ONTARIO REGULATION 167/11

made under the

DENTAL HYGIENE ACT, 1991

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Amending O. Reg. 218/94

(General)

Note: Ontario Regulation 218/94 has previously been amended. For the legislative history of the Regulation, see the Table of Consolidated Regulations – Detailed Legislative History at www.e-Laws.gov.on.ca.

1. Part VI of Ontario Regulation 218/94 is revoked and the following substituted:

PART VI
QUALITY ASSURANCE

GENERAL

16. In this Part,
"assessor" means a person appointed under section 81 of the Health Professions Procedural Code;
"Committee" means the Quality Assurance Committee required by subsection 10 (1) of the Health Professions Procedural Code and includes a panel of that Committee;
"program" means the quality assurance program required by section 80 of the Health Professions Procedural Code;
"stratified random sampling" means a sampling where groups of members are,
(a) removed from the pool of members to be sampled, or
(b) weighted to increase or decrease the likelihood of their being selected.

17. (1) The Committee shall administer the program.
(2) The program shall include the following components:
1. Continuing education or professional development designed to,
i. promote continuing competence and quality improvement among the members,

ii. address changes to practice environments, and

iii. incorporate standards of practice, advances in technology, changes made to entry to practice competencies and other relevant issues in the discretion of the Council.

2. Self, peer and practice assessments.

3. A mechanism for the College to monitor members' participation in and compliance with the program.

(3) All members shall participate in the program.

18. (1) A panel of the Committee shall be composed of at least three persons, at least one of whom shall be a member of the Council appointed by the Lieutenant Governor in Council.

(2) Two members of a panel of the Committee constitute a quorum if at least one of the two members is a member of the Council appointed by the Lieutenant Governor in Council.

SELF-ASSESSMENT, CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT

19. (1) Each year, members shall participate in self-assessment, continuing education and professional development activities in order to maintain the knowledge, skills and judgment required to practise the profession in accordance with the standards of practice and ethics set by the College.

(2) Members shall keep records of their participation in self-assessment, continuing education and professional development activities in the form and manner approved by the Committee and for the period of time specified by the Committee.

(3) At the request of the Committee, an assessor or an employee of the College, a member shall provide to the Committee accurate information about the member's participation in self-assessment, continuing education and professional development activities and the member's records described in subsection (2).

PEER AND PRACTICE ASSESSMENT

20. (1) Each year, the Committee shall select members to undergo a peer and practice assessment in order to assess the members' knowledge, skills and judgment.

(2) A member may be selected by the Committee to undergo a peer and practice assessment,

(a) at random, including by stratified random sampling;

(b) if a request is made under subsection 19 (3) and the member does not provide accurate information or the member's records do not demonstrate that the
member has engaged in adequate self-assessment, continuing education or professional development activities; or

(c) on the basis of criteria specified by the Committee and published on the College's website at least three months before the member is selected on the basis of that criteria.

(3) A peer and practice assessment shall be carried out by an assessor.

(4) A peer and practice assessment may include but is not limited to the following:

1. Reviewing the member's records required by subsection 19 (2).
2. Inspecting the premises where the member practises.
3. Inspecting the member's records of the care of patients.
4. Requiring the member to provide information in respect of the care of patients or in respect of the records of the care of patients.
5. Conferring with the member about the member's practice.
6. Using an evaluation tool designed to help assess the member's knowledge, skills and judgment, if requested by the Committee.

(5) The assessor shall prepare a written report about a peer and practice assessment and shall provide the report to the Committee.

(6) If, after considering the assessor's report and any other relevant information, the Committee is of the opinion that the member's knowledge, skills or judgment are not satisfactory, the Committee shall provide to the member,

(a) notice of the Committee's opinion;
(b) a copy of the assessor's report;
(c) notice of the member's right to make written submissions to the Committee within 14 days of receiving notice of the Committee's opinion or within such longer time period as may be specified by the Committee; and
(d) any other relevant information the Committee used to form its opinion.

(7) After receiving notice of the Committee's opinion under subsection (6), the member shall have 14 days or such longer time period as may be specified by the Committee to make written submissions to the Committee.

(8) If, after considering any written submissions made by the member, the Committee is still of the opinion that the member's knowledge, skills or judgment are not satisfactory, the Committee may exercise any of the powers listed in section 80.2 of the Health Professions Procedural Code.

(9) Regardless of whether the Committee provides notice of its opinion to the member under subsection (6), the Committee shall advise the member of the results of the peer and practice assessment.
2. This Regulation comes into force on the day it is filed.

Made by:

COUNCIL OF COLLEGE OF DENTAL HYGIENISTS OF ONTARIO:

LINDA JAMIESON

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Date made: March 30, 2011.