

College of Alberta Dental Assistants

Standards of Practice

Professional Boundaries, Sexual Abuse,
Sexual Misconduct, and Female Genital Mutilation

Draft status

This document is a proposed companion to the College of Alberta Dental Assistants (“College”) Draft Core Standards of Practice. It is not in force and does not replace the current Standards of Practice unless approved by Council through the applicable process.

Purpose

This Standard establishes detailed enforceable expectations for professional boundaries, prevention of sexual abuse and sexual misconduct, protection from female genital mutilation, reporting, and response. It protects patients and the public by requiring dental assistants to recognize and manage the potential for power imbalance or patient vulnerability arising from professional relationships and to act promptly when a boundary or related concern arises.

The Code of Ethics and Core Standards of Practice provide the ethical and professional foundation. This Standard provides the detailed requirements for these high-risk matters affecting patient safety and the public interest. It does not replace the current legal wording of applicable legislation, which prevails if there is a conflict.

Scope and interpretation

This Standard applies to every professional interaction, including in-person, virtual, written, electronic, social media, educational, workplace, and community settings where a dental assistant's professional role, knowledge, title, authorization, access to information, or position of trust is relevant.

- A dental assistant is responsible for establishing and maintaining appropriate professional boundaries. A patient is not responsible for managing any power imbalance that arises in a professional relationship.
- A workplace policy, professional direction, personal relationship, social custom, or patient request does not excuse conduct that is prohibited by applicable legislation, regulations, or a binding College requirement including this Standard.
- A dental assistant must recognize that a boundary concern may arise in multiple ways including from a single interaction, a repeated pattern, a conflict of interest, a misuse of personal information, an online or electronic communication, or conduct outside the direct delivery of care.
- A dental assistant must seek authoritative clarification, limit, pause, or stop an interaction when unsure whether it is professionally appropriate, safe, or legal.

How to Read this Standard

Each Standard has four parts:

Standard statement: This states the professional outcome and the core expectation that applies to dental assisting practice.

Public expectation: This explains, in plain language, what patients and the public should be able to expect. It supports understanding but does not create an additional authorization or obligation beyond the Requirements.

Requirements: These are the enforceable professional obligations. The word “must” identifies a mandatory requirement.

Application: This provides context, explains how the Requirements operate with legislation and other College instruments, and clarifies professional boundaries. Application material explains how the Requirements are to be interpreted and applied. It does not independently create an additional professional obligation or authorization and does not reduce or replace a Requirement.

In this Standard:

- legislation and regulation prevail if there is a conflict;
- a more specific binding legal or College requirement prevails over a general requirement;
- the words “including” and “such as” introduce examples and do not limit the requirement; and
- guidance and practice resources support interpretation but do not independently create authorization or enforceable duties.

Role in the regulatory lifecycle

This Standard is one linked component of the College’s regulatory lifecycle. The Core Standards of Practice establish broad professional expectations. This Standard gives detailed effect to professional boundaries, sexual abuse, sexual misconduct, female genital mutilation, prevention, reporting, and response. The Code of Ethics provides related ethical expectations. Registration, Program Approval, continuing competence, and quality assurance support readiness, ongoing competence, patient safety, and the public interest. No individual document replaces the legal role of another.

The College’s Patient Relations Program supports prevention, education, public information, complaint navigation, and response in relation to sexual abuse and sexual misconduct. It supports this Standard but does not replace the enforceable duties established in it.

Standard 1

Professional Boundaries and Patient Relationships

Dental assistants establish and maintain professional boundaries that protect patients from exploitation, coercion, conflicts of interest, inappropriate personal involvement, and misuse of professional power.

Public expectation

Patients can expect dental assistants to keep professional relationships safe, respectful, focused on the patient's needs, and free from personal or other interests that could influence care or trust.

Requirements

A dental assistant must:

1. recognize whether a power imbalance exists in the professional relationship and, where it does, manage it appropriately without placing responsibility for that imbalance on the patient;
2. maintain a clear distinction between professional and personal relationships and act only in the patient's best interests within the dental assistant's role;
3. not exploit a patient or a patient's family member, support person, or other person connected to the patient for personal, sexual, emotional, financial, social, business, political, or other benefit;
4. avoid, disclose through the required process, and appropriately manage real, potential, or perceived conflicts of interest;
5. use professional communications, electronic communications, social media, personal information, and access to patient information only for legitimate professional purposes;
6. not initiate, encourage, or continue a personal, financial, social, business, or other relationship with a patient when it creates a risk of exploitation, coercion, undue influence, impaired judgment, or loss of public trust;
7. explain the purpose of care, communication, and any necessary touching within role, support consent and privacy, and respond respectfully to a patient's question, discomfort, refusal, or request for support;
8. not accept, solicit, offer, or provide gifts, money, favours, social invitations, discounts, services, or other direct or indirect benefits when doing so could influence professional judgment, create obligation, or reasonably be perceived as inappropriate;
9. maintain appropriate boundaries in self-disclosure, humor, language, physical contact, photography, messaging, and online statements or interaction; and
10. seek advice, document relevant facts, and take steps to protect the patient when a boundary concern, dual relationship, conflict of interest, or risk of harm is identified.

Application

Professional purpose: A professional relationship exists to provide or support safe oral health services, not to meet the dental assistant's personal, emotional, financial, social, or other needs.¹

¹ See College of Alberta Dental Assistants, Dental Assisting Therapeutic Relationships and Professional Boundaries Guide.

Standard 2

Sexual Abuse, Sexual Misconduct, and Patient Relationship Boundaries

Dental assistants maintain appropriate professional relationships and boundaries with patients and do not engage in sexual abuse, sexual misconduct, or conduct that exploits a current or former patient relationship.

Public expectation

Patients can expect that dental assistants will never use a professional relationship, position of trust, access to information, or power imbalance for sexual purposes.

Requirements

A dental assistant must:

1. not engage in sexual abuse or sexual misconduct as defined in the *Health Professions Act*;²
2. not engage in a sexual relationship or adult interdependent partner relationship with a current patient;
3. not enter into a sexual relationship or adult interdependent partner relationship with an individual who has been a patient unless at least 365 days have passed since the last professional interaction (as defined on page 13) and there is minimal risk of a continuing power imbalance;
4. not use, disclose, retain, or access patient information, a patient communication channel, a professional encounter, or a workplace opportunity to initiate or pursue a sexual relationship;
5. not engage in objectionable or unwelcome conduct, behavior, or remarks of a sexual nature toward a patient, including sexualized comments, gestures, communications, jokes, images, or physical contact;
6. recognize that apparent patient consent, patient initiation, mutual attraction, or a patient's request does not remove the dental assistant's professional responsibility to maintain boundaries;
7. not provide or continue to provide professional services to a spouse (as defined on page 14), adult interdependent partner, or person with whom the dental assistant has a pre-existing ongoing sexual relationship if personal bias, a power imbalance, a conflict of interest, or another boundary concern could compromise professional judgment or the standard of care, and must arrange appropriate transfer or support within role;
8. not use a change in employment, practice setting, registration status, or the conclusion of a particular procedure as a means of avoiding professional boundary obligations; and
9. seek immediate guidance when they recognize a personal attraction, sexual boundary concern, conflict, or other circumstance that could compromise safe and ethical care and immediately withdraw from the professional role where the concern cannot be safely and appropriately managed.

² *Health Professions Act*, s. 1(1)(nn.1) to (nn.3).

Application

Patient definition for sexual abuse and sexual misconduct: For the purposes of the sexual abuse and sexual misconduct provisions of the *Health Professions Act*, a patient is an individual who is involved in or has had a professional interaction with a dental assistant.³

Excluded relationships: For the sexual abuse and sexual misconduct provisions of this Standard, a dental assistant's spouse, adult interdependent partner, or an individual with whom the dental assistant had a pre-existing ongoing sexual relationship before the first professional interaction is not considered a patient.⁴ This exclusion does not remove other professional boundary, conflict-of-interest, competence, or standard-of-care obligations when professional services are provided.

Patient period: An individual who meets the patient definition remains a patient for 365 days after the last professional interaction. Transfer of care, a move to another dental office, a change in employment or practice setting, or the conclusion of a particular procedure does not shorten that period.

Former patients and power imbalance: After the 365-day period, a sexual relationship remains prohibited unless there is minimal risk of a continuing power imbalance. The factors required by section 133.1(2) of the *Health Professions Act* must be considered. In assessing the nature, extent, and continuing effect of the professional relationship, relevant considerations include the number of professional interactions; the duration of the professional relationship; the nature of the professional interactions; the time since the last professional interaction; whether the patient shared personal information beyond what was necessary for the professional services; whether the patient was emotionally dependent on the dental assistant; and whether the patient was particularly vulnerable.⁵

Power imbalance, vulnerability, and legal characterization: The existence of a pre-existing personal or sexual relationship does not, by itself, determine whether a power imbalance or patient vulnerability exists. Where those issues are relevant, they must be assessed in the circumstances. A breach of a patient-relationship or boundary provision in this Standard does not automatically establish that the conduct constitutes sexual abuse or sexual misconduct under the *Health Professions Act*. The conduct must be assessed against the applicable statutory definition and the circumstances, including any relevant evidence of power imbalance or patient vulnerability.⁶

Application to former members: The requirements in this Standard respecting sexual relationships with patients and former patients continue to apply to a former member as required by the *Health Professions Act*.⁷

Statutory basis: The *Health Professions Act* requires the College's Standards to address who is a patient, when a sexual relationship may occur with a patient or former patient, and when a spouse or adult interdependent partner may also be a patient.

³ *Health Professions Act*, s. 133.1(1)(a).

⁴ *Health Professions Act*, s. 133.1(1)(a) and (c), and s. 133.1(2).

⁵ *Health Professions Act*, s. 133.1(1)(b) and s. 133.1(2)(a) to (e).

⁶ *Ahmed v Alberta College of Pharmacy*, 2026 ABCA 15.

⁷ *Health Professions Act*, s. 133.1(1)(b).

Sexual nature and professional service: Appropriate clinical touching, communication, or care is not sexual in nature solely because it may be personal or sensitive. A dental assistant must nevertheless ensure that the activity is clinically justified, within role and authorization, explained, consented to within role, respectful, and documented as required.

Personal bias and conflict: Personal bias, a power imbalance, or a conflict of interest may affect care where it results in a different standard of care from what the dental assistant would ordinarily provide in similar circumstances to a person with whom there is no personal relationship.

Standard 3

Female Genital Mutilation and Protection from Harm

Dental assistants do not procure or perform female genital mutilation and act promptly to protect patients and the public when they identify concerns related to female genital mutilation, sexual abuse, sexual misconduct, exploitation, or other serious harm.

Public expectation

Patients and the public can expect dental assistants to refuse prohibited conduct, protect dignity and safety, and use required reporting and escalation processes when serious concerns arise.

Requirements

A dental assistant must:

1. not procure or perform female genital mutilation, and not knowingly assist another person to procure or perform it;⁸
2. not participate in conduct that is prohibited by the *Health Professions Act* concerning female genital mutilation, sexual abuse, or sexual misconduct;
3. recognize information, behavior, disclosures, requests, circumstances, or safety concerns that may require immediate protection, consultation, documentation, reporting, or escalation;
4. take prompt steps appropriate to the dental assistant's role to protect a patient from immediate harm, including stopping participation in unsafe or prohibited activity, obtaining assistance, and using emergency or workplace processes where required;
5. make reports required by applicable legislation or a binding College requirement accurately, promptly, and through the appropriate channel when the reporting threshold is met;
6. document relevant facts, observations, communications, actions, and reports accurately, objectively, and within the required time;
7. protect privacy and confidentiality while sharing information required for patient safety, reporting, investigation, or another legal purpose; and
8. not discourage, obstruct, retaliate against, or otherwise interfere with a patient, colleague, student, or other person who raises a concern, seeks assistance, or makes a report.

Application

Reporting: The Core Standards of Practice establish the general professional duty to make required reports. The College's reporting and self-reporting guidance provides current operational information about reporting routes, thresholds, timing, documentation, and support. A guide does not reduce the reporting duty imposed by law or this Standard.

⁸ *Health Professions Act*, s. 1(1)(m.1), s. 1.94 and s. 133.2.

People-centred response: A dental assistant must respond respectfully, avoid blame or judgment, remain within role, and obtain appropriate support. A dental assistant must not conduct an investigation beyond their role or take action that could compromise safety, privacy, evidence, or a legal process.

Standard 4

Prevention, Response, Reporting, and Cooperation

Dental assistants prevent boundary violations, respond to concerns promptly and appropriately, complete required education, make required reports, and cooperate with regulatory and workplace processes.

Public expectation

Patients and the public can expect dental assistants to recognize boundary risks early, speak up, respond safely, and participate honestly in processes intended to protect people from harm.

Requirements

A dental assistant must:

1. successfully complete the annual Patient Relations Module or Patient Relations Refresher, as approved by Council from time to time, and apply that learning in practice;⁹
2. maintain the knowledge and judgment needed to recognize, prevent, respond to, and report professional boundary concerns and serious patient safety concerns;
3. make required reports through the appropriate workplace, the College, regulatory, law enforcement, or other required channel when the applicable reporting threshold is met, even if another person may also have a reporting duty or the concern is already known to an employer, colleague, patient, or other organization;
4. document and preserve information relevant to a concern, report, patient safety response, investigation, or review, in accordance with legal, privacy, recordkeeping, and workplace requirements;
5. cooperate honestly and within the required time with College inquiries, investigations, audits, reviews, and other legally authorized regulatory processes, including providing information or records as required;
6. not retaliate against, threaten, intimidate, penalize, silence, or otherwise disadvantage a person for raising a concern, seeking help, making a report, or participating in a legal process; and
7. reflect on boundary concerns, complaints, incidents, feedback, and learning needs, and take timely action to improve professional practice.

Application

Mandatory education: Council may approve new, revised, or additional patient relations education as part of the College's Patient Relations Program and in accordance with applicable legislation from time to time. The College must identify the applicable education, who must complete it, and the effective or completion requirements before it becomes mandatory. Sections 50(3) and 50.1 of the *Health Professions Act* and CCP-POL-002 Continuing Competence Requirements (including the applicable exemption process) apply¹⁰ where the College requires specified education or training through its Continuing Competence Program.

⁹ *Health Professions Act*, ss. 135.6 and 135.7(1) and (2)(a); College of Alberta Dental Assistants Bylaws, s. 16(4)(c).

¹⁰ *Health Professions Act*, s. 50(3) and s. 50.1; College of Alberta Dental Assistants, CCP-POL-002 Continuing Competence Requirements.

Quality and learning: The College may use de-identified trends, complaints, practice information, quality data, and other relevant system information to identify learning needs, clarify expectations, and strengthen patient safety and the public interest.

Support and advice: Seeking guidance does not replace the dental assistant's duty to act when immediate patient safety or a legal reporting obligation requires action. A dental assistant should seek support promptly where it can be done without delaying a required response.

Defined terms

Adult interdependent partner

A person who is an adult interdependent partner within the meaning of the *Adult Interdependent Relationships Act*.¹¹

Boundary

The professional limit that protects a patient from exploitation, coercion, conflicts of interest, inappropriate personal involvement, or misuse of a dental assistant's role, authority, access to information, or position of trust.

College

The College of Alberta Dental Assistants.

Conflict of interest

A real, potential, or perceived conflict between a dental assistant's professional duty to a patient and a personal, financial, social, family, business, or other interest that could improperly influence professional judgment or the patient's trust.

Core Standards of Practice

The College's seven broad Standards of Practice that apply to all regulated dental assistants.

Female genital mutilation

Has the meaning assigned in section 1(1)(m.1) of the *Health Professions Act*.

Health Quality Alberta

A provincial quality, safety, learning, and system-improvement organization. Its inclusion in this Standard provides quality-improvement context and does not independently create an enforceable professional obligation.

Patient

An individual who is involved in or has had a professional interaction with a dental assistant. For the purposes of sexual abuse and sexual misconduct, patient status is subject to the 365-day patient period and excluded relationship provisions in Standard 2.

Power imbalance

A difference in power that may arise between a dental assistant and a patient because of professional knowledge, authority, access to health information, the patient's dependence on care, vulnerability, trust, or other circumstances. A patient is not responsible for managing a power imbalance that exists.

Professional interaction

A direct professional interaction between a dental assistant and an individual where at least one of the following has occurred: the dental assistant provided or assisted in providing professional services to the individual; the individual consented to professional services involving the dental assistant; the dental assistant contributed to

¹¹ *Adult Interdependent Relationships Act*, SA 2002, c A-4.5, s. 3.

the individual's health record; or professional services involving the dental assistant were charged to the individual or a third party on the individual's behalf.

Sexual abuse

Has the meaning assigned in section 1(1)(nn.1) of the *Health Professions Act*.

Sexual misconduct

Has the meaning assigned in section 1(1)(nn.2) of the *Health Professions Act*.

Sexual nature

Has the meaning assigned in section 1(1)(nn.3) of the *Health Professions Act*.

Spouse

A person to whom the dental assistant is legally married.