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MANITOBA
DENTAL
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Bulletin

In this issue:

- President's Message - Page 4
- Alumni of Distinction Award - Dr. Barry Rayter - Page 3
- Registrar's Column - Farewell to a Colleague- Page 6
- Michael Loyd Retirement - Page 8
- CDA Report - Update on Activities - Page 10
- MDA Board Update - Page 14
- Faculty Corner: Working Harder, Working Smarter - Page 16
- CDSPI Article: Summer Safety Tips- Page 19
- Guys and Dolls Musical - Page 23

Dr. Barry Rayter
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DR. AMARJIT RIHAL
PRESIDENT, MDA

President's Message...

As I write this it appears that Spring/Summer has finally arrived! With the sunny weather come the signs of new beginnings and, for the graduating classes of Dentistry and Dental Hygiene, the excitement of the start to their chosen professions. On May 30, I hosted the Graduation breakfast on behalf of the Manitoba Dental Association at the Victoria Inn. Congratulations to all the new graduates and a big welcome to the profession and community.

The mentorship program has been in effect since 1997 and currently is co-chaired by Dr. Cory Sul and myself with the help of the MDA's Director of Public and Member Relations, Mrs. Linda Berg. The current program involves all four years of dental students being paired with volunteer mentors from our practicing community. On behalf of the Manitoba Dental Association, thank you for volunteering your time to mentor our future leaders. On a national level our mentorship program is highly regarded and we often are approached to share the recipe of our success from our colleagues. As a result, Manitoba hosted the first ever National Mentorship Summit on June 1st at the Inn at the Forks, Winnipeg. In attendance were delegates from most of the provinces who are currently running mentorship programs or are looking to develop similar programs. The full day event was a great success and I would personally like to thank our keynote speakers Dr. Dieter Schonwetter, Dr. Doug Brothwell, Dr. Marcel Van Woensel, Dr. Saha Goolcharan, and Dr. Dennis Carrington for their insight and contribution. We as coordinators of the mentorship program realize the value of strong mentorship and look forward to participating in future mentorship summits.

On June 8th the Manitoba Dental Association participated in Kid Fest at the Forks. Thanks to all the MDA staff and volunteer dentists, dental hygienists and dental as-

sistants for making this day a true success. The weather held up and dental screening for close to 200 children was accomplished. The value of this day raises our image with the public and creates awareness for parents, about the importance of oral health for their children.

In April I had the pleasure of co-hosting the Dentistry Leadership Forum (DLF) with the then CDA President, Dr. Robert Sutherland. The DLF is a great venue for the CDA to showcase their national programs and allows the opportunity for all jurisdictions to contribute their opinions and ask questions on dental issues and topics. Some of the CDA initiatives that were debated were the CDAnet strategies, CSI eReferral program, the Seal of Recognition Program, and the JCDA OASIS program. The Canadian Dental Association's prime directives are to create a strong profession, a united community, and a healthy public which is clearly reflected in these initiatives. As a participant in this forum, I got a sense that the entire country is moving in unison for the betterment of dentistry.

On the same day in April, I also, attended the CDA Annual Awards Luncheon. There were some important Manitobans that were honored for their contributions to dentistry. Dr. Collin Dawes was honored with the Distinguished Service Award for 2012 by the CDA. Angelika Fletcher, Manager of Siloam Mission's Saul Sair Health Centre, received an Oral Health Promotion Award for 2012 from the CDA for Siloam Mission's work in providing free dental care for men and women experiencing homelessness in Winnipeg. The highlight of the weekend was the president's installation dinner when Dr. Peter Doig became the President of the CDA. Dr. Doig has always represented Manitoba well as Manitoba's voice on the CDA board. As president, Dr. Doig will continue to make Manitoba proud as he leads the country. Congratulations Peter! **Continued on page 5...**

Continued from page 4....

On May 12 the final performance of the all-dentist musical *Guys and Dolls* came to a close. The amazing talent in our community helped raise \$28,973.17 in support of the Prairie Theatre Exchange and \$ 11,056.02 for the Cancer Care Manitoba Foundation. On opening night, there was a touching tribute for the late Dr. Harvey Spiegel who passed away on March 26, 2012. The grueling rehearsals for the cast of 18 paid off and I think the entire team raised the bar on the level of their performances. Great job!

I would like to pay tribute to Dr. Robert Glenn who passed away on May 1, 2013. During his memorial service it was nice to see former students, faculty members and family paying their respects to such a well respected gentleman.

I was fortunate enough to have Dr. Glenn as a clinical instructor during my time at the faculty and I can say that his passion for dentistry was instilled in many, if not all, of his students. He helped develop and maintain the standard of excellence at the faculty and he will be missed by all.

As I close my message I would like to wish you all a great summer, and if there is anything you would like to speak to me about, please do not hesitate to call me.

Regards,

Dr. Amarjit Rihal DMD
President

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DR. MARCEL VAN WOENSEL
REGISTRAR, MDA

Registrar's Column...

If your primary purpose for doing something is to make money, really not much will distinguish you from non-professionals now is there

Robert David Glenn

I knew Dr. Glenn as a farmer, dentist and teacher. With similar rural backgrounds, I relied on him for guidance through the challenges of dental school and my first years of practice. He was one of the first people to know of my decision to apply to law school.

As a dentist, it was well recognized in the profession that he had a mastery of clinical skill few could match. Yet his dentistry never appeared to be simply a technical task. His focus was on helping people for which the clinical procedure was just one aspect.

He was always a teacher and later in his career turned from private practice to farming and teaching. While serious and disciplined, he tolerated our ignorance and naivety with patience and thoughtfulness. He expected us to be professionals and lead by example in his personal conduct. His role was as much about demonstrating the meaning of being a true professional as it was about teaching good clinical dentistry.

Dr. Glenn understood a significant responsibility of being a professional was being a role model and mentor. In that aspect, he influenced a generation of dentists in this Province and throughout the country. Selfless with his time, respectful of patients, colleagues and students; Dr. Glenn had that elusive human quality - grace.

In confronting difficult decisions - often where my personal interests may be in conflict - I still rely on how I think Dr. Glenn would approach the issue to determine my path. His ability and generosity were a standard for the profession.

In our profession, there are many with the same generosity of heart and time - Barry Rayter, Jack Braun, Chris Cottick and Jean Bodnar immediately come to mind. As an aspect of your professional careers, I would encourage all our members to look for and commit to opportunities that will make our community better - to be a part of something bigger. Creating positive changes in the lives of others is a way to change the world.

We need more Bob Glenns.

Dr. Robert David Glenn passed away on the 1st of May 2013.

Rest in Peace, Dr. Glenn.

Marcel Van Woensel
Registrar, Manitoba Dental Association

COMMERCIAL LEASE RENEWAL DO'S & DON'TS FOR DENTAL TENANTS

In leasing, dental tenants don't get what they deserve – they get what they negotiate! Since 1993, I have been helping dentists and other commercial tenants learn the *Do's & Don'ts of Negotiating Commercial Leases and Renewals*. Here are a few tips:

Create competition for your tenancy. Negotiate on multiple locations simultaneously – especially with lease renewals, even if you don't want to move. Create options and play one landlord against another. Share with each landlord that you are receiving other proposals. The Lease Coach makes the landlord earn your tenancy or re-earn your renewal.

Start the planning and site selection process well in-advance. For existing practices and lease renewals, begin 12 months in-advance. This allows for ample time for negotiating, completing paperwork, searching for alternate sites (if necessary) and accounting for Murphy's Law.

Keep your success quiet. Landlords often attempt to raise rental rates due to a dental tenant's success. With profiting in a particular location, you likely will not want to move even if you can afford the rental increase. Some agents and landlords will take advantage of dentists knowing how expensive it can be to move and set up a new practice.

Talk to other tenants. For lease renewals, talk with other tenants in the building who have recently renewed leases. Ask how these renegotiations went and what the landlord was willing to agree to in terms of rental rates and further tenant incentives.

Negotiate for lease renewal incentives. For some reason, dental tenants neglect, or are simply fearful of negotiating for lease renewal incentives. If your lease is expiring, ask yourself what inducements (eg: free rent/tenant allowances) would the landlord give to a new dentist just coming into the property. As a proven tenant, you should be eligible to receive the same – or better – incentives. The Lease Coach often gets free rent and tenant allowances on their lease renewals.

Don't have false optimism. When dentists tell me their practice isn't doing well, but they want to renew their lease anyway, this is false optimism. Unless you change location or something else about the way you practice, you should not realistically expect your next five years to be better than your first five years. Moving can be difficult, frightening, time-intensive and expensive; however, sometimes, this is absolutely necessary.

Don't accept an inappropriate lease length. For dentists, an initial 10-year lease term is typical. When renewing, do not automatically sign for that same or similar time frame without considering your own future. Will you sell your practice or retire? Don't get locked into a long-term lease renewal unnecessarily.

Don't settle for your same rental payment. Achieving a rent reduction on your lease renewal is a very real possibility. If your landlord is leasing space to new tenants at less than what you are currently paying, a rent reduction for you should be achievable. If your current rental rate is artificially high because of your last tenant allowance, a rent reduction on your renewal term could also be in order. Again, talk with other tenants who have recently renewed or moved in to see how much they are paying.

Don't allow the landlord to retain your deposit. If you have paid the landlord a deposit, ask for this back upon your lease renewal date. You have proven yourself as a responsible tenant over your initial term. Why should your landlord keep this money? The Lease Coach is frequently successful in negotiating for a dentist's deposit to be returned with a lease renewal.

Brokers ... Friend or Foe? Real estate agents and brokers typically work for the landlord who is paying their commission. It is not normally the agent's role to get the tenant the best deal – it is their job to get the landlord the highest rent, the biggest deposit, etc. The higher the rent you pay, the more commission the agent earns. If you are researching multiple properties, try to deal directly with the

listing agent for each property, rather than letting one agent show you around or show you another agent's listing. Your tenancy is more desirable to the listing agent if he can avoid commission-splitting with other agents.

Don't disregard your Operating Costs. Having your lease and/or operating costs audited is an effective way to keep your landlord and property manager accountable. Frequently, dental tenants pay inflated Common Area Maintenance (CAM) because of padded or miscalculated operating costs. Often, it can be advantageous for groups of tenants sharing the same property to unify for an operating cost audit.

Don't exercise options. Even though you have a renewal option term, you may not want to exercise it – especially if the renewal term's rental rate automatically increases or can't decrease. If you are certain that your landlord wants you to stay and market rates (the "going rate" in your neighbourhood) have softened, you may want to negotiate the renewal from scratch.

For a complimentary copy of my CD, *Leasing Do's & Don'ts for Dental Tenants*, please e-mail DaleWillerton@TheLeaseCoach.com.

Dale Willerton is The Lease Coach, author of "Negotiate Your Dental Office Lease or Renewal" and a recognized public speaker throughout North America. Got a leasing question? Need help with a new lease or renewal? Call 1-800-738-9202, e-mail DaleWillerton@TheLeaseCoach.com or visit www.TheLeaseCoach.com and/or www.HelpULeaseDental.com.



FAREWELL FROM MICHAEL LOYD - MDA'S HEALTH ECONOMIC CONSULTANT

The timing of retirement is a difficult decision when you still like what you do, but I have decided that now is the time to retire from consulting and to focus on other interests and hobbies that have been crowded out by professional activities over the years. There is much I will miss, especially working with colleagues at the MDA and the Economics Committee. For over 18 years, I have been fortunate to work with two forward-thinking and principled CEOs, Rafi Mohammed and Ross McIntyre, both of whom strongly supported the economic program, favoured information-based decision-making, and created a very positive environment in which to work. Along with past and present Boards and Committees, they have successfully advanced the economic and other objectives of the Manitoba Dental Association with the highest standards of integrity and service to the profession and the public. I would also like to acknowledge the leadership and support of Drs. Murray White and Barry Rayter, the first-rate chairs of the Economics Committee during my tenure. Their hard work and thoughtful insights, as well as those of other members of the Committee, have been crucial to the successes of MDA's economics program. Finally, I wish to thank, for their indispensable contributions, the members who participated regularly in our surveys and offered feedback.

In 1995, general members were expressing serious concerns about the economics of practice in Manitoba and MDA leaders were looking for a new direction after years of negative growth in service volumes, fee guide increases below the rate of inflation, an unpopular policy that artificially repressed diagnostic and preventive fees in the guides, erosion in CPI-adjusted net incomes, and the lowness of MDA fee guides compared to those elsewhere in the country. The current

economic state of dental practice in Manitoba is, by contrast, strong, as measured by objective indicators and as reflected in recent surveys which sought dentists' opinions about important aspects of their economic situations. Of course, there were many factors involved in producing this improvement in the economics of Manitoba dentistry including a conducive economy and consumers' reprioritization of dental services within their budgets.

For me, working with dentistry has been enjoyable because of the challenge to learn new things, to think critically and creatively to address issues that are relevant to the strength of the profession which, ultimately, translates to the profession's ability to achieve and maintain excellence in service provision. But economics doesn't have to be all serious and dry. There have been lots of colourful conversations and jokes (Barry) along the way. And I appreciate the friendships that have developed over the years. It is rewarding when working relationships can foster personal friendships.

It has been a privilege to be associated with the MDA and its people, and I am grateful for the opportunity to work with the profession over this major portion of my consulting career.



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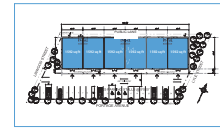
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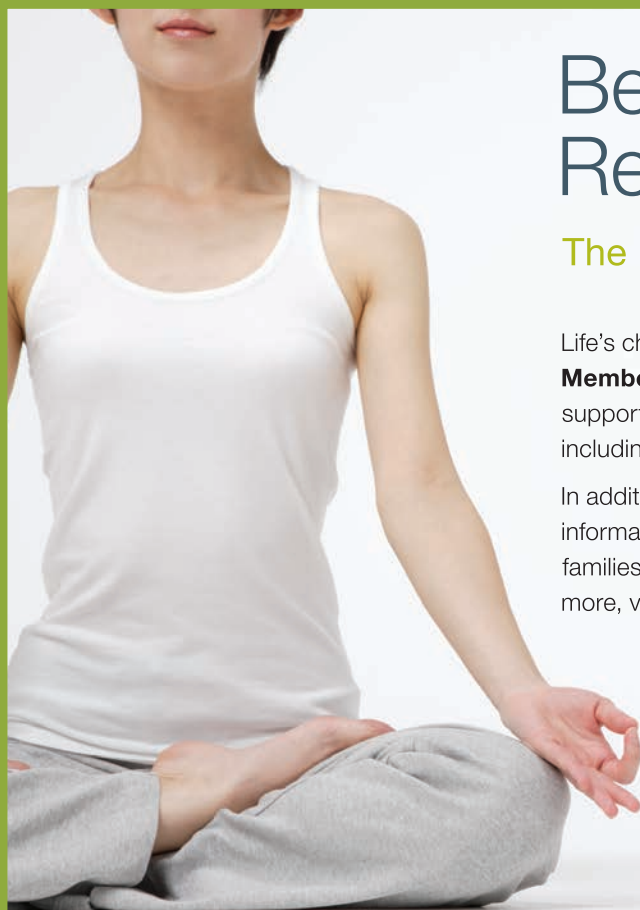
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DR. ALEXANDER MUTCHMOR
BOARD OF DIRECTORS, CDA



CANADIAN DENTAL ASSOCIATION

Hello again! I hope you all are enjoying the transition into our wonderful, lazy days of summer. However, you can rest assured that they are not lazy days at the CDA.

In April, our own Dr. Peter Doig was installed as the 94th President of the CDA. It has been evident that we here in Manitoba can be very proud of Dr. Doig and the job that he is doing, and that the bar will have been raised a little higher for those who follow.

Here is a list of some of the activities of the CDA for April and May:

On April 5, the NIHB Technical Working Group, which twice a year brings together CDA, Health Canada, Assembly of First Nations and Inuit Tapiriit Kanatami, met to discuss the NIHB dental program and how to improve it for First Nations Canadians. Items of discussion included:

- The program's centralization process, meaning that all pre-determinations and claim processing will be administered in Ottawa with hopes that the turnaround time for processing NIHB requests will be 10 days.
- The continuation of the endodontic trial, and the possibility that predetermination on molar endodontics may be waived.
- CDA's lobbying efforts for long term stable funding for this program during Days on the Hill have resulted in an annual 5% escalator in the federal budget. This means that the NIHB program will receive a based funding every year without the program needing Cabinet approval.

In early May the CDA was pleased to partner with the ODA for their annual spring meeting. It was a memorable event that saw record attendance and provided an opportunity for our colleagues to pursue continuing education and be exposed to the newest offerings by the dental industry. The convention was also the venue for a host of other meetings and truly

brought the dental family together for education, interaction, fun and fellowship.

On May 8-9, Drs. Peter Doig, Gary MacDonald, Tom Raddall, Louis Dubé, Peter Neilson, Phil Poon and Christopher Robinson, supported by CDA staff, conducted the annual 'CDA Days on the Hill'. Dr. Doig had a meeting with Prime Minister Stephen Harper and opposition party leaders Thomas Mulcair and Justin Trudeau. A representative of the Assembly of First Nations (AFN) joined the CDA delegation for a series of meetings with Members of Parliament and Senators from the different political parties. The issues raised on behalf of the profession were First Nations Oral Health Care, Access to Care for Seniors and Veterans, Oral Health Research, Drug Shortages and CDA's participation in a mentoring program with Afghan dentists.

These are just a few of the CDA's activities in the past two months. A complete list would also include meetings with or presentations to: the Canadian Paediatric Society, the Department of National Defence Dental Corps Senate, the Canadian Life and Health Insurance Association, the Dental Industry Association of Canada Grey Market Summit, the Association of Prosthodontists of Canada, the Dental Corporation of Canada, the Health Industry Electronic Commerce, the Canadian Association of Oral and Maxillofacial Surgeons, the Alberta Dental Association and College Council, and the Ontario Dental Association General Council.

While you enjoy your summer, we'll keep busy, and I'll report again in the fall.

DISTINGUISHED CAREER CELEBRATED

DR. COLIN DAWES HONOURED BY

CANADIAN DENTAL ASSOCIATION



One of the longest serving, most successful and well-recognized professors at the University of Manitoba's Faculty of Dentistry has received one of the premier awards in Canadian oral health. Dr. Colin Dawes BSc, BDS (Manc), PhD (Durh), has been named a recipient of the Distinguished Service Award for 2012 by the Canadian Dental Association.

The Distinguished Service Award recognizes outstanding contributions to the dental profession, the dental community and oral health of Canadians along with outstanding service over a number of years.

Dr. Dawes was presented with the award at the CDA Annual General Meeting, at the Fairmont Chateau Laurier Hotel in Ottawa, on April 19, 2013. Dr. Dawes, who has spent almost his entire career at the University of Manitoba's Faculty of Dentistry, said "It's extremely rare that this type of award is given for research, so this is quite an honour, indeed."

For nearly 50 years, Dr. Dawes has been a leading research scientist within the Department of Oral Biology. He has conducted much-heralded research that has earned the attention and admiration of the profession throughout the world, and he has given invited lectures in 27 different countries.

In particular, his work in the realm of salivary research has brought the University of Manitoba international renown and earned him several awards.

Dr. Dawes secured degrees in physiology and dentistry from Manchester University before earning his PhD at the University of Durham. He joined the Faculty in 1964 following a two-year post-doctoral fellowship at the Harvard School of Dental Medicine. He has since gone on to enjoy a long and illustrious career as one of the most celebrated researchers in his field. In addition, he was Editor of the Journal of Dental Research from 1983-93.

"Dr. Dawes is a shining example of consistent excellence at the Faculty, a role model for all students, scientists and academics to follow," said Dr. Anthony Iacopino, Dean of Dentistry. "Dr. Dawes has indeed had a long and distinguished research career and has transformed the landscape in salivary research for all who follow. He is one of the top internationally-recognized people in the history of the Oral Biology Department at the University of Manitoba. We are proud to be linked with his name and reputation."

Continued on page 12.....

Continued from page 11...

Dr. Dawes joined the Faculty of Dentistry in 1964 as one of the founding professors in the newly created Oral Biology Department. This in itself was landmark as the University of Manitoba was the first to create and launch a department solely focused on oral biology as a separate and dedicated discipline, one that has since been followed by many other dental schools around the world.

And while many of his early departmental colleagues would leave Canada to pursue their careers at other institutions, Dr. Dawes chose to remain at the U of M.

“We liked living in Winnipeg. It was a good place to raise a family,” explained Dr. Dawes, who was born and raised in Nelson, Lancashire, a small but picturesque community in the north of England. “I had a lab and all the equipment I needed right here, so the only thing holding me back was myself, which is a nice situation to be in.”

In addition to authoring over 220 research publications, Dr. Dawes is also an editor of, and contributor to, *Saliva and Oral Health*, a university text book that is now into its fourth edition.

His influential body of work culminated in 2005 with the Salivary Research Group of the International Association for Dental Research (IADR) presenting Dr. Dawes with the Salivary Researcher of the Year Award, recognizing his many years of dedication and expertise in the field. That same year, Dr. Dawes was named Prof. Emeritus at the University of Manitoba.

Since then, Dr. Dawes has remained a fixture at the Faculty, a highly respected and well-regarded academic who maintains an active interest and presence in departmental research activities. And today, just shy of the incredible milestone of 50 years' service at the University of Manitoba, he continues on with some collaborative research and has been invited, in August of this year, to present a CE course on saliva in Brisbane, Australia.

“I also spend quite a bit of time reviewing manuscripts from many different journals,” he said. “I enjoy keeping up with the literature.”

In 2006, Dr. Dawes kindly consented to join the editorial board of the *Alumni-Faculty Bulletin*, where he serves as Senior Copy Editor and Chief Editorial Advisor. His keen eye for detail and remarkable grasp of English language and grammar continues to serve the Faculty and its constituents well by ensuring that the highest possible academic and journalistic standards are well maintained.

His reputation as a skilled academic and scientist is matched only by the high regard held for him by his peers and colleagues for his kind demeanor, gentle good nature and razor sharp wit.

The Faculty of Dentistry family wishes to offer most sincere congratulations to Dr. Colin Dawes on this wonderful achievement and his remarkable career.



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MANITOBA DENTAL ASSOCIATION

BOARD MEETING SYNOPSIS - JANUARY 23 , 2013

MDA Board Elections: The MDA Board 2012-2013 election results: District 3 – Dr. Michael Cuthbert elected by acclamation, District 1 – Dr. Carla Cohn and Dr. Catherine Dale elected and Dental Assistant Representative – Ms. Londa Thiessen elected by acclamation. Elected member term of office is two years.

Financial Audited Statement: The MDA realized an overall surplus of \$6,175.00. It was also noted that the Annual Meeting and Convention in 2012 realized deficit (\$39,980) and the Dental Assistant registration process realized a deficit of (\$47,347). The auditing firm of Magnus CA was appointed auditors for 2013-2014.

Office Assessments: Two voluntary office audits have been completed. The audit reports have not yet been completed. The office assessment process requires a significant amount of work and members will continually have to be educated. A series of templates has been developed as a guide for the office assessment auditor. All office assessments will now incorporate, where required, a sedation audit as per the MDA pharmacological bylaw. The MDA bylaw has established certain requirements that members must fulfill as part of both the office assessment and sedation audit.

Pharmacological Behavior Management: The MDA Board decided to review the Pharmacological Behavior Management Bylaw which was approved by members in 2009. Requests have been made by members to review and address certain issues. The Board approved the development and new terms of reference the Pharmacological Behavior Management Adhoc Committee to look at the identified issues.

Dental Care for Residents of LTC Institutions: Two strategic planning sessions were held, November 26, 2012 and January 15, 2013 to look at how best to deliver oral care to residents in long term care facilities in Manitoba. The

planning sessions involved stakeholders who have a bonafide interest in the health of long term care residents. They include Alzheimer's Society, MB Health, Faculty of Dentistry, Speech and Hearing, Diabetes, Denturists, long term care institutions and Dental Hygienists. An independent facilitator, Heather Erhard, led the group in defining a mission statement and developing goals and objectives in five key areas: Human Resources, Funding, Promotion/Awareness, Advocacy and Guidelines and Standards.

NDEB Report: The MDA Board reviewed the summary of the NDEB 2012 Annual Meeting. The NDEB equivalency process had 1125 registrants in 2012 with only 126 completing the full process. An additional 76 were accepted into qualifying or degree completion programs of Canadian Faculties of Dentistry. A new initiative is to replace the written format of OSCI with a digital format. Dr. Amarjit Rihal, MDA NDEB representative, has been appointed by the NDEB to represent them on the Commission of Dental Accreditation of Canada Board.

Manitoba Health Agreement: MDA Board accepted the Manitoba Health Agreement for the cost of medical services provided by licensed dentists that are insured under the Manitoba Health Services Insurance Plan. The agreement is retroactive to April 1, 2011 with a four year term ending March 31, 2015. Rate increases will be processed effective April 1, 2013 (6.4%) and April 1, 2014 (4.2%) and other special considerations as provided in the agreement. A separate fund has been established as part of the agreement for the Director of Cleft/Lip and Palate Plan. The Manitoba Dental Association will be the trustees of the fund to ensure the Director of Cleft/Lip and Palate Plan will be paid as per the agreement.

Fairness Commissioner: In April 2013, the MDA will be going through a review of its registration and licensing processes for dentists and dental

assistants by the Office of the Fairness Commissioner. The MDA website is being remapped to ensure ease of navigation to find registration and licensing information. Secondly, data for the 2012 licensing year for graduates of non-accredited programs (dentist & dental assistants) have been submitted to the Fairness Commissioner. Because of the small number of individuals reported, the MDA has expressed its desire to ensure processes are in place to maintain the confidentiality of the information collected and submitted.

CDSPI: Delegates Lyle Best, Chair, Susan Armstrong, President and CEO and Dr. Jeff Williams, Vice President provided the following highlights to the MDA board; very good year in terms of investments and insurance services; 10% reduction in malpractice premiums in 2012; cellulization of triple guard and long term life disability and life insurance products in Barbados; retiree benefits plan for dentists being developed; Manitoba uptake in CDSPI products above the national average i.e. student malpractice insurance @ 89% and investment products @18%; in 2013 CDSPI will focus on student programs (Canadian Dental Student Federation and Mentorship Programs); and Manitoba Dental Association continues to be a great supporter of CDSPI.

CDA Report: Delegate Dr. Robert Sutherland, President, provided the following highlights to the MDA Board; CDA has great representatives from Manitoba on various committees and the CDA Board: Dental Specialists relationship with the CDA being addressed; Academic relationship established through the Association of Faculties of Dentistry of Canada; regulatory relations with the Canadian Dental Regulations Authorities Federation going very well; meetings being held with Canadian Medical

Continued on page 21.....

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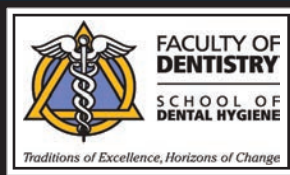


Guys & Dolls a HUGE Success! See story on page 23

Faculty Corner



DR. ANTHONY IACOPINO
DEAN OF DENTISTRY
UNIVERSITY OF MANITOBA



Working Harder, Working Smarter

FACULTY INTERNAL REVIEW IMPROVES COLLECTIVE EXPERIENCE

It is a busy world that we live in these days. For all of you engaged in running your practice and immersed in your careers, this hardly comes as a news flash. We are all acutely and keenly aware of the many demands placed on our time, energy and resources each and every day we set off from our homes and families to take on the great wide world out there.

And we are equally aware that there are times that it can be quite a grind. Hardly a day goes by it seems that there isn't something that arises to try your patience, that takes you out of your comfort zone, that becomes a distraction that takes you away from seemingly more important and pressing matters.

These sometimes turbulent times are all part of the process; the other side of the pendulum swing that comes with forging a career in the sometimes prickly realm of being a health care service provider.

It is as unique as it is exclusive. To put it more plainly, it comes with the territory. Oral health professionals occupy a very distinctive space in our world today. This is especially true here in Canada where our service model is an often curious blend of the private and public sectors, a reality that offers more than its share of grey areas; those without a clear road map to follow.

By and large, practitioners have been able to navigate these sometimes rocky hills and successfully sort out the many challenges that come our way on a daily basis. Yet we are always reminded – on a daily basis it sometimes seems – that these challenges will always appear and that there are times where we must do something extraordinary to see the issues resolved.

This is precisely the place we now find ourselves here at the Faculty of Dentistry. As many of you may be aware, we are in the early stages of our new five-year plan; one that is dedicated to improving the experience for all of our key stakeholders – students, staff, our patients and the practicing professionals in our province today.

We have come to realize that the time has arrived where we must take a good long look at what we do and how we do it if we are to continue to be as effective as we hope and know we can be. For many years now, we have moved along in much the same fashion as we always have. Not that there is anything wrong with that; our systems and processes have served us well through the years, resulting in the development of highly trained, well-motivated professionals who have served our society well throughout the course of their long and often distinguished careers.

What we are experiencing now, however, is a confluence of events and circumstance that compel us to look at new and better ways to do what we do. For starters, the nature and size of our student body has changed, in many ways significantly so. The needs and expectations of our undergraduate cohort have changed dramatically through the years.

That has been matched by the changing needs of our patients and our academic curriculum. As we broaden our academic offerings and specialties we are seeing more and more patients presenting with far more challenging and interesting cases.

So too has been the change in our technology. We now have instrumentation and equipment within the institution that could only have been dreamed of only a short time ago. As I predicted upon my arrival to the Faculty just six short years ago, this is a most exciting time to be going out into the dental profession. During the next few years, there will be more changes, more knowledge, and more new technologies than in the entire history of the profession.

And so it has come to pass. The sands of time have begun to shift and, in so doing have moved the ground beneath us. This in turn has compelled us to rethink our approach, the way we do things, how we teach, how we interact with each other on a daily basis.

Continued on page 17...

To that end, the Faculty of Dentistry has been immersed in our Outstanding Workplace Initiative; a collective effort involving every single facet of the institution in a bid to make us even better than we were before.

For the last several months, the Faculty has been actively engaged in a series of measures designed to improve who we are, what we do and how we do it. We have held several professional development sessions with our entire staff and will be continuing on with smaller group workshops at the middle management level and on the front lines. This has been backed by a wholesale upgrade to many of our facilities and infrastructure to bring us up to speed in this rapidly changing environment.

The ultimate goal is to streamline our systems, improve our efficiencies and harmonize operations to deliver the most effective experience possible for all of our key stakeholder groups.

We embark on this path knowing we must. We understand that if we wish to remain relevant and an important part of our profession, it is imperative that we lead the way in the creation of positive and modern educational and workplace environment.

And, only a few short months into this process, our approach is showing results. Our student experience is improving, as evidenced by consistently impressive results by our senior students in the national board exams and improving ratings on our satisfaction surveys.

Our facilities continue to improve in the most tangible ways, such as the new Jones Young Student Lounge. We are continuing to incorporate the newest and most modern technology at all levels of the institution. We are working closely with all staff to improve our overall workplace environment.

I invite you to visit the Faculty in the weeks and months ahead, or better still, to join our team of academic instructors, to see, first-hand how we are moving ahead for the benefit of the common good.

I am completely confident that you will be impressed with what you find; that we are working harder, that we are working smarter, with you in mind, to ensure our Faculty of Dentistry remains a place of which we can all be proud, for today, for tomorrow, and forever.

Grazie,

Anthony Iacopino, DMD, PhD,
Dean of Dentistry, University of Manitoba

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12-457 05/13



SUMMER SAFETY TIPS

Whether you are vacationing close to home or travelling abroad this spring and summer, keep the following safety tips in mind.

Research the Safety of Your Travel Destination

When choosing a travel destination, review the Government of Canada's official advice regarding travel to that country, or specific regions of that country. The federal government may issue travel warnings due to events such as terrorism, civil unrest or natural disasters in a country.

Travelling to an area which has an advisory against travelling could jeopardize your safety and affect your travel insurance trip cancellation or trip interruption benefits. To obtain the latest travel reports and warnings for destinations you may be considering, go to www.travel.gc.ca.

Obtain Emergency Medical Insurance

Traffic accidents are the leading cause of death for international travellers, according to the Government of Canada.¹ Minor accidents can also be costly if you require emergency medical treatment when travelling abroad or even within Canada, if you are outside your home province. That's why the Canadian government recommends that you purchase the best travel insurance you can afford in order to avoid high medical expenses.² With an annual travel plan, such as Travel Edge Insurance (www.cdspi.com/travel), you pay one low annual premium to obtain emergency medical coverage for an unlimited number of trips in the year.

If you plan to drive while on vacation, some countries require that you have an International Driving Permit to drive or rent a car. You can apply for and obtain the permit through the Canadian Automobile Association

(www.caa.ca) before leaving home. The permit is valid for one year.

Deter Theft While You are Away from Home

When you're driving a rental car on vacation, discourage theft by keeping valuables hidden and your luggage locked in the trunk. If items are stolen, your homeowner's policy typically covers the possessions that you temporarily remove from your home, such as items you bring with you on vacation. You may be able to file an insurance claim for the loss through your homeowner's policy.

While it may be tempting to share photos instantly through social media websites and apps during your vacation, there's a risk you may notify burglars that your home is unoccupied. So wait until you return home before uploading your vacation photos.

Stay Safe at the Cottage

Whether your vacation cottage is only used by family members, or is rented out to others, it's wise to have adequate contents and liability insurance to manage potential risks, such as fires and accidents.

Most insurance companies will insure cottages under the same policy that the home is insured. The contents portion of your cottage insurance provides coverage up to a specified limit, so if you add or upgrade items, update your contents coverage. If you have watercraft (whether permanently at the cottage or not) keep in mind that most policies have a coverage and horsepower limit for watercraft.

Generally, the liability coverage you have through your cottage insurance extends to the watercraft you own. However, coverage exclusions may apply depending on the boat and its

use. Check with your insurance advisor.

You can top up all your personal liability policies (home, auto, boat, cottage etc.) that have \$1-million coverage or more with Personal Umbrella Liability Insurance (www.cdspi.com/umbrella) to protect yourself against large lawsuits from third parties. This additional liability protection ranges from \$3-million to \$5-million and costs about 60 cents a day or less.

¹ Source: <http://travel.gc.ca/travelling/health-safety/travel-health-notices/winter-travel>

² Source: http://www.voyage.gc.ca/faq/insurance_assurance-eng.asp

Susan Roberts is Vice-President, Insurance Advisory Services and Deputy Principal Broker at CDSPI Advisory Services Inc.

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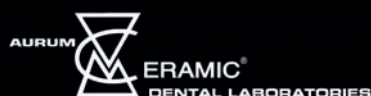
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Continued from page 14...

Association, Canadian Pharmacists Association and Dental Industry of Canada to develop better relationships; priority one projects continue to progress (Oasis, Access to Care and Trust & Value Working Group); CDA managing issues related to CDAnet usage iTrans claim submissions and Health Industry Association of Canada protocol; e-Referral project using iTrans is presently being beta tested; CDA Seal of Recognition program continues to have value for consumers; and CDA is assisting with the continued development and management of the Canadian Federation of Dental Students.

Dr. Sutherland also outlined some of the future goals and needs of the CDA; FDI working towards a phasing down of amalgam usage but not a complete ban; CDA working group developed to review the impact that mid level providers have on the delivery of dental care; Ipos Reid comparative research on public's trust and value of dentists; development of code of ethics and patient's bill of rights; days on the hill to meet with federal politicians.

Manitoba Dental Foundation: Stakeholders involved in the creation of the Foundation includes; the Winnipeg Dental Society, University of Manitoba Dental Alumni Association, Western Manitoba Dental Society, Northern Manitoba Dental Society and Manitoba Dental Association.

Scotia Bank Private Client Group and the legal firm of Tupper Cuddy are providing guidance and expertise to the working group. The three main purposes of the Foundation are access to care, education and research and benevolent. Options to administer the Foundation are: use another existing foundation, use financial institutions and self administer. Initial meeting entailed an overview of the legal requirements and process to start a foundation.

Dean's Update: Dr. A. Iacopino provided the MDA Board with the following update on the activities of the

Faculty of Dentistry: Faculty is doing well financially; monies are being spent on a new student lounge, classroom updates and clinical upgrades for support staff; student issues being addressed in the area of student rights, moving away from traditional teaching environment and preparation of students for private practice; Dean's Community Council providing sound advice to the Dean in matters relating to clinical education, patient treatment and role of clinical instructors; and alumni support and engagement continues to grow. The Dean also reported that the University of Manitoba is moving to a healthcare science based campus at the Health Science Centre. The merging of healthcare faculties into one is being considered for the fall of 2014. Under this scenario the Faculty of Dentistry will be renamed the College of Dentistry. MDA Board members expressed concerns about the faculty losing some independence and identity within this new structure.

Lifetime Achievement Award: The MDA approved the development of a lifetime achievement award. Recipients will be automatically inducted into the MDA Hall of Fame.

Healthy Smile/Happy Child: The Healthy Smile/Happy Child committee is re-examining its logic model consisting of community development, knowledge delivery and research/evaluation. "Lift The Lip" resource will be reviewed by the MDA's Communication Committee to see if it can be incorporated into the pre-school oral health curriculum project. Similarly, the "Pearly White Program" delivered at Children's Hospital will be evaluated by the Communication Committee with the possibility at providing some level of support. Healthy Smile/Happy Child committee is making a greater effort to build awareness of the community dental treatment centres amongst community health workers.

Mentorship Program: The MDA Board acknowledged the hard work and commitment to the program by Ms. L. Berg and Dr. C. Sul and Dr. A. Rihal. The program has been

restructured to allow for a separate mentorship program for each year of dentistry with a head mentor in each year. The program topics are always being adapted to ensure currency of topics. A Facebook page for has been developed for the program and is being used by students and mentors. Ongoing discussions with Faculty of Dentistry to incorporate aspects of mentorship program into their practice management course.

The MDA is also hosting the first ever National Mentorship Summit scheduled on June 1, 2013 at the Forks Inn, Winnipeg. Invitations have been sent to all provinces to participate in Summit.

Communications Committee: Three areas of the program: internal, external and special events. The success of the communication strategy has been the integration of all three components. Other activities include the development of a fluoride strategy to influence politicians on the importance of fluoridated public drinking water; the development of the patient communication guide for dentists; Winnipeg Free Press insert on oral health during National Oral Health Month; and the development of a new public service commercial on brushing and flossing. The CDA Trust and Value Working Group is incorporating some aspects of the MDA marketing and communications strategy.

Board Nominations and Appointments: Following were elected by the MDA Board for the 2013-2014 year:
President, Dr. Amarjit Rihal;
Vice-President, Dr. Michael Sullivan.

The following were appointed by the MDA Board for the 2013-2014 year:
Registrar, Dr. Marcel Van Woensel;
Secretary/Treasurer, Rafi Mohammed.

If you have any questions, relating to the MDA Board Meeting synopsis, please contact MDA President, Dr. Amarjit Rihal or the MDA Executive Director, Rafi Mohammed.

MDA DIRECTORY AMENDMENTS

For changes to the MDA Directory please contact:
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NOTE: It is important for all dentists and dental assistants to provide written notice of any changes to your mailing address, your licensure status or plans to move to a different province.

With over 2,000 members, it is no longer practical to make changes with simply a phone call. A written notice ensures your intention is clear, appropriately recorded and retained in your file.



The Classified Ads have been discontinued.
The following information can now be found on the MDA website:

[Dentists Seeking Opportunities \[Members Section\]](#)
[Associate Opportunities \[Public & Members Section\]](#)
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[Practices for Sale \[Members Section\]](#)

You will have to log in to the members site using the same ID & Password that you use to check your CE record

Curtain Falls on 2nd All-Dentist Musical *Guys and Dolls: A Success Story*

"When you meet a gent paying all kinds of rent, For a flat that could flatten the Taj Mahal... Call it sad, call it funny, But it's better than even money, That the guys only doing it for some doll!"

The audience held its breath as the last musical notes from the last musical number faded.

Then a sudden eruption of thunderous applause reverberated through the main stage at Prairie Theatre Exchange as the curtain came down on the final performance of the all-dentist musical, *Guys and Dolls*. Theatre-goers cheered and whistled their appreciation of an inspired performance with a standing ovation.

"Audience members had rave reviews," says Dr. Tricia Magsino-Barnabe, who was cast in the role of the quirky nightclub singer, Adelaide. "Complete strangers approached me to share how much they enjoyed the show. They were surprised by the talent of the entire cast!"

"Judging by the standing ovations the cast received, I would say that the

audiences really enjoyed the performances," says Haanita Seval, Director of Marketing at Prairie Theatre Exchange. "One sponsor actually said, 'They raised the bar this year!'"

The four performances of *Guys and Dolls* were the culmination of eight months of planning, hard work and tough rehearsals. Although many of the cast members had previous musical theatre experience, most others did not. The learning curve was steep, but members of the production team were impressed by the sense of purpose displayed by the all-dentist cast.

"The dentists...er... performers, took ownership of the play and really invested themselves into their parts," says well-known Winnipeg choreographer Brenda Gorlick. "The entire squadron of dentists were a treat to work with - open, generous, hardworking and above all tons of fun!"

The feelings of respect and admiration for a job well done, were mutual.

Our director, choreographer, assistant choreographer and musical director were

a dedicated and extremely talented team that 'created us' to perform our roles in *Guys and Dolls*," says Dr. Cecilia Dong. "It was a once in a lifetime experience and I am happy to have had such wonderful cast members."

One of the highlights of the four-show run was the Gala Night performance - a tribute to the late Dr. Harvey Spiegel, a valued dental colleague and a performer in *Little Shop of Horrors*, the first all-dentist musical that was produced in 2011.

"Harvey had never been in a musical production before but I thought he could carry it off successfully because he was an excellent dancer and singer," says Harvey's wife, Deanne Spiegel. "He rehearsed his lines in every spare minute he had."

"We paid tribute (to Harvey) by raising money for Head and Neck Cancer patients," says Dr. Magsino-Barnabe. The warmth and generosity of spirit displayed during the Gala Night tribute moved Mrs. Spiegel, and many in the audience, to tears. "Dr. Dhali Dhaliwal (President and CEO of CancerCare Manitoba) and Ms. Annitta Stenning (Executive

Director, CancerCare Manitoba Foundation) gave heartfelt speeches of gratitude."

The performances of *Guys and Dolls* were also intended as a fundraiser for Prairie Theatre Exchange in support of the arts. But there was more to it than that. It was an effort by the dentists to recognize the unqualified and generous support PTE management and staff have given so freely to the Manitoba Dental Association's musical theatre projects.

"Not only were there hard-working dentists on the stage," says PTE's Seval. "There were hard-working dentists behind the scenes, securing sponsorships, selling program advertising, getting goods donated and drumming up ticket sales, so this was a very successful fundraiser."

The *Guys and Dolls* production raised \$28,973.17 in support of Prairie Theatre Exchange and \$11,056.02 for the CancerCare Manitoba Foundation.

By Ted Preston

IN MEMORIAM DR. ROBERT GLENN 1917- 2013

Bob Glenn, 96, longtime resident of River Heights, passed away on May 1, 2013. Beloved husband of the late Jean (1992); father of Judy, Kim, Marcia and David; proud grandfather of Lyndsey and Alex, Allison, Lia and Ellie and Kristal and Amy. Bob moved to Winnipeg at a young age, growing up in the Brooklands area. He worked as a dental technician for many years including as a Corpsman in the Royal Canadian Navy. He graduated from the University of Toronto, Faculty of Dentistry in 1950, and after several years of practicing in Souris, moved to Winnipeg.

Bob practiced dentistry in downtown Winnipeg and taught at the University of Manitoba, Faculty of Dentistry. He served as President of the Manitoba Dental Association and he was elected to the International College of Dentists.

Bob's hobbies included rebuilding and flying a single engine airplane in which he spent many hours flying locally and on distant trips. Upon retiring from active practice, he spent summers on his grain farm near Cardale, Manitoba. During the winter, Bob returned to the staff at the University of Manitoba, Faculty of Dentistry and also worked in northern Manitoba and rural communities.

Bob passed away peacefully after a brief stay at Deer Lodge Centre. Gifts made in Bob's memory may be directed to the Dr. Robert D. Glenn Trust in Dentistry care of Donor Relations, Room 179 Extended Education, Wpg, MB R3T 2N2

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Sposob, Tomasz
Szmadyła, Robin
Wilson, Neil
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Congratulations to the Graduating 2013 Intra-Oral Dental Assistants

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Lisa Lambert on winning the
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*Tec Voc High School Graduate
Nicole Bonnenfant on winning
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Academic Achievement Award*

*University College of the North Graduate
Maria Neufeld on winning the Manitoba
Dental Association Academic Award & the
Manitoba Dental Association Clinical Award.*

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SHALEEN CHASTELLAIN
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TOOTH FAIRY SATURDAY JUNE 8, 2013

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