

INQUIRY COMMITTEE RECORD OF DECISION

FILE NAME: DH1189

FACTS

On October 5, 2011, the Inquiry Committee resolved to initiate an investigation on its own motion under section 33(4)(a), (b) and (d) of the *Health Professions Act*, R.S.B.C. 1996, c. 183 (the "Act"). By letter, the Registrar of the College notified the Registrant of the investigation and invited a response in accordance with s. 33(5) of the *Act*.

The Registrant's written response indicated the clinic where (s)he provided dental hygiene services had never defined protocols or support for doing assessments but that (s)he was usually aware of the periodontal status of patients as they were routinely assigned to three or four month intervals, that the intervals were documented in the charts but often the notes were not followed up by other team members. The Registrant stated that the focus of the office was on restorative work, not hygiene care. The Registrant indicated that when the Clinic came under new ownership, and a consulting firm was hired, (s)he was introduced to PSR - periodontal screening record. The Registrant maintained that (s)he has never knowingly or deliberately done anything to harm her/his patients and always strived to provide the best care.

COMMITTEE DECISION

At the conclusion of the investigation, the Inquiry Committee had concerns that the Registrant had not properly assessed the client's needs; the Registrant had not analyzed assessment information or made a dental hygiene diagnoses for clients; and the Registrant had not adequately planned for the dental hygiene care of her/his clients as there was no assessment data or dental hygiene diagnoses in the charts.

The Committee determined, and the Registrant agreed, that the appropriate remedial action is a consent order under s. 33(6)(c) of the *Act* which will enable the College to assess the level of the Registrant's practice skills, direct remedial work to address areas of deficiency and to monitor the Registrant's practice skills through chart audits to ensure that there is no risk to public safety.

The Inquiry Committee concluded that this would be an appropriate case to seek a consent order under s. 36 of the *Act* because: (a) the Registrant acknowledged that (s)he wants to provide the best care possible to her/his clients and has never intentionally caused them harm; (b) the Registrant acknowledged that (s)he was introduced to proper protocols after a consulting firm was hired; (c) the Registrant is not currently practicing dental hygiene and intends to retire in the near future; (d) in the event the Registrant should return to a full practicing category, an individualized assessment of the Registrant's practice skills would identify areas of deficiency that could be addressed by remedial training; and (e) steps could be taken to monitor the Registrant's practice through follow-up chart audits to ensure that the public is not at risk.

RELEVANT PROVISION OF ACT, REGULATION, OR BYLAWS: *Act*, section 33(4)(a); 33(5); 36 and *Bylaws*, section 70

STATUS: Closed

LEGISLATIVE AUTHORITY: *Health Professions Act* s 33, 36