



Denturist Society of Saskatchewan

Approved by DSS Council – May 2, 2026
Effective: July 3, 2026

Random Practice Audit Process for Registrants

PURPOSE AND OBJECTIVES

The Random Audit Process supports the Denturist Society of Saskatchewan's mandate to protect the public and uphold professional standards. The objectives are to:

- Ensure registrants comply with DSS bylaws, standards of practice, and legislative requirements.
- Promote fairness and transparency through unbiased, randomized selection.
- Identify areas requiring improvement and provide corrective guidance.
- Protect public safety and maintain the integrity of the profession

AUDIT PROCESS FRAMEWORK

Selection of Registrants

- 15% of the total registrant population is chosen annually for audit using a random number generator or third-party software to ensure impartiality.
- Each registrant should prepare to be audited every 5 -7 years (depending on membership size and annual sampling).
- Newly licensed registrants may be exempt during their first year of practice.

Notification & Submission

- Selected registrants receive written notice via email
- Notices include the following:
 - o A submission timeline of 45 days from the date of the request
 - o A copy of the DSS document *Random Practice Audit Process for Registrants*
 - o Registrants must retain original records for verification during potential on-site inspections.
- Registrants submit required materials electronically (PDF preferred) or in hard copy.
- Photographs should be clear, dated, and labelled.

Scope of Audit

A. Approved Denturism Activities

Documentation will be required to support the completion of required 720 hours of approved denturism activities within a three-year period. Please provide the following:

1. A 30-day sample report (to be provided for each of the previous 3 licensing years)

To include:

- Print out of clinical schedule (patients' last names are to be blacked out for confidentiality). If using analog scheduling, provide a photocopy (remove last names).

2. A 30-day billing analysis (to be provided for one month of each the previous 3 licensing years)

- Print off from software system or verification from accounting system (no patient names to be included)

3. One of the following: (Provided for the last 3 years)

- Payroll records confirming hours worked as a denturist (provided by employer)
- Employment contracts outlining clinical duties and expected hours
- Equipment usage logs (e.g., CAD/CAM system reports)
- Signed verification from employer and/or employee for approximation of annual practice hours.

If a registrant is uncertain about the eligibility of documentation, they are encouraged to contact the registrar for clarification and guidance.

B. Continuing Education Requirements:

- Completion of required 20 CE credit hours annually - documentation is to include:
- Confirmation that all CE activities meet DSS eligibility and content requirements.
- Annual continuing education log.
- Certificates of completion for courses, workshops, or seminars.

C. Patient Record Keeping

- Verification of filing system (e.g. Software, written charts)
- Indication of proper file storage
- Alternative Denturist on File (in the event of demise, an alternative denturist who would have access to stored patient files)
- A copy of blank medical history form
- Copy of Fee Schedule (Office costs for services provided)
- A copy of 3 patient charts to include the following:
 - Financial Statement
 - Dates of Service
 - Services Provided
 - Progress Notes
 - No names, personal information (ie insurance numbers or information) should be included. This is to be blacked out to protect privacy of the patient.

D. Infection Prevention & Control

Demonstrating compliance with infection prevention and control – documentation/photos are to include:

- Sterilization logs (from the last 6 months)
- Biological monitoring equipment, including spore test results (from the last 6 months)
- Sterilization equipment- autoclave (including model and serial number)
- Disclosure of disinfectants used within office (brand, application)
- Instrument processing areas demonstrating clean/dirty workflow

E. Informed Consent

Demonstrating compliance with obtaining informed consent – documentation is to include:

- Sampling of 5 de-identified patient consent forms demonstrating that written consent is obtained for applicable treatments.
- Clinic policies describing how informed consent is obtained and documented
- An example of patient information forms explaining treatment options, risks, benefits, and fees

F. Advertising Standards

Demonstrating compliance with advertising standards – documentation/photographs required:

- Copies of external advertising (signage, billboards, yellow page ads, radio ads)
- Website link, copy of business card

ON-SITE INSPECTION (IF REQUIRED)

Some audits may involve an in-person inspection to verify compliance with clinical and operational standards, including the following activities:

- Review of infection control procedures, sterilization logs, and equipment maintenance.
- Verification of biological monitoring practices.
- Assessment of the clinical environment for safety and regulatory compliance.
- Staff interviews to confirm adherence to protocols.

EVALUATION & REPORTING

The Registrar reviews all materials against DSS bylaws, standards, and legislative requirements.

Audit findings are categorized as:

- **Compliant:** All requirements met.
- **Minor Non-Compliance:** Corrective action required within 60 days.
- **Major Non-Compliance:** Immediate corrective action required; may be referred to the Professional Conduct Committee.
- A written report is provided to the registrant outlining findings, corrective requirements, and timelines. Registrants with deficiencies must submit proof of corrective action.

KEY SAFEGUARDS

- **Fairness:** Random selection ensures impartiality.
- **Confidentiality:** Audit results remain confidential unless disciplinary action is required.
- **Consistency:** Standardized checklists and evaluation rubrics ensure uniform assessment.
- **Educational Focus:** Emphasis on improvement and guidance rather than punitive measures.