

Bylaws of the British Columbia College of Oral Health Professionals

Health Professions and Occupations Act,
SBC 2022, c. 43

These bylaws will come into effect on April 1, 2026 to align with the transition to the *Health Professions and Occupations Act* and are published in advance of that date for information.

April 1, 2026

Territorial acknowledgement

The offices of BCCOHP are located on the traditional, ancestral and unceded territory of the Coast Salish and Lekwungen Peoples, represented today by the Musqueam, Squamish, Tseil-Waututh, Songhees and Esquimalt Nations. Acknowledging the territories and the original stewards of these lands is a fundamental responsibility of our organization and in keeping with our commitment to support the provision of safe, effective, culturally sensitive oral health care for British Columbians.

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PART 1 – INTERPRETATION

General definitions

1.01 In these bylaws:

“**accreditation committee**” means the committee established under section 3.02(1)(e) for the purposes of directing the college's accreditation program in accordance with Part 14;

“**accreditation standards**” mean the standards made under section 8 of *Oral Health Professionals Regulation* and set out in Schedule B respecting

- (a) accreditation of facilities under Part 14
- (b) ownership of accredited facilities, and
- (c) administration and operation of accredited facilities;

“**accredited facility**” means a facility, or portion of a facility, accredited in accordance with Part 14;

“**Act**” means the *Health Professions and Occupations Act*, S.B.C. 2022, c. 43;

“**board**” means the board of the college appointed by the minister under section 346 of the Act;

“**board chair**” means the board member selected as the board chair under section 2.01;

“**board vice chair**” means the board member selected as the board vice chair under section 2.01

“**capacity officer**” means a person retained or employed by the registrar under section 363 of the Act to exercise the powers and perform the duties of a capacity officer;

“**certified specialist**” means

- (a) a full dentist licensee who is granted certification as a certified specialist in a recognized specialty under section 7.03, or
- (b) a limited (restricted-to-specialty) dentist licensee;

“**college**” means the “British Columbia College of Oral Health Professionals” continued as a regulatory college under section 342(2) of the Act;

“**committee**” means, unless specified, any one of the licence committee, permit committee, investigation committee, finance and audit committee or accreditation committee established under section 3.01(1);

“**dental hygiene**” has the same meaning as in section 1 of the *Oral Health Professionals Regulation*;

“**dental hygienist**” means a dental hygienist licensee or a temporary licensee or provisional licensee in the designated health profession of dental hygiene;

“**dental hygienist licensee**” means a person who holds a licence in the class of licence established in section 6.02(a);

“dental technician” means a dental technician licensee or a temporary licensee or provisional licensee in the designated health profession of dental technology;

“dental technician licensee” means a person who holds a licence in the class of licence established in section 6.02(f);

“dental technology” has the same meaning as in section 1 of the *Oral Health Professionals Regulation*;

“dental therapist licensee” means a person who holds a licence in the class of licence established in section 6.02(e);

“dental therapist services” means any of the health services of dentistry specified in Schedule F;

“dentist” means, subject to section 10.01, a full dentist licensee, a limited (restricted-to-speciality) dentist licensee, limited (academic) dentist licensee, or a temporary licensee or provisional licensee in the designated health profession of dentistry;

“dentistry” has the same meaning as in section 1 of the *Oral Health Professionals Regulation*;

“denturism” has the same meaning as in section 1 of the *Oral Health Professionals Regulation*;

“denturist” means a full denturist licensee, a limited (grandparented) denturist licensee, or a temporary licensee or provisional licensee in the designated health profession of denturism;

“designated health profession” means any of the following health professions designated under Part 2 of the Act and section 2 of the *Oral Health Professionals Regulation*:

- (a) dental hygiene;
- (b) dentistry;
- (c) dental technology;
- (d) denturism;

“employee” includes

- (a) an employee, agent or volunteer of the college,
- (b) a person acting under contract to the college, and
- (c) a committee member, but

does not include the registrar;

“ethics standards” means the standards respecting the practice of a designated health profession in a manner that is ethical made under section 70 of the Act and set out in Schedule B;

“facility” means a health care facility at a single physical location in which a designated health profession is practiced;

“**FIPPA**” means the *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165;

“**former Act**” means the *Health Professions Act*, R.S.B.C. 1996, c. 183;

“**former bylaws**” means the bylaws of the college under the former Act;

“**former college**” means any of the College of Dental Hygienists of British Columbia, College of Dental Surgeons of British Columbia, College of Dental Technicians of British Columbia or College of Denturists of British Columbia;

“**full dentist licensee**” means a person who holds a licence in the class of licence established in section 6.02(b);

“**full denturist licensee**” means a person who holds a licence in the class of licence established in section 6.02(g);

“**guiding principles of the Act**” means the guiding principles and objectives set out in sections 14 and 15 of the Act;

“**health profession corporation**” means a corporation that holds a health profession corporation permit issued by the college in accordance with Part 3 of the Act and Part 9 of these bylaws;

“**in good standing**” means that

- (a) a licensee’s licence is not suspended, and
- (b) there are no limits or conditions imposed on the licensee’s licence;

“**investigation committee**” means the committee established under section 3.02(1)(c) for the purposes of directing the college's investigation program in accordance with Parts 3 and 5 of the Act and Part 12 of these bylaws;

“**licence**” means a licence issued or renewed by the registrar in accordance with Divisions 2 and 3, as applicable, of Part 3 of the Act and Part 6 of these bylaws;

“**licence committee**” means the committee established under section 3.02(1)(a) for the purposes of

- (a) directing the college's licence program in accordance with Part 3 of the Act, Part 6 of these bylaws and section 3.10(3), and
- (b) directing the college’s certification program in accordance with Part 7 of these bylaws;

“**licensee**” means a person who holds a licence issued or renewed by the college in accordance with Divisions 2 and 3 of Part 3 of the Act and Part 6 of these bylaws;

“**limited (academic) dentist licensee**” means a person who holds a licence in the class of licence established in section 6.02(d);

“**limited (grandparented) denturist licensee**” means a person who holds a licence in the class of licence established in section 6.02(h);

“**limited (restricted-to-speciality) dentist licensee**” means a person who holds a licence in the class of licence established in section 6.02(c);

“permit committee” means the committee established under section 3.02(1)(b) for the purposes of directing the college's health profession corporation permit program in accordance with Part 3 of the Act, Part 9 of these bylaws and section 3.11(3);

“*Oral Health Professionals Regulation*” means the *Oral Health Professionals Regulation*, B.C. Reg. [cite]

“practice standards” means the standards respecting the practice of a designated health profession made under section 72 of the Act and set out in Schedule B;

“provisional licensee” means a person who holds a licence in the class of licence established in section 6.02(i);

“recognized dental hygiene education program” means an education program specified in Schedule D that is recognized by the board for the purpose of licensing dental hygienist licensees;

“recognized dental technician education program” means an education program specified in Schedule D that is recognized by the board for the purpose of licensing dental technician licensees;

“recognized dental therapy education program” means an education program specified in Schedule D that is recognized by the board for the purpose of licensing dental therapist licensees;

“recognized denturist education program” means an education program specified in Schedule D that is recognized by the board for the purpose of licensing full denturist licensees;

“recognized education program” means one of a recognized dental hygiene education program, recognized dental technician education program, recognized dental therapy education program, recognized denturist education program, recognized general dentistry education program, or recognized specialty education program;

“recognized general dentistry education program” means an education program specified in Schedule D that is recognized by the board for the purpose of licensing full dentist licensees;

“recognized local anesthesia certification program” means a local anesthesia course or program specified in Schedule D that is recognized by the board for the purpose of certifying dental hygienists under section 24 of the *Oral Health Professionals Regulation* and section 7.02;

“recognized specialty” means a dental specialty recognized by the Board under section 7.03(1);

“recognized specialty education program” means an education program specified in Schedule D that is recognized by the board for the purpose of

- (a) licensing limited (restricted-to-specialty) dentist licensees, and
- (b) certifying full dentist licensees as certified specialists;

“record” has the same meaning as in Schedule 1 of FIPPA;

“registrant” means a person who was a registrant of the college under the former Act;

“registrar” means the registrar for the college appointed under section 359(1)(a) of the Act;

“registry” means the registry of the college continued and managed by the registrar under section 395 of the Act;

“regulations” means the regulations under the Act;

“restricted activity” means

- (a) in relation to the designated health profession of dental hygiene, the restricted activities described in Division 2 of Part 3 of the *Oral Health Professionals Regulation*,
- (b) in relation to the designated health profession of dentistry, the restricted activities described in Divisions 2 and 3 of Part 2 of the *Oral Health Professionals Regulation*,
- (c) in relation to the designated health profession of dental technology, the restricted activities described in Division 2 of Part 4 of the *Oral Health Professionals Regulation*, and
- (d) in relation to the designated health profession of denturism, the restricted activities described in Division 2 of Part 5 of the *Oral Health Professionals Regulation*;

“temporary licensee” means a person who holds a licence in the class of licence established in section 6.02(j);

“transition date” means the date these bylaws come into force.

PART 2 – BOARD

Board chair and board vice chair

- 2.01** (1) At the first board meeting after April 1 in each calendar year, the board
- (a) must select a board chair from among the board members, and
 - (b) may select a board vice chair from among the board members.
- (2) A board chair or board vice chair ceases to hold office
- (a) on
 - (i) ceasing to hold office as a board member,
 - (ii) either
 - (A) on the resignation date specified in a written notice of resignation the board chair or board vice chair submits to the registrar, or
 - (B) if no resignation date is specified in a notice of registration, the date the notice is submitted to the registrar,
 - (iii) being removed from the office by the board members, or
 - (iv) dying, or
 - (b) on the selection of a new board chair or a new board vice chair, as applicable, under subsection (1).
- (3) If a board chair ceases to hold office under subsection (2)(a), the board members must select a new board chair from among the members of the board as soon as is convenient.

Powers and duties of board chair and board vice chair

- 2.02** (1) The board chair must
- (a) subject to subsection (2) and section 2.03 preside as chair at all board meetings,
 - (b) perform such tasks and duties as the board may assign, and
 - (c) act generally in accordance with the requirements of the office of the board chair for the proper carrying out of the duties of the board under the Act, the regulations and these bylaws.
- (2) If the board selects a board vice chair under section 2.01, the board vice chair
- (a) must perform such tasks and duties as the board or the board chair may assign,
 - (b) must act generally in accordance with the requirements of the office of the board vice chair for the proper carrying out of the duties of the board under the Act, the regulations and these bylaws, and
 - (c) when the board chair is absent or unable to act for any reason, may exercise the powers and perform the duties of the board chair.

Acting chair

- 2.03** (1) The board members present at a board meeting must select one of their number by majority vote to be acting chair and to exercise the powers and perform the duties of the board chair for the meeting, if
- (a) the board has not selected a board vice chair under section 2.01 and the board chair is absent from the meeting or unable to act for any reason, or
 - (b) the board has selected a board vice chair under section 2.01 but the board chair and board vice chair are both absent from the meeting or unable to act for any reason.
- (2) The board may impose any terms, limits or conditions on an acting chair selected under subsection (1) that the board considers necessary or appropriate in the circumstances.

Remuneration of board members

- 2.04** (1) A board member is entitled to remuneration for time spent on college business and reimbursement for travelling and out-of-pocket expenses incurred in carrying out board member duties.
- (2) Remuneration and reimbursement under subsection (1) must be in accordance with Schedule H.

Frequency of board meetings

- 2.05** The board must meet at least twice in each fiscal year.

Format of board meetings

- 2.06** The board may meet and conduct business in person, by telephone conference, web casting or an equivalent mechanism, or using a combination of any of these.

Calling board meetings

- 2.07** Board meetings must be scheduled by the registrar
- (a) at the request of the board chair, or
 - (b) on receipt of a written request for a meeting from 3 or more board members, setting out the nature of the business to be conducted at the meeting.

Notice of board meetings

- 2.08** (1) The registrar must give reasonable notice of a board meeting to the board members and the public.
- (2) The registrar may give notice under subsection (1) by posting a notice on the college website.
- (3) Despite subsection (1), the registrar is not required to give notice of a board meeting to the public if

- (a) the purpose of the meeting is to conduct urgent business, or
 - (b) the meeting is to be closed as permitted under section 2.09.
- (4) The failure to give notice of a board meeting to, or the non-receipt of such notice by, any person entitled to receive notice of a board meeting does not invalidate proceedings at that meeting.

Open and closed board meetings

- 2.09** (1) Subject to subsections (2) to (5), meetings of the board must be open to the public.
- (2) The board may exclude any person who is not a board member from all or part of a board meeting if it is satisfied the person's attendance is or will be disruptive.
- (3) The board may close a board meeting to persons who are not board members if one or more of the following matters will be discussed:
- (a) personnel matters;
 - (b) information the college would be required or authorized to refuse to disclose in response to an access request under Part 2 of FIPPA;
 - (c) financial or personal or other matters that are of such a nature that the interest of any affected person or the public interest in avoiding disclosure of those matters outweighs the public interest in board meetings being open to the public;
 - (d) whether education or training programs will be recognized by the college;
 - (e) property acquisitions or dispositions;
 - (f) information concerning the contents, scoring or results of an examination;
 - (g) communications to and from legal counsel, or any other matter subject to solicitor-client privilege or litigation privilege;
 - (h) information the college is required by law to keep confidential;
 - (i) whether a board meeting should be closed under paragraphs (a) to (h);
 - (j) whether the authority under subsection (5) should be exercised in relation to a closed board meeting.
- (4) The board may close a board meeting to persons who are not board members if the meeting is for educational purposes or purposes that do not involve the exercise of powers or performance of duties under the Act.
- (5) If all or part of a board meeting is closed under subsections (3) or (4), the board
- (a) may allow one or more officers and employees of the college to attend, or may exclude them from attending, as it considers appropriate, and
 - (b) may allow a person other than a college officer or employee to attend,
 - (i) in the case of a meeting that is closed under subsection (3)(a) to (h), if the board considers this necessary and the person

- (A) already has knowledge of the matters to be discussed, or
 - (B) is a lawyer attending to provide legal advice in relation to the matters to be discussed, and
- (ii) in the case of a meeting that is closed under subsection (4), if the board considers this appropriate.

Board decision-making

- 2.10** (1) Subject to section 352 of the Act, a majority of the board members constitutes a quorum.
- (2) Any board member, including the board chair, may move or propose a resolution at a board meeting.
- (3) No resolution proposed at a board meeting need be seconded.
- (4) Subject to subsections (5) and (6), the board must decide resolutions or questions that come before it by consensus.
- (5) The board decides a resolution or questions by consensus when no board member present objects to a proposed decision in respect of the resolution or question.
- (6) When, despite reasonable efforts, the board is unable to decide a resolution or question by consensus, it may decide the resolution or question by majority vote of the board members present.
- (7) If a vote under subsection (6) is tied, the chair of the meeting does not have a second vote in addition to the vote to which the chair is entitled as a board member, and the resolution or question before the board remains undecided.

Resolutions in writing

- 2.11** (1) Subject to section 2.10(1) and (4) to (7), the board may decide a resolution or question in writing, including through the use of any combination of mail and written communication transmitted by electronic means.
- (2) A resolution decided by the board under subsection (1) has the same effect as if it was decided at a board meeting.

Minutes of board meetings

- 2.12** (1) Subject to subsection (2), the registrar must ensure minutes are taken at each board meeting.
- (2) The board chair must ensure minutes are taken at a closed meeting or any part of a closed meeting from which, under section 2.09(5), the board excludes the registrar and any deputy registrar authorized to exercise the powers and perform the duties of the registrar.
- (3) Resolutions or questions decided in writing under section 2.11 must be included in the minutes of the next board meeting.

- (4) The registrar must publish the minutes of each board meeting on the college website, excluding those minutes or parts of minutes that describe anything the board discussed or decided during a closed meeting.
- (5) When all or part of a board meeting is closed under section 2.09(3), the register must include the reasons for closing the meeting in the minutes published under subsection (4).

Conflict of interest – board members

- 2.13** (1) If a board member discloses a conflict of interest under section 352 of the Act or is the subject of a disclosure under section 2.14 or 4.13, the board must appoint one or more of the following persons to take the actions described in subsections (2) and (3):
- (a) the registrar;
 - (b) a deputy registrar;
 - (c) a board member or board members other than the board member who has disclosed a conflict or is the subject of a disclosure.
- (2) A board member described in subsection (1) must cooperate with the person or persons appointed under that subsection in
- (a) assessing
 - (i) the nature and scope of the conflict of interest, and
 - (ii) what steps might be taken to address the conflict, and
 - (b) reporting to the board in respect of the assessment under paragraph (a).
- (3) On receipt of a report under subsection (2)(b), the board must direct the steps to be taken to address the conflict of interest, and the board member described in subsection (1) must cooperate with the person or persons appointed under that subsection in
- (a) taking the steps directed by the board,
 - (b) communicating, to the extent reasonable and necessary, within the college and with members of the public or licensees affected by the conflict regarding the conflict and the steps taken to address it, and
 - (e) documenting as appropriate in the college records the actions taken under subsections (2) and (3).

Identifying conflicts of interest – board members

- 2.14** (1) If a board member has information indicating that another board member has a conflict of interest in relation to a college matter which the other board member has not yet disclosed under 352 of the Act, the board member with the information must, as soon as reasonably practical, disclose the information and the general nature of the conflict to the board.

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- (2) If a board member has information indicating the registrar has a conflict of interest in relation to a college matter that the registrar has not yet disclosed under section 4.12, the board member must, as soon as reasonably practical, disclose the information and the general nature of the conflict to the registrar and the board.
 - (3) If a board member has information indicating an employee has a conflict of interest in relation to a college matter that, to the knowledge of the board member, the employee has not yet disclosed under section 4.14(2), the board member must, as soon as reasonably practical, disclose the information and the general nature of the conflict to the registrar.
 - (4) No action may be taken under this section, or under section 4.13 or 4.15, if a conflict of interest is premised solely on a person's race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, or age.
 - (5) Without limiting subsection (4), no action may be taken under this section, or under section 4.13 or 4.15, if a conflict of interest is premised solely on a person's Indigenous identity or general interest in Indigenous matters.

Board policies and procedures

- 2.15** (1) Subject to the requirements of the Act, the regulations and these bylaws, the board may establish or adopt policies and procedures in relation to
- (a) board processes, including the conduct of board meetings,
 - (b) the appointment and oversight of the registrar, committee members and professional standards advisors, including
 - (i) qualifications for those positions,
 - (ii) seeking and evaluating candidates for those positions,
 - (iii) evaluating the performance of persons in those positions, and
 - (iv) rescinding appointments for those positions.
- (2) Subject to section 387(2) of the Act, the board must make policies and procedures for carrying out consultations as required under section 384.
- (3) The board must direct the registrar to publish on the college website the policies and procedures it establishes or adopts under this section.

PART 3 – COMMITTEES

Definitions

3.01 In this Part,

“finance and audit committee” means the committee established under section 3.02(1)(d) for the purposes described in section 3.13(5);

“investigator” means a person retained or employed by the registrar under section 363 of the Act to exercise the powers and perform the duties of an investigator;

“representative of the public” means a person who

- (a) at the time of the person’s appointment as a committee member,
 - (i) did not exercise powers or perform duties for the college, or
 - (ii) was not an employee of, and did not otherwise provide services to, the college, and
- (b) does not practise a designated health profession.

Committees

3.02 (1) The following committees are established:

- (a) licence committee;
- (b) permit committee;
- (c) investigation committee;
- (d) finance and audit committee
- (e) accreditation committee.

(2) The board must appoint the members of a committee

- (a) in accordance with the requirements of this section, and
- (b) as necessary
 - (i) to meet the composition of the committee specified in this Part, and
 - (ii) to ensure that the committee panel composition requirements and objectives under section 3.04(5) and (8) may be met.

(3) In addition to the restriction on committee appointments in section 359(4) of the Act, the board may only appoint the following persons as a member of a committee:

- (a) a representative of the public;
- (b) a dental hygienist licensee;
- (c) a full dentist licensee;
- (d) a limited (restricted-to-specialty) dentist licensee;

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- (e) a limited (academic) dentist licensee;
 - (f) a dental therapist licensee;
 - (g) a dental technician licensee;
 - (h) a full denturist licensee .
- (4) Despite subsection (3), the board may appoint a board member to the finance and audit committee under section 3.13(2)(b).
- (5) The board must,
- (a) ensure that each person appointed under subsection (2) possesses the education, training, experience and other qualifications needed to exercise the powers and fulfill the duties of a committee member effectively and in accordance with the guiding principles of the Act, and
 - (b) for the licence committee, permit committee and investigation committee, make reasonable efforts to ensure the appointed members represent a range of perspectives, including the perspectives of Indigenous persons and other persons from equity-denied communities.
- (6) Subject to any terms and conditions on an appointment set by the board under section 359(3) of the Act, a person appointed under subsection (2)
- (a) serves a term of office specified by the board not exceeding 3 years,
 - (b) is eligible for reappointment to a committee, and
 - (c) ceases to hold office as a committee member upon,
 - (i) the expiration of the term of office under paragraph (a),
 - (ii) death
 - (iii) resigning from office by submitting notice of that resignation in writing to the registrar, or
 - (iv) being removed from office by a resolution of the board.
- (7) Despite subsection (6)(b) but subject to subsection (7), a person is not eligible to be reappointed as a committee member until one year after he or she
- (a) completes 6 consecutive years of service as a committee member, or
 - (b) ceases to hold office under subsection (6)(c)(iii) or (iv).
- (8) The board may waive the one-year period of ineligibility under subsection (7) if it is satisfied there is a public interest in retaining a person as a committee member, including in particular an Indigenous person or a person from another equity-denied community.
- (9) A member of the investigation committee must not be a member of any other committee.
- (10) Subject to the Act, the regulations and these bylaws, the board may set terms of reference for each committee.

Committee chairs and vice chairs

- 3.03** (1) A committee must select a committee chair and may select a committee vice chair
- (a) before April 1 in each year, and
 - (b) as required under subsection (4)(b) and (c).
- (2) A committee chair
- (a) must preside at all meetings of the committee,
 - (b) subject to the Act, the regulations and these bylaws, may exercise powers and must perform duties assigned by the committee, and
 - (c) must report to the board in a form and at a time as directed by the board.
- (3) If a committee selects a committee vice chair under subsection (1), the committee vice chair
- (a) must perform such tasks and duties as the committee or the committee chair may assign, and
 - (b) when the committee chair is absent or unable to act for any reason, may exercise the powers and perform the duties of the committee chair.
- (4) The committee members present at a meeting of a committee may appoint one of their number to exercise the powers and perform the duties of the committee chair, if
- (a) the committee has not selected a committee vice chair under subsection (1) and the committee chair is absent from the meeting or unable to act for any reason, or
 - (b) the committee has selected a committee vice chair under subsection (1) and the committee chair and committee vice chair are both absent from the meeting or unable to act for any reason.
- (5) A committee chair or committee vice chair ceases to hold office on,
- (a) the selection of a new chair or new vice chair, as applicable, under subsection (1),
 - (b) ceasing to be a committee member under section 3.02(6), or
 - (c) being removed from office as a committee chair or committee vice chair, as applicable, by a resolution of the committee.

Committee panels

- 3.04** (1) The licence committee, permit committee, investigation committee and accreditation committee may meet in panels of at least 3 committee members.
- (2) Subject to subsections (3), (5), (8) and (9), the chair of a committee referred to in subsection (1) must appoint the members of a committee panel and must designate one of the appointed members as chair of the panel.
- (3) At least 1/3 of the members of a committee panel must be representatives of the public.

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- (4) A member of a committee may be appointed concurrently to more than one panel of the committee.
 - (5) For a panel of the licence committee or the investigation committee, in addition to the representatives of the public required under subsection (3),
 - (a) if the panel may make a decision in respect of an applicant for a licence or a licensee in the designated health profession of dental hygiene, at least one member of the panel must be a dental hygienist licensee,
 - (b) if the panel may make a decision in respect of an applicant for a licence or a licensee in the designated health profession of dentistry, at least one member of the panel must be a licensee specified in section 3.02(3)(c) or (d),
 - (c) if the panel may make a decision in respect of an applicant for a licence or a licensee in the designated health profession of dental technology, at least one member of the panel must be a dental technician licensee, and
 - (d) if the panel may make a decision in respect of an applicant for a licence or a licensee in the designated health profession of denturism, at least one member of the panel must be a full denturist licensee.
 - (6) A panel of the licence committee makes a decision in respect of an applicant for a licence or a licensee under subsection (5) when the panel makes a decision under sections 52 to 54 of the Act.
 - (7) A panel of the investigation committee makes a decision in respect of a licensee under subsection (5) when the panel
 - (a) assesses, under section 134 of the Act, whether it has reasonable grounds to believe that a respondent lacks competence or has committed an act of misconduct, or
 - (b) decides
 - (i) a review of a disciplinary order under section 110 of the Act,
 - (ii) whether to begin an investigation of a licensee under section 124 of the Act,
 - (iii) whether to direct the registrar to take action under section 126 of the Act,
 - (iv) whether to direct or require an investigator to take action further to the conduct of an investigation under section 127 of the Act,
 - (v) whether to direct the registrar to take action in respect of a respondent's capacity under section 128 of the Act,
 - (vi) whether to direct an investigator to delay all or part of an investigation under section 129(2) of the Act,
 - (vii) what direction to give the registrar as to the disposition of a complaint under section 136(2) of the Act,
 - (viii) whether to direct the registrar to request the cancellation of a citation under section 138(2) of the Act,

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- (ix) whether to agree to one or more disciplinary orders with a respondent under section 139(1) of the Act, and
 - (x) a reconsideration of a summary protection order under section 261 of the Act, including the setting or authorizing of directions or a schedule for a repeat reconsideration under section 261(2) of the Act.
- (8) The chair of the investigation committee must make reasonable efforts to appoint at least one Indigenous person to a panel that will make a decision specified in subsection (7) in respect of a matter involving one or more of
 - (a) Indigenous-specific racism or discrimination,
 - (b) Indigenous practices, or
 - (c) a complainant or respondent who is an Indigenous person.
 - (9) Subject to subsection (5), a panel of a committee may exercise any power and perform any duty of that committee.

Remuneration of committee members

- 3.05** (1) A committee member is entitled to remuneration for time spent on committee work and reimbursement for travelling and out-of-pocket expenses incurred in carrying out committee member duties.
- (2) Remuneration and reimbursement under subsection (1) must be in accordance with Schedule H.

Format of committee and committee panel meetings

- 3.06** (1) A committee or a committee panel may meet and conduct business in person, by telephone conference, web casting or an equivalent mechanism, or using a combination of any of these.
- (2) The meetings of a committee or a committee panel are closed to the public, including licensees who are not members of the committee or panel, unless, further to an application in writing or on its own motion, a committee or panel invites a member of the public to attend all or part of a meeting.
- (3) While a member of the public is in attendance at a meeting of a committee or a committee panel under subsection (2), the committee or panel must not discuss any of the matters specified in section 2.09(3), except to the extent that the member of the public in attendance is already aware of those matters or information relating to those matters.

Committee and committee panel decision making

- 3.07** (1) For quorum at a meeting of a committee,
- (a) a majority of the committee must be present, and
 - (b) at least 1/3 of the committee members present must be representatives of the public.

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- (2) Despite subsection (1)(a), for quorum at a meeting of a committee panel
 - (a) all members of the panel must be present if the panel has fewer than 4 members, and
 - (b) if the panel has 4 members or more,
 - (i) 3/4 of the panel must be present, and
 - (ii) at least 1/3 of the panel members present must be representatives of the public.
 - (3) Subject to subsections (4) and (5), a committee or committee panel must decide resolutions or questions that come before it by consensus.
 - (4) A committee or committee panel decides a resolution or question by consensus when no member present at a meeting of the committee or committee panel, as applicable, objects to a proposed decision in respect of the resolution or question.
 - (5) When, despite reasonable efforts, a committee or committee panel is unable to decide a resolution or question by consensus, it may decide the resolution or question by majority vote of the members present.
 - (6) If a vote under subsection (5) is tied, the committee chair and the chair of a committee panel do not have a second or deciding vote, and the resolution or question before the committee or panel remains undecided.

Resolutions in writing

- 3.08** (1) Subject to section 3.07, a committee or committee panel may decide a resolution in writing, including through the use of any combination of mail and written electronic communication.
- (2) A resolution decided by a committee or committee panel under subsection (1) has the same effect as if it was decided at a meeting of the committee or committee panel.

Minutes of committee and committee panel meetings

- 3.09** (1) The chair of a committee or a committee panel must ensure that minutes are taken at each meeting of the committee or panel and retained on file.
- (2) Resolutions approved in writing under section 3.08 must be included in the minutes of the next committee or committee panel meeting, as applicable.

Licence committee

- 3.10** (1) Subject to subsection (2) and section 3.02, the licence committee consists of at least 12 persons appointed by the board, including
- (a) at least 8 licensees, and
 - (b) at least 4 representatives of the public.
- (2) At least 1/3 of the members of the licence committee must be representatives of the public.

- (3) In addition to the duties and powers of the licence committee under Divisions 2 and 3 of Part 3 of the Act and Part 6 of these bylaws, the committee is responsible for reviewing and assessing the requirements for licensing under Part 6 of these bylaws and making recommendations to the board for amendment of same.

Permit committee

- 3.11** (1) Subject to subsection (2) and section 3.02, the permit committee consists of at least 12 persons appointed by the board, including
- (a) at least 8 licensees, and
 - (b) at least 4 representatives of the public.
- (2) At least 1/3 of the members of the permit committee must be representatives of the public.
- (3) In addition to the duties and powers of the permit committee under Divisions 2 and 4 of Part 3 of the Act and Part 9 of these bylaws, the committee is responsible for reviewing and assessing the requirements for permitting health profession corporations under Part 9 of these bylaws and making recommendations to the board for amendment of same.

Investigation committee

- 3.12** (1) Subject to subsection (2) and section 3.02, the investigation committee consists of at least 15 persons appointed by the board, including
- (a) at least 10 licensees, and
 - (b) at least 5 representatives of the public.
- (2) At least 1/3 of the members of the investigation committee must be representatives of the public.

Finance and audit committee

- 3.13** (1) In this section, “**auditor**” means the auditor appointed by the board under section 4.09.
- (2) Subject to subsection (3) and section 3.02, the finance and audit committee consists of at least 5 persons appointed by the board, including
- (a) at least one representative of the public who is a chartered professional accountant, and
 - (b) at least one board member who may also be a representative of the public described in paragraph (a).
- (3) At least 1/3 of the members of the finance and audit committee must be representatives of the public.
- (4) The board must designate a representative of the public appointed under subsection (2)(a) as the committee chair.

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- (5) The finance and audit committee is responsible for
- (a) analyzing the annual operating and capital budget prepared by the registrar and preparing a report on that analysis to be sent to the board at the same time as the budget,
 - (b) reviewing all financial statements and reports prepared for the college, including the annual audited financial statements, and advising the board on
 - (i) any issues with a statement or report that the committee identifies, and
 - (ii) if board approval of a statement or report is required, whether to approve the statement or report,
 - (c) consulting with the registrar and the auditor on
 - (i) the suitability and sufficiency of accounting policies, practices and systems utilized by the college, and
 - (ii) significant college financial reports, records or presentations,
 - (d) making recommendations to the board on the appointment of the auditor,
 - (e) reviewing the performance of the auditor and reporting to the board on that review,
 - (f) working with the registrar on
 - (i) establishing and, as appropriate, amending policies and procedures for managing allegations of misconduct regarding the finances of the college, and
 - (ii) reporting any such allegations to the board,
 - (g) monitoring the investments and indebtedness of the college and reporting to the board on same, and
 - (h) monitoring college compliance with financial laws and best practices, reviewing college policies and procedures on compliance, and reporting to the board on same.

Accreditation committee

- 3.14** (1) Subject to subsection (2) and section 3.02, the accreditation committee consists of at least nine persons appointed by the board, including
- (a) at least 2 persons who are full dentist licensees or limited (restricted-to-specialty) dentist licensees,
 - (b) at least 2 medical practitioners certified in anesthesia by the Royal College of Physicians and Surgeons of Canada, who are confirmed by the College of Physicians and Surgeons of British Columbia as suitable for membership on the committee,
 - (c) at least 2 persons with expertise in biomechanical engineering, and
 - (d) at least 3 representatives of the public.

- (2) At least 1/3 of the members of the accreditation committee must be representatives of the public.
- (3) In addition to the duties and powers of the accreditation committee under Part 14, the committee is responsible for reviewing and assessing the accreditation standards and making recommendations to the board for amendment of same.

Advisory working groups

- 3.15**
- (1) The registrar may establish advisory working groups for such purposes as the registrar considers necessary or appropriate.
 - (2) Subject to the Act, the regulations and these bylaws, the registrar may appoint any person other than a board member to an advisory working group.
 - (3) The registrar shall determine the composition of, and terms of reference for, an advisory working group.
 - (4) A person appointed to an advisory working group is entitled to receive remuneration for time spent on college business and reimbursement for travelling and out-of-pocket expenses incurred in carrying out the duties of the advisory working group.
 - (5) Remuneration and reimbursement under subsection (4) must be in accordance with Schedule H.
 - (6) The registrar may dissolve an advisory working group at any time.

PART 4 – COLLEGE ADMINISTRATION

Registrar

- 4.01** (1) In addition to the powers and duties assigned to the registrar under the Act, the regulations and elsewhere in these bylaws, the registrar
- (a) is the chief executive officer of the college, and as such, holds final responsibility for all administrative and operational matters for the college, and
 - (b) is a non-voting member of every committee and every panel of a committee.
- (2) The registrar is authorized to
- (a) act under section 43(1) of the Act, and
 - (b) exercise the powers and perform the duties of a capacity officer.
- (3) The registrar may designate a college employee to assist with initiatives by the college to promote adherence to the guiding principles of the Act.
- (4) The registrar may retain consultants, experts, specialists and other persons who, in the opinion of the registrar, are necessary to assist the registrar to exercise powers and perform duties under the Act, the regulations and these bylaws.

Deputy registrars

- 4.02** (1) The deputy registrar appointed under section 360(1) of the Act, when not acting under that section, is authorized to exercise powers and perform duties of the registrar
- (a) as delegated by the registrar, and
 - (b) subject to any directions given or limits or conditions set by the registrar further to that delegation.
- (2) A deputy registrar appointed under section 360(2) of the Act is authorized to exercise the powers and perform the duties of the registrar or a deputy registrar acting under section 360(1)
- (a) as delegated by the registrar or by the deputy registrar acting under section 360(1) of the Act, and
 - (b) subject to any directions given or limits or conditions set by the registrar or deputy registrar further to that delegation.

Fiscal year

- 4.03** The fiscal year of the college commences on April 1 and ends on March 31 of the following year.

Payments and commitments

- 4.04** The board
- (a) must annually

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- (i) approve an operating and capital budget for the next fiscal year, and
 - (ii) review the forecasted excess or deficiency of revenue over expense for the current fiscal year,
 - (b) may amend the budget approved under subsection (a),
 - (c) may establish contingency reserve funds,
 - (d) may establish criteria for disbursements to be made from a contingency reserve fund established under paragraph (c), and
 - (e) must review, on a quarterly basis, the interim operating statements, balance sheets, summary of variances, and the status of any contingency reserve funds established under paragraph (c).

Grants from college funds

4.05 The board may, in approving or amending the operating budget under section 4.04,

- (a) award grants out of the college's funds for purposes consistent with the guiding principles of the Act,
- (b) attach any terms or conditions to a grant awarded under paragraph (a) that the board considers necessary to ensure the recipient uses the grant for a purpose consistent with the guiding principles of the Act, and
- (c) establish terms or conditions on the payment of a grant awarded under paragraph (a).

Banking

4.06 The board may direct the registrar to establish and maintain accounts in the name of the college with a chartered bank, trust company or credit union.

Borrowing Powers

4.07 The board may direct the registrar to raise money, or guarantee or secure the payment of money, in the name of the college, in accordance with the board's responsibilities under section 344 of the Act.

Investments

4.08 The registrar may invest funds of the college, in the name of the college, in a manner consistent with sections 15.1 and 15.2 of the *Trustee Act*, R.S.B.C. 1996, c. 464, and otherwise in accordance with any investment policy the board may direct.

Auditor

- 4.09** (1) Each fiscal year, the board must
- (a) appoint a chartered professional accountant to be the auditor for the college, and
 - (b) direct the appointed auditor to

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- (i) conduct an audit of the college's financial information for that fiscal year, and
 - (ii) prepare an auditor's report.
- (2) The registrar must submit the college's financial information to the auditor within 60 days of the end of the fiscal year.
 - (3) A copy of the auditor's report prepared further to section (1)(b)(ii) must be included in the college's annual report for the corresponding year.

Real property

4.10 The board may sell, transfer, dispose of, mortgage, charge or otherwise encumber a beneficial interest that the college holds in real property by resolution of the board decided in accordance with section 2.10.

Legal counsel

- 4.11** (1) The registrar may retain legal counsel to assist the board, the registrar, a committee, a panel, or any advisory working group in exercising any power or performing any duty under the Act or these bylaws.
- (2) The board may retain legal counsel to assist the board on any college matter.

Conflict of interest – registrar

- 4.12** (1) If the registrar has a conflict of interest in relation to a college matter, the registrar must as soon as reasonably practicable, disclose the general nature of the conflict to the board.
- (2) If the registrar discloses a conflict of interest under subsection (1) or is the subject of a disclosure under section 4.13,
- (a) the board must appoint a board member or board members who will take the actions described in paragraph (b) and subsection (3), and
 - (b) the registrar must cooperate with the board member or board members appointed under paragraph (a) in
 - (i) assessing
 - (A) the nature and scope of the conflict of interest, and
 - (B) what steps might be taken to address the conflict, including whether and to what extent the deputy registrar appointed under section 360(1) of the Act must act further to that section, and
 - (ii) reporting to the board on the assessment under subparagraph (i).
- (3) On receipt of a report under subsection (2)(b)(ii), the board must direct the steps to be taken to address the conflict of interest, and the registrar must cooperate with the board member or board members appointed under subsection (2)(a) in
- (a) taking the steps directed by the board,

- (b) communicating, to the extent reasonable and necessary, within the college and with members of the public or licensees affected by the conflict regarding the conflict and the steps taken to address it,
- (e) documenting as appropriate in the college records the actions taken under subsections (2) and (3).

Identifying conflicts of interest – registrar

- 4.13** (1) The registrar may obtain from any source information indicating a board member or employee has a conflict of interest in relation to a college matter, including locating and gathering such information on the registrar’s own initiative.
- (2) If the registrar has information indicating a board member has a conflict of interest in relation to a college matter that the board member has not yet disclosed under section 352 of the Act, the registrar must, as soon as reasonably practical, disclose the information and the general nature of the conflict to the board.
- (3) If the registrar has information indicating an employee has a conflict of interest in relation to a college matter that the board member has not yet disclosed under section 4.14, the registrar must
- (a) as soon as reasonably practical, disclose the information and the general nature of the conflict to the employee, and
 - (b) either
 - (i) work with the employee in carrying out the actions described in section 4.14(3), or
 - (ii) disclose the information and the general nature of the conflict to a supervisor described in section 4.14(2), and direct the supervisor to work with the employee in carrying out the actions described in section 4.14(3), or work with supervisor and the employee in carrying out those actions.

Conflict of interest – employees

- 4.14** (1) In this section “**supervisor**” means an employee who has a supervisory role in relation to an employee who has a conflict of interest, and includes
- (a) a deputy registrar if the deputy registrar has a supervisory role in relation to the employee who may have a conflict, and
 - (b) a committee chair if the employee who has a conflict of interest is a committee member.
- (2) If an employee has a conflict of interest in relation to a college matter, the employee must, as soon as reasonably practicable, disclose the general nature of the conflict to the registrar or to a supervisor designated by the registrar for the purposes of receiving such disclosure from the employee.
- (3) If an employee discloses a conflict of interest under subsection (2) or is the subject of a disclosure under section 4.15(3), the employee must cooperate with the registrar or a supervisor described in subsection (2), or both, in

- (a) assessing the nature and scope of the conflict of interest,
- (b) deciding what steps should be taken to address the conflict,
- (c) taking the steps decided on under paragraph (b),
- (d) communicating, to the extent reasonable and necessary, within the college and with members of the public or licensees effected by the conflict, regarding the conflict and how it was addressed,
- (e) documenting as appropriate in the college records the actions taken under paragraphs (a) to (d).

Identifying conflicts of interest - employees

- 4.15** (1) If an employee has information indicating a board member or another employee has a conflict of interest in relation to a college matter that, to the knowledge of the employee with the information, the board member or other employee has not yet disclosed under section 352 of the Act or section 4.14(2), as applicable, the employee with the information must, as soon as reasonably practical, disclose the information and general nature of the conflict to the registrar.
- (2) If an employee who is not the deputy registrar appointed under section 360(1) of the Act has information indicating the registrar has a conflict of interest in relation to a college matter that, to the knowledge of the employee, the registrar has not yet disclosed under section 4.12, the employee must, as soon as reasonably practical, disclose the information and general nature of the conflict to the deputy registrar appointed under section 360(1) of the Act.
- (3) If the deputy registrar appointed under section 360(1) of the Act has information indicating the registrar has a conflict of interest in relation to a college matter that, to the knowledge of the deputy registrar, the registrar has not yet disclosed under section 4.12, the deputy must, as soon as reasonably practical, disclose the information and general nature of the conflict to the board.

PART 5 – COLLEGE RECORDS AND INFORMATION

Responsibility for administration of FIPPA

- 5.01** (1) The registrar is the “head” of the college for the purposes of FIPPA.
- (2) The registrar must report to the board regarding the steps the college has taken to fulfil its duties under FIPPA in a form and at a time as directed by the board.

Protection of personal information

- 5.02** (1) Subject to section 102(3)(b) of the Act, the registrar must take reasonable steps to ensure that the collection, use, and disclosure of personal information by the college complies with Part 3 of FIPPA.
- (2) The registrar must take reasonable steps to ensure that a person or entity to whom the college provides personal information for processing, storage or destruction complies with Part 3 of FIPPA.

Disposal of records containing personal information

- 5.03** The registrar must ensure that a college record containing personal information is disposed of only by
- (a) destroying the record in a manner that ensures that the personal information in the record cannot be retrieved or reconstructed, including
 - (i) for a paper record by using a shredding device, or
 - (ii) for an electronic record, physically destroying the storage medium, or permanently erasing the stored information, or
 - (b) returning the record to the person the information is about or the licensee who compiled the information, as appropriate.

Records

- 5.04** (1) The registrar must retain the following records permanently, in physical or electronic form:
- (a) the minutes for each board meeting, together with all supporting records submitted to the board for each board meeting, and
 - (b) each annual report made by the board under section 398 of the Act.
- (2) Subject to subsection (1), the board must establish a policy respecting the retention and disposition of college records.

Additional information required in registry

- 5.05** (1) In addition to the information permitted or required to be included in the registry under the Act and regulations, the registrar must include the following for each licensee:

- (a) a statement indicating what designated health profession or professions the licensee is authorized to practise;
 - (b) a notation of each certification granted to the licensee by the college under Part 7;
 - (c) subject to subsection (3), if an order specified in section 249(2) of the Act made against the licensee was reconsidered or reviewed under the Act or under judicial review, a summary of the decision on reconsideration, review or judicial review and the reasons for the decision;
 - (d) a summary of any order specified in section 390(1)(g) of the Act made against the licensee;
 - (e) any public notice published under sections 255 and 256 of the Act, or under section 39.3 of the former Act, that includes the licensee's name.
- (2) The registrar must update a notation made under subsection (1)(b) if
- (a) the licensee requests or gives written consent for cancellation of a certification,
 - (b) the licensee fails to renew a certification in accordance with section 7.04, or
 - (c) a certification is cancelled or suspended further to a disciplinary order or summary protection order.
- (3) If a decision on reconsideration, review or judicial review rescinds an order specified in section 249(2) of the Act made against the licensee, resulting in the summary of that order being removed from the registry, the registrar may only include a summary under section 1(c) in the registry if the registrar is of the opinion that doing so is necessary in accordance with the guiding principles of the Act.
- (4) Apart from information that is required to be included in the registry under the Act or regulations, the registrar may decline to include information in, or remove information from, the registry, if the registrar reasonably believes that disclosure of the information may present a risk of harm to a licensee or other person.

PART 6 – LICENSING

DIVISION 1 – INTERPRETATION

Definitions

6.01 In this Part:

“date of the applicant’s application for a licence” means the date on which the applicant has both submitted a completed application under section 6.03(1) and paid the applicable fees under section 6.03(1)(a)(iv)(B);

“education evaluation organization” means an organization that is

- (a) specified in Schedule E, or
- (b) recognized by the college, in accordance with the process also specified in Schedule E, for evaluating the substantial equivalence of all or any part of
 - (i) an applicant’s education, including the credentials evidencing that education, or
 - (ii) an applicant’s education, training or practice experience.

“NDEB certificate” means a certificate of qualification issued by the National Dental Examining Board, or another examining body approved by the board;

“NDHCE” means the National Dental Hygiene Certification Examination offered by the National Dental Hygiene Certification Board, or any successor examination approved by the board;

“practising licence” means, subject to section 6.19, a class of licence established under section 6.02(a) to (g)

DIVISION 2 – CLASSES OF LICENCE

Classes of licence

6.02 The following classes of licence are established:

- (a) dental hygienist licence;
- (b) full dentist licence;
- (c) limited (restricted-to-specialty) dentist licence;
- (d) limited (academic) dentist licence
- (e) dental therapist licence
- (f) dental technician licence;
- (g) full denturist licence;
- (h) limited (grandparented) denturist licence;

- (i) provisional licence;
- (j) temporary licence.

DIVISION 3 –PRACTISING LICENCE – GENERAL ELIGIBILITY STANDARDS

Practising licence application

- 6.03** (1) An applicant for a practising license must submit to the registrar
- (a) a completed application for a licence in the form and manner ordered by the registrar that, in addition to the applicant’s criminal record check authorization as required under section 41(2)(b) of the Act, includes
 - (i) credentials confirming that the applicant meets the eligibility standards specified in Division 4 for the class of licence in which the applicant seeks a licence,
 - (ii) information or records, or both, confirming
 - (A) the applicant’s identity and legal name,
 - (B) the applicant’s contact information for the purposes of processing the application for a licence, including a telephone number and email address,
 - (C) the applicant is of good character and will practise the designated health profession for which the applicant seeks a licence in an ethical manner,
 - (D) the applicant’s compliance with the applicable requirements for liability insurance under section 8.14, and
 - (E) the applicant has received all mandatory vaccinations against transmissible illness required by or under an enactment,
 - (iii) in the case of an applicant who is or has been an extrajurisdictional practitioner, a certificate of professional conduct that meets the requirements of section 8.17 and section 81(1) of the Act, dated no more than 60 days prior to the date of the applicant’s application for a licence, issued by each applicable extrajurisdictional regulator in every jurisdiction where the applicant has practiced a health profession,
 - (iv) in the case of an applicant who is practising or has practised a health profession in a jurisdiction outside Canada,
 - (A) information or records, or both, from the jurisdiction that are dated no more than 60 days prior to the date of the applicant’s application for a licence, and taken together, are comparable to a criminal record check, or
 - (B) if the registrar is satisfied that the applicant is unable to obtain such information or records, despite making reasonable efforts to do so, a sworn statement from the applicant in a form satisfactory to the

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- registrar attesting to the applicant's criminal record in the jurisdiction,
- (v) the declaration specified in Schedule C for the class of licence in which the applicant is seeks a licence, and
 - (vi) payment of
 - (A) any outstanding amount owed or owing by the applicant to the college, including without limitation any amount accrued or accruing to a former regulatory college prior to its amalgamation into the college, and
 - (B) the application fee and licence fee specified in Schedule A, and
 - (b) any additional information or records that the registrar requests or orders the applicant to provide.
- (2) Despite subsection (1), an applicant is eligible to be issued a practising licence, if the applicant
- (a) holds
 - (i) a licence or registration in another Canadian jurisdiction that
 - (A) is the equivalent of holding the class of licence in which the applicant seeks a licence, including, with respect to an applicant for a limited (restricted-to-specialty) dentist licence, the recognized specialty in which the applicant seeks a licence, and
 - (B) is not subject to any practice restrictions, limits or conditions relevant to the practice of the applicable designated health profession in British Columbia, or
 - (ii) a licence or registration in a jurisdiction outside Canada that
 - (A) in the opinion of the licence committee, was granted or issued further to eligibility standards substantially equivalent to the eligibility standards for the class of licence in which the applicant is seeks a licence, including, with respect to an applicant for a limited (restricted-to-specialty) dentist licence, the recognized specialty in which the applicant seeks a licence, and
 - (B) is not subject to any practice restrictions, limits or conditions relevant to the practice of the applicable designated health profession in British Columbia, and
 - (b) submits to the registrar a completed application for a licence in the form and manner ordered by the registrar that, in addition to the applicant's criminal record authorization as required under section 41(2)(b) of the Act, includes the items required in subsection (1)(a)(ii) to (vi) and (b).

DIVISION 4 – PRACTISING LICENCE – CLASS SPECIFIC ELIGIBILITY STANDARDS**Dental hygienist licence**

6.04 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a dental hygienist licence are

- (a) a diploma or degree from a recognized dental hygiene education program, and
- (b) successful completion of the NDHCE no more than 3 years before the date of the applicant's application for a licence under section 6.03.

Full dentist licence

6.05 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a full dentist licence are

- (a) a degree or equivalent qualification from a recognized general dentistry education program, and
- (b) an NDEB certificate issued no more than 3 years before the date of the applicant's application for a licence under section 6.03.

Limited (restricted-to-specialty) dentist licence

6.06 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a limited (restricted-to-specialty) dentist licence in a recognized specialty are successful completion of

- (a) a degree or equivalent qualification in the recognized specialty from a recognized specialty education program, and
- (b) successful completion of an assessment in the recognized specialty no more than 3 years before the date of the applicant's application for a licence under section 6.03.

Limited (academic) dentist licence

6.07 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a limited (academic) dentist licence are

- (a) a degree in dentistry from a post-secondary educational institution, and
- (b) an appointment as a full, associate or assistant professor of dentistry to either
 - (i) the Faculty of Dentistry of the University of British Columbia, or
 - (ii) the faculty of another post-secondary educational institution approved by the licence committee.

Dental therapist licence

6.08 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a dental therapist licence are

- (a) a diploma or degree in dental therapy from a recognized dental therapy program,
- (b) successful completion of any examinations required by the licence committee no more than 3 years before the date of the applicant's application for a licence under section 6.03, and
- (c) the applicant is employed by or has contracted with one of the following to provide dental therapist services:
 - (i) the First Nations Health Authority;
 - (ii) a regional health authority;
 - (iii) an Indigenous governing body;
 - (iv) a First Nations community;
 - (v) a not-for-profit facility.

Dental technician licence

6.09 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a dental technician licence are

- (a) graduation from a recognized dental technician education program, and
- (b) successful completion of the Dental Technology Entry-to-Practice Assessment administered by the Canadian Alliance of Dental Technology Regulators no more than 3 years before the date of the applicant's application for a licence under section 6.03.

Full denturist licence

6.10 For the purposes of section 6.03(1)(a)(i), the eligibility standards for a full denturist licence are

- (a) graduation from a recognized denturist education program,
- (b) prior to writing the objective structured clinical examination required under paragraph (c)(ii), successful completion of the internship portfolio requirements described in Schedule G, and
- (c) no more than 3 years before the date of the applicant's application for a licence under section 6.03, successful completion of
 - (i) the theory examination, and
 - (ii) the objective structured clinical examination specified by the licence committee.

DIVISION 5 – EQUIVALENCY DETERMINATION

Definition

6.11 In this Division, “**applicant for a practising licence**” includes a licensee applying to transfer to a different class of licence under section 6.20.

Equivalency determination – general

- 6.12** (1) If an applicant for a practising licence does not meet an eligibility standard specified in Division 4 that the applicant must meet to be granted the class of licence for which the applicant is applying, the applicant must provide any information or records requested or ordered by the registrar to enable the licence committee to undertake an equivalency determination respecting one or both of the following:
- (a) the applicant’s education;
 - (b) the applicant’s knowledge, skills, ability and judgment.
- (2) If an applicant for a practising licence is applying based on licensure or registration in a jurisdiction outside Canada under section 6.03(2)(a)(ii), the applicant must provide any information or records requested or ordered by the registrar to enable the licence committee to undertake an equivalency determination respecting the eligibility standards further to which that extrajurisdictional licensure or registration was granted.

Equivalency determination – education

- 6.13** (1) If an applicant for a practising licence has not successfully completed a recognized education program that the applicant must successfully complete to be granted the class of licence for which the applicant is applying, the applicant must provide the registrar with a report from an education evaluation organization that
- (a) verifies the applicant’s identity and education, including, if necessary, the credentials evidencing that education, and
 - (b) evaluates the substantial equivalence of the applicant’s education to successful completion of the recognized education program.
- (2) Despite subsection (1), if there is no education evaluation organization that can or will evaluate the education of an applicant for a practising licence, the applicant may provide any information and records the applicant considers relevant to an equivalency determination of the applicant’s education.
- (3) In conducting an equivalency determination of the education of an applicant for a practising licence, the licence committee may rely on a report from an education evaluation organization that has evaluated the substantial equivalence of the applicant’s education.
- (4) If, in conducting an equivalency determination of the education of an applicant for a practising licence, the licence committee does not rely on a report made by an education evaluation organization under subsection (3), the committee may consider any or all of the following:

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- (a) all or any part of a report from an education evaluation organization on which it did not rely under subsection (3);
 - (b) any information or records provided by the applicant under subsection (2) or further to a request or order by the registrar under section 6.12(1);
 - (c) whether the applicant has successfully completed a government-approved or government-authorized education program;
 - (d) in relation to an education program for which the applicant has provided information or records,
 - (i) whether the program provides publicly available criteria for admission and outcome data describing key information about graduates,
 - (ii) whether the faculty teaching the program primarily consists of professionals licensed or registered to practice the designated health profession in which the applicant is seeking a licence,
 - (iii) whether the expressed purpose of the program is to educate and train students in the practice of the designated health profession in which the applicant is seeking a licence,
 - (iv) whether the program provides broad training in the practice of the designated health profession in which the applicant is seeking a licence and the core competencies of that profession, as applicable to the class of licence for which the applicant is applying, and
 - (v) whether the program includes clinical experience with supervision.

Equivalency determination – knowledge, skills, ability and judgment

- 6.14** (1) For purposes of an equivalency determination in relation to the knowledge, skills, ability and judgment of an applicant for a practising licence,
- (a) the applicant may provide any information and records the applicant considers relevant to an equivalency determination of the applicant's knowledge, skills, ability, and judgment, including, if available, a report from an education evaluation organization in relation to the substantial equivalence of all or any part of the applicant's education, training or practice experience,
 - (b) the licence committee may retain practice advisors and other experts to assist it, and
 - (c) the licence committee may require the applicant to take additional steps, including but not limited to one or more of the following:
 - (i) participating in an interview to assess the extent and currency of the applicant's credentials, experience, knowledge, clinical skills, abilities and judgment;
 - (ii) completing an examination or assessment of the applicant's knowledge and clinical skills;
 - (iii) undertaking a trial practice period under supervised observation.

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- (2) In conducting an equivalency determination of the knowledge, skills, ability and judgment of an applicant for a practising licence, the licence committee may rely on a report from an education evaluation organization that has evaluated all or any part of the substantial equivalence of the applicant's education, training or practice experience.
 - (3) If, in conducting an equivalency determination of the knowledge, skills, ability and judgment of an applicant for a practising licence, the licence committee does not rely on a report made by an education evaluation organization under subsection (2), the committee may consider any or all of the following:
 - (a) any information or records provided by the applicant, including any additional information and records provided by the applicant further to a request or order by the registrar under section 6.12(1);
 - (b) all or any part of a report from an education evaluation organization on which it did not reply under subsection (2);
 - (c) any information or records obtained under subsection (1)(b) or (c);
 - (d) whether the applicant successfully completed training from a government-approved or government-authorized education or training program in the practice of the designated health profession in which the applicant is seeking a licence;
 - (e) the applicant's past practice of the designated health profession in which the applicant is seeking a licence, if any, including
 - (i) whether the applicant is or was licensed or registered to practise the designated health profession in Canada or a jurisdiction outside Canada,
 - (ii) the nature, scope and currency of the applicant's practice of the designated health profession,
 - (iii) any limitations or conditions on the applicant's ability to practise the designated health profession, and
 - (iv) the differences, if any, between how the applicant practises or has practised the designated health profession in another jurisdiction and the practice of the designated health profession in British Columbia;
 - (f) the extent and nature of the applicant's teaching experience, if any, in relation to the designated health profession in which the applicant is seeking a licence.

DIVISION 6 – PROVISIONAL AND TEMPORARY LICENCES

Provisional licence

- 6.15** (1) In this section, “**applicant for a practising licence**” includes a licensee applying to transfer to a different class of licence under section 6.18.
- (2) The licence committee may direct the registrar to issue a provisional licence to an applicant for a practising licence, if

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- (a) the purpose of the applicant's provisional licence is to enable
 - (i) the licence committee to conduct an equivalency determination of the applicant's education or the applicant's knowledge, skills, abilities and judgment,
 - (ii) the applicant to complete any examinations, education or upgrading of knowledge, skills and abilities required to meet the applicable eligibility standards, or
 - (iii) both, and
 - (b) the licence committee is satisfied that, when subject to such limits or conditions as the licence committee may impose under section 52(2) of the Act, the applicant is fit to practise the designated health profession in which the applicant is seeking a practising licence.
- (3) Despite subsection (2), the licence committee may only direct the registrar to issue a provisional licence to an applicant for a practising licence under section 6.03 if the applicant
- (a) does not meet the requirement in section 6.03(1)(a)(i), but
 - (b) meets the requirements in section 6.03(1)(a)(ii) to (vi) and (b), as applicable.
- (4) Subject to the direction of the licence committee under subsection (2), the registrar may issue a provisional licence for a period that does not exceed one year.
- (5) A provisional licence expires
- (a) if the registrar issues a practising licence to the provisional licensee,
 - (b) if the licence committee makes an adverse application decision under section 52 of the Act in relation to the provisional licensee's application for a practising licence,
 - (c) if not renewed under section 6.23 at the end of the period for which it was issued under subsection (4), or
 - (d) if renewed under section 6.23, at the end of the renewal period.

Temporary licence

- 6.16** (1) An applicant for a temporary licence in a designated health profession must submit to the registrar
- (a) an application for a temporary licence in the form and manner ordered by the registrar that, in addition to the applicant's criminal record authorization as required under section 41(2)(b) of the Act, includes
 - (i) information or records, or both, confirming the applicant holds a licence or registration in another jurisdiction that
 - (A) is equivalent to a practising licence in the designated health profession, and

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- (B) is not subject to any practice restrictions, limits or conditions relevant to the practice of the designated health profession in British Columbia, and
 - (ii) the items required in section 6.03(1)(a)(ii)(A) to (D), (iv) to (vi) and (b), and
 - (b) any additional information or records the registrar requests or orders the applicant to provide.
- (2) The registrar may issue a temporary licence for a period that does not exceed 30 days.

DIVISION 7 – VARIANCE OF LICENCE OR TRANSFER TO ANOTHER CLASS

Application to vary limits or conditions on licence

6.17 A licensee applying to vary limits or conditions on the licensee’s licence must submit to the registrar a completed application to vary limits or conditions in the form and manner ordered by the registrar and any information or records the registrar requests or orders the licensee to provide.

Transfer to different class

6.18 A licensee applying to transfer to a different class of licence must submit to the registrar

- (a) a completed application to transfer classes in the form and manner ordered by the registrar that includes
 - (i) credentials confirming the applicant meets the eligibility standards specified in Division 4 for the class of licence to which the licensee is applying to transfer,
 - (ii) payment of the transfer fees specified in Schedule A, and
- (b) any additional information or records the registrar requests or orders the licensee to provide.

DIVISION 8 – RENEWAL

Definition

6.19 In this Division, “**practising licence**” includes a limited (grandparented) denturist licence.

Practising licence expiry date

6.20 A practising licence expires on the March 31 immediately following the date it was issued or last renewed.

Practising licence renewal notice

6.21 On or before February 1 of each year, the registrar must notify each licensee with a practising licence of the process for license renewal and the consequences of failing to renew.

Practising licence renewal requirements

- 6.22** On or before the expiry date specified in section 6.20, a licensee applying for renewal of a practising license must submit to the registrar
- (a) a completed application for renewal in the form and manner ordered by the registrar that includes
 - (i) the declaration specified in Schedule C for renewal of a practising licence,
 - (ii) a criminal record check authorization if the licensee's previous criminal record check authorization was submitted to the registrar more than 4 years before the date of the application for renewal,
 - (iii) information or records, or both, confirming
 - (A) compliance with the applicable requirements for liability insurance under section 8.14, and
 - (B) the applicant has received all mandatory vaccinations against transmissible illness required by or under an enactment, and
 - (iv) payment of
 - (A) any outstanding amount owed or owing by the licensee to the college, including without limitation any amount owed or owing to a former regulatory college prior to its amalgamation into the college, and
 - (B) the renewal fee specified in Schedule A, and
 - (b) any additional information or records the registrar requests or orders the licensee to provide.

Renewal of provisional licence

- 6.23** (1) On or before the expiration of the period for which a provisional licence was issued under section 6.15(4), a provisional licensee applying for renewal of the licence must submit to the registrar
- (a) a completed application for renewal in the form and manner ordered by the registrar that includes
 - (i) the declaration specified in Schedule C for renewal of a provisional licence,
 - (ii) information or records, or both, confirming compliance with the applicable requirements for liability insurance under section 8.14, and
 - (iii) payment of
 - (A) any outstanding amount owed or owing by the licensee to the college, including without limitation any amount owed or owing to a former regulatory college prior to its amalgamation into the college, and

- (B) the renewal fee specified in Schedule A for the practising licence the provisional licensee is seeking, and
- (b) any additional information or records that the registrar requests or orders the licensee to provide.
- (2) The registrar may renew a provisional licence
 - (a) once only, and
 - (b) for a period that does not exceed one year.

DIVISION 9 –REINSTATEMENT

Definition

6.24 In this Division, “**former licensee**” means a person

- (a) who, when last a licensee or registrant, held
 - (i) a practicing licence or equivalent registration that was not suspended, or
 - (ii) non-practicing registration,
- (b) whose licence or registration was not
 - (i) revoked, or
 - (ii) surrendered at a time when an investigation of the person was in process or a citation had been issued with respect to a complaint against the person, and
- (c) who, since last being a licensee or registrant, has not had a licence or registration to practice a health profession in another jurisdiction suspended, revoked or cancelled.

Reinstatement within 60 days of a failure to renew

- 6.25** (1) Subject to subsection (2), a former licensee whose licence expired under section 6.20 may apply for reinstatement of that licence by submitting to the registrar a completed application for reinstatement in the form and manner ordered by the registrar that, in addition to the former licensee’s criminal record check authorization as required under section 41(2)(b) of the Act, includes
- (a) the items that must be submitted with an application for renewal under section 6.22, and
 - (b) payment of the late renewal fee specified in Schedule A.
- (2) A former licensee must submit an application for reinstatement under subsection (1) on or before the May 30 following the expiration of the former licensee’s licence under section 6.20.

Reinstatement after 60 days

- 6.26** (1) Subject to subsection (2), a former licensee may apply for reinstatement after the deadline specified in section 6.25(2) by submitting to the registrar
- (a) a completed application for reinstatement in the form and manner ordered by the registrar that, in addition to the former licensee's criminal record check authorization as required under section 41(2)(b) of the Act, includes
 - (i) the declaration specified in Schedule C for reinstatement under this section,
 - (ii) information or records, or both, confirming
 - (A) compliance with the applicable requirements for liability insurance under section 8.14, and
 - (B) the former licensee has received all mandatory vaccinations against transmissible illness required by or under an enactment
 - (iii) in the case of a former licensee who has been an extrajurisdictional practitioner since last being a licensee or registrant, a certificate of professional conduct that meets the requirements of section 8.17 and section 81(1) of the Act, dated no more than 60 days prior to the date of the former licensee's application for reinstatement, issued by each applicable extrajurisdictional regulator in every jurisdiction where the former licensee has practiced a health profession, and
 - (iv) in the case of a former licensee who has practised a health profession in a jurisdiction outside Canada since last being a licensee or registrant,
 - (A) information or records, or both, from the jurisdiction that are dated no more than 60 days prior to the date of the former licensee's application for reinstatement, and taken together, are comparable to a criminal record check, or
 - (B) if the registrar is satisfied that the former licensee is unable to obtain such information or records, despite making reasonable efforts to do so, a sworn statement from the former licensee in a form satisfactory to the registrar attesting to the former licensee's criminal record in the jurisdiction,
 - (v) payment of
 - (A) any outstanding amount owed or owing by the former licensee to the college, including without limitation any amount owed or owing to a former regulatory college prior to its amalgamation into the college, and
 - (B) the reinstatement fee specified in Schedule A, and
 - (b) any additional information or records that the registrar requests or orders the former licensee to provide.

- (2) A former licensee must submit an application for reinstatement under subsection (1) within 3 years of the date on which the former licensee was last a licensee or registrant of the college.

Reinstatement – general

- 6.27** The registrar may only reinstate a practising licence under section 6.25 or 6.26 in the same designated health profession and class as the former licensee’s last licence or registration and, subject to section 52(2) of the Act, with the same limits and conditions as applied to that last licence or registration.

DIVISION 10 – REVOCATION OF LICENCE

Revocation of a licence

- 6.28** (1) The registrar must revoke a licensee’s licence on receipt of
- (a) confirmation of the licensee’s death, or
 - (b) a request in writing from the licensee to revoke the licence.

DIVISION 11 – EXAMINATIONS

Licensing examinations and assessments

- 6.29** (1) Examinations and assessments conducted by the college for the purposes of licensing must be prepared by or under the direction of, or be approved by, the licence committee.
- (2) In advance of a licensing examination or assessment conducted by the college, the licence committee must
- (a) determine
 - (i) the time and place for the holding of the examination or assessment,
 - (ii) the procedure for the conduct of the examination or assessment, and
 - (iii) any fees to be charged for conducting the examination or assessment,
 - (b) designate the examiners for the examination or the assessors for the assessment, and
 - (c) advise an applicant writing the exam or taking assessment of the fees to be charged.
- (3) Following a licensing examination or assessment conducted by the college, the licence committee must
- (a) review the results of the examination or assessment for each applicant and make a determination as to the applicant’s qualification for a licence, and
 - (b) notify the applicant of the results of the examination or assessment in writing as soon as is practicable.

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- (4) When an examiner for a licensing examination conducted by the college or an assessor for a licensing assessment conducted by the college has reason to believe that an applicant has engaged in improper conduct during the examination or assessment, the examiner or assessor must make a report to the licence committee.
 - (5) Following receipt of a report under subsection (4), the licence committee may take one or more of the following actions:
 - (a) pass the applicant;
 - (b) fail the applicant;
 - (c) require the applicant to re-write the examination or retake the assessment;
 - (d) disqualify the applicant from participating in a further examination or assessment for a specified period.
 - (6) If the licence committee takes action under subsection (5)(b), (c) or (d), it must provide the applicant with written reasons for its decision.

DIVISION 12 – LICENCE APPLICATION DECISIONS

Authority to investigate before decision

- 6.30** (1) After receiving a licence application, in addition to any orders made under section 42 of the Act, the registrar may investigate matters relevant to the application.
- (2) Before making a decision with respect to a licence application, the licence committee may direct the registrar to investigate matters relevant to the application under subsection (1).

Notice of adverse application decision by registrar

- 6.31** In a notice of an adverse application decision under section 44(2) of the Act, the registrar must advise the applicant of the right to apply for reconsideration under section 45 of the Act.

Reconsideration of adverse application decision by registrar

- 6.32** (1) Subject to section 381 of the Act, an applicant who wants the registrar to reconsider an adverse application decision under section 45 of the Act must submit to the registrar a completed application for reconsideration
- (a) in the form and manner ordered by the registrar, and
 - (b) within 30 days of the date on which the applicant received notice of the adverse application.
- (2) The hearing under section 382(6)(a) of the Act to reconsider an adverse application decision under section 45 of the Act must be conducted by written submissions only, unless the registrar determines there are exceptional circumstances requiring a different form of hearing.

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- (3) Sections 12.18 and 12.19 apply to an application for reconsideration submitted under subsection (1) and the hearing in respect of that application.

DIVISION 13 – APPLICANT DUTIES TO REPORT

Duty to report changes in information

6.33 An applicant for a licence must give written notice to the registrar within 14 days of any change in the information that the applicant has submitted to the registrar in the course of the applicant's application for a licence including, without limitation, changes in the applicant's name, mailing address, contact information, telephone number or email address.

Duty to report criminal charges and disciplinary proceedings

- 6.34** (1) An applicant for a licence who is charged with an offence, other than a summary conviction offence, under a federal, provincial or territorial statute in Canada, or an equivalent offence in a foreign jurisdiction, must immediately provide written notice to the registrar specifying the particulars of the charge.
- (2) An applicant for a licence who becomes the subject of a proceeding, including any investigation, inquiry, review or appeal, in Canada or a foreign jurisdiction that could result in the applicant's entitlement to practice a health profession being revoked, suspended, limited, restricted or made subject to conditions must,
- (a) immediately upon becoming aware of the proceeding, provide written notice to the registrar specifying the particulars of the proceeding, and
 - (b) subsequent to any notice under paragraph (a), provide such other information as the registrar may request or order.

DIVISION 14 – REVIEW OF LICENSING PROGRAMS

Review of licensing programs

- 6.35** (1) The licence committee must periodically review the bylaws in this Part and the college's policies and procedures respecting licensing to identify any prohibitions, requirements, limits and conditions imposed on extrajurisdictional applicants that do not substantially lower the risk of harm to the public.
- (2) For the purposes of conducting a review under subsection (1), the licence committee may retain experts and consult with
- (a) persons who are or may be affected by the bylaws in this Part and the college's policies and procedures respecting licensing,
 - (b) other regulators,
 - (c) one or more persons nominated by Indigenous governing bodies or other entities representing Indigenous peoples for the purpose of consultation in respect of bylaws under 384 of the Act, and
 - (d) the public.

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- (3) In conducting a review under subsection (1), the licence committee must consider whether the general types of prohibitions, requirements, limits, and conditions imposed on extrajurisdictional applicants
- (a) are rationally connected to the objective of protecting the public from harm,
 - (b) are proportionate to the objective of protecting the public from harm,
 - (c) have beneficial effects in terms of minimizing risk to the public that outweigh the impact on extrajurisdictional applicants, and
 - (d) support and enable extrajurisdictional applicants to practise in accordance with the guiding principles of the Act, particularly with respect to Indigenous-specific racism and anti-racism, and with respect to non- and anti-discriminatory practice more generally.

DIVISION 15 – TRANSITION

Licensee transition

- 6.36** (1) Subject to subsections (2) to (5), a person is deemed to be a licensee on the transition date if the person
- (a) was a registrant immediately before the repeal of the former Act, and
 - (b) has satisfied the conditions and requirements for renewal of registration on or before March 31, 2026 under section 6.27 of the former bylaws.
- (2) A person who meets the requirements of subsection (1) must only be deemed a licensee as follows:
- (a) a dental hygienist registrant or dental hygiene practitioner registrant must be deemed to be a dental hygienist licensee;
 - (b) a full dentist registrant must be deemed to be a full dentist licensee;
 - (c) a limited (academic) dentist registrant must be deemed to be a limited (academic) dentist licensee;
 - (d) a dental therapist registrant must be deemed to be a dental therapist licensee;
 - (e) a dental technician registrant must be deemed to be a dental technician licensee;
 - (f) a full denturist registrant must be deemed to be a full denturist licensee;
 - (g) a limited (grandparented) denturist registrant must be deemed to be a limited (grandparented) denturist licensee;
 - (h) a temporary registrant in a designated profession must be deemed to be a temporary licensee in the same designated profession.
- (3) For certainty, a person who is not in a class of registrants listed in subsection (2) must not be deemed to be a licensee under subsection (1).
- (4) The licence of a person who is deemed to be licensee under subsection (1) is subject to all limits or conditions, if any, imposed on the person's registration immediately before the repeal of the former Act, until

- (a) the limits or conditions are
 - (i) exhausted in accordance with the terms on which they were imposed, or
 - (ii) varied in accordance with the Act and these bylaws, or
 - (b) the licence expires or is revoked.
- (5) For the purposes of section 6.20, the licence of a person who is deemed to be a licensee under subsection (1) is deemed to be issued on the transition date.

PART 7 – CERTIFICATION

Certification applications

- 7.01** Every licensee applying for a certification under this Part, including renewal or reinstatement of a certification, must submit to the registrar
- (a) a completed application for a certification in the form and manner ordered by the registrar,
 - (b) the full amount of all applicable application and certification fees specified in Schedule A, and
 - (c) any additional information or records that the registrar requests or orders the licensee to provide.

Certification of dental hygienists for administration of local anesthesia

- 7.02** (1) In accordance with section 24 of the *Oral Health Professionals Regulation*, a dental hygienist must not administer a Schedule I or II drug topically or by injection for the purpose of providing oral local anaesthesia unless the dental hygienist is
- (a) a dental hygienist licensee who is granted and maintains a current certification under this section, or
 - (b) a temporary licensee in the designated health profession of dental hygiene, who is
 - (i) authorized to administer local anesthesia in the jurisdiction referred to in section 6.16(1)(a)(i), and
 - (ii) a faculty member or instructor for a recognized local anesthesia certification program or local anesthesia refresher course referred to in subsection (2)(b)(i) or section 7.05(2)(a).
- (2) The licence committee must grant a dental hygienist licensee a certification to administer local anesthesia under this section if, in addition to the items required under section 7.01, the dental hygienist licensee submits to the registrar
- (a) information or records, or both, evidencing that the dental hygienist licensee has successfully completed
 - (i) a recognized local anesthesia certification program, or
 - (ii) a course or program in local anesthesia that, for the purposes of this section, the licence committee determines is substantially equivalent to a recognized local anesthesia certification program, and
 - (b) if more than 5 years have elapsed since the dental hygienist licensee completed a course or program described in paragraph (a), evidence satisfactory to the licence committee that the licensee has, within the past 5 years,

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- (i) successfully completed a local anesthesia refresher course approved by the licence committee, or another course or program considered by the licence committee to be substantially equivalent, or
 - (ii) been authorized in another Canadian jurisdiction to administer local anesthesia.

Certification of full dentist licensees as certified specialists

- 7.03** (1) The board may recognize areas of special interest within the practice of dentistry as recognized specialties for the purpose of this Part and for the purpose of licensing limited (restricted-to-specialty) dentist licensees under sections 6.03(1)(a)(i) and 6.06.
- (2) The licence committee must grant a certification as a certified specialist in a recognized specialty to a full dentist licensee who
- (a) applies to the college for a certification as a certified specialist in the recognized specialty, and
 - (b) satisfies the licence committee that the full dentist licensee meets the conditions or requirements for a certification as a certified specialist in the recognized specialty under subsection (3) or (4) and under subsection (6).
- (3) A full dentist licensee applying for a certification as a certified specialist in a recognized specialty must
- (a) successfully complete an assessment in the recognized specialty specified by the licence committee, and
 - (b) submit to the registrar
 - (i) credentials confirming the licensee holds a degree or equivalent qualification in the recognized specialty from
 - (A) a recognized specialty education program, or
 - (B) a program in the recognized specialty at a post-secondary educational institution that, in the opinion of the licence committee, is equivalent to a recognized specialty education program,
 - (ii) information or records, or both, confirming the licensee's successful completion of the assessment referred to in paragraph (a),
 - (iii) a letter in the form and manner ordered by the registrar, dated within 60 days of the date of the licensee's application, from each applicable extrajurisdictional regulator in every jurisdiction where the licensee is or was, at any time, certified or otherwise recognized as a specialist in the specialty,
 - (A) confirming the licensee's certification or recognition in, or entitlement to practise, the specialty in that jurisdiction has not been cancelled, suspended or subject to any practice restrictions, limits or conditions relevant to the practice of the specialty in British

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- Columbia, or if it has, providing particulars of any such cancellation, suspension or practice restrictions, limits or conditions,
- (B) confirming there is no investigation, review or other proceeding underway in that jurisdiction that could result in the licensee's certification or recognition in, or entitlement to practise, the specialty being cancelled, suspended or subject to any practice restrictions, limits or conditions relevant to the practice of the specialty in British Columbia, or if there is, providing particulars of any such investigation, review or other proceeding, and
 - (C) confirming the licensee's entitlement to practise dentistry or the specialty has not been voluntarily surrendered in that jurisdiction with the effect of preventing the commencement or completion of an investigation, review or other proceeding that could have resulted in the licensee's certification or recognition in, or entitlement to practise, the specialty being cancelled, suspended or subject to any practice restrictions, limits or conditions relevant to the practice of the specialty in British Columbia, or if it has, providing particulars of any such surrender,
 - (iv) payment of any outstanding amount owed or owing by the licensee to the college, and
 - (v) the items required under sections 7.01.
- (4) Despite subsection (3), a full dentist licensee may be granted a certification as a certified specialist in a recognized specialty if the licensee
- (a) submits to the registrar information or records, or both, confirming the licensee holds a licence or registration in another Canadian jurisdiction as the equivalent of a full dentist licensee, and is certified or otherwise recognized in that jurisdiction as the equivalent of a certified specialist in the recognized specialty, and
 - (b) meets the requirements under subsection (3)(a) and (b)(iv) and (v).
- (5) Despite subsections (2) to (4), the licence committee may refuse to grant a full dentist licensee a certification as a certified specialist if the licence committee determines, after giving the licensee an opportunity to be heard, that
- (a) the licensee's certification or recognition in, or entitlement to practise, a recognized specialty or its equivalent has been cancelled or suspended at some time in British Columbia or in another jurisdiction,
 - (b) an investigation, review or other proceeding is underway in British Columbia or in another jurisdiction that could result in the licensee's certification or recognition in, or entitlement to practise, a recognized specialty or its equivalent being cancelled or suspended, or
 - (c) the applicant's entitlement to practise dentistry, or to practise a recognized specialty or its equivalent, has been voluntarily surrendered in British Columbia or in another jurisdiction with the effect of preventing the commencement or

completion of an investigation, review or other proceeding that could have resulted in the licensee's certification or recognition in, or entitlement to practise, the recognized specialty or its equivalent being cancelled or suspended.

Renewal of certification

- 7.04** (1) A certification under this Part expires on March 31 immediately following the date it was granted or last renewed.
- (2) On or before the expiration date specified in subsection (1), a licensee applying for renewal of a certification must
- (a) apply for and be granted renewal of a licence under section 6.24 and either section 43 or 52 of the Act, and
 - (b) submit to the registrar
 - (i) information or records, or both, confirming the licensee's completion of any applicable continuing competency requirements specified by the licence committee for renewal of a certification, and
 - (ii) the items required under sections 7.01.
- (3) Subject to section 7.07, the licence committee must renew the certification of a licensee who meets the requirements of subsection (2).
- (4) The registrar must publish on the college website any continuing competency requirements specified by the licence committee under subsection (2)(b).

Reinstatement of certification

- 7.05** (1) Subject to subsections (2) and (3) and to any limits or conditions imposed on a licensee's licence under the Act, the licence committee may reinstate a certification previously granted to the licensee under this Part, under the former bylaws or by a former college if the licensee submits to the registrar
- (a) the items required under section 7.01,
 - (b) any additional information or records the registrar requests or orders the licensee to provide for the purpose of confirming the licence remains eligible for certification under section 7.02 or 7.03, as applicable.
- (2) If, at the time a dental hygienist licensee applies for reinstatement of a previous certification under subsection (1), more than 5 years have elapsed since the licensee ceased to hold the certification, the licence must submit to the registrar information or records, or both, confirming the licensee has, within the past 5 years,
- (a) successfully completed a local anesthesia refresher course approved by the licence committee, or another course or program considered by the licence committee to be equivalent, or
 - (b) been authorized in another Canadian jurisdiction to administer local anesthesia,

- (3) If, because of limits or conditions imposed on the licence of a licensee applying for reinstatement of a certification, that certification was previously cancelled, suspended or subject to limits or conditions, the licensee must submit to the registrar, in addition to the items required under subsections (1), any information or records the registrar requests or orders the licensee to provide for the purpose of confirming that reinstatement of the licensee's certification will not pose an undue risk to public health or safety.

Reconsideration

- 7.06**
- (1) If the licence committee refuses to issue, renew or reinstate a licensee's certification, the licensee may apply in accordance section 381 of the Act for a reconsideration by the licence committee.
 - (2) A licensee applying for a reconsideration under subsection (1) must submit to the registrar a completed application for reconsideration
 - (a) in the form and manner ordered by the registrar, and
 - (b) within 30 days of the date on which the applicant received notice of the licence committee's decision refusing to issue, renew or reinstate the licensee's certification.
 - (3) Sections 12.18 and 12.19 and sections 382 and 383 of the Act apply to an application for reconsideration submitted under subsection (1) and the hearing in respect of that application.
 - (4) The hearing under section 382(6)(a) of the Act to reconsider a decision from the licence committee refusing to issue, renew or reinstate a licensee's certification must be conducted by written submissions only, unless the registrar determines there are exceptional circumstances requiring a different form of hearing.

Transition

- 7.07** A certification granted under Part 7 of the former bylaws and renewed on or before March 31, 2026 in accordance with section 7.05 of those bylaws is deemed to be a certification granted under this Part on the transition date.

PART 8 – PROFESSIONAL RESPONSIBILITIES

DIVISION 1 – ETHICS AND PRACTICE STANDARDS

Ethics and practice standards

- 8.01** (1) The ethics standards and practice standards are set out in Schedule B.
- (2) A licensee must not provide health services in a manner which exposes a patient to harm or a risk of harm, where in the circumstances no reasonable and competent licensee would provide health services in that manner pursuant to relevant standards.
- (3) Relevant standards under subsection (2) include uncodified standards generally-accepted within a licensee's designated health profession and not superseded by any ethics standard or practice standard.

DIVISION 2 – LIMITS AND CONDITIONS ON CLASSES OF LICENCE

Limits and conditions – limited (restricted-to-specialty) dentist licensees

- 8.02** (1) A limited (restricted-to-specialty) dentist licensee
- (a) is a certified specialist in the recognized specialty in respect of which the licensee is granted a licence, and
- (b) may only
- (i) perform a restricted activity if it is included in the practice of the recognized specialty in which the licensee is a certified specialist, as determined in accordance with any applicable practice standards, and
- (ii) review and direct a dental therapist's provision of dental therapist services under section 8.04(1)(a)(ii) if those services are included in the practice of the recognized specialty in which the licensee is a certified specialist.
- (2) Limited (restricted-to-specialty) dentist licensees must not imply or suggest they are, or hold themselves out as,
- (a) a full dentist licensee, or
- (b) qualified or entitled to practise as a full dentist licensee.

Limits and conditions – limited (academic) dentist licensees

- 8.03** (1) A limited (academic) dentist licensee
- (a) may only practise dentistry
- (i) during the term of the licensee's appointment to a position referred to in section 6.07(b), and
- (ii) in a setting operated by or affiliated with the University of British Columbia or other post-secondary educational institution specified in section 6.07(b)(ii), and

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- (b) must not practise dentistry on a fee-for-service basis.
- (2) Despite subsection (1), a limited (academic) dentist licensee may practise dentistry on a fee-for-service basis for up to 10 hours per calendar week in a setting that need not be operated by or affiliated with the University of British Columbia or other post-secondary educational institution specified in section 6.07(b)(ii) if the limited (academic) licensee
- (a) was an academic member of the CDSBC under section 26(2) of the *Dentists Act* immediately before April 3, 2009,
 - (b) was an academic (grandparented) registrant of the CDSBC without interruption between April 3, 2009 and August 31, 2022,
 - (c) was a limited (academic) dentist registrant of the college without interruption between September 1, 2022 and the transition date, and
 - (d) has been a limited (academic) dentist licensee without interruption since the transition date.
- (3) If a limited (academic) dentist licensee's appointment to a position referred to in section 6.07(b) ends, the limited (academic) dentist licensee must immediately
- (a) cease all practice of dentistry, and
 - (b) notify the registrar.

Limits and conditions – dental therapist licensees

8.04 A dental therapist licensee

- (a) may provide dental therapist services only
 - (i) in the course of fulfilling job duties in British Columbia as an employee or contractor of the First Nations Health Authority, a regional health authority or an Indigenous governing body, or if practising in a First Nations community or at a not-for-profit facility,
 - (ii) under the review and direction of a full dentist licensee or limited (restricted-to-specialty) dentist licensee, and
 - (iii) in accordance with standards of practice or standards of professional ethics, if any, respecting the review and direction referred to in subparagraph (ii), and
- (b) must not provide any services of dentistry other than dental therapist services, except as authorized under any applicable ethics standards or practice standards, including for greater certainty any practice standards in respect of review and direction of dental therapist licensees, as referred to in paragraph (a)(iii).

Limits and conditions – limited (grandparented) denturist licensees

8.05 A limited (grandparented) denturist licensee may only carry out non-surgical intra-oral procedures to

- (a) make, repair, reline, replace or furnish complete dentures, and
- (b) replace teeth or make repairs to partial dentures and overdentures.

Limits and conditions – provisional licensees

8.06 A provisional licensee is not eligible to hold a provisional licence and must give notice under section 76(1)(a) of the Act, if

- (a) the licensee’s provisional licence is not being used for the purpose specified in section 6.17(2)(a), or
- (b) the licensee is not fit to practice even when subject to such limits or conditions as the licence committee imposed under section 52(2) of the Act.

Limits and conditions – temporary licensees

8.07 Subject to any limits or conditions imposed under section 43 or 52 of the Act, during the period of time for which a temporary licence is issued under section 6.18(2), the temporary licensee may only do one or both of the following:

- (a) conduct or participate in education or training relating to the designated health profession in which the licensee has been issued a licence;
- (b) deliver an examination or assessment, that is sponsored by an agency approved by the licence committee.

DIVISION 3 – TITLES

Use of titles

8.08 A licensee may only use a title reserved for the exclusive use of licensees under the Oral Health Professionals Regulation or another title, word or abbreviation referred to in this Division, if

- (a) the licensee is licensed in a class of licensees authorized under this Part to use the title, word or abbreviation,
- (b) the practice authority of the licensee is not suspended, and
- (c) the licensee uses the title, word or abbreviation in a manner authorized under this Division.

Dental hygienist titles

- 8.09** (1) A dental hygienist licensee may use the titles “licensed dental hygienist” and “dental hygienist” and the abbreviations “LDH” and “DH”.
- (2) A dental hygienist licensee who holds current certification to administer local anesthesia under section 7.02 may use the word “certified” in parentheses or the abbreviation “C” in parentheses together with and immediately following a title or abbreviation the licensee is authorized to use under subsection (1).

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- (3) A provisional licensee in the designated health profession of dental hygiene may use a title or abbreviation specified in subsection (1) only if it is followed by the word “provisional” in parentheses.
 - (4) A temporary licensee in the designated health profession of dental hygiene may use a title or abbreviation specified in subsection (1) only if it is followed by the word “temporary” in parentheses.

Dentist and dental therapist titles

- 8.10**
- (1) A full dentist licensee, limited (restricted-to-specialty) dentist licensee and limited (academic) dentist licensee may use the titles “dentist”, “dental surgeon” and, subject to section 5 of the Oral Health Professionals Regulation, “doctor”.
 - (2) A provisional licensee in the designated health profession of dentistry may use a title specified in subsection (1) only if it is followed by the word “provisional” in parentheses.
 - (3) A temporary licensee in the designated health profession of dentistry may use a title specified in subsection (1) only if it is followed by the word “temporary” in parentheses.
 - (4) A dental therapist licensee may use the title “dental therapist”.
 - (5) A provisional dental therapist licensee may use the title specified in subsection (4) only if it is followed by the word “provisional” in parentheses.

Specialty titles for dentists

- 8.11**
- (1) A certified specialist who is a full dentist licensee may use the titles “specialist”, “certified specialist”, “specialist in [*name of recognized specialty*]” and “certified specialist in [*name of recognized specialty*]”.
 - (2) A certified specialist who is a limited (restricted-to-specialty) dentist licensee may use the titles “specialist, restricted to specialty”, “certified specialist, restricted to specialty”, “specialist, restricted to [*name of recognized specialty*]” or “certified specialist, restricted to [*name of recognized specialty*]”.
 - (3) In addition to the titles identified in subsection (1) or (2), as applicable, a certified specialist in a recognized specialty may use any title approved by the board for use by certified specialists in that recognized specialty.
 - (4) A limited (academic) dentist licensee may use the title “academic specialist” or “academic specialist in [*name of recognized specialty*]” if the limited (academic) licensee holds a post-graduate degree or equivalent qualification in a recognized specialty.

Dental technician titles

- 8.12**
- (1) A dental technician licensee may use the titles “dental technician” and “licensed dental technician” and the abbreviation “LDT”.

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- (2) A provisional licensee in the designated health profession of dental technology may use a title or abbreviation specified in subsection (1) only if it is followed by the word “provisional” in parentheses.
 - (3) A temporary licensee in the designated health profession of dental technology may use a title or abbreviation specified in subsection (1) only if it is followed by the word “temporary” in parentheses.

Denturist titles

- 8.13**
- (1) A full denturist licensee or limited (grandparented) denturist licensee may use the titles “denturist” and “licensed denturist” and the abbreviation “LD”.
 - (2) A provisional licensee in the designated health profession of denturism may use a title or abbreviation specified in subsection (1) only if it is followed by the word “provisional” in parentheses.
 - (3) A temporary licensee in the designated health profession of denturism may use a title or abbreviation specified in subsection (1) only if it is followed by the word “temporary” in parentheses.

DIVISION 4 – LIABILITY INSURANCE

Liability insurance for licensees

- 8.14**
- (1) The following licensees must be insured against liability arising from an error, omission, or negligent act in the provision of health services included in the practice of dental hygiene in an amount of at least \$1,000,000 per occurrence:
 - (a) a dental hygienist licensee;
 - (b) a temporary licensee in the designated health profession of dental hygiene.
 - (2) The following licensees must be insured against liability arising from an error, omission, or negligent act in the provision of health services included in the practice of dentistry in an amount of at least \$3,000,000 per occurrence:
 - (a) a full dentist licensee;
 - (b) a limited (restricted-to-specialty) dentist licensee;
 - (c) a limited (academic) dentist licensee;
 - (d) a dental therapist licensee;
 - (e) a temporary licensee in the designated health profession of dentistry.
 - (3) The following licensees must be insured against liability arising from an error, omission, or negligent act in the provision of health services included in the practice of dental technology in an amount of at least \$1,000,000 per occurrence:
 - (a) a dental technician licensee;
 - (b) a temporary licensee in the designated health profession of dental technology.

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- (4) The following licensees must be insured against liability arising from an error, omission, or negligent act in the provision of health services included in the practice of denturism in an amount of at least \$2,000,000 per occurrence:
 - (a) a full denturist licensee;
 - (b) a limited (grandfathered) denturist licensee;
 - (c) a temporary licensee in the designated health profession of denturism.
 - (5) Insurance obtained by a licensee further to one of subsections (1) to (4) must
 - (a) be in a form that is satisfactory to the college, and
 - (b) apply to health services included in the practice of the licensee's designated health profession that are provided by
 - (i) the licensee, or
 - (ii) a person to whom the licensee delegates the performance of an aspect of practice or a restricted activity under section 74 of the Act and Part 10 of these bylaws.

DIVISION 5 – DUTY TO NOTIFY REGISTRAR

Notice of change in business information

- 8.15** (1) A licensee must give written notice to the registrar under section 76(2) of the Act within 14 days of any change to the licensee's business contact information.
- (2) For the purposes of subsection (1), a licensee's business contact information includes the following:
- (a) the name the licensee uses for practice;
 - (b) the mailing address for each facility where the licensee practises;
 - (c) each telephone number the licensee uses for practice;
 - (d) each email address the licensee uses for practice.

Certificate of professional conduct

- 8.16** Under section 81(1)(a)(iii) of the Act, a certificate of professional conduct must also certify the following:
- (a) either
 - (i) that the holder is not the subject of an investigation, review or other proceeding underway in the applicable jurisdiction, which
 - (A) is in relation to the practice of the health profession, and
 - (B) could result in an order in the nature of a disciplinary order, or
 - (ii) if the holder is subject to such an investigation, review or other proceeding underway in the applicable jurisdiction, the particulars of the

investigation, review or other proceeding, including the particulars of any order in the nature of a disciplinary order that could result from the investigation, review or other proceeding;

- (b) if, contrary to section 81(1)(a)(ii) of the Act, the holder is, or has been, subject to an order that is in the nature of a disciplinary order in relation to the practice of the health profession in the applicable jurisdiction, the particulars of the order, including the reasons why the order was made and what disciplinary or remedial action was taken against the holder as a result of the order;
- (c) either
 - (i) that the holder did not voluntarily relinquish the entitlement to practise the health profession in the applicable jurisdiction with the effect of preventing the commencement or completion of an investigation, review or other proceeding which could have resulted in an order in the nature of a disciplinary order in relation to the practice of the health profession, or
 - (ii) if the holder did voluntarily relinquish the entitlement to practise the health profession in the applicable jurisdiction as described in subparagraph (i), the particulars of the investigation, review or other proceeding that was prevented from being commenced or completed.

DIVISION 6 – COLLEGE ACCESS TO LICENSEE RECORDS

Inspection and copying of records

- 8.17** A licensee must make all records created or obtained in the course of providing health services, and any written or electronic information relevant to those records, available for inspection at reasonable hours by representatives of the college and must permit the representatives to make copies of those records or to remove them temporarily for the purposes of making copies.

PART 9 – HEALTH PROFESSION CORPORATION PERMITS

DIVISION 1 – ELIGIBILITY FOR PERMIT

Eligible licensees

9.01 Only the following licensees are eligible licensees for the purposes of this Part and Division 4 of Part 3 of the Act:

- (a) dental hygienist licensees;
- (b) full dentist licensees;
- (c) limited (restricted-to-specialty) dentist licensees;
- (d) full denturist licensees;
- (e) limited (grandparented) denturist licensees.

Eligibility for permit

9.02 A corporation may be issued a health profession corporation permit if, in addition to satisfying the requirements under Division 4 of Part 3 of the Act,

- (a) the licensees with an ownership interest in the corporation under section 59(1)(a) and (b) of the Act are all eligible licensees,
- (b) the corporation submits to the registrar
 - (i) a completed application for a health profession corporation permit in the form and manner ordered by the registrar,
 - (ii) any fee, costs, monetary penalty or other amount owed to the college by.
 - (A) the corporation, or
 - (B) a licensee with an ownership interest in the corporation under section 59(1)(a) and (b) of the Act,
 - (iii) a certificate of solicitor in the form and manner ordered by the registrar,
 - (iv) an acknowledgement in the form and manner ordered by the registrar, executed by each eligible licensee who has an ownership interest in the corporation under section 59(1)(a) and (b) of the Act, acknowledging that the licensee has read Division 4 of Part 3 of the Act and understands that
 - (A) the licensee’s liability for professional negligence is not affected by the licensee practising through or on behalf of the corporation,
 - (B) the licensee’s relationship with the corporation does not affect, modify or diminish the application of the Act, the regulations, and these bylaws to the licensee, and
 - (C) neither the issuance of a health profession corporation permit by the college nor the licensee’s practising through or on behalf of the

corporation in any way relieves or absolves the licensee from complying with the ethics standards and practice standards, and any limit or condition imposed under the Act,

- (v) documents confirming that
 - (A) the corporation meets the requirements under Division 4 of Part 3 of the Act, and
 - (B) all persons employed by the corporation who may provide health services carry or are covered by insurance that complies with section 8.14(5), and
- (vi) the health profession corporation permit application fee specified in Schedule A, and
- (c) the name of the corporation is approved by the permit committee under section 9.08.

DIVISION 2 - PERMITS

Term of permit

9.03 A health profession corporation permit expires on the March 31 immediately following the date it was issued or last renewed.

Renewal of permit

9.04 A health profession corporation applying for renewal of its health profession corporation permit must, before the expiry date specified in section 9.03, submit to the registrar

- (a) a completed application for permit renewal in the form and manner ordered by the registrar,
- (b) the health profession corporation permit renewal fee specified in Schedule A, and
- (c) documents confirming that
 - (i) the corporation continues to meet the requirements under Division 4 of Part 3 of the Act, and
 - (ii) all persons employed by the corporation who may provide health services carry or are covered by insurance that complies with section 8.14(5),

Reinstatement of permit

9.05 (1) Subject to subsection (2), a corporation whose health profession corporation permit expired under section 9.03 may apply for reinstatement of that permit by submitting to the registrar

- (a) a completed application for reinstatement in the form and manner ordered by the registrar,
- (b) the items required under 9.04(b) and (c),

- (c) the health profession corporation permit late renewal fee specified in Schedule A.
- (2) A corporation must submit an application for reinstatement under subsection (1) on or before the May 30 following the expiration of the corporation's permit under section 9.03.

Limits or conditions on permit

- 9.06** (1) When issuing, varying or renewing a health profession corporation permit, the registrar or permit committee may, as a limit or condition on the permit, require the corporation to submit periodic reports to the registrar confirming compliance with one or more of the requirements in this Part or under Division 4 of Part 3 of the Act.
- (2) A corporation applying to vary limits or conditions on the corporation's health profession corporation permit must submit to the registrar a completed application in the form and manner ordered by the registrar that includes the information or records that the registrar requests or orders the licensee to provide.

Revocation of permit

- 9.07** (1) The registrar may revoke a corporation's health profession corporation permit on receipt of a request in writing from the corporation to revoke the permit.
- (2) After revoking a health profession corporation permit under subsection (1), the registrar must give notice of the revocation to the Registrar of Companies for the purposes of section 29 (5) of the *Business Corporations Act*.

DIVISION 3 –CORPORATION NAMES AND CHANGES IN INFORMATION

Health profession corporation names

- 9.08** (1) Subject to subsection (2), if, immediately before the former Act is repealed, a corporation holds a valid health profession corporation permit issued by the college, the name of that corporation is deemed to comply with the requirements of this section.
- (2) If any change is made to the name of a health profession corporation described in subsection (1), the changed name must
- (a) comply with subsection (3), and
 - (b) be approved by the registrar under subsection (4).
- (3) The name of a health profession corporation
- (a) must contain, together with and immediately preceding one of the words or abbreviations "Corporation", "Corp.", "Incorporation" or "Inc.",
 - (i) the words "Dental Hygienist", "Dental Hygiene" or "Oral Health", if the licensees who have an ownership interest in the corporation under section 59(1)(a) and (b) of the Act are all dental hygienist licensees,

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- (ii) the word “Dentist” or “Dental” or the words “Oral Health”, if the licensees who have an ownership interest in the corporation under section 59(1)(a) and (b) of the Act are all full dentist licensees or limited (restricted-to-speciality) dentist licensees,
 - (iii) the word “Denturist” or “Denturism” or the words “Oral Health”, if the licensee who have an ownership interest in the corporation under section 59(1)(a) and (b) of the Act are all full denturist licensees or limited (grandparented) denturist licensees, or
 - (iv) the words “Oral Health”, if the licensees who have an ownership interest in the corporation under section 59(1)(a) and (b) of the Act, are a combination of the licensees specified in 9.01(a) to (e).
- (b) must not
 - (i) be identical to the name of another health profession corporation with a valid health profession corporation permit issued by the registrar under the Act or by the board under the former Act, or
 - (ii) so closely resemble the name of another health profession corporation with a valid health profession corporation permit issued by the registrar under the Act or by the board under the former Act that, in the opinion of the permit committee, it is likely to confuse or mislead the public, and
 - (c) must not contravene the ethics standards respecting marketing.
- (4) The registrar may approve the name of a corporation that complies with subsection (3) on receipt of a completed application for health profession corporation name approval in the form and manner ordered by the registrar.

Health profession corporation changes

- 9.09** (1) A health profession corporation must as soon as practicable, submit to the registrar
- (a) a true copy of any certificate of change of name issued to the corporation under the *Business Corporations Act*,
 - (b) a new certificate of solicitor if requested by the registrar.
 - (c) written notice of any vesting of the voting shares in the corporation under section 59(3) of the Act, and
 - (d) written notice of any change to the information provided in the corporation’s most recent permit application or permit renewal application that is not addressed under paragraph (a) or (c) or subsection (2).
- (2) Before any transfer of the legal or beneficial ownership in any voting share of a health profession corporation or a company that legally and beneficially owns a voting share of a health profession corporation, the health profession corporation must submit to the registrar
- (a) a completed application for variation of a health profession corporation permit in the form and manner ordered by the registrar,

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- (b) any fee, costs, monetary penalty or other amount owed to the college by.
 - (i) the corporation, or
 - (ii) a licensee who has or, if the transfer proceeds, will have an ownership interest in the corporation under section 59(1)(a) and (b) of the Act,
 - (c) an acknowledgement specified in section 9.02(b)(iv) executed by each eligible licensee to whom a voting share is to be transferred, and
 - (d) documents confirming that, if the transfer proceeds,
 - (i) the corporation will meet the requirements under Division 4 of Part 3 of the Act, and
 - (ii) all persons employed by the corporation who may provide health services carry or are covered by insurance that complies with section 8.14(5), and
 - (e) the health profession corporation permit application fee specified in Schedule A.
- (3) A corporation must submit to the registrar a completed application for health profession corporation name approval under section 9.08(4),
 - (a) with a certificate of change of name submitted to the registrar under subsection (1)(a), or
 - (b) if, following a transfer of shares under subsection (2), the name of a health profession corporation
 - (i) no longer complies with section 9.08(3), or
 - (ii) includes the name of a licensee who is no longer a voting shareholder of the corporation or a company that legally and beneficially owns the voting shares of the corporation.

DIVISION 4 – PROVISION OF SERVICES AND MARKETING

Provision of services through a health profession corporation

9.10 For the purposes of section 66(2)(b)(ii) of the Act, employees of a health profession corporation may provide health services under the supervision of an eligible licensee, subject to the requirements of Part 10.

Marketing by health profession corporations

9.11 A health profession corporation carrying on the business of providing health services to the public must

- (a) disclose on all letterhead and business cards, and in all marketing, that those services are being provided through a health profession corporation, and
- (b) comply with the ethics standards respecting marketing.

DIVISION 5 – DISCIPLINE OF HEALTH PROFESSION CORPORATIONS**Notice of proposed disciplinary action**

- 9.12** (1) In addition to the requirements under section 114(1)(a) of the Act, a written notice that action may be taken against a health profession corporation must
- (a) name the corporation as a respondent, and
 - (b) notify the corporation of its opportunity to request a hearing.
- (2) If, following receipt of a written notice under section 114(1) of the Act, the health profession corporation requests a hearing, the permit committee must direct the registrar to give written notice of the hearing to the corporation that
- (a) describes the matter that is to be the subject of the hearing,
 - (b) specifies timelines for providing written submissions, or if the reconsideration or review will proceed by a different form of hearing, such information as is necessary respecting the date, time, and if applicable, location for that hearing, and
 - (b) informs the corporation of the permit committee's authority under section 9.13(6).
- (3) The registrar must give the notice under subsection (2) at least 14 days before
- (a) the date of a hearing to be conducted in-person or by electronic means, or
 - (b) in the case of a hearing to be conducted by written submissions, the date set for receipt of the first submissions.

Disciplinary hearing

- 9.13** A hearing under section 114 of the Act must be conducted by written submissions only, unless the permit committee determines there are exceptional circumstances requiring a different form of hearing.

Hearing process

- 9.14** (1) Except as otherwise required by these bylaws or the Act, the permit committee
- (a) has the power to control its own process for a hearing under section 114 of the Act, and
 - (b) without limiting paragraph (a), may do one or both of the following:
 - (i) adjourn the hearing;
 - (ii) make orders to facilitate the timely, just and orderly conduct of the hearing.
- (2) The permit committee may act under subsection (1) on its own initiative or on the request of a party to a hearing.
- (3) If a hearing under section 114 of the Act proceeds in person or by electronic means,

- (a) the corporation and the college may appear as parties and with legal counsel, and
 - (b) the permit committee may allow for the corporation and the college to call evidence and for witnesses to provide testimony.
- (4) If the permit committee allows for witnesses to provide testimony under subsection (3)(b),
- (a) that testimony must be taken on oath, or using a form of affirmation that confirms a witness's commitment to speak the truth and is culturally appropriate, and
 - (b) the corporation and the college have the right to cross-examine the witnesses.
- (6) If a health profession corporation does not attend a hearing under section 114 of the Act conducted in-person or by electronic means, or fails to provide written submissions by a specified deadline, the permit committee may
- (a) proceed with the hearing in the absence of the corporation on proof the registrar gave the notice corporation in accordance with section 9.12, and
 - (b) without further notice to that person, take any action that it is authorized to take under the Act.

PART 10 – DELEGATION

Definitions

10.01 In this Part:

“**dental assistant**” means a person other than a licensed dental assistant who assists a dentist or dental hygienist with the provision of health services included in the practice of dentistry or dental hygiene, as applicable;

“**Dental Assistants Bylaws**” means the bylaws in respect of certified dental assistants made by the college under the former Act as amended under section 539 of the Act and the *Health Professions and Occupations Regulation (No. 2)*;

“**dental radiography module**” means a program providing specific training, in accordance with criteria established by the board, on the competent and safe application of dental x-rays;

“**direct supervision**” means a supervising licensee is in attendance with a person to whom the performance of an aspect of practice or a restricted activity has been delegated at all times while the person is performing the delegated aspect of practice or restricted activity;

“**dentist**” includes a dental therapist licensee;

“**indirect supervision**” means a supervising licensee is

- (a) present at the same location while a person to whom the performance of an aspect of practice or a restricted activity has been delegated is performing the delegated aspect of practice or restricted activity, and
- (b) immediately available for consultation, assistance and intervention;

“**licensed dental assistant**” means a person who holds a dental assistant licence in accordance with the Dental Assistants Bylaws as amended under section 539 of the Act;

“**orthodontic module**” means a program providing specific training, in accordance with criteria established by the board, on the competent and safe performance of the aspects of practice and restricted activities specified in section 10.05(5);

“**prosthodontic module**” means a program providing specific training, in accordance with criteria established by the board, on the competent and safe performance of the aspects of practice and restricted activities specified in section 10.05(7).

Requirements for delegation

10.02 (1) In addition to complying with section 74(2) of the Act, a licensee who delegates the performance of an aspect of practice or a restricted activity as authorized in this Part must

- (a) issue to the person to whom the delegation is made specific and appropriate instructions on performing the delegated aspect of practice or restricted activity, and

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- (b) be satisfied that the person to whom the delegation is made will perform the delegated aspect of practice or restricted activity in accordance with all standards of ethics and standards of practice that apply when a licensee is performing the same aspect of practice or restricted activity.
 - (2) A licensee must not delegate the performance of an aspect of practice or restricted activity if one or both of the following apply:
 - (a) the licensee cannot perform the aspect of practice or restricted activity because of a limit or condition on practice under these bylaws or that was imposed under the Act;
 - (b) the performance of the aspect of practice or restricted activity requires a certification under Part 7, and the licensee does not currently hold the necessary certification.

Responsibility for delegated health services

10.03 A licensee remains responsible for the performance of any aspect of practice or restricted activity that the licensee delegates.

Dental hygienist delegation

- 10.04** (1) A dental hygienist must not delegate the performance of an aspect of practice or a restricted activity except as permitted in this section.
- (2) A dental hygienist licensee may delegate the performance of an aspect of the practice of dental hygiene, provided the delegated aspect of practice is performed under the indirect supervision of a dental hygienist licensee.
 - (3) Subject to section 10.07(4), a dental hygienist licensee may delegate the application of intra-oral x-rays for diagnostic or imaging purposes, if
 - (a) the delegation is made to one of
 - (i) a dental assistant who has successfully completed a dental radiography module, or
 - (ii) a licensed dental assistant, and
 - (b) the delegated application of x-rays is performed under the indirect supervision of a dental hygienist.

Dentist delegation

- 10.05** (1) A dentist must not delegate the performance of an aspect of practice or a restricted activity except as permitted in this section.
- (2) Subject to section 10.06 and subsection (11), a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may delegate the following to a licensed dental assistant or a dental assistant:
 - (a) dispensing restorative materials into a prepared cavity;
 - (b) applying topical anesthetic;

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- (c) placing and removing dental dams and dental dam clamps;
 - (d) supporting and removing impression materials after the dentist has placed them;
 - (e) applying anticariogenic agents that do not exceed concentrations requiring a prescription.
- (3) Subject to section 10.06 and subsection (11), a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may delegate the following to a licensed dental assistant:
- (a) removing extrinsic stains not associated with calculus on the enamel of teeth using an appropriate hand instrument or slow-speed rotary instrument;
 - (b) applying anticariogenic agents, including agents that exceed concentrations requiring a prescription;
 - (c) applying desensitizing agents, acid etch, antibacterial agents, chemical cleansers, primer and bond, and treatment liners (without pulpal involvement);
 - (d) obtaining impressions and occlusal records;
 - (e) applying and adjusting fissure sealants with an appropriate hand instrument or slow-speed rotary instrument;
 - (f) placing and removing matrices and wedges;
 - (g) using and maintaining coronal whitening systems where the concentration of bleaching agents may pose a risk of patient harm;
 - (h) removing sutures, periodontal dressings and retraction cords.
- (4) If a licensed dental assistant has provided the services of a licensed dental assistant on a full-time basis for a minimum of one year and has sufficient training to provide the applicable service in accordance with section 10.02(1)(b) and section 74(2) of the Act,
- (a) a full dentist licensee or limited (restricted-to-specialty) dentist licensee may, subject to section 10.06 and subsection (11), delegate to the licensed dental assistant intra-oral fabrication of single unit extra-coronal provisional restorations, including try-in, adjusting occlusion extra-orally, temporary cementation, removing provisional cement, and removing provisional restorations, provided that provisional restorations are assessed by a full dentist licensee or limited (restricted-to-specialty) dentist licensee before cementation and again after removal of provisional cement, and
 - (b) a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may, subject to section 10.06 and subsection (11), delegate to the licensed dental assistant gross removal of supragingival permanent cement using an appropriate hand instrument and excluding the use of dental handpieces.
- (5) Subject to sections 10.06 and 10.07(2) and subsection (11), a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may

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- delegate the following to a licensed dental assistant who has successfully completed an orthodontic module:
- (a) applying appropriate materials to irritating components;
 - (b) removing irritating components;
 - (c) placing and removing orthodontic separators;
 - (d) removing excess adhesive material using appropriate hand instruments, or ultrasonic or slow-speed rotary instruments, following banding/bonding or debanding/debonding procedures;
 - (e) removing orthodontic bands and bonded attachments using appropriate hand instruments;
 - (f) the instructing of patients on the use and care of orthodontic appliances.
- (6) Subject to sections 10.06 and 10.07(2) and subsection (11), a full dentist licensee or limited (restricted-to-specialty) dentist licensee may also delegate the following to a licensed dental assistant who has successfully completed an orthodontic module:
- (a) preparing teeth for bonding or cementing of orthodontic attachments or bands;
 - (b) subject to subsection (7), fitting, placing, and light curing orthodontic bands or bondable attachments, with assessment by a full dentist licensee or limited (restricted-to-specialty) dentist licensee after fitting and again before light curing;
 - (c) fitting and adjusting orthodontic appliances and archwires followed by assessment by a full dentist licensee or limited (restricted-to-specialty) dentist licensee;
 - (d) placing and ligating archwires after assessment by a full dentist licensee or limited (restricted-to-specialty) dentist licensee;
 - (e) removing ligating materials and archwires.
- (7) Despite subsection (6)(b), only a full dentist licensee or limited (restricted-to-specialty) dentist licensee may perform attachment by self-curing materials.
- (8) Subject to sections 10.06 and 10.07(3) and subsection (11), a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may delegate the following to a licensed dental assistant who has successfully completed a prosthodontic module:
- (a) performing non-surgical gingival retraction techniques excluding the use of epinephrine;
 - (b) removing temporary and permanent cements using an appropriate hand instrument and excluding the use of dental handpieces;
 - (c) removing provisional restorations.
- (9) Subject to sections 10.06 and 10.07(3) and subsection (9), a full dentist licensee or limited (restricted-to-specialty) dentist licensee may also delegate the following to a licensed dental assistant who has successfully completed a prosthodontic module:

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- (a) fabricating and trying-in provisional restorations intra-orally, including intra-coronal direct provisionals, and adjusting occlusion extra-orally, followed by assessment by a full dentist licensee or limited (restricted-to-specialty) dentist licensee before cementation;
 - (b) temporary cementation of provisional restorations and removal of temporary cement followed by assessment by a full dentist licensee or limited (restricted-to-specialty) dentist licensee.
- (10) Subject to sections 10.06 and 10.07(4) and subsection (11), a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may delegate the application of intra-oral x-rays for diagnostic or imaging purposes to
- (a) a licensed dental assistant, or
 - (b) a dental assistant who has successfully completed a dental radiography module.
- (11) A licensed dental assistant or dental assistant must perform
- (a) a delegation described in subsections (2), (3), (4)(b), (5), (8) and (10) under the indirect supervision of a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee, and
 - (b) a delegation described in under subsections (4)(a), (6) and (9) under the indirect supervision of a full dentist licensee or limited (restricted-to-specialty) dentist licensee.
- (12) Subject to subsection (13), a full dentist licensee or limited (restricted-to-specialty) dentist licensee may delegate to a dental assistant the making or altering of a dental appliance for a patient of the delegating dentist.
- (13) A dental assistant must perform a delegation described in subsection (12) under the indirect supervision of the delegating dentist.

60-day rule

- 10.06** (1) Subject to subsections (2) and (3), a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee must not delegate the performance of a restricted activity under section 10.05, unless the full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee
- (a) ensures that the delegated restricted activity will be provided or performed within
 - (i) 60 days of issuing specific and appropriate instructions in accordance with section 10.02, or
 - (ii) such shorter period of time after receipt of those instructions as may be required under the practice standards or as the full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may otherwise specify, and

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- (b) examines the patient, or ensures that another full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee examines the patient
 - (i) during the course of the appointment at which the restricted activity is performed, unless the patient is returning for treatment that was authorized by a full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee who examined the patient within the previous 60 days and no further examination is required in accordance with the practice standards, or
 - (ii) at the beginning of the appointment at which the restricted activity is performed, if required under the practice standards or otherwise specified by the full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee.
 - (2) Subsection (1) applies to delegation of the performance of a restricted activity under the following subsections and paragraphs of section 10.05:
 - (a) paragraphs (a) and (b) of subsection (2);
 - (b) paragraphs (a) to (d), (f) and (i) of subsection (3);
 - (c) paragraphs (a) and (b) of subsection (4);
 - (d) paragraphs (a) to (e) of subsection (5);
 - (e) paragraphs (a) to (e) of subsection (6);
 - (e) paragraphs (a) to (c) of subsection (8);
 - (f) paragraphs (a) and (b) of subsection (9);
 - (f) subsection (10).
 - (3) Subsection (1) does not apply to a restricted activity performed in the context of a dental assisting education program, to the extent necessary to allow students in the program to practise on each other.

Expanded training programs

- 10.07** (1) On the successful completion of an orthodontic module or prosthodontic module, a licensed dental assistant must submit to the registrar evidence satisfactory to the registrar of the successful completion of that module.
- (2) A full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee must not delegate the performance of an aspect of practice or a restricted activity to a licensed dental assistant under section 10.05(5) unless
- (a) the licensed dental assistant has submitted to the registrar
 - (i) evidence of the successful completion of an orthodontic module under subsection (1), and
 - (ii) the fee specified in Schedule A for the issuing of a certificate under paragraph (b), and

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- (b) the registrar has issued the licensed dental assistant a certificate confirming the licensed dental assistant's completion of an orthodontic module.
 - (3) A full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee must not delegate the performance of an aspect of practice or a restricted activity to a licensed dental assistant under section 10.05(7) unless
 - (a) the licensed dental assistant has submitted to the registrar
 - (i) evidence of the successful completion of a prosthodontic module under subsection (1), and
 - (ii) the fee specified in Schedule A for the issuing of a certificate under paragraph (b), and
 - (b) the registrar has issued the licensed dental assistant a certificate confirming the licensed dental assistant's completion of a prosthodontic module.
 - (4) A dental hygienist licensee, full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee must not delegate the application of intra-oral x-rays for diagnostic or imaging purposes to a dental assistant unless
 - (a) the dental assistant has submitted to the registrar evidence satisfactory to the registrar of the dental assistant's successful completion of a dental radiography module, and
 - (b) the registrar has written to the dental assistant confirming that a dental hygienist licensee, full dentist licensee, limited (restricted-to-specialty) dentist licensee or dental therapist licensee may delegate the application of such x-rays to the dental assistant.

Dental technician delegation

- 10.08** (1) A dental technician must not delegate the performance of an aspect of practice or restricted activity except as permitted in subsections (2) to (4).
- (2) Subject to subsections (3) and (4), a dental technician licensee may delegate the performance of an aspect of practice or restricted activity provided the person to whom the delegation is made performs the delegated aspect of practice or restricted activity under the indirect supervision of a dental technician licensee.
 - (3) A supervising dental technician licensee does not need to be present at the same location while a person to whom a delegation is made is performing a delegated aspect of practice or restricted activity under subsection (2).
 - (4) A dental technician licensee must not authorize or permit a person to whom a delegation is made to deliver or release any dental prosthesis or oral device until the prescription for that prosthesis or device has been signed and dated by a dental technician licensee.

Denturist delegation

- 10.09** (1) A denturist must not delegate the performance of an aspect of practice or restricted activity except as permitted in subsections (2) to (4).

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- (2) A full denturist licensee may delegate the performance of the following aspects of practice, provided the person to whom the delegation is made performs them under the indirect supervision of a full denturist licensee:
 - (a) supporting and removing impression materials after the denturist has placed them;
 - (b) supporting and removing tissue conditioners after the denturist has placed them;
 - (c) placing and removing dentures, without any involvement in the assessment of fit.
 - (3) Subject to subsection (4), a full denturist licensee may delegate the making or altering of a denture, provided the person to whom the delegation is made makes or alters the denture under the indirect supervision of a full denturist licensee.
 - (4) A supervising full denturist licensee does not need to be present at the same location while a person is making or altering a denture under subsection (3), but the supervising full denturist licensee must review the denture before it is provided to a patient.

Delegation for education purposes

- 10.10** (1) Despite any provision to the contrary in this Part, a dental hygienist licensee, full dentist licensee, limited (restricted-to-specialty) dentist licensee, limited (academic) dentist licensee, dental technician licensee, denturist licensee or temporary licensee in the designated health professions of dental hygiene, dentistry, dental technology or denturism may delegate the performance of an aspect of practice or restricted activity within the scope of practice of the licensee's designated health profession to a person enrolled in, an education program for an applicable designated health profession, if the person performs the aspect of practice or restricted activity
- (a) for the purpose of fulfilling the education program, and
 - (b) in a facility operated by or affiliated with the applicable education program.
- (2) For certainty, sections 10.02 to 10.03 apply to a delegation made under subsection (1).
 - (3) A person to whom an aspect of practice is delegated under subsection (1) must perform the aspect of practice under the indirect supervision of a licensee who may delegate that aspect of practice.
 - (4) Subject to section 10.09(4), a person to whom a restricted activity is delegated under subsection (1) must perform the restricted activity under the direct supervision of a licensee who may delegate that restricted activity.

PART 11 – QUALITY ASSURANCE

Definitions

11.01 In this Part, “**quality assurance assessor**” means a person retained or employed by the registrar under section 363 of the Act to exercise the powers and perform the duties of a quality assurance assessor.

Quality assurance program

- 11.02**
- (1) The registrar must establish and administer a quality assurance program as required under this Part and under Division 8 of Part 3 of the Act.
 - (2) The quality assurance program must include requirements to be completed by licensees annually.
 - (3) In accordance with the *Human Rights Code* or as otherwise required by law, the registrar may
 - (a) extend the time for a licensee to complete a quality assurance program requirement, or
 - (b) modify a program requirement to be met by a licensee.
 - (4) Each licensee must maintain and retain records related to meeting requirements of the quality assurance program.
 - (5) For the purposes of the definition of “quality assurance officer” in section 1 of the Act, the class of persons authorized to obtain or disclose information with respect to the quality assurance program or a quality assurance assessment under that program includes:
 - (a) the registrar;
 - (b) employees who
 - (i) exercise powers or perform duties with respect to the quality assurance program, or
 - (ii) assist the registrar or other employees to exercise powers or perform duties with respect to the quality assurance program.
 - (6) The registrar must establish policies and procedures respecting the operation and administration of the quality assurance program, and the completion of program requirements by licensees.
 - (7) The registrar must monitor information and records related to the quality assurance program to identify issues of professional performance across multiple licensees or within a class of licensees, and on identifying any issues may make changes to the quality assurance program respecting one or more of the following:
 - (a) further education, training or other remedial activities that licensees should undertake;

- (b) types of anti-discrimination measures that licensees should take;
- (c) actions to prevent potential harm or discrimination while the issues are being remedied.

Qualifications of quality assurance assessors

11.03 A quality assurance assessor must

- (a) hold a licence to practice a designated health profession that does not have limits or conditions on it, and
- (b) have training, experience or expertise in one or both of
 - (i) professional performance of a designated health profession, and
 - (ii) anti-discrimination measures in providing health services.

Additional circumstances for a quality assurance assessment

11.04 In addition to the circumstances listed in section 99(1)(a) to (c) of the Act, a quality assurance assessor may conduct a quality assurance assessment of a licensee

- (a) as part of the periodic assessment of every licensee, every licensee in a class of licensees, every licensee in a designated health profession, or every licensee in a specified group of licensees,
- (b) further to a referral by the registrar under sections 12.21(3), or
- (c) further to limits or conditions the licence committee attached to the licensee's licence.

Additional methods of quality assurance assessment

11.05 In addition to actions listed in section 99(2)(a) to (c), a quality assurance assessor may, for the purposes of the conducting a quality assurance assessment of a licensee:

- (a) contact work peers, including the licensee's employers, professional colleagues, and co-workers, to gather information including but not limited to their observations, opinions, and evaluations pertaining to the licensee's professional performance,
- (b) contact patients, and family members of patients, to gather information, including but not limited to their experiences with the licensee, pertaining to the licensee's professional performance,
- (c) collect third party documentation and records pertaining to the licensee's professional performance,
- (d) review the licensee's history of professional activities, including but not limited to the licensee's patterns, if any, of assessment, diagnostic testing, prescribing, diagnosis, and treatment,
- (e) interview or engage in discussions with the licensee pertaining to the licensee's professional practice, or

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- (f) require that the licensee undergo a specific clinical skills assessment process.

Conduct of assessments

- 11.06** (1) Before conducting a quality assurance assessment, a quality assurance assessor must advise the licensee to be assessed of the following:
- (a) the process for the quality assurance assessment,
 - (b) what actions specified in section 99(2) of the Act and section 11.04 of these bylaws the assessor intends to take in conducting the assessment;
 - (b) what the assessor may do if the assessor is of the opinion that the licensee's professional performance could be improved;
 - (c) the confidentiality that applies to quality assurance information under section 102 of the Act;
 - (d) the assessor's authority to report to the registrar under sections 103 and 104 of the Act and to the provincial health officer or a medical health officer under section 105 of the Act.
- (2) For the purpose of conducting a quality assurance assessment, a quality assurance assessor may only attend a facility where a licensee practices the licensee's designated health profession during the regular business hours in effect at the facility, unless the licensee agrees with the assessor on a time for the assessor to attend the facility outside those regular business hours.
- (3) An assessor must not observe a licensee while the licensee is providing a health service to a patient except when
- (a) the consent of the patient has been obtained in advance, or
 - (b) the service is being provided in a public setting.

Reports by assessors

- 11.07** (1) If a quality assurance assessor gives notice to a licensee under section 100 of the Act, the quality assurance assessor must submit a copy of that notice to the registrar.
- (2) A report under section 101 of the Act must be made in writing to the registrar.

PART 12 – PUBLIC PROTECTION

DIVISION 1 –ADMINISTRATIVE MATTERS AND COMPLAINTS

Registrar’s authority

- 12.01** (1) The registrar is authorized to dispose of an administrative matter under section 109 of the Act by making disciplinary orders described in section 270(1)(a) or (b) and (2) and section 271(1)(a) of the Act.
- (2) The registrar must not dispose of an administrative matter under section 109(b), (c) or (d) of the Act, unless the registrar first gives the respondent notice and an opportunity to be heard.

Maximum amount of monetary penalty for administrative matter

- 12.02** The registrar may make a disciplinary order described in section 271(1)(a) of the Act that does not exceed \$25,000.

Summary action by registrar

- 12.03** The registrar must give the investigation committee the information and records required under section 123(2) of the Act within 30 days after the date the registrar makes an order section 122(3) of the Act.

Competence assessments

- 12.04** In addition to a clinical evaluation under section 132(2)(a) of the Act, a competence assessment may include one or both of the following:
- (a) inspection of records respecting the respondent’s practice, including records containing the personal information or other types of confidential information of patients;
 - (b) interviewing the respondent and regulated health professionals or other people who work with the respondent.

Investigation reports

- 12.05** Before the investigation committee assesses a complaint under section 134(2) of the Act, the registrar
- (a) must give all final reports respecting the investigation of the complaint to the respondent,
 - (b) may give all or some of the reports, in whole or in part, to the complainant, if any, and
 - (c) must give to the investigation committee any submissions received from the respondent or complainant in response to the reports.

Disposition with respondent's consent

12.06 The registrar must obtain the respondent's consent in writing before making an order under section 158 of the Act.

Summary dismissal orders

12.07 Before making a summary dismissal order under section 258(2)(b) of the Act, the registrar may seek to obtain the information or records necessary to fairly investigate the regulatory complaint from other sources.

Investigation expenses

12.08 Subject to section 273 of the Act, an order for investigation expenses must be determined in accordance with Schedule I.

Interest rate for penalty, costs, expenses or refund

12.09 For the purposes of section 274(c) of the Act, the rate of interest payable is an annual simple interest rate that is equal to the prime lending rate of the principal banker to the British Columbia government.

Discipline hearing

12.10 The Registrar is responsible for the college's participation in a discipline hearing under Part 3, Division 16 of the Act, including retaining and instructing legal counsel to represent the college at the hearing.

Enforcement of disciplinary orders

12.11 The registrar is responsible for establishing a process for the enforcement of disciplinary orders made under the Act, including an order made against a respondent by a discipline panel in the course of a discipline hearing.

DIVISION 2 – MANAGEMENT OF A SUSPENDED LICENSEE'S PRACTICE**Carrying on of suspended licensee's practice**

- 12.12** (1) A licensee whose licence is suspended may, subject to the terms of any order then applying against the licensee, arrange for another licensee from the same designated health profession to carry on the licensee's practice of that designated health profession during the period of suspension.
- (2) A licensee must be approved by the registrar to carry on a suspended licensee's practice under subsection (1).
- (3) A licensee approved by the registrar under subsection (2) may only carry on the practice of a suspended licensee if the suspended licensee is in compliance with section 12.13.

Duties of suspended licensee

- 12.13** (1) A licensee who is suspended must immediately inform the following persons of the order for suspension, the duration of the suspension, any measures being taken to ensure continuity of care for patients, and any other matters specified in the order, as applicable:
- (a) if and to the extent required by the terms of the suspension, each patient to whom the suspended licensee is actively providing service or with whom the suspended licensee maintains an ongoing professional relationship;
 - (b) owners or administrators of each facility at which the suspended licensee provides health services;
 - (c) all regulated health professionals, administrative staff or other persons working or coordinating with the suspended licensee in providing health services to patients;
 - (d) any other persons specified in the order for suspension.
- (2) During a period of suspension, a suspended licensee
- (a) may not benefit or profit financially or otherwise, directly or indirectly, from the practice of any designated health profession, and
 - (b) must, in relation to the suspended licensee’s patient records,
 - (i) arrange for a transfer of the records either,
 - (A) as approved by the registrar, or
 - (B) as ordered under section 82 of the Act,
 - (ii) provide for a licensee approved by the registrar under section 12.12(2) to have access to the records for the purpose of carrying on the suspended licensee’s practice, or
 - (iii) notify the registrar of the location of the records, and the process by which patients may access their records.

DIVISION 3 – RECONSIDERATIONS AND REVIEWS

Definition

- 12.14** (1) In this Division, “**decision maker**” means
- (a) in respect of an application for reconsideration of a continuing practice order or a revocation order under section 148 of the Act, the capacity officer who made that order,
 - (b) in respect of an application for reconsideration of a summary protection order, the investigation committee,
 - (c) in respect of an application for reconsideration of a notice of intent to take action or a termination order under section 240(5) of the Act, either the registrar

or the investigation committee as specified in paragraph (a) of the definition of “decision maker” in section 234 of the Act, and

- (d) in respect of an application for review of a disciplinary order made under section 109(b) or (d) of the Act, the investigation committee.

Reconsideration of continuing practice, revocation and summary protection orders

- 12.15** (1) Subject to section 381 of the Act, a respondent who wants a decision maker to reconsider a continuing practice order, a revocation order or a summary protection order must submit to the registrar a completed application for reconsideration in the form and manner ordered by the registrar.
- (2) The hearing under section 382(6)(a) of the Act to reconsider a continuing practice order, a revocation order or a summary protection order must be conducted by written submissions only, unless the decision maker determines there are exceptional circumstances requiring a different form of hearing.

Reconsideration of notice of intent to take action or termination order

- 12.16** (1) Subject to section 381 of the Act, a person referred to in section 240(1)(a) of the Act who wants a decision maker to reconsider a notice of intent to take action or a termination order must submit to the registrar a completed application for reconsideration in the form and manner ordered by the registrar.
- (2) The hearing under section 382(6)(a) of the Act to reconsider a notice of intent to take action or a termination order must be conducted by written submissions only, unless the decision maker determines there are exceptional circumstances requiring a different form of hearing.

Review of disciplinary order

- 12.17** (1) Subject to section 381 of the Act, a respondent who wants the decision maker to review a disciplinary order made under section 109(1)(b), (c) or (d) of the Act must submit to the registrar a completed application for review in the form and manner ordered by the registrar.
- (2) The hearing under section 382(6)(a) of the Act to review a disciplinary order made under section 109(1)(b), (c) or (d) of the Act must be conducted by written submissions only, unless the investigation committee determines there are exceptional circumstances requiring a different form of hearing.

Processing reconsideration and review applications

- 12.18** (1) On receipt of an application for reconsideration or review under section 12.15, 12.16 or 12.17,
- (a) the registrar must, as soon as reasonably practical,
 - (i) confirm receipt of the application with the person submitting it, and
 - (ii) unless the registrar is the decision maker for the application, forward the application to the decision maker.

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- (b) the decision maker must direct the registrar to give written notice of the hearing to the person who submitted the application.
 - (2) The notice given under subsection (1)(b) must
 - (a) describe the matter that is to be the subject of the hearing,
 - (b) specify timelines for providing written submissions, or if the reconsideration or review will proceed by a different form of hearing, such information as is necessary respecting the date, time, and if applicable, location for that hearing, and
 - (c) inform the person who submitted the application of the decision maker's authority to act under section 12.19(5).

Reconsideration and review hearings

- 12.19** (1) Except as otherwise required by these bylaws or the Act, the decision maker
- (a) has the power to control its process for a hearing under section 382(6)(a) of the Act, and
 - (b) without limiting paragraph (a), may do one or both of the following:
 - (i) adjourn the hearing;
 - (ii) make orders to facilitate the timely, just and orderly conduct of the hearing.
- (2) The decision maker may act under subsection (1) on its own initiative or on the request of a party to a hearing.
- (3) If a hearing under section 382(6)(a) of the Act proceeds in person or by electronic means,
- (a) the person submitting the application for reconsideration or review and the college may appear as parties and with legal counsel, and
 - (b) the decision maker may allow for the person submitting the application for reconsideration or review and the college to call evidence and for witnesses to provide testimony.
- (4) If the decision maker allows for witnesses to provide testimony under subsection (3)(b),
- (a) that testimony must be taken on oath, or using a form of affirmation that confirms a witness's commitment to speak the truth and is culturally appropriate, and
 - (b) the person who submitted the application for reconsideration or review and the college have the right to cross examine the witnesses.
- (5) If the person who submitted the application for reconsideration or review does not attend a hearing under section 382(6)(a) of the Act conducted in person or by electronic means, or fails to provide written submissions by a specified deadline, the decision maker may, subject to section 382 of the Act,

- (a) proceed with the hearing in absence of the person who submitted the application for reconsideration or review on proof the registrar gave the person notice in accordance with section 12.18, and
- (b) without further notice to the person, take any action that it is authorized to take under the Act.

Administrative and judicial reviews

12.20 The registrar is responsible for:

- (a) determining whether to apply to the director of discipline for a review of an order made by a discipline panel,
- (b) responding to an application from a respondent or complainant for a review of an order made by a discipline panel,
- (c) determining whether to make an application for judicial review following a review by the director of discipline, or any related proceeding, and
- (d) responding to an application for judicial review.

DIVISION 4 – GENERAL MONITORING OF LICENSEES

Monitoring program

- 12.21** (1) The registrar must establish and implement a program to monitor, generally, for contraventions by licensees of the Act, the Regulations or these bylaws.
- (2) The program established and implemented by the registrar under subsection (1) must include periodic monitoring of online platforms, social media, websites and other public media or resources to identify potential contraventions by licensees.
- (3) If a potential contravention is identified through monitoring under section (2), the registrar
- (a) may request records or information from the licensee or licensees associated with the potential contravention, and
 - (b) must review the information about the potential contravention obtained from the monitoring and any request made under paragraph (a) and decide whether to
 - (i) refer the licensee or licensees associated with the potential contravention for a quality assurance assessment under section 99 of the Act,
 - (ii) assess the potential contravention as an administrative matter under section 108 of the Act, or
 - (iii) name the licensee or licensees associated with the potential contravention in a regulatory complaint under section 119 of the Act.
- (4) The program established and implemented by the registrar under subsection (1), may include, without limitation,

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- (a) developing strategies, methods and technologies to be used in monitoring under subsection (2),
 - (b) establishing and developing criteria for the registrar to use in deciding how to process a potential contravention under subsection (3), and
 - (c) collaborating with other colleges, government agencies, public bodies, professional associations, and other organizations to share information and coordinate efforts to monitor licensees under subsection (2).

DIVISION 5 – UNAUTHORIZED PRACTICE

Definitions

- 12.22** (1) In this section, “**title**” means a title that may be used exclusively by a licensee of a designated health profession in accordance with Division 3 of Part 8.
- (2) In this Division, “**unauthorized practice**” includes
- (a) conduct that contravenes section 29 of the Act in respect of a designated health profession, and
 - (b) subject to sections 31 to 33 of the Act, use of a title that contravenes section 30 of the Act.

Unauthorized practice monitoring program

- 12.23** (1) The registrar must establish and administer a program to monitor for unauthorized practice of the designated health professions.
- (2) The program established under subsection (1)
- (a) must include periodic monitoring of online platforms, social media, websites, and other public media or resources to identify potential unauthorized practice, and
 - (b) may include, without limitation,
 - (i) developing strategies, methods and technologies to be used in monitoring under subsection (2), and
 - (ii) collaborating with other colleges, government agencies, public bodies, professional associations, and other organizations to share information and coordinate efforts monitor for unauthorized practice.

Reports of unauthorized practice

- 12.24** (1) In addition to establishing and implementing a program to monitor for unauthorized practice, the registrar must receive all reports to the college of potential unauthorized practice or that a person who is not a regulated health practitioner has contravened, is contravening or is about to contravene the Act or the regulations.
- (2) The college must not disclose the identity of individuals who make a report under subsection (1) unless disclosure is necessary for the college to exercise a power or perform a duty under the Act or these bylaws.

Preliminary report and other information to the investigation committee

- 12.25** (1) If the registrar has reasonable grounds to believe a person who is not a regulated health practitioner has engaged, is engaging or is about to engage in unauthorized practice, or has contravened, is contravening or is about to contravene the Act or the regulations, the registrar must, as soon as reasonably practicable, provide a preliminary report to the investigation committee together with copies of all information and records received or obtained with respect to the report.
- (2) The registrar may, at any time, provide the investigation committee with an assessment of any matter in respect of potential unauthorized practice or the possible contravention of the Act or the regulations by a person who is not a regulated practitioner, and make recommendations with respect to:
- (a) further investigation under sections 373(a) and 374 of the Act,
 - (b) written notice to another regulator under section 373(b) of the Act, or
 - (c) a disposition under sections 376 or 377 of the Act.

PART 13 – SUPPORT PROGRAMS

Definition

13.01 In this Part, “**applicant**” means, as applicable, a person

- (a) who submits a support application under section 13.07, or
- (b) who is identified as the proposed recipient for support in a support application submitted under section 13.07 by another person.

Support programs

13.02 (1) Subject to subsection (2), the registrar must establish and administer the following support programs on behalf of the college:

- (a) an information services program,
 - (b) a support services program, and
 - (c) a support worker program.
- (2) The registrar may direct the college to participate in support programs required under subsection (1) which are established and co-administered with other regulatory colleges.
- (3) If a conflict arises between a provision of this Part and the program parameters of a support program in which the college participates with other regulatory colleges, the program parameters of that support program shall prevail.

Shared funding agreements

13.03 (1) The registrar is authorized to enter into agreements with other regulatory colleges or with the Minister and other regulatory colleges for the purposes of shared funding or shared administration of support programs.

- (2) An agreement entered into by the registrar under subsection (1) may relate to
- (a) one or more of the support programs established under section 13.02(1) or in which the college is participating under section 13.02(2), and
 - (b) all or any part of the support program or programs included in the agreement.

Policies and procedures

13.04 (1) The registrar may establish program parameters in the form of policies and procedures for the purposes of support programs, including the terms, prohibitions, requirements, limits and conditions that apply to support programs, consistent with the Act, the regulations and these bylaws.

- (2) If the college participates in support programs established and co-administered with other regulatory colleges under section 13.02(2), the registrar may, for the purposes of subsection (1), adopt policies or procedures established for the purposes of those support programs.

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- (3) Policies and procedures established or adopted by the registrar under subsection (1) and (2) may address, without limitation, one or more of the matters listed in section 277(1) of the Act.

Appointment of administrators

- 13.05** (1) The registrar must
- (a) appoint an administrator to administer each support program established under section 13.02(1), or
 - (b) consent to the appointment of an administrator to administer each support program established and co-administered with other regulatory colleges under section 13.02(2).
- (2) The registrar may appoint or consent to the appointment of an administrator to administer more than one of the support programs.

Designation of support officers

- 13.06** (1) The registrar must
- (a) designate at least one person as a support officer for each support program established under section 13.02(1), or
 - (b) consent to the designation of at least one person as a support officer for each support program established and co-administered with other regulatory colleges under section 13.02(2).
- (2) The registrar may designate or consent to the designation of a person as a support officer for more than one of the support programs.

Administrator may exercise power of support officer

- 13.07** An administrator may exercise the power of a support officer for the purposes of determining eligibility for information services under section 282 of the Act.

Application for support

- 13.08** (1) A person seeking support must submit to an administrator
- (a) a support application in the form and manner ordered by the registrar, and
 - (b) one or both of
 - (i) the information and records required in accordance with any applicable policy or procedure established or adopted under section 13.04, and
 - (ii) the information and records requested by an administrator for the purpose of evaluating the application for support.
- (2) A person who submits a support application under subsection (1) that identifies another person as the proposed recipient must provide proof, satisfactory to the administrator, of authorization to act on behalf of the proposed recipient.

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- (3) As soon as reasonably practicable after receiving a completed support application under subsection (1), the administrator must give the application and any information and records submitted under subsection (1)(b) to a support officer, unless the administrator
 - (a) determines the applicant is eligible to receive information services under section 282(1) of the Act, or
 - (b) transfers the support application to another administrator in accordance with section 280(2) of the Act.

Reconsideration of adverse eligibility decision

- 13.09** (1) In this section, “**support officer**” includes an administrator exercising the power of a support officer under section 13.07.
- (2) Subject to subsection (3), an applicant may seek reconsideration of an adverse eligibility decision by submitting to the registrar an application for reconsideration in the form and manner ordered by the registrar.
 - (3) A person submitting an application for reconsideration under subsection (2) must do so within 30 days after receiving notice of the adverse eligibility decision under section 289 of the Act.
 - (4) A person who submits an application for reconsideration under subsection (2) that identifies another person as the proposed recipient must provide proof, satisfactory to the administrator, of authorization to act on behalf of the proposed recipient.
 - (5) On receipt of an application for reconsideration in accordance with subsections (2), (3) and, as applicable, (4),
 - (a) the registrar must provide the application to
 - (i) the support officer who made the adverse eligibility decision, and
 - (ii) the administrator who gave notice of the decision under section 289 of the Act, unless the administrator is also the support officer under subparagraph (i), and
 - (b) the support officer must provide the person who submitted the application with an opportunity to be heard.
 - (6) The hearing of an application for reconsideration under subsection (5)(b) must be conducted by written submissions only, unless the support officer determines there are exceptional circumstances requiring a different form of hearing
 - (7) After the hearing of an application for reconsideration under subsection (5)(b), the support officer must, as soon as reasonably practicable, provide a reconsideration decision and reasons for the decision to the administrator specified in subsection (5)(a)(ii), unless the administrator is also the support officer.
 - (8) For certainty, section 289 of the Act applies to a reconsideration decision under subsection (7).

Administrator's support determination

- 13.10** (1) If a support officer determines that an applicant is eligible for support services, the administrator for the support services program must, in addition to determining the matters listed in section 286 of the Act, determine the matters required under any applicable policy or procedure established or adopted under section 13.04.
- (3) If a support officer determines that an applicant for support is entitled to the assistance of a support worker, the administrator for the support worker's program must, in addition to determining the matters enumerated in section 287(1)(a) of the Act, determine the matters required under any applicable policy or procedure established or adopted under section 13.04.

Reconsideration of support determination

- 13.11** (1) An applicant may seek reconsideration of a support determination by submitting to the registrar an application for reconsideration in the form and manner ordered by the registrar.
- (2) A person submitting an application for reconsideration under subsection (1) must do so within 30 days after receiving notice of the support determination under section 289 of the Act.
- (3) A person who submits an application for reconsideration under subsection (1) that identifies another person as the recipient must provide proof, satisfactory to the administrator, of authorization to act on behalf of the recipient.
- (4) On receipt of an application for reconsideration in accordance with subsections (1), (2) and, as applicable, (3),
- (a) registrar must provide the application to the administrator who gave notice of the determination under section 289 of the Act, and
 - (b) the administrator must provide the person who submitted the application with an opportunity to be heard.
- (5) The hearing of an application for reconsideration under subsection (4) must be conducted by written submissions only, unless the administrator determines there are exceptional circumstances requiring a different form of hearing
- (6) After the hearing of an application for reconsideration under subsection (4), the administrator must, as soon as reasonably practicable, provide a reconsideration decision and reasons for the decision to the person who submitted the reconsideration application.

Application to change support determination

- 13.12** (1) A recipient may make an application to change a support determination at any time during the period in which the recipient receives support by submitting to the administrator who gave notice of the determination under section 289 of the Act an application to change a support determination in the form and manner ordered by the registrar.

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- (2) A person who submits an application to change a support determination under subsection (1) that identifies another person as the recipient must provide proof, satisfactory to the administrator, of authorization to act on behalf of the recipient.

Proof of authorization to act on behalf of proposed recipient or recipient

13.13 Despite sections 13.09(3), 13.11(3) and 13.12(2), an administrator may waive the requirement to provide proof of authorization to act on behalf of a proposed recipient or recipient if such proof was already provided with a previous application.

Appointment of support workers

- 13.14** (1) Subject to the requirements of the Act, the regulations and these bylaws, the board may establish or adopt policies and procedures respecting the qualification for support workers and the process for assigning, reassigning, suspending, and terminating the assignment of support workers.
- (2) When assigning a support worker to a recipient, the administrator for the support worker program must ensure the support worker's education, training, experience and other qualifications meet the individual needs of the recipient.
 - (3) Support workers are entitled to receive reimbursement for reasonable expenses necessarily incurred in assisting recipients with support services in accordance with any applicable policy or procedure established or adopted under section 13.04

Ensuring compliance with program parameters

- 13.15** (1) An administrator or support officer may request any information or records relevant to their exercise of a power or performance of a duty, including decisions relating to eligibility for support, provision of support, and changes to a determination.
- (2) An administrator or support officer must take reasonable steps to ensure any person providing support services or providing assistance as a support worker complies with the Act, the regulations and any applicable policy or procedure established or adopted under section 13.04.

Information services program parameters

- 13.16** (1) Subject to subsection (2) and any applicable policy or procedure established or adopted under section 13.04, information services are available to all persons who inquire about the support programs or any of the matters listed in section 285(2) of the Act.
- (2) In determining the eligibility of a person to receive information services, a support officer, or an administrator acting under section 13.07, may consider the following factors:
 - (a) the extent to which the person might not be able to meaningfully participate in a process provided for in the Act, the regulations and these bylaws without receiving information services;
 - (b) any factors identified in any applicable policy or procedure established or adopted under section 13.04.

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- (3) For purposes of section 285(3) of the Act, the administrator for the information services program may authorize any person who, in the administrator's opinion has sufficient knowledge to address an inquiry, to provide information services.
 - (4) An administrator, support officer or person authorized under subsection (3) may cease to provide information services
 - (a) if satisfied that
 - (i) an inquiry, or set of inquiries, as described in subsection (1) is frivolous or abusive, or
 - (ii) the provision of additional services is unnecessary.
 - (b) in accordance with any terms, prohibitions, limits or conditions set out in any applicable policy established or adopted under section 13.04

Selecting a service provider for support services

13.17 A recipient who is eligible for funding for support services may select one or more of the following to act as a service provider:

- (a) a regulated health professional accepted by the administrator as qualified to provide support services;
- (b) an unregulated counselling professional accepted by the administrator as qualified to provide support services;
- (c) persons or organizations accepted by the administrator as qualified to provide trauma-informed care, or culturally competent trauma support;
- (d) any other person or organization who the administrator reasonably believes has competences and experience, including lived experience, that will allow them to effectively provide support services.

Information to support funding for support services

13.18 In addition to what a recipient and service provider must provide or may be asked to provide under section 290 of the Act, the administrator for the support services program may, at any time before or after providing funding for support services, require submission of the following in a form satisfactory to the administrator:

- (a) a written statement from each of the service provider and the recipient confirming that
 - (i) there is no disqualifying familial relationship between them, and
 - (ii) the funds received from the college will only be used, or have only been used, to reimburse the provision of support services to the recipient;
- (b) a description from the service provider of the dates, duration and nature of the support services to be provided, or that were provided, to the recipient;
- (c) any other information requested by the administrator for the purpose of determining that a proposed or acting service provider is eligible to be a service provider under section 13.17 and section 291 and 292 of the Act.

Support services program parameters

- 13.19** (1) A person may only apply for support services
- (a) after the applicant has submitted to the registrar a regulatory complaint as described in section 283(b) of the Act, and
 - (b) within 6 months after the date that either of the following actions or outcomes occurs in relation to the regulatory complaint under paragraph (a):
 - (i) a disposition of the registrar;
 - (ii) the issuing of a citation.
- (2) In determining the eligibility of a person to receive support services, a support officer may consider
- (a) the nature or severity of the allegations in the regulatory complaint, and
 - (b) any factors set out in any applicable policy established or adopted under section 13.04.
- (3) The administrator for the support services program may decline, suspend or terminate support services
- (a) in accordance with a determination respecting support services under section 286 of the Act,
 - (b) in accordance with sections 298 and 299 of the Act,
 - (c) in accordance with any applicable policy established or adopted under section 13.04,
 - (d) if the administrator has reasonable grounds to believe a recipient has obtained support services through or as a result of omission, misrepresentation or fraud, or
 - (e) if the administrator is satisfied, on recommendation by a service provider, that support services are not necessary, no longer necessary or should be suspended or terminated.
- (4) The provision of support services is subject to the following terms, prohibitions, requirements, limits and conditions:
- (a) funding for support services for a recipient must not exceed \$7,500, and is subject to the maximum aggregate funding amount under section 13.21;
 - (b) funding for seeking redress for sexual misconduct, sexual abuse or discrimination is limited to redress which is available under the Act, and does not include seeking redress through a court or a tribunal governed under another enactment;
 - (c) funding for support services will terminate 2 years after the date the determination of eligibility was made, unless all of the following apply:

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- (i) neither of the actions or outcomes listed in subsection (1)(b) have occurred in relation to the regulatory complaint described in subsection (1)(a);
 - (ii) the maximum amounts of funding under paragraph (a) and section 13.21 have not been expended;
 - (iii) the administrator for the support services program determines that it is appropriate to extend the funding period.
- (5) In addition to the terms, prohibitions, requirements, limits and conditions under subsection (4), the provision of support services is subject to any additional terms, prohibitions, requirements, limits or conditions set out in any applicable policy established or adopted under section 13.04.

Support worker program parameters

- 13.20** (1) A person may only apply for the assistance of a support worker
- (a) after the applicant has submitted to the registrar a regulatory complaint as described in section 283(b) of the Act, and
 - (b) before the date of any of the following actions or outcomes in relation to the regulatory complaint under paragraph (a):
 - (i) a disposition of the registrar;
 - (ii) the issuing of a citation.
- (2) In determining the eligibility of a person to receive the assistance of a support worker, a support officer may consider
- (a) the nature and severity of the allegations in the regulatory complaint, and
 - (b) any factors set out in any applicable policy established or adopted under section 13.04.
- (3) The administrator for the support worker program may decline, suspend or terminate the assistance of a support worker
- (a) in accordance with a determination respecting the assistance of a support worker under section 287 of the Act,
 - (b) in accordance with sections 298 and 299 of the Act,
 - (c) in accordance with any applicable policy established or adopted under section 13.04,
 - (d) if the administrator has reasonable grounds to believe a recipient has obtained the assistance through or as a result of omission, misrepresentation or fraud, or
 - (e) if the administrator is satisfied, on recommendation by a support worker, that the assistance of a support worker is not necessary, no longer necessary, or should be suspended or terminated.
- (4) The provision of the assistance of a support worker is subject to the following terms, prohibitions, requirements, limits and conditions:

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- (a) funding for the assistance of a support worker for a recipient must not exceed \$7,500, and is subject to the maximum aggregate funding amount under section 13.21;
 - (b) subject to a support worker making an oversight complaint under section 296(2)(b) of the Act, the assistance of a support worker will terminate on the earliest of the following dates, as applicable:
 - (i) the date on which a termination order is made in relation to the regulatory complaint under subsection (1)(a);
 - (ii) if the regulatory complaint under subsection (1)(a) is disposed of by an order under section 158 or 159 of the Act or an order of the registrar, with or without direction of the investigation committee, dismissing the complaint,
 - (A) the date that is 3 months after the deadline to apply to Health Professions Review Board for a complaint disposition review in relation to the disposition of the regulatory complaint, or
 - (B) if an application for a complaint disposition review is made to the Health Professions Review Board, the date on which Health Professions Review Board makes an order under section 319(1)(b)(i) of the Act;
 - (iii) the date that is 3 months after the date on which a citation issued in relation to the regulatory complaint under subsection (1)(a) is dismissed or resolved by disciplinary order.
 - (5) In addition to the terms, prohibitions, requirements, limits and conditions under subsection (4), the provision of support services is subject to any additional terms, prohibitions, requirements, limits or conditions set out in any applicable policy established or adopted under section 13.04.
 - (6) When making a recommendation under section 296 of the Act, a support worker must not disclose a recipient's personal information unless the recipient consents.

Maximum aggregate funding

13.21 The maximum aggregate funding available to a recipient under all support programs is \$10,000.00.

PART 14 – ACCREDITATION

DIVISION 1 – INTERPRETATION

Definitions

14.01 In this Part:

“**accreditation inspector**” means a person retained or employed by the registrar for the purpose of conducting facility inspections and reinspections under this Part;

“**compliance assessment**” means an assessment of a facility’s compliance with the accreditation standards, and may include requests for information or records, or both, confirming that compliance;

“**facility director**” means a licensee who the registrar approves as the facility director for an accredited facility under section 14.07(5)(a);

“**owner**” means a licensee or health profession corporation that

- (a) owns a facility, or
- (b) is an occupant having control of the premises where a facility is located.

DIVISION 2 – ACCREDITATION REQUIREMENTS

Requirement for accreditation

14.02 A licensee may only perform an aspect of practice or restricted activity specified in the accreditation standards

- (a) at an accredited facility, and
- (b) in accordance with the accreditation standards respecting the administration and operation of accredited facilities.

Requirement for facility director

14.03 (1) An accredited facility must at all times have a facility director who

- (a) is a licensee in good standing, and
- (b) has the education, credentials, qualifications and experience required for a facility director under the accreditation standards respecting the administration and operation of accredited facilities.

(2) A facility ceases to be accredited if the facility director of the facility

- (a) does not meet the requirements under subsection (1),
- (b) resigns as facility director of the facility, or
- (c) otherwise ceases to practice at the facility.

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- (3) If a facility ceases to be accredited under subsection (2), an owner of the facility must immediately provide written notice to the registrar.
 - (4) An accredited facility may apply to change its facility director by submitting to the registrar
 - (a) an application for approval of a facility director in the form and manner ordered by the registrar, and
 - (b) the information or records specified under section 14.05(1)(b) respecting the facility's proposed facility director.
 - (5) Section 14.07(4), (5), (7) and (8) applies to an application under subsection (4) as if it were an application for accreditation, except that the accreditation committee may only decide whether to direct the registrar to approve the proposed facility director under section 14.07(5)(a).

DIVISION 3 – FACILITY DIRECTOR RESPONSIBILITIES

Responsibilities of facility director

- 14.04** (1) The facility director for an accredited facility is responsible for
- (a) ensuring that the facility continues to comply with the accreditation standards,
 - (b) ensuring that all licensees practising at the facility who may perform an aspect of practice or restricted activity specified in the accreditation standards are aware of, and comply with, the accreditation standards,
 - (c) ensuring that all licensees practising at the facility who perform an aspect of practice or restricted activity specified in the accreditation standards comply with the reporting requirements in the accreditation standards, including in particular, the duty to submit critical incident report forms as required under the standards, and
 - (d) responding in a timely manner to any inquiries or requests from the registrar or the accreditation committee in respect of the facility and licensee compliance with the accreditation standards.
- (2) The facility director for an accredited facility must provide written notice to the registrar within 14 days of any change in the information most recently submitted to the registrar in one or more of the following:
- (a) an application for accreditation;
 - (b) an application for renewal of accreditation;
 - (c) an application for approval of a facility director;
 - (d) a compliance assessment;
 - (e) a response to a request made under section 14.18(1).

DIVISION 4 – ACCREDITATION APPLICATIONS**Application for accreditation**

- 14.05** (1) A facility seeking accreditation for the purposes of section 14.02, must submit to the registrar
- (a) a completed application for accreditation in the form and manner ordered by the registrar,
 - (b) information or records, or both, confirming
 - (i) the proposed facility director's
 - (A) identity and legal name,
 - (B) contact information for the purposes of processing the application for accreditation, including a telephone number and email address, and
 - (C) licensure status, education, qualifications and experience in performing the aspects of practice or restricted activities specified in Schedule B that are to be performed at the facility,
 - (ii) each owner of the facility, and
 - (iii) the physical location of the facility,
 - (c) an acknowledgement in the form and manner ordered by the registrar, executed by the proposed facility director and each licensee who is an owner of the facility, confirming they will cooperate with the inspection of the facility for the purpose of the application for accreditation,
 - (d) payment of
 - (i) any outstanding amount owed or owing to the college by the proposed facility director or an owner, including without limitation any amount accrued or accruing to a former regulatory college prior to its amalgamation into the college,
 - (ii) the accreditation fee specified in Schedule A, and
 - (iii) the facility inspection fee specified in Schedule A, and
 - (e) any additional information or records the registrar requests the proposed facility director to provide.
- (2) Despite subsection (1)(b)(i)(B) and (e), an application submitted under subsection (1) may specify a licensee owner of the facility as the contact for the purposes of processing the application for accreditation, in which case,
- (a) the information and records submitted under subsection (1)(b) must confirm contact information for the specified licensee owner, including a telephone number and email address, and

- (b) the specified licensee owner assumes the rights and responsibilities of a proposed facility director under subsections (1)(e) and (3) and sections 14.06, 14.07, 14.19 and 14.22.
- (3) After a facility submits the items required under subsection (1),
 - (a) the registrar must provide the proposed facility director or specified licensee owner for the facility, as applicable, with a compliance assessment in the form and manner specified by the registrar, and
 - (b) the facility director or specified licensee owner must
 - (i) complete the compliance assessment and submit it to the registrar, and
 - (ii) if required in the accreditation standards, submit to the registrar payment of the compliance assessment fee specified in Schedule A.

Pre-accreditation inspections

- 14.06** (1) Subject to subsection (2) and section 14.16, on receiving from a facility the items required under section 14.05(1) and (3), the registrar must schedule an inspection of the facility to be conducted by one or more accreditation inspectors on a date agreed upon with the proposed facility director or specified licensee owner for the facility, as applicable.
- (2) The accreditation committee may direct the registrar not to schedule an inspection under subsection (1) for a facility or a specified class of facilities.

Decision on application for accreditation

- 14.07** (1) In deciding an application for accreditation from a facility, the accreditation committee must consider all of the following:
- (a) the accreditation standards respecting accreditation of facilities;
 - (b) the application for accreditation and all information and records submitted by the facility under section 14.05(1);
 - (c) a compliance assessment submitted under section 14.05(3) or 14.17;
 - (d) all inspection reports provided to the proposed facility director or specified licensee owner for the facility under section 14.19(4);
 - (e) any submissions made by the proposed facility director or specified licensee owner for the facility under section 14.19(5)(a), including any information or records regarding steps taken to remedy findings of non-compliance;
 - (f) any written notice of a decision not to schedule a reinspection of the facility under section 14.19(9) and the reasons for the decision.
- (2) Before making a decision with respect to an application for accreditation, the accreditation committee may direct the registrar to
- (a) request additional information from the proposed facility director or specified licensee owner for the facility, as applicable, or

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- (b) schedule an inspection or reinspection of the facility.
 - (3) If the accreditation committee directs the registrar to schedule a reinspection of the facility under subsection (2)(b), section 14.19(7) and (8) applies to the reinspection as if the registrar decided to reschedule the reinspection under section 14.19(6).
 - (4) Before making a decision with respect to an application for accreditation, the accreditation committee may
 - (a) direct the registrar to give written notice to the proposed facility director or specified licensee owner for the facility, as applicable, of
 - (i) the decision being considered and the reasons for the decision being considered, and
 - (ii) the processes that apply for the purposes of paragraph (b),
 - (b) give the proposed facility director or specified licensee owner for the facility the choice of either
 - (i) requesting a hearing, or
 - (ii) accepting, if the committee is of the opinion that it would be appropriate in the circumstances, accreditation that is subject to limits or conditions, and
 - (c) if the proposed facility director or specified licensee owner requests a hearing in accordance with the notice given under paragraph (a)(ii), hold the hearing.
 - (5) Subject to subsection (6), if the accreditation committee is satisfied, with or without a hearing, that a facility meets the accreditation standards respecting accreditation of facilities, the committee must direct the registrar to
 - (a) approve the proposed facility director for the facility as the facility director for facility, and
 - (b) issue a certificate of accreditation to the facility.
 - (6) Subject to the accreditation standards, the accreditation committee may impose limits or conditions on a facility's accreditation, including limits or conditions in respect of the following:
 - (a) the term of accreditation granted to the facility;
 - (b) the aspects of practice or restricted activities specified in Schedule B that may be performed at the facility;
 - (c) inspections of the facility or other measures for the purpose of confirming adherence to the accreditation standards respecting the ownership, administration and operation of accredited facilities.
 - (7) The accreditation committee must not deny an application for accreditation of a facility or grant accreditation with limits or conditions under subsection (6) unless the committee first gives notice and an opportunity to be heard as described in subsection (4).

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- (8) If the accreditation committee denies an application for accreditation of a facility or grants accreditation with limits or conditions under subsection (6), the committee must direct the registrar to give written notice of the decision and the reasons for the decision to the proposed facility director or specified licensee owner for the facility, as applicable.

Certificate of accreditation

14.08 A certificate of accreditation issued by the registrar under section 14.07(5) must

- (a) state the term of accreditation granted to the facility, which must not exceed the maximum allowable term specified in the accreditation standards respecting the administration and operation of accredited facilities,
- (b) identify the physical location at which the facility is authorized to operate, and
- (c) set out any limits or conditions imposed on the accreditation of the facility.

DIVISION 5 – RENEWAL OF ACCREDITATION

Notice of renewal requirements

14.09 At least 6 months before the expiration of the term of accreditation for a facility, the registrar must notify the facility director of the process for renewal of accreditation, including the requirement for a pre-renewal inspection, and the consequences of failing to renew prior to the expiration of the term of accreditation.

Application for renewal

- 14.10** (1) A facility director applying for renewal of a facility's accreditation must, at least 3 months before the expiration of the term of accreditation for the facility, submit to the registrar
- (a) a completed application for renewal of accreditation in the form and manner ordered by the registrar,
 - (b) a completed declaration in the form and manner ordered by the registrar attesting to the facility's continuing compliance with the accreditation standards, and any limits or conditions the committee imposed on the facility's accreditation,
 - (c) payment of
 - (i) any outstanding amount owed or owing to the college by the facility director or an owner, including without limitation any amount accrued or accruing to a former regulatory college prior to its amalgamation into the college,
 - (ii) the accreditation renewal fee specified in Schedule A, and
 - (iii) the facility inspection fee specified in Schedule A, and
 - (d) any additional information or records the registrar requests the facility director to provide.

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- (2) A facility director applying for renewal of a facility's accreditation who fails to submit the items required under subsection (1) by the deadline specified in that subsection, must, before the expiration of the term of accreditation for the facility, submit to the registrar
 - (a) those items, and
 - (b) payment of the accreditation late renewal fee specified in Schedule A.

Pre-renewal inspections

14.11 On receiving from a facility director the items required under section 14.10(1) or (2), as applicable, the registrar must schedule an inspection of the facility to be conducted by one or more accreditation inspectors on a date agreed upon with the facility director.

Decision on renewal application

- 14.12** (1) Section 14.07(1) to (4) applies to an application for renewal of a facility's accreditation as if it was an initial application for accreditation and the facility director was a proposed facility director under that section.
- (2) Subject to subsection (3), if the accreditation committee is satisfied, with or without a hearing, that an accredited facility meets the accreditation standards respecting accreditation of facilities, the committee must direct the registrar to issue a certificate of renewed accreditation to the facility.
 - (3) The accreditation committee may impose limits or conditions on the renewal of a facility's accreditation, including the limits or conditions specified in section 14.07(6).
 - (4) The accreditation committee must not deny an application for renewal of a facility's accreditation or renew a facility's accreditation with limits or conditions under subsection (3) unless the committee first gives notice and an opportunity to be heard as described in section 14.07(4).
 - (5) If the accreditation committee denies an application for renewal of a facility's accreditation or renews a facility's accreditation with limits or conditions under subsection (3), the committee must direct the registrar to give the facility director written notice of the decision and the reasons for the decision.

Certificate of renewed accreditation

- 14.13** A certificate of renewed accreditation issued by the registrar under section 14.12(2) must:
- (a) state the additional term of accreditation granted to the facility, which must not exceed the maximum allowable term specified in the accreditation standards respecting the administration and operation of accredited facilities,
 - (b) identify the physical location at which the facility is authorized to operate, and
 - (c) set out any limits or conditions imposed on the accreditation of the facility.

DIVISION 6 – VARYING LIMITS OR CONDITIONS ON ACCREDITATION**Application to vary limits and conditions on accreditation**

- 14.14** (1) A facility director may apply to vary the limits and conditions imposed on a facility's accreditation by submitting to the registrar
- (a) a completed application to vary limits and conditions on accreditation in the form and manner ordered by the registrar,
 - (b) the fee for varying limits and conditions on accreditation specified in Schedule A, and
 - (c) any additional information or records the registrar requests the facility director to provide.
- (2) Section 14.12 applies to an application submitted under subsection (1) as if it was an application for renewal of accreditation.

Extension of term

- 14.15** Despite any provision to the contrary in this Part, if, at any time, the accreditation committee is satisfied there are extenuating circumstances that warrant an extension of a facility's term of accreditation, the committee may extend the term for a further period not to exceed one year.

DIVISION 7 – COMPLIANCE ASSESSMENTS**Accredited facility compliance assessments**

- 14.16** During a facility's term of accreditation, the facility director for the facility must complete and submit to the registrar a compliance assessment
- (a) as specified in the accreditation standards, and
 - (b) in the form and manner ordered by the registrar.

Resubmission of compliance assessment

- 14.17** (1) Following review of a compliance assessment submitted under section 14.05(3) or 14.16, the accreditation committee may direct the registrar to order the submission of a new compliance assessment, if the committee is of the opinion that
- (a) the information contained in the compliance assessment is no longer current, or
 - (b) the compliance assessment is not properly completed or is lacking requested information or records.
- (2) A facility director, proposed facility director or specified licensee owner submitting a new compliance assessment under subsection (1) must, if required in the accreditation standards, also submit to the registrar payment of the compliance assessment fee specified in Schedule A.

DIVISION 8 – INSPECTIONS AND REQUESTS FOR INFORMATION

Requests for information and additional inspections

- 14.18** (1) At any time during a facility’s term of accreditation, the registrar may
- (a) request information or records, or both, from the facility director for the facility, or
 - (b) appoint one or more accreditation inspectors to conduct an on-site inspection of the facility.
- (2) The registrar must act under subsection (1) as required by the accreditation standards.
- (3) The registrar may act under subsection (1) at the direction of the accreditation committee or on the registrar’s own initiative.
- (4) A facility director must ensure an accredited facility is available for an on-site inspection at any time during regular business hours.
- (5) Following an on-site inspection under subsection (1)(b), if the inspection report described in section 14.19(4) includes a finding that the facility does not comply with the accreditation standards, the registrar may require the facility director to pay the facility inspection fee specified in Schedule A.

Facility inspections

- 14.19** (1) During an on-site inspection of a facility, an accreditation inspector may do one or more of the following:
- (a) enter the facility;
 - (b) inspect, analyze or take a similar action with respect to any equipment or materials found on the premises of the facility;
 - (c) inspect and copy any records found on the premises of the facility, including records containing personal information or other types of confidential information;
 - (d) observe and record the performance of an aspect of practice or restricted activity specified in Schedule B.
- (2) A patient must not be observed or recorded under subsection (1)(d) unless the patient consents.
- (3) The facility director or proposed facility director of a facility, as applicable, must cooperate with an on-site inspection of the facility, including promptly answering questions asked and providing information and records requested by an accreditation inspector who conducts the inspection.
- (4) At the conclusion of an on-site inspection of a facility, an accreditation inspector who conducted the inspection must provide an inspection report that sets out the findings of the inspection to the facility director or proposed facility director for the facility, as applicable.

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- (5) If an inspection report under subsection (4) includes a finding that a facility does not comply with the accreditation standards respecting accreditation of facilities, the facility director or proposed facility director for the facility may do one or both of the following within 30 days of receiving the report:
 - (a) make written submissions with respect to that finding;
 - (b) request in writing that the registrar schedule a reinspection of the facility to determine if the finding of non-compliance has been remedied.
 - (6) In deciding whether to schedule a reinspection of a facility requested under subsection (5)(b), the registrar may consider one or more of the following:
 - (a) the nature of the finding that the facility does not comply with the accreditation standards respecting accreditation of facilities;
 - (b) whether there has already been a reinspection of the facility, and the results of that reinspection;
 - (c) any submissions made by the proposed facility director or specified licensee owner for the facility under subsection (5)(a), including any information or records regarding steps taken to remedy findings of non-compliance.
 - (7) If the registrar decides to schedule a reinspection under subsection (6),
 - (a) the proposed facility director or specified licensee owner for a facility must pay the facility reinspection fee specified in Schedule A before a date may be scheduled for the reinspection, and
 - (b) following payment of the fee under paragraph (a), the registrar must schedule the reinspection.
 - (8) For certainty, subsections (1) to (5) apply to a reinspection.
 - (9) If the registrar decides not to schedule a reinspection under subsection (6), the registrar must give written notice of the decision and the reasons for the decision to the facility director or proposed facility director for the facility, as applicable.

DIVISION 9 – IMPOSING LIMITS, CONDITIONS OR A SUSPENSION ON ACCREDITATION

Imposition of limits, conditions or suspension

- 14.20** (1) At any time during a facility's term of accreditation, the accreditation committee may direct the registrar to make an order
- (a) imposing or varying limits or conditions on the facility's accreditation, or
 - (b) suspending the facility's accreditation.
- (2) The committee may take an action specified in subsection (1) against a facility if, in the opinion of the committee, one or both of the following apply:
- (a) the facility or the facility director for the facility is not complying, or has not complied, with one or more of

- (i) the accreditation standards,
 - (ii) a requirement under this Part, or
 - (iii) any limits or conditions already imposed facility's accreditation;
- (b) one or both of the following may present an unreasonable risk of harm to patients of the facility, persons working at the facility or the public:
- (i) the performance at the facility of an aspect of practice or restricted activity specified in the accreditation standards;
 - (ii) equipment or procedures at the facility associated with the performance of an aspect of practice or restricted activity specified in the accreditation standards.

Notice of proposed action and hearing

- 14.21** (1) Before taking an action specified section 14.20(1) against a facility, the accreditation committee must
- (a) direct the registrar to give notice, in writing, to the facility director for the facility of
 - (i) the belief and the reasons for the belief,
 - (ii) the action the committee is considering taking, and
 - (iii) the process for a hearing under paragraph (b), and
 - (b) give the facility director an opportunity to be heard and, if a hearing is requested, hold the hearing.
- (2) After a hearing, or if no hearing is requested in accordance with the notice given under subsection (1)(a)(iii),
- (a) the accreditation committee must give the registrar a copy of the committee's decision respecting the disposition of the matter and the reasons for the decision, and
 - (b) the registrar must give the facility director written notice of the committee's decision and the reasons for the decision.
- (3) A hearing under this section must be conducted by written submissions only, unless the accreditation committee determines there are exceptional circumstances requiring a different form of hearing.

Extraordinary action

- 14.22** (1) Despite section 14.20, if the registrar considers extraordinary action is necessary to protect patients of a facility, persons working at a facility, or the public against an unreasonable risk of harm as described in section 14.20(2)(b), the registrar may make an order
- (a) imposing or varying limits or conditions on a facility's accreditation, or
 - (b) suspending a facility's accreditation.

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- (2) The registrar may make an order specified in subsection (1) against a facility without giving the facility or the facility director for the facility notice or an opportunity to be heard.
 - (3) If the registrar makes an order specified in subsection (1) against a facility, the registrar must give notice to the facility director for the facility, in writing, that
 - (a) includes the reasons for the order, and
 - (b) advises the facility director of the right to seek review of the order by the accreditation committee.
 - (4) If the registrar determines that an order made against a facility under subsection (1) is no longer necessary to protect the public, the registrar must cancel the limits, conditions or suspension, as applicable, and must give notice of the cancellation to the facility director for the facility, in writing, as soon as practicable.

DIVISION 10 – RECONSIDERATION AND REVIEW

Reconsideration of adverse accreditation decisions

- 14.23** (1) The facility director or proposed facility director for a facility, as applicable, may make an application for reconsideration of a decision of the accreditation committee
- (a) under section 14.03 denying approval of a facility director,
 - (b) under section 14.07, denying an application for accreditation of the facility or granting accreditation to the facility with limits or conditions,
 - (c) under section 14.12, denying an application for renewal of the facility’s accreditation or renewing the facility’s accreditation with limits or conditions, or
 - (d) under section 14.20, directing the registrar to make an order
 - (i) imposing or varying limits or conditions on the facility’s accreditation, or
 - (ii) suspending the facility’s accreditation.
- (2) Sections 381 to 383 of the Act apply to an application for reconsideration under subsection (1).
 - (3) Section 12.20 applies to an application for reconsideration under subsection (1) as if it were application for reconsideration specified in section 12.20(1).
 - (4) Under section 381(1) of the Act, a facility director or proposed facility director making an application for reconsideration under subsection (1) must submit to the registrar a completed application for reconsideration in the form and manner ordered by the registrar.
 - (5) The hearing under section 382(6)(a) of the Act to reconsider a decision of the accreditation committee specified in subsection (1) must be conducted by written submissions only, unless the accreditation committee determines there are exceptional circumstances requiring a different form of hearing.

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- (6) For certainty, section 12.21 applies to a hearing under section 382(6)(a) of the Act to reconsider a decision of the accreditation committee specified in subsection (1).

Review of extraordinary action

- 14.24** (1) A facility director may make an application for a review of an order of the registrar under section 14.22(1) by submitting to the registrar a completed application for review in the form and manner ordered by the registrar.
- (2) Sections 381 to 383 of the Act apply to an application for a review under subsection (1).
 - (3) Section 12.20 applies to an application for review under subsection (1) as if it were application for a review specified in section 12.20(1).
 - (4) Under section 381(1) of the Act, a facility director making an application for a review under subsection (1) must submit to the registrar a completed application for a review in the form and manner ordered by the registrar.
 - (5) The hearing under section 382(6)(a) of the Act to review an order of the registrar under section 14.22(1) must be conducted by written submissions only, unless the accreditation committee determines there are exceptional circumstances requiring a different form of hearing.
 - (6) For certainty, section 12.21 applies to a hearing under section 382(6)(a) of the Act to review an order of the registrar under section 14.22(1).

DIVISION 11 – SERVICE

Service of notice

- 14.25** Further to section 16(2)(b) of the *Health Professions and Occupations Regulation* an order or notice under this Part must be served by registered or electronic mail to
- (a) the intended recipient's address or electronic mail address as shown in a registry, if applicable, or
 - (b) the intended recipient's last known address or electronic mail address, if paragraph (a) does not apply.

DIVISION 12 – NOTICE TO THE PUBLIC

Disclosure of information

- 14.26** If the registrar is of the opinion that it would be in the public interest to do so, the registrar may give notice to the public of
- (a) a decision under section 14.12 denying an application for renewal of a facility's accreditation or renewing a facility's accreditation with limits or conditions,
 - (b) an order made under section 14.20 or 14.22, or
 - (c) a decision in respect of a reconsideration under section 14.23 or review under section 14.24.

DIVISION 13 – TRANSITION**Transition**

- 14.27** (1) In this section, “**certificate confirming compliance**” means, a certificate issued by the registrar before the transition date
- (a) that confirms the named facility’s compliance with standards for deep sedation or general anesthesia, or both, and
 - (b) has not expired as of the transition date.
- (2) Subject to subsection (3), on the transition date,
- (a) a certificate confirming compliance is deemed to be a certificate of accreditation issued to the named facility under section 14.07(5), and
 - (b) the expiry date for the term of accreditation granted to the facility in accordance with section 14.07(6) is the latest of the following dates:
 - (i) the expiry date indicated in the certificate confirming compliance;
 - (ii) March 31, 2027.
- (3) If a facility’s certificate confirming compliance is deemed to be a certificate of accreditation under subsection (2)(a), the facility must, within 60 days after the transition date, make an application for approval of a facility director in accordance with section 14.03(4) and (5).
- (4) Despite subsection (2)(b), section 14.03(1) and (2) applies to a facility that
- (a) fails to make an application as required under subsection (3), or
 - (b) cannot obtain approval of a facility director within 30 days after an application is made.
- (5) For certainty, section 14.15 applies to a facility that is accredited under this section.

PART 15 – HEALTH MONITORING

Definitions

15.01 In this Part,

“**health condition**” includes a physical, cognitive or mental health condition or ailment or an emotional disturbance;

“**health monitoring**” means the accommodations, limits or conditions to which a licensee consents in a health monitoring agreement under section 15.06, including, as applicable, a limit restricting the licensee’s practice of a designated health profession, in whole or in part;

“**health monitoring program**” means the program established and administered by the registrar under section 15.02;

“**health monitoring program officer**” means an employee whom the registrar designates as a health monitoring program officer for the purposes of the health monitoring program.

Health monitoring program

15.02 (1) The registrar may establish and administer a health monitoring program to

- (a) encourage voluntary disclosure of information or records, or both, respecting a health condition that may adversely impact a licensee’s capacity to practise a designated health profession,
- (b) facilitate medical evaluations and health monitoring, on a voluntary basis, of licensees who have a health condition that may adversely impact their capacity to practise a designated health profession, and
- (c) facilitate the continued safe practice of the designated health professions.

(2) The registrar may establish guidelines, policies and procedures for the health monitoring program.

Eligibility for health monitoring

15.03 A licensee is eligible for health monitoring under the health monitoring program if the licensee

- (a) has a health condition that may adversely impact the licensee’s capacity to practise a designated health profession, and
- (b) consents to participate in the health monitoring program.

Sources of information

15.04 A health monitoring program officer may contact a licensee about participating in the health monitoring program based on information from any source, including, without limitation, any of the following:

-
- (a) information self-reported by the licensee;
 - (b) information, opinions and reports from a health-care provider or independent medical assessor;
 - (c) information from a third party, including information obtained from a person or organization that employs or contracts with the licensee;
 - (d) information obtained from a person exercising a power or performing a duty under the Act.

Participation in health monitoring program

15.05 A health monitoring program officer may make the following requests of a licensee who is eligible for health monitoring under section 15.03:

- (a) a request to participate in the health monitoring program;
- (b) a request to disclose information or records, or both, respecting the licensee's health condition;
- (c) a request to undergo a medical evaluation;
- (d) a request to consent to health monitoring.

Health monitoring agreement

- 15.06** (1) If a licensee consents to a request under section 15.05(d), the terms for the health monitoring to which the licensee consents must be set out in a written health monitoring agreement that must be signed by the licensee and a health monitoring program officer.
- (2) A health monitoring agreement under subsection (1) may be amended with the consent of the licensee and a health monitoring program officer.
- (3) Any amendment to a health monitoring agreement under subsection (2) must be in writing and must be signed by the licensee and a health monitoring program officer.

Referral

- 15.07** (1) If a licensee does not consent to a request under section 15.05, a health monitoring program officer may submit information respecting the request and the reasons for the request to the registrar under section 119(a) of the Act.
- (2) If a licensee signs a health monitoring agreement or an amendment of an agreement under section 15.06, but does not comply with the terms the agreement, a health monitoring program officer may submit information respecting the agreement and the licensee's non-compliance to the registrar under section 119(a) of the Act.

Confidentiality

- 15.08** (1) Subject to subsection (2),
- (a) licensee health information collected for the purposes of the health monitoring program must be kept confidential,

- (b) files containing licensee health information collected for the purposes of the health monitoring program must be segregated from other college files, and
 - (c) health monitoring program files may only be accessed by the following:
 - (i) a health monitoring program officer;
 - (ii) an employee who is authorized by a health monitoring program officer to obtain or disclose information with respect to the health monitoring program.
- (2) A health monitoring program officer may disclose information collected for the purposes of the health monitoring program
- (a) when submitting information to the registrar under section 15.07, or
 - (b) with the consent of the licensee, as part of any process or proceeding under the Act or these bylaws.

SCHEDULES

SCHEDULE A – Fees

FEES FOR LICENSING (PART 6)

I DENTAL HYGIENE

- 1. An applicant for a licence in the designated health profession of dental hygiene must pay the following:**
 - (a) for a dental hygienist licence
 - (i) application fee¹\$677
 - (ii) licence fee
 - (A) full year\$551
 - (B) half year²\$321
 - (b) for a temporary licence
 - (i) application fee¹\$87
 - (ii) licence fee\$118
- 2. A dental hygienist licensee applying for renewal of a dental hygienist licence must pay the following renewal fee:\$551**
- 3. A former licensee in the designated health profession of dental hygiene applying for reinstatement under s. 6.25 must pay the following late renewal fee:\$189**
- 4. A former licensee in the designated health profession of dental hygiene applying for reinstatement under s. 6.26 must pay the following reinstatement fee:\$740**

II DENTISTRY

- 1. An applicant for a licence in the designated health profession of dentistry must pay the following:**
 - (a) for a full dentist licence
 - (i) application fee¹\$3,322
 - (ii) licence fee
 - (A) full year\$1,749
 - (B) half year²\$875
 - (b) for a limited (restricted-to-specialty) dentist licence
 - (i) application fee¹\$4,074
 - (ii) licence fee
 - (A) full year\$1,749
 - (B) half year²\$875
 - (c) for a limited (academic) dentist licence
 - (i) application fee¹\$3,322

¹ Application fees specified in this Schedule are non-refundable.

² Half year fees specified in this Schedule only apply to applications for a licence submitted after October 1.

(ii) licence fee	
(A) full year	.....\$875
(B) half year ²	.....\$438
(d) for a dental therapist licence	
(i) application fee ¹	.....\$1,661
(ii) licence fee	
(A) full year	.....\$842
(B) half year ²	.....\$421
(e) for a temporary licence	
(i) application fee ¹	.....\$87
(ii) licence fee	.....\$167
2. A licensee applying for renewal of a licence in the designated health profession of dentistry must pay the following renewal fee:	
(a) for a full dentist licence	..... \$1,749
(b) for a limited (restricted-to-specialty) dentist licence	..... \$1,749
(c) for a limited (academic) dentist licence	.....\$1,749
(d) for a dental therapist licence	....., \$842
3. A former licensee in the designated profession of dentistry applying for reinstatement under s. 6.25 must pay the following late renewal fee:	
(a) for a full dentist licence, a limited (restricted-to-specialty) dentist licence or a limited (academic) dentist licence	.....\$332
(b) for dental therapist licence	..... \$167
4. A former licensee in the designated profession of dentistry applying for reinstatement under s. 6.26 must pay the following reinstatement fee:	
(a) for a full dentist licence or a limited (restricted-to-specialty) dentist licence	
(i) full year	..... \$2,581
(ii) half year ²	.....\$1,706
(b) for a limited (academic) dentist licence	
(i) full year	.....\$1,707
(ii) half year ²	.....\$1,270
(c) for a dental therapist licence	
(i) full year	.....\$1,258
(ii) half year ²	.....\$837

III DENTAL TECHNOLOGY

1. An applicant for a licence in the designated health profession of dental technology must pay the following:

(a) for a dental technician licence	
(i) application fee ¹	.....\$105
(ii) licence fee	
(A) full year	.....\$831

(B) half year ²	\$416
(b) for a temporary licence	
(i) application fee ¹	\$112
(ii) licence fee	\$117
2. A dental technician licensee applying for renewal of a dental technician licence must pay the following renewal fee:	\$831
3. A former licensee in the designated health profession of dental technology applying for reinstatement under s. 6.25 must pay the following late renewal fee:	\$105
4. A former licensee in the designated health profession of dental technology applying for reinstatement under s. 6.26 must pay the following reinstatement fee:	\$936

IV DENTURISM

1. An applicant for a licence in the designated health profession of denturism must pay the following:	
(a) for a full denturist licence	
(i) application fee ¹ for applicants who are	
(A) educated in Canada	\$210
(B) educated outside Canada	\$315
(ii) licence fee	
(A) full year	\$1,714
(B) half year	\$857
(b) for a temporary licence	
(i) application fee ¹	\$87
(ii) licence fee	\$117
2. A licensee applying for renewal of a licence in the designated health profession of denturism must pay the following renewal fee:	
(a) for a full denturist licence	\$1,714
(b) for a limited (grandparented) denturist licence	\$1,714
3. A former licensee in the designated health profession of denturism applying for reinstatement under s. 6.25 must pay the following late renewal fee:	\$210
4. A former licensee in the designated health profession of denturism applying for reinstatement under s. 6.26 must pay the following reinstatement fee:	\$1,924

V TRANSFER BETWEEN CLASSES

A licensee applying to transfer to a different class of licence must pay the following transfer fee:	\$105
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FEES FOR CERTIFICATION OF LICENSEES (PART 7)

1. A full dentist licensee applying for certification as a certified specialist in a recognized specialty must pay the following application fee:\$752
2. A dental hygienist licensee applying for certification for local anesthesia must pay the following application fee:\$105

HEALTH PROFESSION CORPORATION FEES (PART 9)

1. Health profession corporation permit fee \$105
2. Health profession corporation permit renewal fee \$53
3. Health profession corporation name change fee \$53
4. Late renewal fee\$53

ACCREDITATION FEES (PART 14)

I MODERATE SEDATION

1. Accreditation fee\$2,625
2. Accreditation renewal fee \$2,625
3. Accreditation late renewal fee \$105
4. Facility inspection fee\$2,625
5. Facility reinspection fee \$2,625
6. Compliance assessment
 - (a) compliance assessment under ss. 14.05(3) and. 14.16 \$378
 - (b) resubmission of assessment under s. 14.17 \$158

II DEEP SEDATION

1. Accreditation fee\$4,725
2. Accreditation renewal fee \$4,725
3. Accreditation late renewal fee \$105
4. Facility inspection fee\$4,725
5. Facility reinspection fee \$4,725
6. Compliance assessment (under ss. 14.05(3), 14.16 and 14.17)\$210

III GENERAL ANESTHESIA

1. Accreditation fee\$4,725
2. Accreditation renewal fee \$4,725
3. Accreditation late renewal fee \$105
4. Facility inspection fee\$4,725
5. Facility reinspection fee \$4,725

6. Compliance assessment (under ss. 14.05(3), 14.16 and 14.17)\$210
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IV VARYING LIMITS AND CONDITIONS ON ACCREDITATION

Varying limits and conditions on accreditation fee\$158
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ADMINISTRATION FEES

NSF cheque \$60
Licensee letter/certificate of standing \$79

SCHEDULE B – STANDARDS

Ethics Standards and Practice Standards

The ethics standards and practice standards made under sections 70 and 72 of the Act are linked here:

[Standards for the Oral Health Team](#)

Accreditation Standards

The accreditation standards made under section 8 of *Oral Health Professionals Regulation* are linked here:

[Moderate Sedation](#)

[Deep Sedation](#)

[General Anesthesia](#)

SCHEDULE C – Licensing Declarations

1. Declaration for applicants for a practising licence under section 6.02 (a) to (g)

Under section 6.03(1)(a)(v) of the bylaws, an application for a practising licence under section 6.03(1)(a) of the bylaws must be accompanied by the following declaration:

Further to my application to the British Columbia College of Oral Health Professionals for a _____ licence, I solemnly declare the following:

1. I understand that I must remain at all times in compliance with the *Health Professions and Occupations Act*, the regulations under the *Health Professions and Occupations Act*, the BCCOHP bylaws, including the ethics standards and practice standards set out Schedule B of the BCCOHP bylaws.
2. I have the knowledge, skills, ability and judgment necessary to practise ethically, safely and in accordance with all applicable ethics standards and practice standards.
3. I do not know of any reason, condition or circumstance why I should not be granted a licence with the BCCOHP.
4. I will ensure that I maintain professional liability insurance as required by the BCCOHP for the entire period of my registration.
5. I will promptly notify the BCCOHP of any complaint, investigation, review or disciplinary proceeding that may affect my _____ licence or any other licence or registration for the practice of a health profession in British Columbia or any other jurisdiction and will respond promptly to BCCOHP communications and requests for information or records.
6. All information provided in my application for a practising licence is true and complete.
7. I understand that the submission of false or incomplete information in support of an application for a licence constitutes professional misconduct and may result in cancellation of the licence.

I make this solemn declaration, conscientiously believing all the above statements to be true, and knowing that it is of the same force and effect as if made under oath.

Date: _____
(dd/mm/yyyy)

(print full name)

(Signature)

2. Declaration for applicants for a temporary licence

Under sections 6.03(1)(a)(v) and 6.16(1)(a)(ii) of the bylaws, an application for a temporary licence under section 6.16(1)(a) of the bylaws must be accompanied by the following declaration:

Further to my application to the British Columbia College of Oral Health Professionals for a temporary licence in the designated health profession of _____, I solemnly declare the following:

1. I have the knowledge, skills, ability and judgment necessary to practise ethically, safely and in accordance with all applicable ethics standards and practice standards.
2. I do not know of any reason, condition or circumstance why I should not be granted a temporary licence with the BCCOHP.
3. I will ensure that I maintain professional liability insurance as required by the BCCOHP for the entire period of my registration.

-
4. I am applying for temporary licence in the designated health profession of _____ only for the purpose of
 - (a) conducting or participating in education or training relating to the indicated design health profession, or
 - (b) delivering an examination or assessment that is sponsored by an agency approved by the licence committee.
 5. I understand that in British Columbia I may only provide services in the designated health profession of _____ for the purpose described above.
 6. All information provided in my application for a temporary licence is true and complete.
 7. I understand that the submission of false or incomplete information in support of an application for a licence constitutes professional misconduct and may result in cancellation of the licence.

I make this solemn declaration, conscientiously believing all the above statements to be true, and knowing that it is of the same force and effect as if made under oath.

Date: _____
(dd/mm/yyyy)

(print full name)

(Signature)

3. Declaration for applicants for renewal of a practising licence

Under section 6.22(a)(i) of the bylaws, an application for renewal of a practising licence under section 6.22(a) of the bylaws must be accompanied by the following declaration:

Further to my application to the British Columbia College of Oral Health Professionals to renew my _____ licence, I solemnly declare the following:

1. I understand that I must remain at all times in compliance with the *Health Professions and Occupations Act*, the regulations under the *Health Professions and Occupations Act*, the BCCOHP bylaws, including the ethics standards and practice standards set out in Schedule B of the BCCOHP bylaws.
2. I have the knowledge, skills, ability and judgment necessary to practise ethically, safely and in accordance with all applicable ethics standards and practice standards.
3. I do not know of any reason, condition or circumstance why my licence with the BCCOHP should not be renewed.
4. I will ensure that I maintain professional liability insurance as required by the BCCOHP for the entire period of my registration.
5. I will promptly notify the BCCOHP of any complaint, investigation, review or disciplinary proceeding that may affect my _____ licence or any other licence or registration for the practice of a health profession in British Columbia or any other jurisdiction and will respond promptly to BCCOHP communications and requests for information or records.
6. All information provided in my application for renewal of my licence is true and complete.
7. I understand that the submission of false or incomplete information in support of an application for renewal of a licence constitutes professional misconduct and may result in cancellation of the licence.

I make this solemn declaration, conscientiously believing all the above statements to be true, and knowing that it is of the same force and effect as if made under oath.

Date: _____
(dd/mm/yyyy)

(print full name)

(Signature)

4. Declaration for applicants for renewal of a provisional licence

Under section 6.23(1)(a)(i) of the bylaws, an application for renewal of a provisional licence under section 6.23(1) of the bylaws must be accompanied by the following declaration:

Further to my application to the British Columbia College of Oral Health Professionals to renew my provisional licence in the designated health profession of _____, I solemnly declare the following:

1. I understand that I must remain at all times in compliance with the *Health Professions and Occupations Act*, the regulations under the *Health Professions and Occupations Act*, the BCCOHP bylaws, including the ethics standards and practice standards set out in Schedule B of the BCCOHP bylaws.
2. I acknowledged that the purpose of my provisional licence is to enable (please check one box)
 - the licence committee to conduct an equivalency determination of my education or my knowledge, skills abilities and judgment,
 - me to complete examinations, education or upgrading of knowledge, skills and abilities required to meet the applicable eligibility standards, or
 - both.
3. I acknowledge that my provisional licence is subject to the following limits and conditions (please note any limits or conditions imposed on your provisional licence by the licence committee under section 52(2) of the *Health Professions and Occupations Act*)

4. Subject to the above-noted limits and conditions on my provisional licence, if any,
 - (a) I have the knowledge, skills, ability and judgment necessary to practise ethically, safely and in accordance with all applicable ethics standards and practice standards.
 - (b) I do not know of any reason, condition or circumstance why my licence with the BCCOHP should not be renewed.
5. I will ensure that I maintain professional liability insurance as required by the BCCOHP for the entire period of my registration.
6. I will promptly notify the BCCOHP of any complaint, investigation, review or disciplinary proceeding that may affect my provisional licence or any other licence or registration for the practice of a health profession in British Columbia or any other jurisdiction and will respond promptly to BCCOHP communications and requests for information or records.
7. All information provided in my application for renewal of my licence is true and complete.

- 8. I understand that the submission of false or incomplete information in support of an application for renewal of a licence constitutes professional misconduct and may result in cancellation of the licence.

I make this solemn declaration, conscientiously believing all the above statements to be true, and knowing that it is of the same force and effect as if made under oath.

Date: _____
(dd/mm/yyyy)

(print full name)

(Signature)

5. Declaration for applicants for reinstatement of a licence

Under sections 6.25(1)(a)(i) and 6.26(1)(a)(i) of the bylaws, an application for reinstatement of a licence under section 6.25(1)(a) or 6.26(1)(a) of the bylaws must be accompanied by the following declaration:

Further to my application to the British Columbia College of Oral Health Professionals for reinstatement of a _____ licence, I solemnly declare the following:

- 1. I understand that I must remain at all times in compliance with the *Health Professions and Occupations Act*, the regulations under the *Health Professions and Occupations Act*, the BCCOHP bylaws, including the ethics standards and practice standards set out in Schedule B of the BCCOHP bylaws.
- 2. I have the knowledge, skills, ability and judgment necessary to practise ethically, safely and in accordance with all applicable ethics standards and practice standards.
- 3. I do not know of any reason, condition or circumstance why I should not be granted reinstatement of my licence with the BCCOHP.
- 4. I will ensure that I maintain professional liability insurance as required by the BCCOHP for the entire period of my registration.
- 5. I will promptly notify the BCCOHP of any complaint, investigation, review or disciplinary proceeding that may affect my _____ licence or any other licence or registration for the practice of a health profession in British Columbia or any other jurisdiction, and will respond promptly to BCCOHP communications and requests for information or records.
- 6. All information provided in my application for reinstatement of my licence is true and complete.
- 7. I understand that the submission of false or incomplete information in support of an application for reinstatement of a licence constitutes professional misconduct and may result in cancellation of the licence.

I make this solemn declaration, conscientiously believing all the above statements to be true, and knowing that it is of the same force and effect as if made under oath.

Date: _____
(dd/mm/yyyy)

(print full name)

(Signature)

SCHEDULE D – Recognized Education Programs

I DENTAL HYGIENE

1. Recognized Dental Hygiene Education Programs

For the purpose of licensing dental hygiene licensee under section 6.04, the board recognizes the dental hygiene education programs accredited by the [Commission on Dental Accreditation of Canada](#).

2. Recognized Local Anesthesia Certification Programs

For the purpose of certifying dental hygienists to administer local anesthesia under section 7.02, the board recognizes the following

Local Anesthesia Courses:

- | | |
|--|--|
| <ul style="list-style-type: none"> ■ Camosun College – DH Diploma Program LA course ■ College of New Caledonia – DH Diploma Program LA course ■ Vancouver College of Dental Hygiene – Diploma Program LA course | <ul style="list-style-type: none"> ■ Vancouver Community College – DH Diploma Program LA course ■ University of British Columbia, Faculty of Dentistry – DH Degree Program LA course ■ Vancouver Island University – DH Diploma Program LA course |
|--|--|

BC Continuing Education Local Anesthesia Courses:

- | | |
|--|---|
| <ul style="list-style-type: none"> ■ Camosun College – Continuing Education LA course ■ UBC – Continuing Education LA course ■ Vancouver Island University – Continuing Education LA course | <ul style="list-style-type: none"> ■ College of New Caledonia – Continuing Education LA course ■ Vancouver College of Dental Hygiene – Continuing Education LA course |
|--|---|

II DENTISTRY

1. Recognized General Dentistry Education Programs

For the purpose of licensing full dentist licensees under section 6.05, the board recognizes general dentistry education programs accredited by the following organizations:

Canada

[Commission on Dental Accreditation of Canada](#)

Jurisdictions outside Canada

[CODA Accredited Dental Programs \(US and international\)](#)

[Australian Dental Programs \(as of March 31, 2010\)](#)

[New Zealand Dental Program \(as of December 14, 2011\)](#)

[Irish Dental Programs \(as of December 5, 2012\)](#)

2. Recognized Specialty Education Programs

For the purposes of licensing limited (restricted-to-specialty) dentist licensees under section 6.06 and certifying full dentist licensees as certified specialists under section 7.03, the board recognizes specialty education programs accredited by the following organizations:

Canada

[Commission on Dental Accreditation of Canada](#)

Jurisdictions outside Canada

[CODA Accredited Dental Programs \(US and international\)](#)

[Australian Dental Programs \(as of March 31, 2010\)](#)

[New Zealand Dental Program \(as of December 14, 2011\)](#)

[Irish Dental Programs \(as of December 5, 2012\)](#)

3. Recognized Dental Therapy Programs

For the purpose of licensing dental therapist licensees under section 6.08, the board recognizes the following dental therapy program:

[University of Saskatchewan College of Dentistry –B.Sc. in Dental Therapy](#)

III DENTAL TECHNOLOGY

Recognized Dental Technician Education Programs

For the purpose of licensing dental technician licensees under section 6.09, the board recognizes the following dental technician education programs:

- | | |
|--|---|
| ■ Vancouver Community College – Dental Technology Sciences Program | ■ CDI College – Dental Technician diploma program |
| ■ Northern Alberta Institute of Technology – Dental Technology Program | ■ Technical Vocational High School - Dental Technology and Medical Preparation Course |
| ■ George Brown College – Dental Technology Program | ■ College Edouard-Montpetit – Techniques de prothèses dentaires |

IV DENTURISM

Recognized Denturist Education Programs

For the purpose of licensing full denturist licensees under section 6.10, the board recognizes the following dental technician education programs:

- | | |
|---|--|
| ■ George Brown College – Denturism Technology – Program | ■ Northern Alberta Institute of Denturist Technology Program |
|---|--|

SCHEDULE E – Equivalency Evaluation Organizations

Education Evaluation Organizations

For the purposes of section 6.01, the education evaluation organizations for each of the designated health professions are:

Dental Hygiene

[Federation of Dental Hygiene Regulators of Canada – Equivalency Assessment](#)

Dentistry

[National Dental Examining Board Equivalency Process \(NDECC\)](#)

Dental Technology

[Canadian Alliance of Dental Technology Regulators \(CADTR\) – Credential Evaluation Services](#)

Denturism

[International Credential Evaluation Service – BCIT \(ICES\)](#)

Recognition of Education Evaluation Organizations

If an education evaluation organization specified above for a designated health profession cannot or will not provide the registrar with a report under section 6.13,³ the licence committee may recognize any one of the organizations designated by Immigration, Refugees and Citizenship Canada for the purpose of conducting education credential assessments, including:

Comparative Education Service – University of Toronto School of Continuing Studies

International Credential Assessment Service of Canada (ICAS)

International Credential Evaluation Service – BCIT (ICES)

International Qualifications Assessment Service (IQAS)

World Education Services (WES)

³ For example, the NDECC does not currently evaluate the substantial equivalence of dental therapy education programs.

SCHEDULE F – Dental Therapist Services

A dental therapist licensee must provide all dental therapist services in accordance with section 8.04 of the bylaws.

1. Level 1 Services

A dental therapist licensee may provide the following services as a matter of routine.

- (a) Examinations and Radiography
 - (i) limited oral examination, including periodontal probing;
 - (ii) expose, develop, mount and read dental radiographs to aid in the diagnosis of hard and soft tissue lesions.
- (b) General and Restorative including caries, trauma and pain control
 - (i) intraoral assistance including oral evacuation/suctioning;
 - (ii) application of topical anesthetic;
 - (iii) administration of local anesthetic;
 - (iv) rubber dam clamp and rubber dam placement;
 - (v) dental impression making;
 - (vi) application and adjustment of pit and fissure sealants;
 - (vii) percussion and temperature sensitivity testing to determine pulp vitality;
 - (viii) finishing and polishing of existing restorations.
- (c) Hygiene
 - (i) provision of oral hygiene instruction;
 - (ii) provision of coronal polishing;
 - (iii) provision of fluoride treatment;
 - (iv) scaling.
- (d) Orthodontics
 - (i) application and removal of materials to alleviate irritation;
 - (ii) removal of excess adhesive material using appropriate hand instruments, or ultrasonic or rotary instruments, following banding/bonding or debanding/debonding procedures;
 - (iii) instruction in the care and maintenance of orthodontic appliances.

2. Level 2 Services

A dental therapist licensee may only provide the following Level 2 Services on an emergency basis (or in accordance with the requirement for Level 3 services), and after providing Level 2 services, must discuss the treatment with a full dentist licensee or limited (restricted-to-specialty) dentist licensee to determine what, if any, follow-up is required.

- (a) Endodontics

- (i) pulpotomy – limited to primary teeth only;
- (ii) pulpotomy for emergency treatment only – permanent teeth;
- (iii) pulp capping.
- (b) Restorative
 - (i) amalgam and/or composite restoration;
 - (ii) placement of retentive pins;
 - (iii) placement of stainless steel/prefabricated crowns;
 - (iv) removal of temporary and permanent cements;
 - (v) placement and removal of gingival retraction cord.
- (c) Oral Surgery
 - (i) erupted teeth – simple extractions (periodontally involved permanent dentition with favourable root anatomy, bone and intact crown in a healthy adult or primary dentition with favourable root anatomy in a healthy child);
 - (ii) residual roots, erupted;
 - (iii) suture placement;
 - (iv) suture removal.

3. Level 3 Services

A dental therapist licensee may only provide the following Level 3 Services after treatment planning with a full dentist licensee or limited (restricted-to-specialty) dentist licensee:

- (a) soft tissue drainage using an explorer or curette;
- (b) recementation of a permanent crown – where crown and tooth are sound;
- (c) removing orthodontic bands and bonded attachments using appropriate hand instruments;
- (d) surgical extraction of erupted tooth on emergency basis to relieve pain.

SCHEDULE G – Denturism Internship Portfolio

INTERNSHIP PORTFOLIO REQUIREMENTS

1. All items required to be submitted under sections 2, 3, 6, 7 and 9 must be submitted to the registrar or to such other person as the registrar may direct.

Internship portfolio requirements

2. Before beginning the internship portfolio required under section 6.10(b) of the bylaws, a person who intends to apply for a full denturist licence must submit
 - (a) a prospective self-assessment, in the form and manner ordered by the registrar, that includes statements
 - (i) evaluating the potential applicant's perceived strengths and weaknesses, and
 - (ii) identifying the potential applicant's learning objectives and projected skill-set development during completion of the internship portfolio, and
 - (b) a mentor contract as described in section 7.
3. To complete an internship portfolio, a person who intends to apply for a full denturist licence must
 - (a) submit records or information, or both, confirming that, after completing the requirements established in section 2, the person has
 - (i) for a minimum of 900 hours, engaged in the practice of denturism as permitted under section 10.10 of the bylaws, and
 - (ii) during the practice of denturism under paragraph (i), completed
 - (A) a case assessment described in section 4 for each patient on whom the student registrant performed an aspect of practice in accordance with section 10.10 of the bylaws, and
 - (B) each of the technical requirements listed in section 5,
 - (b) after engaging in the practice of denturism for a minimum of 900 hours under subsection (a)(i) and completing all requirements under subsection (a)(ii), submit a retrospective self-assessment, in the form and manner ordered by the registrar, that includes statements
 - (i) re-evaluating the person's perceived strengths and weaknesses, and
 - (ii) explaining whether and how the person has met the learning objectives and skill set development identified under section 2(b)(ii), and
 - (c) submit an original transcript or other records or information confirming the person's graduation from one of the recognized denturist education programs specified in Schedule D of the bylaws.
4. All case assessments completed for the purposes of section 3(a)(ii)(A), must be in accordance with criteria established by the licence committee and include the following:
 - (a) a treatment plan;
 - (b) a copy of the patient's complete treatment record;
 - (c) progress reports;

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- (d) a final report on achievement.
5. A person who intends to apply for a full denturist licence must complete all of the following technical requirements under section 3(a)(ii):
- (a) fabricate
 - (i) 3 complete upper and lower dentures,
 - (ii) 3 single complete dentures, opposing natural dentition,
 - (iii) one immediate denture,
 - (iv) 2 free-end partial dentures, and
 - (v) one tooth-borne partial denture;
 - (b) perform
 - (i) 4 processed relines or rebases,
 - (ii) one denture or processed reline with soft liner,
 - (iii) 5 repairs (which must include at least one midline fracture, one tooth replacement and one clasp replacement), and
 - (iv) 2 denture installations over implants (one of which must be performed on a patient, as opposed to a model);
 - (c) assist in the management of a clinic, including preparation of dental plans, inventory control, accounting, patient recall and scheduling.
6. At the time of making submissions under section 3, person who intends to apply for a full denturist licence may also submit any other information that the person believes should be considered in the assessment of the person's internship portfolio.

Mentor Requirements

7. A mentor contract submitted under section 7 must be
- (a) submitted in the form and manner ordered by the registrar, and
 - (b) signed by a full denturist licensee who
 - (i) is in good standing.
 - (ii) has practiced as a full denturist licensee, or equivalent, for a minimum of three years,
 - (iii) promises to fulfill the requirements of a mentor described in the mentor contract and under sections 8 and 9, and
 - (iv) at the time of signing, has not signed a mentor contract in support of another person who is or will be completing an internship portfolio in support of an application for full denturist licence.
8. A full denturist licensee who meets the requirements under section 7(b) and who signs a mentor contract becomes the mentor of the person named in the contract who intends to apply for a full denturist licence.
9. Within 30 days of a person who intends to apply for a full denturist licence having submitted both the required evidence under section 3(a) and the required self-assessment under section 3(b), the person's mentor must submit a mentor assessment, in the form and manner ordered by the registrar, that

- (a) describes
 - (i) the efforts made by the person to meet the learning objectives and projected skill-set development identified by the person in the self- assessment submitted under section 2(c),
 - (ii) the quality of service provided by the person during the person's practice of denturism under section 3(a)(i), and
 - (iii) the character, professional conduct and patient communication skills of the person, and
 - (b) includes the mentor's assessment of the person's fitness to engage in the practice of denturism.
10. At the time of submitting a mentor assessment under section 9, a mentor may also submit any other information that the mentor believes should be considered in the assessment of the internship portfolio of the person in support of whom the mentor has signed a mentor contract.

SCHEDULE H – Remuneration of Board Members and Committee Members

Board remuneration

Time	Rate
Daily maximum rate	\$1,295
Half day rate (3.5 hours)	\$647.50
Hourly rate	\$185

Board reimbursement for travel and business expenses

Expense	Rate
Accommodation (for required travel greater than 50 km each way)	Best available rate as per government preferred hotel rates or negotiated BCCOHP corporate rates
Meals (Alcoholic beverages not reimbursed)	Breakfast \$30 (including tax and gratuities) Lunch \$35 (including tax and gratuities) Dinner \$55 (including tax and gratuities)
Air travel	Best available rate equivalent to Air Canada Flex
Mileage	\$0.74 per km
Ground transportation (incl. ferry)	Reimbursement based on submitted receipts
Parking	Reimbursement based on submitted receipts

Committee remuneration

Time	Rate
Daily maximum rate	\$750
Half day rate (2 to 4 hours)	\$375
Hourly rate (under 2 hours)	\$90

Committee reimbursement for travel and business expenses

Expense	Rate
Accommodation (for required travel greater than 50 km each way)	Best available rate as per government preferred hotel rates or negotiated BCCOHP corporate rates
Meals (Alcoholic beverages not reimbursed)	Breakfast \$30 (including tax and gratuities) Lunch \$35 (including tax and gratuities) Dinner \$55 (including tax and gratuities)
Air travel	Best available rate equivalent to Air Canada Flex
Mileage	\$0.74 per km
Ground transportation (incl. ferry)	Reimbursement based on submitted receipts
Parking	Reimbursement based on submitted receipts

SCHEDULE I – Investigations Expenses

INVESTIGATION EXPENSES

Definition

1. In this schedule, “**respondent**” includes a person who is investigated under Division 3 of Part 8 of the Act.

Investigation commencement and conclusion

2. For the purposes of calculating investigation expenses, an investigation
 - (a) commences on, as applicable,
 - (i) the date the registrar makes a regulatory complaint under section 119 of the Act,
 - (ii) the date a person submits a regulatory complaint to the registrar under section 120 of the Act, or
 - (iii) the date the investigation committee begins an investigation under section 124 of the Act, and
 - (b) concludes on the date the registrar makes an order under section 273.

Recoverable investigation expenses

3. Subject to section 273 of the Act, an order for investigation expenses may require a respondent to pay one or more of the following:
 - (a) expenses incurred for the purposes of the investigation, including expenses incurred for the purpose of an inspection of premises under section 131 of the Act;
 - (b) remuneration, fees and expenses incurred for legal representation for the purposes of the investigation, including disbursements incurred by legal counsel;
 - (c) remuneration, fees and expenses of a licensee who conducts a competence assessment;
 - (d) remuneration, fees and expenses incurred for any other professional services used for the purposes of the investigation.

Determining the amount of investigation expenses

4.
 - (1) If the investigation committee directs the registrar to make an order for investigation expenses, it must direct the registrar on what expenses to include in the order and in determining the amount of those expenses.
 - (2) Subject to section 273 of the Act, in determining the amount of the investigation expenses to include in an order for investigation expenses, the investigation committee or registrar, as applicable, may consider one or more of the following:
 - (a) the scope and seriousness of the matters under investigation,
 - (b) the scope and complexity of the investigation,
 - (c) the scope and complexity of the investigation of matters that are disposed of in a manner giving rise to an order for investigation expenses relative to the scope and complexity of the investigation of any matters dismissed by order of the registrar,

- (d) the timely cooperation of the respondent with the investigation, including an order of the registrar or an investigator, and
- (e) the respondent's disciplinary record.

Disbursement rates

5. For the purposes of section 3, the following expenses will be calculated using the following rates:
- (a) photocopies, facsimile transmissions or scans: \$0.25 per page;
 - (b) travel by automobile \$0.55 per kilometre.