

Submission of Association of Dental Technologists of Ontario on Adjusting the Balance A Review of the Regulated Health Professions Act

The Association of Dental Technologists of Ontario (ADTO) is pleased to submit these suggestions and observations regarding the ongoing HPRAC review of the RHPA. For brevities sake we state our general agreement with most of the recommendations in the four documents. Therefore we will list only those specific recommendations on which we wish to make comment. We are confident that the reviewers of the submissions will take note of all point made by stakeholders in the process and act upon them appropriately.

Recommendations to be addressed

9 - We suggest that the recommendation be amended to include specific titles and variations of titles pertaining to the delivery of regulated health care services. This should be defined broadly enough to allow “grey area” titles such as “therapeutic massage”, “dental laboratory” and “dental studio”, as well as other pseudonyms for regulated health care providers not to be abused by unregulated practitioners.

#10 - We support the idea and spirit of self-regulation, and are pleased to see it confirmed by continuing the structuring of a regulatory college with a majority of professional members.

11 - We support the idea of representation of the teaching institutions on the regulatory colleges. We are aware of the issues for and against such representation and believe that at this time, for our profession, it would be a positive step.

#14 - We are opposed to the amalgamation of the fitness to practice and the discipline committees. There is a clear and important distinction between the purposes, philosophies and mechanisms of the two bodies. We feel that to combine them, although providing administrative benefit in streamlining and efficiency would impose an inappropriate connotation on those who would previously have been reviewed by the fitness to practice committee. Fitness to practice is a preventative review, not a punitive one, but by combining the two functions there may be a punitive perception to the proceedings.

The two committees also have differing requirements with regards to the time component of resolving issues. The discipline committee must have sufficient time in a proceeding to ensure that proper and thorough investigation is carried out and all parties affected are consulted and given time to prepare their representation. The fitness to practice committee must be able to act in a considered but expeditious manner to ensure that the member receives the assistance needed and the public good is preserved.

29 & 42 - These recommendations refer to essentially the same issue, although dealing with two different committees, the complaints committee and the discipline committee. These recommendations destroy the value of the ADR process. If ADR settlements must be reviewed and approved by these committees, and then published and placed on the internet (Recommendation #48), what is the value to either party (complainant or defendant) in utilizing this process.

Do not forget that the professional defendant is not the only party in these actions that may not want the proceedings brought to public attention.

Isn't the purpose of any proceeding to seek an adequate resolution for the complainant? Doesn't the complainant have the ability to opt out of the ADR process at any time, if they feel that it is not meeting their needs? The regulatory college keeps records and has processes which would prevent any chronic abuse of the system by a repeat offender, and by definition the ADR process can not be used in the event of a complaint of a "serious" nature (sexual abuse).

These Recommendations inhibit a valuable tool in fighting administrative overload, by leaving no incentive for either party to bypass the long bureaucratic complaint process over possibly minor disagreements.

48 - While we support the "public's" need to have access to important and pertinent information, we feel that these recommendations are too one sided in their perspective. We oppose the publishing of referrals to the discipline and QA committees, but not the findings of these committees after investigation and consideration. The public accessible record should contain facts, not unproven, accusations which could affect a professional's reputation and livelihood.

We also oppose the publishing of voluntary undertakings related to remediation. See arguments for #29 & 42.

53-57 - We wholeheartedly support an increased role for in the education of the public and enforcement of the RHPA as it applies to non-members of the regulated health professions.

New Recommendation - We suggest that a process be implemented to allow the removal from the board of a regulatory college a public member who is not performing the duties of the office. This needs to be a defined process that can be utilized expeditiously but not frivolously by the regulatory colleges.