ACDH
Alberta College of Dental Hygienists

Complaint Resolution Agreement

Made under the Authority of section 55(2)(a.1) of the *Health Professions Act*

Between:

Registrant
(the "Investigated Person")

And

Alberta College of Dental Hygienists
(the "ACDH" or "College")

A Complaint Resolution Agreement was entered into between the Investigated Person and the College, in March 2025.

The particulars of the Investigated Person's unprofessional conduct arise from the results of an inspection of a dental hygiene clinic by ACDH and Alberta Health Services, wherein multiple concerns relating to infection prevention control ("IPC") were discovered, including:

- Deficiencies relating to medical device reprocessing ("MDR") protocols and procedures;
- Inadequate use of Personal Protective Equipment ("PPE");
- Inadequate safety and risk management; and,
- Documentation deficiencies.

An investigation revealed that the Investigated Person did not possess the requisite knowledge in MDR and was not complying with IPC requirements as required by the Safety and Risk Management Standard of Practice ("SOP"). The Investigated Person also did not report or address the IPC concerns they had, including those related to PPE.

In order to resolve the Complaint, the Investigated Person:

- Completed the current course on Medical Device Reprocessing in Dental Health Care Setting at their own cost and provided evidence of completion to the Complaints Director.

- Read and reviewed the ACDH Code of Ethics on Accountability, and the SOPs on Duty to Report, Professional Accountability and Safety and Risk Management, including all documents referenced in the Safety and Risk Management SOP.

- Submitted a written reflection paper, which was approved by the Complaints Director, outlining:
    - the relevant provisions of the SOPs and Code of Ethics;
    - the importance of knowing, understanding and adhering to a Manufacturer's Instructions for Use when utilizing equipment in practice;
    - the significance of the Duty to Report as it relates to public safety;
    - the potential harm that could have resulted from the identified IPC and MDR deficiencies; and,
    - how they would be able to prove that the instruments used were sterile if a patient reported that they became infected with a communicable disease when treated by the Investigated Person at a past appointment.