

Charlotte Athena Wilford, RDA, CAE
Box 12 Carman MB, R0G 0J0
athenawilford@gmail.com
Cel: 204-362-2592

Date: July 23, 2025

Dr. Arun Misra,
Manitoba Dental Association
202-1735 Corydon Ave.
Winnipeg, MB
R3N 0K4

RE: Opposition to Modified Bylaw for Delegation of Duties to Non-Regulated Personal

Dear Dr. Misra,

On behalf of several Manitoba Dental Assisting Educators, I would like to provide you with written documentation from educators of RDA's regarding concerns on the Modified bylaw for delegation of office trained dental auxiliary.

In terms of the protection of the public and the protection of the restricted skills of registered dental assistants, the office trained dental auxiliary should be eliminated from the proposed MDA bylaw. Public safety being the forefront of all self-regulated professions; they would be best served if the office trained auxiliary was not responsible for some of the key elements of patient safety. The office trained auxiliary falls under no oversight what-so-ever, with no tracking mechanism of who the non-regulated personnel are and where they are working.... The profession needs to regulate them. This is made clear in the first statement of the 2025 draft section 2 first point, "Office trained auxiliaries are not licensed and cannot perform any restricted activities" but some of the restricted duties of the RDA have been removed and will now be within the scope of the OTDA. The fifth point in section 2 of the OTDA states that there is "no comprehensive list of activities" and that assigned duties are to the discretion of the dentist.

How does the MDA demonstrate to the general public that they have the public interest at heart if there is no formal oversight of non-registered personnel performing duties with no formal training?

The specific concerns are as follows:

Section 2, #5 – Office trained dental auxiliaries may perform extra oral procedure not involving a patient interaction

- Instrument Sharpening
RDA's are not trained in this skill and this really is in the realm of the DH.

- Radiographic Processing and Radiographic Mounting
Processing must be specific to analog film processing only; mounting must be removed from the scope. OTDA's have no training in anatomy, have not captured the image and therefore have no reference as to how to mount the film.
- Dental Equipment Maintenance and Treatment Operatory Infection Prevention and Control; Instrument Reprocessing; and Preparing a Treatment Operatory for Patient Care
The document states "any individual performing infection prevention and control procedures in a health setting including operatory set up, instrument reprocessing and sharps disposal should receive explicit training". How does the MDA propose to ascertain that training has taken place, and that the training meets a specific set of standards? RDA's are formally trained and are required to demonstrate infection control continuing education every three-year cycle.... but an OTDA requires NO formal training and NO continuing education to do the same work.

Schedule B Chairside Assisting for an Office Trained Dental Auxiliary

3 & 4. Assist in dental dam placement and removal not involving manipulation of the clasp

This statement needs to be extended to include clarification that the OTDA is not permitted to secure the dam over the teeth, floss or place ligatures.

5. Assist with soft tissue retraction

OTDA's have no training in anatomy, therefore have no reference as to how to safely retract soft tissue

6. Assist with light curing unit for restorative procedure

The MDAA has expressed concern that the office trained auxiliary is permitted to operate a light cure unit in the oral cavity, thus performing an intra-oral skill which is a breach of the RDA's Level 1 formal education.

7. Suction during a dental procedure with low and high-volume suction

There is expressed concern that the office trained dental auxiliary is permitted to remove fluids from the oral cavity, thus performing an intra-oral skill which is a breach of the RDA's Level 1 formal education.

Schedule C – Extra Oral Activities Involving a Patient for an Office Trained Dental Auxiliary

2. Instruct in Oral Hygiene

OTDA's have no formal training in oral hygiene instruction and instruction is based on data gathered through dental history, oral observations and assessments, current practices and the development of an individualized plan. Thus, performing a skill which is a breach of the RDA's Level 1 formal education.

3. Record information produced by an RDA, RDH, Dentist

Are RDA's, and DH's now acting in a supervisory role when working with an OTDA?

In conclusion, I urge the MDA to understand how hard dental assisting students' study, train, and worry about exam outcomes, and how these proposed changes mark this as a time where the MDA is moving backwards to remove all RDA standards, goals and achievements.

As public trust and safety being the forefront of all self-regulated professions, the office trained dental auxiliary should be eliminated from the proposed MDA bylaw, to ensure that only formally trained and licensed professionals perform restricted activities.

Thank you for your time and consideration.

Respectfully,

Charlotte Athena Wilford, RDA, CAE

A handwritten signature in cursive script that reads "Charlotte Wilford".

o/b/o Manitoba Dental Assisting Educators.

Charlene Howe, RDA, TFL

Michelle Hannesson, RDA, CAE

Janet Neduzak, RDA, CAE

Sina Allegro-Sacco, RDA

Uliana Kapy, RDA, CACE

Michaela Kissova-Bouska, RDA, CACE

Dawn Dumontent, RDA

Heather Brownlee, MDAA