College of Alberta Dental Assistants

Governance Policy 005

Risk, Assurance and Oversight

GOV-POL-005 Risk, assurance and oversight

Legislative Authority: This policy is established under the *Health Professions Act,* the *Dental Assistants Profession Regulation,* the *Health Professions Restricted Activity Regulation,* the *Fair Registration Practices Act,* and the *Labour Mobility Act.* Authority is further supported by the Bylaws of the College of Alberta Dental Assistants.

1.0 Purpose

This policy establishes Council's governance-level responsibility for risk stewardship, assurance, and oversight of the College's regulatory activities.

This policy clarifies the distinction between governance oversight and operational risk management.

This policy ensures that risk identification, assurance mechanisms, and performance monitoring support the College's statutory mandate and protection of the public interest.

2.0 Scope

This policy applies to Council and the Registrar and Chief Executive Officer (or authorized delegate) in the context of governance oversight of regulatory risk, compliance, and performance.

This policy applies to governance-level risk monitoring, assurance activities, audit functions, performance reporting, and compliance oversight.

This policy does not assign operational risk management functions to Council.

Operational procedures supporting this policy are approved by the Registrar and Chief Executive Officer (or authorized delegate) and include risk identification processes, internal controls, assurance reviews, audit coordination, and reporting procedures.

3.0 Principles

The College applies the following principles to ensure risk and assurance practices are lawful, proportionate, and consistent with effective regulatory governance.

1. **Public interest** is protected through proactive identification, monitoring, and mitigation of regulatory risk.
2. **Legislative consistency** ensures oversight aligns with the *Health Professions Act*, the Dental Assistants Profession Regulation, the Fair Registration Practices Act, and other applicable legislation.
3. **Risk stewardship** distinguishes governance oversight from operational risk management while preserving Council accountability.
4. **Proportionality** ensures oversight mechanisms are appropriate to the nature, scale, and impact of risk.
5. **Transparency and defensibility** ensure oversight activities are documented, reviewable, and aligned with statutory authority.
6. **Strategic alignment** ensures risk oversight supports the Strategic Plan (2025 to 2030) Leading with Vision, Ensuring Public Trust.

4.0 Governance risk stewardship and assurance

Council exercises oversight of regulatory risk and assurance consistent with legislation, governance policy, and its statutory mandate. The intent of this section is to clarify Council's oversight role while preserving operational management authority.

4.1 Governance risk oversight

1. Council oversees regulatory, strategic, financial, reputational, and compliance risks that may affect the College's statutory mandate.
2. Council's oversight of regulatory risk includes assurance related to core regulatory functions of the College, including registration, education and program approval, competence and continuing competence, and complaints and discipline.
3. Council establishes risk oversight expectations and may define acceptable risk thresholds appropriate to its statutory mandate and regulatory environment, including thresholds for governance attention or escalation.
4. Council reviews risk information provided by the Registrar and Chief Executive Officer (or authorized delegate).
5. Council monitors risk trends and systemic issues, including those arising across the regulatory continuum, that may affect regulatory performance or public confidence.
6. Council does not manage operational risks directly. Operational risk identification, mitigation, and control implementation remain the responsibility of the Registrar and Chief Executive Officer (or authorized delegate).
7. Council oversees governance risks associated with external relationships, appointments to third-party bodies, affiliated entities, and inter-organizational collaborations.
8. Council establishes governance expectations for risk reporting, assurance activities, and performance monitoring necessary to support effective regulatory oversight.

4.2 Assurance mechanisms

1. Assurance mechanisms may include internal audits, external audits, compliance reviews, performance evaluations, and independent assessments.
2. Assurance activities support Council's oversight of regulatory effectiveness, fairness, and compliance.
3. Assurance findings are reported to Council and inform governance decisions, policy development, and strategic planning.
4. Where independent assurance or audit is undertaken, reviewer independence is preserved, scope is clearly defined, and findings are reported directly to Council or to a Council committee responsible for oversight without operational management filtering.

4.3 Performance and compliance monitoring

1. Council receives and reviews regular reporting on regulatory performance, statutory compliance, and program outcomes.
2. Performance indicators and defined metrics support oversight of entry-to-practice, program approval, registration, complaints, discipline, continuing competence, and other regulatory functions across the regulatory continuum of the profession

3. Council monitors compliance with all applicable legislation including the *Health Professions Act*, the *Dental Assistants Profession Regulation*, the *Fair Registration Practices Act*, the *Health Professions Restricted Activity Regulation*, and the *Labour Mobility Act*.

4.4 Continuous improvement

1. Oversight findings inform governance review, policy refinement, and risk mitigation strategies.
2. Council may request independent reviews or external expertise where appropriate
3. Continuous improvement strengthens regulatory effectiveness and public confidence.

5.0 Expected outcomes

1. **Public interest** is protected through effective governance oversight of regulatory risk and compliance.
2. **Clear distinction** between governance oversight and operational risk management supports accountability and role clarity.
3. **Defensible assurance mechanisms** strengthen transparency and legislative compliance.
4. **Risk trends and systemic issues** are identified and addressed proactively.
5. **Council oversight** supports confidence that the College's regulatory functions operate effectively across the regulatory continuum, including registration, education approval, competence, and professional conduct processes.
6. **Structured performance monitoring** strengthens Council confidence in regulatory outcomes.
7. **Strategic alignment** ensures risk oversight supports the Strategic Plan (2025 to 2030) Leading with Vision, Ensuring Public Trust.

This policy is reviewed annually, or sooner if required by legislative, regulatory, or strategic change.

6.0 Related legislation and references

Legislation and regulation

Dental Assistants Profession Regulation.

Fair Registration Practices Act.

Health Professions Act.

Health Professions Restricted Activity Regulation.

Labour Mobility Act.

College authority and governance

Bylaws of the College of Alberta Dental Assistants (2023).

Code of Ethics (2020) of the College of Alberta Dental Assistants.

Council and Registrar and Chief Executive Officer (or authorized delegate) Relationship Policy (2024).

Strategic Plan (2025-30) Leading with Vision, Ensuring Public Trust.

Related college policies

GOV-POL-001 Governance and Accountability Framework

GOV-POL-002 Council Roles, Conduct and Ethics

GOV-POL-003 Delegation and Registrar Authority

GOV-POL-004 Committees and Decision Pathways

GOV-POL-006 Governance Review and Transparency

7.0 Definitions

1. **College of Alberta Dental Assistants**: the regulatory body established under the *Health Professions Act* responsible for governing the practice of dental assisting in Alberta to protect and serve the public interest. For the purposes of policies, the term "College" refers to the College of Alberta Dental Assistants.
2. **Assurance:** Structured processes used to evaluate compliance, performance, risk exposure, and effectiveness of regulatory functions.
3. **Risk Stewardship:** Governance-level oversight of risk without direct operational management.

8.0 Document information

Policy type	Governance			
Policy owner	Registrar and Chief Executive Officer (or authorized delegate)			
Approved by	Council of the College of Alberta Dental Assistants			
Approval date	June 20, 2026			
Effective date	June 20, 2026			
Review schedule	Annually or sooner if required by legislative, regulatory, or strategic change.			
Approval history	Version	Date	Council Motion #	Summary of Revision
Related documents	GOV-PRC-011 Risk Oversight and Assurance Procedure GOV-PRC-012 Internal and External Assurance Review Procedure Code of Ethics (2020) Bylaws of the College of Alberta Dental Assistants (2023) Strategic Plan (2025 to 2030) Leading with Vision, Ensuring Public Trust			