

Guidelines: Conduct for the Prevention of Sexual Abuse

Introduction

The College of Denturists (the "**College**") is committed to preventing sexual abuse by Registered Denturists.

To that end, the College is committed to providing denturists with information and resources to assist them in treating their clients responsibly, consistent with the *Regulated Health Professions Act* (the "**RHPA**"), and in a manner that reflects the profession's commitment to respecting the personal dignity of every individual who is entrusted to their care. The College recognizes the seriousness and extent of injury that sexual abuse causes.

The provision of healthcare services must never involve sexually abusing patients. That is why all health professions regulated under the RHPA have zero tolerance for the sexual abuse of patients. Zero tolerance means that all of the health regulatory colleges, including the College, have policies and standards of practice in place to prevent the sexual abuse of patients and procedures in place to investigate all complaints of sexual abuse and to discipline health professionals who sexually abuse patients.

The College has a zero-tolerance policy for any form of abuse – verbal, physical, emotional or sexual – of clients by denturists. Sexual abuse by denturists while providing oral health care will not be tolerated under any circumstances.

The RHPA mandates the development of a sexual abuse prevention plan. The College is committed to preventing abuse through education of its members, clients of denturists and the public generally. To that end, the College provides denturists with information and resources to assist them in treating their clients responsibly, consistent with the RHPA, and in a manner that reflects the profession's commitment to respecting the personal dignity of every individual who is entrusted to their care. **Like other healthcare colleges in Ontario, the College has a policy of zero tolerance for sexual abuse of clients.** The College recognizes the seriousness and extent of injury that sexual abuse causes. The College has had guidelines in place for the conduct of denturists for the prevention of sexual abuse for decades. These guidelines have evolved over time and will continue to evolve as the profession evolves and as more is learned on effective sexual abuse prevention programs.

What is Sexual Abuse?

Some people may believe that a definition of sexual abuse is subjective. This is not the case in Ontario when it comes to the sexual abuse of patients by regulated healthcare providers. The RHPA sets out a clear definition of the sexual abuse of patients.

According to Section 1(3) of the Health Professions Procedural Code, being Schedule 2 to the RHPA (the "**Code**"), the definition of "sexual abuse" of a patient by a member means:

- (a) sexual intercourse or other forms of physical sexual relations between the member and the patient,
- (b) touching, of a sexual nature, of the patient by the member, or
- (c) behaviour or remarks of a sexual nature by the member towards the patient.

For clarity, and according to the Code, "sexual nature" <u>does not</u> include touching, behaviour, or remarks of a clinical nature appropriate to the service provided. Nonetheless touching areas both within and beyond the orofacial complex, should be explained beforehand to the patient. The patient should understand why any touching is necessary within the context of the treatment and/or investigation in order to avoid any misinterpretation or misunderstanding.

Behaviour or remarks of a sexual nature can include sexual comments or jokes, even if a sexual relationship is not intended by the member. As with physical sexual relations and sexual touching, sexual comments or remarks made in a social setting would still be considered to be sexual abuse of a patient. Even intimate relations where you have or think you have the patient's consent are strictly prohibited by the RHPA.

The Code has defined a "patient" for the purposes of sexual abuse offences. "patient", without restricting the ordinary meaning of the term, includes,

- (a) an individual who was a member's patient within one year or such longer period of time as may be prescribed from the date on which the individual ceased to be the member's patient, and
- (b) an individual who is determined to be a patient in accordance with the criteria in any regulations made under clause 43 (1) (o) of the *Regulated Health Professions Act*, 1991;

Currently there are no regulations as described in (b) above. However, the definition in (a) applies to denturists and their patients. **This means that a denturist cannot start a sexual**

relationship (including dating) with a patient unless the patient has not been a patient of the denturist for at least one year.

A patient ceases to be a patient of the denturist when <u>all</u> of the following conditions have been met:

- 1. The denturist has ceased providing services to that patient for at least one year;
- 2. A notation that the denturist is no longer providing services has been entered into the patient record; and
- 3. The patient record has been transferred to another provider and one year has passed since the record was transferred.

The definition of sexual abuse includes conduct, behaviour or remarks made to an individual with whom a denturist has an intimate relationship. As such, denturists who provide denturism services to anyone with whom they have an intimate relationship are at the risk of being found to have sexually abused a patient. This is true even if the intimate relationship began before the denturist-patient relationship began.

Effective October 21, 2021, there is an exception made for the spouse of a denturist. Accordingly, denturists are now permitted to treat their "spouse" as defined in section 1(6) Health Professions Procedural Code.¹ This exception is not retroactive and any denturist who treated their spouse prior to October 21, 2021, could still be found to have sexually abused a patient.

Regardless of this spousal exception, it is still considered sexual abuse if the conduct, behaviour or remarks made towards a member's spouse occurs during the practice of the profession.

Healthcare professionals are responsible for communicating effectively by paying attention to the ways in which information is conveyed and the words selected when speaking with clients. They must also be compassionate listeners and be sensitive to the concerns and needs of clients. Awareness of cultural and physical barriers that may interfere with clear communication, and respect for these differences will help denturists practise in a responsive and responsible manner.

More subtle types of sexually inappropriate behaviour are often unrecognized and occasionally maybe committed inadvertently. While the College recognizes that these Guidelines do not cover all eventualities, most sexually inappropriate and unacceptable conduct could be prevented by the following best practices.

¹ 1(6) "spouse", in relation to a member, means,

⁽a) a person who is the member's spouse as defined in section 1 of the Family Law Act, or

⁽b) a person who has lived with the member in a conjugal relationship outside of marriage continuously for a period of not less than three years.

Many clients feel particularly vulnerable in an oral healthcare setting. Therefore, denturists should use their professional judgment to determine the client's comfort level and whether the presence of an additional person is advisable.

Best Practices

DO's and DON'Ts:

Do:

- Understand your legal and ethical obligations under the RHPA and these Guidelines.
- Recognize what the RHPA considers as "sexual abuse of a patient" and "abuse of a sexual nature" and do not engage in such unprofessional conduct
- Practice in a professional manner, being guided at all times by respecting human dignity.
- Respect and understand cultural differences and be aware of sensitivities of individual patients.
- Be aware of a patient's uneasiness with your physical proximity to them and react appropriately.
- Ensure that conversations between you and your office staff are respectful of the clinic's patients.
- Ensure that a third party is present when treatment is rendered if it is appropriate for the patient or the situation or if it will make the patient more comfortable.
- Demonstrate professional supportive behaviour.
- Be sensitive to the discomfort and change the words or behaviour if a patient is uncomfortable with the words or behaviour of a denturist.
- Provide ample opportunity for the patient to ask questions.
- Document on the patient record any and all comments or concerns made by a patient relative to alleged sexual abuse and any other misunderstanding or unusual incident that may have occurred during the course of or after an appointment. These chart entries should be made as soon as possible after the incident occurred and should contain statements from you and the office staff who were present.
- Report information or incidents of suspected sexual abuse of a patient by a member of the same or of a different college to the governing college of the practitioner.

Don't:

- Use gestures, touch or expressions or engage in any other behaviour that may be interpreted as seductive or sexually demeaning to a patient or sexually abusive.
- Exhibit behaviour, gestures, expressions or comments that are seductive or sexually demeaning to a client.
- Tell jokes or stories of a sexual nature to a patient.



- Make sexual comments about a patient's body or clothing.
- Criticize or comment on a patient's sexual orientation or gender identity.
- Initiate conversations with patients regarding sexual problems, preferences or fantasies and do refuse to participate if such discussions are initiated by a patient.
- Display any material, such as jokes, posters or pictures, that have a sexual connotation or that may be offensive to your patients.

Mandatory Reporting

It is mandatory to file a report if a denturist has reasonable grounds, based on information obtained in the course of practising the profession, to believe that another denturist or a member of a different health profession has sexually abused a patient.

Failure to report sexual abuse of patients when there are reasonable grounds to believe that abuse has occurred is an offence under the RHPA, may be considered to be professional misconduct, and can lead to severe penalties.

Whether the information that a regulated health professional has sexually abused a patient constitutes "reasonable grounds" is sometimes a judgement call. If the information is merely a rumour or suggestion that something may have happened, or that a particular professional is known to have sexual relations with their patients this is likely not "reasonable grounds". On the other hand, if information about specific incidents comes to a denturist from a usually reliable source such as a colleague this likely would constitute reasonable grounds. Further if a patient reports to a denturist or a member of staff at a denturist's clinic that they have been sexually abused by a healthcare practitioner, this would be reasonable and probable grounds.

A denturist is required to report information obtained in the course of practising their profession. A denturist is not required to report information if the information is learned outside of the denturist's practice. For example, if a denturist learns about the sexual abuse of a patient in a social setting (e.g., at a party) the denturist is not obligated to file a mandatory report; although they can if they choose to.

A denturist must submit a report if they know the name of the health professional who was involved in the alleged abuse. A denturist must not include the patient's name without the patient's written consent (a consent form template is available on the College's website). A written report must be filed within 30 days to the Registrar of the health professional's regulatory body. However, a denturist must submit the report immediately if they have reason to believe the abuse will continue or abuse of other clients will occur.

The RHPA provides protection to a person who files a report in good faith, from actions or other proceedings being taken against that person.

Revision Control

Date	Revision	Effective
June 14, 2019	Approved by Council	June 14, 2019
7	Changes arising from the spousal exception incorporated	January 19, 2022