purposes are to support the production of fee guides and the processing of dental claims. The USC&LS is made available to stakeholders through licensing agreements that give different rights to different user groups.

The 2024 edition of the USC&LS was published in October 2023 to allow CDA Corporate Members to prepare their fee guides and insurance companies to update their adjudication engines in a timely manner.

The most significant change in the 2024 edition was the implementation of the first part of a revision of the coding of radiography services that constrains services represented in Service Class 02000 to those related 2-dimensional radiographic images and deactivates Service Class 06000 Radiographs, specialty use only that was a breach of the principle that dictates that all USC&LS codes may be used by all dentists. Since the services represented in Service Class 06000 are all also represented in Service Class 02000, this deactivation does not impact the ability of the USC&LS to represent services provided in dental offices in Canada. The second part of this project aims at improving the representation of services related to 3-dimensional radiographic images and is currently underway.

In addition, the USC&LS Committee is also working with the Canadian Life and Health Insurance Association (CLHIA) to resolve the difficulties that several CLHIA members have with the adjudication of Service Code 99777 "+PS" charges for professional services billed to the dentist and passed through to the patient. A proposal based on the needs expressed by CLHIA members has been prepared and is currently being reviewed by CLHIA members



5. Mental Health and Wellness

CDA recognizes the growing importance of mental health and wellness in the workplace. Creating an inclusive environment where individuals can openly discuss mental health concerns in the dental workplace without fear of judgment is crucial to promoting better health, understanding, and compassion in the workplace.

Throughout the past year, we promoted mental health and wellness resources via our corporate social media channels, Help Desk service, and on the CDA website. We have also been promoting the CDSPI's [Membership Assistance Program \(MAP\)](#), which provides a variety of resources to help individuals deal with life's challenges.



Members' Assistance Program

Life happens. Let us help.

As part of its commitment to give back to the dental community, CDSPI sponsors a no-cost insurance program (as well as MAP) provided by LifeWorks, which provides short-term counselling, referrals, information, and support systems for people's physical, emotional, and mental well-being. This program is free for dentists, their staff and families, and dental students.

Mental Health in the Workplace

CDA continues to work with [Opening Minds](#)—a division of the Mental Health Commission of Canada (MHCC)—to provide access to the course, *The Working Mind for Oral Health Professionals, Managers and Staff*. In October 2023, CDA collaborated with MHCC to launch a [promotional package](#) to promote the course, as it is designed to empower dental professionals to prioritize their mental well-being while delivering top-notch patient care. The promotional package includes a testimonial video, a [brochure](#) of the course overview, and a helpful [guide](#) for sponsoring organizations.

In 2023, the Alberta Dental Association (ADA) piloted a course with its Board of Directors, and they have expressed interest in continuing to roll out the program to their membership. ADA has suggested some changes to the scenarios used in the program to make it more applicable to the dental office.

PTDAs, dental societies, study clubs, and other organizations can sponsor this program for dentists and their teams. Promotional information about the course and how to sponsor it is available on the [CDA Oasis website](#).



Opening
Minds

MENTAL HEALTH
COMMISSION
OF CANADA



CANADIAN
DENTAL
ASSOCIATION



6. Strengthening our Commitment to DEI

CDA recognizes how critical it is to support diversity, equity, and inclusion (DEI), and has continued to make strides to support DEI across Canada. During the year, we participated in many events, highlighted below.

CCDI Events

Since becoming an employer partner with the Canadian Centre for Diversity and Inclusion (CCDI) in early 2023, we have participated in several events and webinars hosted by the CCDI.

In September 2023, some of our staff attended a webinar on *Moving from reconciliation to reconciliACTION: Engaging and supporting Indigenous communities*. Also in February 2024, some CDA staff attended a two-day CCDI virtual conference. The theme of that event was *Shifting gears: New perspectives for an inclusive workplace*.

CDA continues to encourage Corporate Members to take advantage of this membership at no cost. Being an employee partner of the CCDI is an important initiative, and we are encouraged that some PDTAs are already engaging with the Centre.

Among other benefits, our CCDI partnership allows us to access the following:

- Unlimited interactive webinars and community events.
- A 15% discount on fee-based services like consulting, workshops, and training.
- Registration for the Canadian Certified Inclusion Professional Certification Program.
- And the use of CCDI branding on our web pages and other communication assets.

Listening and Learning

Last Fall, our CEO attended a Non-Insured Health Benefits (NIHB) roundtable event in Saskatoon, to listen and learn about issues related to the NIHB program from Indigenous perspectives. This was a productive experience, which fostered many connections and will help to inform future advocacy.



This image was drawn at the NIHB roundtable to represent the discussions which took place.



7. Prestige CDA Programs and Other Areas of Work

CDA operates a range of prestige programs and provides helpful resources for the public and dentists. The essence of our work in this area is to ensure that we provide up-to-date information on issues that affect oral health and the practise of dentistry.

CDA Seal Program

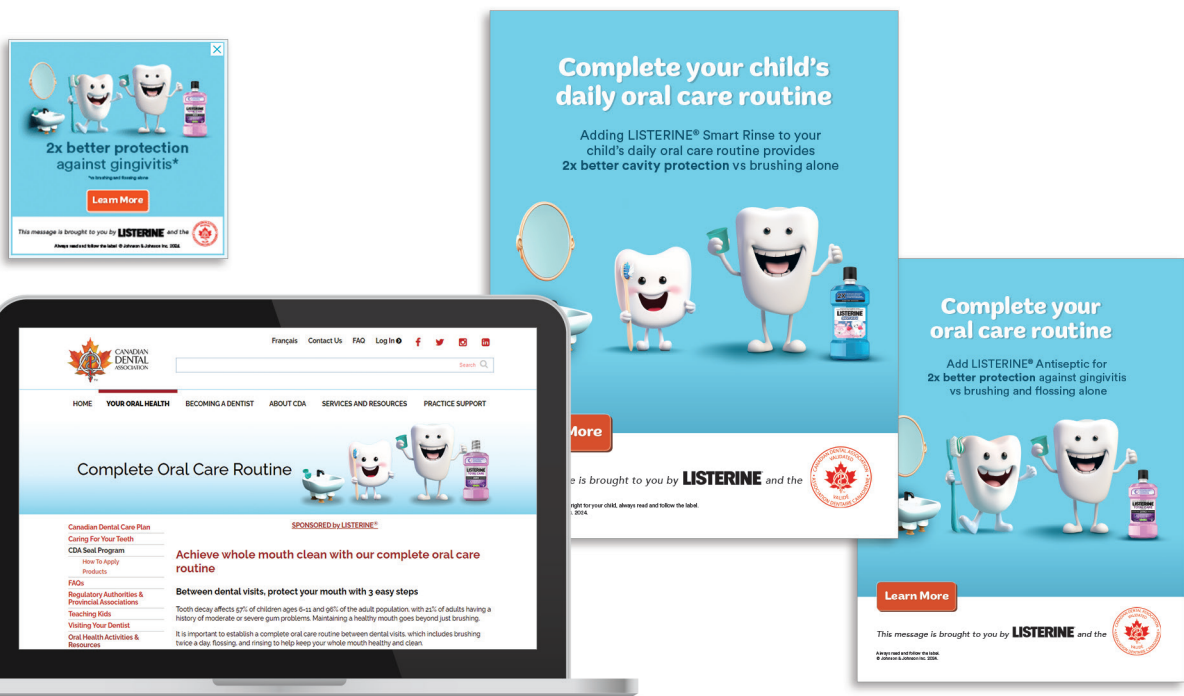
Through the CDA Seal Program, CDA independently validates specific oral health benefit claims made by manufacturers of oral health products. The CDA Seal and its accompanying statement are found on products that have successfully completed our review process. For Canadian consumers and dentists, the CDA Seal provides reassurance that a specific oral health product can improve an individual’s oral health in the ways claimed by the manufacturer.

This past year, manufacturers have begun reintroducing products that had previously been removed from the CDA Seal Program. For example, Colgate has brought back two products from their Sensitive line this year. We introduced 12 new products to the Seal Program, and Colgate and Listerine have made applications to have new oral health benefit claims approved for existing products.

Some new manufacturers were also introduced to the CDA Seal Program. In 2023, one German company applied for the CDA Seal, and they expect to introduce their children’s toothpaste to the Canadian market with the CDA Seal in mid-2024.

Oral Health Literacy Campaign

CDA launched an oral health literacy campaign with Kenvue Canada, a global consumer health company and the manufacturer of Listerine®. The focus of the campaign is the importance of establishing a good oral health routine between dental visits and it aims to complement the impact of the federal government’s Canadian Dental Care Plan, since Canadians are focused on their oral health. The campaign consists of **sponsored content** on the CDA public-facing website. Advertising will also be showcased across other CDA publications, including CDA Essentials magazine, JCDA.ca, and in the CDA Newsletter.





Dental Aptitude Test (DAT) Program

The Dental Aptitude Test (DAT) is provided by CDA and designed to help dental students assess their aptitude for a career in dentistry and to assist dental schools in selecting first-year students. Dental schools use scores from the DAT in making admission decisions. By designing the DAT, CDA is part of the discussion of the attributes desired of our future colleagues.

This past year, we continued to collaborate with the American Dental Association (ADA) on the DAT program. The ADA provides psychometrically validated tests for both Francophone and Anglophone Canadian dentistry candidates. In 2023, 2,257 DATs were administered. We sent 16,557 DAT transcripts nationally and internationally to dental schools: 9,402 in Canada, 5,947 in the US, 1,197 to Australia and 11 to other countries.



Dental Career Options Website

Developed by leaders in Canadian dentistry, the Dental Career Options website (www.dentalcareeroptions.ca) helps dental students and early practising dentists to fully understand the career options that are available to them throughout their professional lives.

The website aims to help graduating students and early practising dentists achieve the best start to their careers. CDA continues to promote this website in its Newsletter and on social media.

Starting out or early in your career?
Career options explained by leaders in the profession.
dentalcareeroptions.ca
Hosted by the Canadian Dental Association, in collaboration with provincial dental associations and CDSPI.

I got answers to all my questions about a group/corporate practice associateship.
dentalcareeroptions.ca

I found the information I needed to choose a residency as my next step.
dentalcareeroptions.ca

I learned so much about the challenges and rewards of buying a practice.
dentalcareeroptions.ca



Policy and Position Statements

CDA is dedicated to providing up-to-date information on issues that affect oral health and the practice of dentistry. As part of this commitment, we develop Position Statements aimed at providing clarification on issues when there are divergent points of view.

Developed and updated by CDA committees, and approved by CDA’s Board of Directors, these Position Statements present the Association’s stated position on various issues where a level of controversy exists or where a need for increase awareness has been identified.

At its February 2024 meeting, our Board approved an amended version of CDA’s Position on **Prevention of Infective Endocarditis**. That version updates the link to the circulated article in the *Journal of the American Heart Association* (AHA), where the AHA’s recommendations are presented. These updates ensures that individuals who consult CDA’s statement are directed to the most current version of that article, which is based on the evidence that clindamycin may cause more frequent and severe reactions than other antibiotics, and CDA no longer recommends the use of that antibiotic.

Currently, CDA has official Position Statements on the following topics, which are all [available on our website](#):

- Access to Oral Health Care for Canadians
- Adoption of New or Existing Technologies by Dentists
- Consensus Statement: Dental Patients with Total Joint Replacement
- Continuing Dental Care
- Control of X-Radiation in Dentistry
- Delivery of Oral Health Care
- Dental Amalgam
- Dentists and Tobacco Cessation
- Early Childhood Caries
- First Visit to the Dentist
- Fluoride
- Fluoride Varnish Programs
- Infant Feeding and Healthy Dental Development
- Junk Food and Child Health
- Oral Appliance Therapy for Snoring and Obstructive Sleep Apnea
- Oral Health Care Standards for Residents in Long Term Care in Canada
- Oral Jewellery
- Pit and Fissure Sealants
- Position and Consideration on the Association between Periodontal Disease and Systemic Disease
- Prevention of Infective Endocarditis
- Prevention of Traumatic Oral / Maxillofacial Injuries
- Provincial Funding of Hospital Based Dental Services and Post-Graduate Dental Education
- Smoking and Vaping
- Sweeteners in Medication
- Teeth Bleaching
- Use of Latex in Dentistry
- Water Fluoridation



FDI World Dental Congress 2023

CDA represents Canada at FDI, the World Dental Federation, and liaises with international partners such as the American Dental Association, among others. In September 2023, Canada was represented by CDA President Dr. Heather Carr, CEO Dr. Aaron Burry, and other Canadian dentistry leaders at the FDI World Dental Congress in Sydney, Australia. The Congress, hosted by the Australian Dental Association, gathers oral health leaders from around the world to discuss innovative ways to deliver optimal oral health to populations everywhere.



CDA participated at the FDI World Dental Congress in Australia last fall.

Quebec Affiliate Membership Campaign

The Association des chirurgiens dentistes du Québec (ACDQ) is currently not a Corporate Member of CDA. However, since 2008, Quebec-based dentists can access CDA programs and membership benefits as CDA Affiliate (individual) Members.

CDA ran its annual campaign for affiliate membership in Quebec from September 2023 to April 2024. The campaign, for those who may be joining or renewing, included a magazine insert and brochure, organic and social media advertising, an email marketing series, Google ads and a letter from CDA President—all of which provided a more comprehensive overview of the benefits, programs, and services of CDA membership.

As of March 3, 2024, 468 Affiliate members renewed their membership and 33 new members joined. We look forward to continuing to serve Quebec-based dentists.

Brochure

Social Media Campaign

CDA Essentials Insert



8. Other CDA Projects

Dentistry Education

The Committee on the Identification of Future Dentists will reconvene in early 2024 for the first time since the COVID-19 pandemic in 2020. The Committee will discuss the future of the Manual Dexterity Test (MDT), which was a component of the Canadian DAT prior to the COVID-19 pandemic. We received feedback from faculty members across the country that first-year students were better prepared when they were taking the MDT. Some of the suggestions to consider, include replacing the MDT with a preparatory course that dental schools could require from applicants and adding some elements such as the use of a mirror when carving, to better prepare first-year students.

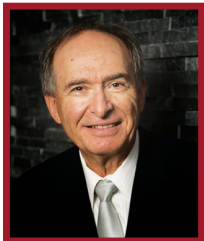
Also on the agenda of the Committee is the progress of two CDA-funded research projects on the Admission to Dental Schools, currently underway at the University of British Columbia and the University of Saskatchewan. Both projects have been revived after a halt caused by the pandemic.

Another agenda item for the Committee is the future of an agreement between CDA and the Association of Canadian Faculties of Dentistry (ACFD), which CDA agreed to invest \$1 million in support of admission research.

The Survey of Canadian Dental Schools is also being reintroduced following the COVID-19 pandemic.

CDA Awards

In the Fall of 2023, CDA received 19 nominations from Corporate Members and stakeholder groups for its **annual awards**. The Awards Committee recommended the following nominees for approval and their awards will be presented during CDA's Annual General Meeting and its related events in April 2024, in Toronto.



The Medal of Honour

Recipient: **Dr. Bernard Dolansky**

The Medal of Honour is the highest award CDA bestows. It's awarded to a dentist to recognize a lifetime of outstanding service and professional achievement that has greatly impacted the dental community, profession, and society as a whole.



Honoured Member Award

Recipient: **Ms. Jocelyn Johnston**

This award is bestowed upon dentists and non-dentists for their contribution to the dental community, profession, or the oral health of Canadians over a sustained period. These contributions can be at the corporate, academic, special society, commission, council, or committee level. Contributions at a national level are especially valued for this award.



The Distinguished Service Award

Recipients: **Dr. Martin Gillis, Dr. Jennifer MacLellan, and Dr. Nathalie Morin.**

The Distinguished Service Award recognizes outstanding contributions made to the dental profession, community, or oral health of Canadians on a larger level. It's presented for either a year or multiple years of noteworthy service.



The Award of Merit

Recipients: **Dr. Izchak Barzilay, Dr. Gregory Chang, Dr. Peter Kearney, and Dr. LouAnn Visconti.**

The Award of Merit recognizes an individual who has (or individuals who have) served in an outstanding capacity in the governing of CDA over a period of time, or who has/have made impactful contributions to the dental community, profession, or oral health of Canadians. Service contributions include serving at least two full terms on the former CDA Executive Council and/ or Board of Directors, and/or on a CDA project, as well as services elsewhere in organized dentistry.



Mentorship Advancement Award

Recipients: **Dr. Craig Fedorowich** and **Dr. Huma Sharief.**

The Mentorship Advancement Award recognizes dentists or dentist-led groups who have improved the sense of community among Canadian dentists through volunteer mentorship and shared learning. Recipients may be involved in fostering and supporting mentorship opportunities, strengthening dental community action, and/or bringing dentists together to share ideas with the intent on enhancing the community of health professionals who care about their patients.



Special Friend of Canadian Dentistry

Recipient: **Mr. Steve Jennex**

The Special Friend of Canadian Dentistry Award is given to an individual or organization who is from outside the dental profession, in appreciation for their support or service to Canadian dentistry.



Oral Health Promotion Award

Recipients: **Never Alone Cancer Foundation.**

The Oral Health Promotion Award recognizes individuals or organizations who have made efforts to improve the oral health of Canadians by promotions. These can include efforts such as creating public health policy or supportive environments, encouraging community action, developing personal skills, or increasing the awareness of preventing oral diseases and disorders.





9. CDA Transformational Journey

CDA is committed to ongoing improvements, and we are still in the process of implementing recommendations from our governance review. Our organizational journey follows a deliberate sequence of key milestones, which are separate but interrelated, first beginning with a comprehensive Governance Review, which started with a motion passed at our 2020 AGM.

While the Governance Review was happening, CDA had an internal staff realignment initiated in mid-2022 to create a nimble and responsive organization. One of the key recommendations from the Governance Review was that CDA needed a strategic plan to provide a roadmap to achieve organizational goals and objectives.

Each of these three steps serve as a vital building block but are connected to one another, operationalizing organizational changes, fortifying our structure, and preparing for our future.

While we embarked on a new journey to develop a strategic plan for the next five years, we consulted PTDA's throughout the process. These are the highlights of our transformational journey and show how far we've come.

- **Plan:** We started back in March 2023 with a Strategic Plan Working Group led by Dr. Bruce Ward and members of CDA senior management team who defined the main steps of the process and timeframes.
- **Consult:** We kicked off in Winnipeg by holding sessions for everyone to provide initial input, including CDA Board and our Corporate Members. CDA staff members also provided input at another session in Ottawa in 2023.
- **Draft:** In October 2023, our Strategic Planning Working Group and CDA's senior management team worked with our strategic planning facilitator to review all of the input and create the first draft of the one-page plan.
- **Refine:** Once we had a one-page draft plan, we surveyed Corporate Members, CDA Board and staff to get their feedback. There was high satisfaction among the 50 survey respondents. The survey input was then reviewed in detail by CDA senior management team and the Strategic Plan Working Group, and the draft was updated.
- **Publish:** The final strategic plan will be shared with the CDA community at our AGM in April 2024.



CDA Board and staff at the strategy planning meeting in February 2024



CDA Committees, Task Forces and Working Groups

CDA has the unique privilege and opportunity to bring together subject matter experts to discuss clinical and practice issues facing the profession. Through its many committees, task forces, working groups and involvement with international bodies, CDA:

- collects, analyzes, and communicates information to help dentists make informed decisions about the delivery of patient care; and
- strengthens and promotes idea sharing to the benefit of the profession.

New! In conjunction with its governance review, CDA’s Board of Directors updated its committee structure to include five Board committees and one working group:

- The Governance and Nominating Committee
- The Finance and Audit Committee
- The Executive Committee
- The Awards Committee
- The CEO Performance Management Sub-Committee
- The Strategic Planning Working Group

In addition, CDA created several operational committees and time-bound working groups that act in an advisory capacity to CDA staff to conduct the work of the association. The implementation of this new committee structure began in April 2023, and has resulted in a significantly streamlined number of CDA committees. CDA thanks all of our volunteers for their time and commitment to help advance CDA’s areas of work and the oral health of Canadians.

CDA Voting Representatives

CDA’s voting representatives are dentists licensed or otherwise registered to practise dentistry in a province or territory who are members of a CDA Corporate Member (listed below). Each CDA Corporate Member selects their voting representative(s).

Each CDA section (listed below) representing specialists, the military and academic community also appoints one voting representative who must also be a dentist licensed or otherwise registered to practise dentistry in a province or territory who is a member of a CDA Corporate Member or a CDA Affiliate Member.

CDA Corporate Members

- Alberta Dental Association
- British Columbia Dental Association
- College of Dental Surgeons of Saskatchewan
- Dental Association of Prince Edward Island
- Manitoba Dental Association
- New Brunswick Dental Society
- Newfoundland and Labrador Dental Association
- Northwest Territories and Nunavut Dental Association and Yukon Dental Association
- Nova Scotia Dental Association
- Ontario Dental Association



CDA Sections

- Canadian Dental Specialties Association
- Association of Canadian Faculties of Dentistry
- Royal Canadian Dental Corps

Dental Stakeholders

CDA maintains strong relationships with all dental stakeholders in Canada and internationally by ensuring ongoing dialogue with the leadership of the various national dental groups, including Canadian Dental Specialties Association (CDSA) and the national dental specialty organizations, Canadian Dental Regulatory Authorities Federation (CDRAF), Association of Canadian Faculties of Dentistry (ACFD), Canadian Association for Dental Research (CADR), National Dental Examining Board of Canada (NDEB), Royal College of Dentists of Canada (RCDC), Health Canada, Public Health Agency of Canada (PHAC), Office of the Chief Dental Officer of Canada (OCDO), Royal Canadian Dental Corps (RCDC), Canadian Association of Hospital Dentists (CAHD), Commission on Dental Accreditation of Canada (CDAC), Federation of the Canadian Dentistry Student Associations (FCDSA), FDI World Dental Federation (FDI), American Dental Association (ADA), and CDSPI.

CDA has ongoing communications with other organizations that impact the delivery of oral health care, such as the Dental Industry Association of Canada (DIAC) and the Canadian Life and Health Insurance Association (CLHIA) and remains in regular contact with the Canadian Dental Hygienists Association (CDHA) and the Canadian Dental Assistants Association (CDA).

Health Care Stakeholders

Outside of dentistry, CDA also builds relationships with other groups that have shared interests, particularly around oral health, but also overall health. This includes other dental professional organizations representing denturists, hygienists, and dental assistants, associations for other healthcare providers like the Canadian Medical Association, as well as members of Health Action Lobby (HEAL), which represents 40 of the largest healthcare associations in Canada.

CDA is an active member of, alongside other organizations such as the Heart & Stroke Foundation and Diabetes Canada.

CDA is an active member of many health coalitions, including the: Canadian Coalition for Public Health in the 21st Century (CCPH21), Canadian Health Leadership Network (CHLnet), Canadian Coalition for Action on Tobacco (CCAT), Extended Healthcare Professionals Coalition (EHPC), and the Stop Marketing to Children Coalition (M2K). CDA also collaborates with the Canadian Patient Safety Institute (CPSI), Canadian Institute of Health Information (CIHI), Standards Council of Canada (SCC), Canadian Standards Association (CSA) and Canada Health Infoway (CHI).

We work closely with the Assembly of First Nations (AFN) and its NIHB caucus in making representations to the federal government on health and oral health services.



Report to the College of Dental Surgeons of Saskatchewan

September 2024

Contents

Introduction	3
Governance	3
Board Members	3
Recommended Examiners	4
Finance	4
Strategic Plan	4
Communication with Stakeholders	5
Examinations.....	5
Equivalency Process	5
Exam Capacity	6
Standard Setting	6
Certification Process: Virtual OSCE	6
Certification.....	7

Introduction

The National Dental Examining Board of Canada (NDEB) was established by an Act of Parliament in 1952. The Act makes the NDEB responsible for the establishment of qualifying conditions for a national standard of dental competence for general practitioners, for establishing and maintaining an examination facility to test for these national standards of competence, and for issuing certificates to dentists who successfully meet the national standards.

Governance

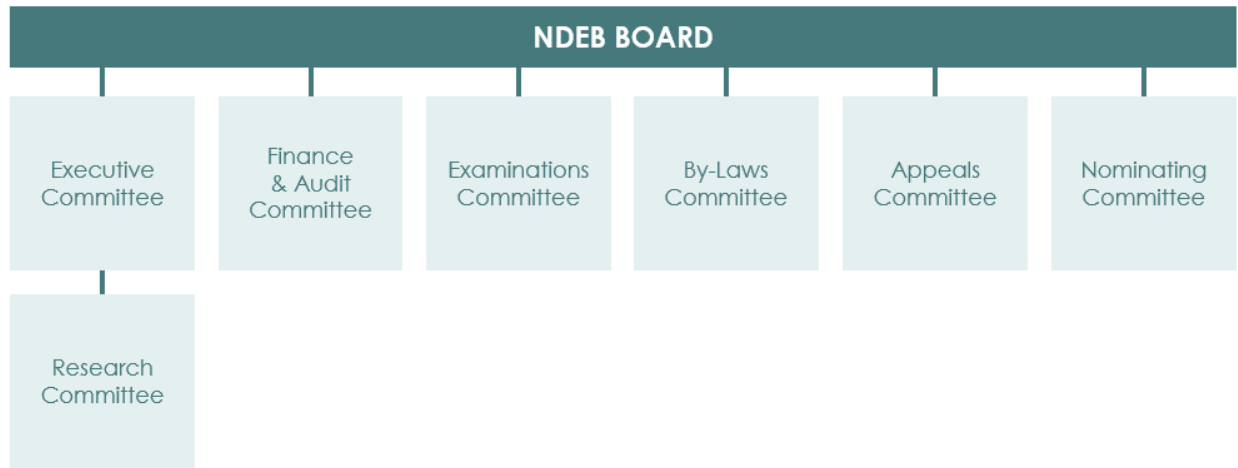
Board Members

The NDEB Board comprises 12 members. Each provincial Dental Regulatory Authority appoints one member, and two members are appointed by the Commission on Dental Accreditation of Canada (CDAC). There is also a public representative appointed to the Board. The Board meets twice a year, and other times as needed.

Table 1: Current NDEB Board Members

Current Board Members	
Amarjit Singh Rihal, President	Manitoba
Jim Richardson, Past President	British Columbia
Stefan Haas-Jean, Vice President/Treasurer	Quebec
Mintoo Basahti	Alberta
Stefan Piche	Saskatchewan
Noha Gomaa	Ontario
Andrew Rowe	New Brunswick
Alan Robinson	Prince Edward Island
Tanya Cook	Nova Scotia
Sneha Abhyankar	Newfoundland
Debra Matthews	CDAC Representative
Jim Posluns	CDAC Representative
Jan Sheppard Kutcher	Public Representative

The NDEB currently has seven standing committees. Each standing committee reports to the Board.



Recommended Examiners

To develop and grade examinations, the NDEB requires the participation of general dentists and specialists recommended by the provincial Dental Regulatory Authorities, Canadian Faculties of Dentistry, Canadian Forces Dental Service, Royal College of Dentists, and the Dental Council of New Zealand.

While each organization has a unique way of determining which individuals they will recommend, an initial vetting by the organization is an extremely valued part of the process.

Recommended Examiners from the CDSS have participated in a variety of NDEB activities over the past year including the NDECC Evaluation Session, NDECC, and exam development workshops.

Finance

A summarized financial statement for fiscal year 2022-2023 can be found in the [NDEB Annual Report](#).

The Finance and Audit Committee met in April 2024 and the 2024-2025 budget and fee schedule were approved by the Board in May. The adopted fee schedule includes a reduction in the NDECC fee. Effective July 1, 2024 the NDECC is \$7000 or \$3500 for a single component. This is the second reduction of \$1000 since the implementation of the NDECC in 2022.

Strategic Plan

The NDEB has diligently pursued the strategic initiatives outlined in its 2019-2024 strategic plan achieving notable progress across the following four key result areas: transition to electronic exam delivery, review the Equivalency Process blueprint, strengthen communication with stakeholders, and manage risk.

The focus has now shifted towards development of a new strategic plan. The Board met in October 2023 to review the outcomes of the environmental scan and identify new strategic priorities for the next five years. A draft strategic plan was circulated to stakeholders in the summer for comment. The 2025-2029 strategic plan will be presented for approval at the 2024 Annual Meeting.

Communication with Stakeholders

The NDEB is committed to maintaining strong communication with stakeholders by ensuring transparency and encouraging stakeholder engagement.

The NDEB's Annual Report for the fiscal year 2022-2023 includes information on all the NDEB's activities. The report is available for download from the [publications](#) section of the NDEB website.

Following the release of the first series of NDECC results, the NDEB received comments and concerns related to the new exam. In response to these concerns, the NDEB commenced a consultation and review process which included meetings with the Fairness Commission in Ontario, the Canadian Dental Regulatory Authorities Multi-Stakeholder Working Group to review the Certification Processes for graduates of International Dental Programs, the NDEB Examinations Committee and the NDEB Board. A comprehensive review of the consultation and development process of the NDECC blueprint and standard setting was also undertaken with input from a psychometric expert. The review focused on four areas: the time allotted for the Clinical Skills component of the NDECC, the passing standard for the Clinical Skills component, the requirement to pass at least one station in each blueprint area of the Situational Judgment component, the relevance of testing amalgam, the material provided for the amalgam restoration, and the size of the Class II amalgam restoration. The [outcomes of the review](#) were provided to different stakeholders and can be viewed on the NDEB website.

Over the last year, the NDEB has been participating in discussions with the CDRAF multi-stakeholder working group to review the certification process for graduates of non-accredited dental programs to explore ways to facilitate the certification of graduates trained in non-accredited programs. In the spring, the NDEB produced a plan that includes multiple steps toward reducing the duration of the Equivalency Process.

In early 2024, Dr. Dagenais hosted webinars in French and English for individuals planning to take the Virtual OSCE in March 2024. A new Virtual OSCE orientation video has also been developed and was released prior to the March examination. Recognizing the diverse learning preferences of our stakeholders, the NDEB will be creating more video resources to help improve understanding of NDEB processes.

NDEB representatives continue to meet with individuals and organizations representing candidates in both the Equivalency Process and the Certification Process. These meetings provide an opportunity for the NDEB to listen and are valuable learning opportunities.

Examinations

Equivalency Process

Graduates of non-accredited dental programs who want to be certified as general dentists in Canada must successfully complete the NDEB Equivalency Process or an accredited Qualifying/Degree Completion Program prior to being eligible for participation in the

Certification Process. The Equivalency Process includes three examinations: the Assessment of Fundamental Knowledge (AFK), the Assessment of Clinical Judgement (ACJ), and the NDECC. [Pass rates for examinations held in 2023](#) can be found on the NDEB website.

Exam Capacity

Exam capacity continues to be a concern for many stakeholders. In late 2023, the NDEB established a standalone test centre for the Assessment of Clinical Judgement (ACJ) which increased our test capacity for the November exam by 150 seats. The standalone test centre in Ottawa will continue to be used for the ACJ to compliment the seats provided by Prometric.

For the NDECC, test capacity has been increased by approximately 20% in 2024 and will increase again in 2025. An updated exam schedule for the NDECC will be published in the summer with the 2025 dates. The NDEB is actively investigating ways to continue to increase test capacity for the NDECC.

Standard Setting

As an organization that delivers high stakes examinations, we have the responsibility to continually evaluate and revise our examinations.

Part of this evaluation is done through a psychometric process to establish the pass mark for an examination. This procedure is known as standard setting. During a standard setting workshop, a diverse pool of examiners come together to review each examination question with the intent of making judgements about how a minimally competent candidate would score on each question. The outcome of these judgments is aggregated and analyzed to provide evidence to assist in establishing the appropriate passing standard for the examination. These workshops are facilitated by a psychometrician who provides training on the methodology.

A standard setting workshop for the Assessment of Fundamental Knowledge (AFK) took place in February 2024, and a new pass mark was adopted by the Board in March. A standard setting workshop for the Assessment of Clinical Judgement (ACJ) took place in May 2024.

Certification Process: Virtual OSCE

After experiencing technical issues during the inaugural administration of the Virtual OSCE in March 2023, it was determined that the June examination would be delivered in a PDF format on computers. For the November administration, the exam was once again offered using the electronic delivery platform with minimal issues. The [2023 pass rates](#) for the Virtual OSCE can be found on the NDEB website.

Leading up to the March 2024 administration, NDEB staff prioritized collaboration with third-party providers to improve the delivery of electronic exams and ensure a smooth examination experience for all stakeholders. Measures have been taken to enhance the reliability of the electronic exam platform, including testing and verification of Wi-Fi functionality at examination sites prior to exam administration.

A contingency plan for administering the Virtual OSCE has also been established. The contingency plan involves offering the examination in PDF format on the laptops so that the radiographs and photographs would be of the same quality as those of the electronic platform.

Certification

The NDEB issues certificates to individuals who have successfully completed the certification examination for general dentists and to dental specialists who took the NDSE with the NDEB between 2020 and 2023. Obtaining NDEB certification means that an individual has demonstrated that they meet the competencies required of a beginning dental practitioner in Canada. The Dental Regulatory Authorities (DRAs) in Canada rely on the NDEB certificate as evidence that a potential licensee has met the national standard.

Table 2: 2023 NDEB Certification General Dentistry

Certified 2023	
Canadian accredited dental program including degree completion programs	567
Dental programs outside of Canada	381
Total Certified	948

Table 3: NDEB Specialty Certification

NDSE Certification	2020	2021	2022	2023
Total Certified	127	75	168	88

Following the transition of the NDSE to the RCDC, NDEB specialty certification information continues to be accessible to the DRAs through the National Register.

College of Dental Surgeons of Saskatchewan
Financial Statements
December 31, 2023

DRAFT

College of Dental Surgeons of Saskatchewan Contents

For the year ended December 31, 2023

Page

Management's Responsibility

Independent Auditor's Report

Financial Statements

Statement of Financial Position..... 1

Statement of Operations..... 2

Statement of Changes in Net Assets..... 3

Statement of Cash Flows..... 4

Notes to the Financial Statements..... 5

Schedules

Schedule 1 - Schedule of Operating Revenue..... 9

Schedule 2 - Saskatchewan Oral Health and Continuing Education Revenue..... 10

DRAFT

Management's Responsibility

To the Members of College of Dental Surgeons of Saskatchewan:

Management is responsible for the preparation and presentation of the accompanying financial statements, including responsibility for significant accounting judgments and estimates in accordance with Canadian accounting standards for not-for-profit organizations. This responsibility includes selecting appropriate accounting principles and methods, and making decisions affecting the measurement of transactions in which objective judgment is required.

In discharging its responsibilities for the integrity and fairness of the financial statements, management designs and maintains the necessary accounting systems and related internal controls to provide reasonable assurance that transactions are authorized, assets are safeguarded and financial records are properly maintained to provide reliable information for the preparation of financial statements.

The Council is composed primarily of Members who are neither management nor employees of the Organization. The Council is responsible for overseeing management in the performance of its financial reporting responsibilities, and for approving the financial information included in the annual report.

MNP LLP, an independent firm of Chartered Professional Accountants, is appointed by the Council to audit the financial statements and report directly to the Members; their report follows. The external auditors have full and free access to, and meet periodically and separately with, both the Council and management to discuss their audit findings.

June 8, 2024

Jaime Korczak - Executive Director

Independent Auditor's Report

To the Members of College of Dental Surgeons of Saskatchewan:

Opinion

We have audited the financial statements of College of Dental Surgeons of Saskatchewan (the "Organization"), which comprise the statement of financial position as at December 31, 2023, and the statements of operations, changes in net assets, cash flows and the related schedules for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at December 31, 2023, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Independent Auditor's Report *(continued from previous page)*

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Saskatoon, Saskatchewan

June 8, 2024

Chartered Professional Accountants

College of Dental Surgeons of Saskatchewan Statement of Financial Position

As at December 31, 2023

	2023	2022
Assets		
Current		
Cash and cash equivalents	1,266,188	2,448,935
Accounts receivable (Note 3)	206,935	40,882
Investments (Note 4)	1,265,709	238,988
Prepaid expenses	29,328	12,997
	2,768,160	2,741,802
Tangible capital assets (Note 5)	312,212	23,967
	3,080,372	2,765,769
Liabilities		
Current		
Accounts payable and accruals (Note 6)	114,701	79,055
Deferred revenue (Note 7)	1,603,000	1,701,826
Tenant lease inducement - current portion (Note 10)	16,192	-
	1,733,893	1,780,881
Tenant lease inducement (Note 10)	143,030	-
	1,876,923	1,780,881
Commitments (Note 8)		
Net Assets		
Unrestricted	1,203,449	984,888
	3,080,372	2,765,769
Approved on behalf of the Council		
Director _____	Director _____	

The accompanying notes are an integral part of these financial statements

College of Dental Surgeons of Saskatchewan Statement of Operations

For the year ended December 31, 2023

	2023 <i>Budget</i> <i>(Unaudited)</i>	2023	2022
Operating Revenue <i>(Schedule 1)</i>	2,435,000	2,383,064	2,287,504
SOHP Revenue <i>(Schedule 2)</i>	-	317,231	273,408
	2,435,000	2,700,295	2,560,912
Expenses			
Amortization	-	27,271	13,644
Bank charges	90,000	88,395	70,910
Consultants	332,757	226,183	222,637
Council meetings	215,000	383,147	161,023
Grants	375,000	344,725	340,090
Insurance	20,600	30,150	20,543
Legal	60,000	130,546	27,840
Mediation/legal recoveries	-	(52,828)	(77,487)
Membership fees	5,280	18,918	3,623
Miscellaneous	-	825	1,700
Office equipment	95,000	175,737	108,717
Office supplies	51,977	80,894	50,151
Other meetings	14,000	7,812	158,666
Postage	8,776	8,045	7,500
Rent	120,000	105,630	139,273
Salaries, benefits, staff recruitment, and severance	811,851	557,157	1,003,700
Scientific session	-	-	11,693
Sponsorship and public relations	80,000	65,914	129,469
Telephone	5,777	-	5,170
	2,286,018	2,198,521	2,398,862
SOHP Expenses			
Audio visual	-	-	2,567
Bank charges	-	-	6,264
Consultant	-	2,642	146,473
Entertainment	-	-	17,009
Hotel, gala, committee and hospitality	-	333,868	119,381
Presenters	-	-	49,060
Printing, scanning and office	-	-	28,572
Promotion	-	-	3,916
	-	336,510	373,242
	2,286,018	2,535,031	2,772,104
Excess (deficiency) of revenue over expenses before other items	148,982	165,264	(211,192)
Other items			
Investment income	7,000	35,162	13,753
Realized and unrealized gains (losses) on investments	-	18,135	(18,241)
	7,000	53,297	(4,488)
Excess (deficiency) of revenue over expenses	155,982	218,561	(215,680)

The accompanying notes are an integral part of these financial statements

College of Dental Surgeons of Saskatchewan
Statement of Changes in Net Assets

For the year ended December 31, 2023

	2023	2022
Net assets, beginning of year	984,888	1,200,568
Excess (deficiency) of revenue over expenses	218,561	(215,680)
Net assets, end of year	1,203,449	984,888

DRAFT

The accompanying notes are an integral part of these financial statements

College of Dental Surgeons of Saskatchewan Statement of Cash Flows

For the year ended December 31, 2023

	2023	2022
Cash provided by (used for) the following activities		
Operating		
Excess (deficiency) of revenue over expenses	218,561	(215,680)
Amortization	27,271	13,644
Realized and unrealized (gains) losses on investments	(18,135)	18,241
	227,697	(183,795)
Changes in working capital accounts		
Accounts receivable	(166,053)	(25,138)
Prepaid expenses	(16,331)	21,426
Accounts payable and accruals	35,646	(22,445)
Deferred revenue	(98,826)	(129,374)
	(17,867)	(339,326)
Financing		
Tenant lease inducement	159,222	-
Investing		
Purchase of investments	(1,267,570)	(216,558)
Proceeds on disposal of investments	258,984	143,642
Purchase of tangible capital assets	(315,516)	(9,067)
	(1,324,102)	(81,983)
Decrease in cash resources	(1,182,747)	(421,309)
Cash resources, beginning of year	2,448,935	2,870,244
Cash resources, end of year	1,266,188	2,448,935

The accompanying notes are an integral part of these financial statements

College of Dental Surgeons of Saskatchewan

Notes to the Financial Statements

For the year ended December 31, 2023

1. Incorporation and nature of the organization

College of Dental Surgeons of Saskatchewan (the "Organization") was incorporated by an act of the Saskatchewan Legislature as the association for the dental profession to protect the public interest in matters relating to dentistry through regulation of the practice of dentistry and governance of its members. It is a not-for-profit entity under the Income Tax Act and therefore is not subject to either federal or provincial income taxes.

2. Significant accounting policies

The financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations and include the following significant policies:

Revenue recognition

The Organization follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Investment income is recognized as revenue when earned.

All types of member fees are recognized as revenue in the year which they relate.

Contributed services

Members contribute their time to the Organization to assist in its activities. Contributed services are not recognized in the financial statements due to the difficulty of determining their fair value.

Cash and cash equivalents

Cash and cash equivalents include balances with banks and short-term investments with maturities of three months or less.

Tangible capital assets

Purchased tangible capital assets are recorded at cost. Contributed tangible capital assets are recorded at fair value at the date of contribution if fair value can be reasonably determined.

Amortization is provided using the the following methods at rates intended to amortize the cost of assets over their estimated useful lives. It is the Organization's policy to record amortization at one-half of the annual rate in the year of acquisition.

	Method	Rate
Computer equipment	declining balance	55 %
Equipment	declining balance	20 %
Leasehold improvements	straight-line	10 years

Long-lived assets

Long-lived assets consist of tangible capital assets.

When the Organization determines that a long-lived asset no longer has any long-term service potential to the Organization, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations. Write-downs are not reversed.

Termination benefits

The Organization recognizes the expense for contractual termination benefits based on the lump sum payments handed out this year amounting to a total of \$32,072 (2022 - \$191,921). These termination benefits were paid out and expensed within the fiscal year.

College of Dental Surgeons of Saskatchewan

Notes to the Financial Statements

For the year ended December 31, 2023

2. Significant accounting policies (Continued from previous page)

Financial instruments

The Organization recognizes financial instruments when the Organization becomes party to the contractual provisions of the financial instrument.

Arm's length financial instruments

Financial instruments originated/acquired or issued/assumed in an arm's length transaction ("arm's length financial instruments") are initially recorded at their fair value.

At initial recognition, the Organization may irrevocably elect to subsequently measure any arm's length financial instrument at fair value. The Organization has not made such an election during the year.

The Organization subsequently measures investments in equity instruments quoted in an active market at fair value. Fair value is determined by published price quotations. All other financial assets and liabilities are subsequently measured at amortized cost.

Transaction costs and financing fees directly attributable to the origination, acquisition, issuance or assumption of financial instruments subsequently measured at fair value are immediately recognized in deficiency of revenue over expenses. Conversely, transaction costs and financing fees are added to the carrying amount for those financial instruments subsequently measured at cost or amortized cost.

Financial asset impairment

The Organization assesses impairment of all its financial assets measured at cost or amortized cost. The Organization groups assets for impairment testing when available information is not sufficient to permit identification of each individually impaired financial asset in the group. Management considers whether the issuer is having significant financial difficulty in determining whether objective evidence of impairment exists. When there is an indication of impairment, the Organization determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the year.

The Organization reduces the carrying amount of any impaired financial assets to the highest of: the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets at the statement of financial position date; and the amount expected to be realized by exercising any rights to collateral held against those assets.

Any impairment, which is not considered temporary, is included in current year excess (deficiency) of revenue over expenses.

The Organization reverses impairment losses on financial assets when there is a decrease in impairment and the decrease can be objectively related to an event occurring after the impairment loss was recognized. The amount of the reversal is recognized in excess (deficiency) of revenue over expenses in the year the reversal occurs.

Measurement uncertainty

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period.

Accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary. Amortization is based on the estimated useful lives of tangible capital assets.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in excess (deficiency) of revenue over expenses in the periods in which they become known.

College of Dental Surgeons of Saskatchewan
Notes to the Financial Statements
For the year ended December 31, 2023

3. Accounts receivable

	2023	2022
Trade receivables	167,184	40,882
Other receivables	39,751	-
	206,935	40,882

4. Investments

	2023	2022
Measured at cost:		
Guaranteed Investment Certificates (maturity August 30, 2024, Interest rate 5.20%)	1,000,000	-
Measured at fair market value:		
Common shares (Cost - 2023 - \$10,529, 2022 - \$8,218)	46,957	37,956
Mutual funds (Cost - 2023 - \$224,866, 2022 - \$218,591)	218,752	201,032
	1,265,709	238,988

5. Tangible capital assets

	Cost	Accumulated amortization	2023 Net book value	2022 Net book value
Computer equipment	51,645	44,388	7,257	7,008
Equipment	61,571	13,407	48,164	15,593
Leasehold improvements	293,260	36,469	256,791	1,366
	406,476	94,264	312,212	23,967

6. Accounts payable and accruals

	2023	2022
Trade payables	104,515	72,270
Goods and Services Tax payable	72	485
Payroll deductions payable	958	1,047
Vacation payable	9,156	5,253
	114,701	79,055

College of Dental Surgeons of Saskatchewan

Notes to the Financial Statements

For the year ended December 31, 2023

7. Deferred revenue

Deferred revenue consists of monies received in relation to annual license fees, registration fees, corporate permits and fee guides that relate to the subsequent fiscal year. Recognition of these amounts as revenue is deferred to periods when the specified revenue is earned. Changes in the deferred revenue balances are as follows:

	2023	2022
Balance, beginning of year	1,701,826	1,831,200
Amount received during the year	1,603,000	1,701,826
Less: Amount recognized as revenue during the year	(1,701,826)	(1,831,200)
Balance, end of year	1,603,000	1,701,826

8. Commitments

The Organization entered into an office lease commencing from November 2023 - October 2024, having a base rent of \$5,425 per month (annually - \$65,102), with total monthly payments of \$12,049, which includes operating expenses such as property tax, common area maintenance, utilities, storage and parking fees as per the Lease agreement. The Organization is also committed to paying various operating leases for office equipment expiring April 2024, which are included in the office equipment expense account on the statement of operations, having quarterly payments of \$1,465 (annually - \$5,861) plus applicable taxes.

9. Financial instruments

The Organization, as part of its operations, carries a number of financial instruments. It is management's opinion that the Organization is not exposed to significant interest, currency, credit, liquidity or other price risks arising from these financial instruments except as otherwise disclosed.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk. The Organization is not exposed to significant interest rate risk at the end of December 31, 2023.

Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices, whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The Organization's investment in publicly-traded securities and mutual funds expose the Organization to price risk as this investment is subject to price changes in an open market due to a variety of reasons including changes in market rates of interest, general economic indicators and restrictions on credit markets.

10. Tenant lease inducement

The Organization has a lease agreement as disclosed in Note 8, that includes a lease inducement of \$159,222. This inducement is being amortized evenly over the term of the lease. Amortization in the current year was taken as \$nil.

11. Budget information

During the council meeting on January 13, 2023, the Council approved its operating budget for 2023 based on planned expenses and sources of expected revenue relating to the 2023 year. The budget balances have been attached for information purposes only and are unaudited.

College of Dental Surgeons of Saskatchewan
Schedule 1 - Schedule of Operating Revenue

For the year ended December 31, 2023

	2023 Budget (Unaudited)	2023	2022
Operating Revenue			
Access to care	5,000	-	9,000
Annual license fees	2,275,000	2,243,146	2,101,613
Corporate fees	20,000	-	17,900
Corporate permits	95,000	111,300	92,400
Fee guides	25,000	22,000	24,600
Fundraising	4,000	-	3,600
Other recoveries	10,000	3,890	1,209
Penalty and interest	-	-	200
Radiation safety binders	1,000	2,728	9,337
Registration fees	-	-	27,645
	2,435,000	2,383,064	2,287,504

DRAFT

College of Dental Surgeons of Saskatchewan
Schedule 2 - Saskatchewan Oral Health and Continuing Education Revenue

For the year ended December 31, 2023

	2023	2022
SOHP Revenue		
Course registration	151,855	45,644
Exhibitors	102,525	148,082
Sponsorship and advertising	62,851	79,682
	317,231	273,408

DRAFT